RESEARCH ARTICLE

Shaking the foundations: co-creating knowledge exchange to inform alcohol research, policy, and practice in Nepal

Kate Luxion[ID]*, katy.luxion.19@ucl.ac.uk*
Ankit Acharya[ID]*, iamankit321@gmail.com*
Stephanie Chang[ID]*, stephanie.chang.20@alumni.ucl.ac.uk*
Nia Williams[ID]*, nia.williams.21@alumni.ucl.ac.uk*
University College London, UK

Kate Allen[ID]*, k.allen1@uel.ac.uk*
Rix Inclusive Research (University of East London) and PurpleSTARS, UK

Ranjita Dhital[ID]*, r.dhital@ucl.ac.uk*
University College London, UK

Alcohol has complex, historic, and deep cultural significance in Nepal. Countries from the global majority, such as Nepal, experience the highest burden of harm from alcohol with increasing consumption rates compared with high-income countries. Therefore, alcohol harm reduction initiatives that engage meaningfully with cultural and community practices are needed. The Alcohol Co-design and Community Engagement (ACE) study aimed to co-create new understanding of harmful use of alcohol through applying creative and participatory approaches to inform future alcohol research and policy in Nepal. This article reports on the creative methodological process used to co-create knowledge exchange with diverse communities, co-researchers, and policy makers in Nepal. We co-produced a range of creative alcohol policy review activities, including scoping community and cultural assets that could be harnessed to reduce harmful use of alcohol by working with communities, including those with lived experience. This allowed us to understand the nature of any existing health and community support available locally, while highlighting the absence of much-needed support. We achieved this through using multi-modal, participatory approaches to critically review current policy and explored other forms of knowledge – centring indigenous knowledge – for its cultural and contextual relevance to reduce harmful use of alcohol and make recommendations for alcohol research and policy development and implementation in Nepal.

Introduction

Within Nepal, there is a complex relationship with alcohol, due to its cultural importance in religious and cultural traditions (Kunwor, 1984). Although a large portion of the Nepali population (approximately 70 per cent) abstain from alcohol, harmful alcohol use is reported at 7 per cent, with higher rates in men (12 per cent; Bista et al, 2021). Despite the higher prevalence of non-drinkers, those who do consume alcohol do so enough for the country-wide rate of consumption to be 1.4 per capita, with men (2.4) and women (0.5) drinking alcohol at strikingly different rates (World Health Organization, 2024).

The burden of alcohol harm experienced by people in low- and middle-income countries (LMICs), such as Nepal, is far greater compared with that from high-income countries or HICs. This is likely due to the scarcity of and access to adequate health and social care resources to reduce alcohol-related harm. Unfortunately, rates of consumption are increasing in LMICs despite reduced consumption rates in some HICs (Sørensen et al, 2022), with deaths from drinking and drug use in Nepal expected to account for 3.24 per cent of deaths by 2040 (Pandey et al, 2020).

Impacts from these higher rates of consumption can be linked to higher-level risk for poorer health outcomes and disability (Samokhvalov et al, 2010; Rehm, 2011; IHME, 2024), increased rates of accidents and injuries (Chikritzhs and Livingston, 2021), more frequent engagement in anti-social behaviours (Gautam et al, 2021), and gender-based violence (Sapkota et al, 2024), among other preventable outcomes. Additionally, higher rates of alcohol consumption acts as a significant factor in raising the risk of dying from non-communicable diseases (NCDs; Roser et al, 2024). To address these levels of harmful drinking, research alongside policy recommendations was developed by our study team to understand the protective nature and unique qualities of community resources so government and other organisations may apply these (see Luxion et al, forthcoming for more examples). Already-existing policy recommendations have often not meaningfully engaged with the lives and needs of the individual and lacked cultural awareness in research and implementation.

This gap in knowledge led to the development of a knowledge exchange partnership in the Lalitpur region (Patan) of Nepal between University College London, the World Health Organization, diverse local communities, and co-researchers from creative and health organisations. The Alcohol Co-Design and Community Engagement (ACE) study, which is the focus of this article, sought to understand how the harmful use of alcohol is discussed and explored across empirical publications, policy documents, and cultural assets. A team of co-researchers from Nepal engaged in a series of empirical and arts practice-based research methods. These methods utilised walking

as a creative tool (Pierce and Lawhon, 2015) to engage in sensory ethnographic work, employed a flexible systematic approach (that is, RAMESES; Wong et al, 2013) to conduct a critical realist review (Edgley et al, 2016), and bolstered these activities through community engagement workshops to review, discuss, and generate knowledge followed by a larger community arts festival. These activities, which will be discussed later, contributed to a forthcoming article that helps to bridge the gap in knowledge made possible by the methods discussed here (Luxion et al, forthcoming). This concurrent article also provides more details about geographic context and the study participants, as well as who has and has not been included in previous research. The ability to observe, examine, and compare these sources of knowledge is uniquely possible due to the creative methods used within the study. As such, the knowledge gained through these experiences speaks specifically to the people of the Lalitpur region and the diversity of experiences they themselves bring to the topic. These methods also provide a means of exploring absences, both in terms of levels of engagements and what is missing from consideration within the existing discourse. Without acknowledging absences, epistemological efforts will simply repeat what has already been done by further refining a limited picture and understanding of what is transpiring (Alderson, 2021).

This article aims to present the methods used alongside the methodological motivations underpinning the decisions throughout the ACE study. These actions were guided theoretically and pragmatically, seeking to rectify gaps in knowledge while addressing how local epistemologies are treated within the Western empirical process. As the title suggests, to create change and bridge knowledge, the ACE study hopes to *shake the foundations* of global health efforts within Nepal as a means of highlighting the importance of the deep roots of Nepali culture and knowledge by using creative methods and reflexive evaluation to decentre Western practices.

Theoretical foundations

The ACE study aimed to establish an understanding of harmful alcohol use in Nepal while ensuring that research for the global majority is supported by knowledge from the global majority. Due to the rich history and cultural significance of alcohol within Nepali communities, it was important to approach this subject and review the current landscape through the lens of cultural competence and humility, particularly for the team members based in the UK; an approach which heavily influenced this study's methodologies. From a theoretical standpoint, this was achieved using an intersectional de-/anti-colonialist lens by centring knowledge archaeology and knowledge generation as focused forms of epistemological resistance (Collins, 2019; Igwe et al, 2022). Awareness of non-indigenous methods and epistemologies were of key importance to help disentangle the documented historical relationship between Nepal and the West. While alcohol was previously reserved for Nepali royalty within Western retellings, British and European culture is thought to have increased public drinking and changed customs to include drinking by those who were not Nepali royalty (Whelpton, 2005). However, this is directly at odds with the local history of alcohol across Nepali communities (Kunwor, 1984).

