The LAMRN Zimbabwe

WORKSHOP REPORT

Harare, Bronte Hotel 8-10 August, 2013

PREPARED BY:

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Acknowledgements

The LAMRN Zimbabwe profoundly acknowledges the funders for the project who have made it possible for the first workshop of research and evidence based practice relevance to be held for the midwives in Zimbabwe.

Our gratitude goes to the Manchester University UK for all the financial administrative support and the technical assistance provided for the workshop to take place.

The Zimbabwe midwives are most grateful to Drs Carol Bedwell and Judith Williams from Manchester University who contributed very important and powerful sessions on various topics. These sessions were designed to meet the needs of the workshop participants and also formed the foundation to group work and discussions.

Finally, all the participants are appreciated for their active participation in a fruitful dialogue which made the workshop relevant to Zimbabwe and the network.

1. Introduction

The first LAMRN workshop was held in Zimbabwe for 20 midwives from the 8 to 10 August 2013. The last day for three selected midwives who would be midwifery leaders. This report is a summary of the midwives' workshop activities which took place during the 8 to 10 August 2013.

2. Workshop Aim and Specific Objectives

The aim of the workshop, which is in line with the LAMRN goal, was to lay the foundation for midwives to actively participate in the process of developing a thriving collaborative research network in Zimbabwe and in the region. The specific objectives were to i) introduce the midwives to LAMRN and the progress to date; ii) discuss evidence—based practice and translating evidence into practice; iii) introduce the midwives to the Delphi process; iv) develop research skills, such as literature review, narrative versus systematic review and critiquing the literature; and v) initiate the process of developing research leaders who will be a critical mass of practitioner researchers.

3. Funding

The Zimbabwe Ministry of Health and Child Welfare through the hospital Chief Executive Officers gave the midwives time to attend the workshop. The financial support was from the LAMRN grant covered by year one - first and second quarters. Attached (appendix III) is the financial report providing details of how the monies received were used.

4. Participants

Participants of this workshop were midwives working at different levels of the health delivery system who were drawn from the Ministry of Health and Child Welfare Department of Reproductive Health (1), central referral (15), the provincial (2) and mission hospitals (1). These institutions are multidisciplinary training for various health care cadres including midwives There were a total of 20 participants from Zimbabwe and two research consultants from Manchester University, UK (appendix I). The participants were a mixed group with varying experiences in research.

5. Workshop Format

The three days followed a programme (appendix: II) designed to facilitate participants to work through the specific objectives intended to achieve workshop outcomes using problem oriented and participatory approach. Following an introduction to the topic, the midwives worked in small groups which were followed by group presentations and discussions. The process was guided and supported by the Manchester University UK (Drs Carol Bedwell & Judith Williams) and the Zimbabwe Country Focal Lead (Dr Christina Mudokwenyu-Rawdon).

6. Workshop Proceedings

Day one

The topics and discussions focused on introduction to LAMRN and progress made to date, evidence based practice, translating evidence into practice and research priorities – literature related to priorities (Delphi Process).

Introduction to LAMRN and progress to date

The Africa Midwives Research Network (AMRN) upon which the Lugina Africa Research Network (LAMRN) is founded was introduced. Dr CM Rawdon. Dr Margaret Maimbolwa-Zambia Country Focal Lead and Mrs Grace Danda— who were members of AMRN shared their experiences with the participants linking the AMRN to the present which is the LAMRN. The goal, objectives, partners and the Secretariat of LAMRN were discussed. Dr Carol Bedwell provided details of the role of Manchester University in the partnership/collaborative model of the LAMRN project. High maternal and neonatal deaths and related morbidity demand that the provision of maternity care be research driven and that midwives take a proactive role in research and its utilization to enhance practice.

It was evident from the discussion that the midwives understood what LAMRN stands for, its added value to midwifery. This reinforced the importance of their active participation and ownership of the network.

