Report on Meeting of the Scientific Working Group (SWG) on Management and Coordination of Health Research Activities in the Countries

Bangkok, Thailand, 6-8 October 1999

World Health Organization
Regional Office for South-East Asia
New Delhi
January 2000

Contents

1. INAUGURAL SESSION

The meeting of the Scientific Working Group (SWG) on management and coordination of health research activities in the countries was organized at the College of Public Health, Chulalongkorn University, in Bangkok, Thailand, from 6-8 October 1999. Eight SWG members and two special invitees attended the meeting (*see Annex 1 for list of participants*). Professor Charas Suwanwela, Chairperson of SWG, in his inaugural address, recounted the emergence of this group of scientists as a follow-up of the Joint WHO/ACHR/MRC meeting held at Colombo, Sri Lanka, in April 1998. He emphasized the role of national medical research councils (MRC) and the need to make them more dynamic and responsive in promoting research in the Region. He informed the SWG members that preparatory activities had been started to conduct a Regional Workshop on "National and Regional Mechanisms for Improving Health and Equity in Rapidly Changing Paradigms: Role of Research and Management in Asian Countries," in Manila early next year. This regional workshop would be co-sponsored by WHO, the Council on Health Research for Development (COHRED), the Global Forum for Health Research and the World Bank. It would serve as a stepping stage to derive "Asian Voice" to the "International Conference on Health Research for Development", to be organized in Bangkok in October 2000. He hoped that the output of this SWG meeting would also serve as an important part of the preparation to the February 2000 meeting in Manila. He concluded that important tasks for discussion on management and coordination of health research activities lay ahead for this SWG.

Dr Brian Doberstyn, WHO Representative in Thailand, read the opening address of Dr Uton Muchtar Rafei, WHO Regional Director for South-East Asia *(see Annex 2 for full text of the speech)*. Dr Uton highlighted the importance of this SWG which should look into the management and coordination issues in health research in the countries of the Region with a view to promoting more research and development activities within the framework of regional health declaration for health development in the 21st century. He reiterated the proposed terms of reference of this scientific working group, which were:

- To identify priority health research management and coordination issues (and information required) at the national level;

- To identify good health research management and coordination practices in the countries;

- To develop framework and guidelines for health research management and coordination at country and regional levels, and

- To develop plan of actions to improve health research management and coordination practices in the Member Countries.

Dr Uton stated that the group should clearly make a useful, potentially catalytic contribution towards improving health research management in the countries of this Region. In developing guidelines, as well as plans of action for their implementation and evaluation, a balance should be sought between normative work and regional specificity. Such a balance would help ensure that the product of the work not only stood up to scrutiny, but also was, relevant to the needs of the countries in the Region. He said that the role of MRC/ACHR was to include the promotion of health research in priority areas and coordination of international efforts in health research. MRC should also assist in establishing better research management practices in their respective countries. He then welcomed the members of SWG.

2. INTRODUCTORY SESSION

Dr Myint Htwe, Regional Adviser on Medical Research, WHO/SEARO, briefed the members emphasizing the objectives and expected output of the meeting. He said that the discussion would focus on the identification of priority health research management and coordination issues, good research management and coordination practices in the countries. This would lead to the development of framework and guidelines for health research management and coordination at country and regional levels. Together with this framework, plan of actions to improve health research management and coordination practices would be formulated. He also highlighted the reform process, especially in research policy and cooperation, occurring at WHO/HQ and the Regional Office. He then informed the SWG members that there would be increased involvement of national expertise in promoting health research in the Region.

Members of SWG and the Secretariat of the meeting introduced themselves in the meeting. The meeting agenda *(Annex 3)* and working schedule *(Annex 4)* were adopted. Professor Umar Fahmi Achmadi (Indonesia) was elected Vice Chairman for the meeting. A report-drafting group comprising Prof. Chitr Sitthi-amorn, Prof. Sahajada Chowdhury, Dr S.A.P. Gnanissara, and the WHO Secretariat was formed.

3. BUSINESS SESSION

3.1 Presentations

The business session started with a series of presentations by the SWG members. Following each presentation, a brief clarification and discussion ensued. All the background papers are available in WHO/SEARO. *(See Annex 5 for the List of Documents)*.

