

# Cambridge Global Health Partnerships Volunteer Impact and Evaluation Report Financial Year 2019/20

Fiona Elliott



## Background

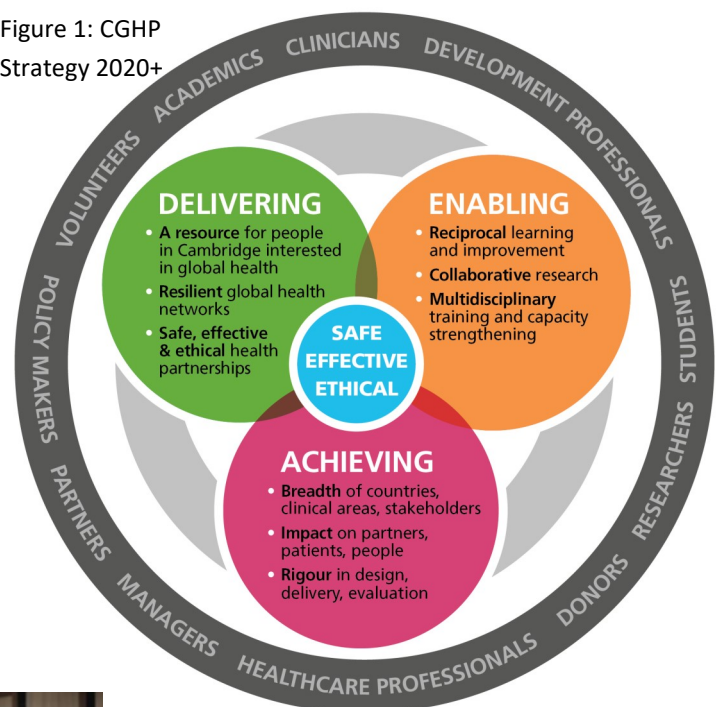
Cambridge Global Health Partnerships (CGHP) is a charity that works with partner institutions around the world to **strengthen health systems**. CGHP work in line with their [Strategy 2020+](#) to ensure **safe, effective and ethical** health partnerships, having 14 years of experience since their founding in 2007. Despite an extraordinary start to 2020 with the COVID-19 pandemic, CGHP has continued to facilitate partnerships between hospitals and institutions in low- and middle-income countries and Cambridge. As well as developing **sustainable partnerships**, CGHP offers a **network of support** for professionals interested in global health in Cambridge. This includes a **multi layered support system** for health professionals and students wishing to work abroad in global health.

CGHP's work directly contributes to [Sustainable Development Goal 3 \(SDG 3\)](#) – Ensuring healthy lives and promoting well-being at all ages. CGHP shares the vision of sustainable development with no one left behind. Its partnerships run across a range of specialities such as: the trauma pathway, maternal health, antimicrobial stewardship and infection prevention control, eye health and cancer. CGHP currently has partnerships in [Uganda](#), [Myanmar](#), [Botswana](#) and [El Salvador](#). CGHP is developing a new stroke partnership in [Sierra Leone](#) and a new infectious diseases partnership in Zimbabwe.

## Overview

Integral to CGHP's mission is conducting monitoring and evaluation to assess the impact of their partnerships. This report will assess the impact of and evaluate volunteer activities in the financial year 2019/20 and make a series of internal recommendations for CGHP. Impact will be assessed in relation to CGHP's Strategy 2020+ (figure 1) which aims to: **deliver** a resource for people in Cambridge, resilient global health networks and safe, effective and ethical partnerships; **enable** reciprocal learning and improvement, collaborative research and multidisciplinary training and capacity strengthening and; **achieve** breadth, impact and rigour. Centred around its values to be safe, ethical and effective.

