Medical Research  
Future Fund

Financial assistance to support the Australian Medical Research and Innovation Priorities 2020-2022

May 2023

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# Introduction

The Health and Medical Research Office (HMRO) within the Department of Health and Aged Care (the Department) is responsible for the management of the Medical Research Future Fund (MRFF). The HMRO is committed to transparency of information within the operational framework of the Department’s policy and legislative requirements, including obligations under the *Privacy Act 1988*.

The Australian Government established the MRFF under the *Medical Research Future Fund Act 2015* (MRFF Act) to provide grants of financial assistance to support health and medical research, improve health outcomes, quality of life and health system sustainability. MRFF funding is primarily disbursed through expert-reviewed competitive processes to ensure the integrity of the research design, quality and safety for patients, and best return on Australian Government investment.

This report presents information required under the MRFF Act. The report also provides updates on the operation of the MRFF and analysis of the grants provided by the MRFF.

Further information is at the [MRFF website.](https://www.health.gov.au/our-work/medical-research-future-fund)

# Background

## Purpose of this report

The *Medical Research Future Fund Act 2015* (MRFF Act) requires the Health Minister to report to Parliament on the financial assistance provided for medical research and medical innovation from the MRFF Special Account during the time the most recent Australian Medical Research and Innovation Priorities were in force.

Accordingly, this report presents the financial assistance provided from the MRFF   
Special Account for the period when the *Australian Medical Research and Innovation Priorities 2020–2022* (2020–2022 Priorities) were in force; from 7 November 2020 to   
5 November 2022.

As required under the MRFF Act, this report:

* describes how the financial assistance provided was consistent with the 2020–2022 Priorities
* describes the processes for determining the grants of financial assistance
* includes information about any other financial assistance provided by the Australian Government for medical research and medical innovation.

The report also provides other information about the MRFF, including details of grant opportunities, grants awarded, and statistics such as funding rates, some of which dates from the inception of the MRFF.

## Australian Medical Research Advisory Board

The second Australian Medical Research Advisory Board (AMRAB) for the MRFF was announced on 17 September 2021 for the period 2021-2026. Professor Ian Frazer AC continued as the Chair, and Professor Caroline Homer AO was announced as the inaugural Deputy Chair.

The following members continued to serve on the second AMRAB: Mr Yasser El-Ansary; Professor Doug Hilton AO; and Professor Anne Kelso AO.

The following members were newly appointed to the second AMRAB: Professor Tom Calma AO; Professor Denise Doolan; and Ms Imelda Lynch.

## Australian Medical Research and Innovation Strategy and Priorities

The MRFF Act establishes the independent AMRAB to determine the:

* Australian Medical Research and Innovation Strategy (the Strategy) every 5 years
* Australian Medical Research and Innovation Priorities (the Priorities) every 2 years.

The MRFF Act requires the Health Minister to consider the Priorities when making decisions about the financial assistance provided from the MRFF Special Account.

AMRAB developed the first *Australian Medical Research and Innovation Strategy 2016-2021* (2016–2021 Strategy) in 2016 after extensive public consultation.

While the 2020–2022 Priorities were in force, AMRAB developed the second *Australian Medical Research and Innovation Strategy 2021-2026* (2021–2026 Strategy) in 2021 after extensive public consultation.[[1]](#footnote-2)

The 2021–2026 Strategy intends to:

*Transform health and medical research using priority-driven investments that promote collaborative research, research innovation, research translation and impact to improve lives, whilst contributing to health system sustainability, nurturing the next generation of researchers and building the Australian economy.*

Table 1 lists the 2020–2022 Priorities. As required by the MRFF Act, the Priorities must be consistent with the Strategy that is in force.

Both the MRFF Strategy and Priorities are informed by national consultation, as required under the MRFF Act. The 2020-2022 Priorities were consistent with both the 2016-2021 Strategy and the 2021-2026 Strategy.

Table   
Australian Medical Research and Innovation Priorities 2020–2022

|  |  |  |
| --- | --- | --- |
| Platform | Priority | Description |
| Strategic and international horizons | One Health — Antimicrobial Resistance | There are no borders between human and animal health when it comes to antimicrobial resistance (AMR). Research into stewardship practices, diagnostic and treatment tools, preventative measures, and new or novel antimicrobials and vaccines that spans this divide is critical. |
| Global Health  and Health Security | Global health challenges including health emergencies and pandemic preparedness, the impact of climate and environmental change on health, and the development and implementation of low technology preventative, diagnostic and treatment solutions are best addressed through international research collaboration. |
| Aboriginal and Torres Strait Islander Health | Indigenous leadership and Indigenous-led priority setting to drive health-related research to improve the health of Aboriginal and Torres Strait Islander Australians and to close the gap on health mortality and morbidity. |
| Ageing and  Aged Care | Research into the diseases of ageing and the means to prolong quality of life, including tackling cognitive decline and dementia, and compressing the period of intense morbidity in later years through biomedical discovery and health service innovation in residential and home care. |
| Data and infrastructure | Digital Health Intelligence | Data science, informatics, advanced clinical decision making tools, wearables and artificial intelligence research and other emerging innovative technologies are the key to realising the benefits of healthcare digitalisation. |
| Health services and systems | Comparative Effectiveness Research | Support systematic evaluation and demonstration of the comparative value of health interventions to better inform the decisions policy makers, clinicians and consumers make in healthcare. |
| Primary Care Research | Address the capacity and production gap in primary care research with an emphasis on multi-disciplinary, adaptive research methodologies, innovative models of care and clinician capability support. |
| Capacity and collaboration | Clinical Researcher Capacity | Continue to support and enhance Australian clinical researcher capacity with a focus on next generation fellowships that target multidisciplinary engagement, fields  of emerging scientific effort that have healthcare application potential and primary care. Overarching responsibility to increase capacity and capability sits within individual  MRFF programs. |
| Consumer-Driven Research | Conduct research that is driven by crowdsourcing consumer priorities and purposefully connecting researchers to consumers with the intent of enhancing evidence translation into every day clinical practice. |
| Trials and translation | Drug Repurposing | Partner with industry to foster an enduring partnership to systematically identify drugs with repurposed therapeutic potential for investigative research. |
| Public Health Interventions | Targeted research to test innovative public health approaches to addressing modifiable risk factors that are at the heart of the rise of chronic and complex disease prevalence and persistence in Australia. Equity of access to healthcare will benefit with a focus on the increased role of remote care interventions through mobile, telehealth and digital health. |
| Commercialisation | Translational Research Infrastructure | Address gaps in early biomedical and medical technology product development by supporting access to expertise and infrastructure in partnership with industry that seeks to accelerate rapid pre-clinical work and evaluation and build sustainability in the sector. |

Source: Australian Medical Research Advisory Board (2021). *Australian Medical Research and Innovation Priorities 2020–2022*, AMRAB, Canberra.

## 10-year investment plan for the MRFF

In March 2022, the Australian Government announced a second $6.3 billion, [10-year Investment Plan](https://www.health.gov.au/resources/publications/medical-research-future-fund-2nd-10-year-investment-plan-2022-23-to-2031-32?language=en) for the MRFF that directs MRFF funding through 4 themes:

* **Patients**, which aims to bring benefits to patients, including supporting life-changing clinical trials, funding innovative treatments and advanced health care and medical technologies
* **Researchers**, which aims to support Australian researchers, including to help build their skills and capacity, support their research in priority areas and assist them to develop and bring new research discoveries to the market
* **Research missions** are large programs of work that bring together key researchers, health professionals, stakeholders, industry partners and patients to tackle big health challenges
* **Research translation**, which aims to translate research outcomes into practice by building the evidence base to support the adoption of best practice care into health care delivery.

There are 21 initiatives under these themes, funded across 10 years (starting in 2022-23) to support lifesaving research, create jobs, strengthen the local industry base for commercialising research and innovation, and further grow Australia’s reputation as a world leader in medical research.

This second 10-year Investment Plan builds on the first 10-year investment plan announced as part of the 2019-20 Budget.

The first and second 10-year investment plans were in place while the 2020–2022 Priorities were in force.

The 10-year Investment Plan is a mechanism for implementing the Strategy and the related Priorities and will continue to evolve to address emerging health challenges and respond to the evolution of these guiding documents. The Strategy, the Priorities and the 10-year Investment Plan provide transparency and predictability to researchers and industry about the strategic objectives and scale of MRFF disbursements.

# MRFF policy, performance, and assurance

The Department is committed to continuous improvement of MRFF policies and procedures to ensure they are fit for purpose, generate improvements in health care and outcomes, and support researchers in doing their work.

## New policies

### MRFF Consumer Reference Panel

The MRFF Consumer Reference Panel (CRP), established in April 2022, advises the HMRO Chief Executive Officer on strategies for strengthening consumer involvement in the implementation of the MRFF.

The CRP is helping the HMRO to:

* fund research that has the best opportunity for improving the health and wellbeing of individuals and their families and carers
* improve consumer confidence in and engagement with the MRFF, by providing consumers a more formal and clear communication channel into the MRFF.

Information regarding the CRP, including members and terms of reference, can be found on the Department’s [website](https://www.health.gov.au/committees-and-groups/medical-research-future-fund-consumer-reference-panel).

### MRFF Grant Variation Policy

The [MRFF Grant Variation Policy](https://www.health.gov.au/resources/publications/medical-research-future-fund-grant-variation-policy), published in May 2022, provides, advice to MRFF recipients who may need to request a variation to their grant agreement, such as to extend the end date of the grant or change personnel.

### MRFF Eligible Organisations at NHMRC

MRFF grants can only be made to organisations that meet criteria defined in the MRFF Act. Since 18 August 2021, organisations meeting the requirements set out in the MRFF Act can apply to become an [MRFF Eligible Organisation](https://www.nhmrc.gov.au/funding/manage-your-funding/mrff-eligible-organisations) in order to apply for MRFF funding through the National Health and Medical Research Council (NHMRC). This new process expanded the type of organisations that were eligible to apply for and receive MRFF funding administered by the NHMRC. As of October 2022, the NHMRC had certified and approved 177 MRFF Eligible Organisations.

Organisations that meet requirements set out in the MRFF Act continue to be able to apply for MRFF funding through the Business Grants Hub (BGH).

### Departmental staff engagement in MRFF applications and grants

To reinforce the Department’s commitment to the highest standards of probity, professionalism, integrity and ethical conduct, a [policy statement](https://www.health.gov.au/resources/publications/medical-research-future-fund-mrff-policy-statement-participation-by-department-of-health-employees-in-research-activities-funded-by-the-mrff) for departmental staff participating in activities funded by the MRFF was published on 18 March 2022.

### Commonwealth Commercialisation Clauses in MRFF grant agreement

While the Australian Government does not make any claim to the ownership of intellectual property resulting from MRFF-funded research activities, the Department has developed Commonwealth Commercialisation Clauses that seek to ensure that the Australian community can benefit from the outcomes of research funded through the MRFF.

This is achieved through the inclusion of specific arrangements in some MRFF grant agreements that provide the Australian Government with an early opportunity to purchase commercialised products resulting from MRFF-funded activities, on market terms.

## Performance and evaluation

### Completed evaluation activities

The [MRFF Monitoring, evaluation and learning strategy](https://www.health.gov.au/resources/publications/mrff-monitoring-evaluation-and-learning-strategy-2020-21-to-2023-24) provides an overarching framework for assessing the performance of the MRFF. It also aims to establish a learning system to support continued improvements within the MRFF.

To date, 3 MRFF evaluation activities have been completed:

* *Evaluation of the Rapid Applied Research Translation Initiative* (2020) – the final report can be found on the Department’s [website](https://www.health.gov.au/resources/publications/evaluation-of-the-rapid-applied-research-translation-initiative)
* *Medical Research Commercialisation Landscape Report* (2020) – the final report can be found on the Department’s [website](https://www.health.gov.au/resources/publications/medical-research-commercialisation-landscape-report)
* *Million Minds Mental Health Research Mission Review* (2021-22) – the final report can be found on the Department’s [website](https://www.health.gov.au/resources/publications/million-minds-mental-health-research-mission-review).

The Department continues the evaluation program set out in the MRFF Monitoring, evaluation and learning strategy, with two further evaluations due to be completed in 2023:

* Evaluation of the Clinical Trials Activity initiative
* Review of the Australian Brain Cancer Mission.

### MRFF Grant Opportunity Gender Data Report

This report provides an overview of gender data for applicants and grantees for competitive MRFF grant opportunities. Personal data for 60 competitive grant opportunities up to 30 June 2021 was obtained from MRFF applications submitted through the NHMRC and BGH. 56 of the analysed grant opportunities were administered by the NHMRC, and 4 by BGH. The assessment included data for Chief Investigators (CIs), or equivalent.

Overall, while more men applied for MRFF grants than women, funded rates were relatively comparable. There were differences by field of research (in application numbers and funded rates) and at career stages.

The report, including analysis and data tables, can be found on the Department’s [website](https://www.health.gov.au/resources/publications/medical-research-future-fund-grant-opportunity-gender-data-report-22-march-2022).

## Assurance

### ANAO audit and our response to the findings

In September 2021, the Auditor General tabled a report titled [*Department of Health’s Management of Financial Assistance under the Medical Research Future Fund*](https://www.anao.gov.au/work/performance-audit/department-health-management-financial-assistance-under-the-medical-research-future-fund).

The Australian National Audit Office (ANAO) found:

* Health’s management of the MRFF is largely effective
* clear governance and coordinating structures have been established and the roles and responsibilities of Health and its implementation partners are defined
* Health’s management of MRFF grants is largely compliant with legislative and policy requirements
* Health does not have adequate performance measures for MRFF.

The Auditor General made 3 recommendations:

* Department of Health identify, assess and manage risks at the theme or initiative level of the 10-year Investment Plan
* Department of Health reports grants in the same way that grant opportunities are classified in the grant opportunity guidelines and reported on GrantConnect
* Department of Health develops adequate performance measures for the Medical Research Future Fund for inclusion in its portfolio budget statements and annual performance statements.