Dr R. Ravi (ICMR, India), started the presentation on "Development of Research Culture in the country", based upon the experience of the Indian Council of Medical Research (ICMR). ICMR, which was first established in 1911 as the Indian Research Fund Association, has expanded and now has 27 permanent research institutes and centres addressing specific health problems in the country. ICMR is the national apex body responsible for executing, directing and coordinating health and biomedical research in India. The scientific advisory board of ICMR is the highest technical body to review and advise on the work of ICMR, including research policy, agenda and strategies. ICMR and its institutions/centres played a pivotal role in promoting research culture in India. It also created networks of research and academic institutions throughout India and abroad to promote and develop research activities that were relevant not only to India but also to the world. Many research studies carried out in India, especially in the area of reproductive health and communicable and noncommunicable disease control, had influenced the policies and strategies for health development at the global level. ICMR worked closely with the Ministry of Health and Family Welfare and national apex academic institutions in developing appropriate human resources to strengthen research capability. The most recent experience of making outward-looking work of ICMR was on drafting new guidelines for ethics for

health research on human subjects. A series of public debates and scientific review forums, participated by scientific community, lawyers, consumer forum and representatives of governmental and nongovernmental organizations, were organized to arrive at a national consensus on ethical guidelines. Dr Ravi also touched upon the declining government budget allocations to ICMR and its institutions. The recent directive given was that ICMR and its institutions have to raise their own resources by undertaking sponsored research and technical assistance services.

Professor Chitr Sitthi-amorn (College of Public Health, Chulalongkorn University, Thailand), in his presentation on "Mobilization and Management of Resources, including Resource Flows for Health Research," briefed the members on the experience of a Thai study. He indicated that the research and development (R&D) investment was still low (around 0.12 per cent of GDP) and the R&D expenditure, as a percentage of the overall government expenditure, was less than 1 per cent. The latest analysis estimated that the number of researchers per 10 000 population was around 1. Comparatively, Thailand spent the lowest amongst East Asian Tiger countries. However, the magnitude of investment had been increased from US$ 140 million in 1996 to 150 million in 1997, and, at the same time, the percentage of resources for health research against total resources for research and development had increased from 6 percent in 1996 to around 9 percent in 1997. Of those health research funds, majority came from the Ministry of Public Health (39%) and academic and research institutions (28%). Research funds also came from pharmaceuticals (6%), hospitals (5%), and foreign sources (5%). The research areas being used for the above funds were clinical research (27%), biomedical research (11%), social sciences (28%), epidemiological studies (5%) and natural sciences (7.5%) among others. Most of the expenditure had been spent on the current items. This study clearly showed a lot of potential for improving resource mobilization, resource allocations and also the need for continuous monitoring of resource flows and utilization.

Dr U Soe Thein (Department of Medical Research, Lower Myanmar), in his presentation on "Ethical Review, Peer Review and Technical Review of Research Proposals", briefly described the current status and gaps in ethical review of research proposals in Myanmar. The Department of Medical Research, under the Ministry of Health, is the principal organization which sponsors and conducts health research in the country. The Ministry of Health

has recently created another department to be responsible for health research in Upper Myanmar. In addition, there are other departments within the ministry responsible for health, traditional medicine, health planning and medical sciences; thus there is a need to coordinate and manage health research by an apex body. The National Health Research Board or Health Research Council would need to take over the function of coordination. Teaching of medical ethics was undertaken at undergraduate and postgraduate levels. Recently, this aspect was reviewed and the opinion was that the education programme on ethics, especially imparting knowledge and skill on ethical and human values, needed to be strengthened. There were two levels of ethical committees, one at the national and the other at the institutional level. A National Ethical Committee on Clinical research, chaired by Deputy Attorney-General has been in existence since 1992. Except rare cases for reference to the National Committee, Institutional Ethical Committees did most of the ethical clearance. National Ethical guidelines needed to be further improved with wider participation of the scientific community, legal experts and consumers at large. Dr U Soe Thein also touched upon the technical and peer review mechanisms at institutional and national levels. An appropriate national guideline on peer review should be developed. Appropriate monitoring mechanisms need to be established to ensure technical quality of the research projects.

