WHAT IF
FUNDING AGENCIES JOIN FORCES TO ADVANCE SOCIAL INNOVATION IN HEALTH DELIVERY
Over the past decades great advances have been achieved by innovation in drugs, devices and vaccines but innovation in the care delivery process has been neglected.

The Sustainable Development Goals are calling for a renewed focus on addressing issues hindering societies from thriving. A new and inclusive paradigm is required to deliver not only health services but address the social determinants of health. Communities and actors across all sectors have a role to play in developing new social innovations with the potential to transform systems and structures.

The Social Innovation in Health Initiative (SIHI) is a global collaboration of institutions, organisations and individuals working together to advance community-based social innovation in low and middle-income countries. The initiative was established with the support of the Special Programme for Research and Training in Tropical Diseases, hosted at the World Health Organization. In 2015, SIHI identified and studied multiple cases of social innovation from the global south. This foundational work emphasised the valuable contribution social innovations could make in addressing health system challenges. It has also cast a spotlight on the need for further research on social innovations in health.

On 23 & 24 November 2016, SIHI and the ESSENCE on Health Research Initiative, co-hosted a meeting to explore the role funding agencies could play in supporting and promoting research in community based social innovation. This report highlights the outcomes and steps for action resulting from this participatory meeting.

Over 1 billion people, mostly in low-and middle-income countries lack access to affordable quality health care.

Over the past decades great advances have been achieved by innovation in drugs, devices and vaccines but innovation in the care delivery process has been neglected.

The Sustainable Development Goals are calling for a renewed focus on addressing issues hindering societies from thriving. A new and inclusive paradigm is required to deliver not only health services but address the social determinants of health. Communities and actors across all sectors have a role to play in developing new social innovations with the potential to transform systems and structures.

The Social Innovation in Health Initiative (SIHI) is a global collaboration of institutions, organisations and individuals working together to advance community-based social innovation in low and middle-income countries. The initiative was established with the support of the Special Programme for Research and Training in Tropical Diseases, hosted at the World Health Organization. In 2015, SIHI identified and studied multiple cases of social innovation from the global south. This foundational work emphasised the valuable contribution social innovations could make in addressing health system challenges. It has also cast a spotlight on the need for further research on social innovations in health.

On 23 & 24 November 2016, SIHI and the ESSENCE on Health Research Initiative, co-hosted a meeting to explore the role funding agencies could play in supporting and promoting research in community based social innovation. This report highlights the outcomes and steps for action resulting from this participatory meeting.
To **EXPLAIN** the value of social innovation from a **country-perspective**.

To **SHARE** perspectives on social innovation from funding agencies, international organisations and academic institutions.

To **CREATE** opportunities for collaboration and influence.
DRUG SHOP INTEGRATED CARE FOR CHILDHOOD ILLNESS

Makerere University, Uganda

In Uganda, 63% of parents first seek care for febrile children from private drug shops.

This project aimed to improve the quality of services provided by drug shops by adopting the WHO/UNICEF strategy for Integrated Community Case Management. Through this research project, drug shop attendants were trained to recognise and diagnose malaria, pneumonia and diarrhoea, and deliver appropriate care.

Read the case study online.
ONE FAMILY HEALTH

Enabled by a public-private partnership with the Rwandan Ministry of Health, OFH equip nurses to establish their own franchise health posts in underserved areas. These private providers deliver care to all patients’ part of the Mutuelle Sante (community health insurance) at a fixed fee as recommended by the Ministry of Health. OFH currently have 100 active health posts but envisions to grow to 300, achieving full sustainability.

Read the case study online.
Together, 21 participants from funding agencies, international organisations, universities and social innovation organisations, explored key areas for further action and investment in social innovation.
METHODS AND TOOLS FOR SOCIAL INNOVATION RESEARCH

Research is key to identifying impactful social innovations and informs how to best scale these innovations.

Key considerations for research in social innovation are:

- Academics and researchers to partner should partner with social innovations in their countries.

- It is important to equip innovators with the basic understanding, methods and tools to gather the appropriate data to conduct their own research.

- A research approach must hold sufficient scientific rigour but still be appropriate to the flexible and immersive nature of social innovations.

- Looking beyond health research methodologies to other disciplines would inform a more comprehensive approach and tools to assess social outcomes.

- Conducting research in unsuccessful social innovations could provide as valuable learning as researching those who are impactful.

PROPOSED ACTION STEP

Convene an international multi stakeholder expert group to help define a research approach and tools to support social innovation quality assessment, impact measurement, and that will allow for a better understanding of key enabling factors required for replicability, scalability and sustainability.
To advance support for social innovation, knowledge and learnings must be shared with all interested stakeholders, including funding agencies. Learning extends beyond formalised studies to also capture experiential and operational knowledge.

Contributions in learning is to be made by different actors:

- Practical implementation lessons from social innovators
- Strategies adopted by universities to transform into enabling environments for social innovation
- Experiences from funders engaging with different social innovations
- Frameworks used by national ministries to facilitate engagement with social innovators.
- This knowledge is not necessarily fit for publication in peer-review academic journals and thus alternate platforms need to be created to capture and share this learning.

PROPOSED ACTION STEPS

Two types of learning platforms were identified:

- Convening spaces / Innovation Hubs – physical spaces where stakeholders from grassroots to senior decision making level can engage in person to share local learning and experiences.
- Online platform - a virtual space for sharing learning, resources and connections across geographical boundaries.
- Advocacy and influence efforts are required to ensure that knowledge on social innovation reaches decision-makers and receives due attention.

- One Family Health illustrated the importance of strong collaboration efforts between Ministries of Health and social innovators.

- The Ministry of Health in Rwanda is able to extend entry-level health services in the country by integrating One Family Health as a key provider. The enabling factors for the integration included a strong legal framework for engagement supported by appropriate financial and accountability processes.

- International organisations, funding agencies and donors regularly engage with country governments. These organisations thus have a unique opportunity to advocate for social innovation and support the creation of local enabling environments capable of stimulating a local culture of social innovation inclusive of all actors.

**PROPOSED ACTION STEP**

Individual leadership is to be taken to promote for social innovation within respective institutions and networks.
PARTICIPANTS

Department for International Development,
United Kingdom
Sue Kinn

Department of Service Delivery and Safety,
World Health Organization
Isabelle Wachsmuth

Europe Aid
Kevin McCarthy

Fondation Merieux
Christophe Longuet
Serge Guillot
Benedicte Pansier
Benoit Miribel

INDEPTH Network
Martin Bangha

London School of Hygiene and Tropical Medicine
Rosanna Peeling
Lindi van Niekerk

Makerere University
Phyllis Awor

Ministry of Health, Rwanda
Spencer Bugingo

One Family Health
Gunther Faber

Special Programme for Research and Training in Tropical Disease
John Reeder
Beatrice Halpaap
Garry Aslanyan
Johannes Sommerfeld

Swedish International Development Agency
Hannah Akuffo
Le Thanh Forsberg

University of Cape Town,
Bertha Centre for Social Innovation
François Bonnici
Mulanga Muofhe
For more information on the social innovation in health initiative, visit: www.socialinnovationinhealth.org