



Application for support to ENRECA Health – Danish Research Network for International Health Phase II (1 August 2009 – 30 July 2011)

Background

ENRECA Health –Danish Research Network for International Health has been operating as a technical forum since 2004 aiming at facilitating the integration of research for health into relevant development programmes and activities. The Network builds on the so-called ENRECA partnerships¹ with institutions, organisations and networks in low-income countries. It fosters cross-institutional and multi-sectoral interaction bringing social, biological and medical scientists into meaningful dialogue and promotes genuine partnerships between South and North. The expertise of the resource base in South and North covers many different aspects of international health, comprising both applied and basic research, ranging from a focus on health systems to individual diseases². The focus of the Network is on international health with due consideration to the debate on globalisation and global health.

The Network plays a significant role as a co-ordinating catalyst for the different stakeholders in research and development cooperation and has achieved most of its stated objectives thus far, as indicated in previous evaluations³.

The notable results include but are not limited to:

- The promotion of research priorities and research capacity building within the framework of Danida's sector programs, e.g. in Vietnam;
- Facilitation of dialogue on policy issues and technical support to the Technical Advisory Service and Danida, e.g. by participating in the development of the 'Guidance Note on Health and 'Guidance Note on Danish Development Assistance to Research for Health and Development';
- Dissemination and discussion of health related research perspectives, findings and new challenges through international and public seminars and workshops organised, e.g. through the preparation and implementation of the 'European Preparatory Meeting for Bamako 2008';
- Addressing new challenges in the landscape of global health within the field of chronic diseases, nutrition, humanitarian aid and refugee health as well as the implications of climate change for global health and development;
- Initiation of innovative forms of working relationships with civil society, the private sector and NGOs networks⁴.

ENRECA Health benefits from active participants and from a highly qualified and engaged Board and Executive Committee. The Network has a solid base of approximately 800 participants in the South and North, who seek and provide information via the Network secretariat; events are suggested, research collaboration initiated, and policy setting activities are coordinated to maximise the impact on the international agenda. When feasible, activities are carried out in collaboration with other Danida funded research networks. The high level of activity and commitment may be explained by the recognition of the 'collaborative advantages' that networks at their best can generate. The Network also provides an opportunity for the younger generation interested in research in international health, such as the pre-graduate students receiving 'FFU' travel grants, to stimulate and further maintain this interest in a research environment that may not be present in their 'home' institutions. The travel grants have given young

¹ The Danida 'ENRECA program' is based on enhancement of research capacity, equity and long-term collaboration.

² For an overview of expertise within ENRECA Health please see www.enrecahealth.dk/about/Health_research_topics/

³ A summary of ENRECA Health's experiences and a short analysis of strengths and weaknesses can be found in the 'Visionspapir' by the Board and submitted to TAS in December, 2008.

⁴ Please see Annex 1 for a list of selected activities 2006-09.

researchers the possibility of doing fieldwork and provided incentives for engaging in grounded research in international health.

Objectives for Phase II

Overall objective:

- To promote quality research, capacity development, and more effective communication of research in dialogue with counterparts, academic institutions, policy makers, civil society, private companies, and multilateral organisations with a view of improving health in low-income countries building on evidence based decision making.

Specific objectives:

1. Promote a systemic approach to research for global health and, when feasible assist partner countries in their strategic development of national health research plans and programmes;
2. Provide strategic inputs to the international agenda setting on research for health through involvement in activities and processes where the Network with partners may have an impact;
3. Strengthen communication strategies within existing research projects and expand knowledge sharing among practitioners and researchers; and
4. Consolidate the Network and prepare phase III, including a strategy for future funding.

Strategic approaches

Overall guiding strategies – The prioritisation of activities will be guided by the relevance in relation to the attainment of the MDGs, the objectives of the Danish Africa Commission, in particular contributing with insights on the linkages between healthy development of youth and sexual health, education, family planning and HIV/AIDS, and the priorities outlined in the forthcoming Danida guidance notes for Health and for Research for Health. Due consideration will be given to follow-up on these Guidance Notes and research issues vis-à-vis multilateral organisations. Finally, the Network welcomes the need for 'country-led research strategies' and demand driven research priority setting in the 'Call for Action'⁵ that was issued at the Global Ministerial Forum on Research for Health, Bamako 2008.

