Global Evidence, Local Adaptation: Enhancing evidence-informed guideline recommendations for newborn and young child health in three countries in sub-Saharan Africa

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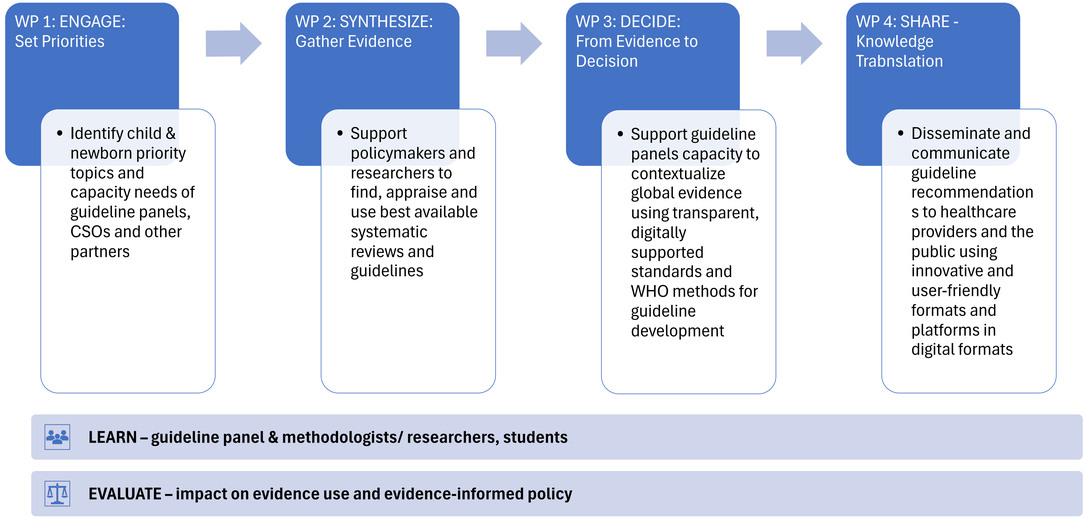
BACKGROUND

- Optimal care for under-five children requires robust, context-relevant evidence
- The Global Evidence, Local Adaptation (GELA) project aims to strengthen the capacity of decision-makers and researchers to use global research to develop locally relevant guidelines for newborn and child health in Malawi, Nigeria, and South Africa.
- Guideline development processes are complex and resource-intensive.
- Sharing the outputs of initiatives such as GELA may improve efficiency and support sustainable decision-making capacity across the African continent

GELA WORK PACKAGES



GELA PROJECT OUTPUTS

Countries Involved	South Africa, Malawi, Nigeria
Priority Guideline Questions	5
Evidence Synthesis Reports	11 (effectiveness, qualitative, economic)
Guidelines Developed	3 de novo guidelines
Infographics	4
Conference Presentations	27
Manuscripts (published & unpublished)	20
Post-doctoral Fellows Graduated	4
Masters' Students Graduated	4
People Reached via Capacity Building	Over 150
Workshops, short courses	3 guideline simulation workshops, primer in systematic reviews, clinical practice guidelines, webinar on Qualitative Evidence Synthesis
Community of Practice	Established and active

CONCLUSION

- Establishing researcher-decision maker collaborative guideline development processes in resource constrained settings is feasible.
- Dedicated funding and activities to build the capacity of both decision-makers and researchers REQUIRED.
- Sustained collaborative efforts are needed to institutionalize the guideline development processes in these countries.

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 the Stiftelsen MAGIC Evidence Ecosystem, Norway.

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