EDCTP High-level meeting with African policymakers

Engaging African governments to strengthen national health research systems with complementary international cooperation

68th session of the WHO AFRO Regional Committee meeting

Side event • 30 August 2018 • Dakar, Senegal
About EDCTP

The European & Developing Countries Clinical Trials Partnership (EDCTP) is a public–public partnership between 14 European and 16 African countries, supported by the European Union.

EDCTP’s vision is to reduce the individual, social and economic burden of poverty-related infectious diseases affecting sub-Saharan Africa.

EDCTP’s mission is to accelerate the development of new or improved medicinal products for the identification, treatment and prevention of infectious diseases, including emerging and re-emerging diseases, through pre- and post-registration clinical studies, with emphasis on phase II and III clinical trials. Our approach integrates conduct of research with development of African clinical research capacity and networking.

The second EDCTP programme is implemented by the EDCTP Association supported under Horizon 2020, the European Union’s Framework Programme for Research and Innovation.

About the WHO African Region

The World Health Organization (WHO) is building a better future for people everywhere. Health lays the foundation for vibrant and productive communities, stronger economies, safer nations and a better world. Our work touches lives around the world every day – often in invisible ways. As the lead health authority within the United Nations (UN) system, we help ensure the safety of the air we breathe, the food we eat, the water we drink, and the medicines and vaccines that treat and protect us. The Organization aims to provide every child, woman and man with the best chance to lead a healthier, longer life.

The WHO African Region is one of the six regions of WHO. The Organization’s presence in the region consists of the WHO Regional Committee for Africa, a Secretariat for the African region, three Inter-country Support Teams (ISTs) and WHO Country and Liaison Offices located in 47 Member States.
Participants of the high-level meeting.
Executive summary

The EDCTP high-level meeting on Engaging African governments to strengthen national health research systems with complementary international cooperation – a side meeting during the 68th session of the WHO AFRO Regional Committee meeting – took place in Dakar, Senegal, on 30 August 2018.

The goal of the meeting was to discuss a way forward for strengthening national health research systems (NHRS) in Africa. The meeting brought together representatives from governments, including African ministers of health, regional bodies, regulators, policy makers, and strategic partners committed to research and strengthening national health research systems in Africa.

In a previous NHRS workshop in Accra, Ghana in July 2018, EDCTP had engaged heads of government research units and representatives from the African EDCTP member countries (the so-called Participating States). Thirty technical officers from African Participating States were trained to implement the NHRS assessment tool, the NHRS barometer, in their respective countries. The results of this survey (expanded to all WHO AFRO member countries) were presented at the meeting in Dakar.

The heads of delegation of the Participating States present in Accra issued a communiqué in which they committed to strengthening the NHRSs in their respective countries (Appendix 2). The deliberations in the Accra meeting partly informed the Dakar high-level meeting.

On behalf of the WHO AFRO Regional Director, Dr Moeti, Dr Joseph Caboré (Director of Programme Management, WHO AFRO) highlighted the efforts WHO AFRO to strengthen national health research systems.

Ms Cecile Tassin-Pelzer (Head of Development at the Delegation of the European Union to Senegal) emphasised the importance of partnerships and political commitment in strengthening health research capacity and regulation in Africa. She urged African governments to explore ways of translating the results of health research into health care.

Dr Michael Makanga (EDCTP Executive Director) gave an overview of the aims, achievements and current projects of EDCTP. In conclusion, he emphasised that for investment in R&D to be transformative, results must be translated into policy and practice. Investment in national health research systems is key to connecting health research results and their utilisation. He called for a systematic approach to establish the gaps in NHRS in a collaborative corrective action with country leadership and ownership.

Dr Juliet Nabyonga-Orem (Health systems and services team leader, WHO AFRO Intercountry Support Team for Eastern and Southern Africa) presented the findings of the NHRS surveys. She concluded that there were overall improvements in the health research systems in Africa between 2015 (when the first survey was done) and 2018. The NHRS barometer scores increased in 13 of the 17 African Participating States with very encouraging scores for Niger, Mozambique, Congo and Cameroon.

Participants in the panel discussion which followed the presentations, included the Ugandan State Minister for Health in charge of General Duties, the Deputy Minister for Health of Mozambique, the Director-General of the West Africa Health Organization, the Policy Officer for EDCTP at the European Commission, and a representative of the Tackling Infections to Benefit Africa (TIBA). The panel discussion was moderated by EDCTP’s High Representative for Africa, Dr Leonardo Simão. The panel discussion resulted in a call for creating legal frameworks to establish an enabling environment for health research in Africa.

The take-home messages from this meeting included:

- Political and financial support from individual African governments is vital to pave the way for sound regulatory governance and excellent clinical research capacities.
• African governments need to engage and create an environment that uses results from health results, adapts national health policies to invest in new and better medicines, and makes these accessible through national public health systems.

• The central role for clinical research to generate contextualised and feasible options was emphasised by WHO AFRO. Needed are more effectiveness studies conducted in real-life environments and more product-focused implementation studies for new safe and effective products.

