

Council on Health Research for Development

COHRED ANNUAL REPORT 2009

SUPPORTING NATIONAL HEALTH
RESEARCH SYSTEMS IN LOW
AND MIDDLE INCOME COUNTRIES

Making health research work... *for everyone.*



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Research, Innovation, Systems, Development, and end to Aid ... beyond the buzz

The development field is full of paradoxes. For example, the more statements are made about the detrimental effects of traditional ('structural') aid on development in low income countries, the more intensive become the calls to increase aid – especially in high income countries.

Another example concerns health and health problems in low and middle income countries.

Although the majority of people in these countries suffer and may die from a multitude of conditions, international financial support for service delivery and research is focused on a limited set of conditions: HIV/AIDS, Tuberculosis and Malaria.

Although there are other funding streams in support of 'drugs for neglected diseases', environmental health, maternal health and a few more conditions, the majority of health challenges facing the majority of low and middle income countries' populations remain under-served and under-researched.

And a third paradox concerns the capacity to deal with these problems. While all self-respecting academic institutions in high income countries have a 'global health programme' (read: programme to research diseases in low income countries), only a few in low and middle income countries have such a focus: we can only find one in Africa (at the University of Cape Town) and possibly one in Brazil (at Fiocruz). The massive increase of funding for global health is the reason for this growth in global health units, centres, departments or programmes in the 'north' – yet the problems really occur in the 'south'.

At the same time, in the domains of 'science and technology', 'agriculture', higher education and in the private sector, the relevance of 'research', 'innovation', 'science and technology' to economic growth, poverty reduction, food security and sustainable development is becoming ever more recognised. Across Africa, Latin America and, of course, Asia, governments invest heavily in developing their own science and technology or 'innovation' capacities to underpin medium- to long-term growth and development. Presidents of very poor countries make specific commitments to apportion larger slices of national spending on 'R&D'. Continental bodies urge member states to develop their science sectors. And, the difference in scientific capacities between 'north' and 'south' is blurring.

Clearly, there remain major differences between countries, but the trend is unambiguous: more and more countries want to invest, and actually do invest, in science and technology as part of their own development effort. And here then comes the fourth paradox: the way health research in low income countries is done tends to fragment rather than build national capacity. It may well produce publications and patents and may build competent researchers, but it does not – nor does it try to - leave behind strong institutions, networks, systems, or a culture of demand for research.

Real development is impossible without strong capacities and systems that can identify problems requiring research and to propose appropriate solutions based either on research done elsewhere or conducted locally, if necessary, through commissioning and partnering arrangements. Global research on global problems certainly helps, but it cannot replace strong national capacities and systems for research and innovation that drive not only health improvement but also poverty reduction, equity and development. Countries need environments that encourage research and research uptake and capacities to initiate and support international collaboration that is essential for national innovation. That is where COHRED comes in – we support the building of such systems of research for health, equity and development.

In 2009, we have supported over 20 countries directly – at their request, as we do not have the resources to market our technical support to all countries that could use it. We support African pharmaceutical innovation in particular in partnership with NEPAD and financial support from the Netherlands and Switzerland. Our capacity building services include web-based support for health research system information – Health Research Web – which is becoming the platform of choice for many partners in Africa and Latin America. And we continue to advocate for ‘Responsible Vertical Programming’ (RVP) in research: - to conduct research in such a manner that it not only delivers effective solutions to health problems but also strengthens the ability of countries to chart their own course in science and technology and innovation for health, equity and development.

This year has laid the foundation for a fundamental shift – or ‘scaling up’ – of COHRED’s work in and with countries. We are grateful to our staff, partners, volunteers, and agencies whose continued support makes it possible for us to work, develop and grow. We anticipate a difficult year in 2010 due to the slowly subsiding global financial crises, but we remain committed and ready to face this as yet another challenge and opportunity to support real development.



