Global Food Matters: an appetite for engaging with research
A group of 40 scientists and community engagement specialists met on 24–26 February 2014 at the Mokolodi Nature Reserve, Gaborone, Botswana, to discuss community engagement with health research. The focus was on food systems, health and the environment.

We hope this report will whet your appetite and encourage you to savour the mix of issues relating to engagement, research and ethics; all served up with hotly debated topics related to food, the environment and health.
What’s on the menu?

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Wellcome Trust workshop participants cooked up a meal on the first night.
As the world’s population rises, humanity faces profound questions over how our planet can sustain and feed nine billion people by 2050. There is a global nutrition crisis and remaining problems of adequate supplies of clean water. Undernutrition threatens the health of millions of the world’s poorest people, while obesity rates are soaring across the globe. The Wellcome Trust is committed to fostering multidisciplinary research to address these problems and inform the global response. We focus on exploring the integral ethical, social and cultural issues and promoting activities to inform, consult and collaborate with the public.

In February 2014, the Wellcome Trust organised our sixth International Engagement Workshop, Global Food Matters: an appetite for engaging with research. We invited scientists and public engagement specialists working in research centres in Africa and Asia, and other communication professionals to come together and discuss the issues. The Wellcome Trust has a strategic focus on exploring and understanding the connections between environment, nutrition and health.

Food is an essential part of our lives. Engaging with individuals and communities about research relating to the global food system requires careful thought. This workshop provided space for participants to explore some of the common issues they face such as how to handle uncertainty and risk; they also discussed the impact of personal choices, behaviour and policy. It also allowed people to find out more about different tools and approaches for engaging the public and communities.

Source: FAO (2013). Infographic courtesy of CGIAR Research Program on Climate Change, Agriculture and Food Security (CCAFS).
Food is ordinary, everyday, relevant, universal yet wildly different in different parts of the world, riddled with moments of choice and behaviour. It’s often a positive thing, and can be a talking point; many of the best engagement projects I have run have involved food, less as the topic and more as an instrument to get people chatting. And of course food is produced, manufactured, packaged, distributed, sold and consumed as part of a global system. A system which isn’t working for all. A system which needs to change and urgently.

At the Wellcome Trust we are dedicated to improving health and we recognise that science and medicine are only one driver of this; society, education, family and others have a role to play too. We firmly believe that science doesn’t exist in a bubble outside of society. It is part of society and should be enjoyed, understood, challenged and shaped by all. Science can challenge cultural norms and personal beliefs. Likewise, by having a society that is engaged with science, we can hold scientists to account and make them and their research better. As citizens we can be more confident and comfortable making choices about our health and wellbeing. Scientists are not the only people who have interesting and valuable things to say about science; artists, historians, ethicists, social scientists, young people, older people, even those under five are all worth listening to and engaging with.

Lisa Jamieson
Head of Engaging Science,
Wellcome Trust, UK
The Wellcome Trust has long advocated the importance of public engagement with research as an integral component of our vision to improve health. Biomedical science offers great promise, yet it challenges cultural norms, personal beliefs and choices. Public engagement activities should create a bridge between researchers and the general public, community groups, civil society organisations and any others for whom the research is relevant.

Public engagement is not about getting public buy-in for a research programme or technology through lobbying or campaigning and it is beyond simple health promotion. It is about starting a two-way interaction between research and the worlds of public or policy. Engagement encourages a critical awareness of the personal, ethical and cultural impacts of health research and should stimulate an insightful sharing of views that has benefits for all involved.

You can read reports from previous International Engagement workshops here:

- Community Engagement under the Microscope (2012)
- Engaging with Impact: how do we know if we have made a difference? (2013)
- Trust me I’m a Scientist: exploring the role of trust within international health research (2014)

“Engagement is a two-way process. Scientists can learn from participants and engagement can inform research. The clarity of purpose is essential for effective engagement.”

Ncengani Mthethwa, Africa Centre for Health and Population Studies, South Africa
Wellcome Trust’s work

Engaging Science
Engaging Science is part of the Culture and Society division of the Wellcome Trust. We want people to consider and debate the key issues in science and society and aim to support innovative projects that engage audiences with biomedical science. The department manages a large UK public engagement funding programme and works with the broadcast and gaming industries as well as the arts and culture sector. The team also works with Trust-funded scientists internationally and in the UK, helping them develop their public engagement activities.

Sustaining Health
Wellcome Trust has recently launched Sustaining Health. Through this initiative, we are exploring what we can do to support work that embraces and stimulates the formation of creative partnerships, informs response to global health problems through multi-disciplinary research and develops strategies to mitigate the risks to human health.

Food and Drink Initiative
The population will grow to 9 billion by 2050. At the same time, the way we grow, eat and farm food is using up the earth’s resources at an exponential rate. One of the biggest challenges of our generation will be feeding people without destroying the planet.

The Wellcome Trust’s Food and Drink Initiative [working title] is a UK-based national engagement initiative that uses food and drink as a topic to encourage learning and engagement on the connections between environment and health. We’re working through schools, families, arts projects, ambassadors and research.

Source: FAO (2013), WHO (2012). Infographic courtesy of CGIAR Research Program on Climate Change, Agriculture and Food Security (CCAFS)
Bite-size bits

Here are some bite-size highlights and themes to emerge from the workshop discussions.

The process of engagement
Community engagement is about building relationships and encouraging genuine exchange and understanding between different groups of people. Engagement is not about applying a ‘method’ and expecting it to work. It is the process of engaging that really matters. “The focus has to be on process as opposed to answers and it is about true collaboration. The process can be applied all over the place. What are the processes by which one develops locally appropriate solutions?” Robert Inglis, Director of Jive Media Africa, South Africa

Collaboration not behaviour change
Engagement is not about changing the behaviour of communities, although this might be an unpredictable outcome. It is more about improving collaboration between scientists and communities to find common ground and goals. “As researchers we should have an open mind. We are not going to the community to teach them but to learn from them and share what we have and from there we should work towards having effective collaboration.” Mackwellings Phiri, Malawi Liverpool Wellcome Trust Clinical Research Programme, Malawi

Methods for engagement
During the workshop, participants explored and shared their experiences with a wide range of engagement methodologies including audiovisual approaches such as community photography, digital storytelling and social media. The workshop itself provided ample opportunity to sample other participatory methods first hand. This included group role-play, which opened up issues about the challenges scientists and educators face when they engage with communities. A ‘rich pictures’ group drawing exercise allowed people to make links between health, food and the environment, identifying opportunities for engagement.

Challenges for engagement
Engaging is not always easy and participants shared some of the challenges they faced. These included difficulties within the community such as hierarchies between different individuals and groups, conflict between civil and traditional leaders and a mismatch in expectations between researchers and community members. In terms of research and institutions, resources for engagement work are often limited and collaboration seems to lose out to competition and funding. Engagement processes themselves are often ill-defined. What do we mean by engagement? How sustainable is the process? How are we able to deal with the wider external environment?