• In general, capacity building and skills development has to improve including greater participation of women in health research.

• EDCTP’s funding towards generation of policy-relevant scientific knowledge, research capacity and research systems across sub-Saharan Africa was acknowledged. There was a request to go beyond identifying the gaps in the African NHRSs and for research & development partners to work with African countries towards a strengthening of NHRSs, with the host countries taking ownership and leadership in the process.

The proceedings from this meeting informed the EDCTP high-level meeting in Lisbon on September 2018, as well as the drafting of the strategic business plan for EDCTP2 successor programme.
The EDCTP side event on **Engaging African governments to strengthen national health research systems with complementary international cooperation** during the 68th session of the WHO Regional Committee for Africa meeting took place in Dakar, Senegal, on 30 August 2018. The meeting brought together representatives from governments, including African ministers of health, regional bodies, regulators, policy makers, and strategic partners committed to strengthening national health research systems in Africa. It provided an opportunity to discuss the conceptual framework for assessing the national health research systems (NHRS) in Africa and the results of the pilot surveys carried out to determine the NHRS barometer scores for NHRSs in the 17 African countries that are members of the EDCTP Association. The objective of the event was to increase awareness of the inclusive EDCTP model for funding health research in sub-Saharan Africa with complementary international cooperation.

As an African-European partnership, EDCTP works with African governments to strengthen national health research systems that develop the national research agendas, and to address the Sustainable Development Goals (SDGs). EDCTP has started a project for targeted strengthening of national health research capabilities in which African government research and regulatory entities take leadership and ownership of the process. This is key to the attainment of Universal Health Coverage (UHC) and SDGs.

These African government entities are in the process of creating, in close collaboration with EDCTP and WHO-AFRO, a conceptual framework for the development and strengthening of national health research systems. This undertaking was piloted at a meeting in July 2018 in Accra, Ghana attended by policy makers and health professionals from 17 African countries that are members of the EDCTP Association, the so-called EDCTP Participating States.

### Specific objectives of the meeting:

1. Demonstrate to African member states the renewed efforts by EDCTP and strategic partners to strengthening national health research systems in sub-Saharan Africa to meet the SDGs.
2. Discussion of the results of the pilot surveys carried out in the EDCTP participating states to determine the WHO barometer scores for the national research health systems.
3. Engagement of regional platforms and alliances to facilitate sustained political and financial commitment by EDCTP African Participating States and strategic partners in the region in strengthening NHRS.

### Expected outputs of the meeting:

1. Clarity about EDCTP and the value added by EDCTP projects in strengthening national health research systems in Africa.
2. EDCTP engagement with WHO-AFRO, AU entities and the European Union delegations in African countries to increase the commitment of EDCTP African and European Participating States to the Africa-EU partnership discussed.
3. Viewpoints of African and European strategic partners on the current EDCTP funding model.
Welcome speeches

Chair of the meeting, Dr Prosper Tumusiime, team leader, WHO AFRO, opened the meeting by reminding that research is central to the work of the World Health Organization (WHO). A core function of WHO is to shape the research agenda and to stimulate the generation, translation and dissemination of valuable knowledge. However, the weak research capacity in the WHO African region has been a continuous setback. In the region research has been accorded a low priority as a tool for solving the region’s health needs, as is evidenced by minimal investments, a skills gap and lack of infrastructure to support research.

To move forward, the WHO has set ambitious health development targets, and works in each context with limited resources, starting from a low platform with suboptimal access to services, also acknowledging that each country is unique. The central role for research to generate contextualised and feasible options is therefore vital. Dr Tumusiime emphasised that this can only happen within a systematic process of generating new knowledge using scientific methods to identify and deal with health problems, as occurring within strong national health research systems. He ended his speech with an appel to everybody to suggest feasible solutions to strengthen health research systems in their countries.

Dr Joseph Caboré, Director of Programme Management, WHO AFRO, who spoke on behalf of Regional Director WHO AFRO, Dr Moeti, remarked that WHO’s focus on research and health development at country level showed the importance of this event. The recently launched 13th WHO Global programme also has a strong focus on action at country level, as well as an emphasis on communicable and non-communicable diseases and strengthening the health system. At a regional level, WHO continues to implement the Transformation Agenda with its emphasis on smart technology and results-oriented values.

Dr Caboré has highlighted the following progress within WHO AFRO:

- The Regional Director has put in place an Africa advisory committee on health research and development which advises her on issues of building research capacity.
- A research development and publication committee has been formed to coordinate research support to member states.
- Research is now a standing agenda item for the Africa Health Forum, which is held every two years.
- A process is going on to further research priorities for the African Region as a collaborative effort across the organisation and member states.

Finally, Dr Caboré stressed that in order to strengthen national health research systems additional challenges need to be addressed, such as nurturing and retaining research talent in Africa, building institutional capacity for research and funding research.

