

### Multi-level capacity strengthening for applied health systems research enhances country ownership of Skin NTD interventions and promotes sustainability



#### Summary / Synopsis

Capacity strengthening for applied health systems research requires action at multiple levels: at the individual level (for example nurturing a cohort of interdisciplinary research fellows); at the organisational level (for example developing systems and processes for safeguarding); and at the national level (for example capacity strengthening of the health system to utilise research evidence). Partnerships with co-researchers (including persons affected, community health workers, traditional and faith healers) has strengthened the capacity of the whole research team and built inclusive and sustainable research ecosystems for impact. REDRESS has enhanced capacity for health systems research and delivery across all health systems levels and stakeholders which has promoted country ownership and sustainability of REDRESS evidence.





# Background

#### Why is capacity strengthening important within REDRESS?

REDRESS is a research partnership focused on reducing the burden of severe stigmatizing skin diseases (SSSDs) in Liberia through person-centred approaches, stigma reduction, and health systems strengthening, in partnership with the Ministry of Health, research and NGO partners. Health systems strengthening requires capacity strengthening at multiple levels and should focus on the generation and use of research evidence alongside skills building for service providers. Capacity strengthening initiatives can lead to increased sustainability of interventions by empowering individuals; including those affected by NTDs, researchers and health workers; and institutions with the tools to advocate for the integration of NTDs into the health system within Liberia. REDRESS implemented multiple capacity strengthening activities across all levels of the system as guided by our capacity strengthening strategy.



# How did we strengthen capacity within REDRESS?

#### Individual Level: Strengthening skills for research design and delivery

**Support a cohort of Research Fellows and PhD students.** REDRESS recruited and supported 4 multidisciplinary <u>Research Fellows</u> (Patient Engagement and Person-Centred Approaches, Human Resources for Health, Clinical epidemiology and laboratory systems strengthening and Health financing). REDRESS has also supported 3 ongoing PhD students, who are taking forward innovative and complementary research projects. 2 are based in UK and one in Liberia (the NTD programme director in Liberia).

**Develop measurable mentorship and work plans.** REDRESS established mentorship and supportive supervision processes. Each Research Fellow was assigned a mentor and completed a Personal Development Plan (PDP), articulating career goals and rating their progress through time against core skills development areas as informed by the UK Researcher Development Framework. PDPs were created at the start of REDRESS and evaluated at mid-point and end points of REDRESS reflecting upon Research Fellows' capacity within key areas such as research methods, analysis, use of tools and software. This included presentation skills, conference attendance and leadership, with fellows highlighting areas that that were most meaningful to them.

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Listen: Reflections of research fellows

Centre lived experience. Co-researchers have been an integral part of the team, providing unique insight and mentorship based on their lived experience of skin NTDs and working within the Liberian health system. Co-researchers have been mentored and engaged throughout the research process, from inception, data collection, intervention design, and evaluation.



**Read: Empowerment case study** 



Address power and participation using innovative participatory methods. REDRESS conducted training and utilised inclusive research techniques (e.g. photovoice, social mapping and body mapping), to enable gendered co-analysis processes to understand and challenge power imbalances within the health system in Liberia. Emphasising community ownership and expertise from individuals with lived experience centred them as the "experts" from whom we seek to learn.

**Promote opportunities and celebrate success through conference attendance, training on social media, blogs and podcasts.** We mentored a cohort of early and mid-career research fellows and co-researchers to submit abstracts and present at global conferences (e.g. Hannah Berrian presented at the first WHO Skin NTDs meeting, and Wede Tate at the International Community Health Worker Symposium 2023, and John Solunta Smith presented at the African Health Economics Association). Emmanuel Zaizay, a co-researcher with lived experience presented at <u>NNN conference</u> and recorded a podcast on his experiences. He also presented at COR NTD and IDEA. Emmanuel has reflected on how exposure at international events has supported his advocacy journey. We also marked International Day of Women and Girls in Science, highlighting the role of female research fellows through blog writing.

**Multi-directional peer mentorship, knowledge exchange and first authorship.** A series of skills building workshops on writing and publishing, qualitative and quantitative research methodologies, communication and dissemination skills, ethics processes and safeguarding were facilitated for Research Fellows and early-mid career researchers who then shared their knowledge with co-researchers fostering mutual learning and capacity building. All research fellows have been mentored to publish papers as first authors. Emmanuel Zaizay and Decontee Dennis (co-researchers and patient advocates) have published a paper documenting their journey as a person affected to peer advocate.

