



STRENGTHENING CAPACITY FOR RESEARCH UPTAKE: UNDERSTANDING, COMMUNICATING AND USING EVIDENCE

MARCH 2026

THE CHALLENGE

The effective use of evidence in health policy-making remains limited by individual capacity gaps among policymakers and researchers, weak institutional systems and support, and insufficient communication, stakeholder engagement, and evidence-sharing mechanisms.^{1,2,3} Policymakers and programme teams may not always have the time, skills, or support needed to access, interpret, and apply research evidence in decision-making. At the same time, researchers may lack the capacity, mechanisms, relationships, and institutional support required to communicate evidence into timely, relevant, and usable formats. As a result, health policies and programmes may not fully benefit from available research, reducing the potential for evidence-informed decision-making.

Within this context, the LIGHT Consortium aimed to generate and use evidence to inform gender-responsive TB policies that would contribute to improving men's access to quality TB care, including diagnosis and prevention.



Gender Training, Uganda



ToT on Evidence Informed Training, Kenya

WHAT LIGHT DID

LIGHT recognised that strengthening the capacity of individuals within and beyond the consortium, as well as institutions and other stakeholders across Kenya, Malawi, Nigeria and Uganda, was essential to generate, adapt, translate, and use evidence effectively. LIGHT also engaged strategically with key national, regional, and global stakeholders to help ensure that its research is relevant, well-communicated, and available in time to inform policy and practice.

LEAVING NO-ONE BEHIND: TRANSFORMING GENDERED PATHWAYS TO HEALTH FOR TB

Partners:



Funder:

Across Kenya, Malawi, Nigeria, Uganda, and the UK, LIGHT implemented a range of capacity-strengthening activities to support research uptake. These included:

1. EVIDENCE INFORMED DECISION MAKING (EIDM) TRAINING AND TRAINING OF TRAINERS (TOT)

LIGHT's partner, the African Institute for Development Policy (AFIDEP), led a series of EIDM workshops to strengthen policymakers' capacity to engage effectively with new research findings and to improve their understanding and use of evidence for greater research uptake. The training covered systematic searching for evidence, literature synthesis, and communicating evidence to influence policy, including the development of policy briefs and policy recommendations. In total, AFIDEP, engaged over 80 stakeholders including National TB Programme officials in Kenya, Nigeria, Uganda and Malawi. To ensure local leadership and ownership, AFIDEP also delivered **EIDM Training of Trainers (ToT)** which strengthened the technical capacity of 25 mid-level technical officers, including representatives from National TB Programmes in the four countries. This equipped them to lead further EIDM training and cascade learning more widely to senior and mid-level TB managers and other stakeholders, including National TB Programmes, ministries, WHO, civil society, and partner institutions involved in health programming and decision-making. As part of the EIDM package, participants were supported by a nine-month mentorship programme, to support practical application of EIDM skills and principles.



2. SCIENTIFIC WRITING

The LIGHT Consortium delivered a series of training sessions for (a) researchers within the consortium and partner institutions, and (b) National TB Programme teams to strengthen their ability to design research studies, analyse findings, prepare manuscripts, and develop abstracts and policy-relevant products. These training workshops equipped participants with the knowledge, skills and confidence needed to turn raw data into impactful scientific abstracts and peer-reviewed research publications. For example, LIGHT partner in Kenya, Respiratory Society of Kenya (ReSoK), conducted a manuscript writing workshop for TB and lung health researchers and officers to enhance research writing and publication skills. LIGHT partner in Nigeria, Zankli Research Centre (ZRC), organised a five-day training workshop on research methodologies and scientific writing for monitoring and evaluation officers from the National TB, Leprosy and Buruli Ulcer Control Programme (NTBLCP) and the KNCV Tuberculosis Foundation, as well as TB researchers from ZRC and other academic institutions. Participants had the opportunity to apply learning through practical exercises strengthening their ability to navigate scientific writing and publishing processes.



3. UNDERSTANDING CONCEPTS AND RESEARCH METHODS

The LIGHT UK team delivered a four-day training in Kenya on understanding key concepts and research methods to strengthen national capacity to document and disseminate TB research. The sessions emphasised integrating gender and equity, combining research methods, and applying these skills for evidence-informed programming and decision-making. Participants gained practical knowledge in economic evaluation, data analysis, the use of TB simulation tools (mathematical modelling), and participatory approaches to community engagement and inclusive policy development.