Cécile Tassin-Pelzer, Head of Cooperation of the EU Delegation to Senegal, expressed delight in this event as EDCTP is the largest and most important initiative of the EU to promote the development of most needed medicines to fight poverty-related diseases, and presents a fine
example of the desire in Europe to open research and innovation to worldwide collaboration. Since 2003, EDCTP has supported more than 130 projects in clinical trials and capacity building on treatments, vaccines and diagnostics. EDCTP funding is helping to build knowledge, build research capacity and build research systems across sub-Saharan Africa. African scientists are being trained, and the partnership is helping to strengthen the regulatory framework and the capacity for research ethics review in sub-Saharan Africa. The EU participates in EDCTP providing a financial contribution of €683 million, through Horizon 2020.

Ms Tassin-Pelzer highlighted two issues in implementing the programme:

- The political support from individual African governments is vital to pave the way to sound regulatory governance and excellent clinical research capacities that remain and grow.
- Developing new and better medicines does not ensure patients have immediate access to them. To have an impact, African governments need to engage and create an environment in which research results are used, national health policies are adapted to new and better medicines, and public health systems make these accessible.

She concluded her speech by reminding the audience of the Horizon 2020 Information Day that was scheduled for in November 2018. The event will showcase the opportunities for funding under Horizon 2020, especially the opportunities that will be open within the Work Programme 2018-2020 that are relevant for Africa, and Tassin-Pelzer highly encouraged all countries to participate.

On behalf of Hon. Abdoulaye Diour Sarr, Minister of Health and Social Welfare, Dr Youssoupha Ndiaye, director for Planning, Research and Statistics, welcomed the assembly to Senegal and expressed his pleasure of having this meeting on national health research systems. He emphasised the importance of national cooperation within the African region to improve capacity building and skills development, and to improve the ratio of female scientists active in health research. As EDCTP has entered its second phase, Dr Ndiaye commended his colleagues for contributing to a good network for collaboration. However, he stated that the importance of the issue requires a greater participation in the future. In his closing remarks, Dr Ndiaye encouraged the African countries to come together for a permanent collaboration in science and research for health.
EDCTP: Scope and achievements

Dr Michael Makanga, EDCTP Executive Director, presented EDCTP’s partnership model, scope and achievements since 2014. EDCTP targets HIV, tuberculosis, malaria, neglected tropical diseases, diarrhoeal diseases, respiratory diseases, and emerging and re-emerging infectious. This is done by supporting collaborative clinical research on medicinal products, developing the capacity of sub-Saharan African countries to conduct high-quality clinical studies, investing in the development of the next generation of African researchers, and strengthening ethical review capacity and regulatory frameworks for clinical research in sub-Saharan Africa. The overall vision of EDCTP is to make contributions towards reducing the social and economic burden of poverty-related diseases in sub-Saharan Africa with a particular focus on areas of unmet medical need and vulnerable populations.

EDCTP is a flagship program that brings Europe and Africa together as equal partners, seeking out like-minded partners to promote collaborative research and development that is useful for both national and international policies. In its work, special attention is paid to ensure that research complies with the highest ethics standards, and that research is inclusive regarding populations often left out in clinical studies such as new-borns, children, pregnant women, adolescents and individuals with co-infections and comorbidities. The programme also covers product-focused implementation research to ensure research results are translated into policies and practice, and that there is evaluation of successful interventions in real-world environments.

EDCTP in numbers

- Currently, EDCTP membership comprises 16 African countries and 14 European countries; moreover, Angola and Switzerland are aspirant member countries. EDCTP has been running since 2003, the first programme having finished in 2015. The second programme will run between 2014 and 2024.
- Since 2014, EDCTP has awarded 189 projects funded through EDCTP member states, the European Union and third parties, with a total funding of €447.72 million to date.
- A large portion of these grants has been allocated to 58 projects on collaborative clinical trials and clinical studies, 54% of which involve phases II and III clinical trials.
- 62% of grants are allocated in the African region to 226 institutions.

Current progress

- Projects on tuberculosis and HIV are doing well, malaria is coming up and has new projects waiting to be signed, and projects on emerging infections are processed. Figures for vaccines, drugs, and diagnostics are growing as new projects develop. However, there is limited investment in diarrhoeal diseases and respiratory tract infections.
- Regional networks of excellence have been created, and receive support.
- Building capacity for preparedness to tackle emerging and re-emerging diseases is taken up by the EDCTP co-funded Pan-African Network for Rapid Research, Response, and
Preparedness for Infectious Diseases Epidemics...

- EDCTP is actively working to diversify funding through thematic calls for research that results in individual projects of different magnitudes, and contributes to closing the gender gap.

- A comprehensive fellowship programme has been developed, equally promoting senior fellowships as well as career development fellowships. The highest success rate for fellowships has been in South Africa, Uganda, Kenya and Tanzania. The language barrier in Central and West Africa continues to be a challenge for the success of proposals from the respective regions.

- In October 2017, the EDCTP Alumni Network was launched, which underlines the partnership’s contribution to building a critical mass of scientific excellence and leadership in Africa. The fellows supported by EDCTP are now recognised research leaders in Africa and globally.

