Research Uptake

maximising the impact of research

14 Aug 2013, 12.30 PM – 2 PM
HSRC Seminar Series
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programme for improving mental health care
Evidence on scaling-up mental health services for development
Outline

- Terms and Concepts
- What is Research Uptake?
- Whose job is it to do promote the uptake of research
- A case of PRIME

  - RU in the context of PRIME’s M&E Strategy?
  - Determining Objectives
  - Identifying & Analysing the Stakeholders
  - Developing a Strategic Plan
  - Dissemination & Communication Channels
  - Evaluating Impact of the Strategy
  - Moving Forward: Plans & Challenges
Terms and Concepts

Science Communication

Science / Knowledge Utilisation

Evidence-based Medicine/Policy

Knowledge Translation

Knowledge Exchange

‘Diffusion of Innovation’

Knowledge Transfer

Translational Research

Getting Research into Policy and Practice (GRIPP)

Research Uptake
What is Research **Uptake**?

”intentional appropriation of research findings or results by scientific and extra-scientific actors”

(CREST 2012)
What is Research Uptake?

- DFID Framework for Research Uptake (July, 2011)

Source: DFID Research Uptake Team Presentation for RPC’s (DFID, 2011)
What is Research Uptake?

- Set of purposeful activities that:
  - Stimulate end users of research to become aware of, access and apply research knowledge; **DD for research**
  - creates an enabling environment that connects research with end users in policy & practice **SS of research**
Whose job is it to promote RU?

- Researchers/Academics?
- Research Uptake/Knowledge Translation Professionals?
- Media/Communication Experts?
- Institutions?
- Civil Society Organisations?

What do you think?
A case of PRIME
The purpose of PRIME is to generate world class research on the implementation and scaling up of treatment programmes for priority mental disorders in primary and maternal health care contexts in low resource settings.
A partnership between researchers & policy makers

“The most exciting thing about PRIME is the fact that Ministries of Health in 5 countries, and the WHO, have joined mental health research leaders as equal partners.”

Prof. Vikram Patel, PRIME Research Director
# Research – Policy Partnership

<table>
<thead>
<tr>
<th>Country</th>
<th>Research</th>
<th>Policy</th>
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<tbody>
<tr>
<td>South Africa</td>
<td>UCT/UKZN/HS RC</td>
<td>NDoH</td>
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<tr>
<td>Ethiopia</td>
<td>AAU</td>
<td>MoH</td>
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<td>Uganda</td>
<td>Makerere/Butabika Hospital</td>
<td>MoH</td>
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<td>India</td>
<td>PHFI</td>
<td>MoH</td>
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<td>Nepal</td>
<td>TPO Nepal</td>
<td>MoH</td>
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<table>
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<tr>
<th>Research / Civil Society</th>
<th>Policy</th>
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<tr>
<td>CGMH / Basic Needs</td>
<td>WHO</td>
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Research Design

1. **Situational Analysis** completed
   - Contextual background of the mental health system in the selected District in each country (e.g. # of staff, # of facilities see next slide)

2. **Facility Survey**
   - Assesses changes in case detection & treatment over time

3. **Community Survey**
   - Assesses changes in the coverage of MH services & stigma/discrimination
   - Treatment gap data
   - Prevalence of mental illness
   - Help seeking behaviour
   - Knowledge, Attitudes & Behaviour (KAB)

4. **Cohort Study**
   - Studies of cohorts of individuals treated by the mental health care plans (Effect of PRIME MHCP on social, economic and health outcomes)

5. **Case Study**
   - Case studies of District level mental health systems
   - Description of clinics & impact of training

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**PRIME**

Programme for Improving Mental Health Care
Motivation

Motivation for improving mental health care

- Research Uptake
- Mental Health Services
- Development

Developing Research Capacity

Building Sustainable Partnerships
How does it fit into PRIME’s M&E Strategy?

Theory of Change
Research Uptake Strategy

• Concepts presented at 1\textsuperscript{st} Meeting (Cape Town)

• Cross country strategy formulated in consultation with all partners, including MoH in countries

• Cross-country RU Strategy presented at 2\textsuperscript{nd} Meeting (Uganda)
Objectives

1. Public (incl. media & policy champions)
2. Researchers & Health practitioners
3. People affected by mental illnesses (users), their families & communities
4. Policymakers
Key messaging

- Adapted for different audiences
- Includes:
  - Emphasizing impact of mental illnesses, esp priority disorders (alcohol abuse, depression, psychosis, epilepsy)
  - Role of evidence-based mental health care and systems in scaling-up mental health services
  - Benefits of integrating mental health into routine maternal and primary health care
  - Developmental benefits of addressing the mental health ‘treatment gap’
programme for improving mental health care
PRIME Stakeholders

"EACH OF YOU HAS BEEN GIVEN A SIMPLE, YET POWERFUL TOOL..."
Analysing Stakeholders

• A technique for generating knowledge about actors (individuals or organisations)
• Helps to understand behaviour, intentions, inter-relations, interests; and for assessing their influence and resources (Varvasovszky & Brugha, 2000)
• Strategic targeting in Research Uptake process
• Stakeholders, and their interest, position towards the issue and power is often changing

