



THE UNIVERSITY
of ADELAIDE



CLINICAL FELLOWS PROJECT REPORT – 2018

Joanna Briggs Institute

Walbira Murray, Australia

Project: Contributing to the promotion of evidence-based practice in infant nutrition advice and interventions

Walbira Murray is a Research Officer with Central Australia Aboriginal Congress who participated in the Evidence-based Clinical Fellowship Program in 2018. Walbira's evidence-based implementation project focused on determining if current Interventions used by Central Australia Aboriginal Congress to promote and support infant nutrition are consistent and if they meet current National Infant Feeding Guidelines.

Central Australia Aboriginal Congress is committed to the improvement of Aboriginal health in Central Australia, and Aboriginal infants and young children account for a significant number of its clients.

The substantial health issues that affect many young children in the region have been well documented, but best practice and consistent culturally appropriate nutrition advice to caregivers of Aboriginal infants has the capacity to address some of these health issues.

Throughout their lives, many Indigenous people suffer major disorders of nutrition and growth. At birth, Indigenous babies are substantially lighter than non-Indigenous babies. Most significantly, the proportion of Indigenous babies of low birth weight is more than twice that of non-Indigenous babies.

From birth, the growth of most Indigenous infants tends to be satisfactory until breast milk becomes insufficient by itself, at which time they need complementary food and become more directly exposed to the substandard environment in which many Indigenous people live. At this time, they become vulnerable to a wide range of infections, in many cases entering the vicious synergistic cycle of infection-malnutrition.

Many Indigenous people carry this legacy of impaired growth into early adulthood, where it has a significant impact on the health of mothers, and of the next generation.

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Better evidence. Better outcomes.

Indeed, insufficient nutrition has many health outcomes for infants.

Under-nutrition early in life has major consequences for future educational, income and productivity outcomes as well as health outcomes. Under-nutrition diminishes the ability to fight infection; impairs the immune system and increases the risk of some infections; impairs growth; increases the chance of infant and young child mortality; heightens fatigue and apathy; and hinders cognitive and mental development.

While significant improvements in Aboriginal Health have been made, anaemia, wasting and growth faltering have been an issue for many infants and their caregivers in Central Australia. Population-based approaches for their prevention and management are required, but at the time of Walbira's project, Central Australia Aboriginal Congress did not have a framework for supporting staff to give culturally appropriate best practice nutrition advice to caregivers of infants.

Walbira participated in two weeks of intensive training as a part of the JBI Evidence-based Clinical Fellowship Program in Adelaide, and was mentored by a JBI Research Fellow during the development and implementation of her 6-month evidence-based project for the Program. Walbira's focus was on contributing to the promotion of evidence-based practice in infant nutrition advice and interventions, thereby improving clinicians' skills and confidence to enhance patient outcomes. At the same time, Walbira assessed compliance with evidence-based criteria regarding Aboriginal infant nutrition

advice given by clinicians to caregivers in Congress Clinics and Services.

Walbira used a mixed-methods approach in the evaluation project, integrating focus groups, observations, interviews and surveys with clinicians to identify barriers to high quality remote health service delivery.

Six months of data were collected. The baseline audit revealed a high level of compliance between current practice and best practice in all but one criterion: "Do healthcare staff receive education regarding infant nutrition?" Consequently, a bundled education strategy was developed and implemented to provide a best practice training intervention for all clinicians who provide infant feeding advice to caregivers. The training intervention included an Introduction to Solids workshop developed and delivered in conjunction with the Northern Territory Health Department and Congresses Dietitians and the Family First Partnership team.

The follow up audit demonstrated significantly improved outcomes across the Education for Clinicians best practice criteria.

The baseline audit clearly demonstrated that a high percentage of clinicians were not familiar with the National Infant Feeding Guidelines, or confident in using them.



The intervention, practical educational workshops covering the main points of the National Feeding Guidelines, was designed and delivered to improve clinicians' confidence and familiarity with using them. Eight weeks post training showed that 92% participants reported that their awareness of the Guidelines had grown as a result of the training and that 76% were applying the Guidelines in their practice.

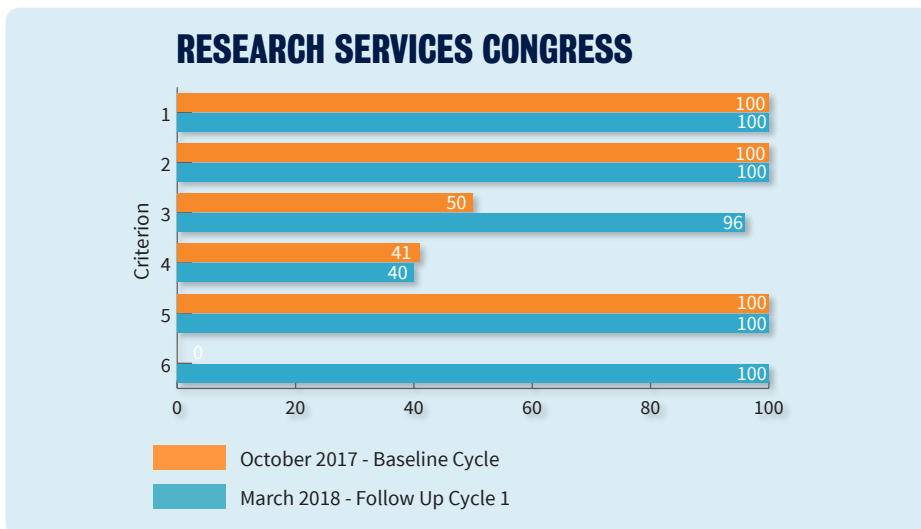
Walbira's evidence-implementation project findings reveal how clinical audits following JBI methodology may be used to promote best practice in infant nutrition interventions,

and that focused education and provision of relevant resources for clinicians can have an immediate and positive impact on their clinical practice.

By the end of Walbira's six-month evidence-based implementation project, the Public Health Officer of Congress had commenced implementing other infant nutrition training for staff.

Importantly, Walbira's project transformed attitudes toward interventions from having a passive to an active focus for all clinicians, with their focus directed to appropriate engagement with caregivers of infants. Importantly, future audits and training sessions are planned to ensure continuous improvement.

By promoting evidence-based practice in infant nutrition advice and interventions, and by assessing compliance with evidence-based criteria regarding Aboriginal infant nutrition advice given by clinicians to caregivers, Walbira has helped break the cycle of under-nutrition in generations, and the major consequences for future educational, income and productivity outcomes that can be associated with under-nutrition early in life.



Criteria Legend

1. At-risk infants and families are identified and receive extra assistance and support, such as regular follow-up. (25 of 25 samples taken)
2. Walk-in (or unbooked) appointments are provided for families identified as at-risk or who request support. (25 of 25 samples taken)
3. Multi-modal education (written, demonstrations and verbal) is provided to families. (25 of 25 samples taken)
4. Professional support (individual, group (peer) and telephone services) is provided to families (25 of 25 samples taken)
5. Access is provided by location of service, such as home visits, and/or transport to appointments is provided. (25 of 25 samples taken)
6. Healthcare staff have received education regarding infant nutrition. (25 of 25 samples taken)

FOR FURTHER ENQUIRIES

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