

# Learning Brief

## Equitable Partnerships

This learning brief is designed for the National Institute for Health and Care Research (NIHR), NIHR partners and awardees, as well as the wider global health research and policy community. This learning is drawn from our Evaluation of NIHR's Global Health Research Portfolio, First Phase (2016/17-2020/21).



### What's the issue?

Equitable partnerships between academic institutions in the Global South and North are considered increasingly fundamental to global health research. Researchers from the Global South are best placed to formulate research questions and studies that respond to the priorities of their contexts and communities. As such, Southern institutions and researchers should be involved across all stages of research projects, as well as in shaping the agenda on the relevant issues in their respective contexts.

This has not always been the case, and global research has been critiqued for its 'helicopter' or 'parachute' approaches, where researchers from the Global North have tended to conduct data collection without the involvement of local researchers or communities. Even where local researchers were involved and made important contributions to supporting data collection and analysis, they often remained unacknowledged in research outputs, and excluded from dissemination efforts. This has reinforced a historical legacy of unequal power relations between Northern and Southern research institutions, and between researchers and communities. It has also maintained a skewing of the research agenda towards the priorities of Northern funders and academics and perpetuated a lack of investment in research infrastructure and capacity in the South.

There is no agreed definition of equitable partnerships and how the concept translates into practice. While understandings of the terms 'partnership' and 'equity'

can vary, the literature points to some key principles and practices. For example, partnerships which ensure equal participation and benefits for the partners and researchers involved and promote the leadership of local researchers are considered equitable. Partners' different skills and knowledge are equally valued in equitable partnerships, and there is understanding of the contextual and organisational considerations that affect their participation. Such partnerships often involve intentional efforts to reflect on and challenge the inequalities that are inherent to the global health research ecosystem, build cultures of mutual trust and respect where each partner is enabled to contribute equally, and ultimately shift power.

Research funders like NIHR are actively emphasising equitable partnering practices and encouraging and testing different approaches to supporting this. However, pursuing equity is challenging. The broader institutional context of global health research, and the inequalities and power imbalances that are embedded within it means that Northern and Southern researchers do not enjoy a level playing field. Southern institutions often have to partner with Northern institutions, which are more advantageously placed to access and manage funding from Northern donors. This dynamic significantly shapes how specific partnerships are formed, whose knowledge and skills are valued, and the extent to which Southern partners can participate and benefit equally.



## Key considerations from the literature

This section provides an overview of the principles, recommendations and strategies offered by the literature that can support building equitable partnerships in practice. The need for attention to context is emphasised as a key principle, in particular, the ways in which the institutional environment of global health research and country contexts shape the ways in which partnerships operate, and their potential to be equitable and transformative.

### Understanding the lived realities of local researchers

There are significant disparities in the clinical, laboratory, financial and human resources available to Northern and Southern institutions. Northern researchers benefit from protected time for research activities, access to administrative and management support, and training and mentoring systems, while Southern investigators must often balance their research activities with heavy clinical or academic workloads, with limited institutional support. This has implications for timelines (which are often set on the basis of Northern assumptions as default) as well as stress burdens and well-being.

### Enabling collaboration

Supporting partners, stakeholders, and collaborators to meet, engage in deliberative dialogue and collectively develop ideas through pre-proposal workshops enables broad based ownership by supporting the alignment of research priorities. It is also an opportunity to strategically identify and harness the knowledge and skills of different partners, embed stronger relationships and communication practices, and explore and respond to power imbalances. This may require setting longer call windows so that partnerships have adequate time to establish and develop collaborative practices.

### Collectively agreeing roles, responsibilities, and ways of working

It is necessary for partners to develop a common understanding of research objectives, mutually agree on roles and responsibilities, envision and frame approaches to equity and inclusion, and plan for effective communication at the outset. For partnerships to be equitable, Southern institutions and stakeholders should be involved in all decision-making processes, including shaping the research agendas, providing leadership, determining budget allocations, and defining outputs. Partners also need allocated time and funding to create spaces and processes within which they can foster their individual and institutional relationships and discuss progress and learning on an ongoing basis.

### Cultivating anti-colonial research practices

Naming colonial research practices as such, and explicitly discussing how racism, class discrimination and colonial legacies manifest and their harmful impacts, will open up space to envision and develop alternative practices and anti-colonial cultures and ways of working. This should include contending with questions about knowledge hierarchies, what kind of evidence and whose voice is valued, understanding the culturally-grounded world view and health-related behaviours of communities, and how funding structures and research systems advantage Northern institutions and researchers. Funders and Northern institutions should be open to receiving and supporting this kind of challenge.

