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1. **Introduction**

The Thirty Second World Health Assembly in considering the topic "Formulating Strategies for Health for All by the Year 2000" requested the Director General to foster the intensification of research and training in primary health care at national, regional and global levels, making use in particular of appropriate collaborating centers."

A Sub-Committee on Health Services Research of the WHO Global Advisory Committee on Medical Research (ACMR) was established in June 1978. This Subcommittee since its inception has stimulated the collection and analysis of information on the current involvement of WHO in health services research (HSR), and has held altogether six sessions. The Sixth Session of the Subcommittee which took place in Addis Ababa during 18-21 November 1980, reviewed the activities in this area and concluded that; increasingly, countries were accepting the principle that health services research was an important guide to policy and management for primary health care, and that a certain momentum had been generated by the earlier meetings with regional and country representatives. However, there had been little progress in putting the principle and their intentions into practice. The Sub Committee made several recommendations concerning the future strategies for the development of this important area and these shall be reviewed later in this paper.

2. **Health Services Research — Definition and Criteria**

The definition of the HSR proposed by the Sub-Committee: "Health Services Research is the systematic study of the means by which basic
medical and other relevant knowledge is brought to bear on the health of the individuals and communities under a given set of existing conditions."

The Committee has also defined two criteria:

a) The activity is concerned with aspects of health policies or service structure, organization, resources and management.

b) The activity focuses on the assessment of alternative solutions to identified problems of health delivery systems.

These two criteria were also intended to exclude a variety of epidemiological and sociobehavioural surveys without an explicit relationship to health services development, as well as different types of clinical research.

3. Health Services Research in Support of the Goal of Health for All By the Year 2000

The principal elements of the global strategy for health for all include: greater equity in health care; community participation; intersectoral action, reorientation of the health systems towards greater equity by means of better planning and management and the use of appropriate technology.

In the implementation of these strategies by countries, health services research has a vital role. Some of the priority areas identified by the Sub-Committee for health services research include:

a) Stimulation and promotion of political commitment - particularly in the crucial area of social change processes within the health sector, in organizational development and decision-making processes.
b) Organization and management of health services.

This is considered to be the most substantive area of health services research, including research into all aspects of the management of health services; evaluative research to devise methods of assessing coverage and utilization, distribution, availability, accessibility, and financing of services, and in the area of reorganization and strengthening of the infrastructure with a view to supporting primary health care.

c) Community Participation

Specifically in identification of community beliefs and perceptions, barrier to the utilization of health services; methods for promoting active involvement and responsibility of individuals, families and community in their health care, and in improving interaction between the community and health personnel.

d) Intersectoral Action

The global strategies recognize that health is not improved solely by the health system and it is essential to mobilize support from other sectors. Research is needed to acquire a better understanding of socioeconomic determinants of health, and develop mechanisms for effective intersectoral action at different levels. The research in this area is difficult because of its inherent multidisciplinary nature and the difficulty of harnessing the various skills that it needs.
e) Primary Health Care in Urban Areas.

Internal migration trends from rural to urban areas in many countries of the world has led to a high proportion of underserved population groups living in the urban areas. Research is needed to understand the nature of the problems affecting health of the urban population, the dynamics of urban development, the important role of other sectors and the mechanisms of achieving health development through effective intersectoral and interagency coordination. At the global level, the issues of health of the people in migrant resettlement areas are also very crucial.

4. Development of National Capabilities and Mechanisms for Health Services Research

National capabilities and resources for carrying out research varies greatly and most countries need to strengthen their mechanisms and resources in this area. The overall objectives of a global HSR development strategy should strengthen the national capabilities and improve mechanisms for undertaking appropriate research as well as for the application of the results of such research to the health development processes.

Specific areas for building national mechanisms include:
- identification and establishment of priority issues for HSR in support of health development;
- coordination of research at the national level;
- training of research workers;
- strengthening of national institutions;
- increasing financial resources allocation for research;
- dissemination, exchange and utilization of information and experiences which could be applied or adapted.
- development of effective linkages between research institutions and policy levels in health.

5. **Role of WHO in HSR**

The Sub-Committee on HSR made specific suggestions and recommendations for the strengthening of the role of WHO in this area. The conclusions and recommendations of the Sub-Committee are included in the Report of the Sixth Session of the ACMR Sub-Committee on HSR (ACMR/HSR - 6/80 Report).

The recommendations can be summarized as follows:

- Strengthening of the WHO Secretariat;
- Allocation of adequate budgetary resources for the support of the priority areas in HSR;
- formation of a Scientific Steering Committee on HSR to continue the work begun by the ACMR Sub-Committee;
- Establishment of close liaison with other agencies to coordinate efforts in technical cooperation;
- development of mechanisms for the promotion of HSR and creation of an awareness of its potential for strengthening health development process;
- promotion and strengthening of the national HSR development mechanisms for the support of health for all.
Conclusions

Health Services Research forms a component of all technical programs and increasingly is being recognized as important instrument for utilization at the policy level for health development processes. HSR in priority areas for the support of the global strategies for health for all is needed to guide the mechanisms for the implementation of the principal components of the strategies and strengthening of the national mechanisms and capabilities in this area is considered an important area for WHO's program at the global level.

References:

1. WHO ACMR Sub-Committee on Health Services Research.
   ACMR/HSR - 6/80 Report.

2. WHO's Efforts in Health Services Research - Progress Report:

3. Abstract of Discussions at the 33rd World Health Assembly
   Concerning Health Services Research. Agenda Item: Development
   and coordination of biomedical and health services research.
   ACMR/HSR - 6/80.4.

4. Role of Health Services Research in Implementing Strategies
   of Health for All by Dr. Susan Cole-King, Consultant, WHO.
   ACMR/HSR - 6/80.10.