



CONFLICT OF INTEREST
IN HEALTH RESEARCH

STRENGTHENING INSTITUTIONAL CAPACITY TO MANAGE, REDUCE OR ELIMINATE CONFLICT OF INTEREST IN HEALTH RESEARCH IN SUB-SAHARAN AFRICA



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BACKGROUND

While research is key to promoting health and preventing disease, the conduct of health research may be impacted by 3rd party pressures from for-profit organisations* (FPOs). Funding from FPOs can be problematic, particularly if FPO products have negative health implications. FPOs try to influence public health (PH) policy, shape research, practice and public opinion.

In sub-Saharan Africa (SSA), PH endeavours can benefit from collaborative partnerships but skillful, ethical and efficient conduct and management of these collaborations are essential in preserving scientific rigour and research integrity.

**FPOs = Organisations that sell consumer products related to food & beverages, tobacco, alcohol, & other organisations like pharmaceutical, gambling, arms dealing or manufacturing, health insurance companies & the petroleum industry*

**Conflict of Interest (COI)
poses a major threat to
research integrity**

CONFLICT OF INTEREST (COI)

COI involves a breach of trust and can occur independently of impropriety taking place. It relates to the failure of research systems to protect researchers from third party pressures - particularly if research findings are unpopular or disruptive to powerful entities.

COI creates risks for professional judgements/actions regarding a primary interest (e.g. promoting & protecting research integrity) to be unduly influenced by a secondary interest (e.g. financial interests, professional advancement & recognition, favours for friends or family).



CONSEQUENCES OF COI

COI can lead to the undermining of public health policies; reputational damage to researchers or research institutions, or putting human research participants in harm's way.



WHAT CAN BE DONE?

COI can be minimised or avoided by interventions that pre-empt any impropriety through identifying, acknowledging and managing potential risks and consequences.



SCIENCE GRANTING COUNCILS (SGCS) & RESEARCH ETHICS COMMITTEES (RECS)

These bodies are gatekeepers for research funding and research approval and they can reduce/eliminate COI. However, government and affiliated institutions also place third party pressures on SGCs and RECs.

More than a third of African countries have no RECs. African governments should recognise the importance of RECs and their role in research oversight.

**SGCs and RECs play key
roles in sustaining
science and health
research**



CHALLENGES OF SGCS AND RECS

- Lack of funding
- Policies
- Capacity to support research and its uptake
- Scarce resources
- Lack of national guidelines
- Lack of training in research ethics
- Inadequate oversight capacity



**INFORM
EVIDENCE-BASED
POLICY-MAKING
WITHOUT BIASES
ARISING DUE TO
COI**



**BETTER QUALITY
RESEARCH**



**EFFECTIVE
IDENTIFICATION &
MANAGEMENT OF
COI**



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THE PROJECT

The project is a partnership of researchers in South Africa, Kenya, Cameroon and Lebanon. It draws on previous research by the Network on Governance, Ethics and COI in Public Health (GECI-PH). GECI-PH was established in response to concerns about the influence of industry funding on public health research, practice and policy outcome, and to inform a policy, research action agenda for scholarship to address governance, ethics and COI in these relationships. This project focuses on how to manage COI in health research.

There are 2 main components to the study:

1. Situation analysis of SGCs and RECs in SSA
2. Application of findings to develop two open-access resources - toolkit and e-learning module



STUDY POPULATION FOR THE SITUATIONAL ANALYSIS

10 countries from SSA

- 5 LMIC:
 - Nigeria,
 - Zambia,
 - Cameroon,
 - Kenya,
 - Ghana
- 2 UMIC:
 - South Africa,
 - Gabon
- 3 LIC:
 - The Gambia,
 - Ethiopia,
 - Rwanda



SITUATIONAL ANALYSIS AIMS

- To identify institutional arrangements and values that shape health research oversight and policies for managing COI
- To identify gaps, barriers and opportunities for strengthening capacity to manage COI and protect researcher independence

OTHER PROJECT AIMS

- To identify, adapt and pilot a toolkit to detect and manage COI and protect researcher independence
- To identify existing resources and develop adapt and pilot an e-learning module on managing COI and protecting researcher independence
- To disseminate the toolkit and training module



PRELIMINARY FINDINGS

In December 2021, a Survey on COI in Health Research was sent out to representatives of Research Ethics Committees and Science Councils in sub-Saharan African countries.

Data collection is currently in progress, but preliminary findings suggest a strong interest in interventions to build capacity to identify, address and manage COIs in Research Ethics Committees and Science Councils in sub-Saharan Africa.

Thus far, 28 responses have been received. Of these, the majority of respondents indicated that their institutions were aware of COI in health research, and of its potential impact.

Many respondents indicated awareness of COI in health research and its potential impact. Interest in materials for managing COI was commonly expressed.

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