



Republic of the Philippines
Department of Health
OFFICE OF THE SECRETARY

August 11, 2022

DEPARTMENT MEMORANDUM

No. 2022 - 0356

FOR : ALL UNDERSECRETARIES AND ASSISTANT SECRETARIES, DIRECTORS OF BUREAUS/SERVICES, CENTERS FOR HEALTH DEVELOPMENT, EXECUTIVE DIRECTORS OF SPECIALTY HOSPITALS, ATTACHED AGENCIES, CHIEFS OF MEDICAL CENTERS, SANITARIA AND INSTITUTES, AND TREATMENT AND REHABILITATION CENTERS, AND MINISTRY OF HEALTH BARMM

SUBJECT : Dissemination of the Medium Term Health Research Agenda 2023-2028

The Health Policy Development and Planning Bureau (HPDPB), through the Health Research Division, is mandated to formulate and implement the national research agenda for health to ensure that the evidence being generated are responsive to the needs of the health sector and inform the strategic thrust of the Department of Health. With this, the Medium Term Health Research Agenda (MTRA) 2023-2028 has been developed as one of the reference documents of the DOH in preparing its respective biennium research agenda.

Furthermore, the MTRA serves as a guide for researchers and policy makers in identifying priority health research for evidence generation and policy development, and to ensure that research investments contribute to the health system goals and support the Philippine Health Agenda.

For information and guidance.

By Authority of the Secretary of Health:

A handwritten signature in black ink, appearing to be "Lil", is written over the typed name.

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Undersecretary of Health
Health Policy and Infrastructure Development Team

MEDIUM TERM HEALTH RESEARCH AGENDA 2023-2028

Background

The Medium Term Health Research Agenda (MTRA) 2023-2028 shall serve as a guide for researchers and policy makers in identifying priority health research for evidence generation and policy development. The consultative approach that was employed in the crafting of the MTRA assures the users that this document embodies the research needs and priorities of the different areas of the health sector. With the finite resources for evidence generation, responsive prioritization of research is very crucial to ensure that these inform and significantly contribute to the overall goal and realization of the promises of the UHC.

The MTRA 2022-2028 development undertook a thorough process. Five rounds of consultations on the working document for the MTRA 2022-2028 were conducted with 43 Offices and Institutions from DOH Central Office (Round 1), DOH Attached Agencies, Councils and Organizations (Round 2), and CHDs and Partner Institutions in Luzon and Key Partner Research Institutions such as UP Manila and PIDS (Round 3), Visayas and Mindanao CHDs and Partner Institutions (Round 4 and 5) respectively. The list of themes and sub-themes were gathered from 35 DOH units through Department Memorandum 2021-0142 and from the five rounds of consultations that were conducted.

The output of all these consultations was a list of vetted themes and sub-themes that are aligned with the Universal Health Care, the Health Sector Long Term Plan or the Health Sector Strategic Directions 2023-2028, and other strategic country documents relevant to health such as the Philippine Development Plan 2017-2022, We Recover as One NEDA document, National Objectives for Health 2017-2022, and others with the continuing priorities, and pressing concerns conceded by the participants of the consultation.

While there were various suggestions of topics for prioritization in the MTRA themes and subthemes, common across the round of consultations were; (1) reframing the MTRA towards harmonization with the Universal Health Care Act, (2) prioritizing COVID-19-related research and emergency responses; and, (3) prioritizing marginalized groups. Examples of suggested UHC-related topics include research on primary care, financing schemes, and health care provider networks. While examples of COVID-19-related topics include investigational products and solutions, telehealth services, vaccination rollout, vaccination hesitancy, and research on governance structures formed in response to the pandemic. Highlighted research topics for priority groups include LGBTQIA+ health, service delivery in GIDA areas, and cultural sensitivity towards indigenous populations. Equal importance is provided for prioritizing research on mental health. Overall, the MTRA themes and sub-themes and their definitions were formulated to align with the priorities and strategic thrusts of the Department of Health.

Weighted criteria were applied to further streamline the selection of themes and sub-themes and these were based on the methodology adapted from the 2020 Online Training Modules on Health Policy and Systems Research of UP Manila National Teacher Training Center for Health Professions and from PNHRs Guidelines for Health Research Prioritization: How to Set a Research Agenda (2016). The shortlisted themes and sub-themes have been further defined.

I. Patient-Centered Care Provided by Health Care Provider Networks

Service Delivery

Research on the management of service delivery operations of health care provider networks, hospitals and other health facilities, clinical services, and public health programs within local health systems, especially of city-wide and province-wide health systems.

A. Health Service Delivery Dimensions, Healthcare Utilization / Non- Utilization and Service Coverage Patterns

This involves descriptive and explanatory (evaluative) research that covers: assessment on effectiveness (structure, process, outcomes); efficiency (macro, allocative, production and dynamic efficiency); equity (procedural and substantive); and resilience; and studies that further explore the multiple dimensions of access to health services covering both population-based health services and individual-based health services.

