Draft resolutions deferred from the Fifty-ninth World Health Assembly and the 118th session of the Executive Board

WHO’s role and responsibilities in health research

Report by the Secretariat

1. Research plays a crucial role in improving global health and health equity by developing and evaluating interventions, empowering people to alter unhealthy behaviours and informing decision-making in health. It is one of WHO’s functions, as set out in its Constitution, namely, “to promote and conduct research in the field of health” (Article 2(n)).

2. WHO has a long tradition of being engaged in research on health issues and in building health-research capacity in developing countries. It has taken a strong leadership role in supporting the development of key interventions, disseminating research findings, setting norms and standards, promoting partnerships and engaging in high-level advocacy for research, as exemplified by its convening of the Ministerial Summit on Health Research (Mexico City, 16-20 November 2004). In particular, research to strengthen health systems is fundamentally important for achieving the internationally agreed health-related development goals, including those contained in the United Nations Millennium Declaration, improving performance of health systems, advancing human development, and attaining equity in health.

3. In response to resolution WHA58.34 on the Ministerial Summit on Health Research, the Secretariat drafted a position paper describing WHO’s role and responsibilities in the area of health research on the basis of an initial assessment of WHO activities in this area.¹ The main points of the paper are set out below. The paper was discussed by ACHR at its forty-fifth session.² The Committee noted that the paper should recognize ACHR’s overview function for health research within WHO, emphasize the importance of health-systems research, and acknowledge that research functions may vary at different levels of the Organization.

4. The paper concluded that WHO’s primary responsibility is to lead by example – applying best practices in use of research evidence in its own recommendations – and ensuring that ethically sound research is an integral part of all its technical programmes. WHO’s role and responsibilities in health research are underpinned by several principles. These include a commitment to using knowledge

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¹ Document ACHR45/05.16 (available on request).
² See document EB117/37.
gained from appropriate review of existing research that may contribute to improving health, generating essential tools, and evaluating the quality and usefulness of interventions, methodologies, and programmes; to strengthening the role and functioning of cosponsored research programmes, such as those in reproductive health and tropical diseases, in areas that are of particular significance to developing countries and for which coordinated global action is required; and to ensuring that all research pursued within the Organization is relevant to the needs of those planning, working in, and using health services, especially neglected populations. In collaboration with key stakeholders, including research sponsors, industry, and civil society, the Organization is dedicated to building long-term and sustainable capacity for health research and use of its findings in order to promote health, prevent and control diseases, strengthen health systems, and improve equity in health.

5. Working through ACHR, the cosponsored research programmes (whose budgets are determined by Member States), and all technical programmes involved in operational research (which, in turn, informs standard-setting), the Organization plays an important role in a number of areas. These include not only promoting and providing support for health research and the use of findings in health decision-making, but also influencing and building consensus on the global health research agenda; addressing potentially controversial and neglected research issues; gathering, consolidating and disseminating research findings; and building public trust in, and support for, health research.

6. Examples of direct involvement in health research include the work carried out at IARC and at the WHO Centre for Health Development in Kobe, Japan. IARC’s mission is to coordinate and conduct research on the causes of human cancer and the mechanisms of carcinogenesis, and to develop scientific strategies for cancer control. The Centre for Health Development was established as an integral part of WHO in 1995 under a 10-year Memorandum of Understanding with Japanese partners, which was recently extended for another 10 years. Over this period the Centre will focus on the work of optimizing the impact of social determinants of health on exposed populations in urban settings. The recent selection of the Centre as the hub of the Knowledge network on urban settings of WHO’s Commission on Social Determinants of Health complements this focus. With its action-oriented research approach, the Centre aims to have an impact by using municipal-level interventions to promote health and respond to the perceived needs of those populations. This research focus recognizes the growing importance of urbanization as a driving force and the central role that cities play in modernization and social change.

7. Based on an analysis of constraints, barriers, gaps, and needs, some aspects of WHO’s involvement in health research could be further enhanced, including strengthening of the research culture within the Organization, setting of standards for various procedures related to research (such as ethics and peer reviewing, prioritizing, and assessing relevance), use of research findings (including their dissemination and application in guidelines and recommendations), and better access to consolidated information. In these areas the efforts of stakeholders and partners, such as those in the private sector, sponsors of research, and civil society complement and provide support to those of the Organization.

8. In May 2006, the Fifty-ninth World Health Assembly discussed the subject. Member States made many comments and suggestions on WHO’s role and responsibilities in health research, but agreed to refer the matter to the Executive Board at its session in January 2007. Amendments proposed by Member States during the discussion have been incorporated in the draft resolution set out below.

