



Early-stage innovation report

Facilitating learning exchange and building a community of practice to accelerate social innovation in health

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INTRODUCTION

Overview of social innovation in health

In recent years, there has been a paradigm shift to more pragmatic, community-inclusive methods in finding public health solutions. This transition draws on the idea that communities should not be passive beneficiaries, but should actively contribute and collaborate in health-care improvement initiatives. To address healthcare delivery gaps, social innovation in health (SIH) employs community engagement and multi-stakeholder approaches.^{1 2} SIH has been defined as a novel solution developed by a range of actors in response to a health need, thereby enabling healthcare delivery to be more inclusive, affordable and effective.³

Social innovations have improved access to quality healthcare in different settings and various disease areas.⁴ For example, social innovations have increased uptake of diagnostics for malaria, human papillomavirus and HIV,⁵ improved housing conditions to control Chagas disease in Guatemala,⁶ used participatory community processes to address dengue in Cambodia⁷ and addressed delays in accessing maternal care in Uganda.⁸

Multidisciplinary research that involves innovators and other actors are needed to test and evaluate SIH, provide evidence for sustainability and upscaling and explore how the process leads to empowerment and social transformation.^{1 2 4} While many social innovations are specifically tailored to local contexts of communities, learning about successful innovations can enable

WHAT ARE THE NEW FINDINGS?

- ⇒ Social Innovation in Health Initiative (SIHI), Make a Difference (MAD) Foundation and Zuellig Family Foundation (ZFF) collaboratively conceptualised the development of a Social Innovation in Health (SIH) Learning Exchange Platform that is grounded on intersectoral collaboration. It will be used for networking, sharing and co-creation among social innovators and other SIH ecosystem actors through four main processes: community of practice, database of resources and partners, forums and capacity building.
- ⇒ A co-creative process was undertaken to conceptualise and design the platform. The series of meetings of SIHI, MAD and ZFF became a testing ground to prototype the learning exchange process and initiate the community of practice. Convergence points in expertise and experiences were identified, that is, social innovation research, community engagement, leadership and governance and innovative business models complement each other in aid of social innovation.

adaptation in other areas or development of other innovations.

SIH can be supported by creating and strengthening links between practitioners, academics, researchers, funders and policymakers and providing related technical education.⁹ Partnerships among stakeholders can maximise varied experiences and expertise for co-creation and sustained action.¹⁰ Furthermore, the Alma Ata and Astana Declarations of primary

HOW MIGHT IT IMPACT ON HEALTHCARE IN THE FUTURE?

- ⇒ The creation of online communities of practice and innovative learning exchange platforms for SIH provides an enabling environment for innovators and partners, accelerating the development and scale-up of social innovations. It also helps bridge innovation silos across different disciplines and sectors that share common goals in improving health outcomes through social innovation.
- ⇒ The beneficial exchanges experienced by the learning exchange partners in the initial stages of the platform's development can be multiplied as more actors in the SIH ecosystem (innovators, incubators, research institutions, funders, policymakers, etc.), starting with the networks of SIHI, MAD, and ZFF, are linked and provided with opportunity for purposeful communication.

healthcare (PHC) espouse intersectoral collaboration to achieve health and social goals, emphasising the alignment and participation of governments, partners, individuals and communities.^{11 12}

Learning exchange and communities of practice in health care

Lave and Wegner (1991) developed the concept of community of practice (COP). They described COP as something created over time, characterised by a shared domain of interest, relationship-building with joint activities and discussions and a shared practice with tools, experiences and other resources to address problems.¹³ Although studies evaluating the impact of COPs on population health remain scarce, at the process level, COPs have been found to enable organisational change through the flow of knowledge from practice to programme and service areas, and into larger systems.¹⁴ Promising interventions with COPs include a facilitator to enhance interaction, use of information technology to enable communication and provision of organisational infrastructures to promote uptake of new knowledge.¹⁵ COPs for specific health programmes have employed different social media platforms and pathways such as podcasts and virtual meetings for continuous engagement and knowledge exchange with target groups.¹⁶

Social innovation in health learning exchange partners

To accelerate learning and build a COP for SIH, Social Innovation in Health Initiative (SIHI), Make a Difference (MAD) Foundation and Zuellig Family Foundation (ZFF) collaborated to develop an online SIH Learning Exchange Platform for innovators, incubators, research institutions, funders, policymakers and other actors in the SIH ecosystem.

