Strengthening Health Care Ethics: A Multi-Disciplinary Engagement with Diverse Constituencies Related to Health and Health Care

(August 2018 to July 2019) Grant Ref No/Proposal Id: TEDT/MUM/HEA/FfMES/2018-2019/0048/sa

Highlights of the Initiative and Achievements



Forum for Medical Ethics Society's Health, Ethics, and Law (HEaL) Institute for Training, Research and Advocacy Enabled and Seeded by Tata Trusts via this grant



Supported by



About Us

Briefly about us before we present the achievements on the initiative supported by Tata Trusts

(You may watch the embedded video of one minute long about FMES shot in 2016)

FMES at a glance

- Life span: Quarter century
- Overall goals: To work towards enhancing ethical practices in health and allied theme with regards to policy, research, clinical care, and public health
- Organisational Structure
 - Current: Registered Society, Managing Committee (MC), IJME Editorial staff and admin-finance human resource primarily governed by and overseen by the MC
 - Aspirational: Director/Coordinator, Project staff, expanded adminfinance unit wherein MC will be taking a backseat and work towards help strengthen this expanded organizational structure
- Present activities: IJME & NBC; advocacy and campaigns; bioethics trainings, public engagement on bioethics matters
- Future plans: Further strengthening of current activities; expanding FMES scope of work to research, advocacy, intervention-research, institutionalizing bioethics training program, innovative e-platforms for health news analysis, critique

Do we matter?: Salience & shifting landscape

FMES Essential for the existence of IJME and NBC

Increasingly involved in active advocacy initiatives independently or collaboratively

Aspires to respond to issues by undertaking research , policy analysis & shaping ethics related regulatory frameworks

Aspires to institutionalise bioethics training

Preparation on for 6th NBC in Pune in Jan 2017

Won the bid to host 14th World Congress of Bioethics in Dec 2018 jointly with 7th NBC IJME

Platform for critical reflections, debate, self & peer learning,

When no players were there we initiated ethics training activities in research and clinical care

Scholarship in bioethics in systematic form was not available, we made significant contribution

It serves as a bridge between academia and advocacy initiatives informed by grassroots players & their work

Impact on practice & policy

A response to the need for a more active and inclusive platform

NBC

Enabled direct dialogue across disciplines

Attracts younger practitioners, scholars and advocates

Enabled networking

Enabled exploration of newer areas and focused debate on contemporary pressing issues in bioethics



Added a third platform to FMES - HEaL Institute for Training, Research and Ethics Enabled and seeded by Tata Trusts

FMES (HEaL, NBC and IJME platforms) ORGANOGRAM



FMES' HEaL Institute: MC & Lead & Team



Lead



Managing Committee

- Dr Sanjay Nagral 1. (Chair)
- 2. Dr Sunita Bandewar (Gen Sec)
- 3. Lubna Duggal (Tresurer)
- 4. Barun Mukhopadhyaya
- 5. Sun<mark>ita Simo</mark>n
- 6. Shamim Modi

Lead

Dr Sunita Bandewar

Team

- Mahendra Shinde 1.
- 2. Navneet Wadkar
- 3. Nikita Surani
- 4. Shahnawaz Islam
- 5. Vijay Sawant



Team



Strengthening Health Care Ethics: A Multi-Disciplinary Engagement with Diverse Constituencies Related to Health and Health Care (August 2018 to July 2019)

Located at FMES' Health, Law, and Ethics Institute for Training, Research and Advocacy Enabled and Seeded by Tata Trusts



Goal and Specific Objectives

Goal

To build and strengthen the ethical fabric of healthcare systems and health professionals for a patient-centered healthcare system, through strategic networking, and public engagement with constituencies related to health care service provision via the two established platforms of FMES - IJME and NBC.

Specific Objectives

Objective 1: To set up bioethics training program (certificate and diploma) in three major streams - clinical ethics, biomedical research ethics, and public health and social sciences research ethics - in collaboration with one or two academic entities/universities.