• Timing
  • Inception Phase (country analyses completed)
  • Scaling-up Phase, before end of RPC life cycle
Analysing Stakeholders

- Preliminary findings from Inception Phase
- Issue: Scaling-up mental health services in maternal and primary health care

<table>
<thead>
<tr>
<th>POWER</th>
<th>High Opposition</th>
<th>Medium Opposition</th>
<th>Low Opposition</th>
<th>Non-Mobilised</th>
<th>Low Support</th>
<th>Medium Support</th>
<th>High Support</th>
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<tbody>
<tr>
<td>HIGH</td>
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<td>Uganda</td>
<td>South Africa</td>
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<td>MEDIUM</td>
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<td>Ethiopia</td>
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<td>LOW</td>
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<td>India</td>
<td>Nepal</td>
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HEALTH PRACTITIONERS (MENTAL HEALTH SPECIALISTS EG PSYCHOLOGISTS/PSYCHIATRISTS)
Strategic Plan

- Details cross-country activities by objective, including timing, responsible partners, outputs and indicators for success

<table>
<thead>
<tr>
<th>TABLE 4: STRATEGIC PLAN BY OBJECTIVE 1</th>
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<tbody>
<tr>
<td>Activities</td>
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<tr>
<td>Develop communication products (e.g. website, brochure, poster, policy briefs etc)</td>
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- Also details country-specific activities
Strategic Plan

• Cross-country activities include:
  • Developing communication products (e.g. website, brochures, posters, policy briefs)
  • PRIME Launch in study countries
  • Participation in International Conferences
  • Academic lectures
  • Capacity building training
  • Journal publications
  • Engagement with Community Advisory Board’s
  • Identify and engage policy champions
  • Engaging with user groups at MGMH Summits
  • Media Launches at PRIME Annual Meetings
  • Developing Cross-Country PRIME Media Database
  • Regular media engagement (national/international), especially on significant days e.g. World Mental Health Day, World AIDS Day
Strategic Plan

• Cross-country activities include:
  • Engaging local radio stations
  • Regular engagement with DFID UK & country offices
  • Meetings with policymakers to present findings
  • Utilisation of PRIME research data at key policy events (e.g. national meetings or summits)
  • Input on key policy documents
  • Develop database of interested potential donors

• Country-specific activities include:
  • Organise ‘sensitization workshops’ to reduce stigma (India)
  • Developing skills through engaging civil society and peer support groups (India)
  • Working with MoH as part of a Technical Support Group (India)
## Dissemination/Comm Channels

### COMMUNICATION CHANNELS BY STAKEHOLDER GROUP

<table>
<thead>
<tr>
<th>Dissemination &amp; Communication Channels</th>
<th>Stakeholder Groups</th>
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<tbody>
<tr>
<td></td>
<td>Policy makers</td>
<td>Researchers &amp; Health practitioners</td>
<td>PAMI</td>
<td>Donors</td>
<td>Civil Society</td>
<td>International Media</td>
<td>Local (Community) Media</td>
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<tr>
<td>PRIME website</td>
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<tr>
<td>Partner websites (WHO, MGMH, CGMH, UCT, LSE, LSHTM, CPMH, HSRC, UKZN, Makerere, Addis Ababa, PHFI, Sangath, BasicNeeds, Ministry of Health partners)</td>
<td>E S U</td>
<td>E I U</td>
<td>E I N S U</td>
<td>IS U</td>
<td>IN U</td>
<td>U</td>
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<td>Partner newsletters (e.g. WHO mhGAP, MGMH)</td>
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<tr>
<td>PRIME Brochure / Posters</td>
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<td>Presentations (E.g. Alan Flisher Memorial Lecture, Monthly Lectures)</td>
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<td>Policy briefs</td>
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<td>Media engagement (invitations to meetings, media briefing)</td>
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<td>E I N S U</td>
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<td>Social networks &amp; mobile messaging (e.g. blogs/Facebook/Twitter) E.g. testimonies from people living with Mental illnesses</td>
<td>S U</td>
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<tr>
<td>Country/District Launches/events</td>
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<td>E I N S</td>
<td>N S</td>
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<tr>
<td>Global awareness opportunities (World Mental Health Day)</td>
<td>E I S</td>
<td>I S U</td>
<td>E N S U</td>
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<td>E I N S</td>
<td>I N S</td>
<td>E I N S</td>
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<tr>
<td>Conferences (e.g. WFMH Cape Town 2011)</td>
<td>E I N S</td>
<td>E I S U</td>
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**Key:**
- E = Ethiopia
- I = India
- N = Nepal
- S = South Africa
- U = Uganda
Using Media to promote RU

• Video (12 mins)

• Prof Vikram Patel using TED Talks, and clearly and simply communicating research

• [http://www.ted.com/talks/vikram_patel_mental_health_for_all_by_involving_all.html](http://www.ted.com/talks/vikram_patel_mental_health_for_all_by_involving_all.html)
Knowledge Impact

- Scientific Impact – impact on scientific community

- Social Impact

- A range of frameworks and tools were considered, including:
  - Set of impact indicators (Canadian Academy of Health Sciences)
  - ‘Most Significant Change’ method (ODI)
  - Stakeholder Analyses
Evaluating impact of strategy

• How do we know if the research has been taken up?

