

RESEARCH FELLOW



Job Title:	Research Fellow - Accountability in Action
Department:	Department of Global Health & Development
Faculty:	Public Health and Policy
Location:	Tavistock Place, London
FTE:	0.5 FTE
Grade:	Research Fellow - Grade 6
Accountable to:	Head of Department through Principal Investigator (PI)
Job Summary:	<p>Weak accountability and corruption (the abuse of entrusted power for private gain) threatens health in LMICs, especially among the poor. Evidence shows that corruption remains pervasive, harms health and access to care, and is a major barrier to achieving Universal Health Coverage. The health sector is consistently rated as among the most corrupt. Unaccountable and corrupt practices undermine the trust underpinning effective, equitable, and responsive health care and has a major impact on coverage and health outcomes.</p> <p>Most approaches to weak accountability and corruption have seen these as a failure of management, a result of poorly governed and financed systems or reflecting social norms. Many interventions seek to improve law, policy, accountability and transparency. Our aim is to find feasible, high-impact strategies – specific to the contexts of the Nigerian and Malawian public health systems – to strengthen governance in order to tackle them. But, we can only do so if we first understand the reasons why they persist and find areas where interests of key actors coincide to allow change.</p> <p>The Accountability in Action project asks: How do health systems structures and practices, and informal socio-political and economic structures incentivise weak accountability and corruption at district level, thereby constraining the achievement of UHC and how can these be overcome?</p> <p>Our objectives are to:</p> <ol style="list-style-type: none"> 1. Understand the different ways that weak accountability and corruption manifest in the financing and provision of care at district and local level and the different actors involved: e.g. informal payments, absenteeism, leakage of health commodities, inappropriate referrals. 2. Identify individual and institutional level drivers of weak accountability and corruption, both formal: rules, laws, governance and statutory processes, supervision, and informal: social, cultural, religious, political and economic networks. 3. Explore how formal institutional structures and rules interplay with informal structures (both within and outside the health system) to impede accountability and sustain corruption: a) in district management structures, b) in provider-patient encounters and c) at community level. 4. Identify openings to implement plausible strategies to address

	<p>the diverse aspects of weak accountability and corruption that will enable the achievement of UHC, given constrained resources and broader institutional structures and loci of power.</p> <p>The study was conducted in Nigeria and Malawi and involved mixed methods: ethnography, in-depth interviews, focus group discussions, a household survey with service users and others.</p> <p>The postholder will analyze and write up data from the household survey that was undertaken in the Enugu and Kano states in Nigeria and in Malawi, representatives of a range of districts. These represent diverse populations, needs, outcomes, level of resources and institutional strength. They will also contribute to multi-country analyses utilizing existing datasets (e.g. Corruption Perception Index, V-Dem, WB governance indicators etc.) exploring the relationships between corruption, health systems resources, coverage and outcomes, and sociopolitical variables, data on inequalities and values.</p>
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General Information

The London School of Hygiene & Tropical Medicine (LSHTM) is one of the world's leading public health universities.

Our mission is to improve health and health equity in the UK and worldwide; working in partnership to achieve excellence in public and global health research, education and translation of knowledge into policy and practice.

Staff and students are committed to helping create a more healthy, sustainable and equitable world for everyone, because we believe our shared future depends on our shared health.

We embrace and value the diversity of our staff and student population and seek to promote equity, diversity and inclusion as essential elements to improve health worldwide. We believe that when people feel respected and included, they can be more creative, successful, and happier at work. While we have more work to do, we are committed to building an inclusive workplace, a community that everyone feels a part of, which is safe, respectful, supportive and enables all to reach their full potential.

To find out more please visit our [Introducing LSHTM page](#).

Our Values

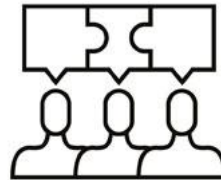
Our values establish how we aspire to achieve our mission both now and in the future - demonstrating what it means to work and study at LSHTM. Please visit our [LSHTM Values page](#) for further information.



**Act with
integrity**



**Embrace
difference**



**Work
together**



**Create
impact**

Faculty Information

The School is divided into three academic faculties, of which the Faculty of Public Health & Policy is responsible for research and teaching in the policy, planning and evaluation of health programmes and services. Its interests are both national and international, encompassing industrialized and low and middle-income countries. The Faculty has three research departments:

- Health Services Research and Policy (HSRP)
- Global Health and Development (GHD)
- Public Health, Environments and Society (PHES)

In the Faculty there are about 250 academic staff drawn from a variety of disciplines including medicine, statistics, epidemiology, sociology, economics, anthropology, operational research, psychology, nursing and history. Each department is responsible for its own research. The School has adopted a rotating system of management for its academic departments and faculties. The management of a department is under the control of the Department Head, appointed by the Director for a period of three years in the first instance. The Faculty Head is appointed in a similar manner but for an initial period of up to five years.

