

2.6 Building on the work of exchange visits



In this Chapter:

- Mentoring and support
- Equipment and book donations
- Monitoring and evaluation
- Joint Research; disseminating and publishing your work

The strength of Links is in their continuity and sustained support over time. This will involve direct training visits but of equal importance is the support, encouragement and mentoring that takes place between the direct visits and contact sessions.

In addition, monitoring and evaluating the progress of your Link is important to determine whether the agreed objectives are being achieved. You should also consider sharing information about your work and any lessons learned. This Chapter gives you ideas and guidance about these issues.

Colour coding has been used throughout the Manual to highlight the sections which are most relevant to each:

-  green for the UK
-  and yellow for the Developing Country (DC) partner.

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Mentoring and support

Mentoring is an arrangement whereby one person supports another to develop their skills, improve their performance and maximise their potential. Mentoring is more than just giving advice. It is also about motivating and empowering the other partner to identify their own issues and goals and helping them find ways to achieve these.

Health worker shortages in DCs often mean that many professionals find themselves working in relative isolation. Their UK counterparts tend to work in a much larger team receiving support from many colleagues. Mentoring can help to provide DC partners with the professional support they need.

If you have been involved in working closely with a colleague from your partner organisation during an exchange visit, it may be helpful to continue the relationship through mentoring or seeking other support such as advice, contacts or references when needed.

DC

REMEMBER!

If you do not have colleagues who can support you professionally maybe someone from your Link partner could provide remote support.

Establish what you may want from the relationship. Perhaps they might be able to talk through some difficult cases with you, advice on how to take your work forward, or share relevant books and articles with you.

Ask around and find someone who has the time to help you, establish the best method for communication, and call on them whenever you need their help. Even if you /they have not been directly involved in exchange visits or your areas have not been identified as key focus areas for the Link, you may still be able to receive support through mentoring.

See also the Telemedicine Links on p131.

Equipment and book donations

Occasionally, it may be appropriate to send equipment, books or journals from the UK to the DC organisation. If planned correctly, this can be of enormous benefit to the DC partner and can help alleviate some of the problems associated with working in a resource-poor environment. However, before doing this, it is important to consider the following:

- **Has the DC partner requested it?** Developing countries are not a dumping ground for old equipment, books or computers.
- **Are they relevant to the agreed needs of the partner?** Ancient journals or outdated text books are likely to be of little use.
- **Is the item suitable** for the DC partner's requirements? Are spare parts and consumables available locally? Is there the technical back-up that may be required? Should surge protectors be used to protect the item against fluctuations in the local electricity grid?
- **Does the equipment comply with national guidelines?**
- **Is it possible to purchase the item locally**, is this cheaper rate than the shipping costs? Remember, purchasing locally also contributes to the local economy.

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CASE STUDY

Donated equipment

Action Zambia is a UK registered Charity which supports the work of the Link between Leeds Partnerships NHS Foundation Trust and Chainama Hills College Hospital. Chainama Hospital is the only mental health hospital in the country serving some 12 million people.

The physical environment and general patient amenities are poor and staff requested assistance to improve both aspects. The charity is in a working partnership with the hospital management team and the Link to complement the hospital's own planned renovation work.

As this work is aimed at the fabric of the buildings, the charity has focused on providing pieces of equipment which were specifically requested. This included beds and mattresses and IT equipment to enable the Link to establish a learning lab and video teleconferencing facility.

The charity has also purchased an industrial-sized washing machine for the hospital laundry department which did not have one that worked. The model was selected by the hospital and purchased and shipped from the UK, as it could be bought much cheaper in the UK than in Africa.

Future plans are to support the development of therapeutic occupational activities (e.g. gardening, carpentry and chicken rearing) which will equip patients to be more independent on discharge and aid social integration.

UK

FIND OUT MORE

Equipment and book donations

- Refer to Appendix 8 for further health information resources. These are targeted at sharing up-to-date information in DC. This includes the HINARI programme, TALC, HIFA2015 knowledge network and many more.
- THET's guidance sheets on *Making Donations and Shipping Donations* are available from www.thet.org.uk.
- The WHO advocates for four underlying principles of good practice when transferring equipment:
 - 1) Health care equipment donations should benefit the recipient to the maximum extent possible.
 - 2) Donations should be given with due respect for the wishes and authority of the recipient, and in conformity with government policies and administrative arrangements of the recipient country.
 - 3) There should be no double standard in quality. If the quality of an item is unacceptable in the donor country, it is also unacceptable as a donation.
 - 4) There should be effective communication between the donor and the recipient, with all donations made according to a plan formulated by both parties.
- Refer to the WHO Guidelines for Health care Equipment Donations. www.who.int/hac/techguidance/pht/1_equipment%20donationbuletin82WHO.pdf
- Also consult the Appropriate Health Technology Group guidelines available at: www.conferences.theiet.org/aht

Monitoring and evaluation (M&E)

Monitoring and evaluating the work of the Link may seem less of a priority than the actual activities you are undertaking. Many Links, pressed for time and resources, have tended to push it aside. It can also seem hard to measure change and attribute the Link as the causal factor for this change when there are so many other variables.