Figure 1: CGHP Strategy 2020+



## Methodology

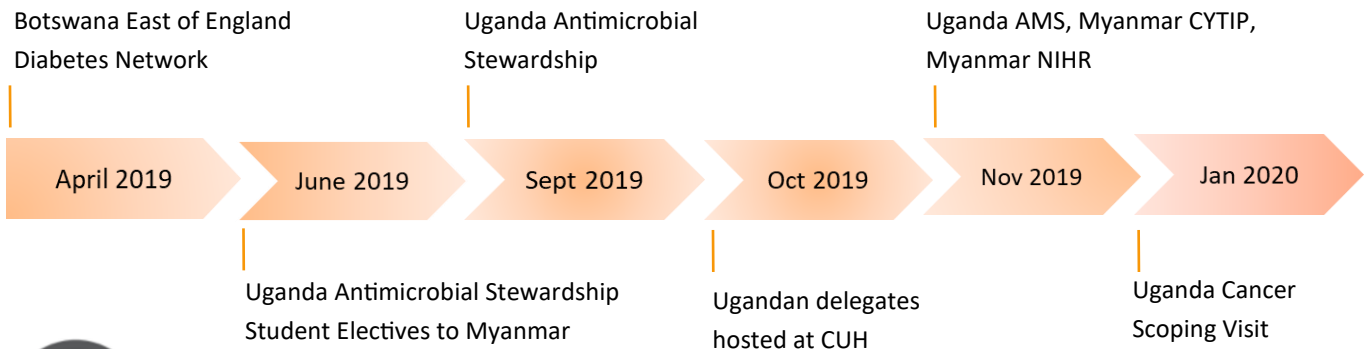
This report analyses quantitative and qualitative data from the following sources:

1. Personal and Professional Development Questionnaires (PPDQ's)
2. Trip Reports
3. Student Grant Reports
4. Member Interviews

This data has been analysed in relation to each aspect of the Strategy 2020+. The PPDQ's were analysed quantitatively using Excel whilst the qualitative data was analysed thematically using NVivo.

Due to the COVID-19 pandemic some of CGHP’s planned activity in the financial year 2019/20 was adversely affected. Member <sup>1</sup> trips abroad after January 2020 were cancelled and CGHP pivoted its approach to supporting members and partners online through blended learning. As such although this report touches on the impact of COVID-19 on CGHP’s members, it only specifically analyses trips abroad from April 2019 to January 2020 (timeline below).

This report will now comment on how CGHP firstly **delivers** resilient global health networks. It will then investigate how CGHP **enables** reciprocal learning, multidisciplinary training and capacity strengthening. Lastly it turns to how CGHP **achieves** impact on its partners and members.



GHP’s strategic priority **to deliver** aims to offer a resource for people in Cambridge, resilient global health networks and safe, effective and ethical partnerships. This report will analyse how CGHP delivers resilient global health networks.



## Communications

A key finding of this report is how the COVID-19 pandemic has shown how resilient CGHP’s partnerships are. Participants felt this was predominantly due to the relationships built through their involvement with projects and ongoing communications between both sides. Although stopping in-person visits, the COVID-19 pandemic has brought silver linings for partnership activity with online learning sessions. Through the relationships built up and communications between both sides practitioners in the NHS have been able to share policy and best practice in relation to COVID-19 with CGHP’s partners in low- and middle-income countries. A clear exemplar of how CGHP partnerships help develop resilient global health networks. Members from the UK expressed their concern for their colleagues in low-and middle-income countries during the pandemic and were keen to help in anyway they could through ongoing communications between teams. Throughout the past year a variety of materials and sessions have occurred online furthering the relationships.



**“We’ve kept up with our colleagues in Uganda and been helping them sort out the alcohol gel supplies, we’ve also included them in the, we’ve been doing these grand round presentations, so COVID focussed and because they were on zoom our Ugandan partners can zoom in and watch. So funny enough the pandemics produced unexpected bonuses from that perspective.”**

Dr Isobel Ramsay - Trainee Infectious Diseases and Microbiology, CUH

<sup>1</sup> ‘Members’ is the term used by CGHP to refer to volunteers. CGHP believes that the term volunteer does not fully capture the contributions to partnership activity made by individuals

## Ability to cope & be flexible

Members in the NHS frequently cited developing coping and flexibility skills during their overseas experience. Unbeknown to them at the time, these skills would then become vitally important when working during the COVID-19 pandemic. In interviews members spoke to how coping with different experiences abroad and developing the skills to be flexible and view issues in proportion helped them cope with the demands of the pandemic. Members felt they were better prepared to cope with varying and changing demands. This thematic finding reflects the importance of developing resilient global health networks for the NHS and the value of volunteering to members.



