Coordinating Canada's Research Response to Global Health Challenges

The Global Health Research Initiative

Submitted by representatives of the Global Health Research Initiative

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ABSTRACT

The Global Health Research Initiative (GHRI) involving the Canadian International Development Agency, the Canadian Institutes of Health Research, Health Canada and the International Development Research Centre seeks to coordinate Canada's research response to global health challenges. In light of numerous calls to action both nationally and internationally, an orientation to applied health policy and systems research, and to public health research and its application is required to redress global inequalities in wealth and health and to tackle well-documented constraints to achieving the United Nations Millennium Development Goals. Over the last four years, the GHRI has funded close to 70 research program development and pilot projects. However, longer-term investment is needed. The proposed \$100 million Teasdale-Corti Global Health Research Partnership Program is such a response, and is intended to support teams of researchers and research users to develop, test and implement innovative approaches to strengthening institutional capacity, especially in low- and middle-income countries; to generating knowledge and its effective application to improve the health of populations, especially those most vulnerable; and to strengthen health systems in those countries. While Canada stands poised to act, concerted leadership and resources are still required to support "research that matters" for health and development in low- and middle-income countries.

La traduction du résumé se trouve à la fin de l'article.

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Since 2001, the Canadian International Development Agency (CIDA), the Canadian Institutes of Health Research (CIHR), Health Canada (HC) and the International Development Research Centre (IDRC) have been working together to coordinate Canada's research response to global health challenges through the Global Health Research Initiative (GHRI). This Initiative is governed under a cooperative agreement, signed by these four partners in an effort to:

- shape and respond to the global health research agenda;
- influence policy and policy coherence relating to global health research; and,
- facilitate information sharing among partner agencies.

Canada is a nation that is well regarded for its generosity, peacekeeping tradition, bilingual and multicultural traditions, as well as its equitable health care system, and foreign policy based on the principles of good governance and egalitarian partnership. Released in 2005, Canada's International Policy Statement (IPS) - *A Role of Pride and Influence in the World*¹ sets out the overarching principles of Canada's development strategy. The IPS established a new course for a whole-of-government approach that promotes policy coherence and mobilizes Canada's human and financial resources for long-term development assistance. Development assistance will target and concentrate programming in sectors directly related to achieving the Millennium Development Goals (see Appendix)², including health. Simultaneously, Canada is being urged and should do much more to use research to help address the many pressing global health challenges facing low- and middle-income countries (LMICs).

There are many international research and knowledge translation efforts afoot to respond to these well-documented global health problems, such as the HIV/AIDS pandemic and other infectious diseases, which are crippling developing country health systems; the growing chronic disease epidemics and their underlying determinants; climate change and other human-made and natural threats to the sustainability of our ecosystems – all further compounded by ineffective governance structures, and inadequate regulation of corporate sector interests. But how can Canada

best contribute? We argue that a truly complementary response to ‘making research matter’ should be oriented to addressing the upstream drivers that influence the political, social, cultural, economic and environmental determinants of health and development. This focus allows Canada to build on its international reputation in advancing global thinking on the factors that determine the health of populations across the life-course and produce health inequalities in whole societies.^{3,4}

While biomedical and clinical interventions have an important contribution to make to the advancement of science and technology for the developing world, an orientation to applied health policy and systems research, as well as public health research and its effective application into policies, programs, and community action must be further emphasized and adequately resourced.⁵ This is essential if we are to narrow the widening global inequalities in wealth and health, and achieve the Millennium Development Goals. These ‘neglected’ challenges in global health or constraints are well documented and some are summarized in Table I.

To respond to these neglected challenges, the Global Health Research Initiative has implemented a number of activities over the last four years. Of note, close to 70 research development, pilot and project grants have been funded on topics as diverse as transforming violent gender relations to reduce the risk of HIV/AIDS among women and girls in South Africa, to health human resources issues related to the brain drain from Sub-Saharan Africa to Canada, to the health effects of being exposed to industrial pollutants in India to investments in immunization operational research.⁷⁻⁹

The GHRI was instrumental in supporting the creation of the Canadian Coalition for Global Health Research (CCGHR), an internationally unique not-for-profit organization, which aims to: “[mobilize] greater Canadian investment in global health research; [nurture] productive partnerships among Canadians and people from low- and middle-income countries; and, [turn] research into action.”¹⁰

However, more systematic and long-term investment is crucial if Canada, together with LMIC partners, are to significantly tackle these grand challenges of the

TABLE I

Global Constraints to Achieving Health-related Millennium Development Goals⁶

Global constraints operate at many levels:

1. Community and household level – e.g., physical, financial and social barriers to use of effective interventions.
2. Health services delivery level – e.g., recruitment and retention of skilled health workers; inadequate access to drugs and medical supplies; lack of equipment and infrastructure, including poor accessibility.
3. Health sector policy and strategic management level – e.g., weak and over-centralized systems for planning and management; weak drug policies and supply system; inadequate regulation of pharmaceutical and private sectors and improper industry practices; lack of intersectoral action and partnership for health between government and civil society; donor practices that damage country policies.
4. Public policies cutting across sectors – e.g., poor availability of communication and transport infrastructure.
5. Environmental and contextual characteristics – e.g., climatic and geographic predisposition to disease; physical environment and population distribution unfavourable to service delivery; government and overall policy framework (weak governance, political instability and insecurity).

