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Community-Centred Health

Scaling Up Grassroots Innovation and Building Ecosystems

Karina Maldonado-Mariscal

TU Dortmund University, Germany

Department of Social Sciences

Fajardo, Puerto Rico
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concepts that have been mentioned in this conference so far:

- Community centred-station

- Community monitoring advisory boards

- Participatory approaches

- Multi-sector engagement

- Engagement/ re-engagement

Content

1. Social Innovation and community-led innovation

2. Grassroots Innovation (GI)

3. Grassroots Innovation in Health

4. Co-creation and scaling up processes in Health

5. Building (Social) Innovation Ecosystems

1. Understanding Social Innovation

- It is "**a new combination** or [...] configuration **of social practices** in certain areas of action or social contexts"

- It is "**prompted by certain actors**"

- It is aimed at "**better satisfying or answering needs and problems than before**"

- It "is [...] social to the extent that it [...] is **socially accepted and diffused widely**"

- It is "transformed depending on circumstances and **ultimately institutionalised as new social practice** or made routine"
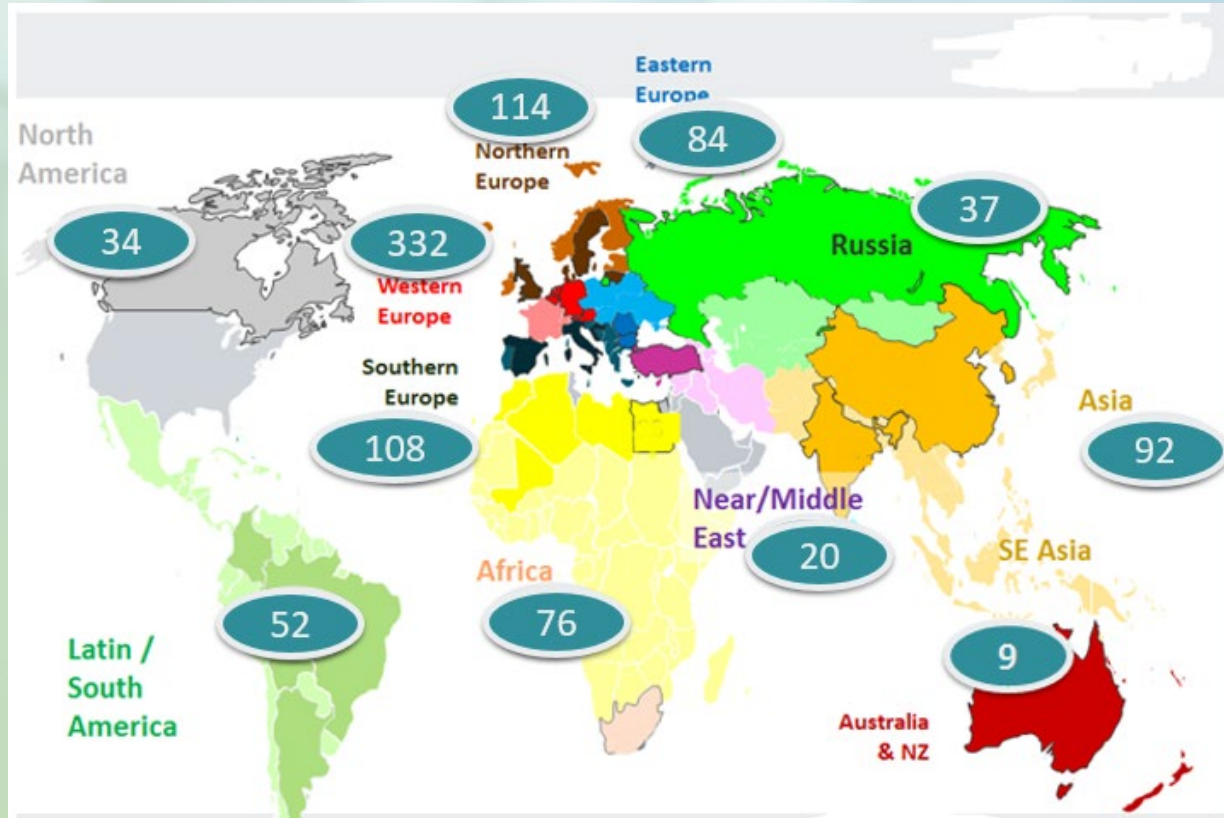
(Howaldt & Schwarz, 2010)

