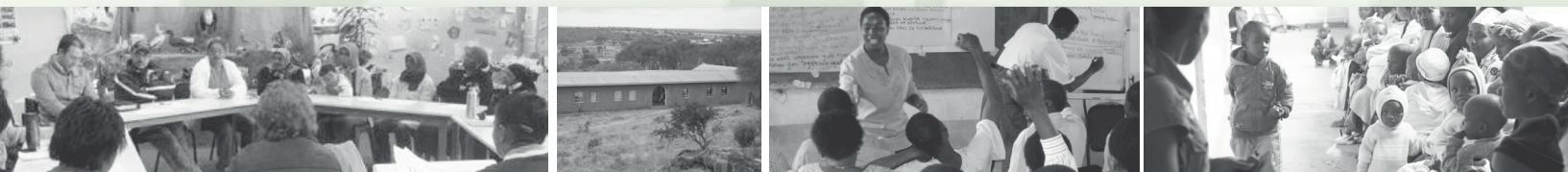


HEALTH SYSTEM LEARNING SITES

Understanding health systems through research collaboration and engagement



Health policy and systems research is centrally concerned with people, their relationships and the actions that they take towards strengthening health systems. To understand complex health systems, researchers must actively engage with system actors, ranging from health managers to service users, learning from their tacit knowledge and about their experience.

Learning sites are located in specific geographical districts and entail a long-term process of engagement and collaborative research with system actors. They provide a unique opportunity for researchers to understand health systems by seeing their complexity through the eyes of those working at the front line of health care delivery. In addition, they offer opportunities to support health system strengthening.

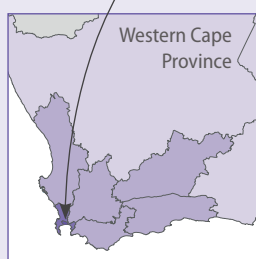
In Kenya and South Africa, researchers have established learning sites specifically to support a wide range of research focused on health systems governance issues at the district level. Both countries have devolved government structures and county (Kenya) and provincial and district (South Africa) managers now play a pivotal role in the development, management and delivery of health services. Learning sites provide unusual opportunities to learn about the daily processes of decision-making that comprise health system governance, and to support managers in taking action to strengthen them.

What is a learning site?

As well as being located in a specific district and geographical area, these learning sites have several distinctive features:

- They are based on collaboration between researchers and health managers – research is conducted with practitioners rather than about their practice. Research-practitioner partnerships have been formed between groups rather than individuals; they are multi-layered, dynamic and interdependent.
- The process of research collaboration is long-term and the range and types of research and wider engagement are constantly developing.
- Various approaches to research are focused on an evolving set of issues – including research that does not start with a pre-defined question. The overall process of enquiry is emergent within a broad framework and with a commitment to joint ownership and co-production of knowledge.
- Researchers are embedded in the health system; through research activities they come to understand the daily routines and challenges faced by health managers, and become part of the social network of learning site colleagues.

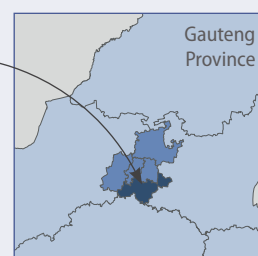
District Innovation and Action Learning for Health System Development (DIALHS). Mitchell's Plain learning site, Cape Town District, South Africa



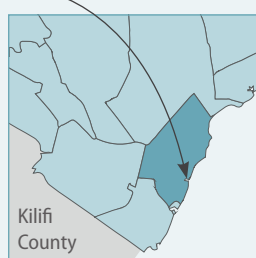
Collaboration between researchers and health practitioners from two authorities in Mitchell's Plain sub-district that are responsible for primary healthcare (PHC). Work in the learning site focuses on supporting and strengthening the district health system to provide PHC services, and to strengthen practices of management and leadership.

