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REPORT ON PROGRESS OF  
WHO-SPONSORED RESEARCH ACTIVITIES IN  
THE EASTERN MEDITERRANEAN REGION

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## 1. INTRODUCTION

The subject of this report is the progress of WHO-sponsored research activities in the Region covering the period 1 July 1987 to 30 June 1989. It is presented in accordance with resolution EM/RC34/R.10 of the Thirty-fourth Session of the Regional Committee of the Eastern Mediterranean Region.

The Programme for Research Promotion and Development (RPD) of the WHO Eastern Mediterranean Regional Office is primarily aimed at strengthening the national research capability of Member States to solve problems related to their attainment of HFA goals with PHC as the basic approach. The emphasis is currently on Health Systems Research (HSR), which is urgently needed for accelerated implementation of HFA strategies in the coming decade.

## 2. EASTERN MEDITERRANEAN ADVISORY COMMITTEE ON HEALTH RESEARCH (EM/ACHR)

The Eastern Mediterranean Advisors Committee on Health Research (EM/ACHR) is composed of leading research scientists and health administrators. Under the chairmanship of Dr Abdel Salam Majali, President of the University of Jordan, the Committee met twice during the period under review.

The Thirteenth Session of the EM/ACHR was held at the Eastern Mediterranean Regional Office, Alexandria, 27-29 March 1988 and the Fourteenth in Rabat, Morocco, 3-5 April 1989.

At the Thirteenth Session the Committee reviewed the reports of the Task Force for the Development of Health Research Policy and Strategy at the national level, on their visits to Jordan in September 1987, and Saudi Arabia in January 1988, and their follow-up visits to Kuwait and Pakistan. The Committee also reviewed a brief report on HSR activities in other WHO regions and the research activities supported by WHO Special Programme for Research, Development and Research Training in Human Reproduction. The research priorities in relation to food policies, nutrition and health, and the research aspects of accident prevention were also considered.

The enhancement of the transfer of technology to developing countries with special reference to health was discussed and possible activities which WHO and Member States could take were identified. Progress in research on diarrhoeal diseases and AIDS was also discussed.

The Committee made several useful recommendations which are listed in Annex I.

At its Fourteenth Session, the Committee reviewed the subsequent visit of the Task Force to Islamic Republic of Iran and the follow-up visits to Kuwait and Pakistan. The outcome of the Fourth Intercountry Meeting of National Officers Responsible for Health Research was reported to the Committee, with particular reference to its impact on the promotion of HSR.

A review of the research on the major communicable disease problems of the Region including tuberculosis was made by the Committee. It also considered the research programme and activities of the UNDP/World Bank/WHO Special Programme for Research and Training in Tropical Diseases (TDR), and the "Role of Health Research in the Strategy for Health for All by the Year 2000" - a subject which is expected to feature in the Technical Discussions of the World Health Assembly in 1990.

The Committee's specific recommendations are given in Annex II.

Some highlights of follow-up actions taken on the recommendations of the Advisory Committee on Health Research include:

- formulation of detailed guidelines, through a consultative meeting, for implementation of a comprehensive programme on accident prevention, including research;
- development of an outline of research priorities for the Region on psychosocial aspects of AIDS; this too has been developed through a consultative meeting;
- identification of nutrition research centres of excellence in the Region to form a network for the research and training requirements of the Region.

### 3. IMPLEMENTATION OF THE REGIONAL HEALTH RESEARCH STRATEGY

This has been promoted mainly through the visits of the Task Force for the development of a rational policy and strategy for research in support of national health development. The Task Force was established by the Regional Director on the basis of the recommendations of the Eleventh Session of the EM/ACHR which was held in Kuwait in April 1986.

The terms of reference of the Task Force were:

1. to identify a rational health research policy and research strategy with emphasis on priority issues, especially those affecting the delivery of primary health care;
2. to prepare a national plan of work for the implementation of the research strategy including a plan of cooperation of all concerned groups and coordination of their activities for the promotion of health research;
3. to identify ways of increasing resources needed for the implementation of research strategy at the national level;
4. to identify areas of collaboration of Member States with the Regional and Global ACHR (G/ACHR) in the area of health research and recommend ways of implementing the global health research strategy with the collaboration of the G/ACHR.

The Task Force visited Kuwait in September 1986, Pakistan in January 1987, Jordan in September 1987 and Saudi Arabia in January 1988. The reports of these visits were presented to the Twelfth and Thirteenth Sessions of the EM/ACHR in Lahore (April 1987), and Alexandria (April 1988) respectively. Also, the reports of the above visits were presented to the Twenty-ninth Session of the G/ACHR in October 1988. Both the EM/ACHR and the G/ACHR commended the work of the Task Force and its approach as an initiative forming part of WHO health research strategy.

