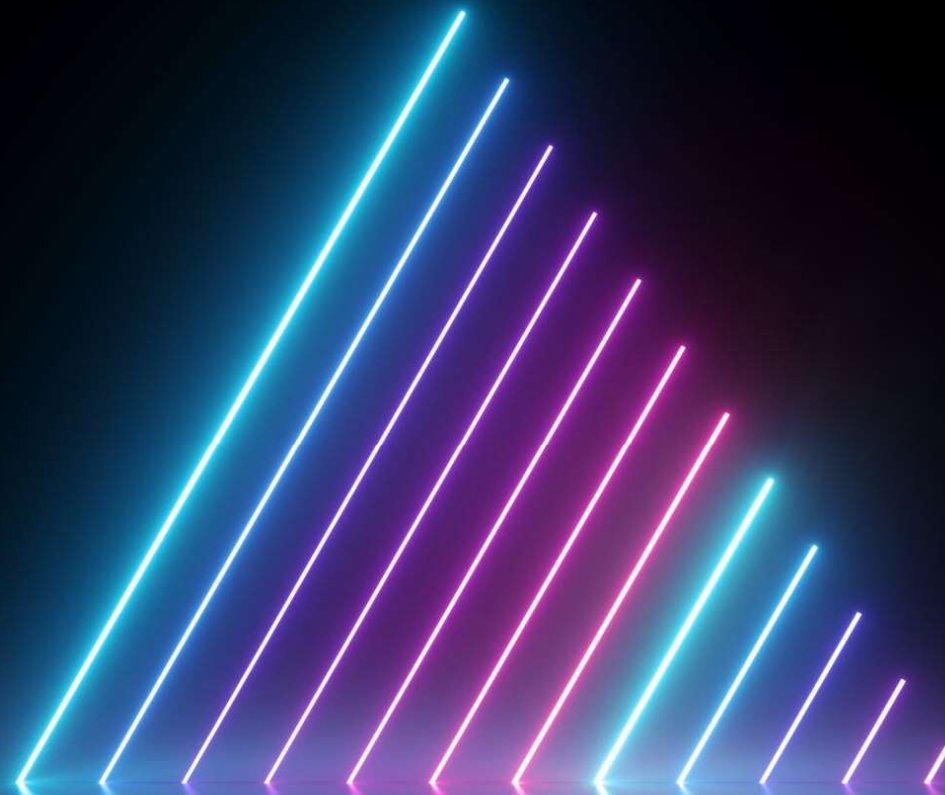


# Work Programme 1: Situation Analysis

NIHR Global Health Research Group Child and  
Adolescent Mental Well-being in Sub-Saharan Africa  
Work Programme 1

Lucia D'Ambruoso BSc (Hons) MSc PhD FHEA FRSPH

September 2023



# Overview

1330-1400 WP1 and Session overview

1400-1500 Ethiopia Situation Analysis: preliminary findings

1500-1530 *Break*

1530-1630 Rwanda Situation Analysis: preliminary findings

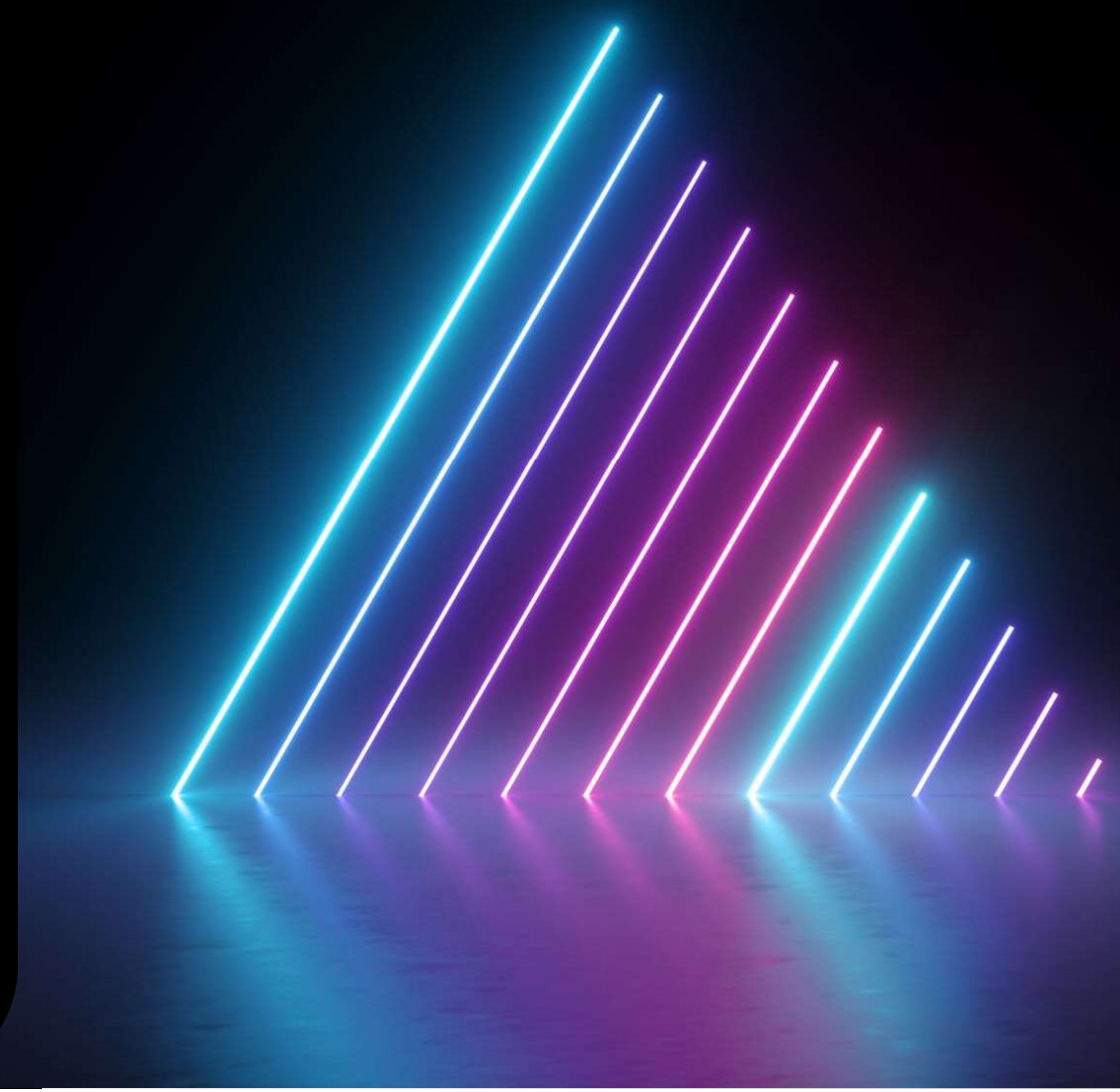
1630-1700 Products, papers, next steps

# Work Programme 1: Overview

NIHR Global Health Research Group Child and  
Adolescent Mental Well-being in Sub-Saharan Africa  
Work Programme 1