Dr S.A.P. Gnannissara (Ministry of Health and Indigenous Medicine, Sri Lanka), presented the topic on "Development of Human Resources for Health Research including Research Capacity Building". He stressed the significant role played by the policy-makers, planners, health researchers, academicians and support personnel, in the health research development process. In order to develop appropriate human resources for health research, Dr Gnannissara indicated three main strategies, i.e. (1) consensus development and training initiatives for health policy-makers, planners, programme managers, health researchers and academic staff; (2) institutional and organizational capacity building, especially establishment of adequate institutional infrastructure; (3) enhancing collaboration amongst research institutions; and (4) strengthening mechanisms for funding research activities. The Sri Lankan experience also showed that the government allocation for health research was usually small and inadequate.

Professor Sahajada Chowdhury, National Institute of Preventive and Social Medicine, Bangladesh, in his presentation on "Coordination of Health Research among Researchers, Research Institutes, Universities and Ministries," discussed the important role of national medical/health research councils in managing and coordinating health research. The success of management also depended upon how they could share the executing and coordinating role with other institutions, as well as its own institutional capacity. Peer review and ethical review were carried out through committee mechanisms. Most of the major academic institutions had established "research cells" to coordinate and manage research activities within the Institute. Several research methodology workshops had been organized in recent years with support of WHO and other agencies. Bangladesh Medical Research Council has recently strengthened its research management information system.

Professor Gopal Prasad Acharya (Nepal Health Research Council), described his experience on the "Role of Health (Medical) Research Councils in Research Promotion, Development and Coordination". In order to promote and develop health research capacity and capability in the country, the Health Research Council should use a multidisciplinary and multisectoral approach involving all partners. The Council should develop national research agenda through consensus and oversee the work of the research institutions and researchers by ensuring that the national objectives were being fulfilled. The Council should create an appropriate political and administrative environment so that networking and resource sharing were conducive. The Council should also act as a catalytic agent to mobilize resources for health research. The Council also needed to ensure wider dissemination of research results and to promote utilization of such results by developing appropriate mechanisms and processes.

Professor Umar Fahmi Achmadi (National Institute of Health Research and Development - NIHRD, Indonesia), made a presentation on "The Experience of NIHRD on the Monitoring and Evaluation of Progress in National Health Research System. Health research is regarded as an essential resource for the development of human quality but the resources for health research are always limited. The health research system must be efficient and effective by focusing its agenda, managing limited resources and applying the research results within the shortest time available. NIHRD has developed a few indicators for monitoring the efficiency and effectiveness of health

research development. Experience showed that the low utilization in research results was indeed not only due to the poor quality of research, but also due to the deficient "culture" of not practising "evidence-based" policy development among policy makers and planners. In some cases, researchers failed to communicate with the policy-makers and planners in their languages or the topics they desired most. Bridging the gaps between them is a priority action.

Dr Sri Astuti Suparmanto (Director-General of Medical Care, Indonesia), made a presentation on "How to Promote the Utilization of Research Findings in Health Development, Using the Experience of Reforms in Hospital Care Area" In Indonesia, there are more than 1000 hospitals of varying sizes of which nearly half was managed by the private sector, one-third of them by provincial and district governments. Military and state-owned companies ran about 180 hospitals. The Ministry of Health directly handled only 60 hospitals, most of them being teaching and speciality types. Several approaches were introduced to improve the quality of hospital care while maintaining the accessibility of poor people to hospital services. Health research activities were implemented as part of reform initiatives, especially in the area of (a) hospital accreditation; (b) hospital autonomy; (c) management and administrative procedures; and (c) total quality management.

Dr Myint Htwe (WHO-SEARO), made a detailed presentation on "Issues of Management and Coordination of Health Research in the WHO South-East Asia Region". He highlighted the need to promote closer liaison, collaboration and coordination among health researchers, research institutions and academic institutions that are carrying out health research activities. As different countries had different stages of promoting health research, there was a need to share the experience on how each country managed and coordinated health research. The mechanisms and processes may be quite different due to variation of national capacity and capability, yet the experiences provided would be beneficial for further adaptation. He stressed the need to develop research culture, establish an appropriate management mechanism for mobilizing resources for health research, and to strengthen the coordination mechanisms, especially research peer review and ethical review mechanisms at national and institutional levels.