Carel Ijsselmuiden
Director: COHRED



Cheikh Mbacké
Chair: COHRED Board

Country support

Strengthening national health research systems

Expertise, tools, approaches

COHRED's support to countries is built around its Framework for national health research system ('NHRS') development.

This planning and research management tool guides decision makers through a systematic assessment of their current situation. It helps them develop a picture of future targets for health research and areas where professional capacity needs to be developed to produce meaningful health changes for the country.

A Framework that works for countries

The Framework is a series of linked guides covering critical areas for a national system. These include: assessment of current research capacity, policy development, priority setting, research management, strategies for alignment and harmonization between programmes and donors, strategies for national pharmaceutical innovation and medicines access.

The Framework is in development. It offers guidelines, methods, manuals, or links to experts in other countries. And through the growing Health Research Web platform, countries have the opportunity to share expertise.

Resources

www.cohred.org/framework-guides-system-strengthening

www.healthresearchweb.org/common/index.php

Country support in 2009

In 2009, COHRED's expertise and Framework were used by a growing number of countries and cited as a useful resource in global health circles.

COHRED provided support of varying nature to the following countries during 2009.

- Costa Rica
- El Salvador
- Guinea Bissau
- Honduras
- Laos PDR
- Mauritius
- Paraguay
- Portugal
- Senegal
- Tanzania
- Tunisia
- Uganda
- Uruguay
- Zambia
- Middle East - multi-country study with WHO-EMRO - Pakistan, Syria, Afghanistan, Iraq, Palestine.
- Caribbean regional: through the Caribbean Health Research Council
- West African Health Organization – 15 countries in the region

Requests for work were received from a further 13 countries – in Africa, Latin America and Central Asia.

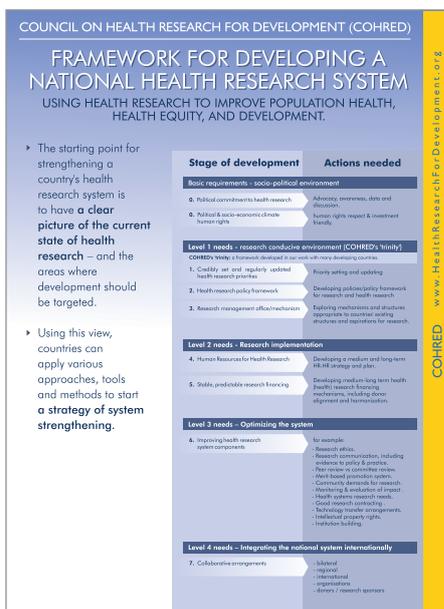
Resources

Alignment and harmonization: An assessment of the health research system in Tanzania

www.cohred.org/sites/default/files/Tanzania_low_res.pdf

Record Paper 9: Research for health and health system strengthening in Africa

www.cohred.org/sites/default/files/COHREDRP9_Research%20for%20Health%20System%20Strengthening_in_Africa.pdf



The COHRED NHRS Framework is a planning and research management tool for decision makers. It is based on more than a decade of support to countries to develop their strategies for Essential National Health Research and health research systems.

Latin America – roadmaps for strengthening health research systems

A two-year process of consultation among Latin American countries to assess their needs for national health research has resulted in the creation of national *Roadmaps for NHRS strengthening*, by several countries in the region. This is the result of two regional consultations facilitated by COHRED, in Brazil and Cuba.

At the 2009 regional consultation in Cuba, countries reviewed progress to develop their national health research systems – building on plans set together in 2007.

The roadmaps are based on the COHRED Framework for strengthening national health research systems. COHRED is supporting the development of these plans throughout 2010, working with Uruguay, Paraguay, El Salvador, Honduras, Costa Rica, Guatemala and Colombia have also shown interest.

Argentina has also requested COHRED's support for the evaluation of its national health research system, using the Framework as a basis.

PAHO-COHRED partnership

Long term support to Latin American countries in developing their health research capacity -part of a Memorandum of Agreement with the Pan-America Health Organization (PAHO). It calls for COHRED to provide technical support to countries and to work with PAHO to create a Latin American component of *Health Research Web*.

