Symposium Overview

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Chair, Steering Committee
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Overview Presentation, Opening Plenary

16 November, 2010
Commission on Health Research for Development (1990) : Action Agenda

- Essential national health research (ENHR) in every country
- International partnerships
- Capacity building
- More financial resources for health research
- Mechanisms to monitor progress and generate support
Ministerial Summit on Health Research, Mexico (2004) : Key messages

• More investments in health systems research

• Better management of health research

• Secure public confidence in science

• Stronger emphasis on turning knowledge into actions to improve people's health
Bamako Ministerial Research Forum 2008

Key Recommendations:

• Mobilize a high profile agenda of research and learning

• Engage decision-makers in shaping the agenda

• Strengthen country capacity backed regionally and globally

• Increase finance
Task Force Recommendation 3.5

• “that WHO and other partners, host a global symposium on health systems research in 2010”.

• “the symposium would bring together the diverse research constituencies, share state-of-the-art findings, propose agendas for priority research, building capacity and the development of the field, as well as agree on mechanisms of ongoing association such as communities of practice”.

Montreux, 16-19 November 2010
The need for greater rigor

• Terms and taxonomies
  – *Applied, complexity, delivery, diffusion, evaluation, formative, implementation, operations, program, process, scale-up, spread, systems, translation two or “T2”...etc. etc.*

• Methods and Measures
  – What methods are the best “fit for purpose”?
  – How to measure health systems strengthening?
  – Criteria to assess strength of evidence?
The need for hybrid vigor!

Diverse constituencies converging on HSR

- Policy and system designers
  - financing, governance, workforce etc.

- Scaling-up intervention implementers
  - HIV, TB, Malaria, NTDs, NCDs, Immunization, etc.

- Monitoring and evaluators
  - inputs, outputs, impacts

- Knowledge Translators
  - why isn’t evidence being applied?
Part of a bigger opportunity

• Despite challenges….HSR is a rapidly growing, dynamic area of health research

• The Symposium can build on this energy to:
  – nurture more and better health systems research within and across countries that addresses critical health sector performance shortfalls
  – ….and usher in a new era of “systems sciences” in health that can stand tall and proud alongside biomedical and clinical sciences.
Miles Davis

Don’t play what’s there, play what’s not there"
The Symposium's Objectives

- Share state of the art research on a high profile area of HSR i.e. Universal Health Coverage

- Strengthen scientific rigor including conceptual frameworks, taxonomies, measures and methods

- Facilitate greater HSR collaboration and learning across disciplines, sectors, initiatives and countries

- Identify mechanisms for strengthening capacities for HSR particularly in low and middle income countries
Why focus on Universal Health Coverage?

• Worrisome Shortfalls in Coverage
  – Extremely Low levels
    • Single interventions
    • Packages of interventions
    • Key health systems inputs e.g. health workforce
  – Endemic Inequities
    • Poor less likely to be covered
  – Evidence of harm
    • Lack of financial protection
    • Unsafe care
    • Selection of super-bugs e.g. XDR TB
Why focus on Universal Health Coverage (UHC)?

- Policy relevance:
  - strongly linked to MDGs attainment
  - a widely agreed policy objective

  - World Health Assembly Resolution 2005
  - World Health Report 2008: Primary Health Care
  - Commission Social Determinants of Health 2008
  - World Health Report 2010: Health financing
Why focus on Universal Health Coverage (UHC)?