- Furthermore, EDCTP-supported ethics and regulatory grants were being conducted in 24 sub-Saharan African countries.

Dr Makanga concluded the session emphasising that research and development can only be transformative if it is translated into policy and practice. He also discussed the importance of investing into health and NHRS in order to connect health research results and their utilisation. A systematic approach to establish the current gaps in NHRS is therefore critical. Furthermore, a targeted and collaborative corrective action with country leadership and ownership is needed to ensure sustainable development, and he kindly asked the representatives to take this message home to their countries.
Dr Juliet Nabyonga, team leader of Health Systems Strengthening at WHO/AFRO, based at the Eastern & Southern Africa Inter-Country Support Team, presented the first results of the NHRS pilot surveys in the WHO African region. In the context of this survey, Dr Nabyonga pointed out that research is an integral part of health development and that Africa faces complex health challenges through the double burden of communicable and non-communicable diseases, frequent disease disasters and new threats in emerging infectious diseases, antimicrobial resistance and counterfeit medicines. The need for local solutions is therefore a primary concern. A situational analysis depicts the weak state of NHRS and that many NHRSs are either under- or unequally funded. With 1.3% of all publications, the African region has a low output of research, a fact that can be associated with the NHRSs. Many African countries face major challenges in training and retaining researchers. Additionally, only 3.8% of new medicines approved between 2000 and 2011 are for diseases that largely affect the region.

Research for Health (R4H): A Strategy for the African Region, 2016-2025

As a countermeasure, the aim of the R4H Strategy is to foster the development of a functional NHRS that generates scientific knowledge for developing technologies, systems and services needed to achieve universal health coverage (UHC). The objectives of the strategy are:

1. Establish effective research for health governance
2. Build and sustain human, physical and institutional research capacities
3. Strengthen production & use of research to enhance performance of health systems
4. Establish sustainable financing for health research
5. Establish mechanisms for tracking health research investments.

Assessing national health research systems in the WHO African region

WHO AFRO’s role is to develop an evaluation framework and tool to monitor the implementation of the strategy with a progress report to the Regional Committee every two years. WHO AFRO will also provide guidance and support to member states for strengthening their NHRSs in order to optimize research production and utilisation.

The data for this survey was collected through a semi-structured questionnaire in 47 countries, and assessed the progress against the set targets in the R4H Strategy, aiming to highlight the gaps that need to be worked on. Composite performance scores are then estimated to undertake country comparisons for peer countries. Additionally, the 2018 scores are compared to the 2014 scores to assess any trends and progress. It is important to note that out of the 47 countries that participated in the survey in 2014, only 39 countries responded in 2018.
Results of the survey

- **Governance**: In the governance for research, there has been a slight improvement on the strategic guidance in the last 4 years, from 60% to 67%, as well as on countries with legislation on research for health. However, out of the 39 participating countries, 17 have not implemented legislation on R4H. This lack of strategic documents negatively impacts the capacity to align investments on research, which also creates unnecessarily long timelines to approve or implement research.

- **Research staff**: There has been a strong increase in staff in research, as well as countries with universities and colleges that have a training programme in research. Dr Nabyonga states that the focus now should be on motivating and retaining researchers to strengthen career paths, funding opportunities, and on creating an infrastructure to enable them to do the necessary research with an emphasis on multidisciplinary research teams.

- **Research output**: Africa produces only 2% of the global publication output, with 59% of the countries having a knowledge translation platform. Obtaining funds to realise benefits of such activities presents a big challenge. Some countries do research dissemination just once a year, while sometimes even failing to go through. The Research for Health strategy therefore aims for each country to increase the number of articles published in peer-reviewed journals output by 30%.

- **Funding**: While 62% of the countries have a dedicated budget line for research for health, only 8% invest at least 2% of their national health budget on research. This means that 21 countries lag behind in their budget on health research. A ranking of importance of funding for research showed that donors and international NGOs are the primary funders of research, with the governments only in third place. A strategy to increase domestic financing of research would improve prioritisation of locally relevant research and would generate home-grown solutions.

In her concluding remarks, Dr Nabyonga stated that the overall NHRS barometer score for the African region improved but a lot more needs to be done for the targets to be met. Furthermore, building local research capabilities is a key component of creating local health innovation that resolves Africa-specific health challenges. Domestic financing of NHRS is therefore critical to generate local solutions and to sustain them. Dr Nabyonga also suggested to further explore the role of the local private sector in financing local research. While many countries committed to the strategy for R4H, she urged them to follow through on these commitments.
Panel discussion: key points

The Panel discussion **Engaging African governments and strategic partners to strengthen NHRSs in Africa: challenges, opportunities and commitments**, was moderated by Dr Leonardo Simão, EDCTP High Representative for Africa.

