Health research systems: an evolving framework

Editor – We wish to comment on the editorial “Health research systems: a framework for the future” in the March issue of the Bulletin (1). By stating that “very few formal attempts have been made to name, define and investigate comprehensively the various inputs and outputs of the health research systems” and arguing for a “rational framework that pulls together all of the actors, resources and stakeholders involved”, important lessons learnt from a decade of work by the Council on Health Research for Development (COHRED) were ignored. COHRED and its constituent members work together to promote health research as an essential tool to achieve equity in health and development.

While the concept of health research systems is highly relevant, the present framework is the product of a dynamic and evolving process that was started in 1990. The report of the Commission on Health Research for Development envisaged a “pluralistic, worldwide health research system” (2), emphasizing health research not just for and by researchers but as an integral part of long-term health development aimed at reducing inequities. Essential national health research, as recommended by the Commission, embodies efforts by countries to construct a national health research system (NHRS) that involves all stakeholders and is based on the values of equity, ownership and self-reliance.

The International Conference on Health Research for Development, held in Bangkok, Thailand, in October 2000, reviewed the national, regional and global situation of health research and re-emphasized the need to focus on health research systems to revitalize it (3). This represented an evolution from essential national health research as a strategy to an NHRS (with its values and operating principles). In the editorial, however, the authors introduce the health research system as a rational framework, focusing only on its functions and not on its foundation of values and principles.

Although building partnerships for development and health research are considered inseparable by the authors, they only view it as the role of WHO “working with its Member States to define such a framework for health research systems”. While countries are major partners in developing an effective NHRS, other players are also involved, as evidenced by the Bangkok Conference. The conference was convened by WHO, the World Bank, the Global Forum for Health Research and COHRED, and supported by an international Steering Committee representing over 40 programmes, agencies and institutions involved in national and global efforts to enhance the practice of health research and its conceptualization. This wide range of national and global contributors highlights the importance of diversity in partnerships for strengthening NHRS.

Furthermore, by defining a health research system as “the people, institutions and activities whose aim is to generate detailed and reliable knowledge”, its boundaries are restricted to research producers. This retrogressive definition is contrary to the broad thrust for inclusiveness that has characterized the movement for health research for development during the last two decades: by moving towards a demand-driven model of health research, decision-makers, users of research, civil society and mediators have been acknowledged as equally important actors.

Having shared its experience and observations, COHRED looks forward to continuing to contribute to the global dialogue towards progressive realization of “truly equitable and mutually beneficial global partnerships in health research”.

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Conflicts of interest: none declared.

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