The Department has addressed all 3 recommendations and is continuing to implement continuous improvements to MRFF policies and processes in response to other findings in the report.[[2]](#footnote-3)

### Project progress and final reports

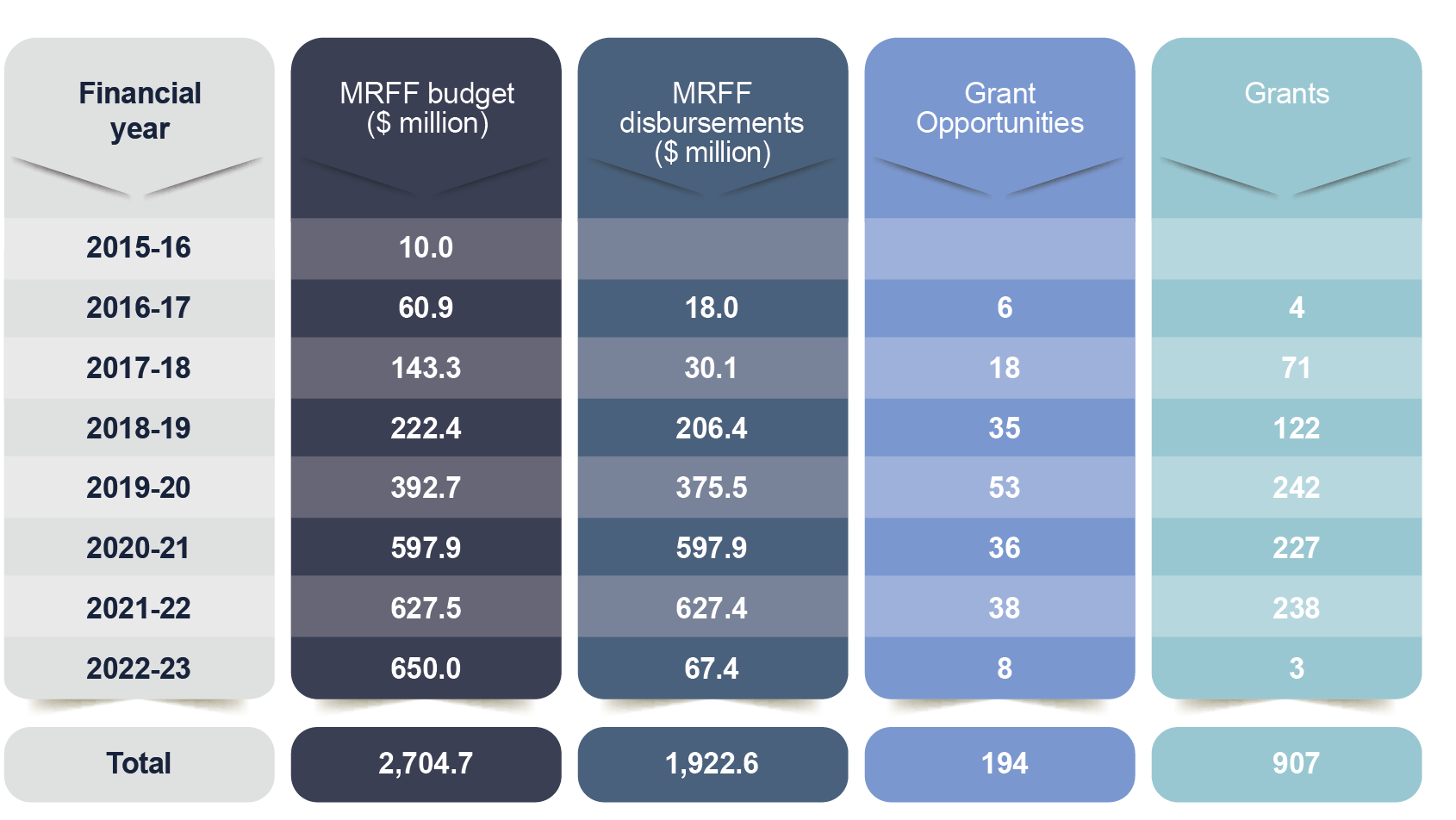
MRFF grantees are required to submit regular project reports describing the progress and outcomes of their research via the relevant administering grants hub (BGH or the NHMRC).

Routine monitoring provides assurance that projects are meeting their intended objectives during MRFF funding and after it ends, allows oversight of issues and risks as they arise, and provides information to support improvements in grant design (e.g., understanding key features of successful projects).

Further information about project reporting can be found on the Department’s [website](https://www.health.gov.au/resources/publications/medical-research-future-fund-grant-reporting-requirements), and the website of the relevant grants hub.

# Medical Research Future Fund – since inception

The establishment of the MRFF was announced in the 2014-15 Budget. The MRFF Act received the Royal Assent from the Governor-General on 26 August 2015. The first disbursements from the MRFF Special Account began during the 2016-17 financial year. Since the inception of the MRFF, the financial assistance provided, and the number of grants, has increased year on year.



For the above table, **MRFF disbursements** values, **Grant Opportunities** data and **Grants data** for 2022-23 are for a partial Financial Year (FY), noting this report was prepared prior to the end of the 2022-23 FY. MRFF budget values for 2022-23 are for the full 2022-23 FY.

**MRFF budget** values are taken from Health Portfolio Budget Statements in the relevant financial year (more information at the Department’s [website](https://www.health.gov.au/about-us/corporate-reporting/budgets)). **MRFF disbursements** values represent payments made to all active grants in the relevant FY (i.e., new grants as well as grants commenced in previous FYs – see Table 2, below). **Grant Opportunities data** represents all grant opportunities that had opened for applications as at 31 December 2022. **Grants data** represents newly awarded and announced grants for the relevant FY. Detailed data by MRFF theme and initiative is available at Appendices B-D.

## Financial assistance from the MRFF Special Account

Table 2 presents the funding profiles of all MRFF initiatives since 2016–17, as at 30 November 2022.   
See Appendix A for a description of each of these initiatives.

Table - Funding for MRFF initiatives, since 2016–17, as at 30 November 2022

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | Actuals ($ million) | | | | | | | | | | |  | Budget ($ million) | | | | |  | Total ($ million) | | |
| Theme | Initiative | 16-17 | 17-18 | | | 18-19 | | 19-20 | | 20-21 | | 21-22 |  | 22-23 | | 23-24 | 24-25 | 25-26 |  | 10-year total | Out years  (26-27 to 31-32) | Total |
| Patients | Emerging Priorities and Consumer-Driven Research | 7.0 | |  | 63.4 | | 54.0 | | 84.5 | | 84.4 | |  | | 69.5 | 63.5 | 60.0 | 60.0 |  | **546.2** | **360.0** | **906.2** |
| Clinical Trials Activity | 1.0 | | 4.8 | 47.4 | | 68.1 | | 63.7 | | 59.3 | |  | | 75.0 | 75.0 | 75.0 | 75.0 |  | **544.3** | **450.0** | **994.3** |
| Global Health |  | | 2.5 | 1.8 | | 3.4 | | 2.7 | | 3.0 | |  | | 3.0 | 3.0 | 3.0 | 3.0 |  | **25.3** | **18.0** | **43.3** |
| Researchers | Frontier Health and Medical Research |  | |  |  | | 20.1 | | 53.6 | | 61.5 | |  | 70.0 | | 70.0 | 70.0 | 70.0 |  | **415.2** | **420.0** | **835.2** |
| Researcher Exchange and Development within Industry |  | |  |  | | 8.0 | | 10.0 | | 10.0 | |  | 4.0 | |  |  |  |  | **32.0** |  | **32.0** |
| Clinician Researchers |  | | 1.8 | 4.9 | | 19.8 | | 20.4 | | 22.2 | |  | 20.0 | | 20.0 | 20.0 | 20.0 |  | **149.0** | **120.0** | **269.0** |
| Early to Mid-Career Researchers |  | |  |  | |  | |  | |  | |  | 13.4 | | 26.8 | 35.2 | 40.0 |  | **115.4** | **268.8** | **384.2** |
| Research Missions | Australian Brain Cancer Mission |  | | 1.0 | 4.7 | | 7.4 | | 5.0 | | 3.6 | |  | 5.0 | | 5.0 | 5.0 | 5.0 |  | **41.8** | **5.0** | **46.8** |
| Million Minds Mental Health Research Mission |  | |  | 6.2 | | 7.0 | | 12.0 | | 15.0 | |  | 25.0 | | 15.0 | 20.0 | 10.0 |  | **110.1** | **15.0** | **125.1** |
| Genomics Health Futures Mission |  | |  | 8.8 | | 37.5 | | 87.4 | | 69.9 | |  | 54.9 | | 50.0 | 50.0 | 50.0 |  | **408.6** | **91.2** | **499.8** |
| Dementia, Ageing and Aged Care Mission |  | |  | 10.0 | | 13.1 | | 17.0 | | 17.2 | |  | 17.5 | | 17.5 | 17.5 | 17.5 |  | **127.3** | **52.5** | **179.8** |
| Indigenous Health Research Fund |  | |  | 15.0 | | 22.5 | | 18.8 | | 11.4 | |  | 12.5 | | 12.5 | 12.5 | 12.5 |  | **117.7** | **37.5** | **155.2** |
| Stem Cell Therapies Mission |  | |  |  | | 6.0 | | 17.6 | | 18.0 | |  | 18.0 | | 18.0 | 18.0 | 18.0 |  | **113.6** | **36.0** | **149.6** |
| Cardiovascular Health Mission |  | |  |  | | 22.1 | | 23.8 | | 23.6 | |  | 24.0 | | 25.0 | 20.0 | 20.0 |  | **158.6** | **60.0** | **218.6** |
| Traumatic Brain Injury Mission |  | |  |  | | 5.0 | | 4.0 | | 3.9 | |  | 5.0 | | 5.0 | 5.0 | 5.0 |  | **32.9** | **15.0** | **47.9** |
| *For allocation to Research Missions pending evaluation* | | | | | | | |  | |  | |  |  | |  |  |  |  |  | ***590.8*** | ***590.8*** |
| Research Translation | Preventive and Public Health Research | 10.0 | |  | 11.2 | | 35.2 | | 63.9 | | 31.5 | |  | 71.2 | | 81.7 | 68.6 | 60.5 |  | **433.7** | **314.5** | **748.2** |
| Primary Health Care Research |  | |  |  | | 6.7 | | 7.1 | | 4.1 | |  | 10.0 | | 10.0 | 10.0 | 10.0 |  | **57.9** | **60.0** | **117.9** |
| Rapid Applied Research Translation |  | | 10.0 | 17.6 | | 16.6 | | 20.6 | | 22.0 | |  | 22.0 | | 22.0 | 23.0 | 23.0 |  | **176.9** | **138.0** | **314.9** |
| Medical Research Commercialisation |  | | 10.0 | 15.4 | | 15.3 | | 60.3 | | 35.3 | |  | 45.0 | | 45.0 | 45.0 | 45.0 |  | **316.3** | **270.0** | **586.3** |
| National Critical Research Infrastructure |  | |  |  | | 7.7 | | 12.6 | | 119.2 | |  | 75.0 | | 75.0 | 75.0 | 75.0 |  | **439.5** | **350.0** | **789.5** |
| Research Data Infrastructure |  | |  |  | |  | | 12.9 | | 12.3 | |  | 10.0 | | 10.0 | 10.0 | 10.0 |  | **65.2** | **60.0** | **125.2** |
| Total MRFF profile | | 18.0 | | 30.1 | 206.4 | | 375.5 | | 597.9 | | 627.4\* | |  | 650.0 | | 650.0 | 642.8 | 629.5 |  | **4,427.6** | **3,732.3** | **8,159.9** |
| MRFF budget balance 2022-23 over forward estimates | | | | | | |  | |  | |  | |  |  | |  | 7.2 | 20.5 |  | **27.7** | **167.7** | **195.4** |
| Revised MRFF profile due to low RBA cash rate\*\* | | | | |  | |  | |  | |  | |  | -52.0 | |  |  |  |  | **-52.0** |  | **-52.0** |
| MRFF supplementation^ | |  | |  |  | |  | |  | |  | |  | 52.0 | |  |  |  |  | **52.0** |  | **52.0** |
| **MRFF total** |  | **18.0** | | **30.1** | **206.4** | | **375.5** | | **597.9** | | **627.4** | |  | **650.0** | | **650.0** | **650.0** | **650.0** |  | **4,455.3** | **3,900.0** | **8,355.3** |

\* The Actuals for 2021-2022 includes expenditure from the MRFF Health Special Account (MHSA) and $172.5 million MRFF supplementation (announced at the Mid-Year Economic and Fiscal Outlook   
2020–2021 which was administered separately to the MSHA).

\*\*The historic low Reserve Bank of Australia cash rate prior to 2022-23 reduced the amount available from the MRFF in 2022-23 from $650.0 million to $598.0 million.

^ To maintain the Australian Government's commitment to the investments under the MRFF 10-year investment plan, an additional $52.0 million was provided to the MRFF in 2022-23, which is administered separately  
to the MHSA.