These organisations have a shared goal of improving health by capacitating health system actors at various levels and advocating for them. Although each organisation has specific areas for capacity building (eg, research, entrepreneurship, leadership), all use a

holistic approach recognising the multifactorial nature of health and that solutions may lie outside traditional health fields. The organisations work with different sectors and focus on different geographical locales, thus bringing a diversity of knowledge and experience.

Social Innovation in Health Initiative

SIHI is a global network of country hubs and implementing and contributing partners that advance SIH through research, capacity building and advocacy. SIHI has produced over 50 SIH case studies from 17 countries, identified through crowdsourcing calls. SIHI has also organised workshops, panel discussions and collaborative research on SIH.

Local SIHI hubs were established within existing academic and research institutions. They act as catalysts to embed social innovation into research that supports health system policy and practice in their countries.¹⁷ SIHI Philippines is hosted by the University of the Philippines Manila and has been connecting various stakeholders of the country's SIH ecosystem. Consultations with innovators, academic institutions and government and non-government organisations highlighted needs related to social innovation including a platform to promote causes and innovations, access to a database or network of support for funding and technical assistance and capacity building for research on SIH, particularly for implementation research.

Zuellig Family Foundation

ZFF is a non-government organisation based in the Philippines that focuses on improving public health in rural areas through health leadership and governance programmes for local government leaders. ZFF has engaged more than 72 municipalities and 12 provinces and has become a catalyst in improving health indicators in partner communities.

Their primary approach in training local leaders is the health change model, which uses the bridging leadership (BL) framework.¹⁸ The BL process starts with understanding a health challenge with a systems lens and the role of leadership, followed by mobilising and unifying relevant stakeholders, and finally, facilitating new institutional arrangements and social innovations.

ZFF has identified the need for collaboration across low-income, middle-income and high-income settings to address health inequity. Applying leadership and governance to social innovations for health equity is also of primary interest.

Make A Difference

The MAD Foundation is an international community and organisation spanning more than 30 countries and has engaged over 60 organisations for societal and systemic transformation. The group brings agents of change together across industries, sectors and geographies to collectively unlock global challenges through building and testing regenerative systems in

the intersection of technical, business and community-driven innovation. In health, MAD works with a diverse set of actors across Uganda and Sweden to develop a holistic approach to water and sanitation systems and test net positive models. MAD also carries out activities to increase equality, reduce discrimination and improve mental health.

MAD believes that exchange of knowledge and creation of a platform for this is pivotal in co-creating multisectoral and next-generation societal solutions. This will also aid in demystifying science and research and co-create exploration and innovation processes.

Aims and objectives of the learning exchange platform

The proposed SIH Learning Exchange Platform will provide an online venue for sharing and networking among SIH actors and building a COP. The COVID-19 pandemic accelerated the need to transfer these activities into the digital space. Having an online platform will provide a continuous and asynchronous way of engaging. Specifically, this platform will:

1. Create an online COP to advance SIH—connect individuals and organisations interested or engaged in endeavours related to SIH, including innovators, communities, researchers, funders, policymakers, etc.
2. Facilitate collaboration, co-creation and learning through the exchange of ideas, knowledge, skills, resources and opportunities
3. Expand technical capacity in SIH, research on social innovations, health governance, social entrepreneurship and related topics
4. Promote and advocate for social innovators, innovations and the concept of SIH
5. Allow dynamic mapping of local and global SIH ecosystems.

Forming a COP that addresses the needs of the SIH ecosystem can provide an enabling environment for actors to cross-pollinate locally anchored insights, increase awareness on specific causes and projects and accelerate application of health leadership and governance. This also provides an opportunity to empower key community stakeholders to participate in developing health solutions that are acceptable and adapted to their context.

