

Meeting report

Workshop report: building biostatistics capacity in Sub-saharan Africa-taking action

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Key words: Biostatistics, Capacity building, sub Saharan Africa, workshop

Received: 25/11/2014 - Accepted: 25/11/2014 - Published: 02/07/2015

Abstract

To address the need for capacity development in biostatistics in the Sub-Saharan African region and to move recommendations from previous workshops into action, we brought together biostatisticians from the region to provide an opportunity to brainstorm biostatistics capacity development in Africa, how to enhance what is being done and establish collaborative links to work together. In order to move key recommendations forward working groups were established to focus on the structure and content of a MSc Biostatistics and on the development of a concept paper for an Africa Centre for Biostatistics Excellence.

Pan African Medical Journal. 2015; 21:167 doi:10.11604/pamj.2015.21.167.5827

This article is available online at: http://www.panafrican-med-journal.com/content/article/21/167/full/

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Introduction

The universal shortage of biostatisticians has been documented in many countries including the US [1] and Canada [2]. In particular, there remains a critical shortage of biostatistics expertise in the developing world including Sub Saharan Africa (SSA). This has resulted in an overreliance on inputs from biostatisticians sourced from economically developed countries or the pharmaceutical industry for writing competitive grants, leading the design of trials, executing statistical procedures, conducting advanced data analysis, publishing in high profile journals and teaching biostatistics at the postgraduate level. The few biostatisticians based at universities or research institutions in SSA are generally overburdened and unable to cope with the demand for their expertise. Furthermore, important emerging fields, such as genetic/genomic research, machine/statistical learning including systematic reviews for evidence sysnthesis and gudeline development, require the application of new statistical methods experience that is often lacking in Africa. Given the paradigm of Evidence Based Health Care that involves the review, synthesis and appraisal of evidence from various research studies to guide policy formulation and practice decisions, biostatistics is a core skill [3,4]. The need for capacity development in biostatistics in the SSA region has been recognized [5,6]. Good statistics departments do exist at SSA universities, however, they focus almost exclusively on training studentsfor careers in the business and financial sectors, as well as for careers at research and academic institutions, rather than for careers in the biomedical field. Those statistics departments offering teaching in biostatistics generally do not link up with health sciences faculties, which mean that students do not develop apractical understanding of the clinical context, or worse, never have the opportunity to fully appreciate the value of statistics in health and medical research. What is urgently required is a sustained response to the need for biostatistics strengthening in SSA. A cadre of professional/academic biostatisticians is needed to play a leadership role in developing the academic discipline of biostatistics, contribute to multidisciplinary, collaborative research in the health sciences and train the next generation of biostatisticians.

The National Institutes of Allergy and Infectious Diseases (NIAID) demonstrated interest in strengthening biostatistics capacity in SSA by sponsoring two workshops: one in 2009 in the Unites States and another in 2011 in Gaborone, Botswana[5]. Researchers from both the United States and SSA attended the workshop whose principal

aim was to redefine the aproach to capacity building of this key area to research and development in Africa. Participants at the workshop noted that there were large gaps in biostatistics and appropriate data management skills, hence the need for project biostatisticians based at the same institution as researchers. But it was also noted that these few biostatiticians are only available to the project and not others who also have needs for such skills. This has resulted in a lack of experience sharing with the wider health research community. The workshop also noted that the project biostatisticians are either sponsored by the developed world or they are students from the same developed world who are gaining experience from SSA where there are rich resources of data. Just as with many other industries, capacity in SSA needs to be improved to provide value-added to the research data produced in the region. The workshops concluded that training programs aimed at building both long-term and short-term capacity were needed. The key recommendation from the workshops was that SSA universities should educate and retain in-country biostatisticians at both the masters and doctoral level. Based on the deliberations of these previous workshops, the focus ofthe workshop discussed in this paper, was to move the recommendations from the previous Gaborone workshop [5] into action and, importantly, to establish collaborations between biostatisticians in the region as well as share experiences in building biostatistics capacity. This report details the workshop activities.

