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**ENGAGING THE USE OF EVIDENCE FOR TREATMENT OF UNCOMPLICATED MALARIA IN CHILDREN <5 IN CAMEROON.**

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**Objectives/aims**

To get evidence into decision making at clinical level in the management of uncomplicated malaria in children less than five years in Cameroon.

**Methods**

This evidence-implementation project used the JBI Practical Application of Clinical Evidence System (PACES) and Getting Research into Practice (GRiP) audit and feedback tool. The PACES and GRiP framework for promoting evidence-based healthcare involved three phases of activity: Phase 1: Stakeholder engagement and baseline audit data collection with identification of barriers to implementation; Phase 2: Design and implementation of strategies to improve practice through Getting Research into Practice; Phase 3: Phase 3: Follow-up audit post implementation of change strategy.

**Main findings**

We compared compliance with best-practice recommendations at baseline against a follow up compliance at 4 months following implementation of strategies identified using JBI GRiP Matrix. Compliance rates improved overall by 31% (R: 20 – 42) for all criteria and all sites with differences noticed between sites. We identified a total of 19 barriers and these could be stratified into clinician, community health workers', patients' and policy maker related barriers. Despite existing barriers to evidence implementation, getting research into practice is possible and does improve quality of care.