Resources

www.cohred.org/healthresearchlatinamerica

West Africa – support for country action plans

In a partnership with WAHO, The West African Health Organization, COHRED facilitated the first regional meeting on health research system strengthening in this region. As a result, 15 countries have started action plans to build national systems – using the COHRED NHRS Framework as their guide.

A COHRED-WAHO Memorandum calls on COHRED to provide support and capacity building to countries, and develop Health Research Web in the region.

Resources

Partnership to strengthen health research in 15 West African countries

www.cohred.org/sites/default/files/COHREDWAHO%20PRESS%20RELEASE_EN_FINAL.doc

Research for Health – Africa: building research management skills

This partnership between COHRED and NEPAD – the New Partnership for Africa's Development, aims to build the capacity of health research managers in African countries. This is the first step in a long-term process of building regional and country strategies for national health research system development.

The first phase, starting in 2010, will invite several countries to contribute a team and some funding, and develop action plans to strengthen their research systems. Research for Health Africa will support the teams and provide and link them to a 'learning group' of peers in other African countries.

The programme is supported by The Netherlands for a four-year phase with three countries. The partners are seeking matching funds from other donors to expand the activity to a wider group of African countries. The concept will be expanded to Latin America, the Middle East and Asia.

Strengthening Pharmaceutical Innovation in Africa: a new agenda highlights countries' needs

This initiative resulted from COHRED's inputs in the process leading to the 2007 Noordwijk Medicines Agenda – a meeting on increasing research and development for drugs for neglected diseases organised by the OECD and hosted by the Netherlands. COHRED's inputs helped shift the emphasis from providing incentives for pharmaceutical research in high income countries, to incentives for technology transfer for pharmaceutical innovation – benefitting both the 'north' and 'south'. With support from the Netherlands Ministry of Foreign Affairs and an offer by Cameroon to host the African 'complementary medicine agenda', a two year project - the Yaoundé Process - began. This has evolved into the initiative: 'Strengthening Pharmaceutical Innovation in Africa' - a joint programme of the New Partnership for Africa's Development (NEPAD), COHRED with support from the George Institute for International Health.

The study brings two unique elements to support a new agenda, driven by African countries, for improving access to medicines and local pharmaceuticals production:

- **The first map showing medicines access, development, production and procurement in Africa.** Data will be continually updated on Health Research Web.
- **A new pharmaceutical innovation tool for African policy makers and research managers** to develop strategies for innovation and medicines access.



Health research and policy leaders from 11 African countries and members of the pharmaceutical industry wrote the Final Statement of the meeting: Strengthening Pharmaceutical Innovation in Africa. The African Ministerial Council on Science and Technology has endorsed the initiative and tool developed by COHRED-NEPAD that helps countries to develop their pharmaceutical innovation strategies. The initiative supports the Pharmaceutical Manufacturing Plan for Africa and the Global Strategy and Plan of Action for Public Health, Innovation and Intellectual Property.

Resources

www.cohred.org/African_Innovation

Executive Summary

www.cohred.org/sites/default/files/Strengthening_Pharmaceutical_Innovation_Africa_Report_Exec_Summary_0.pdf

Study

www.cohred.org/sites/default/files/Strengthening_Pharmaceutical_Innovation_Africa_Report.pdf

Final Statement of partners

www.cohred.org/sites/default/files/Africa_Pharma_Innovation_Meeting_StatementFINAL.pdf

COHRED supports WHO Global Strategy and Plan of Action on Public Health, Innovation and Intellectual Property (GSPOA)

The Secretariat on Public Health and Innovation (WHO/PHI), in the WHO Director General's Office, was to implement the Global Strategy and Plan of Action on Public Health, Innovation and Intellectual Property. WHO/PHI has requested COHRED to provide technical support to put the Global Strategy into action in countries. COHRED will provide support in three areas:

- Application of the tool for strengthening pharmaceutical innovation in Africa in countries to support national action towards implementation of GSPOA.
- Facilitate the involvement of non-governmental actors, including NGOs, Public Private Partnerships, industry, and research organisations.
- Contribute to the creation of a web-based monitoring and evaluation tool to track the implementation of the Global Strategy and Plan of Action in countries worldwide.

