
HEALTH POLICY AND SYSTEMS (HPS) AND MNCAH RESEARCH COACHING AND MENTORING PROGRAM

REPORT OF THE 6 WEEK ACCRA PROGRAM FOR THE ECOWAS SUB-REGION AND CAMEROON

JUNE 12TH TO JULY 21ST 2017, FRAFRAHA, GREATER ACCRA REGION, GHANA



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Participants, Facilitators and Invited Guests for the Final Plenary (21/7/14)

BACKGROUND /INTRODUCTION

This document provides a summary report of the six week health policy and systems research (HPSR) and maternal newborn child and adolescent health capacity building program for that was held in Accra, Ghana from 12th June 2017 to 21st July 2017. The activity was part of the work of the CoMCAHPSS program.

THE COMCAHPSS PROGRAM

The Consortium for Mothers, Children, Adolescents and Health Policy and Systems Research (CoMCAHPSS) is a five year program in the ECOWAS sub-region and Cameroon, supported by IDRC Canada.

The program aims to conduct multi-level capacity building and networking at individual, institutional and country level in the ECOWAS region and Cameroon for leadership in Health Policy and Systems

(HPS) and Maternal, New born, Child and Adolescent health (MNCAH) research and practice to support context-relevant and effective policy and program decision making and implementation for MNCAH improvements in West Africa; and to monitor and evaluate the processes and impact of the program and lessons.

Specific objectives of the program are to:

1. Strengthen **health leadership capacity** for research, innovation and change for decision making and implementation of high quality, effective, efficient and equitable MNCAH programs and services that improve outcomes in West and Central Africa (WP 1)
2. Strengthen **Health Policy and Systems and MNCAH research¹capacity** in West and Central Africa to generate evidence to support context-relevant and effective policy and program decision making and implementation of quality, effective and efficient Maternal, New born, Child and Adolescent Health (MNCAH) services and outcomes in West Africa (WP 2)
3. Strengthen researcher ability to work with decision makers and implementers to identify relevant research agendas, generate, package and disseminate research information to support **policy development and implementation** in West and Central Africa (WP 3)
4. Support and develop multi-disciplinary **multi-level leadership and research networks** for HPS and MNCAH in West and Central Africa (WP 4)
5. Collaborate with WAHO at the contextual level to promote the use of evidence for MNCAH programs and HPS strengthening for improved MNCAH outcomes in West and Central Africa (WP 5)
6. Monitor and evaluate the processes and impact of the program and lessons for MNCAH improvements (WP 6)

WORK PACKAGE 2 – RESEARCH CAPACITY BUILDING

One of the activities to attain objective 2 of the CoMCAHPSS program is the development and implementation of a research supervisor/mentor program for emerging Health Policy and System researchers in the ECOWAS sub-region and Cameroon. The rationale for this activity is the observation that many young and emerging researchers and trainees from institutions in the sub-region struggle with getting adequate supervision and support from for their work. This is related to several factors including the human resource numbers and capacity gaps, as well as a lack of suitable incentives for investing time in mentoring and supervision of young and emerging researchers and practitioners. This activity combines coaching and mentoring support to trainees as well as development of supervisory capacity. It is also assumed that a senior researcher will automatically be comfortable with and able to supervise a junior researcher. However, the supervision process itself needs support.

WORK PACKAGE 6 – INTERNAL EVALUATION

Work package 6 of the CoMCAHPSS program deals with the internal **monitoring and evaluation** of the project. Since the internal evaluation is itself research, the activities needed for the implementation

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of this objective have been linked to the activities needed for the implementation of the research capacity building objectives (WP 2).

The Monitoring and Evaluation is tied to capacity building and four PhD candidates (two Anglophone and two Francophone) will be recruited to focus on aspects of the M&E for their PhD thesis work. They will be registered with institutions in the partnership who conduct doctoral level training. The initial program budget provided for the full cost of training these four PHD, including their stipend to enable them to focus full time on their PhD work and give full time to within country and sub-region data collection, analysis and write up for the purposes of their thesis. However, the need to cut the budget meant that the numbers dropped to one. The West African Health Organization has undertaken to sponsor an additional candidate, bringing the number to two. The project team is continuing to look for the gap funding to be able to sponsor the remaining two candidates. Meanwhile this activity has been conducted on the assumption that we will successful find the gap funding and be able to train the four candidates originally envisaged.

