

International Development Research Centre (IDRC)

Funding Opportunities and Mentorship Program for Tobacco Control Researchers











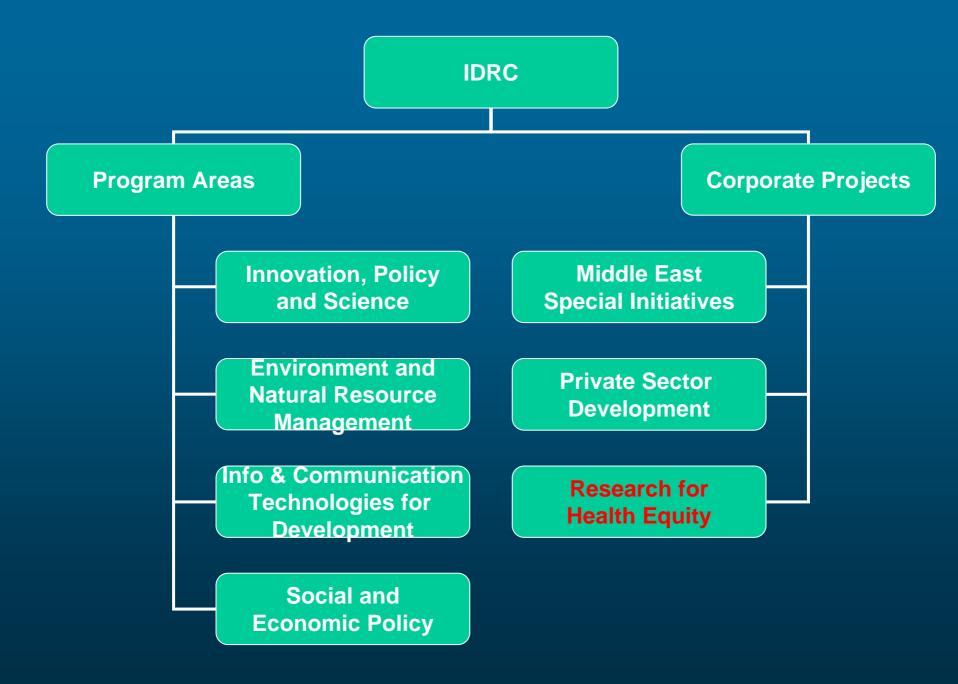


IDRC

- Mission: *Empowerment through Knowledge*
- Headquarters: Ottawa, Canada
- 6 Regional Offices, including one for Latin America and the Caribbean region (LACRO)
 - 160 ongoing research activities in LAC region
 - Investment in LAC region (2004–2007): CA\$54 million (includes partnerships with other donors)







3 Programs within RHE

RHE: Research for Health Equity

GHRI: Global Health Research Initiative GEH: Governance, Equity and Health RITC: Research for International Tobacco Control



