Ultimately, the creation of the learning exchange platform aims to contribute to health system strengthening, build towards health equity and improving health outcomes in communities.

METHODS

During the COVID-19 pandemic, SIHI, MAD and ZFF were connected through SIHI networking activities wherein common interest in developing an online platform for learning exchange was identified. A co-creative process was undertaken by the organisations to conceptualise and design the platform.

Monthly online meetings were conducted since November 2020 and are still being held at present (October 2021). These were attended by project

leaders and managers of the SIHI Secretariat and Philippine Hub, founders of MAD and the vice president and directors of ZFF. One-hour discussions were hosted by SIHI through Zoom and were primarily for developing a concept note for the platform. Each partner shared the needs of their stakeholders, visions for the platform, resources such as learning modules and knowledge products, strengths and potential roles. Key components and steps for creating the platform were also proposed. The design and key contents of the platform were formed through an iterative process. Drafting was done through an online document where partners could continuously provide inputs asynchronously. This was validated and approved by all partners in follow-up meetings. SIHI proposed a model for the learning exchange process which was vetted and approved by all the partners.

Learning exchange through partners' meetings

The meetings became a testing ground to prototype the learning exchange process and initiate a COP as the partners shared ongoing and future projects, insights and lessons from experiences in engaging communities. Grant opportunities, funding strategies and best practices on learning exchange and engagement of stakeholders were also discussed.

MAD shared their 'Basecamp' as a tool for co-creation and invited SIHI and ZFF to Explorative Expedition activities for the Paid to Poop Project and Utopia Game. MAD has also been better equipped to co-found the Swedish SIHI Hub through exchanges with ZFF and SIHI Philippines.

ZFF introduced their Health Change Model, which combines training, practicum and coaching in interventions with local governments, most notably the Municipal Leadership and Governance Program (MLGP). Because of its effectiveness in transforming local health systems, the MLGP was formally adopted as a regular capacity building programme of the Philippine Department of Health. This provided an example of good practices in supporting local health systems through training and another possible avenue for identifying local social innovations in health.

SIHI Philippines shared their ongoing research on health service delivery during the pandemic, which involves a co-creation workshop and the subsequent pilot implementation of an innovative service delivery model. The partners reviewed and contributed to the workshop plan for the project.

Different funding streams and potential stakeholder engagement were also explored. The Philippine Council for Health Research and Development was identified as a potential partner. An exploratory meeting with the Global Health Network was also conducted to learn from their experience in hosting similar platforms.

Table 1 Key ideas from the concept note for the Social Innovation in Health Learning Exchange Platform

	SIHI	ZFF	MAD
Proposed purpose of the platform	Build capacity for SIH and research on SIH. Share health solutions. Facilitate engagement and collaboration among innovators, funders, researchers, policymakers, communities and other actors in the SIH ecosystem. Build a community of practice on SIH.	Look at health issues and solutions from different vantage points. Collaborate to address health inequity in different settings (LMICs, HICs). Apply leadership and governance in social innovation for health equity.	Capture and share cutting edge knowledge and insights on the learning and leadership process. Unlock a new generation of community-led societal innovation leadership that powers capacity building and advocacy beyond borders. Celebrate the insights of communities—discover synergies, symbiosis and cross-pollinations around the globe.
Strengths and potential role (experience and expertise)	Identification and research on social innovations, capacity building and connecting and convening stakeholders.	Health leadership and health system development focused on attaining health equity. Capacity building of local leaders on bridging leadership and health systems, using roadmaps as a guide.	Social entrepreneurship and societal innovation, through ecosystemic and regenerative systemic approaches. Using blended modality learning and leadership platforms.
Knowledge products and resources	Introductory module on Social Innovation in Health. Community engagement modules.	Municipal Leadership and Governance Program.	Business Models, Regenerative Ecosystems, and Exponential Leadership.
Networks	16 implementing partners (of which 12 are country research hubs), 12 contributing partners; country hubs have their network of social innovators and government and non-government partners.	Local government units, Department of Health, other national agencies and development partners.	International community and organisation spanning more than 30 countries, engagement with over 60 organisations.