Objective 2: Public engagement with individuals and the leadership of associations of the health professions (doctors, nurses, chemists etc); other wide ranging allied fields, such as, biomedical sciences including environmental sciences, law, social sciences, humanities; and civil society organizations (NGOs) who have a significant role to play in strengthening medical and healthcare ethics and influence related policies in India.

Objective 3: To create a systematically organised repository of material on medical, healthcare ethics and bioethics in the form of books, guidelines, manuals, case studies as well as papers from other journals as part of the ongoing effort for awareness and consciousness building.

Objective 4: To further strengthen the digital marketing of *IJME*.

Objective 1

Commitments | Deliverables

- To set up bioethics training program (certificate and diploma) in three major streams - clinical ethics, biomedical research ethics, and public health and social sciences research ethics - in collaboration with one or two academic entities/universities.
- Four trainings committed in collaboration with other institutes/organizations

Status on July 31, 2019

- > Organized three of four
- > In collaboration with five collaborating institutes
- > Three curriculs developed and implemented
- > One draft curricula developed, require further work
- Clinical Ethics case studies booklet developed (not committed)
- Case studies in public health ethics materials developed; require more work (not committed)

Forthcoming beyond July 31, 2019 (being conceptualized)

- Two deemed to be universities expressed willingness to introduce some of these trainings as university recognized certificate programs
- Research ethics in social sciences and public health training (5 days) with Centre for Policy studies, IITB, Mumbai early 2010
- Ethics of Implementation Research Training in collaboration with WHO, Geneva for South-Asia and/or South-East Asia with involvement of other govt institutions in India - early 2010
- > Request for developing curriculum for nursing ethics
- Request for developing curriculum for ethics for staticians

BIOETHICS TRAINING PROGRAMS

Three Short-Duration Intensive Training Programs Concluded

(Aug 2018-July 2019)

32 Trained

SOCIAL SCIENCE AND PUBLIC HEALTH RESEARCH ETHICS

Bhubaneswar - June 2019

Collaborators: ICSSR-Nabakrushna Choudhury Centre for Development Studies, Bhubaneswar

> 19 Trained

BIOMEDICAL RESEARCH ETHICS

Kolkata - June 2019 Collaborators: Calcutta School of Tropical Medicine, Kolkata ICSSR-Nabakrushna Choudhury Centre for Development Studies, Bhubaneswar



PUBLIC HEALTH ETHICS

Mumbai - July 2019 Collaborators: ICMR-National Institute of Epidemiology, Chennai Centre for Public Health, Tata Institute of Social Sciences, Mumbai Centre for Policy Studies, Indian Institute of Technology Bombay, Mumbai





Glimpses into course participants' views

"It was a wholesome learning experience."

"I gained a new perspective on research ethics."

"Large number of case studies and discussions are very useful. If more numbers are included than it will be very beneficial for us."

"It has been helpful to me as an individual to understand that how to deal with theory and practical aspects of ethics in public health."

"The knowledge will be helpful to design a research protocol, and assess risk-benefit factors in a particular research."

"Learnt better about composition and functioning of ethics committees."

"As a newly inducted ethics committee member I learnt how the meetings should be held and how the decision is arrived at."

"Learnt about epidemiology and its approaches about which I did not have much exposures earlier."

Learnings from trainings conducted

- A couple of course participants expected some more support regarding logistics
- More videos and film screening
- > More small group based learning using case studies
- > Duration of training program could be increased

Objective 2

Commitments | Deliverables

- Public engagement with individuals and the leadership of associations of the health professions (doctors, nurses, chemists etc); other wide ranging allied fields, such as, biomedical sciences including environmental sciences, law, social sciences, humanities; and civil society organizations (NGOs) who have a significant role to play in strengthening medical and healthcare ethics and influence related policies in India.
- Six grand rounds
- > Two round tables
- One essay competition

Status on July 31, 2019

- > Five grand rounds organised
- > Four round tables organized
- > One essay competition concluded

Forthcoming beyond July 31, 2019

- Three grand rounds
- > Will continue essay competition
- Round table on ethics of sport medicine being discussed

PUBLIC ENGAGEMENT

Round Tables

Organised so far: Four (February (1), June(2), & July 2019 (1))

Grand Rounds Organised so far: Five (Mumbai) Upcoming: Sept 2019 (Chennai); Sept 2019 (Mumbai); June 2020 (Delhi)

Essay Competition All India level; April to July 2019 Internship of awardees completed. Was well received Awardees were mentored by members of the selection committee. Revised manuscripts (4) are being copy edited to put on website.