B. Health Systems Integration

This includes operations and implementations research to inform the development of guidelines, mechanisms, models and initiatives and partnership arrangements that facilitate the technical, managerial and financial integration of local health systems into province-wide and city-wide health systems (P/CWHS).

C. Health Equity and Inclusion

This involve emancipatory research such as critical research or action research on practices or interventions that promote inclusiveness and equity in the health system with a focus on the health issues involving migrant workers, indigenous populations, persons with disabilities (PWD), lesbian, gay, bisexual, transgender, and queer or questioning (LGBTQ), and other vulnerable populations. It shall also cover gender and culturally sensitive approaches applied to health care.

D. Emerging, Re-emerging Infectious Diseases and Public Health Emergencies

This involve exploratory and explanatory research on newly identified and previously unknown infections, as well as re-appearance and heightened levels of known infections that pose a threat to public health both locally and internationally. This shall also include studies on multi-sectoral strategies in pandemic preparedness and response which include surveillance, infection control and other relative measures.

E. Disaster Risk Reduction and Management in Health

Exploratory and explanatory research that identifies the functional disaster risk reduction management of health systems. It aims to produce disaster risk reduction policies and strategies to prevent new disaster risk, reduce existing disaster risk and manage residual risk, contributing to the strengthening of resilience and reduction

of disaster losses. It also includes studies that evaluate the timely, effective, and efficient preparedness and response to public health emergencies and disasters.

F. Priority Programs

This involve exploratory and explanatory research on comprehensive and clear pathways towards addressing the burden of major Non-Communicable Diseases (Cardiovascular Disease, Cancers, Chronic Obstructive Pulmonary Disease and Diabetes Mellitus), Mental Health and Substance Abuse, HIV/AIDS, Sexual and Reproductive Health and Combating of Antimicrobial Resistance

- A. Mental Health and Substance Abuse
- B. HIV/AIDS, Sexual and Reproductive Health
- C. Combating of Antimicrobial Resistance

II. Health Sector with Adequate, Equitably Distributed, Committed, and Competent Human Resources and Resource Management

A. Committed Health Workforce

This may involve exploratory, descriptive or explanatory research on financial and non-financial incentives for both the public and private sector to inform updating of the Magna Carta for health workers, costing of provider payment, medium-term expenditure planning including mechanisms to incentivize health care provider networks (HCPNs).

B. Competent Human Resources for Health and Quality Health Facilities

Qualitative, exploratory, explanatory and descriptive research to inform the development of standards for human resources for health and health care provider networks, including healthcare referral systems in the integration of province-wide and city-wide health systems.

C. Healthcare Resource Management

This involves exploratory, descriptive or explanatory research on the acquisition, allocation, and management of healthcare resources at all levels of the supply chain. This also includes studies on the demand, competency, capacity, enumeration, and profiling of health facilities, drug outlets, laboratories, and diagnostic facilities and professionals.

III. Affordable Health Services through Sustainable, Efficient and Equitable Healthcare Financing

Health Financing

Research on health financing as a vital function of a health system to achieve universal health coverage through effective service coverage and financial protection. It shall look mainly into the studies involving the core functions such as revenue generation, pooling of funds, and purchasing of services. It may also include cross-cutting studies

that cover other components of health financing including the financial burden of health expenditures on households.

A. Revenue Generation

This would include exploratory, descriptive and explanatory research on sources of funds such as government budgets, compulsory or voluntary insurance schemes, direct-out-of-pocket payments, grants and other forms of aid.

i. Health financing flow and sector-wide resource requirement

This would include explanatory research that enhances understanding of sources and uses of funds, the extent of efficiency, and the financial studies that are required to estimate resource requirements to achieve SDG and NOH targets. This would cover various government, non-government and private resources for health.

ii. Cost and budget impact analysis

This may involve a multi-method quantitative and qualitative research that aid in decisions on resource allocations through the conduct of health technology assessment, financial forecasting, financial modeling, and other economic evaluations.

B. Pooling of Funds

This involves exploratory and descriptive research on the accumulation and management of financial resources for health care for the purpose of distributing financial risks amongst members to ensure financial protection.

i. National Government Subsidy to PhilHealth

Research on government pooled funding schemes for health care, national subsidies to Philhealth and other publicly funded health grants.

ii. Special Health Fund (SHF)

An exploratory research/ pilot study on practices, models of pooling that can be replicated in the province-wide and city-wide health systems.

C. Purchasing of Services

Research on modes of payment or allocation of resources for health care providers

i. Cost accounting and price reference system

This involves a combination of quantitative multi-methods research on the development, implementation, analysis of cost data to inform costing of provider payment systems. It shall also include studies on frameworks and modeling for costing of benefit packages as well as the development, implementation, and evaluation of price reference indices for medicines, laboratory/diagnostics, and professional fees.

ii. Private health insurance and health maintenance organization

Exploratory research on mechanisms or models for co-payment and co-insurance for the development of guidelines on complementary payment schemes.