**“I had to become more adaptable... that’s definitely come across into my experiences with COVID, having to be adaptable to whole new teams and wards, because I’ve been covering adult intensive care a bit, and so the skills I learnt in Ug about incorporating into a new team and being flexible and I guess calm and collected when strange things happen are all things I’ve used.”**

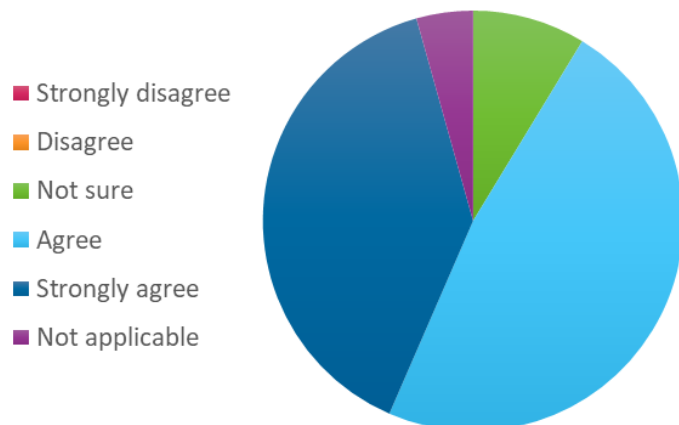
Emma Williams - Paediatric and Neonatal Pharmacist  
Paediatric and Neonatal Pharmacist, CUH

Increased ability to cope and be flexible is also reflected in the PPDQ analysis where **87% of respondents felt they were better able to manage their resources** since their time abroad. Furthermore, all respondents felt they developed their ability to creatively problem solve.

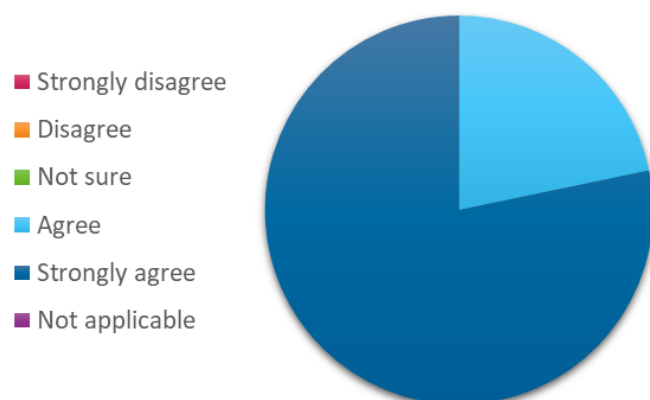
**“[our experience] definitely helped us this year, as soon as the pandemic hit and everyone was panicking, we thought right let's stop. Pause. We don't need to rush to find solutions to this, we need to learn to think outside the box. Having done that, as a network, we've had our most productive twelve-month period because we've been able to change the way we work and think about things differently. I think we definitely learnt the basics and the fundamental skills for that through the Botswana project.”**

Kate Wilson - Manager of the East of England Children and Young People's Diabetes Network

I feel better able to manage my resources



I have developed my ability to creatively problem solve



CGHP's strategic priority enable aims **to enable** reciprocal learning and improvement, collaborative research and multidisciplinary training and capacity strengthening which this report will now reflect on.

## Mutual collaboration and learning

The theme of mutual collaboration and learning resonated throughout the data analysed. This is a key part of CGHP's **enable** priority, to enable reciprocal learning and improvement. This theme relates to two of THET's eight '[Principles of Partnership](#)', both number four, 'Respectful and Reciprocal' and number eight 'Committed to Joint Learning.' It is clear that CGHP focus on collaboration throughout all stages of the partnership from planning to implementation and after projects abroad end. Members on both sides of CGHP's partnerships felt the equal relationship built through the partnership was of the upmost importance and that this ultimately leads to better patient care.



