Pacific Health Research Council: health research by and for Pacificans

JAN PRYOR* 
SITALEKI A. FINAU** 
COLIN TUKUITONGA***

Abstract

The inaugural meeting of the Pacific Health Research Council (PHRC) was held at Sonaisali, Fiji 12-14 Oct 1998. It was attended by representatives of eight Pacific Island countries and five Pacific Island institutions. The organisation is designed to provide three levels of membership: Pacific Island countries; Pacific Island institutions; and individual Pacific Island researchers. An executive committee was appointed and given the task with the special objectives: to promote and strengthen health research by Pacific people and; to develop Pacific people capacity to exert more control and ownership of data generated through research. In the past Pacific health research has often been driven by external agendas and there is a need to increase the capacity among Pacific Island people to conduct action oriented research. An initial collaborative project for the PHRC is in the area of injury prevention and control. Implementing tasks of the PHRC will require the use of distant consulting and co-ordination to provide ongoing technical assistance, to manage multi-centre activities, and to share ideas and concerns etc. Hence, PHRC will be interested in participating in evolving telehealth networks in order to adequately address these tasks. In the spirit of cooperation and co-ordination, the PHRC can be expected to become actively involved in these emerging developments.

Introduction

Health research is not generally regarded as a high priority in the region and very little research is done.1,2 It is well recognised that health research in the Pacific Islands is all too often driven by external agendas, and that there exists a great need to increase the capacity among Pacific island people to conduct action-oriented health research.1 Most of the research in the region is owned and carried out by "outsiders" who are interested in a specific issue regardless of it’s relevance to the needs of the region. Information obtained from these research projects is commonly taken out of the region with no real benefit to the individuals or participating countries.

In general, lesser-developed Pacific island "background" countries have not benefited from previous efforts globally to strengthen research capacity in more-developed Pacific rim countries (e.g. the Philippines, Australia) which have experienced the development of INCLEN (International Clinical Epidemiology Network) activities or FETPs (field epidemiology training programs). The smaller developing countries of the Pacific have not participated in these types of capacity-strengthening activities. Subsequently, throughout the region research skills are limited, resources for research are difficult to obtain, and the quality of study design, analysis and reporting is highly variable.3 Opportunities for peer review of proposals and completed work are very limited. Similarly, effective ethical review procedures are either limited or nonexistent. Additionally, projects are often repeated without the knowledge of the same project having been completed in another country, or sometimes, in the same country.3 These problems are compounded by the failure

*Research Coordinator - Fiji School of Medicine, PHRC Secretary, Fiji school of Medicine, Private mail bag, Suva, Fiji. Ph: +679 311 700/304 273 - Fax: +679 305 781 - Email: pryor@fsm.ac.fj. **Co-director - Pacific Health Research Centre, Pacific Health Unit, Department of Maori and Pacific Health, University of Auckland, Private Bag 92019, Auckland. Ph: +64 (9) 373 7599 - Fax: +64 (9) 373 7074 - Email: s.finau@auckland.ac.nz. ***Co-director - Pacific Health Research Centre, University of Auckland; PHRC Vice-Chair/Treasurer

Page 115
to publish and/or disseminate the results of research to a wider audience. Furthermore, while there are a few isolated national research committees in the region that make some effort to co-ordinate local research efforts, the efforts of these national research committees are generally limited in focus and have been unable to effectively improve capacity in health systems research.

As a result of the above, Pacific countries conduct a limited amount of research that is of local value. However, some of the topics for research that is conducted are certainly of interest to a number of island nations, and the pooling of skills and resources could produce better outcomes. While there are significant issues to be resolved, a commitment to a common strategy for health research for development with support from regional institutions could provide an invaluable contribution to health care planning, management, and delivery.

Well-designed and conducted research projects that address recognised national health research agendas could contribute in a very significant way to the efficiency and effectiveness of the region’s health service systems. Needs assessment and evaluation of service provision would assist governments with the identification of priority areas for research and service provision. However, to accomplish this, Pacific countries and people must identify the research issues and question themselves the real value of the information obtained. If this were the case, it is likely that most relevant research projects in the region would be of an applied public health nature to address the tremendous need for useful information in support of planning and management.