D. Clinical pathways and clinical practice guidelines

Explanatory (evaluative) research on the development and appraisal of locally relevant clinical pathways and clinical practice guidelines (to include clinical impact, social impact, and economic impact) to inform expansion of guarantees, benefit package development including the practice of traditional medicine in the country.

E. Procedural terminologies and disease groupings

Exploratory and evaluative research on the development and testing of applicable procedural design and terminologies and disease groupings to facilitate analysis of health information systems and its application in the diagnosis-related-grouping-based payment scheme of the country's social health insurance.

IV. Accessible quality essential medicines, technologies, and health facilities for patients and providers

A. Access to Essential Medicines

This involves exploratory research on solutions to increase access and affordability of outpatient and inpatient drugs to include Philippine-approved herbal medicines.

B. Vaccine, Diagnostic, and Treatment Modalities or Interventions

Exploratory research on various innovative solutions involving diagnostic, treatment, and rehabilitative interventions. This may include clinical trials that determine the safety and efficacy of investigational products and technologies for emerging and re-emerging diseases such as the SARS-CoV-2 and its variants.

- i. Innovative Healthcare Solutions
- ii. Product and Technology Development

C. Standards for Philippine Herbal Pharmacopoeia

This involves multi-method quantitative and qualitative research to inform the development of guidelines, specifications, standards and criteria in the determination of the identity, purity, and quality of herbal medicine and traditionally-used herbal products that are made available in the Philippine market.

D. Standards for Health Facilities

Exploratory and evaluative research on the establishment, development, management and operations of health facilities.

V. Health Systems with Good Governance and Evidence-Informed Policies

A. Leadership, Governance and Health Information Systems

This includes explanatory, evaluative and action research on strengthening health policy formulation, dissemination and implementation. This may also include systems and policy analysis on models of health leadership and management capacities as well as governance structures within health care provider networks, hospitals and other health facilities, and clinical services for both public and private health sector.

i. Models of Health Leadership

Research on competencies for effective leadership in healthcare, leadership models and approaches relevant to health sector leadership.

ii. Management Capacity

Research on levels of management capacities in health care in the country including learning development interventions to strengthen health care management.

iii. Governance Structures

Research on national and local government structures on health care, management groups including national and local organized groups in the health care system.

iv. Performance Accountability

Explanatory research to inform the development of performance indicators and quality assurance mechanisms to measure quality and performance levels of the DOH, and its attached agencies and institutes.

v. Health Information Technology

This entails exploratory, explanatory and implementation research that looks into the analysis and improvement of health information systems and digital health technologies such as the use of telehealth. It also includes the establishment and creation of new, more effective and sustainable health information systems consisting of enterprise resource planning, human resource information, electronic health records and electronic prescription log that can aid in meaningful policy and decision making on health programs.

B. Burden of Disease

This includes research that provide estimates on Burden of Disease utilizing metrics such as Years of Life Lost (YLL), Years Lived with Disability (YLD) and Disability-Adjusted Life Years (DALYS)

C. Assessment and Evaluation

Research that provides an objective assessment of program impact, design accountability mechanisms and studies under the coverage of the evaluation agenda of the Performance Monitoring and Strategy Management Division of the HPDPB

i. Health Impact Assessment

Explanatory evaluative research that assesses the health impact of policies, plans or projects on the health of an identified population, particularly on the vulnerable and disadvantaged groups. This usually involves large-scale development projects using quantitative, qualitative, and participatory techniques.

ii. Regulatory Impact Assessment

Evaluative research to appraise the potential impact of proposed regulatory policies and mechanisms.

VI. Primitive and protective physical, social, political and economic environment for Health (Social Determinants of Health)

A. Health Promotion, communication and education

This involves explanatory and actions research to inform the development and improvement of health promotion, communication and education following the Health Promotion Framework Strategy

It shall also include evaluative studies on evidence-based programs and campaigns on health advocacy that aim to build personal skills, increase opportunities of engagement in strengthening community action, and encourage proactive participation in creation of supportive environments for health.

i. Health Literacy and Behavior Profile

This involve explanatory and descriptive research that will facilitate better understanding of knowledge, attitudes and practices of Filipinos to inform health promotion and disease prevention strategies

ii. Health in All Policies and One Health Approach

This involves exploratory research and various social determinants of health and other non-health sector specific solutions and approaches that reduce risk and improve health seeking behaviors.

B. Nutrition and sustainable food systems

This involves explanatory evaluative research that assesses the overall nutrition of the country. It aims to understand the needs of individuals, groups and populations and how these might be met from dietary intake and through other processes. It may also include evaluation studies on the current policies and its overall effectiveness.