The EM/ACHR recommended further visits of the Task Force to a few other countries where the possibilities of cooperation between WHO and the country concerned permit the implementation of the WHO health research strategy at the country level.

The G/ACHR also recommended that "the health research strategy should constitute the cornerstone of national health research policies, and serve in generating appropriate political will. Task force visits to countries (as in the Eastern Mediterranean Region) are an effective means to this end."

The activities of the Task Force have stimulated Member States to make concerted efforts to strengthen their research promotion, coordination and management mechanisms, developing research policies and priorities in consonance with their health policies and fostering research for national health development, with involvement of all concerned scientists and also maximizing the utilization of all national resources as feasible. In addition, the importance of HSR and the requirements for its development, promotion and utilization of results, has been appreciated with the need for close involvement and commitment of decision-makers from the very outset. The movement of Member States towards this ideal, though slow, is steady and encouraging.

In view of the proposal that the Task Force approach be popularized, the Regional Office has prepared an analysis of this approach as a guideline for possible use by some Regional countries and other WHO regions.

Besides the Task Force activities, short-term consultants and WHO staff have visited several countries to collaborate with Member States on specific research promotional activities. Such visits have been made to Egypt, Islamic Republic of Iran and Yemen during the period under review.

#### 4. REGIONAL AND NATIONAL COORDINATION OF HEALTH RESEARCH

For the purpose of Regional and national coordination of health research, meetings of the National Officers Responsible for Health Research are held once every two years in one of the countries of the Region.

The fourth of such meetings was held in Nicosia, Cyprus, 16-18 January 1989. The meeting was attended by representatives from Cyprus, Islamic Republic of Iran, Iraq, Jordan, Kuwait, Pakistan and Saudi Arabia. The meeting shared information on national mechanisms employed for management and coordination of research, which revealed an encouraging trend since the previous meeting. It also considered ways and means of institutionalizing HSR as part of the managerial process for national health development, and the representatives of Member States developed draft action plans for HSR for their respective countries. Thus the meeting was yet another milestone in the promotional effort of the Regional Office in the development of national research management and coordination mechanisms with particular emphasis on the requirements for HSR.

#### 5. RESEARCH GRANTS

During the period under review, twenty research proposals have been supported by the Regional Office. These are in addition to those supported by the WHO Special Programme on Human Reproduction and Tropical Diseases (TDR), and that on Diarrhoeal Diseases. Besides, it is to be noted that the Member States themselves and various bilateral and other donor agencies also fund research. While it is desirable to have more research proposals on priority subjects for consideration of EMRO support, a small number of proposals supported by this Office does not imply that the countries are not responsive to their research needs. What is needed is a greater focus on the national research effort towards HSR.

## 6. RESEARCH TRAINING

Since the inception of the Regional Research Programme, the Regional Office has been promoting the training of scientists to undertake research, particularly in areas of national priority.

Training opportunities have been provided through research training and visiting scientist grants, attendance at international and national research meetings and at research workshops, the WHO Fellowship Programme under the WHO country provision on Health Systems Research (HSR) and Research Promotion and Development (RPD) projects.

During the biennium two research training grants were awarded. Training under the Fellowship Programme has been primarily in the field of HSR, the research area of highest priority in the Region.

In addition, workshops on HSR have been conducted in Pakistan, Saudi Arabia and Qatar. These workshops brought together administrators and professionals from the different categories of health manpower.

A team of WHO consultants and national experts also conducted a training course on research methodology and development and management in HSR in Saudi Arabia, with the aim of training health personnel in the Health Directorate, in the development and management of HSR studies and proposals, for implementation by the Ministry of Public Health. It also contributed to their training as coordinators for HSR. A similar workshop was conducted in Islamic Republic of Iran to train trainers to conduct workshops on research methodology. In Cyprus too a similar exercise was organized. The research training programme therefore aims to train both research workers and trainers, thus helping to build up national self-reliance.

Two international workshops on HSR held in Malaysia and France were attended by several leading scientists from Member States. These workshops provided opportunities for promoting HSR methodology and reinforcing the importance of HSR for national health development.

The Regional Office is also promoting the development of learning material especially that relevant to HSR. Training modules have been prepared in local languages.

A manual of case studies is nearing completion; it is expected that these case studies would form useful teaching material for future HSR workshops.

## 7. WHO COLLABORATING CENTRES

By definition, a WHO Collaborating Centre forms part of the inter-institutional collaborative network set up by WHO in support of its programme, at the country, intercountry, Regional, interregional and global levels, as appropriate.