Embedded social innovation (space and institutions)

Local context matters

(Moulaert and Van den Broeck, 2018)
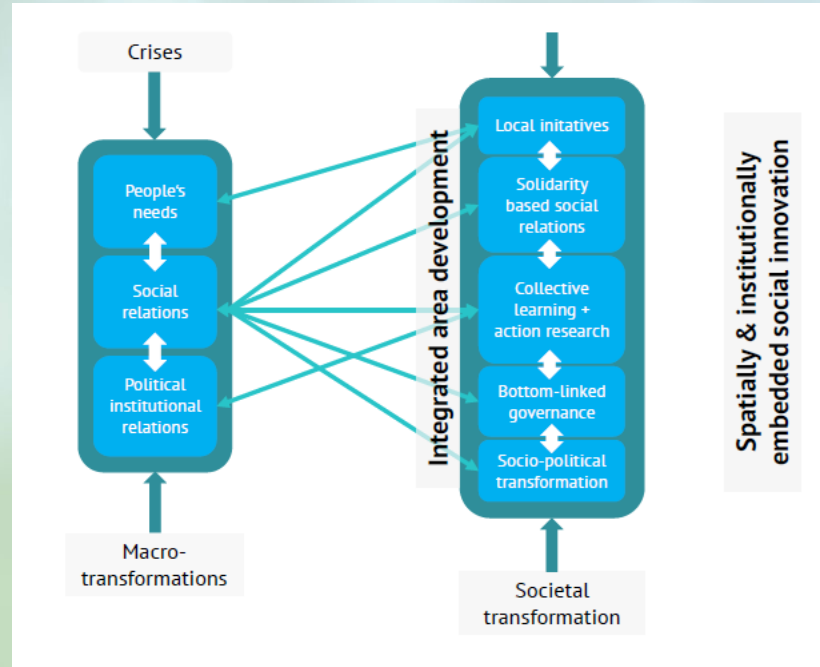
Mapping Social Innovations in the World: A European Project

A total of 1,005 cases

Policy areas addressed

Legend: Rank1, Rank 2, Rank 3

- Education: 21.0%, 16.0%, 12.6%
- Employment: 13.7%, 18.6%, 9.1%
- Environment: 9.5%, 14.8%, 5.6%
- Energy Supply: 8.0%, 0.8%, 1.1%
- Transport & Mobility: 12.7%, 2.2%, 0.7%
- Health & Social Care: 15.3%, 10.2%, 6.6%
- Poverty Reduction & Sustainable Development: 18.2%, 13.1%, 19.8%