Ethics
Throughout the workshop, participants raised the issue of ethics. How do you protect research participants or people who engage with research? What is necessary consent? At which points and over what duration do you need to get consent? What is the difference between social science research and engagement? How do you establish and maintain trust in a meaningful way and not be instrumental about achieving the research goal?

It is good to tell communities what you are doing. You don't go somewhere and not tell people who you are and what you are doing. As scientists, we need to recognise we are living in a social world where we all live together.”

Dorcus Kamuya, KEMRI-Wellcome Trust, Kenya and the Ethox Centre, Oxford University, UK.

Evaluation
Evaluating engagement can be complex because engagement is a complex process involving lots of different groups, individuals and relationships. Participants looked at the ‘theory of change’ behind their engagement work. What are we doing engagement for? What changes do we want to see? What will make those changes occur? The reasons can be many and varied, but it is important to try to identify them at the start of the process.
Food, health and the environment
During the workshop discussions, fuelled by participatory methodologies, people made strong connections between daily eating habits, the food chain and food systems, supply and logistics, food disposal, the environment, deforestation, indigenous foods, natural disasters, and malnutrition. There were also common themes about supermarkets, over consumption of sugar and fat, obesity, ill health and death.

Using food to bring people together
The workshop highlighted that food is universal and therefore has great potential to bring people together. “Many of the best engagement projects I have run have involved food, less as the topic and more as an instrument to get people chatting.” (Lisa Jamieson, Head of Engagement at the Wellcome Trust.) “We used food as an instrument to bring people together.” (Gill Black from the Sustainable Livelihoods Foundation, South Africa, speaking about a ‘chicken dust’ event, which brought together diverse people from the township.)

Food and farming in Botswana
As participants enjoyed the workshop location of the Mokolodi Nature Reserve in Gaborone, they also heard about the serious challenges people in Botswana face in relation to food, health and the environment. Two scientists from Botswana presented their work promoting indigenous foods such as the Mophane caterpillar and the wild legume, Morama. Chris Busang, a subsistence farmer, introduced participants to his farming and engagement approach and showed everyone around a local farm. “I need traditional learning systems and formal learning systems and I need to be a part of the community so I can learn from others,” he said.
Global developments in food and agriculture basically amount to acts of standardisation. Ever since the 1940s, the Food and Agriculture Organization of the United Nations (FAO) experts have introduced western agricultural techniques worldwide, actively intervening in agricultural systems and dietary patterns (Phillips 2006). The global standardisation of food and agriculture was stepped up in the 1970s–80s when Structural Adjustment Programmes prevented developing countries from regulating their own food systems. Today, it is agribusiness – that vast complex of global bio-chemical food corporations – which decides what we can and cannot eat, and what we can and cannot grow. This neoliberal food regime originates in the World Trade Organization, whose trade agreements ensure that farm subsidies in the global north are preserved, while southern states are forced to drop their own protection measures (McMichael 2009).

The expansion of transnational corporations (TNCs) such as Monsanto, Cargill and Philip Morris has led to the restructuring of food systems everywhere, including people’s individual capacity to grow their own food. While TNCs offer benefits to powerful local players, the average small-scale farmer finds the involvement costly. Costs relate to farmers losing land, losing plant diversity through monocropping, being forced to use expensive, toxic chemicals and losing the right to experiment, reproduce and exchange seed.

The threat to land ownership and access was heightened when the FAO proclaimed that land no longer constituted the key to survival. Only the arrival of a commercially vibrant, hi-tech agricultural sector from which benefits would ‘trickle down’ could lift the poor out of poverty (FAO 2005). Rwanda became a showcase for implementing this new vision. Since 2005, its government has been restructuring the economy away from ‘subsistence’ farming toward a ‘professionalised’ agriculture on the promise that large-scale monocropping on consolidated plots would boost employment for those citizens who voluntarily gave up their land. With the launch of its Organic Land Law, Rwanda signed up to the neoliberal food regime.

What happens to land access and livelihoods when agribusiness takes over has been documented for Rwanda’s marshlands, which today produce only high-value crops. Government leases the state-owned swamplands either to private investors, including foreign companies, or to entrepreneurial local authorities. Both systems impact negatively on poor households (Ansoms and Murison 2012). Monocropping has increased women’s workloads, reduced the variety of food crops available and pushed up the market price of household foods no longer grown in abundance. This is a major concern for women, who remain solely responsible for biodiversity and for their household’s food security. Marshland exploitation by private investors is just one example of how large-scale corporate land deals, popularly known as ‘land grabs’, affect small-scale farmers. Such deals are notorious for their lack of transparency – regarding the ownership structure of investing companies, for instance – and for their failure to properly inform and consult targeted communities (see Center for Human Rights and Global Justice 2010).

Farmers who enter into contract with the corporate sector are legally bound by the sector’s demands regarding seed and chemical inputs. Corporate demands are nowadays mostly legal requirements, often sanctioned by way of a Seed Act which protects the rights of scientific plant breeders. By passing such legislation, governments deny small farmers their ‘right’ (not set in law) to conduct farmer-to-farmer seed exchange, the mechanism through which crop diversity has been maintained over centuries. Food activists trace this worrying development back to the Convention on Biological Diversity (1992), which made seed and plant genetic resources state property. The Convention gave transnational corporations the go-ahead.
to negotiate directly with individual states and to create monopolies that, in turn, would create local dependencies.

The outcome can be catastrophic as seen in the recent spate of suicides by Indian farmers who faced insurmountable ‘negative incomes’ after adopting Bt-cotton technology with its expensive, toxic pesticides (Shiva 2013). Other examples of serious physical harm include Kerala’s 4,000 victims who suffered reproductive disorders and congenital malformation after using Endosulfan, and the pregnant Canadian women who had traces of Bt. toxin from Monsanto Bt. corn in their blood. Agribusiness is known also to affect people’s diet. For Mexico, Pilcher (2002) documents the negative impact of Maseca, the monopoly producer of dehydrated tortilla flour, which has outcompeted neighbourhood factories and forced them to close down. By substituting snack foods for vegetable proteins, poor Mexicans have paid a high nutritional price.

Certain consequences of agribusiness may not be directly visible, however. When contextualizing the 1998 malaria epidemic in Burie District, Ethiopia, James McCann (2005) ended up connecting the epidemic to the unprecedented popularity of hybrid maize, which had drastically altered the pattern of human settlement. By the late 1990s, maize fields ran right up to the walls of people’s houses. Following field observations and laboratory tests, McCann proposed that the malaria outbreak may have resulted from the area’s deeply transformed agro-ecology and human settlement pattern.

When local economies merge into the global food system, their incorporation tends to bring benefits for local elites, may bring economic benefit to the community, but also carries serious risks for the majority of resource-poor farmers. Exposed to hi-tech agriculture, small farmers risk losing their autonomy, their land (through insurmountable debts), their capacity for biodiversity, and their health.

