

# NBHRF eWEEKLY NEWSLETTER

AUGUST 31—SEPTEMBER 6 2015



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## TOP STORY: RESEARCHER OF THE MONTH

On Saturday September 5th Dr. Angela McGibbon was introduced in the Telegraph Journal and L'Acadie Nouvelle as the Clinical Health Researcher of the month. For full story, [click here](#).

Dr. McGibbon is by design nominated for the Clinician Researcher of the year which will be announced at this year's Annual NB Health Research Conference Gala of Excellence November 3<sup>rd</sup>. For more, [click here](#).

## Editorial—NBHRF President & CEO:

This week I revisited the recent CIHR Foundation scheme results. You might think that there really isn't much to say about getting "nil". Well, we analyze and learn every day from these experiences and this past week I had two quarterly teleconferences (National Funders and NAPHRO) that awakened the need for me to further discuss the results. You will find below 2 tables prepared by my colleagues in Newfoundland and Manitoba for which I extend my thanks.

Table 1. The Canadian provincial profile of success.

CIHR Foundation Grants (2015)				
	Total CIHR Contribution	# of awards	Province Populations	Per capita
ON	\$197,687,056	64	12,851,821	\$15.38
QC	\$106,502,706	39	7,903,001	\$13.48
BC	\$53,034,096	22	4,400,057	\$12.05
AB	\$30,542,665	15	3,645,257	\$8.38
MB	\$3,732,853	3	1,208,268	\$3.09
NS	\$2,456,031	1	921,727	\$2.66
SK	\$0	0	1,033,381	\$0
NB	\$0	0	751,171	\$0
NL	\$0	0	514,538	\$0
PEI	\$0	0	140,204	\$0

Table 2. Foundation Scheme Research Pillars' Profile in Funded \$.

	Biomedical	Clinical	Health systems/services	Social/population health	Total	% distribution
Ontario	\$144,907,901	\$23,594,133	\$14,971,500	\$16,708,904	\$200,182,438	49.9%
Quebec	\$64,792,993	\$13,425,149	\$8,331,486	\$19,953,078	\$106,502,706	26.5%
Alberta	\$21,693,256	\$8,124,248	\$5,428,474	\$-	\$35,245,978	8.8%
British Columbia	\$29,624,069	\$6,626,982	\$3,057,948	\$13,725,094	\$53,034,093	13.2%
Nova Scotia	\$2,456,031	\$-	\$-	\$-	\$2,456,031	0.6%
Manitoba	\$-	\$-	\$-	\$3,732,853	\$3,732,853	0.9%
Total	\$263,474,250	\$51,770,512	\$31,789,408	\$54,119,929	\$401,154,099	100.0%
% distribution	65.7%	12.9%	7.9%	13.5%	100.0%	

So, what are the observations that come out : (1) This new national program was engineered from the get-go by CIHR; really no surprise (and with the OOGC-Open Operating Grants competition results, also no real surprise): 4 provinces win them all ! ; (2) The reformed peer-review system is not working. It is like asking the wolf to guard the sheep, meaning that those peer-reviewers are - for the majority - from these same 4 big provinces, judging peers from those same provinces. The results by pillars, (62% is in biomedical health research - again where labs and animal facilities developed over decades are in those same 4 provinces where there are related CFI, CRC and other federal grants) also illustrate that the unbalance remains - we collectively have failed to support research that would help healthcare delivery services and social population health knowledge and knowledge transfer; (3) the need for capacity building in 6 provinces remains. Question: Are the new program and the transformed peer-review process delivering on their promises ? For sure giving Foundation Scheme grants for 7 years will reduced some administrative burden.

So, lets offer solutions, not only complaints. We can be unsatisfied that NB and the six smaller Canadian provinces, did not get their fair share of federal funding for health research (remember that those are the ones that used to receive the defunct RPP (CIHR-Regional Partnership Program) funds to the equivalent of \$1M per year per province that supported a 1:1 partnership of projects with meritoriously scientific scoring (except for NB, with \$200K/y). The Foundation Scheme could be revisited to ensure that emerging talents are a part of this new program.

144 grants have been confirmed (up to a potential 150). The 4 most populated Canadian provinces snatched 140 of them (97%) for \$387,766,520. If we were to readjust that exceptional % down to 82% of the total number of grants, 118 Foundation grants would still be attributed to those same 4 provinces while 18% (=26 grants) would be distributed to the best talents in the 6 other provinces: 6 in Manitoba, 6 in Saskatchewan, 5 in Nova Scotia, 4 in Nfld&Lab, 4 in New Brunswick and 1 in PEI. This is a possible solution to the current structure of a new national program that is dis-serving to many of us, scientifically and financially.

Dr. Bruno Battistini, President & CEO – Scientific Director, NBHRF / New Brunswick Health Research Foundation



**Articles in the Press:**



Vitalité advises changes coming to health-care services. For more, [click here](#).

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