## When the poor need food, who needs research?

# How Essential National Health Research can lead to better health, greater equity





"Known World 200 BC"

"Known World 2000 AD?"

'Global Science is directed by the rich countries and the rich-country markets, even to the extent of mobilising much of the scientific potential of the poorer countries'

Jeffrey Sachs, The Economist, August 14 1999

## The Council on Health Research for Development

September 1999

## Health research can make a real difference to people's health

- We don't need research to tell us that health will improve if there are fewer wars, less corruption, fair distribution of food, economic growth and better health care
- After all, the health status of people in many countries is good, despite the limitations of existing knowledge
- It's pretty obvious that poverty leads to poor health
- Health research can also use up limited country resources without visible benefit to anyone but researchers
- So who needs health research to reduce illness and promote health and development?

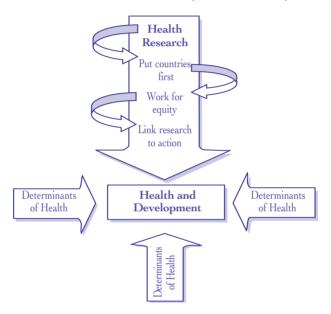
Research *can* play a powerful part in solving the present and future health problems of countries by:

- Discovering new ways to prevent and treat some of the biggest diseases facing us, including AIDS, malaria and tuberculosis
- Making effective, yet expensive health interventions simpler and more affordable
- Pointing to wastage and ineffective actions
- Showing how health systems can be improved, using existing resources and knowledge
- Identifying specific actions within other sectors, like education and agriculture, that can contribute to improving health

## Three major features of effective health research

We can identify *three major features* of health research that can help make it effective:

- Put the priorities of your country first
- Design and implement a research strategy that works for equity in health
- Make research an active part of development



From a public point of view, health research is only *effective* if it expands knowledge about how to improve health - and if that knowledge is used. Some research addresses existing problems directly, and needs to be timely and responsive in order to be effective. Much of the work done on problems specific to individual countries falls into this category. Other effective health research does not solve health problems immediately, such as longer-term work being done to eradicate global diseases. Yet all effective research moves us - as efficiently as possible - towards the goal of better health.

Effective health research is high quality research, scientifically sound and diligently conducted. But

even good quality research often fails to meet its potential to improve health. This problem vexes researchers, investors and policy makers across the world - and the answer is certainly not clear-cut.

#### **Put countries first**

Only about 10% of global spending on health research tries to solve the main health problems of the poor, Common problems in less developed countries, like tuberculosis and malaria, receive relatively little attention. Research and development of pharmaceuticals, for example, is largely driven by market demand - those who have the ability to pav. Even within countries that have a disproportionately high burden of disease, the national research effort may not be directed at pressing problems - driven instead by the curiosity of researchers, the profit motives of the private sector. or the particular agendas of donor agencies. A starting point is for countries to review their own health problems, assess information gaps and existing research efforts, and develop a national agenda in response. This process aims to identify immediate, emerging and future health priorities more clearly, and is a powerful way of shaping public efforts to promote health and development. Countries first need to ensure that their own people derive real benefit from their substantial investments in health research.

#### Breaking out of traditional research moulds

In *Bangladesh*, Essential National Health Research (ENHR) is operating under the umbrella of the Bangladesh Rural Advancement Committee (BRAC), the largest NGO in the country. The research is integrally linked with the service interventions of BRAC, aimed at addressing health priorities such as safe motherhood, child health care, acute respiratory infections and other infectious diseases and nutrition-related diseases. This arrangement has allowed ENHR to be assimilated into major national development strategies, and to tap into existing research networks. There is no intention to set up a separate ENHR mechanism or program.

#### Work for equity in health

On average, people across the world are getting healthier. However poverty remains a major problem and the health problems of the poor persist. In fact, health and income disparities between rich and poor are getting even wider. The spread of HIV infection across Sub-Saharan Africa is a stark example of the effect of a disease most rampant amongst the poor: devastating national economies and rapidly eroding life expectancies. Inequities don't only exist between rich and poor, but also between men, women and children, people of different ethnic origins, and other sub-sectors of the population. Less developed countries that do not work actively for equity will end up reinforcing good health for the few and poor health for many.

