

## OPEN FORUM

**Dr. Cez Acuin:** Thank you very much, Dr. Palaganas. Our moderator for this forum would like to be known as the former secretary of the Department of Health and as the active Chair of the PNHRS Resource Mobilization Committee. He's definitely older than me. But since he did not give any dates, you can only guess what his age is. Ladies and gentlemen, Dr. Jaime Galvez-Tan.

**Dr. Jaime Galvez-Tan (Moderator):** A pleasant good noon to everybody. A very special greetings to all our researchers, lovers of research, leaders of research and research users. And of course, a special greeting to our WHO representative to the Philippines, one more round of applause. I guess he is also a good resource. I thank all the speakers, particularly because they are what we are labelling, five-year, our research leaders, research model managers and particularly for those who are new in establishing their regional research councils. I hope they were inspirations to all of you.

So, we have a 26 year-old from Region 8, 19 year-old from Davao, a neonate from the region, actually not a neonate but under coma for a year or two. When I look at Region One, *manonga tawen* [for how many years]? I have in my record here, I think since 1989 so nearly nine years old. I think Dr. Gruet did not give any age of your research councils, 23 years. *Mga Visayas pala ay* [It seems the Visayas are our] front runners in research in the Philippines particularly in the regions. Well, I note the other regions. This is an open forum. We also have very limited time.

So just to synthesize, what is interesting across all the regions is that there is definitely an organization. Regions One and the Northern Luzon regions are very particular about their Vision and Mission and Objectives which they take up quite elaborately. I hope that it will be a reason for all of the regions to establish their own vision and mission, strategies and objectives and performance indicators. This is what Dr. Macaranas in the AIM community always like to emphasize. So, let me just give the jargon code VMO-KRA-PI. VM is vision mission, O is objectives, they have KRA which is Key Result Areas and PI, Performance Indicators. So probably, I would like to ask the whole research community in the regions to complete your Vision, Mission and Objectives. KRA or Key Result Areas with Performance Indicators. Let us please, all the rest of the regions will inform their committees and sub-committees quite very well. What would have been interesting really, as we have now used the model of the rabbit and the hare is that I would have loved to see some form of organizational evaluation. What was the organizational lessons learned from the turtle period, from the hare period, from the comatose period, and what eventually were the factors of resuscitating? I think these will be helpful for the other region, so you can see, we have a 26-year old, 23-year old, 9-year old, a month old and so forth that I think we truly want the other regions, and I am particularly mentioning the Autonomous Region of Muslim Mindanao as the latest also to join the regional councils to really learn lessons and be inspired by what has happened.

So, again I was looking at institutional agreements. There's plenty of health human research resource in capacity-building, inventory, sub-researches across. I will look at this really as the standard ways of strengthening regional councils. I am looking for that convergence. Particularly, I am quite interested in what Region 1 was doing in terms of their institutional agreements as well as the inventory. I think this is also being done in Region 8. And for Region 7, Dr. Gruet was really emphasizing a regional perspective and what is

interesting is really looking at it now. I think most regions started and are still in the supply concept and structure. But I think Dr. Gruet was now calling on us to look at the demand concept and structure. Meaning let us start from where the people are, where the communities are, what are their real problems and find out how we can further improve our research as well as research resource in all of these.

I think then at the same time, in Region 8, I heard the word “mentoring” although Region 1 also said it. But I would have loved to see again a lot of what the research mentoring process there are. And in fact, yesterday, I was also advocating this to really ensure that our research projects are on their way.

I congratulate those that have websites. I think this is the way to go to be known to the both international and national communities. We also hope that there will be regional journals.

I commend Region 8 for already establishing international fellowship, grants to attend international conferences. I hope the other regions will be inspired by this. And of course, the representation in the Regional Development Council. Region 1 because we are excited by them, actually it's a guarantee that it is in the Regional Development Council. And I note, of course, about the very strong regional context in the Cordillera Administrative Region. I think that it is what we would like to see in everything.

I have a wishlist actually before we proceed with as a sort of synthesis, having seen all of that happened, of course, the five regions that are models right now and inspiration for the 11 other regions. I would like to see a lot more of the word 'research promotion'. There is now health promotion, I would like to see health research promotion. And when I talk of health research promotion, it will cut across, that if we start from the community people would be awaiting results also that would affect them. And then as it goes to the vertical lines up to the policy makers, the policy makers know already even at the start what you are doing so that they are waiting for the evidences for their future policies. I call this really research promotion, the awareness in the whole region, all of the stakeholders. When I talk of stakeholders, these are really from bottom to the top.