This initiative has attracted the interest of a number of donors who are planning multi-year support for pharmaceutical innovation strategy development and capacity building in countries.

Support to Denmark's strategy on Research for Health

The COHRED Framework for National Health Research System Development and its research capacity strengthening grid have been included as resources in the Guidance Note on Health and Development of Denmark's development cooperation agency (DANIDA). This publication aims to improve the quality of Danish support to the health sector and improve dialogue with other actors.



Contribution to WHO/TDR empowerment strategy

The WHO Tropical Disease Research business line on Empowerment has included COHRED concepts on Human Resources for Health Research in its 2008-2013 strategy. COHRED and TDR are in discussion to see how the COHRED National Health Research Systems (NHRS) Strengthening Framework, its research capacity strengthening and science communication approaches can support TDR's efforts to build search capacity in countries.

MARC – the web platform on ethics review capacity

The first information platform for ethics review and medicine regulation in low and middle countries has been created by COHRED in partnership with the University of Kwazulu Natal and the European and Developing Countries Clinical Trials Partnership (EDCTP). It is provided through *Health Research Web*.

MARC meant to map

- * all health research ethics committees
- * all drug regulatory authorities, and
- * effort to build capacity in both areas in sub Sahara Africa. This mapping is done on Health Research Web to enable it to become 'self-updating'. Now that the platform exists, countries elsewhere are starting to use it as well.

The platform currently offers information on 93 African ethics committees. Committees from all countries are encouraged to add their information - including contact information, areas of work, protocols, project details and other information that they would like to share. Details of drug regulatory authorities will also be added in each country.

Key users of 'MARC' include pharmaceutical producers – who can easily see what capacity is available in specific countries; donors – to see where they can support capacity building; researchers – to submit protocols for review and national governments, media, CSO/NGO, patient organisations - in short - everyone having an interest in good quality clinical trials in Africa. It is also a useful tool for ethic committees to have rapid access to information, increase their visibility and better manage their affairs.

For more information:

www.healthresearchweb.org/common/hrweb.php?lg=en&title=ethics

ethics@healthresearchweb.org

(e-mail research ethics committees)

MRA@healthresearchweb.org

(e-mail medicines regulatory authorities)

Encouraging new thinking: Research Capacity Strengthening ('RCS'); Responsible programming of health research

COHRED encouraged development partners and countries to take a broader view of Research Capacity Strengthening, presenting a concept for designing and measuring the strengthening of research capacity at different levels in a country – for researchers, institutions and at the system level.

The COHRED-developed research capacity strengthening (RCS) grid was presented and discussed at several consultations and meetings in 2009 – ESSENCE (donor group on alignment and harmonization) in Tanzania; the WHO/TDR technical advisory committee on Empowerment; and as input to a planning consultation to the DANIDA Health strategy in Copenhagen. DANIDA has included it in its Guidance Note on Health and Development.

The RCS grid was a key input to the CHRAIC programme of the Department of Community Health of the Royal College of Surgeons of Ireland (RCSI).

Likewise, the *Responsible Vertical Programming ('RVP')* work of COHRED was proposed in a special presentation to the WHO's Advisory Committee on Health Research, as a strategy for international programmes to build the capacity of researchers in partner countries while delivering their programme's objectives.

