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Beyond methods: partnership-building skills are central to scale-up research

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Scaling up interventions to reduce non-communicable disease burden is a global priority. Partnership-based research involving researchers, implementers, intersectoral partners, communities, and policymakers is fundamental to such efforts. Existing implementation and scale-up frameworks guide engagement, co-production, and knowledge translation. Here, we highlight practices that underpin effective partnership-based research, drawing on experiences from scale-up projects and insights synthesised from research undertaken by the Upscaling Working Group of the Global Alliance for Chronic Diseases between 2019 and 2021. Findings from five interviews with funding agency representatives and 43 stakeholder interviews across 20 countries, conducted at two time points, highlighted the importance of sustained investment in relationship-building to support effective partnerships. The recurring relational factors were distilled into three partner-centred domains, termed the 3Es: enable, empower, and equity. Enabling creates conditions for connection through trust, networks, and shared vision; Empowering fosters agency and participation through communication, knowledge exchange, and shared leadership; and Equity emphasises fairness, inclusion, and the meaningful incorporation of partner perspectives throughout research. Successful partnership research requires methodological rigour alongside interpersonal and partnership-building competencies reflected in the 3Es. These competencies are vital for navigating competing priorities, building local ownership, and forming coalitions that support system improvements at scale.

Keywords scale-up; partnership research; implementation science; non-communicable diseases; systems change; global health

Scaling up cost-effective interventions to prevent and control non-communicable diseases (NCDs) is a health priority for reducing premature mortality [1]. In 2019, the Global Alliance for Chronic Diseases (GACD) funded 27 projects to scale up evidence-based interventions for NCD prevention and control [2]. Recognising the importance of intersectoral action and stakeholder collaboration for scale-up, the GACD emphasised the need for partnership research involving researchers, policymakers, implementing agencies, and local communities from project design through to implementation [3]. Existing implementation and scale-up frameworks provide valuable guidance for stakeholder engagement, co-production, knowledge translation, and implementation activities. Building on these contributions, this commentary focuses on foundational factors that enable effective collaboration across large-scale partnerships spanning countries, sectors, stakeholder groups, and contexts. Drawing on experiences from real-world scale-up projects, we highlight some of the principles and everyday practices that underpin effective partnership-based research and help to build, sustain, and strengthen collaborations in support of systems change and scale-up.

Effective partnerships are integral to scale-up efforts: partnership-based research involving researchers, implementers, policymakers, communities, and other multisectoral actors is foundational to scale-up, and attention to the ways of working that underpin large-scale partnerships can strengthen collaborative scale-up efforts.

GACD Upscaling Working Group joint research

Between 2019 and 2021, the GACD Upscaling Working Group members collaboratively examined the 27 funded scale-up projects focused on hypertension and diabetes, at two time points (**Table 1**) [4]. Twenty-one research projects contributed to the baseline data, complemented by interviews with five funding agency representatives. This was followed by 43 multi-stakeholder interviews, focused on early implementation, including 19 projects being implemented in 20 countries.

Enable, Empower, and Equity (the 3Es) provide practical guidance for effective partnership-based research. These partner-centred competencies support collaboration, local ownership, and intersectoral coordination, helping translate evidence into sustainable systems change at scale.

Table 1. Summary of two-time point study from 2019–2021

Time point	Number of participating projects	Methods	Interview participants
Baseline	21 (of 27) projects	Document analysis of grant applications and project documents. Semi-structured interviews with funders.	Representatives from 5 funding agencies.
Follow-up at early implementation	19 (of previous 21) projects	Semi structured interviews with project partners and stakeholders.	43 interviews: project lead investigators (LMIC and HIC based), other research investigators (LMIC1 and HIC2 Based), project staff, policymakers. Implementation partners: NGOs, advocacy groups, other government agencies.

LMIC – low- and middle-income country, HIC – high income country, NGO – non-governmental organisation

This collective analysis offered insights into the practical realities of scale-up research and highlighted shared experiences across projects. These findings have been reported elsewhere [5–7]. The proposed 3E approach emerged through an iterative process of reflection and synthesis across a programme of previously published qualitative implementation studies rather than through a new primary analysis of qualitative data. Across the scale-up studies, considerable effort was invested to nurture these factors over time, reflecting their ongoing importance to support effective collaboration. The sustained attention devoted to these factors reflects the inherent importance in maintaining partnerships across diverse contexts, stakeholders, and evolving implementation environments. The reflections presented here synthesise lessons from researcher engagement in partnership-based research drawing across this programme of work, and are illustrated through selected examples from different projects.

Enable, empower and promote equity – the 3E approach

Three core partner-centric domains encapsulated in the '3Es' were identified as 'enabling environment' (facilitating collective action), 'empowering partnership' (supporting confidence, authority, and agency for meaningful contribution), and 'promoting equity' (ensuring fairness and inclusivity) (**Figure 1**). The 3Es distil key partner-centred elements, capturing practical insights from real-world collaboration that strengthen partnerships and intersectoral coordination to sustain scale-up.

