

**LAMRN ACTIVITY REPORT FOR SECOND WORKSHOP
UGANDA**



**LAMRN SECOND WORKSHOP AT
RIDER HOTEL SEETA - KAMPALA - UGANDA
ON 24TH- 26TH FEB 2014**

ORGANIZERS AND WORKSHOP PREPARATIONS

Professor Dame Tina Lavender and Team
Institution: University of Manchester (UoM)
Job title: Professor Dame Tina Lavender
Email: tina.lavender@manchester.ac.uk
Telephone 0161 306 7744
UK

Prepared of training Materials

Enid Mwebaza
Ag. Commissioner health Services (N)
Ministry of Health
Uganda

Coordinator LAMRN -Uganda

Jolly K. Nkayarwa
Senior Principal Nursing Officer Uganda
Mulago Hospital
Kampala

Secretary LAMRN - Uganda

President Uganda Nurses and Midwives Union (UNMU)
P. O. Box 7272
Kampala
Uganda

Treasurer LAMRN - Uganda

MAIN FACILITATOR

Dr. Rebecca Symth
University of Manchester
UK

Venue: Ridar Hotel
Seeta - Mukono
Uganda.

Date: 24th to 26th February 2014

ACKNOWLEDGEMENTS

We acknowledge and thank The University of Manchester under the support of THET for their funding all the LAMRN activities including the implementation of the workshop.

We are also indebted to Professor Dame Tina Lavender for rekindling AMRN network and for preparing the training materials

Many thanks to Executive members of Uganda Nurses and Midwives Union (UNMU) for the support rendered during the workshop preparations including bank paper work

My sincere appreciation goes to all the participants for their enthusiasm and active participation that led to a productive workshop.

LAMRN will remiss if it does not thank Dr. Rebecca who was the main facilitator for all her input

Last but not least AMRN would like to register our sincere gratitude to the entire team from University of Manchester for putting together all the training materials including the power point presentations and continued support to the Country focal person that has made this workshop a success.

1.0 Introduction

The Lugina Africa Midwives Network (LAMRN) network has been reintroduced by University of Manchester (UoM) under the support from THET. The main goal for the network is to develop a thriving, collaborative, sustainable, midwifery research network with the capacity and skills to strengthen evidence based-practice, thus improving care for women and babies.

The first phase of the Africa Midwives Research Network (AMRN) was initiated in 1993 with the aim of serving as a base for sharing information, strategies and solutions based on scientific evidence for provision of quality midwifery care in the Region. The network included midwives from Tanzania, Zimbabwe, Zambia, Mozambique, Eritria and Uganda being supported by Sida – Sweden for the entire period of about of 10 years. The activities of this Network were further supported by visionary midwifery leader, Dr Helen Lugina, who has subsequently died; the partners wish to honor her dedication through the name of this new project: Lugina Africa Midwives Research Network (LAMRN).

Researchers from the University of Manchester (UoM) have worked in collaboration to develop the training materials and to offer the focal team leader technical support using a mentoring and ‘budding’ approach to conduct the above workshop. Workshop activities included conducting systematic reviews/meta-syntheses; developing research protocols; writing papers (based on review and/or preliminary research)

2.0 Process

2.1 Day I

Day one started with self-introductions. LAMRN country focal person welcomed participants who were later asked to make formal introductions.

Thereafter Dr. Rebecca Symth from University of Manchester was then introduced as the main facilitators.

The coordinator gave a brief account on the activities for the 3 midwives, their total commitment and dedication towards the proposal development. She further narrated on how the three midwives have continued to develop the Uganda research proposal on: What interventions are effective in supporting male partner involvement in labour care. Members were reminded on how this topic was selected following the Delphi survey. The re midwives from UoM were looking at the use of a partograph and they were reminded of their role in completing the question that would be provided by Rebecca during the course of the workshop

Rebeca made a brief overview on the history of LAMRN from its inception to the current status.

Members were also strongly reminded to take note of the remaining workshops as per schedule and to ensure their total commitment. She further emphasized to the team the importance of completing of the 4 workshops as a basis for future evaluation for the whole programme.

Members were also informed that due to challenges with the funding systems it has not been possible to adhere to the workshop dates as indicated to the schedule below. They were therefore requested to get prepared for the third workshop that will be taking place in August this year. To this effect the members pledged their total support and commitment to participate fully in all the workshops.