### Building partnering skills

Equitable research partnerships require leadership that is committed and able to reflect on and engage with transforming power relations. This requires investing in researcher skills in building collaborative working practices, creating and facilitating space for open discussion and collective learning, and consistently bringing to the fore the needs and aspirations of Southern partners.

### Investing in Southern researchers

Contributing to the knowledge, skills, and research and leadership experience of Southern researchers, and considering adopting formal targets and indicators for this, is critical to building stronger and more equal collaboration. In addition, and equally critical, is the provision of long-term support for organisational capacity in grants and financial management, infrastructure, and human resources (see the RCS learning brief).

## Ensuring fairness in research benefits

In addition to ensuring that Southern researchers are fairly included in authorship and acknowledgements, attention should also be given to making sure that other benefits are also distributed fairly. These include equitable shares of the research funding, training opportunities, technology transfer and policy-level and social recognition.

## Mutual learning and adaptation

Equitable partnerships should create space and opportunities for partners to learn from each other and reflect on and negotiate research practices. This requires flexibility and openness to uncertainty and adaptation as well as an emphasis on learning exchange where knowledge is shared in multiple ways across the partnership or consortium. Supporting Northern and Southern researchers to develop new skills and try out different ways of working is a critical component of equitable partnerships and can make a real contribution to the knowledge base on research and knowledge production.



## NIHR's approach

Equitable partnering is a core value for NIHR, and awards are strongly encouraged to demonstrate how equity is reflected across research leadership, decision-making, capacity strengthening, governance, distribution of funds, ethics processes, data ownership, and publication and dissemination of findings. At the same time NIHR recognises the complexities and challenges of implementing global health partnerships and ensuring equity and addressing unequal power dynamics within the research ecosystem. NIHR's ['Equitable Partnerships Guide'](#) provides links to a range of resources on building equitable research partnerships; evaluating and improving established research partnerships; and supporting capacity strengthening to maximise the benefits of partnerships. NIHR also monitors awards' partnering approaches by reviewing collaboration agreements, and seeking evidence of joint leadership, the locations of key personnel, and Global South representation on advisory groups.



## Our findings

This section outlines some of the key findings on NIHR awards' approaches and practices on equitable partnerships that emerged from the evaluation of the first phase of NIHR's GHR programme. These findings in part draw on the evaluation's online survey, disseminated to all funded awards. The survey explored perceptions of equitable partnerships among both LMIC and non-LMIC partners, and responses are presented in the graphic below.

**Most NIHR-funded awards made genuine efforts to ensure equity across their consortia.** Northern and Southern partners showed significant commitment to developing equitable partnerships, and there were a range of examples of good practice in terms of country partner involvement in setting research priorities and designing and implementing the research, the establishment of inclusive governance structures, and efforts to embed open communication, trust, and mutual respect. Progress was variable, however, and some large, multi-country consortia found it more challenging to embed collaborative practices across different sites. Awards also identified a range of strategic and operational challenges which relate predominantly to navigating unequal power relations, particularly within the current global health institutional context.

**Country partners' contextual knowledge and stakeholder relationships are valued within NIHR awards.** As it became clearer that their contextual knowledge was critical to both the substance and effective operationalisation of the research, Southern partners were able to take on stronger leadership roles within partnerships. Awards highlighted the importance to the research of ensuring that country partners had the space and resources to navigate and respond to the social and cultural context on an ongoing basis. For country partners, awards' willingness to adapt strategies reflected mutual respect, and an acknowledgment of the value of knowledge that is grounded in local realities.

### **An intentional approach is a key enabling factor.**

Lead researchers from both Southern and Northern institutions played a critical role in establishing a vision for equitable partnering from the outset, working in empowering ways themselves, creating space for others, encouraging autonomy, and consistently reinforcing equity principles. Those lead researchers with interest, skills and experience in building relationships, effective communication, facilitation, and network-building were more effective at this. Taking the time to define locally rooted partnership values, establish organisational structures, and determine roles and responsibilities and ways of working supported multi-partner, multi-disciplinary teams to work effectively.

Those awards that were able to access NIHR development grants to bring partners together at the proposal development stage found that this proved ‘invaluable’ in supporting the establishment of strong relationships, a shared vision, and a culture of knowledge sharing.

**Partners’ strategic and technical leadership evolved over time.** Awards’ experience showed that equitable partnerships take time to develop and require effort. As the research progressed, in some awards leadership in strategic decision-making shifted to country partners. In others, country partners transitioned from leading contextual research and analysis to taking ownership of the design and delivery of research, and in yet others country partners took on leadership of cross-learning with other country partners and wider networks.

