Minutes

ESSENCE Members Meeting
6 April 2017
Fogarty International Center – National Institutes of Health
Building 16A Conference Room
16A Center Dr., MSC 6710, Bethesda, MD 20892-6710

1. Introduction: Self introduction of participants including those participating through WebEx.

2. Opening Remarks: Nalini Anand welcomed all attendees on behalf of the NIH/FIC and stated how delighted they are to have all participants join the meeting. She reiterated the role that ESSENCE plays in bringing together key funders to continue addressing key challenges facing research and research capacity in LMICs. She also thanked the co-chairs Linda and Hannah for their leadership for the initiative. She stated that this meeting provides for an opportunity to plan ahead and think about how best to coordinate efforts.

3. Session on ESSENCE in the Current Era of Global Health

a) Review of the mission and goals (Ian Askew, Annica Wayman and Simon Kay)

- ESSENCE has been going on for almost 8 years and it’s a way of trying to bring donors and funders together. Members agreed that in the nearest future, ESSENCE would likely be more efficient in helping research groups to grow as it serves as the mechanism for harmonization of members and partners coordinating efforts.

- An update was given on the group’s reason for supporting country level pilots as mechanisms for coordination and alignment of funding, which is basically the recognition that ESSENCE cannot coordinate support from a global level, but the one way to have different understanding to different types of health research in a country is a country pilot. The understanding is that ESSENCE only gets involved in countries where there is a mechanism for sustainability to what the members would do or are doing.
b) The Essentials of Essence Document and ESSENCE overview presentation

- Everyone agreed that the expected outcomes need to be reviewed and expressed things more. The current SC to revise the document if necessary.
- The basic core funding to run activities of the initiative is still being provided by Sida as a specific part of its support to TDR on a bi-annual basis and there is no indication at this point that the funding will not go on.

Action: There are gaps obviously in terms of memberships, the secretariat is expected to carry out a review of the members’ list and perhaps where necessary solicit for the assistance of the SC in order to re-engage and know what to offer the different groups.

4. Overview of the 2017-2018 workplan

The 2017-2018 workplan was prepared for two years and is still going to spill over into 2018 and beyond. Additionally, four out of the five outcomes are based on the expected outcomes as agreed in the Essentials of ESSENCE document, recently revised in June 2016. All the revision made at this meeting may slightly affect the activities.

- Review of the Expected Outcomes and Activities

- The workplan was discussed extensively with a few additions and edits from the members. The discussions centred around other new ideas, activities to stick with, and the ones to put emphasis on, and everyone agreed that the workplan language needs to change and some activities combined or merged with each other.
- The face-to-face meeting at major events will still be done once a year. This will continue to serve as an opportunity for policy dialogue and advocacy for ESSENCE.
- An important aspect of ESSENCE is engagements, and most members agreed that it’s time to re-engage, yet everyone needs to play their role. It was noted that the secretariat has started reviewing and confirming the members, engaging new members and also confirming the focal points for the people who are our main contacts.
- The members agreed to keep the country based pilots but not necessarily indicate any example of engagement. It was suggested that the group should have discussions on how to better engage with the Africa Research Funding Agencies and Councils, as their inputs can help to sharpen what members are doing even as individual agencies.
- The members in attendance were informed about the revised ESSENCE brochure that is now easily accessible on the website alongside other publications. It was suggested that we keep a relatively up to date slide deck on ESSENCE website for anyone who wants to use.
- The secretariat will continue to ensure that the minutes of meetings are sent to all members as a regular communication to try and keep the overall membership up-to-date with developments.

Action:
- There is an obligation to talk to our teams, the head of our institutions, and others about ESSENCE on Health Research initiative so that they at least know what ESSENCE is all about.
• The hard copies of the revised version of ESSENCE brochure are to be placed in a most obvious display place at our different agencies.
• The SC is expected to finalize the revised version of the 2017-2018 workplan - *Annica to work with Garry on finalizing the revised version.*

- **ESSENCE 2017-2018 workplan implementation areas and leads:**

  • Alignment of policy on overheads to be included in research management – *Wellcome Trust*
  • Study on core funding for organizations – *Sida, IDRC and Wellcome Trust.*
  • Exploring different models for building research capacity as a way of contributing capacity resource to communities – *IDRC and NIH/FIC.*
  • Social innovation for health care delivery – *Sida*
  • Implementation Science – *NIH/FIC*