But good monitoring and evaluation is vital if the Link is going to make an impact. It will help the Link improve its work and show others it is worth investing in. Getting it right from the start is important: if you stated your outcomes 'SMART'-ly during the initial planning process (see p46) it will be easier to evaluate later on.

THET has developed an excellent *M&E Toolkit*⁵ especially aimed at helping Links to monitor and evaluate their work. Links are advised to consult a copy during the early planning stages of a Link, factoring evaluation in right from the beginning.



FIND OUT MORE

Monitoring and Evaluation Toolkit

What Difference are we Making? A Toolkit on Monitoring and Evaluation for Health Links, by Mya Gordon and Caroline Potts.

This Toolkit, designed especially to help Health Links evaluate their work, makes the sometimes complicated task of evaluation look easy. It is divided into six easy-to-follow chapters:

1. Monitoring and Evaluation in Context
2. Planning to Monitor a Link Project
3. Practical Tools for Collecting Data
4. Tips on Analysing Data and Writing Reports
5. Designing an Evaluation of a Link
6. Follow-up to Evaluations

The Toolkit was published in 2008 and is available for download from THET's website or hard copies can be purchased from www.cpibookdelivery.com/our-books/tropical-health-and-education-trust at a cost of £10.50 a copy.

Joint research; disseminating and publishing your work

The work you are doing is likely to be relevant to other people. You should consider how your work can be shared with others and what the best way of doing this is.

Developing countries tend not to have the same tradition of doing research or writing papers as in the UK. Many journals have a northern-centric approach and there is a bias to anglophone publications. If something of interest is emerging from your Link, discuss the possibility of developing joint research collaborations. This can be presented as another dimension of partnership.

There are two types of papers you may think about publishing. The first is a descriptive study sharing experiences from your Link: what you did, how you did it and any changes that resulted because of it. This will allow others doing similar work to learn from your experiences and promote Health Links.



FIND OUT MORE

Leather *et al.* **Working together to rebuild health care in post-conflict Somaliland**, *The Lancet* 2006, vol. 368, no9541 pp. 1119-1125

Baillie *et al.* **NHS Links: Achievements of a scheme between one London Mental Health Trust and Uganda** *Psychiatric Bulletin* Accepted 7 July 2008

⁵ *What Difference are we Making? A Toolkit on Monitoring and Evaluation for Health*, by Mya Gordon and Caroline Potts.

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The second type of paper is collaborative research. This may involve working together to look at locally relevant disease patterns, treatment protocols or services.

What type of research is important? Research should be encouraged that:

- **Improves clinical treatment.**
- **Stimulates planning** e.g. by generating statistics and a better understanding of the burden of disease.
- **Measures outcome** so that you can see the effect of the intervention.
- **Develops services** through operational research.
- **Develops people** that uses and develops local skills wherever possible.



FIND OUT MORE

Walker et al. **Eosinophilic glomerulonephritis in children in South Western Uganda** *Kidney International* 2007, vol. 71, 569-573.

Alemu S , Prevett M **Treatment of Epilepsy in Rural Ethiopia: 2 Year Follow-up**, 2004, *Ethiop.J.Health Dev.* Vol 18(1):31-34

Carter E, Yifru S, Archdeacon C, Barbrook C, Gebremedhin M, **Setting Up Clinical Audit in Gondar Hospital, Ethiopia**, 2008. *Ethiop Med J, Vol. 46, No.3*

Target your paper at the most relevant journals. Each journal's website normally has instructions for authors with writing and submission guidelines. Many journals also have online versions which are more substantive than the paper versions. Most of the general medical journals are keen to draw attention to global health challenges/issues and can do so in a variety of guises - not just substantive papers. Many of these have news sections and sites where people can post blogs about their experience and views. This is also another avenue for drawing attention to your Link.

Remember that THET can also promote and share your work through our e-bulletins. So if you have a story to share please email us on info@thet.org



CHAPTER CHECKLIST

- ✓ Effective communication is one of the most important aspects of Links.
- ✓ Keep accurate records of the work of the Link and share them with partners.
- ✓ Monitoring and Evaluation should be high up the agenda. Make sure you have a copy of THET's *M&E Toolkit*.
- ✓ Where possible, try to publish your work and develop joint research programmes.

Photograph (right): John MacDermot, Somaliland

Without trained and motivated health workers, the Millenium Development Goals will never be met.