IDRC 💥 CRDI

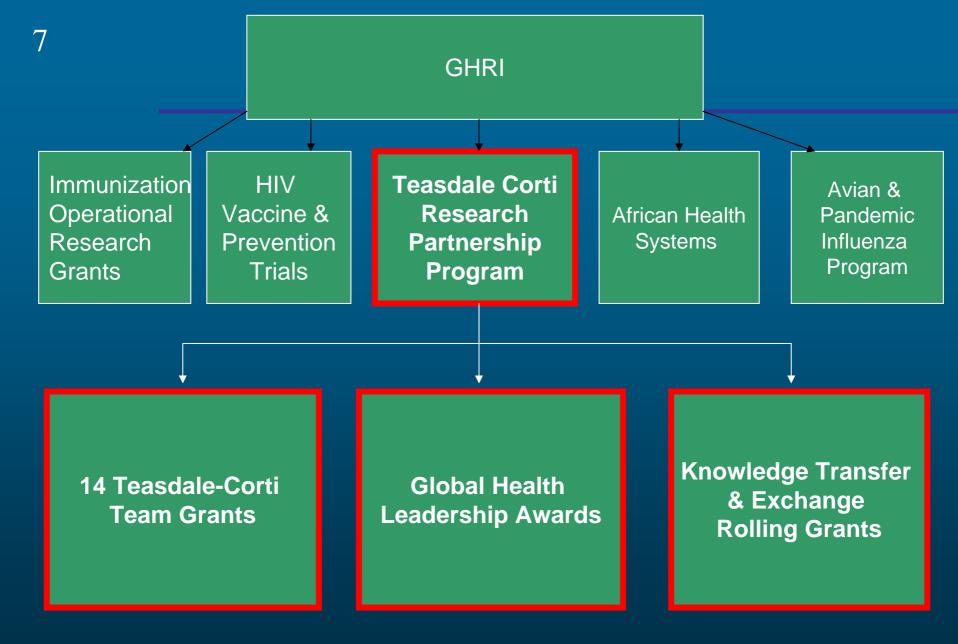
GHRI – Partnership



- Strengthening global health research
- Informing policy for health, development and research
- Sharing information between partners
- Fostering excellence











Latin American Locations of Teasdale-Corti Team Grants



- Honduras
- Mexico
- Chile
- Brazil
- Guatemala and Peru





Global Health Leadership Awards in Latin America



Vilma Espinoza, Honduras - Strengthening Capacities in Research Ethics in Honduras

Diego Ivan Lucumi Cuesta, Colombia - Bridging the gap between evidence and action: Capacity building and advocacy project to face the chronic disease epidemic in Colombia

Fadya Orozco, Ecuador - Social control, human rights and governance: A health promotion approach to the reduction of health risks associated with pesticide use in Carchi, Ecuador

Andres Pichon Rivière, Argentina - Improving Equity and Efficiency of Health Systems in Latin America

Tomas Pantoja, Chile - Producing and using evidence in Latin America health policymaking

Raul Mejia, Argentina – Argentine Tobacco Control Research Program





10 Knowledge Transfer & Exchange Rolling Grants

- This program is currently under development;
- Envisaged as small (\$50,000) grants available only to research users currently working with a funded GHRI project;
- Objective of program is to strengthen research users role in knowledge transfer and exchange.





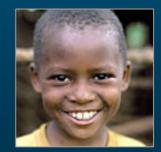
Governance, Equity and Health

Making research matter for health equity













GEH: Research *on* and *for* **development challenges**

- Systematic health and social disparities: health equity within and across countries
- Governance: how power is exercised, how decisions are taken, how citizens have their say; research as public space and accountability
- Health policy and health systems: forests and trees
- Context matters





¹³ Governance, Equity and Health

- Strengthening Health Systems
- Promoting Civic Engagement
- Making Research Matter





GEH Phase II: Entrypoints

- **GOVERNANCE** of plural health systems, emphasis on stewardship role of the state and active civic engagement
- **HEALTH SYSTEMS:** tools and evidence to *integrate interventions* and support equitable and effective *systems* performance
- FINANCING approaches for effective, efficient, equitable and sustainable public health services





Making Research Matter

- Promoting the skills of researchers to influence donor funding
- Enhancing the abilities of decision-makers to incorporate and appreciate the role of research in the policy process.
- Strengthening the knowledge brokering and uptake capacities of national and regional institutions (eg Ministries of Health and Finance and dedicated KT bodies.
- Producing, supporting, facilitating direct dissemination, translation, synthesis and management of health systems research and knowledge.





