REPORT OF THE PAHO/WHO
ADVISORY COMMITTEE ON HEALTH RESEARCH

Introduction

1. This document summarizes the deliberations of the 44th Meeting of the Pan American Health Organization/World Health Organization (PAHO/WHO) Advisory Committee on Health Research (ACHR) held in Barcelona, Spain from 13–15 October 2011. The meeting was hosted by the Iberoamerican Cochrane Centre and Network, a PAHO Partner. Ten members of the committee as well as the Director of the Pan American Sanitary Bureau (PASB) attended the meeting. Other participants included regional and global organizations that support research for public health and representatives from the Spanish government, including delegates from the Spanish Agency for International Development Cooperation and the Instituto de Salud Carlos III. The meeting was convened to review the implementation of PAHO’s Policy on Research for Health (1) including PAHO’s governance on research for health and technical cooperation throughout the Region. Agreement was reached on a work agenda for the ACHR, which issued its recommendations during the final session of the meeting.

2. The Secretariat of the Advisory Committee on Health Research convened the 44th Meeting of the Committee at the request of the PASB Director in order to analyze the Organization’s technical cooperation directed toward implementing PAHO’s Policy on Research for Health and its related policies, including WHO’s Strategy on Research for Health and Strategy and Plan of Action on Public Health, Innovation and Intellectual Property (2). The meeting also examined PAHO’s technical cooperation for promoting research governance and the adequate production and use of research for public health.

Background of the 44th Meeting of the ACHR

3. Since its inception in 1962, ACHR has functioned under different arrangements and made a variety of contributions. These have included helping to formulate policies
and strategies for cooperation in PAHO research, and reviewing research activities in which the Organization has participated. In the past few years the Committee has complemented the in-person meetings with virtual meetings to stay informed and advice on specific issues that may arise in between sessions.

4. The purpose of the Advisory Committee meetings is for participants to advise PAHO about its strategic approach to the production and use of public health research. More specifically, participants advise PAHO about the implementation and advancement of its Policy on Research for Health. Before the meeting, committee members and PASB staff jointly summarized progress made since the 43rd Session of the Advisory Committee on Health Research in order to inform participants, provide adequate background, and identify priority topics for discussion during the meeting.

5. The progress report summaries looked at the activities undertaken during 2010-2011, activities planned for 2012–2013 and beyond, key issues, and questions raised for discussion. These issues were organized according to the five goals of WHO’s Strategy on Research for Health (3) which are closely aligned with PAHO’s Policy on Research for Health (1), as follows:

(a) Priorities: support the setting of research priorities that meet health needs, particularly in low- and middle-income countries.
(b) Capacities: build capacity to strengthen health research systems.
(c) Standards: create an environment for good research practices and enable the greater sharing of research evidence, tools, and materials.
(d) Knowledge translation: ensure that quality evidence is turned into products and policy.
(e) Organization: undertake actions to strengthen the research culture within PAHO/WHO, and improve the management and coordination of PAHO/WHO research activities.

Executive Summary of the Report to the Director

6. The 44th Meeting of the ACHR examined the Organization’s technical cooperation in research and the projects coordinated by the research promotion and development team (Health Systems based on Primary Health Care/Public Policies and Research for Health [HSS/RF]).

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1 Forty-fourth Meeting of the PAHO/WHO Advisory Committee on Health Research, Barcelona, Spain, 13-15 October 2011. The full report to the Director, with detailed information on the deliberations, presentations, and recommendations, is available at: http://new.paho.org/hq/index.php?option=com_content&task=view&id=1842&Itemid=1654&lang=en
7. ACHR members recognized PASB for the significant and ongoing progress in all key domains covered by the PAHO policy on research for health. The members also recognize the Bureau for its significant and ongoing work with strategic partners to expand the reach and visibility of PAHO in the Americas. This approach and progress have put PAHO at the forefront of important developments in research for health. ACHR members hope that this will continue.

Recommendations of the Advisory Committee on Health Research to the Director of PASB

8. The ACHR recommendations are grouped by broad strategic direction that correspond to the WHO policy goals (3) which are closely aligned with the PAHO policy (1). Within each broad strategic direction, one recommendation focuses on continuing the excellent work already under way, while other recommendations focus on work that could be undertaken to keep PAHO on the cutting edge of research for health.

Priorities

9. The Pan American Sanitary Bureau (PASB) should continue to:

(a) Support the application and use of tools and resources for systematic and transparent research prioritization at the country, subregional, and regional levels. PAHO should also support the effective communication of these priorities to the full range of research funders within countries and in the Region.

(b) Support the ongoing development and use of the Health Research Web so that it provides a continuously updated picture of the status of research for health in all countries in the Region.

10. The PASB should consider:

(a) Routinely identifying “windows of opportunity” to address short-term national priorities with existing mechanisms such as policy briefs and policy dialogues. This effort should include what not to do as well as what to do, as in the case of reducing health system expenditures in ways that avoid or minimize health impacts.

Standards

11. PAHO should continue to:

(a) Develop and support the use of standards-related technical documents in the PASB and in Member States.
(b) Strengthen ethics review systems and support countries in the development and revision of normative frameworks such as regulations and standards for research.

(c) Support clinical trial registration processes, and efforts to include results reporting within these processes, through the development of a regional registry that feeds into the WHO International Clinical Trials Registry Platform (ICTRP).

(d) Enhance and support implementation of PAHO research standards, including the PASB’s research registration system.

(e) Strengthen and implement PAHO’s research reporting standards by updating the publication policy and partnering with groups such as the EQUATOR network.

