The Algiers Declaration

Ministerial Conference on Research for Health in the African Region

Narrowing the knowledge gap to improve Africa’s health

23–26 June 2008
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We, ministers of health and heads of delegation of African countries, meeting in Algiers on 26 June 2008 for the Ministerial Conference on Research for Health in the African Region,

Considering

1. The magnitude of health problems associated with poverty and climate change, including prevalent infectious diseases such as malaria, tuberculosis, HIV/AIDS, emerging diseases, neglected tropical diseases, the resurgence of epidemic-prone diseases and other complex emergency situations;

2. The diseases and conditions affecting sexual and reproductive health, in particular maternal, neonatal and child health, adolescent and geriatric health, as well as noncommunicable diseases, malnutrition and mental health, including drug and substance abuse;

3. The burden of disease and the limitations due to weak and fragile health systems;

4. The inadequate institutional, infrastructural and regulatory capacity to conduct high-quality investigation in public health, basic science, product development and operational research;

5. The increasing gap in the application of existing and new technologies for improvement of public health in our countries, and the need to expand
access to appropriate and cost-effective tools to address numerous health problems;

6. The migration of human resources for health from our countries to developed countries;

7. The critical need to inform and protect human subjects of research;

**Recognizing**

1. The difficulties encountered by our countries in achieving national and internationally-agreed health targets, including the health-related Millennium Development Goals (MDGs);

2. The need for appropriate platforms to improve our capacities for sharing knowledge and evidence to inform health policies and practices that will positively impact on the health of our peoples;

3. The need for national research agendas responsive to country challenges and priorities, as well as to global public health priorities;

4. The need for adequate and incentive investments in research and development to produce new and effective medicines, diagnostic tools, vector control tools and vaccines, and to promote research in traditional medicine and strengthen health systems, taking into account the socio-cultural and environmental situation of the people;
5. The urgent need for our governments to implement mechanisms for addressing the aforementioned concerns and to promote research and utilize its findings in our health systems;

6. The increased global attention given to development and poverty reduction issues especially as expressed in the Millennium Development Goals (MDGs), thereby creating an unprecedented opportunity for formulating evidence-informed policies and strategies.

Building on previous commitments made by our governments to our people and by the global community in favour of priority health research, including texts or instruments such as the United Nations Millennium Declaration on development, the Africa Health Strategy 2007-2015 of the African Union, the Mexico Statement on health research adopted in November 2004, the Abuja Declaration on health research of March 2006, the Accra Declaration on health research for disease control and development adopted in June 2006 and the Ouagadougou Declaration on Primary Health Care and Health Systems in Africa of April 2008;

1. Commit ourselves to working together to give the necessary impetus to the strengthening of national health research systems, national information and knowledge management systems through the optimization of investments, better coordination
of our action and enhanced management in order to improve the health of the people of Africa.

2. Also commit ourselves to launch implementation of the following before the end of 2009:

(a) to establish or strengthen coordination within the health sector and among other sectors contributing to the development of science and technology including in health, and establish or strengthen governance structures to promote ethics and increase public trust in research;

(b) to develop or strengthen adequate national health research policies and strategic frameworks that are based on systematic and standardized assessments of national health research and knowledge systems;

(c) to expand the health research agenda to include broad multidimensional determinants of health;

(d) to create or strengthen South-South and North-South cooperation including technology transfer;

(e) to link health research and development efforts with health needs and explore opportunities for partnerships between governments, universities, private sector and civil society organizations;
(f) to create subregional centres of excellence to promote research and generate evidence for better decision making. The scope of activities of the centres shall focus mainly on disease surveillance, public health laboratories and quality control of food and medicines;

(g) to support the development of human resources for research through initial and further training and promotion of access to scientific information;

(h) to establish appropriate mechanisms for scientific and ethical oversight of research for health, including regulation of clinical trials and sensitization of the people to their role, their rights and their obligations in research for health;

(i) to monitor, evaluate and systematically review health research systems by developing appropriate tools and indicators;

(j) to allocate at least 2% of national health expenditure and at least 5% of external aid for health projects and programmes to research and research capacity building and invest more in research aimed at improving health systems;