Hon. Sarah Opendi, Minister of State, Ministry of Health of Uganda, shared the Ugandan experience in national health research capabilities and her views on how to stimulate and increase local financing mechanisms. She reminded the attendees of the big disease burden of the African region and that the continent has the lowest life expectancy in the world. This is why she supports a strong focus on research and was happy to see many political leaders at the meeting ready to contribute. Uganda as a country sees the importance of research and, in order to move the process in this field forward, political entities need to be strongly involved, so that the necessary legislation and legal framework can quickly be adopted. Together with local institutions and universities, it is thus important to promote research so that each involved sector appreciates the value of research and understands the resources needed, so they can move on to improve the health of their populations.

Uganda also works with different global partners, among them EDCTP and the CDC, which encourage the country to allocate resources of its own. However, the research capacity is still not adequate, as Opendi stated. This could be improved by increasing domestic financing and furthering collaboration with local and international partners. Digital technology is another area she would like to embrace, as it would improve communication and sharing of information between institutions and researchers. This would, for instance, help with disease outbreaks that demand immediate action. Opendi thanked the attending stakeholders and researchers, stressing that together they would be able to achieve good results in the future.

Hon. Prof. Dr João Leopoldo da Costa, Vice-Minister of Health of Mozambique, who spoke on behalf of Hon. Nazira Abdula, Minister of Health of Mozambique, discussed the NHRS in Mozambique and how increased cooperation with external partners is encouraged in the country.

The NHRS in Mozambique is relatively new, but has demonstrated substantial progress over the last few years. Partially, this progress is due to the development of a general system of science and technology in the country, which provides a supporting framework for the promotion of health research. The creation of the Ministry of Science and Technology, the subsequent adoption of a national strategy for science, technology and innovation, the implementation of the statute for researchers in the civil service, the creation of the national fund for research, and the creation of a few dozens of institutions of higher education, were some of the steps taken with higher impact.

In the health sector, Prof. da Costa has highlighted the following progress in Mozambique:

- The strengthening of the National Institute of Health, a public institution with the mandate to manage and inspect health research in the country.
- The establishment of a national health bioethics committee, as well as many institutional ethics committees.
- The creation of a specific regulatory entity for clinical trials within the Ministry of Health.
- Establishment of an operational nucleus in each provincial health directorate.
- The adoption of a national health research agenda.

However, the country also faces big challenges in operationalising its health research system, due to the small number of researchers, which lead to weak competitiveness of the national institutions and researchers in accessing international financing sources. Furthermore, the scarce opportunities for financing research at a national level, as well as the fragile scientific culture in the healthcare systems are critical issues to solve.

Prof. da Costa agreed with the previous presenters that international cooperation should be aligned with the efforts of the African governments, through public-public and public-private partnerships, as well as innovative financing schemes. He said that further the implementation of medium- and long-term research programmes was required with mandatory provisions for strengthening the African institutions and advanced training of
African researchers.

In conclusion, Prof. da Costa offered two perspectives on research. First, there is operational research, with the aim of applying science to solve problems of management, administration and care in public health. For this kind of research, financing is assured by entities interested in the solution of the problems or by companies and even by international agencies, such as USAID, in the framework of supporting research carried out by institutions of higher education. Then there is fundamental research, which usually leads to the expansion of scientific knowledge in a given area, and is more costly and time-consuming. This type of research requires national financing channelled through public agencies or managed by the research institutions themselves, and needs to be more proactive. Prof. da Costa ends with the wish that institutions, such as the National Institute of Health of Mozambique, as well as universities would collaborate with EDCTP, and create joint research teams and a partnership to jointly raise funds.

Professor Stanley Okolo, Director General of the West African Health Organization (WAHO), discussed WAHO’s key role in the promotion of health research capacity in Africa and the organisation’s experiences in strengthening NHRSs. Referring to the earlier discussion, he stated that the low publication output in Africa shows that it is time to change how researchers are supported. In the examples of Ebola and Lassa, both big challenges in the West African region, WAHO tries to include a variety of partners, bringing researchers and policy makers together in order to align research to these national priorities. WAHO has organised specific research teams in some countries, translating evidence into practice. He emphasised that research can make a big difference. It is particularly important to create a ‘meeting space’ within the country itself for researchers, administrators and policy makers. Okolo reminded the attendees that there are researchers in each of their countries who lack facilities and funding, and capacity and funding, and it is particularly important to support them.

Furthermore, he discussed how national ethics committees play a considerable role, because they can tell us what is happening in those countries. National ethics committees provide registration of all research, which helps researchers to receive funding and a platform for their work, but also administrators and policy-makers to know which issues are worked on.

Inmaculada Peñas-Jiménez, Policy Officer, European Commission discussed the interaction between research and development partners in West Africa in regards to strengthening NHRSs, and presented several examples of challenges in this field. The biggest issue is that developing new medical interventions does not mean that these are accessible for people who need them. To have an impact, there is a need that African governments engage with the results of clinical trials, adapt their national health policies, invest in new interventions and make them available through their own public health systems. As an example, Peñas-jiménez mentioned the EDCTP senior fellow Professor Nicol from South Africa, who had tested the GeneXpert tuberculosis diagnostics technology that speeded up the process of early detection of tuberculosis at point of care. The following WHO endorsement led to a roll-out of the GeneXpert platform, illustrating the successful engagement between different agencies. She mentioned another example, from early 2018, where the European Commission awarded the Horizon Birth Day Prize to Professor Dumont’s team from France, for having developed a method of analysing and tracing the causes of maternal deaths in hospitals in Senegal and in Mali, and then applied this knowledge to better prevention. This method reduced maternal deaths in district hospitals by 35%. In her concluding remarks, Peñas-Jiménez asked the audience what can be done in order that all district hospitals, and all health care workers, are familiar with and can implement new methods and tools.