Resources

Changing Mindsets: Research capacity strengthening in low- and middle-income countries

www.cohred.org/Changing_Mindsets

<http://www.danidadevforum.um.dk/NR/rdonlyres/2A569EDA-B5E5-4683-A3B0-4C8B99296A68/0/GNHFinal18NOV2009Final.pdf>

<http://www.danidadevforum.um.dk/NR/rdonlyres/2A569EDA-B5E5-4683-A3B0-4C8B99296A68/0/GNHFinal18NOV2009Final.pdf>

The screenshot shows the 'Health Research Web' interface. At the top, there's a navigation bar with 'page', 'Discussion', and 'History' tabs. The main heading is 'Regulation and Ethics Review of Research'. Below this, there's a paragraph explaining that research involving human participants needs to be reviewed by a capable Research Ethics Committee (REC) or Institutional Review Board (IRB). It also mentions that research is becoming increasingly international and takes place in more than one country at the same time. There's a section titled 'Capable RECs/IRBs and - where appropriate - national ethics committees' which states that high-quality ethics guidelines that adopt international guidelines to local conditions and effective management or standard operating procedures for RECs/IRBs will increase the conduct of ethical research and will minimize the risks and maximize the benefits of research for health - especially in low and middle income countries. Below this, there's a section titled 'This section of Health Research Web provides crucial contact information for ethics review of health research in countries. The information is being provided partly by COHRED but increasingly by Research Ethics Committees themselves under an agreement with Health Research Web.' At the bottom, there's a map of Africa with several blue markers indicating the locations of ethics committees and regulatory authorities. The map includes a search bar and a scale bar.

Health Research Web

Health Research Web continued its development in 2009, with the introduction of a powerful new interactive platform. *HRWeb 2.0* brings interactive features such as wiki spaces for users to start their interactions on health research, a project registry that several countries are planning to use to better manage their health research investments. In a partnership with clinical trials group, EDCTP, an *HRWeb* Ethics space was created to track the capacity of ethics and drug regulatory committees across Africa. The civil society engagement group on research for health is building its space where like-minded organisations can post data and interact. Other modules – such as donor information – are planned.

In Africa, COHRED's partnership with NEPAD has resulted in a request to use the *HRWeb* platform to develop the web-based platform for NEPAD's ASTII (African Science, Technology and Innovation Indicators) project. Work with a number of countries in 2009 includes - consultations with Senegal and Zambia, a group of 15 West Africa countries and with PAHO to start *HRWeb* Latin America. The core elements of these activities are a user needs assessment with partners, technical support to the partner, and in some cases, capacity building to prepare for the future transfer of technical development of *HRWeb* to a country or region.

Strategic communication of health research

The COHRED course on strategic communication of health research was designed for research programme managers and senior researchers. It was created in partnership with the Philippines Council on Health Research and Development and the Malaysia Institute for Health Systems Research. It started as a request for training in policy briefing development, and evolved into a comprehensive approach for senior research managers to better organise their research information, identify and engage potential users and explain the benefits of their research.

This year COHRED worked with The Makerere University college of Health Sciences, Denmark's ENRECA Health network and The Tanzania Commission on Science and Technology. The Tanzania assignment included support in developing the Commission's knowledge management strategy, and work with senior staff on how to increase policy impact and uptake of the research done in the country. Some 50 researchers have followed this course.

Research system capacities ...

'level' of development	locus of intervention nature of intervention	individual	institution	research system	socio-economic and political	international collaboration and linkage
1	capacity building	master level training	grants management	basis of NHRS	increase demand for research	good partnership
2	capacity strengthening	doctoral level training	merit-based promotion	research ethics reviews capacity	civil society engagement	fair research contracting
3	performance enhancement *equity focus	networking researchers, peer reviews	research communication	monitoring and evaluation of output and impact	focus on health, equity and socio-economic development	focus on research competitiveness

Scaling-up research capacity strengthening. Most organisations use Research Capacity Strengthening to describe the training of individual researchers. What's required to build the capacity of a research system is much broader. The COHRED 'RCS grid' guides managers' and policy makers' thinking on how to develop skills of researchers, research organisations and systems for health research.