4 Round Tables

- 122 Participated
- Death Penalty in India: Legal, Ethical, and Health Issues
- Indian Philosophical Traditions
- Publication Ethics Governance and Policies for Academic Journals
- Emerging AI Technology in Health Care in India, Health Equity, and Justice: Critical Reflections and Charting Out Way Forward

5 Grand Rounds

Grant Medical College and Sir Jamsetjee Jeejeebhoy Hospital: Foundation, Renown, and Decline

- Response of Bioethics Community to #metoo Movement and History and Evolution of International Association of Bioethics (IAB)
- Emerging Infectious Diseases and the Impact of Behaviour on Amplification and Spread of Diseases during Outbreaks
- ► The Case of the Spurious Drug Kingpin: Shifting Pills in Chennai
- 127th WHO Global Health Histories Seminar Towards Universal Health Care: History of 'Health for All' Struggles in India





378

Participated

Round tables supported by research pieces (not committed)

- Death Penalty in India: Legal, Ethical, and Health Issues:
 - Was essential to undertake both desk work to conceptualize the round table; of relevance but almost no work in Indian context

 - Complemented by designing an online survey
 Will be completing the work and publishing the same
 - A manuscript based on proceedings of the round table drafted
- Emerging AI Technology in Health Care in India, Health Equity, and Justice: Critical Reflections and Charting Out Way Forward:
 - Relevant and requires more work to be done in this area
 - A manuscript developed and will be submitted to peer reviewed journal. This was done as part of the preparation for the grand round.
 - Wrote two grants on this topic. Outcome awaited
 - Will be included in our new grant to Tata Trust that is being conceptualized
 - Round Table proceedings report being finalized
- Ethics of Health Journalism (could not take place):
 - Relevant, requires more work and training of health journalists
 - Both desk work and small scale qualitative research was conceptualized
 - Will be writing it up and publishing
 - Will be included in our new grant to Tata Trust that is being conceptualized

Public Engagement Success and Learnings

"Good content and good delivery."

"The lecture was very engaging."

"Very informative."

"A bigger space should be a better option."

"After lecture gained more knowledge in bioethics."

"Can be videographed as a story."

"Learned more about politics of drug quality."

"Interesting series of more such lectures are required."

"An interesting take on legal aspects."

Essay Competition

4 Winners

- **3** Runners-Ups
- Theme 1: Artificial Intelligence in Health Care
- ► Theme 2 : Role of Health Professionals in Death Penalty
- ▶ Theme 3: Health Journalism

3 Winners of Essay Competition completed oneweek internship with Jan Swasthya Sahyog Essays of 2 Winners and 1 Runner-Up submitted as manuscript to IJME

35 Essays

Objective 3

Commitment | Deliverable

To create a systematically organised repository of material on medical, healthcare ethics and bioethics in the form of books, guidelines, manuals, case studies as well as papers from other journals as part of the ongoing effort for awareness and consciousness building.

Status on July 31, 2019

- Tech partner contribution
 - E-repository platform technical work completed by tech partners
- In-house contribution
 - > 1555 sources slated for posting on the repository
 - This involved searching, screening, classifying, and organizing them to be posted on the e-repository
 - > 100+ pieces posted
 - Will be completing these in-house work in the coming times



Objective 4

Commitments | Deliverables

To further strengthen the digital marketing of *IJME*.