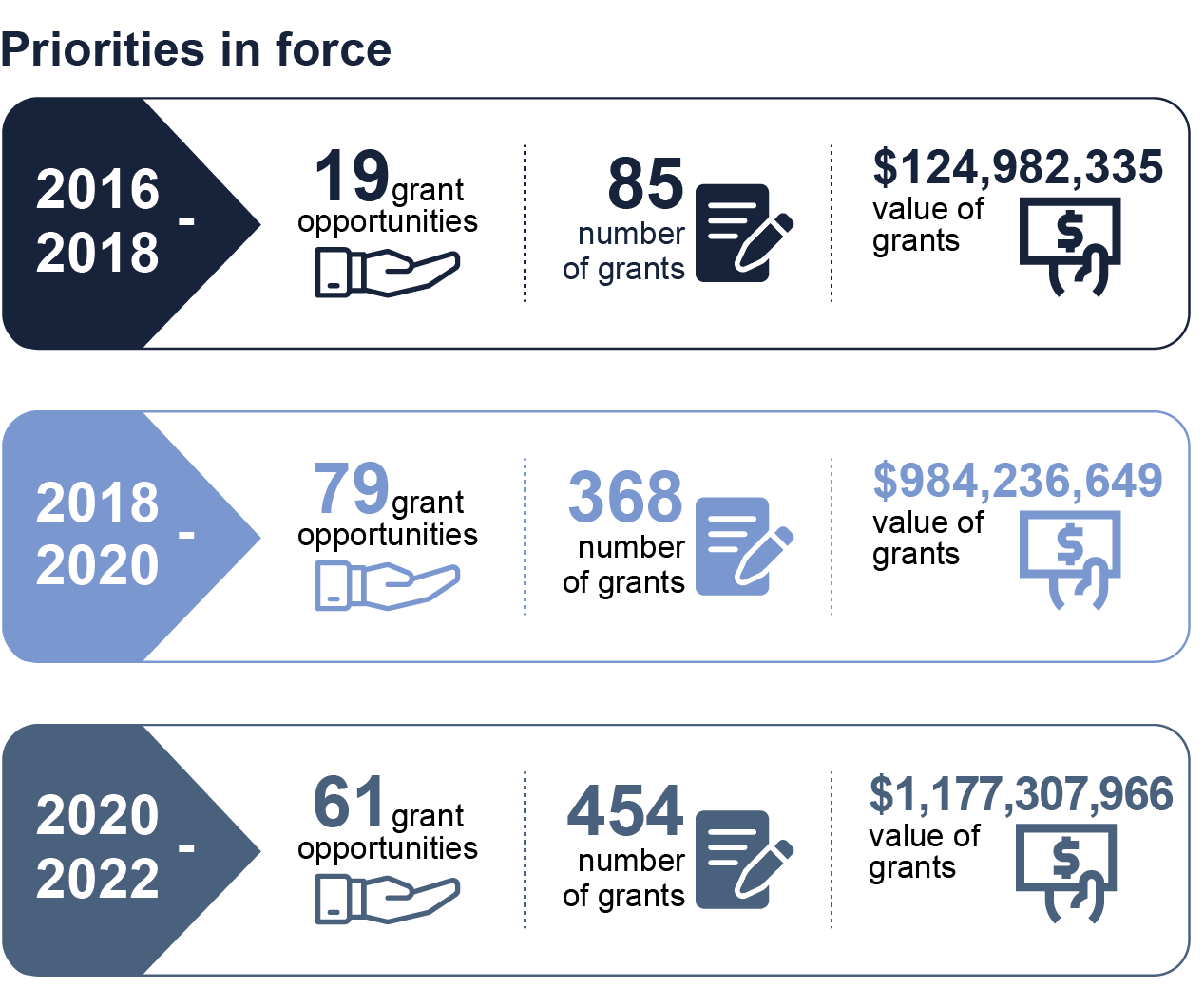
Notes: The table includes all funding since MRFF’s inception and is not reflective of the current reporting period. Figures may not add up exactly due to rounding.

## Funding

MRFF initiatives (see Appendix A) have continued to invest in a broad range of   
research areas.

There were fewer grant opportunities during the period the 2020-2022 Priorities were in force, compared with the 2018-2020 Priorities[[3]](#footnote-4). The number of projects funded, and the quantum of grant funds disbursed was significantly higher in the 2020-2022 Priorities period, compared with the 2016-2018 and 2018-2020 Priorities.

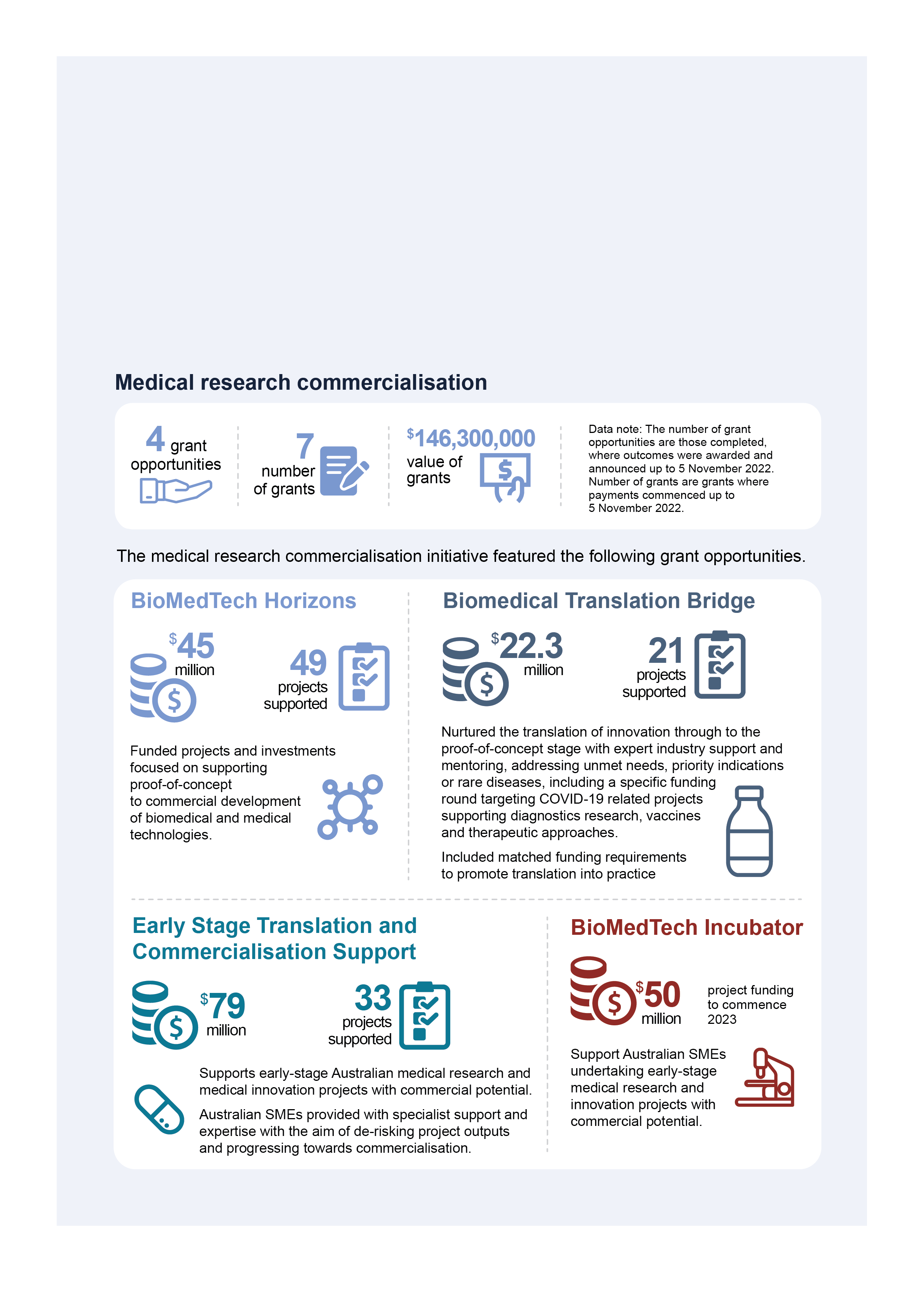
50% of all MRFF grants since inception were awarded in 2020-2022.



Data represents grant opportunities that were opened and grants with payments commencing during the periods when Australian Medical Research and Innovation Priorities were in force: 9 November 2016 to 8 November 2018, 8 November 2018 to 6 November 2020 and 7 November 2020 to 5 November 2022. Analysis at 30 November 2022.

## Highlights from the MRFF initiatives

MRFF funding has:

* increased support for medical research commercialisation
* enabled clinical trials research
* supported research in rural health
* prioritised leadership of Aboriginal and/or Torres Strait Islander researchers and communities in research on First Nations health.**Increasing support for medical research commercialisation**

Australia has clear strengths across a range of health and medical research areas, where the nation performs well above world standard and has very strong capabilities. The successes of many organisations now growing and thriving in Australia signals the potential benefits of commercialisation, and there are opportunities for leveraging Australia’s research strengths, capabilities, and successes to support the commercialisation and translation of new drugs, devices, and digital technologies into practice.

MRFF funding has been disbursed to a range of grant opportunities seeking to support projects with commercial potential (particularly from Small and Medium Enterprises (SMEs)), with a focus on supporting research discoveries, as they progress from proof of concept through to clinical implementation. **Clinical Trials under Clinical Trials Activity initiative, 19 grant opportunities and 161 grants valued at $300 million up to 5 November 2022. 
Clinical Trials outside Clinical Trials Activity initiative, 63 grant opportunities and 161 grants valued at $511.1 million up to 5 November 2022.
MRFF Clinical Trials activity supports a range of clinical trials. Several other MRFF initiatives support clinical trial research. **Enabling clinical trials research

Clinical trials are an essential component of health and medical research, playing an important role in validating new treatments and approaches for the prevention, management, detection, and diagnosis of health conditions.

Through a range of its initiatives, the MRFF has funded Australian clinical trials across many different health conditions. MRFF-funded projects bring researchers, medical specialists, and patients together to promote clinical innovation, improve patient outcomes and support jobs and economic growth of the health and medical research sector.**Rural research conducted in rural, regional, or remote areas:  23 grant opportunities and 37 grants valued at $80.1 million up to 5 November 2022. 
Rural research with a focus on regional, rural, or remote health research: 26 grant opportunities and 52 grants valued at $269.8 million up to 5 November 2022.
Funded projects have focused on a range of diseases and health conditions and on rural health services. **Investing in rural research

Almost a third of Australians live in rural, regional, and remote areas, and rural and remote communities have significantly worse health outcomes and shorter life expectancies.

To support better rural health outcomes, a rural focus has been embedded in a range of MRFF open and competitive grant opportunities.**First Nations research. Indigenous Health Research Fund : 4 grant opportunities and 27 grants valued at $67.7 million up to 5 November 2022. 
Other MRFF initiatives: 26 grant opportunities and 47 grants valued at $111.2 million up to 5 November 2022.
A range of research has been supported to improve First Nations health. **Prioritised leadership of Aboriginal and/or Torres Strait Islander researchers and communities in research on   
First Nations health

The Indigenous Health Research Fund (IHRF) supports First Nations-led research to tackle health issues that are of importance to Aboriginal and Torres Strait Islander people. It aims to improve health outcomes and contribute to closing the gap on health mortality and morbidity of Aboriginal and Torres Strait Islander people. Grant opportunities in other MRFF initiatives also support projects that align with the objectives of the IHRF.

MRFF First Nations health research grants acknowledge, prioritise and promote First Nations leadership in research practice, governance, and knowledge translation. The grants recognise that First Nations leadership, including through research, is best placed to generate evidence based structural change in Aboriginal and Torres Strait Islander health practice and outcomes.

The MRFF has increased First Nations leadership in MRFF grants through refinements to the application assessment process. The percentage of grants led by an Aboriginal and/or Torres Strait Islander Chief Investigator increased over time following progressive modification to the assessment process for IHRF grant opportunities. Modification to the assessment process included:

* 2020 Indigenous Health Research Grant Opportunity: demonstration of Aboriginal and/or Torres Strait Islander leadership and community involvement in an applicant’s project included in the assessment criteria
* 2021 Indigenous Health Research Grant Opportunity: scoring matrices covering the assessment criteria used by Grant Assessment Committees (GAC) included guidance on assessing Aboriginal and/or Torres Strait Islander leadership and community involvement and efforts were made to ensure the majority of the GAC members were Aboriginal and/or Torres Strait Islander.

 Data note: Percentage was determined by the total number of grants awarded and the number of grants led by an Aboriginal and/or Torres Strait Islander Chief Investigator.

*Research to improve the health and wellbeing of Aboriginal and Torres Strait Islander mothers and babies*

Aboriginal and Torres Strait Islander women currently have limited access to maternity and midwifery care that meets their cultural, spiritual, social, emotional, and physical needs.

Research has highlighted the importance of culturally safe models of care for birthing mothers, which help give babies the best possible start in life.

The 2021 Improving the Health and Wellbeing of Aboriginal and Torres Strait Islander Mothers and Babies grant opportunity aimed to support research that will improve access to culturally safe care during pregnancy, birthing and the post-natal period, for example on-country birthing and continuity of family and midwifery care. In addition to the IHRF, First Nations leadership was prioritised in this grant opportunity. Five projects, totalling $18.4 million, have been supported to undertake research in this important area of health.

More information on MRFF Indigenous Health Research Grants is on the Department’s [website.](https://www.health.gov.au/resources/publications/medical-research-future-fund-mrff-indigenous-health-research-grants)

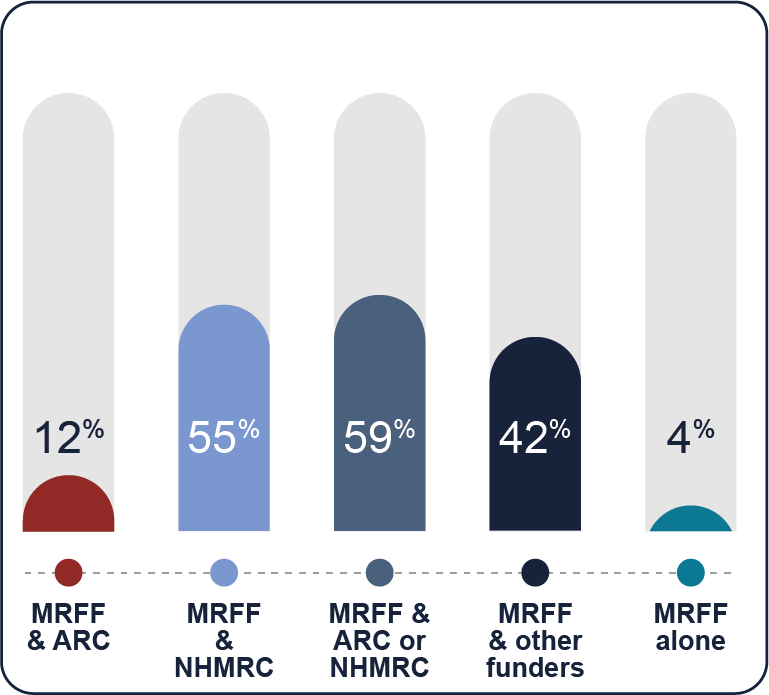
## A snapshot of publications of research funded by MRFF

Research outputs, such as scientific articles, give healthcare systems, clinicians, researchers, consumers, and other end-users access to the latest information on topics that may be relevant to advancing continued research and health care. Sharing of research outcomes also reduces research waste, minimising unnecessary research duplication and maximising the benefits and value arising from research funding.