OBJECTIVES OF THE 6 WEEK CAPACITY BUILDING PROGRAM

The objectives of the six week pre-doctoral /doctoral level capacity building program in Health Policy and Systems research were the following:

- (1) Provide Coaching and mentoring to strengthen Health Policy and Systems Research capacity and skills applied to problems of mothers, children and adolescents for emerging pre-doctoral researchers in the ECOWAS sub-region and Cameroon (part of WP2 of the CoMCAHPSS project)
- (2) Involve early and mid career post doctoral researchers in the sub-region who have recently completed their doctoral training as trainers, coaches and mentors so that they support the program but also build their own capacity as supervisors, coaches and mentors in a learning by doing approach
- (3) Commence the process of developing the protocols for the internal evaluation of the CoMCAHPSS project PHD (WP6).
- (4) Assess the ability, suitability and commitment of trainees to continue forward to undertake a full terminal research degree training program (PHD or equivalent) in HPSR (WP2 & WP6).

SELECTION OF TRAINEES

The initial cohort of 6 trainees for the program were selected by an open advertisement of the availability of a PHD training opportunity under the CoMCAHPSS program for emerging researchers in the ECOWAS region and Cameroon. Mr. Benjamin Verboom who was already registered for a PHD program in Oxford with a Trudeau fellowship directly contacted the secretariat about his interest to conduct his PHD research as part of the CoMCAHPSS project. He agreed to go through the same evaluation process as the candidates who responded to the advert but did not already have a PHD training scholarship. The short-listed candidates took part in an online interview via the Gotomeeting platform. The member of the interview panel were Prof. Uta Lehman of the University of the Western Cape, Prof. Lucy Gilson of the University of Cape Town and Dr. Irene A. Agyepong of the Ghana Health Service Research and development division. The detailed report of the selection process is available as a separate internal project report.

CAPACITY BUILDING APPROACH

The six-week program employed a mix of lectures, discussions, reading and critique of publications, literature search, and independent work by trainees to develop a full HPSR protocol of applied relevance in the ECOWAS sub-region and Cameroon. Learning was from trainee peer to trainee peer as well as from facilitator to trainee. One on one sessions with trainees by facilitators assigned as coaches and mentors was used to support the trainees in developing their protocols. Once weekly plenary presentations of their work for feedback from peers and facilitators was used as part of a process of critical review to help trainees as they developed their protocols. The full write up of the program concept and timetable is available as a separate document. The last day of the program was used for a grand plenary to which outside experts were invited. Outside experts who were able to attend included the Chair of the Public Health faculty of the Ghana College of Physicians and Surgeons program, and the Director of the Dodowa Health Research centre. Participants have been given the next four weeks to further refine and develop their proposals. The draft protocols and PowerPoint slide presentations from the last day of the program are available as an appendix to this report. All participants are aiming to have a final full proposal that can be submitted for ethical clearance before the end of 2017.

FACILITATOR, COACH AND MENTOR TEAM

(in alphabetical order)

- Irene Akua Agyepong MBChB DrPH FGCPs, Ghana Health Service Research and Development Division, Health Policy and Systems (Senior Researcher)
- Mary Amoakoh Coleman MBChB PHD, Noguchi Memorial Institute for Medical Research, University of Ghana, Epidemiology (Post doctoral researcher)
- Evelyn Korkor Ansah MBChB PHD, University of Health and Allied Services, Epidemiology (Senior Researcher)
- Daniel Kojo Arhinful PHD, Noguchi Memorial Institute for Medical Research, University of Ghana, Medical Anthropology (Senior Researcher)
- Aissa Diarra PHD, Anthropology, LASDEL, Niger (Senior Researcher)
- Ama Fenny PHD, Institute for Statistical, Social and Economic Research, University of Ghana, Health Economics (Post doctoral)
- Augustina Koduah PHD, Ministry of Health, Health Policy and Systems (Post doctoral researcher)
- Aku Kwamie PHD, Free lance, Health Policy and Systems (Post doctoral researcher)

PARTNERS

The design and implementation of this program has been a collaborative with Prof. Uta Lehman of the University of the Western Cape and Prof. Lucy Gilson of the University of Cape Town.

