

IMPLEMENTATION OF EVIDENCE BASED PRACTICE BY OCCUPATIONAL THERAPISTS IN KENYA

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INTRODUCTION

Evidence-based practice (EBP) integrates scientific evidence, professional expertise, and client preferences to enhance patient outcomes. The use of EBP in the Occupational Therapy profession has become a global concept (Llott et al., 2006). EBP has become an expectation and a vehicle to advance the profession and ensure that Occupational Therapists (OTs) deliver quality services to their patients. Applying EBP ensures that therapists use effective interventions to achieve desired outcomes and contributes to best quality care (Lindstrom A.C. & Bernhardsson S., 2018).

“Evidence based Occupational Therapy demands the courage to question custom and practice; an openness to new ways of thinking and offering services proven to be effective” (Llott L., Taylor M.C., & Bolanos C., 2006. p. 38-41).

There's a need to facilitate research informed decision making in the clinical settings to enhance quality patient outcomes.

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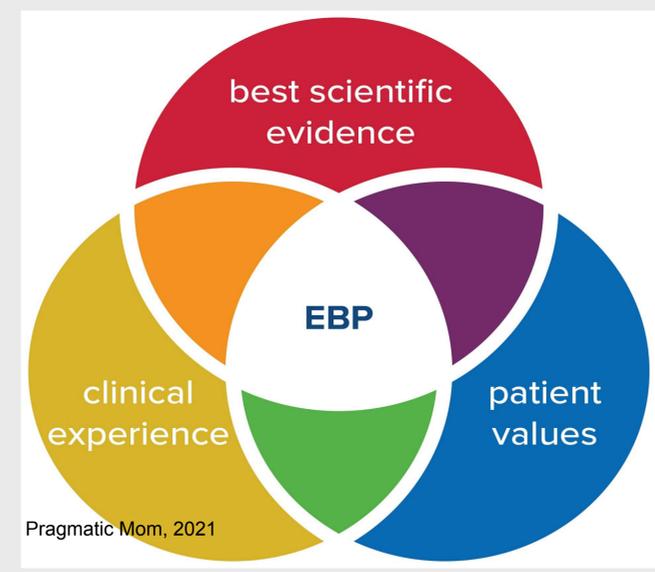
PROBLEM STATEMENT

Despite the global acceptance of EBP, its implementation among Occupational Therapists remains inconsistent. Existing studies indicate that while many OTs hold positive attitudes towards EBP, they face challenges such as limited knowledge, difficulty in interpreting statistical analyses, and lack of access to research evidence (Myers & Lotz, 2017; Nott et al., 2019)

Although numerous studies have explored the implementation of EBP among OTs in developed countries, there is a lack of research on this subject in sub-Saharan Africa. Specifically, no published studies have examined the adoption of EBP among Occupational Therapists in Kenya.

OBJECTIVES

- To evaluate the knowledge, abilities, and attitudes of Occupational Therapists in Kenya toward EBP
- Identify Barriers to implementation of EBP
- To explore the relationship between demographic characteristics (such as years of practice, education level, and location of study) and EBP implementation
- To provide recommendations for better integration of EBP into Occupational Therapy practice in Kenya



METHODS

A cross-sectional survey design with a quantitative approach to assess the knowledge, skills, and attitudes of OTs in Kenya regarding EBP will be employed. A structured electronic questionnaire adopted from the article by Jette et al. (2003) will be the instrument used. Adjustments were made for clarity, cultural adaptations and relevance. The questionnaire will be distributed in the Kenya Occupational Therapy Association (KOTA) WhatsApp platform with permission and approved consent. The study will be conducted among Occupational Therapists working in various settings across Kenya, targeting a minimum sample size of 29 to attain significance based on a power analysis calculation. Occupational Therapy students who haven't finished their professional study will be excluded. Participants anonymity will be ensured through data de-identification.

DATA ANALYSIS

Quantitative data will be analyzed using descriptive statistics to summarize demographic characteristics and survey responses. A Spearman's Rank Correlation will be used to identify relationships in data. Results will be presented in tables, graphs, and charts.

DISSEMINATION OF FINDINGS

The findings of the study will be disseminated at the annual KOTA scientific conference and seminar. Implications for OT practice will be discussed with emphasis on how the findings can influence Occupational Therapy practice to enhance patient outcomes through digital platforms such as, CMEs and Webinars. The findings also will be shared with various heads of OT Departments in clinical settings and academic institutions to facilitate improvement on patient care and support EBP integration into curriculum.

EXPECTED OUTCOMES

- The findings of this study will help to better understand the current state of EBP implementation among OTs in Kenya.
- Identifying knowledge gaps, competency shortages, and impediments to EBP adoption will aid in the development of effective EBP integration strategies in clinical practice.
- The findings could help to shape curriculum creation, continuous professional development (CPD) programs, and regulatory reforms that promote evidence-based decision-making in Occupational Therapy practice in Kenya.

This proposal is in progress and will be reviewed by the Institutional Scientific and Ethical Review Committee (ISERC) of Kijabe Hospital.

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REFERENCES
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