

# ‘Taking relationships seriously’: a realist review of community engagement with malaria research (Real1)

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# Significant investment in community engagement in health research

## Wide range of assumptions about the value of CE

- Improves the ethics of research
- Facilitates the successful execution of research
- Improves the impact/outcomes of research

Funders and implementation partners support CE

Eg - Wellcome Trust, Gates Foundation, DFID, World Bank, NIH, CDC

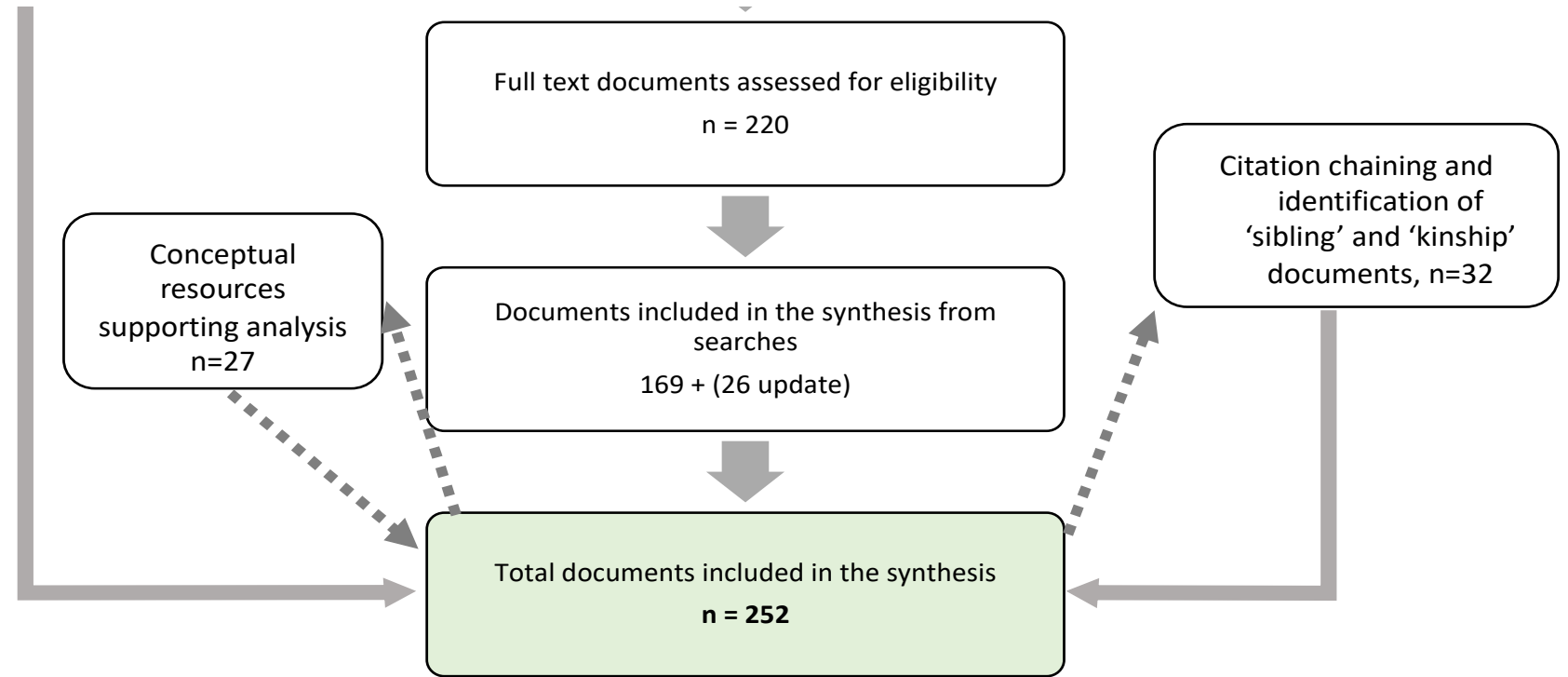
lack of a robust evidence base, but empirical research suggested that these assumptions have some validity

# Persistent challenges for improving community engagement

- High degree of **variability** in CE:
  - Language/concepts; goals; guidance; practice
- Engagement typically emphasizes **activities/interventions**, rather than the nature of the interactions/relationships, underlying mechanisms and outcomes :
  - E.g., Community Advisory Boards (CABs); formative research
- Engagement activities are **complex social interventions**; dynamic multi-stakeholder processes
  - understanding relationships, context and culture is vital



