

Optimising the global research for health system: draft recommendations for consultation

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. It is being led by the World Health Organization with support from the Wellcome Trust (www.wellcome.ac.uk) and is overseen by a WHO Advisory Committee.

The work of the accelerator is focused on three workstreams: 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; and elevating country priorities. These three workstreams will be collated into a set of recommended actions for the 12 signatory agencies, which will be submitted to the Global Action Plan secretariat in June for a review by the signatory agencies 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 21st-22nd February WHO and Wellcome hosted a workshop in London to draft initial recommendations on the first workstream: how to optimise the global research for health system. 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.

We are now seeking feedback on these recommendations.

Please send any comments to bruniquelv@who.int and GlobalPolicyTeam@Wellcome.ac.uk by Wednesday 8 May.

This will allow us time to revise our recommendations and combine them with the outputs and feedback from the other workstreams and to translate them into a set of concrete actions the signatory agencies could take to help countries realise the acceleration potential toward the health-related SDGs in the area of R&D, innovation and access.

We are also beginning a process of consultation on workstreams two and three and hope to publish interim findings on these areas in advance of finalising them and developing recommended actions.

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Introduction

Achieving the goal of healthy lives and well-being for all can be accelerated through investments in research and innovation, and with the results being made accessible on an equitable basis. The important role of research in health was first formally stated in the Commission on Health Research for Development's 1990 report. Since then the case has been restated regularly, including in the response to Ebola and Zika outbreaks.

Thanks to the advocacy and recommendations of these initiatives, today there is a vibrant community of researchers and innovators across the academic, public and private sector with the aim to improve global health. They are working to develop solutions for health problems, from basic, fundamental science, to new medical products and devices, to system-level and social sciences research. But there is more to be done to realise the full potential of research for health.

Participants at the workshop highlighted that the impact of the research community is undermined by a weak system – at national, regional and global levels - which fails to direct funding and activities towards addressing country health priorities effectively or coherently. There is a lack of strategic coordination and engagement between funders, researchers, industry, implementers, and those who suffer the greatest health challenges - and could benefit most from research.

Inevitably, coordination can be challenging when stakeholders have different views. This can lead to standstills where issues get bogged down, and lives are potentially lost as a result. We need to do better - ensuring we have the right fora to bring people together and resolve these problems. Improving this collaboration and increasing the demand signals from countries could also improve the evidence base, facilitating better decision making for investment in research.

Whilst this situation persists, the system – such as it is – will remain less than the sum of its parts. Individual innovations can have impact, but at the macro level research will not meet its full potential to improve health and help us meet the Sustainable Development Goals.

That is why the recommendations below are focused on creating a system in the true sense of the word – a complex whole aligned to achieve shared goals. With systematic change comes the potential for sustainable impact.

Actors in any system have different motivations and mandates. All still have a part to play. The challenge lies in achieving alignment despite this difference, whether we are talking about a multilateral member state body, an independent foundation, or a pharmaceutical company. The recommendations describe principles and mechanisms for alignment, but we will be having more discussions on the incentives for alignment so that the constituent parts of the research for health system all pull in the same direction.

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.

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The recommendations propose a pathway to this aspiration.

Recommendations

1) All relevant organisations should support the more equitable distribution of research funding, decision making and capacity building within and amongst countries. Most research funding currently comes from a handful of government, philanthropic, and private funders who mainly fund in their domestic context but also often fund internationally, according to their own agendas. This set of recommendations is directed at these institutions, to ensure they, particularly when investing abroad, are responsive to national research agendas, promote equitable partnerships and access to funding, empower countries, and address local priorities.

- a) **Building sustainable capacity:** International public and private research funders should give countries the financial and technical support to develop their own capacity and processes to develop national research agendas and allocate and manage research funding; and build a sustainable research system, including infrastructure, regulatory capacity, and systems to retain highly-skilled researchers at all career stages.
- b) **Empowering countries:** International and national public and private research funders should align a significant portion of their spending with national research agendas and improve collaboration, when investing abroad in low- and middle-income countries. In countries with the necessary capacity, international public research funders should delegate authority on spending decisions for a portion of their funding to national organisations, where national health research agendas are available.
- c) **Tracking funders' alignment:** WHO should monitor research funders' alignment to national research agendas, whilst providing technical support to countries to help them to develop their research agendas and build research capacity.
- d) **Achieving impact:** Funding should also be earmarked for implementation research to ensure the impact of new interventions is maximised and all 12 agencies should encourage and invest in implementation research to achieve efficient scale-up.