Bibliometrics is a way of measuring research volume and impact by analysing the publication of scientific articles. An impact of a scientific article is measured by citations. This is how many times other researchers, anywhere in the world, reference the scientific article.

*Sharing of scientific knowledge is enabled by combining research outcomes from projects supported by different funders*

The majority of papers that attribute MRFF funding have also been co-funded by other agencies. For example, over 50% of papers that attribute MRFF funding have also been co-funded by the National Health and Medical Research Council (NHMRC) and almost 60% of MRFF-attributed papers have been co-funded by Australian Research Council ARC) or NHMRC. Different research projects are funded by MRFF, NHMRC and ARC, but each project outcome contributes to a scientific article and the sharing of knowledge.

**Publications with MRFF as a funder**

.

*Scientific articles of research supported by MRFF have higher impact than the global average*

Publications that attribute MRFF funding have a higher percentage of papers that rank in   
the top 1% based on citation and a higher citation impact. Together, these data illustrate the high impact, relative to respective field, year, and document type, of publications which attribute MRFF funding, with impact one of many indicators of research excellence.

4% of publications with research supported by MRFF are in Top 1% of documents compared to the global average of 1.1%.  Category Normalized Citation Impact (a measure of impact of publications with MRFF support): 2.33 for  publications with research supported by MRFF compare to global average of 0.98. 


All Australian publications indexed in Clarivate Web of Science from 1 January 2018-11 January 2023 were identified. Data was then filtered to the 121 Web of Science topics that publications funded by MRFF have been categorized to, prior to being categorized by Australian attributed funder. Other funders include funders from Australia, excluding MRFF, NHMRC and ARC. The percentage of attributed funders do not add up to 100%, as there is overlap between categories. The proportion of publications which are in the top 1% of all publications is based on citations by category, year, and document type. Category Normalized Citation Impact (CNCI) is an indicator of the impact of a publication which has been normalised against the expected citation rate for documents with the same document type, year of publication and subject area. The CNCI of a set of documents, for example works attributed to a funder,  
is the average of the CNCI values for all the documents in the set. The global average is presented as a benchmark. A CNCI of  
two is considered twice the global average.

# Medical Research Future Fund 2020-2022

From 7 November 2020 to 5 November 2022, the Priorities provided a wide-ranging platform that allowed the MRFF to respond to health challenges, while continuing to fund projects aimed at stimulating health and medical research across the entire research pipeline and achieve the MRFF’s strategic objectives. An adaptive approach has allowed research investment to remain flexible and meet the needs of the changing health and medical research landscape. Innovative MRFF-funded projects are featured at the [MRFF website](https://www.health.gov.au/initiatives-and-programs/medical-research-future-fund).

## Funding

MRFF funding has continued to support and promote developments in current and future health and medical research projects. In 2020–2022:

* 61 grant opportunities opened across 21 MRFF initiatives
* 454 grants — with a combined value of $1,177.3 million — were awarded, representing half of all MRFF grants awarded since the inception of the MRFF.

## Missions

Missions are programs of work with ambitious objectives that are only possible through major funding, leadership and collaboration.

Missions are initiatives with specific, ambitious goals; in some instances, missions are designed with the objective to seek significant co-investments.

The missions are:

* Australian Brain Cancer Mission
* Cardiovascular Health Mission
* Dementia, Ageing and Aged Care Mission
* Genomics Health Futures Mission
* Indigenous Health Research Fund
* Million Minds Mental Health Research Mission
* Stem Cell Therapies Mission
* Traumatic Brain Injury Mission.

The MRFF missions have provided in 183 grants — with a combined value of $326.6 million — awarded in 2020–2022. This is about 28% of the total MRFF investment.

## Analysis of MRFF funding

Analysis[[4]](#footnote-5) of the financial assistance provided from the MRFF during 2020–2022 shows:

* funding was provided across MRFF themes and initiatives
* funding was spread across all states and territories
* projects were predominately led through universities and medical research institutes
* funding was provided to support a broad range of research areas and fields of research
* support for innovative research approaches using different grant models
* diversity of ages for funded applicants
* thousands of researchers have been funded for carry out projects
* similar overall funded rates by gender
* a broad range of research areas was supported however the relative number of women or men leading projects differs by research area
* diversity in the expertise of MRFF grant assessment committee membership, including international experts.

Table 3 shows that grants, grant opportunities and funding were distributed across the   
4 MRFF themes.

Table   
MRFF themes: grants, grant opportunities and funding between 7 November 2020 and   
5 November 2022

|  |  |  |  |
| --- | --- | --- | --- |
| MRFF theme | Number of grant opportunities opened | Number of grants with payments commenced | Funding amount |
| Patients | 21 | 132 | $274,825,416.33 |
| Research Missions | 17 | 183 | $326,629,028.07 |
| Research Translation | 14 | 73 | $363,365,534.39 |
| Researchers | 9 | 66 | $212,487,986.98 |
| **Total** | **61** | **454** | **$1,177,307,965.77** |

Data represents all grant opportunities that had opened for applications between 7 November 2020 and 5 November 2022. The grant numbers and funding figures are based on each MRFF-funded grant with payment commencing between 7 November 2020 and 5 November 2022.

Table 4 presents grants, grant opportunities and funding for MRFF initiatives. Grant opportunities were open under 19 of the 21 initiatives between 7 November 2020 and 5 November 2022. MRFF grants with payments commencing between 7 November 2020 and 5 November 2022 were distributed across the 19 initiatives. The Early to Mid-Career Researchers initiative was announced as part of the 2nd 10-year investment plan. One grant opportunity was open under this initiative however outcomes were not finalised during the time period of this report.

Table   
MRFF initiatives: grants, grant opportunities and funding between 7 November 2020 and  
5 November 2022

|  |  |  |  |
| --- | --- | --- | --- |
| MRFF initiative | Number of grant opportunities opened | Number of grants with payments commenced | Funding amount |
| Australian Brain Cancer Mission | 3 | 4 | $8,077,924.70 |
| Cardiovascular Health Mission | 3 | 57 | $53,712,471.41 |
| Clinical Trials Activity | 9 | 68 | $140,935,111.71 |
| Clinician Researchers | 3 | 31 | $48,697,612.40 |
| Dementia, Ageing and Aged Care Mission | 3 | 29 | $42,051,843.06 |
| Early to Mid-Career Researchers | 1 | 0 | $0.00 |
| Emerging Priorities and Consumer-Driven Research | 8 | 64 | $133,890,304.62 |
| Frontier Health and Medical Research | 2 | 35 | $163,790,374.58 |
| Genomics Health Futures Mission | 3 | 41 | $130,170,721.91 |
| Global Health | 0 | 0 | $0.00 |
| Indigenous Health Research Fund | 3 | 17 | $18,256,577.05 |
| Medical Research Commercialisation | 2 | 4 | $79,000,000.00 |
| Million Minds Mental Health Research Mission | 0 | 2 | $23,929,033.76 |
| National Critical Research Infrastructure | 2 | 7 | $130,761,257.40 |
| Preventive and Public Health Research | 8 | 31 | $51,925,712.23 |
| Primary Health Care Research | 2 | 10 | $14,514,402.76 |
| Rapid Applied Research Translation | 1 | 9 | $61,984,858.00 |
| Research Data Infrastructure | 3 | 12 | $25,179,304.00 |
| Researcher Exchange and Development Within Industry | 0 | 0 | $0.00 |
| Stem Cell Therapies Mission | 3 | 24 | $43,213,415.78 |
| Traumatic Brain Injury Mission | 2 | 9 | $7,217,040.40 |
| Total | 61 | 454 | $1,177,307,965.77 |

If a grant opportunity was funded across more than one MRFF initiative, it has been assigned to a single MRFF initiative for calculation purposes. Data represents all grant opportunities that had opened for applications between 7 November 2020 and 5 November 2022. The grant numbers and funding figures are based on each MRFF-funded grant with payment commencing between 7 November 2020 and 5 November 2022.

Table 5 shows the number of grants and the total funding by location of the lead researcher in the period 7 November 2020 and 5 November 2022. All states and territories received support from the MRFF.

Table   
Location of lead researcher for grants with payments commencing between 7 November 2020 and 5 November 2022

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Location | Number of grants with payments commenced | Percentage of grants | Funding amount | Percentage of funding |
| ACT | 8 | 1.8% | $15,695,830.58 | 1.3% |
| NSW | 119 | 26.2% | $275,466,058.08 | 23.4% |
| NT | 9 | 2.0% | $28,251,553.19 | 2.4% |
| QLD | 58 | 12.8% | $175,357,768.16 | 14.9% |
| SA | 47 | 10.4% | $76,715,927.68 | 6.5% |
| TAS | 5 | 1.1% | $5,800,132.54 | 0.5% |
| VIC | 182 | 40.1% | $555,229,417.74 | 47.2% |
| WA | 26 | 5.7% | $44,791,277.80 | 3.8% |
| **Total** | **454** | **100.0%** | **$1,177,307,965.77** | **100.0%** |

The grant numbers and funding figures are based on the lead organisation (also known as administering institution, eligible organisation or primary organisation) of each MRFF-funded grant with payment commencing between 7 November 2020 and 5 November 2022.

Table 6 shows the type of organisations receiving MRFF funding between 7 November 2020 and 5 November 2022. The predominant organisations receiving MRFF funding were universities and medical research institutes (95.1% of grants). In practice, many MRFF-funded grants are collaborative research efforts across multiple Australian locations and organisations.

Table   
Organisation of lead researcher for grants with payments commencing between 7 November 2020 and 5 November 2022

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Organisation | Number of grants with payments commenced | Percentage of grants | Funding amount | Percentage of funding |
| Corporate Commonwealth entity | 2 | 0.4% | $3,984,410.33 | 0.3% |
| Corporation | 18 | 4.0% | $152,216,654.70 | 12.9% |
| Medical Research Institute | 46 | 10.1% | $117,680,591.43 | 10.0% |
| State government entity/local health district | 2 | 0.4% | $105,788,350.00 | 9.0% |
| University | 386 | 85.0% | $797,637,959.31 | 67.8% |
| **Total** | **454** | **100.0%** | **$1,177,307,965.77** | **100.0%** |

The grant numbers and funding figures are based on the lead organisation (also known as administering institution or primary organisation) of each MRFF-funded grant with payment commencing between 7 November 2020 and 5 November 2022.

The following analysis of MRFF funding is based on the available information on applications to grant opportunities completed during the period of the report and the outcome (Funded grants) was known. More information on the methodology is at Appendix H.

Table 7 shows the broad research area of grants, grant opportunities and funding.   
For this subset of grant opportunities that were administered by the NHMRC, there were similar distribution across the 4 broad research areas. However, most grants and the associated funding was for projects focusing on Clinical Medicine and Science. Table 8 presents the range of fields of research support by the MRFF during 7 November 2020   
and 5 November 2022.

Table   
Broad research area of grants, grant opportunities and funding between 7 November 2020  
and 5 November 2022

|  |  |  |  |
| --- | --- | --- | --- |
| Broad research area | Number of grant opportunities completed | Funded grants | Funding |
| Basic Science | 18 | 40 | $64,716,158.04 |
| Clinical Medicine and Science | 23 | 136 | $277,096,247.86 |
| Health Services Research | 18 | 64 | $92,819,599.82 |
| Public Health | 17 | 35 | $53,516,135.56 |

Broad research area is nominated by applicants in the application form. Applicants can assign more than one broad research area to an application. Data represents competitive grant opportunities that (1) were administered by the NHMRC, (2) the applicant nominated a research area in the application, (3) opened for applications between 7 November 2020 and 31 June 2022 and (4) had a known outcome. The grant numbers and funding figures are based on each MRFF-funded grant with payment commencing between 7 November 2020 and 5 November 2022 and had a known outcome.

Table   
Top 20 Field of research of grants, grant opportunities and funding between 7 November 2020 and 5 November 2022

|  |  |  |  |
| --- | --- | --- | --- |
| Field of research | Number of grant opportunities completed | Funded grants | Funding amount |
| Aboriginal and Torres Strait Islander health | 3 | 6 | $6,662,742.65 |
| Aged health care | 1 | 4 | $5,948,452.60 |
| Cancer diagnosis | 3 | 3 | $7,864,256.80 |
| Cardiology (incl. cardiovascular diseases) | 4 | 9 | $16,215,042.84 |
| Cardiorespiratory medicine and haematology | 5 | 31 | $34,966,383.63 |
| Central nervous system | 7 | 8 | $13,054,884.91 |
| Clinical sciences | 10 | 25 | $42,893,663.28 |
| Genetics | 4 | 13 | $42,946,021.37 |
| Genomics | 2 | 3 | $8,119,751.01 |
| Geriatrics and gerontology | 4 | 3 | $3,211,008.50 |
| Health sciences | 1 | 6 | $16,070,703.83 |
| Infectious diseases | 2 | 3 | $12,292,525.34 |
| Neurology and neuromuscular diseases | 4 | 1 | $499,705.00 |
| Neurosciences | 7 | 5 | $7,192,463.60 |
| Oncology and carcinogenesis | 3 | 1 | $582,686.40 |
| Paediatrics and reproductive medicine | 5 | 7 | $14,300,441.43 |
| Psychiatry (incl. Psychotherapy) | 2 | 7 | $17,451,272.70 |
| Public health and health services | 8 | 41 | $47,525,358.72 |
| Regenerative medicine (incl. Stem cells and tissue engineering) | 1 | 2 | $1,566,475.60 |
| Rehabilitation and therapy (excl. Physiotherapy) | 3 | 5 | $3,234,768.66 |

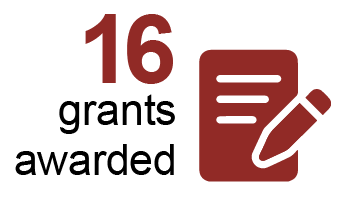
Field of research is nominated by applicants in the application form. Applicants can assign more than one field of research to an application. The top 20 terms assigned to applications are reported. Self-reported terms may not directly align with description of MRFF initiatives. Data represents competitive grant opportunities that (1) were administered by the NHMRC, (2) the applicant nominated a field of research in the application, (3) opened for applications between 7 November 2020 and 31 June 2022 and (4) had a known outcome. The grant numbers and funding figures are based on each MRFF-funded grant with payment commencing between 7 November 2020 and 5 November 2022 and had a known outcome.

