

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 its 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 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

¹ Document ACHR45/05.16 (available on request).

² See document EB117/37.

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 2007.¹ Thus, the Board at its 120th session considered the above report and adopted an amended draft resolution, which recommended adoption of a resolution to the Health Assembly.²

¹ Document WHA59/2006/REC/3, summary records of the fourth and fifth meetings of Committee B.

² See document EB119/2006–EB120/2007/REC/2, summary record of the eleventh meeting of the 120th session and the twelfth meeting of the 120th session, section 3.

ACTION BY THE HEALTH ASSEMBLY

9. The Health Assembly is invited to consider the draft resolution contained in resolution EB120.R15.

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