Five of the trainees will spend the final week of the program in the University of the Western Cape. Two of them will register for their PHD programs with the University of Cape Town or the University of the Western Cape.

CONCLUSION

Our conclusion at the end of the 6 week program is that all the trainees have the potential to complete a full time doctoral level training program and promise to be an asset in the ECOWAS sub-

region and Cameroon. It is worth the effort needed to find the funding and suitable programs for all of them to register in.

Following the one week in Cape Town, two of the remaining five will be invited to apply for enrolment in the UCT or UWC PHD in HPS program based on the assessment of the Cape Town team and fit of their projects with available supervisors. We will continue to active seek training opportunities for all the remaining three and also opportunities to maintain the 2017 cohort model.

Three of the trainees are already enrolled in terminal (PHD equivalent training) namely Mr. Benjamin Verboom, University of Oxford; Dr. Andy Ayim and Dr. Abigail Derkyi-Kwarteng Ghana College of Physicians and Surgeons Public Health residency track. Mr. Benjamin Verboom already has a Trudeau fellowship that covers his PHD studies as well as his research work. Dr. Andy Ayim and Dr. Abigail Derkyi-Kwarteng will need funding support to implement their proposals.

We will also need to seek the gap funding to support the PHD training of 3 more candidates and also negotiate where to enroll them for their PHD program.



SUMMARY OF TRAINEE DRAFT PROPOSALS DEVELOPED OVER THE 6 WEEKS

Name of Trainee	Project is related to CoMCAHPSS objective	Study Title	General objective	Specific Objectives
Joseph Nli Otoe Dodoo (Ghana, MOH)	Obj.1: Strengthen health leadership capacity for research, innovation and change for decision making and implementation of high quality, effective, efficient and equitable MNCAH programs and services that improve outcomes in West and Central Africa	National health leadership transitions and capacity for making and sustaining MCH policies: A case study of Ministry of Health's capacity to make and sustain MCH policies in Ghana	Analyse whether change in national level health leadership influence MoH capacity to make and sustain MCH policies on the agenda over time in Ghana, how and why and its implication for the implementation of the leadership capacity building component of a program like COMCAHPSS.	<p>Describe and analyse national level health leadership transitions and the factors that contribute to it over time in Ghana.</p> <p>Describe and analyse existing capacity of MoH to make and sustain MCH policies on the agenda over time.</p> <p>Analyse whether changes in national level health leadership influence MoH capacity to make and sustain MCH policies on the agenda over time in Ghana, analyse how and why.</p> <p>Describe and analyse the implications for implementing the leadership capacity building component of a programme like COMCAHPSS.</p>
Otobo Uja (Nigeria, Jos Univ. Teaching Hospital)	Obj.2: Strengthen Health Policy and Systems and MNCAH research capacity in West and Central Africa to generate evidence to support context-relevant and effective policy and program decision making and implementation of quality,	Strengthening capacity for health policy and systems (HPS) & maternal, newborn, child and adolescent health (MNCAH) research in West and Central Africa: A realist evaluation protocol of a	The aim of this study is to describe how the COMCAHPSS intervention(s) to strengthen HPS & MNCAH research capacity implemented in varied contexts and at the individual, institutional and national levels	To assess individual, institutional and system level capacity <i>assets</i> and <i>needs</i> of COMCAHPSS partner organizations within West and Central Africa to undertake HPS & MNCAH research (exploratory)

