

Table 1 HRS resources and infrastructure capacity (HRSRIC) in Palestine

HRS resource and infrastructure capacity (HRSRIC)		Theme 2: Enhancing factors
Theme	Theme 1: description of HRSRIC status	Theme 2: Limiting factors
Sector		
Gov.	<ul style="list-style-type: none"> - Existed in infrastructure and human resources - Existed but insufficient - Existed but insufficient and non-sophisticated - Insufficient with untrained staff - Very weak with good staff - Insufficient with good human resources - Insufficient with existed trained staff - Plenty of human resources - Only existed human potentials - Sufficient R&I, especially in academia - Limited R&I - Limited R&I - Weak R&I and infrastructure - Scarce except qualified staff - Scarce of R&I - Scarce of R&I - Very weak R&I and infrastructure 	<ul style="list-style-type: none"> - Develop the researchers and policy makers competency and expertise via continuous education - Boost the internal and external exchange programs - Encourage health professionals on in-job research - More investment in under and post-graduates in HR - Good management of better allocation and rational utilization, - Political will and certain capacity development vision - Fixed budgets allocation and founding a national fund (5% from MOH's budget for HR) - Expand the R&C of good HR prioritization and production such as experimental studies - Revitalize the international support - A system to govern and develop all R&I properly through a harmonized sectorial approach - Collective strategic thinking to identify our HR priorities and then the required national capacities
Acad.	<ul style="list-style-type: none"> - Existed capacity but untapped manpower - Existed facilities and qualified manpower - Great potentials and experts exist - Good R&I and advanced facilities - Existed R&C, especially in academia - Insufficient capacity with talented experts - Variable capacity with good manpower - Limited capacity and facilities with well-qualified staff - Limited R&I with certain infrastructure - Limited R&I - Limited and scarce R&I - Limited capacity and relative good experts - Weak capacities and potentials - Very weak infrastructure and skilled experts - Poor HR facilities and no infrastructure - Too limited R&I - Nationally, basic needs for the MOH are not existed, while institutionally yes - Severe lack of bright minds, but our R&I are controlled by Israel 	<ul style="list-style-type: none"> - Good management by MOH for optimal allocation of sufficient budgets and resources - Founding a system and reform strategy to set an empowering vision for upgrading the infrastructure - Promote the learning approach inside the Palestinian institutions - Capacity building programs for policy makers and researchers and allocate enough time for HR - Avoid the politic impacts in health - Pay attention to experimental HR - A need for PNIPH role to develop HR capacities - Exploit the donor's support in the capacity advancement - Expand the local and international partnerships and exchange initiatives - Renovate the school's curriculum to be research-based and enhance faculty members loads - A need for an electronic national library, technical HR center, and university hospitals - Enhancing research prioritization exercise

Table 1 HRS resources and infrastructure capacity (HRSRIC) in Palestine (concluded)

HRS resource and infrastructure capacity (HRSRIC)	
Theme 1: description of HRSRIC status	Theme 2: Limiting factors
<p>Theme</p> <p>Theme 1: description of HRSRIC status</p>	<p>Theme 2: Enhancing factors</p>
<p>Sector</p> <p>NGOs</p> <ul style="list-style-type: none"> - Excellent R&IC - Existed R&IC, but need a proper use - Good R&C, but does not reflect on the HR performance - Good R&IC and infrastructure - Insufficient and improving with good staff - Insufficient capacity and very inspired staff - Insufficient R&IC - Insufficient R&IC - Limited R&IC - Limited and undeveloped R&IC - Weak R&IC - Weak R&IC with brilliant manpower - Very weak R&IC as no system and interest - Very weak R&IC - Poor R&IC and infrastructure and capable staff - Poor R&IC - Scarce R&IC in all sectors - The absence of capacity but very good experts 	<ul style="list-style-type: none"> - A collective national body, PNIPH can take this lead - A political will and attention should be presented - Investment and sustainable and national official fund - Urge the international agencies to assist the country research R&IC advancement - Regular priorities setting to determine the required R&IC - Sponsor and support the senior and junior researchers through incentives and exploit the postgraduates - Maximize the optimal resources use and allocation - Capacity buildings programs - HR value and orientation should be enhanced - Adopt the multi-disciplinary approach in HR - Promote the R&C of the operational and clinical studies - Complimentary HR environment rather than a competitive and public-private partnership - A national network includes the state, academia, and NGOs, to coordinate and mobilize R&IC - The active role of the SRC and LPHA
<ul style="list-style-type: none"> - An organizing system is missing - Maladministration and resources misallocation - Unsustainable individual and external fund and deficiency of national, no specific budgets - Lack of advancing plans to R&IC - HR is competitive for personal purposes and lack of coordination - Brain drain and HR is undervaluing - Financial crises in academia - Lack of manpower capabilities, training, and motivation - Lack of technology use, advanced libraries and well-equipped facilities for RCTs or applied studies - Duplication and fragmented institutional potentials 	

remarkably revealed that the Ministry of Health faced a chronic scarcity of essential medical supplies, academia suffers from acute financial crises, and the lack of most resources is due to the absolute control and restrictions imposed by the occupation. All responses about HR resources themed into 2 descriptive categories. The first category was the most frequent and represented the vast majority. The descriptive remarks ranged from “severe lack”, “very weak”, “limited”, “scarce”, and “inadequate”. While the other responses, which formed the second category, comprised: “resources exist”, “good”, and “good but unsophisticated and insufficient”. Academics participated in FGDs referred to the poor performance of HR. They admitted to the availability of resources and good capacity, but managing HRSRIC was said to be a central difficulty. Government experts recognized the lack of research budgets where they called for a 5% of the central health budget to be allocated to HR. Conversely, NGO experts alleged that the national health plan 2011–2013 allocated 1% to HR, but other experts from NGO sector argued that this percentage was not translated in the ground.

The second theme reflected the main obstacles facing HRSRIC and was mainly correlated with the absence of a regulatory framework. Mismanagement of resources, a weak strategic leadership, duplication and individuality in HR efforts, brain drain, and insufficient experience and skills of current human resources were common hurdles reported by experts. Others pointed to other factors such as lack of sustainable and national funds, political turmoil, time constraints, and lack of investment plans in infrastructure innovation and technological development in all sectors.

The third theme presented perceptions to tackle these hurdles; the majority agreed on the centrality of having the political support to initiate a strategic dialogue to build a national HR body. Participants recommended that this body should be in charge of framing a development strategy and policy with emphasis on: (1) securing adequate and fixed budgets, stimulate the local support and invest donor funds appropriately to strengthen HR infrastructure; (2) advancing the capacities of strategic planning and optimal resources management; (3) fostering partnerships, fellowships, exchange programmes, learning institution approach and capacity building programmes, whether at the local or international level, to evolve the institutional and national HR resources and capacities; and (4) improving approaches to research prioritization exercises, integration, intra-inter-transdisciplinarity, and networking for better resources and capacity identification, allocation and utilization.

HRF

Table 2 shows the findings on the status of HRF, which comprised 4 themes: (1) status of funding; (2) funding sources; (3) gaps; and (4) steps needed to improve financing. Concerning HRF status, there was an overwhelming consensus on extreme fund deficiency directed to HR. The majority of experts harmoniously echoed that