



# Building Research Capacity for Non-Communicable Disease

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# Goals of WHO for NCD Capacity Building



- 1. Strengthen capacity** to conduct high quality interdisciplinary priority research needs
- 2. Analyze gaps and needs** for agenda setting in research and capacity building
- 3. Facilitate translation** of evidence into action
- 4. Promote leadership** in health research
- 5. Foster harmonization and alignment** of efforts for global health research and goals
- 6. Engage with key stakeholders** around research and capacity needs

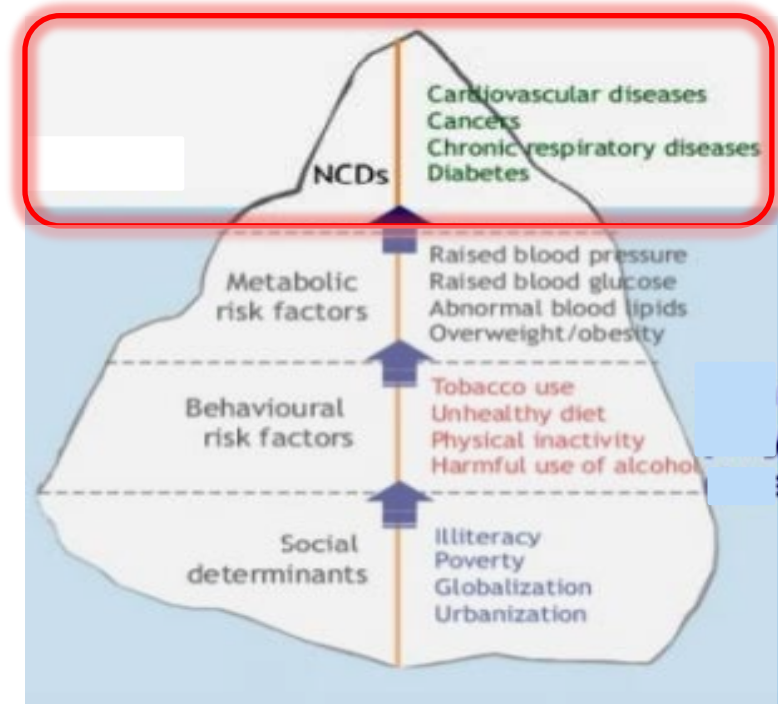
# 1. Strengthen Capacity for Interdisciplinary Research



- Individual and disease level
- Populations for prevention
- Implementation/effectiveness science
- Health systems research
- Health and social policy research

## Disease Level\*

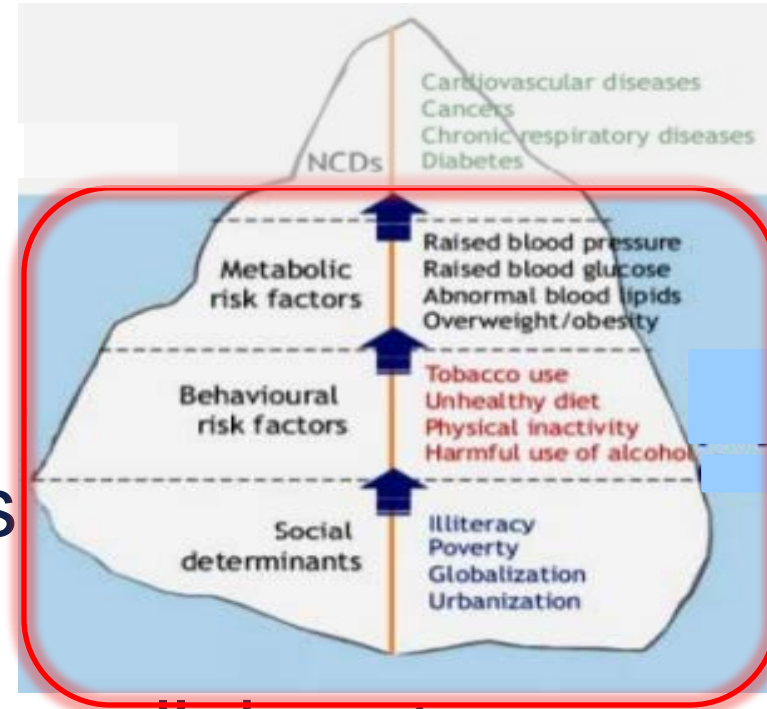
- Cardiovascular
- Diabetes
- Stroke
- Cancer



\* US NIH interested in funding collaborators across disciplines, countries

# Prevention/Population\*

- Obesity
- Nutrition
- Smoking
- Activity patterns/motivators



\*US NIH interested in funding collaborators for broad based public health solutions

# Implementation Science

- More interest now in US for effect of place, environment on intervention results
- For example urban versus rural; hospital versus community settings



# Health Services Research\*

- Improving care processes in various settings
- Providing broad based public health services most effectively

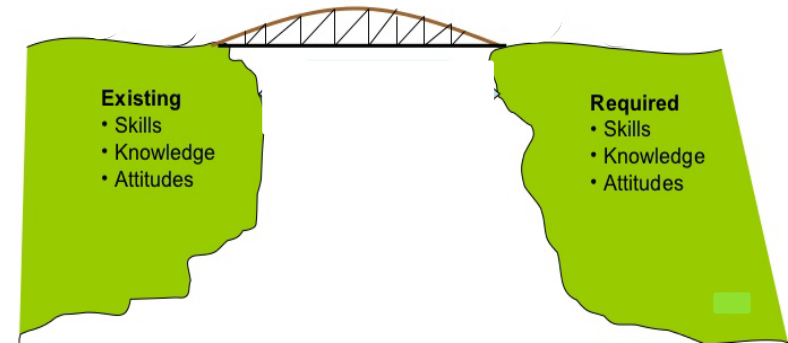






## 2. Analyze Gaps and Needs

- Advanced methods
- Statistical and other analytics
- Preparing workforce for conduct of research and research analysis – Are there enough researchers with expertise?