3.2   Discussions

SWG debated on each of the countries' experiences on management and coordination of health research, keeping the presentations in view. They had identified eight major issues related to research management and coordination. They are: (1) research culture; (2) ethical review; (3) research coordination; (4) human resources development for health research (5).management of resources for health research; (6) monitoring and evaluation; (7) utilization of research results; and (8) role of medical or health research councils.

They all felt that coordination was one of the major issues in health research management, at both national and institutional levels. It also depended upon the nature of the research problems, synergistic effect of research findings, capacity and capability of research institutions, viability of the research networks, volume of research works, availability of research funds and the sharing of the availability of resources with partner institutions, etc. The major problem of coordination was that some key research institutions were too restrictive or prescriptive, which sometimes created a bottleneck.

SWG agreed on the need to establish a positive culture, to improve research information, enhance the leadership quality of research institutions, especially leadership by the research councils or analogous bodies, and adherence to the code of ethics for cooperation (both national and international levels).

Technical and ethical review mechanisms were the important ingredients of good research management. There must be a national code of ethics for health research, based upon international agreements and international code of conduct. SWG felt that there was a need to develop a regional framework of code of ethics relevant to the Region. There must be a mechanism to monitor compliance to ethical guidelines and code of both national and international nature. The Regional ACHR may be one of the possible mechanisms with some supporting institutions. The group also felt that there was a need to organize regional and national training for ethical reviewers. One other issue of health research management was how to deal with plagiarism.

There was also a need to establish a monitoring mechanism that would ensure adherence of national health policy and health research policy. The role of the existing medical or health research council in this aspect needed to be reviewed. Health research management could not be completed until the research results were appropriately used. This depended upon how the research agenda were developed, how much and on what research the resources being spent, who were actually involved in the research studies (stakeholders), how the results were disseminated, and how they were relevant to decision-making, etc.

SWG then focused on the development of a framework for management and coordination, and the action plans and expected role of medical/health research councils in promoting health research in the Region. The group first debated and agreed upon the following four major domains of health research management and coordination:

- Research culture

- Human resources

- Financial resources

- Role of medical/health research councils (MRC/HRC)

(1)   Research culture

In order to promote research culture in a research institution, an attempt should be made to create a research environment, and enhance the quality leadership, as well as to promote, initiate, establish or put in proper order the following issues:

- Political commitment on promotion of research and research environment is essential. These high-level decision makers should use evidence-based information built on research results, for policy debates and public statements. It could be achieved through advocacy of the political leaders/bureaucrats/decision-makers.

- A framework for the preparation of position paper(s) for sensitising politicians and decision-makers should be developed so that countries could use them for preparation at national debates.

- Stakeholders involved at various levels in policy formulation and implementation of health research should be interlinked through appropriate mechanisms.

- Debate on research contribution to health development should be promoted.

- Systems of reward, appreciation and motivation (along with appropriate personnel policy on recruitment, development and deployment) to young and energetic researchers must be established and followed to the extent possible.

- A position paper on "success stories for promotion of environment conducive to research culture" must be made available and updated as and when required.

- Education system, both at undergraduate and graduate levels, must promote research conducive to research thinking.

(2)   Human resources

- An appropriate human resource development policy for research team members should be established and practised.

- There was a need to set up a critical mass of researchers to be involved in various scientific disciplines appropriate to the country concerned. This was critical for capacity building.

- Identifying the target group for training, setting up training opportunities, and information on training courses available must be made known to all researchers.

- Trained people must be deployed at the jobs commensurate with his/her qualification and capacity. A system of monitoring should be established. Mapping of available human resources for research (including track record) must be made available at the national level.

- Motivation and incentives for research managers and researchers could strengthen the success of the research programme. It should be promoted as much as possible.

- Terms of reference/job description of members of research teams need to be reviewed to become more specific and practical.

- Research institutions should be always alert to look for appropriate financial support from national bodies as well as international agencies and multinational corporations and foundations, for their capacity building.

- Exchange of research scientists between research institutions (institution linkage) must be promoted.

(3) Financial resources

In order to improve the financial resources of the research institution, the following issues must be perused, promoted, initiated or established:

- Setting up information on available financial resource for health research from various sources, such as central government, industries, international agencies, etc.

- Sensitize the individual, community, politician to get more funds for health research.