Strengthening capacity for understanding concepts and research methods for enhanced policy discussions and decision-making training. 21-24 October 2025, Naivasha, Kenya

4. SCIENCE COMMUNICATION TRAINING FOR RESEARCHERS

LIGHT also strengthened researchers' capacity to communicate complex research findings and evidence in formats that are more accessible, relevant and useful for decision-making. For example, LIGHT partner in Uganda, Makerere University Lung Institute (MLI), delivered a two-day training for 29 TB researchers on science communication to support policy and practice influence. The training covered communication strategies, the development of policy-facing products, and the tailoring of messages for different audiences, including through policy briefs, memoranda, advocacy materials, and social media content.



Science Communication Training, Uganda



5. GENDER IN LUNG HEALTH RESEARCH TRAINING

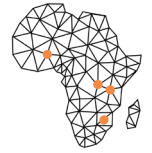
LIGHT partner in Uganda, MLI, also strengthened participants' understanding and capacity to integrate gender into lung health research through targeted training. The training clarified key concepts of sex and gender, encouraged the use of sex- and gender-disaggregated analysis, and explained how gender shapes lung health risks, experiences, and outcomes. It also encouraged more gender-responsive and inclusive research by supporting participants to apply gender analysis in the design, implementation, and interpretation of research.



Gender Training, Uganda

6. ENHANCING MEDIA REPORTING ON TB AND GENDER

LIGHT developed and implemented a **"Media Engagement Strategy"** across Kenya, Malawi, Uganda, and Nigeria to enhance journalists' and editors' understanding of TB and gender, improve access to evidence and experts, and establish enduring relationships between media and researchers. This was achieved through media science cafés, journalist workshops, editor breakfasts, follow-up assessments, and a media award event, with the aim of supporting accurate, inclusive and relevant TB reporting that informs the public and subsequently influences policy, while bringing greater attention to gender-responsive TB care.



LIGHT IMPACT

LIGHT strengthened capacity across the consortium and beyond in research methods, scientific writing, research communication, and the translation of evidence to policy and practice. This built local expertise, improved quality and relevance of research outputs, promoted knowledge generation that addresses local challenges, and supported evidence-based policy-making.

CONCEPTUAL, INSTRUMENTAL AND STRENGTHENED CAPACITY IMPACTS

Overall, the EIDM training raised awareness and strengthened the technical capacity of the health sector to address complex challenges with informed solutions, fostering a culture of evidence-informed decision making.

- **Enhanced capacity for evidence-use in decision-making:** The EIDM training strengthened policymakers' and programme managers' ability to access, appraise, synthesise, and apply research evidence in their work. Participants described a shift towards more deliberate and systematic use of evidence in meetings, mentoring, and communication with decision-makers, helping to improve data use and decision-making at regional and national levels. As one participant reflected:



ToT on Evidence Informed Training, Kenya



"It was eye-opening. The things we went through we usually think are for academic institutions like the policy briefs, for instance; How to do it, it is actually a form of pitching. We are usually very wordy in our writing, but this was very useful for me, I have changed and improved my writing."

Mr. Ivan Arinda Kato, NCD Programme Officer, Ministry of Health, Uganda

- **Development of Evidence-to-Policy Products:** The EIDM ToT approach led to impactful outcomes, including the development of [country-specific policy briefs](#), which were disseminated at national platforms including to technical working groups and National TB Programme management. This helped promote a stronger culture of evidence-use within institutions, including through EIDM sensitisation meetings.
- **The EIDM Training of Trainers** was subsequently cascaded to senior and mid-level managers within National TB Programmes across the four countries. For instance, in Uganda alone, 20 NTLP staff and associate Ministry of Health staff were trained by local trainers.



"When we were working on our National Strategic Plan for TB and Leprosy, we used knowledge from that particular training [EIDM] to consider the evidence that we needed and the interventions that we thought would work."

