

# National Summit of Health and Population Scientists in Nepal : Achievements and Lesson Learned Over a Decade

Namita Ghimire,<sup>1</sup> Upama Ghimire,<sup>1</sup> Riya Regmi,<sup>1</sup> Bishnu Prasad Marasini,<sup>1</sup> Sudip Paudel,<sup>1</sup> Meghnath Dhimal,<sup>1</sup> Pramod Joshi<sup>1</sup>

<sup>1</sup>Nepal Health Research Council, Ramshahpath, Kathmandu, Nepal.

## ABSTRACT

For the past eleven years, Nepal Health Research Council (NHRC) has been organising an annual event: National Summit of Health and Population Scientists in Nepal. This has become the leading platform for connecting research, policy, and practice in the country. Since its inception in 2015, it has evolved with changing public health needs, national reforms, and global priorities such as evidence-based decision making, the Sustainable Development Goals (SDGs), federalisation, resilience, equity, population, and climate change.

In 2015, the NHRC welcomed 500 participants and delegates. Over the past eleven years, annual participation has consistently exceeded 1,000 attendees. During the coronavirus disease 2019 (COVID-19) period, more than 10,000 individuals joined virtually. The NHRC has strengthened multi-sector collaboration, expanded partnerships, and developed the event as a key policy dialogue platform for translating research into action.

Key achievements include shaping national policy discourse, promoting a culture of evidence-informed decision making, research excellence through competitive awards, generating more than 1,600 research presentations, and publishing scientific evidence during public health emergencies. It also highlighted the visibility of the NHRC and its role in promoting evidence in practice. However, challenges persist in ensuring systematic follow-up, effective translation of evidence into policy and practice, and deeper engagement of provincial governments and communities. This article reviews the evolution of the summit, its achievements, and policy influence, and identifies opportunities to further strengthen its impact.

**Keywords:** Evidence-based decision making; federalisation; health research policy; health systems strengthening; national summit.

## INTRODUCTION

For more than a decade, the National Summit of Health and Population Scientists has been Nepal's leading event for building partnerships and promoting a culture of evidence-informed health policy. Established to bridge the critical gap between researchers and policymakers, it brings together scientists, experts, and officials to discuss key issues, share innovations, and plan for better health outcomes.<sup>1</sup> In a resource limited country facing emerging challenges, the summit is essential for fostering cross-sector collaboration and aligning national priorities with global goals like the Sustainable Development Goals (SDGs).<sup>2</sup> Its themes have evolved from foundational research advocacy in 2015 to address federalisation, health system resilience, and climate change.<sup>3</sup> This review of its

eleven-year evolution assesses the summit's rigorous process, its effectiveness in translating research into policy through declarations and briefs, and its strategic contribution to Nepal's health agenda.

## METHODS

This study employed a qualitative, retrospective desk review to analyse the progression, impact, and thematic evolution of the National Summit of Health and Population Scientists in Nepal over the last decade (2015-2025). The methodology was centered on a systematic synthesis and critical analysis of historical documents and archival records. Data were gathered exclusively from a comprehensive set of existing documents related to each of the eleven summits. The primary sources for this review included:

**Correspondence:** Upama Ghimire, Nepal Health Research Council, Ramshahpath, Kathmandu, Nepal. Email: upama.ghimire55@gmail.com, Phone: +9779851308708.

Official Summit Proceedings and Reports: Final detailed reports, post summit review meeting minutes, and published policy briefs from each year.<sup>4</sup>

Programme Brochures and Agendas: Documents outlining the annual themes, sub-themes, session structures, and lists of invited speakers, chairs, and panellists.

Summit Declarations: The official outcome documents from each summit, which summarise the key evidence and policy recommendations.

Internal Planning Documents: Where available, records from the Scientific Committee regarding theme selection and abstract review processes.

The analysis was conducted through a qualitative documentary analysis framework. The process involved:

A thorough reading of all documents was conducted to identify and chart the primary theme and strategic focus for each summit year.

The content of summit declarations, proceedings, and keynote addresses was analysed to identify recurring concepts, priority areas, and the nature of the policy dialogue.

The documented activities from the nationwide call for abstracts and peer review process to the post summit dissemination of policy briefs were mapped to understand the summit's operational model and its evolution into a structured policy platform.

The findings from the above steps were synthesised to construct a narrative of the summit's growth, its responsiveness to Nepal's changing health landscape, and its role in bridging research and policy.