Research translation was the theme of the National Health Research Forum last year. Now I think we would like to see more of the word research translation rather than research information, rather than just research utilization. The key and the by-word for the 21<sup>st</sup> century is research translation. And when we talk of research translation again, going back to our stakeholders, how do we translate research results to the community? Yesterday, there was a very nice talk on how policy makers conceive research results but I also challenged everybody how do we make a farmer understand the result? How do we make an urban poor woman, a fisherfolk, for example, understand the results of our research? And then, of course, while we have encouraged a lot of capability building, a lot of research, I did not see research publications in any of the reports. And if any of you starts a journal, please ensure do not just start any journal, but a peer review journal.

Now these are really forecasting, what we would like to see. While we see a lot of stakeholders, particularly in the health side, I think the message of Dr. Macaranas this morning was more of going beyond health- tying up with the social sciences, economic sciences, engineering sciences, a truly multidisciplinary research. And I see really a lot of inter-institutional research. What would be really nice to see are multidisciplinary as inter-

institutional and in fact multi-provincial research. And at the same time, I think we have to gear up while a lot of our researches need to be translated at the community level, at the national level and regional level for policy makers. Let us not forget that we are already in a global situation so I hope that the regions would move towards global competitiveness and global excellence in research. So *simulan na po natin* [let us start], if any of you still have questions that you would like to ask our panel here, to be more inspired by what we need to do. We have a question here, before I call on ARMM.

**Dr. Alumanda de la Rosa:** Good morning. I wish to congratulate the panelists for presenting their activities in their regions. However, I was expecting to hear the priorities and the research agenda that they are pursuing at the present time. Being a national agency, we are thinking how we can link with the regions in terms of research areas for nuclear applications of radioactive materials. A case in point is that in Davao, we have a collaborative work with the Davao Water District, and probably in the other regions we may also be able to establish linkage by knowing what kind of research priorities and research topics so that from our end we may be able to touch base with the regions. Thank you.

**Dr. Jaime Galvez-Tan:** Great. Thank you. Could I just ask our panelists, quick round, only one research priority. What is your top-most research agenda, just one please.

**Dir. Leonardo Quito (RHRDC-I):** For us, it is our institutional policy issues for the local government units.

**Dr. Enrico Gruet (RHRDC 7):** Environment.

**Dr. Fe Barquin (RHRDC-8):** On tropical diseases.

**Dr. Warlito Vicente (RHRDC-11):** Herbal medicines and environmental concerns.

**Dr. Erlinda Palaganas (RHRDC-CAR):** Occupational health and safety issues among pesticide exposed communities and those exposed to mine tailings, etc.

**Dr. Jaime Galvez-Tan:** Okay. I hope nuclear medicine and nuclear science will have a role in any of these.

**Dr. Soe Nyunt-U (WHO):** Not of a question, more of a comment. I had to make a decision whether I would come to this forum or go to Canlubang to do economic research. I went first to Canlubang because economic research is one thing that's been missing and we have the opportunity of getting the preliminary results of the few steps being done.

But I don't think I missed the main content of this forum. I have listened to at least four of the regional colleagues' presentation for Regional Center for Health Research and Development. One thing that we from the bigger perspective is always promoting is evidence-based policy decision making, based on research findings. We are pushing for evidence-based policy decision making even before I came to meet your country officers/representatives last August, as the Director of Health Secretary of Regional Officers.

Yesterday, I was at the National Breastfeeding Month celebration together with the DOH Secretary and lots of breastfeeding mothers. Yes, I would like to give an example of research done in the region which has implication and which has also affected Philippine

regions. Because I want to highlight the point that, as Dr. Vicente said, some of the research development accomplished goal last year, but in health research sometimes goal is good. There are a lot of good in goal research, landmark research which set goal standards. One thing mentioned about is the study done in Baguio General Hospital on breastfeeding by Dr. Natividad Clavano, who unfortunately was not here with us, she passed away last year. But that study done here in the Philippine was one of the first study to highlight evidence in terms of exclusive breastfeeding, in reducing neonatal sepsis and death from neonatal sepsis. It is a landmark study. Based on that study, other countries has done similar studies and find the same evidence. UNICEF has based our infant and young child feeding policy on those studies and we promoted it all over the world. And even now, you can see that these standards are based on those evidence. This study was done in one region in the Philippines.

