

Supporting Local Scholarship for Equitable Representation in the National Health Science Journal

In this issue, we have noted a diversity of submissions across the country, one from Dumaguete, another from South Cotabato, a study done in urban Marikina, and a study done in the rural municipality of Alangalan, Leyte. Notably, likewise, there is a submission from Tasikmalaya City in Indonesia. Such submissions enrich the content of the journal and enhance its role as the National Health Science Journal, tasked to reflect the nation's health realities.

Is this diversity a reflection of a comprehensive support structure? Indeed, in the preface of the Guidelines for Health Research Prioritization of the Philippine National Health Research System, it is stated: "Health research should be responsive to current and emerging health needs of the Filipinos."¹

Yet, in the assessment of research priority setting activities, there are still many challenges.² The bottom-up approach, multiple consultations with stakeholders may have led to an "over-addition on or over-amendment of the initial list of research priorities." A top-down approach, on the other hand, may have "not reflect(ed) the regional perspective" and have noted a lack of "adequate engagement of the private and industry sector." Additionally, implementing the agenda requires structural support, particularly in financing research activities. A recent paper revealed some issues hampering local efforts, particularly in "that research is delayed by bureaucracies in grant administration, particularly in financial reporting and ethics review processes."³

Does the spread of submissions in this issue reflect the challenges encountered by local researchers? About half of the issue submissions come from the University of the Philippines Manila. Does that reflect the enabling climate of the university? We may need to scale up our processes nationally to serve as a "best practice model" for other regions to emulate.

For now, we hope that the article of Suelan and co-investigators on TB-DOTS Services in South Cotabato answers the information gaps needed to solve the mortality and morbidity from tuberculosis in the region.⁴ Likewise, the submission of Jaya and co-authors on the impact of the Pantawid Pamilyang Pilipino Program (4Ps) in a rural municipality in Leyte can provide an indication of the effectiveness of this government program on the previously reported nutritional deprivation of children in the area.⁵

We hope that, with our enhanced digital visibility and open access, we not merely become a repository of studies, but, rather, contribute to drive the solutions and sharpen focus on national health priorities. Moreover, we would like to encourage equitable representation. The submissions to our journal indicate there is still work to be done to achieve this. Following the allocative efficiency model of the paper by our editorial board member John Wong who lamented the lack of quality local data, we recommend that support be directed at underrepresented regions in research capacity building, mentorship, and financing.⁶ This ensures that ALL Filipino researchers, not only in major academic centers, are heard and reflected in the pages of the ACTA.

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