REGIONAL STRATEGY ON RESEARCH FOR HEALTH

2018-2022
Regional Strategy on Research for Health


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<td>Advisory Committee on Health Research</td>
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<td>Intellectual Property Rights</td>
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<td>MDGs</td>
<td>Millennium Development Goals</td>
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<td>MONITOR</td>
<td>Monitoring of Novel Ideas and Translation of Research in Health</td>
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<td>NCD</td>
<td>noncommunicable diseases</td>
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<td>RMNCAH</td>
<td>reproductive, maternal, neonatal, child and adolescent health</td>
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<td>SDGs</td>
<td>Sustainable Development Goals</td>
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<td>SEA</td>
<td>South-East Asia</td>
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<td>SEAR</td>
<td>South-East Asia Region (of WHO)</td>
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<td>TAG</td>
<td>technical advisory group</td>
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Pathways for assuring success
Research is WHO’s constitutional mandate. In May 2005, the World Health Assembly adopted a resolution on strengthening knowledge translation mechanisms, which was followed by the approval of the WHO Strategy on Research for Health at the Sixty-third World Health Assembly in May 2010. Our Region has not lagged behind. At the WHO Regional Office for South-East Asia, we have prioritized some areas of health and identified eight of them as Flagship Areas with the aim of achieving the Sustainable Development Goals.
I am pleased to present the Strategy on Research for Health in the South-East Asia Region (2018–2022), which is designed to foster research in the Region over the next five years. This Regional Strategy hopes to guide the Region forward beyond generation of knowledge to utilization of knowledge for the public good by keeping at its heart the value of harnessing science, technology and broader knowledge for improving health.

Research plays a key role in successful achievement of the goals of the Flagship Areas, as it is through research questions and research findings that we are able to provide answers that enable evidence-based actions. Being aware of the different capacities for conducting research in Member States of the Region, the Regional Strategy has stressed on assessing and building this capacity as its first objective. At the same time, recognizing that the Region’s researchers have carried out valuable work in a wide variety of disciplines, the Strategy aims to facilitate research through the cycle of knowledge generation, translation and conversion to public goods.

The Regional Strategy has moved a step further and emphasized on the impact of research, which means not just reaching research results, but rather converting these research results into policies, practices and products and transforming them into public goods, i.e. the true translation of research. The Strategy has also focused on strengthening the research environment in the Region by developing enablers of research on health.

The Regional Office and country offices will work together with scientists in different Member States of the Region to realize this vision by bringing together different players – researchers, policy-makers, industry and potential donors. Resource mobilization is essential and I along with my colleagues at WHO will concentrate our efforts to ensure that this is done in a more effective manner.

I gratefully acknowledge the role played by various scientific experts and members of the Advisory Committee on Health Research (ACHR) in conceptualizing and developing the Regional Strategy and providing constructive inputs, which have helped in finalizing the Strategy.

I look forward to working together with all concerned in the Region to ensure that the Regional Strategy is taken forward.

Dr Poonam Khetrapal Singh
Regional Director
PROMOTING RESEARCH FOR HEALTH

A core aspect of WHO's responsibilities
The World Health Organization’s constitutional objective, requires that science, technology and broader knowledge be harnessed to produce high-quality research for improving health worldwide. Article 2 of WHO’s Constitution mandates the Organization to “promote and conduct research in the field of health”. One of WHO’s six core functions is to “shape the research agenda and stimulate the generation, translation and dissemination of valuable knowledge”. This was also echoed by the World Health Assembly in May 2005, which approved a resolution urging Member States to proactively transfer knowledge to practice by establishing or strengthening knowledge translation mechanisms.

In May 2010, the WHO Strategy on research for health was approved by the Sixty-third World Health Assembly and it emphasizes that the term “research for health” – rather than the traditional, narrower term “health research” – underscores the recognition that research undertaken outside of the health sector (such as in agriculture, food and nutrition, urban development, water and sanitation, etc.) can have a major beneficial impact on the health sector and on health outcomes.

The global Strategy delineates WHO’s roles in research for health, as well as the responsibilities of Member States. It also provides a framework for formulating regional strategies.
FOCUSSING on the Region's Agenda on Research for Health

WHO's Regional Office for South-East Asia drafted a Regional Strategy on Research for Health for the period 2012–2016, which provided a framework for research for health in the Region.

The current Regional Strategy was developed based on the recommendation of the 35th session of the South-East Asia (SEA) Advisory Committee on Health Research (ACHR) held in October 2017. The Strategy covers a five-year period from 2018 to 2022 and responds to the emergence of new goals, opportunities and challenges globally and in the Region.

