

EXECUTIVE SUMMARY

2nd Latin-American Conference on Research and Innovation for Health

Panama, 23-25 November 2011



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Acknowledgements

This technical report gathers together the contributions made by speakers and attendees at the 2nd Latin-American Conference on 'Research and Innovation for Health', held in Panama City, Panama, 23- 25 November 2011. The Conference was coordinated by the National Science, Technology and Innovation Secretariat of Panama, the Council on Health Research for Development (COHRED), the Ministries of Health for Panama and Brazil, the Gorgas Memorial Institute in Panama and the Pan American Health Organisation/World Health Organisation (PAHO/WHO). Financial support to the Conference was provided by COHRED with the aid of funding from the World Bank, the National Secretariat for Science, Technology and Innovation of Panama and Brazil's Ministry of Health.

A special thank you goes to all the participants, speakers and presenters for their contributions and participation.

Key Words

National Health Research Systems, Research and Innovation for Health, Human Resources for Health Research, Financing for Health Research, Knowledge Transfer and Translation, Latin America.

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Opening was made by First Lady of the Republic of Panama, Mrs Martinelli, with her, PAHO Representative in Panama, the Minister of Health of Panama, the National Secretary for Science, Technology and Innovation of Panama, and a Representative of COHRED

1 Background

At the 1st Latin American Conference on Research and Innovation for Health, held in Rio de Janeiro, Brazil in April 2008, participants highlighted the progress achieved in national research for health systems in the region and the importance of initiating action to strengthen them. Among the contributions constituting an important precedent for this 2nd Conference was the need for technical cooperation among countries in the region. It was also argued that it was necessary to organise such fora in other countries in the region and that in doing so there should be some continuity in terms of the issues that are discussed and the actions that are agreed upon. As such, one of the agreements from the conference in Rio de Janeiro was the organisation of the 2nd Latin American Conference on Research and Innovation for Health. It was suggested that this second conference would convene as many participants as possible and seek to follow up on the actions from the first conference. It is also in this regard that representatives from the Latin American and Caribbean region participated in a follow-up review meeting to the 1st Conference, this meeting was held as part of the Global Forum for Health Research 2009, which took place in Cuba in November 2009.

Aims, objectives and outputs of the 2nd Latin America Conference on 'Research and Innovation for Health'

The 2nd Latin American Conference on 'Research and Innovation for Health' focused its attention on three fundamental themes: a) mechanisms linking innovation to health policy, b) mechanisms for funding innovation and research, and c) international cooperation as a means to strengthen innovation and research for health.

The meeting took place in Panama City, Panama, from the 23rd to the 25th of November 2011 and it brought together approximately 100 professionals from institutions and strategic programmes on research for health, science and technology. It was attended by representatives from agencies, institutions and international cooperation organs, networks and regional, national and global research organisations, including some non-governmental organisations. Attendance by representatives from the European based agencies and institutions WHO, the Council of Ministers of Central America and Dominican Republic (COMISCA) and the Spanish Agency for International Development Cooperation, Spain (AECID), among others, offered the participants an opportunity to collectively explore the current status of national research systems and the future challenges. This sense of diversity and plurality to the Conference is in line with COHRED's vision of building partnerships and supporting the efforts of researchers and

policy makers to strengthen research and innovation in low and middle-income countries (LMICs).

The conference produced a series of presentations and reports through which the presenters and discussants highlighted the context of research and innovation for health in low and middle-income countries (LMICs) in the Latin American region and the related initiatives that are being set-up to kick-start work in this area. They emphasised the achievements in the institutionalisation of research for health, the incorporation of different players in prioritising research needs and in creating public financial funding to support these activities. These reports also describe the difficulties that are still faced by local research systems in their attempts to meet research needs and the training of young researchers to generate stimuli for innovation and for research for health. They also draw attention to the still emerging recognition that society gives to the activities of the researcher.

The central focus of the conference was devoted to deepening the concept of innovation for health, whilst linking it to the generation of new solutions to health problems, including not only tangible products, but also public goods, work processes, organisational behavior and

the behaviour of people that are associated with health services. Innovation creates new products, new results and new services, and it is the simple and low-cost solutions to problems that can be of the most value to society.

The **first thematic axis of the conference refers to the relationship between innovation and policy**. Participants noted that most countries in the region were well placed to broaden the traditional linkages between academia and the private sector - in order to have the required communication that involves academia, business, society and government. In the Latin American region, there are several examples of successful partnerships between the public and the private sectors on how to provide solutions to health problems. In these linkages, it is necessary to solve, for example, the knowledge gaps that the researcher may experience, for instance around issues concerning the administration and the transfer of technology, the shortage of funds and the lack of knowledge about administration and patent registration.

The **second thematic axis called for answers about the successful financing mechanisms in the region**.