HICs, high-income countries; LMICs, low-income and middle-income countries; MAD, Make a Difference Foundation; SIH, Social innovation in health; SIHI, Social Innovation in Health Initiative; ZFF, Zuellig Family Foundation.

RESULTS

Ten meetings were conducted and were attended by all invited representatives of SIHI, MAD and ZFF. The collaborative process between partner organisations produced a concept note for the SIH learning exchange platform, including a learning exchange model and proposed features for the platform.

Concept note for the SIH learning exchange platform

The concept note defines the joint objectives and purpose for the learning exchange platform and outlines resources and strengths of each organisation that can contribute to the platform. Resources include knowledge products such as health leadership and

governance programmes and modules on SIH, community engagement, exponential leadership, regenerative ecosystems and business models. Skills, expertise and experience were also enumerated. Furthermore, each partner has a network of innovators and stakeholders from academia, government and the private sector, that can be engaged and mobilised. Table 1 outlines the key points of the concept note.

SIH learning exchange model

Through examination of the process and discussions, a model for the platform was developed by the partner organisations as shown in figure 1. The

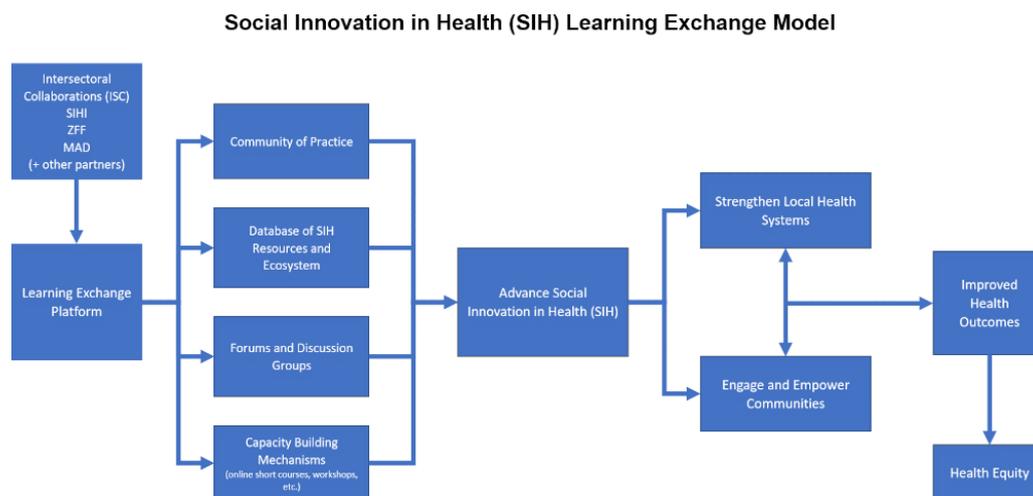


Figure 1 Model for the Social Innovation in Health (SIH) Learning Exchange Platform. MAD, Make a Difference Foundation; SIHI, Social Innovation in Health Initiative; ZFF, Zuellig Family Foundation.

platform is envisioned to address needs in the SIH ecosystem identified through intersectoral collaborations between various stakeholders. This will advance SIH through the development of a COP, database of SIH resources, forums for discussion and capacity building activities. This should ultimately lead to stronger health systems that lead to better health outcomes.

The proposed model for the SIH Learning Exchange Platform is grounded on intersectoral collaboration (ISC), affirming the primary healthcare approach to achieving health equity. Starting with the partnerships among, but not limited to, SIHI, MAD and ZFF, the platform will be used for collaboration and exchange through four main processes—a community of practice, a database of resources and ecosystem actors, forums and capacity building. This platform will advance SIH, contributing to health system strengthening, community empowerment and ultimately, improved health outcomes and health equity.