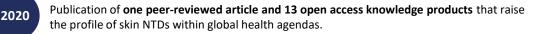


Partnerships with co-researchers (including persons affected, CHAs, traditional and faith healers) has strengthened the capacity of the research team and built inclusive and equitable health systems design. The participation of co-researchers has brought impact both individually and for the community they live and work in. Co-researchers wrote a blog together reflecting on their participation within REDRESS after taking part in ripple effect mapping workshops.

Sustained, context-embedded and evidence informed capacity strengthening of frontline health workers (formal and informal) has been key to the diagnosis, management and referral of skin NTDs cases, and enabling person centred care.

Read: Case Studies on Training, Empowerment and Case Detection

#### What have we produced in REDRESS?



2021

2022

2023

**Collaborative development of 5 articles and 4 additional linked papers and 34 open access knowledge products** that raise the profile of skin NTDs and approaches to integrated inclusive person-centred health systems strengthening within global health agendas.

Collaborative development of **8 articles and 31 open access knowledge products** that raise the profile of skin NTDs and approaches to integrated inclusive person-centred health systems strengthening within global health agendas.

Collaborative development of **12 articles and 45 open access knowledge products** that raise the profile of skin NTDs and approaches to integrated inclusive person-centred health systems strengthening within global health agendas.

## Institutional Level: Creating a supportive environment for applied health systems research

REDRESS supported the development of research management systems across our partner institutions in Liberia by:



**Establishing clear and transparent staff recruitment processes and procedures,** including mentorship on interview questioning and assessment processes.

**Supporting the development of clear safeguarding risk assessment processes** and reporting structures. Safeguarding reflections were held after data collection within Liberia to identify areas of concern and consideration. Colleagues discussed key learnings around cultural awareness, safety and reporting and collaboratively created an individual and institutional action plan for advice and guidance in future field visits and clear lines of reporting for any safeguarding concerns raised.

Supported the implementation of appropriate Infection Prevention and Control Procedures for the COVID-19 pandemic in line with Ministry of Health Guidance (NB. Expertise in this area came internally from within Liberia and also served as a learning process for partners from the global north).



**Facilitated collaboration between local implementing (non-governmental) and research partners,** which was critical to shaping the future of health policy and systems research in Liberia.

**Supported the managerial, financial and administrative structures of each institution** by engaging with staff in these areas and collaboratively deciding on suitable training courses for the NGO sector that could support them to achieve their goals. Two staff members successfully completed the Project management Dpro certification and a further two staff members successfully completed the financial management Dpro process. All four will now have the opportunity to sit formal exams that will provide a formal certification to their institutions in the long-term management of research projects and the effective management of NGO funding streams.

#### National Level: Using the products of research to shape programme and policy reform

Supporting policy dialogue and improving utilisation of research evidence in the design and delivery of skin NTD services. REDRESS developed foundations for this through consistent stakeholder engagement from the outset which are essential to our participatory action research approach. Engagement of the Ministry of Health Research Unit within capacity strengthening activities was facilitated through REDRESS including participation in our monthly webinar series.

In an external evaluation conducted for NIHR by Ecorys, an MoH official noted that REDRESS had supported his knowledge on qualitative research through a combination of learning by doing and mentoring:

"I would never have had someone support me to learn how to use NVivo for data analysis if REDRESS had not provided the budget for this."

MoH officials have also learned about community engagement, participatory research and how to share evidence at the sub-region level.



**Established a Ministry of Health Advisory Board** that brings together all sectors of the Ministry of Health facilitates better intra-sectoral action including the NTD program, Mental Health, Community Health, Laboratory and Diagnostic Unit and Health Promotion departments.



Focusing on country ownership through our participatory processes has supported sustainability with the REDRESS intervention, which is now being scaled-up by the Ministry of Health through the TRANSFORM programme.



REDRESS' Capacity Strengthening and Mentorship strategies have been recognized, and scored a 4 (top mark) in an external NIHR evaluation conducted by Ecorys and won 1st prize for the <u>TDR</u> <u>Global crowdsourcing open call in Equity and Inclusivity in Research Mentorship</u>.





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