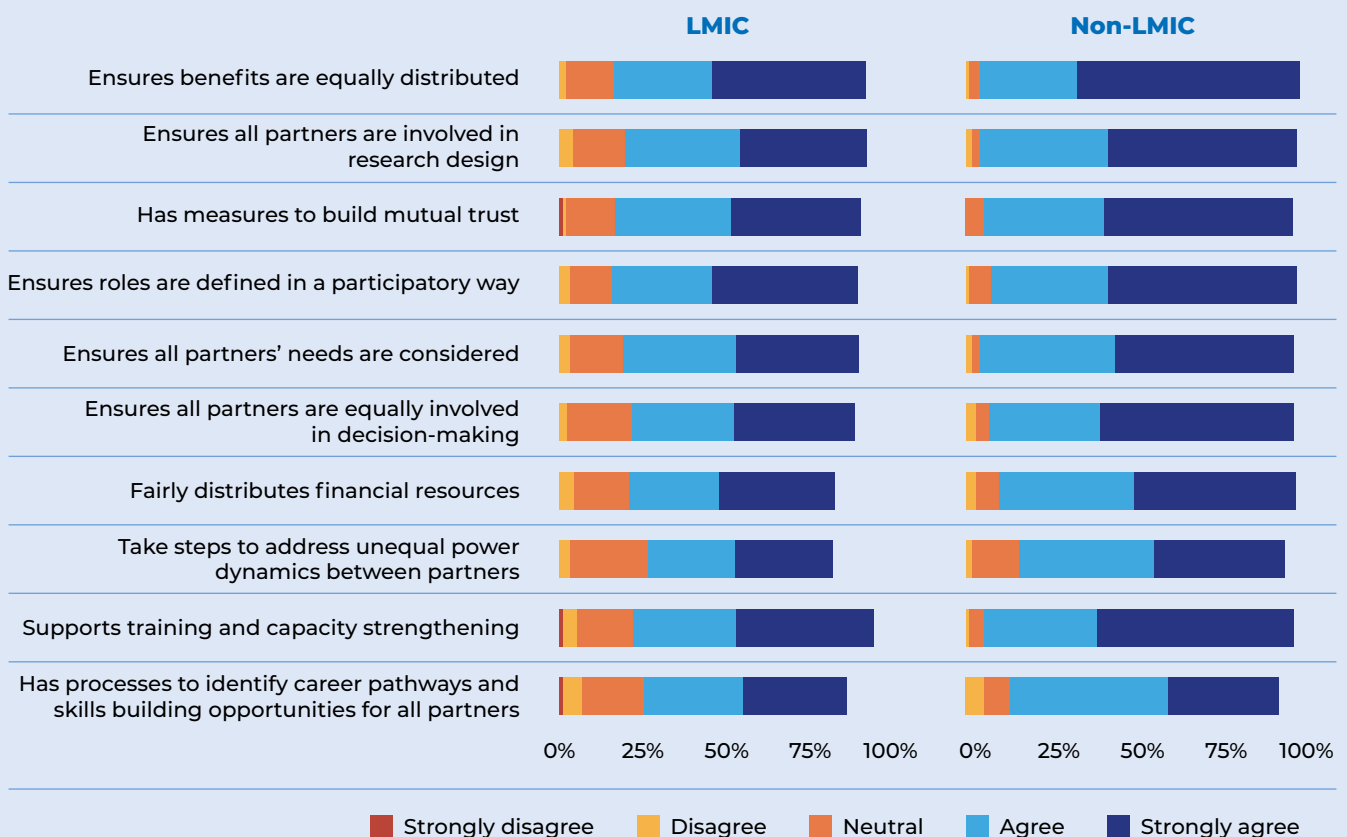
**Establishing equitable governance and management systems supported collaborative decision-making.** Several awards emphasised the establishment of management structures which included equal representation from all partners and were responsible for strategic decision-making as a key pillar of their equitable partnership approach. Governance and advisory mechanisms included

Steering Committees, Advisory Boards, Management Groups, and thematic Working Groups. Country partners noted that they had exercised progressively greater influence in these spaces.

**Regular and open communication supported stronger relationships, knowledge exchange and trust-building.** Awards organised quarterly and annual all-team meetings chaired by different partners, as well as regular small meetings. These enabled teams to have open and honest discussion in a safe environment, and engage in self- and collective reflection, knowledge exchange and learning.