The research process should be about recording, understanding, and co-producing a body of knowledge that is not reliant upon a comparison of or validation through Western, educated, industrialised, rich, and democratic (WEIRD) ideologies most

often located outside the global majority (Henrich et al, 2010). Thus, what should be continuously considered is the positionality of the researcher and the impact of any formalised knowledge that will be added to the larger body of knowledge via publication (or any other dissemination methods). This reflexive approach aimed to ensure that the focus of the study was anchored on local knowledge and that efforts were made to critically engage with existing literature and resources through a comparative and conscious review process.

For the ACE study, enacting this approach required an examination of the underlying principles of the methods used for the study, specifically how selected methods and their enactment relate to equity within knowledge generation, and their potential for replicating epistemic fallacies in the existing literature (in other words, critical realism as under-labourer; see Alderson, 2021: 77). Importantly, these methods sought to be non-extractive methods to ensure indigenous knowledge did not become secondary to more 'formalised' forms of knowledge according to Eurocentric epistemologies. This aim was achieved through active discussions about the nature of the ACE study, the co-researchers involved, and particularly the incorporation of co-production through creative activities documented here. Additionally, there were many conversations around the modalities of evidence – specifically written English accounts – that tend to be elevated above other forms of evidence (for example, Nepali texts in their original state and cultural assets of various media and scale). To address these concerns, and as vehicles for these theories, the ACE study used creative participatory methods to meet its goals, including creative co-production such as walking as method, co-researcher workshops, and a community arts festival integrated with enriched empirical methods (that is, a critical realist review). Use of these methods is novel within public health research, with the advent of creative public health being a more recent development (Dhital, 2024).

Current literature around the use of alcohol, inclusive of local and global policies, is grounded within homogenising expectations of global organisations that heavily rely on Western ideals to define 'healthy' and expected behaviours. In the context of Nepal, there is a very complex, nuanced relationship between self, society/the community, and alcohol use (Kunwor, 1984; Luxion et al, forthcoming). These theories were selected as guides to help to move away from an epistemologically spurious foundation seen within the history of public health research in Nepal, particularly in relation to alcohol use. An example is the collaboration with local researchers in Nepal being limited to data collection and translation (Agarwal, 2022), halting partnerships in a way that results in an unfinished bridge. This relationship can easily be visualised as rafts built from Western models of health and research – and resulting assumptions – full of external researchers returning to the shore of their home country without the benefit of retained connection to the citizens directly involved in knowledge gathering and lived experiences. Avoiding the privileging of evidence through prioritising certain sources, while noting absences, pushed the study methods beyond some of the positivist limitations that are endemic to public health research and praxis. Equally, the use of diverse methods, particularly creative methods, supported the integration of tacit knowledge as artefacts – latent components that were better communicated through experience, both first hand and shared (Niedderer, 2007). To support and connect theories to activities, critical realism provided a philosophical anchor for the theoretical framework through acknowledging multi-level latent and observable mechanisms,

recognising the absence of formalised evidence, and supporting a cyclical post-positivist approach with otherwise linear methods (Edgley et al, 2016; Alderson, 2021). Ultimately, the theoretical framework sought to amplify the voices of individuals, the cultural significance, and the multi-layered landscape of the harmful use of alcohol – paying particular attention to the area of Patan in Nepal. Thus, the ACE study was conducted in the hope of providing a way forward for creative, non-extractive methods in the domain of public health, with special interest paid to alcohol research and policy.

Ethical considerations

As a creative participatory study, the ACE study provided several ethical queries and considerations. Through consultation with the study's academic sponsor and review of the protocol, the study was deemed as not needing formal ethical approval by the local research ethics committee (see University College London, 2023 for more detail). This decision was because some of the main sources of knowledge are publicly available evidence (that is, public spaces and secondary data), which allow for exemptions from formal ethical approval (University College London, 2023). However, it was paramount to the study team that the research be ethically conscious, ensuring all study activities meet or exceed expectations for ethical knowledge exchange.

Within Nepal, local study activities – such as mapping cultural assets and participatory activities – were formally registered and approved by the Social Welfare Council committee in Nepal (SWC registration number: 001711, approved 20 August 2023), ensuring the project proposal was in line with Nepali Government international project guidelines. Ethical approvals and registration shaped how the knowledge gained can be shared through traditional dissemination channels.

This article focuses on the methods undertaken rather than study findings, the latter of which will be available in a separate critical realist review (see Luxion et al, forthcoming). Despite this distinction in information sharing by type or activity, the ethical considerations to be discussed later apply to all study activities and evidence sources present within the ACE study. Additionally, the ethical practice was co-created by the study team as part of the co-production process (Co-Production Collective, 2023). However, we wish to highlight that the study ethos and ethics were found to be in line with international standards for visual sociology (Papademas and the International Visual Sociology Association, 2009).

For the ACE study, the key approach was to establish a knowledge exchange by co-researching with local communities to explore the topic and appropriate methodology for future research. Sources of knowledge were gathered through non-extractive, participatory methods, thus ensuring that the role of any co-researcher was weighted so that there was no distinct researcher versus participant roles. In practice this meant the establishment of a core team of co-researchers that handled more logistical details. Although it was not always possible for local co-researchers to be present at the core team meetings (due to availability, access to technology, and language barriers), communication mechanisms (for example, Teams meetings, WhatsApp groups, an email mailing list, secure data management, and so on) were put in place to support their partnership as ACE study team members. Though this did not eliminate some of the inherent power differentials that exist within cross-cultural research teams (for example, planning and implementation roles limited to

the core team for feasibility), it ensured equitable co-production and knowledge generation across the wider study team.

Due to the legal issues around unregulated alcohol production and advertising, the use of anonymity, confidentiality, and spoken consent was the best way to ensure that contributions by community members would not result in any harm as a direct result of their participation as a co-researcher (Banks et al, 2013; Fox and Macpherson, 2015). Other forms of consent would have led to concerns around legal repercussions and social stigmatisation. An additional layer of protection was possible through spoken consent, as the Nepali core team members would ensure that the more sensitive statements were clarified for inclusion, rather than assuming blanket consent was being given.

Similar protection for co-researcher participant information was placed on the digital elements, with a data management plan being the first step completed at the start of the study. Resulting digital artefacts were stored in password-protected and secure shared folders. While the findings from these artefacts are not the focus of this article, it is key to note that the security of study artefacts – and by extension the core and wider research teams – was prioritised throughout the ACE study. Weekly meetings were held with core study team members. These included discussions on:

- Ascertaining activities were in line with ethical and equitable research practices.
- Promoting accessibility of knowledge for all co-researchers.
- Acknowledging and examining roles within the co-production process.
- Developing knowledge dissemination methods for the broadest reach.
- Interrogating the sustainability and replicability of study methods.