N = 1.005
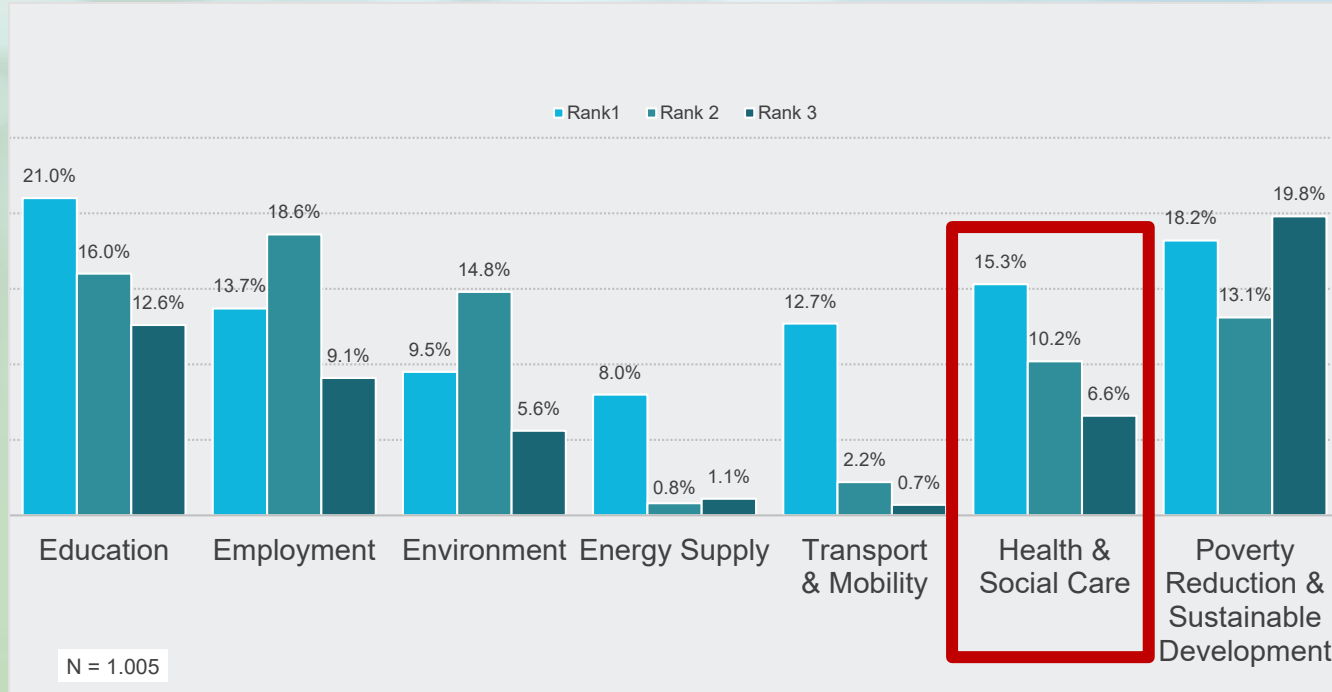
1. Social Innovation and community-led innovation

- Community centred-station
- Community monitoring advisory boards
- Participatory approaches
- Multi-sector engagement
- Engagement/ re-engagement

Social innovation

Grassroots innovation

Innovation policies

2. Grassroots Innovation

- **offers practical insights into understanding innovation** through the **lenses of grassroots and community-based social change**

- Grassroots innovation is related to:

  Public spaces, agency, poverty and inequality reduction, bottom-up solutions, collective actions

- We understand GI as:

  "**networks of activists and organisations generating novel bottom–up solutions** for sustainable development; **solutions that respond to the local situation** and the interests **and values** of the communities involved" (Seyfang and Smith, 2007: 585).

  (Maldonado-Mariscal, 2023)

More research on GI is needed:

Healthcare is not one of the main areas of Grassroots Innovations research…yet

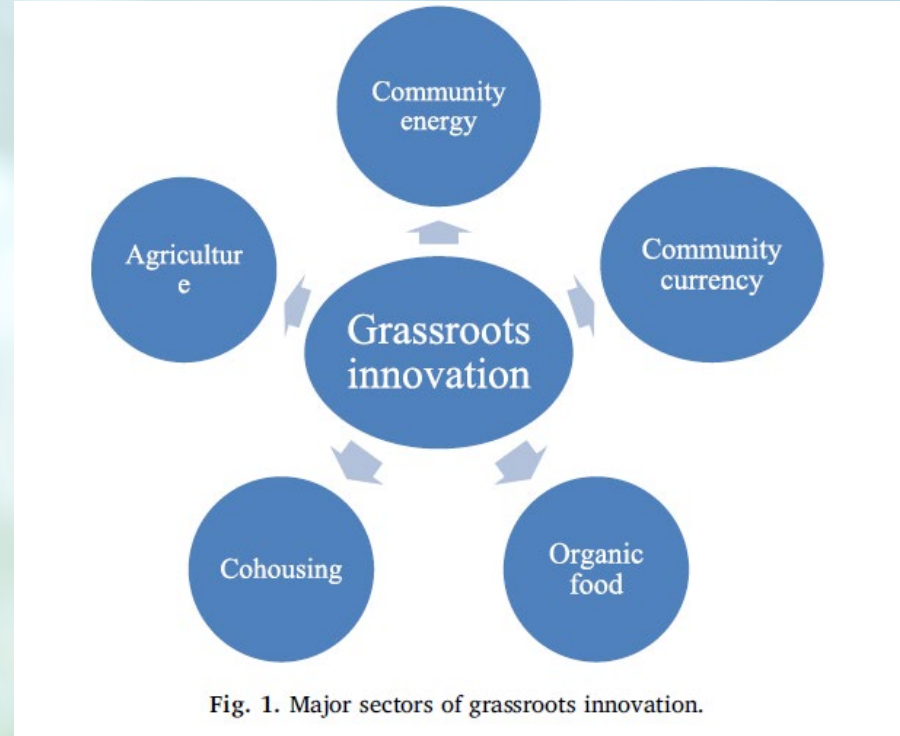➡️ We need to change the paradigm of innovation in healthcare

