

Working Towards a Framework for Governing Health Research in Nepal

Ashok Bhurtyal,¹ Suman Pant,² Ganesh Dangal,³ Pradip Gyanwali²

¹Institute of Medicine, Tribhuvan University, Kathmandu, Nepal, ²Nepal Health Research Council, Ramshahpath, Kathmandu, Nepal, ³Journal of Nepal Health Research Council, Ramshahpath, Kathmandu, Nepal.

ABSTRACT

Health research activities have advanced considerably in Nepal over the past several years. However, stakeholders' confidence on scientific community is shaken as the latter failed occasionally in adhering to ethical principles. Nepal Health Research Council has exercised regulatory authority to control and support research works. However, much more is needed given the scale at which studies are being carried out. It is high time to conduct an analysis of the current situation followed by the development of an overarching framework to strengthen health research that facilitates a range of actions along the continuum of identifying information needs to translation of knowledge into policies and practices for ultimately improving people's health.

Keywords: Ethics; health research systems; knowledge management; research regulation

INTRODUCTION

Following recent waves of political changes and progress achieved in enhancing technical capacity, Nepal has scaled perceptible achievement in the conduct and utilisation of health research activities. Between 2008 and 2018, there has been an eightfold increase in the number of research proposals approved by the Nepal Health Research Council (NHRC).^{1,2} Although considerable gaps persisted in optimal translation of scientific evidence into actions for improving health of the people, some of the results from research conducted in the country have informed policies and practices adopted by the government and its select health development partners.^{3,4} However, some concerns remain.

CONTENTIOUS RESEARCH WORKS

Controversies over ethical problems such as compromised autonomy of research participants and unequal collaborations between institutions and individual researchers have emanated from questionable studies that were approved by the NHRC as well as those performed without its knowledge or permission.^{5,6} Numerous studies have attempted to answer interesting, and at instances, novel questions using ostensibly robust methods. Yet, not all of them have lived up to legitimate ethical requirements such as those defined by laws and guidelines promulgated by the government^{7,8} and international organisations.⁹ Trust between the

populace, health professionals, policy makers; and researchers was jeopardised when the scientific community faced allegations of poor performance or misconduct. For example, hasty publication of an article about Covid-19 was followed by heated public debate as the authors could not secure ethical approval for the work.^{10,11}

DEVELOPING THE FRAMEWORK

NHRC has taken corrective action on a case-by-case basis, such as getting unethical research paper retracted.¹² However, its limited capacity remains spread across the dual functions of undertaking research itself and regulating works done by others, the latter being mostly confined to reviewing proposals for ethical clearance and monitoring review committees established at 51 facilities including academic institutions and other research organisations across the country. The heightened need to oversee unprecedented increase in health research activities necessitates the formulation of an overarching framework for actions in two broad dimensions.

First, it is necessary to analyse the nation's health research situation to assess the progress, prospects and challenges for utilising in-country capacity and international co-operation for addressing unanswered research questions as well as optimal translation of knowledge into policies and practice. This would inevitably include delving into the conception, conduct and subsequent dissemination

Correspondence: Ashok Bhurtyal, Institute of Medicine, Tribhuvan University, Kathmandu, Nepal, Email: ashokbhurtyal@iom.edu.np, Phone: +977-1-4435033.

of research activities implemented ever since NHRC's ethical review committee was established, from both technical and ethical standpoints.

Second, and important, developing a comprehensive framework to govern health research is indispensable. Such a document would guide a range of activities related to: prioritising research questions based on current and emerging information needs; facilitating rigorous and culturally adapted research for generating scientific evidence that is not only credible but also useful for shaping policies and practices for improving health of people, with particular focus on underprivileged groups; strengthening capacities of researchers and their institutions; forming a basis for resourcing and evaluating production of research outputs and impact; aligning federal, provincial and municipal research policies and strategies with other components of health systems development; and providing a basis for handling cases of ethics violation or other forms of research misconduct. Meaningfully engaging people, whose health is concerned, gets often overlooked by policy processes and should be given due attention.