5. **Discussion on Two Initiatives for 2017 - 2018**

Simon and Linda presented brief updates and progress on two implementation areas of the workplan and invited comments on each area. Below are the areas following the order in which they were discussed:

**a) Research Management (Simon Kay)**

• Wellcome Trust has spent 6-9 months developing the idea of having a priority partners calls in Africa and Asia and working very broadly around – portfolio scales that research leaders require; research systems and management; and strategic partnerships (how Wellcome Trust can capitalize more on investments).
• Wellcome Trust has contacted partners through Association of Research Managers and Administrators (ARMA), which is a professional association for research managers in most countries. These experts were hired to work for Wellcome Trust and now re-engaged for a further 6 months which they hope will be seen for the benefit of the wider funder community. This initiative is more about trying to develop the consultants’ skills rather than just creating the network in middle income institutions, and a possible way forward for Wellcome Trust will be to develop and support a network of research administrators in Africa, building on the many initiatives already funded and supported.
• It’s expected that ESSENCE would provide an efficient way of reaching out to the risk constituency and the feedback from members is critical for the consultants. Some of the members are interested, but the idea is to partly partner with the SC members and partly with key stakeholders from the African institutions.

Members suggested that a sub-group be set up to work on this. They are expected to come up with a timeline and what the project is going to look like – *Action for USAID, WHO/TDR, IDRC and Sida.*

- **Updates on ESSENCE products around particular areas of Research Management**

• The good practice documents are on the websites for downloads. Please see: [http://www.who.int/tdr/partnerships/essence/en/](http://www.who.int/tdr/partnerships/essence/en/). One of the documents developed in
2010 was recently revised in 2016, and it’s now a much stronger document than it was then.

- More importantly, it’s very critical to know what has happened at the members’ agencies in terms of the impact of these documents and other presentations that are available on ESSENCE website. Having this information could at least help member agencies to make informed decision.

**Action:** It was also suggested at the meeting that ESSENCE good practice documents should be revised at least once in 5 years and a survey carried out to scope out the demand for the documents especially the costing document to know if it’s being used and if it has deepened peoples mind - both funders and recipients.

**Action:** There is sufficient interest to revise the 2012 costing document and unanimously everyone agreed that the five keys costing document should be revised because it would benefit from a key revision which can be done within the Research Management areas of activities

**Action:** Review groups will be set up to look at the practice documents, identify what works and what doesn’t, and to come up with more communication and dissemination plan to further get ESSENCE stuff out there. The members agreed to have more discussion on how to better disseminate or train people on issues that are being solved.

b) **Implementation Science (Linda Kupfer)**

- NIH is interested in the capacity building part of implementation science (IS) and two definitions were offered:
  
  **Fogarty’s definition:** “Implementation science is the science behind been able to take what is known as intervention and figure out why they are not currently been used”

  **National Implementation Science Network’s definition:** “Implementation science is the studies of factors that influence the full and effective use of innovations in practice. The goal is not to ask factual questions, but what is or rather to determine what is required”.

- Implementation science and implementation research are used interchangeably, but unless people are trained enough to do this science, it’s not going to be sustainable.

- NIH/FIC hasn’t unpacked the set of methodologies that would define implementation science and a curriculum to teach IS, but they have been funding implementation science in a very interesting manner - like a distributed model, and almost every program that they support in research training has implementation science as one of the areas that the researchers can apply to work in.

- It’s likely that NIH would convene a meeting of people who are doing training in implementation science and capacity building to try to get at these core issues to enable them come to some conclusion or directions on how to put the initiative together a bit better.

- A sub-group could also be set up by the group to look at these issues and maybe, have a workshop where the group can talk about capacity building and implementation research – **Action for USAID, NIH, IDRC, SIDA and WHO/TDR.***

*Simon and Linda to write descriptive paragraphs with goals and activities to be sent to SC for inclusion in their workplan.*

   - **List of side-events in the fall/autumn of 2017**
     - Gates Foundation grants challenges in October – TBC
     - [Implementation science in December](https://www.academyhealth.org/events/site/10th-annual-conference-science-dissemination-and-implementation-health) – NIH December 4-6, 2017. Marriott Crystal Gateway, Arlington VA. Abstracts due late May - late July 2017
     - Global Evidence Summit - September in Cape town

SC monthly teleconferences will continue. The next face-to-face meeting in 2018 will be in London, UK, hosted by the Wellcome Trust, the precise date will be confirmed.

7. Roundtables of members’ current plans/developments (attached as a separate document)
List of Participants

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