

First Latin American Conference on Research and Innovation for Health

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Working Group:

Financing for Research for Health

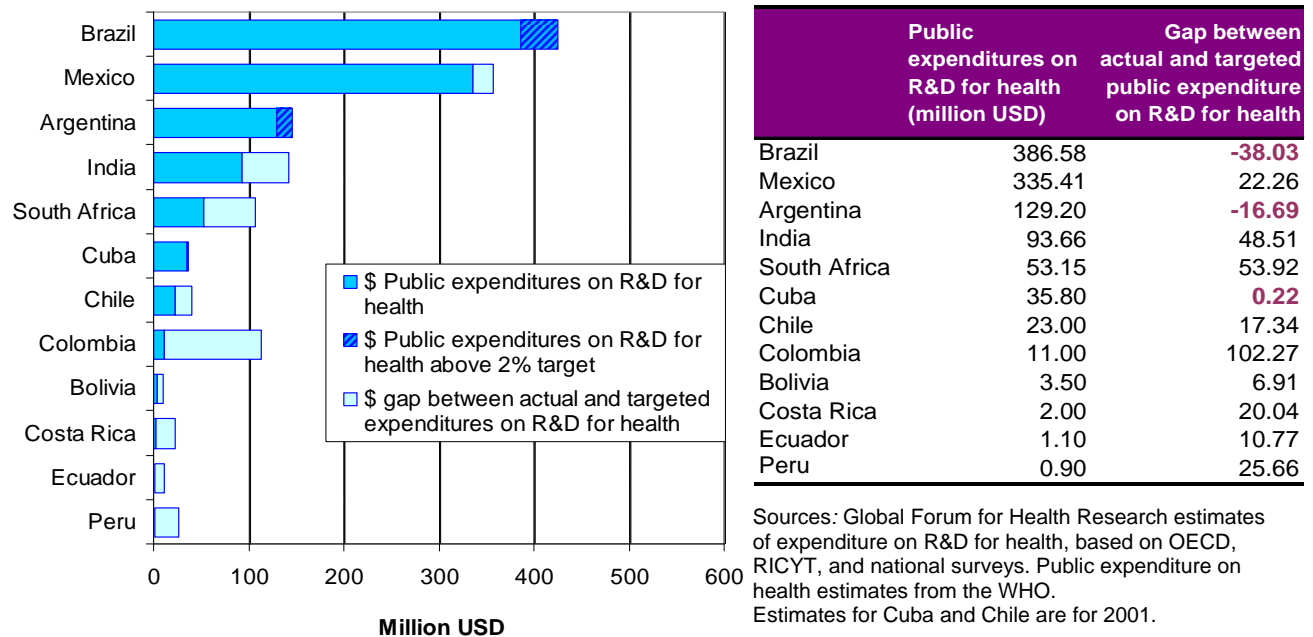
Introduction

1. There has been an increasing involvement of global actors in international efforts to achieve the Millennium Development Goals (MDGs), a greater awareness of the crucial role of R&D for health¹ activities in this pursuit, and a concomitant increase in the global flow of financial resource towards certain areas of health research. However, it is difficult to assess to what extent these are improving global health equity and outcomes (including reaching the most vulnerable populations rather than just improving average indicators of population health) and whether enough research is being conducted and applied to support the achievement of the MDGs by the 2015 deadline.
2. More R&D investment is needed for drugs, vaccines and diagnostics for a range of 'neglected diseases' that predominantly affect vulnerable populations and where there has been a market failure. But many other kinds of research are also relevant to health - and especially the health of the most disadvantaged people - including research on economic, environmental, social and political determinants and covering a wide range of sectors such as agriculture, employment, energy, food, human rights, trade, transport and water. Investments in research in these areas is generally funded and conducted outside the health sector and hitherto little, if any, systematic effort has been made to gather, collate and assess information on these activities in relation to improving health equity.
3. Research is thus needed to assess whether the overall available resources are enough and whether these are being applied to priority research agendas that have been identified through systematic and inclusive priority-setting exercises. This information is vital if funders and policy-makers are to take evidence-based decisions about the optimal use of these resources for R&D to address the health and health equity needs of low- and middle-income countries. Moreover, funding structures (eg. degree of centralization, etc.) and mechanisms (eg. research proposals evaluated not only on scientific merit but also on their relevance and importance, stability of sources of funds, etc.) need to be analyzed in order to provide insights on the most adequate environment necessary to sustain an effective, equitable and sustainable health research system.

¹ R&D for health encompasses all R&D work that takes place in the field of medical and natural sciences, as well as studies on Health Economics, Sociology, KAP (knowledge, attitude and practice) related with programmes and interventions applied to health. Therefore, R&D for health also includes works that aims at developing new applications to improve the health of groups and individuals, even if it does not strictly link to areas of knowledge traditionally related to health. (Vianna CMM et al., *Flows of Financial Resources for Health Research and Development in Brazil 2000-2002*. Brasilia, 2006.)