- Need to understand the "Resource flows" for health research and how they are being monitored and analysed. There was a need for rational allocation of funds.

- Innovative procedures must be explored to get more funds by advocacy and lobbying to reduce procedural bottlenecks for accessing funds.

- "How will the available funds be used more effectively and efficiently" must always be on the top list for discussion.

(4) Role of medical/health research councils (MRC/HRC)

The following areas are expected to be the domain of the medical/health research councils (MRC/HRC) or analogous bodies in order to promote health research in the country:

- Policy making role — formulation of research policy, development of research agenda / research priorities

- Executing role — executing or conducting research (usually multicentric or multidisciplinary) or managing research ethical system

- Funding — provision of research funds

- Guidance on training/capacity building activities, including development and establishment of policy on human resource development system

- Advocate and promote formation of research cells in universities and other educational institutions, service departments and corporations

- Develop health research system most appropriate to the country taking into account of other countries' experiences

- Establish a regular system for monitoring and evaluation of the national research system

- Promoting an environment conducive to enhancing research, and also promoting research utilization

- Enhance research networking mechanisms

- Develop a system of reward and appreciation for researchers

- Sensitise politicians, industrialists, decision-makers, public and scientific community.

SWG members then discussed in detail the above expected role of medical/health research councils as it was deemed very important. Some priority activities were proposed under the following rubrics:

Policy making role, executing role, conducting research, setting research agenda, health research systems development

- Complementariness (identification of gaps in research, fragmentation, imbalances) amongst national health policy, health research policy and the health research projects conducted in the countries.

- Establishment of a national system of health research information.

- Translation of health research policy into a strategic plan.

Advocacy role - sensitize politicians, decision-makers, industrialists, public and scientific community

- Preparation of position papers on current and future research policy issues based on available research information

- Create or initiate demand for research in health development (establish or create mechanisms for scientific debates/forums/conferences and congresses), and persuade politicians and high-level decision-makers to be involved in such debates.

Promote environment conducive to enhancing research culture

- Facilitating exchange visits of scientists and providing appropriate visiting scientist grant.

- Provision of small-scale grant to junior researchers.

- Review of a reward system, incentive and career ladder structure for researchers.

- Orientation to decision-makers to evidence-based decision-making.

Design of national health research system most appropriate to the country taking also into account other countries' experience

- Development of evaluation tools for the assessment of health research infrastructure and mechanism.

- Development of a framework for a "good health research system" or "best health research practices", based on practical experiences - describing what is an appropriate health research system, what are the components, objectives, goals, how the stakeholders are involved in the design of the system, etc., together with development of country-specific guidelines that the country should follow in order to make the health research system more dynamic and responsive to the needs.

System for resource exploration, availability, rational allocation and effective and efficient use of resources

- Develop a standard format for "resource flows monitoring" and analysis

- Resource availability profile development for in-country as well as outside the countries

- Obtain evidence that health research is essential for promoting the improvement of the health of the people and effective and efficient functioning of health system

- Advocate increased allocation of budget for health research activities.

System development for capacity building activities, research manpower development.

- Review of curricula on "research development, research management, research methods and other research-related discipline", being used at medical and paramedical institutes

- Debate on demand on research contribution to health development

- Development of long-term research manpower programme based on a review of the existing system and scenario in respective countries

- Mapping of human resource for research, both at individual and institutional levels

- Review of the situation of research managers and initiating capacity strengthening training on research management, including responsible conduct of research

- Development of curricula or modules for research management to be used in research managers training.

Development of a system for research networking and coordination (partnership)

- Facilitate institution linkages (as is currently being practiced by TDR)

- Facilitate commissioned research or support multi-centred research studies (either issued-based or area-based)

- Facilitate the establishment of research cells in the universities and paramedical institutes.

- Define the resources and information that can be shared through the use of electronic media and calls for research proposals in priority areas.

- Identification of factors conducive to research networking

- Promotion of area-based research at different levels of the health systems to solve operational problems through research cells in universities and research institutions.

Research results dissemination and utilization for health development

- Promoting dialogues and forums between users and providers of research findings (i.e. researchers and research managers and programme managers/decision-makers) for identifying priority research problem areas

- Create wider and quicker spread of sharing research results (use of mass media, newsletter, internet-web and other forms of publications) (timeliness of research results to be used for appropriate decision-making is important)

- Review of research project reports in the context of utility of the results.

