



The Australian Society for Medical Research

Submission to: National Health and Medical Research Council (NHMRC)

CONSULTATION PAPER
Current and Emerging Issues for –NHMRC Fellowship Schemes

June 2015

Declaration of Interests

The Australian Society for Medical Research (ASMR) represents members from the health and medical research sector including researchers from universities, hospitals, research institutes, medical colleges, and patient groups.

Some members are recipients of funding from the Australian and/or State Governments bodies, including the National Health and Medical Research Council (NHMRC), and the Australian Research Council (ARC).

ASMR receives direct funding from the NHMRC for ASMR Medical Research Week[®], a public outreach program that raises public awareness of medical research in Australia.

The Australian Society for Medical Research (ASMR):

Since 1961, ASMR has provided advice to government on behalf of the Health and Medical Research (HMR) Sector. The ASMR proudly represents more than 1700 direct members and more than 120,000 additional Australians through our affiliated professional societies, medical colleges and corporate/disease related foundation members.

Importantly, our advice is always evidence based, and our goal is to assist government in developing policy that allows our country's highly skilled health and medical research workforce to maintain, and expand their contribution to the health and economic wellbeing of all Australians.

Australia faces unprecedented health and economic challenges over the next 50 years, with predicted unsustainable escalation of health care costs and an ageing population. Australian health and medical research underpins the Nation's health care system. There is overwhelming evidence that a viable and competitive health and medical research sector can mitigate Australia's current and future health and economic challenges.

NHMRC Fellows – Excellence in Health and Medical Research – Australia's Future:

Our health and medical research workforce are world class and highly skilled contributing to improving health nationally and globally. To continue to do so we need support from the federal government. The ageing population and financial climate is an opportunity to invest in Australia's future right now.

The NHMRC Fellowship scheme has supported many of Australia's internationally recognised leaders in health and medical research. Importantly, it has created a platform for support of research intensive leaders and currently such positions are almost unheard of in our universities and institutes today. 'People support' in the form of fellowships and backing our young rising stars, future leaders and current leaders is essential to continue to build intellectual capacity and improve health outcomes for all Australians.

Investment into NHMRC has remained static since 2011 and is projected to remain so for the next 4 years. In real terms this is a declining government investment into the health and medical research sector. This has placed never before seen pressure on both the NHMRC fellowship and project grant schemes. As a direct result of this, the health and medical research community is faced with the difficult task of suggesting a solution via this consultation paper. ASMR strongly believes that the only solution is an immediate injection of funds into the NHMRC medical research endowment account – to ensure a viable sector, which continues to support its high calibre research fellows without negatively impacting the availability of funds to actually do the research via project and program grants.

ASMR has addressed the consultation questions below taking into account the current squeeze on the government's investment into NHMRC. Our advice is therefore not a solution to the current problem and we would hope that any changes which are made to the NHMRC fellowship policy are revisited if Government reconsiders its investment into NHMRC in the future.

Question 1: How should NHMRC's funding balance between research grants and fellowships be adjusted as the total number of Project Grants available falls progressively over the next few years?

Fellows in Australia are future and current research leaders and are an essential component to continued research excellence. Cutting from either the fellowship or project grant scheme will have significant negative effects on the other scheme. Without project grant funding, fellowship holders will have less funds for them or their team members to carry out the research. Importantly, NHMRC fellows (CDF-AF) concurrently held project grants on average 78.3% of the time from 2011-2015 (Supplementary table 1). This highlights the fact that NHMRC fellows are highly successful at attracting

highly competitive NHMRC project grants. Based on the lack of investment from Government and the forward estimates remaining static into the medical research endowment account (MREA), ASMR advises that the number of project grants awarded per fellowship is maintained at the current ratio of 1.9 until funding levels increase. ASMR recommends that the sector requires evidence (from modelling data) to determine the optimum balance between project grants and fellowship grants before the current ratio is changed. ASMR also suggests that given the current static funding and the pressure on the ratio's of project grants to fellowships, that NHMRC could consider limiting the number of projects grants a CI can hold. ASMR suggests that the maximum number of project grants be 4, rather than currently, where a CI can hold 6 project grants with a duration of 5 years each.

Question 2: To increase the turnover of NHMRC Research Fellows, should these schemes be seen as 'up and out schemes', whereby Fellows wishing to reapply can only do so at a higher level?

If the investment into NHMRC remains static, then yes the NHMRC fellowships should be seen as 'up and out' schemes. This is currently the case for ECR and CDF fellowship holders i.e. applicants can only hold one fellowship at each level. Currently, senior fellows can hold unlimited fellowships, which while we agree are highly deserved, in the current climate there are no funds to provide such support. Taking this support away from our senior fellows without guaranteed support from institutions will have significant long-term negative impacts on health and medical research in Australia. The Universities and Institutes should value previously successful NHMRC fellows and provide a long-term career support structure, which will require a sustained funding model. ASMR recommends that NHMRC and ARC can play a role in working with institutions to establish such a framework for career stability for research intensive academics. ASMR cautions that the 'up and out' scheme, is likely to have even greater negative effects on women who are more likely to take significant time off for family responsibilities. NHMRC will have to carefully consider the requirements for eligibility if you can only hold one senior research fellowship.

Question 3: Are there too many Fellowship levels? Does this structure impede the career progression of rapidly rising stars in health and medical research?