This brief introduction was then followed by participant's reflection on benefits and achievements they have obtained as a result of LAMRN trainings and networking. It was important to note that almost most of the members reported positive results that has so far contributed to their lives in one way to another . Some reported to have gone back to school while others had it had made enormous changes in their places of work by integrating evidence based care practices. Members however expressed their concern on how they could secure evidence based protocols and guidelines that would be acceptable and user friendly in their places of work to improve the quality of care. The cord care was one of the guideline that everyone wished to have as an evidence based guideline translated into the Uganda context for provision of standardized care

The Mulago team was requested to take the lead and follow up this important observation with the head of department. They were further informed by the coordinator that a good number of evidence based guidelines that should be available in labour wards for the provision quality of care

Finally the members were appreciated for having all turned up for the second workshop and for observing the starting time to especially those that were coming from upcountry. She however, informed the members that cheaper accommodation has been secured for all those who feel were not in a position to commute.

Objectives for the 2nd workshop were:

- ✚ To develop awareness of main research paradigms, methodology and methods
- ✚ To understand the differences between paradigms, methodology and methods

The 20 Workshop Participants during the session



**LAMRN SECOND WORKSHOP AT
RIDER HOTEL SEETA - KAMPALA - UGANDA
ON 24TH- 26TH FEB 2014**

Session 1: The first session begun by defining the Paradigm concept (*Presentation by Main facilitator – Dr Symith*)

She begun with an - Introduction to Paradigms, Methodology and Methods

This topic Paradigm seemed not to be well known by most of the participants. She described a Paradigm according to available literature “A basic set of beliefs which guides action” (Thomas Kuhn, 1970)

The research paradigm was further defined as “A basic set of beliefs which guides action, whether of the everyday garden variety or action taken in connection with a disciplined inquiry” (Guba 1990)

The importance of the research paradigms were also discussed:

- + To provides a conceptual framework for seeing and making sense of the social world.
- + To sets limits for:
 - o what can be researched
 - o how it is to be researched
 - o how the results could be interpreted

The participants were further informed that they all have a basic set of beliefs which affect their day to day performance in a number of ways. These included the following:

- + Impact on how they *see* the world
- + How they *understand* the world
- + How they *explain* the world
- + And how everyone has a paradigmatic stance (even if they're not aware of it)

The Key Paradigms were further categorized in 3 groupings:

- + Positivism (quantitative)
- + Constructivism (qualitative)
- + Pragmatism (mixed design)

B) Methodology / methods

- + Methodology was also discussed as a discipline or body of knowledge theoretically underpinning research.and is designed as a process for the research
 - o E.g. experimental (quantitative), ethnography (qualitative)
- + Methodology guides the design and the methods to be used for determining sample size, collecting data etc.
- + Methodologies relate to paradigms

Group work

In groups, look at the research questions on cards you have been given and decide which paradigm they belong to

Group work - Used a number of cards with research questions and get them to decide which paradigm suit most.

Time for activity was: 15 minutes






Session 2: Presentation on Quantitative data (Presentation by Ayebare E.)

This was a participatory workshop and one of the 3 midwives presented a Quantitative Research

She begun by reflecting on the hierarchy of research evidence as:

- | | |
|---|----------------------|
| o | Systematic reviews |
| o | Randomised |
| o | controlled trials |
| o | Cohort studies |
| o | Case control studies |
| o | Historical controls |
| o | Case reports and |
| o | case series |
| o | Opinion based |
| o | practice |

Methods were categorised in 2 groupings with the first having no formal controls while the 2nd one with formal controls:

 control	Without formal
◦	Opinion based practice
◦	Case reports
◦	Case series
◦	Cohort studies
 ◦	With controls
◦	Historical controls
◦	Case control studies
◦	Randomised controlled
trials	
 meta-analyses	Systematic reviews and
 research design were also ably discussed to include the following:	Types of quantitative
◦ Opinion based practice	
◦ Case-reports, case-series	
◦ Historical controls	
◦ Case control studies	
◦ Cohort studies	
◦ Randomised controlled trials	
◦ Examples of quantitative research design	
 finally reminded to strictly observe the sources of BIAS as follows:	The participants were
◦ During the trial	
◦ Measurement of outcomes	
◦ Analysis of data	
◦ Publication of results	
◦ Interpretation of results	

The day ended with Group work on Quantitative Research methods

DAY TWO

Day two begun with one of the 3 midwives giving a recap on the day ones proceedings

Session 3: Qualitative Research (*Presentation by Joseph*)

The topic of an Introduction to Qualitative Research was delivered by one of the participant under the support of the main facilitator

This session aimed to answer the following questions:

- What is qualitative research?
- Why are qualitative methods used?
- What are the main features?
- What are the different types of study?