Research for International Tobacco Control (RITC)

Tobacco - a Development Issue







Funding Streams for 2008-10

- Core Themes primary focus on:
 - Health Policy and Systems Interventions for Tobacco Control
 - Tobacco Farming: Health Livelihoods, Economics and Environment
- Other thematic areas:
 - Globalization, Trade and Tobacco
 - Poverty and Tobacco
 - Alternative Forms of Tobacco Use

www.idrc.ca/tobacco/ev-83333-201-1-Do_Topic.html





Funding Streams for 2008-10

- Support for Implementing the FCTC:
 - Competitive grants small and medium
 - Rapid response mechanism
- Special Initiatives:
 - Exploration on gendered aspects of tobacco use and production
 - Africa Tobacco Situational Analysis





¹⁹ Mentorship Program for Tobacco Control Researchers

- Launched as a pilot program in 2006
- 7 trainees identified: 3 from LAC
- Responded to expressed need of tobacco control researchers in low/middle-income countries
- Funded by IDRC and Health Canada
- Developed in close partnership with the Canadian Coalition for Global Health Research and with input from our mentorship trainees





Mentorship trainees' input

- All of them have worked in some type of mentor capacity, but all want to improve their mentorship ability
- They need support and resources to be effective mentors to new researchers
- All want to be engaged in action-oriented mentorship training
- New mentors are not always sure of the best way to guide and represent the interests of their mentees.





Mentorship for Tobacco Control: Perspectives from LAC

- Anecdotal evidence from LAC suggests that the idea of a « role model » is familiar, but the broad concept of mentoring is not.
- Mentorship is generally not practiced. When it does happen, it is mostly by chance rather than through a formal process.
- Tendency to perpetuate an apprenticeship model of training for health professionals rather than formal mentoring to build research capacity.





Mentorship for Tobacco Control: Perspectives from LAC

- Health research typically given low priority within the health system in LAC countries.
- In the absence of a research culture and lack of obvious career paths in research generally, or tobacco control specifically, it is difficult to find and encourage potential mentees.
- While many professional, national and regional health research organizations exist, their efforts are uncoordinated.





Mentorship for Tobacco Control: Perspectives from LAC

- Mentors in Guatemala, Argentina, and Trinidad are confronted by environments in which research is not seen as valuable:
 - Young Argentine physicians are expected to work in clinical settings without pay and without dedicated time for research.
 - Tobacco control research in Guatemala is almost non-existent and finding a pool of potential researchers is a challenge
 - Trinidad is taking steps to coordinate its research efforts but tobacco control remains a low priority





Pilot Mentorship Program for Tobacco Control Researchers

• Aims:

- To enhance the capacity of a selected group of RITCsupported researchers to be tobacco control champions in their respective countries and regions,
- and
- through their role as mentors, to inspire a younger generation of potential researchers to become involved in tobacco control





25 Elements of Mentorship Capacity

RESEARCH

- •Research design
- •Proposal dev.
- •Funding
- •Project implementation
- & management
- •Dissemination
- •Publication
- •Research to action

RESEARCH ENVIRONMENT

Research culture (eg., use of evidence
Institutional capacity
National capacity
Global networks

RESEARCHER

Career dev.MotivationContinuing education





Key Components of the Program

- 2 Mentorship Training Workshops in Niagara Falls and Buenos Aires to enhance understanding of elements of effective mentoring
- Development of Personal Mentorship Improvement Plans
- Mentorship/research grants allocated and implemented
- Development of Research-To-Action Plans
- Leadership Institute in Trinidad (March 2008)





Mentors' perspectives on this experience

- Gained a reinforced recognition of mentorship as a viable strategy for building the tobacco control research community in their countries and institutions
- Strengthened their existing capacities to make successful mentorships happen: as better communicators, negotiators and facilitators of learning
- All expected to continue as mentors, and intended to try to institutionalize the arrangement in some way in their home institutions





Mentees' perspectives on this experience

- They now see themselves as potential future leaders in health research:
 - "The program has been critical to my own development as a health professional, since I lacked formal experience in research – such training was not offered in medical school."
- Gained enhanced knowledge, skills and selfconfidence as researchers:
 - "It helped me accomplish my mid-term objective of combining good clinical training with specialized tools for research."





Mentees' perspectives on this experience

- Starting to build their own networks of research contacts
- Strengthened their commitment to pursuing careers in research generally, and tobacco control specifically:
 - "I am clear now that I want to do work in tobacco control; to continue to be involved in research, but also to do more in terms of policy because that is more relevant to solving the health-related problems in the country."

















