

Health Research for Disease Control and Development

High-Level Ministerial Meeting convened by the Ministry of Health, Ghana and the Federal Ministry of Health, Nigeria, with technical and financial assistance from the World Health Organization (WHO) through the UNICEF/UNDP/World Bank/WHO Special Programme for Research and Training in Tropical Diseases (TDR)

Accra, Ghana
15th to 17th June 2006

COMMUNIQUÉ

Preamble: Radical improvement in populations' access to equitable health is an essential prerequisite for socio-economic development. At the beginning of the 21st century, developing countries are still facing unacceptably high rates of preventable and treatable diseases, hampering national and regional development efforts. Evidence-based disease control and public health is urgently needed. A long-term collaborative effort for health research for development is emerging in the developing world, an effort that must be owned and spearheaded by countries facing a high disease burden.

1. The High-Level Ministerial Meeting on 17th June, 2006 drew on preparatory processes in Maputo, Abuja, Geneva and Accra. These meetings discussed critical issues that limit the translation of research to health policy and systems development and identified strategies for the use of health research for disease control and the improvement of public health in countries with a high disease burden.
2. Fourteen (14) Honourable Ministers of Health and Heads of Delegations from Cameroon, Egypt, Ethiopia, Ghana, India, Iran, Kenya, Malawi, Malaysia, Mali, Nigeria, South Africa, Uganda and Venezuela participated in this meeting. His Excellency, the President of the Republic of Ghana, Mr John Agyekum KUFUOR, represented by Prof. Edward Ayensu, officially opened the meeting and delivered a keynote address.
3. The Ministerial session on 17th June was preceded by a two-day technical meeting on 15th-16th June at which delegates from 14 countries, regional organizations and development partners participated. The technical sessions discussed the current status of, and existing gaps in, health research necessary for improvement of disease control and public health, and for the sustainable achievement of the Millennium Development Goals (MDGs) in developing countries.
4. The Ministers and Heads of Delegation considered the report and recommendations that emanated from the technical sessions and, also reviewed highlights of presentations on regional perspectives on health research priorities and challenges in developing countries. The Ministerial session further considered a Call for Immediate Action for Disease Control and Development in the African Region and its input into the 29th session of the Joint Coordinating Board (JCB) of the TDR Programme to be held from the 19th-21st June 2006 in Accra, the 56th African Regional Committee Meeting, to be held from 28th August to 2nd September 2006, in Addis Ababa, and the Global Ministerial Conference, to be held in Africa, in November 2008.

5. The Ministers and Heads of Delegations emphasized the crucial importance of collaboration at all levels, and the development of common approaches to health research agenda setting and action. They recognized the central contribution that health research has made to the development of tools and methods to combat the leading causes of ill-health, mortality and disability in Africa, Asia and Latin America and the Caribbean. They reaffirmed the central role of evidence in priority setting and policy development. Such evidence is essential to mitigate the challenges that continue to limit the capabilities of countries to achieve and sustain national, regional and global health targets, including the Millennium Development Goals.

6. Deliberations of the Ministers and Heads of Delegation FOCUSED on:

- i. the persisting burden of disease, and the limitations of weak and fragile health systems responding to that burden;
- ii. the lack of detailed understanding of the burden of single and combined diseases, including their distribution, social determinants and associated risk factors;
- iii. inadequate individual, institutional and infrastructural capacity to conduct high-quality research, including basic science, product research and development, and implementation/operational research;
- iv. the need to translate research into evidence-based approaches to disease control;
- v. the increasing gap in innovation capacity between developed and developing countries, from basic research through to implementation research;
- vi. the inadequate availability of appropriate and cost-effective tools for many endemic diseases;
- vii. the drain of human resources from less developed to developed economies;
- viii. the critical role of ethics in health research and the ethical use of knowledge generated by research;
- ix. the limited institutional capacity to set priorities and establish research agenda informed by national and regional perspectives;
- x. issues relating to specific diseases and particularly those associated with poverty, including:
 - (a) Infectious diseases, such as malaria, tuberculosis, HIV, AIDS, emerging infections and neglected tropical diseases (e.g. African trypanosomiasis, Buruli ulcer, leishmaniasis, and lymphatic filariasis) that require improved prevention, diagnosis, treatment, control and surveillance;
 - (b) Sexual and reproductive health;
 - (c) Newborn and child health;
 - (d) Non-communicable diseases, including cardiovascular disease, diabetes, cancers, sickle cell disease, injuries,
 - (e) Occupational health;
 - (f) Malnutrition (under nutrition and obesity); and
 - (g) Mental health including drug and substance abuse.

7. The Ministers of Health and Heads of Delegation CONCLUDED that:

- i. Weak and fragile health systems remain some of the challenges constraining the achievement of health targets, including the health-related MDGs in developing countries.
- ii. Innovation capacity must be increased to enhance the generation and availability of interventions in countries facing high disease burden.
- iii. Health is a product of, and leads to, socio-economic development. Access to social infrastructure (health facilities, housing, sanitation, potable water, schools, energy, and roads etc), good nutrition, literacy, gender empowerment, good communications and other essentials of development is critical to health. It is imperative that multi-sectoral and inter-sectoral collaboration leads to socio-economic development and essential research for health.
- iv. A culture of knowledge sharing is essential to improve and maximize the use of research evidence to inform health policies and practices.
- v. National research agenda should be responsive to country challenges and priorities - as well as to the global context of public health. Disease control should be evidence-based to strengthen national health policies.
- vi. Investment in health policy research, health systems research and human resources research is urgently needed.
- vii. Efforts to improve the relevance of research for health, and its applications to priority health needs require innovative partnerships. These should be encouraged within and among countries, and among regional, multilateral and bilateral organizations.
- viii. South-South co-operation and networking is critical.

