

“The Pulse of Progress: Bridging Gaps in National Healthcare Research in Nepal”

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Online Access



DOI: 10.64772/mjapfn.2.2.75

Nepal's healthcare system is at a critical juncture. It has made remarkable progress in healthcare services.¹ Nepal has indeed improved access to primary healthcare services, expanded immunization programs in every part of the country, and decreased the maternal mortality rates.^{1,2} In spite of these achievements, there is still an area that is often disregarded in Nepal. There is a wide gap between clinical foundation and research. An effective health care system relies on properly formed healthcare policies, treatment protocol and the faith of people, which are part and parcel of research.³

Truly speaking, Nepal's medical research is in an incipient stage. Lack of funding, poor infrastructure, a lack of qualified researchers, and weak institutional collaboration are the hurdles behind scientific advancement in Nepal.^{4,5} Even though there are few qualified researchers in Nepal, they don't get job placement in Nepal, due to which most of them don't wish to stay in Nepal. Poor data management systems, uneven ethical monitoring, and lack of trust are added obstacles to researchers in Nepal.^{4,6} Due to these, the country is not able to respond properly to the emerging disease condition, public health emergencies, and changing demographic needs such as migration.⁷

The gap between policy execution and research findings is one of the

major problems. Several health reforms have been introduced in Nepal, such as the National Health Insurance Program; many policies struggle during the implementation phase due to lack of evidence-based planning.⁸ Even the National Health Insurance Program is struggling due to low enrolment rates, ineffective administration, and uneven service assess especially in the rural areas of Nepal. The program is politically motivated rather than based on scientific norms.^{1,7,8}

In due course of time, disparity in access to health care services has been observed between urban and rural areas of Nepal. The poor access to health care for the people of remote and hilly areas has also been observed. Healthcare personal, diagnostic facilities, and emergency services are still in low supply in these regions.^{9,10} Research from Nepal has, on one hand, shown a rise in non-communicable diseases and, on the other hand, also highlighted lack of monitoring systems, a lack of specialist at every nook and corner of Nepal and poor socioeconomic status.^{10,11} It is due to research we also come to know the systemic flaws in the healthcare system and guide targeted changes in the country.

The migration of skilled manpower, especially doctors and paramedics, is a really annoying situation in Nepal. Due to the rise of economic status, better job placements, and

How to cite (Vancouver Style)

Chaulagain R. "The Pulse of Progress: Bridging Gaps in National Healthcare Research in Nepal". Med J APF Nepal. 2026;2(2):I-III.

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research environment, many Nepali researchers and medical professionals are moving abroad. The brain drain has really been a problem for Nepal.¹² This would have been overcome if the Government of Nepal had come up with significant vacancies for doctors and specialists in public health facilities. To retain researchers and skilled professionals, there should have been improvement and increased investment in research funds, building of labs, adding digital technologies (Artificial Intelligence), and professional development opportunities.^{4,12}

There have also been small improvements in the Nepal research arena. The government has also strengthened the Nepal Health Research Council for ethical research governance. Several academic and non-academic institutions have highly emphasized foreign collaboration and public health innovation.⁴ There has also been allocation of funding opportunities for new researchers by the University Grants Commission, Nepal Academy of Science and Technology, Nepal Health Research Council, and universities and institutes of Nepal.⁴ Nepal can also benefit from technological innovation by integrating artificial intelligence and low-resource healthcare systems.

Federalism in Nepal has also opened up scope for localized healthcare research. The Ministry of Social Development has also released research grants at Provincial and local levels. They have also been able to prioritize the healthcare needs of their province and local level.¹³ More precise local health data can also be obtained, enabling policymakers to create focused responses and also attract international donors. However, there is a need of stronger collaboration between government, academic institute, hospitals, and researchers. Women, underprivileged groups, and rural communities are not taken into account.¹⁴ In this situation, there should be involvement of marginalized groups and rural communities too. They should be prioritized at every level. This is a way of building trust in health care systems.¹³

Investing in healthcare research is crucial for the new government to improve Nepal's healthcare system in order to emphasize resilience, preparedness, and equality. With the increase in disease burden, climate -related threats, and healthcare disparities, research and innovation should not be a secondary focus, and the government of Nepal should also consider stopping brain drain.¹⁵ On May 13, 2026, the current government has also added a term 'innovation' to the previously formed 'Ministry of Science and Technology' to 'Ministry of Science, Technology and Innovation'. It is also a welcoming situation when Nepal's government has accepted the need of Innovation in Nepal.¹⁶ It is well accepted

that progress is on the way; however, challenges remain, creating hurdles during execution and policy-making. Hence, bridging these gaps is crucial for making transformation in healthcare research for a better Nepal.

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