The Qualitative Research was described as a research that focuses on everyday life of people, Interested in their ‘social worlds’ and that the Qualitative approaches are frequently used in Midwifery



The main features of Qualitative Research were identified as follows

- Researcher explores experiences and feelings
- How these are interpreted by individuals
- These are not fixed and change over time
- Researcher then describes/interprets what s/he sees and hears



Different types of qualitative study found in the midwifery care were also discussed to include the following:

- Ethnography
- Phenomenology
- Grounded theory



The summary included the following observation

- can follow different methodologies.
- No method is better than another, but each will suit a particular type of research question.

Qualitative research

No method is better

Session 4: What makes a good Research Proposal (*Presentation by By Enid*)



The Coordinator was delivered the presentation on “What makes a good proposal|”
The main role was to a clear descriptive title by asking questions on what, who, when, where and why



Discussed Methods of Data collection

Quantitative

- data, database searches, structured surveys, structured observations

Case records, audit

Qualitative

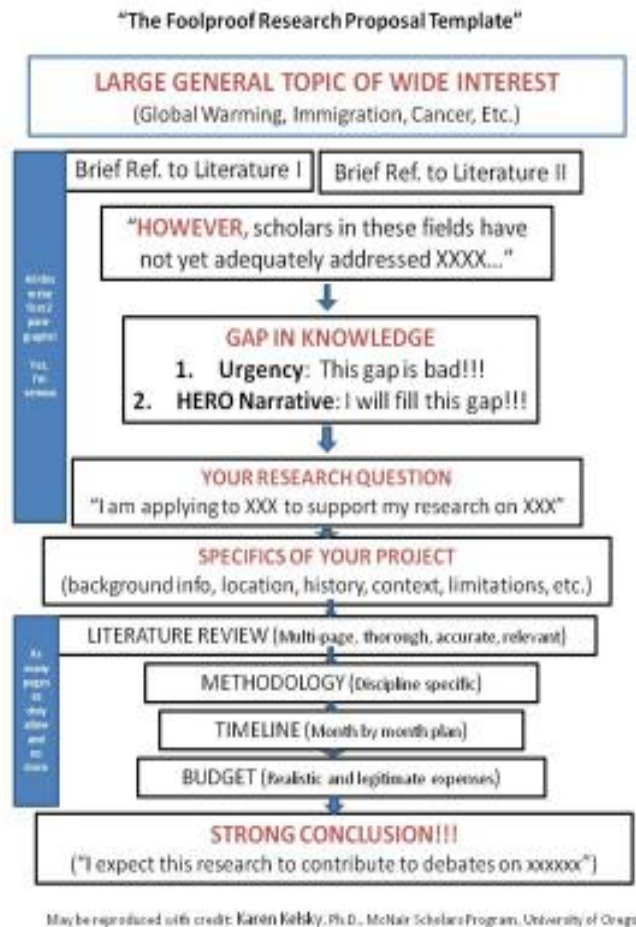
- observations, drawings

Interviews, focus groups,

Mixed-methods

- Combination of any of the above

Participants were then carried through the Footproof Research Proposal Temperate



Session 5: Ethical Considerations (By Elizabeth)

Participants started off by brain storming on the reasons for Ethical consideration. Facillitation was by the LAMRN coordinator

The responses were then categorized. Members were informed that If research is not ethically approved, humans would carry out devastating things to vulnerable people. Therefore research ethics continue to play a big role in protecting the public. Ethics was further discussed basing on the previous experiences

- Past incidences highlights
- Why most human research must go before ethics committee
- All research should adhere to ethical principles
- Protect the vulnerable – human and animal
- Protect human rights

Therefore participants have the right to

- Refuse, wwithdraw at any time wwithout affecting care
- Be treated with sensitivity, respect and dignity and privacy
- Have right to ccomplain or be involved and have right to ccess findings

Participants were again divided into group to discuss the main ethical issues related to a piece of research (one of the priority topics)

15 min discussion

5 min feedback

Closure and way forward

- partograph questionnaire

Participant's filled in the

DAY THREE

Day three begun with introductions and discussions on the role of 3 core midwives

The Coordinator begun by explaining the changes in the composition of the 3 core midwives. She noted that although the 1st group included the three midwives identified from the original group twenty research midwives. (Mr. Joseph Mwizerwa, Dr. Muwanguzi Arinaitwe P. and Ms. Namutebi Elizabeth) there were challenges where one of them had to drop out but opted to remain part of the main group.