References to this article can be found on page 30.

Professor Johan P J Pottier BA DPHIL (Sussex), Emeritus Professor of Anthropology with reference to Africa, Department of Anthropology and Sociology, SOAS, University of London, UK

Now enjoying retirement, Johan keenly continues his interests in the social dynamics of food security, including urban security, media representations of conflict and the politics of humanitarian intervention. In recent years he has also researched the emergence of a commercial Bangladeshi cuisine in East London. Key publications include Anthropology of Food: The Social Dynamics of Food Security (Cambridge, Polity Press, 1999); Re-Imagining Rwanda: Conflict, Survival and Disinformation in the late 20th Century (Cambridge University Press, 2002); and the co-edited Researching Violence in Africa: Ethical and Methodological Challenges (Brill, 2011). He is expanding his interest in urban food security, based on fieldwork in low-income settlements in Lilongwe (2011) and Kampala (2012), beyond African borders.
The Main Course
Audiovisual methodologies

At the workshop, participants discussed how we engage communities in research using methodologies such as community photography, digital storytelling, digital photos and social media. We also explored using methods such as role-play and rich pictures to investigate topics relating to food, health and the environment. The next items demonstrate some tools and approaches that can be used in engagement processes. We also cover some of the ethical considerations we face as scientists and engagement practitioners undertaking this kind of work. We have tried to include as many participant perspectives as possible.

During the workshop, participants shared their experiences of using audiovisual methodologies including community photography, ‘PhotoVoice’, digital storytelling, digital photos and social media.

How can photography and PhotoVoice be used for community engagement?
Food and the informal economy
Gill Black from the Sustainable Livelihoods Foundation in South Africa presented her work using PhotoVoice as part of research into the informal economy. Members of the community were given cameras and asked to take photographs in relation to health and food. Participants took photos of popular street food such as ‘walkie-talkies’ (chicken head and feet), bread stuffed with chips, cheese and processed meat, and deep-fried coconut. Other people took photos of food wastage and litter that does not get cleared away for weeks. One photographer took a photo of a crushed rat with the caption ‘bad smell’; an immediate and obvious health hazard. Gill discussed how photography might raise awareness of issues relating to food and health among communities and also how food in general can bring people together to discuss important issues.

“When I was asked to think about community engagement and food I reflected on a ‘chicken dust’ event we held. The idea was to celebrate the ‘braaing’ of food on the grill, but brought together diverse people from the township to engage them on food storage, food preparation, trade on the street and waste disposal. We used food as an instrument to bring people together. The Department of Health found out about the event and brought their mobile TB and HIV testing unit. A lot of people inquired or went for testing. This was an unexpected outcome.”

What is PhotoVoice?

PhotoVoice is an organisation that builds people’s skills in disadvantaged and marginalised communities using participatory photography and digital storytelling methods. Individuals can represent themselves and create tools for advocacy and communication. “Photography is a highly flexible tool that crosses cultural and linguistic barriers and can be adapted to all abilities. Its power lies in its dual role as both art form and way to record facts. It provides an accessible way to describe realities, communicate perspectives and raise awareness of social and global issues. Its low cost and ease of dissemination encourages sharing and increases the potential to generate dialogue and discussion.” PhotoVoice website.
Cook-stoves and community photography

Jane Ardrey from the London School of Tropical Medicine carried out a research project in a rural area of Malawi, to gain further information about the social and cultural factors that influence whether people use a cook-stove intervention. She worked with a team of local researchers to look at what people cook, where and how they cook and, importantly, why they cook. The team chose PhotoVoice as their method of better understanding people’s lives and needs. Four local community members were trained to use cameras and left with a camera for up two days. The team then collected the cameras, processed the photos and interviewed the participants to discuss the images they took. A film was created as part of the process. Community members who took part in the photo project and the film had given consent.

Photographs showed public health issues such as pigs and ducks being too near to washing up and water sources, the problem of defecation in open spaces and the issue of childhood nutrition. Reflections about the research did not indicate that people would change their behaviour as a result of using participatory photography, but the photos have the potential to provide information to support research, influence policy change and guide project implementation of cook-stoves.

Food across the ages in Asia

Nguyen Thi Dan Thanh, from the Oxford University Clinical Research Unit (OUCRU) in Vietnam presented her work from the OUCRU public engagement team in Ho Chi Minh City. Dan Thanh’s research team started an exploratory engagement and food project in November 2014 to assess what different people consume according to gender and age. The project combined community photography with professional photography and video. The team conducted semi-structured interviews and community-led interviews and also held a workshop and food fair. They discovered more about people’s eating habits, but were faced with the reality that people are so busy when they’re cooking, they often forget to take photographs.

Ethical issue

During participatory processes, the researcher or facilitator needs to be aware of their role in driving the process. This means being conscious of power and representation and providing the right kinds of support structures when dealing with sensitive images, narratives and information.

Do people understand why they have been given a camera? Is it just for fun? Do people understand the implications? Do people understand what the internet is and what it can do? It is the researcher’s responsibility to act appropriately.

There is an inevitable tension, as with any participatory engagement, between the process of participating and the final product.
“There are many different ways to tell stories and make media; there is really no right or wrong way. In documentary film circles, participatory media is typically viewed as a niche within the larger field of documentary filmmaking. It is seen as an umbrella term for production approaches that in some way involve the people the film is about in the creation of that film. Often that means engaging a group of people in determining the topic for a film, scripting the film and acting in the film. It does not necessarily mean involving the group in the production process.

For the Centre for Digital Storytelling, participatory media means bringing a group of people together in a workshop environment to share their own stories and learn skills necessary for shaping those stories into short multi-media pieces: videos, audio stories or photo essays. The main point here is that there is not one way to do participatory media; the specific methods should be based on the goals of your project. A participatory approach democratises the approach of making media. It honours storytellers and the experiences they are sharing by letting them decide how to tell and craft their own stories.”

Amy also suggested some reasons why first-person stories are so powerful: stories are universal, stories are intimate, stories are honest and stories don’t tell us what to do.

“Personal narratives can touch viewers deeply, moving them to reflect on their own experiences, modify their behaviour, treat others with greater compassion, speak out about injustice and become involved in civic and political life. Whether online, in social media or local communities, or at the institutional/policy level, the sharing of stories has the power to make a real difference.” Centre for Digital Storytelling (storycenter.org).

**How can digital storytelling be used for engagement?**

Here are some examples of international engagement projects funded by the Wellcome Trust in which researchers are using digital storytelling.

Dr Rashida Abbas Ferrand, of the Biomedical Research and Training Institute, has an engagement project called ‘Breaking the Silence: stories about HIV-infected adolescents in Zimbabwe’. The project focuses attention on the special needs of adolescents by exploring their complex clinical and psychosocial issues. Digital storytelling workshops allow caregivers and healthcare workers to express their views and learn more about the topic. A group of young people living with HIV will be engaged in a drama workshop to develop a script based on their experiences. This will then be performed by actors and filmed. The digital stories and the drama-film will be made into a three-part documentary film to be disseminated to communities, schools, stakeholders and policy makers.

