Elevating national research for health priorities to achieve effective scale-up: recommendations

SDG Global Action Plan Accelerator 5: R&D, Innovation, & Access

Background

At the current rate the world is not on course to meet most of the targets set out in Sustainable Development Goal 3 (SDG3) for health. Recognising this, the global health community came together at the World Health Summit, in Autumn 2018. Here, 12 major global health organisations (listed in Annex A) agreed to develop a Global Action Plan to address challenges around alignment, acceleration and assessing results. The Global Action Plan is being focused through seven 'Accelerators' covering cross-cutting areas where more synergistic efforts can significantly accelerate progress in global health.

Accelerator five is looking at Research and Development, Innovation, and Access, and is being led by the World Health Organization with support from the Wellcome Trust and is overseen by a WHO Advisory Committee.

The work of the accelerator is focusing on three themes to achieve the overall aim: optimising the global research for health system (maximising country-level impacts by identifying international systems-level improvements which require coordination and alignment across the sector); scaling up innovations (Identifying catalytic actions for national and international organisations to work together to achieve scale up and impact); and elevating country priorities (consulting directly with countries to create better alignment between national priorities and internationally commissioned research and innovations).

Outcomes from discussions around the above themes will be collated into a set of recommended actions for the 12 signatory agencies, which will be submitted to the Global Action Plan secretariat prior to their incorporation into the Global Action Plan – launched at UN General Assembly in September. The 12 signatories to the Global Action Plan are involved in research to varying degrees, but all of them benefit from research, which arms them with new knowledge and innovations with which to drive health improvements.

On 7-8 May 2019, WHO, Wellcome, University of Global Health Equity, Fiocruz and the Indian Council of Medical Research hosted a workshop in Kigali, Rwanda to draft initial recommendations on country ownership of the research agenda.

The workshop discussion was informed by the results of a survey run by the Overseas Development Institute to gain insight and collect opinions on the global research and innovation for health landscape at a national level. The survey gathered input from nearly 100 people from around 25 countries and was supplemented by 1:1 interviews with a number of workshop participants. An analysis of the survey and interviews will be published online in due course.

The participants are listed in Annex B. Discussions at that workshop have informed the recommendations listed here although this document should not be viewed as an agreed consensus amongst all the participants.

Introduction

Research for health is critical for the achievement of the health-related sustainable development goals. However, the ultimate benefit of such research for health relies on implementation and translation into effective policies, strategies and innovations that are suitable, affordable, equitable and reach those who need them.

The reality across the world is that evidence from research rarely directs health policies, decision-making and financing flows at both national and international levels, and that national priorities are rarely a significant driver of decisions made by international players resulting in a global system that is mis-aligned.

A barrier to achieving this is the lack of a national coordinated, articulated vision for research for health and an action plan for how research can help bridge the gap in meeting the SDGs at a country level.

For the Global Action Plan to be translated into tangible health outcomes, through effective scale-up, all stakeholders need to be involved in its creation and implementation. Too often the coordination of multi-stakeholder response to health research tends to be lacking with fragmentation between different players in the space including Ministries of Health, Science and Technology, national research institutes, civil society and private sector. The initiative for planning a national research for health agenda is often stimulated by government, most commonly MoH/MoSTI. However, often this does not harness the voices of a wide and varied stakeholder group to inform the process.

Likewise, international institutions lack the processes to respond to these national health agendas should they exist. While efforts to achieve Universal Health Coverage (UHC) and the Sustainable Development Goals (SDGs) have begun to coalesce national and international actors around a common set of goals, the result of such lack of synchronisation of priorities from the global community to the national and regional levels has resulted in a system which is often not aligned to effectively respond to health needs and effectively accelerate the scale-up of promising innovations to elevate progress towards the SDGs. This includes UN agencies at a country level. Collaboration between Ministries of Health and national research institute embedded research, directed by a government articulated vision, can lead to quicker scaling up of products.

Participants at the workshop were clear that national voices, in particular from low- and middle-income countries, need to be fundamental parts of a well-functioning global research system, supported by scientific input. The funders that currently dominate much of the global spending on research should be responsive to locally-set agendas, not dictating them. We need to develop, support, and respond to country voices.

Hence, the recommendations have been developed to achieve this vision.

