During 2013, the Canadian Coalition for Global Health Research (CCGHR) will convene several dialogues bringing together stakeholders in our global health research community to address this question. Our aim is to gather diverse perspectives on the role of research in a Canadian vision for global health, and in so doing, build on the work of the Canadian Academy for Health Sciences’ Expert Panel on Canada’s Strategic Role in Global Health.

In its report, Canadians Making a Difference (CAHS 2011), the Expert Panel invited key players from across sectors to gather, debate, and discuss their findings and recommendations to create the means by which Canada and Canadians can own and advance a national strategy for global health that is grounded in the principles of equity, effectiveness and engagement.

The CCGHR is responding to this invitation by encouraging and facilitating dialogue concerning how the global health research community can develop and refine a national vision for global health that reflects and harmonizes unique Canadian strengths and opportunities. In particular, we invite conversation about what environments are needed to enable broad integration of the principles of equity, engagement and effectiveness in research practice, governance, partnerships, and policies.
The CCGHR-led dialogue process will begin in May 2013 (Figure 1) with an inter-sectoral deliberative dialogue in Vancouver. Between May and September, universities across Canada will host discussions in their regions, inviting participation from neighboring universities, the private sector, civil society, and government stakeholders. During this time, the CCGHR will extend a broad and open invitation to join the conversation through social media (Facebook, Twitter, and a blog on the CCGHR website). These discussions will culminate in a second deliberative dialogue in Ottawa in October 2013. Here we will bring together the ideas and feedback from the earlier discussions and ideally arrive at a vision for the role of research in global health, signaling new and innovative ways forward for our global health research community.

**FIGURE 1: The Gathering Perspectives Dialogue Process**

**CCGHR REFLECTIONS ON THE CAHS EXPERT PANEL REPORT**

The CCGHR considers the CAHS report a timely and helpful analysis of the context of global health. We are encouraged by the Panel’s identification of equity, effectiveness and engagement as foundational principles guiding strategic planning related to Canada’s role in global health. We applaud its identification of a number of strategic opportunities, two of which apply directly to research: (i) Indigenous and circumpolar health research and (ii) smart partnerships in education and research. Yet, we feel that the report overlooks significant developments and contributions more specifically in the field of global health research.
The CCGHR encourages members of the global health research community to contribute to this dialogue to enable broad integration of the principles of equity, engagement and effectiveness in research practice, governance, partnerships, and policies, to consider (but not limit itself to) the following observations which derive from our review of the CAHS report:

The global context is changing rapidly—presenting new challenges for global health and global health research. A Canadian vision for global health and the role of research must emerge from an understanding of the changing global landscape and acknowledge social, political, economic and historical contexts and their relationships to power and capacity.

### SOME IMPORTANT DEFINITIONS

**GLOBAL HEALTH RESEARCH (GHR)** Recognizing that “global” captures the scope and interconnectedness of any health issue – and not its location – the CCGHR defines global health research as research that prioritizes equity and improved well-being for all people worldwide. Global health research studies transnational health issues, determinants, and solutions; involves and collaborates with many disciplines within and beyond the health sciences; and is undertaken in order to inform (and be informed by) policy at the local, national and global levels (Adapted from Koplan et al. 2009).

The CCGHR offers the following definitions of the “3Es” which complement or expand those found in the CAHS report:

**EQUITY** The right to health for all, including the social and economic foundations of health. A critical equity lens brings into focus the fundamental differences in health status that are “unnecessary, avoidable and unfair” (EQUINET 1998) and challenges the global health research community to reduce disparities, redistribute social, political and economic resources, and increase individual and collective choice.

**EFFECTIVENESS** Effectiveness concerns return on investment over a broad spectrum of value creation, including financial, social and environmental returns. An effective investment should produce high-quality outcomes and impacts, and these impacts should be realized as broadly as possible. Evidence is at the core of effectiveness and new policy and program decisions should be taken on the basis of the best available evidence. Also at the core of effectiveness is cooperation and collaboration across a broad range of academic fields, policies, and programs to maximize the potential for impact (adapted from CAHS 2011).

**ENGAGEMENT** “The process of working collaboratively with relevant partners who share common goals and interests” (from Tindana et al.). This involves “building authentic partnerships, including mutual respect and active, inclusive participation; power sharing and equity; mutual benefit or finding the ‘win-win’ possibility” in the collaborative initiative (Zakus & Lysack, 1998, as cited in Tindana et al. 2007).
Canada’s foreign policy is changing directions, raising strong concern that recent shifts are eroding Canada’s investments and reputation in global health and international development. A Canadian vision for global health and the role of research must emerge from a more balanced consideration of the strengths and weaknesses of Canada’s foreign policy, acknowledging the impacts foreign policy has on Canada’s global health contributions.

Fragmentation in global health research is stifling potential impacts. A Canadian vision for global health and the role of research demands renewed and practical efforts that create incentives for communication, coordination and collaboration within the global health research community, along with consistent frameworks or metrics to assess, monitor, or evaluate efforts and impacts in global health research.

The voices of invaluable research partners are often not well represented in domestic discussions of global health issues. A Canadian vision for global health and the role of research must embrace voices from the global South, partner countries, and those of Indigenous Peoples, civil society organizations (CSOs), non-governmental organizations (NGOs) and the private (corporate) sector.