**“I think the Cambridge partners appreciate us as equal partners and they don't just tell us what to do, we sit down and agree on how to move forwards... everyone makes sure the other partner makes a real contribution to how we move the agenda forwards. So, it is a very equal partnership... and I can assure you we have some partners we have they kind of tell us what they think the problem is and I'm not sure if they are always right! So, it's been useful to know Cambridge is the kind of partner that views us as an equal partner and of course we always emphasise it's a win-win.”**

Dr Annette Nakimuli - Dean of Makerere University's School of Medicine

Sustainability is key to CGHP's model of working and members on both sides of partnerships recognise this. Leaders on both sides of the partnerships recognise that overtime partnerships should develop independently and ultimately lead to a time where local health professionals are able to lead trainings. Enabling CGHP's partners to direct the projects path ensures the partnerships sustainability as it then reflects what partners need rather than what CGHP or NHS health professionals think partners need. This is also key to staying in line with national and local country objectives.

**“The beauty of this collaboration is that it is not one partner imposing their will on the other partner, it's like working together, identifying issues, and then still working together to find solutions to those issues. So, it is a combination of existing ideas and exposure of ideas to how other people are working on the same issues. Then we come up with a collective approach that will be beneficial to our patients.”** Dr Musa Sekikubo - Consultant Obstetrician, Makerere University

**“The best thing that one of the nurses said to me was this - “Thank you Lord for I've a good friend. Learn together.” This encapsulated the entire goal of my trip there – to form a strong relationship, to be a good friend, and to learn together. This isn't me teaching you or correcting your practice, but the two of us, or all of us, rather, learning together and growing as a global healthcare community.”**

Robyn Winters – NCCU Staff Nurse, CUH

A key priority for CGHP in enabling mutual collaboration and learning is that as well as UK teams visiting partner countries, partner teams also visit the UK. Members felt this part of the partnerships was extremely important in achieving strengthening of health systems and in ensuring an equal relationship between the two sides.

**“What was great was seeing the health professionals from Uganda come back over here, that was a really significant part of the partnership for me personally. To see that two-way process, which I haven’t really experienced before, often here we go out to the other country to help and impart skills, but actually it was really nice to see them come here. I guess I’d like to see more of that...you know it’s a very unequal world... isn’t it great we can come together and use both of those backgrounds hopefully to bridge that gap.”**

Kate Thorndike – Specialist Transplant Pharmacy Technician, CUH

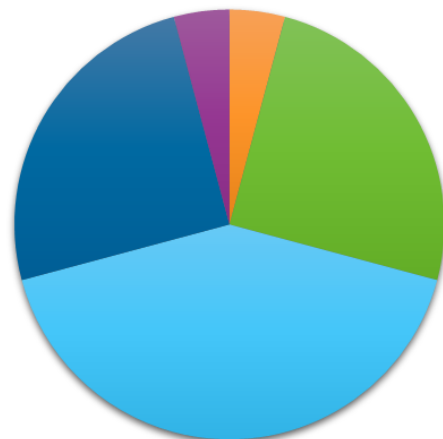
### Impact on health systems – capacity strengthening

CGHP’s partnership have a tangible impact on both the health system of the partner country and the NHS. Members and partners state that clinical skills learnt during the partnership would be translated into their work in their respective health system, ultimately improving patient care and strengthening health systems. Capacity strengthening occurs both through clinical skills and models of learning that can be shared between settings.

This is supported by the **67% of respondents who felt they had developed their approaches to their own practices** through the partnership, thus strengthening the NHS. Furthermore, 88% of respondents felt the opportunity to engage in global health work made CUH a more attractive employer.

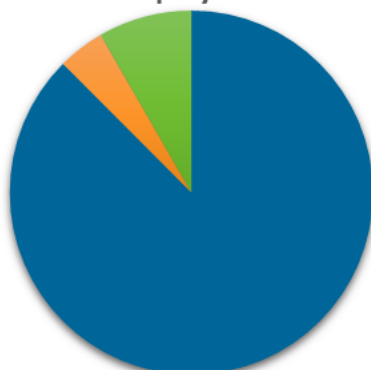
#### I have developed new techniques/ approaches to my own practices

- Strongly disagree
- Disagree
- Not sure
- Agree
- Strongly agree
- Not applicable



Cambridge University Hospitals is one of the few NHS Foundation Trusts to have a dedicated programme supporting staff and students to engage with global health. Do you think this makes CUH a more attractive employer.