Dr Seth Appiah Amanfo, research coordinator at Tackling Infection to Benefit Africa (TIBA), shared his experiences with TIBA and offered his suggestions on what can be done differently to increase international cooperation towards strengthening NHRSs in Africa. He stressed that while international partnerships should always be welcomed, the governments must work towards taking ownership of projects and programmes to ensure sustainability. There were suggestions in both the panel discussion and the general meeting on how to stimulate and increase local financing. However, there needs to be political commitment to actually pay the budgets for health research into the appropriate purse. Health research should not be the first to be ticked off the list when budgets are limited.
Annex 1: Policy and meeting background

National Health Research Systems

The conceptual framework for a National Health Research System (NHRS) is informed by three landmark WHO AFRO regional committee resolutions on research for health and knowledge management.

The 1998 resolution AFR/RC48/R4 on the strategic health research plan for the WHO African Region (1999-2003) urged African region member states to:

- establish research coordination, monitoring and evaluation mechanisms;
- establish a national research ethics committee;
- determine national priority research areas;
- draw up research policies and strategies;
- train researchers and create an enabling environment;
- compile inventory of health research institutions;
- strengthen research institutions;
- draw up national inventory of research on health and health-related areas;
- encourage exchange of dissemination and application of research findings; and allocate adequate resources.

The 2006 resolution AFR/RC56/R8 on strategic directions for knowledge management appealed to the member states to:

- prepare national policies and plans for knowledge management;
- establish norms and standards;
- include the health sector in national development plans for information and communication technology (ICT);
- build sustainable partnerships;
- strengthen national human, institutional, and ICT capacities for knowledge management;
- generate evidence on knowledge management;
- provide adequate resources to improve KM at all levels of the health sector.

The 2015 resolution AFR/RC65/R2 entitled ‘Research for Health: A Strategy for the African Region 2016-2025’ urges Member States to:

- strengthen health research leadership and governance;
- reinforce ethics capacities;
- develop coordination mechanism between ministries of health and other relevant ministries, universities and other research institutions;
- build south-south and south-north collaboration to facilitate implementation of national health research agendas;
- monitor all health research activities.
- strengthen NHRS infrastructure;
- build and sustain human resources for health research;
- establish or strengthen knowledge translation platforms; and ensure adequate funding for health research.

There is no paucity of clearly expressed political commitments, decisions, and resolutions at global, continental and regional levels aimed at boosting NHRS performance whether in generating new knowledge or promoting its uptake in public health policy and practice.

The persistent challenge is dearth of implementation of R4H-related resolutions and declarations due to paucity of resources allocated in countries, as is eloquently stated by the African Union Ministers of Health in their decision entitled “Commitment on accountability mechanism to assess the implementation of commitments made by African ministers of health (AUC-WHO/COM.6/2014)”.

The Regional Economic Communities – with the exception of ECOWAS, where the West African Health Organization has made a limited investment in NHRS strengthening – nor the relevant bilateral and multi-lateral agencies operating in the African Region have provided adequate resources to improve KM at all levels of the health sector.


committed, sustained, and aligned technical and financial support to countries to achieve R4H commitments.

The EDCTP NHRS strengthening project

In alignment with African political decision-making and in accordance with the objectives of the EDCTP programme, EDCTP has embarked on targeted strengthening of national health research systems (NHRS). This NHRS project is executed in close collaboration with WHO Africa and other strategic partners, including African government entities which are taking leadership and ownership of the process.

The first step was contributing to the collaborative development of a conceptual framework for the development and strengthening of NHRS. From 9-10 July 2018, EDCTP held a workshop for policy makers and health professionals from 17 African governments that are members of the EDCTP Association (Participating States). They met in Accra, Ghana to discuss the framework and the first practical steps in the project. Based on the NHRS ‘barometer’ questionnaire developed by WHO AFRO, the conceptual framework was discussed, and professionals were trained to use the framework and barometer tool. They then piloted the survey in the EDCTP Participating States using the revised barometer. WHO AFRO extended the survey to all countries in the WHO Africa region.

The results of this pilot survey were presented at the Dakar high-level meeting on 30 August 2018, reported on in this publication. The survey aimed to shed some light on the progress made in the implementation of the WHO Regional Committee resolution AFR/RC65/R2 on research for health. It provided the current status of NHRS development in the 47 member countries of the WHO Africa region including the 17 African EDCTP Participating States.

