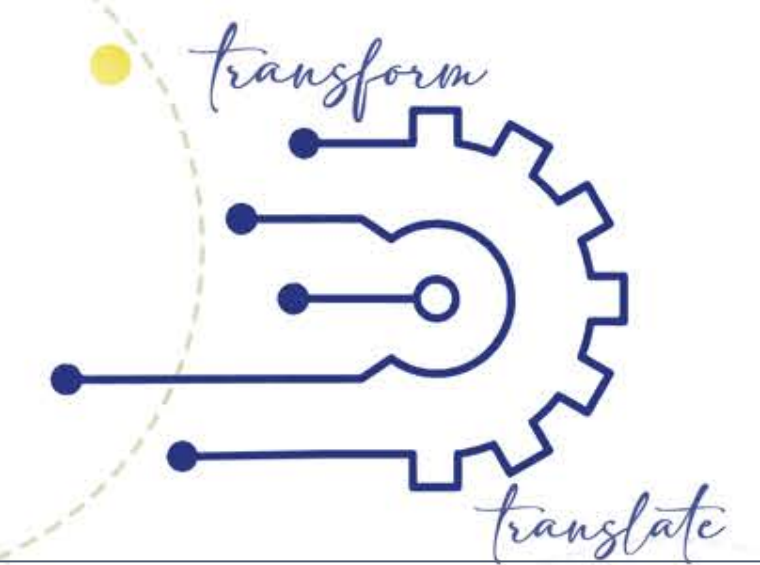


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**PHASA 2023**  
TRANSFORMING RESEARCH  
TRANSLATION-  
**REIMAGINING**  
PUBLIC HEALTH EVIDENCE,  
POLICIES, AND PRACTICE



## BACKGROUND

- Low- and middle-income countries remain disproportionately affected by high rates of under-five-year-old mortality.
- Newborn and child mortality is often due to preventable conditions, which could be effectively managed through evidence-based clinical practice guidelines (CPGs).
- CPGs offer a means to bridge the gap between research evidence and practice. They are essential policy tools supporting implementation of effective, safe and cost-effective healthcare.
- However, poor reporting standards and methodological limitations may undermine the impact of CPGs in improving quality of care and health outcomes.
- The Global Evidence, Local Adaptation (GELA) project aims to identify priority topics in the field of under-five mortality and collaboratively develop people-centred, evidence-based guidance.