Core team meetings allowed for a feasible way to organise and implement ideas for the study for team members with direct support from the study sponsor. While there was no hierarchical difference between these team members, or the wider body of co-researchers, the planning and implementation of the study required some logistical differences and a space where discussions could take place within the time and resource constraints endemic to the research process. Additionally, technology made it possible to have various geographic and chronological bridges, while cultural awareness by all team members helped to shape the 'hows' and 'whens' of collaboration (for example, Sunday as a working day in Nepal, but not in the UK). From these core team discussions, the following considerations were refined as responsibilities of the core team members when working alongside co-researchers:

- Ensure clear identification of being a co-researcher with availability of formal support of the study by key academic partners while acknowledging how that formal relationship might impact your approach.
- Be transparent with co-researchers and other community members encountered to respect the boundaries around information and anonymity within reflections and visualisations (for example, reflection sketches, co-researcher contributions, and photographs) including ensuring consent was given.
- Acknowledging the role of co-researcher as fluid and the importance of revisiting the two points just mentioned if/when conversations occurred with members of the public within commercial spaces.

While these points were developed within the ethnographic cultural asset mapping, they were also applied to the community workshop and community arts festival activities.

Processes

The ACE study comprised a unique combination of creative methods to address alcohol use in Patan (see Luxion et al, forthcoming). Through the ACE study, there were multiple creative and adaptive empirical methods that were implemented to provide a fruitful knowledge exchange. They were selected and implemented by bringing together and balancing multiple sources of evidence, including multiple formats of knowledge (for example, experiential formats as multi-sensory experiences and oral storytelling, formalised empirical knowledge, and policy guidelines and recommendations).

Keeping with the metaphor of *shaking the foundations*, what can be seen with each method and evidence source is a flourishing garden of knowledge that has grown both because of and despite the current approach to alcohol research and policy. The following methods sought to ask if these flowers were rooted in the transplanted Western soil, or if these practices and approaches were rooted in the rich history of the Nepali culture, while speaking with the community about which resources they see as beneficial to water and cultivate. As gardeners of their own well-being, the voices of the local co-researchers needed to be heard within a process that centred their knowledge and reduced the likelihood of meaning being lost within the typical empirical hierarchy that deputises the least experienced (that is, an external researcher) as an expert over people with lived experiences. Thus, the following descriptions and reflections of the methods used within the ACE study will show how and why these activities took place, serving as a guide for researchers seeking to conduct cross-cultural research.

Sensory ethnography

Building on earlier research (Dhital et al, 2023), the area of Patan within Lalitpur was explored at multiple time points by various members of the team. The city's vibrant blend of sights, sounds, and smells created a dynamic backdrop for understanding the community's relationship with alcohol consumption. This included both collaborative explorations and solo walks throughout the region. For example, a walk might entail multiple team members visiting local temples and resources or might be solo journeys down particular roads within the city to examine what is visible (for example, adverts in shop windows) and what is shrouded (for instance, café interiors blocked by curtains) or tucked away (for example, the washing of equipment for making alcohol). One of the core teams members in Nepal (AA) described the experiential method as immersing himself in the sensory landscape, allowing for a deeper connection with the cultural environment and people – akin to Sarah Pink's ethnographic hunch (2021).

This intimate connection with one's surroundings, as a 'conversation' with one's spatial and cultural surroundings, is a strength of this method, which has a rich interdisciplinary history (Pierce and Lawhon, 2015), including cultural understandings of the spaces we move within (Gray, 2009). Thus, the choice of method facilitates a relationship between the researcher and the resources, which includes the voices of the community in context.

The areas for these walks were selected as key social spaces, such as temples, local markets, cafes, and gathering spots, where alcohol–related behaviours could be observed and where community resources were available. Within these periods of witnessing and engagement with spaces and people around Patan, artefacts were noted, documented, and generated through walking as a process of sensory ethnography. This approach served as the anchoring method for a gathering of artefacts, both as tangible outputs documenting the multi–sensory experiences of the researchers and as a transliteration of cultural assets (that is, temples, public spaces, and so on) into a form that allowed for interaction, awareness, and reflection. Steps of observation, transliteration, and documentation aided in both immediate reflection and as outputs themselves.

While such iterative processes might be deemed knowledge generation as the primary aim – which did occur – it is paramount to clarify our use of walking as method was approached cyclically, as it is not possible to separate the researcher from previously gained knowledge when entering and re-entering topical and geographic spaces. With four core team members in Nepal for most of the data collection period, this meant that there were at least four unique journeys and reflections that ultimately formed a library of knowledge and experiences, in place of generalising into a static list of themes, that served as anchoring the evidence source within the study. Additionally, this cyclical approach allowed for the co-researchers carrying out the ethnographic work to consider the perspectives of their colleagues as part of the information synthesis and reflexivity processes.

To achieve this, on a weekly basis, experiences and reflections – as artefacts – were shared between the core team for critical discussions, further reflection, contextualising and cross-examining knowledge, and planning study activities (for example, co-production workshops and the critical realist review) as a means of directly implementing the shared knowledge. Beyond the retelling and recapitulation, the forms these artefacts took ranged from written and drawn diary entries, photographs and videos, and reflections and reconsiderations of both known and unknown artefacts. These artefacts were gathered by four Nepali co-researchers (AA, SB, PK, NL) over a period of four months with the most concentrated period taking place over four weeks (late November to late December 2023). The artefacts were also included as knowledge sources within the critical realist review and the creative co-production activities planning and implementation (to be discussed later).

Creative co-production

Co-researchers

As a knowledge exchange study, co-researchers included researchers and academics in the UK and Nepal, along with community and organisational partners within Patan. A key aim was to ensure collaborators across domains were involved within each stage, including policy makers and people with lived experience. Throughout the team, there was a balancing of roles that fluctuated within each stage of the study. The position of 'researcher' is not to be embodied within this study within a hierarchy of roles. The contribution of community collaborators was seen as equals in generation and synthesis of knowledge from this study. It was essential for this study to include co-researchers who were representatives of the local communities and organisations that are being considered within the evidence read and reviewed as

part of the study activities. Local co-researchers' activities were slightly different from the core team members due to the nature of facilitating roles when hosting activities and to instead enable their contribution with more focus on their experiences, and less concern about certain study implementation details (for example, event planning, hiring rooms, setting dates, and so on).

Thus, attention for the wider group of co-researchers was focused on the multi-level assessment of the provided materials (for example, at individual, community member level, policy maker, academic, and so on). It was important to ensure that the co-researchers were representative of all the levels of interaction being considered. This included checking that both local co-researchers and the core team were interdisciplinary. For the latter, familiarity with a range of academic and artistic approaches to evidence analysis and synthesis was vital. For the core study team, team members came from the domains of public health, social sciences, and the arts, and in some cases from overlapping sub-groups.