EDCTP’s NHRS strengthening project is part of EDCTP’s work plan for 2018 and supported under Horizon 2020, the European Union’s Framework Programme for Research and Innovation.
Annex 2: Accra meeting communiqué

For decades, national governments, regional entities and strategic partners including the African Union, the European Union and the World Health Organization have provided guidance, technical knowledge, funding and other resources for capacity strengthening for health research in sub-Saharan Africa. Significant progress has been made, and the General Assembly members representing the African participating states of the European & Developing Countries Clinical Trials partnership are committed to build on these efforts. Inspired by Africa’s Agenda 2063 and guided by the WHO and NEPAD’s health research strategies including the Science Technology and Innovation Strategy for Africa, we believe there is a tremendous opportunity to enable the environment for clinical research in Africa and further strengthen the capacity for national health research systems.

We recognise that African governments cannot do this alone. With the right tools, commitment, coordination and collaboration, the African Union and the European Union will support the efforts of Africa-Europe partnership through the EDCTP to enhance capacity for health research in Africa.

We appreciate the opportunity to engage health research professionals in WHO AFRO and AU in discussions about the fine-tuning and implementation of the WHO barometer tool for assessing the National Health Research Systems.

Recalling Resolution AFR/RC65/6 on Research for Health – a strategy for the African Region, 2016-2025 that acknowledges the weaknesses of national health research systems in the Region, and hence, the low capacity to produce, disseminate and utilize research results.

Recalling Resolution AFR/RC65/5 on Research for Health – a strategy for the African Region, 2016-2025 that acknowledges the weaknesses of national health research systems in the Region, and hence, the low capacity to produce, disseminate and utilize research results.

As representatives of the 17 African governments within the EDCTP Association we commit to doing our part to:

1. Implement the refined WHO AFRO NHRS barometer in the 17 EDCTP member countries of the EDCTP Association and report the results to participants, including Ministers of Health, at the EDCTP—WHO AFRO side event during the 68th WHO AFRO Regional Committee meeting in Dakar, Senegal – 30 August 2018
2. Encourage EDCTP and WHO AFRO to support the implementation of the NHRS barometer in the remaining 30 countries of the WHO African Region
3. Advocate, sustain, expand and extend programmes that ensure translation of research results into policy and provide resources for strengthening NHRS in the EDCTP African PSs
4. Align national health research strategies with the regional strategies as presented by WAHO, OCEAC, EAC, SADC, Africa CDC and WHO AFRO
5. Advance research and development through partnerships and contribution of resources to find next products and technologies for attaining SDG and UCH
6. Enhance collaboration and coordination of research at national and regional levels through public and private multilateral organisations to work more efficiently and effectively together
7. Work closely with WAHO, OCEAC, EAC, SADC, Africa CDC, NEPAD and WHO AFRO to provide technical support, tools and resources to enhance research in the EDCTP African PSs
8. Provide regular national updates on the progress in reaching the SDG and UHC targets
9. Support the career path of young talented African investigators to build African scientific leadership, paying attention to gender balance
10. Embrace the strategic role of the EDCTP regional networks of excellence and support them in achieving this next phase of their evolution to acquire more funding for their activities
11. Work with EDCTP to ensure a more equitable distribution of EDCTP activities and investments in sub-Saharan Africa
12. Encourage wealthier EDCTP participating states to collaborate with less resourceful African nations in all EDCTP activities
13. Strategically align with other funders and programmes on career development
14. Strengthen country capacity to analyse NHRS data using the Barometer
15. Align with other funding mechanisms like the Science Technology and Innovation Strategy for Africa (to allocate 1% of GDP to research and development)

Heads of government delegations and EDCTP General Assembly members representing African participating states of the EDCTP Association

Burkina Faso
- Dr Amadou T Konate: Senior scientist, Centre National de Recherche et de Formation sur le Paludisme (CNRFP)

Cameroon
- Prof Anne-Cécile Zoung-Kanyi: Chief of Division of Health Operation Research, Ministry of Public Health

Ethiopia
- Dr Raji Tajudeen Mohammed: African Union Commission

Gabon
- Dr Ayola Akim Adegnika: Clinical-Immunology and Epidemiology of Tropical Diseases, Centre de Recherches Médicales de Lambaréné (CERMEL)
- Dr Armel Mintsa Ndong: Directeur Adjoint du, Laboratoire National de Santé Publique

Ghana
- Dr Abraham Hodgson: Director of Research and Development, Division of the Ghana Health Service
- Dr Ivy Osei: Deputy Director, Dissemination, Documentation and Advocacy Department, Research and Development Division, Ghana Health Service

Mali
- Prof. Abdoulaye Dabo: Director of the Malian National Center of Scientific and Technological Research

Mozambique
- Dr Nilsa de Deus: Senior Researcher, Instituto Nacional de Saúde
- Dr Eusébio Macete: Director, Centro de Investigação em Saúde de Manhiça (CISM)

Niger
- Ms Issoufou Mariama: Management research scientists, Ministry of Higher Education Research and Innovation
- Mrs Sakina Habou Ocquet: Ministry of Public Health, General Secretariat, Directorate of Study and Programming, Study and Research Division

