



## POLICY BRIEF FOR UNIVERSITIES IN LOW AND MIDDLE-INCOME COUNTRIES

### Building a Research Culture:

#### Creating sustainable research in global mental health in low and middle-income countries

**The problem:** Despite considerable international investment in building research capacity in low and middle-income countries (LMIC) in mental health, we identified that there are few pathways for attaining long-term research careers in these settings.

**Our ask:** Universities should elevate the role of research, creating a “research culture,” in which research is seen as equal to clinical work and teaching.

#### Background:

- The past decade has seen an increase in global mental health research funding, focused on developing interventions in LMICs.
- In Africa, this funding has also supported capacity-building for early career researchers, funding the development of an MPhil programs in public mental health; numerous PhDs, MPhil, and post-doctorate fellowships; and expanded clinical teaching capacity in academic psychiatry departments.
- As a result of these capacity-building interventions, there are many early career African researchers with training and experience in global mental health.
- There is great need for locally relevant, rigorous mental health research to develop evidence-based, scalable interventions to help close the mental health treatment gap.

#### Our study:

- Aim: Explore the career pathways and the funding environment for early career mental health researchers from Ethiopia, Malawi, South Africa, and Zimbabwe
- Methods: We conducted qualitative interviews with early career researchers, policymakers, service users, and academics from the four countries and representatives from international funding agencies that support global mental health research.
- Results:
  - Early career researchers want to continue working in mental health research, but while there are select examples of successful researchers, most early career researchers see no

clear path for developing a research career. They are often pulled into clinical or teaching roles.

- Many academics and early career researchers pointed to a lack of “research culture” at their universities. This made it difficult for them to feel valued for their research work or see a career track to remain in a university while continuing to do research.
- Academics and international funders recognized that LMIC universities did not have the capacity or administrative staff to support administration and writing of large grants. This is one factor that contributed to LMIC academics being unable to lead large grant applications and made them more dependent on high-income country (HIC) universities setting the agenda for and leading grants.
- Funders felt more hesitant to award grants directly to LMIC institutions because of their concerns about lack of infrastructure for grant management.
- Academics, early career researchers, and international funders recognized the importance of supervision and mentorship, but noted that due to the lack of senior researchers and minimal training in mentorship, robust supervision was often insufficient.

See publication: Langhaug, Lisa, et al. "["We need more big trees as well as the grass roots': Going beyond research capacity building to develop sustainable careers in mental health research in African countries."](#) *International Journal of Mental Health Systems* 14:66 (2020).

#### **Recommendations:**

Universities should work toward:

- Creating contracts that allow clinicians to split their time between teaching, research, and clinical work. This would include giving them the option to “buy out” their clinical and teaching time if they receive research grants.
- Investing in developing infrastructure in grant writing, administration, and management so that university researchers would be better positioned to apply for and receive large grants. This could start with creating a position for someone who researches available grants, publicizes these opportunities, and provides support for researchers who are interested in applying.
- Investing in training in mentorship and supervision for both senior and early career researchers and should have mechanisms to recognize excellence in mentorship and supervision when considering promotion.
- Integrating research into training from the undergraduate level, including into medical school curricula to help foster a research culture.

Additionally,

- Networks of African universities should create a regional dialogue and share best practices on how publishing and position in the author order fits into promotion. The researchers we interviewed expressed frustration about the current system at many universities, where they often did not feel incentivized to participate in high-quality, collaborative research.
- To enhance available skills and resources, departments of psychiatry and psychology should collaborate with other departments, such as maternal health or infectious disease, on research.

**Representative quotes:**

*“It seems as if it is mostly academic work or... lecturing... there isn’t a strict or set out career pathway for someone who would be interested in lots of research.”* – Early career researcher, Zimbabwe

*“No, I’m not aware of part-time [clinical] jobs, but actually, there is regulation that you can be hired, like, for 50 or 70 or 30% but I don’t think we are using it properly. Maybe people don’t know or we are not encouraging it.”* – Academic, Ethiopia

*“We attach research capacity-building to our research studies. But it’s not a substitute for the country committing to building up its own research infrastructure.”* – International funder

*“But [our funding and reporting] process ... is very involved. And domestic researchers have generally an office of sponsored programs or grants management, that helps them. That doesn’t often occur in low- and middle-income countries. Researchers there have to do all of those pieces themselves.”* – International funder

**About us**

This study and policy brief were part of the African Mental Health Research Initiative (AMARI), a collaboration between four African universities (University of Addis Ababa, University of Cape Town, and University of Malawi College of Medicine, University of Zimbabwe College of Health Sciences) and King’s College London that aims to support the development of high-calibre MNS researchers who conduct research that meets the needs of the four host countries. AMARI recruited and is training 46 MNS research fellows at master’s, PhD and post-doctorate levels, with the intent of equipping them with the necessary research, teaching and leadership skills to build a viable and sustainable research network in the African region. With fees and stipend from AMARI, fellows enroll in a PhD or master’s program at an African university, then attend short courses on research methods, leadership, and academic writing that may not be available at their home institutions.

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