

1 00:00:00,000 --> 00:00:00,833 - [Donna] First.

2 00:00:02,710 --> 00:00:05,736 This is our first Center on Methods for Implementation

3 00:00:05,736 --> 00:00:07,705 and Prevention Science seminar

4 00:00:07,705 --> 00:00:09,634 for the academic year,

5 00:00:09,634 --> 00:00:11,015 and we're very pleased

6 00:00:11,015 --> 00:00:13,437 to see so many people here live in the audience,

7 00:00:13,437 --> 00:00:16,233 getting to enjoy a delicious lunch with us,

8 00:00:16,233 --> 00:00:18,244 as well as many people on Zoom

9 00:00:18,244 --> 00:00:20,345 from literally all over the world.

10 00:00:20,345 --> 00:00:24,071 We have colleagues from Nepal visiting us right now

11 00:00:24,071 --> 00:00:26,953 and also colleagues from Colombia

12 00:00:26,953 --> 00:00:29,535 who are also working on implementation science,

13 00:00:29,535 --> 00:00:32,787 especially with respect to infectious disease,

14 00:00:32,787 --> 00:00:35,072 representing a longstanding collaboration

15 00:00:35,072 --> 00:00:36,449 that the Yale School of Public Health

16 00:00:36,449 --> 00:00:38,223 has had with Colombia.

17 00:00:38,223 --> 00:00:41,303 But today our focus is our work with Nepal,

18 00:00:41,303 --> 00:00:45,457 and I'm very pleased to introduce to you my friend

19 00:00:45,457 --> 00:00:48,838 and colleague, Dr. Biraj Karmacharya,

20 00:00:48,838 --> 00:00:50,767 who is the administrative director

21 00:00:50,767 --> 00:00:53,790 and the director of Public Health Community Programs

22 00:00:53,790 --> 00:00:55,296 and associate professor

23 00:00:55,296 --> 00:00:57,218 in the Department of Public Health

24 00:00:57,218 --> 00:00:58,773 at Dhulikhel Hospital,

25 00:00:58,773 --> 00:01:01,504 which I myself visited many times,

26 00:01:01,504 --> 00:01:05,259 and Kathmandu University School of Medical Sciences.

27 00:01:05,259 --> 00:01:08,270 So, before Biraj gives his talk,

28 00:01:08,270 --> 00:01:10,789 I wanted to tell you a little bit about him.
 29 00:01:10,789 --> 00:01:12,456 He obtained an MBBS,
 30 00:01:13,763 --> 00:01:17,218 which is sort of the UK version of a medical
 degree
 31 00:01:17,218 --> 00:01:18,870 for those of you who don't know that,
 32 00:01:18,870 --> 00:01:21,703 in 2003 from Kathmandu University.
 33 00:01:22,714 --> 00:01:25,747 He got his Master's of Tropical Medicine,
 34 00:01:25,747 --> 00:01:28,588 on a synergy with some of our Colombian
 colleagues here,
 35 00:01:28,588 --> 00:01:32,948 in 2006 from Mahidol University in Thailand,
 36 00:01:32,948 --> 00:01:34,865 and then a PhD in 2015.
 37 00:01:36,374 --> 00:01:38,832 (attendee chattering)
 38 00:01:38,832 --> 00:01:41,132 Sally if you could...
 39 00:01:41,132 --> 00:01:44,382 (attendees chattering)
 40 00:01:51,148 --> 00:01:53,558 And thank Sally, or whoever did it. (chuckles)
 41 00:01:53,558 --> 00:01:56,809 As a Fulbright Science and Technology awardee,
 42 00:01:56,809 --> 00:01:59,443 and an MPH in Global Health in 2017
 43 00:01:59,443 --> 00:02:02,899 from the University of Washington, Seattle,
 USA.
 44 00:02:02,899 --> 00:02:05,223 So, nobody could say he's not well-trained
 45 00:02:05,223 --> 00:02:07,551 across a diverse range of medical
 46 00:02:07,551 --> 00:02:10,172 and public health sciences.
 47 00:02:10,172 --> 00:02:12,011 He was also the founding co-director
 48 00:02:12,011 --> 00:02:14,198 of Nepal Studies Initiative
 49 00:02:14,198 --> 00:02:16,720 at the Jackson School of International Studies
 50 00:02:16,720 --> 00:02:19,178 at the University of Washington.
 51 00:02:19,178 --> 00:02:20,675 He founded and has been leading
 52 00:02:20,675 --> 00:02:22,836 the Department of Community Programs
 53 00:02:22,836 --> 00:02:27,038 and Public Health at Dhulikhel Hospital since
 2006,
 54 00:02:27,038 --> 00:02:29,095 through which he is engaged in developing

55 00:02:29,095 --> 00:02:31,958 and setting up innovative community-based health

56 00:02:31,958 --> 00:02:36,331 and integrated health and development programs in Nepal.

57 00:02:36,331 --> 00:02:37,994 He has also been instrumental

58 00:02:37,994 --> 00:02:39,770 in advancing public health training

59 00:02:39,770 --> 00:02:41,364 and research in Nepal,

60 00:02:41,364 --> 00:02:43,547 leading the pioneering programs,

61 00:02:43,547 --> 00:02:45,625 the Master of Science in Public Health,

62 00:02:45,625 --> 00:02:47,701 Epidemiology and Global Health,

63 00:02:47,701 --> 00:02:52,549 and more recently the PhD program in Public Health

64 00:02:52,549 --> 00:02:55,117 at Kathmandu University

65 00:02:55,117 --> 00:02:56,784 of Medical Sciences.

66 00:02:58,959 --> 00:02:59,792 (alarm clicking)

67 00:02:59,792 --> 00:03:01,284 I hope this isn't a fire alarm,

68 00:03:01,284 --> 00:03:03,595 which means we have to leave the building.

69 00:03:03,595 --> 00:03:05,696 That's what it sort of sounds like.

70 00:03:05,696 --> 00:03:08,137 I'm gonna continue in the hope that it isn't.

71 00:03:08,137 --> 00:03:10,185 His research interests...

72 00:03:10,185 --> 00:03:11,444 (participant chuckling)

73 00:03:11,444 --> 00:03:13,207 That's the first time this happened.

74 00:03:13,207 --> 00:03:14,687 His research interests span

75 00:03:14,687 --> 00:03:16,696 across non-communicable diseases,

76 00:03:16,696 --> 00:03:18,164 climate change and health,

77 00:03:18,164 --> 00:03:20,292 and health systems and policies.

