I. RESEARCH ACTIVITIES

I.1 Integrating operational research within field projects

OR was carried out in various projects and domains, including the 2014 / 15 Ebola outbreak, programs for migrant health, sexual violence and torture victims. The enrolment of a Mobile Qualitative Researcher, additional epidemiologists and medical data staff helped to improve the quality and reporting of programme data. OR and medical support was provided in the DRC, Egypt, Zimbabwe, Mauritania, Pakistan, Syria (supported from Lebanon and Turkey) and Haiti.

I.11 Research dissemination and communication

The MSF International Activity Report featured an article entitled “A decade of operational research in MSF: luxury or necessity?”, which emphasized the evolution of OR in MSF over the last ten years.

The Brussels OR Day, an annual medical conference, attracted more than 300 visitors and online viewers. The event was focused on HIV/AIDS, antibiotic resistance, vaccination, maternal health and Ebola.

The MSF Field Research website (www.fieldresearch.msf.org) archives MSF-authored publications free of charge. Since 2010, there were a cumulative total of 807,209 downloads around the world, which highlights global interest in MSF research.

<table>
<thead>
<tr>
<th>Year</th>
<th>Total Publication Downloads</th>
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<tr>
<td>2010</td>
<td>50,000</td>
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<td>2011</td>
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<td>2012</td>
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<td>2013</td>
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<tr>
<td>2014</td>
<td>250,000</td>
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<tr>
<td>2015</td>
<td>300,000</td>
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TOTAL PUBLICATION downloads since 2010: 807,209
II. PUBLISHING AND SUPPORTING OPEN ACCESS PUBLICATION

There were a total of 131 publications authored or supported by the Brussels operational centre, including “state of the art” research, reviews, viewpoints, original research and case reports. The publications covered 16 themes representative of MSF medical activities on the field. Areas which deserve additional attention in the future include health care in conflict settings, torture, migrant health, mental health, health promotion and infection control.

Diversity of publication themes in 2015 (total of 131)

- Tuberculosis 17%
- Ebola 17%
- HIV 13%
- Health systems 6%
- HIV-TB 6%
- Non communicable diseases 6%
- Surgery / Anaesthesia 6%
- Infectious diseases 5%
- Sexual and reproductive health 5%
- Rational drug use / supply 5%
- Health policy 3%
- Malaria 3%
- Operational research 3%
- Medical equipment 2%
- Nutrition 2%
- Conflicts / Emergencies 1%

Over 80% of all OCB publications were open access, which means anyone who has access to the internet can freely read, copy, print, download or link to those publications. Dedicated budgets were secured for open access charges (ranging from 400 to 4000 USD/article).

The CD Scientific Collection was distributed to missions, partners and donors. In 2015, publications became accessible on hand-held devices through the MSF Kiosque application, available on Apple and Android products.

Trend in OCB-related publications

III. IMPACT ON POLICY AND PRACTICE

Following a 2014 assessment which showed that 74% of OR studies had documented effects on health policy and practice, another analysis was carried out in 2015 involving 63 SORT IT participants (see point II. below).

It showed that 51% of participants completed new research projects, 38% published papers, 44% presented at conferences, and 24% facilitated on further OR courses. Significant research outputs continue beyond the training and individuals apply the knowledge in their own programs. Such impact assessments need to be conducted more widely and as a routine tool.
Considerable success has been achieved in OR capacity-building through the global SORT IT (Structured Operational Research and Training Initiative) partnership. SORT IT was developed by MSF and The International Union Against Tuberculosis and Lung Disease in 2009 and has been scaled up to train people from 82 countries in collaboration with WHO and partners. Cumulatively, 305 participants have completed SORT IT courses with 315 papers submitted to peer-review journals. At the end of December 2015, 252 (80%) articles were in press or published.

Research projects conducted through SORT IT originate from the field, the course is output-oriented and it includes both MSF and non-MSF participants. Diversity of thinking is encouraged and the initiative contributes building partnerships, networking and advocacy. In addition to the standard model of quantitative methods, SORT IT now offers mixed methods research and distance learning modules. The teaching material has also been made available online through YouTube (SORT IT Training channel).

SORT IT participants also benefit from credits with the Tropical Education Network when pursuing a Master in Public Health or PhD in several European universities (e.g. University of Bergen, University of Nijmegen, University of Amsterdam).

V. IMPROVING COLLECTION AND USE OF MEDICAL DATA

Initiatives to improve routine programme data collection, analysis and reporting included the review and encoding of all Ebola data into a dedicated database by students; support to medical data systems for torture, sexual violence, mental health, migrants and hospital care. A medical workshop was organized in Athens and particular care was put to match the epidemiologists’ pool closely with field needs.

Additionally, a stratification of the epidemiologist profiles is in the process of being formalized. The different cadres include:

- **Monitoring Officers**: Medical staff with training in data and involved in design, monitoring and reporting of relevant project indicators.
- **Monitoring and Evaluation Managers**: Persons trained in epidemiology or OR and involved in development of OR agendas, design of data collection systems and protocol writing.
- **Field Epidemiologists**: Epidemiologists involved in outbreak investigation and control.

Improved support and utilisation of these three cadres should ensure that the diverse MSF medical data needs are covered.
Collaborative support was provided to other MSF sections (Switzerland, Spain, the Brazilian Medical Unit (BRAMU)). In Luxembourg, the foundation Fondation Veuve Emile Tesch offered a grant for the SORT IT training for the period 2014 - 2016. Efforts are also underway to activate the Luxembourg MSF Foundation, as a complimentary environment to foster sustainable capacity-building initiatives and humanitarian reflection based on OR evidence.

The 7th OCB Medical Activity Report was coordinated and edited by LuxOR. An OR fellowship programme was initiated by LuxOR in 2011 and by the end of 2015 it included nine fellows. This pioneering initiative within MSF boosts on-the-job research skills and leadership opportunities in MSF. OR Fellows support the implementation of OR on the field as well as the development of innovative approaches, research questions and ideas.

Since 2011, the cumulative outputs of the nine fellows have included over 400 research projects, which included introducing OR into virgin areas and improving the quality and utilisation of medical data.

**LOOKING AHEAD FOR 2016**

We will continue to foster the utilisation of OR as a science which searches for interventions, strategies, and tools that improve program performance and the care we offer in our missions. Improved anchorage in operations and proactive involvement in emergencies, as well as collaboration with other MSF units and international partners will be maintained.

LuxOR will improve the focus on moving research into policy and practice. This will be done by introducing metrics, resources and skills needed to assess and foster translation of OR evidence into policy and practice.

SORT IT will include training on writing policy briefs, will enhance dialogues with stakeholders and will continue leadership development by opening further education for its alumni. Monitoring and evaluation will be addressed as a routine measure. Furthermore LuxOR will develop adapted models for country-level OR capacity building, involving field staff and operations, starting with a workshop in Cairo in April 2016.

Further develop the epidemiology and OR pool and integrate SORT IT alumni. We will formalize a strategy and package that attracts epidemiologists, and LuxOR will play a supportive role in their recruitment.

Finally, continue steps to activate the Luxembourg MSF Foundation to serve as a complimentary structure for sustainable capacity building, networking and humanitarian reflection based on OR evidence.