• A range of frameworks and tools were considered, including:

  • Set of impact indicators (Canadian Academy of Health Sciences)
  • ‘Most Significant Change’ method (ODI)
  • Stakeholder Analyses
Evaluating impact of Strategy

The Goal: Scaling-up mental health services

Evaluating Strategy

Stakeholder Analysis 1
Impact Indicator Assessment 1
Stakeholder Analysis 2
Impact Indicator Assessment 2
Most Significant Change method

Research Uptake & Capacity Building Strategies

Programme for Improving Mental Health Care
## Evaluating Impact of Strategy

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Methods</th>
<th>Indicators of Impact</th>
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<tbody>
<tr>
<td><strong>Objective 1: Increasing awareness amongst researchers and health practitioners</strong></td>
<td>Impact Assessment Indicator Method</td>
<td>- Citations to research in clinical and health and social service guidelines</td>
</tr>
<tr>
<td></td>
<td>Most Significant Change Method</td>
<td>- Citations to research in continuing health professional education materials to support new practices</td>
</tr>
<tr>
<td></td>
<td>Stakeholder Analysis</td>
<td>- Citation of research in textbooks and reading lists for university-students in health-related disciplines</td>
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<td></td>
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<td>- Researchers/Health Practitioners indicate positive change through SC stories collected</td>
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<tr>
<td></td>
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<td>- Changes indicated by country Stakeholder Analyses 1 &amp; 2</td>
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<tr>
<td><strong>Objective 2: Mobilising Persons affected by mental illness, their families and communities</strong></td>
<td>Impact Assessment Indicator Method</td>
<td>- Research cited in advocacy publications</td>
</tr>
<tr>
<td></td>
<td>Most Significant Change Method</td>
<td>- User groups and CABs indicate positive change through SC stories collected</td>
</tr>
<tr>
<td></td>
<td>Stakeholder Analysis</td>
<td>- Changes indicated by country Stakeholder Analyses 1 &amp; 2</td>
</tr>
<tr>
<td><strong>Objective 3: Public awareness and engagement with research findings amongst civil society, media &amp; policy champions</strong></td>
<td>Impact Assessment Indicator Method</td>
<td>- Research cited in advocacy publications</td>
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<tr>
<td></td>
<td>Most Significant Change Method</td>
<td>- Print media citation analysis</td>
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<td></td>
<td></td>
<td>- Lectures given to public audiences</td>
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<tr>
<td></td>
<td>Stakeholder Analysis</td>
<td>- NGOs/media/policy champions indicate positive change through SC stories collected</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Changes indicated by country Stakeholder Analyses 1 &amp; 2</td>
</tr>
<tr>
<td><strong>Objective 4: Guide policy makers and donors to use PRIME outputs</strong></td>
<td>Impact Assessment Indicator Method</td>
<td>- Asking public health policy makers what research has been used to inform their policies</td>
</tr>
<tr>
<td></td>
<td>Most Significant Change Method</td>
<td>- Use of research findings in other (non-health) sector policies e.g. economic, social development, correctional services</td>
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<tr>
<td></td>
<td></td>
<td>- No. of consultations to policy makers by researchers</td>
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<td>- No. of requests for research by policy-makers (e.g. systematic reviews)</td>
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<td></td>
<td></td>
<td>- Citations to research in public policy documents (grey literature)</td>
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<td></td>
<td></td>
<td>- Public sector budgets / new resources made available for mental health</td>
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<tr>
<td></td>
<td>Stakeholder Analysis</td>
<td>- Policy makers/donors indicate positive change through SC stories collected</td>
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<tr>
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<td></td>
<td>- Changes indicated by country Stakeholder Analyses 1 &amp; 2</td>
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Focus next 2 years

programme for improving mental health care
Policy Brief / Press Release Development

• **Policy Briefs**
  - Lancet Series 2011 (Lund, Kakuma, Eaton)
  - Authors to submit draft policy brief content while paper is being proofread
  - RU to develop template for text, and propose knowledge translation edits, and layout policy briefs to look consistent

• **Website Press Releases**
  - Policy briefs to be accompanied by Press Releases prepared by RU with authors
PRIME Video Project

- London (Nov 2012) based on partnership with Centre Film & Media Studies at UCT over next 2 years (access to special equipment and resources)
- South African Proposal developed, to be implemented this year
- Ethiopian Concept developed, and being implemented
- Nepal Concept to be developed prior to April 2014
- Uganda and India to follow (2015/2016)

- Funding challenges in latter years
Challenges

- **Political** e.g. Nepal is a fragile state, frequent changes in some Ministries
- **Economic** e.g. Cashflow, UKAID spend and claim
- **Technological** e.g. Telecommunications not always efficient in some countries
- **Time** e.g. Researchers embedded in research, have little time to think about how its relevance/ how it should be used
Thank You