Health systems research capacity: Some issues in the African context

Di McIntyre
Health Economics Unit,
University of Cape Town
Overview

• Caveat:
  – Experience primarily in South Africa

• Focus on institutional capacity:
  – Institutional relationships:
    • With health service providers, managers and policy makers
    • With other research institutions
  – Funding for sustainable institutions
Demand for and use of HSR

• Critical challenge within Africa:
  – Often a large divide between researchers and health service providers and managers
Demand for and use of HSR

• Range of contributory factors:
  – Lack of openness to critical findings
  – Lack of willingness (and ability) to convey findings in accessible & policy-relevant way
  – Funding source and its influence (on research focus and process)

• Initiatives to improve relationship:
  – Condition of grants to involve ‘users’
  – Joint research agenda setting
Demand for and use of HSR

- Requires ongoing engagement, built on mutual respect and trust (even if in same institution)
Universities as HSR institution

Teaching

Research

Policy
Type of HSR institution

• Must be context specific:
  – University
  – Ministry of Health
  – NGO/independent research institute

• Need to find ways of being:
  – Embedded
  – Yet, independent
Individual HSR institutions in Africa each have very limited capacity.

Often competitive, which is encouraged.

Or .... collaboration.
Collaboration

- Larger projects, larger & longer-term grants
- Multi-disciplinarity
- Greater exposure for younger staff
- Intellectual support for senior staff
- Allow mutual respect and trust to develop (across different types of institution)
Insecurity of funding

• Many HSR institutions in Africa are heavily ‘soft’-funded (often short-term):
  – Research agenda driven by funders
  – Drain of proposal and report drafting on senior staff
  – Staff retention difficult in context of funding insecurity
  – Consultancy activities become prevalent
  – Limited scope for capacity development

• Size and period of grant(s), as well as continuity, are critical
Core funding

• Need at least some permanent core funding:
  – Larger institution within which HSR institution located (MoH or university)
  – Endowment funding (e.g. FUNSALUD & ICDDR,B)

• Allows for:
  – Investment in institution (e.g. infrastructure, financial management)
  – Attracting and retaining critical mass
  – Responsiveness to health system needs
Key issues

• Need to address some fundamentals if we are to have health systems research:
  – Undertaken in Africa
  – By Africans
  – To meet the health system needs of Africa

• Mindset shifts:
  – Funders
  – African researchers, health service providers, managers and policy makers