Workshop report

Location and participants

From the 8-10 July 2014, the Biostatistics Unit, Centre for Evidence-based Health Care, Faculty of Medicine and Health Sciences, Stellenbosch University, hosted the workshop Building Biostatistics Capacity in sub Saharan Africa: Taking Action in Cape Town, South Africa. Thisbrought together a group of experienced biostatisticians from the region (**Table 1**, **Figure 1**). Using the participant list of the NIH Botswana workshop, networks in South Africa and the Medical Education Partnership Iniative (MEPI) schools we specifically identified and invited biostatisticians working within the African region. Twenty nine participants representating Universities of KwaZulu Natal, Witwatersrand (WITS), Nairobi, Botswana, Zimbabwe, Ghana, Zambia, Kilimanjaro Christian Medical and Stellenbosch (with representation from South African Centre for

Epidemiological Modelling and Analysis (SACEMA), Department of Statistics and Actuarial Science, and Faculty of Medicine and Health Sciences) as well as the Kenya Medical Research Institute (KEMRI) joined and others sent apologies and indicated that they are interested in continuing the conversations outside of the meeting.

Aim and objectives

The purpose of the workshop was to establish collaborations between biostatisticians in the region as well as to share experiences in building biostatistics capacity. Specific objectives of the workshop were to 1) discuss the structure of a Master's program in biostatistics 2) establish available human resources to facilitate such a program 3) discuss potential areas of collaboration in building biostatistics capacity 4) identify other potential biostatistics training models 5) learn and share experiences from colleagues involved in Biostatistics training 6) discuss other issues affecting biostatisticians within the region e.g. enhancing methodological research productivity, mentorship, and promoting the role of the biostatistician in collaborative research 7) discuss capacity building in meta-analysis and 8) discuss the potential for an Africa Center for Biostatistical Excellence and regional units. The focus was on building concensus and capacity across the region rather than concentrate expertise in one place.

Facilitators

Workshop facilitators brought a wealth of multidisciplinary experience. Facilitators included a professor in biostatistics, from Lesotho and now working at McMaster University; the head of the Department of Interdisciplinary Health Sciences at the Faculty of Medicine and Health Sciences, Stellenbosch University; the head of the Department of Statistics and Actuarial Science, Stellenbosch University; and staff from the Centre for Evidence-based Health Care and South African Cochrane Centre. Participants from regional universities shared their experiences in programmatic offering through formal presentations and discussion.

Programme

Over 3 days participants engaged to discuss and share experiences. **Table 2**outlines the 3 day programme. It provided an opportunity to brainstorm biostatistics capacity development in Africa and how to enhance what is being done and establish and further collaborative links to work together. After considering the

key role of biostatisticians in the design, conduct, analysis and reporting of research; the limited number of biostatisticians in the region and the paucity of masters programmes in the region, participants were very supportive of working together to increase and enhance the number of such programmes in the region. Time was spent on discussing the structure of a Master's program in biostatistics, lessons learnt from other similar programmes, the proposed competencies (Table 3), and collaboration in building biostatistics capacity. Graduates of these programmes should be empowered to play leading roles with respect to consulting, methodological research, management, entrepreneurship and mentorship in the field of Biostatistics. Another important related point was to improve the Biostatistics literacy among researchers, medical personnel, non-statisticians and the public through good teaching and dissemination. Underpinning all discussions and planning were the shared mission that itis now time for action and that by working together, both within country and across countries in the region, we will achieve much more. Role players from different institutions in the Cape Town area realised that collaboration between them to build Biostatistics capacity is of the outmost importance. It was also encouraging to observe that these institutions accepted the challenge to work together in structuring a jointly offered Masters Programme in Biostatistics and that the other participants in the workshop sanctioned this vision. A half-day session was spent on meta-analysis. It commenced with a presentation and discussion on Reducing waste in research: role of systematic reviews [7] followed by a presentation on Uses and misuses of meta-analysis. We then reflected on current training initiatives in meta-analysis. These include formal training, mentoring, online tutorials, learning by doing reviews and metaanalysis, and peer review. In building capacity in meta-analysis, participants raised the need for collaboration, sharing expertise in the region, mentorship, linking authors of systematic reviews with Biostatisticians, training, resources and for getting involved in doing reviews.

Recommendations for action

To move key recommendations forward working groups were established. One is focusing on the structure and content of a MSc Biostatistics. This group is mapping existing programmes (experiences, structure), engaging with other stakeholders (academic institutions, research institutions, those who could not attend the workshop, etc.), and thinking through programmatic offering. Another group is working on the development of a concept

paper for an Africa Centre for Biostatistics Excellence. The group also worked together to apply for a Wellcome Trust DELTAS grant which has consolidated the experience and enabled us to build confidence that we can make this happen. The two working groups hold monthly teleconferences to provide updates on their progress and discuss ways to foster collaborations and partnerships in biostatistical capacity across institutions in SSA region.