Lucia D'Ambruoso BSc (Hons) MSc PhD FHES FRSPH

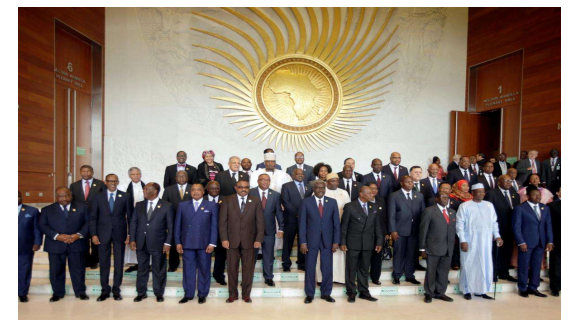
September 2023



# WP1 Objectives

1. Describe social, economic and policy contexts, priorities, and key stakeholders\* for CA mental wellbeing **WP1-1 Situation Analysis**
2. Engage stakeholders\* in design, evaluation and dissemination of the school-based intervention  
**WP 1-2 Codesign Structure/Process**

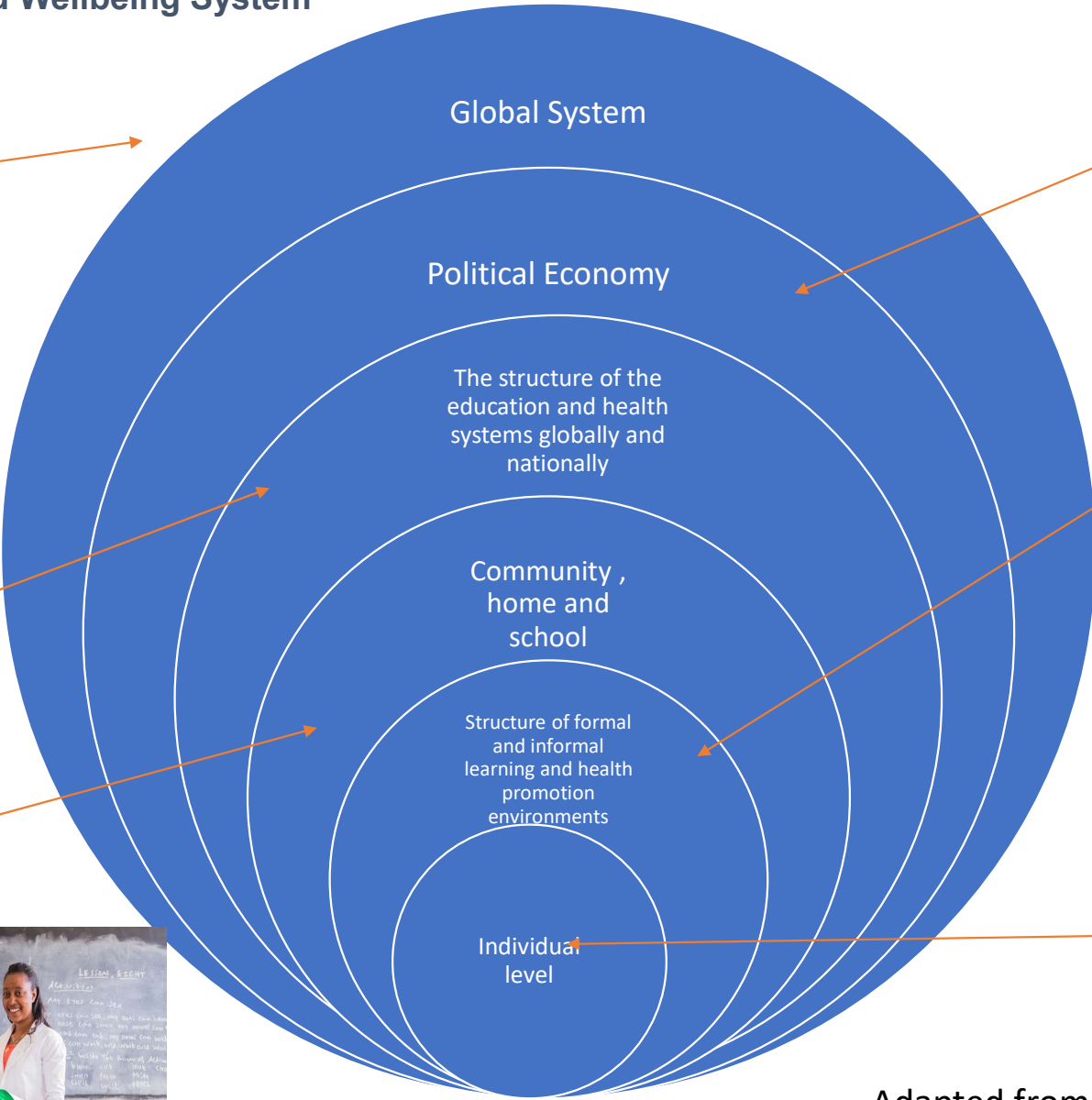
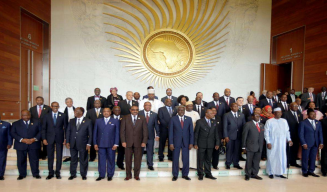
\* Policy stakeholders, community stakeholders (parents, teachers and CA). WP1 contributes to CEI



# A Laminated CA Learning and Wellbeing System

Sustainable development Goals, UN Convention, international financial institutions, development partners, international trade treaties

Political economy including class, gender, and ethnic relations, shared cultural values, traditional health belief systems, culture



Home, immediate family, peers, school, community, community public health

Global and national health and educational laws & policies, education and health finance, teacher training, health worker training, curriculum, assessment regimes



Interactions between home, school, community, community health services, religious institutions, media



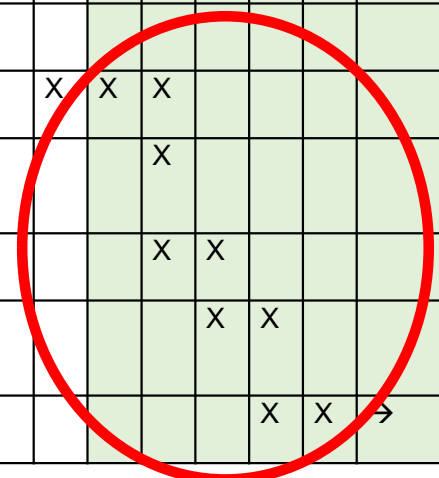
Genetic predispositions, structure of the brain, health, and wellbeing