Fig. 1. Major sectors of grassroots innovation.

(Hossain, 2018: 64)

Nurturing Grassroots Innovations: Community Leadership is key

Community Dialogue Day, Kenya (Univ. Kansas)

- Community leaders **are often informal, non-elected leaders**

- Community **can meet their members' needs** (reinforcement), while shared emotional **connection is built through shared places and experiences**, such as joint history and time spent together

- **Community leadership is usually non-hierarchical** and often based in **voluntary action**
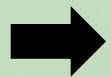
➡️ Key asset: Nurturing motivation, recognition, resilience, voluntary work

(Martiskainen, 2017: 80)

3. Grassroots Innovation in Health

Developing a collective intelligence is relevant. Why?

– **Growing evidence**, **skills** and **connections**

– **Citizen science** to gather new data for early detection or monitoring of public health threats

– **Citizen-generated data** for monitoring the implementation of policy and programs

– **Crowdmapping** for community response

– **Mobilise power and money**

- governments, organisations and communities become skilled at mobilising intelligence of all kinds (data, information and ideas - from, and with, communities).

– **Combining** web scraped and/or existing **datasets** for real-time surveillance of public health threats

(Peach et al., 2021)

What is Citizen Science?

Citizen science is looking for:

❑ democratising science
❑ helping interested communities to create data
❑ influence policy
❑ A way to promote political decision-making processes

Sources of images: *Citizen Science Association*

(Kullenberg and Kasperowski, 2016:1)

3. Grassroots Innovation in Health

image credit: Getty, O´Neill, 2021

Australia

- A national view of AIDS policies started more fundamental 'grassroots' level

- Australia's success have been built on **national initiatives and institutions** that are integral to the way AIDS is now viewed.

- **Grassroots and informal activities were critical** to Australia's early and effective response to AIDS and included:

  - **community mobilisation** (e.g. AIDS Action Committee)
  - the **timely intervention of frontline clinical services, alerted by early press reports**
  - **community activism** (e.g. education safe sex material for communities)

(Plummer and Irwin, 2006)

3. Grassroots Innovation in Health

Slogan: Communities leading

Brazil

- **Social mobilisation and relationships with the state** for the AIDS movement in Brazil

- **Inclusion of AIDS policy in civil society activism** as well as the support in policy advocacy

- Federative coalitions = **alliances in policy development** contributed to more institutionalised advocacy

- **Federative coalitions** as the **process of employing new grassroots organisations** and engage them to incentivize organisations and **build a new structure for a national AIDS movement**

NGO: 'Communities Leading'

(Maldonado-Mariscal, 2022)

3. Grassroots Innovation in Health

Brazil: instruments

- introduction of instruments and institutions that facilitated civil activist engagement (decentralisation efforts)
- commitment of international institutions to protect the well-institutionalised national AIDS programme
- national law (Sarney's Law) in 1996 that ensured universal access to AIDS treatment

(Maldonado-Mariscal, 2022; Rich, 2019)

