

# House of Commons Science and Technology Committee: Science and International Development

## Response by the Wellcome Trust

January 2012

### Key Points

- The Wellcome Trust is very supportive of the Department for International Development (DFID)'s activities in the area of science and international development. We consider that significant progress has been made in the areas identified in the Committee's 2004 report on this topic.
- Capacity building is a difficult and complex activity. The most effective approaches are those that aim to strengthen the national and institutional research environment in addition to providing training and career support to individual researchers.
- Research funders, including foundations and charities, can work in partnership with government development agencies in areas where they have complementary skills and experience. The Health Research Capacity Strengthening initiative in Kenya and Malawi is a major (£20 million) partnership between DFID and the Wellcome Trust that aims to improve capacity to generate and use research evidence in Kenya and Malawi. This initiative demonstrates the complexity of capacity building and the significant challenges, as well as opportunities, it presents.

### INTRODUCTION

1. The Wellcome Trust is the largest charity in the UK, spending over £600 million each year to support the brightest minds in biomedical research and the medical humanities. Over the past six years the Wellcome Trust has significantly increased its international activity and funding, spending £527 million between 2004/5 and 2009/10. The Trust's global health strategy can be summarised as:
  - Supporting areas of science that have the potential to lead to health benefits for people and livestock.
  - Supporting international networks and partnerships focused on problems of resource-poor countries.
  - Broadening the research base for scientific endeavour in under-resourced environments.

The Wellcome Trust and DFID are working together on partnership activities totalling £44 million.

2. This inquiry focuses on DFID's activities to build scientific capacity in developing countries. Research capacity strengthening is an important mechanism to improve the generation and use of health research evidence at the individual, institutional and/or

national level. Developing a cadre and critical mass of research professionals in low and middle-income countries allows local health research priorities to be addressed. It also improves both the quality of medical and research training and the quality of the evidence used by policy-makers in these country settings. In view of the importance of these outcomes, we hope that the planned increase in DFID's budget over the spending review period will include an increase in the resources that are invested to strengthen research capacity in low income countries.

3. The Terms of Reference for the inquiry refer to the Committee's 2004 report on 'The Use of Science in UK international development policy', which identified DFID's research capacity building activities as an area of weakness. DFID has made significant progress since the 2004 report was published, improving its ability to generate and use research evidence; more effectively integrating research and policy within its departmental structure; and strengthening links with charities and other partners. DFID is currently reviewing the Research Programme Consortia model (RPC), which has been the main mechanism used to strengthen research capacity over the past few years. The appointment of a highly capable Chief Scientific Adviser (as recommended in the 2004 report) who is also head of the DFID Research and Evidence Division (RED) has been a major driver behind these improvements.
4. The Wellcome Trust has a major partnership with DFID, the Health Research Capacity Strengthening Initiative, which is specifically focused on strengthening capacity for health research in Kenya and Malawi. We value DFID's contribution to this partnership.

## **Responses to specific committee questions**

### ***Q1. How does the UK Government support scientific capacity building in developing countries and how should it improve?***

5. Traditionally, the focus of capacity-strengthening programmes has been on individuals working in a low or middle-income country environment, via fellowships or other forms of personal support. More recently there has been a recognition and understanding of the need to provide institutional and in some cases, national, health research capacity strengthening support.
6. In the health research area, DFID's main approach has been to support capacity strengthening through its Research Programme Consortia (RPCs), which aim to generate new policy-relevant knowledge that will help developing countries, the wider development community, and DFID to eradicate world poverty. DFID has been effective at commissioning research in priority areas, complementing the role of other funders who adopt a more investigator-driven approach. For example, DFID has supported research through a concordat with the Medical Research Council and a similar initiative with the Economic and Social Research Council.
7. The Wellcome Trust is involved in several partnerships with DFID, including the Global Health Trials Scheme, and the Health Research Capacity Strengthening Initiative (HRCS) in Kenya and Malawi. The latter is specifically focused on increasing the capacity for generating new health research knowledge within Kenya and Malawi, and to improve its use in evidence-based decision making, policy formulation and implementation. The Wellcome Trust and DFID committed £10 million each towards the initiative.

