Annex 3

The CGIAR system and its relevance for international health R&D

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The Consultative Group on International Agricultural Research (CGIAR) is a unique example of what can be accomplished by the coordinated and sustained support of research by the international community. As a harbinger of the Green Revolution, it has directly contributed to the goal of eradicating human hunger and poverty and has made a demonstrable impact on the standard of living and the quality of life in the developing world. The most remarkable aspect of this success is that it has been brought about by investment in research and technology. Ismail Serageldin, Vice-President in the World Bank and Chairman of CGIAR, proudly claims that "Since it was founded in 1971, the Group has paid for itself many times over, achieving a remarkable string of success in food production, economic development, conservation of genetic resources, and environmental protection throughout the developing world" (CGIAR Secretariat 1994b: foreword).

CGIAR is also unique in many other ways. It is the only forum for donor coordination and advocacy covering the whole range of research activity in any sector. The results of this coordination and advocacy have indeed been spectacular: a rise in donor contributions from about US$ 15 million in 1971 to US$ 300 million in 1993. Organizationally also it has few parallels. It is entirely a non-formal structure without a constitution or legal backing and yet it has successfully overseen and guided 16 autonomous centres located in different parts of the world with varying objectives and mandates, almost half of which were actually brought into being through designated proxies by the Consultative Group (CG) system itself.

Additionally, it has many firsts to its credit. It realized early on that it was not enough to produce more food in order to improve nutrition and equity, but it was also essential to put into operation policies to place these supplies in the hands of those who need them most. The establishment of the International Food Policy Research Institute (IFPRI) in 1975 was a tribute to the vision of those who recognized the role of policy research leading to informed decision-making for the benefit of the disadvantaged—an issue highlighted in respect to health in the *World development report 1993*. CGIAR is also a pioneer in the management of research; here the establishment of the International Service for National Agricultural Research (ISNAR) in 1980 was an important innovation.

Although there had been some noticeable strain on the system due to expansion of the number of CGIAR centres from 4 in 1971 to 16 in 1994, as well as broadening of its mandate to include forestry and fisheries, all this has been managed with a very lean bureaucracy; broad coordination and oversight of centres has been maintained without any direct and overt intervention save in exceptional circumstances. The CG system has shown flexibility and dynamism, and its focus and themes have been modified according to changing needs and perceptions. To quote Ismail Serageldin again: "Of particular importance is the strengthened focus on national resource management and sustainability, which complement the Group's traditional contributions to food security through crop improvement, institution building, training and policy research" (CGIAR Secretariat 1994b: foreword).

The evolution of CGIAR is, therefore, a study in an experiment in development and even more so in the application of research and technology for improving the life of the poor. The study is particularly relevant for health research because of many convergences between agriculture and health:

- Both are vitally concerned with poverty, on which they can make a major impact. "For most developing countries, the way out of the poverty trap is through a more productive agriculture" (CGIAR Secretariat 1994b:3). The same can be said of health. As the *World development report 1993* points out, "Spending on health is a productive investment, it can raise incomes, particularly among the poor, and it reduces the toll of human suffering from ill-health" (World Bank 1993:21). Thus, both agriculture and health are key factors in removing inequities, narrowing disparities and alleviating poverty in developing countries.
- Technology has already made great progress and is capable of making a still greater contribution to agriculture as well as to health. Hence, the very high value of research in both the sectors.
- New technologies in agriculture have to be tried out and adapted to different agroclimatic settings. Similarly, new technologies in health have to be tested in