The purpose and process for developing such a framework should be carefully considered. While it would augment ongoing works for improving research regulation, we underscore that it should endeavour to enable researchers' ability to exercise academic freedom. Overall, it is expected to encourage them to undertake research activities and access a fair share of resources in doing so. Further, it should help safeguard research participants, authors and institutions from undue influences, unfair collaborations, underpowered studies, mismatches with the country's need, and faulty methods. Ultimately, it is intended to make significant contributions toward protecting and promoting health of Nepali people, in harmony with other relevant policies and plans within and beyond the health sector. Initially, we recommend conceptualising a broad, yet crisp, plan for discussion with experts and other stakeholders. With their inputs, the idea may be developed into an elaborated document, which would then be consulted further for critical observations and contributions. Throughout the process, the complexity of issues and nuances that may arise in due course should be considered.

CONCLUSIONS

Although challenges remain in conduct and usage of health research, growing traction among practitioners across several disciplines and sectors including health should be harnessed. A comprehensive approach to framing, resourcing, facilitating and regulating health research activities to support information needs of

the people, policy makers and implementers in health and health-care delivery systems, and individuals and institutions doing research activities is warranted. During these difficult times following Covid-19 pandemic and the responses undertaken by the state, developing a health research governance framework has never been more important.

ACKNOWLEDGEMENTS

We thank Kamal Ranabhat, Ministry of Health and Population; Ramesh Kant Adhikari, Independent; Sachin Ghimire, Manmohan Memorial Institute of Health Sciences; and Sharad Raj Onta, Nepal Public Health Foundation for their comments during the Panel discussion on health research governance and research ethics, 6th national summit of health and population scientists in Nepal, 6-7 August 2020, Kathmandu, Nepal.

REFERENCES

1. Nepal Health Research Council. Annual report, 2064-65 (2007-08). Kathmandu: Nepal Health Research Council, Government of Nepal; 2008. [\[FullText\]](#)
2. Nepal Health Research Council. Annual report, 2074-75 (2017-18). Kathmandu: Nepal Health Research Council, Government of Nepal; 2018. [\[FullText\]](#)
3. Department of Health Services, Department of Food Technology and Quality Control. [Guidance on good food for Nepali people]. Kathmandu: Department of Health Services, Ministry of Health and Population, Department of Food Technology and Quality Control, Ministry of Agriculture Development; 2016. [\[FullText\]](#)
4. World Health Organization. Work of the World Health Organization in Nepal: report of the WHO representative, 2014. Kathmandu: World Health Organization; 2014.
5. Andrews J. Research in the ranks: vulnerable subjects, coercible collaboration, and the hepatitis E vaccine trial in Nepal. *Perspect Biol Med.* 2006;49(1):35-51. [\[PubMed\]](#)
6. Sharma JR, Khatri R, Harper I. Understanding health research ethics in Nepal. *Dev World Bioeth.* 2016;16(3):140-7. [\[PubMed\]](#)
7. Nepal Law Commission. Nepal Health Research Council Act, 2047 (1991). Kathmandu: Nepal Law Commission; 1991. [\[FullText\]](#)
8. Nepal Health Research Council. Final draft national ethical guidelines for health research in Nepal. Kathmandu: Nepal Health Research Council, Government of Nepal; 2019. [\[FullText\]](#)
9. Council for International Organizations of Medical Sciences. International ethical guidelines for health-related research involving humans, fourth edition. Geneva:

-
- Council for International Organizations of Medical Sciences; 2016. [\[FullText\]](#)
10. Dahal M. [Gene sequencing of Coronavirus sample from Nepal's first infected person performed abroad without permission]. Nepalkhabar. 2020 May 13. Available from: <https://nepalkhabar.com/society/26936-2020-05-13-17-10-44>
 11. Ghimire S. [The question of bioethics in gene sequencing]. Kantipur. 2020 May 19. Available from: <https://ekantipur.com/bibidha/2020/05/19/158986171818188409.html>
 12. The PLoS One Editors. Retraction: Anti-Japanese encephalitis virus IgM positivity among patients with acute encephalitic syndrome admitted to different hospitals from all over Nepal. PLoS One. 2017;12(11):e0187867. [\[PubMed\]](#)