Adapted from Tikly, 2015



Recruitment of research teams

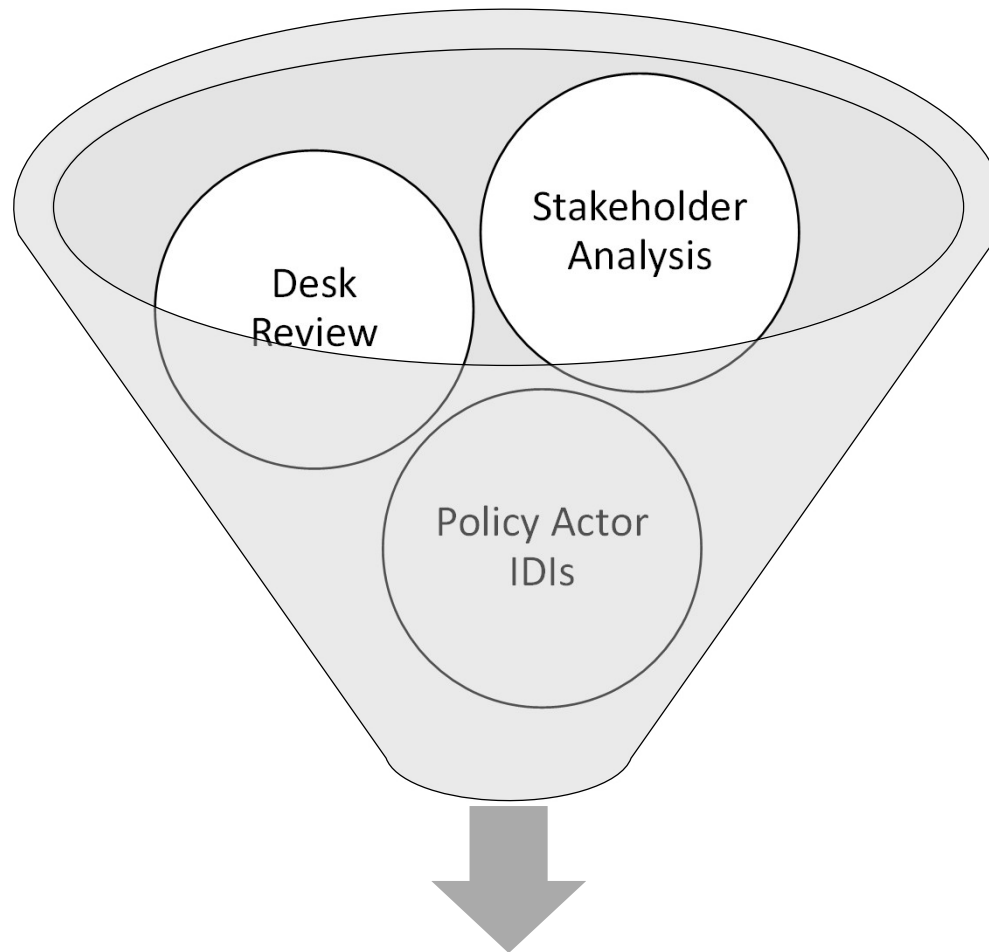
Activities †	Responsible	A	S	O*	N	D	J**	F	M	A	M	J	J	A	S	O	N	D	Q1 2024
WP1-1 SITUATION ANALYSIS (PEA)																			
PEA framework development (generic)	LD, PA, CIs	X																	
Desk review	CIs, PRDF		X	X	X	X	X	X											
Policy actor interviews	CIs, PRDF						X	X	X	X	X	X	X	X					
Analysis and reporting	CIs, PDRF PhDs (PA, LD)													X	X	X	X	X	→
WP1-2 SBMI CODESIGN WITH PRIMARY CAREGIVERS ††																			
Tool development (generic)	LD, PA, CIs					X	X	X	X										
PAR training (CIs April)	WP1 team									X									
Tool development (country specific)	PDRF, LD, PA, CIs												X	X	X				
PAR training (with research teams, country specific)															X				
Pax recruitment	PDRFs, PGRs, CIs														X	X			
4 x workshops (weekly). establish reference groups ***	PDRFs, PGRs, CIs															X	X		
Analysis and reporting																	X	X	→



Feasibility concerns

Hatched months indicate activities to be performed in advance of contracts and payment. Months in green indicate additional time assigned to WP1 owing to administrative delays. \* PDRFs recruited (delayed to April 2023) \*\* PGRs recruited (delayed to April 2023) \*\*\* Cash fee (primary caregivers) † Women and girls' equal inclusion will be ensured †† Sampling of schools to be completed by January 2023 to convene reference groups (delayed to April 2023)

# WP 1-1 Situation Analysis



Describe policy contexts, priorities, and key stakeholders for CA mental wellbeing

# 1. Desk Review

- Policy contexts, policy priorities and key stakeholders, structured using PEA framework
- Structure/context:** overall features of social, political, economic and sectoral contexts, social and cultural aspects of the family
  - Incentives and ideas:** how agents interact in multiple open, complex, overlapping ('laminated') systems
  - Bargaining:** whose voices are heard? Who are the main policy actors? How do they operate?
  - Stakeholders:** who have vested interests; what are their relative levels of power and interest?

PEA element	Section	Description
	1. Introduction	Purpose is to describe political, economic, and social contexts for CA wellbeing.
Structural and contextual	2. Social context 3. Economic context 4. Sectoral overview 5. Study setting	What are the structures that agents operate within? What are the main social and economic features of these systems? What is it about the economic contexts that is particularly relevant for CA wellbeing? How are the family and children seen in society including e.g., violence, lived realities of children, patriarchy, child-rearing norms, religion?
Bargaining	6. Political and economic power holders	Whose voices are heard? Who are the main policy actors? What are their roles how do they operate?
Incentives and ideas	7. Interactions	Interaction of economic / political / social. Two main layers: global inequalities and domestic (multiple, overlapping, interacting open systems)
Stakeholders	8. Stakeholder analysis	Who are the key 'winners and losers' in CA mental wellbeing in Rwanda, Ethiopia and across SSA? What are their relative levels of power and interest in CA mental wellbeing?
	9. Resources	10 key resources
	10. References	

*N.B.: the views of marginalised communities, sensitive political issues, and research in local languages may not be available in academic or grey material*



## 2. Stakeholder Analysis

- Those with vested interested in a situation
  - Affect or are affected by the situation
  - Those who hold power (resources, policies, networks)
  - Those who benefit or suffer from the situation
  - Those who maintain the situation
  - May or may not be visible in the situation
- 
- To understand agents' positioning
  - To assess feasibility of future policy
  - To develop strategies to influence agents
  - To facilitate implementation of projects

An approach, tool or set of tools for generating knowledge about actors – individuals or organisations – so as to understand their behaviour, intentions, inter-relations and interests; and for assessing the influence and resources they bring to bear on decision-making or implementation processes (Varvasovsky and Brugha, 2000)