**Participating in equitable partnerships enhanced country partner capacity.** The experience of working within an equitable partnership supported partners to feel more confident in their engagement and participation in research consortia. Supporting the skills and leadership experience of Southern researchers and institutions enabled them to form new collaborations, develop and lead locally initiated research, attract further donor funding, and provide capacity support and mentoring to others. Multi-country awards provided a platform within which partners could brainstorm, innovate, and develop spin-off projects, as well as build wider local relationships and networks.

### Survey responses on equitable partnerships by Southern (LMIC) and Northern (non-LMIC) partners





### **Funding structures do reinforce power hierarchies.**

There were perceptions amongst some Southern partners that funding mechanisms do not have adequate representation from Southern researchers, and research priorities are still often shaped by UK institutes, usually in response to global health research agendas and without fully taking on board input from country partners. Country partners are often obliged to partner with Northern institutions/ individuals because it is challenging to win funding without them. NIHR's focus on capacity strengthening, and the tendency to assume that Northern institutions will support the capacity of Southern partners and not vice versa, can also create power dynamics which must be carefully navigated, including through the careful use of language. Reporting requirements, clinical writing standards and the dominance of the English language also disadvantage some Southern partners. Burdensome reporting and due diligence requirements were also perceived to reinforce unequal power relations.

### **The institutional/operating contexts for country partners shaped their ability to participate and lead.**

Country researchers reported that they often did not have access to the same resources and supportive capacity as Northern researchers. This undermines the ability of Southern researchers to secure grants, manage projects and negotiate fair terms of agreement and this can create tensions between the imperatives for collaboration and the need for efficiency. Southern lead researchers highlighted that they were often not able to protect sufficient time to dedicate to the research in the same way as their counterparts in the UK institutions – particularly if they were practitioners – and this affected their ability to provide leadership. The broader governance context can also create operational challenges and risks for country researchers that they must additionally manage.

### **Understanding partnership progress requires ongoing dialogue, feedback mechanisms and monitoring.**

Most NIHR-funded awards demonstrated high levels of commitment, and the awards survey reflects generally positive views about equitable partnerships. However, as the figure above shows there are differences between the perspectives of Southern and Northern researchers, with the former considering partnerships to be less equal. Agreeing markers for progress – for example on ownership, level and type of engagement, collaboration, resourcing, and accountability – and monitoring these over time will reveal how different stakeholders are experiencing the partnership, provide an assessment of progress and support learning and adaptation.

**Authorship remains skewed towards Northern institutions.** There is strong evidence of awards' concerted efforts to make academic authorship practices more equitable, and some research teams have taken steps to list Southern researchers as lead

authors rather than co-authors. However, a Bibliometric Analysis undertaken as part of the evaluation still shows notable involvement from institutions in high and upper-middle-income countries (78.2% of total author institutions' affiliations across all funded publications), with limited representation from lower-income countries (21.8% of total affiliations).

### **Limited attention has been given to the gender and inclusion aspects of equitable partnering.**

Beyond some awards promoting the representation of women in research teams and project management leadership, few awards considered the challenges that female Southern researchers, and those from marginalised groups face in accessing opportunities, resources and the benefits of partnerships, and how equitable partnering can respond to gendered and exclusionary inequalities and power dynamics.



## **Further reading**

Boum II, Y. et al, 2018, 'Advancing equitable global health research partnerships in Africa', *BMJ Global Health*, Vol 3: <https://gh.bmj.com/content/3/4/e000868>

Haelewaters, D., Hofmann, T. A. and Romero-Olivares, A. L., 2021, 'Ten simple rules for Global North researchers to stop perpetuating helicopter research in the Global South. *PLoS Computational Biology*, Vol 17, No 8: <https://journals.plos.org/ploscompbiol/article?id=10.1371/journal.pcbi.1009277>

Christian Aid, 2018, 'Fair and equitable research partnerships for international development research': [www.christianaid.org.uk/our-work/about-us/programme-policy-practice/resources-fair-and-equitable-development-research](http://www.christianaid.org.uk/our-work/about-us/programme-policy-practice/resources-fair-and-equitable-development-research)

Rethinking Research Collaborative, 2018, 'Research Report and Learning Resources: Promoting fair and equitable research partnerships to respond to global challenges', UK Research and Innovation (UKRI): <https://rethinkingresearchcollaborative.com/2018/10/04/research-report-promoting-fair-and-equitable-research-partnerships-to-respond-to-global-challenges/>

UKCDR/ ESSENCE, 2021, Equitable Partnerships Resource Hub: <https://ukcdr.org.uk/equitable-partnership/>

Zaman, M. et al, 2020, 'Equitable partnerships in global health research', *Nature Food*, Vol. 1: [www.nature.com/articles/s43016-020-00201-9](http://www.nature.com/articles/s43016-020-00201-9)