The content of the various cells are examples for illustration of what is meant with research capacity at various levels. 'Fair Research Contracting' is an example of a capacity for research systems in relation to their international partners - and is of relevance to more advanced research systems. Many more examples can be found.

COHRED Board 2009

Prof. Abbas Bhuiya
Head, Poverty and Health Programme and Social and Behavioural Sciences Unit
International Diarrhoeal Disease Research Centre, Bangladesh (ICDDR,B);
BANGLADESH

Dr. Jo Ivey Boufford
President
New York Academy of Medicine
USA
Treasurer

Dr. Debora Diniz
ANIS Institute of Bioethics, Human Rights and Gender, Professor of Public Health and Bioethics. BRAZIL

Dr. Don De Savigny
Head of Unit, Clinical Intervention & Epidemiology; Public Health & Epidemiology and Swiss Tropical Institute, Switzerland.
CANADA.

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Technical Director and Infectious Disease Advisor, Africa's Health in 2010 project
D.R. CONGO/USA

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Health Policy Advisor, Swiss Agency for Development and Cooperation
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Caribbean Health Research Council
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Dr. Aissatou Toure Balde
Head, Laboratory of Parasite Immunology
Institut Pasteur Dakar
SENEGAL

Stephen Matlin, Daniel Mäusezahl and Pem Namgyal left the Board in 2009. Pat Naidoo, Debora Diniz and Arthur Marx were elected.

COHRED staff

Mr David Abreu
Manager HR Web
Brazil

Ms Jennifer Bakyawa
Project Coordinator
Communication and Research Translation
Uganda

Dr Francisco Becerra-Possada
Senior Consultant Latin America
Mexico

Dr Martine Berger
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Ms Laura Bommer
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The Netherlands

Ms Teresa Cullen
Executive Assistant
United Kingdom

Mr Bruno Coelho
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Dr Hassen Ghannem
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Colombia

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Ms Edlyn Jimenez-Santos
Ethics Fellow
Secretariat - Global Forum on Bioethics in Research
Philippines

• The Global Forum on Bioethics in Research Secretariat is hosted by COHRED.

Financial Support

European Commission

European and Developing Countries Clinical Trial Partnership (EDCTP)

WHO/EMRO, World Health Organisation, Eastern Mediterranean Regional Office Eastern Mediterranean Regional Office

International Development Research Centre, (IDRC), Canada

Irish Aid

Instituto Carlos Slim de la Salud, Mexico

Department of Foreign Affairs (DGIS), The Netherlands

Swiss Agency for Development and Cooperation (SDC)

Wellcome Trust

Other Support

Mr. Derrick Wong, USA/France
Organisational Development

Athena Institute at the Free University of Amsterdam,
the Netherlands

Euro Health Group, Denmark

Caribbean Health Research Council (CHRC),
Trinidad and Tobago

Commission on Science and Technology, Tanzania

Connecting Health Research in Africa and Ireland
Consortium (ChRAIC)

Cooperation and International Relations Office,
Instituto Nacional de Saúde Doutor Ricardo Jorge,
Portugal

Department of Human Resources for Health,
European Commission, Directorate General, Research
Cordaid, Project Voice and Choice, The Netherlands
EDCTP – European and Developing Countries Clinical
Trials Partnership, The Netherlands

ENRECA Health/Copenhagen School of Global Health,
Denmark

European Union, Health NCP NET

Initiative to Strengthen Health Research Capacity in
Africa (ISHReCA)

Instituto Nacional de Salud Pública (INSP), Mexico

International Development Research Centre (IDRC),
Canada

Makerere University, Uganda

Makerere University College of Health Sciences, Uganda

Ministry of Health, Brazil

Ministry of Health, Guinea Bissau

Ministry of Health, Paraguay

Ministry of Health and Ministry of Science and
Technology, Cameroon

Ministry of Health and Quality of Life, Mauritius

NORAD, Norway

Pan American Health Organisation Paraguay
Representative (PAHO PWR)