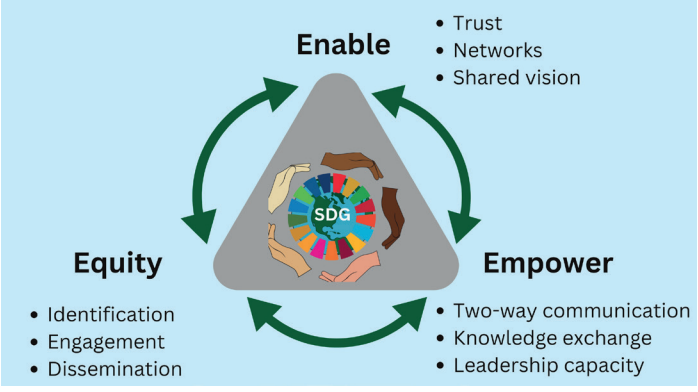


Figure 1. 3E model – role of research for creating sustainable change for NCDs.

The domains encompass interconnected factors that support collaboration across large-scale partnership-based research initiatives. These factors are not intended as a checklist; rather, they are principles that interact and reinforce one another, helping sustain trust and collective action. Rather than constituting a new engagement framework, they highlight foundational ways of working that cut across and complement existing implementation and scale-up frameworks.

While relevant across implementation research, the factors may be particularly evident in NCD scale-up initiatives, where strengthening NCD responses, addressing social determinants of health, and enabling intersectoral action often require a broader range of partners. Efforts to embed interventions within existing systems further increase the need for alignment, shared ownership, and sustained relationships across sectors, organisations, and levels of governance.

While scientific rigour remains fundamental to research, attention to the people/partners involved, and to the 3Es, is equally critical throughout the research cycle. Used as guiding principles, the 3Es can help cultivate collaborative cultures, reinforce partnerships, and bridge implementation silos that often constrain multi-sectoral action [8].

Although informed by studies conducted during the COVID-19 pandemic, the 3Es are not pandemic-specific. Instead, the pandemic highlighted the importance of partnerships, relationships, and collaborative practices for sustaining implementation during periods of uncertainty and change.

The following section outlines the 3E domains and facilitating factors, illustrated through selected examples from these projects. These examples are intended to demonstrate how the domains were enacted in practice and are not intended to represent the full range of partnership experiences across the programme of work.

Enable

Enabling environment refers to creating conditions for collective action, with trust, networks, and shared vision facilitating partner interconnectedness and teamwork.

Trust enhances partner capability, opportunity, and motivation to engage in implementation processes [9]. It is grounded in transparency, authenticity, and integrity [10], involving respect for the context and prioritising partners' needs. Integrity is demonstrated through honouring commitments and providing reliable, meaningful guidance grounded in local evidence. Gaining policymakers' trust was vital and was fostered through frequent discussions to align research agendas with local priorities and through regular, accessible progress updates. Demonstrating empathy and a commitment to community well-being helped foster strong alliances. For example, in one South American country, researchers redirected resources during the pandemic to provide epidemiological support to policymakers, contributing to evidence-informed public health response at a time of genuine need, whilst also creating opportunity to strengthen relationships and trust.

Addressing mistrust, especially when it may distance researchers from influential partners such as policymakers or community members, was considered essential [11,12]. In some settings, inherent scepticism towards international collaborators may be present. Recognising this and addressing it proactively through transparent disclosure of positionality and carefully considered engagement processes can help mitigate these challenges.

Networks play a critical role in facilitating research, providing influence and reach to support coordinated action for program scale-up. Often, existing personal and institutional connections serve as strategic entry points to decision-makers. These contacts played a fundamental role in establishing research agendas and were instrumental in creating communication pathways essential for obtaining real-time feedback. For example, in a country in Asia where staff turnover often caused disruptions to workflows, established networks enabled early access to critical information, which researchers drew upon to inform engagement with newly appointed personnel.

Researchers strengthened existing connections and forged new networks, often through snowballing, to sustain collaborative efforts. Navigating power dynamics within and beyond project networks was important for maintaining partner confidence and often required ongoing, strategic relationship-building activities.

Shared vision supports cohesion across diverse partners, particularly in contexts characterised by challenges for scaling up such as fragmented health systems, disease-specific approaches to healthcare delivery, and competing priorities. In one project, scaling required coordination among multiple government departments that had not previously collaborated. Multi-partner workshops combined with ongoing discussions provided a forum to highlight community needs related to NCDs and their risk factors, explore opportunities for coordinated action, and encourage alignment of priorities. Establishing governance mechanisms within the research process further enabled ongoing collaboration.