- Yes
- Maybe
- Not applicable



**“It has definitely helped a lot, because it has opened up my thoughts to alternatives to what I actually practice every day, which is something I find beneficial, and it has a trickledown effect because what I learn I will also teach my students who are under my care so it will have a ripple down effect and to eventually improve the outcomes of the patients.”**

Dr Musa Sekikubo - Consultant Obstetrician, Makerere University

“For me I think that change in how we handle women, the way of communication, the relationship between a patient and medical person, there will be change and I think once we change the way we handle our patients it will help them to be able to accept the treatments and that will improve life, that’s what I think.”

Sr. Rose Kanturegye - Lead Hospital Pharmacist, Mulago  
Specialised Women and Neonatal Hospital

CGHP supported project focussing on diabetes care in Botswana. Their model of working is now being used a best practice example by the International Society for Adolescent and Paediatric Diabetes, strengthening health systems worldwide.



## Achieve

CGHP’s final strategic aim is **to achieve** breadth, impact and rigour. This section will assess how partnership activities **achieve** impact on CGHP’s partners and people.

### Relationship development & team working

Members on both sides of CGHP’s partnerships regularly mentioned the importance of the relationships built up through their involvement. Members on both sides felt their involvement enabled them to understand and appreciate more the role of other health professionals within clinical settings. Furthermore, working closely with colleagues in new situations on partnership activities enabled NHS practitioners to understand their colleagues more which has helped them deal with the COVID-19 pandemic more effectively and know they have friends to confide in within Addenbrookes. Members felt this had made them better practitioners back in the NHS as they had a better multidisciplinary understanding of roles. This is an important positive impact on the NHS. All PPDQ respondents felt they developed an understanding of areas outside of their usual scope of activity.

Part of building relationships is the ability to work effectively as a team. Members on both sides of CHGP’s partnerships regularly commented on the team nature of partnerships and how this helps their personal and professional development. **96%** of respondents felt they had developed their **team working** skills, whilst **91%** felt they had improved their **communication** skills.

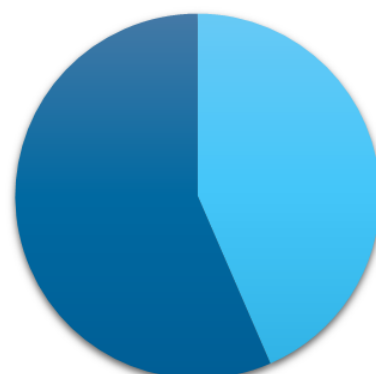
**‘My perspective on life has changed greatly.**

**This experience has served as a stark reminder of how important NHS staff are to this organisation. We devote our time to looking after our patients, and yet we neglect ourselves in the process. I have made it my mission to change this mind set. I work actively to create a positive team culture, where every member of my team feels valued and recognised for their contributions.’**

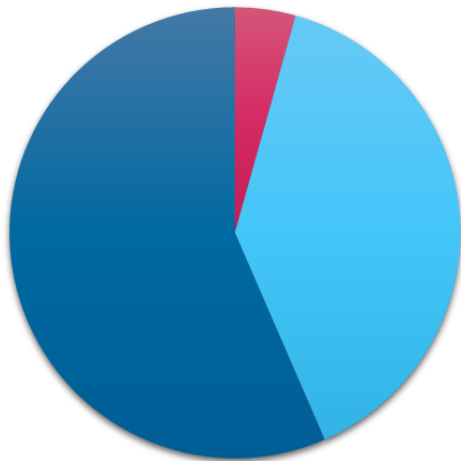
Reem Santos - Lead Pharmacist (Antimicrobials),  
CUH

I have developed understanding of areas and systems outside of my susual scope of activity

- Strongly disagree
- Disagree
- Not sure
- Agree
- Strongly agree
- Not applicable



## I have developed my team working skills



■ Strongly disagree ■ Disagree  
■ Not sure ■ Agree  
■ Strongly agree ■ Not applicable

**‘I think again during, looking at the context of the pandemic here and having that experience of working as a multidisciplinary team in a different context, I think that’s helped me here to really realise how important it is that we work well together when we’re under stress.’**

Kate Thorndike - Specialist Transplant Pharmacy Technician, CUH



## Confidence

A key finding of this report is the impact partnership activities have on members confidence in carrying out their jobs. It is clear that staff on both sides of CGHP’s partnerships felt their confidence increased as a direct consequence of being involved. Part of this was having the opportunity to engage in different types of activities than would be normal during their ‘day-jobs’. This was a skill gained across clinical levels for participants. Many members gained confidence in teaching and leadership skills.