78 00:03:20,292 --> 00:03:22,561 He's been a team member

79 00:03:22,561 --> 00:03:25,643 in our Pioneer Worksite Intervention study in Nepal,

80 00:03:25,643 --> 00:03:28,802 led by myself and Dr. Archana Shrestha,

81 00:03:28,802 --> 00:03:30,505 another colleague from Nepal

82 00:03:30,505 --> 00:03:33,570 who's visiting us over for the next two days,

83 00:03:33,570 --> 00:03:35,905 has continued to collaborate with us
84 00:03:35,905 --> 00:03:38,742 in various implementation research studies
85 00:03:38,742 --> 00:03:40,345 and training programs.
86 00:03:40,345 --> 00:03:42,758 It's been a very productive collaboration
87 00:03:42,758 --> 00:03:45,192 with around 16 papers published
88 00:03:45,192 --> 00:03:47,180 or submitted to date in which Biraj
89 00:03:47,180 --> 00:03:48,860 and I are co-authors,
90 00:03:48,860 --> 00:03:50,848 and many more expected in the future
91 00:03:50,848 --> 00:03:54,490 as we continue to apply implementation science
methods
92 00:03:54,490 --> 00:03:56,775 to end cervical cancer in Nepal
93 00:03:56,775 --> 00:03:59,866 and mitigate the growing non-communicable
disease epidemic
94 00:03:59,866 --> 00:04:02,381 in the country, particularly with respect
95 00:04:02,381 --> 00:04:05,602 to hypertension and the consequences of it,
96 00:04:05,602 --> 00:04:08,269 cardiovascular disease and stroke mortality,
97 00:04:08,269 --> 00:04:11,081 the major causes of mortality in Nepal
98 00:04:11,081 --> 00:04:12,657 and around the world.
99 00:04:12,657 --> 00:04:14,207 So that's our introduction
100 00:04:14,207 --> 00:04:16,524 to our friend and colleague Biraj.
101 00:04:16,524 --> 00:04:19,857 And now, he requested that he will speak
102 00:04:20,784 --> 00:04:23,333 for maybe about 45 or so minutes,
103 00:04:23,333 --> 00:04:25,133 and then please write down
104 00:04:25,133 --> 00:04:26,631 and note your questions,
105 00:04:26,631 --> 00:04:27,844 and those in the chat as well,
106 00:04:27,844 --> 00:04:28,758 and then we'll take questions.
107 00:04:28,758 --> 00:04:31,358 (attendee speaking foreign language)
108 00:04:31,358 --> 00:04:32,191 I think we've got someone else unmuted.
109 00:04:33,350 --> 00:04:34,954 (Biraj harrumphing)
110 00:04:34,954 --> 00:04:37,194 - [Biraj] Good afternoon everyone
111 00:04:37,194 --> 00:04:40,556 and thank you Dr. Spiegelman Donna

112 00:04:40,556 --> 00:04:43,577 for a very extensive introduction,
113 00:04:43,577 --> 00:04:45,859 you made a little bit nervous.
114 00:04:45,859 --> 00:04:46,692 (Biraj laughing)
115 00:04:48,488 --> 00:04:50,364 I was already nervous, you know,
116 00:04:50,364 --> 00:04:53,166 but I'm supposed to present in this forum-
117 00:04:53,166 --> 00:04:55,797 (attendee speaking foreign language)
118 00:04:55,797 --> 00:04:58,083 - [Donna] Sorry, Biraj, why don't you, let's
take a second.
119 00:04:58,083 --> 00:04:58,916 - [Sally] I got it.
120 00:04:58,916 --> 00:04:59,749 - [Donna] You got it?
121 00:04:59,749 --> 00:05:00,582 All right then.
122 00:05:00,582 --> 00:05:01,415 - [Biraj] It's a-
123 00:05:01,415 --> 00:05:03,325 - [Donna] It's chaotic, people come in
124 00:05:03,325 --> 00:05:04,397 and then they're not muted.
125 00:05:04,397 --> 00:05:05,675 all right, sorry Biraj, please-
126 00:05:05,675 --> 00:05:07,086 - [Biraj] Yeah, I've been closely
127 00:05:07,086 --> 00:05:10,253 following Dr. Spiegelman's work along
128 00:05:11,279 --> 00:05:13,186 with my colleague Dr. Archana's work
129 00:05:13,186 --> 00:05:15,716 and also what is happening in the center,
130 00:05:15,716 --> 00:05:17,642 and I was already very nervous
131 00:05:17,642 --> 00:05:18,935 because it's a team that
132 00:05:18,935 --> 00:05:21,929 is really highly technicality
133 00:05:21,929 --> 00:05:24,429 in terms of implementation science,
134 00:05:24,429 --> 00:05:27,131 and I'm not an expert in that field,
135 00:05:27,131 --> 00:05:29,322 but I thought that,
136 00:05:29,322 --> 00:05:30,906 take this opportunity to share some
137 00:05:30,906 --> 00:05:34,423 of the on-the-ground experience from Nepal,
138 00:05:34,423 --> 00:05:37,095 especially in relation to my own work
139 00:05:37,095 --> 00:05:40,816 and collaboration from academia with the
government
140 00:05:40,816 --> 00:05:43,483 and also with the community, so,

141 00:05:44,787 --> 00:05:47,465 I just want to warn that you'd be disappointed
 142 00:05:47,465 --> 00:05:48,992 if you were expecting a very technical talk
 143 00:05:48,992 --> 00:05:53,992 on implementation science from me. (chuckles)
 144 00:05:56,914 --> 00:05:57,747 So.
 145 00:06:06,822 --> 00:06:09,059 So, I just made my disclaimer
 146 00:06:09,059 --> 00:06:12,142 that I don't consider myself
 147 00:06:12,142 --> 00:06:14,618 as an expert in implementation science
 148 00:06:14,618 --> 00:06:16,207 or a scientist in it,
 149 00:06:16,207 --> 00:06:19,505 but maybe, you know, I'm more closer to say
 I'm one
 150 00:06:19,505 --> 00:06:23,838 of the users of implementation science research,
 so.
 151 00:06:27,983 --> 00:06:31,157 So, for many of you who have not been in
 Nepal
 152 00:06:31,157 --> 00:06:32,865 or do not know about Nepal,
 153 00:06:32,865 --> 00:06:37,225 it's a tiny country sandwiched between India
 154 00:06:37,225 --> 00:06:39,516 and China with a population
 155 00:06:39,516 --> 00:06:41,766 of about 30 million people.
 156 00:06:44,930 --> 00:06:46,513 In terms of health,
 157 00:06:47,435 --> 00:06:50,729 you know, it stands out as a unique country
 158 00:06:50,729 --> 00:06:51,583 in many respects.
 159 00:06:51,583 --> 00:06:53,173 It was one of the few countries
 160 00:06:53,173 --> 00:06:56,192 that met the Millennium Development Goals,
 161 00:06:56,192 --> 00:06:58,058 and it's one of the countries
 162 00:06:58,058 --> 00:07:00,132 that had one of the highest increases
 163 00:07:00,132 --> 00:07:03,194 in life expectancy in the last 40 years.
 164 00:07:03,194 --> 00:07:05,191 So, the average life expectancy
 165 00:07:05,191 --> 00:07:08,281 in Nepal increased by about 20 years
 166 00:07:08,281 --> 00:07:11,226 in the last 40 years time.
 167 00:07:11,226 --> 00:07:14,386 So, that means we have been seeing,
 168 00:07:14,386 --> 00:07:16,170 and we will be seeing more