Building on core strengths – The Network will build its prioritised activities in Phase II on its core strengths: the ability to bring together different actors and disciplines bridging medical, biological, social and economical understandings of health, to facilitate activities, and to respond to the needs of participants. The Network will initiate debates and exchange of research ideas and results as regards new challenges, developments and issues of relevance to international and global health and development with the aim of stimulating research, integration of research into development and research collaboration. Most activities will be developed in collaboration with South-based counterparts thereby ensuring the relevance to the needs of the local context in South.

Overall themes

- Research and communication of research on prevention and treatment of communicable diseases (e.g. AIDS, TB, malaria, neglected tropical diseases, sexually transmitted infections and child health), non-communicable diseases (e.g. diabetes, cancer, cardio-vascular diseases), nutrition and the interaction between these; and
- Health systems research and research capacity development.

Focal areas – The Network will act as a catalyst for the use of existing expertise among Danish researchers, their partners in the South and policy makers on the following selected areas in which there is an established record of cross-disciplinary and inter-institutional collaboration:

⁵ www.bamako2008.org

- Social determinants of health, living conditions and health seeking behaviours: how can we improve research and address systemic differences in health equity⁶?
- Urban and environmental health: How can the consequences of an increasing number of people living in the cities in low-income countries be addressed?
- The impact of climate change on health: E.g. how can existing longitudinal data and surveillance systems improve our response to the consequences of climate change?
- Challenges of chronic diseases in partner countries.

Involving partners in the South – The Network aims at ensuring participatory approaches in its activities. This is done directly by contributing technically and – to a limited extent also financially – to various workshop activities, including the establishment of South-South networks and activities such as the ‘HIV Research Network in Vietnam’⁷, the ‘Working group on the social and political aspects of AIDS in Uganda’⁸, and the ‘Climate Change and its Impacts on human health, water and food security in the SADC region’⁹. The Network is committed to working with Southern partners as a way to address ‘the know-do gap’.

Combining disciplines and connecting people – ENRECA Health has over the years nurtured an approach in which different disciplines, including medicine, public health, anthropology, health economics, biology, religion, political science and gender studies have been represented in working groups, seminars, joint research proposals, conference delegations, etc. This has contributed to the development of professional trust at the individual level and has created opportunities for institutional collaboration in Denmark, and in the South.

Expanding the geographical scope in Denmark – A variety of competences is present in the different Danish institutions involved in health research outside of Copenhagen. The Network wishes to stimulate activities initiated by institutions and clusters of researchers, not only based in the capital. This will be done by actively supporting their plans and working groups, attending events, ensuring a fair representation of non-Copenhagen based institutions in the Board and Executive Committee.

Staying creative – The field of research and development is only vibrant if it is capable of taking on board new ideas and generations. Networks can be excellent in integrating people who are new to a given field. ENRECA Health will include researchers-to-be by using means of communication that appeal to students and others, by actively seeking to include their needs and suggestions and by diversifying activities to appeal to experienced and novice researchers.

5. Outputs and Activities

The main activities contributing to the achievement of the objectives will include, but not necessarily be limited to, the following:

Re 1 Promote a systemic approach to research for global health and, when feasible assist partner countries in their strategic development of national health research plans and programmes:

- Getting involved in programs for health in partner countries: This will be done either directly as in the case of the Kenya HSPS where the Network is a technical partner in the consortium assigned to this task or indirectly through support to activities in on-going research projects, as in the case of Ghana, Vietnam, Mozambique, Burkina Faso and Uganda;
- Follow up on the ‘Guidance Note on Danish Development Assistance to Research for Health and Development’ within the community of researchers as well as among Danida health advisers and embassy staff upon request.