**‘I’ve never been in charge like that before I’ve always been to junior and told what to do rather than the one telling people what to do... that was really invaluable for me... I led the same session I did in Uganda for my colleagues back home and this was broadcast on Facebook live ... That was really cool and obviously I wouldn’t have been able to do that without having gained the skills and the confidence to do that, especially because here I did it to lots of my older colleagues! And people who are far more senior to me. Having done this before I was much more confident in it.’**

Emma Williams - Paediatric and Neonatal Pharmacist, CUH



**‘I am slightly more forceful than I was before and I’ve taken away from that that people, not that you drop the social niceties, but people are more happy to put their opinions out there and that’s certainly made me more confident, in doing that... I think that’s given me the confidence to say what I think, and I don’t know if my team like it or not but that’s what they’re getting these days!’**

Dr Isobel Ramsay - Trainee Infectious Diseases and Microbiology, CUH



## Appreciate the bigger picture

For NHS staff, the largest personal impact of their involvement in CGHP's partnerships was the ability to appreciate the bigger picture of global health work and how fortunate they are. For example, **96%** of those who completed a PPDQ **agreed or strongly agreed with the statement 'I have developed cultural sensitivity and understanding'**. This finding is strongly backed up with qualitative anecdotes of members time abroad. Members articulated the luck they felt that they are used to seeing so many positive patient outcomes in the UK and thus developed a higher appreciation for the NHS and level of care they are able to provide. Furthermore, NHS members learnt from CGHP's partners how to appreciate what they have, be proud of their work and be resourceful in what they had. This is a trait many said they will try to take back into the NHS.

In interviews with members this theme was made all the more valid by the COVID-19 pandemic, it is clear members appreciate the difficulties of different health systems and appreciate the level of stress many low- and middle-income partners deal with on a daily basis. Members clearly appreciate the level of care they are able to give in relation to COVID-19 and many articulated how their participation in partnership activity had helped them cope with the pandemic.

### I have developed cultural sensitivity and understanding

- Strongly disagree
- Disagree
- Not sure
- Agree
- Strongly agree
- Not applicable



**'You know sometimes you get stressed out by things going on in the trust and your job, so just learning to take a bit more of a pragmatic view and the bigger picture.... It has really made me think actually this is what we need to prioritise and this is the way to do it... Yeah, I've really learnt from that.'**

Christine Moody, Infection Control Nurse, CUH

**'To be honest its always part of me, I'm like you don't need that extra syringe, you know you need to realise how lucky you are to have those syringes. So, it's always there with me... It is lifechanging, it is, you can't go to a hospital and see what we've seen, and it not be life changing. It can be life changing in a really positive way, but also its life changing in knowing how people suffer. So, life changing but not only in a positive experience, which it of course was, but in the other sense there's a drive to make it better, because they suffer so much and they have no equipment.'**

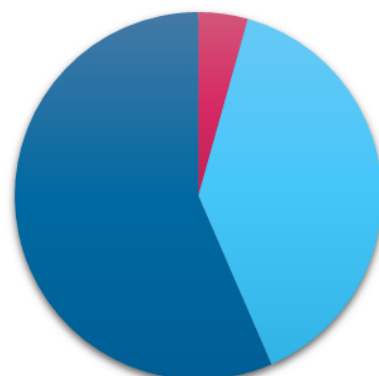
Hannah Nunn - Senior Sister ward C3 Addenbrookes

### I have a greater understanding of global health issues

**'It made me aware of how grossly lucky we are in the UK that we have access to a healthcare system that is free at the point of delivery, and how important it is to preserve this.'**

Ayonija Sundararajan - Student Bursary Recipient

- Strongly disagree
- Disagree
- Not sure
- Agree
- Strongly agree
- Not applicable



## References

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