169 00:07:16,170 --> 00:07:18,527 of this double burden of disease
 170 00:07:18,527 --> 00:07:21,225 where we see the infectious diseases problems,
 171 00:07:21,225 --> 00:07:23,817 but at the same time pretty high problems
 related
 172 00:07:23,817 --> 00:07:26,900 to non-communicable diseases as well.
 173 00:07:29,471 --> 00:07:32,907 This is also a country which I think would be
 174 00:07:32,907 --> 00:07:35,826 an ideal lab for those who are working
 175 00:07:35,826 --> 00:07:38,552 in health systems and policies.
 176 00:07:38,552 --> 00:07:40,625 Until around a few years back,
 177 00:07:40,625 --> 00:07:42,731 it was a heavily centralized,
 178 00:07:42,731 --> 00:07:45,863 we had a very heavily centralized health sys-
 tem
 179 00:07:45,863 --> 00:07:49,325 where the Ministry of Health outlined, gov-
 erned,
 180 00:07:49,325 --> 00:07:52,603 and dictated all the different activities until
 181 00:07:52,603 --> 00:07:56,293 the rural communities and even at the house-
 hold level.
 182 00:07:56,293 --> 00:07:59,109 But now from a very centralized health system,
 183 00:07:59,109 --> 00:08:01,003 now it has changed into
 184 00:08:01,003 --> 00:08:04,172 a highly decentralized health system
 185 00:08:04,172 --> 00:08:07,606 where there is quite substantial authority
 186 00:08:07,606 --> 00:08:09,649 at the local level, as you can see,
 187 00:08:09,649 --> 00:08:12,134 the local levels, primarily the municipalities,
 188 00:08:12,134 --> 00:08:15,735 are responsible for the basic health services,
 189 00:08:15,735 --> 00:08:17,643 urban health services.
 190 00:08:17,643 --> 00:08:19,610 They are responsible for running
 191 00:08:19,610 --> 00:08:22,593 a lot of centrally approved health programs.
 192 00:08:22,593 --> 00:08:24,528 They are also responsible
 193 00:08:24,528 --> 00:08:27,269 and also have the authority
 194 00:08:27,269 --> 00:08:30,931 to run locally contextual programs,
 195 00:08:30,931 --> 00:08:32,870 community-based programs.

196 00:08:32,870 --> 00:08:37,510 And also, they have the freedom to promulgate lots

197 00:08:37,510 --> 00:08:39,918 of local-level health policies and regulations.

198 00:08:39,918 --> 00:08:43,245 So we have had a sort of a complete u-turn

199 00:08:43,245 --> 00:08:44,756 in our health policy.

200 00:08:44,756 --> 00:08:46,759 There's of course quite a bit of mess,

201 00:08:46,759 --> 00:08:50,787 but also it opens a lot of opportunities in collaboration,

202 00:08:50,787 --> 00:08:52,862 you know, not just with other sectors

203 00:08:52,862 --> 00:08:56,013 but also with academia and communities as well.

204 00:08:56,013 --> 00:08:59,372 We also now have a completely new structure,

205 00:08:59,372 --> 00:09:01,024 the provincial structure.

206 00:09:01,024 --> 00:09:03,657 We have seven provinces which run

207 00:09:03,657 --> 00:09:05,651 the provincial hospitals,

208 00:09:05,651 --> 00:09:08,907 they also run district-level health offices and so on.

209 00:09:08,907 --> 00:09:11,446 And also central ministry

210 00:09:11,446 --> 00:09:14,698 that is still responsible for a lot of activities.

211 00:09:14,698 --> 00:09:17,417 And very importantly, you know,

212 00:09:17,417 --> 00:09:20,968 a sort of landscape changer in our health system

213 00:09:20,968 --> 00:09:23,568 is the National Health Insurance Program

214 00:09:23,568 --> 00:09:26,221 that the government announced just a few years back

215 00:09:26,221 --> 00:09:28,837 and is rapidly scaling up throughout the country.

216 00:09:28,837 --> 00:09:31,961 So what I mean is there are lots of things happening

217 00:09:31,961 --> 00:09:34,936 in the country in the context of health,

218 00:09:34,936 --> 00:09:36,511 and I tried to shed some light

219 00:09:36,511 --> 00:09:39,344 on how we can fit in or, you know,

220 00:09:40,481 --> 00:09:43,553 cannot fit in in some of these activities.

221 00:09:43,553 --> 00:09:46,303 So, this is the town where I work
 222 00:09:47,854 --> 00:09:49,687 and I also live there.
 223 00:09:50,555 --> 00:09:53,183 I like to show this picture, you know,
 224 00:09:53,183 --> 00:09:55,058 to persuade some of you to visit us.
 225 00:09:55,058 --> 00:09:57,689 It's a beautiful town,
 226 00:09:57,689 --> 00:10:00,522 small town of about 15,000 people,
 227 00:10:01,432 --> 00:10:03,352 not very far from the capital,
 228 00:10:03,352 --> 00:10:06,403 it's just an hour drive from the capital Kath-
 mandu.
 229 00:10:06,403 --> 00:10:08,163 And this is the institution
 230 00:10:08,163 --> 00:10:11,243 where I work at Dhulikhel Hospital,
 231 00:10:11,243 --> 00:10:13,419 also, it's the University Hospital
 232 00:10:13,419 --> 00:10:14,434 of Kathmandu University
 233 00:10:14,434 --> 00:10:17,439 and runs the Kathmandu University School
 234 00:10:17,439 --> 00:10:19,106 of Medical Sciences.
 235 00:10:20,697 --> 00:10:21,697 We also have
 236 00:10:22,736 --> 00:10:26,561 a pretty extensive community-based health
 program
 237 00:10:26,561 --> 00:10:28,149 at our institution.
 238 00:10:28,149 --> 00:10:32,117 So, this is the first community-based hospital
 in Nepal.
 239 00:10:32,117 --> 00:10:33,804 It's a very unique model,
 240 00:10:33,804 --> 00:10:35,796 it is not a typical private hospital
 241 00:10:35,796 --> 00:10:37,219 or a public hospital,
 242 00:10:37,219 --> 00:10:39,925 so it's somewhere in between.
 243 00:10:39,925 --> 00:10:42,200 Even now the highest board
 244 00:10:42,200 --> 00:10:45,748 of the hospital comprises of the members
 245 00:10:45,748 --> 00:10:47,803 from the local community.
 246 00:10:47,803 --> 00:10:49,986 So it has a very different governance structure,
 247 00:10:49,986 --> 00:10:53,276 a not-for-profit non-governmental hospital,
 248 00:10:53,276 --> 00:10:55,721 which serves as a tertiary-level hospital

249 00:10:55,721 --> 00:11:00,251 of almost a population of 2.3 million people in Nepal.