Siyaqinisa ("We Strengthen Together") learning site. Sedibeng, Gauteng Province, South Africa

The Sedibeng learning site in Gauteng Province, aims to support the Sedibeng District management to strengthen leadership capacity to improve staff engagement and team effectiveness.



Kilifi learning site. Kilifi County, Kenya



A learning site has been established among Sub-County Health Management Teams in rural Kilifi, Malindi and Kaloleni Sub-Counties in Kilifi County, Kenya. Researchers have been working with county and sub-county health managers to understand the implications of health system devolution on health management and delivery.

How did learning sites emerge?

In all three contexts, the learning sites developed over a long period of time and are built on pre-existing research and teaching relationships between researchers and practitioners, at both individual and organisational levels. These pre-existing relationships enabled researchers to propose collaborations.

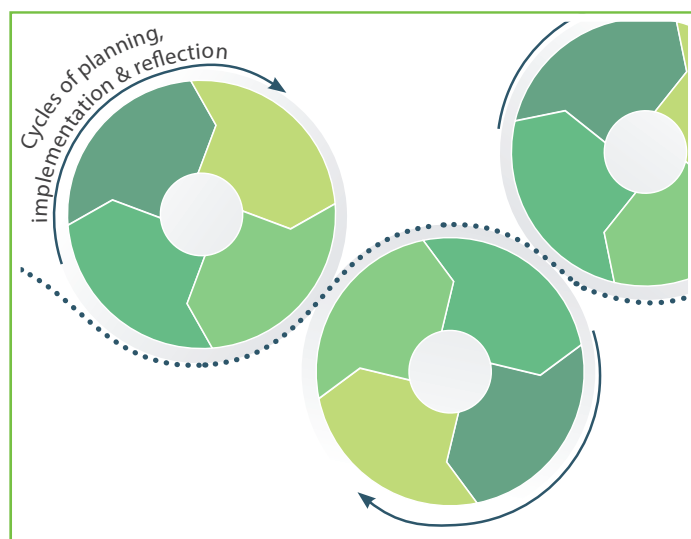
In the Kilifi learning site, KEMRI-WT researchers have gradually built relations with county health managers over 20 years. Researchers initially involved managers in traditional research activities, for instance by asking them to reflect on research findings and to help identify relevant research questions. Over time, the nature of engagements between researchers and managers has evolved to include more deliberate and structured interactions, with managers more actively involved in the research. Formal and informal engagements are frequent due to the close physical proximity of some health managers and researchers, including some sharing an office building.

Partnerships between the two groups were in particular strengthened when a district health manager took on a research role in KEMRI-WT. This dual researcher-manager position has been pivotal in overcoming communication barriers and in convening discussions between different groups within the health system.

What happens in a learning site?

Whilst the actual activities that take place in learning sites vary across context and time, they follow a common approach that builds on participatory action-learning methods.

- **Multiple activities:** A range of research and intervention work is supported.
- **Collective enquiry:** Researchers and practitioners take part in regular cycles of planning, implementation and reflection around the activities, to support decision-making.



Researchers and district health managers in the Mitchell's Plain learning site have used action-learning methods to explore, support and review a range of actions to strengthen governance in PHC. One example is an intervention aimed at improving community participation in PHC through the creation of 'Local Area Action Groups'.

In Tafelsig area, group workshops helped to identify areas of action, including the distribution of health information leaflets and magnets by members of the community. This activity led to greater use of community health and substance misuse services and has had a positive effect on community relationships with health providers.

- **Reflective practice:** Researchers hold regular meetings amongst themselves and with managers to provide space for conversation, critical reflection and shared sense-making.

In Sedibeng learning site, researchers have worked with managers to use meetings in a more strategic manner. Engagements began with researchers acting as observers in management meetings and holding in-depth interviews to learn about the experiences of managers. These have now evolved to joint development and facilitation of workshops for staff to develop individual capacity and collective leadership capacity.

The workshops provide managers with the space outside of their environment to reflect on their working context, the daily stresses they encounter and the existing approaches to dealing with those stressors. Through collaborative discussions, they are encouraged to find alternative collective ways of managing day-to-day practices, that is, new ways of doing.

