



The slide features a background of a globe with a grid pattern. At the top, the title "46<sup>th</sup> Advisory Committee on Health Research" is displayed in a blue serif font. Below the title are the logos for the Pan American Health Organization (PAHO) and the World Health Organization (WHO) Regional Office for the Americas. The PAHO logo includes the Latin motto "PRO SALUTE POPULI SEQUITUR" and "NOVI MUNDO". The WHO logo includes the text "REGIONAL OFFICE FOR THE Americas". In the center, the text "FISHBOWL Presentation" is followed by two red URLs: [www.paho.org/portalinvestigacion](http://www.paho.org/portalinvestigacion) and [www.paho.org/researchportal](http://www.paho.org/researchportal). Below the URLs, the name "Dr. Luis Gabriel Cuervo" is listed, followed by his title: "Senior Advisor for Research Promotion and Development Knowledge Management, Bioethics, and Research (KBR)" and his affiliation: "Pan American Health Organization/World Health Organization (PAHO/WHO)". A small speaker icon is located in the bottom right corner of the slide.

Greetings and acknowledgements. Thanks for this opportunity to share three issues that are relevant when we look at having the right work force and human resources in place so that research supports stronger health systems

# Understanding the workforce

The workforce that does research for health is not being monitored and evaluated within the human resources for health frameworks.

- What strategies you think are needed to develop indicators and monitoring and evaluation, that allows countries to assess their capacities and plan to fill in critical gaps?
- Acknowledging that impactful research is done by teams, what competencies are core to produce competitive impactful research?

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In terms of developing the human capital that allow countries to seize the benefits of research, to have effective knowledge translation and the development of impactful relevant research that informs policies, health care and prevention, is knowing what capacities are already available in the countries, what capacities are being developed, and what are the gaps in the human capital that need to be addressed so that research can result in implementation and beneficial improvements to the health systems, and the life of people.

Efforts to assess the health sector's human capital do not normally include the workforce working in research: research managers, scientists, science communicators, trained consumers, these are all part of the research workforce but we don't get them accounted for. How would you take on this challenge? How would you suggest moving forward to develop applicable indicators that would allow countries to identify the core competencies and capacities needed to produce and use research for health, and monitor progress?

# Research as a driver for development

Research can drive development. It mobilizes knowledge and resources, leads to innovations, and bring improvements that allow for more fulfilling and productive lives. However, these links are hidden because the returns reach society through other sectors (more competitive or productive society), and usually in long terms

- What can be done to evidence the returns of research to society ?
- How to promote an appreciation of the impact and returns of research towards development?

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Research is a driver for human development. Access to effective treatments have allowed numerous people with HIV/AIDS to live a near normal life and contribute to society. Treatments for uncinariasis reduce anaemia in children and improve their learning abilities, increasing their educational outcomes. The elimination of polio has allowed many potential victims and their caregivers to live fuller and more productive lives. However, the links between investment in research and improvement in lives is not always evident. Many returns, such as those of living better lives, reach society though other sectors –production, education, etc. And many returns last for years. Think about the returns of having built an interoceanic canal that still impacts the life of people in Panama and around the world, more than a century later.

What can we do to show these links? How can we make the returns visible to those other sectors (e.g. industrial, development, planning, education) that benefit? To governments to consider investing wisely in research?

# Development of the human capital

In planning strategic approaches to build the human capital for all countries to be able to use research to inform policy, health care and prevention, what different approaches would you consider to build on sub-regional alliances and collaboration mechanisms?

What critical capacities would you reckon would be efficient to centralize in subregional centers, and which do you reckon have an essential national focus?

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When it comes to organizing research or packaging research to support evidence-informed decisions, some skills are needed locally, to inform on context issues, while others are okay to have remotely. This raises an issue of economies of scale. For example, some could argue that subregional clearing houses and centers where evidence summaries are produced to inform policies may do the trick and be more cost efficient than having such capacities in every single country. This could be a solution to many countries with limited capacities. Yet implementing the findings may require local knowledge.

What are your thoughts on this? If subregional capacities were to be developed, would you build on existing subregional platforms, agreements or centers of expertise (e.g. CARICOM Countries, SICA-COMISCA, CARPHA, INCAP)?

What funding mechanisms could be used to promote competitive teams participating in collaborative research that builds local capacities and structures, and responds to national and regional agendas?



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