Evidence based practice

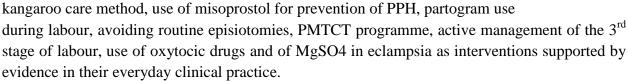
The midwives, through group activity, addressed the concept of "evidence-based practice" being guided by the following questions: What is evidence? What do you base your clinical decision on? What Evidence is in clinical practice? What are Barriers to implementing evidence in

In response to the questions, the midwives were very clear of what evidence meant such as that it is "proof to support an issue which has been tried and tested," "empirical knowledge or credible, authentic and factual information."

practice? How can you overcome these barriers?

They reported using set standards of practice, research evidence, personal experience, what has been found to work, protocols/policies/ regulations/ procedure manuals, woman's choice/ preference, available resources and intuition guide

their clinical decisions. They identified focused antenatal care,



However, midwives cited fear, lack of knowledge and self confidence, resistance to change among practitioners (attitudes), lack of policies to support evidence-based practice, inadequate resources, and limited research done by midwives, lack of clarity and imposition from other disciplines, cultural, religious and traditional beliefs and lack of information. On a positive note, the midwives perceived that some of these barriers could be overcome if the midwives were competent in translating evidenced into practice and actively participate in own research work for promoting quality of care. Coaching and mentorship were viewed as important to maintain research skills.

Research priorities: the Delphi process

The Midwives understood the Delphi process as a model a process of collecting and distilling knowledge from a group of experts by means of questionnaires interspersed with controlled opinion feedback. In this project, the process had already started with University of Manchester requesting the LAMRN country Focal Leads to submit research priority areas from which the first questionnaire which the midwives responded to was developed. Analysis of responses will be followed by a second set of questionnaires which will be sent back to the midwives to solicit more information. The process will continue until the stability in the results is achieved – a group rather than an individual conclusion. This means that as experts the midwives' opinion is valuable to reach a final consensus on the research priorities for Zimbabwe.

Literature search

The exercise on literature search involved midwives making use of the websites and online sources, such as:

- Reproductive Health Library: www.who.int/rhl
- www.google.com
- Cochrane Library: www.thecochranelibrary.com
- Pubmed: www.ncbi.nih.gov/pubmed

This session was a challenge for it was the first time some of the midwives were undertaking such an activity. They, however, were in their small groups able to access one or two relevant articles and with more practice they can easily further their skills.

Day Two

Day started with a recap of day one sessions before the midwives were introduced to the *narrative v systematic review* which was followed by a session on critiquing literature. These sessions were more theory than practice. The input was new knowledge to most of the midwives who received it with much interest and appreciation. More time was then spent with midwives working in small groups practicing the use of websites in searching for literature.



Day Three

Day three focused on the 3 identified midwives. A consensus was reached regarding **a** plan of action that the three would follow before the November 2013 LAMRN workshop. This included the dates on which the three were to meet with the Country Focal Lead for coaching and

mentoring. At this stage, the midwives searched for literature relevant to main causes of maternal deaths. This process was to assist them in identifying a research problem and getting the research question right. The midwives identified puerperal sepsis (one of the direct causes of maternal death) as a possible research priority area to focus on literature search. It was acknowledged that more literature search would provide the midwives with relevant information to facilitate decision making on a specific study area.



From left to right: Grace Danda, Peggy Dube, Kushupika Dube

7. Way forward

- Next workshop: First week of November (actual dates to be confirmed)
- 20 midwives assignment given: to practice critiquing a paper of their choice.
- 3 Midwives assignment given: a literature review on which to base the research question.
 They were also scheduled to meet with the country focal lead for discussion by the end of September 2013.
- 2nd Delphi Questionnaire to be completed and sent back to Manchester University for analysis

8. Workshop evaluation

Information generated through participant completed forms indicated that the workshop evaluated well. Participants perceived the workshop as significant in laying the foundation for subsequent LAMRN workshops. They also demonstrated appreciation for having been chosen among many other midwives in Zimbabwe. They pledged their commitment to actively participate in LAMRN to advance the midwifery research agenda and evidence based practice at national and regional levels.

Additional comments reflect the importance of midwives working as a team and valuing the role of the LAMRN. They also valued the atmosphere in which the workshop was facilitated and the experience and expertise of the facilitators. *Examples of statements midwives made:*

- "It was a beneficial workshop, now I'm motivated to at least come up with a research proposal"
- 'Thank you very much for affording me this privilege of being a participant in this workshop and giving me more exposure to research".
- "Workshop was well organised and the facilitators were good."