- **Co-producing knowledge and action:** Learning sites allow for the co-production between researchers and managers of insights and knowledge about health systems and decision-making practices. This has been achieved by bringing conceptual and theoretical questions and debates into conversations, collaboratively theorising and generating knowledge. At the centre of co-production lies a commitment to processes of knowledge generation based on flexibility, responsiveness and trust among all partners. This co-production then supports managers in identifying and taking action to strengthen their decision-making, and allows researchers to work with them in implementing these actions.

Read more about knowledge co-production: Lehmann U, Gilson L (2015) Action learning for health system governance: the reward and challenge of co-production *Health Policy Plan*. Oct;30(8):957-63

What is the value of learning sites?

For researchers

Better understanding of complex health systems

Learning sites enable researchers to better understand the complexity of the health system by observing change as it unfolds over many years and understanding the thinking and tacit knowledge of managers, which can be difficult to share or express explicitly. The research has provided critical insights into the kind of decisions that health managers make on a daily basis, the influences over these decisions and their implications - both immediately and in the long term - as well as how broader policy changes influence what is happening at the frontline of the health system. When researchers are embedded in the system, they can gain a more nuanced understanding of the context that they are working in and the multiple narratives that shape the system; what challenges it faces, and what the opportunities are for strengthening it.

Layers of understanding and knowledge

The knowledge generated through the learning sites continues to build with each engagement, resulting in multiple layers of understanding and a more profound knowledge about the health system. Evidence includes both formal data, such as interviews and observations, as well as observational data and notes taken during joint planning meetings, workshops, conversations and reflection meetings.

Trusting relationships lead to more openness and honesty from managers

The learning sites approach gives an opportunity to generate relationships and build trust with health system practitioners in a way that other forms of research do not. As a consequence, managers find it easier to reflect more openly on their experiences and perspectives, including on sensitive issues, than they might do otherwise. Further, trusting relationships carry over to other activities beyond those carried out for the learning sites and have created new opportunities for collaboration, teaching and research.

Stronger paths to influencing practice and policy

Working with health managers provides opportunities for researchers to support them as they take action to strengthen decision-making. Co-production also generates outputs that are relevant for managers in other settings. In addition, knowledge of how health managers operate has provided researchers with a better sense of how to intervene in the health system more broadly, to support long-lasting change. The detailed insights generated in learning sites, and the wider sets of relationships that researchers have established in and around learning sites, have, therefore, created opportunities for higher level policy advice and influence.

Lessons from comparison across districts and countries

Despite differences in context, there is value in sharing experiences from the three learning sites, both between researchers and with health managers. There are surprising similarities in the challenges faced by managers in different environments, and there is potential for cross-site learning.

The importance of everyday resilience



Evidence generated from all three settings provides insights on how to nurture everyday resilience in district health systems. It points to the importance of front-line health managers in facilities, and the role that they play in enabling and supporting staff to deliver health services under challenging conditions that they face on a day-to-day basis. The experiences also highlight the role of social networks and relationships for resilience, both within and outside the health system, for example by motivating staff and sustaining community engagement with PHC services.

For health managers

The value of reflection

Being encouraged to take time out of busy schedules simply to stop and reflect is valued by managers because it can allow new thinking about how to tackle persistent challenges, supporting a more proactive approach to management. Simply sharing and discussing problems is itself helpful, offering new ways of seeing issues, allowing a sharing of experience and opening up the possibility of new thinking. Standing back from the constant demand of daily challenges also opens opportunities for systems actors to be more appreciative and supportive of each other, creating positive energy for tackling challenges.

Strengthening managerial practice

An important component of the learning sites work is in creating safe spaces for managers to have, at times difficult, conversations and to solve problems. These spaces have also provided an opportunity to bring together different actors in the system - improving their understanding of each other's roles and their relationships with one another.