Health research can help reduce inequities by identifying and describing health inequalities, and monitoring efforts to reduce these gaps. Clear indicators for the success of public action to reduce inequity can serve as a valuable gauge for health ministries, legislatures, community organisations and advocacy groups - helping to defend and promote basic human rights.

When health researchers work for equity, they accelerate country and global development.

### Essential research in support of health sector reforms

**Ghana**'s research agenda supports health sector reform. The agenda affords a high priority to research activities by district and regional staff of the Ministry of Health. It is intended that sub-national research will concentrate on identified priority areas. The research will be undertaken not by full-time research staff but rather by health service and administrative personnel, selected on their ability and interest, who will conduct practical data collection and analysis activities alongside their managerial and clinical duties. An example is the current project on malaria and health sector reforms, where various aspects of the reforms are being examined in terms of their impact on malaria control in six districts.

## Make research an active part of development

Knowledge creation and sharing has become a major instrument for development and economic arowth, as trade barriers dissolve and new ways of communicating emerge. The driving force behind this new alobal economy is a process of research and development that allows for constant innovation, adaptation and change. Countries both developing and developed - that use new knowledge effectively can make great strides in improving the health of their people. But many researchers are still stuck in modes of research that don't make full use of new opportunities for sharing knowledge, and conventional methods of research management often fail to account for the rapid pace of knowledge development. Country coordinators of health research can put new life into national efforts by stimulating greater interaction amona the different users of research.

## Involving the community in health research leads to change

A recently conducted study on community participation in health research and ENHR in *Guinea* shows that actively involving the community in identifying its own health problems, is of crucial importance to improving health conditions. Asking the community to formulate their own perceptions of the causes of these problems and suggesting solutions to these problems is more likely to result in a change in health status. If the community acts as advocates of their own needs and rights, and researchers, decision makers and service providers then take this into consideration, the chances that research will lead to change increase.

Health ministries can make research a central and dynamic part of policy formulation, planning implementation and evaluating programs. Legislators can commission research to gauge progress and guide decision-making. Advocacy groups may use research to bolster arguments or propose clearer solutions. The media is eager for research that makes a good story, and is often a powerful vehicle for conveying messages and provoking

debate. Those involved in developing better health technologies need constant interaction with researchers. In sum, effective health research is an *active part* of development, not a separate activity in some aloof and hallowed institution!

#### Essential National Health Research (ENHR)

**Essential National Health Research** is a strategy of action for better health, centred on country efforts to achieve equity. Its implementation provides a systematic approach to improving the effectiveness of research, helping advocates for better health to:

- Make health research a valuable tool for decision-making
- Set national and sub-national research priorities
- Broaden the diversity of groups that have a say in setting the national agenda
- Achieve far greater public involvement
- Develop country mechanisms that facilitate effective health research
- Build the capacity of researchers, co-ordinators and users of research
- Expand interaction between researchers and users of research
- Promote communication and networking
- Extend networks with researchers in other countries
- Mobilise resources for research.

#### New commitment to ENHR

Essential National Health Research was recently introduced in the **Central Asian Republics and Kazakhstan (CARK)** region. In a declaration on ENHR the tenet is established that country needs must come first, and that, without solid country developments, no regional structure will be sustainable. The CARK Mother and Child Health Forum, supported by UNICEF, acted as the trigger for ENHR in CARK. This reinforces the point that countries are not expected to be card-carrying members of COHRED before implementing any of the ENHR strategies, and that ENHR is a strategy for health research for *all* countries.

**ENHR** is motivated by a commitment to put countries first, to achieve equity in health and to make health research an active part of development. An important part of the **ENHR** strategy is to enable countries to learn from each other and to share knowledge. Helping to facilitate this exchange and to encourage an international "coalition of learners" is the Council on Health Research for Development (COHRED).

#### **COHRED supports ENHR**

The Council on Health Research for Development (COHRED) works with countries to implement **Essential National Health Research**. COHRED was established in 1993 in response to the need expressed by countries for support in implementing **ENHR**, and in line with the proposals of the Commission on Health Research for Development\*.

#### **How COHRED works**

COHRED presently works with countries in Africa, Asia, the Caribbean, South America, and Eastern Europe.

