# COUNTDOWN
## Calling time on Neglected Tropical Diseases

**LSTM**
LIVERPOOL SCHOOL OF TROPICAL MEDICINE

# Participatory research dissemination: Using innovative visual methods to strengthen community engagement on NTDs in Liberia

*This case study focuses on our experience of the use of participatory visual methods to communicate research findings to audiences at different levels of the health system, to support the generation of solutions to existing challenges, and to redress existing power imbalances in health service design. A local artist was engaged to create illustrations that represented key challenges identified within the research data. Illustrations were taken to communities and counties to disseminate findings and seek their validation; and to ask them to suggest solutions to address these challenges. At the national level, we used problem trees to articulate challenges identified within the original research data to present causes and solutions to these challenges identified by community and county level stakeholders.*

*The objective of using this method of dissemination was to promote a participatory dialogue among different audiences at different levels of the system to validate and generate solutions to the existing challenges.*

*Solutions included community led design and delivery of supervision structures, and establishment of community-based health social mobilization teams. Visual images resonated at all levels for knowledge translation. Community voices were used to capture and understand realities, which enabled community members to be actively involved in decisions that affect them.*

*Moving from the community to the county to the national level in dissemination of findings fostered creative solutions and addressed power dynamics in health intervention design.*

## Background

NTDs disproportionately affect poor, rural and marginalized populations in Liberia [1]. Traditionally, research collaborations have been largely extractive in LMICs; this research aimed to shift this narrative through redressing existing power imbalances by actively involving participants in health service design.

With a focus on health systems and NTDs in Bong and Maryland Counties, COUNTDOWN identified key gaps and challenges in NTD service delivery. The aim of the research was to present these findings to stakeholders at the community, county and national level, in order to generate solutions to these challenges. This case study focuses on the participatory dissemination process using innovative visual methods to communicate research findings to different levels of the health system.

## Dissemination

Participatory and visual methods have their roots in supporting communities with relatively low level of literacy to express their development priorities [3]. We used this approach within rural communities in Liberia, who have low literacy levels due to prolonged conflict, to validate findings and to identify solutions to key challenges to NTD Programme delivery, which emerged from the data.

The visual methods of illustrations were well received within communities actively engaged in their understandings and interpretations of the pictures. The participants felt empowered to use their voices to contribute to the research findings and were keen to share their solutions.

Visual methods can flatten power hierarchies and enable validation of results dialogue and the creation of solutions at different levels of the health system. We found that visual methods created a collaborative space that enabled innovation amongst community members and raised additional challenges and nuance to the findings (for example identifying additional communities who were persistently left behind in MDA). Gender disaggregated groups provided a clear space for women's voices and perspectives to be heard, as they are often more silenced in large mixed group community meetings [4]. The Programme management team also participated at the community level and learnt from the ideas presented.

Research processes are often extractive, where interaction with participants and local communities are often passive and the outputs of data are rarely shared in meaningful ways with participants in the research setting [5].

## Impact

Within the rapidly growing research environment it is important to put in place good ethical and collaborative health systems research processes, where people are engaged – valuing communities and people working at all levels of the health system.

At the **county level** implementers were pleased to have results shared and to be consulted on their ideas, allowing the opportunity to respond to initiatives suggested at the community level. The process-built relations, co-creation and ownership across all levels of the health systems and ensured community and county perspectives fed into national programme policies and strategies.

Visual images resonated at the **community level** for knowledge translation; it allowed a platform for community voices to be captured and understand realities [6-7].

The strategy of pictorial visual disseminations allowed the participants to better present their understandings of the results and make other recommendations that they thought were important for program improvement for the betterment of the community and the county as users and caregivers.

At the **national level**, the visual approach with the use of problem tree analysis showing the root of the problems gave the participants, many whom are decision makers, the opportunity to generate solutions to the existing problems.

Discussing the research results with the community through a creative visual method of dissemination aims to allow interaction knowledge translation at all levels of the health system (community, county and national) and creates a collaborative space to make suggestions for programmatic change. Moving from the community to the county to the national level brings creative solutions and addresses power dynamics in health intervention design. The illustrations and problem tree analysis enabled researchers to collaborate with community and health system stakeholders in a way that increased community engagement and ownership of the process.
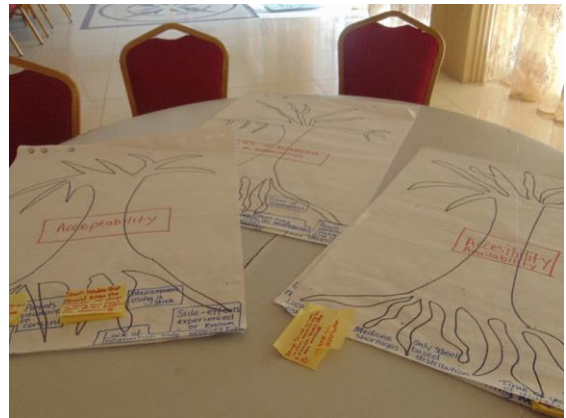
> "Innovative visual methods facilitated engagement with persons affected by NTDs to serve as patient advocates. Visual methods enhanced the ability of actors across the whole health system to generate solutions to address the identified problems from research findings. Some solutions generated included community led intervention design and delivery of supervision structures; as well as the establishment of community based social mobilization teams"

## Key Recommendations

✓ Creative participatory methods can strengthen community and stakeholder engagement, and moreover be applied in other contexts and settings, especially where there are varied levels of literacy.

✓ Using visual aids to disseminate research is a powerful tool in actively involving participants to validate and consolidate findings, as well as generating solutions through participatory dialogue.

✓ Participatory visual methods serve to foster more equitable and inclusive collaborations by breaking power hierarchies and allowing the voices of those affected to be heard using bottom-up approaches.

**Example of one of the themes discussed and how the pictures led to solution formulation by the community:**

| Theme | Picture | Idea from the community | Solution/Action from the County |
|---|---|---|---|
| **Awareness: visual illustration of preferential methods of communication at the community level.**<br><br>**These photos show the different ways in which communication is currently disseminated in the communities. This also includes recommendations generated to address gaps in communication delivery.** |  | Use drama at strategic points such as marketplaces<br><br>Involve community members, Community Health Team and Health providers in the awareness process.<br><br>In Maryland, involve influential leaders in awareness implementation<br><br>Health clubs should be formed in schools/communities<br><br>Provide funding for community work force for MDA | Health communication and awareness messaging be guided by communication strategy and focus on use of communication tools such as social behavior change communication (SBCC).<br><br>Messaging be done in local languages or simple English<br><br>To engage nursing students in research on NTD<br><br>MOE should include NTD teaching in the curriculum in schools |

## References and Further Reading

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