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ABERDEEN 2040

**BU5594: Health Policy and Systems Research (HPSR)**

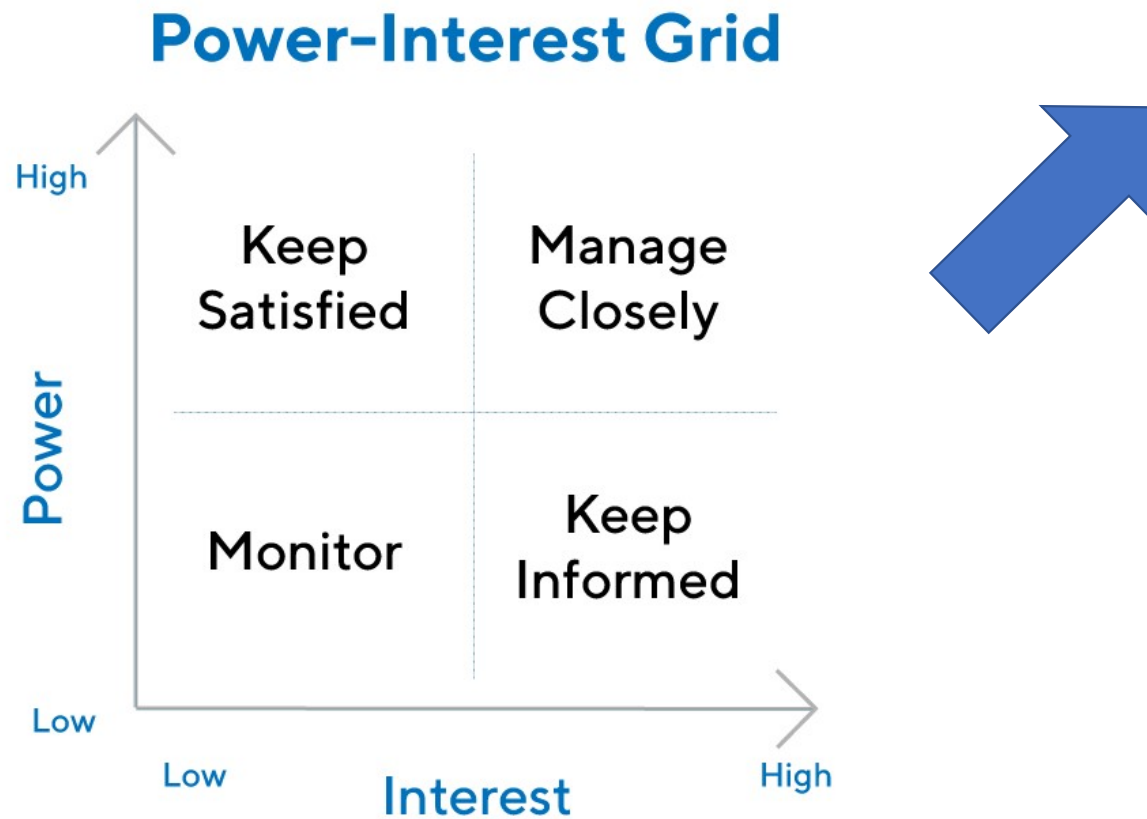
Session 3.1 Part 2  
Doing stakeholder analysis

Lucia D'Ambruoso PhD FHEA  
Senior Lecturer School of Medicine Medical Sciences and Nutrition



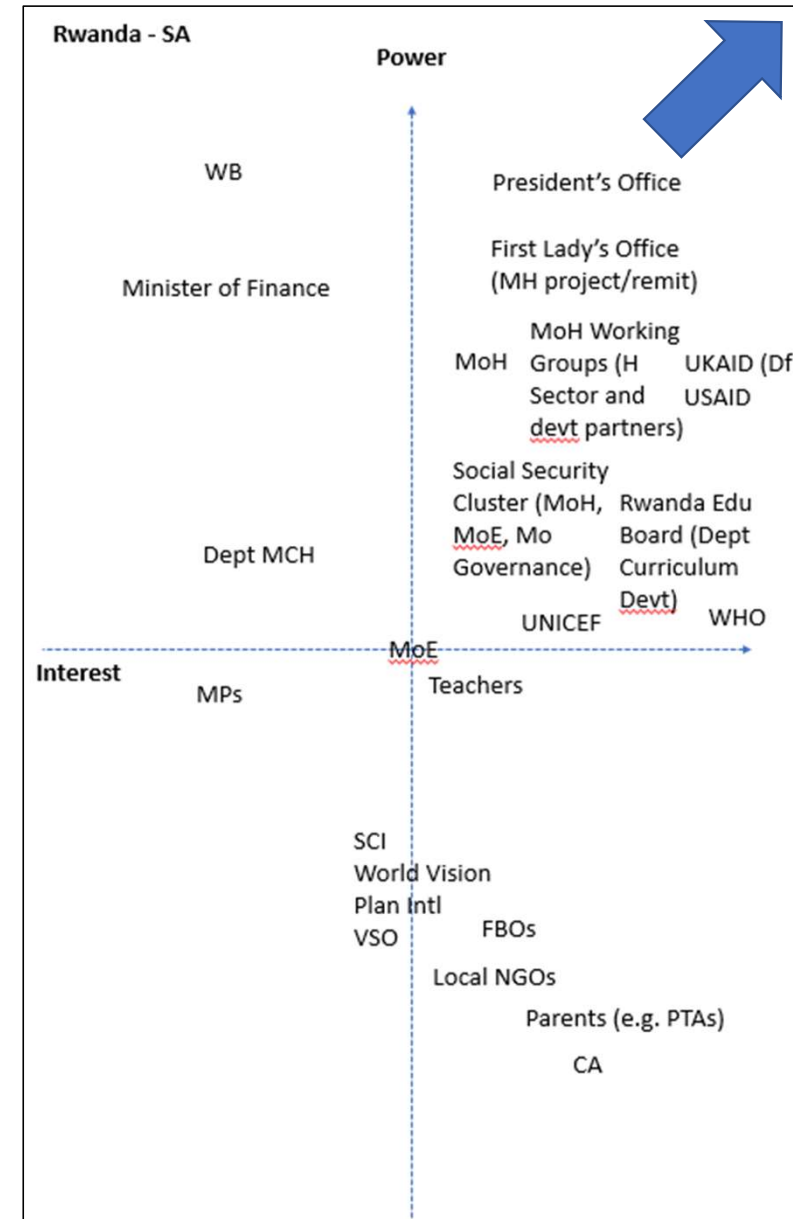
# How actors interact and influence policy

*(individuals, groups and organisations)*



# Limitations

- Public policy shaped by ‘competition for ideas’
- Problems raised and framed differently by different actors located within hierarchies of power, networks and resource
- Stakeholder positions/interests not static; change over space and time
- Stakeholders not only influence on policy
- Difficulties of judgement and interpretation, cf. reflexivity and positionality



# 3. Policy Actor Interviews

- **Selection:** purposive to represent national level govt, development partners and INGOs in education and health and with interest in primary education and/or CAMH
- **N = thematic saturation**, where interviews are sufficiently diverse, identify relationships and degree of influence between features
- **Process/content:** Confidential semi-structured interviews under conditions of anonymity to uncover insights into practice, supplementing reliance on formal documents in public domain
- **Analysis:** expression of competing views while enabling a consensus to take shape

*N.B.: the views of marginalised communities, sensitive political issues, and research in local languages may not be available in academic or grey material*