3. Grassroots Innovation in Health

Brazil

- **Innovation:**
  - national bureaucrats who activated **grassroots mobilisation in new regions** what led to a decentralisation of AIDS policy
  - The **figure of community health workers is** in Brazil **very important**
  - **Bottom-up effort** to build a national movement

(Maldonado-Mariscal, 2022; Rich, 2019)

3. Grassroots Innovation in AIDS Policy

Brazil's stakeholders

Grassroots expertise

Policy makers

Bureau-crats-> support health policy activism

Civil society

Leadership participation in AIDS-policy commissions

From Activists to bureau-crats

A Transition

These new bureaucrats support with resources and channels to create new grassroots organisations: '**state-sponsored activism**'.

(Maldonado-Mariscal, 2022)

Other examples:

India

- Health Parlaments (India)
  - Think tank on health
  - "Public health transformation dialogues"

(Health Parliament, New Delhi)

4. Co-creation processes in Health

What is co-creation?

<u>Process:</u> **key tools/new methodologies for including society in policy development**
To experiment with "new modes of interaction" (Eckhardt et al., 2021:3)

<u>Practices:</u> refer to **the agreement between multiple stakeholders to achieve a common goal**

How?

Example: Co-creation of a health education program in Rwanda (Dzinamarira et al. 2020)

Who?

Citizens (Men in Rwanda)
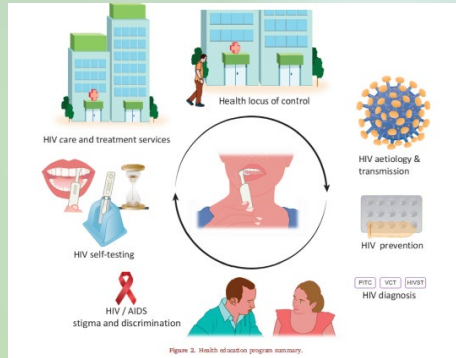Public sector (education, health)
Universities (researchers)

Figure 2. Health education program summary.

(Dzinamarira et al. 2020)

Scaling up: Environmental influences on scaling up

- Policy setting and political contexts

- Bureaucracy institutions

- Health sector organisation (service delivery, material resources etc.)

- Socio-economic and cultural context

- People´s needs and rights

Scaling-up initiatives can offer possibilities for synergies with national health sector reform processes

(WHO, 2009)

4. Building (Social) Innovation Ecosystems

What is an ecosystem?
"a complex system of interaction between various stakeholders" (Eckhardt et al., 2021; Kumari et al., 2019; Jütting, 2020; Pel et al., 2020).

How to build it?
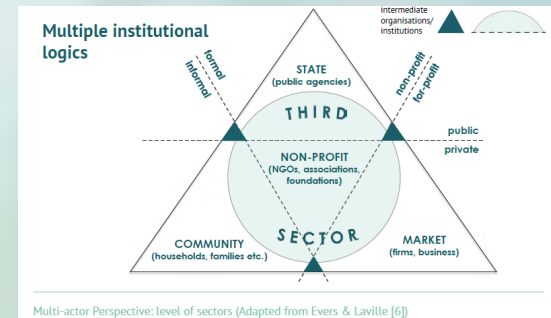Facilitating spaces for (social) experimentation for community-health

Who?
Bringing different stakeholders to the table (Howaldt and Schwarz, 2010).