Mary Chambers of the Oxford University Clinical Research Unit, (OUCRU) Vietnam, is working on an engagement project called ‘Health in the Backyard’. This is an interactive media project using digital story telling methods to explore the attitudes and perceptions of risk in communities involved in animal husbandry. The project supports research on zoonotic diseases by engaging with rural communities and improving communication between stakeholders and scientists. Through this project OUCRU have partnered with Dong Thap Department for Animal Health and Fact & Fiction Films to work with small-hold farmers, slaughterhouse workers and people involved with the rats for meat trade.

**What is Digital Storytelling?**

Digital storytelling is a method that allows people to tell their own story in a first person narrative, illustrating the story with images and sometimes film. In a workshop environment, participants receive support to tell they story they choose. There is no prescription or template for the output as it is about artistic self-expression, inspiring individuals and bringing about community transformation. This participatory process has potential to be used in meaningful engagement processes between researchers and communities.
Ethical issue

One of the main topics of discussion at the workshop related to obtaining consent from participants engaging in multi-media processes and outputs, particularly relevant when working with vulnerable and underage people. For example, one participant spoke about how young people told personal stories about HIV on film. At the time of filming, they were happy to give their consent for the film to be shown but what you do when their situation or the environment has changed? Consent at one stage of the process does not automatically equal consent at another stage. One researcher said, “It is important to have informed consent at the start; we also need to get consent at the end.”

Another issue related to working with vulnerable people is the need to involve a counsellor if participatory processes are likely to unearth personal issues. In this case, the counsellor needs to be involved from the start of the project.

In some cases, where stories are very personal and might put individuals or families at risk, engagement processes can be anonymous. For example, in the case of Playback Theatre, people’s personal stories are acted out by a theatre group, which gives a buffer zone for anonymity.

There is also a balance to be found between ethics and culture. In one instance, a researcher got consent from a woman to use her photograph publicly. However, a male family member said that the photo should not be used. What can we do about this sort of conflict? How can you respect the agency of the person consenting and the cultural context in which a male relative can override this consent?
Photos and social media for engagement

In many parts of the world, people who can afford equipment and have access to the internet use digital photography and social media in their everyday lives. Researchers at the workshop had harnessed this and used a combination of photos and social media to explore issues of food, health and global food systems.

Photography and social media in Thailand and Cambodia

Phaik Yeong Cheah from the Wellcome Trust Mahidol Oxford Tropical Medicine Research Unit (MORU), Thailand, initiated a pilot project to harness people’s interest in food and social media and explore the potential of participatory food photography as a vehicle for engagement with research about global food systems. Researchers invited volunteers in Bangkok, Thailand and Siem Reap, Cambodia, who already regularly share food photos online (an everyday activity in this part of the world), to take part in the Facebook Food Photo Challenge for two weeks. They were asked to take photos of their meals and snacks and upload them on the Facebook group. When uploaded on social media, participants could see each other’s photos and were encouraged to post comments, ask questions, and click ‘like’ and ‘share’.

Afterwards, researchers interviewed people to find out about their experience of taking part in the project. In general, participants had enjoyed the sense of online community. Although researchers had not asked people to change their eating habits, many said that taking part in the project had made them more aware of their food choices, encouraging them to snack less, to eat three times a day and to choose healthier fresh meals rather than pre-packaged food. This type of engagement project has potential to support healthy food consumption, possibly in relation to taking medication such as antiretroviral drugs (ARVs) or TB drugs.

Film about the project.

My plate of food: a photo story in Cape Town, South Africa Food Security

Cheryl Douglas and Gerry Noel are teachers at Bishops (Diocesan College), Rondebosch, Cape Town. Researching food security and education, they asked pupils to record a food diary and observed what children ate. Grade nine pupils across schools in Cape Town took photographs of their food at the beginning and end of each meal. The research revealed that what the adolescents were consuming was overwhelmingly unhealthy. In South Africa, most food campaigns for children focus on early childhood years or primary schools. This research began an engagement process between researchers, teachers and pupils about the importance of nutrition among adolescents.

Blog about the project.

Photos from the Facebook photo challenge.
Artwork: Hatairat Pippolabanan
Ethical issues

Participants who create multi-media outputs need to be aware of how their films might be disseminated and viewed publically. Audiences have different responses and what you expect from different audience groups is context-sensitive. Who you show the films or stories to might create different debates. The participants need to understand this fully.

Researchers must be clear about their fundamental intention and should be aware that this may differ from the participants’ intentions or expectations. Participatory media processes are attractive to researchers as outputs provide rich material that can be used at conferences. Participants need to understand that their stories and images may end up being used in many different ways.

The social and digital media landscape is constantly shifting. What happens to media in online social spaces can be explosive. Do participants really understand the nature of worldwide online audiences and the discussions and debates that can be generated? People need to be aware of the benefits and risks involved in engaging and sharing media products. There can be unintended consequences to spreading media outputs online.

Participants agreed that community engagement with research is often a complicated and difficult process so having a long-term relationship with the participants and community is helpful. Others suggested it is necessary to be aware of the research agenda; if you want to empower communities, you cannot enter the community with preconceived ideas about how your message will be received.

Research is often conceptualised by two people who submit a grant proposal, but it is acted out among a whole community of people. Researchers will arrive with an agenda and ask something from a community, so it is fair to expect some kind of exchange? What are the real possibilities for exchange? Partnerships work when both parties benefit and are heading towards a common goal.
During the workshop, participants split into five groups and took part in a ‘rich pictures’ exercise to explore opportunities for engagement and links between food, health and environment.

Participants drew their own ideas and thoughts together on one large piece of paper.

The pictures were different but common themes emerged throughout the process. Overall, people made strong connections between daily eating habits, the food chain or food systems, supply and logistics, food disposal, the environment, deforestation, natural disasters and people suffering malnutrition. Supermarkets, over consumption of sugar and fat, obesity, ill health and death were also common themes.

The link between unhealthy eating, ill health and death came up frequently during the discussions. Also, for the first time in the workshop, the issue of alcohol was raised. As a multinational industry and one that clearly affects health and wellbeing, alcohol is a big issue, but one that is particularly difficult to address.

We discussed the difference between food consumption in rural and urban areas and some of the issues that Botswana is facing. For example, farmers are producing in order to sell. They buy food for their family with the money they make. However, this is expensive, and there is often not enough food to eat. In this new capitalist environment, how do you get farmers to first store enough food and then sell the rest? A change in culture is needed.

In discussions about obesity, participants stressed the need to avoid apportioning blame and simply trying to achieve ‘behaviour change’. There is a need to look at systemic issues and the global influences on obesity. In the UK, girls tend to drop out of sport in their teenage years and there is a campaign to get them to exercise, no matter what their size.