## Topics

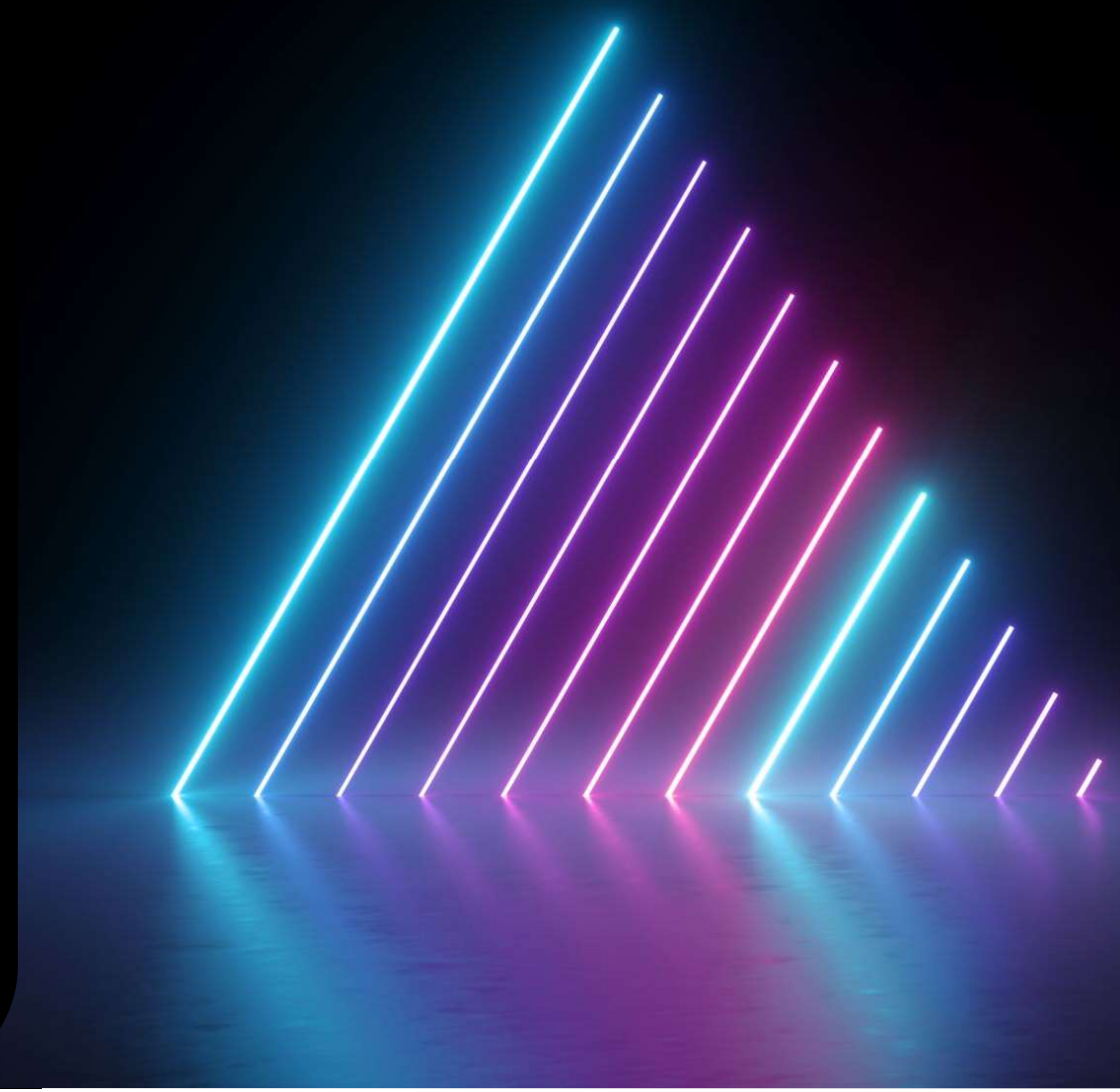
- a) Policies:** what is in place? Extent of intersectoral working, challenges
- b) Situation/need:** CA health and wellbeing
- c) Policy support and recognition:** policies introduced why, by whom?
- d) Policy impact:** what has been achieved, how?
- e) Parents and children:** parental expectations and involvement in health and education of CA

# Session Overview

NIHR Global Health Research Group Child and  
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Work Programme 1

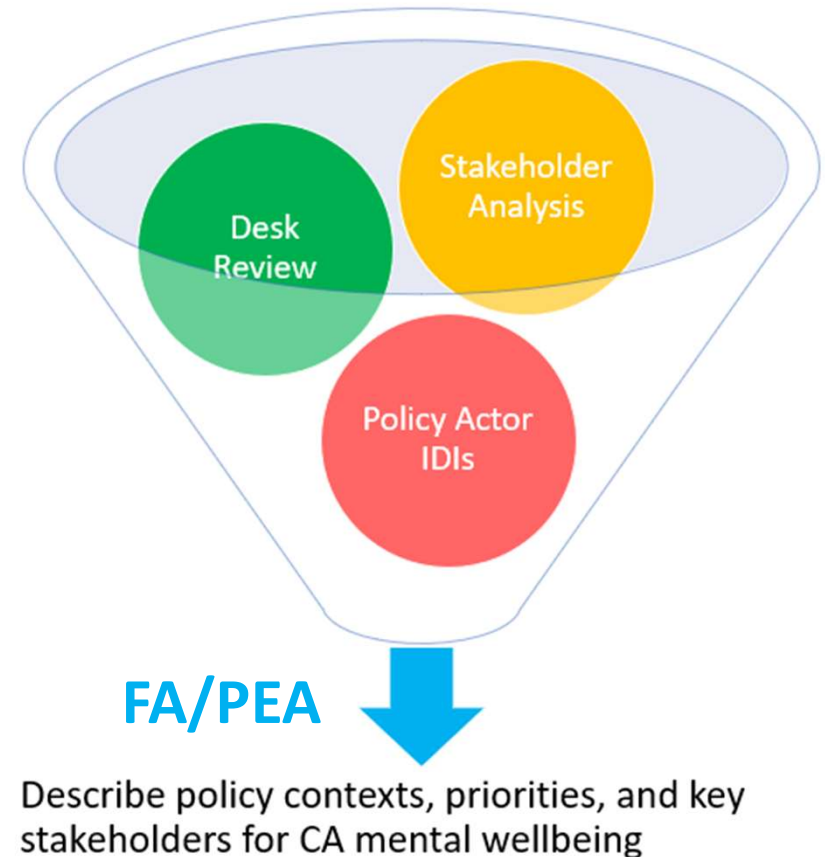
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September 2023



# Preliminary findings Ethiopia and Rwanda

- Triangulating:
  - (a) desk reviews,
  - (b) stakeholder analyses, and
  - (c) IDIs performed with policy actors to date
- Scientific presentations of WP1-1 preliminary findings
- Framework analysis (FA)
- Political Economy Analysis (PEA)





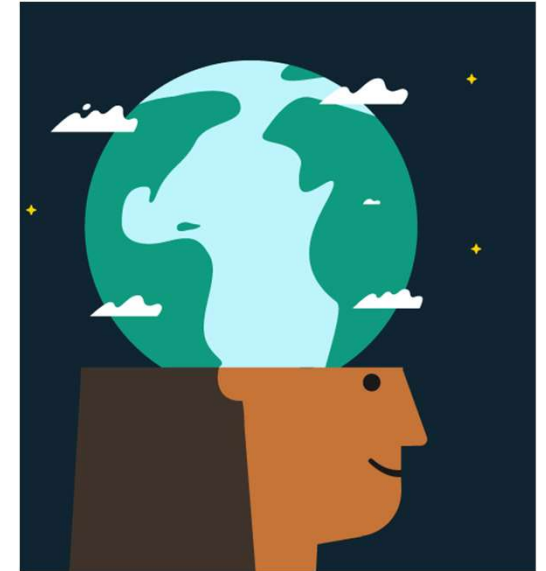
# Framework Analysis

- Organising and analysing data using predefined analytical framework
- 2 components: (1) creating analytic framework; (2) applying framework
- Systematic and flexible, good for multidisciplinary teams
- Not value neutral!
- 5 defined steps:
  1. Familiarisation
  2. Framework
  3. Indexing
  4. Charting
  5. Mapping and interpretation