The Faculty of Public Health and Policy is responsible for organizing a one-year Master's course in Public Health, which allows students to take either a general MSc in Public Health, or to follow one of several more specialised streams: Health Services Management, Health Promotion, Environmental Health or Health Services Research. The Faculty also jointly teaches the MSc Public Health in Developing Countries and MSc Control of Infectious Disease (with the Faculties of Infectious and Tropical Diseases and Epidemiology and Population Health), and MSc Health Policy, Planning and Financing (jointly with the London School of Economics). Master's courses are organized in a modular format across the whole School. One of the growing areas of Faculty teaching is distance-based learning, with MScs in Public Health and Global Health Policy. In 2017/18, over 230 students were registered for our face-to-face Masters programmes and nearly 1600 students were registered for distance learning MScs.

The Faculty has also reorganized and expanded its research degree (MPhil/PhD; DrPH) training. Currently there are about 108 students and 23 staff members registered for a research degree.

Department of Global Health and Development (GHD)

The department conducts novel and policy-relevant research and training that concerns health issues with a global reach, predominantly from the perspective of low- and middle-income country development. There are approximately 100 staff and 80 research degree students, with total grants funding of over £30m spread over a range of funders including research councils, UK and overseas charities, the European Union, Department for International Development and others. Academic Staff come from a wide range of disciplines including; economics, epidemiology, mathematics, law, politics, social policy and policy analysis, sociology and anthropology and are grouped into two units and a number of thematic research groups. The post advertised would support staff within one or more of these research groups and would work as one of a team of project coordinators in the department.

The portfolio of duties outlined below will vary in accordance with the academic expectations of the role, which may be varied from time to time, and agreed at your annual Performance and Development Review (PDR).

Job Description

Main Activities and Responsibilities

Knowledge Generation

1. To undertake high quality research & scholarship, including contributing to drafting major grant proposals and/or leading on drafting small grant proposals, and evaluating teaching practice;
2. To contribute to peer-reviewed publications and other outputs, including as lead author;
3. To make a contribution to doctoral student supervision, as appropriate to qualifications and experience;
4. To manage small grants or elements of larger grants, ensuring compliance with good practice in relation to the conduct of research, the ethics policy and other relevant LSHTM policies.
5. Lead the analyses of household surveys in Enugu and Kano states and in Malawi, to explore user experiences of rent seeking, impact on their health care behaviour, their preferences and the perception of actors involved. This will involve the following:
 - a) Work with country teams, to support analysis, write up or finalization of papers,
 - b) Provide novel ideas for analysis, in consultation with the broader team, and conduct the analysis and write up and submit journal papers;
 - c) Identify areas for cross-country analysis and work with respective team members to deliver these
6. Develop analyses and papers based on the multicountry datasets including health, socio-economic and broader political and governance-related variables (e.g. exploring the associations between levels of corruption and socio-political variables).
7. Write papers for publications in high-impact peer-reviewed journals (supported by the LSHTM team). Most papers will draw on the surveys, with some drawing on multicountry analyses. The postholder will contribute also to other papers and outputs by other partners as the project concludes (e.g. methodological).
8. Present the findings at academic and policy-related fora and lead or contribute to dissemination, as appropriate (e.g. events linked to the Lancet Global Health commission on anti-corruption in health).

Education

1. To contribute to the delivery of high quality, inclusive, research-informed teaching and assessment in relation to your specific subject and within the broader area covered by your department and disciplinary field;

2. To contribute to the improvement of the quality of LSHTM's education, by participating in the development of new and updated learning and teaching materials or approaches.
3. To contribute to capacity building of partners, and specifically leading capacity development in quantitative methods

Internal Contribution

1. To undertake activities that support the Department, Faculty, MRC Unit or LSHTM;
2. To reflect LSHTM's EDI goals in your work and behaviour;
3. To participate in LSHTM's PDR process.

External Contribution

1. To demonstrate good external citizenship by contributing to learned society/conference events, journal and grant reviews etc;
2. To contribute and advise on technical issues, present at global health fora to disseminate study findings, as appropriate (e.g. events linked to the Lancet Global Health commission on anti-corruption in health, WHO GNACTA etc.)
3. Disseminate papers/ findings to global audiences via LinkedIn, Bluesky etc.

Professional Development and Training

1. To keep up to date with the latest research/thinking in your academic field and with changes to pedagogic practice within LSHTM and more generally;
2. Where the length and nature of the position permits, to apply for and, if accepted, undertake a doctoral degree (if not already acquired);
3. To undertake and successfully complete the mandatory training required by LSHTM as appropriate to the role.