9. Lessons Learnt, Conclusion and Recommendation

This was the first midwives workshop of the LAMRN project conducted in Zimbabwe with support from the University of Manchester. It was short but effective and midwives were not away from their work for too long. Midwives were motivated to engage in their own research studies. They pointed out that more input on the research process would be most welcome.

The midwives were left with a plan of action for the LAMRN Zimbabwe November 2013 workshop which will expose the midwives to more input of the research process. It is incumbent upon midwives to read to increase their understanding in areas on need. They also need to respond to the 2nd Delphi Questionnaire to facilitate further refining of the research priorities

10. APPENDICES

APPENDIX I: LIST OF PARTICIPANTS

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19 Thembisile Mlilo	263 (0) 712 967 496 mlilothemisile@gmail.com	St Luke Mission Hospital Matabeleland North
20 .Dr Carol Bedwell	Research Consultant	Manchester University UK
21.Dr Judith Williams	Research consultant	Manchester University UK
23 Dr Christina Mudokwenyu- Rawdon	263 (0) 772352691 263 04 700843 (Home)	LAMRN Focal Lead Zimbabwe & Research Consultant

Appendix II: workshop timetable

	Day 1 (20 midwives)	Day 2 (20 midwives)	Day 3 (3 midwives)	
08.30 - 09.00	Registration	Recap of day 1	Introduction to role	
09.00 - 09.30	Welcome and introduction to role	Narrative v systematic review - overview	Developing a protocol for systematic/narrative review	
09.30 - 10.00	Introduction to LAMRN and progress to date	Conducting a literature review (based on priorities)	(based on priorities)	
10.00 - 11.00	What is evidence based practice? Group work, what informs practice?			
11.00 - 11.30	Break	Break	Break	
11.30 - 13.00	What is evidence based practice? Examples of evidence based practice.	Critiquing the literature (theory)	Developing a protocol for systematic/narrative review (based on priorities)	
13.00 - 14.00	Lunch	Lunch	Lunch	
14.00 - 15.00	Translating evidence into practice – clinical guidelines	Critiquing the literature (practice) Based on research priorities	Developing a research protocol - outline	
15.00 - 15.15	Break	Break	Break	
15.15 - 16.30	Research priorities – literature related to priorities	Feedback from critique The way forward Workshop evaluation	Developing a research protocol - outline	
16.30	Close	Close	Close	

APPENDIX III

LAMRN ZIMBABWE FINANCIAL STATEMENTS: 1 APRIL TO 30 SEPTEMBER, 2013

Nature of Business

The University of Manchester entered into an agreement with The Tropical Health and Education Trust (THET) to enter into a partnership with six African countries (Kenya, Malawi, Tanzania, Uganda, Zambia and Zimbabwe) to undertake a project, entitled the Lugina Africa Midwives Research Network - LAMRN to develop a thriving, collaborative and sustainable research network with the capacity and skills to strengthen evidence based midwifery practices.

Pursuant to this objective the Project Lead at the University of Manchester nominated Dr Christina Mudokwenyu-Rawdon as the Country Focal Lead for Zimbabwe to operate and deliver the objectives of the project from April 2013 to March 2015. The Country Focal Lead for Zimbabwe organized the first of four research building workshops from 6 to 10 August 2013 for 20 local clinical midwives.

Report of the Accountant

The Country Focal Lead for Zimbabwe, Dr Christina Mudokwenyu-Rawdon received US\$19 740.79, deposited into the LAMRN Zimbabwe bank account with Standard Bank, Highlands, Harare by the University of Manchester, for the purpose of implementing the project for the first and second quarters of 2013 (periods 1 April to 30 June 2013 and 1 July to 30 September 2013 respectively). This amount is accounted for in this financial report.

The accounts were prepared from the records provided by LAMRN Zimbabwe Country Focal Lead

The financial statements are in accordance with the responsibilities set out in the Terms of Reference for the Country Focal Lead in Zimbabwe. Please see attached for details of the accounts.

COMPILED BY:

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Date: 4 September, 2013