4. In 1990, the Commission on Health Research for Development² estimated that only about 5% of the world's resources for health research (which totalled US\$ 30 billion in 1986) were being applied to the health problems of developing countries, where 93% of the world's burden of 'preventable mortality' occurred. Some years later, the term '10/90 gap' was coined to capture this major imbalance between the magnitude of the problem and the resources devoted to addressing it. In 1998, the Global Forum for Health Research was established with a mission to help close the gap by focusing more of the world's attention and resources on the health needs of the poor. The Global Forum has noted³ a rise of more than four-fold in cash terms (nearly three-fold in constant USD terms) in total global expenditures on R&D for health over a period of two decades. Despite the overall increase, many areas of research to address major health problems of the most vulnerable populations remain severely under-funded.
5. As a general reference, the Commission on Health Research for Development and the World Health Organization recommend that all countries invest at least 2% of public health expenditures in research. In 2003, only three low- and middle-income countries had implemented this recommendation: Brazil, Argentina and to some extent Cuba⁴.

Figure and table: Gap between actual and 2% target for public expenditure on research for health, 2003 estimates for selected LMICs



² Commission on Health Research for Development. *Health Research: Essential Link to Equity in Development*. Oxford University Press, New York, 1990.

³ De Francisco A and Matlin SA (eds), *Monitoring Financial Flows for Health Research 2006: The changing landscape of health research for development*. Global Forum for Health Research, Geneva, 2006.

⁴ For Cuba, only data until 2001 are available on <http://www.ricyt.edu.ar/interior/interior.asp?Nivel1=1&Nivel2=2&Idioma=ENG>

6. The most productive countries of Latin America and the Caribbean in terms of scientific publications in health with international distribution (ISI and MEDLINE) are: Brazil, which publishes 46% (out of a total of 27,791 publications during 1999-2000); followed by Argentina, 18%; Mexico, 17%; and Chile, 7%. The institutional sectors that mainly participated in the production of health papers are the university (70%), the health sector (23%) and general administrations (11%). National research councils and related institutes participated in only 6% of published research⁵.
7. At country and regional level, there has been a lack of consistent definitions and a lack of resources to mount a long-term, sustained effort to collect data on expenditures on R&D for health in Latin America. Most LMICs cannot count on sufficient resources for the analysis of their own funding for research for health. Such information is essential to guide discussions on funding strategies. An efficient tracking system could point to successes and failures and assist in developing the dialogue essential to achievement of the MDGs, and more broadly to improvement in country, regional and global health equity and outcomes.

Objectives:

1. To produce a set of recommendations and a plan of actions to:
 - ▶ Improve the financing processes of research for health (R4H) in countries, so that the decision-making and governance processes related to financing reflect priorities focused on health needs of the most vulnerable populations;
 - ▶ Improve the availability and collection of data on resources for R4H in Latin America, taking into consideration research for health activities from both within and outside the health sector.
2. To identify innovative strategies to better finance health research systems and research priorities at both national and regional level.

Questions for discussion:

1. National funds (universities, national research councils and institutes, ministries, companies)
 - ▶ Are national investments in R4H focused on priority research agendas?
 - ▶ What kinds of interactions are required to maximize coherence and coordination among actors, so that funding for R4H addresses the needs of most vulnerable populations?

⁵ Fernández MT, Sancho R, Morillo F, De Filippo D, Gómez I. *Análisis de la producción científica en Ciencias de la Salud de los países de América Latina y el Caribe. Período 1999-2000*. Informe RICYT-CSIC, Madrid. Presentado a la Reunión de Coordinación de Bibliotecas Virtuales de Salud (BVS). Puebla. México, 2003.
<http://www.ricyt.edu.ar/interior/interior.asp?Nivel1=4&Nivel2=1&Idioma=ENG>

- ▶ How accessible are these funds and to what type of researchers? Is there an open competition or are funds accessed by a few only? Are there barriers?
- ▶ Do they help create and sustain human resources for research?
- ▶ Do they cover research overheads and infrastructure development?

2. International (global/regional) funds (multilateral and bilateral donors, foundations, councils of global health, companies)

- ▶ Are international investments in R4H focused on priority research agendas?
- ▶ How accessible are these funds and to what type of researchers? Are there barriers?
- ▶ Do they help create and sustain human resources for research?
- ▶ Do they cover research overheads and infrastructure development?

3. Innovative strategies to fund national health research systems and research priorities

- ▶ How can long term funding be ensured for key projects? Should private and public sectors and the interactions between both be taken into consideration?

4. Data availability and collection

- ▶ Are data on resources for R4H available? Where? What set of data is missing (e.g. research on social determinants of health, etc.)
- ▶ What types of research are being funded (e.g. related to conditions, determinants diseases, health and well-being, policies, populations, systems) and what types of research should receive more funds?
- ▶ What type of classification is used? Does it include well defined line items for research on economic, environmental, social and political determinants and a wide range of sectors? Who defines the classification? Is civil society and the private sector represented in the process?
- ▶ Would a standard classification that is internationally accepted be helpful in identifying the kind of data that is needed to inform policy decision?

5. The way forward

- ▶ What are the next steps required to improve the financing processes of R4H in countries, so that the decision-making and governance processes related to financing reflect priorities focused on health needs of the most vulnerable populations?
- ▶ What are the innovative strategies to better finance national health research systems and research priorities at both national and regional level?
- ▶ What are the next steps required to improve the availability and collection of data on resources for R4H in Latin America - taking into consideration research for health activities from both within and outside the health sector, encompassing disease specific research and research on conditions that both create health and those that are at the root of ill-health?