General

All academic staff are free within the law to question and test received wisdom, and put forward new ideas and controversial or unpopular opinions, to enable LSHTM to engage in research and promote learning to the highest possible standards.

All staff at LSHTM are also expected to:

1. Act at all times in LSHTM's best interests;
2. Treat staff, students and visitors with courtesy and respect at all times;
3. Comply fully with LSHTM policies, procedures and administrative processes relevant to the role, including when acting as Principal Investigator, accepting academic, managerial, financing and ethical responsibility for a project
4. Uphold and support LSHTM's values (as set out in the LSHTM Strategy);
5. Act as ambassadors for LSHTM when hosting visitors or attending external events.

RESEARCH FELLOW



Academic Expectations

All academic roles have a statement of academic expectations attached to each level. Please ensure that these have been read and understood. For further information please refer to the [Academic Expectations page](#).

The above list of duties is not exclusive or exhaustive and the role holder will be required to undertake such tasks as may reasonably be expected within the scope and grading of the role.

Role descriptions should be regularly reviewed to ensure they are an accurate representation of the role.

Person Specification

This form lists the essential and desirable requirements needed by the post holder to be able to perform the job effectively.

Applicants will be shortlisted solely on the extent to which they meet these requirements.

Essential criteria:

1. A postgraduate degree, ideally a doctoral degree, in a relevant topic.
- public health, health economics, statistics for health or other relevant subject with evidence of training in applied quantitative analysis;
2. Hands on experience in analysis and writing up findings from household surveys including – comparative (across small number of countries) and also using multi-country (global) datasets.
3. Ability to take the initiative in terms of identifying new datasets, identifying novel approaches to analysis, writing papers, and producing other relevant outputs such as policy briefs (content).
4. Contributions to written output, preferably peer-reviewed, as expected by the subject area/discipline in terms of types and volume of outputs.
5. Proven ability to work independently, as well as collaboratively as part of a research team, and proven ability to meet research deadlines.
6. Evidence of excellent interpersonal skills, including the ability to communicate effectively both orally and in writing
7. Evidence of good organizational skills, including effective time management.

Desirable Criteria

1. Some experience of contributing to research grant applications.
2. Some experience of teaching and assessment.
3. Some experience of supervising and supporting junior researchers and/or research degree students, and non-academic staff.
4. Some experience of working across disciplines or interest to do so (e.g. working with datasets with political variables and linking to health and health care indicators). Ability to draw upon qualitative data when interpreting the results.
5. Willingness and commitment to support and build the technical capacity of partners (especially junior researchers) – specifically to enhance their ability to conduct analysis and publish.

Salary and Conditions of Appointment

The post is part-time 17.5 hours per week, 0.5 FTE and fixed term until 31 December 2025. The post is funded by the Accountability in Action of Medical Research Council and is available from 01 August 2025.

The salary will be on the LSHTM salary scale, Grade 6 in the range £45,097 - £51,156 per annum pro rata (inclusive of London Weighting). The post will be subject to the LSHTM terms and conditions of service.

Annual leave entitlement is 30 working days per year, pro rata for part time staff. In addition to this there are discretionary "Wellbeing Days". Membership of the Pension Scheme is available. The post is based in London at LSHTM.

LSHTM has a Hybrid Working Framework, which alongside agreed service requirements, enables teams to work more flexibly (if the role allows), promoting a greater wellbeing and work/life balance.

Application Process

Applications should be made on-line via our [jobs website](#). Applications should also include the names and email contacts of 2 referees who can be contacted immediately if appointed. Online applications will be accepted by the automated system until 10pm of the closing date. We regret that late applications cannot be accepted. Any queries regarding the application process may be addressed to jobs@lshtm.ac.uk.

The supporting statement section should set out how your qualifications, experience and training meet each of the selection criteria. Please provide one or more paragraphs addressing each criterion. The supporting statement is an essential part of the selection process and thus a failure to provide this information will mean that the application will not be considered. An answer to any of the criteria such as "Please see attached CV", "Yes" or "No" will not be considered acceptable and will not be scored.

Please note that if you are shortlisted and are unable to attend on the interview date it may not be possible to offer you an alternative date.

Asylum and Immigration Statement

LSHTM will comply with current UKVI legislation, which requires all employees to provide documentary evidence of their legal right to work in this country prior to commencing employment. Candidates will be required to email a copy of their passport (and visa if applicable) to HR prior to their interview and if appointed will be asked to bring the original documents in to be copied and verified before their start date.

This role does not meet the minimum job classification, salary or qualification requirements set by UKVI to enable sponsorship under the skilled worker route. Therefore, we cannot progress applications from candidates who require sponsorship to work in the UK.

Date amended: Jan 2024