# Political Economy Analysis

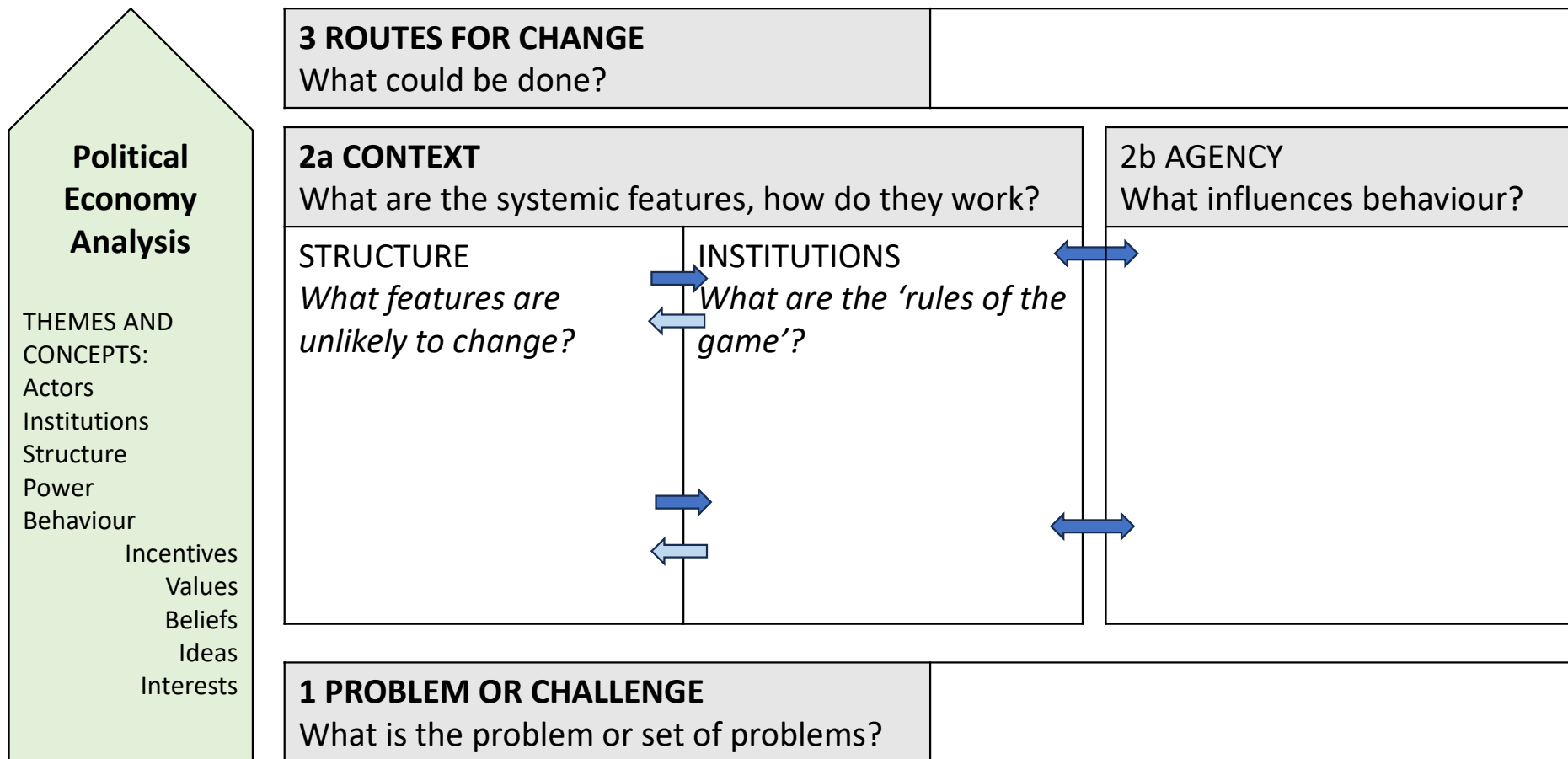
- Decision-making occurs within contexts of uncertainty. Contexts characterised by competing, diverse interests
- Policy making >exercise in ‘decision science’
- Understanding gaps between policy intention and outcome, through deeper understanding of policy processes and contexts
- Structural and institutional features and how they interact
- Experiences of actors, working within the nexus of institutions to understand policy processes



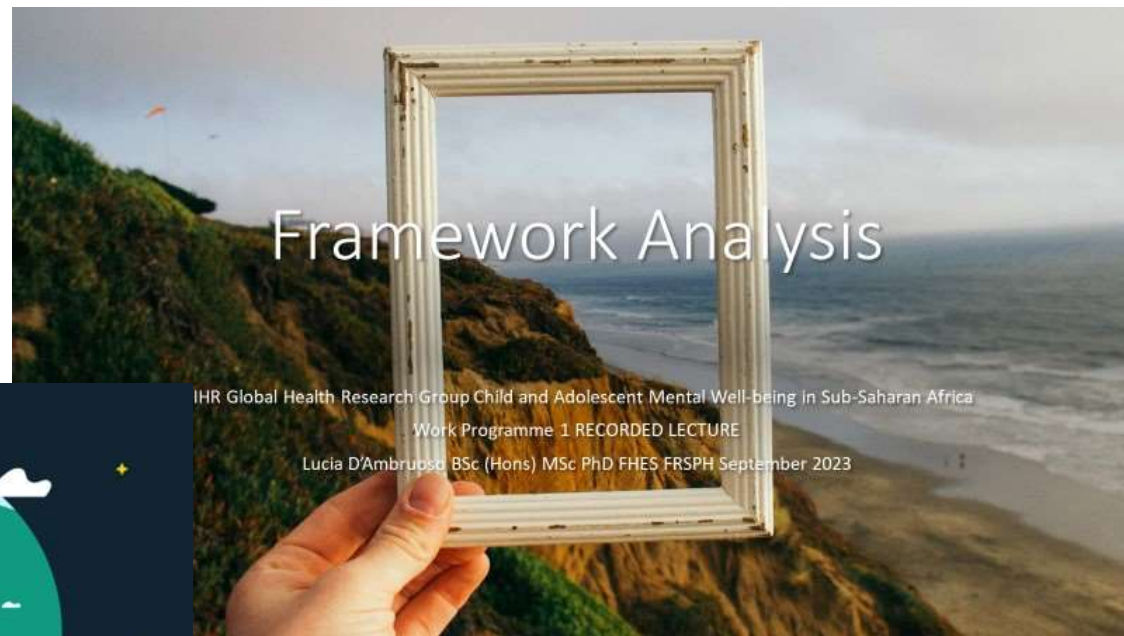
*...a position where disability is located in the opportunities provided by society for social reintegration and participation*