Evaluation

Participants liked the multidisciplinary approach and geographical distribution of workshop participants. They particularly liked the networking and sharing similar experiences, openness, opportunity for sharing ideas and having discussions, the rich interaction, and the chance to meet a range of people with similar interests. Some participants wanted their role to be more explictly clarfied prior to the workshop and wanted more content on meta-analysis. **Table 4** summarises evaluation feedback. Overall the responses from participants' evaluation of the workshop suggests that participants rated the workshop as excellent and felt that the set objectives were met. Given that not all regional biostatisticians could join the workshop there is a need to continue the engagement on biostatistics capacity development.

Conclusion

By working together, and by supporting each other, regional institutions and biostatiaticians can address the need for biostatistics strengthening in Sub-Saharam Africa. "If you want to go fast, go alone. If you want to go far, go together. African Proverb"

Competing interests

Authors declare no competing interest.

Authors' contributions

All authors have read and agreed to the final version of this manuscript and have equally contributed to its content and to the management of the case.

Acknowledgments

The workshop was supported by Stellenbosch University Rural Medical Education Partnership Initiative (SURMEPI) through US President's Emergency Plan for AIDS relief (PEPFAR) through HRSA under the terms of T84HA21652; Effective Health Care Research Consortium www.evidence4health.orgfunded through DFID; and International Research Training Planning Grant (1D71TW009758-01) funded through the National Institutes of Health (NIH) and Fogarty International Center (FIC). We would like to acknowledge the valuable contributions of the workshop participants resulting in this manuscript.

Tables and figures

Table 1: Workshop participants

Table 2: Workshop outline

Table 3: Defining Biostatistics competencies

Table 4: Evaluation feedback (n=15)

Figure 1: Geographic distribution of workshop participants

(number) from the sub-saharan African region

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Table	• 1: Workshop parti	Name Representing Thomas University of Witwatersrand (WITS), South Africa Samuel Kwame Nkrumah University of Science and Technology (KNUST), Ghana Victoria African Centre for Global Health and Social Transformation (ACHEST), Uganda Usuf University of Stellenbosch, South Africa Willie University of Stellenbosch, South Africa Wim South African Centre for Epidemiological Modelling and Analysis (SACEMA), South Africa Greg Kenya Medical Research Institute& University of Oxford Therese University of Stellenbosch, South Africa Anneke Center for the AIDS Programme of Research in South Africa (CAPRISA), University of KwaZulu Natal, South Africa Michael University of Stellenbosch, South Africa University of Stellenbosch, South Africa University of Zambia, Zambia Chris University of Witwatersrand (WITS), South Africa Eustasius University of Tambia, Zambia Moize University of Tambia, Zambia Moize University of KwaZulu NatalMedical Education Partnership Iniative (MEPI), South Africa Francis University of Nairobi, Kenya Njoku University of Stellenbosch, South Africa						
No.	Surname	Name	Representing					
1	Achia	Thomas	University of Witwatersrand (WITS), South Africa					
2	Blay	Samuel	Kwame Nkrumah University of Science and Technology (KNUST), Ghana					
3	Bukirwa	Victoria	African Centre for Global Health and Social Transformation (ACHEST), Uganda					
4	Chikte	Usuf	University of Stellenbosch, South Africa					
5	Conradie	Willie	University of Stellenbosch, South Africa					
6	Delva	Wim	South African Centre for Epidemiological Modelling and Analysis (SACEMA), South Africa					
7	Esterhuizen	Tonya	University of Stellenbosch, South Africa					
8	Fegan	Greg	Kenya Medical Research Institute& University of Oxford					
9	Fish	Therese	University of Stellenbosch, South Africa					
10	Grobler	Anneke						
11	Machekano	Rhoderick	University of Stellenbosch, South Africa					
12	Mccaul	Michael	University of Stellenbosch, South Africa					
13	Michelo	Charles	University of Zambia, Zambia					
14	Muller	Chris	University of Stellenbosch, South Africa					
15	Musenge	Eustasius	University of Witwatersrand (WITS), South Africa					
16	Musonda	Patrick	University of Zambia, Zambia					
17	Muzigaba	Moize	University of KwaZulu NatalMedical Education Partnership Iniative (MEPI), South Africa					
18	Nieuwoudt	Martin	South African Centre for Epidemiological Modelling and Analysis (SACEMA), South Africa					
19	Njiri	Francis	University of Nairobi, Kenya					
20	Ola Ama	Njoku	University of Botswana, Botswana					
21	Osanjo	George	University of Nairobi, Kenya					
22	Rusakaniko	Simba	University of Zimbabwe, Zimbabwe					
23	Sartorius	Benn	University of KwaZulu NatalMedical Education Partnership Iniative (MEPI),South Africa					
24	Thabane	Lehana	McMaster University, Canada					
25	Todd	Jim	London School of Hygiene and Tropical Medicine, UK and Kilimanjaro Christian Medical College Tanzania					
26	Van Schalkwyk	Cari	South African Centre for Epidemiological Modelling and Analysis (SACEMA), South Africa					
27	Welte	Alex	South African Centre for Epidemiological Modelling and Analysis (SACEMA), South Africa					
28	Young	Taryn	University of Stellenbosch, South Africa					
29	Zunza	Moleen	University of Stellenbosch, South Africa					