2) Countries should direct international research funding and activities by developing national research for health agendas. Research needs to be aligned to country priorities, with equity and access at its core, to drive health improvements. This requires well-articulated national research agendas.

- 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 with the research community as a core part of their national strategic health plans. Cross-ministry joint working groups should develop and implement these research agendas to ensure coherence with non-health priorities. WHO, supported financially by international funders, should continue to provide technical support to countries, where needed, to develop national research for health strategies.
- b) **Equity and access:** Equity and access should be core driving principles in national and international research for health agendas. Funders should support the co-production of these agendas and the alignment of incentives, principles and policies between researchers, communities, policy-makers, and implementers in response to

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local and regional priorities. All research funders – public and private – should ensure conditions which enable access are attached to their research funding and encourage the 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.

- c) **National research funders and regional collaboration:** Countries and international funders should help to establish national research systems with domestic funders where they are lacking. They should also support regional mechanisms, where they can add value, to streamline and accelerate research, evaluation, and access, such as regional research councils and regulatory bodies. These should reflect common national interests. These should enable and do not remove the need for capacities to also be developed and maintained at a national level.

3) All actors in the research ecosystem should develop, support, and participate in effective systems for coordination. A strong understanding of ongoing research activities and gaps should inform identification of priorities and coordinated research strategies. Whilst research funders need to do more to address country health priorities, there are also global health challenges and global public goods for health which require better multisectoral coordination and action at the international level.

- a) **Information and open science:** Public and private research funders and WHO should agree common coding standards for research funding data and code and publish all non-sensitive funding data. In conjunction, OECD and UNESCO should develop more detailed coding standards for health research as part of National Accounts. All funders, including the 12 signatories to the GAP, should ensure that research they fund is open source in regard to the data generated, models used, and outputs created.
- b) **Analysis and priority-setting:** 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. The R&D Observatory should also identify priority disease and health system domains for research.
- c) **Roadmaps:** Research organisations, public and private research funders, and the relevant agencies from the 12 signatories to the GAP should, with WHO as the lead, implement a systematic process for developing research roadmaps to address priority disease and health system domains. The development of methodologies should be explicit and transparent, taking note of recognised methodologies to ensure outputs are high quality, inclusive and have impact. Roadmaps should be integrated plans identifying the pathways for complementary interventions and all relevant organisations.
- d) **Coordination:** Research funders and WHO should organise an annual global forum - including Heads of International Research Organisations and other relevant groupings - to discuss priorities, review progress, and promote financing.

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

Moses Alobo	African Academy of Sciences
Peter Beyer	WHO
Agnes Binagwaho	University of Global Health Equity
Ali Cameron	Unitaid
Kalipso Chalkidou	Centre for Global Development
Nick Chapman	Policy Cures Research
Michelle Childs	DNDi
Guilherme Cintra	IFPMA
Charles Clift	
Richard Gordon	South Africa MRC
Dzintars Gotham	Independent, supporting Charles' work
Alex Harris	Wellcome
Debra Jackson	Unicef
Marie-Paule Kieny	Inserm
Nisia Trindade Lima	Fiocruz
Stephen Matlin	Institute of Global Health Innovation, Imperial
Anne Mills	LSHTM
Suerie Moon	Graduate Centre
Vasee Moorthy	WHO
Devaki Nambiar	India Alliance and George Institute for Global Health
Judit Rius Sanjuan	UNDP
John-Arne Røttingen	Research Council of Norway
Samia Saad	Gates
Els Torreele	MSF Access
Gavin Yamey	Duke
Peter Kilmarx	NIH Fogarty

Accelerator secretariat in attendance

Rachael Crockett	Wellcome Trust
Will Hall	Wellcome Trust
James Hynard	Wellcome Trust
Alice Jamieson	Wellcome Trust

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