⁶ In line with the thinking presented in the report ‘Closing the gap in a generation’ (2008) issued by WHO and the Commission on Social Determinants of Health and as discussed with the chair of the Commission, Michael Marmot, during the European Preparatory Meeting for Bamako 2008 held in Copenhagen.

⁷ <http://isim.ku.dk/ih/reach/>

⁸ www.chdc-muk.com/working-group.htm

⁹ With Danish Development Research Network, Danish Water Forum and ENRECA Health.

Re 2 Provide strategic inputs to the international agenda setting on research for health through involvement in activities and processes where the Network with partners may have an impact:

- Produce joint inputs to major events or processes: Identify conferences and other events of particular relevance, identify expertise among Danish researchers and their partners, prepare joint inputs to the programme, brief participants (researchers, Danida representatives or NGO members) upon request and ensure that results from these events are communicated to the resource base¹⁰.

Re 3 Strengthen communication strategies within existing research projects and expand knowledge sharing among practitioners and researchers:

- Facilitate the development of research based policy briefs: Strengthen communication strategies within existing research projects and expand knowledge sharing among practitioners and researchers. Ensure that a number of briefs are finalised and distributed to relevant stakeholders;
- Build awareness on the need for effective research communication: Continue the dialogue with researchers (PhD students as well as senior researchers) to understand their specific needs for tools or assistance (e.g. standard formats, writing skills, audio-visual skills, etc.)
- Facilitate thematic workshops and seminars: Facilitate plans and activities by and for that respond to the needs of the Network participants in Denmark as well as in the South;
- Facilitate an overview of on-going research programmes: Maintain and expand the Network's website and an updated list of research for health, capacity development and knowledge management projects at the Network's website;
- Map research for health expertise among Danish researchers and to a certain extent among their partners¹¹.

Re 4 Consolidate the Network and prepare phase III, including a strategy for future funding:

- Broadening the base of collaborating partners to increasingly include NGOs, NGO networks, private companies and multilateral organisations;
- Increasingly include younger generations: Actively ensuring the Network is open to *younger* generations and up-coming researchers by organising events that respond to their needs and ways of communicating;
- Continue focus on the active involvement of Southern partners in the work of the Network; and
- Think about future funding: assessing funding possibilities that are complementary to the Danida grant.

Management and organisation

The overall decision-making and oversight is the responsibility of the Board and the Executive Committee. For day to day management, the Network will maintain a secretariat with a high level of complementary technical expertise and at the current level of staffing. The task of the Secretariat is to facilitate the daily work of the Network in close collaboration with the executive committee, responding promptly to relevant requests by participants, as well as responding to requests from the Board. The job descriptions of the Secretariat staff are approved by the Board with a view of ensuring that the Secretariat has the right mix of skills in networking, communication, and insight and experience in global health research related issue as well as the required administrative and accountancies qualifications.

The location of the Secretariat is decided by the General Assembly and is recommended to be at the institution of chairman of the Network. Currently the Network is hosted by the Unit of International Health at the Institute of International Health, Immunology and Microbiology, at the University of Copenhagen¹².

¹⁰ As the Network has facilitated participation in and shared learning from the Global Forums for Health Research (held in Mexico City, Beijing, Bamako and the forthcoming conference in Havana in 2009) with a certain impact.

¹¹ As it has already been done within the field of climate change and Danish research expertise.

¹² See Network statutes at www.enrecahealth.dk

Budget *

Budget Lines	2009 (5 months)	2010 (12 months)	2011 (7 months)	Total
Salaries**	360,000	883,000	537,000	1,780,000
Activities	170,000	417,000	250,000	837,000
<i>Total (salary plus + activities)</i>	530,000	1,300,000	787,000	2,017,000
Overhead to University of Copenhagen at 25%	132,500	325,000	196,750	654.250
Total	662,500	1,625,000	983,750	3.271.250
Budget margin at 3 %	15,900	39,000	23,610	78.510
Grand Total	678,400	1,664,000	1,007,360	3,349,760
Estimated co-financing by participating institutions ****	79,000	189,400	110,500	378,000

* The budget has been index-linked, based on the rate for the previous grant, to reflect the economic development.

