

# Great ideas come from everywhere: Improving global health through reverse innovation

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The idea that insights from the healthcare systems of low-income countries might be transferable from low to high-income countries is becoming increasingly common in global health and innovation publications. One journal wants to take this idea further to develop an international forum for high-quality research, where academics, practitioners, leaders, and policy-makers can come together to learn, share and critique emerging results on the subject.

A commentary in the open access journal *Globalization and Health*, co-authored by the Minister of Health for Rwanda, outlines a number of healthcare innovations that describe Rwanda's progress in generating an environment for evidence-based [healthcare innovation](#). For example, through a national Health Sector Research policy, Rwanda has linked community-based research to [health care delivery](#) by pursuing "disciplined experiments" for innovations, committing to rigorous monitoring and evaluation, and supporting environments for context specific [health](#) technology development. While, the authors recognize that, "the global trade in ideas and innovations in health care delivery remains stunted," they underline the need to explore how lessons from Rwanda can enable shared learning that leads to benefits in global health. Agnes Binagwaho, Minister of Health for Rwanda and colleagues state: "We must embrace two-way learning; after all, we live in one world, not three, and the communities where this journal's online readers live are as surely on the globe as are Kigali or Boston.'

The thoughts put forward in the aforementioned commentary piece are complimented by a literature review on the impact of volunteering within health partnerships with low income countries. The authors of the paper, Felicity Jones et al., focus on health workforce development and service delivery in the United Kingdom and highlight "a strong theoretical argument that the skills acquired through volunteering are transferable to service delivery within the NHS". However, the authors too recognize paucity of information on the subject.

On 30th August, 2013, BioMed Central's open access journal *Globalization and Health* will launch a new thematic series entitled 'Reverse innovation in global [health systems](#): learning from [low-income countries](#)'. The series will focus on the lessons the developed world can learn from the developing world to build stronger, more effective health systems.

The Editor in Chief of *Globalization and Health*, Greg Martin, and Guest Editors for the thematic series, Shams Syed and Viva Dadwal add that, 'We are looking for exceptional papers that balance research and perspective in the relatively uncharted territory of 'reverse innovation' in global health systems. These papers exemplify the bubbling excitement and momentum—both at the individual and national levels—to move [global health](#) beyond the narrow constraints of traditional thinking. We recognize that there is a broader global movement aimed at realizing the real potential of low and middle-income countries in contributing to health system challenges everywhere. We need to learn, share and critique emerging results to promote bi-directional learning and move swiftly to truly global innovation flow.'

**More information:** Jones, F. et al. Do health partnerships with organisations in lower income countries benefit the UK partner? A review of the literature, *Globalization and Health* 2013, 9:38. [DOI: 10.1186/1744-8603-9-38](#) [www.globalizationandhealth.com ...](#)

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