This analytical approach allowed for an in depth understanding of how the summit's agenda has been shaped by and has contributed to national and global health priorities over the decade. As a review, this study is limited to the information available in the existing documents. It does not include additional primary data collection through surveys or interviews, which could have provided deeper insights into the first hand experiences of participants or the direct, on the ground impact of policy recommendations. Consequently, the assessment of the summit's influence is based on documented outputs and declared intentions, which is a recognised

constraint of the methodology.

A review of all eleven summits highlights their growth in strength, strategy, and influence. It examines the summit's evolution, its increasing impact, and opportunities for future improvement.

## THEMATIC EVOLUTION

The summit's themes reflect Nepal's changing health priorities. The first event in 2015 focused on using research for decision-making, while the 2016-2017 summits aligned studies with the SDGs. Later editions addressed broader issues, such as the impact of federalisation on health equity (2019) and health system resilience (2022).<sup>5</sup> During the coronavirus disease 2019 (COVID-19) pandemic (2020-2021), the summit became a vital platform for evidence-based responses.<sup>6</sup> Recent summits have tackled emerging challenges, including climate change (2025). This progression from general research sharing to focused, solution oriented discussions shows the summit's growing maturity and relevance.<sup>7</sup>

## PARTICIPATION

The summit's reach has grown substantially over the past 11 years, enhancing both accessibility and global inclusivity. This growth is clearly evidenced by steady increases in in person attendance, which rose from approximately 500 participants in 2015 to an annual range of 1,000-1,500 (Table 1). A pivotal shift in scale occurred with the strategic transition to digital formats. The fully online summits held in 2020 and 2021 each attracted more than 10,000 participants, reflecting a vastly expanded global audience and demonstrating the power of virtual access. Since 2022, the adoption of a hybrid model has sustained in person participation at approximately 1,300 attendees annually while maintaining a broad virtual reach, effectively combining the benefits of face to face engagement with the accessibility of digital platforms. Overall, this digital transition has successfully transformed the summit into a worldwide knowledge sharing platform that reaches far beyond its original in person capacity.

**Table 1. Participation and research presentations at the National Summit of Health and Population Scientists in Nepal (2015-2025).**

Year	Participation	Presentations		Key Outputs/ Highlights
		Oral	Poster	
2015	~500 in person	42	32	2 plenary, 10 parallel sessions
2016	~700 in person	57	-	Introduction of the Awards Scheme (5 categories)
2017	~1,000 in person	47	129	Students also presented their research, Diverse collaboration and partnership
2018	~1,200 in person	71	67	Awards expanded to 7 categories
2019	~1,300 in person	69	93	Introduced panels and symposia
2020	Pandemic model	33	53	Pivotal for COVID-19 evidence response
2021	Pandemic model	71 (8 invited)	-	Hybrid Model Achieved
2022	Hybrid model: ~1,300 plus in-person	39	77	Awards expanded to 11 award categories
2023	Hybrid model: ~1,300 plus in person	24	125	11 Award categories
2024	Hybrid model: ~1,300 plus in person	57	263	11 Awards categories
2025	Hybrid model: ~1,300 plus in person	104	118	Award expanded to 13 categories

## PARTNERSHIPS AND FOSTERING COLLABORATIONS

The summit's network of partners has evolved significantly from its founding principle of collaborative action. The inaugural event in 2015 was established and funded by a core consortium of government and academic institutions, laying a strong domestic foundation. This base expanded markedly in 2016 with the inclusion of major international organisations, including World Health Organization (WHO), Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ), United States Agency for International Development (USAID), Health for Life (H4L), United Nations Population Fund (UNFPA), United Nations Children's Fund (UNICEF), and Save the Children. The network diversified further in the upcoming years incorporating a wider range of implementers and research bodies including HERD International (HERD), (IPAS), Marie Stopes International (MSI), Nepal Health Sector Support Programme (NHSSP), Center for Research on Environment, Health and Population Activities (CREHPA), Transcultural Psychosocial Organization (TPO), Christian Blind Mission (CBM), Population Services International (PSI), Voluntary Service Overseas (VSO), United Kingdomaid (UKaid), Promoting the Quality of Medicines (PQM), Kathmandu Institute of Child Health (KIOCH), Family Health International 360 (FHI 360), Society for Local Integrated Development Nepal (SOLID