Beyond interdisciplinarity, diversity within the study team based on lived experiences brought with it both benefits and challenges that are important to acknowledge and explore. Doing so clarifies the importance of the theoretical foundations used and why reflexivity was central to the methodological process. In this regard, it is key to acknowledge the make-up of an international research team and how those various backgrounds have the potential to influence how we might engage with knowledge sources and the sociocultural spaces in which they are located. For the core team, there were members that spoke only English within the UK contingent, while the remaining members were familiar with English and Nepali at varying levels of fluency. With the study lead as the exception (a Nepali living in the UK), UK team members were primarily non-Nepali; the members of the Nepali team were bilingual (Nepali/English) and familiar with, if not local to, the area of Nepal being explored. This ability to review certain Nepali documentation allowed for retaining the nuance within the Nepali language during the process of shared understanding.

Additional considerations for the core and wider teams were around differences in communication and the importance of ensuring that space was made for everyone to share, reflect, and communicate. This was one of many ways in which the role of co-researcher sought to both equalise roles within the study while building trust and facilitating capacity building at all levels. The transferable skills discussed within co-researcher reflections included reflexivity as praxis, using technologies such as Covidence (literature review software), cross-cultural collaboration, multi-modal approaches, among others. While none of these were without their challenges, the benefits of the study's methodology for the Nepali co-researchers are outputs and resources that were generated as part of the study methods.

Community engagement

The study team conducted three creative workshops that mapped needs, community assets, and policy insights about alcohol harm. These insights culminated in a two-day community festival in August 2024, held within a culturally significant venue and designed as a Nepali-style celebration. During these community engagement activities, we shared details of our initial review of the literature and artefacts. These sessions were opportunities for 'sense making'; in particular, to understand current health and social issues related to alcohol, all while building networks and identifying collaborators for different stages of the ACE study. These creative and participatory

community activities enabled us to understand the diverse voices and experiences surrounding alcohol harm, and the types of support and resources available to communities as well as their support needs.

Alcohol use has received little attention in Nepal, and we have yet to gain a meaningful understanding of the challenges and everyday realities faced by those affected by alcohol harm (Luxion et al, forthcoming). Rectifying this knowledge gap requires building trust, while creating a comfortable and engaging environment with people to share their lived experiences, healthcare practices, and social care; all necessary for promoting equitable knowledge exchange.

Alcohol is a highly stigmatised topic socially, while also showing higher levels of internalised stigma associated with higher alcohol consumption (Rathod et al, 2018); this intricate relationship between stigma and alcohol is found worldwide (Morris and Schomerus, 2023). Therefore, for our community engagement we co-designed and introduced a range of creative activities to enable people to express their ideas and experiences more freely and flexibly to acknowledge and move through the stigma. As detailed in the 'Ethical considerations' section, our communities were co-researchers with us. From the outset, we made it clear that our community engagement work was co-created to explore appropriate methodologies to inform future alcohol research, practice, and policy work in Nepal. Workshops and a community festival within this study allowed us to take a collaborative approach to explore alcohol-related issues as experienced within the Nepali social and cultural context by diverse community members as co-researchers.

Our community engagement approach

We worked with local communities and co-researchers connected with our study site in Patan to expand our network and involve diverse individuals and organisations; in particular, those who would not have been able to engage otherwise. For instance, we invited contemporary artists to collaborate, including fine art university graduates and public health students. We were keen to create opportunities for interdisciplinary engagement. This included bringing together individuals from different professional and cultural backgrounds, not previously considered for collaboration, to explore new connections in their work. For example, some of our artist-researchers discovered new ways of working with the community's Women's Group to explore cultural implications of alcohol use through art making. Creative activities used for this study enabled a form of 'creative language' to be developed to express ideas by our diverse group. We were aware of the diverse backgrounds of our group members (based on gender, age, education, caring responsibilities, work experiences, and other factors) and it was therefore important that we used methods to connect diverse individuals and create a common ground for positive collaborative working. Also based on our previous community scoping work, creative activities were found to be helpful for our communities to feel relaxed, express divergent ideas more freely, and overcome any language and communication barriers. This was important as the group comprised of different ethnic groups with their own dialects and differing experiences of talking openly with those unfamiliar to them.

Creative public health workshops

We conducted three half-day workshops involving creative and participatory activities. The first workshop was held in a training hall in Patan (January 2024). Approximately 30 co-researchers with backgrounds in public health, research, health and social

care practice, education, and policy attended. During the workshop, the group was split into two; one sub-group explored the types of alcohol services and resources available in Nepal, and the other examined services and initiatives that were needed but not available. The sub-groups explored these areas through creative activities, including drawing, painting, writing, and collaging. The room was set up with two large tables with paper and art materials, which allowed each sub-group to move around freely, work with different materials, and engage in discussions to promote a multi-sensory experience during the activities. The sub-groups then shared their ideas by presenting their creative outputs to everyone.

The ideas generated from the workshop were synthesised to identify a range of recommendations for future alcohol service development in Nepal (details to be reported in our critical realist review; see Luxion et al, forthcoming). The workshop facilitators (AA, SB, RD, PK) sought to identify recommendations for future alcohol support services, while observing the process of how this was achieved. For example, the workshop facilitators studied how co-researchers interacted with each other, engaged in creative activities, and selected and applied different art materials to express ideas. For most, this was the co-researcher's first time engaging in creative activities to explore public health issues. It was also interesting to watch how people from diverse backgrounds, unknown to each other, were able to work creatively to explore alcohol harm.

The second workshop was also conducted in Patan (March 2024, facilitated by AA and SB) with local community co-researchers at a community centre. The workshop explored communities' understanding of alcohol harm, their thoughts on community assets, support needs, and ideas about their role in informing government policy about alcohol. Workshop community co-researchers comprised of artists, Female Community Health Volunteers (FCHV; Kandel and Lamichhane, 2019), Women's Group representatives, businesspersons, homemakers, social workers, and students. Community co-researchers suggested working in gender-specific groups to allow for more comfortable, open discussions. Creative activities (drawing, painting, writing, and collaging) were done by both groups, which stimulated creative expression and dialogue among participants, enabling exploration of alcohol harm and policy. Sharing and reflecting between the groups catalysed cross-gender dialogue and added to the enrichment of the discussion itself with diversified views for better understanding of the issues related to alcohol harms and policies.

Co-creating knowledge with diverse communities

Following the second workshop, the study team reviewed concurrent study activities (that is, sensory ethnography and critical realist review). Through this, four key study themes were generated:

- diverse experiences and consequences of alcohol use;
- alcohol-related stigma in Nepali society;
- cultural assets and resources communities possess to reduce alcohol harm; and
- external support required to reduce alcohol harm and promote health.

