

Improving alignment and coordination between the Medical Research Future Fund and NHMRC's Medical Research Endowment Account (MREA)

A Dementia Australia Submission

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Dementia Australia

Dementia Australia is the peak dementia advocacy organisation in Australia. We support and empower the more than 400,000 Australians living with dementia and 1.5 million people involved in their care. Founded by carers more than 35 years ago, our organisation engages with people with dementia, their families and carers in our activities, planning, policy and decision-making, ensuring we capture the diversity of the lived experience of dementia across Australia. Our advocacy amplifies the voices of people living with dementia by sharing their stories and helping inform and inspire others. As the trusted source of information, education and support services, we advocate for positive change for people living with dementia, their families and carers, and support vital research across a range of dementia-related fields.

Dementia in Australia

Dementia is the term used to describe the symptoms of a large group of neurocognitive disorders which cause a progressive decline in a person's functioning. Dementia is the second leading cause of death, and after coronary heart disease, the second leading cause of burden of disease in Australia. However, it remains one of the most challenging and misunderstood conditions. Without a significant medical breakthrough, it is estimated that there will be more than 800,000 people living with dementia in Australia by 2058.

Dementia research in Australia

Dementia is the second leading cause of death in Australia and continued investment in dementia-related research is critical in minimising its impact in the future. There are a number of key research focus areas related to dementia, the most prominent being investigations into dementia causation, and the development of new interventions and treatments and ultimately a 'cure'. There is no single test that can accurately diagnose dementia, so research aimed at developing better and more accurate methods of diagnosis is an equally important focus. Given the absence of any significant disease-modifying treatment for dementia, research initiatives that advance developments in psychosocial care and support, and focus on improving the well-being and quality of life for people living with dementia, their family members and carers, are vital. Over the past decade, an increasingly significant body of research has looked at dementia risk factors, the efficacy of risk reduction measures and the nexus between lifestyle and genetic factors. All of these research endeavours are aimed at improved understanding of dementia, dementia prevention, diagnosis and treatment, and supporting quality of life and provision of care for people living with the condition.

Funding from the National Health and Medical Research Council (NHMRC) and the Medical Research Future Fund (MRFF) has been integral to the support of significant dementia-related projects and research initiatives in the past and will be critical for the continued and concerted focus on dementia-related research in Australia in the future. Over the last decade, the NHMRC has awarded over \$505 million in direct funding to 456 dementia research projects. Dementia Australia was pleased to partner with the NHMRC in the Boosting Dementia Research Initiative, a significant funding allocation aimed at the strategic expansion of dementia research and concluded in 2020.

Since its inception in 2015, the MRFF has been an equally important source of funding for dementia-related projects. The two streams of the current 2023 Dementia, Ageing and Aged Care Grant Opportunity, supporting projects that improve access to effective preventive health interventions and improve the quality of care provided to older Australians respectively, are evidence of the significant contribution that MRFF funding continues to make in this context, particularly in relation to research initiatives focussed on psychosocial and related developments in dementia support and care.

Improving alignment and coordination between the Medical Research Future Fund and NHMRC's Medical Research Endowment Account (MREA)

Dementia Australia supports the imperative to optimise the government's current funding arrangements for health and medical research by improving strategic alignment and coordination between the MRFF and the MREA. We note that this was a key recommendation from a recent report from the Australian Academy of Health and Medical Sciences. The report supported 'a mechanism for stronger strategic harmonisation between funders, particularly the NHMRC and the MRFF, so that there is an optimal coordinated research response to established and new threats to the nation's health.' iii The authors argued for closer alignment of the governing mechanisms of the MRFF and the NHMRC and went on to note that improved coordination and harmonisation between the MRFF and the NHMRC would reduce complexity and duplication of effort for the sector. The lack of clarity within the sector about how funding programs fit together and the overarching funding strategy was seen as impediment which could be addressed by better coordination. The report also suggested that investment in shared administrative support for awarding and managing research funding would result in more efficient and effective management which would in turn ensure that investments in research provide value for money and reflect agreed strategic aims. Importantly, the authors argued for more clearly defined roles for the NHMRC and the MRFF. iv

Dementia Australia believes that all of the points raised in the Australian Academy of Health and Medical Sciences report are compelling arguments for a revision of the existing arrangements between the NHMRC and the MRFF. In addition to the issues outlined above, there are many benefits in harmonising the MRFF and NHMRC funding schemes including improving the application submission process, better coordination of application deadlines, expanding the availability of peer reviewers and consolidation of the post-award administrative processes.

Dementia Australia would therefore support either of the first two proposed approaches. We believe that managing the MRFF and MREA separately but with a new coordination mechanism facilitating collaboration and alignment of investment and policy between the two funds is an appropriate solution to aligning and harmonizing the two funds. Equally, transitioning the MRFF to the NHMRC, but *maintaining the two separate funding streams with distinct funding responsibilities* (our italics) under unified governance and administrative arrangements, is an equally reasonable compromise.

Dementia Australia has significant reservations about the proposed third model, which would merge the MRFF and NHMRC and disburse funds as a single grant program managed by the latter. While this model notes the need for 'careful design of new governance arrangements to preserve the unique value of the MRFF and MREA investment streams,' Dementia Australia believes that there would be a potential risk that the MRFF might lose its strategic benefits and 'unique value' if fully merged into the NHMRC system. There is a broadly held belief amongst researchers that the NHMRC has a concerted biomedical research focus. There is an equally strong perception amongst dementia researchers that the MRFF supports psychosocial and translational dementia-related research projects, and that this support might be reduced or entirely negated if the fund was merged with the NHMRC. There is also a perception that the eligibility criteria for an MRFF grant will be absorbed by NHMRC, potentially resulting in organisations who are currently eligible to apply for MRFF funding no longer being able to do so under an NHMRC framework.

Conclusion and recommendation

The NHMRC and the MRFF are the largest sources of Australian Government health and medical research funding in this country and as such, should set the standard for an integrated and transparent funding landscape. Dementia Australia believes that harmonising and coordinating these two funding streams, but maintaining the unique qualities of both will ensure that we maintain our competitiveness in international research

Recommendation:

Dementia Australia supports Model 1 and Model 2 to improve the alignment and coordination between the Medical Research Future Fund and Medical Research Endowment Account. Dementia Australia does not support the adoption of Model 3 for the reasons outlined above.

Dementia Australia is grateful for the opportunity to make a submission to this consultation and would welcome further opportunities to discuss the issues and recommendations raised in this submission.

i Australian Institute of Health and Welfare (2022) Dementia in Australia, AIHW, Australian Government, accessed 20 January 2023.

ii Australian Institute of Health and Welfare (2022) Dementia in Australia, AIHW, Australian Government, accessed 20 January 2023.

iii Australian Academy of Health and Medical Sciences (2022). Research and Innovation as Core Functions in Transforming the Health

System: A Vision for the Future of Health in Australia. www.aahms.org. p.10

^{iv} Australian Academy of Health and Medical Sciences (2022). Research and Innovation as Core Functions in Transforming the Health System: A Vision for the Future of Health in Australia. <u>www.aahms.org.</u> p.47