250 00:11:00,251 --> 00:11:03,617 And we also have a pretty extensive network

251 00:11:03,617 --> 00:11:06,953 of rural community-based outreach centers

252 00:11:06,953 --> 00:11:08,131 through which we run a range

253 00:11:08,131 --> 00:11:11,317 of community-based health programs in the country.

254 00:11:11,317 --> 00:11:12,959 These are also the sites

255 00:11:12,959 --> 00:11:15,574 for a lot of our implementation research work

256 00:11:15,574 --> 00:11:17,990 that we are currently doing.

257 00:11:17,990 --> 00:11:20,559 And Donna has been to a couple of them

258 00:11:20,559 --> 00:11:23,069 and also was there recently,

259 00:11:23,069 --> 00:11:27,929 now, few months back, right. (laughs)

260 00:11:27,929 --> 00:11:30,963 So, you know, these are just some examples

261 00:11:30,963 --> 00:11:33,880 of our implementation science works

262 00:11:34,920 --> 00:11:36,975 in our institution.

263 00:11:36,975 --> 00:11:37,857 It started with

264 00:11:37,857 --> 00:11:40,643 the Nepal Pioneer Worksite intervention study led

265 00:11:40,643 --> 00:11:42,821 by Dr. Donna and Dr. Archana.

266 00:11:42,821 --> 00:11:45,191 And then you can see we have had

267 00:11:45,191 --> 00:11:46,952 a pretty wide spectrum

268 00:11:46,952 --> 00:11:49,816 of implementation research works going on

269 00:11:49,816 --> 00:11:51,591 in our institution,

270 00:11:51,591 --> 00:11:53,811 also, in the communities that we serve.

271 00:11:53,811 --> 00:11:55,771 And we are also very closely working

272 00:11:55,771 --> 00:11:57,556 with the Ministry of Health

273 00:11:57,556 --> 00:12:00,205 in various health systems-level

274 00:12:00,205 --> 00:12:02,955 implementation research programs.

275 00:12:04,379 --> 00:12:06,555 So I'm going to talk,

276 00:12:06,555 --> 00:12:10,243 share some of my own very personal experience

277 00:12:10,243 --> 00:12:14,237 around how we have evolved over the course of time

278 00:12:14,237 --> 00:12:16,853 in trying to understand

279 00:12:16,853 --> 00:12:19,428 how these three entities,

280 00:12:19,428 --> 00:12:23,178 you know, can align or cannot align together.

281 00:12:25,608 --> 00:12:28,570 So let me talk a little bit about

282 00:12:28,570 --> 00:12:30,807 the government perspective.

283 00:12:30,807 --> 00:12:35,084 So I'm sure we all believe that the government,

284 00:12:35,084 --> 00:12:37,312 especially the Ministry of Health should be a major,

285 00:12:37,312 --> 00:12:38,145 (attendee chattering)

286 00:12:38,145 --> 00:12:40,739 should be the major stakeholder

287 00:12:40,739 --> 00:12:43,785 and the user of implementation research in health,

288 00:12:43,785 --> 00:12:45,239 because what we are aiming

289 00:12:45,239 --> 00:12:47,291 for in implementation research is trying

290 00:12:47,291 --> 00:12:48,585 to see how

291 00:12:48,585 --> 00:12:49,418 (attendee chattering)

292 00:12:50,666 --> 00:12:53,286 proven interventions can be implemented

293 00:12:53,286 --> 00:12:55,563 and scaled up in a larger setting.

294 00:12:55,563 --> 00:12:56,824 So definitely most of the time-

295 00:12:56,824 --> 00:12:58,945 (attendee chattering)

296 00:12:58,945 --> 00:13:01,661 And most of the time it would be,

297 00:13:01,661 --> 00:13:03,235 it would be the government

298 00:13:03,235 --> 00:13:04,945 and the Ministry of Health

299 00:13:04,945 --> 00:13:06,910 that is responsible for scaling it up.

300 00:13:06,910 --> 00:13:09,561 So if we cannot bring onboard government

301 00:13:09,561 --> 00:13:12,535 in implementation research, you know,

302 00:13:12,535 --> 00:13:14,171 we really need to think twice,

303 00:13:14,171 --> 00:13:16,885 what would be the implications of the, you know,

304 00:13:16,885 --> 00:13:21,080 of the extensive scientific work that we are doing?

305 00:13:21,080 --> 00:13:24,368 Now, what are the major challenges in that?

306 00:13:24,368 --> 00:13:29,058 So, let me, go into some of the very basics on this.

307 00:13:29,058 --> 00:13:31,452 So, from the perspectives

308 00:13:31,452 --> 00:13:33,990 of academia, generally,

309 00:13:33,990 --> 00:13:36,626 we tend to think that of course policies

310 00:13:36,626 --> 00:13:39,023 and programs should be evidence-based,

311 00:13:39,023 --> 00:13:41,724 you know, should look into data findings,

312 00:13:41,724 --> 00:13:43,391 research, and so on.

313 00:13:44,471 --> 00:13:47,138 But how does policymaking happen

314 00:13:48,795 --> 00:13:50,462 in most of the places in the world?

315 00:13:50,462 --> 00:13:53,299 And also, you know, not an exception

316 00:13:53,299 --> 00:13:55,334 in a country like Nepal.

317 00:13:55,334 --> 00:13:58,226 And we all need to acknowledge

318 00:13:58,226 --> 00:14:00,560 that it's not always

319 00:14:00,560 --> 00:14:02,477 a process that follows,

320 00:14:03,449 --> 00:14:06,959 that strictly follows an evidence-based approach.

321 00:14:06,959 --> 00:14:10,376 So if the policymaking happens, you know,

322 00:14:11,545 --> 00:14:13,532 through other drivers

323 00:14:13,532 --> 00:14:16,223 than the evidence base,

324 00:14:16,223 --> 00:14:19,784 then that itself becomes a major barrier

325 00:14:19,784 --> 00:14:21,427 in terms of utilizing

326 00:14:21,427 --> 00:14:24,193 the research findings for policymaking.

327 00:14:24,193 --> 00:14:27,276 So that's one of the major challenges

328 00:14:30,951 --> 00:14:33,688 in up taking the implementation science research

329 00:14:33,688 --> 00:14:35,483 in the government system.