** Salaries include all personnel costs for the Network secretariat. It includes one research coordinator, one technical staff, part time financial support one student assistant.

** *Activities include travels, seminars as well as equipment, IT support and consultancy services.

**** The institutions support the Network by letting their staff participate in Steering Committee and Board meetings. It is based on a calculation where 18 persons participates two times a year of four hours at 618, - DKK/ hour = 89,000 per year plus 7 person at six times a year at four hours per meeting at 618, - DKK/ hour = 189,400 DKK

Annex 1 Selected ENRECA Health activities, Phase I, 2006-09*

Research communication (addressing the 'Know-do gap')

- Seminar: 'Treatment of Childhood under-nutrition', 2008 (140**).
- Seminar: 'Bandim: Continuity in international health research and capacity building seminar' (145).
- Workshop: 'How to prepare research based policy briefs' 2008 (45).
- Seminar 'Health Economics and Health Systems' 2008. Danida, Oxford Policy Institute and HSPS Ghana (56).
- Debriefing workshop: 'Health System Reform and Ethics: Private Practitioners in Poor Urban Neighbourhoods in India, Indonesia and Thailand' (in Thailand) 2007 (60).
- Debriefing seminar: '12 years of research and capacity building in the TORCH project in Uganda' 2007 (45).
- Meeting: 'Status, Prospects and Challenges of Danish Vaccine Development and Use in the Context of Developing Countries' 2006 (45).

Promotion of new research collaboration, South/North and South /South

- Workshop in Uganda: 'Health Care in Situations of Chronic Conflict: Research for Action' 2007 (43).
- Workshop in Ghana: 'Water Supply, Sanitation and Health at Schools and Local Communities in West Africa', 2007 (50).

Exchange of experiences

- Workshop: 'Global Health Research –Strengthening the network' for researchers based in western parts of Denmark, 2009 (13).
- Workshop: 'Identifying new ways for researchers to collaborate in international health and development: how can we benefit from data sharing' (46).

Technical inputs to policy makers and international organisations

- Contribution to the development of 'Guidance Note on Health (GNH) and 'Guidance Note on Danish Assistance to Research for Health and Development' (GNRHD) 2008-2009.
- Participation in the consortium assigned by Danida to implement the Kenya Health Sector Programme Support II, (HSPS) 2008-2011.
- Preparation, implementation and follow-up on the 'European Preparatory Meeting for Bamako 2008' held in Copenhagen with and for Danida. Contributions to the European Communiqué.
- Participation in the 'Global Ministerial Forum on Research for Health' 2008 held in Bamako as a part of the Danish delegation.
- Contributions by Board members to Danida health advisers meetings in Arusha 2006 and Maputo 2008.
- Vaccine workshop: 'What it takes to roll back malaria, TB and HIV/AIDS' , 2007 (58).
- Participation (rapporteur function) in the TDR 80th Standing Committee Meeting Isfahan, Iran 2006.
- The Copenhagen Panel on Key Challenges for Global Health Partnerships 2006 (80) GAVI, Danida & DIIS.

South-South facilitated research related activities

- Uganda, establishment of a website for Working Group on Social and Political Aspects of AIDS in Uganda, 2008 (www.chdc-muk.com/working-group.htm).
- Vietnam, establishment of and follow up on a national network in Vietnam 'HIV Research Network in Vietnam' within the framework of the 'REACH project' (www.hivnet.vn).
- Contribution to the establishment of the HIV knowledge centre in Beira, Mozambique 2007-2008.
- Participation in the first national HIV course in Mozambique as a University of Copenhagen accredited course.
- Contribution to the meeting 'Climate Change and its Impacts on human health, water and food security in the SADC region' and establishment of a regional research network.

Communication

- Development of research database of current and previous research projects.
- Conceptualisation of a new and updated website (www.enrecahealth.dk).

**For a comprehensive brief of the previous activities of the Network, please see 'Annual report 2006 and 2007' and completed plan of action 2008.*

***Numbers of participants in ()*