**Grant models in the MRFF. 51 incubator grants, 16 accelerator grants, 5 innovation grants and 382 targeted calls for research grants. Range 7 November 2020 to 5 November 2022. Grant models to fund research projects**

Different grant models have been included in grant opportunities during 2020-2022 to support innovative research approaches and to help find solutions to significant health challenges and to turn knowledge into practice

**Incubator Grants**

* support early stage, small scale research projects
* assess the potential and feasibility of novel strategies
* address critical/intractable health issues
* small scale (up to $1 million) and short-term (6-24 months) funding
* examples:
  + 2020 Traumatic Brain Injury Mission Grant Opportunity
  + 2020 Cardiovascular Health Grant Opportunity

******Accelerator Grants**

* support large-scale interdisciplinary research
* drive implementation of substantial improvements to  
  health care and/or health system effectiveness
* large scale (up to $5 million) and long-term (up to 5 years) funding
* examples
  + 2021 Stem Cell Therapies Grant Opportunity
  + 2021 Indigenous Health Research Grant Opportunity

**Innovation Grants**

* support smaller scope research projects
* allow grantees to build evidence of the feasibility of their projects to be competitive in future funding
* small scale and short-term (6-12 months) funding
* aimed at a specific groups of researchers
* examples
  + First Nations researchers: 2021 Improving the Health and Wellbeing of Aboriginal and Torres Strait Islander Mothers  
    and Babies Grant Opportunity
  + Early to Mid-Career Researchers: 2021 Dementia, Ageing  
    and Aged Care Grant Opportunity

**Targeted Calls for Research**

* support larger-scale interdisciplinary research
* larger-scale and longer-term (generally three to 5 years)
* main model used in MRFF

Number of grants are grants with payments commencing between 7 November 2020 and 5 November 2022 inclusive.

**Priorities 2016-2018 and 2018-2020 in force: 3 grant opportunities (fellowships or investigator grants) and 97 grants valued at $55.8 million and average grant size of $0.57 million. 
Priorities 2020-2022 in force: 2 grant opportunities (teams comprising of clinician researchers) and 14 grants valued at $31.9 million and average grant size of $2.28 million. Transition of Clinician Researchers from funding individual researchers to teams of clinicians with a focus on their patient populations**

The Clinician Researchers initiative aims to support

* the next generation of talented Australian health professionals drive medical research, make new discoveries and ensure implementation of best practice care for their patients
* health care professionals to undertake research that will improve clinical care and practice, including through engagement with patients
* clinicians to focus on developing and refining their research skills and to build research capacity.

Data is grant opportunities that were opened and grants with payments commencing during the periods when Australian Medical Research and Innovation Priorities were in force: 9 November 2016 to 8 November 2018, 8 November 2018 to 6 November 2020   
and 7 November 2020 to 5 November 2022.

\* The number of grants reported is the outcome of one of two grant opportunities open between 7 November 2020 to 5 November   
2022 and with payments commencing up to 5 November 2022.

The Clinician Researchers initiative is designed to support the full breadth of clinicians/health care professionals to undertake research that will improve clinical care and practice, including through engagement with patients. Early grants from this initiative were Fellowships or Investigator Grants that allowed individual clinician researchers to pursue their research interests and build their individual capability.

To align the initiative more closely with its policy and program intent, the initiative moved away from individual fellowships to supporting applied health research teams predominantly comprising clinician researchers led by:

* medical specialists, nurses, midwives, and allied health professionals including nurses (in the 2020 grant opportunity)
* nurses, midwives, and allied health workers (in the 2022 grant opportunity).

Prior to the 2020-2022 Priorities, grant sizes averaged around half a million dollars; this average grew to $2.3 million when the new grant opportunities were introduced, as the grants supported teams. To build the evidence base on the factors that support or hinder the translation of evidence into practice, the 2022 grant opportunity also introduced an additional stream to fund an organisation to evaluate the outcomes and impact of the funded projects.

Table 9 shows the funded rate (the percentage of applications funded) of grant opportunities within the 4 MRFF themes. The lowest funded rate was observed in the Researchers theme. Approximately one third of applications under the Patients and Research Missions themes were funded.

Table   
Funded rate by MRFF theme

|  |  |  |  |
| --- | --- | --- | --- |
| MRFF theme | Number of applications | Funded grants | Funded rate |
| Patients | 279 | 90 | 32.3% |
| Research Missions | 525 | 170 | 32.4% |
| Research Translation | 323 | 52 | 16.1% |
| Researchers | 207 | 19 | 9.2% |

Data represents the funded rates of applications to competitive grant opportunities. Included grant opportunities that (1) were administered by the NHMRC and BGH, (2) opened for applications between 7 November 2020 and 31 June 2022 and (3) had a known outcome. A grant opportunity across more than one MRFF theme, applications or funded grants was assigned to a single MRFF theme, with the larger number of applications.

Table 10 displays the funded rates by MRFF initiatives. Of the 17 initiatives presented in this report, the funded rate varied across initiatives. The highest funded rate was observed with the Genomics Health Futures Mission.

Table   
Funded rate by MRFF initiative

|  |  |  |  |
| --- | --- | --- | --- |
| Initiative | Number of applications | Funded grants | Funded rate |
| Australian Brain Cancer Mission | 15 | 3 | 20.0% |
| Cardiovascular Health Mission | 175 | 57 | 32.6% |
| Clinical Trials Activity | 161 | 43 | 26.7% |
| Clinician Researchers | 181 | 14 | 7.7% |
| Dementia, Ageing and Aged Care Mission | 115 | 29 | 25.2% |
| Emerging Priorities and Consumer-Driven Research | 118 | 47 | 39.8% |
| Frontier Health and Medical Research | 26 | 5 | 19.2% |
| Genomics Health Futures Mission | 82 | 37 | 45.1% |
| Indigenous Health Research Fund | 42 | 17 | 40.5% |
| Medical Research Commercialisation | 12 | 4 | 33.3% |
| Preventive and Public Health Research | 88 | 23 | 26.1% |
| Primary Health Care Research | 25 | 4 | 16.0% |
| Rapid Applied Research Translation | 72 | 9 | 12.5% |
| Research Data Infrastructure | 126 | 12 | 9.5% |
| Stem Cell Therapies Mission | 59 | 17 | 28.8% |
| Traumatic Brain Injury Mission | 37 | 10 | 27.0% |

Data represents the funded rates of applications to competitive grant opportunities. Included grant opportunities that (1) were administered by the NHMRC and BGH (2) opened for applications between 7 November 2020 and 31 June 2022 and (3) had a known outcome. A grant opportunity across more than one MRFF initiative, applications or funded grants was assigned to a single MRFF initiative, with the larger number of applications.

Table 11 shows that for the broad research area, the funded rates are similar across 4 categories. While a range of funded rates are observed by the field of research (Table 12).

Table   
Funded rate by broad research area

|  |  |  |  |
| --- | --- | --- | --- |
| Broad research area | Number of applications | Funded grants | Funded rate |
| Basic Science | 124 | 40 | 32.2% |
| Clinical Medicine and Science | 424 | 136 | 32.1% |
| Health Services Research | 179 | 64 | 35.8% |
| Public Health | 95 | 35 | 36.8% |

Broad research area is nominated by applicants in the application form. Applicants can assign more than one broad research area to an application. Data represents the funded rates of applications to competitive grant opportunities that (1) were administered by the NHMRC, (2) the applicant nominated a research area in the application, (3) opened for applications between 7 November 2020 and 31 June 2022 and (4) had a known outcome.

Table   
Funded rate by the top 20 field of research

|  |  |  |  |
| --- | --- | --- | --- |
| Field of research | Number of applications | Funded grants | Funded rate |
| Aboriginal and Torres Strait Islander health | 19 | 6 | 31.58% |
| Aged health care | 17 | 4 | 23.53% |
| Cancer diagnosis | 11 | 3 | 27.27% |
| Cardiology (incl. cardiovascular diseases) | 42 | 9 | 21.43% |
| Cardiorespiratory medicine and haematology | 74 | 32 | 43.24% |
| Central nervous system | 21 | 8 | 38.10% |
| Clinical sciences | 115 | 30 | 26.09% |
| Genetics | 26 | 13 | 50.00% |
| Genomics | 12 | 3 | 25.00% |
| Geriatrics and gerontology | 13 | 3 | 23.08% |
| Health sciences | 18 | 6 | 33.33% |
| Infectious diseases | 14 | 3 | 21.43% |
| Neurology and neuromuscular diseases | 17 | 1 | 5.88% |
| Neurosciences | 25 | 5 | 20.00% |
| Oncology and carcinogenesis | 26 | 1 | 3.85% |
| Paediatrics and reproductive medicine | 18 | 8 | 44.44% |
| Psychiatry (incl. Psychotherapy) | 17 | 7 | 41.18% |
| Public health and health services | 106 | 41 | 38.68% |
| Regenerative medicine (incl. Stem cells and tissue engineering) | 12 | 2 | 16.67% |
| Rehabilitation and therapy (excl. Physiotherapy) | 13 | 5 | 38.46% |

Field of research is nominated by applicants in the application form. Applicants can assign more than one field of research to an application. The top 20 terms assigned to applications are reported. Data represents the funded rates of applications to competitive grant opportunities that (1) were administered by the NHMRC, (2) the applicant nominated a research area in the application,   
(3) opened for applications between 7 November 2020 and 31 June 2022 and (4) had a known outcome.

Project applications for MRFF grant opportunities can include multidisciplinary teams of researchers called Chief Investigators (CIs). The lead applicant is referred to as Chief Investigator A (CIA). The age of CIs and the CIA was obtained for completed grant opportunities in 2020–2022. Table 13 shows the funded rates of all CIs in applications by their age. The funded rate is calculated as the percentage of CIs in funded grants compared to CIs in all applications. CIs at all ages were supported by MRFF grants. The lowest funded rate was observed in the 20–29 age group and the highest rate in the 40–49 age group. The 40–49 age group included the largest number of CIs in funded grants.

Table   
Funded rate by age of Chief Investigators

|  |  |  |  |
| --- | --- | --- | --- |
| Age band | Number of CIs in applications | Number of CIs in funded grants | Funded rate |
| 20 – 29 | 69 | 19 | 27.5% |
| 30 – 39 | 1271 | 455 | 35.8% |
| 40 – 49 | 2598 | 1006 | 38.7% |
| 50 – 59 | 2425 | 869 | 35.8% |
| 60 – 69 | 1231 | 438 | 35.6% |
| 70+ | 191 | 58 | 30.4% |

Data represents the funded rates of all Chief Investigators (CIs) in applications to competitive grant opportunities, where the age information is available. Included grant opportunities that (1) were administered by the NHMRC, (2) opened for applications between 7 November 2020 and 31 June 2022 and (3) had a known outcome.

Table 14 shows the funded rates of CIA (lead applicant) in applications by their age.   
The highest number of CIAs in funded grants and the highest funded rate were observed in the 40-49 age group.

Table   
Funded rate by age of Chief Investigator A (lead applicant)

|  |  |  |  |
| --- | --- | --- | --- |
| Age band | Number of CIAs in applications | Number of CIAs in funded grants | Funded rate |
| 20 – 29 | 0 | 0 | - |
| 30 – 39 | 102 | 27 | 26.5% |
| 40 – 49 | 331 | 114 | 34.4% |
| 50 – 59 | 312 | 100 | 32.1% |
| 60 - 69 | 126 | 39 | 31.0% |
| 70+ | 18 | 3 | 16.7% |

Data represents the funded rates of Chief Investigators A (CIA, lead applicant) in applications to competitive grant opportunities, where the age information is available. Included grant opportunities that (1) were administered by the NHMRC, (2) opened for applications between 7 November 2020 and 31 June 2022 and (3) had a known outcome.

## Gender analysis

The gender information of CIs and the lead applicant (CIA) was obtained for completed grant opportunities in 2020-2022. Table 15 shows the number of CIs that have received funding via MRFF grants. Over 3,200 CIs were funded over the analysis period with men accounting for 49.2% of the CIs.

Table   
Chief investigators applying for MRFF grant opportunities

|  |  |  |
| --- | --- | --- |
| Gender (all CIs) | Number of CIs in funded grants across all MRFF themes | Percentage of CIs in funded grants |
| Women | 1517 | 46.9% |
| Men | 1591 | 49.2% |
| Not stated | 129 | 4.0% |
| Total | 3237 | 100.0% |

Data represents the funded rates of Chief Investigators (CIs) in an application or CIA (lead applicant), who self-identified as a   
woman or man, to a competitive grant opportunity. The competitive grant opportunities included (1) were administered by the   
NHMRC and BGH, (2) opened for applications between 7 November 2020 and 31 June 2022 and (3) had a known outcome. CIs self-identified as Intersex or Indeterminate have not been included for privacy reasons.

