

My submission addresses terms of reference 2, 3 and 7: How might health and medical research be best managed and funded in Australia?

I have experienced the medical research funding environment from both sides, as a researcher as well as a member of grant review panels for various funding bodies, national and internationally. From this experience I have formed a firm opinion that the bulk of any increase in medical research funding should be directed to Project Grants. These are projects initiated by small groups of investigators, and open to early career researchers, which are focused on specific aims achievable within a time of 3 to 5 years. This is the type of research funding which leads to the most innovative outcomes, since the assessment process allows more room for testing new, more adventurous approaches.

In comparison, Program grants and other types of block funding tend to favour teams that distinguish themselves for past achievements, leading to a more conservative approach. I also believe that Project Grants enable the closest tie between the stated aims, as assessed by grant review panels, and measurable outcomes. When one considers these factors in light of the fact that Project Grants typically involve lower amounts of funding, it is clear, from my experience, that these represent more solid returns per invested dollar, in comparison with Program Grants and special initiatives such as funding for establishment of new Institutes.

The balance of funding between Project Grants and Program Grants/ Institutes has always been contentious. I believe that the Program Grant system has been running now for a sufficiently long time to enable painting of a clear picture regarding cost/ benefits. From where I stand, the message is clear- the funds invested in Programs would have been much better spent by increasing the funding base for Projects. Moreover, with rare exceptions, Program grants have proven to be an impediment for the career progression of young researchers, again leading to conservative science. Whereas I recognise that some exceptions exist, I strongly feel that it is time to increase the funding base for Projects, in both relative and absolute terms, and to create initiatives for facilitating the career development of early career researchers.

Keeping this in mind, I have the following recommendations, which I'd like to see considered by the review panel.

1. Increased funding for medical research is important. I am sure other submissions will have addressed this point in detail. However, my key point is that any increased funding needs to be specifically channelled to an increase in the funding for Project Grants.
2. Increased funding for Project Grants should enable the creation of a new category of Project Grants specifically aimed at early career researchers. Medical

researchers within 5 years of the award of a PhD should be eligible for this funding, perhaps (this is debatable) with the requirement that they nominate a mentor. The assessment and application process for these grants should be streamlined, with focus on the quality of the research plan and of the research environment where the project is to be carried out. A simplified budget system (perhaps salary plus a fixed amount of maintenance, for 3 years only) could be implemented so that the focus of the assessment process stays with the project.

3. Measures should be taken to facilitate the award of 4 or 5 year project grants when this is justified on scientific grounds. Whereas I know that these are theoretically available, in practice the grant review panels are always under pressure to reduce budgets due to the limited funding.

4. Overall, the funding of Project Grants should stay in the range of no lower than 25% of the applications. This is in my experience the minimum to make justice to projects that are clearly outstanding by world standards.