How to enhance capacity for health policy and systems research?

While there is increased recognition of the importance of strong health systems to achieving health goals, many countries continue to struggle to build better health systems. A key underlying factor that inhibits their efforts is lack of knowledge about which health system strengthening strategies are effective, and limited ability to apply the knowledge that does exist. Capacity constraints at the country level lie at the crux of the problem. There is limited capacity in many developing countries to generate health policy and systems knowledge, to synthesize and disseminate it, and to apply such knowledge to the decision making process.

This topic (capacity for health policy and systems research) is the focus of the Alliance HPSR’s next Biennial Review. The Biennial Review is the flagship publication of the Alliance HPSR. It is intended to reach a broad audience including national authorities, research and training institutions, civil society organizations, international organizations and funders. The Biennial Review has an important role in mobilizing support for and raising the profile of an issue, as well as in providing guidance to those who wish to address the issue. This particular Biennial Review also has an important role to play in shaping a new capacity development strategy for the Alliance HPSR itself.

An initial brainstorming meeting to prepare for the review was held at the World Health Organization (WHO), Geneva in September and involved representatives from different regions, including both decision makers and researchers. Although capacity development strategies have traditionally focused on building the skills of individuals, there is increasing recognition that such a strategy is unlikely to be successful unless there is concomitant investment in creating well-run and well-funded organizations which are appealing places to work, and in strengthening links between different types of researchers and decision makers, thus promoting the policy-relevance of research.

Over the years, many different capacity development strategies have been pursued. For example, the International Health Policy Programme awarded grants to developing country individuals and research teams and required them to develop formal links with decision makers. Other initiatives have attempted to twin stronger research institutions with weaker ones. While some funders (such as the Swedish government) have provided long-term capacity development support for research in target countries, others have focused on establishing specific institutions or
functions; the UK Department for International Development, for example has provided support to the establishment of health policy units in several countries. How effective are these various strategies? Unfortunately the evidence is far from clear. As part of the preparatory process for its Biennial Review, the Alliance HPSR will be reviewing the evaluations that do exist, and using case studies to document what has happened in countries. We hope to begin to synthesize findings and provide systematic evidence about what works in terms of capacity development.

However the world is changing fast, and capacity development strategies which may have been effective a few years back are no longer necessarily so. What kind of innovative strategies should funders be experimenting with? What role is there for information communication technologies to facilitate capacity development. How can we take advantage of growing globalization? We are interested in hearing your views on these and other issues related to capacity development. Please send any ideas that you have on innovative and effective strategies for capacity development to: alliance-hpsr@who.int

Participants in the Alliance HPSR Brainstorming meeting

- **Andrew Green**, Nuffield Institute, Leeds, UK (technical editor)
- **George Gotsadze**, Curatio International Foundation, Georgia
- **Ainura Ibraimova**, Ministry of Health and the Mandatory Health Insurance Fund, Kyrgyzstan
- **Ravindra Rannan-Eliya**, Institute for Health Policy, Colombo, Sri Lanka
- **Delia Sanchez**, Grupo de Estudios en Economia, Organización y Políticas Sociales, Montevideo, Uruguay
- **Helen Schneider**, Centre for Health Policy, Witswatersrand University, South Africa
- **Freddie Ssengooba**, Institute of Public Health, Makerere University, Uganda
- **Goran Tomson**, Karolinska Institute, Stockholm, Sweden

Young Researcher grants awarded

In 2004, the Alliance HPSR awarded grants to 10 postgraduate teaching institutions to strengthen their teaching programmes in health policy and systems research. In 2006 the Alliance HPSR decided to award a further round of grants to institutions not supported in the first round and to include doctoral programmes within the remit of the award. The call for proposals was recently adjudicated by the Alliance HPSR Scientific and Technical Advisory Committee and six proposals were awarded funding. The table on the right presents the successful grantees and you can find out more about the plans and ambitions of two of them in the article below.

<table>
<thead>
<tr>
<th>Name of grantee</th>
<th>Institution</th>
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<tr>
<td>John Odaga</td>
<td>Martyrs University, Uganda</td>
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<td>Ngoc Phong Dao</td>
<td>Hanoi Medical University, Viet Nam</td>
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<td>Sudhakar Morankar</td>
<td>Jimma University, Ethiopia</td>
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<td>Blazeviciene Aurelija</td>
<td>Kaunas University of Medicine, Lithuania</td>
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<td>Ganbat Byamba</td>
<td>Health Science Institute of Mongolia, Mongolia</td>
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<tr>
<td>Maurice Bucagu</td>
<td>Rwanda School of Public Health, Rwanda</td>
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Successful applicants to the 2006 Young Researcher Grant Awards
Introducing the Young Researcher Grantees

The School of Public Health, Health Sciences University of Mongolia

Although it was only established in 2002, the School of Public Health at the Health Sciences University of Mongolia has been steadily building its student body. In 2007 it is anticipated that twenty three students will submit their Masters’ theses and eight students are currently working on PhDs. To-date however the Masters course has not included any specific curriculum on health policy and systems research. The grant from the Alliance HPSR will be used to develop a new elective module on health policy and systems research and support dissertation projects in this area.

