

**Director Leonardo N. Quitos, Jr.**  
Chair  
Region I Health Research and Development Consortium

Our hope and vision for development is captured in this statement: a very strong and capable research network significantly contributing to the achievement of a better quality of life especially for the region's marginal groups through the generation of timely, accurate and responsive technical information, for enhancing the efficiency and effectiveness of health planning, policy and operational activities. Our research and development committees are focused to the marginal group and we are working very closely with the local government units who are responsible for the delivery of health services. Our outputs are technical information which hopefully will be useful for planning, policy operation and even the allocative decision of our local government units.

Our Mission is again thru collaborative strategies involving the public and private institutions and we are in close coordination with PCHRD and other development institutions at the regional level and local level. The development situation particularly with the regional development council have set the direction of development for poverty reduction and be responsible for coordinating the millennium development goals where eight (8) of these goals are directly related to health.

R1HRDC was organized sometime in February 27, 1989 as PCHRD S.O. No. 89-020 (Northern Luzon Health Research & Development Committee) Regions I, II and CAR Region I became fully operational in 2000 with 11 co-institutions as members of the committee. We have expanded membership to include the private and public sectors/institutions in Region I to ensure efficiency and effectiveness in delivering health care.

The objectives 1 and 2 concern about health problems that require research and study. We have been working very closely with our local government units since they are responsible for the delivery of health services such as planning ,policy formulation and the creation of staff resources. We have upgraded our human resources to strengthen research capability on a continuing basis and partnering with a number of institutions including PCHRD. We also encourage resource sharing among the institutions in terms of regional development councils of the government units. To ensure sustainability among institutions we have develop some mechanisms and infrastructure strategies such as continue human resource development and linkage with other institutions that will provide financial resources.

There are five units in the committee. The first unit is the Health and Research Committee assisted by the Training and Capacity Building sub-committee, the Ethical Concerns (Ethics Review Sub-Committee), of course the outputs of the health research and development has to be disseminated and help to be utilized by concern policy makers (Info Dissemination and Utilization (RICU). All of these have an in-out-output relationship. The Management sub-committee is provides the intersectoral linkages among these four units. This presentation has

been prepared according to the format of the organizing committee, there are three concerns and these are the strategies that we are doing in terms of these three concerns.

So in terms of the Regional Research Agenda: Formulation, Evaluation and Updating we particularly feature a multi-stakeholder participatory approach among government agencies, state colleges and universities, private and higher educational institutions and tertiary hospitals. These agencies come from different perspectives that provide technical expertise from higher educational institutions as well as financial or funding support from funding agencies.

The output of this research agenda formulation activities is a five year multi-research agenda which will be updated in a yearly basis to consider the priorities of the regional development council as well as local health government units. The other member of the committee and in the activity the involvement of the local health strategy is important. In terms of articulating their health problems and issues by research studies.

In terms of research project implementation is read as contributing to training and capability development allowing them to take advantage of the core technical expertise which is provided by means of tutoring, mentoring and monitoring services. The Chair person of our research committee is Dr. Rosan. Our research projects are undertaken with a memorandum of agreement which hopefully will officialized the participation of the institutions and we are doing this at the institutional level. The purpose of the MOA with the institution concern is the whole institutional process in support to a research project and even the technical assistance that will be rendered to research activities that go to the institutions to be processed. Immediately we are providing the technical expertise services to the institutions involved. The MOA also provide a system of sharing between the proponent and the committee.

In terms of research implementation it is important that we establish ourselves and we have taken stock of our intellectual capital were doing this on a three year basis together with other committees of the regional development council and we have taken stock of what training facilities we have, a laboratory facility for instance, what research resource we have and as much as possible make the most of what we have in the region. intended for the research implementation is undertaken with any minor core that will provide the manpower for research project implementation.

Some of the training that we have undertaken ranges from basics to advance and more or less the research and development process from conceptualization to completion we have we start with research proposal preparation, basic research, then statistical analysis with a computer application and then finally technical writing. We are focusing these on the four of the researches so that our resources are not dissipated by trainings later with so many participants and we have only very little money on the whole for research and development projects.

When it comes to sustainability cooperation we have the MOA as basis for formal /official cooperation of concern institutions, as I said close to fifty different institutions are involved here. The MOA secures and mobilize counterpart funding for the operational expenses of the R&D consortium and for the continuing investment in health manpower development along health R&D.

These are some of the policy which we have implemented earlier as I have said earlier we are working closely with local government units in terms of their health programs and we trained our research activities.

In terms of the output of the research development network we have not as yet conducted the evaluation to determine the population of our research and development activity from the time we expanded although it is important to take note that in terms of linking the development of users to our research output that is being done on a yearly basis.

Thank you.

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