Dr. Henry Luzze, NTLP Manager, Uganda



CONCEPTUAL, INSTRUMENTAL AND STRENGTHENED CAPACITY IMPACTS

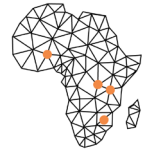
- The **Scientific Writing Workshop** for TB and lung health researchers in Kenya enhanced research writing and publication skills among TB and lung health researchers. As a result, eleven manuscripts have been submitted for publication so far. Similarly in Nigeria, the training led to at least one publication and two scientific posters, one presented at Nigeria TB conference and the other at the international Union Conference. As one senior stakeholder reflected:



“This is the first time a partner has organised such a targeted capacity strengthening workshop for NTBLCP M&E officers, an effort truly worth commending... Improving research and manuscript writing skills is not just valuable, it is essential for the career growth of our officers... The LIGHT Consortium has set a new standard in partner engagement through this impactful training initiative.”

Former Acting National Coordinator, NTBLCP, Nigeria

- The training on **Understanding Concepts and Research Methods** in Kenya enhanced policy-making for National TB Programmes by covering health economics, quantitative and qualitative research methods, and tuberculosis modelling. Pre- and post-evaluation showed enhanced participants’ understanding of health economics, quantitative and qualitative research methods, and mathematical modeling to promote evidence-informed decision-making in health policy. Following this training, to ensure programmatic decisions and resource allocations are anchored in scientific rigour, the Kenya National TB Programme **established the multi-disciplinary Modelling and Analytics Coordination Working Group**.
- **The training on Gender in Lung Health Research in Uganda** improved participants’ understanding of gender concepts in lung health research, with quiz results showing enhanced knowledge of gender roles, gender inequality, gender mainstreaming, and the distinction between sex and gender. Participants also strengthened practical skills through group work, applying gender analysis frameworks, developing gender-responsive research questions, and using tools such as the WHO Gender Responsiveness Assessment Scale and the Sex and Gender Equity in Research (SAGER) Guidelines. Feedback indicated significant knowledge gains and increased motivation to integrate gender considerations into research and practice. Following the training, Uganda’s National TB Programme developed a **standalone module** integrating **gender, culture, human rights, and social inclusion** in TB service delivery.
- **Enhanced media understanding and reporting on TB and gender:** Health journalists play a pivotal role in shaping public perceptions and responses to diseases. **Media engagements** across LIGHT countries led to improved understanding of TB and gender-related issues, stigma, and the use of evidence in reporting. This was captured through **follow-up assessment surveys** with participating journalists and editors in LIGHT media events. Some journalists reported greater confidence in interpreting the evidence and using it in their stories. **Enhanced media visibility of TB and gender** across all four countries **was evident in the number of published stories and broadcasts following the engagement events** (including radio, TV, print, and social media online platforms). These stories amplified under-reported TB narratives, challenged stigma, and highlighted the gendered aspect of TB care and access. The media engagement events **increased journalists’ and editors’ interest in reporting on TB through a gender lens**. This was reflected in their request for further training, mentorship, participation in national TB discussions, access to researchers and experts, and support for investigative fieldwork.



CONCEPTUAL, INSTRUMENTAL AND STRENGTHENED CAPACITY IMPACTS



“As Editor of Health Business Magazine, I found the LIGHT Consortium training both timely and profoundly enlightening. This training was particularly important as it underscored the crucial role of empowering communities to actively participate in addressing the social determinants of TB. By emphasising the importance of gender-responsive programming, it challenged us in the media to reframe our TB coverage - not merely as a clinical issue, but as a deeply social one, intricately linked to inequality, poverty, and access to essential services. The insights gained from this training will significantly inform and enrich our TB reporting, making it more inclusive, contextual, and purpose-driven. It has reaffirmed the media’s indispensable role in advocacy, public education, and holding systems accountable. Thank you once again for the opportunity to participate. I look forward to applying these insights to elevate TB reporting and to amplify solutions that are rooted in the lived experiences of communities.”

Editor, Male, Health Business Magazine, Kenya



“It’s not every day you sit down to write a story and angle it toward men. The focus has always been on women and children that’s what our editors prioritised. But the insights I’ve gained in the workshop are eye-opening. I’m certain they’ll shift how we report on TB in men moving forward.”