“Adding to what other people think in the form of drawing without being interrupted was good. In conversations people tend to interrupt each other, but with drawing people can do it at the same time. Then you might question the picture drawn later, so it is a nice way to collect ideas.”

Phaik Yeong Cheah, Mahidol Oxford Tropical Medicine Research Unit, Thailand.

During discussions about food consumption, health and death, a question about the appropriateness of ‘graveyard’ engagement arose. Participants were quick to point out the need for sensitivity, but also that there are always opportunities for engagement at community gathering such as funerals, weddings, celebrations and other festivals. Other engagement opportunities people identified included working with national media and community radio, engaging with schools and school teachers about climate change, running a national poster competition for school children to raise awareness about the food chain and holding food fairs in the community.

**What is ‘rich pictures’?**

Rich pictures is a tool that allows groups of people to learn about and explore a subject or problem by drawing representations of anything and everything related to the topic. There is no commonly agreed format or any rules for drawing; everyone draws whatever they choose at the same time on one large sheet of paper. Images can be doodles, symbols, or sketches in different colours. Artistic skills are not the issue. Rather, the exercise is about drawing the things that matter. This might include people and their relationships, places, institutions and organisations, feelings or emotions, concerns, hopes or fears and events from the past or future.

The value in the process is that it forces participants to think deeply about the issue and understand it well enough to represent it. The group dynamics help people discuss, share and learn from each other and this can generate very rich discussion.
to buy and sell food, while also promoting nutrition and health. Another suggestion was to organise a worldwide music festival to raise awareness about the dangers of excessive sugar consumption and “Stamp out the sweet with your feet!”

“\n
The rich pictures exercise was creative, informative and also fun. I learnt about the connections between what is happening in the community, the environment and the health of the people.”

Ncengani Mthethwa, Africa Centre for Health and Population Studies, South Africa.

Ethical issue

In engaging with communities about consumption and health, it is important not to personalise the issue and place the blame on individuals and their choices. The emphasis should be on systemic problems in the global food chain and marketplace.
Good morning class, today we are going to learn about eating healthy. You should start taking notice of what you eat.

Okay mom, what is that supposed to be?

I have prepared you a meal, Napila. My daughter, come sit down and eat.

All I see is carbohydrate and no veggies. The meal doesn’t look healthy at all.

Young lady, you are going to eat and finish this meal today. Who will want to marry a thin woman like you? Look at you.

Today at school, Madam taught us what to eat and in the right proportions.

Napila is refusing to eat a meal I have prepared for her. She is telling me off for too much carbohydrate and no vegetables.

Napila, your mother knows what’s best for you. She has prepared this meal for you, now take it and eat.

Ladies! What seems to be the problem now?

But, but dad... No buts honey, go finish up your meal.

You need to eat something like this, please notice the small amount of carbohydrates.
This cartoon is based on the role plays that took place during the workshop.

THE END...
During the workshop, five groups worked on their role-plays for forty minutes, before acting them out to the rest of the group, much to everyone's amusement and delight. The groups were based on professions, settings or types of engagement and were: community engagement practitioners; scientists/researchers; clinicians/hospital settings; public engagement specialists; and educators/school settings. Each group was asked to play out a situation to demonstrate some of the challenges and difficulties they faced when trying to engage a community. Here are the stories.

1 Chickens and ARVs (Community Engagement)

Some researchers are trying to research ARVs in a community but are finding it difficult as members have refused to participate in their study. When they visit the community, they find out that some people are feeding their ARVs to their chickens to fatten them up. One woman says, "I feel so much better after taking my ARVs I am now giving them to my chickens!" The researchers visit the Chief to complain that the community is chasing them away. The Chief says, "You are always coming into our community without consulting us." So between them, the researchers and the Chief agree to hold a public meeting, so that the researchers can be introduced properly and begin engagement activities.

Reflections Workshop participants discussed the issue of the researchers needing to get buy-in from their own community through engagement before trying to do any research. The story showed that community members trust their leaders so researchers must work with them from the start. It also showed that villagers are suffering from research fatigue and that they have their own perceptions and misperceptions. The group discussed the need for researchers to do a lot of work before rolling out an initiative such as prescribing ARVs. Community engagement is an ongoing process that must be constantly worked at.

2 Blood samples (Researchers)

Some researchers are discussing how to get blood samples from the community. Two researchers have a chat at their science institution.

"If we don't get the blood samples we will get our funding cut, it really matters."
"I've got my samples – all of them."
"How did you get people to sign up?"
"You need to go and talk to them."
"They won't understand."
"Ask them what they understand by research and begin talking."
"They won't answer. I should tell them I have a PhD and not to undermine my science!"
"Go talk to the community, this is what you need to do."
"We are desperate, so we really need to go and do it. Let's try."

When the arrogant researcher goes to the community he is patronising, and condescending. However, the other researchers with him are able to talk to the community properly, try to find common ground and offer a drink at the bar.

Reflections The group agreed that it appeared as if the scientists were living in a world of their own, detached from the community. The scientists underrated the community, believing they were so illiterate they did not understand science. There was also the notion that a scientist cannot learn from the community. Scientists don't want to be questioned as it can put them in an insecure position. Also, there's a tension with having to meet a target or write a report, which can put pressure on scientists. Scientists who are dependent on samples from the community need to engage meaningfully but often don't know how to do it. So how do we support scientists and give them the structures to do this? One participant said, "Scientists will give more attention to people in a longitudinal study than a one-off study. If we did this to all people and gave them the respect they deserve it would be better."
3 Families and choosing food (Public Engagement)
A family are talking about what to eat. The husband says he has invited his family to dinner on Saturday night. The wife says that she wants to impress them with, “A whole chunk of meat.” He replies that meat is bad for you, and they should get some cheap vegetables in the market. She wants to buy chicken in the supermarket as it has been properly tested. Then she has a better idea, “Let’s get a whole pig and have a celebratory slaughter!” In the end, the family, with the children, visit the supermarket. When they get there, they are bombarded with adverts for products, which the children immediately want to buy. “Look at this amazing drink; I’m a celebrity and if you buy this drink you will be really cool.” “Get all these sweets, they are really tasty and your children will love you.” The husband is very concerned and says, “We can’t afford all this.”

Reflections: The group discussed the role-play and said that it quickly depicted what happens in everyday life: you want healthy things, but your children want unhealthy things. The role-play brought out the decisions that need to be made between what is healthy, unhealthy, what is socially acceptable and what is affordable. Going to the market stall and going to the supermarket are very different. At the supermarket everything is “wrapped and shiny and sexy” but at the market food is probably healthier. The choices we make every day are significant.

4 Doctors and pregnant patients (Hospital settings)
A doctor is speaking to a young pregnant patient about the findings from a blood test. He says, “I’ve analysed your blood and it’s not good news. You have pregnancy diabetes. You have to come in and monitor your sugar levels with blood tests. You have to control your diet, your sugar intake, eat brown rice and prepare your porridge in a new way. Here is a leaflet about all the new things you have to do.”