The Strategy aims to support research in the Region’s eight Flagship Priority Areas (Box 1). These are rooted in the Sustainable Development Goals (SDGs) and address the key public health needs of the Region’s Member States.
**BOX 1: Flagship Priority Areas of the WHO South-East Asia Region**

8 flagship priority areas to implement

- Measles elimination and rubella control by 2020
- Prevention of noncommunicable diseases through multisectoral policies and plans with focus on "best buys"
- The unfinished MDGs agenda: Ending preventable maternal, newborn and child deaths with focus on neonatal deaths
- Universal Health Coverage with focus on human resources for health and essential medicines
- Building national capacity for preventing and combating Antimicrobial Resistance
- Scaling up capacity development in emergency risk management in countries
- Finishing the task of eliminating diseases on the verge of elimination (Kala-azar, Leprosy, Lymphatic Filariasis and Yaws)
- Accelerating Efforts to End TB by 2030
VISION

Generate quality evidence, knowledge and innovations to accelerate health for all in the SEA Region.

MISSION

Catalyse partnerships to harness science, technology and knowledge to translate products, policies and practices, and convert them into goods that benefit public health.
A strategic roadmap for RESEARCH FOR HEALTH in the South-East Asia Region

The Regional Strategy on Research for Health (2018–2022) adapts the WHO Strategy on research for health to the specific priorities and opportunities that characterize the South-East Asia (SEA) Region today. It aims to achieve the health goals of the SDGs on time, including the milestones for 2020 and the Regional Flagship Areas, generate the necessary evidence for action, demonstrate and conduct implementation research, facilitate research capacity and investment, and translate research into available and accessible public goods through addressing the enablers.

Guiding Principles

1. QUALITY. Research has to be sound, ethical, peer-reviewed, efficient, effective, accessible to all, and monitored and evaluated.

2. IMPACT. Priority should be accorded to research and innovation that have the greatest potential to improve health outcomes, redress health inequities and help attain the SDGs.

3. INCLUSIVENESS. The Regional Strategy supports inclusive involvement of all sectors in producing research-based evidence, knowledge and innovation for health. It also emphasizes the importance of regional and global cooperation, and the vital roles of governments, development partners, the private sector, civil society and communities in contributing to research for health.
The Regional Strategy also emphasizes the entire spectrum of research, to which the Region’s Member States strongly contribute, for the development of future products and practices.

**Strategic objectives:**

The Regional Strategy identifies four strategic objectives. The framework for these is provided in Fig. 1:

1. Facilitate strengthening of research capacity and adherence to good research practices.

2. Catalyse prioritization, conception and conduct of research.

3. Enable translation of research evidence into products, policies and practices (the “3Ps”).

4. Support the conversion of 3Ps into goods that benefit public health.
Facilitate strengthening of research capacity
- Research policies
- Infrastructure and good human resources
- Investment
- Best research practices

Catalyze prioritizing, conceiving and conducting Research

Enable translation of research evidence

**POLICY**

**PRODUCT**

**PRACTICE**

Adoption
- Pre-qualification
- Generating Demand
- Regulations
- Intellectual Property Rights
- Scaling up

Converting 3Ps into PUBLIC GOODS

- Productization
- Quality
- Availability
- Accessibility
- Affordability

3Ps: Policy; product and practice
STRATEGIC OBJECTIVES

- Facilitate STRENGTHENING of research capacity
- Catalyse PRIORITIZATION, CONCEPTION AND CONDUCT of research
- Enable TRANSLATION of research evidence
- Support CONVERSION of evidence (3Ps) into public goods

3Ps: Policy; product and practice
Facilitate strengthening of research capacity and adherence to good research practices

Based on the health research capacity assessment framework, countries will be classified into four stages (Fig. 2) depending on the strength of their ability to conduct and analyse research, and to translate research into the 3Ps and public goods. Countries may be supported to enhance their capacity according to need so that research is conducted following good research and ethical practices. Investment for capacity-building and research will require concerted efforts, for which researchers and funders will be connected.

WHO will

• Assess research capacity of member states using the health research capacity assessment framework
• Develop a country specific research capacity strengthening plan in consultation with member states based on the framework
• Connect researchers with funders

Within the five years

• Baseline assessment of research capacity for all member states completed using the tool adopted by ACHR
• Each member state attained a measurable advancement from baseline
• Regional capacity building plan for the member states developed
Basic needs of a strong health research structure

- Guiding document or Road map - National Health Research Policy or strategy document, including resource mobilization strategy
- National Committee or Council to lead and guide the national research agenda
- Department/Unit of Health Research within Ministries with dedicated staffs (statistician, economist, public health specialist and policy analyst)
- Observatory of ongoing research, research products and publications
- Research result dissemination platform
- Best practices for research: Ethics review committee
Catalyse prioritization, conception and conduct of research

Research ideas designed to answer key questions related to SEARO’s eight Flagship areas (Box 2) and other national needs will need to be prioritized, proposals developed and carried forward.