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	effective and efficient Maternal, New born, Child and Adolescent Health (MNCAH) services and outcomes in West Africa	south-south partnership on research capacity at individual, institutional and national levels	resulted in improved HPS & MNCAH research capacity (if at all it did) and the mechanisms that influenced the observed outcomes.	<p>To describe how the COMCAHPSS <i>intervention(s)</i> aimed at strengthening HPS & MNCAH research capacity in West and Central Africa were implemented at the individual, institutional and national levels. (descriptive)</p> <p>To describe the <i>outcomes</i> [intended or unintended] observed and the <i>contextual factors</i> that catalyzed or inhibited implementation of the intervention(s) for strengthening HPS & MNCAH research capacity at the individual, institutional and national levels in West and Central Africa. (descriptive)</p> <p>To analyze the <i>processes and mechanisms</i> (and how they interact) through which the observed outcomes, following implementation of the intervention(s) aimed at strengthening HPS & MNCAH research capacity in West and Central Africa, occurred at the individual, institutional and national levels. (explanatory)</p> <p>To make recommendations, using results of our study, on how best such</p>

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				initiatives can be improved upon to better strengthen the capacity of individuals and institutions to undertake HPS & MNCAH research within the region.
Ibrahim Nassirou, Niger	Obj.2: Strengthen <u>Health Policy and Systems and MNCAH research²capacity</u> in West and Central Africa to generate evidence to support context-relevant and effective policy and program decision making and implementation of quality, effective and efficient Maternal, New born, Child and Adolescent Health (MNCAH) services and outcomes in West Africa	Technical and Allocative Efficiency of Primary Health Facilities in Providing Adolescents' Reproductive Health Services in Niger	To analyze the technical and allocative efficiency of the primary health facilities in providing adolescents' reproductive health services, and understand how this affects the adolescents' utilization of reproductive health services	<p>O1: analyze the process of resources allocation within the health facilities in providing adolescents' reproductive health services</p> <p>O2: understand the mechanism by which the health facilities find the resources to provide adolescents' reproductive health services</p> <p>O3: measure and describe the technical efficiency of the primary health facilities in providing adolescents' reproductive health services</p> <p>O4: determine the factors that explain the technical efficiency of the primary health facilities in providing adolescents' reproductive health services</p>

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				O5: analyse the effect of resources use on the utilization of adolescents' reproductive health services
Abigail Derkyi-Kwarteng, Ghana GCPS resident	Obj.2: Strengthen Health Policy and Systems and MNCAH research³ capacity in West and Central Africa to generate evidence to support context-relevant and effective policy and program decision making and implementation of quality, effective and efficient Maternal, New born, Child and Adolescent Health (MNCAH) services and outcomes in West Africa	An exploration of out-of-pocket payment by NHIS clients for health services in Cape Coast	To explore the extent to which NHIS clients are making out-of-pocket payments for services under the scheme	<p>To describe what primary non-specialised out-patient services NHI clients are paying for out-of-pocket</p> <p>To assess how much NHI clients are paying for “free” services under the NHIS</p> <p>To explore and describe the factors that account for out-of-pocket payment by clients registered under the Ghana NHIS</p> <p>To analyse the implications of these payments on the NHIS and clients in terms of renewal of NHIS registration, financial and social access to health care</p>
Andy Ayim, Ghana, GCPS resident	Obj.2: Strengthen Health Policy and Systems and MNCAH research⁴ capacity in West and Central Africa to generate evidence to support context-relevant and effective policy and program decision making and	How and why District Assemblies disburse financial resources to District Health Systems: Multiple Case study of two	To understand the factors that influence District Assemblies in the disbursement of financial resources to the District Health System and the mechanisms by	<p>To describe and analyse the sources of finance of the District Assemblies and the proportionate disbursements to the decentralised departments</p> <p>To describe and analyse the budget allocation processes and how it</p>