8. The Ministers of Health and Heads of Delegation COMMIT:

- i. To increase investment in building national health research systems linked to policy, planning and service delivery;
- ii. To develop a comprehensive national health research policy framework by the end of 2007;
- iii. To provide support for good quality research and knowledge generation, and to promote their utilization for the attainment of health targets and improvement of health systems performance;
- iv. To strengthen evidence-informed strategies for health policy and health systems development and service delivery improvement in their countries;
- v. To meet the earlier recommendation by the Commission for Health Research for Development in 1990 that developing countries should invest at least 2% of the national health budget on research and research capacity strengthening;

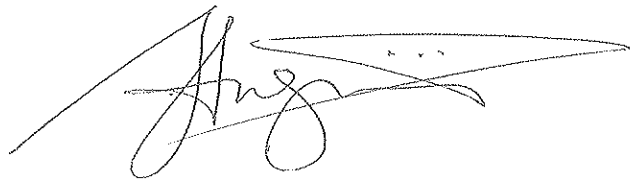
- vi. To monitor and evaluate systematically the integration of health research into the national health and development agenda ;
- vii. To provide an enabling environment for health researchers, including mechanisms to support, retain and regain researchers in country.

9. The Ministers of Health and Heads of Delegations URGE:

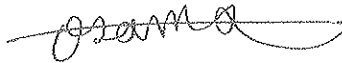
- i. Regional bodies, the private sector, civil society and country organizations involved in health development to work with their public sector counterparts to identify research priorities, and to mobilize the required resources from both domestic and international sources in support of the implementation and dissemination of research.
- ii. Global Health Initiatives (GHIs) and development agencies to invest in research and the identification of evidence-based programs , with particular emphasis on those that address the leading burdens in their respective countries.
- iii. GHIs and development agencies to devote at least 5% of their overall health investment portfolio to support research capacity of countries, dissemination of research findings, and management of knowledge.
- iv. The World Health Organization and its Special Programmes, in cooperation with other development partners, to:
 - a. work to improve the coordination of health research, across the various research initiatives being developed and implemented within and between developing nations;
 - b. facilitate regional and South-South collaboration for health research, and the establishment and strengthening of knowledge sharing.

SIGNED:

Republic of Cameroon:
 Prof. Fru ANGWAFO III
 Secretary General, Ministry of Public Health



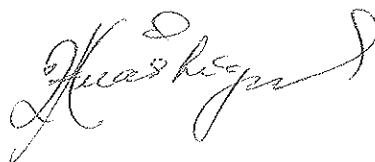
Arab Republic of Egypt:
 Mr. Osama HAMDY
 Charge d'Affaires of the Embassy of the Arab Republic of Egypt, Accra, Ghana



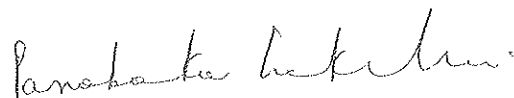
Federal Democratic Republic of Ethiopia:
 Hon. Dr. Kedir WORKU
 Minister of State for Health



Republic of Ghana:
 Hon. Major Courage E. K. QUASHIGAH (rtd)
 Minister of Health



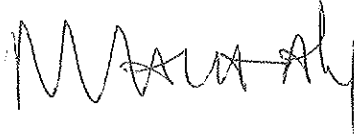
India:
 Hon. Mrs. Panabaka LAKSHMI
 Minister of State for Health and Family Welfare



Islamic Republic of Iran:
Hon. Prof. K. LANKARANI
Minister of Health and Medical Education

K.B. Lankarani, MD

Republic of Kenya:
Hon. Dr. Wilfred G. MACHAGE, MP
Deputy Minister for Health



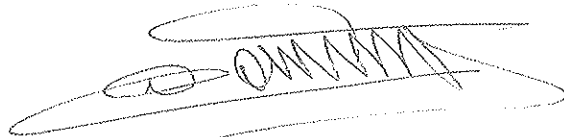
Republic of Malawi:
Dr. Charles MWANSAMBO
Chairman, National Health Sciences Research Committee



Malaysia:
Hon. Datuk Dr. Abd. Latiff BIN AHMAD
Deputy Minister of Health



République du Mali:
Prof. Ogobara K. DOUMBO
Representative of the Minister of Health
Faculté de Médecine, de Pharmacie et d'Odontostomatologie



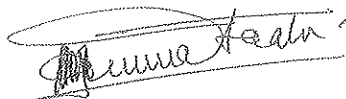
Federal Republic of Nigeria:
Dr. Shehu SULE, mni, MFR
Director, Community Development and Population Activity
Federal Ministry of Health



Republic of South Africa:
Hon. Dr. Manto TSHABALALA-MSIMANG
Minister of Health



Republic of Uganda
Hon. Dr. Emmanuel Otiam OTAALA
Minister of State for Health (Primary Health Care)



Republica Bolivariana de Venezuela
Dr. Oscar NOYA
Representative of the Minister of Health
Tropical Medicine Institute of the Universidad Central de Venezuela