A third workshop (July 2024) was conducted to expand on these themes through further creative activities within community co-researchers. The workshop was held at the same community centre in Patan, with activities including planning for the festival to be hosted there the following month.

During the workshop, around 40 co-researchers comprising of artists, members of the local Women's Group, and representatives from the local and federal government explored how the art materials could be applied to express ideas and meanings around the four themes. Co-researchers engaged in creative activities such as drawing, painting, collaging, and model-making with artist-researchers. They were divided into one of four groups, each representing a study theme that was facilitated by our study artists. Members of the local community also brought traditional tools used for brewing and consuming alcohol, such as clay pots and serving vessels. During the workshop, we also explored the venue and surrounding courtyard to plan the festival. This walking tour allowed artists and community researchers to gain a better sense of the space to plan our activities. Importantly, this workshop enabled our diverse co-researchers to get to know each other and appreciate the project's interdisciplinary nature.

Community festival process

The community festival in August 2024 was a two-day event aimed to bring ideas and learnings from sensory ethnography work and the three workshops to creatively expand the initial four themes generated from the ACE study. The festival venue in Patan was a space used for religious ceremonies, community meetings, and events. It was from the ACE ethnographic work (AA, SB, NL) and through communities' recommendation that researchers decided upon the venue. The core team co-researchers dedicated time to get to know the community, build trust, and develop their relationship over time, while the community co-researchers learned more about the ACE alcohol study in the process.

Through co-researchers meeting with the local Women's Group, a mutual interest developed to host the festival at their centre. The Women's Group consisted of approximately 18 local women engaged in advocacy work related to social and cultural issues. The women and their community expressed how their work aligned with ACE study aims, ultimately joining the study as co-researchers. During our meetings and workshops, the community expressed they wanted details of the festival to be shared widely, including images and audio-visual recordings of the festival. They wished the work to contribute to the future development of alcohol support for their community and for others. Furthermore, as they expressed, they enjoyed being part of the study and the project was important to them. Therefore, coverage of this event by artist-researchers was documented within blog posts (Maharjan, 2024; Manandhar, 2024; Rai, 2024; Tuladhar, 2024), shared on social media, and featured on the Creative Health Nepal website (https://creativenepal.info/).

Our decision to name the event a 'festival' rather than a 'dissemination conference' was deliberate. Festivals and religious ceremonies are a regular feature of life in Patan and other areas of Nepal. Moreover, Patan is renowned for its rich cultural heritage and vibrant religious practices. These include Hindu and Buddhist ceremonies, which are sometimes celebrated jointly by people during festivals. We decided our event should embody the look and feel of a Nepali festival. As outlined previously we wanted to engage in knowledge-sharing and invite local communities to become co-researchers. These decisions allowed us to gain richer insights into the initial themes, and the creative methodological process.

Creative health artist-researchers

Nepali-based artist-researchers were involved in leading four 'art workstations', each related to one of four themes that had been explored during the third workshop

(see the 'Co-creating knowledge with diverse communities' section of this article). Pre-festival meetings were held with artists and the project team to co-design the creative festival activities and discuss how artist-researchers would engage festival guests with the study themes. The different activities were selected based on artists' creative backgrounds, their preferences, and through exploring ideas with other group members during the third workshop. For instance, we explored how artists could apply their arts-based skills to expand on each of the study themes with communities.

The workstations that explored the themes 'Alcohol-related stigma in Nepali society' and 'Cultural assets and resources communities possess to reduce alcohol harm' included painting, drawing and model-making activities. One artist/co-researcher encouraged participants to explore through two-dimensional art the who and why of alcohol use and dependence to them personally – a challenge given stigma was a newer concept to attendees (Maharjan, 2024) (see Figure 1). Drawings and metaphors were also used to help with discussing topics otherwise socially hidden through the use of creative means in groups (that is, women) otherwise encouraged to stay silent around abuse (Tuladhar, 2024). These workstations were set up in the community centre's courtyard under a covered area. Long tables were arranged with paints, paper, and other materials for festival guests to use (see Figure 2).

The theme 'Diverse experiences and consequences of alcohol use' involved a computer drawing activity where festival guests were invited to share their thoughts or experiences about alcohol, both positive and negative, and the artist would then create an illustration from their stories. This workstation was set up inside the community centre in a darkened room so guests could share their stories with the artists away from the busy festival activities. The workstation related to the theme 'External support to reduce alcohol harm and promote health' was set up in the courtyard under a different covered area within part of a Buddhist shrine. This workstation involved clay work, with two potter's wheels, where artists invited festival guests to make thematically inspired objects with clay (see Figures 3 and 4).

The two-day free festival attracted approximately 200 community members and external stakeholders. Guests were from a range of backgrounds, age groups, and interests in public health. Throughout the festival, guests engaged in creative activities by exploring the different study themes, with guests invited to take their artwork home. The community centre housed a photography exhibition of images taken by core co-researchers during their sensory ethnographic work (see Figures 5 to 8). Other activities included talks and discussions about alcohol, ACE study findings from secondary data, and ideas for future research and support to reduce alcohol harm. The artistic outputs created by the festival guests and community researchers were rich and colourful. The event generated excitement, especially from the creative activities. This was interesting to notice considering the negative stigma surrounding alcohol. The community co-researchers also expressed positive feelings about the event.

Challenges

While there were many successes, artist-researchers also reported several challenges. For example, many of them had never been involved in a health-related project before. They were unfamiliar about the topic of alcohol and study background, which made them feel less confident and sometimes uncomfortable to facilitate their workstations. Similarly, community members sometimes misunderstood the purpose of the creative activity and did not always produce work related to their workstation's

Figure 1: Canvas with prompts related to stigma and alcohol

Source: Freedom Studios.

theme. Nonetheless, artists still encouraged people to engage with their workstation and shared information about the study while guests made their artwork. Artist–researchers expressed it was important festival guests felt comfortable to engage in any creative way they wished, so long as they enjoyed the process. Because these activities were considered new to some guests it was important to understand how people engaged with the process. There were also frustrations about the lack of one-to-one engagement with guests; in particular, to explore alcohol-related topics more deeply in a quieter environment.

Artist-researcher reflexivity

Following the festival, we held an interactive reflection meeting with our artist-researchers to explore their experiences of being part of the study and ideas for future research. Artists also wrote blogs about their experience of the festival that were posted on the Creative Health Nepal blog hosted on Medium (https://medium.com/@creativenepal). Within these blogs, positive aspects of applying creative approaches to public health research were expressed. Examples of these sentiments included highlighting the power of art as a tool to challenge stigma (Manandhar, 2024) while helping to bring about conversations around alcohol that would otherwise be avoided (Manandhar, 2024; Tuladhar, 2024). Additionally, the blog entries as a mode of dissemination – and public engagement – made for quicker and wider knowledge sharing than the traditional, empirical route (that is, academic journals).