(f) Where appropriate, refine and share indicators—such as research expenditures and the number of researchers holding a Doctorate degree—that reflect the status of national health research systems in the Region. PAHO should advocate for the inclusion of those indicators in the monitoring systems used by other areas such as human resources for health. PAHO should also support the planning and dissemination of findings from key conferences that engage different sectors which contribute to and benefit from research for health.

12. PAHO should consider undertaking work to address the challenges of creating good governance systems that support noncommercial research studies, particularly on diseases of poverty, in a research climate that has established infrastructure and processes designed primarily to support commercial research studies.

13. PAHO should also consider adapting and supporting the use of a development process for health systems guidance. An example would be to prepare a workbook that can inform country-level deliberative dialogues. The workbook should then be pilot-tested in a small sample of countries, ideally in partnership with Evidence Informed Policy Network (EVIPNet) country teams.

**Capacity**

14. PAHO should continue to provide an online compendium of capacity-building supports adapted and used by individuals and institutions in the Region.

15. PAHO should consider preparing an overview of “road-tested” capacity-building supports that is organized by:

(a) Focus: evidence-based policymaking, health systems research, systematic reviews, steering role in research project management and evaluation, and innovation management.
(b) Target audience: politicians, government officials, senior policy analysts, planning unit staff, managers, knowledge brokers, researchers, and research managers.

(c) Pedagogical approach: online versus face-to-face, train-the-trainer versus other approaches, and pre-training activities versus post-training mentorship.

(d) Optimal size and duration.

(e) Existing delivery mechanisms: academic institutions, networks, nongovernmental organizations, WHO Collaborating Centers, WHO Reference Centers, and the PAHO Virtual Campus.

16. PAHO should consider convening a meeting with those who have practical experience in using capacity-building supports. One purpose would be to identify barriers to scaling up—such as costs and failing to connect the right people, institutions, and countries—and ways to overcome these barriers. Other purposes would be to support the preparation of proposals for funding and evaluating scaling-up initiatives; and to identify potential funders and support the matching of proposals to funders.

**Knowledge Translation**

17. To support evidence-informed policymaking, PAHO should continue to identify, integrate, and promote resources, tools, mechanisms and approaches to monitoring and evaluating of knowledge translation initiatives. Resources might include Access and Innovation for Health – Regional Platform, BIREME, and Health Systems Evidence; tools might include the SUPPORT tools and the list of essential online resources for policymaking; and mechanisms might include EVIPNet and the EVIPNet Secretariat.

18. PAHO should consider strengthening the knowledge translation function within the Bureau in order to better support work in countries and at the Bureau itself. It should also continue to identify ways to stimulate the demand for research evidence to support policymaking.

**Organization**

19. PAHO should continue to use mechanisms inspired by EVIPNet—such as policy briefs and policy dialogues as part of a rapid-response system—in order to support the work of other areas within the Bureau’s technical cooperation efforts and to support country activities.

20. PAHO should consider:

(a) Developing a plan of action to further operationalize the PAHO Policy on Research for Health.
(b) Preparing a semi-annual “report card” on implementation of the PAHO Policy on Research for Health and a process to seek input on the implications of that report card from the Advisory Committee on Health Research.

(c) Creating a Research Board—analogous to the Organization’s Learning Board and informed by its terms of reference, workflow, and evaluation—to support periodic discussions about tools and resources available to strengthen the use of research evidence in the Organization’s normative work. The board would also support discussions on synergies and opportunities related to research and the use of research evidence.

(d) Applying a cross-cutting approach, inspired by the Bureau’s Gender, Diversity, and Human Rights entity to support the consideration of research and research evidence in key aspects of the Organization’s work.

(e) Developing a resource mobilization plan to fund the scaling up of policy implementation.

21. All ACHR Members and other participants were asked to consider:

(a) Providing feedback on the draft of the World Health Report 2012.

(b) Promoting the World Health Report 2012 in their countries and sub regions and in the Region as a whole.

(c) Participating in the Second Latin American Conference on Research and Innovation for Health, the Global Forum on Health Research, and the Second Symposium on Health Systems Research, among other key forums on research for health planned in 2012.

Analysis

22. It is expected that the ACHR advisory services in the areas agreed upon will continue to: (a) support leadership and progress in the Organization’s research, (b) strengthen the production and translation of research findings for health in the Region, (c) strengthen management of research within the Organization, and (d) support the progressive development of national health research systems that contribute to health and equity in the Member States.

Proposal

23. The Director expressed interest in holding a new meeting in 2012 to introduce the incoming PASB Director to the Advisory Committee on Health Research, maintain the excellent dynamic and progress attained, and continue the productive harmonization and coordination with WHO and strategic partners. This will also allow for advancing the
development of a strategy and plan of action to complement PAHO’s Policy on Research for Health.

24. The principal matters emphasized during the debates were that significant progress has been made. There are well-defined tools, standards, and processes in place to enhance the governance of research for health and to scale up knowledge translation capacities in Member States and the Bureau. These advances present an excellent and unprecedented opportunity to scale up the integration of research into health policy and practice. This progress has given PAHO considerable visibility and enhanced its credibility. The meeting also allowed for making further contributions to the *World Health Report 2012*, which will focus on research for health. The report was scheduled to be presented at the Global Forum for Health Research from 24-26 April 2012 in Cape Town, South Africa but has been rescheduled for the Second Symposium of Health Systems Research in Beijing, 31 October-3 November 2012.

**Action by the Executive Committee**

25. The Executive Committee is invited to take note of this report and to provide any feedback that it considers relevant.

**References**

