Evidence informed practices in low- and middle income countries: implementation opportunities and barriers

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Evidence informed practices

- Research Evidence
- Experience
- Values and preferences
Enabling environment for evidence-informed practices

- Evidence informed policies

- Health system building blocks in place
Clinical practice guidelines (CPGs) are statements that include recommendations intended to optimise patient care that are informed by a systematic review of evidence and an assessment of the benefits and harms of alternative care options.
Clinical Practice Guideline development

http://cebgrade.mcmaster.ca/guidecheck.html
Clinical practice guidelines - implementation

Evidence-based recommendations are only as good as their uptake and application
Evidence on implementation strategies

To provide an overview of the available evidence from up-to-date systematic reviews about the effects of implementation strategies for health systems in low-income countries.

4 categories – strategies targeting:
1. healthcare organisations (e.g. strategies to change organisational culture; 1 review);
2. healthcare workers by type of intervention (e.g. printed educational materials; 14 reviews);
3. healthcare workers to address a specific problem (e.g. unnecessary antibiotic prescription; 9 reviews);
4. healthcare recipients (e.g. medication adherence; 15 reviews).

N= 39 reviews
Realities in LMIC

Social determinants of health

The conditions in which people are born, grow, live, work and age
Realities in LMIC

- **Burden of disease**
- **Health system challenges**

**Health system challenges**
- Poor management
- Insufficient funds
- Insufficient human resources
- Poor health system infrastructure
- Limited supplies of essential medication and technology
- Suboptimal health-care seeking
Committed guideline community aiming to address inequities

Guideline development affected by:

1. insufficient funding for technical and methodological work;
2. fragmentation between groups, and between national and provincial health sectors;
3. lack of standardised systems;
4. resource gaps.

Case study: what happening in South Africa?

What is the role of provincial government officials and district managers in receiving, adapting, disseminating and implementing primary care clinical practice guidelines in four provinces in South Africa?

Health system arrangements including governance, accountability, human resources and financial constraints hinder implementation.

Challenges and opportunities for training and support, in particular, the need for practical on-site clinical mentorship and support.

Socio-cultural and geographic issues require CPGs to be adapted to better fit the context.

What are the perspectives of primary health care providers regarding the barriers to and potential solutions for increasing use of primary care CPGs in South Africa?

Participants were knowledgeable about guidelines, generally trust their credibility and are receptive and motivated to use them.

Guidelines are seen by nurses as providing confidence and reassurance, professional authority and independence where doctors are scarce.

Despite this, many barriers to guideline use were reported.

• supply chain issues limiting access to necessary equipment
• inadequate systems for hardcopy distribution;
• linguistic inappropriateness (e.g. complicated language, lack of summaries, no availability in local languages);
• unsupportive audit and feedback procedures;
• limited involvement of end-users in guideline development;
• and, patchy training that does not filter back to providers.
Implementation complexity

- Various contextual issues to consider
- Various stakeholders
- Presence of comorbidity/multi-morbidity
- Preferences, barriers and facilitators to CPG access and use
- Implementation strategies planned around local barriers and playing to local incentives
Opportunities for influencing evidence informed practices
Empowering healthcare providers to be informed users of evidence (not researchers)

• Critical thinkers
• Lifelong learners
• Curriculum reform

‘..underlying aim with integrated curricula …to have EBHC learning longitudinal, instilled, embedded and part of mainstream.’
Enhancing guideline development

• Harness the contributions and commitment of the guideline community.

• Agree on standards and methods for development that can inform all CPG development groups across sectors and disciplines, including how interest should be declared and managed.

• Create platforms for input from healthcare providers and patients in guidelines at development and implementation stages.

Alternative/adaptive CPG development methods (that use existing CPGs) can help bridge the HIC vs LMIC evidence gap
Adopt and adapt guidelines from other settings for our needs

fit-for-purpose guidelines

a wealth of freely accessible, good-quality guidelines

Did you find a CPG

Yes

Is it up to date? And good quality?

Up to date + good quality

Adopt

Out of date + good quality

Update

Out of date and poor quality

Contextualize

De Novo Development

Guideline toolkit: https://guidelinetoolkit.org.za/

Building capacity in clinical guideline development & implementation

To enable participants to understand the different guideline approaches (de novo development and alternative methods), implementation, monitoring and evaluation of clinical practice guidelines

| Pre-course          | Principles of evidence-based healthcare
|                    | Appraising a CPG
| Day 1              | Rationale for CPG development
|                    | Principles of alternative methods for CPG development (adopting, contextualizing, adapting)
| Day 2              | Steps for CPG development
|                    | Applying the evidence to decision framework
|                    | Considering cost effectiveness in CPGs
| Day 3              | Implementing CPGs
|                    | Monitoring and Evaluating CPGs
| E-learning         | Alternative methods of CPG development
| Portfolio          | Reflection of content and development of a CPG teaching tool
| Exam               | Blended 4 month course
|                    | • Online
|                    | • Face:face
|                    | • Assessments
Building capacity in clinical guideline development & implementation

**Building capacity in clinical guideline development & implementation**

**SIMULATION FOR TEACHING GRADE IN GUIDELINES DEVELOPMENT IN SUB-SAHARAN AFRICA**

Tamara Kredo¹, Michael McCaul², Nandi Siegfried³

The content covers
- Guideline panel composition, roles, and managing conflicts of interest
- Key factors determining overall quality of evidence in a GRADE Evidence Profile
- The GRADE Evidence-to-Decision Framework to inform guideline panel discussions
- Formulation of a recommendation
- Implications of the strength of a recommendation
Enhancing guideline implementation and use

Point of care access and locally relevant end user tools

- Digital guidelines
- Protocols
- Algorithms

Participation of end-users in development to develop contextually relevant products

Enhancing guideline implementation and use

In service training, outreach, supervision and mentoring
Enhancing guideline implementation and use

Enhanced governance, efficient supply chain and supportive audits with feedback

System building blocks:
- Leadership / governance
- Health care financing
- Health workforce
- Medical products, technologies
- Information and research
- Service delivery

Goals/outcomes:
- Access Coverage
  - Improved health (level and equity)
  - Responsiveness
- Quality Safety
  - Financial risk protection
  - Improved efficiency
Implementation research

the systematic approach to understanding and addressing barriers to effective and quality implementation of health interventions, strategies and policies.

Partnerships between implementers and researchers who share the common goal of engendering iterative improvements in programme implementation.

- Collaborative
- Broad research spectrum
- Aligning research with need and ensuring quality
In conclusion

- Complex context
- Health inequities
- Various challenges
- Many opportunities

End goal: impact health outcomes

“We can change the world and make it a better place. It is in your hands to make a difference.” Nelson Mandela
Acknowledgements

• Tamara Kredo, Michael McCaul, Michael Pather
• SAGE project team
• Stellenbosch University
Promoting and supporting evidence-informed health care

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