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1 Document WHA59/2006/REC/3, summary records of the fourth and fifth meetings of Committee B.
ACTION BY THE EXECUTIVE BOARD

9. The Executive Board is invited to consider the following draft resolution:

The Executive Board,

Having considered the report on WHO’s role and responsibilities in health research,¹

RECOMMENDS to the Sixtieth World Health Assembly the adoption of the following
resolution:²

The Sixtieth World Health Assembly,

Recalling resolution WHA58.34 on the Ministerial Summit on Health Research;

Having considered the report on WHO’s role and responsibilities in health research;

Acknowledging the critical role of the entire spectrum of health and medical research in
improving human health;

Recognizing that research into poverty and inequity in health is limited, and that the ensuing
evidence is important to guide policy in order to minimize gaps;

Reaffirming that research to strengthen health systems is fundamental for achieving
internationally agreed health-related development goals, including those contained in the United
Nations Millennium Declaration;

Noting in particular the work of IARC, the WHO Centre for Health Development, the
UNICEF/UNDP/World Bank/WHO Special Programme for Research and Training in Tropical
Diseases, and the UNDP/UNFPA/WHO/World Bank Special Programme of Research, Development
and Research Training in Human Reproduction;

Convinced that research findings and data derived from effective health-information systems
should be used to inform decisions about the delivery of interventions to those who need them most;

Mindful that the Organization should lead by example in the use of research findings to inform
decisions about health;

Reaffirming the role of WHO’s cosponsored research programmes in support of neglected areas
of research relevant to poor and disadvantaged populations, and recognizing the contributions of WHO
to strengthening research capacity;

Committed to ensuring ethical standards in the conduct of health research supported by the
Organization,

¹ Document EB120/14.

² See document EB120/14 Add.1 for the administrative and financial implications for the Secretariat of this
resolution.
1. URGES Member States to mobilize the necessary scientific, social, political and economic resources in order:

(1) to consider implementing the recommendation made by the Commission on Health Research for Development in 1990 that “developing countries should invest at least 2% of national health expenditures in research and research capacity strengthening, and at least 5% of project and programme aid for the health sector from development aid agencies should be earmarked for research and research capacity strengthening”;¹

(2) to develop and strengthen resource-tracking tools in order to monitor the expenditure on health research from government and donor sources, and to disseminate research findings to policy-makers, civil-society entities and the general public;

(3) to integrate research in the mainstream of national programme activities and plans, and to promote wider access to research findings;

(4) to strengthen the capacity of national and institutional ethics committees that review health-research proposals;

(5) to draw up or strengthen health-research policies and health-research legislative documents;

(6) to create a sustained training programme for research managers and to facilitate a cadre of trained professionals to manage health research;

(7) to improve the career management of researchers who do not necessarily come under the authority of the ministry responsible for research;

(8) to strengthen national research capacities in the following complementary areas: generation of new knowledge, human and financial resources, research institutes, and use of research findings in policy decisions, and to foster national and international networks for research collaboration;

(9) to develop and strengthen a participatory mechanism for all stakeholders in order to prioritize the health-research agenda based on the basis of dynamic changes in health systems, disease burden, and emerging health-related issues.

2. CALLS UPON the health-research community, other international organizations, the private sector, civil society and other concerned stakeholders to provide strong, sustained support to research activities across the entire spectrum of health, medical and behavioural research, especially research into communicable diseases and poverty and inequity in health, with the participation of communities and in keeping with the national priorities, and to maintain support of activities that promote the use of research findings to inform policy, practice and public opinion;

3. REQUESTS the Director-General:

(1) to strengthen the culture of research for evidence-based decision making in the Organization and to ensure that research informs its technical activities;

(2) to develop a reporting system on WHO’s activities in health research;

(3) to improve coordination of research activities, including integration of research into disease control and prevention;

(4) to review the use of research evidence for major policy decisions and recommendations within WHO;

(5) to establish standard procedures and mechanisms for the conduct of research and use of findings by the Organization, including registration of research proposals in a publicly accessible database, peer review of proposals, and dissemination of findings;

(6) to promote better access to research findings;

(7) to provide support to Member States to develop capacities for health-systems and health-policy research;

(8) to provide technical support to Member States for strengthening the capacity of national and institutional health-research ethics committees; reviewing complex research protocols; and drafting national health policies and health-research legislative documents;

(9) to continue to decentralize competencies and resources to countries and regions in order to provide better support in recognizing and maximizing health research as a key factor in the development of health systems, in particular in developing countries;

(10) to formulate simple priority-setting strategies for health research for use by national governments;

(11) to institute appropriate systems and mechanisms for greater interaction and convergence among researchers and users of research in order to improve use of research findings and to enhance framing of health policy;

(12) to provide capacity-building opportunities in health economics, economic impact of disease and costing of various interventions to help identify the most suitable ones for a country to optimize its health-system delivery;

(13) to monitor and report to Member States the total expenditure on health research by country and region, by public and donor sources, and by type of expenditure;

(14) to submit to the Sixty-second World Health Assembly a strategy on the management and organization of research activities within WHO, and on support provided to countries in organizing health research when required.

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