

Opening Remarks

By
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At

Regional Workshop on
Research Priorities in Communicable Diseases

WHO/SEARO,
New Delhi

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Distinguished participants, Special invitees, Colleagues, Ladies and gentlemen:

I warmly welcome you all to this Regional Workshop.

With the remarkable epidemiological transitions presently taking place, it is time to revisit the subject of "Research Priorities in Communicable Diseases". This is, in particular to review the related issues against the backdrop of "emerging and re-emerging infectious diseases".

Scientific and technological progress through research and development in the past has led to a dramatic improvement worldwide in the control of communicable diseases. Yet, these diseases continue taking their toll. In South-East Asia Region, people suffer a disproportionate burden of communicable diseases, compared to the rest of the world. Of the 14 million deaths that occur annually in the Region, 40% are due to communicable diseases, compared with the global average of 28%. With its large and dense population, South-East Asia Region is at high risk for new emerging infectious diseases.

As we have witnessed, this Region has become the epicentre of Avian Influenza. The disease that is very intractable to current public health interventions. The impact of rapid urbanization and climate change on vector-borne diseases is also a matter of public health concern. Drug-resistant malaria is emerging as a potential threat to international health security. Malaria is a medical manifestation with remarkable contributions from environmental and ecological factors. Chikungunya has re-emerged after 30 years of quiescence. Dengue is spreading to newer geographical areas; and we do not yet have effective preventive measures. The increasing morbidity of Dengue and Chikungunya is creating a serious public concern with political impact.

The Region bears one-third of the global burden of tuberculosis. Tuberculosis is a disease of poverty. For effective control of tuberculosis, more social and economic research, as well as health systems research is needed. And the Region has the second highest HIV burden in the world. Again, effective preventive interventions against HIV infection are yet to be found.

Tropical diseases, like lymphatic filariasis, that are targeted for elimination still cause enormous morbidity. Other vector-borne diseases are still rampant. Each year in this Region, there is sporadic occurrence of “mysterious diseases”. The pathogens of many of these mysterious diseases could not be identified by our laboratories. There is need to strengthen our capability and capacity in the Region for their effective investigations and studies.

We have to keep in mind in this connection that during the past few decades, more than 30 new pathogens have been found worldwide. There are many environmental and ecological factors that contribute to the occurrence of these new pathogens. Diseases of animals are transmitted to man; animal pathogens find a host in man. These are some of the challenges for today’s research in communicable diseases.

Ladies and gentlemen;

We know what are the priority diseases to be tackled in the South-East Asia Region. At the same time, we also need to know what types of research we have the capacity to pursue in tackling these diseases. We, in the Region, may not be able to afford much of the sophisticated and expensive research. Very importantly, this research of “sophistication”, in most cases, needs capital investment beyond our capacity. This type of research may be initiated and carried out with support from institutions in rich countries; or through public-private partnerships.

Our attention to research in communicable diseases may therefore be firstly focused on the “application” of available “know-how” and technology. This is a matter of exploitation and utilization of available know-how. It is to narrow or close the gap between knowledge and application. Certainly, at the same time, we should think of research for the development of new tools, the development that is within our means, our capability and capacity.

Furthermore, research to increase efficiency and effectiveness of programme development and management in disease prevention and control is indeed crucially important. To increase efficiency and effectiveness of disease control, we need, among others, operational research, social and economic research; as well as health systems research.

Now, let me touch on some issues relating to “research systems”, which are equally important in our pursuit of research priorities in communicable diseases. In the light of the “current financial crises”, we need to be cost-efficient and cost-effective, in pursuing any research. It is of “overriding importance” in communicable disease control, as in other areas that research needs to be geared towards the development of evidence-based policies and interventions.

Unfortunately, research has remained a neglected portfolio in the national health policy and programme in developing countries. And research is still considered as a “luxurious” item in their government

budgets. Therefore, research in these countries, is, to a large extent, dependent on outside funding and donor-driven. This trend diverts research to areas that are not adequately responding to priority health problems of the local populations.

To be effective, research must be strictly guided by needs and priorities of the concerned countries, of the local health situations. The countries must take the lead in identifying and prioritizing research needs; the needs that are context-specific to address the local health problems. We need research of high quality to successfully convince national authorities of priority requirements for effective control of communicable diseases.

To have quality research, we basically need competent staff and adequate funds. This implies institutional strengthening and building country capacity in research infrastructure, in both human and financial terms. Funds should be made available as a pre-requisite for investment in strengthening human and institutional capacities for research. Certainly, it would be useful to have more funds; but, at the same time, the available funds must be optimally utilized.

In order to ensure benefits to people, the “practice of research” for health should reach out beyond academic institutions. The “practice of research” should closely involve service providers, policy makers, planners, the public and civil society. One constraint in this regard is that, due to their different interests, policy makers / planners and researchers hardly talk to each other. Therefore, priority problems of health programmes that require investigation and research do not always get adequate attention of scientists or researchers. On the other hand, relevant and useful research findings are not always brought into national health policy and programme planning. Indeed, closing the gap between research findings and their application is a long standing issue.

Research on priority health problems should be considered to be the primary responsibility of scientists and academicians; national health programme managers cannot afford to isolate themselves from research institutions. There is a lot of scope to integrate the research agenda of academic institutions into national health policies and programmes. These are particularly health systems research or health services research, operational research and evaluative research. To fulfill this desire will need energetic advocacy at policy and decision making level.

The ‘producers’ and ‘users’ of research findings should work more closely to ensure application of such findings for further improvement of health outcomes. On a national scale, progress in health research can often be hindered by insufficient co-ordination. The success of research relies, to a large extent, on effective networking and partnerships between researchers and health programme planners/implementers. With this perspective in view, particular attention should be paid to identifying research priorities

based on needs of the specific targeted groups of populations. These are especially the poor, vulnerable, marginalized and underprivileged.

In the South-East Asia Region, these groups of populations are disproportionately affected by several communicable diseases. However, the fruits of available scientific know-how often do not benefit these groups of people. Additionally, studies are needed to understand the unique barriers faced by the poor and vulnerable in getting access to health services, including disease control services. And studies are needed to understand how these barriers can be overcome, and health services can be made readily available to those who need them the most.

Ladies and gentlemen;

Please be convinced that we gather here now for an important and timely workshop. Let us spend this valuable time together to appreciate the contribution of priority research in the prevention and control of communicable diseases. We have to face several system challenges in our pursuit of priority research for the benefit of affected populations. However, with unwavering determination and commitment, we will be able to face these challenges successfully.

Before concluding, ladies and gentlemen, allow me also to mention the following. In research, we should look at a disease beyond its disease agent or pathogen. A disease should be viewed as a multifactorial phenomenon. A disease should be viewed from its epidemiological and ecological perspective. Such a research must take into account, as much as possible, the disease risks and determinants – physical, socio-cultural, and economic, at least. To tackle communicable diseases holistically; research to support such efforts has also to be holistically designed and implemented.

In disease control, we can no more afford to look at a disease only from the point of view of its agent or pathogen; without thorough consideration of its host and environment. I hope that, at the end of this meeting, we would have a set of recommendations on concrete actions to carry on. And, we would have a suggested road map to move towards more effective research on communicable diseases.

I am confident that the deliberations during the course of the meeting will significantly contribute to advancing, improving and enhancing national responses to the prevention and control of these diseases in the South-East Asia Region. Finally, I wish the meeting all the best and all success. And I wish you all an enjoyable stay in New Delhi.