Figure 2: Drawings done during festival activities

Source: Freedom Studios.

Figure 3: An artist-researcher working on a clay vessel with a festival attendee

Source: Freedom Studios.

Figure 4: A bottle stating 'Don't drink me' next to other clay vessels made by festival attendees

Source: Freedom Studios.

Critical realist review

Concurrent to the other study activities, the core study team worked on gathering empirical published research, cultural assets, and policy documents, paired with the artefacts from the ethnographic and co-production activities, as part of a critical realist review (CRR; Luxion et al, forthcoming). While there are widely available guidelines for conducting systematic reviews of academic literature, it was deemed most appropriate to augment the RAMESES guidelines (Wong et al, 2013) with the processes of conducting a CRR (Edgley et al, 2016) to implement the theoretical aims of the study. This meant an initial list of search terms and databases were created as per study protocol. As more local knowledge was gained through the supporting activities such as sensory ethnography, workshops, and so on, and through the weekly team meetings, the methodology for this portion of the study was reviewed (for example, additional search terms and local organisations added) and refined (for instance, narrowing and clarifying the exclusion and inclusion criteria). As a more deeply entrenched empirical method, the theoretical challenges for the CRR stemmed from the typical processes expecting knowledge to be synthesised strictly from other empirical sources. Where the research process departed from a classic systematic review was by applying cyclical stages to the development and implementation of review of published materials and artefacts in line with Edgley et al (2016). This was in part due to needing a multi-modal approach for evidence gathering and the lack of 'formalised knowledge' (that is, being more dependent on the other methods to address absences within published literature). Due to the latter, it was important to not treat the process as static and linear as this would limit the ability to find niche areas of research that used local terms and language to discuss the different aspects of alcohol (for example, alcohol brewing, consumption,

Figure 5: Ethnographic image 1

Source: Sushma Bhatta.

marketing, and so on) and the cultural significance of these aspects. Additionally, the range of published sources was available in either English or Nepali, with not all core team members able to read the latter. By leaving these documents in Nepali, it helped to ensure accuracy, retain nuances in understanding, and maintain the balance in the decision making within the CRR process, while allowing time to discuss and revisit these documents throughout this portion of the study.

As with study elements, a key activity in the methods for the CRR was the weekly Teams meetings between members of the core team. While it was not always easy to conduct remote, transnational meetings, there were benefits to being able to connect and discuss the steps of the review. Within the meetings, there was practical detail sharing along with theoretical, conceptual, and ethical discussions about both the process (for example, screening and reviewing) and the evidence (for example, literature, artefacts, and so on). Further means of democratising the process included integration of technology to streamline and track the steps to enable rigour and replicability. Technological resources included the platform Covidence for screening and data management, enabling a transparent and traceable approach. Once the articles and policy documents were refined, the near-final lists of resources – including the cultural assets gathered through the other study activities – were brought into Microsoft Planner to notate and refine the remaining publications/artefacts within a collaborative digital space. These tools provided password-protected spaces, allowing for thorough data security as per the study's Data Management Plan.

Figure 6: Ethnographic image 2

Source: Ankit Acharya.

Forecasting further exploration

Within the study methods, there were both successes and challenges across all the methods employed. In hopes that others can learn from these processes, we will explore how these strengths and challenges link to our recommendations for future research.

Team communication, collaboration, project management, and resources

Study partnerships were made possible through the support of the sponsoring university. For the core study team, this meant the availability of access to software and research databases. The weekly core team meetings helped to ground the study activities while providing a space for effective problem-solving. When helpful, these meetings were accentuated by one-to-one meetings with the senior co-researcher (RD) to make sure that all members of the team felt supported and that individual tasks felt achievable without the pressure of discussing details within a group setting. Having clear roles and responsibilities helped co-researchers feel supported as valued

Figure 7: Ethnographic image 3

Source: Sushma Bhatta.

members of the team. However, any role hierarchies ensured that there was not an associated knowledge hierarchy – for example, academic status never superseded lived experience by default, which is paramount for equitable co-research.

Research within Nepal suffers from the skills and knowledge of local researchers not being encouraged or involved beyond the data collection stage (Agarwal, 2022). Because of this, there were some challenges of turnover. Additional challenges were communication and multi-location working strains, considered in the context of cross–cultural working. To help mitigate these practices and barriers, the study sought to offer support and capacity building as and when interest and resources allowed. Future research design and funding should also enable international researchers to be in the same physical location as much as possible to develop strong working relations and better contextual understanding to create equitable knowledge exchange. Thus, the strengths and unique experiences of all core team members were vital contributions to the study.

Figure 8: Ethnographic image 4

Source: Sushma Bhatta.

Additional recommendations in this domain would be to strengthen institutional guidance and oversight related to the ethical review of participatory and creative research methods. While there is literature available to help guide that process, there needs to be an update within local ethics review committees for those wanting to register studies, regardless of if they are exempted from review. For the documentation of study activities, it would be advisable to have records of the meetings in multiple formats. For instance, with the consent of attendees, the core team meetings were recorded. While this allowed for revisiting details, it still required a substantive amount of time to review what was discussed, when meeting minutes might have streamlined the review process. Administrative support would be beneficial for activities such as these to expand the ability of recording meetings with the wider co-researcher meetings and workshops as well. The latter is difficult to facilitate and record in a manner that would maintain anonymity and decrease reliance on strictly retrospective documentation. Last, but not least, it could be beneficial to have more transparency within the team around which roles and responsibilities are held by various members of the team to ensure that all team members are aware of the tasks that are taking place and to reduce the redundancy caused by communication concerns. This would

in turn help to ensure that tracking of process helped to keep all members of the team on the same timeline for the study.

Knowledge sharing, creative and community engagement, and resources

Within the study activities, we were able to demonstrate it was possible to have positive involvement with artist–researchers and the wider team of co–researchers from diverse backgrounds (for example, community members, policy makers, academics, artists, and so on). There was effective knowledge co–creation and creative outputs generated by the study activities that are likely to further our understanding of harmful alcohol use and policy within Nepal. Because of the documented reflexivity, and strong advisement for its integration, it helps make the methods shared here transferrable. Thus, these same methods could be employed in various contexts across the globe. The caveats to these successes are mostly related to limitations around resources and timelines. For example, the ability to engage the artist–researchers earlier within the study would have helped to improve the planning and preparations for the creative co–production and community engagement activities. The limited time frame was likely responsible for the challenges cited by the artist–researchers for the community festival (for instance, feeling prepared to keep attendees on topic at art–making stations). Having them present within the study from its inception would have reduced planning stresses while providing more lead time for event planning and organising community engagement efforts. Additionally, their earlier involvement would have provided more time to enhance their understanding of the knowledge generated through the study methods.