Proposed features for the learning exchange platform

Planning for website development for the online SIH Learning Exchange platform is ongoing. The following are proposed features for the website:

1. Registration for the online community.
2. Repository of resources and knowledge products related to SIH.
3. Forums for sharing and building on ideas, innovations, health solutions.
4. Communities of practice on specific topics/subdomains in social innovation in health.
5. Database of SIH ecosystem actors—innovators, researchers, implementing partners, funding agencies, incubators/accelerators, technical service providers, etc.
6. Hosting online short courses, workshops and other activities.

The website will be accessible to the public. However, registration will be required to participate in more in-depth functions, for example, discussions. It will allow health solutions to be shared, developed and supported for implementation. It will also provide a virtual venue for exchanging best practices and innovations in community engagement and health system strengthening. Knowledge products will be co-created, such as learning and workshop modules, that will contribute to development and sustainability of social innovations and social enterprises and facilitate research on social innovations.

Local and international stakeholders for SIH and health systems will be invited to participate in a pilot of the platform and provide feedback for further development. Maintenance and governance of the platform shall be discussed at a later development stage.

DISCUSSION

Collaborative exchanges between SIHI, MAD and ZFF show that the need for an enabling environment for social innovation is shared globally, whether in

low-income or high-income settings and in various cultural contexts. The exchanges showed that there is much to be gained from intranational and international collaborations for SIH. It also demonstrates that diversity and wealth of knowledge and expertise from various settings can be used to create innovative ideas. Shared passion for SIH among the organisations was instrumental in sustaining the partnership in the early stages of development.

Recognising the role of intersectoral collaborations in strengthening PHC and promoting universal health coverage (UHC), there is a need to facilitate engagement with multiple stakeholders to support social innovators in further developing innovations and ensuring sustainability. SIH addresses complex health issues in a way that is tailored to specific socioeconomic realities of communities. These health solutions can improve access to quality healthcare. Enhancing support for SIH moves communities closer to UHC.

The proposed SIH learning exchange platform is aimed at creating a COP for SIH, connect and catalyse collaboration among stakeholders and promote the concept of SIH. In comparison to other COPs, this iteration considers the ongoing digital transformation of the healthcare landscape and will provide access to researchers and implementers in diverse sociocultural settings. The process of building COPs may be challenging owing to varying perspectives but doing so can bring about more meaningful, impactful and comprehensive results. End-users of the platform will provide valuable input in improving content and strategies within the COP.

Global exchange of ideas can encourage communities to adapt solutions that may answer health problems in their context. Confidence in finding novel solutions to health problems should grow as more scientific data and evidence for SIH is made available to innovators and communities.

The prototype learning exchange process in conceptualising the platform led to the identification of convergence points in expertise and experiences. Social innovation research, community engagement, leadership and governance and innovative business models were found to complement each other in aid of social innovation. Such exchanges will multiply as more SIH actors are linked and provided with a venue for purposeful communication. This will facilitate collaborative research on SIH and promote uptake of findings and evidence by innovators, programme implementers and policymakers. Dissemination of the launch and roll-out of the platform will be done through the networks of the partners. Monitoring and evaluation of impact on the stakeholders will be done through site analytics and qualitative user feedback.

CONCLUSION

SIH can bridge gaps in the health system and provide support in catering more effectively to the needs of

communities within their local contexts. A platform for sharing and learning for the practice and research of SIH provides an enabling environment for innovators and partners to accelerate development and upscaling of social innovations. It equips social innovators with new ideas, access to resources, collaborations and partnerships and evidence-based information to support social innovation in health.

In conceptualising the platform, SIHI, MAD and ZFF have applied sharing and learning activities, gaining ground in forming a COP. They have shared ideas, knowledge and resources and have collaborated in pursuit of a common interest of advancing SIH. A concept note, including a model for learning exchange and proposed features of the platform, has resulted from the shared endeavour. They have also shared tools and best practices that bolstered each other's activities. For example, exchanges have aided MAD to co-found the SIHI Swedish Hub. This partnership provides a glimpse of how the learning exchange platform is envisioned to be. The partnership hopes that development and pilot of the website will soon follow. This shall host the online SIH learning exchange platform and mechanisms to monitor and evaluate the processes and outcomes.

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