Setting legislation, regulation, standard and norms (code of ethics, accreditation, guidelines, etc.)

- Generic monitoring system for research projects having different types of research designs

- Development of international (regional) code of ethics for research that could be applicable to the countries of the region

- Development of a regulation and accreditation system for research institutes (both public and private — both for-profit and not-for-profit).

Collaboration with research organization within and outside the country

- Taking stock of the areas of collaborative research on different disciplines carried our by international agencies/organizations, develop a mechanism to link it with the country's requirements in terms of national research policy, research priorities and research agenda.

Other optional areas that can be considered

- Executing or conducting research studies: SWG felt that the MRC/HRC should take less of this responsibility.

3.3   Overall review and discussions

The group made an overall review of all discussions and presentations made at this meeting and selected the following priority issues to be carried out in a priority manner. It was also noted that some activities should be initiated by the Member Countries, some by the research policy and cooperation team at SEARO and others to be jointly carried out. The group members agreed that WHO/SEARO should distribute the report of this SWG meeting to all national focal points of health research in the countries of the Region for

implementation, as appropriate to country specific requirements by using WHO country budget.

1.	Preparation of a position paper on current and future health development issues based on available research information in order to sensitize different target groups (politicians, decision-makers, industrialists, public, scientific community)	WHO/SEARO and Health Research Councils
2.	Review and documenting success stories for promotion of research environment, which is conducive to establishment of good research culture	WHO/SEARO and Health Research Councils
3.	Development of a generic guideline for a health research system	To be discussed in 25th SEA/ACHR
4.	"Resource flow" monitoring and analysis	WHO/SEARO and Health Research Councils
5.	Resource availability profile (donor profile) development for in-country as well as outside the countries	WHO Collaborating Centre
6.	Mapping of human resource for health research, both at institutional and national levels	WHO/SEARO and Health Research Councils
7.	Review of a system of regulation and accreditation for public and private research institutions	Indian Council of Medical Research
8.	Review of code of ethics in health research	To be discussed in 25th SEA/ACHR

4. CLOSING SESSION

Dr Than Sein, Director, Department of Evidence and Information for Policy, WHO/SEARO, while delivering the closing remarks, thanked the members for contributing their vast experience in streamlining and promoting good health research management activities in the Region. He stated that the Research Policy and Cooperation Team in WHO/SEARO would closely follow up on the action points required.

Annex 1

LIST OF PARTICIPANTS

CHAIRPERSON

Prof. Charas Suwanwela (Chairperson)
College of Public Health
Chulalongkorn University
Bangkok, Thailand

MEMBERS

Professor Sahajada Chowdhury
Director
National Institute of Preventive and Social
Medicine
Mohakhali
Dhaka, Bangladesh

Dr R. Ravi
Deputy Director-General
Indian Council of Medical Research
Ansari Nagar
New Delhi, India

Dr Sri Astuti Suparmanto
Director-General Medical Care
Ministry of Health
Jakarta, Indonesia

Dr U Soe Thein
Deputy Director-General
Department of Medical Research
  (Lower Myanmar)
Ministry of Health,
Yangon, Myanmar

Professor Gopal Prasad Acharya
Chairman
Nepal Health Research Council
Kathmandu, Nepal

Dr S.A.P. Gnanissara
Deputy Director-General of Health Services
(Education, Training and Research)
Ministry of Health and Indigenous Medicine
Colombo, Sri Lanka

Prof. Chitr Sitthi-amorn
Dean, College of Public Health
Chulalongkorn University
Bangkok, Thailand

SPECIAL INVITEES

Prof. Umar Fahmi Achmadi
Head
National Institute of Health Research and
Development
Jakarta, Indonesia

Dr Ali Alkaitri
Head
Division of Planning, Directorate General
  of Medical Care
Ministry of Health
Jakarta, Indonesia

WHO SECRETARIAT

Dr Than Sein
Director
Department of Evidence and
  Information for Policy
WHO/SEARO

