# Using a blended-learning approach and mHealth to improve competence on antimicrobial stewardship for healthcare providers in Nigeria: an action research

Kelechi Eguzo<sup>1</sup>, Chukwuemeka Oluoha<sup>2</sup>, Usenime Akpanudo<sup>3</sup>, Chinenye Onodugo<sup>4</sup>, Kingsley Nnah<sup>5</sup>, Peace Egharevba<sup>6</sup>, Peace Ndukwe<sup>7</sup>, Onyechere Nwokocha<sup>7</sup>

- 1. Marjorie Bash Foundation
- 2. Abia State University
- 3. Harding University
- 4. University of Nigeria Teaching Hospital
- 5. Marjorie Bash College of Health Sciences and Technology
- 6. University of Benin
- 7. Abia State Ministry of Health

## Abstract

### Purpose

Above 50% of Nigerians who take medications on any given day consume antibiotics, while up to 22% of cases of malaria are treated with antibiotics. The prevalent inappropriate use of antibiotics with relatively poor knowledge can effectively be addressed through education. This project explored the impact of a blended learning course and mHealth intervention on the competence of healthcare professionals (HCP) regarding antimicrobial stewardship in Abia State. The primary outcome was a change in content knowledge before and after the course.

### Methods

This was mixed-methods action research involving doctors, nurses, medical laboratory scientists, and pharmacists. Blended learning course was deployed using Google Classroom and in-person workshop. mHealth intervention included the Spectrum App for antibiotics decision support and the Bugs n Drugs App for reporting antimicrobial susceptibility as well as prescriptions. Quantitative data included surveys and quizzes. Qualitative data were discussion forums. Data analysis involved descriptive statistics and student t-tests. Spearman's correlation coefficient was used to compare trends in antibiotics prescriptions. Thematic analysis was used to analyze qualitative data.

#### Results

The study involved 213 HCPs, with average age of 33.4 ( $\pm$ 10.6) years and about 10.7 ( $\pm$ 8.8) years in practice. At registration, up to 33% of participants prescribed antibiotics for upper respiratory tract infections. Participants who completed blended learning gained 16.42% in knowledge scores compared with those who completed online only (3.24%, p<0.001). "*The knowledge gotten during the class studies even the playlet during the physical workshop at Aba made me not to jump into prescribing antibiotics for simple cough anymore*".

### Conclusion

Study shows that people in the blended-learning group had higher improvements in knowledge scores, possibly due to their having more exposure to the content compared to those in the online-only group. More continuing education should adopt the blended learning approach.

**Keywords:** Antimicrobial Stewardship, mHealth, Health Informatics, Health Services Research, Continuing education, Nigeria, Prescriptions, Respiratory Tract Infections, Malaria