Table 16 presents the funded rate by gender of all CIs and for the CIA (lead applicant). Overall, during 2020-2022, over 1,500 women CIs were funded, a lower number than men CIs. However funded rates for women CIs were higher than for men. Men were the CIA in a higher number of applications than women, however had a lower overall funded rate compared with women CIAs.

Table   
Funded rates by Chief Investigators and by lead applicant (Chief Investigator A).

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Gender | Number of CIs in applications | Number of CIs in funded grants | Funded rate (%) |
| All CIs | Women | 4415 | 1517 | 34.4% |
| All CIs | Men | 5116 | 1591 | 31.1% |
| CIA | Women | 457 | 143 | 31.3% |
| CIA | Men | 564 | 156 | 27.7% |

Data represents the funded rates of Chief Investigators (CIs) in an application or CIA (lead applicant), who self-identified as a   
woman or man, to a competitive grant opportunity. The competitive grant opportunities included (1) were administered by the   
NHMRC and BGH (2) opened for applications between 7 November 2020 and 31 June 2022 and (3) had a known outcome.

The funded rate analysis by gender below focusses on all CIs. Table 17 shows the funded rate by women and men CIs across each of the MRFF themes. While there was variation across the 4 MRFF themes, women CIs had a higher funded rate than men CIs in each MRFF theme.

Table   
Funded rates by Chief Investigators by MRFF theme

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| MRFF theme | Gender | Number of CIs in applications | Number of CIs in funded grants | Funded rate |
| Patients | Women | 1127 | 455 | 40.4% |
| Patients | Men | 1311 | 458 | 34.9% |
| Research Missions | Women | 2125 | 832 | 39.2% |
| Research Missions | Men | 2365 | 884 | 37.4% |
| Research Translation | Women | 1063 | 209 | 19.7% |
| Research Translation | Men | 1320 | 229 | 17.3% |
| Researchers | Women | 100 | 21 | 21.0% |
| Researchers | Men | 120 | 20 | 16.7% |

Data represents the funded rates of Chief Investigators (CIs) in an application, who self-identified as a woman or man, to a competitive grant opportunity. The competitive grant opportunities included (1) were administered by the NHMRC and BGH (2) opened for applications between 7 November 2020 and 31 June 2022 and (3) had a known outcome. A grant opportunity across more than one MRFF theme, applications or funded grants was assigned to a single MRFF theme, with the larger number of applications.

Table 18 shows the number of grants and funding value when women and men lead applications (i.e., are the CIA) across the 4 MRFF themes. A greater or equal number   
of grants with men CIAs was awarded in Patients, Research Missions and Researchers compared to grants with women CIAs.

Table   
Chief investigators A applying for MRFF grant opportunities by MRFF theme

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Themes | Gender | Number of funded grants with a CIA of this gender | | Percentage of grants by gender in a theme | Value of funded grants led by a CIA of this gender | Percentage of funding by gender in a theme |
| Patients | Women | | 36 | 40.9% | $83,577,663.64 | 41.6% |
| Patients | Men | | 52 | 59.1% | $117,568,131.29 | 58.4% |
| Research Missions | Women | | 84 | 50.0% | $108,055,731.23 | 43.8% |
| Research Missions | Men | | 84 | 50.0% | $138,681,769.04 | 56.2% |
| Research Translation | Women | | 21 | 55.3% | $46,917,077.11 | 57.0% |
| Research Translation | Men | | 17 | 44.7% | $35,409,366.01 | 43.0% |
| Researchers | Women | | 2 | 40.0% | $4,529,210.63 | 30.2% |
| Researchers | Men | | 3 | 60.0% | $10,464,824.74 | 69.8% |

Data represents Chief Investigators A (CIA) of an application, who self-identified as a woman or man, to a competitive grant opportunity. The competitive grant opportunities included (1) were administered by the NHMRC and BGH, (2) opened for applications between 7 November 2020 and 31 June 2022 and (3) had a known outcome. A grant opportunity across more than one MRFF theme, applications or funded grants was assigned to a single MRFF theme, with the larger number of applications.

Table19 shows the funded rate by women and men CIs across each of the MRFF initiatives. The funded rate for women CIs was higher across all initiatives, except Preventive and Public Health Research and Stem Cell Therapies Mission.

Table   
Funded rates by Chief Investigators by MRFF initiative

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Initiative | Gender | Number of CIs in applications | Number of CIs in funded grants | Funded rate |
| Australian Brain Cancer Mission | Women | 48 | 14 | 29.2% |
| Australian Brain Cancer Mission | Men | 89 | 17 | 19.1% |
| Cardiovascular Health Mission | Women | 581 | 221 | 38.0% |
| Cardiovascular Health Mission | Men | 833 | 282 | 33.9% |
| Clinical Trials Activity | Women | 505 | 150 | 29.7% |
| Clinical Trials Activity | Men | 784 | 217 | 27.7% |
| Dementia, Ageing and Aged Care Mission | Women | 618 | 188 | 30.4% |
| Dementia, Ageing and Aged Care Mission | Men | 419 | 123 | 29.4% |
| Emerging Priorities and Consumer-Driven Research | Women | 622 | 305 | 49.0% |
| Emerging Priorities and Consumer-Driven Research | Men | 527 | 241 | 45.7% |
| Frontier Health and Medical Research | Women | 100 | 21 | 21.0% |
| Frontier Health and Medical Research | Men | 120 | 20 | 16.7% |
| Genomics Health Futures Mission | Women | 372 | 204 | 54.8% |
| Genomics Health Futures Mission | Men | 497 | 259 | 52.1% |
| Indigenous Health Research Fund | Women | 219 | 101 | 46.1% |
| Indigenous Health Research Fund | Men | 133 | 60 | 45.1% |
| Preventive and Public Health Research | Women | 373 | 105 | 28.2% |
| Preventive and Public Health Research | Men | 394 | 136 | 34.5% |
| Primary Health Care Research | Women | 141 | 29 | 20.6% |
| Primary Health Care Research | Men | 138 | 23 | 16.7% |
| Research Data Infrastructure | Women | 549 | 75 | 13.7% |
| Research Data Infrastructure | Men | 788 | 70 | 8.9% |
| Stem Cell Therapies Mission | Women | 134 | 43 | 32.1% |
| Stem Cell Therapies Mission | Men | 204 | 80 | 39.2% |
| Traumatic Brain Injury Mission | Women | 153 | 61 | 39.9% |
| Traumatic Brain Injury Mission | Men | 190 | 63 | 33.2% |

Data represents the funded rates of Chief Investigators (CIs) in an application, who self-identified as a woman or man, to a competitive grant opportunity. The competitive grant opportunities included (1) were administered by the NHMRC and BGH, (2) opened for applications between 7 November 2020 and 31 June 2022 and (3) had a known outcome. A grant opportunity across more than one MRFF initiative, applications or funded grants was assigned to a single MRFF initiative, with the larger number of applications. The Rapid Applied Research Translation initiative is not included as gender was not stated in applications.

Table 20 shows the number of grants and funding value when women and men lead applications (i.e., are the CIA) across the initiatives. Grants lead by women were awarded in all initiatives except the Australian Brain Cancer Mission at the time of writing this report.   
A higher proportion of women leading projects was observed in the following initiatives: Dementia, Ageing and Aged Care Mission, Emerging Priorities and Consumer-Driven Research, Indigenous Health Research Fund, Primary Health Care Research, Research Data Infrastructure and Traumatic Brain Injury Mission.

Table   
Chief investigators A applying for MRFF grant opportunities by MRFF initiative

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Initiative | Gender | Number of funded grants with a CIA of this gender | Percentage of grants by gender in an initiative | Value of funded grants with a CIA of this gender | Percentage of funding by gender in an initiative |
| Australian Brain Cancer Mission | Women | 0 | 0.0% | $0.00 | 0.0% |
| Australian Brain Cancer Mission | Men | 3 | 100.0% | $5,462,646.70 | 100.0% |
| Cardiovascular Health Mission | Women | 25 | 44.6% | $22,069,119.47 | 41.6% |
| Cardiovascular Health Mission | Men | 31 | 55.4% | $30,937,110.34 | 58.4% |
| Clinical Trials Activity | Women | 13 | 30.2% | $36,060,231.27 | 36.9% |
| Clinical Trials Activity | Men | 30 | 69.8% | $61,540,429.87 | 63.1% |
| Dementia, Ageing and Aged Care Mission | Women | 23 | 79.3% | $32,725,955.24 | 77.8% |
| Dementia, Ageing and Aged Care Mission | Men | 6 | 20.7% | $9,325,887.82 | 22.2% |
| Emerging Priorities and Consumer-Driven Research | Women | 23 | 51.1% | $47,517,432.37 | 45.9% |
| Emerging Priorities and Consumer-Driven Research | Men | 22 | 48.9% | $56,027,701.42 | 54.1% |
| Frontier Health and Medical Research | Women | 2 | 40.0% | $4,529,210.63 | 30.2% |
| Frontier Health and Medical Research | Men | 3 | 60.0% | $10,464,824.74 | 69.8% |
| Genomics Health Futures Mission | Women | 10 | 27.8% | $26,041,109.52 | 25.8% |
| Genomics Health Futures Mission | Men | 26 | 72.2% | $74,990,518.29 | 74.2% |
| Indigenous Health Research Fund | Women | 14 | 82.4% | $16,302,995.25 | 89.3% |
| Indigenous Health Research Fund | Men | 3 | 17.6% | $1,953,581.80 | 10.7% |
| Preventive and Public Health Research | Women | 10 | 43.5% | $21,949,724.80 | 41.7% |
| Preventive and Public Health Research | Men | 13 | 56.5% | $30,632,859.01 | 58.3% |
| Primary Health Care Research | Women | 3 | 75.0% | $6,470,707.31 | 85.5% |
| Primary Health Care Research | Men | 1 | 25.0% | $1,093,405.00 | 14.5% |
| Research Data Infrastructure | Women | 8 | 72.7% | $18,496,645.00 | 83.4% |
| Research Data Infrastructure | Men | 3 | 27.3% | $3,683,102.00 | 16.6% |
| Stem Cell Therapies Mission | Women | 6 | 35.3% | $5,064,689.05 | 27.1% |
| Stem Cell Therapies Mission | Men | 11 | 64.7% | $13,650,558.19 | 72.9% |
| Traumatic Brain Injury Mission | Women | 6 | 60.0% | $5,851,862.70 | 71.2% |
| Traumatic Brain Injury Mission | Men | 4 | 40.0% | $2,361,465.90 | 28.8% |

Data represents Chief Investigators (CIA) in an application, who self-identified as a woman or man, to a competitive grant opportunity. The competitive grant opportunities included (1) were administered by the NHMRC and BGH, (2) opened for applications between 7 November 2020 and 31 June 2022 and (3) had a known outcome. A grant opportunity across more than one MRFF initiative, applications or funded grants was assigned to a single MRFF initiative with the larger number of applications. MRFF initiatives, with grant opportunities where gender was not stated in applications, are not included.

Table 21 shows the funded rate by women and men CIs based on the broad research area. The funded rate for women CIs is better or equal to men CIs in 3 broad research areas, but men CIs had higher funded rates in ‘Basic science’ projects.

Table   
Funded rates by Chief Investigators by broad research area

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Broad research area | Gender | Number of CIs in applications | Number of CIs in funded grants | Funded rates |
| Basic Science | Women | 310 | 112 | 36.1% |
| Basic Science | Men | 548 | 221 | 40.3% |
| Clinical Medicine and Science | Women | 1410 | 539 | 38.2% |
| Clinical Medicine and Science | Men | 2139 | 765 | 35.8% |
| Health Services Research | Women | 940 | 391 | 41.6% |
| Health Services Research | Men | 733 | 307 | 41.9% |
| Public Health | Women | 600 | 251 | 41.8% |
| Public Health | Men | 369 | 140 | 37.9% |

Data represents the funded rates of Chief Investigators (CIs) in an application, who self-identified as a woman or man, to a competitive grant opportunity. Broad research area is nominated by applicants in the application form. Applicants can assign more than one broad research area to an application. The competitive grant opportunities included (1) were administered by the NHMRC, (2) opened for applications between 7 November 2020 and 31 June 2022 and (3) had a known outcome.

Table 22 shows the number of grants and funding value for CIAs by gender across each of the broad research areas. A higher proportion of grants led by women were awarded under ‘Health Services Research’ and ‘Public Health’.

Table   
Chief Investigator A applying for MRFF grant opportunities by broad research area

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Broad research area | Gender | Number of funded grants with a CIA of this gender | Percentage of grants by gender in a research area | Value of funded grants with a CIA of this gender | Percentage of funding by gender in a research area |
| Basic Science | Women | 9 | 23.1% | $12,026,499.70 | 19.2% |
| Basic Science | Men | 30 | 76.9% | $50,567,357.24 | 80.8% |
| Clinical Medicine and Science | Women | 48 | 35.3% | $93,234,489.22 | 33.6% |
| Clinical Medicine and Science | Men | 88 | 64.7% | $183,861,758.60 | 66.4% |
| Health Services Research | Women | 41 | 65.1% | $56,914,399.69 | 63.3% |
| Health Services Research | Men | 22 | 34.9% | $32,987,735.94 | 36.7% |
| Public Health | Women | 29 | 85.3% | $40,037,736.00 | 75.8% |
|  | Men | 5 | 14.7% | $12,772,157.96 | 24.2% |

Data represents Chief Investigators (CIA) in an application, who self-identified as a woman or man, to a competitive grant opportunity. Broad research area is nominated by applicants in the application form. Applicants can assign more than one broad research area to an application. The competitive grant opportunities included (1) were administered by the NHMRC, (2) opened for applications between 7 November 2020 and 31 June 2022 and (3) had a known outcome.

Funded rates were analysed by field of research (table 23) and the location of the Chief Investigator. The relative funded rates by gender varied across the fields of research.   
The funded rated between the fields ranged from 3.7% (women CI, Neurology and neuromuscular diseases) to 65.5% (men CI, Genetics).