Recommendations:

Ownership, Coordination and Governance

- 1. Countries should take ownership of their research agenda by developing national research for health agendas. In order to drive health improvements, research needs to be aligned to national health priorities, based on gap analysis to the SDGs including how research can help bridge those gaps, with equity and access at its core. This requires well-articulated national research agendas developed by a number of stakeholders, as well as the public demand for research in order to direct activities, priorities and national and international financing. Where possible, these should be co-ordinated at a regional level such as EU, SADEC etc, in order to limit fragmentation.
 - a) National research agendas: This is currently a gap for many countries, regardless of income. All governments should co-develop national research for health agendas, accompanied, with at least partial, financing of their development, underpinned by strong data and surveillance systems and reviewed regularly, as a core part of their national strategic health plans, as well as a legal framework for implementation which views the entire development pathway from gap analysis, priority setting to implementation and scale up.
 - b) **Stakeholder engagement:** Cross-ministry and multi-stakeholder joint working groups should develop, implement, monitor, review and update these research agendas with private sector, patient community, civil society, academics, national research institutes and regulators as well as country presence of WHO, UNICEF and international funders for full stakeholder integration in to the process for priority setting as well as to accelerate scale-up.
 - c) **Technical support:** WHO, supported financially by international funders, should continue to provide technical support to countries, where needed, to develop national research for health strategies.
 - d) Equity and access: Equity and access should be core driving principles in national and international research for health agendas. Funders should support the coproduction of these agendas and the alignment of incentives, principles and policies between researchers, communities, policy-makers, and implementers in response to the national priorities as presented in the national research for health agenda. All research funders public and private should ensure conditions which enable access are attached to their research funding and encourage the wide publication of access plans at least at the launch of interventions. All research funders should reinforce good practice in community engagement, including in priority setting and active sharing of research outputs.
 - e) **R&D capacity:** WHO to provide assistance to countries to conduct an assessment of R&D capacity against country priorities within the national research for health plan, including infrastructure.

- 2. Global priority setting processes as a guide for country-level decision making: WHO should provide normative guidance on research & evidence gaps and promising innovations for scale-up aligned with the SDGs to achieve the most impact, accelerate progress and help funders and innovators catalyse innovation.
 - a) Innovation list: WHO to develop a list of evidence-based social, scientific and service innovations for short term focus, both gap analysis and research need as well as innovations ready for scale where enough work has been done to suggest potential for impact. This was recommended strongly as an action from the consultation in Rwanda.
 - b) WHO to provide guidance to countries on how to utilise the list.
 - c) The R&D Observatory should identify priority disease and gaps in health system domains for research, and be adapted to be in line with the SDGs, and how research can help bridge the gap in order to avoid duplication, including a database of scalable technologies and innovations.
 - d) Public research funders and countries should politically and financially **support the role of the WHO R&D Observatory** as the consolidator and primary analyser of national and global funding data.
 - e) WHO to develop roadmaps and target product profiles, with country participation, to guide product developers and funders and align and accelerate scale-up at a country level.
- 3. Coordination: Research stakeholder landscape is generally fragmented at a national level and the international level is not aligned. Creating the public demand for research with policy makers as well as incentives for private sector and providers to inform the process of priority setting and national health research agenda setting so that is aligned with uptake at country level is important for impact. Learnings could be made from the country coordinating mechanism model of Global Fund and GAVI, which provides some incentive for coordination at a national level. There is a need for national actors along with international agencies to work together in country-led forums to improve coordination at national and international levels, prioritise and direct resources and encourage innovation scale-up.
 - a) WHO to coordinate country-focussed SDG research and innovation forum with UN agencies, research institutions, government, civil society and private sector to identify partnering for scale up of existing innovations guided by WHO innovation list and new research projects, as well as indicators and metrics for measuring success, linked with social investor summits to matchmake innovation with funders for scaleup, in-line with national priorities. WHO and UN to include these priorities in high level political dialogue.
 - b) Scale-up and impact: International funders should get a commitment of central government to implement research outcomes if successful when aligned with national health plans and priorities. National health research ministries to lead

- discussions and propose where innovation should be scaled up, or bundled for scale-up and discuss with UN agency country group.
- c) WHO to provide technical assistance to national government to lead and task out work to overcome regulatory barriers to scale up.
- d) Global Fund and GAVI to report on how CCM models have resulted in increased health impact at country level due to stakeholder coordination. Role for UN system/international funders to think about similar models for research coordination incentives.

