

THE ROLE OF RESEARCH IN STRENGTHENING HEALTH SYSTEMS

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OVERVIEW OF TALK

- Assume I don't have to make the case for the need to strengthen health systems
- Focus on health systems research and how it can help
- Alliance for Health Policy and Systems Research briefing note on health systems and policy research – provides more detail



What is Health Policy and Systems Research and why does it matter?

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Why does health policy and systems research matter?

Strong evidence of health, equity, policy, and health systems research is critical to advancing health systems and health equity and efficiency. The health systems research agenda is defined through the use of community health systems research. The health systems research agenda is defined through the use of community health systems research. The health systems research agenda is defined through the use of community health systems research. The health systems research agenda is defined through the use of community health systems research.

BOX 1

The return to health systems research

It was already established that the return to health systems research is a high priority. The return to health systems research is a high priority. The return to health systems research is a high priority. The return to health systems research is a high priority. The return to health systems research is a high priority.

Alliance for Health Policy and Systems Research

Briefing note 1

Alliance for Health Policy and Systems Research

World Health Organization

ILLUSTRATION OF ISSUES FACING POLICY MAKERS

Overall policy and institutional context

**Design of regulatory systems & effectiveness of enforcement
Means to control drug quality**

Health systems

How to improve effectiveness of human resource management to ensure higher quality service (eg better compliance with treatment guidelines)

Organisational approach

Centrally organised service versus district approach

Delivery strategy

Through public health centres only or also through private pharmacies/shops or home-based care

Intervention

New malaria drug

HEALTH SYSTEMS RESEARCH

- **The production and application of knowledge to improve how societies organise themselves to achieve health goals:**
 - **How they plan, manage and finance activities**
 - **The roles, perspectives and interests of different actors**
- **A topic area not a discipline – contributing disciplines include economics, sociology, anthropology, political science, epidemiology etc**
- **Needs close linkages between researchers and policy makers**

HEALTH SYSTEMS RESEARCH

- Includes research on health policies and health services research

A CONTINUUM



**Rigorous
scientific HSR
More
generalisable**

**Operational
research
Very context
specific**

CAN HEALTH SYSTEMS RESEARCH HELP?

- *User fees*: before and after studies (one controlled), and cross sectional (demand) analyses, have provided abundant and convincing evidence that fees reduced utilisation especially by the poor
- *Integrated management of childhood illness*: studies in Bangladesh, Brazil, Peru, Tanzania, Uganda adopted common research framework, derived valuable lessons on strengthening health care delivery in resource-poor settings

CURRENT LIMITATIONS OF HEALTH SYSTEMS RESEARCH

- Little funding
- Small evidence base
- Limited capacity

ROUGH ESTIMATES OF ANNUAL HSR PROJECT FUNDING (AHPSR 2004)

<i>Source</i>	<i>\$m</i>	<i>%</i>
International	92m	69
Governments	23m	17
Private sector	23m	14
Total	134m	100

- **Developing countries only**
- **Based on information on research projects from research institutions engaged in developing country research**
- **Excludes general costs of research institutions**
- **Equivalent to 0.017% of health expenditure**

ALLOCATIONS BY MAJOR RESEARCH FUNDERS

- 97% of grants awarded by Gates Foundation and NIH went to development of new technologies (Leroy et al 2007)
- 1.6% of UK MRC and 0.5% of Wellcome Trust research funding goes to health services research (Rothwell 2006)

LEVELS AND TRENDS IN HSR PUBLICATIONS (AHPSR 2004)

- 1.8m publications indexed by Medline 1991-2003 with at least one major subject heading in field of health systems research
- 5% only were concerned with developing countries

SEARCH RESULTS FROM SYSTEMATIC REVIEW OF EVIDENCE ON EFFECTIVENESS OF WORKING WITH PRIVATE PROVIDERS TO IMPROVE EQUITY IN HEALTH (Patouillard et al 2007)

Intervention	No. of references retrieved	No. of evaluated interventions	No. of interventions evaluated providing:		
			general SES information	average effectiveness for poor/disadvantaged populations	relative effectiveness across SES groups
Social marketing	472	14	12	1	2
Franchising	906	5	4	1	3
Training	599	29	19	1	0
Regulation	276	2	0	1	0
Accreditation	150	1	1	0	0
Contracting Out	80	3	3	2	0

HEALTH SYSTEM RESEARCH CAPACITY

(AHPSR 2004)

Institutional characteristics	No or rare computer access	8%
	No internet access	4%
	Projects per institution	3.2
Critical mass	Researchers per institution/unit	9
	Researchers with PhD	24%
Research process	Project duration (months)	15
	Projects < one year	56%

WHY HAS HEALTH SYSTEMS RESEARCH BEEN NEGLECTED?

- Topics less visible and emotive
- Seen as too applied and lacking rigour
- Has lacked a clear institutional 'home'
- Interventions can often not be studied separate from real world
- Questions about generalisability
- Vicious circle of lack of capacity and funding

OPPORTUNITIES FOR STRENGTHENING HEALTH SYSTEMS THROUGH RESEARCH

- Encourage much greater evaluation of health system reforms
- Encourage closer linkages between policy makers and researchers
- Support experiments with introducing knowledge translation and brokerage functions
- Support strengthened capacity in health systems research in low and middle income countries