Journalist, Male, Radio One Uganda



“The data we’ve received from the Lung Institute and the LIGHT Consortium is eye-opening. We didn’t know the problem among men was this big. The real challenge is that researchers are often not available to share such findings with us. There’s no way this kind of data shouldn’t make it to newspapers, TV, or radio.”

Health Journalist, Female, Uganda Radio Network



“I am glad that the workshop has assured me that I will have access to experts, current data and every other necessary support to make it easy to write reports on health, particularly on TB.”

Journalist, Male, Nigerian Tribune

ENDURING CONNECTIVITY (ENHANCED NETWORKS & STRENGTHENED RELATIONSHIPS)

Beyond enhancing individual skills and institutional capacity, LIGHT’s capacity strengthening activities helped strengthen relationships and collaboration among researchers, policymakers, national TB programmes, media professionals, civil society actors, and other stakeholders across LIGHT partner countries. Through trainings, workshops, scientific conferences, research, media engagement, webinars, meetings, and strategic engagements, LIGHT created repeated opportunities for stakeholders to interact, share knowledge, and engage with evidence. These engagements helped build trust, deepen mutual understanding, and establish more sustained channels of communication between evidence generators, decision-makers, and end-users.



ENDURING CONNECTIVITY (ENHANCED NETWORKS & STRENGTHENED RELATIONSHIPS)

Across all four countries, LIGHT in-country partners developed strong relationships with National TB Programmes and other key stakeholders, supporting ongoing dialogue on gender-responsive TB care and contributing to wider discussions of TB and gender in policy, research, and public platforms. LIGHT's work with local media also strengthened longer-term relationships between journalists, editors, researchers, and TB stakeholders, helping to sustain engagement beyond the initial activities and generating demand for continued collaboration, mentorship, and access to expert voices.



"...I met a male TB survivor, and this further reinforced in me the need for sensitive reporting. Above all, it was a great networking opportunity with other editors and health experts. The contacts I made will go a long way in shaping future work."

Health and Science Editor, Production Lead, People Daily, Kenya

LONG-TERM CULTURAL IMPACT



ToT on Evidence Informed Training, Kenya

- LIGHT's capacity-strengthening approach was designed not only to build individual skills, but also to strengthen **institutional capacity and support local leadership and ownership of evidence use**. A key feature of this was the **Training of Trainers model**, which enabled participants to cascade knowledge within their own institutions and networks, extending the reach of the programme beyond the initial training cohort. This helped embed skills and approaches locally, while positioning national and institutional actors to lead future capacity-strengthening efforts themselves.
- By working closely with national partners and supporting in-country institutions to deliver, adapt, and apply training, LIGHT helped build more sustainable capacity for understanding, communicating and using evidence. This contributed to stronger institutional ownership of research uptake processes and reduced reliance on external actors to drive evidence-informed decision-making.



LONG-TERM CULTURAL IMPACT

- LIGHT also developed an open-access library of resources for researchers, programme managers, policymakers, NTPs, healthcare workers, and TB-affected communities, ensuring lasting guidance and knowledge beyond the programme's duration. As part of this library, LIGHT published:
 - a. **LIGHT Toolkit for Research Uptake** - a practical, "how-to" guide for translating research into real-world change, designed for researchers, research uptake and knowledge exchange professionals, decision-makers, programme managers, and funders seeking to move their research beyond academic outputs into real-world applications, ensuring that evidence is used to inform policy and practice for maximum impact.
 - b. **The LIGHT Health Economics Resource Pack** - a structured approach to understanding health economics fundamentals, including modules on economic evaluation, cost-effectiveness analysis and budgeting, with practical tools tailored for users in low-resource settings. The resource pack is suitable for both beginners and those seeking to enhance their skills in integrating economic principles within healthcare programmes and research contexts for impactful, evidence-informed healthcare decision-making and policy development.



CONCLUSION

LIGHT's capacity-strengthening activities demonstrate how targeted investment can support TB research uptake and learning. By enabling local experts to understand and communicate evidence, including through publishing and sharing research findings, LIGHT helped create an enabling environment for research uptake that informs policy and strengthens ongoing and future TB programmes.

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