Ensuring Effective Transfer of Competencies to Local Researchers working in International Health Research Projects in Malawi

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Policy Brief

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Introduction

Sustainability of research activities led by international research organisations requires effective transfer of knowledge and skills to local research collaborators or partners. To achieve this, the Ministry of Health (MoH) needs to ensure availability of well drafted, implemented and monitored agreements between international research organisations and local collaborating research institutions. Continuity of programmes and full realisation of expected outcomes should be direct benefits of such meaningful collaborations (Smith and Katz J, 2000).

The National Commission for Science and Technology (NCST), an umbrella body under the Office of the President and Cabinet (OPC) on research, developed guidelines on co-ordinatory and regulatory national requirements on the establishment and operation of international research institutions in Malawi. One of the guiding declarations states that “any foreign-based research project, institution or organisation intending to operate in Malawi shall have to first be affiliated with a local Malawian institution that is recognised by NCST before starting any operations in Malawi provided that such a local institution is relevant to the research business of such a project/institution/organisation” (NCST 2003). Such an arrangement is envisaged to benefit the local collaborating institutions from the research infrastructure and facilities being used by the project. In addition, the mandate and functions of the local collaborating institution are promoted and complemented. Lastly, transfer of skills to local researchers and Malawi as a country is eventually enhanced.

However, the state of affairs in many international health research projects in Malawi does not reflect the aforementioned. Local researchers have little or no knowledge of how study samples are managed, i.e. how the samples are analysed, which tests are used, who really owns the samples, and when the samples will be destroyed, among others.

Key Messages

• Continuity of research activities or services led by international research organisations in Malawi requires effective transfer of knowledge and skills to local research collaborators. Ideally, this transfer should be guided by well drafted, implemented and monitored agreements between international research organisations and local collaborating institutions.

• However, this transfer does not happen in most cases. As such, knowledge and skills learnt in these projects on management of samples, ownership of research data, management of participants ends up not being effectively transferred to local collaborators for continuity of activities and/or services offered by the project.

• The Ministry of Health should take a leading role by putting in place a high level committee on health research to oversee research activities in the country, including capacity building.

This came out at two of the four recent health research review meetings held by the National Health Sciences Research Committee (NHSRC). During the meetings, members expressed concern that local researchers in most of the just-finished and some ongoing research projects do not end up getting the required skills and knowledge to continue operating the activities when such projects come to an end, defeating NCST Guidelines (2nd and 3rd NHSRC Review Meeting Minutes, 2015).

Methodology

This policy brief is based on a comprehensive review of existing literature. The literature reviewed included scientific papers, research reports and government policy documents.
Currently, the NHSRC is advocating for the establishment of institutional research committees (an institutional TWG) on top of the institutional research coordinators (NHSRC Minutes March, 2015). Some central as well as district hospitals have since constituted such committees to oversee all research activities carried out in their settings.

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Discourse of Policy Options

At the national level, as the Algiers Declaration suggests, the MoH should establish a higher level committee at the central level to oversee research activities including capacity building. The committee should be multidisciplinary, composed of information scientists, statisticians, researchers, policymakers and decision-makers from within the health sector (WHO, 2009).

To create a benchmark, the MoH, through the newly-established Policy Unit in the Planning and Policy Department, should review all available agreements between international research organisations and local collaborating institutions including academic institutions such as the University of Malawi. This review will enable the MoH to develop proper capacity development initiatives for the country, particularly on knowledge and skills transfer. The interventions developed need to be multi-faceted and tailored to our local context (Bennett et al., 2010).

The MoH Research Unit attempted to address the problem in 2010 by nominating institutional research coordinators in all district and central hospitals to act as focal persons of research in their institutions. This was in line with the WHO direction that countries need to build, maintain, and prioritise staff competencies in institutional capacity development, career planning, networking, implementing change, project management, team building, among other areas (WHO 2002-2005).

However, the programme did not work well because of a number of reasons. First, the nominated individuals did not have adequate capacity to oversee the operations of such big research institutions. They should have undergone an appropriate training in order to develop their skills and confidence and to gain opportunities to apply such skills. Linkages, partnerships and collaborations enhance research capacity building and in particular knowledge and skills transfer (Cooke, 2005).

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References


National Health Sciences Research Committee Guidelines in Malawi. 1999.


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