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Towards a NHS Guidance Framework for UK Health Sector Involvement in International Development

We are pleased to have the opportunity to comment on the NHS framework for International Development. The Wellcome Trust is the largest charity in the UK. It funds innovative biomedical research, in the UK and internationally, spending over £600 million each year to support the brightest scientists with the best ideas. The Trust supports public debate about biomedical research and its impact on health and wellbeing. The Trust also supports a large number of clinical scientists in the promotion of world-class research and also puts significant resources into building clinical research capacity in developing countries.

We are broadly supportive of the adoption of a framework for international development for the NHS as we suggest that there are important benefits for both the UK and host countries when UK health professionals spend time in developing countries.

We would like to bring to your attention an additional benefit to the NHS of clinicians working in developing countries. The Trust supports UK clinicians who undertake research abroad in areas of growing interest to the NHS. With increasing international travel, higher numbers of UK citizens are returning to the UK with infectious tropical diseases. Tropical diseases feature less and less frequently in the UK medical school curriculum and there is therefore a risk that diagnoses of these diseases may be missed and that doctors may not be familiar with the latest treatments and management techniques. However, on their return to the UK, doctors who have gained exposure to these diseases by working in countries where they are endemic will have the experience to diagnose and treat these patients in the NHS.

We suggest that the framework should address the need for the deanery and other bodies to recognise the importance of clinicians working in the developing world and to facilitate, rather than hinder, individual ambition in this area. The education of deanery staff will be necessary to ensure consistent implementation of this framework throughout the NHS.

We would like to comment on the summary paragraph on medical research within the Policy Ambiguity section (section 2.3), which includes the following:

"Initiatives exist through the Wellcome Trust, and the UK Collaborative on Development Sciences. Many universities are more interested in the much larger flows of funding available for medical research, but the consequent research "partnerships" are specialised, are not known for responding to developing country agendas and some pay relatively little attention to translational research relevant to the development of basic health services in poorer countries."

We are concerned that this paragraph is misinformed and potentially misleading. While the statement acknowledges that the Trust funds medical research initiatives designed to

support developing countries, it appears to criticise the effectiveness and appropriateness of UK programmes of this kind. The examples below illustrate that Trust programmes both respond to developing country agendas and encourage relevant translational research.

The £30 million African Institutions Initiative (All)¹ aims to develop institutional capacity to support and conduct health-related research vital to enhancing people's health, lives and livelihoods. More than 50 institutions from 18 African countries are partnered in seven international and pan-African consortia, including universities and research institutes from the UK, Europe, the US and Australia. UK universities involved in the partnerships include the London School of Hygiene and Tropical Medicine, Liverpool School of Tropical Medicine and Oxford University. Each consortium is led by an African institution and is independent to follow its own agenda, for example providing training or equipment, and is therefore in an ideal position to be responsive to developing country needs in capacity building and medical research.

The Trust and UK Department for International Development have both contributed £10 million to a Health Research Capacity Strengthening (HCRS) initiative² that aims to strengthen 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 national programmatic priorities have been developed entirely by national task forces, deliberately without any predetermined direction from the funders.

Out of the deliberations for the development of All and HCRS emerged the need for a strong body to represent African scientific opinion. The Trust has supported the creation of the Initiative to Strengthen Health Research Capacity in Africa (ISHReCA), which provides a platform for African researchers to discuss the local needs to promote an African-led agenda for capacity building. This is chaired by Professor Nelson Sewankambo from Makerere University in Uganda and the secretary is Dr Sam Kinyanjui from the Kenya Medical Research Institute (KEMRI).

The Trust also funds major overseas programmes, which are long term partnerships focused on research on malaria and other diseases that cause high levels of mortality in the tropics. These projects include the KEMRI-Wellcome Trust Research Programme, based in Kilifi and Nairobi, Kenya³; the Malawi-Liverpool-Wellcome Trust Research Programme in Blantyre, Malawi⁴; and the Wellcome Trust South-east Asia Programmes, based in locations across Thailand, Vietnam and Laos⁵. The research agendas for these programmes are driven by scientists living and working in developing countries and focus on health problems of local and regional significance. In each case these programmes involve the collaboration of local institutions with UK universities.

An important theme common to All, HCRS, ISHReCA and the major overseas programmes is that their agendas are set in the regions where they are based, rather than imposed by the Trust.

¹ <http://www.wellcome.ac.uk/Funding/Biomedical-science/International-funding/Global-health-research/WTX055734.htm>

² <http://www.wellcome.ac.uk/Funding/Biomedical-science/International-funding/Global-health-research/WTDV026103.htm>

³ <http://www.wellcome.ac.uk/Achievements-and-Impact/Initiatives/International-biomedical-science/Major-Overseas-Programmes/KEMRI-Wellcome-Trust/index.htm>

⁴ <http://www.wellcome.ac.uk/Achievements-and-Impact/Initiatives/International-biomedical-science/Major-Overseas-Programmes/Malawi-Liverpool-programme/index.htm>

⁵ <http://www.wellcome.ac.uk/Achievements-and-Impact/Initiatives/International-biomedical-science/Major-Overseas-Programmes/South-east-Asia-programme/index.htm>

The Affordable Healthcare in India⁶ initiative funds translational research projects that will deliver safe and effective healthcare products for India – and potentially other markets – at affordable costs. The current initiative is seeking to fund technology development for healthcare, including diagnostics, therapeutics, vaccines, medical devices and regenerative medicine.

We suggest that in light of these examples that the role of Trust and UK Universities, and the contribution of UK medical research funding to capacity building in general, should be clarified. We are happy to provide additional information or discuss this issue with you further.

Yours faithfully,

Mark Walport
Director, The Wellcome Trust

⁶ <http://www.wellcome.ac.uk/Funding/Technology-transfer/Awards/R-and-D-for-Affordable-Healthcare-in-India/index.htm>