330 00:14:35,483 --> 00:14:39,006 In the same way, a lot of programmatic decisions

331 00:14:39,006 --> 00:14:40,987 in health are also
 332 00:14:40,987 --> 00:14:43,654 not directly linked to evidence.
 333 00:14:44,840 --> 00:14:45,673 There are lots of,
 334 00:14:45,673 --> 00:14:46,821 you know, political interests,
 335 00:14:46,821 --> 00:14:49,656 lobbying groups, advocacy and so on
 336 00:14:49,656 --> 00:14:51,351 that are happening.
 337 00:14:51,351 --> 00:14:52,877 And the role of evaluation
 338 00:14:52,877 --> 00:14:56,033 and iterative process in health system is also,
 339 00:14:56,033 --> 00:14:57,834 you know, pretty challenging.
 340 00:14:57,834 --> 00:15:01,084 It is lot less than ideal, I would say,
 341 00:15:02,634 --> 00:15:04,715 you know, in Nepal and I guess in most
 342 00:15:04,715 --> 00:15:07,148 of the countries around the world.
 343 00:15:07,148 --> 00:15:08,945 So in this backdrop,
 344 00:15:08,945 --> 00:15:13,410 how is it that we can help permeate, you
 know,
 345 00:15:13,410 --> 00:15:16,026 the knowledge skills related
 346 00:15:16,026 --> 00:15:18,105 to implementation science research
 347 00:15:18,105 --> 00:15:18,961 in the health system?
 348 00:15:18,961 --> 00:15:20,004 I think that's, you know,
 349 00:15:20,004 --> 00:15:21,212 that's a question we have to,
 350 00:15:21,212 --> 00:15:22,879 we have to navigate.
 351 00:15:24,233 --> 00:15:27,227 And there are also other concerns
 352 00:15:27,227 --> 00:15:31,193 from the perspectives of the government,
 353 00:15:31,193 --> 00:15:33,226 and in our own relationship
 354 00:15:33,226 --> 00:15:36,100 and conversation with the government,
 355 00:15:36,100 --> 00:15:40,261 it is very difficult to navigate a path
 356 00:15:40,261 --> 00:15:42,207 in which the government
 357 00:15:42,207 --> 00:15:43,855 and academia can connect
 358 00:15:43,855 --> 00:15:46,560 for national-level policies and programs.
 359 00:15:46,560 --> 00:15:49,227 We do not have a very clear way,
 360 00:15:50,371 --> 00:15:53,112 or a platform, or a structure

361 00:15:53,112 --> 00:15:55,435 that brings on board the, you know,
 362 00:15:55,435 --> 00:15:57,102 the academia science
 363 00:15:59,033 --> 00:16:02,228 into the government activities.
 364 00:16:02,228 --> 00:16:04,272 And so the, there are also concerns
 365 00:16:04,272 --> 00:16:05,950 from the government sides
 366 00:16:05,950 --> 00:16:07,320 in terms of the accountability
 367 00:16:07,320 --> 00:16:10,737 and also many times capacity of academia.
 368 00:16:12,820 --> 00:16:14,542 There are also challenges related
 369 00:16:14,542 --> 00:16:16,941 to lack of clarity on roles, responsibilities,
 370 00:16:16,941 --> 00:16:18,123 - [Attendee] In control.
 371 00:16:18,123 --> 00:16:19,948 - [Biraj] And authorities,
 372 00:16:19,948 --> 00:16:22,190 and also unclear mechanism of collaboration.
 373 00:16:22,190 --> 00:16:24,296 So these are some of the challenges
 374 00:16:24,296 --> 00:16:26,683 that we face when we collaborate with
 academia.
 375 00:16:26,683 --> 00:16:29,683 I'll give you some examples on that.
 376 00:16:31,258 --> 00:16:34,591 So, one of the most common, I would say,
 377 00:16:35,873 --> 00:16:37,916 complaints from the government side
 378 00:16:37,916 --> 00:16:41,148 when we work with them is regarding time.
 379 00:16:41,148 --> 00:16:43,186 And I remember very clearly
 380 00:16:43,186 --> 00:16:45,430 in one of the meetings, you know,
 381 00:16:45,430 --> 00:16:46,291 not long ago, you know,
 382 00:16:46,291 --> 00:16:48,073 one of the very senior officials,
 383 00:16:48,073 --> 00:16:50,353 government officials said very straight, like,
 384 00:16:50,353 --> 00:16:51,852 "If you do a research,
 385 00:16:51,852 --> 00:16:54,320 it takes a couple of years to come up
 386 00:16:54,320 --> 00:16:56,126 with your research results.
 387 00:16:56,126 --> 00:16:58,635 By that time we would have changed our
 policies
 388 00:16:58,635 --> 00:17:00,754 at least four or five times."
 389 00:17:00,754 --> 00:17:04,810 So in no way, the research that you are going
 to do

390 00:17:04,810 --> 00:17:08,378 can be used very easily in our system
 391 00:17:08,378 --> 00:17:09,484 and we have time constraint,
 392 00:17:09,484 --> 00:17:11,185 and there are lots of pressures regarding, you know,
 393 00:17:11,185 --> 00:17:13,763 the program implementation,
 394 00:17:13,763 --> 00:17:16,733 budget, reporting, and so on.
 395 00:17:16,733 --> 00:17:19,801 And it is very difficult to align time, you know,
 396 00:17:19,801 --> 00:17:22,269 with the government programs
 397 00:17:22,269 --> 00:17:24,220 and the research activities
 398 00:17:24,220 --> 00:17:25,960 that go in parallel.
 399 00:17:25,960 --> 00:17:29,259 So, that was one of the major problems.
 400 00:17:29,259 --> 00:17:31,759 The second thing that we face,
 401 00:17:32,937 --> 00:17:36,502 the second problem that we face very often
 402 00:17:36,502 --> 00:17:37,582 is regarding the people,
 403 00:17:37,582 --> 00:17:40,171 who are we going to collaborate in the government?
 404 00:17:40,171 --> 00:17:42,140 Especially in our setting when
 405 00:17:42,140 --> 00:17:44,785 there are so many changes happening
 406 00:17:44,785 --> 00:17:47,784 at all levels of government health system,
 407 00:17:47,784 --> 00:17:49,125 it is very difficult.
 408 00:17:49,125 --> 00:17:52,787 Unless, it is the collaboration is institutionalized,
 409 00:17:52,787 --> 00:17:54,467 the individual level relationship
 410 00:17:54,467 --> 00:17:58,838 and collaborations are very vulnerable to changes.
 411 00:17:58,838 --> 00:18:01,702 We work with somebody and we plan with somebody,
 412 00:18:01,702 --> 00:18:03,911 the person is changed, and then again,
 413 00:18:03,911 --> 00:18:07,567 we have to go back to the same drawing board.
 414 00:18:07,567 --> 00:18:10,694 That's the second big challenge we face
 415 00:18:10,694 --> 00:18:13,591 in collaboration with the government.
 416 00:18:13,591 --> 00:18:17,110 The third is scope of engagement,

