

### Outline of presentation

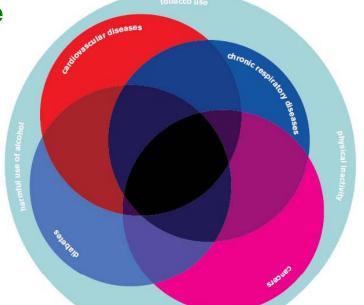
- Global health challenges
- Scientific knowledge production and use
- Opportunities for global collaboration
- Investment in research infrastructure
- Strengthening capacity for knowledge production
- Conclusion



**Noncommunicable Diseases and Injuries** 

Magnitude

- Four major noncommunicable diseases (NCDs):
  - Cardiovascular diseases
  - Diabetes
  - Cancers
  - Chronic respiratory diseases
- Four shared modifiable risk factors:
  - Tobacco use
  - Unhealthy diet
  - Physical inactivity
  - Harmful use of alcohol



- 60% of deaths globally 70% if injuries are included -80% in developing countries
- 40-50% are premature
- Magnitude has a major socio-economic impact on developing countries
- NCDs and injuries are still excluded from global discussions on development

ECOSOC/UNESCWA/WHO Western Asia Ministerial
Meeting
Addressing noncommunicable diseases and injuries
(Doha, Qatar, 10-11 May 2009) ocial science that makes a difference

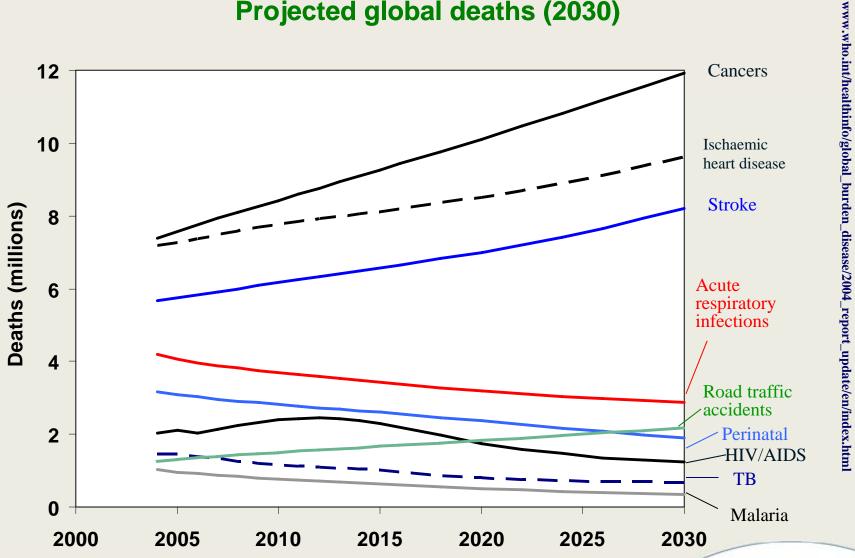


## HIV/AIDS Globally and Sub-Saharan Africa (numbers in millions)

	Year	Adults and Children	Newly Infected	AIDS related Deaths
Sub-Saharan Africa	2009	22.5	1.2	1.3
	2001	20.3	1.8	1.4
Global	2009	33.3	2.6	1.8
	2001	28.6	3.1	1.8

### **Noncommunicable Diseases & Injuries**

Projected global deaths (2030)



ECOSOC/UNESCWA/ WHO Western Asia Ministerial Meeting

Social science that makes a difference

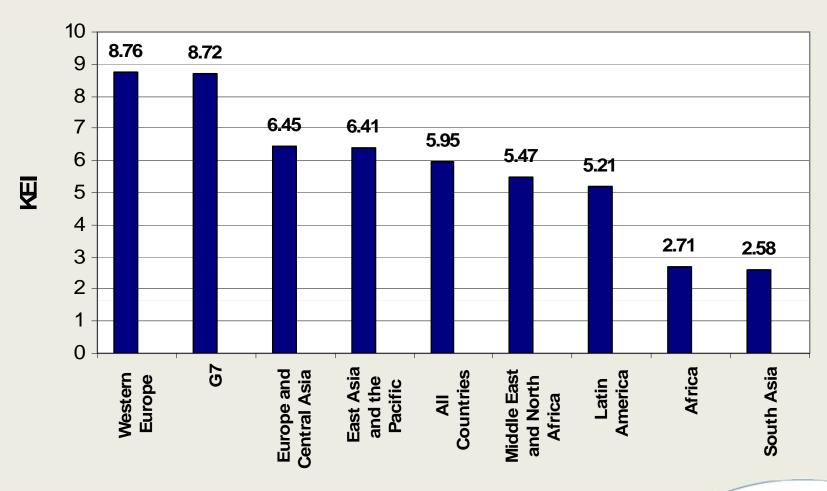


### Knowledge production

- Royal Society of London celebrated the 350<sup>th</sup> anniversary of science
- The Royal Society fellows credited with invention of processes used by modern science, i.e., experimentation, peer-review and publishing of articles
  - and use of English in science
  - from around 1660.
- The French Academy of Science was established in 1666,
- American Academy of Science was formed in 1848
- TWAS in 1983
- ASSAF- 1995 and ACT passed in 2001



## Knowledge Economic Index (KEI) 2009



The World Bank Group 2009

Social science that makes a difference



### International Comparisons, GERD



Source: OECD Main Science and Technology Indicators, 200 Human Sciences Research Council

## Opportunities for Global Collaboration



## Opportunities for global and international collaboration

- Networks-Global HIV prevention working group secretariat in Africa
- Grant makers using funding as an instrument of collaboration
- Joint Projects between African researchers and scientists in the rest of the world.