Empower

Empowering partnership refers to fostering partners' confidence, authority, and agency to contribute meaningfully through two-way communication, knowledge exchange, and leadership.

Two-way communication involves regular dialogue and active listening, balanced with methodological rigour, to enable meaningful partner participation, gain local support, and improve translation of evidence into practice. Fostering a culture of open communication and psychological

safety encouraged partners to voice their concerns with confidence, knowing that these would be acknowledged and addressed. Acknowledging partner challenges and adapting research processes helped to sustain engagement and relevance. Researchers shared that policymakers often required interim findings to inform ongoing decisions, while frontline workers might require addressing practical needs, such as simplification of work protocols to integrate research activities into their routine work. Recognising policymakers' time pressures and need for rapid decisions may necessitate research flexibility and agile reporting approaches. For example, during the COVID-19 pandemic, project teams that had invested in equitable partner engagement were able to draw on local perspectives to identify emerging challenges and inform program adaptation or restore activities following disruptions.

Knowledge exchange represents mutual learning between researchers and partners to develop contextually relevant programmes that suit local communities and health systems, which is foundational for scale-up and sustainability. Critical implementation research processes, such as co-design and establishing learning health systems where evidence from stakeholders, research, and implementation is applied iteratively for system improvement, depend on active knowledge exchange between researchers and partners. For example, in one project being scaled in an Asian country, participatory approaches informed the adaptation of programme activities delivered through separate gender groups to enhance the cultural appropriateness and relevance of a community-led diabetes intervention.

For partners with limited research experience, emphasising their agency and central role in scale-up may require explicit discussions, and sometimes demonstration, about the value of evidence-informed action. In one country in the South American region, for instance, research teams demonstrated how local evidence could be used to inform NCD advocacy efforts and discussions around context-specific policy development.

Leadership is crucial for empowering partners to tackle complex challenges, drive system improvement, improve local ownership, and sustain efforts. Researchers from several countries highlighted that, strategically, fostering local leadership helped sustain attention on under-prioritised areas such as NCDs and contributed to more enduring, locally owned changes in the future. Researchers identified leaders across policy, community, and health sectors who understood the NCD burden, were committed to improving population health, and valued the role of research in the process. Sustained engagement with these teams, including regular communication, discussions about end goals, and participation in multi-stakeholder workshops, strengthened research support and built capacity. In one project from the African region, champions from one region, which had made early progress, shared their experiences with other regions, creating opportunities for peer learning and dialogue around implementation challenges.

Equity

Promoting equity refers to fairness and impartiality, which is foundational to scale-up research. Embedding equity across all research stages is critical to meaningfully incorporate intersectoral partner perspectives, especially from priority populations.

Identification of partners is important in scale-up projects. Partners typically include researchers, health system representatives, intersectoral partners, policymakers, healthcare workers, community members, industry, civil society, and non-profit organisations. Mapping stakeholders early and systematically ensures that all relevant partners contribute to project planning and implementation. Researchers highlighted the importance of engaging stakeholders from across the system when pursuing system change and scale-up. Overlooking partners/actors, even those less visible, was perceived to have implications for local scale-up efforts. Identification processes can help clarify roles and support meaningful participation by ensuring that appropriate resources and opportunities for contribution are available. Including the voices of partners both supportive and critical of the research helps to ensure contextual grounding and informs scale-up efforts.

Another essential researcher role in supporting scale-up is to maintain equitable engagement throughout the research process, to ensure that the ideologies of co-production, people-centred

research grounded in the needs of the context are genuinely realised. Respecting and valuing all partners and their lived experiences is critical for addressing equity. Establishing clear engagement pathways and promoting regular interaction helps create a responsive and adaptive learning system, whereby real-world information informs real-time decision-making.

Dissemination of progress and findings should be comprehensive, fair, and tailored to diverse audiences and their needs. Researchers are responsible for ensuring that the sharing of results reflects the breadth of the consultation process and appropriately acknowledges all contributors. For example, in an Asian country, researchers co-developed a dissemination plan with stakeholders, acknowledging differing interests, roles, and communication preferences. This approach was perceived to create a sense of ownership, thereby better supporting the translation and acceptance of research findings. Developing plain language policy briefs proved effective for conveying research findings to policymakers.

CONCLUSIONS

While rigorous research guides scale-up, people-centric competencies encompassed by the 3E-domains are essential for creating the conditions in which such evidence can be locally owned, meaningfully interpreted, and applied for lasting impact. Leading scale-up research requires skills beyond traditional academic training. It includes the ability to engage with diverse partners, navigate competing priorities, and build coalitions capable of supporting system improvements. Developing a balanced skill set that integrates these interpersonal and strategic competencies alongside methodological expertise is vital for preparing implementation researchers to generate systematic evidence through genuine local partnerships, and to strengthen system-level collaboration to support sustained change.

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Additional material
Online Supplementary Document

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