417 00:18:17,110 --> 00:18:19,961 to what detail we should be working,
 418 00:18:19,961 --> 00:18:22,072 to what extent we should be collaborating
 419 00:18:22,072 --> 00:18:23,578 with the government,
 420 00:18:23,578 --> 00:18:26,113 and the government should be collaborating
 with academia?
 421 00:18:26,113 --> 00:18:27,879 That's also not well defined.
 422 00:18:27,879 --> 00:18:29,462 So what happens is,
 423 00:18:30,641 --> 00:18:33,990 what happens is there's a lot of confusion in
 that
 424 00:18:33,990 --> 00:18:37,309 and, you know, the two entities end up going
 425 00:18:37,309 --> 00:18:39,226 in their own track without much
 426 00:18:39,226 --> 00:18:41,351 of a complementary function.
 427 00:18:41,351 --> 00:18:43,920 So that's a challenge that we face very often
 428 00:18:43,920 --> 00:18:45,988 with the government system.
 429 00:18:45,988 --> 00:18:48,150 And another, the fourth point is,
 430 00:18:48,150 --> 00:18:50,025 especially in terms of, you know,
 431 00:18:50,025 --> 00:18:53,525 when we think from the lens of researcher,
 432 00:18:54,952 --> 00:18:57,068 a lot of time government entities
 433 00:18:57,068 --> 00:18:58,568 are not interested
 434 00:19:00,501 --> 00:19:02,901 in the full spectrum of research
 435 00:19:02,901 --> 00:19:04,393 that we are planning.
 436 00:19:04,393 --> 00:19:05,904 And some of the time they're just looking
 437 00:19:05,904 --> 00:19:07,435 into cost-effectiveness.
 438 00:19:07,435 --> 00:19:10,857 Some of the time they want to see the effec-
 tiveness,
 439 00:19:10,857 --> 00:19:13,442 reach, adoption, you know,
 440 00:19:13,442 --> 00:19:14,692 it's all day they might be interested
 441 00:19:14,692 --> 00:19:16,388 in only some of the components.
 442 00:19:16,388 --> 00:19:18,097 And so as researchers,
 443 00:19:18,097 --> 00:19:21,040 how do we make ourselves available
 444 00:19:21,040 --> 00:19:24,217 to the government without losing scientific
 rigor?

445 00:19:24,217 --> 00:19:26,204 I think that would be the, you know,
446 00:19:26,204 --> 00:19:28,012 that is one of the most difficult questions
447 00:19:28,012 --> 00:19:29,512 we need to answer.
448 00:19:32,899 --> 00:19:34,316 In the same ways,
449 00:19:37,520 --> 00:19:38,918 I think that in the context
450 00:19:38,918 --> 00:19:41,203 of implementation science,
451 00:19:41,203 --> 00:19:44,809 bringing onboard communities is also very
important.
452 00:19:44,809 --> 00:19:48,401 And because especially in the context
453 00:19:48,401 --> 00:19:50,270 of implementation science,
454 00:19:50,270 --> 00:19:51,820 in communities, you know,
455 00:19:51,820 --> 00:19:54,567 a lot of communities are not just research
subjects,
456 00:19:54,567 --> 00:19:57,640 but they function more as partners in our
study,
457 00:19:57,640 --> 00:20:00,836 but most of our studies are not designed like
that.
458 00:20:00,836 --> 00:20:03,753 So we we need to be creative enough
459 00:20:05,825 --> 00:20:07,825 to build more, you know,
460 00:20:09,279 --> 00:20:11,330 in-depth partnerships with the communities
461 00:20:11,330 --> 00:20:14,252 while we are implement planning
462 00:20:14,252 --> 00:20:16,265 and implementing implementation research.
463 00:20:16,265 --> 00:20:18,679 And another experience that we had
464 00:20:18,679 --> 00:20:22,363 was about identifying the interventions
465 00:20:22,363 --> 00:20:23,740 for the communities.
466 00:20:23,740 --> 00:20:26,657 Most of the times, we tend to jump,
467 00:20:27,829 --> 00:20:29,793 you know, into identifying interventions,
468 00:20:29,793 --> 00:20:32,129 proven interventions through other settings
469 00:20:32,129 --> 00:20:33,621 and then try to see, like,
470 00:20:33,621 --> 00:20:35,424 how do we implement that in our community?
471 00:20:35,424 --> 00:20:39,341 What are the barriers and facilitators to that?
472 00:20:40,376 --> 00:20:42,543 But it is also very likely

473 00:20:43,699 --> 00:20:47,017 that we might miss the opportunity
474 00:20:47,017 --> 00:20:49,927 of co-creating with the communities that,
475 00:20:49,927 --> 00:20:53,927 you know, nowadays it is becoming more and
more,
476 00:20:54,817 --> 00:20:56,484 I would say accepted
477 00:20:58,885 --> 00:21:02,504 and popular among among researchers
478 00:21:02,504 --> 00:21:05,300 to co-create interventions with the communi-
ties.
479 00:21:05,300 --> 00:21:06,786 But that is an area
480 00:21:06,786 --> 00:21:11,747 that I strongly believe needs significant im-
provement
481 00:21:11,747 --> 00:21:13,940 and expansion in coming days.
482 00:21:13,940 --> 00:21:17,532 So, these are some aspects of the communities.
483 00:21:17,532 --> 00:21:20,615 And from the perspective of academia,
484 00:21:21,888 --> 00:21:24,596 we generally tend to think academia
485 00:21:24,596 --> 00:21:27,016 as the traditional role of academia
486 00:21:27,016 --> 00:21:29,538 as the generator and disseminator of knowl-
edge.
487 00:21:29,538 --> 00:21:31,205 And we tend to think
488 00:21:32,794 --> 00:21:35,345 that our responsibility ends there.
489 00:21:35,345 --> 00:21:36,715 We generate knowledge,
490 00:21:36,715 --> 00:21:40,367 we disseminate knowledge through various
platforms.
491 00:21:40,367 --> 00:21:42,974 We are not trained inherently
492 00:21:42,974 --> 00:21:46,634 to think as the implementer of knowledge.
493 00:21:46,634 --> 00:21:48,912 But in the context of implementation science,
494 00:21:48,912 --> 00:21:52,103 I think we need to redefine a bit of our role
495 00:21:52,103 --> 00:21:54,340 in how we can be part
496 00:21:54,340 --> 00:21:56,267 in the implementation of knowledge
497 00:21:56,267 --> 00:21:59,143 with other stakeholders as well.
498 00:21:59,143 --> 00:22:01,570 This is also very relevant in our settings,
499 00:22:01,570 --> 00:22:04,332 and something that we are currently doing