NEPAL), Nepal Research and Education Network (NREN), Oxford University Clinical Research Unit (OUCRU), Tribhuvan University-Institute of Medicine (TU-IOM), Médecins du Monde (MdM), Possible Health (Possible), Tilganga Institute of Ophthalmology (TIO), Cooperative for Assistance and Relief Everywhere (CARE), One Heart Worldwide, Handicap International, Plan International, German Cooperation (*German Sahayog*), FAIRMED (Fair Med), Helen Keller International (HKI) Good Neighbours International (GNI)- Nepal, The Leprosy Mission (TLM) Nepal, Sunaulo Pariwar Nepal, Strengthening system for better health (SSBH), Golden Community, Nepal Development Society, Institute for Implementation Science and Health (IISH)

The regular participation of top leaders, including the President and different Ministers, reflects strong government commitment and has elevated the summit from an academic event to a state-supported policy platform. It also fosters the multi sectoral and intra sectoral collaborations with other government agencies and academia. It has promoted health in all policies and health for all concepts in practice.

## INNOVATIONS AND POLICY INFLUENCE

The summit, which began as a discussion forum, has grown into an active contributor to policy development.

It played a key role in translating research into rapid policy decisions during the COVID-19 pandemic and now serves as a platform where the Ministry of Health and partners align strategies with evidence on issues such as health system resilience and the SDGs. However, a formal system is still needed to track how summit recommendations influence policies and budgets.

Several innovations have strengthened the summit’s structure and impact. The hybrid model has made participation easier and more inclusive. The awards scheme expanded from five to thirteen categories from 2016 to 2025. Sessions of the summit have also become more engaging, with panel discussions and symposia replacing traditional presentations, fostering interactive, collaborative and meaningful dialogue.

## KEY ACHIEVEMENTS AND MILESTONES

Over the past eleven years, the National Summit has grown from a small gathering into a large hybrid event, engaging participants both in person and online. It became more inclusive and globally accessible. Its key strength lies in connecting research with government policy, raising awareness about scientific research, making NHRC visible, and helping to set priorities on important areas of research such as health systems and climate change. With support from partners, the summit brings together a wide range of voices and ideas. It also serves as a vital platform for learning, especially for young researchers, by recognising outstanding work and sharing hundreds of studies. Most importantly, the summit has shaped national health policies, supporting progress in federal governance, universal health coverage, and climate adaptation, ensuring that evidence is central to health decision making in Nepal. Table 2 summarizes the thematic evolution, milestones, and partners across the 11 summits.

**Table 2. Thematic evolution, key milestones, and notable partners/collaborators of the National Summit of Health and Population Scientists in Nepal (2015-2025).**

Year	Theme	Key Milestone Achieved	Notable Partners/ Collaborators
2015	Health and Population Research for Informed decision Making: Where we are?	Inauguration of the summit, establishing a flagship national platform for evidence-based health dialogue and policy discourse.	Core government and academic institutions
2016	Health and Population Research for Achieving Sustainable Development Goals in Nepal	Global Agenda Alignment: Strategic integration of SDG focused research and formal expansion of international partnerships.	WHO, GIZ, USAID/H4L, UNFPA, UNICEF, Save the Children, IPAS,CBM
2017	Health in Sustainable Development Goals: Are We on Track?	Scaled Collaboration: Participation surpassed 1,000, reflecting growing stature. Partnerships diversified significantly.	WHO, GIZ, USAID/H4L, UNFPA, UNICEF, Save the Children, HERD, Possible, IPAS, PSI, One Heart Worldwide, MSI
2018	Advancing Evidence for Changing Health System in Nepal	Systems Focus: Deepened emphasis on health system transitions and governance within a changing federal context.	WHO, GIZ, USAID/H4L, UNFPA, UNICEF, Save the Children, HERD, Possible, IPAS, PSI, One Heart Worldwide, MSI,HKI, VSO,CBM