My question, my challenge is that, is every Philippine hospital, public and private hospital, applying those standards? So my question, is there a lot of good old health research, studies, findings which we can still disseminate. Some of those studies might be coming from the regions, maybe not even from Manila. This year's forum topic is very appropriate in terms of collaboration and convergence. We have to say that like the old research I mentioned, research can also be done in the regions, not only in Manila. Thank you.

**Dr. Jaime Galvez-Tan:** Thank you very much, Dr. Nyunt. Yes, I had the great privilege, of working with Dr. Natividad Clavano and seeing in action the role of breastfeeding in neonates as well as in children below five years old.

**Dr. Marilyn Martinez (Philippine Institute of Traditional and Alternative Health Care):** I have a question for all the presentors. How can the Health Regional Development Consortium encourage the residents or doctors of medical centers under their regions with very good researches worth publishing to submit their researches for publication? It is a pity that based from my observation that a lot of research work of the resident researchers, after they have obtained their diplomate and fellowship, are being kept in the hospital library or in the cabinets of their departments, because the doctors are not motivated to submit their researches for publication. Thank you.

**Dr. Warlito C. Vicente:** We have been asking ourselves that question. Davao, for example, have three (3) training hospitals and every year a training hospital graduates about five to ten residents. These residents are required to submit a research paper. I think there is no motivation because the rewards are not there. Residents come out with research paper, most of them are funded by pharmaceutical companies and they do not bother going to PCHRD to get funds because for them it is not worth the effort. So, it's too much of a hassle on their part. Even inviting the training officer of hospitals to join us in our training in our consortia is really a big deal for them. So I don't have the answer. Maybe you have to do something better than what the pharmaceutical companies can offer.

**Dr. Jaime Galvez-Tan:** I think the question is how much research publication and published works have been done in the region? Of course, Linda Paster, as I know her, has a lot of international publications, but in the name of the Region. Yes, Dr. Barquin, would you like to answer? Are there any research publications coming from your region and what are your difficulties?

**Dr. Fe Barquin:** I think I mentioned earlier in my report that there was only one newsletter that was published by the HRDC. The content of this newsletter were abstracts of completed research papers, not only from residents of training hospitals but also of those researchers

who were funded by PCHRD. This year, the Regional Health Research and Development Committee is coming up with a journal wherein completed researches, whether funded by PCHRD, Department of Health and other state, colleges and universities, will be published. This is a proposal of the Research Information Subcommittee of RHRDC 8. There are also two private schools that will have a peer-reviewed journal. This journal will be publishing completed research studies not only from their school but also from the member agencies. The group of peers who will be reviewing these journals will be coming also from the Regional Health Research Development Committee.

**Dr. Enrico Gruet:** Most of the researches done in the Region are I think, as mentioned by Dr. Vicente, are funded by pharmaceutical companies and they are published through these companies. I have some suggestions but I don't know if they are answers to the question earlier posted. If we have more fora for the presentation of these researches then there'll be more people exposed to research and they can encourage the researcher to publish. The adviser of the research, especially those done by residents, can encourage the residents to do that. The specialty societies can also help, since most of the researches are also presented in annual conventions.

**Dir. Leonardo Quito, Jr.:** I know in the case of the Ilocos Training and Regional Medical Center since 5 years ago, every year they're publishing the outputs of research of their resident doctors. But in the spirit of maximizing the results of their research efforts, if they are still around, we can invite them in our annual regional forum. So this is what we are doing right now in the Region.

**Dr. Erlinda Palaganas:** But I guess at this stage, it has to be a challenge for us. A challenge in the sense that maybe the committee will have to be conscious about this, about that situation, because indeed it also happened. It's also a situation we are faced with in the Cordilleras and so the Capacity Building Committee will have to look into ways like a similar forum, like what we had yesterday, the writing skills and for the mentors to be really be patient in mentoring. I guess this is very important-the mentoring capacity. In the academe it's a mandate to publish. Either you publish or you perish. You don't get promoted if you don't publish and so, therefore, the skill is there. What is important is to mentor colleagues who will be needing that skill without needing to have to pay. It's the mentoring thing really that is important, the nurturing as mentioned earlier.

**Dr. Jaime Galvez-Tan:** I know there are many questions but I am getting signals here that I should end this forum. The afternoon session is really going to be by regions and I suppose this is where we will distill the experiences that we learned from the panel this morning.