Burns et al 2015: Poverty, inequality and the political economy of mental health

# Triangulation of observations; comparison and exploration of differences (rather than search for unique fact)

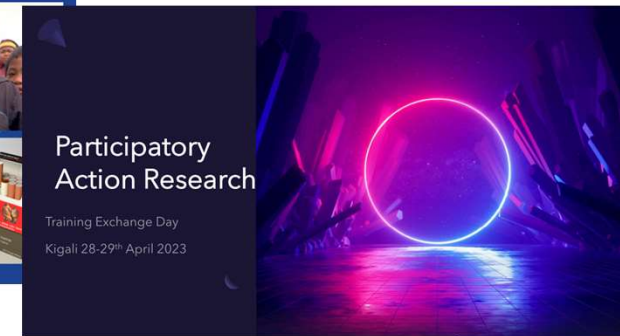


# Training videos



# Capacity Exchange

- SA PG lecture Jan 2023
- PAR Training Kigali April 2023
- FA/PEA Recorded Lectures Sept 2023
- **Further resourcing?**



**Participatory Action Research (PAR)**

*"As a result of the training, my confidence to organise and progress a participatory action research (PAR) process has significantly changed ....Besides, I had no idea about power distribution between researchers and participants in the whole process of PAR and how to facilitate the PAR activities in workshop before the training. It was during and after the training that I came up with enough knowledge, skills, and attitudes to organise a PAR process." - Quote from participant.*

**Materials from Training Exchange on Participatory Action Research (PAR) as part of Work Package 1, which took place in-person in Kigali, April 2023.**



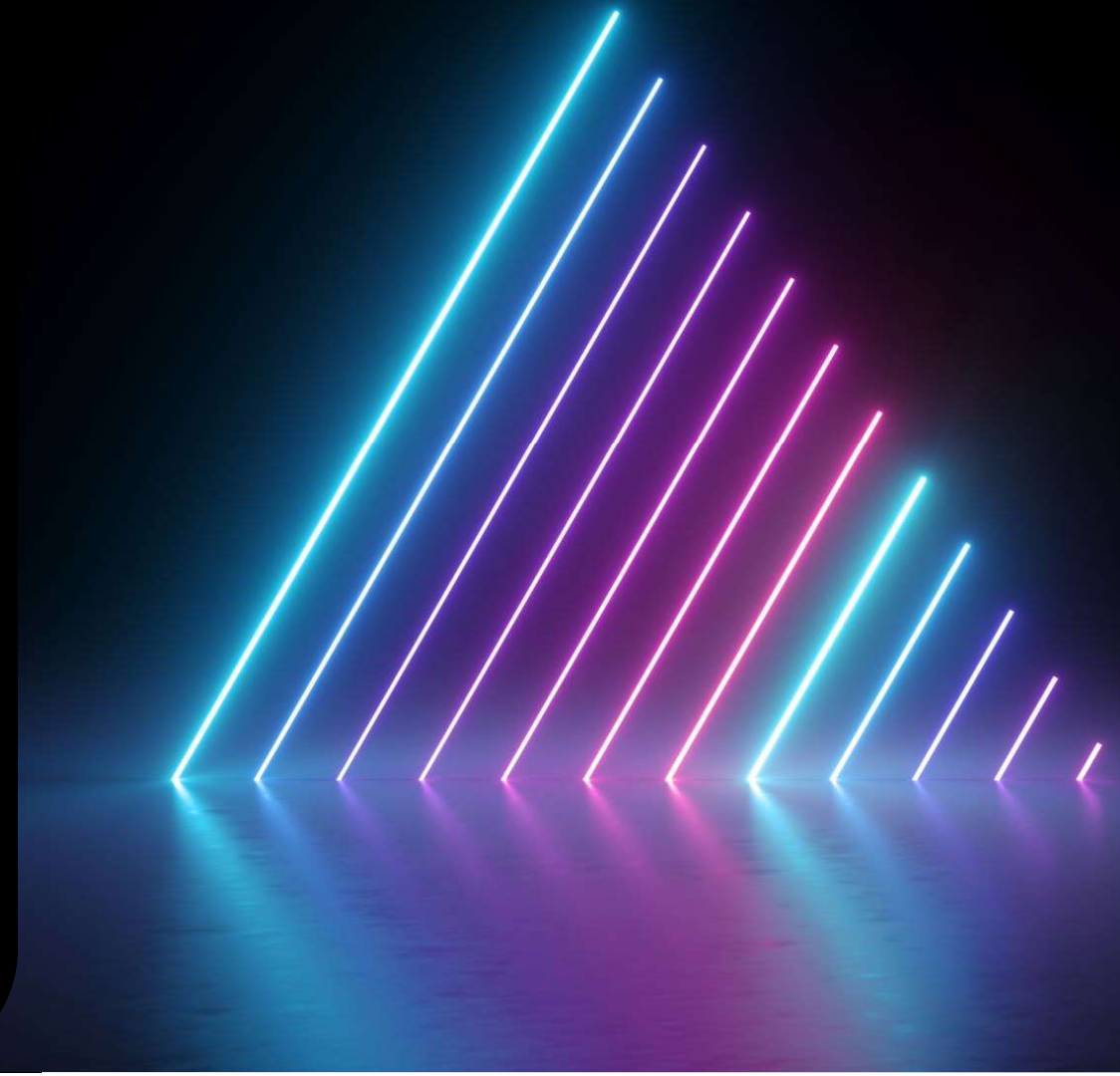


# Thank you

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Adolescent Mental Well-being in Sub-Saharan Africa  
Work Programme 1