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Year	Theme	Key Milestone Achieved	Notable Partners/ Collaborators
2019	Research for Equity and Development in Federal Context	Equity in Federalism: Directly addressed the critical nexus of equity and health system performance in the new federal structure.	UKAID, WHO, GIZ, UNICEF, Save the Children, HERD, IPAS, One Heart Worldwide, MSI, NHSSP, Care, CREHPA, TLM-Nepal, Sunaulo Pariwar Nepal, SSBH, Golden Community, TPO Nepal, Nepal Development Society
2020	Addressing Emerging Public Health Issues through Interdisciplinary Research	Resilience and Innovation: Executed first-ever virtual summit during lockdown, ensuring continuity and focusing on public health emergencies.	None
2021	Research in Public Health Emergencies: Evidence to Policy and Action	Adaptability affirmed: Second successful virtual summit, solidifying the hybrid model and its value for inclusivity and crisis response.	None
2022	Advancing Health Policy and Systems Research: Lessons for Resilient Health System in Nepal	Record Reach: Hybrid model achieved record virtual participation, focusing on system resilience post-pandemic.	UKaid, NHSSP, GIZ, SSBH, WHO, UNICEF, PQM, GNI, Possible, Care Nepal, CREHPA, One Heart Worldwide, PSI, Institute for implementation Science, Fair Med, HERD
2023	Research for health: Translating evidence and Innovation into practice.	Knowledge Hub Consolidation: Summit reaffirmed its role as the primary nexus for translating health research innovation into action.	UNICEF, UNFPA, HKI, KIOCH, TIO, GIZ, WHO, FHI 360, Ipas, TMI-Nepal, PMQ, Possible, OneHeartWorldwide, UKaid, USAID, HERD, MEDECIN S DU MONDE, IISH
2024	Advancing Health and Population Research and Innovations: Achieving SDGs	SDG Reaffirmation: Strong re alignment with SDG targets bolstered by collaborations with leading global health agencies.	WHO, MEDECINS DUMONDE, Possible, CREHPA, UNICEF, GIZ, SOLID NEPAL, TLM Nepal, NREN, OUCRU, IISH, TIO, Handicap International, PLAN INTERNATIONAL, Save the Children, IPAS, HERD, TU-IOM
2025	Health, Climate and Population Dynamics: Building Resilient Health systems for a sustainable and Equitable Future.	Intersectoral Leadership: Large summit to date, championing the integration of climate change and population dynamics into health policy.	WHO, UNICEF, GIZ, German Sahayog, Mdm Nepal, Possible, IISH

## FUTURE OPPORTUNITIES AND CHALLENGES

The future success of the summit depends on strengthening its impact, sustainable partnership, multi-sectoral collaboration and commitments from the partner agency, ensuring wider participation, and securing long-term sustainability. The summit's eleven-year journey provides a strong foundation for future growth. Reflecting on this evolution has identified key areas where strategic focus and enhancement can further amplify the summit's impact

and solidify its role as Nepal's premier knowledge to policy platform.

The NHRC has significant opportunities for future growth through Summit. It can move beyond discussing problems to generate practical, solution focused recommendations, particularly on persistent issues such as health system issues, disease burdens, and gaps in policy implementation. Greater inclusiveness is also a priority, with increased participation from provincial and local governments, community representatives, and local communities. Future efforts can focus on structuring discussions to produce even more actionable, implementable recommendations for policymakers at all tiers of the federal system, thereby accelerating progress on these complex, multi-faceted problems. Financial sustainability is critical. NHRC currently relies on government funding and ethical review processing fees, both of which are decreasing due to budget cuts affecting all government institutions. International funding for large collaborative studies is also declining, while more Nepali researchers are submitting self-funded proposals. Diversifying funding sources will therefore be essential to ensure the summit's continuity and long-term impact.

## CONCLUSIONS

Future directions include strengthening the National Summit's impact, inclusiveness, and sustainability. The summit should consciously reflect and strengthen the federal spirit of the nation. It is not enough to discuss federalism; it must be embodied. Work is continuously done to ensure summit recommendations are followed and translated into policy through annual briefs and post-summit analysis. Efforts are made to ensure the summit themes and discussions remain agile and responsive to the evolving global polycrisis, integrating resilience and adaptation as cross-cutting priorities. The hybrid module will be enhanced for broader, more interactive engagement, to recognise frontline health workers, support young researchers and engage diverse stakeholders along with community people. A summit for all of Nepal must be shaped by all of Nepal. Inclusivity is essential for achieving true equity. Exploration is also underway for a sustainable funding source, establishing a summit secretariat, and improving digital infrastructure to connect evidence with action, strengthen accountability, and contribute to a more equitable and resilient health system in Nepal.

## CONFLICT OF INTEREST

The authors declare no conflict of interest.

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