

# Call for Abstracts

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Knowledge Utilization (KU) Colloquium 2020  
**July 1<sup>st</sup> to 3<sup>rd</sup>, 2020 at Solstrand, Bergen, Norway**

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On behalf of the International Organizing Committee, you are invited to submit an abstract for the 20<sup>th</sup> KU Colloquium for researchers, practitioners and students working in KU and knowledge translation. Please use the template below to format your abstract.

The presentation format will be a 3-minute single slide e-poster. Presenters will be divided into three groups according to their thematic approaches. Reflecting on the presentations, senior researchers will facilitate plenary discussions between the presenters and the audience of issues and take-home messages.

Submissions are due: **March 1<sup>st</sup>, 2020** to [helene.oestreich@hvl.no](mailto:helene.oestreich@hvl.no)

# Abstract Submission Template

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Please complete the following template when submitting your abstract. Please note that tables and figures will not be accepted.

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## Abstract Information

**Title:** Utilization of diagnostics in India: An exploration of context and behavior

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## Abstract

**(250 word maximum)**

**Purpose:** Diagnostics can assist physicians in determining the cause of illness and thereby target antibiotic use. An array of diagnostics is available at the pediatric outpatient department of RD Gardi Medical College in central India, however their utilization by patients is reportedly low. We aimed to explore factors that influence the utilization of diagnostics among caregivers of sick children

**Methods:** Three months of observations and a one-month service evaluation of the utilization of prescribed antibiotics were conducted at the pediatric outpatient department. Forty-three semi-structured interviews were held with caregivers purposely sampled from the service evaluation and thematic analysis was conducted inductively. The COM-B model was employed to explore the findings from a behavioral perspective. The multiple methods of investigation applied allowed for triangulation and cross-validation of the findings.

**Results:** Three key themes were identified that influenced caregivers' behavior. Caregivers trusted and understood the importance of diagnostics but their acceptance waivered depending on the severity of illness and preference to treat their child directly with medicines. Caregivers struggled to access diagnostics, describing delays in testing, receiving results and follow-up further complicated by travel time, distance and competing priorities such as work. Diagnostics were relatively cheap compared to other healthcare facilities however patients cited the cost of the test, travel expense and the loss of wages for missing work as barriers for getting the tests done and returning for follow-up.

**Conclusions:** Diagnostics are generally accepted but improvements in accessibility and affordability could increase their utilization and thereby utility to target antibiotic use.

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