## OBJECTIVES

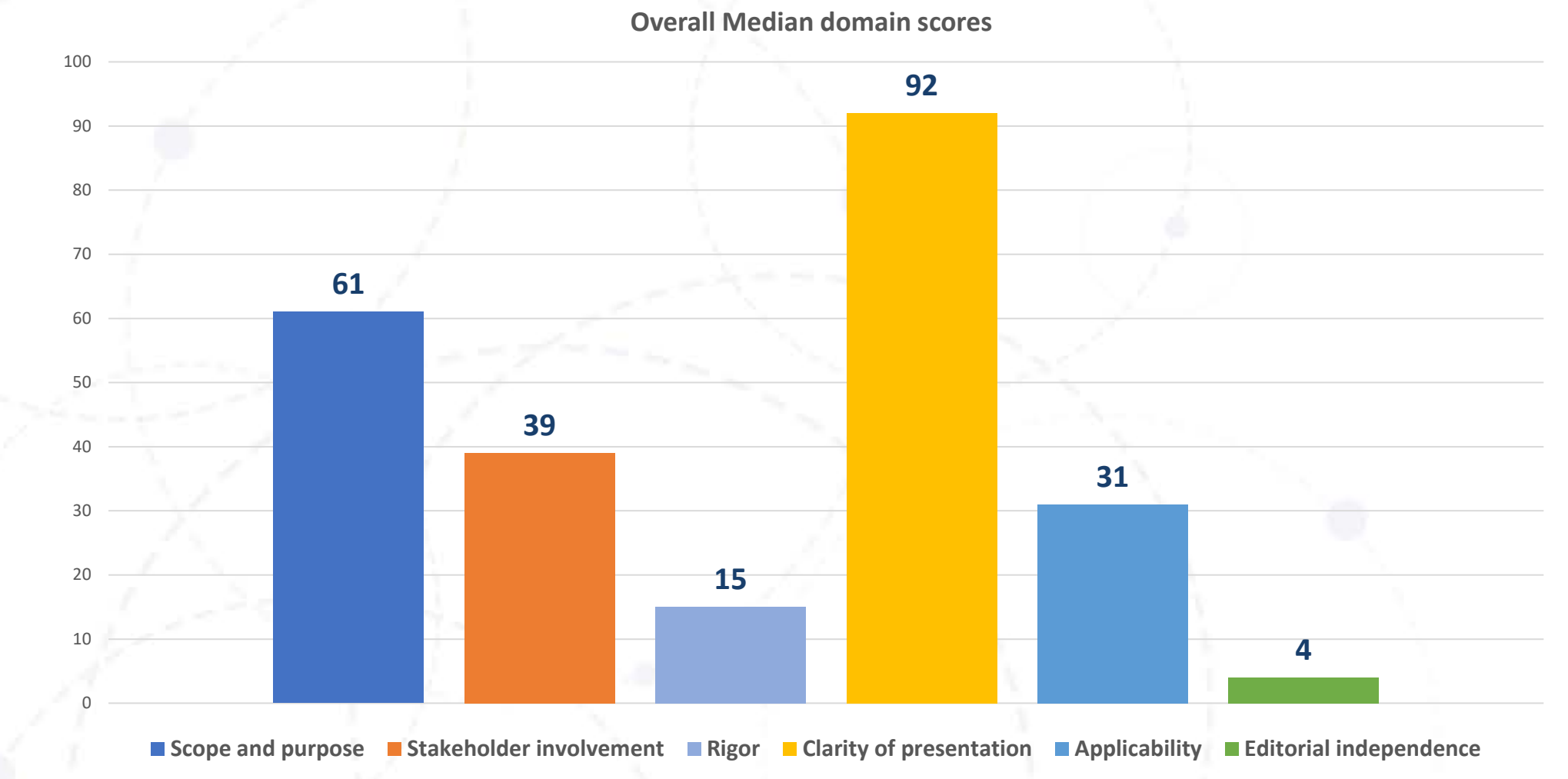
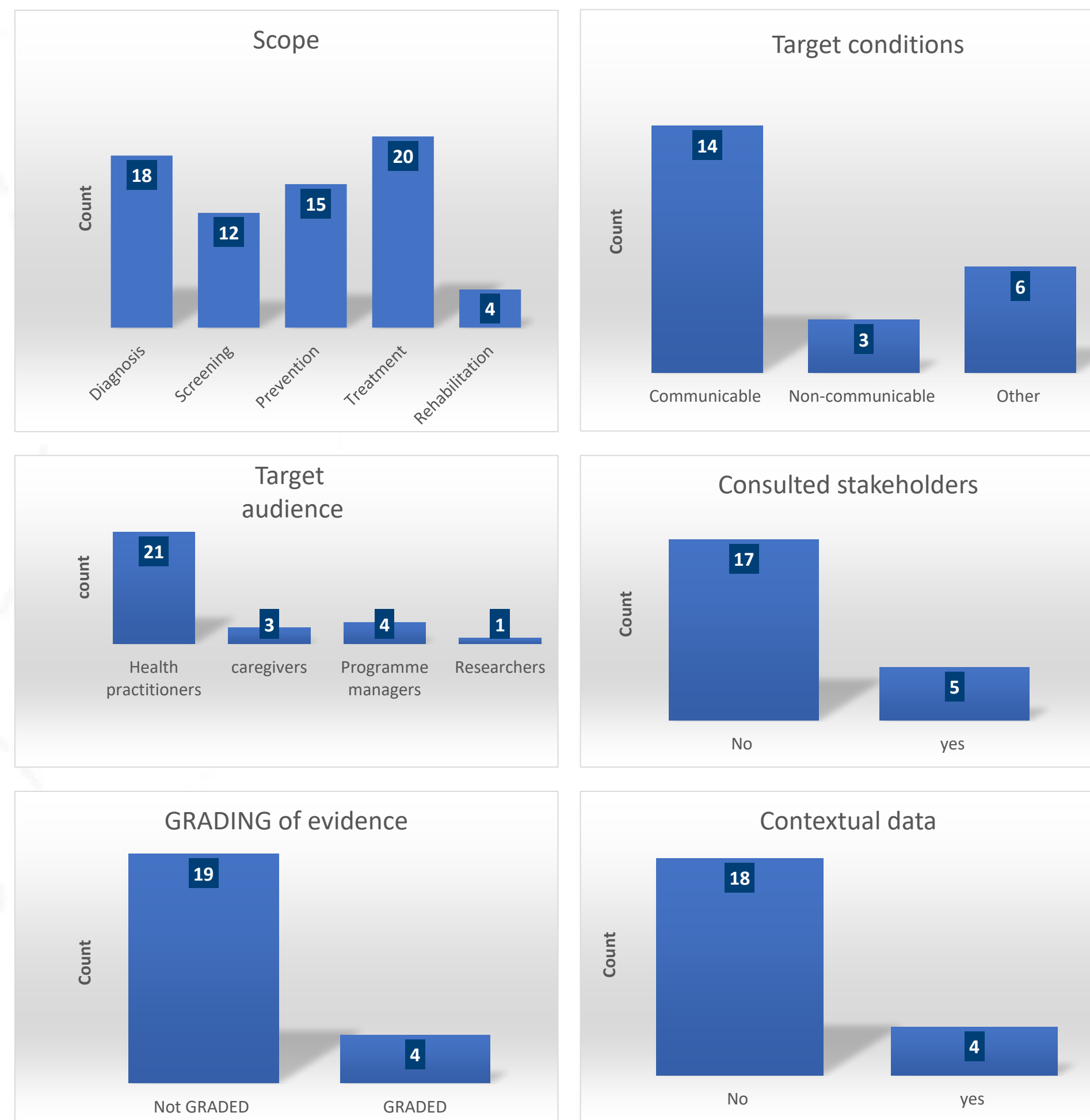
- To identify publicly available national- and provincial level CPGs for newborn and child health topics published between 2017 and 2022 in South Africa
- To describe the scope of the identified CPGs, including methods used and list the stakeholders in each country involved in the CPG development
- To appraise the quality and reporting standards of identified CPGs using the AGREE II tool for de novo CPGs and an adapted AGREE II for adapted CPGs.