The presentations and discussion of participants showed that the set-up of funds from a mixed pool of sources (private, public, donors) has been a common strategy in some countries in the region although some have only just recently begun to undertake their implementation. Participants noted that while this approach has been found to increase financial resources, these are still insufficient. In addition, the impact of the work done through the proposals that have benefitted from these funds is unknown. The research community was urged to undertake studies evaluating the effectiveness of these funds and on how we should raise the capacity to manage resources for research and innovation.

In the **third central thematic axis, questions were identified about international cooperation and its attention to local research priorities**. With regard to this point, the participants felt that there are few experiences of regional cooperation, which they considered to be an essential resource for strengthening innovation for research for health. It is important that international cooperation is aligned to the needs of the country and the region. Latin American countries have not fully explored the possibilities of opening up South-South technical cooperation. The procedure of calling for international funding should take as it's point of departure the context of the global health challenges and crucially, the analysis of how these are manifested in our countries and the kind of responses that are required at the local level. This would increase the chances of obtaining funding resources for the countries of the region.

The existing cooperation entities, such as the Council of Ministers of Central America and Dominican Republic (COMISCA), the Mesoamerican Public Health System, among others, should be well utilised to provide greater visibility for research efforts in the country and the region. Academia should undertake a thorough process of promoting and communicating their achievements to the decision makers from different policy administration systems and the general population. It is necessary for society to value, in its broadest conception, the researcher's work and the valuable contributions that the research offers to society.

Crucially, this conference featured discussions on the resources required to support research and innovation for health such as researchers' networks and the online platform Health Research Web (HRWeb), designed and operated by COHRED. This site compiles information on: research and innovation projects, reviews and evaluations of proposals, funding sources, governance structures and the key institutions of the countries. It is the first information system that offers an integral and complete vision of the research for health systems linked to policies, resources, and institutional frameworks. The process of feeding data into the system is participatory and interactive.



Participants at the opening of the conference

Finally, discussions were also held on the creation of the Latin American Association of Global Health (ALASAG). This is a valuable resource for promoting regional cooperation with the vision of projecting the development of research and innovation so as to address the health challenges in the region. In addition, the Iberoamerican Ministerial Network for Health Education and Research (RIMAIS) has defined the education and training of professionals in the field of research, as its strategic area. Its main activities have been the training in administration of national research for health systems, the integrated analysis of these systems, the compilation of regulations on ethics, and the elaboration of a system of indicators for research for health.

As is elaborated on below, in the sections on key messages and recommendations, the future challenge for COHRED and for the participants convened at the last two Latin American conferences is to strengthen the ongoing work in order to sustain the cooperation activities that are aimed at: a) strengthening the link between research and innovation with health policies, b) integrating training programs for young researchers, and c) increasing the capacity for managing the financial resources of the institutions and researchers in the region.

2. Main messages from the conference



The 2nd Latin America Conference on 'Research and Innovation for Health' brought together practitioners that are highly committed to the development, management and administration of research – including those that practice in the area of science and technology. Below is a summary of the main messages from the participants in attendance:

i. Innovation in our countries must be simple and inexpensive

The term innovation in research for health in LMICs points to research that provides original findings to solve problems that represent a heavy social and economic burden on health systems. The 'innovative' aspects of this research, is not necessarily about making a high profile contribution, but rather simple proposals that can be used to solve complex problems for the benefit of a large section of the population.

ii. Health Research and research for health are different concepts

It is necessary to differentiate between the concepts of health research and research for health. They are two concepts with different meanings: the first carries a biomedical connotation and the second refers to research that is conducted in any area or sector - with its results being used to solve health problems. (Bamako, 2008)

iii. Strengthening innovation requires a tripartite alliance - academic, business and government

Research and innovation open up an area for meetings and dialogue between academia, government and business. Traditionally, this alliance has been restricted to only business and academia. However, it is necessary to start incorporating government. Civil society organisations have not, until now, been considered in this alliance and it would be advisable if they were, since it is the local society that can contribute to the assessment of relevance when applying the results of innovation and research for health.

iv. Increased resources for research funding are still pending

In the past decade, some countries have strengthened strategic research areas and allocated resources to this activity, but it continues to be insufficient. The optimal allocation of adequate financial resources for research funding remains an unresolved issue and the countries of the region still fail to exercise the 2% of health expenditure, as stated in international guidelines.



v. Linking research for health and health care

We are at the right time to establish mechanisms to help coordinate and link health policies with research for health agendas, framed on regional and global policies in research for health.

vi. Linking research for health to health priorities

Prioritising research for health must be closely coordinated with local health priorities and the health ministries are those who should lead it, summoning the professional groups from the health system, academia, business, society, users, managers and representatives of various social and economic sectors.