#### **COHRED:**

 Offers technical support to countries that are implementing ENHR

It works with countries to promote health research as a tool for development, establish research priorities, strengthen mechanisms for research support, and build research and user capacity.

<sup>\*</sup> The Commission on Health Research for Development was an independent international initiative formed in 1987 to find ways of improving the health of people in developing countries. It proposed greater national and international investment in health research as a way of promoting health and development, based on equity. (See Health Research: Essential Link to Equity in Development. Oxford University Press, 1990)

### Works to develop skills and enrich the perspectives of leaders in health research

COHRED facilitates interaction between leaders in health research across countries. In this way, countries share experiences and insights into creating an exciting environment for research - that is firmly focused on the goal of improving health and based on the value of equity.

#### Provides an active forum for sharing experiences about ENHR

Through a range of printed and electronic publications, discussion forums and joint initiatives, COHRED enables researchers, health workers, health ministries, community organisations and others to share experiences and learn from one another. Regional and country-level initiatives aim to share information and ideas as widely as possible.

## Advocates for ENHR among international investors and other agencies

COHRED works together with the World Health Organisation, Global Forum on Health Research and international investors, promoting **Essential National Health Research** as a country-level strategy to improve health.

#### Focusing on priority areas

The Caribbean Health Research Council (CHRC) is assisting Caribbean countries wishing to implement ENHR. As an integral part of its strategic plan the CHRC assists countries and research institutions in the identification of priority health research areas, that have the greatest potential benefit to the people of the Caribbean, and it promotes and supports such research.

#### How to contact COHRED

#### **ENHR Regional Networks and contact people**

#### **Africa**

#### Contact Steve Chandiwana at:

Blair Research Institute

Ministry of Health and Child Welfare

Josiah Tongogara Ave./Mazowe Street

PO Box CY 573

Causeway, Harare

Zimbabwe

Tel: + (263-4) 703 525 Fax:+ (263-4) 870 403

Fmail: chandiwana@blair.co.zw

#### Asia

#### Contact Chitr Sitthi-Amorn at:

The College of Public Health

Chulalongkorn University

Institute Building 3

Soi Chula 62, Phyathai Road

Bangkok 10330

Thailand

Tel: + (66-2) 218 8187/8 Fax:+ (66-2) 255 6046

Email: chitr@md2.md.chula.ac.th

#### **Eastern Europe**

#### Contact Peter Makara at:

National Institute for Health Promotion

Andràssy Street 82

H-1062 Budapest

Hungary

(Note: Peter Makara can temporarily be contacted

through the COHRED Secretariat in Geneva)

#### The Caribbean

#### Contact David Picou at:

The Caribbean Health Research Council, CHRC

20 Schneider Gardens

Petit Valley

Port of Spain

Trinidad & Tobago

Tel: + (1-868) 632 5360 Fax:+ (1-868) 633 0296

Email: chrc.tt@trinidad.net

#### **COHRED Secretariat**

The COHRED Secretariat currently consists of the following people: Yvo Nuyens, M. Jegathesan, Sylvia de Haan, Inger Roger and Beverley Rousset

Contact the Secretariat at:

The Council on Health Research for Development c/o UNDP

Palais des Nations CH-1211 Geneva 10 Switzerland

Tel: + (41-22) 917 8558 Fax:+ (41-22) 917 8015 Email: cohred@cohred.ch

For COHRED publications, and more information, see our website at: http://www.cohred.ch or contact us directly. COHRED's quarterly newsletter *Research into Action* and other publications are also available in printed form on request. We will ensure that all publications are available both electronically and as printed text.

Please feel free to contact us by email, phone, fax or letter.

#### Funders of the Council on Health Research for Development:

Carnegie Corporation of New York (USA), IDRC (Canada), SIDA / SAREC (Sweden), Ministry of Foreign Affairs (The Netherlands), NORAD (Norway), SDC (Switzerland), DANIDA (Denmark), United Nations Development Programme (UNDP).

'Developing countries must build up their own basis for research. Only they will be able to establish the diagnosis and implement the cure. The international community must assist in the process'

Gro Harlem Brundtland, Chair, The World Commission on Environment and Development.

Source: leaflet of the Commission on Health Research for Development, 1990