500 00:22:04,332 --> 00:22:06,024 is working with communities
 501 00:22:06,024 --> 00:22:08,691 in designing these interventions
 502 00:22:09,665 --> 00:22:11,353 and implementing them,
 503 00:22:11,353 --> 00:22:13,337 and creating some models of success
 504 00:22:13,337 --> 00:22:15,156 that we hope will be adopted
 505 00:22:15,156 --> 00:22:16,783 and scaled up in other settings.
 506 00:22:16,783 --> 00:22:20,826 So at least being part in the implementation
 507 00:22:20,826 --> 00:22:24,219 in creating some models of success
 508 00:22:24,219 --> 00:22:26,636 should be a goal of academia.
 509 00:22:27,553 --> 00:22:29,493 But there are inherent challenges
 510 00:22:29,493 --> 00:22:31,662 in collaborating mainly with the government,
 511 00:22:31,662 --> 00:22:33,728 there are conflicting priorities,
 512 00:22:33,728 --> 00:22:36,189 we have other tasks besides research
 513 00:22:36,189 --> 00:22:37,608 and being a, you know,
 514 00:22:37,608 --> 00:22:39,249 being a collaborator.
 515 00:22:39,249 --> 00:22:42,390 The timing is, as I said, very important.
 516 00:22:42,390 --> 00:22:44,957 Aligning, as researchers and academicians,
 517 00:22:44,957 --> 00:22:47,707 aligning our timing and deadlines
 518 00:22:48,576 --> 00:22:50,287 with government priorities,
 519 00:22:50,287 --> 00:22:52,064 programs, and policies,
 520 00:22:52,064 --> 00:22:53,680 and is another big challenge,
 521 00:22:53,680 --> 00:22:56,763 we need to be creative in doing that.
 522 00:22:57,691 --> 00:23:01,593 And also creating structures within academia,
 523 00:23:01,593 --> 00:23:04,543 maybe a wing within our departments or
 centers,
 524 00:23:04,543 --> 00:23:07,083 that would be exclusively involved
 525 00:23:07,083 --> 00:23:09,609 in collaborating with the government
 526 00:23:09,609 --> 00:23:13,223 in building the whole implementation science
 component
 527 00:23:13,223 --> 00:23:14,708 within the system.
 528 00:23:14,708 --> 00:23:17,852 So, these are some of the perspectives from
 academia,

529 00:23:17,852 --> 00:23:20,054 and this is also something
530 00:23:20,054 --> 00:23:22,637 that we have been experiencing.
531 00:23:24,435 --> 00:23:26,539 So what do we do?
532 00:23:26,539 --> 00:23:28,828 And I'm mentioning this based
533 00:23:28,828 --> 00:23:32,421 on our own experience, small experience.
534 00:23:32,421 --> 00:23:35,983 The first thing is we like to say we have
535 00:23:35,983 --> 00:23:38,297 to build upon existing programs and projects.
536 00:23:38,297 --> 00:23:41,015 We should not be waiting
537 00:23:41,015 --> 00:23:42,819 for a grant take off to happen.
538 00:23:42,819 --> 00:23:45,461 So whatever we are doing in a small scale,
539 00:23:45,461 --> 00:23:47,082 medium scale, large scale,
540 00:23:47,082 --> 00:23:49,461 with whatever teams we are collaborating,
541 00:23:49,461 --> 00:23:51,614 whether it is a local government,
542 00:23:51,614 --> 00:23:54,307 provincial government, central government,
543 00:23:54,307 --> 00:23:56,762 one program, larger program,
544 00:23:56,762 --> 00:23:59,286 and we have to build upon existing programs
545 00:23:59,286 --> 00:24:01,023 and projects, you know?
546 00:24:01,023 --> 00:24:02,685 Another very important part
547 00:24:02,685 --> 00:24:06,561 that we have felt over the course of time
548 00:24:06,561 --> 00:24:09,894 is to create institutionalized entities,
549 00:24:11,881 --> 00:24:14,315 some consortium networks, institutes,
550 00:24:14,315 --> 00:24:16,326 or collaborating centers.
551 00:24:16,326 --> 00:24:18,644 So when the collaborations happen only
552 00:24:18,644 --> 00:24:21,144 on a project or program level,
553 00:24:22,434 --> 00:24:25,750 at the level of programs and projects stuff,
554 00:24:25,750 --> 00:24:29,715 the life of those collaborations tends to be
limited.
555 00:24:29,715 --> 00:24:33,287 So if we can think of establishing
556 00:24:33,287 --> 00:24:37,037 these platforms, institutionalized platforms,
557 00:24:38,109 --> 00:24:41,022 you know, that would be a very strong point

558 00:24:41,022 --> 00:24:43,992 in collaborating with government and communities.

559 00:24:43,992 --> 00:24:48,073 That is something we have been trying to do

560 00:24:48,073 --> 00:24:50,298 in Nepal as well.

561 00:24:50,298 --> 00:24:52,333 The third is creating communication

562 00:24:52,333 --> 00:24:54,583 and coordination of forums.

563 00:24:57,341 --> 00:25:00,273 As researchers and academicians,

564 00:25:00,273 --> 00:25:02,953 we generally, you know,

565 00:25:02,953 --> 00:25:05,654 by default tend to communicate when we need,

566 00:25:05,654 --> 00:25:07,815 you know, when we need to get an approval,

567 00:25:07,815 --> 00:25:10,157 when we need to get a letter of support,

568 00:25:10,157 --> 00:25:12,324 when we need to get a partner,

569 00:25:12,324 --> 00:25:14,881 you know, to be kept on board

570 00:25:14,881 --> 00:25:17,908 in our new grant or application.

571 00:25:17,908 --> 00:25:22,116 But, you know, that should not be the approach.

572 00:25:22,116 --> 00:25:24,028 I think we have to create

573 00:25:24,028 --> 00:25:25,840 a system of communication

574 00:25:25,840 --> 00:25:27,686 and coordination that is more regular

575 00:25:27,686 --> 00:25:30,245 and that is not just need-based,

576 00:25:30,245 --> 00:25:33,700 but also developing a, you know,

577 00:25:33,700 --> 00:25:37,780 a stronger relationship should be our goal.

578 00:25:37,780 --> 00:25:39,447 Then the fourth one,

579 00:25:41,485 --> 00:25:44,376 which is what I'm most passionate about,

580 00:25:44,376 --> 00:25:47,963 is trying to design our academic programs,

581 00:25:47,963 --> 00:25:50,627 research training programs, fellowships,

582 00:25:50,627 --> 00:25:54,057 which are a little more progressive

583 00:25:54,057 --> 00:25:57,677 and innovative in embracing the team members

584 00:25:57,677 --> 00:26:00,578 from the government and also communities,

585 00:26:00,578 --> 00:26:03,487 particularly from the government.