Table   
Funded rates by Chief Investigator by top 20 fields of research

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Field of research | Gender | Number of CIs in applications | Number of CIs in funded grants | Funded rate |
| Aboriginal and Torres Strait Islander health | Women | 102 | 38 | 37.25% |
| Aboriginal and Torres Strait Islander health | Men | 50 | 20 | 40.00% |
| Aged health care | Women | 94 | 19 | 20.21% |
| Aged health care | Men | 46 | 14 | 30.43% |
| Cancer diagnosis | Women | 29 | 12 | 41.38% |
| Cancer diagnosis | Men | 60 | 17 | 28.33% |
| Cardiology (incl. cardiovascular diseases) | Women | 107 | 22 | 20.56% |
| Cardiology (incl. cardiovascular diseases) | Men | 206 | 59 | 28.64% |
| Cardiorespiratory medicine and haematology | Women | 249 | 114 | 45.78% |
| Cardiorespiratory medicine and haematology | Men | 433 | 193 | 44.57% |
| Central nervous system | Women | 62 | 23 | 37.10% |
| Central nervous system | Men | 96 | 42 | 43.75% |
| Clinical sciences | Women | 461 | 169 | 36.66% |
| Clinical sciences | Men | 583 | 191 | 32.76% |
| Gastroenterology and hepatology | Women | 28 | 15 | 53.57% |
| Gastroenterology and hepatology | Men | 54 | 28 | 51.85% |
| Genetics | Women | 156 | 93 | 59.62% |
| Genetics | Men | 198 | 130 | 65.66% |
| Genomics | Women | 40 | 10 | 25.00% |
| Genomics | Men | 53 | 10 | 18.87% |
| Geriatrics and gerontology | Women | 52 | 18 | 34.62% |
| Geriatrics and gerontology | Men | 49 | 12 | 24.49% |
| Health sciences | Women | 99 | 36 | 36.36% |
| Health sciences | Men | 96 | 45 | 46.88% |
| Infectious diseases | Women | 55 | NR | NR |
| Infectious diseases | Men | 71 | 17 | 23.94% |
| Neurology and neuromuscular diseases | Women | 54 | NR | NR |
| Neurology and neuromuscular diseases | Men | 71 | NR | NR |
| Neurosciences | Women | 142 | 37 | 26.06% |
| Neurosciences | Men | 175 | 53 | 30.29% |
| Oncology and carcinogenesis | Women | 80 | NR | NR |
| Oncology and carcinogenesis | Men | 145 | NR | NR |
| Paediatrics and reproductive medicine | Women | 119 | 77 | 64.71% |
| Paediatrics and reproductive medicine | Men | 68 | 27 | 39.71% |
| Psychiatry (incl. Psychotherapy) | Women | 48 | 19 | 39.58% |
| Psychiatry (incl. Psychotherapy) | Men | 76 | 34 | 44.74% |
| Public health and health services | Women | 579 | 253 | 43.70% |
| Public health and health services | Men | 452 | 166 | 36.73% |
| Rehabilitation and therapy (excl. Physiotherapy) | Women | 69 | 29 | 42.03% |
| Rehabilitation and therapy (excl. Physiotherapy) | Men | 38 | 15 | 39.47% |
| Other | Women | 970 | 349 | 35.98% |
| Other | Men | 1303 | 423 | 32.46% |

NR is not reported for privacy reasons, when less than 10 people were identified. Data represents the funded rates of Chief Investigators (CIs) in an application, who self-identified as a woman or man, to a competitive grant opportunity. Field of research is nominated by applicants in the application form. Applicants can assign more than one field of research to an application. The top 20 categories were derived by the number of CIs whose application was assigned to a category. The term ‘Other’ relates to fields not in the top 20. The competitive grant opportunities included (1) were administered by the NHMRC, (2) opened for applications between 7 November 2020 and 31 June 2022 and (3) had a known outcome.

Table 24 shows that funded rates of women CIs were equal or better than those for men CIs in applications where the lead organisation is based in New South Wales, the Northern Territory, Queensland, South Australia, Tasmania, and Western Australia. As many MRFF-funded grants are collaborative research efforts, CIs on an application may be in multiple Australian locations.

Table   
Funded rates by Chief Investigators by location

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Location of lead applicant | Gender | Number of CIs in applications | Number of CIs in funded grants | Funded rate |
| ACT | Women | 96 | 37 | 38.5% |
| ACT | Men | 112 | 50 | 44.6% |
| NSW | Women | 1306 | 430 | 32.9% |
| NSW | Men | 1548 | 436 | 28.2% |
| NT | Women | 57 | 49 | 86.0% |
| NT | Men | 41 | 25 | 61.0% |
| QLD | Women | 720 | 205 | 28.5% |
| QLD | Men | 789 | 196 | 24.8% |
| SA | Women | 443 | 148 | 33.4% |
| SA | Men | 541 | 176 | 32.5% |
| TAS | Women | 64 | 23 | 35.9% |
| TAS | Men | 48 | 15 | 31.3% |
| VIC | Women | 1445 | 514 | 35.6% |
| VIC | Men | 1681 | 571 | 34.0% |
| WA | Women | 303 | 111 | 36.6% |
| WA | Men | 389 | 122 | 31.4% |

Data represents the funded rates of Chief Investigators (CIs) in an application, who self-identified as a woman or man, to a competitive grant opportunity. The location is based on the lead organisation (also known as the administering institution or primary organisation), but CIs involved in the application may be located in other states and territories. The competitive grant opportunities included (1) were administered by the NHMRC and BGH, (2) opened for applications between 7 November 2020 and 31 June 2022 and (3) had a known outcome.

# Consistency of financial assistance with the 2020–2022 Priorities

The Australian Government considered the 2020–2022 Priorities when the MRFF initiatives were established under the 10-year investment plan for the MRFF. A list of the 2020–2022 Priorities is provided at Table 1.

Table 25 presents how MRFF initiatives and grant opportunities (as at 5 November 2022) relate to the 2020–2022 Priorities.

Table   
MRFF initiatives and open grant opportunities during 2020-2022 Priorities  
(7 November 2020 and 5 November 2022)

|  |  |  |
| --- | --- | --- |
| MRFF initiative | Grant opportunity | 2020-2022 Priorities |
| Australian Brain Cancer Mission | 2021 Brain Cancer Research | * Consumer-Driven Research * Clinical Researcher Capacity * Translational Research Infrastructure |
| 2021 GBM AGILE | * Comparative Effectiveness Research * Consumer-Driven Research |
| 2022 Australian Brain Cancer Research Infrastructure | * Consumer-Driven Research * Digital Health Intelligence |
| Cardiovascular Health Mission | 2020 Cardiovascular Health | * Primary Care Research * Consumer-Driven Research |
| 2021 Cardiovascular Health | * Aboriginal and Torres Strait Islander Health * Primary Care Research * Consumer-Driven Research * Public Health Interventions |
| 2022 Cardiovascular Health | * Primary Care Research * Consumer-Driven Research * Public Health Interventions |
| Clinical Trials Activity | 2021 Clinical Trials Activity | * Comparative Effectiveness Research * Primary Care Research * Clinical Researcher Capacity * Drug Repurposing * Public Health Interventions |
| 2021 Innovative Therapies for Mental Illness | * Comparative Effectiveness Research * Drug Repurposing |
| 2021 International Clinical Trial Collaborations (Round 21.1) | * Comparative Effectiveness Research * Drug Repurposing |
| 2021 International Clinical Trial Collaborations (Round 21.2) | * Comparative Effectiveness Research * Clinical Researcher Capacity |
| 2021 Rare Cancers, Rare Diseases and Unmet Need | * Clinician Researcher Capability * Comparative Effectiveness Research * Ageing and Aged Care * One Health – Antimicrobial Resistance * Digital Health Intelligence |
| 2022 International Clinical Trial Collaborations (Round 22.1) | * Clinical Researcher Capacity |
| 2022 International Clinical Trial Collaborations (Round 22.2) | * Clinical Researcher Capacity |
| Clinical Trials Activity and Emerging Priorities and Consumer-Driven Research | 2022 Multiple Sclerosis Research | * Consumer-Driven Research * Clinical Researcher Capacity |
| 2022 Pancreatic Cancer Research | * Consumer-Driven Research * Clinical Researcher Capacity |
| Clinician Researchers | 2020 Clinician Researchers: Applied Research in Health | * Clinical Researcher Fellowships |
| 2022 Clinician Researchers: Nurses, Midwives and Allied Health | * Comparative Effectiveness Research * Primary Care Research * Clinical Researcher Capacity |
| Coronavirus Research Response | 2021 COVID-19 Vaccine-Associated Thrombosis with Thrombocytopenia Syndrome | * Global Health and Health Security * Consumer-Driven Research * Public Health Interventions |
| 2021 COVID-19 Health Impacts and Vaccination Schedules | * Global Health and Health Security * Comparative Effectiveness Research |
| 2021 COVID-19 Treatment Access and Public Health Activities | * Global Health and Health Security * Comparative Effectiveness Research * Digital Health Intelligence * Primary Care Research * Translational Research Infrastructure * Public Health Interventions |
| Dementia, Ageing and Aged Care Mission | 2020 Dementia, Ageing and Aged Care | * Ageing and Aged Care * Digital Health Intelligence * Primary Care Research * Public Health Interventions * Consumer-Driven Research |
| 2021 Dementia, Ageing and Aged Care | * Ageing and Aged care * Digital Health Intelligence * Primary Care Research * Public Health Interventions |
| 2022 Dementia, Ageing and Aged Care | * Ageing and Aged Care * Digital Health Intelligence * Primary Care Research * Public Health Interventions |
| Early to Mid-Career Researchers | 2021 Early to Mid-Career Researchers | * Consumer-Driven Research * Translational Research Infrastructure |
| Emerging Priorities and Consumer-Driven Research | 2020 Improving Diagnosis in Cancers With Low Survival Rates | * Consumer-Driven Research |
| 2020 Neurofibromatosis Research | * Consumer-Driven Research |
| 2020 Paediatric Cancer | * Consumer-Driven Research * Clinician Researcher Capacity * Digital Health Intelligence |
| 2021 Chronic Musculoskeletal Conditions in Children and Adolescents | * Primary Care Research * Consumer-Driven Research |
| 2021 Chronic Neurological Conditions | * Primary Care Research * Consumer-Driven Research |
| 2021 Improving the Health and Wellbeing of Aboriginal and Torres Strait Islander Mothers and Babies | * Aboriginal and Torres Strait Islander Health * Primary Care Research * Consumer-Driven Research * Public Health Interventions |
| 2022 Mitochondrial Donation Pilot Program | * Consumer-Driven Research |
| 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care | * Consumer-Driven Research * Comparative Effectiveness Research |
| Genomics Health Futures Mission | 2020 Genomics Health Futures Mission | * Consumer-Driven Research * Public Health Interventions |
| 2021 Genomics Health Futures Mission | * Digital Health Intelligence * Aboriginal and Torres Strait Islander Health * Consumer-Driven Research * Public Health Interventions |
| 2022 Genomics Health Futures | * Aboriginal and Torres Strait Islander Health * Comparative Effectiveness Research * Primary Care Research * Public Health Interventions |
| Indigenous Health Research Fund | 2020 Indigenous Health Research | * Aboriginal and Torres Strait Islander Health * Primary Care Research * Consumer-Driven Research |
| 2021 Indigenous Health Research | * Aboriginal and Torres Strait Islander Health * Public Health Interventions |
| 2022 Indigenous Health Research | * Aboriginal and tress Strait Islander Health |
| Medical Research Commercialisation | 2020 Early Stage Translation and Commercialisation Support | * Translational Research Infrastructure * Drug Repurposing * Digital Health Intelligence * Comparative Effectiveness Research |
| 2021 BioMedTech Incubator | * Translational Research Infrastructure |
| National Critical Research Infrastructure | 2021 mRNA Clinical Trials Enabling Infrastructure | * Global Health and Health Security * Translational Research Infrastructure |
| 2022 National Critical Research Infrastructure | * Digital Health Intelligence * Translational Research Infrastructure |
| Preventive and Public Health Research | 2020 Quality, Safety and Effectiveness of Medicine Use and Medicine Intervention by Pharmacists | * Aboriginal and Torres Strait Islander health * Clinical Researcher Capacity * Consumer-Driven Research * Public Health Interventions |
| 2021 Chronic Respiratory Conditions | * Public Health Interventions |
| 2021 Consumer-Led Research | * Consumer-Driven Research |
| 2021 Maternal Health and Healthy Lifestyles | * Public Health Interventions |
| 2021 Optimising the Clinical Use of Immunoglobulins | * Comparative Effectiveness Research * Primary Care Research * Public Health Interventions |
| 2022 Assessment of High-Cost Gene Treatments and Digital Health Interventions | * Digital Health Intelligence * Comparative Effectiveness Research * Primary Care Research * Public Health Interventions |
| 2022 Quality, Safety and Effectiveness of Medicine Use and Medicine Intervention by Pharmacists | * Ageing and Aged Care * Primary Care Research * Public Health Interventions |
| Preventive and Public Health Research, Emerging Priorities and Consumer-Driven Research | 2022 Effective Treatments and Therapies | * Ageing and Aged Care * Primary Care Research * Consumer-Driven Research * Public Health Interventions |
| Primary Health Care Research | 2021 Primary Health Care Digital Innovations | * Primary Care Research * Digital Health Intelligence |
| 2021 Primary Health Care Research | * Primary Care Research * Digital Health Intelligence * Public Health Interventions |
| Rapid Applied Research Translation | 2020 Rapid Applied Research Translation | * Public Health Interventions * Primary Health Research * Consumer-Driven Research |
| Research Data Infrastructure | 2020 Primary Health Care Research Data Infrastructure | * Aboriginal and Torres Strait Islander Health * Digital Health Intelligence * Primary Care Research * Ageing and Aged Care |
| 2021 Research Data Infrastructure | * Digital Health Intelligence |
| 2022 Research Data Infrastructure | * Digital Health Intelligence * Translational Research Infrastructure |
| Stem Cell Therapies Mission | 2020 Stem Cell Therapies Mission | * Consumer-Driven Research * Public Health Interventions |
| 2021 Stem Cell Therapies | * Consumer-Driven Research * Drug Repurposing |
| 2022 Stem Cell Therapies | * Consumer-Driven Research * Drug Repurposing |
| Traumatic Brain Injury Mission | 2020 Traumatic Brain Injury Mission | * Digital Health Intelligence * Primary Care Research * Consumer-Driven Research |
| Traumatic Brain Injury Mission and Emerging Priorities and Consumer-Driven Research | 2021 Traumatic Brain Injury | * Digital Health Intelligence * Consumer-Driven Research |

# Processes for determining grants of financial assistance

All MRFF grant opportunities are consistent with the *Commonwealth Grant Rules and Guidelines 2017* and the MRFF Act.