**The Pacific Health Research Council**

Initial discussions at the Science Inter-Congress held in Suva during July 1997, and later at the first meeting of the Health Sector Working Group of the South Pacific Organisations Coordinating Committee on 8 May 1998 in Suva, concluded that there was a great need to improve the quality of research, particularly to assist policy design in the health sector, and that the concept of a regional Health Research Council should be further developed. Following on these events, the Pacific Health Research Council Centre out of the University of Auckland coordinated relevant organisational efforts to develop such an entity. In August 1977 a proposal for the development of such a Council was presented to a meeting in Rarotonga of the Directors and Ministries of Health organised by WHO and the Government of the Cook Islands. Following this, letters of support for the establishment of a Pacific Health Research Council (PHRC) were received from through-out the region. Subsequently, after arranging for adequate support through the New Zealand Ministry of Foreign Affairs and Trade and the Wellcome Trust, an organisational meeting to further explore the establishment of the PHRC was held at the Sonaisali Resort in the Fiji Islands from 12 - 14 October 1998.

Following two days of discussion regarding key issues, involving health research in the Pacific countries, representatives from eight Pacific island countries and five Pacific island institutions acted to formally establish the PHRC with the theme "Pacific health research by and for Pacific island people". The inaugural meeting of the PHRC was held on the third day of the meeting at Sonaisali. The PHRC is designed to provide wide representation from throughout the Pacific with three levels of membership status: (1) for all Pacific countries and territories; (2) for Pacific institutions involved in health research, and (3) for individual Pacific researchers. It was agreed at the inaugural meeting of the PHRC that a PHRC Executive Committee would provide the necessary guidance required to oversee the accomplishment of the Council’s goals and objectives. I was further agreed that the permanent PHRC Secretariat would eventually be placed at the Fiji School of Medicine (FSM).

**PHRC objectives**

The proposal for PHRC specified tasks and initial programme components. The specific objectives of PHRC are to:

- promote and strengthen health research by Pacific people as a vital developmental tool for healthcare improvements,
- develop Pacific people capacity to exert more control and ownership of data and information generated through research,
- develop and support a network of Pacific researchers and institutions, and
- assist Pacific governments in the development of focused, integrated national health research agendas.

Through the development and maintenance of a permanent PHRC Secretariat at the FSM and the implementation of a specific action plan, model activities will be conducted in select Pacific island countries in conjunction with wider regional capacity-strengthening initiatives that will provide an unprecedented capacity:

- for Pacific countries to implement integrated national mechanisms to establish and act upon sustainable
national health research agendas,

- to establish and implement national health research policies and support mechanisms within Pacific countries,
- for health-related professionals and other relevant stakeholders in the Pacific jurisdictions to plan, develop, conduct, and act upon relevant health systems research projects in the region consistent with their respective national health research agendas,
- to increase the volume and quality of health research publications by local researchers in Pacific countries, and
- for Pacific institutions to develop appropriate research training and continuing support services for Pacific researchers.

To support the establishment of a permanent PHRC Secretariat and enable the PHRC objectives, the FSM has submitted an application for a "RREACH" International Award to Support, Co-operation in Health Research for Development in collaboration with the PHRC, the Secretariat of the Pacific Community, the Pacific Health Dialog, the Pacific Basin Medical Association, the Pacific Health Research Centre - University of Auckland, and various Pacific island Ministries/Departments of Health. Initial feedback from the application has been very positive. Even if the RREACH grant application does not prevail, considerable interest has been expressed by donor agencies and regional institutions in support of the PHRC. Subsequently, another application for support has been submitted to the New Zealand Ministry for Foreign Affairs and Trade from whom we await a formal response. Given the importance of the PHRC vision and the enthusiasm expressed for the accomplishment of the PHRC objectives, it is expected that the Secretariat will become functional within the year. In the interim, the PHRC Executive Committee is continuing dialog with relevant individuals and institutions to forward the objectives established by the Council.

Conclusion

Health information is essential for health services development and management. The current status of routinely collected data is of poor quality. Therefore research is necessary to explore new areas and to supplement existing data bases. Research capability is needed to generate health information from existing databases.

Efforts to encourage and support research in the Pacific have been curtailed by a lack of resources and enthusiasm from within and outside the Pacific proper. Initial efforts to promote health research have not been well supported by Pacific health officials. Pacific view institutions have also been lukewarm in their support for health research in the Pacific. Whatever the reasons for this lack of support, it can only be surmised that the opportunity cost of health research in the Pacific is seen as unacceptable. While Overseas Development Organisations may eventually be supportive, this support might only be available if the money is spent on and by their own citizens working with and on Pacificans.

A mechanism to generate trust and respect of research and it’s role in better health status and service in the Pacific is clearly needed..... this must be the initial task of PHRC. This mechanism must generate health results and deserve the respect of Pacific health workers. A process involving a research practice training programme and operations research activities must be initiated to produce results of immediate use. This process must also begin the socialisation towards research-based health development and evidence-based management.

References


117