586 00:26:03,487 --> 00:26:06,100 Most of the time what we feel is that
587 00:26:06,100 --> 00:26:10,552 the people working in the government are not,
588 00:26:10,552 --> 00:26:14,877 they do not get on-the-job training programs
589 00:26:14,877 --> 00:26:17,590 or orientations on the areas of research,
590 00:26:17,590 --> 00:26:20,284 which we, from the academic perspective,
591 00:26:20,284 --> 00:26:22,897 we feel would be most relevant to them.
592 00:26:22,897 --> 00:26:24,973 So how do we bridge that?
593 00:26:24,973 --> 00:26:27,963 You know, trying to create certificate-level
programs,
594 00:26:27,963 --> 00:26:30,480 fellowship programs which are on the job
595 00:26:30,480 --> 00:26:32,004 where the government,
596 00:26:32,004 --> 00:26:34,055 the government personnel can learn
597 00:26:34,055 --> 00:26:36,590 as well as practice in their own work,
598 00:26:36,590 --> 00:26:39,852 would be something that we think
599 00:26:39,852 --> 00:26:41,610 would be more impactful
600 00:26:41,610 --> 00:26:45,642 than just training pure academicians or re-
searchers.
601 00:26:45,642 --> 00:26:48,241 And we have been experimenting on that,
602 00:26:48,241 --> 00:26:50,918 recently my colleague Archana
603 00:26:50,918 --> 00:26:53,963 also launched implementation science fellow-
ship program
604 00:26:53,963 --> 00:26:56,560 in Nepal, the first implementation science
fellowship
605 00:26:56,560 --> 00:26:59,095 in Nepal, which actually called
606 00:26:59,095 --> 00:27:01,252 for applications in peer.
607 00:27:01,252 --> 00:27:04,473 So each applicant had to find a peer,
608 00:27:04,473 --> 00:27:06,656 so it's a government and academia peer.
609 00:27:06,656 --> 00:27:08,681 The peers apply and, you know,
610 00:27:08,681 --> 00:27:09,514 when they are awarded,
611 00:27:09,514 --> 00:27:11,330 it's the peer that work together.
612 00:27:11,330 --> 00:27:12,163 So that, you know, something like that, so.
613 00:27:13,039 --> 00:27:14,816 We need to think about that.

614 00:27:14,816 --> 00:27:17,797 And we are also trying to redesign some
 615 00:27:17,797 --> 00:27:20,874 of our academic curricula to fit more
 616 00:27:20,874 --> 00:27:23,874 into government personnel and so on.
 617 00:27:25,348 --> 00:27:28,303 And we also need to create dedicated entities
 618 00:27:28,303 --> 00:27:30,261 in government and academia
 619 00:27:30,261 --> 00:27:31,926 for these types of collaboration.
 620 00:27:31,926 --> 00:27:34,892 If we come up with a new finding or new idea,
 621 00:27:34,892 --> 00:27:37,183 there's no designated platform
 622 00:27:37,183 --> 00:27:39,533 or structure in the government
 623 00:27:39,533 --> 00:27:41,792 where we go and say, "These are our findings,
 624 00:27:41,792 --> 00:27:44,496 these are the strengths and limitations of our
 studies,
 625 00:27:44,496 --> 00:27:47,630 and this is how you may use it for policy."
 626 00:27:47,630 --> 00:27:50,130 There's no structure for that.
 627 00:27:51,020 --> 00:27:53,901 So a lot of time from academia,
 628 00:27:53,901 --> 00:27:56,734 we take rest after the publication
 629 00:27:57,728 --> 00:28:00,262 or presentation in a big conference
 630 00:28:00,262 --> 00:28:01,835 and it doesn't go further.
 631 00:28:01,835 --> 00:28:06,341 So we need to create some structure like that.
 632 00:28:06,341 --> 00:28:09,861 And forging partnership between academia,
 government,
 633 00:28:09,861 --> 00:28:12,693 and community is not a question
 634 00:28:12,693 --> 00:28:15,183 of whether we should do it or not,
 635 00:28:15,183 --> 00:28:16,859 it's a moral imperative now.
 636 00:28:16,859 --> 00:28:19,567 The resources that we spend
 637 00:28:19,567 --> 00:28:21,900 in all of these activities,
 638 00:28:23,458 --> 00:28:26,291 it would be unfair if the findings
 639 00:28:27,144 --> 00:28:30,270 and the learnings are not utilized properly.
 640 00:28:30,270 --> 00:28:32,575 So this is a moral imperative as well,
 641 00:28:32,575 --> 00:28:35,856 it's not something that we can skip.
 642 00:28:35,856 --> 00:28:39,106 I think we are morally bound to be able

643 00:28:40,339 --> 00:28:44,037 to at least try to get the, you know,
644 00:28:44,037 --> 00:28:46,620 get the collaboration going on.
645 00:28:47,982 --> 00:28:49,482 And we are mindful
646 00:28:50,829 --> 00:28:53,814 that it is not an easy task,
647 00:28:53,814 --> 00:28:55,717 there are challenges,
648 00:28:55,717 --> 00:28:58,899 there'll be lots of disappointments,
649 00:28:58,899 --> 00:29:00,979 and we won't need to aim right away
650 00:29:00,979 --> 00:29:03,453 to change the world, to change the nation.
651 00:29:03,453 --> 00:29:05,693 But at least if we can create
652 00:29:05,693 --> 00:29:07,997 a small model of success in our setting,
653 00:29:07,997 --> 00:29:09,580 others will follow.
654 00:29:11,511 --> 00:29:14,385 And there are reasons for hope.
655 00:29:14,385 --> 00:29:17,033 Especially in Nepal, we are seeing
656 00:29:17,033 --> 00:29:19,339 a complete generational shift
657 00:29:19,339 --> 00:29:22,585 in the leadership in the ministry as well.
658 00:29:22,585 --> 00:29:24,077 So a lot of new personnel
659 00:29:24,077 --> 00:29:26,883 that are leading in the Ministry of Health
660 00:29:26,883 --> 00:29:29,013 and at all levels,
661 00:29:29,013 --> 00:29:31,619 there's a complete new generation coming up
662 00:29:31,619 --> 00:29:34,198 who are traditionally more educated
663 00:29:34,198 --> 00:29:37,742 than people in the earlier generation,
664 00:29:37,742 --> 00:29:39,936 more progressive, more informed,
665 00:29:39,936 --> 00:29:41,835 and more open to collaboration.
666 00:29:41,835 --> 00:29:43,325 We need to tap that.
667 00:29:43,325 --> 00:29:45,073 And from academia also,
668 00:29:45,073 --> 00:29:47,073 there's a new, I'll say,
669 00:29:50,454 --> 00:29:52,621 understanding and approach
670 00:29:56,610 --> 00:29:58,106 to open up
671 00:29:58,106 --> 00:30:02,523 and not just remain within our own silos of
academia.
672 00:30:03,370 --> 00:30:05,617 So there are lots of reasons for hope.

673 00:30:05,617 --> 00:30:08,189 The new calls and research grants
674 00:30:08,189 --> 00:30:12,206 also specifically seek participation of communities
675 00:30:12,206 --> 00:30:15,419 and government, which is very good.
676 00:30:15,419 --> 00:30:17,862 And I hope that in coming days,
677 00:30:17,862 --> 00:30:21,419 a lot of conferences and forums bring together,
678 00:30:21,419 --> 00:30:23,176 not just researchers and academicians,
679 00:30:23,176 --> 00:30:25,720 but also, you know, participants from government
680 00:30:25,720 --> 00:30:29,250 and communities, and other beneficiaries as well.
681 00:30:29,250 --> 00:30:33,124 So with that, I end my short presentation here.
682 00:30:33,124 --> 00:30:33,957 Thank you.