## METHODOLOGY

- We systematically searched key websites (June – July 2022) and,
- Screened for publicly available national and provincial-level de novo or adopted CPGs, addressing newborn and child health.
- Two reviewers independently extracted information from eligible CPGs (e.g. scope, condition or topic, target population, target and users, responsible developers, stakeholder consultation process, assessing GRADE certainty of evidence) and,
- Appraised their quality using the Appraisal of Guidelines for Research & Evaluation Instrument (AGREE II).
- We analysed the findings descriptively using Microsoft Excel and
- STATA 17 and reported medians for the AGREE II scores, which were non-normally distributed

## RESULTS

- We included **23 CPGs** [21 National, 2 provincial], providing guidance on communicable diseases such as COVID-19, pneumonia, diphtheria, HIV, tuberculosis, malaria, pertussis, listeriosis, and non-communicable diseases such as asthma, cystic fibrosis, and enuresis.
- List of CPG panel members provided in 13/23 CPGs.
- CPG development is driven by the National Department of Health and professional associations.
- For AGREE II appraisal, the domains of applicability, rigour of development, and editorial independence had the lowest median scores (31%, 15% and 4% respectively), while the clarity of presentation domain scored the highest (92%).



## CONCLUSIONS

Our findings highlight that although South Africa has several recent guidelines for various topics within newborn and child health, several gaps remain – both in content covered and reporting standards. Further research is needed to identify priority topics and address gaps in guidance to ensure trustworthy and credible evidence-based CPGs that adhere to global standards for conduct and reporting.

## ADVOCACY MESSAGE

High methodological quality and evidence informed guidelines are necessary to improve newborn and child health.

## ACKNOWLEDGEMENTS

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EDCTP

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