Later, at a maternal diabetes support group meeting, a health worker talks to the pregnant women and listens to what they have to say. The pregnant women share their concerns. “I can’t afford any of the food, we can’t afford brown rice. I don’t even know where to buy it.” “My mother-in-law says I’m starving my kids as I don’t give them fish. I don’t know what to do. I can’t get enough food.”

Reflections: The group said this was a very realistic representation. One participant who works in nutrition recognised the situation. For example, a mother comes in with an undernourished child but cannot afford to buy what the doctor recommends. In the role-play, the doctor gave bad news, then followed it up with information. There was little explanation about the illness. The doctor’s recommendation to the patients sounded like a lot of work that would make life very complicated. He also assumed that the patients were literate. One participant said, “I like the final part where they are talking honestly.” Another researcher said that when they did research in the community, a group of women asked for a support group, so one was set up. Support groups can help improve engagement about health issues.

5 What to eat? The influence of school, home and friends (Educators)
Napila, a 16-year-old Malawian student has different pressures on her. In the classroom, the teacher recommends that the students take notice of what they eat at home and need to eat something like this. She holds up a plate of food and says, “Please notice the small amount of carbohydrates.” Back at home, Napila’s mother hands her a plate of food piled high with carbohydrates. Her mother nags her for not eating enough and being too small. She says to Napila, “Do you think your father would have married me if I looked like you?” Napila protests, but is told off for talking about vegetables. She finishes her dinner then meets her friends who greet her and congratulate her on her size. “You are amazing, you are so slim!” they say. Napila replies, “My mother feeds me too much, I am feeding it to the dogs.” Her friends agree and say that the boys won’t like her unless she’s thin. They head for McDonalds for no-calorie drinks.

Reflections: The group discussion focused on the different pressures on young people who get caught in the conflict between advice about healthy eating and peer pressure. The teacher gave the student information, but it didn’t help within her social networks. If the teacher had really engaged, she would have equipped the student to deal with her mother and friends. This learner was given one choice, with no alternative. Stifling the choices people have is not good developmentally.
Role play: ARVs and chickens

Some researchers are conducting a study about anti-retroviral drugs but they are having a difficult time as the community is not welcoming and refuse to participate.

Hello there! We are scientists...

We are conducting a research about ARV drugs, so we need your help.

Honey, maybe you could help these gentlemen.

We have no idea, sorry.

I just wonder what these ARV drugs are made out of, they are really good.

That’s very true dear, they know just how to work the trick.

I have gained so much weight ever since I started taking them.

Listen to those two ladies, let’s get closer.

I feel so much better after taking them, I am now giving them to my chickens.

Wow! What an idea. I am going to feed it to my chickens too right away.

What? They are going to gain weight too, and you will have enough chicken meat, even sell some for profit.

Here chickens eat up and make mommy some cool cash.

Come, we have seen and heard enough.

What did I tell you. See how they run.
This cartoon is based on the role plays that took place during the workshop.
Engagement on indigenous foods in Botswana

Jose Jackson-Malete from the Botswana Institute for Technology Research and Innovation (BITRI) and Rosemary Kobue-Lekalake, from the Botswana College of Agriculture are working together on research to increase the use of indigenous foods. The global issues that affect people in Botswana include climate change, urbanisation, poverty, infectious diseases, water and a lack of food security. In Botswana, indigenous food seems very adaptable to changing environmental conditions and can survive well. Therefore researchers want to focus on these particular types of foods. The team used community engagement to make sure their proposal is what the community wants and liaised with research leaders, small- and medium-size enterprises, policy makers and the media to get their work supported in the wider environment.

“We are trying to transcend villages and communities to get indigenous foods higher on the Botswana stage. We are food scientists, we work in laboratories and our work is to increase value in indigenous foods. We’re proposing to work on the Mophane caterpillar, which is a novel alternative protein source. It has high protein and high oil content. While we were developing the proposal, we engaged with the community to make sure the research is needed and used. To engage with the community properly, we need to meet with the village leaders so we meet with the chief, hold public meetings, get the buy-in of the community.

“If we want to use different technologies, we need people to have the skills and ability to use it at local level. Morama is a wild legume, with high protein and oil content. It has the potential for health benefits as it’s very nutritious. We had to show the community how to change it from the bean into a milk-like substance. Beyond the community groups, we want to see this product in the market. We work with small and medium enterprises, ensuring they have the technical and business capacity to process and market the produce.” Jose Jackson-Malete, BITRI, Botswana.

The team also engaged with research leaders and policy makers to ensure continued funding for the research project. They worked with the media, encouraging them to report on science and technology, an area in which journalists often show resistance. A number of workshops were organised to put the media and scientists together in the same room. “We often shy away from journalists as scientists, but we need to work with them.”
I need to know the economic value and keep on learning, and this is a cycle. I also need to sustain my integrity, pride and identity. I need traditional learning systems and formal learning systems and I need to be a part of the community so I can learn from others. As a farmer, we need that human interaction. We are dependent on others to share their experiences as we go along.

Here it is about water, life, ploughing and health. We need to promote farmers who use indigenous seeds. The changes in the weather are a challenge, and the water table is unpredictable. We need to prepare ourselves, but how are we going to do this? Researchers should tell us farmers what you know. How do you use learning about water, food and the environment in a real life situation? Infrastructure and technology, research development and innovation, indigenous materials and resources are all important to us.

When animals are sick, we rarely use the vets; we use things that are not scientifically tested, but it works for us. It all depends on community assistance in the cattle fields. Cooperation and engagement are essential if you want to solve complex problems.”

Chris Busang, Subsistence Farmer, Botswana

“A Motswana subsistence farmer perspective

Chris Busang describes himself as, “A subsistence farmer with aspirations of being a commercial farmer in the not-so-distant future.” He’s also a science teacher, currently working as the Manager for Educational Technology from the University of Botswana. Chris says that for him and his family, livestock and agriculture are vital. On his farm, Chris depends on cattle for meat and milk, but he also wants to know about the role of infrastructure and technology. He regards engagement with communities and researchers as vital to his existence.

After Chris had spoken, the whole group got on a bus and visited a farm just outside Gaborone to learn about subsistence farming first hand. Chris described the crops growing in the fields, how local farmers grouped together to buy a tractor and how cattle play an important role.
Key challenges for effective engagement

Participants discussed the various challenges they face when they try to do community engagement work.

Within the community
- Hierarchies and job roles in communities can make it hard to build the right relationships. This includes power imbalances because of gender, literacy, or socio-economic status.
- It is difficult when there is conflict between civil or political and traditional leaders; this interferes in the engagement process. In Vietnam, for example, there are conflicts between ethnic and armed groups.
- The expectations from the community are not always in line with research agenda. For example, if you conduct research, community members expect it to lead to improved service delivery.
- Community engagement fatigue exists. How do you increase the value of engagement for communities?