In order to support the WHO programmes and particularly those of the Eastern Mediterranean Region, twenty-eight collaborating centres for research have been designated in the Region. These include the ten new centres designated during the period under reference. They cover the following areas: psychological medicine, AIDS, lymphoma research, nuclear medicine, maintenance

and repair of health care equipment, health systems research, cardiovascular diseases, pesticide analysis and health manpower development.

#### 8. SPECIAL PROGRAMME FOR RESEARCH AND TRAINING IN TROPICAL DISEASES (TDR)

Up to the end of 1988, this Programme had funded 2492 research and development projects, 905 training grants and 138 institution-strengthening grants at a total cost of US\$196 435 968. During 1986/87 the proportion of funds going to developing endemic countries (DECs) was somewhat reduced. However, following promotion activities this trend was reversed during 1988 when 54% of the total funds were allocated to DECs. Supported activities have so far resulted in nearly 5000 publications, 45% of these being from projects in DECs.

During 1987/88, several new mechanisms were established to strengthen research capacities in DECs. Generally, they aim at (i) sequentially upgrading the research capacities of institutions and scientists, (ii) providing appropriate long-term support, and (iii) encouraging linkages between developing and industrialized countries. The overall objective is increased output of quality research.

Up to 31 December 1988, the TDR had supported a total of 93 projects in EMR (including the Steering Committee funded Research and Development (R&D) projects, and the institution-strengthening and research training grants) at a cost of US\$3 290 336. Nearly 41% of this amount was utilized for funding 32 projects in Sudan, 21% was spent in Somalia to fund 14 projects and about 17% in Pakistan to support 13 projects. However, as the number of activities under the TDR programme is decreasing, the EM/ACHR expressed its concern and suggested that the Regional Office encourage Member States to obtain the assistance of this Programme for research as well as for the training of their scientists.

#### 9. THE SPECIAL PROGRAMME FOR RESEARCH, DEVELOPMENT AND RESEARCH TRAINING IN HUMAN REPRODUCTION

This Programme, established in 1972, provides for research and development of technology related to human reproduction and the needs of the family planning programmes. The Programme is a collaborative effort of UNDP, World Bank, UNFPA, and WHO and its Governing Body is the Policy Coordinating Committee. The scientific working groups of the various task forces are concerned with research in their respective fields, while the Committee for Resources for Research is primarily concerned with manpower and institution-building, and undertaking research related to national needs, as well as on issues of regional and global interest. The three Collaborating Centres located in this Region contribute towards Regional and global efforts. There is scope for further collaboration of Member States in this Programme.

#### 10. DIARRHOEAL DISEASES

The Regional Scientific Working Group on the Control of Diarrhoeal Diseases has been disbanded. Most research in this field is now conducted and supported at global level. Whilst several research proposals from the Region are being supported, efforts are being made to accelerate the involvement of the Region in this important research programme.

#### 11. EASTERN MEDITERRANEAN REGION HEALTH SERVICES JOURNAL

This journal, which has been in existence since September 1986, is a compilation of research articles contributed by scientists and leading

institutions in Member States. The results of studies, particularly those related to HSR, behavioural research and research on health manpower development are accepted for publication. The journal is published twice per year, in the months of March and September. It is now in its seventh issue.



Annex I

RECOMMENDATIONS OF THE THIRTEENTH SESSION OF THE  
EASTERN MEDITERRANEAN ADVISORY COMMITTEE ON HEALTH RESEARCH (EM/ACHR)

Alexandria, 27-29 March 1988

1. The Committee, commending the efforts of the Task Force and the Regional Office for implementation of WHO research strategies at the country level, recommends further visits of the Task Force to one or two additional countries and also recommends follow-up visits by WHO staff members or consultants to the countries already visited by the Task Force to ensure the continuity of these activities.
2. The Committee further recommends continuation of the implementation of the recommendations of the Twelfth Session of the EM/ACHR held in Lahore for promotion of health systems research.
3. It is suggested that Ministries of Health be encouraged to establish a health research unit and a research advisory committee within the Ministry.
4. It is suggested that one or two centres in the Region, carrying out research in HSR, be used as examples of ways and means in which HSR can indeed assist decision-makers to address their health issues.
5. The Committee recommends the establishment of a network of nutrition research centres in the Region to serve as training centres for other countries for training potential research workers, identifying research areas and assisting in the conduct of studies.
6. An intercountry consultation on nutrition research is recommended to identify areas of research relevant to the needs of most countries of the Region and to develop protocols and methodology for adoption in countries with the necessary expertise.
7. As regards research on accident prevention, the EM/ACHR recommends the following:
  - 7.1. that EMRO strengthen and further develop country initiatives for the establishment and management of a simple effective surveillance system for collecting and recording information on all types of accidents and injuries, using unified terminology. A data base bank of information in this respect will eventually be established in EMRO and available information will be disseminated;
  - 7.2. that EMRO include research on accidents and injury among research areas of priority for consideration for technical and financial support;
  - 7.3. that Governments consider accidents of all types and the resulting injuries as emerging health and socio-economic problems deserving coordinated multisectoral research initiatives to assess the magnitude of road as well as domestic accidents and the vulnerable groups of population involved;

8. The Committee recommends continuation of the support of the research on priority topics identified by the Global Scientific Working Groups on CDD, especially those related to operational and health systems research.

