ISPOR 2011 Meeting Travel Scholarship Award Report: Pharmacoeconomics and Outcome research in Mongolia: Research into Policy Implementation
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It seems, pharmacoeconomics and outcomes research is the one of key drivers for evidence based decision making and policy formulation in health industry. Indeed research into policy implementation is still in its infancy and there is more work to be done in this arena [1]. Many policies are developed within a pre-existing context, making it difficult to distinguish between formulation and implementation [2]. As implementation is an integral part of the policy-making process, problems or failure in implementation can be argued to be as much a consequence of flaws in the policy-formulation process as the implementation process [3]. The implementation of policies, including any potential barriers to implementation and the link between policy formulation and implementation remains an important question among policy analysis researchers.

It is my appreciation to the International Society for Pharmacoeconomics and Outcome Research (ISPOR) to contribute in solving this question worldwide by the way of establishing supportive and collaborative mechanism and knowledge hub among different stakeholders in terms of academic research and best practices exchange, professional fellowships, international meetings, regional chapters and academic networks, and many other leading activities. Especially, in low and middle income countries like Mongolia, health policy work based on pharmacoeconomics and outcome research too rarely draws on, or even shows knowledge of relevant theory. I also appreciate ISPOR initiated a Travel Scholarship Award to support individual specialists/academicians from those economically disadvantaged countries.

It was my great honor to be selected as a recipient of a 2011 ISPOR Travel Scholarship Award to attend at the ISPOR 16th Annual International Meeting in Baltimore, MD, USA. This was my first ISPOR meeting to have face to face contacts with ISPOR leaders, regional chapters’ presidents and other great people. During the visit, as I am member of Advisory Committee of Asia Consortium, we had a number of meetings, group works and roundtable discussion which was very informative and helpful for us to exchange experiences, share information to learn each other and develop plan for further collaboration.

Before the Meeting, I participated in 4 short courses in conjoint analyses, cost effective analyses alongside clinical trials, design and structure of modeling and advanced modeling that was really impressed and improved my research knowledge and skills as well as I have been provided very good lecturing and reading materials during these short courses. I would suggest professionals and especially my graduate students in Mongolia to learn and use those methods and training materials.

During the Meeting, there were many workshops, exhibitions, high level plenary and parallel sessions with many different case studies and academic presentations and lots of handouts for research and poster presentations. Overall, the Meeting was organized very well and provided many advantages for all participants.

Due to attending the ISPOR Meeting, I have advanced my knowledge and skills on economic evaluation and outcome research. In the future, as I am responsible for the ISPOR Mongolian Chapter, I have planned to organize local meeting with our working team and develop further strategy on capacity building for pharmacoeconomics and outcome research in Mongolia. Moreover, we will focus on education system and training activities with assistance of academic institutions, ISPOR guideline development and official endorsement, combination of ISPOR activities and health policy and systems research among policy makers/decision makers and researchers for a better knowledge and practice of evidence based decision making and policy formulation/implementation in Mongolian health sector.

References

2. Exworthy, M. Policy to tackle the social determinants of health: using conceptual models to understand the policy process. Health Policy and Planning 2008;23:318-27.