8. The focus of the HRCS initiative is on strengthening key academic research and health policy-making institutions, and facilitating the collaborative engagement of national representatives. An inception phase supported national task forces in the two countries, which over six months developed comprehensive five-year work plans that document activities to support the initiative's aims. In each country a new institutional entity has been established that has implemented systems for receiving, evaluating and monitoring grant applications. In Kenya the programme is implemented by a new NGO, the Consortium for National Health Research (CNHR). In Malawi, HRCS activities are housed within the Government of Malawi National Commission for Science and Technology (NCST). CNHR and NCST have each set up transparent, merit-based, peer-reviewed competitive processes for the evaluation and awarding of grants.
9. Key outputs from HRCS include:
  - In Malawi, the first national health research agenda for Malawi has been produced (2012-2016). The goal is to guide researchers, policy makers, programme implementers, academic institutions and other stakeholders on health research priorities for Malawi in nine key areas, including: nutrition; health systems; mental health; infectious diseases; and non-communicable diseases such as diabetes and cancer. This process has been led by the HRCS initiative in close partnership with the Malawian Ministry of Health. In addition, Masters students and key research grants have been supported in areas of identified need. Institutional support for student grants has been established to permit undergraduate research projects as part of medical and scientific training.
  - In Kenya, four Centres of Research Excellence have been selected and supported: two in health systems research; one in pharmacology; and one in vector control. All have a major focus on training and core support. In many cases this is the first time that major Kenyan health research institutions have collaborated together. In Kenya HRCS also supports a successful graduate internship programme as well as research leader grants, with associated training fellowships. Closer links with the Government of Kenya are illustrated by the co-hosting, in June 2011, of the 'First National Research-to-Policy workshop on Using Research Results'.
10. A number of challenges have been faced in setting up the HRCS initiative, particularly in Malawi, where changes in the government 'host institution' delayed the establishment of appropriate systems. A lack of capacity and experience to provide relevant leadership and expertise to manage the programme has also been an issue. A major review of the Malawi initiative (jointly with DFID) is planned for March 2012.
11. In Kenya, PriceWaterhouseCoopers has been contracted by the funders to establish financial management and provide technical support to the CNHR, which underwent a successful mid-term review by DFID and Wellcome Trust in 2011. CNHR now receives direct funding from both funders as it plans for long-term financial sustainability.
12. The Global Health Trials scheme funded by the Wellcome Trust, the Medical Research Council and DFID also supports capacity strengthening. This joint scheme funds late phase trials of health interventions in low income settings, with a focus on trials which incorporate research that will lead to effective implementation of results. All research costs that are directly attributable to the trial may be included, for example:

- scientific, technical and administrative staff including statisticians, research nurses, trial managers etc.;
- consumables; major items of equipment and travel;
- holding trial steering, data monitoring and ethics committees and training and support for a trial manager.

13. Possible actions to improve the effectiveness of the UK Government's approach to scientific capacity building activities include:

- **Increased support for capacity-strengthening as a dedicated activity.** We welcome DFID's efforts to support capacity strengthening within its research programmes, and recognise its aim to accelerate progress in this area, by reviewing its activities and considering a more focused approach with targeted funding in future.
- **Promoting research capacity strengthening objectives through DFID's broader activities.** For example, as part of DFID's aid programmes (budget support) and its country-offices, DFID could encourage low and middle income countries to dedicate more resources to health research – particularly support for health and clinical workforce development in research skills and training. The country offices have some funds to spend locally on research, which could also be used to increase capacity strengthening. Some, such as the India office, already commit substantial resources to this area.
- **Expanding DFID's range of partnerships to leverage additional funding and draw on complementary strengths.** For example, DFID can draw on the experience of funders such as the Wellcome Trust and Medical Research Council in assessing research proposals and evaluating the effectiveness of scientific programmes. As UK funders working in this area, we are currently developing further areas of joint-working and partnerships which will add to DFID's capacity strengthening portfolio.

***Q2. What are the most effective models and mechanisms for supporting research capacity in developing countries?***

14. Capacity strengthening is a difficult and complex activity, and funders must be willing to commit for the long-term. It is difficult to identify a single right model or mechanism for supporting research capacity building, as the model chosen needs to be tailored to the specific country and research context. It can also be challenging to evaluate the relative effectiveness of different approaches. It is sensible to support a diversity of approaches, although care must be taken not to spread resources too thinly.

15. In general, effective research capacity strengthening activities are those that:

- aim to improve capacity to both generate and use research evidence;
- promote strong local ownership;
- strengthen the national and institutional research environment in addition to providing training and career support to individual researchers;

- acknowledge the broader policy context – for example, in the health area, strengthening capacity to undertake health research should be coordinated with parallel efforts to strengthen the clinical workforce and improve health delivery.
16. Successful capacity-building initiatives should aim to become self-sustaining over time and demonstrate the ability to leverage additional funding from other sources. Funders need to seriously consider what will happen once funding runs out and develop plans to facilitate a transition to a model which does not include dependence on the original funder. To provide sustainable solutions, funders may need to consider support for research infrastructure, building national and international research networks and developing institutional research strategies alongside the provision of research and training grants.
17. The Wellcome Trust's African Institutions Initiative is an example of this holistic approach to capacity strengthening. This £30 million initiative aims to strengthen Africa's universities and research institutions and help develop research networks. More than 50 institutions from 18 African countries are partners in seven international consortia, each led by an African institution. Each consortium operates independently and sets its own agenda, with the funding going directly to an African lead institution. A recent analysis of the range of capacity strengthening activities underway across the seven consortia identified a wide variety of activities including: leadership training and professional development; research training courses; competitive selection of PhD and postdoctoral fellowships; improved infrastructure (e.g. research and computing equipment); the development of financial and research administration systems; engagement and dissemination activities.
18. One of the difficulties in comparing different capacity strengthening models and mechanisms is trying to access accurate and up-to-date information about the different models which are already being used, so as to avoid 'reinventing the wheel'. There are a number of existing initiatives and partnerships which are attempting to strengthen coordination and promote best practice in relation to international development research, including capacity strengthening aspects:
- the **UK collaborative on development sciences (UKCDS)**, a collaboration of 13 UK funders and stakeholders with an interest in international development research. UKCDS members work together to provide a more coordinated approach to development sciences research and maximise the impact of UK research funding on international development outcomes. A UK funders group specifically focused on health research is facilitated by UKCDS, of which DFID is an active member, along with the Trust, MRC and Department of Health. UKCDS also manages a research capacity strengthening group which helps UK-based stakeholders engaged in capacity strengthening to share information, learn from each other and address common issues.
  - the **ESSENCE on Health Research initiative** is a collaborative framework that brings together funders of health research in Africa to share best practice, supported by a Secretariat in WHO. ESSENCE (Enhancing Support for Strengthening the Effectiveness of National Capacity Efforts) members embrace the principles of donor harmonisation and alignment with country priorities. According to these principles, donors/funders should align with priorities of countries in which they work, and harmonise their actions and procedures in order to facilitate complementarity among funders and to reduce administrative