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September 2023



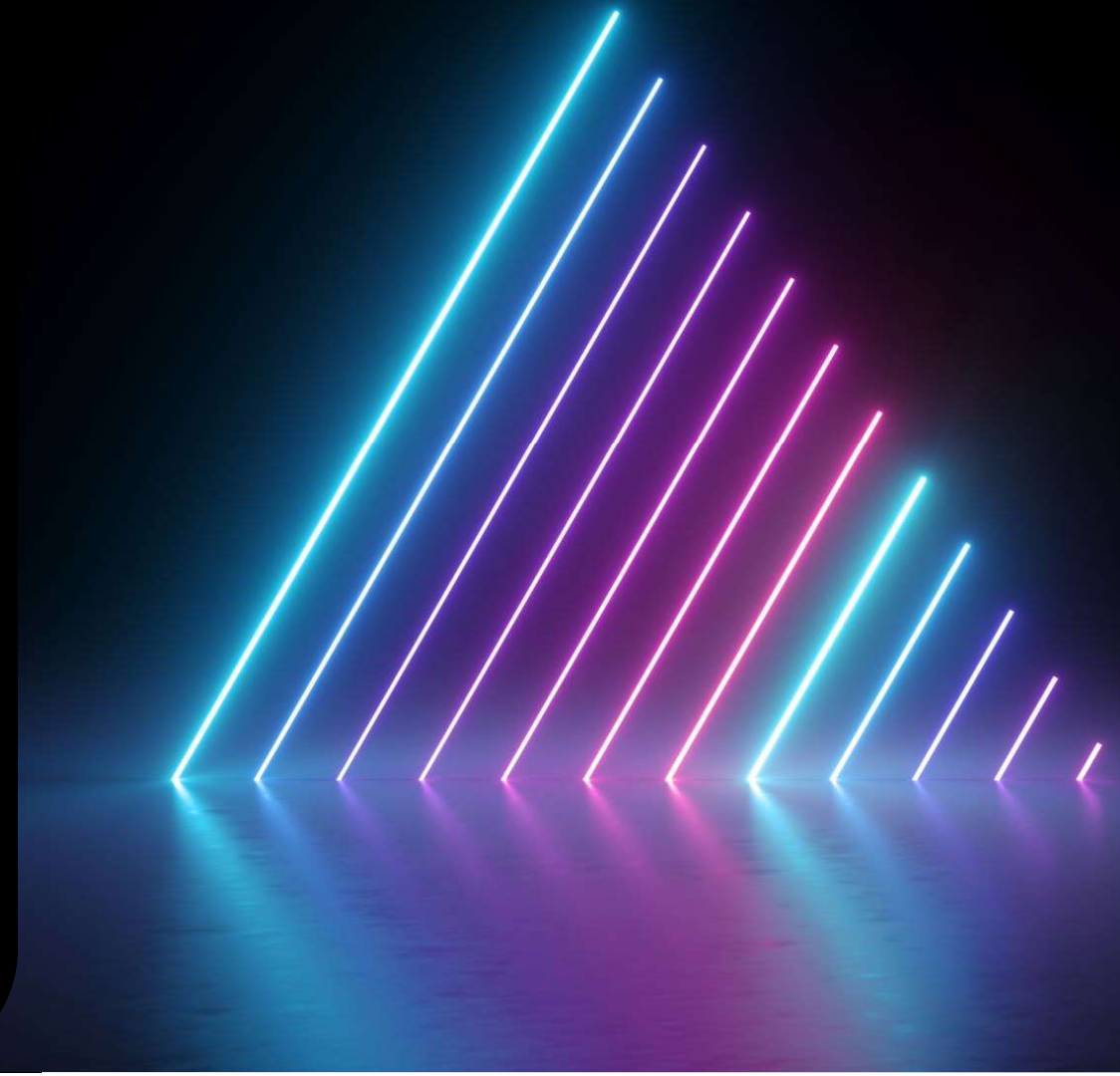


# Next Steps

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Work Programme 1

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September 2023



# Next Steps

- a) Products and papers
  - a) PEA paper Ethiopia
  - b) PEA paper Rwanda
  - c) ?Comparative paper
  - d) Training /capacity exchange

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PAR Training Exchange April 2023  
- Role Playing Feedback

A woman smiling in front of a chalkboard with handwritten notes.

PAR Training Exchange April 2023  
- Critical Discussion

Participants having a critical discussion on data collection and analysis, including ethical considerations. PAR Training Exchange in Kigali, April 2023.

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**Political Economy Analysis**

NHRI Global Health Research Group Child and Adolescent Mental Well-being in Sub-Saharan Africa Work Programme 3 RECORDING LECTURE  
Lucia D'Ambrosio BSc (Hons) MSc PhD FHEA FRCGS  
September 2023

**Framework Analysis**

NHRI Global Health Research Group Child and Adolescent Mental Well-being in Sub-Saharan Africa Work Programme 3 RECORDING LECTURE  
Lucia D'Ambrosio BSc (Hons) MSc PhD FHEA FRCGS  
September 2023

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1530-1630 Rwanda Situation Analysis: preliminary findings

1630-1700 Products, papers, next steps

# Ethiopian Desk Review + SA

## Multiple, overlapping, complex systems → Circular relationship poverty + MH

### Global system

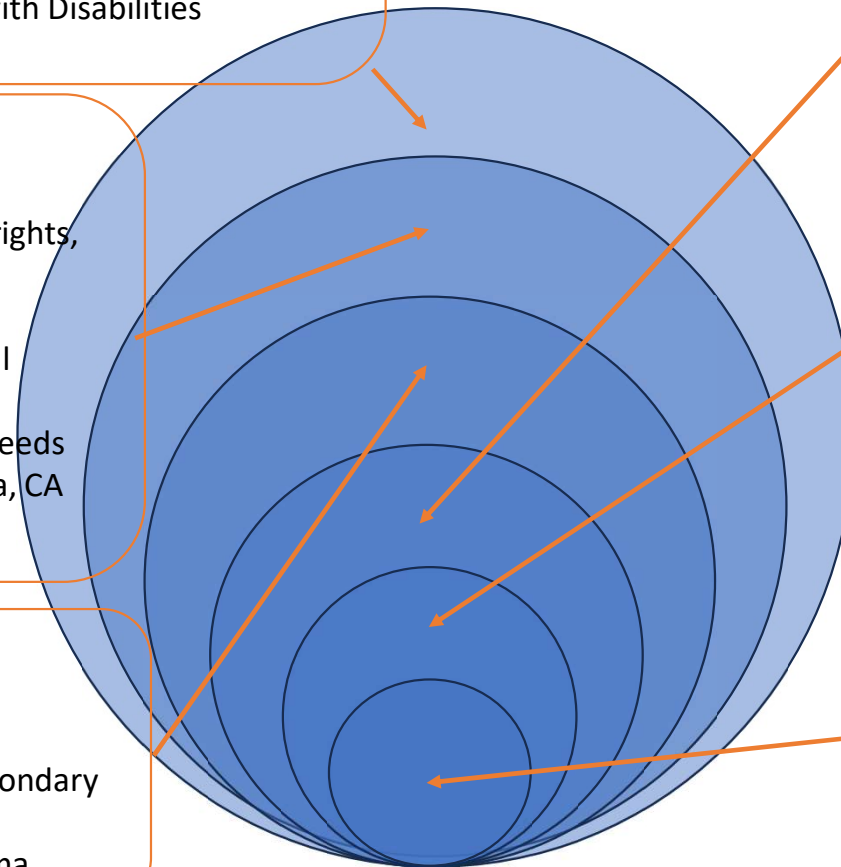
- Aid dependency/donor influence
- Aid conditionalities
- Trade liberalization, market oriented neoliberal → ↑ poverty, inequality and ↓ social cohesion
- WHO MH agenda influential
- WHO Global Comprehensive MH Action Plan mhGAP
- UN Convention on Rights of People with Disabilities
- SDGs

### Political economy/domestic/state

- Federal state
- Authoritarian restricted democratic rights, democratic elections
- Conflict → aid withdrawal
- Economic growth / Multigenerational poverty / exacerbated by COVID
- Rapidly urbanizing / health housing needs
- 2<sup>nd</sup> MH strategy 2020-25, lack of data, CA and schools for MH

### Health/ education systems

- Significant gains MCH, HIV, PHC
- Significant gains primary edu, free
- Primary 1<sup>st</sup> 2<sup>nd</sup> cycle drop out, low secondary
- Epidemiological transition
- HEWs, MCH gains, NCDs and MH stigma



### Community and school

- Violent disciplining in schools reducing

### Family and home

- Long history traditional beliefs/practices
- Supernatural causation MH
- Biosocial views of MH incl. supernatural
- Multidimensional poverty
- Domestic abuse and violence / verbal and physical punishment

### Individual (CA)

- Shift in views, 'subjects not objects'
- Gender role socialization
- Influential agents in community
- CA learn about MH from family
- **Little info on CA and their understandings of MH**

# Sector level finding

- Central UK govt has far less capacity to drive change than most stakeholders publicly or privately admit
- Other stakeholders might have more agency, relative to central govt, than they might assume
  - Take ownership of policy objectives and means
  - Be prepared to argue for such a view
  - Opportunities to exercise more agency

# Acknowledgments

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