Researchers as a resource

Researchers, who are trusted but outside of the health system, have been approached by managers to discuss challenges and help find solutions to resolve issues. This is especially the case for senior managers who have few colleagues to turn to for advice. In this sense, researchers have become seen as a neutral resource that managers can approach to help solve problems, or to raise difficult topics at meetings.

Small-scale steps towards strengthening the health system

Changing leadership practice

Through the learning sites work, researchers are embedded in processes of policy implementation and engage with managers to improve the daily governance processes underpinning the delivery of health services. Whilst many of the interventions are small in scale, they can lead to enduring change. For example, through feedback and planning sessions district health managers in Sedibeng are becoming more responsive to the needs of front-line health workers and now provide clinic managers with more opportunities to discuss problems with senior staff.

In Mitchell's Plain, meanwhile, the research team has supported group mentoring and coaching sessions with sub-district managers that have led to the strengthening of supportive supervision relationships with facility managers. In Sedibeng, researchers held leadership workshops to improve the effectiveness of senior health managers with responsibilities including human resources, primary health care, employee relations and finance.

Influencing health policies

Through work conducted in learning sites and continuous engagements, researchers have developed a wider set of relationships with health system actors including policymakers. Evidence generated through the learning sites at the sub-district and county levels has fed up to higher levels of the system to inform policy and practice.

In Kilifi learning site, researchers and health managers identified the challenge for health facilities and hospitals of no longer being able to access user fee money and failing to secure alternative funds. These concerns and observations contributed to a new county Facility Improvement Fund bill being passed by the county assembly, which allowed for user fees to be accessed by hospitals and the budget constraint to be alleviated.

In 2015, the issue was discussed in national level finance strategy meetings in Kenya through RESYST members' formal roles in those committees. At the national level, the aim is not only to ensure access to user fee funds by hospitals but in the longer term, to reduce the high dependence on user fee funds, as this form of financing can lead hospitals to prioritise revenue generating departments, and has negative equity implications for utilisation.

New knowledge informs teaching programmes

New knowledge generated through the learning site experiences is feeding back into ongoing teaching activities, and reaching a wider audience of managers who are students on teaching programmes. Through experiences at the Kilifi learning site, researchers identified the need to support county health managers to undertake their new roles of steering and managing health services within the highly dynamic, devolved political system. In collaboration with a local university, researchers then organised a short course for health managers on complex health adapted to local circumstances, drawing on the knowledge generated through the Kenyan learning site.

In Cape Town, researchers have drawn on DIAHLS experience in re-designing a leadership training programme, which is attended by health managers across the country, and so has the potential to support wider change in governance across the country.

Key resources

- Lehmann U, Gilson L (2015) **Action learning for health system governance: the reward and challenge of co-production** *Health Policy Plan.* Oct;30(8):957-63
- Nyikuri M, Tsofa B, Barasa E, Okoth P, Molyneux S (2015) **Crises and resilience at the frontline—Public health facility managers under devolution in a sub-County on the Kenyan coast.** *PLoS ONE* 10(12): e0144768
- Gilson L, Barasa E, Nxumalo N, Cleary S, Goudge J, Molyneux S, Tsofa B, Lehmann U. **Everyday resilience in district health systems: governance lessons from the front lines in Kenya and South Africa** *Submitted*
- Barasa WE, Manyara AM, Molyneux S, Tsofa B. **Recentralisation within decentralisation: County hospital autonomy under devolution in Kenya** *Submitted*

More resources are available on the RESYST website:

<http://resyst.lshtm.ac.uk/research-projects/learning-sites>

More information

Mitchell's Plain learning site, South Africa

Lucy Gilson: lucy.gilson@uct.ac.za

Sedibeng learning site, South Africa

Nonhlanhla Nxumalo: Nonhlanhla.Nxumalo@wits.ac.za

Kilifi learning site, Kenya

Sassy Molyneux: SMolyneux@kemri-wellcome.org

KEMRI | Wellcome Trust



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