Status on July 31, 2019

- Work by technical partner is done
- Involved extensive backend technical work by the tech partners
- In-house work continues
- Dedicated website for HEaL (not committed)

Strengthening IJME Platform



- Improvements in the design and layouts of the IJME website.
- Improve responsiveness and user experience of IJME for small screen devices.
- XTML generation automated
- Article metrics
- Capacity building of FMES colleagues enabling transitioning to in-house operations of IJME, HEaL Website and eRepository platform

Strengthening IJME Platform



• Improvement in marketing of IJME website to increase the number of users and page views.

Indicator	2016-17	2017-18	2018-19
Users	133207	156659	288962
Page views	324073	377224	554739

New Dedicated Website for HEaL Institute (1)



- Separate website for FMES' HEaL Institute enabled and seeded by Tata Trusts via this grant (Aig 1, 2018 - July 31, 2019).
- Helps establish HEaL's own identity independent of FMES' two other established platform, namely, IJME, and National Bioethics Conference platform

New Dedicated Website for HEaL Institute (2)

Health, El	thics, and Law					ABOUT	OURWORK	EVENTS	ANNOUNC	EMENTS Q	
and mark	and, have t this	n Sept / Hall	trigagement (Contrast representation representation of	erretuar 127. Taxaar	and the second second	h Care Hanaly o	Construite AP	in aggression rindla		
				Seminar 12 in India	7: Towar	ds Unive	ersal He	alth Ca	re: Hist	ory of	
Galarie	10 2019, Date		NG	A A A	et the 1270 W10	Clottat results re	uturke, terrettar	to 1 115 adjust active	with Castley Ex-	Ghibal Health	
relationies	personal Lines	enity of view.	Lannest Grogdian	, the Centre Review an and Sciences, Marihai	d Society, School of	Lies, Sights and	Constitutional C				
				which math Care min and about the variants						the article and	
proservity level trut sistercielle proacte b Commente Social ble round to fichement round to fichement round to fichement	d the finitery of simple text be ry and textually earlier sector. The implementation from the property and the property and the property and the sector of taxes of public.	If the manner management of a baseling and the probability pro- lease of the pro- many of the pro- many of the pro- many of the pro- particle of the pro- pa	net towards from radiatial periods of a view. Inside the state samples and the optimized Antartic (20) optimized Antartic (20) optimized Antartic (20) of 11 the view of Antartic (20) of 10 (11) and antartic of 0.0000, in response of 10 (11) the training of anticipation. Each	I of Meddad Uthics gave goal of Swattiche Att microst Income of Licks or architecture of the genera- ing accorages while the genera- ry factoring to the general- weilerstic the spicker about only to the source action of the source of the source of the source of the source of the source of the source of the source of publicly, architecture without automa	to harport by specific of support or the is ry serve could be p children breakly system y Stradae, stational f if the transfer of the of the transfer of the date maintain ergs of the restantiation of the souther methods and the souther of specific of souther of specific of southers of specific of	ng about the con- dential level, the con- conded by pathin stageneted, the co- stageneted, the pathing power tensorial da- se, likening at to r- ard it was rescance of and the formal mainteness. Although	mmarity boolffield lated that the is bould network and insistence about its mealth stranger algest of the prin naking increasive ry to develop arrester ing that develop the Strange Berriet of	lares. But foot for an and set of the or an and set of the or the test concernent are of the off of the ary bound to work or particle to work or an and the set of the off of the off of the off of the off of the off of the off off off off of the off off off off off off off off off off	nere a suit reve al band proveiding o bary case could bary an o could optimize our effort integrating threes, grapping threes, grapping three and the prove grapping three integration of the band fund against of band fill stream of	ther han al project Control at their be provided by more by OF 0-implies, the spoke alimit flagranged the ordering wave Cold actually main attill the	
Parcia in compare providing showerd Colondry groups	arrano, e, edito fi si if en stator of our chai the el fer crost of fees g fre presential for gave ecotr Mesorechile, i	enclaption the processer breakt during which too the carrie brocca arre, Scaladenba place, eff proor	Instructure all artists of Consecution Units, 5/92 individual de avector music coart One Franklich de toa Sparricht provinger related artists franklich	want her and stadth Act others of twiath frames Da to the correct gathe ghost it is failed to pay to impartise could be capit, interpreting could be could be failed on trapping of been adde to be off	ing in milia. He shad al solution y official official promovers for a welly change the pat- actions, and utilities contage of the path	clates? atom the action the action the action , the gaves the sec- ient language control action the states to ply function the all	Instants of arrive of arraying again arraying of the US net rough irreduced indust arraying of h mode arraying of	observing of benefits at yourning principal subserve that principal the particly could be affect income and governt beam and	financing or out o taking baselits is alornow of baselity pary this practic is all barriers, impl of-practic seque	st, with that are in while manoritie had areer or institute, tamora on Trillial diture still	
Activities											
21	Ryer Program scher Photo Galley GHH Seminar		Chievaldh Son AB1	Struggles in India – Vide	o (Part 1), (Part 2)						
Supports	ed by Tata Tru	7.5									
Lat of Pa	REM DUS rticipants for th Mos to be held	e Short Durst rem 17th to 3	on intensive Train 1st July DOSP at 1	ring Program in Public T [*] Sombay.		Short-Curat	on intensive Train	ing Program in P 2	ublic Health Ethic at July 2019 at V	READ NEXT sheld from 17th - MCC, IIT, Sombay	
									FILLER	nd and Seatled by	
									TA	TA TRUST	s