Dr Patience Muwangunzi failed to cope due to change in management of her work employers. After consultations it was agreed that Ms Elizabeth Ayebare takes over her role and therefore becomes the 3rd midwife.

The coordinator expressed deep appreciation for the two allowing to swap their responsibilities. She further reminded them of their responsibilities as the core midwives: The following roles and responsibilities were discussed

- To Skype 'buddy' meetings
(with focal group leaders and 3 nominated research midwives)
- To maintain open communication with UK Project mentor and Regional Network Chair where need arise.
- Focal group leaders to work with nominated research midwives (n=3) on their research projects
- Work with partners to produce peer reviewed papers for open access publications (UK Project Lead, 3 UK research mentors, Network chair, 5 African partners)
- Contribute to an on-going online research discussion forum/community of practice learning environment
- Participate in and present research if required at conferences including the International Conference of Midwives (ICM), ICM Africa Region and other dissemination events
- Work with all partners to produce peer reviewed papers for open access publication
- Participate in, and assist with, both internal and external project evaluation activities
- Contribute to communication and dissemination strategy/events for LAMRN
- Identify opportunities locally and within the region for LAMRN to develop funding applications for new research projects

5.0 Workshop Achievements

- ✚ Under mentorship and support and guidance the three core midwives were able to work closely and work as co-facilitators
- ✚ Discussed the research protocol and on way forward
- ✚ Shared experience
- ✚ The core midwives gained facilitation skills

	Day 1 (20 midwives)	Day 2 (20 midwives)	Day 3 (3 midwives)
08.30 - 09.00	Registration	Recap of day 1	
09.00 - 09.30	Welcome and re-introductions	Qualitative Research	<i>Proposal Writing</i>
09.30 - 11.00	Feedback on activities since last workshop <i>All</i>	Qualitative Research Group work (interview and focus group)	
11.00 - 11.30	Break	Break	Break

AP
PE
ND
IX
I:
PR
OG
RA
M
FO
R
2ND
W
OR
KS
HO
P

11.30 - 13.00	<i>Paradigms, Methodology and Methods</i>	What makes a good proposal	
13.00 - 14.00	Lunch	Lunch	Lunch
14.00 - 15.00	Quantitative Research	<i>Ethical Considerations</i> <i>All</i>	
15.00 - 15.15	Break	Break	Break
15.15 - 16.30	Quantitative Research Group work	The way forward Workshop evaluation <i>All</i>	
16.30	Close	Close	Close

APPENDIX II:SHARING EXPERIENCES - HOW LAMRN HAS MADE A DIFFERENCE:

Dr. Muwanguzi Arinaitwe - At beginning of LAMRN was an Senior Lecturer at University where she was working from. Now she has been promoted to Dean of Faculty of Health Sciences at Victoria University and has been instrumental in starting a BSc programme in Midwifery. Feels that her involvement in LAMRN gave her the necessary edge over other candidates. Also her desire to start a BSc Midwifery degree has been partly inspired by the workshops and the rejuvenated awareness of the urgent need to have degree midwives in Uganda. She is keen to include EBP in the curriculum, based on the LAMRN materials. The only challenge she had painfully had to drop out from the three core midwives due to work overload and opted to remain part of the 20 core midwives.

Elizabeth Namutebi – Clinical Midwife at Mulago Hospital. Since participating in LAMRN wants to do her BSc in Midwifery. She has already enrolled with Dr Arinaitwe’s Midwifery Program at Victoria University However, securing tuition funds is still a big challenge. Again through this network Pesh is trying to assist. She also feels being part of the network she has benefitted a lot in gaining research skills.

