

THE IMPORTANCE OF INVOLVING THE TARGET POPULATION IN GUIDELINE DEVELOPMENT: EXPERIENCES FROM THE DEVELOPMENT OF EVIDENCE-BASED AFRICAN PREVENTION GUIDELINES

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INTRODUCTION & OBJECTIVES

We recently published evidence-based African First Aid Materials (AFAM), that describe the most effective and up-to-date first aid techniques specifically relevant for Sub-Saharan Africa [1]. Because of the major importance of prevention in health care, we additionally developed evidence-based guidelines for the prevention of injuries and diseases feasible for laypeople in Sub-Saharan Africa.

METHODS & RESULTS

Evidence-based guidelines were developed according to AGREE II [2]. In the scheme below it is indicated how the target group was involved in the different steps of guideline development. For every pillar of 'Evidence-Based Practice' the corresponding steps of guideline development (methods) and results are presented.

BEST AVAILABLE SCIENTIFIC EVIDENCE

METHODS

Step 1: Search for evidence:

- ✓ Focus on studies performed in Africa or written by an African author
- ✓ Specific search for studies concerning African perspectives
- ✓ Specific search in databases of African studies (e.g. African Index Medicus)

Step 2: Study selection:

- ✓ Specific selection criteria: alternative interventions with limited resources, household level, no special equipment,...

RESULTS

TABLE 1 ► Number of included references that are performed in an African country or written by an African author

STUDY TYPE	NUMBER OF INCLUDED REFERENCES
Systematic reviews	32
African studies	1
Other	31
Experimental studies	27
African studies	10
Other	17
Observational studies	44
African studies	20
Other	24
African perspectives	36
TOTAL	139



PRACTICAL EXPERIENCE AND EXPERTISE OF EXPERTS IN THE FIELD

METHODS

Step 3: Discussion of the draft materials by a multidisciplinary expert panel:

- ✓ 11 African experts and first aid trainers.

Step 4: Feedback by peer reviewers:

- ✓ 3 African experts with expertise in child accident prevention, health promotion and education, and anthropology.

RESULTS

African experts formulated good practice points and placed recommendations in the African context.

PREFERENCES AND AVAILABLE RESOURCES OF THE TARGET GROUP

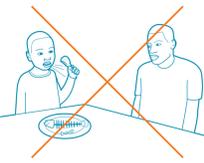
METHODS

Step 5: Pilot of the draft materials:

- ✓ Pilot study in Uganda to test the clarity of several drawings: 10 people with various backgrounds, including 5 people with previous first aid knowledge and 5 laypersons not having first aid knowledge, had to interpret various illustrations without further information or accompanying recommendations.

RESULTS

TABLE 2 ► Examples of illustrations of preventive interventions that were adapted after their clarity was tested in a pilot study in the Uganda Red Cross, to reflect the African context as close as possible

	BEFORE PILOT	AFTER PILOT
Prevention of bee and wasp stings: <i>"Do not leave food waste uncovered outside"</i>	The exclamation mark (!) is interpreted wrongly: in a positive way ('do it') instead of a negative way and the fruit looked not like garbage. 	
Prevention of choking: <i>"Teach children not to talk or laugh or cry with food in their mouth"</i>	<ul style="list-style-type: none"> • People were distracted because of the details in the illustration: why is the child eating fish and meat at one time? • The lines at the mouth of the child were not interpreted as 'the child is talking' 	
Prevention of burns: <i>"Never leave children alone near heat sources, hot water and open fires"</i>	It is not recognised what the child is doing (paper, glass, metal?), children are usually not playing with paper or colour books – again, these details are masking the message. 	

CONCLUSIONS

- ✓ The African context was taken into account at several steps during guideline development: in the search for and selection of specific evidence, by involving African experts, by counselling first aid trainers and trainees (pilot test).
- ✓ This resulted in improved didactical materials.
- ✓ It is however not possible to make a general manual that is adapted to all African countries, regions and local customs.
- ✓ Experiences and lessons learned from the pilot study were integrated in an implementation guide, in order to help organisations to make their own adapted materials.
- ✓ In conclusion, involving the target population in many different ways is an added value for a guideline adapted to a specific context.