\rightarrow G	① fmesinstitute.org/training/short-duration-intensi ♀ ☆ 😈 ⓒ 🛤 :	
	ABOUT OUR WORK EVENTS ANNOUNCEMENTS Q	
	Short-Duration Intensive Training Program in Public Health Ethics held from 17th - 21st July 2019 at VMCC, IIT, Bombay. Achies: - Ref - Brodrue - Program schedule - Photo Gallyy Supported by Tata Trusts	
	READ PREVIOUS: READ NEXT) Global Health Hatories Seminar 127: Towards Universal Health Cano: History of Round-Table Emerging Al Technology in Health Cano: History Critical Reflections and Charting out may forward. Sat. July 13, 2019, from Plastice: Critical Reflections and Charting out may forward. Sat. July 13, 2019, from 9,30 am to 4,30 pm, VMCC, IIT, Bombay	
	Enabled and Seveled by TATA TRUSTS	

Utilization of funds (Aug 2018 - July 2019)

Strengthening Healthcare Ethics Initiative Supported by Tata Trusts

Grant Period: August 1, 2018 to July 31, 2019

Sr. No	Budget Head	Total Trust	Actual	% Out of Total Trust	Variance till date in %
1	PERSONNEL	38,16,000	34,40,800	45.77	9.83
2	CAPITAL	12,60,000	9,35,146	15.11	25.78
3	PROGRAM COST	25,06,300	17,97,208	30.07	28.29
4	Total Budget	75,82,300	61,73,154		
5	Overhead 10 %	7,54,130	7,46,809	9.05	0.97
6	GRAND TOTAL	83,36,430	69,19,963	100.00	16.99



Building Network: Institutions, Experts, Peers



Collaborating Entities

- 1. Calcutta School of Tropical Medicine (CSTM), Kolkata, WB
- 2. Centre for Enquiry into Health and Allied Themes (CEHAT), Mumbai, MH
- 3. Centre for Law and Society (CLS), Tata Institute of Social Sciences, Mumbai, MH
- 4. Centre for Mental Health Law and Policy (CMHLP), Indian Law Society, Pune, MH
- 5. Centre for Policy Studies (CPS), Indian Institute of Technology Bombay, Mumbai, MH
- 6. Centre for Public Health (CPH), Tata Institute of Social Sciences, Mumbai, MH
- 7. Department of Humanities and Social Sciences (D-HSS), Indian Institute of Technology Bombay, Mumbai, MH
- 8. eSocial Sciences, Mumbai, MH
- 9. Indian Council for Medical Research National Institute of Epidemiology (ICMR-NIE), Chennai, TN
- 10. Indian Law Society (ILS) Law College, Pune, MH
- 11. Jan Swasthya Sahayog (JSS), Ganiyari, Bilaspur, Chhattisgarh
- 2. Nabakrushna Choudhury Centre for Development Studies (NCDS), an Indian Council of Social Sciences Research (ICSSR), Bhubaneswar, Odisha