# Augmenting the NCD Research Workforce



- International solutions.
  - WHO; NIH/Fogarty; Foundations
- National priority for workforce development
- Building capacity across necessary disciplines and support staff

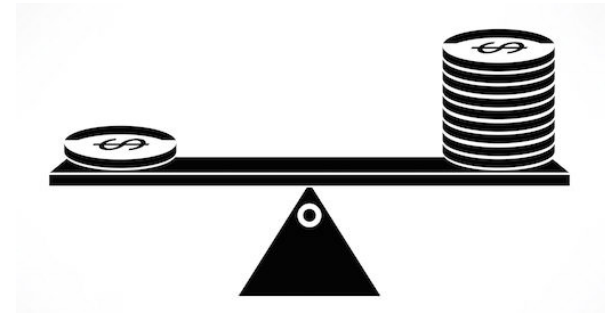
## Analysis and Gaps: National, Regional and International Priorities and Alignment

- Country specific goals based on data
- Regional priorities and collaboration
- International agenda [e.g. WHO; UN]
- Need for country-level priorities and resources
- Potential to leverage regional/international priorities and emphasis for resources



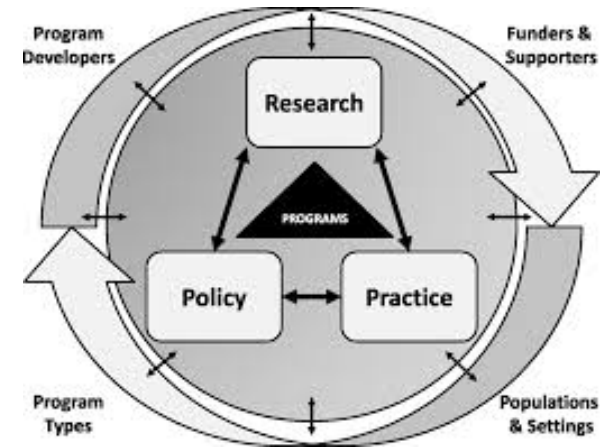
# Examples of Leveraging

- NIH/Fogarty Center funding
- Gates Foundation
  - Use of program-related investments (PRIs) to scale up enterprises that serve the poor, e.g., investments in biotech startups to induce them to focus on neglected diseases such as malaria and tuberculosis..



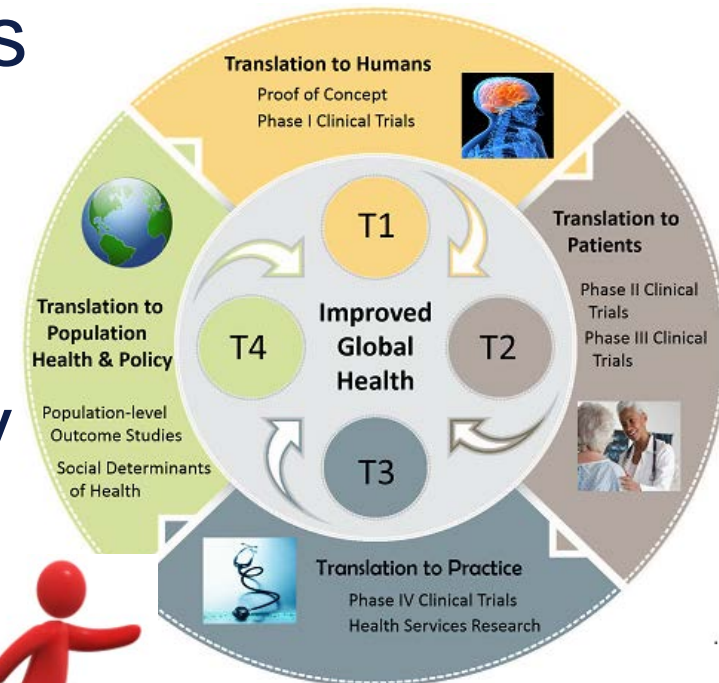
## 3. Facilitate Translation of Evidence into Practice

- Translational Science
- Evidence based protocols in clinical practice settings
- Professional education for dissemination
- Advocacy for public health practices and policy



# Clinical Leadership for Translational Science

- Capacity for clinical leadership across disciplines e.g. physicians, nurses, pharmacists etc.
- Education for NCD prevention, treatment, policy
- Rapid transfer of new information into practice



## 4. Promote leadership in health research



- Training investigators for next generation leadership
- Role of institutional leaders in building a culture of research excellence and productivity

# Role of Institutional Leaders



- Culture of research
- Support for investigators – effort invested in research
- Access to research funding
- Faculty/investigator development





## 5. Foster harmonization and alignment of efforts for global health research and goals

- Leadership *vision and priorities*
- *Resource allocations* to support priorities
- Assuring adequate mentorship of new investigators
- Building internal research support services
- Support and reward research productivity as a priority



## 6. Engage with Key Stakeholders

- Identify stakeholders
- Identify key stakeholders needed to improve credibility, implementation, advocacy, or funding/authorization decisions.
- Engage individual stakeholders
- Create a plan for stakeholder involvement
- Target selected stakeholders for regular participation in key steps.



