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ICMR gets second woman head in 100-year history

K. S. Jayaraman

Women scientists in India had a reason to cheer this week (17 August, 2015) when **Soumya Swaminathan** took over as secretary to India's Department of Health Research and head of Indian Council of Medical Research (ICMR), the country's apex body for biomedical research. Swaminathan, until recently the director of Chennai based National Institute for Research in Tuberculosis, is only the second woman scientist (besides Gowdagere Satyavati) to head the ICMR in its over 100-year history. At the moment, she is also the lone woman to head any public science agency in the country.

Soumya Swaminathan tells *Nature India* in an interview that a new roadmap for ICMR is on the cards with a focus on strengthening research administration.

Nature India: How does it feel to be the second woman ever to head the ICMR in its 100-year history?

Soumya Swaminathan: It is a great honour and opportunity. While it is a bit 'concerning', I am confident that in the future, there will be more women in leadership positions in science. However, I hope I am not judged differently because I am a woman – the yardstick should be the same for all scientists!

NI: What is your game plan to improve the functioning of ICMR?

SS: My vision for ICMR is to make it a dynamic, cutting edge research organisation, responding to urgent public health needs of the country and providing sound, evidence-based advice to the ministry on programmes and policy issues. We will develop a roadmap for ICMR for the next 5 years.

NI: Can you please elaborate?

SS: Projects that have fulfilled or outlived their mandate will be closed and a process of internal review and re-prioritisation will be undertaken. There is a need for long-term projects to understand the epidemiology,

prevention and treatment of diseases affecting the Indian population. I will focus on leveraging the strengths of our existing institutions, building capacity where it is lacking, rewarding excellence, increasing networking and enhancing collaboration with national and international science agencies.

Further, there is a need to establish a mechanism for supporting the translation of early leads into products and then performing a rigorous evaluation of indigenously developed diagnostics and devices that would help make health care more affordable. ICMR will ensure that while the rights of patients and study participants are protected, the approval process does not become a barrier to conducting clinical trials. As the political environment in the country wants to bring affordable health care to its citizens, I do not anticipate any hurdles for these activities.

NI: What are the main challenges you expect?

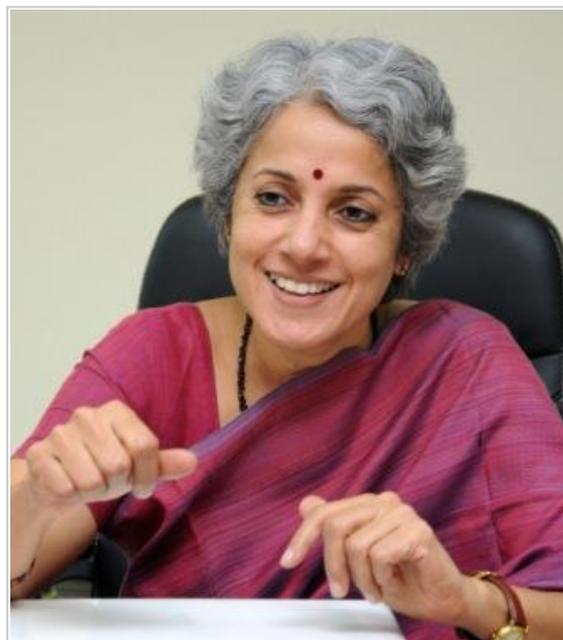
SS: The challenge now is to focus on key research priorities that will have an impact on public health in the short to medium term. ICMR needs to focus on health outcomes and impact at the population level, rather than mere outputs in the form of publications and patents. We have a high burden of diseases like TB, malaria, dengue and chikungunya, emerging and re-emerging viral diseases. Having conquered polio, India could aim to eliminate measles in the next few years. A “mission mode” of operation may be needed to achieve some of these objectives. Another immediate challenge is to expand capacity to undertake high quality research in our medical schools and universities.

NI: There has been criticism that research supported by ICMR does not adequately address public health problems.

SS: We will aim at translating the knowledge that has already been generated into products, tools and strategies and then implementing it in partnership with the health ministry. I would like ICMR to concentrate more on “implementation science”, focusing on our major public health problems for which it will be essential for ICMR to collaborate both with academia and industry.

NI: Do you envisage any change in the administrative structure of ICMR?

SS: ICMR needs better infrastructure, more autonomy and much greater levels of funding. Research administration will need strengthening too, with greater transparency and timeliness in the way grants are reviewed and funded. We will follow up the earlier review committee's recommendations¹ for reform. We will use e-governance to help speed up many processes.



Soumya Swaminathan

References

1. Jayaraman, K. Under scrutiny, India's medical research council faces review. *Nat. Med.* **19**, 386 (2013) doi:[10.1038/nm0413-386a](https://doi.org/10.1038/nm0413-386a)

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