Ms. Nabulo Harriet is lecturer at Mbarara University of Science & Technology. Has used the LAMRN materials / knowledge learnt on research methods and EBP in her own lectures to UG student midwives; in particular the Delphi technique.

Dr. Godfrey Katende - has taught the Delphi technique to UG students. Had not come across it before.

Ms. Betty Namukombe- Lecturer in Midwifery at Ugandan Christian University - has revised the research methods curriculum content to include new knowledge gained from workshops for the MSc in Midwifery.

Ms Maria Najjemba - Country Midwifery Advisor (ICM/UNFPA). Has used qualitative methods learnt at workshops to perform focus groups with stakeholders while preparing for the 'State of the World Midwifery Report'.

Mr Joash Magambo- Project Officer with the Ugandan Midwives Union – his Involvement in LAMRN inspired him to re-evaluate the need for Midwives to be trained as direct entry midwives, rather than comprehensive midwives (nurse / midwife). He has taken this initiative to the Union in order to advocate for this training.

Ms Catherine B. Odeke - Senior Office with the MoH. Given her an awareness of the need for midwives to be aware of Evidence Based Practice. Is discussing this at Ministry level.

Ms Annette Kanyunyuzi- Clinical midwife at Jinja Hospital reported that in process of becoming a member of the hospital Research Committee. Previously there were no midwives/nurses on the Committee. LAMRN has provided her with the necessary knowledge and skills to be able to be a valued member of the committee.

Ms Prossy Nandawula - Lecturer at Mengo School of Nursing & Midwifery. Used EBP materials / knowledge learnt from workshop in lectures for BSc in Midwifery.

Ms Hellen Kyakuwaire - Lecturer at Aga Khan University. At present doing her MSc in Midwifery at Makerere University. Used knowledge learnt at workshops to help her in her studying, in particular EPB and guideline development.

Ms Ziidah Namuwaya- Clinical midwife. Using lectures about EBP to question and change current practices regarding PPH, partograph use, focused antenatal care and length of 2nd stage of labour.

Ms Namaala Lwasa Alex - Clinical midwife at Mukoro Health Centre. Since attending workshop has made enabled her to question the current practice regarding cord care of newborn. Has confirmed practice is not based on rigorous evidence. Wants to write a guideline; will be given support from the 3 research midwives and Enid.

Ms Immaculate Nagulu - Lecturer at Kiwoko School of Nursing & Midwifery. Wants it investigate current midwives attitudes to male midwives; as anecdotal evidence (from mothers) suggests many are better practitioners than their female counterparts however many find it difficult getting jobs due to prejudice by those on interview panels.

Mr Joseph Mwizerwa- Academic Head of Aga khan University School of Nursing. Having been a part of LAMRN, Joseph got momentum to further pursue the RM to BSM program. Also instituted a student literature search support program to help EN to RN and the RN to BSN students during research, this was appreciated during the LAMRN workshop. Also reported that being among the 3 core midwives has improved his research skills.

APPENDIX (III): LIST OF WORKSHOP PARTICIPANTS

S/No	Name	Tel
1.	Mr. Joseph Mwizerwa	0772749494

	Aga Khan University joseph.mwizerwa@aku.edu	
2.	Ms. Ayebale Elizabeth - Makarere University nayebaleolivia@gmail.com	0712317831
3.	Ms. Namutebi Elizabeth- Mulago Hospital namubeth@gmail.com	0772853540
4.	Kanyunyuzi Annet Jinja Hospital annevkawa@gmail.com	0704482366
5.	Najjemba Maria UNFPA Country Midwifery Advisor- najjemba@unfpa.org	0704903662
6.	Ms Gorret Kigongo Musoke President Uganda Private Midwives Mary Gorret Kigongo Musoke mgkmusoke@yahoo.com	0703869623
7.	Catherine Odeke odeke2@yahoo.com Ministry of Health	0711994526
8.	Katumwa Sarah Mityana Hospital skatumwa@gmail.com	0702207410
9.	Nababiito Solommy Nsambya Hospital nababiitosolomy@gmail.com	0718690969
10.	Dr. Muwanguzi Arinaitwe P. Victoria University nursepesh@yahoo.com.au	0782861883
11.	Ms Nabulo Harriet - Mbarara University of Science andTechnology (MUST) harrielnabulo@yahoo.com	0777831814
12.	Katende Godfrey Min of Education katendeg@yahoo.com	0702773790
13.	Ms. Betty Namukombe - Uganda Christian University bnamukombe@ucu.ac.ug	0752817166
14.	Prossy Nandawula	0752767825