The nature of the creative methods also supports a sustainable praxis where knowledge generation leads to outputs that provide tangible forms of tacit knowledge. As creative outputs, artefacts become conversation pieces by and within the communities involved. Within the original study timeline, and within traditional models of funding, there are barriers to this inherent sustainability. Better flexibility within funding to account for co–production would help to mitigate these barriers. For the ACE study, it was because of what the community built that there are additional ongoing events at the time of publication, with more planned once further funding is secured. Examples of these events are:

- an art exhibition at a locally renowned contemporary Siddhartha Art Gallery in Kathmandu, open to the public while featuring the work and talks by members of the core team and wider co–researchers/artist–researchers;
- a documentary on the study activities and events; and
- ongoing events and collaborations through Creative Health Nepal network.

Additional future ideas include exhibitions within the UK, further publications on methods and findings, and providing spaces that support interdisciplinary and transdisciplinary creative health careers.

Conclusions

Creative methods can provide a way forward for meaningful engagement with complex topics (for example, alcohol harm) within the sphere of public health, especially in

contexts in which Western epistemologies have become ingrained in or overshadow local epistemologies. However, this must be conducted with an awareness and understanding about possible cultural communication differences. As within some traditional Nepali societies, being open about one's feelings and experiences is not common practice. Therefore, this must be acknowledged and explored with sensitivity during any form of creative enquiry with communities. For global health research, particularly equitable research, it also provides the means of carrying out non-extractive and/or participatory methods. As can be seen within this article, there is a diverse range of methods available that can be tailored to fit the aims and resources available. For the ACE study, this diversity of methods meant ensuring that there was a balance to the co-researchers tending the garden of knowledge, by considering both the core and wider co-researcher teams. This also means ensuring more gardeners are empowered to engage with and propagate helpful knowledge. To have these relationships and impacts, it is important to spend time on strengthening communication by, and within, the study team with awareness of how cultural differences and proximity can be influential; a process that must include cultural humility related to both context and topic, otherwise the cycle repeats existing epistemic fallacies by relying solely on traditional empirical evidence. Further, when a team is spread out geographically, it is especially important to be aware of the limitations of certain methods while also making sure that adequate support is in place for local team members carrying out the methods. Consideration of these aspects of research will help to ensure the implementation and sustainability of creative global health research.

ORCiD IDs
Kate Luxion https://orcid.org/0000-0002-3093-3683
Ankit Acharya https://orcid.org/0000-0001-5497-1353
Stephanie Chang https://orcid.org/0009-0003-4324-833X
Nia Williams https://orcid.org/0009-0003-3550-2721
Kate Allen https://orcid.org/0000-0001-7981-862X
Ranjita Dhital https://orcid.org/0000-0002-4504-7318

as Study Advisor; and Dr Ranjita Dhital (RD) as Principal Investigator and Study Lead. Additionally, our former core study team members: Sushma Bhatta (SB), Prarthana Koirala (PK), Safal Kunwar (SK), and Nirav Lekhak (NL). The following members of the core study team, past and present, brought experience as follows: the arts (KA, SB, SC, RD, KL, KP, NW), creative methods (AA, KA, SB, RD), and public health research (AA, RD, PK, SK, NL, KL). We would also like to thank our artist-researchers for supporting the festival, and Dr Gemma Cornetti (The Work Inclusion Project [TWIP]) for her invaluable administrative support and proofreading this article. It is because of this cross-cultural and interdisciplinary team that this study was made possible.

For the purpose of open access, the authors have applied a Creative Commons attribution (CC BY) licence (where permitted by UKRI, 'Open Government Licence' or 'Creative Commons attribution no-derivatives (CC BY-ND) licence' may be stated instead) to any Author Accepted Manuscript version arising.

Research ethics statement

Through consultation with the study's academic Sponsor and review of the protocol, the study was deemed as not needing formal ethical approval by the local research ethics committee (see University College London 2023 for more detail). This decision was because some of the main sources of knowledge are publicly available evidence (that is, public spaces and secondary data) which allow for exemptions from formal ethical approval. However, it was paramount to the study team that the research be ethically conscious, ensuring all study activities meet or exceed expectations for ethical knowledge exchange.

Within Nepal, local study activities – such as mapping cultural assets and participatory activities – were formally registered and approved by the Social Welfare Council committee in Nepal (SWC registration number: 001711, approved 20 August 2023), ensuring the project proposal was in line with Nepali Government's international project guidelines. Ethical approvals and registration shaped how the knowledge gained can be shared through traditional dissemination channels.

Conflict of interest

The authors declare that there is no conflict of interest.

References

Agarwal, S. (2022) Foreign involvement in Nepalese psychology: how foreigners and their research have shaped the field of Nepalese psychology, *Nepalese Psychology*, 104–32, https://www.researchgate.net/publication/360217600_Foreign_involvement_in_Nepalese_psychology_how_foreigners_and_their_research_have_shaped_the_field_of_Nepalese_psychology.

Alderson, P. (2021) *Critical Realism for Health and Illness Research: A Practical Introduction*, Policy Press.

Banks, S., Armstrong, A., Carter, K., Graham, H., Hayward, P., Henry, A., et al (2013) Everyday ethics in community-based participatory research, *Contemporary Social Science*, 8(3): 263–77, doi: 10.1080/21582041.2013.769618

Bista, B., Dhimal, M., Bhattarai, S., Neupane, T., Xu, Y.Y., Pandey, A.R., et al (2021) Prevalence of non-communicable diseases risk factors and their determinants: results from STEPS survey 2019, Nepal, *PLoS One*, 16(7): e0253605, doi: 10.1371/journal.pone.0253605

Chikritzhs, T. and Livingston, M. (2021) Alcohol and the risk of injury, *Nutrients*, 13(8): 2777, doi: 10.3390/nu13082777

Collins, P.H. (2019) *Intersectionality as Critical Social Theory*, Duke University Press.

Co-Production Collective (2023) Working in partnership with people outside of the university system – Guidance for UCL researchers and staff considering ethics and research ethics, https://cdn.prod.website-files.com/65646dbd542e223348a87bdc/66447bec2b990026b460be97_649e8d6ca8a368541697e090_Ethics%20Guidance.pdf.