#### PLoS Medicine: Randomized, Controlled Intervention Trial of Male Circumcision for Reduction of HIV Infection Risk: The ANRS 1265 Trial





Observational studies suggest that male circumcision may provide protection against HIV-1 infection. A randomized, controlled intervention trial was conducted in a general population of South Africa to test this hypothesis.



Published in the November 2005 Issue of PLoS Medicine



#### **Related Content**

#### Related PLoS Articles

First Trial of Male Circumcision against HIV

Does Male Circumcision Prevent HIV Infection?

Correction: Randomized, Controlled Intervention Trial of Male Circumcision for Reduction of HIV Infection Risk: The ANRS 1265 Trial

HIV Treatment Proceeds as Prevention

## Effectiveness and Safety of Tenofovir Gel, an Antiretroviral Microbicide, for the Prevention of HIV Infection in Women



Save to My Folders

Article Tools

<sup>†</sup>To whom correspondence should be addressed. E-mail: <u>caprisa@ukzn.ac.za</u>

\* These authors contributed equally to this work.



# A Decline in New HIV Infections in South Africa: Estimating HIV Incidence from Three National HIV Surveys in 2002, 2005 and 2008

Thomas M. Rehle<sup>1\*</sup>, Timothy B. Hallett<sup>2</sup>, Olive Shisana<sup>1</sup>, Victoria Pillay-van Wyk<sup>1</sup>, Khangelani Zuma<sup>1</sup>, Henri Carrara<sup>1</sup>, Sean Jooste<sup>1</sup>

1 Human Sciences Research Council, Cape Town, South Africa, 2 Imperial College London, London, United Kingdom

#### Abstract

Background: Three national HIV household surveys were conducted in South Africa, in 2002, 2005 and 2008. A novelty of the 2008 survey was the addition of serological testing to ascertain antiretroviral treatment (ART) use.

Methods and Principal Findings: We used a validated mathematical method to estimate the rate of new HIV infections (HIV incidence) in South Africa using nationally representative HIV prevalence data collected in 2002, 2005 and 2008. The observed HIV prevalence levels in 2008 were adjusted for the effect of antiretroviral treatment on survival. The estimated "excess" HIV prevalence due to ART in 2008 was highest among women 25 years and older and among men 30 years and

Non-communicable diseases in sub-Saharan Africa: what we know now.

<u>Dalal S, Beunza JJ, Volmink J, Adebamowo C, Bajunirwe F, Njelekela M, Mozaffarian D, Fawzi W, Willett W, Adami HO, Holmes MD.</u>

The prevalence of NCDs and their risk factors is high in some SSA settings. With the lack of vital statistics systems, epidemiologic studies with a variety of designs (cross-sectional, longitudinal and interventional) capable of in-depth analyses of risk factors could provide a better understanding of NCDs in SSA, and inform health-care policy to mitigate the oncoming NCD epidemic.



## Infrastructure for science and technology

- Poor economic development ->
  - low investment in research and development
  - few libraries, with older books and journals
  - Poor access to ICT with high speed bandwidth

Few highly skilled scientists who can tutor, provide

mentorship and review articles

- Poor salaries for scientists
- Often no requirement for scientific publication for academic promotion
- a critical mass of scientists, can be achieved with high investment in science and technology

Social science that makes a difference

## Poor access to infrastructure for dissemination of scientific papers

 Attitudes or practices of editors and scientists in the North (real of perceived)

 English as the language of scientific communication results in higher rejection rates in North-based journals for research papers submitted from non-English speaking authors

 Journals to create sub-editing sections dedicated to language, and for editors to have such articles sub-edited accordingly.

### External Barriers (cont.)

 High fees: some journals charge for publishing electronically or in hard copy, may cost up to \$3 000

Promote open access policy, eg

- SatelLife (<u>www.healthnet.org</u>),
- International Network for the Availability of Scientific Publications (<u>www.inasp.info</u>),
- Electronic Publishing Trust for Development (<u>www.epublishingtrust.org</u>)
- Human Science Research Council (HSRC) Press with respect to books.

## Strengthening capacity for knowledge production

- Set the research agenda together
- Share research resources
- Grant funds for research unconditionally
- Make research infrastructure available to scientists no matter where they are
- Offer incentives to conduct research
- Collaborate on research –South To South, North to South, North-South-South
- Be open to publish articles from the South



### Conclusion

- The epidemiological transition offers and opportunity for us to build capacity and collaborate to tackle non-communicable diseases that are common in our countries as well as address communicable diseases
- Agencies such as TWAS are good examples of helping African countries to leap frog and become partners in research



### Thank you for your attention