# Realist review – how CE works

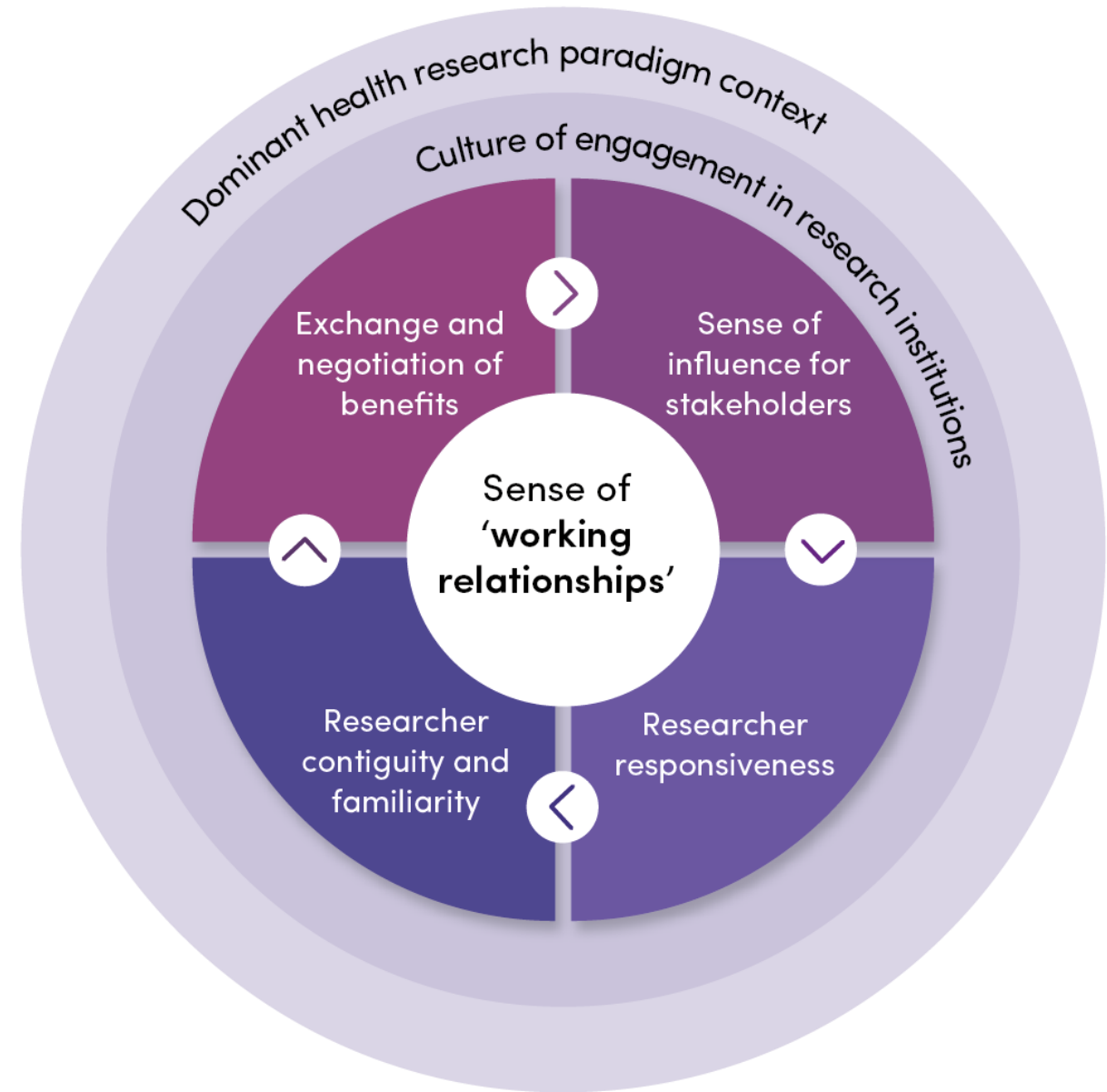


# CE establishes 'working relationships'

## Four interlinked dynamics

Importance of **access to health care** accompanying research participation

Contribute to **acceptance of research** and participation

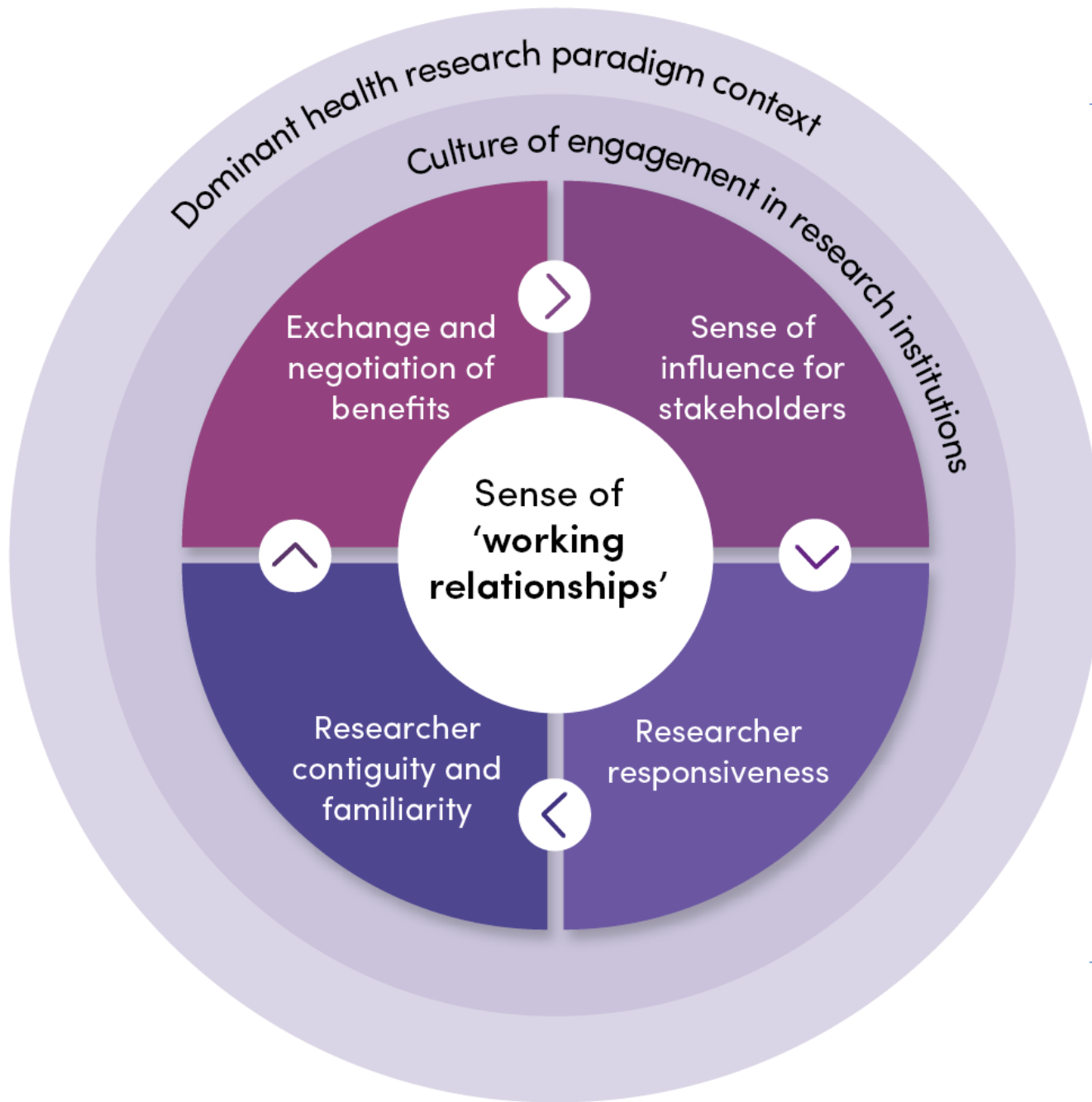


Findings shared through an [animation](#)

# Conclusions

- CE more about developing **working relationships than any particular technique**, tool or method
- CE strategies need to be informed by an **understanding of the relational dynamics** of engagement and influences of context
- Developing working relationships across difference tends to 'accommodate' and **reproduce the dominant paradigm**
- The very relationships that help get research done **rest on ethically problematic aspects** of global health research
- The analysis hints at an **alternative dynamic of 'collaborative partnership'** not systematically explored in the current review





Reproduce  
the dominant  
health  
paradigm *or*  
*challenge it*



# Recommendations



- Focus CE on **building relationships**, including beyond particular research studies and over the longer term
- Ensuring **listening and responding** to stakeholder concerns as well as ‘accurate’ information
- Better planning and evaluation of CE with more explicit ‘**theory of change**’
- Tracking and changing **power**
- Building in **regular reflection/debriefs**
- Being proportionate, meaningful

# Review outputs

- **Full paper** in Wellcome Open
- **Commentary paper** in BMJ Global Health
- **Briefing paper** for funders and research institutions
- **Briefing paper** for engagement practitioners and researchers
- **Animation** of review findings
- Materials **hosted on Mesh** Community Engagement Hub:  
<https://mesh.tghn.org/programme-hubs/real/>
- Dissemination through networks, webinars, meetings



**With thanks**