WHO will

- Connect scientists from across the region with programme managers, policy makers and other stakeholders to prioritize research agenda
- Facilitate development of multi-country studies in the prioritized areas
- Assist member states in development of roadmap for implementation of prioritized research agenda
- Establish a WHO SEA Regional MONITOR (Monitoring of Novel Ideas and Translation of Research in Health) that will act as one stop shop for stakeholders to find knowledge and information regarding the identified domains
- Facilitate partnerships of existing biobanks across the region and connect with key researchers to promote sharing of samples and data

Within the next five years

- Prioritised areas of research developed in SEAR through Regional consultation
- Roadmaps for implementation of prioritized research agenda developed through national consultation
- Partnerships created between existing biobanks and key researchers
**Box 2.** Research priority areas under the WHO SEAR Flagship areas

**Prevention of noncommunicable diseases through multisectoral policies and plans with a focus on “best buys”**
- Evaluating the effectiveness of delivery of essential NCD health service delivery at the primary health care level to achieve the SDG NCD targets
- Innovative and cost-effective solutions for urban health and role of rural-urban movements

**Universal Health Coverage with focus on human resources for health and essential medicines**
- Number and distribution of the healthcare workforce in frontline services
- Financial risk protection and allocation of resources to advance UHC

**The unfinished MDGs agenda: Ending preventable maternal, newborn and child deaths with a focus on neonatal deaths**
- Identifying challenges to scaling up of kangaroo mother care
- Identifying challenges in improving point-of-care quality testing at birth for better maternal and newborn health outcomes
- Analysing the cost–benefit effect of supporting reproductive, maternal, neonatal, child and adolescent health (RMNCAH)

**Measles elimination and rubella control by 2020**
- Point-of-care testing devices
- Economic evaluation of measles elimination in the WHO South-East Asia Region
- Incidence of non-measles non-rubella cases of fever and maculopapular rash
Enable translation of research evidence into products, policies and practices (the '3Ps')

Research for health emanating from scientists and researchers needs to be translated into the three interrelated areas of products, policies and practices (the 3Ps). Each of the 3Ps is defined below:

- **Product** - research for health that leads to the development of new products, whether therapeutics, vaccines, diagnostics, sampling methodologies and so on.

- **Policy** – research for health that leads to the modification or development of existing or new guidelines, strategies and policies.

- **Practice** – for instance, research for health that leads to a better understanding of how to raise access or improve the quality of services, how to make programmes more cost-effective, or how best to utilize or incorporate new technologies.

**WHO will**

- Identify candidate 3Ps from promising evidence of research through the MONITOR

- Foster translation through market place mechanism

**Within the next five years**

- MONITOR enabled

- Marketplace created to connect all stakeholders (researchers, manufacturers, funders and end users) of research outcomes
Translating research evidence

Policy

Product

Practice
Support conversion of 3Ps into goods that benefit public health

Converting the 3Ps resulting from research for health into public goods is of vital importance to ensure that research has as large and beneficial impact as possible. Investment will be required for converting 3Ps in to public goods.

For policy and practices to become public goods, the following need to happen:

- uptake of the policy
- development of programmatic guidelines

For product to become public goods they must be

- easily available
- affordable
- accessible
- maintain quality

WHO will

Foster mechanisms for adoption of policies; scaling up of practices/guidelines; Pre-qualification, regulation... for products

By 2022

Key research products (3Ps) adapted as public goods under the prioritised research areas
PATHWAYS FOR ASSURING SUCCESS

The strategy’s success will depend on:

1. Strengthened research secretariat within WHO SEARO - The secretariat will need strengthening and more resources to fulfil its roles and functions such as linking public health priorities of the region; research capacity identification; generating inputs from Technical Advisory Groups and interaction with international research organizations.

2. Nurturing of research culture in WHO SEARO departments will be required to pay increased attention to research issues.

3. Monitor research investment -

4. Establishing health research fund - A regional common financing fund would enable rapid and adequate support for priority health research. The fund could pool finances from Member States, development partners, and traditional and newer donors. It could be managed as a special purpose vehicle by a designated development partner/donor or, alternatively, by the Regional Office. Financing would be available for any stage of research, from initial seed grants to clinical trials and implementation/impact studies.

5. Productive linkages needs to be built between ACHR, various TAGs and task forces through structured sharing of information, workplans and strategies. This will enable coordination and help avoid duplication.