Scientific and Ethics Advisory Group(SAG) and Affiliates/Subject Experts

Tejal Barai



SAG

- 1. Tejal Barai
- 2. Dr Anant Bhan

Affiliates

- 1. Supriya Subramani
- 2. Amita Pitre
- 3. Dilnaz Boga
- 4. Olinda Timms

Dilnaz Boga



Bioethics Trainings

Bioethics Training Programs: Faculty

Social Science and Public Health Research Ethics, NCDS, Bhubaneshwar

- 1. Amar Jesani
- 2. Mala Ramanathan
- 3. Sreejit Mishara
- 4. Sunita VSB

Biomedical Research Ethics, CSTM, Kolkata

- 1. Anant Bhan
- 2. Amar Jesani
- 3. Shantanu Tripathy
- 4. Subrata Chattopadhyay
- 5. Sunita VSB

Public Health Ethics, IITB Mumbai

- 1. Amar Jesani
- 2. Anant Bhan
- 3. Kajal Bhardwaj
- 4. Kaustubh Joag
- 5. P. Manickam
- 6. Mathew George
- 7. Nilangi Nanal
- 8. Nilesh Gawade
- 9. Ravi Duggal
- 10. Sunita VSB
- 11. Tarun Bhatnagar

Social Science and Public Health Research Ethics, NCDS, Bhubaneshwar



Biomedical Research Ethics, CSTM, Kolkata



Public Health Ethics, IITB, Mumbai







Public Engagement in Bioethics

- 1. Grand Rounds
- 2. Round Tables
- 3. Essay competition



Grand Rounds (Speakers and Chairs)



Grand Rounds (speakers & Chairs)

- 1. Amar Jesani
- 2. Lopa Mehta
- 3. Mathew George
- 4. Nilesh Gawde
- 5. Richard Cash
- 6. Ritu Priya
- 7. Ruth Macklin
- 8. Sanjay Nagral
- 9. Sarah Hodges
- 10.S P Kalantri
- 11. Sulakshna Na<mark>ndi</mark>
- 12. Sunil Pandya
- 13. Sunita VSB

Round tables: Speakers & Chairs

Death Penalty in India: Legal, Ethical, and Health Issues



Emerging AI Technology in Health Care in India



Round Tables Death Penalty in India: Legal, Ethical, and Health Issues

- 1. A<mark>mar Jesani</mark>
- 2. Amita Pitre
- 3. An<mark>up Surendran</mark>ath
- 4. Maitreyi Mishra
- 5. Vaijayanti Joshi
- 6. Sand<mark>hya Srinivas</mark>an
- 7. Sandeep Mahamuni
- 8. Sunita VSB
- 9. Shamim Modi
- 10. Soumitra Pathare

Emerging Al Technology in Health Care in India, Health Equity, and Justice

- 1. Anant Bhan
- 2. Ashwini K.
- 3. Denny John
- 4. Navneet Wadkar
- 5. Radhika Ramkrishanan
- 6. Shivkumar S
- 7. Shishir Jha
- 8. Shashant S.
- 9. Sunita VSB
- 10. Surjit Nundy
- 11. Usha Ramanathan

Indian Philosophical Traditions

- 1. Meera Baindur
- 2. CD Sebastian

Indian Philosophical Traditions

IJME Young Bioethicist and Change Maker awards - Essay competition and Selection Committee



Winners

- 1. Cheryl Ann Thomas
- 2. Migita D'cruz
- 3. Saibal Das
- 4. Sayali Tiwari

Runners Up

- 1. Sharon Pradeeptha
- 2. Sreejith H. Das
- 3. Kamal Suna



Selection Committee

Anant Bhan
 Rema Nagarajan
 Vijay Hiremath



Thank you