Dr Myint Htwe
Regional Adviser
Medical Research
WHO/SEARO

Annex 2

ADDRESS BY DR UTON MUCHTAR. RAFEI
REGIONAL DIRECTOR,
WHO SOUTH-EAST ASIA REGION

I have the honour to present greetings from Dr Uton Muchtar Rafei, WHO Regional Director for South-East Asia, to the Distinguished members and special invitees of the scientific working group. The Regional Director would have liked to be in our midst today as the deliberations of this Scientific Working Group is of great concern to WHO. However this is not possible due to his preoccupation with other duties. In the circumstances, I have the honour to read his address on this occasion, and I quote:

While regretting my inability to be with you today, I take this opportunity to welcome you all to this important consultative meeting. Much planning and preparation has gone into this initiative. I am grateful to the College of Public Health for their part in hosting this meeting, and indeed our colleagues at WHO SEARO who have taken great care with the preparations. Meeting of WHO scientific working groups are formal technical meetings of WHO, governed by certain rules and regulations in an attempt to secure high quality output. It is therefore essential to get adequate input from external experts in the process. Let me explain how we got here and why we attach importance to your deliberations.

In April 1998, the first joint session of the South-East Asia Advisory Committee on Health Research and Directors of Medical Research Councils and analogous bodies was conducted in Colombo, Sri Lanka. Some of you present here today had attended that joint session.

By and large, attention of the joint session was directed to issues relating to "health research management". This was especially so in four specific areas:

- Management and coordination of health research activities in the countries
- Criteria for setting health research priorities

- Formulation of national health research policies and strategies

- Management of health research information

We had four working groups deliberating on each of these subjects at the joint session. They laid some groundwork in terms of concepts and approaches in these respective areas. When the working groups reported back to plenary, the meeting considered it would be beneficial for the countries of this Region if detailed guidelines could be developed in these four areas of health research management. It was therefore decided to form four scientific working groups to work out those guidelines and to develop plans of action to implement and evaluate them. Subsequently, a meeting of the Chairpersons of the working groups from the joint session was convened in WHO SEARO to chart the way forward. For each of the four groups, they proposed specific objectives and expected outcome, a framework and *modus operandi*, as well as criteria for selection of members.

To maintain continuity and quality of work in this connection, it was suggested that the chairpersons of the four working groups during the first joint session also serve on the corresponding scientific working groups established. The present meeting dealing with "Management and coordination of health research activities in the countries" is the first of the four scientific working groups to meet.

The proposed terms of reference of this scientific working group are:

- to identify priority health research management and coordination issues (and information required) at the national level;

- to identify good health research management and coordination practices in the countries;

- to develop framework and guidelines for health research management and coordination at the country and regional levels, and

- to develop plan of actions to improve health research management and coordination practices in the Member Countries.

These objectives are clearly not without ambition. But the work of this scientific working group can clearly make a useful, potentially catalytic contribution towards improving health research management in the countries of this Region. In developing guidelines, as well as plans of action for their

implementation and evaluation, a balance should be sought between normative work and regional specificity. Such a balance would help ensure that the product of your work not only stands up to scrutiny, but is at the same time relevant to the needs of the countries in our Region. After all, WHO's involvement in health research should continue to evolve in keeping with the needs in Members States. This is important if our role is to include the promotion of health research in priority challenges, coordination of international efforts in health research. Assisting to establish better health research management practices is one vital contribution we can aim to make.

I wish you well in your deliberations, and warmly thank all of you who are going to contribute in thought and action in improving the management and coordination of research activities in the countries of our Region.

Thank you.

Annex 3

AGENDA

INAUGURAL SESSION

(1)   Welcome note by Chairperson of the Scientific Working Group

(2)   Inaugural Address by the WHO Representative, Thailand, on behalf of the Regional Director, South-East Asia Region

BUSINESS SESSION

(1)   Introductory remarks by Regional Adviser, Medical Research, WHO, South-East Asia Regional Office

(1)   Introduction of members of the Scientific Working Group

(2)   Adoption of Agenda and Programme in the Working Schedule

(3)   Nomination of report drafting group

(4)   Presentations on issues in management and coordination of health research:

- Development of research culture in the country **(Dr R. Ravi)**

- Mobilization and management of resources, including resource flows for health research **(Prof. Chitr Sitthi-amorn)**

- Ethical review, peer review and technical review of research proposals **(Dr U Soe Thein)**

- Development of human resources for health research including research capacity building **(Dr S.A.P. Gnanissara)**