We do engagement with the research community and with communities and we face challenges in both. Bringing knowledge is necessary but not sufficient to generate behaviour change and we think engagement is multi-directional. Is the research asking the right questions for farmers?“

Claire Allan, Head of Programme Quality and Impact, Farm Africa

Research issues
- When research projects are created, partnerships between researchers and with communities are often not embedded at the beginning. How do you engage your community if you have not found your own way as a research group?
- Resources for engagement, such as time, staff, and finances, are limited. You need months to engage properly, but the budget only allows for a shorter period. Collaboration seems to lose out to competition and funding.
- For a new researcher coming in, public or community engagement is not a part of the job. They have insufficient expertise to do effective community engagement.
- If different research institutions are competing for a community’s attention, the community will choose the one they prefer. Rewards and incentives will be an inevitable consideration.
- Doing Randomized Controlled Trials (RCT) means it is hard to give the community control over the circumstances of the research, especially if they are in different groups.
- Compassion fatigue exists. What happens when the researcher is engaged with the community over a long period of time?
- Everyone wants to be honest, but there is no real incentive for this. Field workers are responsible to their organisation, the CEO is responsible to the funders; we want honesty but it is hard to achieve.
- It can be difficult to convince some hard science people that community engagement is worthwhile.

Engagement processes
- Sometimes it is necessary to do ‘engagement for engagement’s sake’ not just to implement a project. This can be difficult because of resource limitations or a lack of understanding within the research institution.

The role of intermediaries
Noni Mumba is Head of Community Engagement at the KEMRI-Wellcome Trust Research Programme in Kenya. She spoke about the Community Engagement Advice for Studies Team (CAST), which holds regular meetings with both scientists and communities throughout the research process. The CAST team listens, documents and advises the study team on issues arising from the community, supports engagement activities, suggests different methods where necessary and implements an exit strategy as the study ends. Ongoing links to the community will remain.
• Engagement is often ill-defined. What do we mean by engagement?
• Evaluation of engagement can be a challenge.
• There are often disagreements about how much time you need for engagement. One participant organised a project in Ghana to engage journalists, scientists and health workers. The journalists said the workshop was too short, and scientists said it was long enough for them.
• It is difficult to translate scientific language into local languages when engaging.
• The external environment such as corporate or national influences can be restrictive. It is hard to get those with the legal or political power to listen or engage. It is hard to link with the right people and the right legislative processes.
• How sustainable is the engagement process? What happens after the project is finished?

What support do researchers and community engagement practitioners need?
Participants suggested various forms of support to help them overcome these difficulties.

As scientists and engagement practitioners:
• Participating in workshops, forums or informal spaces where researchers and engagement specialists can spend time together discussing and exploring issues
• Greater funding to support community engagement
• Training, information and resources on engagement
• More publishing of experiences about engagement on blogs and journals
• Using successful case studies to promote community engagement
• Simple qualitative studies that look at the effectiveness of community engagement.

During engagement processes:
• Media support, depending on who and what you are dealing with
• Support from opinion leaders and influencers
• Support from government and other key stakeholders
• More resources such as finance, materials and expertise
• Using champions to help embed projects in communities.

Ethical issue
During discussions, one participant asked, “What is the link between ethical research and community engagement? For example, how are we protecting the research participants beyond the lifespan of our project?” Another responded, “Engagement is not the only solution to the ethical conduct of research. Community engagement doesn’t equal ethical research.” Research and community engagement involves establishing and maintaining trust, and projects must anticipate what will happen after a project ends, in terms of possible consequences, risks and benefits to the community.

Ethical issue
When discussing different research projects and the engagement element they contained, many people questioned whether engagement differs from social science research. There was discussion of the boundaries and overlaps between the methods (which can similar) and the motivations for the work (which might be different). This area has potential to be explored in future workshops.
Evaluating community engagement: what changes do we want?

Evaluating community engagement can be complex because the situations in which scientists, intermediaries and communities engage are so diverse. Thinking about issues like timescale, attribution versus contribution and availability of resources to do effective evaluation are important considerations. At the workshop, participants focused on examining the ‘theory of change’ behind their engagement work. What are we doing engagement for? What changes do we want to see? What do we think will cause the changes to occur? Being explicit about our assumptions makes engagement processes more meaningful.

Participants discussed three questions:

• What types of change does engagement work for, with whom and how?
• Who are we engaging?
• What do we want people to do as a result of it?

Participants also considered whether they were measuring impact or learning how to do things better. They divided themselves into five groups based on profession, setting or type of engagement (community engagement practitioners, scientists/researchers, clinicians/those in a hospital setting, public engagement specialists, and educators/school setting) and presented the top five outcomes or changes they would like their engagement to bring about.

Clinicians, patients and hospital settings: This group of said the changes they would like to see, or measures of success, included opening up channels for communication, building an environment in which everyone can understand each other, promoting agency and action, fostering balanced and symmetrical interactions and two-way interaction.

Participants agreed that interactions and increased communication are hard to measure. You can measure conversations and the number of questions being asked. You can also use social network analysis to identify how often contact is happening between people. However there was concern that measurement was outputs driven and that the change can sound quite directional. One participant suggested that we need to look at different perspectives and not be focused on changing others.

Community engagement with research: This group identified their desired outcomes or changes to be a more informed community with potential for better decision making, established trust between communities and research or other institutions, better cultural sensitivity leading to better methodologies and the creation of community-centric policies.

This led to a discussion about trust and what it means. How do you measure levels of trust in science or scientists? The Wellcome Trust Monitor seeks to determine levels of public trust via a large-scale survey that gauges the views of UK adults and young people on science, biomedical research and science education. These surveys are repeated every three years so could identify relative opinions and any shifts in trust. However, ‘trust’ is a loaded term and means different things to different people in different contexts.

I like the understanding that everyone takes responsibility for their communication.”

Hilary Levers, Head of Education and Learning, Wellcome Trust, UK.

Engagement with public audiences: This group identified their desired outcomes as seeing the community involved in defining their role and the ways they would like to interact, giving the community a voice and decision-making skills to help them define what they need, opening two-way channels of communication and involving scientists as part of the community while helping the public to understand this.

This led to discussions about how community engagement is not about trying to change people’s behaviour. One participant said, “We want communities to have the right skills and decision-making abilities to make choices.” Another participant questioned this, saying that although there is an ethic that we shouldn’t be trying to achieve behaviour change, how honest are we? If we want people to understand all this scientific information, then we are asking something of them. Another responded by saying that if you enter the community with the goal of behaviour change, you will approach things in a certain way, but if you want to equip people with skills then behaviour change might be an unpredictable by-product. Other participants emphasised the dangers of behaviour change. “Behaviour change is always about, I’ve more knowledge and power than
you and I want to change you because you've got less knowledge and power.” “Behaviour change is dangerous, and it can sound like social engineering.”