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Name of Trainee	Project is related to CoMCAHPSS objective	Study Title	General objective	Specific Objectives
	implementation of quality, effective and efficient Maternal, New born, Child and Adolescent Health (MNCAH) services and outcomes in West Africa	districts in the Volta Region of Ghana	which the factors influence disbursement.	<p>influences disbursements to the District Health System</p> <p>To explore how decision space, power ,trust, negotiations, contestations and politics influence the disbursement of financial resources</p> <p>To describe and analyse the contextual factors that influence the decisions to disburse financial resources to the health system</p>
Fatima Moulioum, Cameroon	Obj.3: Strengthen researcher ability to work with decision makers and implementers to identify relevant research agendas, generate, package and disseminate research information to support <u>policy development and implementation</u> in West and Central Africa	Researcher-Policy Linkage for Maternal and Child Health: a comparative case study in Benin, Burkina-Faso, Cameroon and Niger	<p>The overall aim of this study will be to describe the what, how and why of the relationships and interactions between researchers, decision-makers and implementers</p> <p>.....in MCH research agenda setting, evidence generation, evidence packing and dissemination, and evidence use into policy and practice</p> <p>.....in Benin, Burkina-Faso, Cameroon, and Niger</p>	<p>1. Identify and map up who the researchers involved in HPS and MCH research are and what they work on in Benin, Burkina-Faso, Cameroon and Niger (descriptive)</p> <p>2. Identify the decision makers and implementers (political and technical) involved in MCH policy development and implementation in Benin, Burkina-Faso, Cameroon and Niger (descriptive)</p> <p>3. Explore the nature of relationships and interactions if any between researchers and decision makers/implementers (political and technical) in MCH research agenda</p>

Name of Trainee	Project is related to CoMCAHPSS objective	Study Title	General objective	Specific Objectives
				<p>setting, evidence generation, evidence packing and dissemination, and evidence use to support MCH policy development and implementation in Benin, Burkina-Faso, Cameroon, and Niger, and the contextual factors influencing these relationships and interactions (exploratory and explanatory)</p> <p>4. Understand how and why COMCAHPSS has strengthened (or not) researchers' ability to interact with decision makers and implementers to identify relevant research agendas, generate, package and disseminate research information to support MCH policy development and implementation in those countries (exploratory and explanatory)</p> <p>5. Draw lessons from these researchers-decision-makers/implementers' relationships and interactions experiences to inform COMCAHPSS or similar interventions on strengthening researcher-decision maker/implementer relationships and interactions to support research evidence production</p>

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				and use into policy and practice in those countries
Selina Defor, Ghana DHRC	Obj.4: Support and develop multi-disciplinary <u>multi-level leadership and research networks</u> for HPS and MNCAH in West and Central Africa	Networking to facilitate cross-disciplinary learning for HPSR generation and use in West Africa: A case study of the West African Network of Emerging Leaders (WANEL) in HPS.	To understand how and why WANEL is functioning or not functioning as a regional research network of emerging HPS researchers, advocates and practitioners for cross-disciplinary learning for HPSR generation and use in West Africa.	Explore and describe the process and mechanisms by which WANEL has developed and determine its identity Identify the structural characteristics of WANEL and how and why their configuration and interaction affect the network and its functioning. Assess the effectiveness of WANEL in attaining its objectives as a regional network of emerging HPS researchers, advocates and practitioners for cross-disciplinary learning for HPSR generation and use in West Africa. Identify, examine and explain the contextual factors that accounts for the effective or ineffectiveness of WANEL as a regional HPS network for researchers, advocates and practitioners in West Africa.
Benjamin Verboom,	Obj.5: Collaborate with WAHO at the contextual level to promote the use of evidence for MNCAH programs and HPS strengthening	A case study and realist evaluation examining effects of the CoMCAHPSS-WAHO Partnership	To evaluate the processes and outcomes of WAHO's strategies to promote the use of research evidence in national health	1. Explore and richly describe WAHO's strategies and activities to support evidence use in policymaking

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Canada /Oxford	for improved MNCAH outcomes in West and Central Africa	on evidence-informed policymaking in the ECOWAS region	policymaking in the ECOWAS sub-region, and to understand how, why, and in which contexts CoMCAHPSS facilitates these processes (or not)	<p>2. Identify regional- and country-level outcomes of WAHO's activities</p> <p>3. Provide explanation(s) of the process(es) through which these outcomes are achieved (or not achieved), including the contextual factors and processes impacting this</p> <p>4. Examine whether, how and why CoMCAHPSS amplifies WAHO's effect on evidence-to-policy processes</p> <p>5. Generate lessons about how to strengthen evidence use for HPS in West Africa</p>