Mongolia has recently been evolving towards a market based economy and this has led to a number of reforms in the health sector. Earlier this year the Mongolian parliament approved the National Health Sector Strategic Master Plan, which forms the basis for a new Sector Wide Approach (SWAp). Key elements of the Master Plan include focusing resources on rural, peri-urban areas and the poor, and in particular the implementation of an essential core package of services, developing public/private partnerships, and promoting governance and accountability.

The grant provided by the Alliance HPSR will not only support capacity development within the School of Public Health, but also help to build bridges into the policy arena. A one-day workshop with policy makers and administrators will be organized to convey the findings and recommendations of the student dissertations undertaken in the health policy and systems field, and cross-cutting executive summaries targeted at a policy maker audience will be prepared.

Dr Ganbat, Dean for Graduate Studies believes “that creating stronger health systems research capacity is critical in Mongolia because health policy and decision making at the moment is often not based on research evidence, moreover, academic studies are often not well linked to decision makers needs.”

The School of Public Health, National University of Rwanda

The Rwandan School of Public Health was also established in 2002 as a means to support the Ministry of Health and build capacity in the wake of the genocide, during which much professional capacity had been lost. Since 2002, twenty seven students have graduated from the Masters of Public Health programme, most of these students being health staff from the districts.

Staff at the school, such as Dr Maurice Bucagu, believe that the school has made an excellent start in terms of training, but that much more remains to be done in terms of the development of research capacity. This is why the grant from the Alliance HPSR can make a critical contribution. Rwanda’s health system is undergoing deep reform. For example, in terms of health financing, Rwanda has been rapidly rolling out a system of mutual health organizations; about 62% of the population are now covered by such schemes. Rwanda has also been innovative in the field of performance-based contracting with a large programme in this area being supported by the World Bank. Finally, the HIV/AIDS epidemic has had considerable impact on the health system, and particularly upon human resources. Health policy and systems research is needed in all of these areas in order to assess what is working and what is not.
As Dr Bucagu says: “most of these programmes started with little evidence about their impact….this grant will provide an evidence base, and this will help the Ministry of Health make the right decisions about the future of these programmes”.

Funding from the Alliance HPSR will be used to both strengthen health policy and systems research in the MPH curriculum and support student dissertations in this area. Compared to the level of external funding going to support health system reform in Rwanda, these grants are small, but they may nonetheless be key in terms of building local capacity and contributing to evidence-informed decision making.

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**Call for Southern Centres for systematic reviews**

A key objective of the Alliance for Health Policy and Systems Research is to: “Promote the dissemination and use of health policy and systems knowledge to improve the performance of health systems”. For many questions that health policy and decision makers might ask (What is the best way to extend financial protection to those seeking health care? How have health workers responded to alternative incentive mechanisms? Which strategies are most effective in terms of improving quality of care?) a substantial body of evidence exists, but this evidence is often scattered and not available in a form that decision makers find easy to appraise or use. Systematic reviews of health policy and systems research have the potential to reduce bias in the estimation of the effectiveness of a policy option, by identifying all relevant studies, selecting those that meet explicit criteria, appraising their quality, and synthesizing the results using a transparent process.

Systematic reviews offer considerable advantages to the decision maker. First, drawing on an existing systematic review constitutes a more efficient use of time for research users, enabling them to draw upon the research literature without having to comb through it themselves. Second, research users are less likely to be misled by results of a systematic review than a single investigation and can be more confident about what can be expected.

Over the last two decades, scientists have established a reasonable consensus regarding “best practice” for systematic reviews that inform clinical decision-making, as well as public policy-making regarding adoption, use and discontinuation of health technologies. These methods rely heavily on the use of hierarchies of levels of evidence with randomized controlled trials given the greatest weight. Statistical methods (meta-analysis) may or may not be used to analyse and summarise the results of the included studies. Yet in the field of health policy and systems research, relatively limited evidence is generated through randomized controlled trials. In such circumstances, systematic reviews must rely more heavily on approaches such as non-experimental (e.g, secondary data) analyses and qualitative research, controlled before/after studies and interrupted time-series studies.

The Alliance for Health Policy and Systems Research, in collaboration with the Oslo Satellite of the Cochrane Effective Practice and Organization of Care (EPOC) Group, the EPPI-Centre, the Institute of Education, University of London, and the Effective Health Care Research Programme Consortium, Liverpool School of Tropical Medicine, will shortly be issuing a call for proposals in order to identify four institutions in low and middle income countries to receive support for the conduct of systematic reviews of health policy and systems research. Of the four Centres to which grants will be awarded, three will focus on systematic reviews within specific thematic areas, namely (a) human resources for health (b) health financing and (c) role of the non-state (private) sector. The fourth grant will be awarded for the development of a Methodology Centre for systematic reviews of health policy and systems research in Low and Middle Income Countries.

