



# Gouvernance of health research in Africa : the Senegalese example



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# Objectives



- To gather information about west african health research regulation
- To identify the insufficiency of the system
- To Propose local and regional solution in order to strenghtening of health research regulation



# Methods (1)



- Analyze documents about procedures and regulation in country members in CEDEAO
- Interview to several actors of the health research system (researchers, policy makers and members of national ethical committee)



# Results (1)



- We have in each country of CEDEAO, National Regulatory Authority with different configuration (Gambia, Nigeria). In the English countries, we have soon a agencies with autonomous functioning, in francophone countries we have Directorate under the responsibility of ministry of health (Senegal, Burkina Fasa, Mali)



# Results (2)



- Several national ethical committee for health research and national bioethical committee.
- In Research domain, we have NEC with high responsibility in the processes of approval (Nigeria, and others NEC whom have adviser rule of the ministry of health Senegal, Burkina Faso)
- In few country we have also Institutional ethical committee(Burkina, Gambia, etc)
- **Normative documents of reference** exist in each country: (constitution, organic laws mention the governance of health research)
- **Legislation:** We have general legislation of research but since 2002, we remarks specific legislation for health research(Senegal, Burkina Gambia and Mali)
- **Guidelines:** In this case we remark that english countries have thier own standards procedures but in the francophones, few countries have finish to elaborate Thiers SOPS



# Results (4)



- In Senegal, the Ministry of Scientific Research and Technology does the general governance of all research undertaken within the country, through its Direction of Scientific Research. The latter is in charge of the elaboration of the National Strategic Development Plan for Research as well as of the management of the one and only National Research Fund and is a member of the National Ethical Committee for Health Research (CNERs). Through its Technical Committee and on yearly basis, it sets the research priorities for each area and allocates the funding for each of them. Following this procedure, the Ministry does a national call and defines a deadline to examine and decide what protocol to fund. In general terms, three different areas are funded each year, for example, agriculture, health and environment.
- The Ministry of Health, Prevention and Public Hygiene is in charge of the governance of health research with the technical support and advice of the Division of Studies and health Research (DER) and the National Ethical Committee for Health Research (CNERs). Since the late 90s, the Ministry has provided the institutional basis for the strengthening of research capacity on operational research across the national health pyramid. For example, those health programs financed by external fund, have a specific budget to be allocated to research activities. For a protocol to be funded, it needs to fulfill all the requirements set up by CNERs. Another example is that for the year 2010, the Ministry will propose to the Ministry of Finance to activate a specific budget for operational health research.



# Results (5)

- There are two more high level structures involved in the governance of health research:
- On one hand, the Ministry of Higher Education is linked to the Ministry of Health, through the faculty of medicine. It participates actively in the identification of the health research priorities and the research capacity building of human resources in the country.
- On the other hand, The Ministry of Economy and Finance allocates the core budget for the functioning of both the Division of Studies, Research and Training (DER) and the CNERIS. In light of the Bamako Declaration (2008), it has approved the creation of a fund exclusively reserved to health research.



# Discussion & Conclusions



- Analyzing the results of this brainstorming, we remark that we have not yet national health research system
- The link with different actors of the health research field is not defined clearly
- These actors need also additional capacity to participate efficiently to the the elaboration and management of the health research system
- We identify also an engagement of the policy markers to support the developpement of health research system(Global summit of health research organized in Bamako November 2008 with a declaration signed by all ministers of health)
- Actif support from the international organisations (WHO, EDCTP, IRDC , COHRED, ETC)



# Future perspectives



- In order to improve the health research sector, we must do the focus in the capacity building of all actors (Researchers, members of NEC, policy makers)
- Organizing workshop to share the results of research
- Promote the elearning and the e-resources. For this, we have several initiatives support by the partenaires: we can list these:



# Future perspectives



- [www.tree.org](http://www.tree.org) : initiative participate to the capacity building to all actors in west african health research system
- [www.healthresearchweb.org](http://www.healthresearchweb.org) an other initiative supporting the construction of health research system in our country.
- [www.iales.org](http://www.iales.org) is a website developping the e ressources for bioethics
- The elearning africa is also a project we can use in order to facilitate the link with the several actors from our countries.
- OOAS is an organisme works to support the implementation of a statute of health researcher in CEDEAO Space.
- These differentes initiatives will permit to resolve our insufficiency by sharing our achievement and discussing about our limits in order to develop mutal support against the challenge