vii. Strengthening South-South technical cooperation

It is necessary to foster cooperation among low and middle-income countries. We are at the best time to join forces and resources between countries in Asia, Africa and Latin America, and undertake innovative initiatives to help solve common health problems. International cooperation, specifically regional cooperation, represents a valuable resource to strengthen the financial administration capacity of academia and government, especially when they are adapted to local and regional needs.

viii. Promote the training of young researchers

The training of young researchers is an area that demands special attention in countries of the region. It is also a field that could constitute a regional programme in countries that now have formalised and stable research systems and they could design programmes and mechanisms to undertake a process of collaboration with countries that have initiated the formation of a professional research community. The promotion of scholarships in postgraduate programmes, visits or stays for a determined time could help to undertake research and development initiatives.

ix. Multi-disciplinarity and multi-sectorality in the administration of health innovation and research

Health today represents a field that is not unique to medical schools or health ministries. Due to the size of many health problems that are determined by lifestyle, social and environmental factors, and social development, it is necessary to undertake scientific and technological administration in a multidisciplinary and multi-sectoral conception. The contribution of social sciences, political science, economics, education, environmental engineering, veterinary medicine, among others, is fundamental to achieving an integrated and comprehensive approach to health problems.

3. Recommendations

During the wrap-up sessions to the Conference the various working groups and task teams had an opportunity to discuss some of the main key issues, messages and recommendations that they had picked up from their deliberations in the past two days. Below are some of the main recommendations from these conclusive discussions.

i. Creativity in science versus attention to priorities

It was argued that if researchers are to meet the priorities of society, a question that has to be asked is whether this would affect their essential role as free, autonomous agents that are providing creative and original ideas. If one looks at the history of science, it is evident that a lot of research stems from the researcher's originality, drive and creativity. The scientific community fears that establishing priorities could stifle researchers' initiative. As such, there is a need to create mechanisms to provide flexibility in the linkages between researchers, research priorities and societal priorities.



Dr Francisco Songane chairing the Ministers' session. Dr Ruben Berrocal, Sc&T Panama; Dr Daisy Corrales, MOH Costa Rica; Dr Franklin Vergara, MOH Panama

ii. Strengthening research is essential in health

It was also made clear at this conference that the creation of public funds and the development and adoption of global and regional policies have contributed to strengthening research for health. What is still pending is the implementation of these policies in order to achieve larger coordination and communication between the institutions and agencies that are responsible for managing funds for science and technology. The ultimate goal should be to allocate these resources in a fair and appropriate manner in line with the various sectors that are conducting research. It was also noted that the technical management of research resources should take into account political considerations - in order to establish mechanisms for persuading, negotiating and pressuring (by generating evidence) policymakers and authorities at the national level.

iii. Local governments' budgets must accommodate research for health disciplines

Participants noted that in many countries in the region, the allocation of funding provides for traditional health science disciplines, such as basic and clinical research, and not for public health, health-related social science or technological development. The latter is attributed more to private companies or to ministries of finance or economics. This fragmentation of funding resources makes official calls for proposals difficult. As such, local governments were called upon to accommodate research for health disciplines in their budgetary allocations.

iv. A dichotomy in health and research for health agendas

Researchers that have the applicable results for health policies or programmes are not adequately appreciated. It is necessary to define indicators for innovation for health in order to evaluate the performance of researchers engaged in research that is based on their own personal agendas against those agendas that are focused on solving priority challenges in society. The evaluation criteria for professionals in science and technology councils should be flexible given that at times, professionals are penalised for not publishing enough and yet they may have used that time to develop a clinical trial or to advise the Ministry of Health.

v. Research for herbal medicine, traditional medicine and indigenous health needs to be developed

This is a field with great potential for the region and can be an area of regional cooperation among researchers; there are breakthroughs that could represent fields of study for production and marketing. This is an area that need to be developed.

vi. The science and technology and health sectors: two different ways of thinking?

The science and technology sector is governed by rules that are different from those of the health sector. Criteria for project selection and researchers' evaluation are different to those of the health sector whose agenda is aimed at solving priority health problems. Having said that, the recommendation being made here is that science and technology research should be directed to produce and expand the frontiers of knowledge in our countries – including knowledge on health priorities. However, the definition of these health priorities should be led by the Ministry of Health in each country. In addition, management of research agendas for health and science and technology is more complicated in countries, such as Mexico, where health systems are decentralised. Countries in the region have allocated their own funds in order to bring together the various areas of science.

vii. Health: a multidisciplinary and inter-sectoral field

Drawing on the above, it is therefore necessary to highlight the role played by other sectors in research for health and to broaden the concept – of 'research for health' – so that it takes into account other areas and sectors of knowledge. There are other sectors that have a strong impact on health and we therefore need to find ways of building bridges between them and to strengthen the emerging alliances. The health field is not exclusive to health researchers, in some countries and regions, financial and policy making practitioners often make the key decisions concerning the health sector.

