

Research Administration in a Public Health Institute in India: Facilitating Research Sustenance and Driving Impact

By Madhuri Dutta

India is only 2.2 times bigger than Alaska but has the second largest population in the world. The top reasons for death in the country with a population of 1.4 billion are non-communicable diseases (NCD) like ischemic heart disease, COPD and stroke. These are closely followed by communicable diseases like diarrheal infections, lower respiratory infections and tuberculosis. Additionally, various socio-economic factors lead to high rates of maternal and neonatal deaths and those caused by malnutrition and injuries. The country has both public and private research institutes that work on public health research evidence generation.

The George Institute for Global Health (GIGH) India was established in 2007 with a focus on public health research and practice, particularly in NCDs and injuries. The institute is part of the GIGH flagship with campuses in Australia, India, China and UK. Together, these institutes have built an international collaborative environment to conduct high-quality research in global health and on country specific priorities.

GIGH India aims at evidence generation for:

- Better treatment procedures and clinical guidelines — for example the institute supported development of a national dialysis registry framework and facilitated inclusion of combination pills in the WHO Model List of Essential Medicines;
- Better health care for people, such as providing technical guidance in creation of a primary health centre monitoring framework for the state of Kerala and making mental health services accessible in two Indian states; and
- Strengthening policies for a healthier society, achieved through the Rapid Evidence Synthesis platform that co-synthesises rapid reviews with National Health Systems Resource Centres, a technical support unit of the Government of India for aiding decision making.

The institute employs around 50 full-time researchers and a larger group of colleagues working in the field with communities. The institute is funded principally through investigator-led research grants obtained from national funding bodies such as the Indian Council of Medical Research

(ICMR), the Department of Science & Technology and the DBT/Wellcome Trust India Alliance. International agencies like the Medical Research Council UK, the Wellcome Trust UK, the National Health and Medical Research Council Australia, the Bill and Melinda Gates Foundations and WHO also fund our research.

Existing systems of research administration

In 2017, the institute managed 23 projects that have quickly grown to 50 in 2019. The submission of applications is going upwards (10 in 2017 to 36 in 2019). In 2018, the institute expanded and recruited key senior researchers in data sciences, health systems research and health economics. I was also recruited during the same time, to manage pre-award grant processes and aid capacity building. Directors, Program Heads and Senior Research Fellows lead their independent research studies. Other full-time researchers like Research Fellows and Research Assistants manage the studies. They also constitute some of the brightest early career researchers I know and are encouraged to build their research ideas into well-developed proposals with mentorship from established researchers.

GIGH India has a small team of administrators who facilitate pre- and post-grant award processes. The team consists of one Research Manager, one Project Operations Manager, one Finance Officer, one HR Manager, and one Administrative Officer.

The Executive Director and Director of Research provide overall focus to the research program. As the Research Manager, I manage processes

such as seeking funding opportunities and helping with proposal development. I also support an internal peer review process for all the applications and communicate with funding organizations on guidelines. Once an award is made, Finance and HR Managers process the award monies and recruitment on the projects, respectively. The Administrative Manager supports everyone on logistics.

I help the Director of Research to coordinate functioning of an independent Institutional Ethics Committee who reviews projects before they are conducted. Additionally, I run a weekly R&D meeting that is attended by all researchers to discuss research projects. As part of the global research support division, I am part of working groups who develop SOPs and data governance guidelines and plan training activities for researchers. The Director of Research and Executive Director review these plans and advise and support the activities to make them impactful.

As anyone in my position would agree, there are a lot of tasks research administrators do which fall outside their terms of responsibilities. While these are not mentioned in our contracts, they give all of us satisfaction and a sense of purpose. Last-minute requests for documents, reviews, and CVs can take us beyond working hours, and we occasionally have to put in a bit of work during weekends too. However, the happiness obtained from successful grant applications is perhaps worth every hardship.

Research administration during COVID-19

A public health research organization runs on field-based projects requiring community interactions, household visits and working with front-line health workers. Since February 2020, most of our field-based projects have been on hold due to a nationwide lockdown called in by the Government of India. The institutional leadership came into swift action by taking stock of all projects and holding immediate discussions with researchers and project staff regarding project risks. Their main intention was to understand if project objectives and field staff employment were affected due to the lockdown.

As the Research Manager, I compiled project information and coordinated regular weekly meetings throughout February to April. Databases that I maintain regularly helped me to quickly review, draw from and reach out to the investigators. This exercise was conducted in all our global offices and involved staff from research and project operations. There was a cross talk between each region on the issues and possible solutions. During these researcher meetings, solutions such as re-organizing/prioritizing study objectives, developing alternate ways of obtaining ethics consent via online reviews as per Government of India guidelines and developing alternate ways of interviewing through mobile phones were discussed and put into action. Throughout the lockdown months, regular meetings were held with all staff members so that everyone felt supported by the organization. While it was important for project timelines to align with funding agency expectations, encouragingly, most agencies understood these circumstances and provided project extensions.

Efficient research administration thrives on good organizational leadership. GIGH India demonstrated how good leadership can bring everyone together and support them through tough times. The institute was already using online communication for business since our offices are spread across different countries and time zones. Hence, during the lockdown, we did not have to move separately to new platforms. Additionally, flexible working hours and work-from-home facilities are available for employees; hence during lockdown, we continued to follow standard working patterns.

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Best practices and learnings to strengthen ongoing processes

No organization was prepared for a pandemic such as COVID-19. Every institution must now create systems and processes that can overcome risks associated with uncertain times. The pandemic is not yet over, and we may have to revise our processes substantially to continue to work efficiently. Research management and our routine review processes have evolved as a value addition to research institutes, especially at this time.

As a research facilitator, these are few of my learnings for a future of uncertainties:

1. A good database/record keeping system in all institutional activities is immensely useful for quick reviews and informed decision making.
2. Stable online platforms of communications like Zoom and Microsoft Teams are also essential. These were already a part of GIGH lifestyle; hence, colleagues did not have to spend time familiarizing themselves with these systems.
3. Proactiveness in revising processes such as ethics approvals and SOPs to best suit the times and a quick turnaround on decision making is useful.
4. Aligning skills of workforce to develop projects with changing research priorities help in institute growth. In spite of an NCD focus, our leadership supported researchers to develop ideas where their skills in clinical trials and quantitative and qualitative methods could enrich COVID-19 research.
5. Working as a team is always more efficient than vertical systems working in silos. GIGH India has a very small team of research administrators but they constantly liaise with each other. The systems are kept transparent to reduce redundancies. The institutional leadership has also helped in streamlining processes.

Research administration is driven by the heart. We are a glue bringing all departments and researchers together to create a functional unit for research sustenance and impact. I hope more and more enthusiastic, curious and bright colleagues choose this as a profession in India in future years. ■



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