21st century. A novel collaborative research program, the *Teasdale-Corti Global Health Research Partnership* Program is such a response. This proposed 10-year \$100 million endeavour is intended to foster egalitarian partnerships between Canadian and LMIC partners. The Program will enable international teams of researchers and research users (e.g., policy-makers, practitioners, community groups, civil society organizations) to develop, test and implement innovative approaches to: strengthening institutional capacity, especially in LMICs; generating knowledge and its effective application to improve the health of populations, especially those most vulnerable; and strengthening health systems in LMICs. The Program is named in honour of Drs. Lucille Teasdale and Piero Corti, a wife and husband team from Montreal who went to live and work as health and development professionals in rural Uganda, until Lucille Teasdale’s untimely death from occupationally acquired AIDS in 1996. Its name emphasizes the links we intend this Program to foster: *international partnerships and collaboration in support of research and action, and grounding the work where it is most needed – among those most affected by global health challenges.*

The Program will include a suite of interwoven activities and funding competitions over a first phase of five years, with initial investments of approximately \$12 million over that period, already committed by IDRC and CIHR, and a targeted total budget of about \$100 million over 10 years. The activities will include major

grant and award competitions, brokering and networking, seed funding for evolving complementary activities, as well as ongoing evaluation and reflection. The first component of this program was launched in late fall, and will provide competitive four-year grants up to CAD \$1.6 million per grant to international teams of Canadian and LMIC researchers and research users for innovative programs combining applied research, knowledge synthesis and translation, and capacity building in both LMICs and Canada.

Canada is uniquely poised to act. While there is considerable optimism, more global leadership and focussed investment from our government is required to have any systemic and meaningful impact on improving global health status and reducing global inequities. The GHRI together with many other dedicated Canadian, LMIC and global partners stand prepared to support a global health research agenda that addresses the pressing health challenges of LMICs. As progressive citizens and responsible public health professionals, we have an ethical obligation to ensure the basic human rights to food, water, housing and health care (including basic public health services) are more equitably accessed by citizens around the world, and that our research and other knowledge transfer and exchange expertise is effectively mobilized to ultimately achieve these goals. Our fellow citizens around the world deserve no less than many of us in Canada already take for granted. The Global Health Research Initiative partners remain committed to working together to stimulate

research in support of health and development in low- and middle-income countries.

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APPENDIX

United Nations Millennium Development Goals²

In 2000, all 191 United Nations member states pledged to meet the following Millennium Development Goals by 2015.

Goals

1. Eradicate extreme poverty and hunger
2. Achieve universal primary education
3. Promote gender equality and empower women
4. Reduce child mortality
5. Improve maternal health
6. Combat HIV/AIDS, malaria and other diseases
7. Ensure environmental sustainability
8. Develop a global partnership for development

RÉSUMÉ

L'Initiative de recherche en santé mondiale (IRSM), qui met à contribution l'Agence canadienne de développement international, les Instituts de recherche en santé du Canada, Santé Canada et le Centre de recherches pour le développement international, vise à coordonner la recherche canadienne en réponse aux défis de la santé mondiale. À la lumière de nombreux appels à l'action, au pays et à l'étranger, nous avons constaté qu'il faut orienter nos efforts vers la recherche appliquée sur les systèmes et les politiques sanitaires et vers la recherche en santé publique et ses applications, pour réduire les inégalités mondiales sur le plan de la richesse et de la santé et pour nous attaquer aux entraves bien documentées à l'atteinte des objectifs du Millénaire pour le développement des Nations Unies. Au cours des quatre dernières années, l'IRSM a financé près de 70 projets-pilotes et projets d'élaboration de programmes de recherche. Mais il faut investir à plus long terme. Le Programme de partenariat Teasdale-Corti de recherche en santé mondiale qui est proposé (budget : 100 millions de dollars) serait une telle réponse; il vise à appuyer des équipes de chercheurs et d'utilisateurs de résultats de recherche pour élaborer, tester et mettre en œuvre des approches novatrices au renforcement des capacités institutionnelles, surtout dans les pays à faible revenu et à revenu intermédiaire, à créer des savoirs et à les mettre en application de manière à améliorer la santé des populations, surtout les plus vulnérables, et à renforcer les systèmes de santé dans ces pays. Le Canada s'appête à agir, mais il faut tout de même concerter notre leadership et nos ressources afin d'appuyer « la recherche qui compte » pour la santé et le développement dans les pays à faible revenu et à revenu intermédiaire.