**Teachers and education settings:** This group wanted to see more involvement of young people in the shaping of school programmes, greater engagement and dialogue between young people and researchers so that everyone shapes the research process, and the enabling of students to understand the research process and what drives researchers.

Participants discussed the disconnection between the world of research and the messages that pupils and schools get about research. They agreed on the need to strengthen links, and that facilitators need to engage more in this process. Students must be able to explore and question the topic of research and teachers need to be able to admit that they don't know everything.

**Researchers:** This group representing researchers/scientists identified their desired outcomes or changes for community engagement as being research that responds to community or other concerns, meaning researchers allow the agenda of their research and approach to be informed and changed (at project, programme and funder level). The group wanted to see engagement that leads to new research questions, scientific outcomes like papers, presentations, and recruitment and to health outcomes such as improved rates of access to healthcare, or TB rates going down. Mutual understanding and respect were flagged as vital so that the public are equipped to challenge policy and practice changes.

The group discussed how mutual understanding takes a long time to build. Real engagement is time consuming; you can't just have a quick meeting. Respect is also difficult, because as researchers we are meant to be intelligent outsiders and it is hard to admit when you don't know something. Participants pointed out that there are models of success in which engagement has made a difference and we should explore these.

Read more about evaluating community engagement here: Engaging with Impact: how do we know if we have made a difference?, 2013.

We should think about what engagement is and what communities are. Why do we do engagement? Instrumental reasons for doing engagement to support your research are easier to relate to. You want people to consent and understand research and you are aiming at a means to an end. There are also intrinsic reasons where engagement is an end in itself.

Dorcus Kamuya, KEMRI-Wellcome Trust and the Ethox Centre, Oxford University.
Dessert
Digestion of the workshop

After the workshop, a few participants reflected on their experience and what they had taken home.

“I was exposed to powerful participatory approaches such as digital storytelling and Photovoice, which I wasn’t aware of. I developed my interest so much that I am now taking training on Photovoice by facilitators from Participatory Cultures Lab at McGill University, Canada. I am so excited about using this methodology and digital storytelling in the future.”

Elizabeth Kimani, Associate Research Scientist, African Population and Health Research Center (APHRC), Kenya

“A discussion on digital storytelling challenged my practice in community engagement. I personally thought obtaining consent at the beginning of a project was enough. Little did I know that even when a story is finalised, it is worth getting consent again before it is shared with the public. I still remember sitting on the table with other delegates listening to Gill sharing her experience on digital storytelling in South Africa. I didn’t confess how much her experience challenged my knowledge about audiovisual methods but the truth is that I learnt a lot.”

Elvis Moyo, Senior Community Liaison Officer, Malawi–Liverpool–Wellcome Trust Clinical Research Programme, Malawi
The workshop showed me more possibilities for practitioners, not necessarily scientists, to engage science in their practice. I see that science has big opportunities to engage non-science practitioners, on equal grounds, to build collaborations that strive towards the same goal. The collaborations have to make certain that the community includes scientists, and all of us who live and experience life not as separate subjects, but a matrix of subjects, all interdependent, forming the human experience.”

James Muriuki, Freelance Art Practitioner, Nairobi, Kenya

I took away the idea from Lisa Jamieson’s video that public engagement can ‘make better scientists’. I also appreciated the centrality of gender in all questions surrounding health and nutrition, a theme set in motion by Professor Pottier on the first day. I was also left thinking about the importance of a strong central team and a balance between the different disciplines on that team. Since coming back from Botswana we have organised training sessions for all the partners in the basics of diabetes and are planning reciprocal sessions on the basics of drama methodologies.”

Victoria Hume, Freelance Arts Manager, Health Communication Unit, University of the Witwatersrand, South Africa

I learnt different ways to do public engagement, as long as they are locally appropriate. I would like to be able to approach an issue from different angles and over a longer period of time in order to build trust, reveal more truth and make more significant changes. The workshop introduced me to a network of people who work towards shared goals, and I feel more confident and proud of my work.”

Nguyen Thi Dan Thanh, Social Scientist, Oxford University Clinical Research Unit, Vietnam
Want to find out more?

Here’s a list of references and resources relating to our discussions at the workshop.

Details of the workshop agenda including links to participant PowerPoint presentations can be found on the Wellcome Trust 6th International Engagement workshop website.

**Introduction to food**


The five sections of this half hour talk cover the basics of the food system, the various actors operating in it, the changing world and key trends, the varying tools for control used, food policy and practice.


**Wellcome Trust**

Sustaining Health. This research programme explores what role the Trust can play in exploring the links between the environment, nutrition and health, and how we could relieve the strain that the planet is under.

Food & Drink Initiative [working title]. This large scale UK engagement initiative is aimed at increasing conversation about food issues at every stage, from farming to transport to cooking to waste. More information on the initiative including an introductory PDF can be found on the website.

**References for Johan Pottier’s key note address**


**Gender and food security**


**Food and intellectual property rights**


**Digital Storytelling References**


From the Centre for Digital Storytelling
Videos online (on www.storycenter.org)
An example of a “high end” digital story, created with ample workshop time, lots of video footage, and a larger-than-average budget for post-production.

An example of a more typical digital story, illustrated almost entirely with photos.

An example of a mini news documentary focused on gender-based violence and told primarily in third-person.

An example of a message-oriented PSA against gender-based violence – not in English, but the style of the production is clear.

An example of a powerful first-person approach to talking about gender-based violence.

Silence Speaks: Ethical Practice in Digital Storytelling

Evaluation resources
Methods for evaluation of engagement

Summaries and introductions to a range of evaluation approaches useful for assessing engagement

Includes a range of methods for addressing complex multi-stakeholder processes, such as Outcome Mapping, Participatory Statistics, Realist Evaluation, Evaluation Case Studies and Most Significant Change stories of impact.

Guides to public engagement
A range of introductions and guides to the evaluation of public engagement with a UK emphasis. These tend to be focused on events and research dissemination, rather than more concerted community engagement.

Participatory methods
Work with us: how people and organisations can catalyse sustainable change, Danny Burns et al. IDS 2013

General evaluation resources
Annotated list of useful websites, discussion forums and on-line resources providing information on evaluation approaches, tools and guidance – much of it from the international development sector – which are relevant and valuable for evaluation of engagement with research.

Engaging with Impact discussion group
On-line forum focusing on the challenges of evaluating engagement. Includes summaries of discussions on relevant literature, other discussions and resources.

“Collaboration, co-creation and engagement go hand-in-hand when wise solutions are needed.”

Chris Busang, Subsistence Farmer, Botswana
The Wellcome Trust is a global charitable foundation dedicated to improving health. We provide more than £700 million a year to support bright minds in science, the humanities and the social sciences, as well as education, public engagement and the application of research to medicine. Our £18 billion investment portfolio gives us the independence to support such transformative work as the sequencing and understanding of the human genome, research that established front-line drugs for malaria, and Wellcome Collection, our free venue for the incurably curious that explores medicine, life and art.

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