viii. International cooperation: South-to-South cooperation

In creating regional funds it is advisable to review the avenues for communication, negotiation of and changes to the rules and regulations that define the set-up of funds. This is of particular relevance in those instances where countries have different management styles and different languages. In addition, in the regional cooperation initiatives, emphasis should be placed on South-South cooperation. The transfer of research results and intellectual property protection, regulatory frameworks and contracts

is a key element in efforts that are aimed at strengthening research and innovation in the health field sector. This is also part of the regional and global policies that countries have agreed to adhere to. Participants also argued that a large number of young researchers do not know these issues and so there is a need to initiate regional training programs on intellectual property. An interesting mechanism for academic exchanges could be through shared learning and peer review between researchers that are starting out in the field and those that are already experienced in the field



Dr Luis Gabriel Cuervo, PAHO, presenting



4. Conclusive remarks and key contributions

Closing session with representatives of supporting partner organisations: Brazil, PAHO, MOH Panama, COHRED; Gorgas Institute, COHRED

A key issue that has been reiterated throughout this Executive Summary is the importance of local systems, resources and capacity in fostering the development of innovation and research for health. One of the major challenges that was identified by the participants concerns the strengthening of regional cooperation and, in particular, South-South cooperation. It is also clear that there is need for more opportunities through which discussions, networking and knowledge exchanges can be conducted on research and innovation for health. At the next conference, focus will be on evaluating the progress made so far in meeting the commitments established at the Conference that was held in Rio de Janeiro in 2008 as well as the commitments from this Conference. In looking ahead at the next Conference it is important to conclude this Executive Summary by highlighting some of the main contributions of the 2nd Latin American Conference on 'Research and Innovation for Health'.

These include:

- The publication of a report for distribution to decision makers of national research for health systems in Latin America and Caribbean countries and to international organisations whose cooperation programmes target this region;
- New ideas to strengthen networking through RIMAIS and between the institutions represented at the Conference;
- The knowledge of new initiatives and policies agreed upon by the countries, which will surely help to expand the vision and actions for cooperation between our countries, such as the recent creation of ALASAG;
- Evidence of significant progress in establishing funds for research funding and the clarification of intent between academia and public policy;
- Evidence of gaps that need to be addressed in the future, such as the official, professionalisation of the tasks of researchers in the health field, the incorporation of young researchers and targeted stimuli for innovative work and research directed towards priorities and health policies, and;
- Development of Health Research Web as a tool for research governance and as a space for collaboration, exchange and policy support - towards programmes and projects of national research for health systems in Latin America and Caribbean.

ACRONYMS

1. **AECID**: Spanish Agency for International Development and Cooperation, Spain
2. **AIP**: Association of Public Interest, Panama
3. **ALASAG**: Latin American Global Health Association
4. **CHSRF**: Canadian Health Services Research Foundation, Canada
5. **COHRED**: Council of Health Research for Development
6. **COMISCA**: Council of Ministers of Health of Central America and Dominican Republic
7. **CONACYT**: National Council of Science and Technology, Mexico
8. **CONICYT**: National Council of Science and Technology, Chile
9. **CYTED**: Program Latin American Science and Technology, Spain
10. **DECYT**: Department of Science and Technology (Ministry of Health, Brazil)
11. **EMR**: Electronic Medical Record
12. **FITS**: Technological Innovation Fund, Argentina
13. **FOCEM**: Fund the Mercosur Structural Convergence
14. **GHEC**: Global Health Education Consortium
15. **GIS**: Geographic Information System / Geographical Information System
16. **HRWeb**: Health Research Web / Website Health Research
17. **R&D**: Research and Development
18. **ICTRP**: International Clinical Trials Platform Registry, WHO / WHO
19. **INDICASAT**: Institute for Science and High Technology Services in Panama
20. **INSP**: National Institute of Public Health, Mexico
21. **ISSSTE**: Institute of Security and Social Services for State Workers, Mexico
22. **LIMS**: Laboratory Information Management System
23. **MINSAL**: Ministry of Health, Chile
24. **MDGs**: Millennium Development Goals
25. **PAHO / WHO**: Pan American Health Organisation / World Health Organisation
26. **PAS-S**: Action Plan for Health Sector, Spain
27. **PRONASA**: National Health Program, Mexico
28. **PRONII**: National Program Incentives to Researchers, Paraguay
29. **PROSPERO**: International Prospective Register of Systematic Reviews
30. **RIMAIS**: Ibero-American Ministerial Network on Learning and Health Research
31. **SENACYT**: National Secretariat for Science, Technology and Innovation, Panama
32. **SSI**: Sustainable Sciences Institute, USA
33. **ITS**: Health System, Brazil
34. **ICT**: Information and Communication Technologies
35. **EU**: European Union