Dhital, R. (2024) Guest editorial: a new paradigm for a creative global health, *Perspectives in Public Health*, 144(5): 266–7, doi: 10.1177/17579139241291961

Dhital, R., Yoeli, H., Adhikari, A., Luitel, N., Nadkarni, A., Van Teijlingen, E., et al (2023) Participatory asset mapping and photovoice interviews to scope cultural and community resources to reduce alcohol harm in Chitwan, Nepal, *Perspectives in Public Health*, 17579139231180744, doi: 10.1177/17579139231180744

Edgley, A., Stickley, T., Timmons, S. and Meal, A. (2016) Critical realist review: exploring the real, beyond the empirical, *Journal of Further and Higher Education*, 40(3): 316–30, doi: 10.1080/0309877x.2014.953458

Fox, A. and Macpherson, H. (2015) *Inclusive Arts Practice and Research: A Critical Manifesto*, Routledge.

Gautam, L., Bohara, A., Satyal, J. and Grela, A. (2021) Use, abuse, and associated impacts of alcohol on health and crimes in Nepal, *Annapurna Journal of Health Sciences*, 1(2): 49–55, doi: 10.52910/ajhs.45

Gray, J. (2009) Where truth happens: the Nepali house as mandala, *Anthropologica*, 51(1): 195–208.

Henrich, J., Heine, S.J. and Norenzayan, A. (2010) The weirdest people in the world?, *Behavioral and Brain Sciences*, 33(2–3): 61–83, doi: 10.1017/S0140525X0999152X

Igwe, P.A., Madichie, N.O. and Rugara, D.G. (2022) Decolonising research approaches towards non-extractive research, *Qualitative Market Research: An International Journal*, 25(4): 453–68, doi: 10.1108/qmr-11-2021-0135

IHME (2024) Global burden of disease (Alcohol use disorders in Nepal by age), deaths and DALYs – with minor processing by our world in Data, https://ourworldindata.org/grapher/dalys-from-alcohol-use-disorders-by-age?country=~NPL.

Kandel, N. and Lamichhane, J. (2019) Female health volunteers of Nepal: the backbone of health care, *The Lancet*, 393(10171): e19–20, doi: 10.1016/S0140-6736(19)30207-7

Kunwor, R.R. (1984) Nepalese society: liquor and culture, *Ancient Nepal*, Number 81, https://himalaya.socanth.cam.ac.uk/collections/journals/ancientnepal/pdf/ancient_nepal_81_01.pdf.

Luxion, K., Acharya, A. Williams, N., et al (forthcoming) Alcohol co-design and community (ACE) study critical realist review (placeholder title).

Maharjan, R. (2024) Patan community festival artist spotlight: Rahul Maharjan, Creative Health Nepal: Blog, https://medium.com/@creativenepal/patan-community-festival-artist-spotlight-rahul-maharjan-a526029b9a57.

Manandhar, A. (2024) Patan community festival artist spotlight: Aishwarya Manandhar, Creative Health Nepal: Blog, https://medium.com/@creativenepal/patan-community-festival-artist-spotlight-aishwarya-manandhar-5b52487de6fc.

Morris, J. and Schomerus, G. (2023) Why stigma matters in addressing alcohol harm, *Drug and Alcohol Review*, 42(5): 1264–8, doi: 10.1111/dar.13660

Niedderer, K. (2007) Mapping the meaning of knowledge in design research, *Design Research Quarterly*, 2: 2, https://wlv.openrepository.com/handle/2436/38736, doi: 10.21606/nordes.2007.002

Pandey, A.R., Chalise, B., Shrestha, N., Ojha, B., Maskey, J., Sharma, D., et al (2020) Mortality and risk factors of disease in Nepal: trend and projections from 1990 to 2040, *PLoS One*, 15(12): e0243055, doi: 10.1371/journal.pone.0243055

Papademas, D. and the International Visual Sociology Association (2009) IVSA code of research ethics and guidelines, *Visual Studies*, 24(3): 250–7, doi: 10.1080/14725860903309187

Pierce, J. and Lawhon, M. (2015) Walking as method: toward methodological forthrightness and comparability in urban geographical research, *The Professional Geographer*, 67(4): 655–62, doi: 10.1080/00330124.2015.1059401

Pink, S. (2021) The ethnographic hunch, in A. Ballestero and B.R. Winthereik (eds) *Experimenting with Ethnography*, Duke University Press, pp 30–40, doi: 10.1215/9781478013211-004

Rai, B. (2024) Patan community festival artist spotlight: Binu Rai, Creative Health Nepal: Blog, https://medium.com/@creativenepal/patan-community-festival-artist-spotlight-binu-rai-3e0173374bea.

Rathod, S.D., Luitel, N.P. and Jordans, M.J.D. (2018) Prevalence and correlates of alcohol use in a central Nepal district: secondary analysis of a population-based cross-sectional study, *Global Mental Health*, 5: e37, doi: 10.1017/gmh.2018.28

Rehm, J. (2011) The risks associated with alcohol use and alcoholism, *Alcohol Research & Health*, 34(2): 135–43, doi: 10.1111/j.1360-0443.2010.03167.x

Roser, M., Ritchie, H. and Spooner, F. (2024) Burden of disease, our world in data, https://ourworldindata.org/burden-of-disease.

Samokhvalov, A.V., Popova, S., Room, R., Ramonas, M. and Rehm, J. (2010) Disability associated with alcohol abuse and dependence, *Alcoholism, Clinical and Experimental Research*, 34(11): 1871–8, doi: 10.1111/j.1530-0277.2010.01275.x

Sapkota, B.D., Simkhada, P., Newton, D. and Parker, S. (2024) Domestic violence against women in Nepal: a systematic review of risk factors, *Trauma, Violence & Abuse*, 25(4): 2703–20, doi: 10.1177/15248380231222230

Sørensen, J.B., Tayebi, S., Brokhattingen, A. and Gyawali, B. (2022) Alcohol consumption in low- and middle-income settings, in V.B. Patel and V.R. Preedy (eds) *Handbook of Substance Misuse and Addictions*, Springer, pp 1111–29, doi: 10.1007/978-3-030-92392-1_59

Tuladhar, K. (2024) Patan community festival artist spotlight: Kripa Tuladhar, Creative Health Nepal: Blog, https://medium.com/@creativenepal/patan-community-festival-artist-spotlight-kripa-tuladhar-96fe85389dd2.

University College London (2023) *Do I Need Ethical Approval?*, UCL Research Ethics, https://www.ucl.ac.uk/research-ethics/do-i-need-ethical-approval.

Whelpton, J. (2005) *A History of Nepal*, Cambridge University Press.

Wong, G., Greenhalgh, T., Westhorp, G., Buckingham, J. and Pawson, R. (2013) RAMESES publication standards: realist syntheses.

World Health Organization (2024) *Global Status Report on Alcohol and Health and Treatment of Substance use Disorders*, World Health Organization, https://iris.who.int/bitstream/handle/10665/377960/9789240096745-eng.pdf?sequence=1.