

Assessing and building capacity for clinical guideline development in Malawi, Nigeria and South Africa: A mixed methods study



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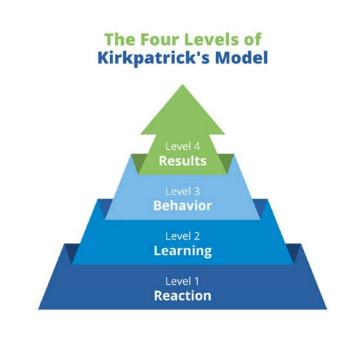
BACKGROUND

Competency in clinical guideline development is necessary to ensure credible decision-making. The GELA project provided tailored courses in Malawi, Nigeria, and South Africa to enhance capacity for guideline development. This study assessed change in knowledge, skills, behaviour, and perceptions of GELA Guideline Development and Steering Group members on the guideline process across the three countries.

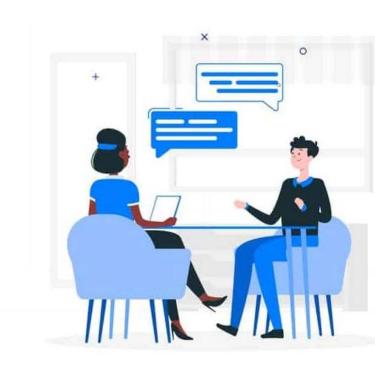
METHODS







Kirkpatrick's model



In-depth interviews



Framework analysis

KEY RESULTS - Change in confidence in Knowledge and skills



Understanding EtD



Developing recommendations



Understanding and appraising Qual. Evidence



Finding and appraising **Effectiveness Evidence**

Participants' self-reported confidence increased

The GELA project is a partnership coordinated by the South African Medical Research Council, including the Norwegian University of Science and Technology, Western Norway University of Applied Sciences, Stellenbosch University, Cochrane Nigeria at the University of Calabar Teaching Hospital, Nigeria, Kamuzu University of Health Sciences, Malawi, Cochrane and Stiftelsen MAGIC Evidence Ecosystem, Norway.

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KEY RESULTS – Behaviour change

Participants reported higher engagement with guideline development processes resulting in: Questioning healthcare practices, Integrating evidence from multiple stakeholders with local context, Acknowledging implementation considerations in healthcare recommendations.

QUALITATIVE FINDINGS

Themes	Illustrative quotes
Enhanced understanding/rigorous process	"So I think it has been very enlightening for me as a person, both the capacity development and trainings"
Intensive nature capacity development activities	"That particular training was quite intense, very interesting and I was happy I participated"
Collaborative, fair process and potential for future networking	"I think they did enhance our connection and collaboration, and I think you get to interact more with other practitioners"
Limited online engagement due to limited internet connectivity	"The issues I had with all those things was where I was the internet was my main limitation, so effective participation, so it was on and off".
Unmet expectations	"I think maybe getting involved with the actual guideline writing would have been great and not just the recommendations"

CONCLUSION

Tailored capacity-building opportunities can lead to positive changes in knowledge, skills, and behaviour related to CPG development. GELA offered a more rigorous CPG development process than prior experience; though valued, qualitative evidence is underutilized; dissemination, implementation, and sustainability are key next steps.





