- Coordination of health research among researchers, research institutes, universities and ministries **(Prof. Sahajada Chowdhury)**

- Role of health (medical) research councils in research promotion, development and coordination **(Prof. Gopal Prasad Acharya)**

- Monitoring and evaluation of progress in national health research system **(Prof.Umar Fahmi Achmadi)**

- Promoting the utilization of research findings in health development **(Dr Sri Astuti Suparmanto**)

- Issues on management and coordination of health research **(Dr Myint Htwe)**

(1) Development of a framework and guidelines for management and coordination of a health research at the country level **(Dr Myint Htwe)**

(2) Development of a plan of actions to improve management and coordination of health research at the country level **(Dr Myint Htwe)**

CLOSING SESSION

(5) Remarks by Director, Evidence and Information for Policy, WHO, South-East Asia Regional Office

(6) Closing remarks by Chairperson of the SWG

Annex 4

WORKING SCHEDULE

Date	Morning Session	Afternoon Session
6 Oct 1999 (Wednesday)	**Inaugural Session** • Welcome note by Chairperson of SWG • Address by WR Thailand, on behalf of the Regional Director, South-East Asia Region **Introductory Session** • Introductory remarks by Regional Adviser, Medical Research, WHO/SEARO • Introduction of members of SWG • *Adoption of agenda and working schedule of the session* • Nomination of report drafting group **Business Session** • Presentations on issues in management and coordination of health research • Development of research culture in the country **(Dr R. Ravi)** • Mobilization and management of resources,including resource flows for health research **(Prof. Chitr Sitthi-amorn)** • Ethical review, peer review and technical review of research proposals **(Dr U Soe Thein)**	*Presentations on issues in management and coordination of health research (continued)* • Development of human resources for health research including research capacity building **(Dr S.A.P. Gnanissara)** • Coordination of health research among researchers, research institutes, universities and ministries **(Prof. Sahajada Chowdhury)** • Role of health (medical) research councils in research promotion, development and coordination **(Prof. Gopal Prasad Acharya**) • Monitoring and evaluation of progress in national health research system **(Prof. Umar Fahmi Achmadi)** • Promoting the utilization of research findings in health development **(Dr Sri Astuti Suparmanto)**
7 Oct 1999 (Thursday)	Issues on management and coordination of health research **(Dr Myint Htwe)** Group work **on development of framework and guidelines** for management and coordination of health research at the country level	Group work on development of framework and guidelines for management and coordination of health research at the country level (continued) Presentations of group work for above
8 Oct 1999 (Friday)	Group work on **development of plan of actions** to improve management and coordination of health research at the country level Presentations of group work for above	**Closing Session** Remarks by Director, Evidence and Information for Policy, WHO, South-East Asia Regional Office Closing remarks by the Chairperson of SWG

Annex 5

LIST OF WORKING AND INFORMATION DOCUMENTS

1. List of participants   SEA/SWG/RCO/A

2. Provisional Agenda   SEA/SWG/RCO/B

3. Working Schedule   SEA/SWG/RCO/C

4. Development of research culture in the country **(Dr R. Ravi)**   SEA/SWG/RCO/D

5. Mobilization and management of resources, including resource
    flows for health research **(Prof. Chitr Sitthi-amorn)**   SEA/SWG/RCO/E

6. Ethical review, peer review and technical review of research
    proposals **(Dr U Soe Thein)**   SEA/SWG/RCO/F

7. Development of human resources for health research including
    research capacity building **(Dr S.A.P. Gnanissara)**   SEA/SWG/RCO/G

8. Coordination of health research among researchers, research
    institutes, universities and ministries **(Prof. Sahajada Chowdhury)**   SEA/SWG/RCO/H

9. Role of health (medical) research councils in research promotion,
    development and coordination **(Prof. Gopal Prasad Acharya)**   SEA/SWG/RCO/I

10. Monitoring and evaluation of progress in national health research
    system **(Prof. Umar Fahmi Achmadi)**   SEA/SWG/RCO/J

11. Promoting the utilization of research findings in health
    development **(Dr Sri Astuti Suparmanto)**   SEA/SWG/RCO/K

12. Issues on management and coordination of health research
     (Dr Myint Htwe)   SEA/SWG/RCO/L