



Research Staff of the Year – Faculty of Biology, Medicine and Health

Name: Dr Liz Camacho

Position: Senior Research Fellow

Research area: Health Economics

I have worked at UoM since 2008 when I started working as a project assistant in what is now known as the Centre for Epidemiology Versus Arthritis. In my time at UoM I have moved around a number of departments, completing a PhD in Epidemiology along the way, and 9 years ago I settled down in the Manchester Centre for Health Economics. I really enjoy doing hands-on research and have had the opportunity to work with some fantastic research teams over the years. My main research interests broadly fall under mental health and women's health. I have worked on research projects across a wide range of topics and I enjoy learning about new disease areas.

In your own words, please describe your outstanding research whether that be an output, impact, contribution to the environment:

One of my key research areas relates to stillbirths. I have worked on projects in England, and internationally, that are trying to prevent stillbirths and improve care for parents. In the last year I was a co-applicant for a £7m, 5-year, 'NIHR Global Health Research Unit', for which I am leading the vital health economics component. The aim of the Research Unit is to reduce stillbirths and improve maternity care in low and middle-income countries (LMICs) (Malawi, Tanzania, Kenya, Uganda, India, and Pakistan). It is therefore well-aligned to the University's goal of conducting high-impact, socially responsible research in response to a global challenge (the WHO has a goal to halve the number of stillbirths globally between 2014 and 2030). As part of my work on the Research Unit (and the preceding 2-year Research Group) I have worked with project partners to build much-needed capacity in health economics methods in LMICs.

What motivated you to do this?

For families experiencing a stillbirth it is a devastating experience that can have impacts across all facets of their lives, far into the future. I have learnt so much from collaborating with, and listening to, people with lived experience of baby loss in the UK and internationally. In some LMIC settings there is great stigma attached to having a stillbirth, with some mothers being socially ostracised afterwards. In England the stillbirth rate is higher among mothers from minority ethnic groups compared to white mothers. I am motivated by the thought that through my research I may be able to contribute to positive change, by producing evidence that could lead to fewer stillbirths and towards fair and respectful maternity care for everyone.

What are you planning to do next?

In addition to my work in LMICs, I am working with NHS England to evaluate their 'Saving Babies Lives' care bundle. The care bundle aims to improve maternity care and reduce stillbirths and neonatal deaths in England by defining standards of care. The findings from this evaluation will inform future iterations of the care bundle. I find it rewarding to do research that will have a direct impact upon health policy and the care that people receive in the NHS. Going forward I hope to continue doing research that makes a difference. It is also important to me to nurture the next generation of researchers who are trying to build their careers in an uncertain and difficult to navigate landscape. I will continue to support other researchers through mentoring and in any other capacity that I can, including raising awareness of issues faced by research staff.