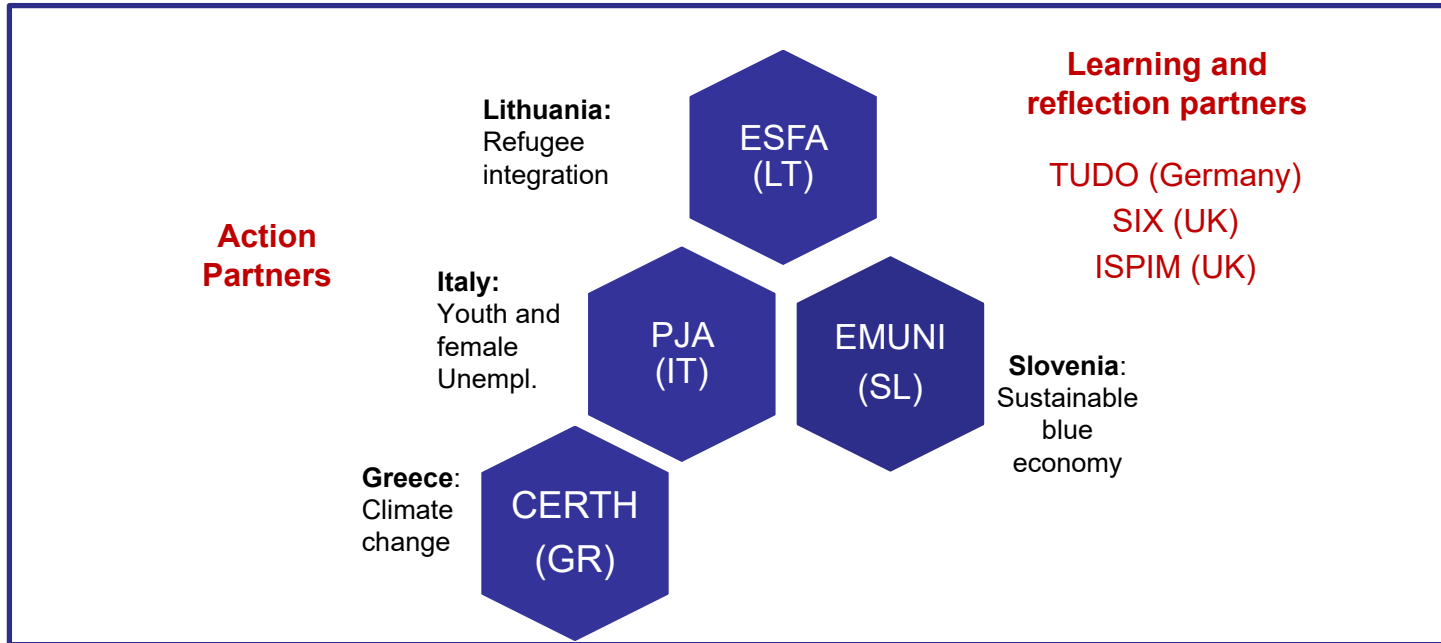# 5. Building (Social) Innovation Ecosystems

- There is **a need to develop social innovation ecosystems** in which all innovation **stakeholders create close links** for:
  - research
  - policies
  - fundraising
  - New social practices (Howaldt and Schwarz, 2010).

- **Multi-actor perspective** / multi-stakeholder engagement

Multi-actor Perspective: level of sectors (Adapted from Evers & Laville [6])

(Avelino and Wittmayer, 2018)

Building social innovation ecosystems: CHESS Project

An example

Action Partners

Lithuania: Refugee integration

Italy: Youth and female Unempl.

Greece: Climate change

Slovenia: Sustainable blue economy

ESFA (LT)

PJA (IT)

EMUNI (SL)

CERTH (GR)

Learning and reflection partners

TUDO (Germany)
SIX (UK)
ISPIM (UK)

Summary

- We need to develop a holistic approach to healthcare that includes social and grassroots innovation for a country, a region or a community.

- Scaling up innovation is crucial for the sustainability of initiatives

- More research is needed on grassroots social innovation initiatives working for HIV prevention and care

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- We need to understand the key actors in our environment, in order to:
  - Influence policies in HIV prevention, education, and care
  - Build skills and knowledge for later decision-making in health care

- Developing an ecosystem takes time and resources. But with an ecosystem approach we can:
  - identify current capacities and stakeholders
  - current and missing knowledge
  - develop capacities and make use of grassroots innovation in the local context

Thanks for your attention!

Dr. Karina Maldonado-Mariscal

TU Dortmund University, Germany, Social Research Center (sfs)

E-Mail: karina.maldonado@tu-dortmund.de

LinkedIn: https://www.linkedin.com/in/karina-maldonado-mariscal-73397815b/

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