Nigeria
- Mr Godwin Brooks: Head (Research Division)/EDCTP Focal Point FMoH, Federal Ministry of Health of Nigeria
- Prof. Babatunde L Salako: Director General, Nigerian Institute of Medical Research

South Africa
- Ms Claudina Loots: Director: Health Innovation, Department of Science and Technology
- Prof Jeffrey Mphahlele: Vice President of Research, South African Medical Research Council (SA MRC)

Senegal
- Dr Youssoupha Ndiaye: Directeur, Direction de la planification, de la recherche et des statistiques, Ministere de la Santé et de L’action Sociale, Fann Résidence, Rue Aimé Césaire
- Prof. Alioune Dieye: GA member and Head of Immunology Unit, Faculty of Medicine, Pharmacy and Odontology, University Cheikh Anta Diop of Dakar

Tanzania
- Dr Paul E Kazyoba: Director of Research at NIMR, National Institute for Medical Research (NIMR)
- Dr Khadija Malima: Chief Research Officer (Health), Directorate of Life Sciences, Tanzania Commission for Science and Technology (COSTECH)

Uganda
- Dr Harriet Nabudere: Deputy Director General, Uganda National Health Research Organisation
- Dr Benard Kikaire: Uganda Virus Research Institute

Zambia
- Dr Victor Chalwe: Deputy Director for Research Relations, National Health Research Authority
# Annex 3: Meeting agenda

**Chair**  
Dr Prosper Tumusiime, WHO AFRO

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
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| 12:00–13:00   | Lunch and introduction  
Dr Prosper Tumusiime, WHO AFRO                                        |
| 13:00–13:05   | Welcome speech by WHO Africa Regional Office  
Dr Joseph Caboré, Director of Programme Management, WHO AFRO, on behalf of Dr Matshidiso Moeti Regional Director WHO AFRO, |
| 13:05–13:10   | Welcome speech by EU Delegation Representative  
Cécile Tassin-Pelzer, Head of Cooperation of the EU Delegation, Senegal |
Dr Youssoupha Ndiaye, director for Planning, Research and Statistics at the Ministry of Health and Social Welfare, on behalf of Hon. Abdoulaye Diouf Sarr, Minister of Health and Social Welfare, Senegal |
| 13:15–13:30   | EDCTP scope and achievements  
Dr Michael Makanga, EDCTP Executive Director |
| 13:30–13:50   | Results of the NHRS pilot surveys in the WHO African region  
Dr Juliet Nabyonga, WHO AFRO |
| 13:50–14:25   | Panel discussion:  
Engaging African governments and strategic partners to strengthen NHRSs in Africa: challenges, opportunities and commitments  
Moderator: Leonardo Simão, EDCTP High Representative for Africa  
Panelists  
- Hon. Sarah Opendi, Minister of State, Ministry of Health of Uganda  
- Hon. Prof. Dr João Leopoldo da Costa, Vice-Minister of Health of Mozambique, on behalf of Hon. Nazira Abdula, Minister of Health of Mozambique  
- Stanley Okolo, Director General, WAHO  
- Inmaculada Peñas-Jiménez, European Commission  
- Aggrey Ambali, Advisor and Head, NEPAD Science, Technology and Innovation Hub  
- Seth Appiah Amanfo, Tackling Infections to Benefit Africa (TIBA) |
| 14:25–14:30   | Summary and close of meeting  
Dr Prosper Tumusiime |

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Annex 4: List of abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>AU</td>
<td>African Union</td>
</tr>
<tr>
<td>AUC</td>
<td>African Union Commission</td>
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<td>CDC</td>
<td>Centres for Disease Control and Prevention</td>
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<tr>
<td>EDCTP</td>
<td>The European &amp; Developing Countries Clinical Trials Partnership</td>
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<tr>
<td>EU</td>
<td>European Union</td>
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<td>ISTs</td>
<td>Inter-country Support Teams</td>
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<td>NCD</td>
<td>Noncommunicable Diseases</td>
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<td>NEPAD</td>
<td>New Partnership for Africa’s Development</td>
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<tr>
<td>NHRS</td>
<td>National Health Research Systems</td>
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<td>R4H</td>
<td>Research for Health</td>
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<tr>
<td>RECs</td>
<td>Regional Economic Communities</td>
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<tr>
<td>SDG</td>
<td>Sustainable Development Goals</td>
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<tr>
<td>TIBA</td>
<td>Tackling Infection to Benefit Africa</td>
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<tr>
<td>UHC</td>
<td>Universal Health Coverage</td>
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<tr>
<td>UN</td>
<td>United Nations</td>
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<tr>
<td>USAID</td>
<td>United States Agency for International Development</td>
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<tr>
<td>WAHO</td>
<td>West African Health Organization</td>
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<td>WHO</td>
<td>World Health Organization</td>
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<tr>
<td>WHO AFRO</td>
<td>WHO African Region</td>
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The power of sharing science