The current levels are appropriate for the different career stages. The structure does not impede career progression; the major impediment currently to career progression is the lack of government investment. It is a national concern that our top ranked (excellent-outstanding) fellows have no certainty of securing a fellowship or a tenured position at their university or institute. This devalues a career in health and medical research to our aspiring young health and medical researchers. With regard to referring to our current fellowship scheme as a pyramid structure, ASMR would like to point out that the structure is represented more accurately as an hour-glass. In 2014, 433 senior fellowships, 256 Career development fellowships and 600 early career fellowships were funded. The majority of Career Development Fellows or mid-career researchers will go on to be the future leaders of health and medical research in Australian and we need to ensure succession planning in this country. In addition, with the reduced NHMRC project grant success rates this places additional pressure on mid-career researchers. ASMR recommends in the current fiscal climate that an equal number of ECR fellowships and CDF I/II fellowships are awarded/funded.

Question 4: Taking into account that awarding longer grants means fewer grants overall in steady state funding, should NHMRC extend the duration of Early Career Fellowships to more than four years? Should the Career Development Fellowship be extended beyond 5 years to, say, seven or ten years?

ASMR cannot recommend longer term fellowships until there is increased investment into the fellowships scheme, as this will significantly reduce the success rates and we will lose a large number of talented young researchers from the sector. We respond in the same way to increasing the term of CDF fellows. Note, ASMR favours the move towards longer term security for fellows as evidence suggests this fosters innovation and discovery, but this requires increased investment into NHMRC medical research endowment account before we can endorse these changes. A future consideration (if government commits to increased investment) should be to fully cover fellowship salaries (i.e. currently there is a significant gap between NHMRC salary scales and university salary scales) and also provide fellows with a project grant to build capacity and have an impact. In the current situation, a researcher having been awarded a highly competitive fellowship and ranked by their peers as excellent to outstanding may miss out on their NHMRC project grant and be faced with the situation of not being able to carry out the research they propose in their fellowship application.

Question 5: Should NHMRC identify particular areas that require capacity building for the future and maintain support for those areas for long enough time to make a difference? What else should be done to support women and increase participation and success by Aboriginal and Torres Strait Islander researchers?

ASMR would like to see the best quality health and medical researchers funded via fellowships, rather than just funding fellows in particular areas. Targeted calls for project or program grants to build capacity in areas of need would make more sense. This will allow training and mentoring of researchers in priority areas, with the excellent researcher leaders being competitive for fellowships. ASMR and the sector is alarmed by the most recent statistics regarding the decline in support for women for both project grants and fellowships (11% women in senior fellowships and only 34% women Chief Investigators on project grants). This year's predicted drop in project grant success rates (below 10%) will result in even greater attrition of women from the sector. To help resolve this, Grant review panels require more detailed information on how to judge the 'relative to opportunity' and career disruption sections. NHMRC is to be commended for their strong efforts to improve attitudes towards women within universities and institutes, but should consider linking adequate institutional support structures/policy in order to be eligible for NHMRC grants.

As a society we need to provide our indigenous researchers with opportunities to lead research programs and the relative to opportunity needs to be re-evaluated. There has been a large gap in support for indigenous researchers over a long period of time and often their track records may not be comparable to a non-indigenous researcher with the same years of experience. ASMR recommends a national survey of indigenous researchers so that NHMRC and institutions can establish an adequate support structure to increase grant and fellowship success rates. After all, it is the diversity of our workforce that will foster innovation and capacity.

Question 6: Is there a better solution to encouraging diversity in careers than those based on years post- PhD?

ASMR acknowledges that year's post-PhD may not be the ideal approach to encourage diversity in our NHMRC research fellows. This is particularly the case, when judging track records of researchers who have not taken a 'traditional' Australian research route, such as those who have moved from overseas,

those who wish to return to academia following a stint in industry or those who are also a teaching academic. ASMR recommends that more guidelines be provided on 'relative to opportunity' when judging track records of researchers in these circumstances. ASMR encourages diversity and transdisciplinary research, however current PhD's in Australia are almost all designed to produce research based post-doctoral scientists. There is a lack of training for other careers which would benefit from a PhD. If Australia and Government would like to see researchers with PhD's move into a diverse range of careers, then additional investment into diverse training needs to be considered at an early stage in a researcher's career.

Question 7: Should employing institutions be expected to provide more certainty to their employees than now?

Yes. Institutions utilise research outputs as a measure of their success and they should value the long-term commitment from their hard working highly skilled research fellows. Institutions have a responsibility to cover the current gaps in salary for fellowships and provide guaranteed continued salary support for at least 2 years following award of an NHMRC fellowship.

Question 8: Would this be achieved if NHMRC required institutions to commit to one or more years of ongoing support for researchers exiting from NHMRC Fellowships?

Yes – this should be compulsory. ASMR recommends that for successful fellows (all levels and schemes), the institutes should commit to 2 years additional bridge funding. ASMR also recommends that if the fellowship scheme is 'up and out' that institutions provide long-term support for their senior and principal NHMRC research fellows. Often, these senior fellows have maintained continuous NHMRC fellowship support for most of their career and institutes have a responsibility to ensure long-term support for these staff. In addition, NHMRC fellows significantly contribute to the service of their institutes and in training the next generation of scientists.

Question 9: Should this be restricted to Early Career and Career Development Fellows?

No, ASMR recommends it is a support required at all levels of the scheme.

ASMR is happy to provide NHMRC with further consultation on the NHMRC Fellowships scheme at your request.

Yours Sincerely,



Dr Phoebe Phillips

President, ASMR