	Mengo school of Nursing and Midwifery prossynandy@yahoo.com	
15	Nagulu Immac Principal Kiwoko Training school Luwero immacnag@yahoo.com	0772972577
16	Namugema Bernadetta Mulago Hospital bnamugema@gmail.com	0772397164
17.	Namuwaya Ziddah Mulago Hospital ziddahnamuwaya@yahoo.com	0712947396
18.	Joash Magambo Uganda Nurses and Midwives Union Magambo04@gmail.com	0772442446/0706211220
19.	Namaala Lwasa Alex Mukono Health CIV lwasang@yahoo.com	0771816406
20.	Kyakuwaire Helen Aga Khan University Hellen.Kyakuwaire@aku.edu	0772052079

**APPENDIX (IV): LAMRN WORKSHOP EVALUATION - 24TH & 25TH FEB 2014 –
WORKSHOP**

How would you rate the workshops overall?

Poor – 0
Average - 0
Good – 3
Excellent – 18

How would you rate the venue for the workshops?

Poor – 0
Average – 2
Good – 13
Excellent – 5

How would you rate the organisation of the workshops?

Poor – 0
Average - 0
Good – 9
Excellent – 11

Has attending the workshop benefitted you?

Yes – 20 (100%)

Were the workshop sessions relevant?

Yes – 20 (100%)

What did you find most useful from attending?

- Research paradigms, methodologies & methods n = 19
- Session on quantitative research n= 1
- Sessions on qualitative research n= 3
- How to identify different research methods to use n= 1
- Discussions on qualitative research n= 1
- Group Discussions = 1
- Help in identifying gaps in research = 1

What did you find least useful from attending?

- Nothing n= 18
- Ethics Lecture n= 1
- Not sure n = 1

Is there anything you would have liked more of?

- No = 3

- Not Sure n= 1
- Research proposal n= 2
- Developing research design n= 1
- Engaging in more case scenarios n= 1
- Analysis of the different methods n= 2
- More scenarios for the ethics session n= 2
- Qualitative methods n = 3
- Meaning of systematic reviews & narrative reviews n= 1
- Sampling techniques n= 1
- Research methods n= 1
- Group work n = 2
- Constructivism n= 1

Is there anything you would have liked less of?

- Nothing n= 20

Any other comments about the workshops?

- ‘Very important and essential to the midwifery services in the country’
- ‘Was quite relevant. It has sharpened our research skills. Keep it up’
- ‘The workshop venue should be closer to town, the hotel is a bit far’
- ‘It was very good, interactive and active participation was very good’
- ‘Enriching, looking forward to more of these’
- ‘This workshop is very beneficial and it is going to give the midwives boldness to do research in their own workplaces and come up with evidence based practice’
- ‘The workshop continues to open my eyes into the research areas. More knowledge I have acquired will help me continue applying evidence-based approaches to solving challenges’
- ‘It was so educative, at a time when I needed it. I am currently writing a research proposal’
- I am very grateful for the knowledge given to me. Thank you very much, may God bless you’
- ‘The workshop was excellent and participatory’
- ‘I have learnt a lot in research’
- ‘Thanks a lot and looking forward to the next time. Thanks Rebecca and team’
- ‘This was so informative and useful for my research career.
- ‘Very educative, empowering to a researcher’
- ‘For me, it is a privilege to belong to this network. The sessions were clear. I have had many research lectures but I think these were the clearest. Thank you’
- Workshop very helpful. Facilitators friendly and supportive’
- ‘Facilitators were knowledgeable and well prepared’
- ‘This has been a wonderfully refreshing for me, but also to fully understand some basic concepts, especially in qualitative design’
- The workshop was very educative and we need more than two days’

APPENDIX (VI): QUESTIONNAIRE FOR THE PARTOGRAPH PROJECT

Gender (Please circle)	Female	Male		
Age (Please circle)	18-30,	31-45,	46-60,	60+

Year of qualification as a midwife	
Number of years' experience working as a midwife	
Highest academic qualification	
Role (Job title)	
Area of work e.g.; clinic, delivery suite etc	
Previous research experience	
Name of Hospital or institution	