Monitoring, evaluation and metrics:

- 4. Metrics and indicators for monitoring progress for innovation are important for leveraging national and regional demand. National governments are crucial in ensuring SDGs and Agenda 2030 translates from a global agenda to real impact making the SDGs become real to communities and people, particularly to those who are at risk of falling behind.
 - a) UNDP lead process to intensify existing country level SDG tracking for health, with global partnership for sustainable development data GP4SDD and SDSN, including how research and innovation is part of the localization of the SDGs programme.
 - b) WHO to work closer with the UN to integrate itself and research for health with the Technology Facilitation Mechanism, including the UN Inter-Agency Task Team (IATT) on Science, Technology and Innovation (STI) for the SDGs.

Annex A – the 12 organisations that have committed to the Global Action Plan

- GAVI, the Vaccine Alliance
- Global Financing Facility
- The Global Fund to Fight AIDS, Tuberculosis and Malaria
- UNAIDS
- UNDP
- UNFPA
- UNICEF
- Unitaid
- UN Women
- World Bank Group
- World Food Programme
- World Health Organization

Annex B - Workshop participant list

First name	Last name	Job title	Organisation	Country
Khuong	Anh Tuan	MD., Researcher	Health Strategy and Policy Institute	Vietnam
Agnes	Binagwaho	Vice Chancellor	University of Global Health Equity	Rwanda
Catharina	Boehme	CEO	Foundation for Innovative New Diagnostics	Switzerland
Soumya	Chattopadh yay	Senior Research Fellow	Overseas Development Institute (ODI)	United Kingdom
Meghnath	Dhimal	Chief Research Officer	Nepal Health Research Council	Nepal
Luiz	Galvao	Researcher	Oswaldo Cruz Foundation	United States
Tore	Godal	Special adviser	Norwegian Ministry of Foreign Affairs	Norway
Sarah	Iqbal	Lead, Communication and Public Engagement	Wellcome Trust/DBT India Alliance	India
Mahmoud	Javombo	Ecosystems Manager	Directorate of Science, Technology and Innovation	Sierra Leone
Samia	Kemal	Communications Coordinator	University of Global Health Equity	Rwanda
Mukesh	Kumar	Head of International Health Division (IHD)	Indian Council of Medical Research	India
Nisia	Lima	President	Oswaldo Cruz Foundation	Brazil
Rosemary	Mburu	Executive Director	WACI Health	Kenya

Anthony	McDonnell	Researcher	Overseas Development Institute	United Kingdom
Rosemarie	Muganda	Regional Advocacy Director	PATH	Kenya
Shirshend u	Mukherjee	Mission Director	Biotechnology Industry Research Assistance Council	India
Jean de Deu	Ngirabega	Deputy Executive Secretary in charge of Research	East African Health Research Commission	Burundi
Chinwe	Ochu	Research and Knowledge Management Unit Lead	Nigeria Centre for Disease Control	Nigeria
Joseph Chukwudi	Okeibunor	Health Social Scientist/Health Research and Knowledge Management Officer	World Health Organization	Congo
Pierre	Ongolo- Zogo	Head	Centre for Development of Best Practices in Health	Cameroon
Olawale	Salami	Senior Clinical Project Manager	Drugs for Neglected Diseases Initiative	Kenya
Mohamad ou	Sall	Director of the Institute for Population, Development and Health Reproduction, The Cheikh Anta Diop	Cheikh Anta Diop University of Dakar	Senegal
Claudine Mimi	Sugira	Administrative Manager	University of Global Health Equity	Rwanda
John	Williams	Director	Dodowa Health Research Centre	Ghana
Richard	Gordon	Executive Director: Grants Innovation and Product Development	South African Medical Research Council	South Africa
Michelle	Mulder	Program Manager (Grants and Innovation)	South African Medical Research Council	South Africa
Zoleka	Ngcete	Programme Manager (SHIP Medical Devices, Grand Challenges)	South African Medical Research Council	South Africa

Accelerator secretariat in attendance

Rachael Crockett, Wellcome Trust Ed Whiting Wellcome Trust Will Hall, Wellcome Trust Jack Snow, Wellcome Trust Vasee Moorthy, WHO