Watch the Alliance HPSR website for the announcement, or email alliance-hpsr@who.int if you wish to be emailed a copy of the call.
An Alliance of Alliances: Working with the Global Health Workforce Alliance

The Global Health Workforce Alliance was launched in May this year and will seek to spur country action in implementing the ten-year health workforce Plan of Action set forth in The world health report 2006: Working together for health. The Secretariat for this new Alliance is hosted by the World Health Organization. Responding to the call by African Heads of State, the G-8 and the World Health Assembly for urgent solutions to the health workforce crisis, the Global Health Workforce Alliance will seek practical approaches to problems such as improving working conditions for health professionals by supporting country-led, multisector approaches to health workforce planning and management. It is also focusing on fast-tracking training and reaching more effective global agreements to manage challenges such as migration, fiscal space and alignment. The Health Workforce Alliance is also intended to serve as a global advocate, information hub and monitoring body.

Dr Francis Omaswa, Executive Director of the Global Health Workforce Alliance, has approached the Alliance for Health Policy and Systems Research to explore ways in which the two organizations can work together to achieve their shared goals of strengthening evidence in the field of human resources for health. As a first step the Alliances will collaborate in identifying priority research questions in this area. It is planned to combine country level consultations with decision makers, and reviews of the published and unpublished literature, to identify the burning questions of policy and decision makers, that require further research or knowledge synthesis. Joint dissemination of evidence and knowledge is proposed as a further joint area of work between the two Alliances.

Do you have views about research priorities with respect to the health workforce or have you already conducted research priority setting in this area? We would love to hear your voice. Should the research community be focusing on strategies to motivate health workers, lessons about how to retain health workers in rural areas, accreditation of private medical schools, or appropriate ways in which to deploy lay health workers? Please respond to alliance-hpsr@who.int. All contributions will be acknowledged.

- ALLIANCE FOR HEALTH POLICY AND SYSTEMS RESEARCH
  World Health Organization in collaboration with the Global Forum for Health Research

We welcome your comments and suggestions on any of the topics covered in this newsletter and relating to the Alliance HPSR in general. If you would like to subscribe/unsubscribe to this newsletter please email us at alliance-hpsr@who.int. See our full contact details below:

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Launch of Global Health Initiatives Network (GHIN)
A new research network focusing on the effects of the Global Health Initiatives on health systems has been launched. The network covers researchers in 12 different developing countries, six of whom are funded by the Alliance HPSR. The GHIN network builds on previous initiatives such as the System Wide Effects of the Fund Network (SWEF). The new website launched by the network has a host of good resources for those interested in global health initiatives and their effects: http://www.ghin.lshtm.ac.uk

REACH initiative Partners Conference
The Regional East African Community Health Policy Initiative (REACH) held a partners’ conference in Arusha Tanzania from 10-12 October. The REACH initiative aims to improve people’s health and health equity in East Africa through more effective use and application of knowledge to strengthen health policy and practice. The initiative, housed in the East African Health Research Council in the East African Community, will synthesize, package and communicate evidence required for policy and practice, and for influencing policy relevant research agendas in the region. For more information about the initiative contact Dr Stanley Sonoiya at sonoiya@eachq.org

Renew your partnership with the Alliance HPSR
As part of the overhaul of the Alliance HPSR website, we are revamping the partners database and are asking all existing partners to visit the website and update their profiles. The changes being made to the partners database are designed to make it easier to search and use. Check out the changes across the website at the same time: www.alliance-hpsr.org

iHEA Deadline for Abstracts
The deadline for submission of abstracts for the next conference of the International Health Economics Association falls on November 15 2006. The conference will take place in Copenhagen next year, July 8-11. See http://www.healtheconomics.org/congress/2007 for more details.

Opportunities for Health Policy and Systems Research under GAVI
The Global Vaccine Alliance is about to open two new windows relevant to health policy and systems research. The innovations window is being developed to help stimulate innovative thinking and research concerning how best to overcome the obstacles to immunizations. Discussions are also ongoing regarding opportunities for operational and evaluative research as part of the GAVI health systems facility now being planned. Watch the GAVI web site for more information: http://www.gavialliance.org

New satellite of the Cochrane, Effective Practice and Organization of Care Group launched with a focus on middle and low income countries
Systematic reviews are the best source of information about the effects of alternative policy options, but they are often not available, up-to-date or easily accessible to decision makers. A symposium in Oslo on November 10th will launch the Oslo Satellite of the Cochrane Effective Practice and Organisation of Care Group. The group will focus on supporting the production and updating of Cochrane reviews that address health systems questions relevant to low and middle income countries. For more information contact: elizabeth.paulsen@kunnskapscenteret.no

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