overload for recipients of funding. Projects to date have included developing a common set of monitoring and evaluation indicators, and a study assessing the true cost of research in a low-income setting.

- the **Heads of International Research Organizations (HIROs)**, which brings together a large number of major government and philanthropic funders of biomedical research to share information about new developments in the field and coordinate policy responses where appropriate. HIROs members, led by the National Institute of Health, have been contributing to the development of a mapping project called World RePORT which is an illustrative mapping database system that can be used to share information about projects across funding agencies and other organisations.

It is important for DFID to engage strongly with these initiatives – ESSENCE in particular is a key point of contact for the collation of different capacity-building models employed by the major funders working in this area

19. As poor quality research is unlikely to be effective in improving health, the focus of capacity-building efforts must always be on building capacity to undertake high quality research. However, the research should be appropriate to the setting and the balance of funding between research, training, infrastructure and core support must ensure that the research environment, research and financial management and training elements are appropriately weighted within such programmes

***Q3. How does the Government monitor and evaluate the effectiveness of the scientific capacity building activities it supports? Is further assessment or oversight required?***

20. Evaluation needs to be fit-for-purpose. While the Wellcome Trust supports the need for robust evaluation and monitoring of scientific capacity building activities, we are mindful of the challenges in evaluating capacity strengthening activities as well as the resource implications, both for DFID and for the countries where capacity building activities take place. Evaluating the effectiveness of scientific capacity building activities can be a challenging process due to the difficulties identifying appropriate metrics and baseline measurements. For example, it would not be appropriate to simply count the number of people trained to PhD level, as the existence of a viable career structure at more senior levels will also need to be considered.

21. The availability of useful evaluation evidence will depend on the quality of the underlying monitoring data. To enable effective evaluation down the track, appropriate metrics and monitoring tools must be built into a project from the outset. Metrics must be simple and practical, to reduce the burden on grant holders and increase the likelihood of accurate reporting. The DFID logical framework (log frame) is widely regarded in this area and although more investment and focus in this area would also be welcome, additional DFID staff time and resources would need to be included to ensure it could be effectively used.

***Q4. What role does DFID's Chief Scientific Adviser play in determining priorities and in the development and assessment of capacity building policies?***

22. We are not involved in DFID's internal priority-setting process, but in general an effective CSA will have scientific credibility, a clear strategic vision, and the ability to engage in

high level discussions with partner organisations. We have found Prof Chris Whitty to be a very effective CSA and one with whom the Wellcome Trust is very pleased to interact.

**Q5. How are government activities co-ordinated with the private and voluntary sectors?**

23. In his speech at the Wellcome Trust on 11 November, Andrew Mitchell MP, Secretary of State for International Development, articulated the Government's vision to develop a whole-of-Government approach to international development, where DFID's activities are integrated with those of the broader public sector, such as the Foreign Office and NHS Global. He also spoke about his desire for Government to play an enabling role, fostering international development activities conducted within the private and charity sector.
24. Charities and government aid agencies often have similar priorities and should be encouraged to work together in areas where they have complementary skills and experience. In the Wellcome Trust's partnerships with DFID, we have benefited from DFID's relationships with the relevant national governments, while the Trust brings expertise in designing and administering research funding programmes. These are examples of where working in partnership can deliver benefits that could not be realised by either party working alone.
25. The India-UK CEO Forum, established in July 2010 by the Indian and British Prime Ministers, has provided a useful focal point for engagement between government, private sector and other agencies around specific issues including health, skills and infrastructure. Sir Mark Walport, Director of the Wellcome Trust, is leading a work stream on health and one promising focus area of activity is the scaling-up of primary care provision in India. DFID India has been integral in developing this programme of activity and will be vital to taking forward pilot stage projects.
26. Capacity building should encompass the capacity to understand and use research evidence as well as generate new knowledge. DFID has shown valuable leadership in this area through its research communication and 'research into use' initiatives, and we consider disseminating scientific evidence to be an important on-going role for the department. We are concerned that the cross-government drive to reduce spending on 'communications' activities may have an adverse impact on this area.