

Research priorities and health policy V RAMAN KUTTY

Priorities in research- who decides what research gets done?

- The researcher's interests
- The funders' interests
- Often there is a conflict between these interests, in which, more and more, the funders tend to dominate

What should decide the priorities in health research?

- The extent of the problem- the burden of disease
- The impact of the problem- mortality/ morbidity
- The immediacy of the problem- how urgent it is to solve it
- Availability of effective interventions

How policy makers see prioritise research?

- Urgency of the problem
- Media interests
- Ability to 'own' solutions

what is the basis of policy?

- ideology
- values
- ethics
- evidence

what is ideology?

- a set of convictions which individuals hold and which guides their affiliations, actions, likes and dislikes
- this may originate from religious beliefs, political convictions, group sympathies or from their own rationalisation from life experience

important ideological positions

- conservative
- liberal
- laissez-faire
- progressive
- radical
- anarchist

from ideology to values

- ideology decides which values you hold in the highest esteem
- a conservative may give a lot of importance to grooming the young in the right way, and keeping up traditions
- in health, they are more likely to promote indigenous systems
- a liberal, on the other hand, will be more concerned with lack of access for the less privileged

values to policy

- values decide which policy options are prioritised
- a conservative government may think that prohibition is the approach to control harm from addictive substances like alcohol and drugs
- a liberal government may think just the opposite: that if you make access to these easy but under supervision, ultimately it will lead to harm reduction

ethics and public policy

- the ethical standpoint of the decision makers may also decide public policy
- ethical approaches to policy are broadly grouped under utilitarian, deontological, rights-based and communitarian

utilitarianism in public policy

- utilitarians emphasise that maximum good should come to the maximum number
- even if some individuals are harmed, this is justifiable in terms of the larger good to society
- most mass interventions, such as immunisation, and policies affecting everyone, such as helmets for two-wheeler riders, is based on the utilitarian ethic

'deontological' approaches

- these are 'rule based' approaches to policy
- it is usually based on some principle, religious or political
- complete denial of abortion, total prohibition, free access to handguns are examples

rights based policy

- the ethical approach to policy can also stem from the perspective of individual rights
- the principle of health systems like the NHS, where there is free access to most health care interventions is justified in terms of health rights
- however, though notionally available free, there can be a time based rationing of care- this is usually ignored

evidence and policy

- there is a movement to bring evidence into policy
- it advocates scientific assessment of health needs, as well as scientific evaluation of intervention programs
- only interventions which have proven net benefit for large number of people should be implemented on a mass scale

can everything be tested?

- generally only specific disease targeted interventions can be tested for efficacy
- health related events that have a bearing on policy, such as medical education, licensing, migration etc are very difficult to test before implementation
- policy contexts change so fast that whatever is found to be useful may no longer be relevant

ethics of evidence generation

- is it ethical to test policies on populations?
- it may be argued that in any case, a new policy is an experiment and people will be subjected to its test before policy makers may recognise that it is not effective
- in that sense it may be more ethical to test it out in a small scale
- however, testing assumes consent, which is difficult to assess

what evidence to look for?

- evidence is usually evidence of efficacy, or the proof that the intervention will achieve the intended result in the majority of people
- however, efficacy or effectiveness may not be the only yardstick for judging policy
- the equity impact of any intervention should not be forgotten
- the cultural and economic sustainability and long term implications are also important

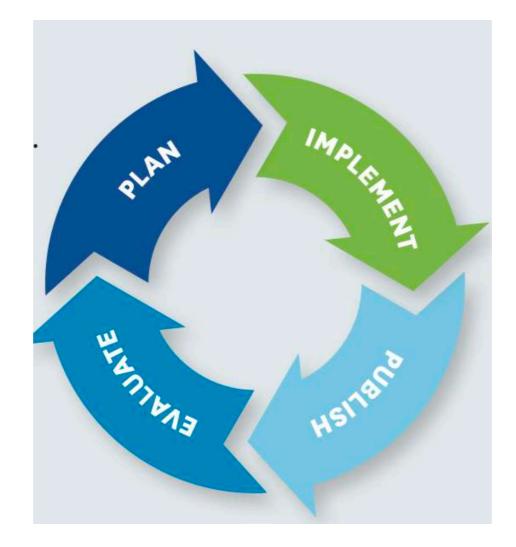
evidence and policy ownership

- the propagators of the policy always insist that the policy is evidence based
- often an elaborate exercise in evidence generation precedes the policy formulation and implementation
- these are seldom objectively done and often there is serious conflict of interest in the conduct of such studies

evidence and the public health community

- the ultimate aim of public health is 'harm reduction'
- hence most public health practitioners are utilitarians
- approaches to harm reduction may vary with the ideological position of the practitioner
- hence he/ she will examine the evidence through the lens of ideology

The research priority loop (from WHO)



Some general principles

- Understand the political context
- Be flexible- adapt the project to the funding available
- Be transparent in your priority setting and choices

THANK YOU

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