Royal College of Surgeons in Ireland

SARETI, South African Research Ethics Training Initiative,
South Africa

Strengthening Engagement in Public health research
(‘STEPS’)

World Health Organization, Initiative for Vaccine
Research (IVR)

WHO Eastern Mediterranean Regional Office

Key Partners in 2009

Centre for Health Research for Development (DBL),
Denmark

Global Forum for Health Research

Instituto Nacional de Salud Pública, Mexico

Pan-American Health Organization (PAHO)

Public Health Research and Development Centre (CIAM),
The Gambia

The New Partnership for Africa's Development (NEPAD)

Statement of income and expenditure for the year ended 31 December 2009

	2009 CHF	2009 USD
Income	2,047,629	1,980,808
Donors' financial contributions:		
Unrestricted (see 'a' below)	1,401,302	1,355,573
Restricted(see 'b' below)	590,264	571,001
Interest received	11,841	11,455
Miscellaneous income	44,222	42,779
Expenditure (general view)	2,710,969	2,622,502
Administration and logistics:	224,885	217,546
Office and equipment rental and purchases:	160,412	155,177
Human resources costs:	1,902,916	1,840,818
Publications	51,466	49,787
Travel	243,116	235,182
Information technology	81,109	78,462
Various project costs (net) - Highlighted figures	47,065	45,529
Net (deficit) / surplus for the period	-663,340	-641,693

Note: Change in accounting policy - Revenue recognition. Donors' contributions are recorded as from 1 January 2009 on an accrual basis rather than a cash basis. As a result, donor's contributions for a calendar year are recorded wholly in the financial year in which the donation is confirmed in writing by the donor. For donations covering more than one calendar year, the donations are divided evenly over the life of the donation. In exceptional cases, COHRED may agree with a donor to extend the period of a grant already recorded.

Donors' financial contributions

	2010 CHF	2010 USD	2009 CHF	2009 USD
a Unrestricted	1,340,000	1,298,827	1,401,302	1,355,573
Irish Aid	357,000	346,031	378,200	365,858
Swiss Agency for Development and Cooperation (SDC)	830,000	804,497	203,500	196,859
Swiss Agency for Development and Cooperation (SDC)			664,000	642,332
International Development Research Centre (IDRC)	153,000	148,299	135,352	130,935
SDC - WHA			20,250	19,589
b Restricted	954,500	925,172	590,264	571,002
Netherlands Ministry for Development Cooperation	115,600	112,048	83,023	80,314
Commission of the European Communities	3,700	3,586	85,641	82,846
Netherlands Organisation for Scientific Research				
IDRC 3 - HRWeb			17,535	16,963
SDC - HRWeb			90,000	87,063
Brazil - Ministry of Health				
SDC - GFHR and COHRED				
Global Forum for Health Research	32,800	31,792		
Harvard University				
Wellcome Trust - International Engagement Award			1,660	1,606
World Health Organisation				
Netherlands Ministry for Dev. Coop. - RfH Africa	381,000	369,293	201,238	194,671
Europ.and Dev. Countries Clinical Trials Partnership (EDCTP)	273,000	264,612	73,975	71,561
World Health Organisation - EMRO office	28,700	27,818	8,890	8,600
Wellcome Trust - Cuba meeting			8,302	8,031
NEPAD - OST - HRWeb			20,000	19,347
SDC - Pretoria Meeting	100,000	96,927		
INDEPTH	19,700	19,095		
	2,294,500*	2,223,999*	1,991,566	1,926,575

* this refers to committed funding only as at 1.04.2010

Report of the statutory auditors on the limited statutory examination
to the Board of
COUNCIL ON HEALTH RESEARCH FOR DEVELOPMENT
Geneva

As statutory auditors, we have examined the financial statements (balance sheet, statement of income and expenditure and notes) of the COUNCIL ON HEALTH RESEARCH FOR DEVELOPMENT, Geneva for the year ended 31 December 2009.