PROPOSED PRIORITY AREAS

The CCGHR invites Canada’s global health research community to consider (but not limit itself to) possible areas of focus that take advantage of Canada’s unique position in the world. To some extent, these proposed priorities reinforce those put forward in the CAHS report.

**INDIGENOUS & CIRCUMPOLAR HEALTH RESEARCH** Dialogue, research, practice and policy in global health have tended to focus on the global south. But global health issues are not defined by latitudes. Climate change alone makes circumpolar health an inherently global health issue; but there are also substantial health disparities, with roots in social determinants of health, that exist across northern regions of many countries, where Indigenous Peoples represent the vast majority of the population.

**POPULATION AND PUBLIC HEALTH RESEARCH** The CCGHR strongly endorses the recommendations in the CAHS Expert Panel report related to population and public health, and proposes strengthening the arrangements for both the production of knowledge (research) and its implementation in policy, programs, and practice. In particular, the recommendation of the WHO Commission on the Social Determinants of Health (CSDH 2008) should be more explicitly reflected in global health research priorities and programs, such that Canada joins the global movement to “close the (equity) gap in one generation” and invests in equity-oriented health research.
**Research Partnerships** Health research partnerships can have many benefits, including enhancement of the quality of research, exchange of knowledge, and development of research capacity. But just as inequity persists globally, many partnerships can replicate existing power structures and end up being inappropriate, or even exploitative. The CCGHR feels that to truly promote sustainable, quality health research, partnerships need to be based in mutual respect, openness to reciprocal learning, and a shared vision towards improving health equity globally.

**Knowledge Translation (KT)** The CCGHR proposes that the growing field of scholarship and practice related to KT represents a distinctive Canadian strength. We assert that research can be a valuable tool for change and achieving greater global health equity. Global health research, as an area of integrated knowledge translation practice, offers a rich learning environment for this evolving field. Canada’s KT networks are focused on domestic aspects of KT research, training, and application and could be more systematically included in global health research programming. Similarly, Canadian health systems could begin to look to our partners globally for examples of how others are creating innovative knowledge translation platforms to enable evidence use in practice, policy, and decision-making.

**Strengthened Training & Support Arrangements for Careers in GHR** Since its establishment, the CCGHR has demonstrated leadership in addressing junior global health researchers’ need for orientation, support, and mentorship in global health research. Much work remains including the development of critical pedagogies to support students’ learning, promote equity and engagement. Also important are the current discussions about emerging cross-pillar global health research training collaboratives.

**Toward a Harmonized Canadian Vision for Global Health**

The CAHS report concludes with a call for a global health strategy that is “…a more coordinated all-of-Canada approach”. The CCGHR endorses this principle and invites members of the global health research community to consider (but again, not limit itself to) the following suggestions for moving toward this goal, as it relates to global health research.

**Strengthen Canadian Institutional Capacities for Global Health Research** Among the various constituents of the global health community in Canada, universities are a key player. Universities are the “engine” of knowledge production, synthesis, training—and potentially application. CCGHR is currently developing a framework to encourage these universities to ask the question: “What is the capacity of your university to conduct and support global health research?” As universities conduct “self-assessments” using the above framework, these experiences could be shared among universities.

**Conduct a National Priority-Setting Process** Building upon the CAHS report and the Gathering Perspectives project, an important next step would be a systematic process to determine priorities for Canada’s contribution to global health research, leading to the production of an agenda document.
CREATE A CANADIAN FORUM FOR GLOBAL HEALTH RESEARCH Currently, we do not have a forum that brings key stakeholders together to discuss Canada’s contribution to GHR. We imagine an annual meeting, organized by an umbrella committee representing all the relevant stakeholders. This forum could be held in conjunction with the annual Canadian Conference on Global Health. The aims of the forum would include information sharing and monitoring progress on a proposed national GHR agenda.

ENGAGE IN ON-GOING LEARNING The CCGHR offers to the global health research community its experience and interest in promoting, supporting and facilitating learning. CCGHR envisions a role in this regard that includes special initiatives to identify global trends and developments in GHR related to advocacy (policy influence), capacity development, and networking (harmonization).

JOIN THE CONVERSATION

HOW CAN YOU SHARE YOUR PERSPECTIVE? The CCGHR is providing three forums for dialogue in 2013: invitational full-day events in May and October; two-hour events hosted at universities across Canada; and online conversations open from May through September.

These conversations will be guided by three primary questions:

1. Thinking about your most memorable, transformative, or meaningful experience with GHR, what stands out as an exceptional demonstration of equity, effectiveness, and or engagement?

2. What would you love to see happen in GHR in a generation?

3. Across multiple levels (institutional, regional, national, and global), what exists (and what else do we need) to reach this vision?

Stakeholder analysis is guiding the identification of invitees for our invitational dialogues, with an effort to bring diverse representation from academic, private or corporate, civil society and non-governmental organizations. The same recommendations are offered for events hosted at universities. There will be special opportunities for students to join the conversation. We are excited about the possibility for a rich, global dialogue through our online forum. We are interested in hearing from you!

Visit www.ccghr.ca or contact ccghr@ccghr.ca for more information.
REFERENCES


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