Table 2: Workshop outline						
Objectives						
Day 1	Day 2	Day 3				
Learn and share experiences from	Identify other potential biostatistics	Discuss capacity building in meta-				
colleagues involved in Biostatistics	training models	analysis				
training						
Discuss the structure of a Master's	Discuss potential areas of collaboration					
program in biostatistics	in building biostatistics capacity					
Discuss other issues affecting	Discuss the potential for an Africa Center					
biostatisticians within the region	for Biostatistical Excellence and regional					
	units.					
Content						
Day 1	Day 2 Day 3					
Introductions and Workshop overview	Experience with course delivery Reducing waste in research					
	methods:	systematic reviews				
	Models of course delivery and					
	assessment					
	Emerging technology for higher					
	education					
Capacity-building in biostatistics for	Building Collaborations:	Uses and misuses of meta-analysis				
better health and economic development	Enhancing teaching collaborations					
of Sub-Saharan Africa	Methodological Research					
Experience in Biostatistics capacity	Proposal for an Africa Centre for	Current training initiatives in meta-				
building in Sub-Saharan Africa	Biostatistical Excellence	analysis				
Masters programme in Biostatistics:		Building capacity in meta-analysis				
defining competencies						

Table 3: Defining Biostatistics competence	ies						
Biostatistics	Biostatistical reasoning						
	Statistical theory and concepts						
	Practical Analytical skills						
Epidemiology /research methods/ethics	Asking the right questions						
	Study design						
	Proposal and grant writing						
	Systematic reviews						
	Research ethics						
Computing and data management	Data management						
	Quality control						
	Advanced statistical programming						
Support skills	Collaboration						
	Communication – oral and written						
	Consulting skills						
	Life-long learning						
	Project management, time management, people						
	management						
	Leadership skills						
	Entrepreneurial skills						
	Mentorship skills						
Methodological research	Statistical methodological research						
	Critical analysis						
	Innovative thinking						

Please RATE these workshop aspects	Poor					Excellent	
	1	2	3	4	5	6	7
Format / Agenda			2	3	4	4	2
Length of workshop				1	8	5	1
Relevance				1	3	6	5
Opportunity to contribute					3	8	4
Interactions among participants and presenters				1	2	6	6
Workshop site and facilities	1	1	1	1	3	5	3
TO WHAT EXTENT	Not at all					Completely	
Do you think these objectives were	1	2	3	4	5	6	7
met?							
1. Discuss structure of Master's program in				9	4	2	
Biostatistics							
2. Establish available human resources	1		4	5	3	1	1
3. Discuss potential areas of collaboration in			1	5	5	4	
building Biostatistics Capacity							
4. Identify other potential biostatistics	1			2	9	3	
training models							
5. Learn and share experiences from				2	8	2	3
colleagues							
6. Discuss issues affecting biostatisticians		1	1	3	7	2	1
with the region							
7. Discuss potential for an Africa Center for			2	4	3	5	1
Biostatistical Excellence							
Did the workshop meet your expectations?				4	4	6	1
Would you attend a similar workshop again?			1	2	4	6	2

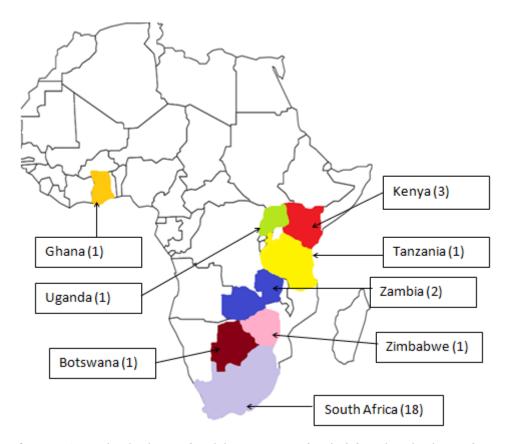


Figure 1: Geographic distribution of workshop participants (number) from the sub-saharan African region