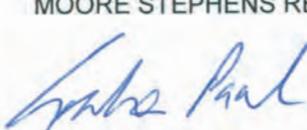
These financial statements are the responsibility of the Council's Board. Our responsibility is to perform a limited statutory examination on these financial statements. We confirm that we meet the licensing and independence requirements as stipulated by Swiss law. An employee from our company assisted COHRED with book-keeping and payroll administration during three months of the accounting period under examination, and assisted in developing project reporting. However, she has not taken part in the limited statutory examination and the project reporting is distinct from these financial statements.

We conducted our examination in accordance with the Swiss Standard on the Limited Statutory Examination. This standard requires that we plan and perform a limited statutory examination to identify material misstatements in the financial statements. A limited statutory examination consists primarily of inquiries of company personnel and analytical procedures as well as detailed tests of company documents as considered necessary in the circumstances. However, the testing of operational processes and the internal control system, as well as inquiries and further testing procedures to detect fraud or other legal violations, are not within the scope of this examination.

Based on our limited statutory examination, nothing has come to our attention that causes us to believe that the financial statements do not comply with Swiss law and the Council's statutes.

Geneva, 7 May 2010

MOORE STEPHENS REFIDAR SA



Graham Paul
Licensed audit expert
Auditor in charge



Jacques Grossen
Licensed audit expert

Enclosures:

- Financial statements (balance sheet, statement of income and expenditure and notes)

COHRED 2009: Publications and Key Outputs

Papers in professional journals

Published

Becerra-Posada F. Nuevas posibilidades de desarrollo de los sistemas nacionales de investigación para la salud en América Latina. *Salud Pública de México*.2009;51:86-89.

IJsselmuiden CB, Ghannem H, Bouzouaia N. Développement du système de recherche en santé: analyse et établissement des priorités en Tunisie (editorial). *Tunisie Médicale* 2009; 87:1-2.

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Becerra-Posada F, de Haan S, Cuervo LG, Montorzi G. Research for Health in Latin America (letter). *Lancet*.

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de Haan S, Matthys B, Murugi J, Wyss K. Research for health and health system strengthening in Africa, Record Paper 9. COHRED: Geneva, 2009.

Millen J, Marmotte N, Koen J, Essack Z, Jimenez-Santos E. Ethics on Research involving Indigenous Peoples and Vulnerable Populations. Report of the Global Forum on Bioethics in Research ninth annual meeting Auckland 2008. GFBR: Geneva 2009.

Montorzi G, de Haan S, IJsselmuiden C, Mboera L. Tanzania : An assessment of the health research system. Alignment and Harmonisation in Health Research Series. COHRED: Geneva 2009. <http://www.cohred.org/Tanzania>

Pryor J, Morse M, Prasad S, Kolozi M, Salmela R, Kennedy A. National Health Research Systems in Pacific Island Countries and Areas. Western Pacific Regional Office of the WHO/Health Research Council of the Pacific/COHRED: Manila 2009. <http://www.cohred.org/National-Research-Systems-in-Pacific-Island-Countries>

Newspaper articles

Bakyawa J. Why simple scientific data is hard to come by. *The East African*: Nairobi 28 September 2009.

Martínez A, Becerra Posada F. Investigación para la salud: nuevas tendencias. *La Cronica de Hoy*: Mexico 22 April 2009.

Other publications

COHRED. Governance and policy frameworks for health research in 38 countries. In: UNESCO Forum on Higher Education, Research and Knowledge. Global Research Seminar: Sharing research agendas on knowledge systems. Final Proceedings. UNESCO: Paris 2009.

COHRED. Health research policies and priorities in 19 African low income countries. In: UNESCO Forum on Higher Education, Research and Knowledge. Global Research Seminar: Sharing research agendas on knowledge systems. Final Proceedings. UNESCO: Paris 2009.

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COHRED is registered as 501 3 (c) charity organisation in the U.S.A.