9. The Committee supports the recommendations of the Consultation on Psychosocial Research on AIDS as the first step for promotion of AIDS research in the Region.

10. The Committee recommends the Special Programme of Research, Development and Research Training in Human Reproduction to expand its activities in the countries of the Eastern Mediterranean Region because of the existing problems in the rate of increase of population and concern of government authorities who are seeking for solutions to the problem.

Annex II

RECOMMENDATIONS OF THE FOURTEENTH SESSION OF THE  
EASTERN MEDITERRANEAN ADVISORY COMMITTEE ON HEALTH RESEARCH (EM/ACHR)

Rabat, 3-5 April 1989

1. Visits of the Task Force to the countries for the Development of a Regional Policy and Strategy for Health Research in Support of National Health Development, should continue. During these visits national leaders in research should be invited to participate as Task Force members. The ACHR members from the respective countries should collaborate as closely as feasible with the Task Force and as far as possible assist in the follow-up of the recommendations.
2. The Chairman or a representative of the EM/ACHR should be provided the opportunity to present the Regional Research Programme and the recommendations of the EM/ACHR to the Regional Committee.
3. In the light of the experience of the Task Force's visits to the countries, the Regional Office should consider preparing a comprehensive document which could be used by the countries in the development of their own health research strategies.
4. Manuals for HSR as well as for the needs of other programmes should be prepared in local languages to facilitate involvement of all concerned.
5. The Regional Office should consider the feasibility of publishing a newsletter on Health Research.
6. The Regional Office should prepare a paper incorporating the views of the EM/ACHR on the "Role of Health Research in the Strategies for Health for All by the Year 2000" in preparation for the Technical Discussions in 1990.
7. Regarding the research needs for tuberculosis, the research areas of priority which the Regional Office should promote are:
  - operational aspects of the programme delivery aimed at improving case-holding and case-finding;
  - periodic tuberculosis surveys to assess the magnitude of the problem and its trend in a given country or area, and
  - other areas of research that aim at improved development of prevention and control technology suitable for countries of the Region.
8. A concerted effort should be made to revitalize the research programme on diarrhoeal diseases. The identified research priorities in CDD and acute respiratory infections (ARI) should be actively promoted.
9. In relation to research in malaria, high priority should be given to the methodology of integration of malaria control programmes into the primary health care system, with identification of the best approaches.

10. In order to improve the standard of health research in the Region, emphasis should be on and efforts directed toward the training of scientists in epidemiology, entomology and to Ph.D. level in modern health sciences. For this purpose a special joint programme may be developed with the WHO Special Programme on Research and Training in Tropical Diseases (TDR) or other sources.

11. Information on the various grant mechanisms of TDR should be disseminated widely among scientists in Member States in order to promote their participation.

12. Information on post-graduate research training opportunities of the TDR programme should be widely circulated in all countries of the Region to enable young scientists to utilize this opportunity.

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REPORT ON PROGRESS OF WHO-SPONSORED  
RESEARCH ACTIVITIES IN THE EMR

Summary of Recommendations

It is recommended that Member States:

1. Continue to review the total process of research promotion and development in the light of the research needs for attaining HFA goals and keep under surveillance policy options and priorities for research and streamline the organizational structure and mechanisms required to facilitate research; especially health systems research (HSR).
2. Continue to build up a critical mass of multidisciplinary scientists for undertaking research especially of the HSR type.
3. Continue to develop the teaching/learning material required for research training of the different categories of health workers; the material being in compliance with socio-cultural background of Member countries and language requirement.
4. Continue to collaborate closely with the Regional Office in undertaking research of priority concern to the countries and the Region and share information among countries in a spirit of partnership. The EMR Health Services Journal should be used as one of the means of disseminating research results of general interest to the Region.
5. Collaborate still further with the Regional Offices and WHO/HQ in the WHO Special Programmes namely: WHO Special Programme for Research and Training in Tropical Diseases (TDR) and WHO Special Programme for Research, Development and Research Training in Human Reproduction (HRP).
6. Consider additional support to research, especially HSR, by allocating an appropriate portion of the country budget for research.

7. To consider the chairman of the EM/ACHR presenting the progress report on WHO-sponsored research activities to the Regional Committee annually.

It is also recommended that the EM Regional Office continue to support Member countries in their research efforts.