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How do community participation approaches influence behaviour change communication for health?: A realist evaluation of community conversations in Marsabit, Kenya

REA Site Visit 28th May 2018, Irish Research Council, Dublin
About Me:

• Originally from Canada – working in Ireland for last 7 years
• Applied as Experienced Researcher II – successfully defended PhD November 2017
• Prior to Fellowship:
  • PhD from 2013-2017, working in Tanzania and Uganda on operations research using realist evaluation for community health
  • Numerous research projects across sub-Saharan Africa (Kenya, Sierra Leone) and elsewhere (Afghanistan, Lebanon, Turkey/Syria), globally since 2011
  • Primary research - mixed methods and realist evaluation for NGO programmes research, completed several systematic reviews and two realist reviews
  • Contributed to MSc supervision and lecturing/coordinating modules
My Project: Community Conversations
A realist evaluation
Community Conversations

• Implemented by Partner (Concern Worldwide Kenya)

• Participatory, socially transformative approach focusing on behavioural change within vulnerable communities

• Enables communities to address underlying causes of health concerns

• CC intervention lasts between 12-18 months, with varying make-up depending on objectives
Marsabit

- 70% of individuals live below the poverty with the three-quarters (75%) living in rural areas\(^1\);
- Doctor to patient and nurse to patient ratios are 1:63,825 and 1:1,868, respectively\(^2\);
- 4\(^{th}\) highest maternal mortality ratio (deaths per 100,000 live births) in Kenya\(^3\);
- 25% Facility Deliveries\(^4\);
- Child malnutrition is over 35% with stunting at an alarmingly high rate of 40%\(^4\);
- Difficulties in access to health services (weak health systems, infrastructure, terrain)
- Cultural practices and nomadic lifestyle influence health behaviours
The Question:

How do they work (if they do) for Social, Behavioural Change Communication (SBCC)?

• To best answer this question, and provide programmatic information to inform implementation of Concern’s CC programming, a realist evaluation was chosen
Methodology

• Form of theory driven evaluation that seeks to understand, ‘what work, for whom, why and under what conditions’?

• Multiple Phase Study, that aims to identify Middle Range Theories to answer research question

• Mixed methods, case studies conducted (n=6) being conducted
Methodology

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Phase 1: IPT Elicitation

- Key Informant Interviews with designers, implementers and programme architects
- Literature and document review
- Thematic analysis using ‘context-mechanism-outcome-configuration’ as analytical tool*, incorporating a gender analysis of current programme

Phase 2: Case Studies

- 6-8 case studies of different CC groups across different locations and for varying objectives
- Systems thinking approach involving non-CC linked community members, NGO staff, Ministry of Health Staff as participants
- Mixed methods developed to best refine/test IPT (phase 1), consisting of FGDs, IDIs, surveys, observations, NGO report analysis, and pre-post surveys of SBCC

Phase 3: Results Iteration and data collection

- Feedback findings from Phase 2 to CC groups and other stakeholders as a form of data collection
- Additional data collection on areas identified during Phase 2 analysis as needing further exploration
- Refined individual programme theories for various types of CC groups

Phase 4: Synthesis and Refinement of MRT

- Synthesis of findings from Phase 1-3 to produce a Middle Range Theory, through pattern recognition of CMOCs and programme theories
- Produce policy and programme relevant recommendations
Results 1: The IPT

• Refinement of IPT through case studies, with design chosen to best refine
• Mixed methods: Each case study will involve pre-post quantitative evaluation to observe changes in community SBCC, and qualitative methods throughout the process of the intervention to understand any observed changes
• Sites: Molaye, Marsabit, North Horr, Ileret
My Partners:

- Previous experience and familiarity
- Prestigious Centre for Global Health – leading teaching and research on health within Low-income countries in Ireland
- Extensive network of NGO and academic partners
- Mentor reputation and experience and ability to guide such international, multi-disciplinary Fellowship

- One of largest NGOs within Ireland, working across 27 countries targeting World’s most vulnerable
- Strong health component
- Previous relationships (teaching, research) personally and within CGH
- Capacity to support research project, and provide additional trainings and opportunities

- Important to gain experience in UN systems for future career
- Ability to learn from global policy makers
- Training on how research can translate into international recommendations (policy and practice)
- Networking
Research Progress to Date

• Completed Phase 1 (IPT development) (literature/document review, KII's)
• Phase 2: anticipated all surveys done within month, currently conducting interviews, doing observations and reviewing MoH/CK reporting data
• Accepted to upcoming international conference reporting on project
• Contributing to internal and NGO knowledge platforms
• Contributed to 2 additional research projects within WHO with dissemination outputs
Training to Date:

• Trainings completed:
  • Protecting Human Research Participants (NIH)
  • GRADE Training (Grading of recommendations, assessment, development and evaluation) for assessing quality of evidence towards recommendations
  • Guideline Development Training
  • Human Rights and Recovery Training to protect rights during research
  • Gender Transformation training

• Additional:
  • Ongoing supervision of MSc student
  • M&E experience within Concern (official training expected)
  • On-going language training
Career Impact

• Strong (on-going) relationships with partners
  • Improved my network of experts and opportunities
  • Continuing input and collaboration with WHO

• Exposure to other experts for health research within Kenya
  • Linking with other global partners (i.e. UNICEF) operating in Kenya
  • Links with Kenyan Universities and Ministry of Health

• Supporting Concern Community Health projects
  • Contributing to research activities
  • Supporting grant applications
THANK YOU!
ASANTE!

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References