- Strategic entry point to field of health systems research:
  - **financing**: prepayment, pooling, purchasing, sustainability
  - **service delivery**: scaling up simple and complex interventions with equity, quality and efficiency
  - **governance**: policy formulation, stakeholder engagement; inter-sectoral arrangements, regulation
  - **systems inputs**: coverage of health workforce; information systems
Guiding Definitions

- **Universal Health Coverage:**
  - access for all according to need…to appropriate promotive, preventive, curative, palliative and rehabilitative services…with protection from individual/household financial hardship

- **Health Systems Research:**
  - Research that enables societies to organize themselves to improve health outcomes and better deliver health services
    - It focuses on the constituent parts of health systems and their interactions
    - It doesn't include discovery, development or clinical effectiveness research related to new drugs, vaccines or diagnostics

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Three Program Streams

• Stream 1: State-of-the-art research

• Stream 2: Strengthening the field

• Stream 3: Knowledge translation
Stream 1: State-of-the-art Research

1. **Political economy**
   - policies, processes and power relationships

2. **Financing**
   - pre-payment, pooling, predictability, portability

3. **Scaling-up**
   - vertical, horizontal, diagonal, integrated, demand-led

4. **Monitoring and Evaluation**
   - inputs, process, outputs, outcomes, impact

5. **Translation**
   - policy-makers, programmers, practitioners, people.
Spectrum of research on UHC

Levels, trends & determinants

Delivery, implementation and scaling up

Design and decision-making for policy

HSR

UHC
Stream 1: State-of-the-art Research

Health systems functions

- Financing
- Service delivery

Governance

- Workforce
- Information

Infrastructure

- Commodities

Levels, trends & determinants

Design and decision-making for policy

Delivery, implementation and scaling up
Stream 2: Strengthening the field

Foundations:
- Concepts and Taxonomies
- Methods and Measures
- Criteria for “Grading” Evidence

Capacities:
- Individual researchers
- Institutions
- Infrastructures esp. health information systems
Stream 3: Knowledge translation

Recognizes the need for policy and decision-maker engagement in HSR:

- Novel mechanisms for making research evidence available
- Generating demand for research
- Empowering users of HSR
- Brokering demand-supply gaps
- Institutionalizing learning around health systems
Response to the Program Design

• Call for abstracts and organized sessions
  – Over 1,400 submissions!
• Careful peer-review and selection process according to program design
• 300 plenary, concurrent and satellite sessions selected – constrained primarily by space!
• 600 posters sessions selected
Symposium Background Papers

• Ten background papers selected to reflect topics across the program streams
• Each paper aims to:
  – Systematically review research findings in a given area
  – Review state of research methods
  – Recommend opportunities for strengthening research:
• Each paper was peer reviewed
• Each paper will be presented with opportunity for feedback
• Each paper is available on Symposium web-site
Many co-travellers in the Symposium

• New HSR research programs being launched:
• New books, publications being released;
• Young researchers on UHC;
• Task Force to assess strength of evidence in HSR
• Survey on standards for systematic review in HSR
• Measurement approaches for monitoring health systems strengthening
• Study on expenditures in HSR globally
Harnessing the Potential - Carpe Symposium!

- Recommendations are expected
- Please report to Secretariat
- Active effort at synthesis of key ideas
- Final plenary speakers will pick up key points and indicate steps forward:
  - Mills: HSR rigor and capacity strengthening
  - Lambo: Policy implications for “accelerating UHC”
  - Chen: sustaining and building momentum for UHC and HSR

Montreux, 16-19 November 2010
Over 1,200 participants from over 100 countries
Over 300 sponsored participants from LMICs
Symposium Major Sponsors
Councils and Committees

• Council of Deans
  – 6 distinguished leaders in HSR from 6 WHO regions provided guidance to the Symposium program

• Scientific Committee
  – 100 global experts who assisted in peer review and program design

• Steering Committee
  – 35 members (major sponsors, core organizers and partners) who assisted secretariat with overall strategic development of the Symposium
Core Organizers

• Alliance for Health Policy and Systems Research
• Global Forum for Health Research
• Special Program for research and training in tropical diseases (TDR)
• Special Program of Research Development and Research Training in Human Reproduction (HRP).
• World Health Organization
Secretariat

- Hosted by TDR
- Contributions from all partners in terms of staff and support
- A superb team effort!
In this presentation you will find:

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- Afjlf

- fojsfjafsdjflsajf