(k) to create or strengthen an environment that attracts the best skills, for example
by providing attractive career structures and incentives, by facilitating access to information and by offering the persons concerned opportunities to teach, do research and participate in communities of practice;

(l) to develop a critical mass of focal persons and well-trained national researchers, including those working abroad, in various disciplines and areas of health research, including ethics and regulation;

(m) to develop and strengthen the evidence base for health systems by consolidating and publishing existing evidence and facilitating knowledge generation in priority areas;

(n) to support the translation of research results into policy and action by establishing appropriate mechanisms and structures, including setting up networks of researchers, decision-makers and policy-makers for evidence-based public health action;

(o) to continue to promote innovative research in basic sciences and its transformation into new tools such as medicines, vaccines and diagnostics tools;

(p) to develop and strengthen the national health information system by instituting procedures that ensure the generation
and availability of information meeting international norms and standards and by defining clear relations between the various subsystems, and the mechanisms needed for their regular evaluation;

(q) to identify and integrate the various sources of information into national information systems taking into account the private sector so as to generate accurate and reliable information;

(r) to acquire information and communication technologies and make them accessible to all sources and potential users of information, in order to have up-to-date evidence for health research development;

(s) to prepare national strategic directions for knowledge management, including ehealth, ensuring that they are integrated as a priority into national health policies and plans;

(t) to establish norms and standards, including ethical ones, taking into account technological progress and new knowledge management methods;

(u) to strengthen national capacity in knowledge management;

(v) to adopt policies that promote the application of intellectual property rights to benefit the public and North-South and public-private
research partnerships so as to enhance the accessibility of research results.

3. **Call upon researchers, research institutions and research and information networks to:**

   (a) to become more actively engaged in collaboration with all stakeholders in setting research priorities;

   (b) to enhance the relevance of research to users, policy-makers and communities by linking research activities to health challenges and priorities in order to bridge the know-do gap.

4. **Urge national and international partners including the private sector, civil society, and regional economic communities to make every effort in line with the 2005 Paris Declaration on Aid Effectiveness:**

   (a) to support country policies and mechanisms to honour the aforementioned commitments;

   (b) to promote equitable South-South and North-South cooperation, technology transfer and collaboration in health research, and the establishment and strengthening of knowledge management capacities and practices;

   (c) to invest at least 5% of external aid for health projects and programmes in research and
research capacity building with emphasis on implementation of health policies and strengthening of health research systems;

5. **Call upon the African Union and regional economic communities:**

   to advocate for strengthening health research systems and to encourage regional cooperation.

6. **Request the World Health Organization:**

   (a) to advocate for increased funding from governments and development partners for health research, information and knowledge management and for equitable sharing of that funding among all relevant stakeholders;

   (b) to support Member States to build national health research systems, develop capacity to conduct health research, identify health research priorities, evaluate research outcomes and use acquired knowledge to solve health problems by following evidence-informed policies;

   (c) to facilitate South-South and cross-border collaboration to promote the creation, sharing and use of knowledge to improve the health status of the people;

   (d) to support the establishment of subregional and regional centres of excellence to develop research for health;
(e) to increase the WHO health research budget and explore innovative financing mechanisms for supporting Member States to strengthen their health research, information and knowledge management systems;

(f) to establish an African health research, information and knowledge management systems observatory;

(g) to continue to support the development of a framework for implementing the Declaration to be presented to the fifty-ninth session of the WHO Regional Committee for Africa;

(h) to submit the present Declaration to the WHO Regional Committee.

Done at Algiers this twenty-sixth day of June in the year 2008
The Algiers Declaration

Signatories

Algeria

Angola

Benin

Botswana

Burkina Faso

Burundi

Cameroon

Lesotho

Liberia

Madagascar

Malawi

Mali

Mauritania

Mauritius
The Algiers Declaration

Cape Verde

Central African Republic

Chad

Comoros

Congo

Côte d’Ivoire


Equat. Guinea

Mozambique

Namibia

Niger

Nigeria

Rwanda

Sao Tome & Principe

Senegal

Seychelles
Ethiopia

Eritrea

Gabon

Gambia

Ghana

Guinea

Guinea-Bissau

Kenya

Sierra-Leone

South Africa

Swaziland

Tanzania

Togo

Uganda

Zambia

Zimbabwe