## Determination of MRFF initiatives

The Australian Medical Research Advisory Board (AMRAB) is responsible for developing the MRFF Strategy and Priorities. AMRAB determined the 2016–2021 Strategy, 2021–2026 Strategy and the 2020–2022 Priorities through extensive national consultation with consumers, researchers, health care providers and managers.

The Health Minister took into account the 2020–2022 Priorities when the MRFF initiatives were extended under the second 10-year investment plan for the MRFF. This occurred in the context of the 2022–2023 Budget.

## Determination of grants of financial assistance

Grant opportunities under MRFF initiatives are supported by grant opportunity guidelines and processes that outline the:

* conduct of the application process
* assessment of applications
* determination of outcomes based on assessment
* awarding of grants to successful applicants

The Department works in partnership with BGH within the Department of Industry, Science and Resources, and the NHMRC to administer grant opportunities under the MRFF. In this relationship, the Department retains responsibility for policy and program oversight to ensure that grants align with the aims and objectives of specific grant opportunities. The grants hub (BGH or NHMRC) is responsible for conducting the grant opportunity, inclusive of the assessment of applications by expert reviewers (such as scientific experts, consumers, industry experts, and health service providers) and reporting the outcomes of the assessment process to the program delegate as determined by the Health Minister.

Grant opportunities can be ‘open competitive’ and ‘targeted or restricted competitive’, depending on the aims and objectives of the specific grant opportunities. These categorisations allow all organisations, identified in the MRFF Act as eligible to receive MRFF funding, to be able to apply for funding (i.e., these grant opportunities are not restricted to an application from a single organisation). During 2020–2022, 60 of 61 grant opportunities (in Table 25) were ‘open competitive’ or ‘targeted or restricted competitive’. All applications to MRFF grant opportunities were assessed by independent experts against criteria set out in the grant opportunity guidelines.

The list of MRFF grants with payments commencing during the period when the 2020–2022 Priorities were in force (7 November 2020 to 5 November 2022), is provided at Appendices E and F. The funded rates of grant opportunities are provided at Appendix G.

At the grants hub, the grant assessment committee assembled and assesses grant applications. Outcome report prepared. At Department of Health and Aged Care, the Minister's delegate considers the outcome report and approves the spending of public money for grants to be funded. 
At the grants hub, inform the applicants of the outcomes. Manage the grant agreement and payments to successful applicant. Outcomes of grant opportunity announced. Ongoing management of grants to completion by Grants Hub/ Department of Health and Aged Care. 
What happens after a grant opportunity closes?

\* The Health Minister delegates powers under the MRFF Act to the Department’s senior executives.

## MRFF Grant Assessment Committees

MRFF funding is primarily disbursed through peer-reviewed contestable processes to ensure the integrity of the research design, quality and safety for patients, and best return on government investment.

Independent Grant Assessment Committees (GACs) are assembled and managed by one of the grants hubs (NHMRC or BGH), comprised of qualified and experienced national and international experts who assess applications and provide recommendations regarding funding.

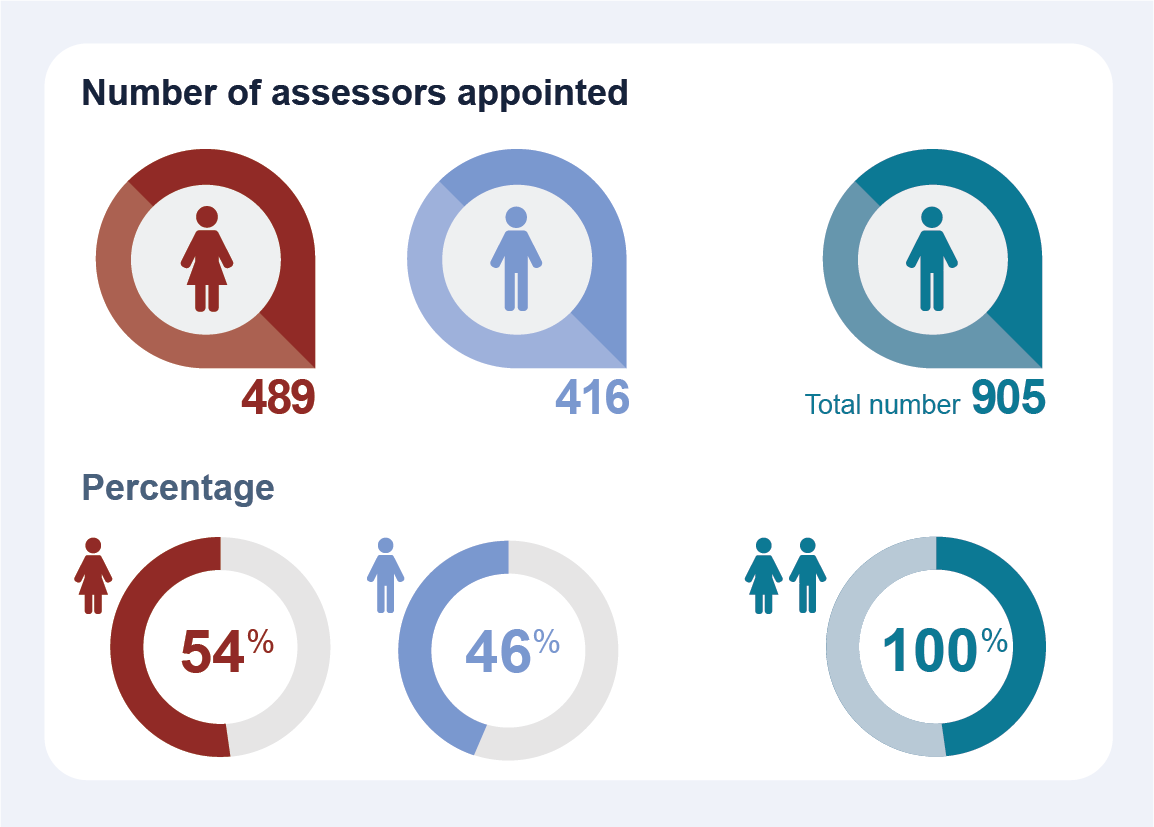
GAC members come from different backgrounds and bring different perspectives. They include expert reviewers such as scientific experts, consumers, industry experts and health service providers. Members are selected on the basis that they will bring experience and expertise in a range of areas including:

* transdisciplinary
* academia
* clinical
* health services delivery
* translation research
* consumers and patients
* Aboriginal and/or Torres Strait Islander health
* industry and commercialisation expertise.

People who would like to participate in MRFF grant assessments are able to register their interest on this MRFF [website](https://www.nhmrc.gov.au/2022-23-medical-research-future-fund-mrff-grant-opportunities). Potential members of GACs may be contacted directly by the Department or one of the grants hubs.

## A snapshot of Grant Assessment Committees

During 2020-2022, 905 experts were engaged in Grant Assessment Committees   
across 40 panels.



GAC members came from all states and territories. International experts participated in GACs.

Number of members. 
ACT 35
NSW 227
NT 11
Queensland 107
SA 114
Tasmania 33
Victoria 161
WA 94
International 120


GAC members came from 119 Australian and 41 international organisations.

Type and number of organisations that GAC members came from:
First Nations organisations 5
Health services organisations17
Hospitals 8
Medical Research Institutes 26
Non-profit organisations 8
Corporations 7
Professional associations 5
University 37
other organisations 6
Total 119


Diversity of experience in GAC membership is important.



The data represents the composition of 40 GAC panels held to consider the subset of competitive grant opportunities that were assessed while the Priorities were in force between 7 November 2020 and 5 November 2022. Gender and terms describing expertise were self-assigned by the GAC members. Australian organisations identified by GAC members as their employer or organisation they were representing.

# Other financial assistance provided by the Australian Government for medical research and innovation

Other financial assistance provided by the Australian Government for medical research and innovation includes funding from:

* the NHMRC, for research grants
* the Biomedical Translation Fund (BTF) to private sector fund managers to develop and commercialise biomedical discoveries in Australia
* other funding opportunities.

Table 26 outlines the financial assistance provided in 2020–21 and 2021–22; these periods represent financial years and are not identical to the period during which the 2020–2022 Priorities were in force.

Table   
Australian Government financial support for medical research and innovation,  
2020–21 and 2021–22

|  |  |  |
| --- | --- | --- |
| Funding opportunity | 2020–21 ($ million) | 2021–22 ($ million) |
| NHMRC research grantsa | 850.4 | 830.2 |
| BTF investmentsb | 38.3 | 28.1 |
| Other initiativesc | 99.0 | 113.8 |

1. The actual amounts paid as per the 2020–2021 NHMRC Annual Report (p. 136) and the 2021–22 NHMRC Annual Report (p. 131).
2. Reporting by the Translation and Commercialisation Section managing the BTF within the Department of Industry, Science and Resources.
3. The amounts for other initiatives were derived from the Australian Government’s Science, Research and Innovation Budget Tables 2021–22 — research and development investment by program/activity under the Health Portfolio, excluding the MRFF, the NHMRC and the BTF. At the time of writing this report, estimated actual figures are available for 2020–21 and budget estimates for 2021–22.

# Other financial assistance provided by the Australian Government for research and development

The Australian Government provides support for research and development across the whole of government. Table 27 outlines the financial assistance for key research and development initiatives in 2020–21 and 2021–22; these are the financial years — that is,   
the period is not identical to the period during which the 2020–2022 Priorities were in force.

Table   
Australian Government financial support for key research and development initiatives,   
2020–21 and 2021–22

|  |  |  |
| --- | --- | --- |
| Funding opportunitya | 2020–21 ($ million) | 2021–22 ($ million) |
| Australian Research Council – National Competitive Grants Program | 806.4 | 814.6 |
| Research Block Grantsb | 2,973.3 | 1,999.8 |
| Cooperative Research Centres | 234.2 | 189.0 |

1. The amounts were derived for the stated initiative from the Australian Government’s Science, Research and Innovation Budget Tables 2021–22 — research and development investment by program/activity. At the time of writing this report, estimated actual figures are available for 2020–21 and budget estimates for 2021–22.
2. Comprises the Research Support Program and the Research Training Program.

Overall, the MRFF accounted for 12% of Australian Government financial support in key research and development initiatives during 2020–21 and 2021– 22.

Percentage of Australian Government financial support in key research and development initiatives during 2020–21 and 2021.  
MRFF grants 12.0%, NHMRC research grants 16.5% BTF investments 0.7%, other Health Portfolio initiatives 2.1%,
Australian Research Council- National Competitive Grants Program 15.9%, 
Research Block Grants 48.7% and Cooperative Research Centres 4.1%.


The data represents combinations of the amounts from 2020–21 and 2021–22 financial years in Tables 2, 26 and 27.

# Appendix A Initiatives under the 2020–2022 Priorities

Table MRFF initiatives under the 2020–2022 Priorities

|  |  |  |
| --- | --- | --- |
| Theme | Initiative | Objective |
| Patients | Clinical Trials Activity | The objective of this initiative is to increase clinical trial activity in Australia to:   * improve the evidence base supporting clinical care * help patients access trials relevant to their health circumstances * enable researchers to bring international trials to Australian patients. |
| Emerging Priorities and Consumer-Driven Research | The objectives of this initiative are to support research that improves patient care and translation of new discoveries, and encourage collaboration between consumers and researchers. |
| Global Health | The objectives of this initiative are to develop knowledge and tools for addressing threats to Australia’s national health security from the regional and global challenges of antimicrobial resistance and drug-resistant tuberculosis. |
| Researchers | Clinician Researchers | The objective of this initiative is to help the next generation of talented Australian health professionals drive medical research, make new discoveries and ensure implementation of best practice care for their patients. |
| Early to  Mid-Career Researchers | The objective of this new initiative is to build and grow research capacity and capability in Australia by supporting Early to Mid-Career Researchers to continue their health and medical research careers. |
| Frontier Health and Medical Research | The objective of this initiative is to create opportunities to explore bold and innovative ideas, make discoveries of great potential, and to support the translation and commercialisation of these discoveries to achieve global health impact. |
| Researcher Exchange and Development  Within Industry | The objective of this initiative is to foster partnerships between industry, universities, registered training organisations and governments, and strengthen Australia’s success in research translation and commercialisation. |
| Research missions | Australian Brain Cancer Mission | The objectives of this Mission are to:   * double the survival rate of Australians living with brain cancer over 10 years * improve quality of life for people with brain cancer * give every patient (adult and child) with brain cancer a chance to join a clinical trial * boost Australian research and build research capacity. |
| Cardiovascular Health Mission | The objective of this Mission is to make transformative improvements in cardiovascular health and stroke management for all Australians. |
| Dementia, Ageing and Aged Care Mission | The objective of this Mission is to improve quality of life for Australians as they age. |
| Genomics Health Futures Mission | The objective of this Mission is to save or transform the lives of more than 200,000 Australians through genomic research to deliver better testing, diagnosis and treatment. |
| Indigenous Health Research Fund | The objectives of the Indigenous Health Research Fund are to improve the health of Aboriginal and Torres Strait Islander people through:   * Indigenous-led research practice and governance * knowledge translation * evidence-based structural change in Aboriginal and Torres Strait Islander health practice * building on the unique knowledge, strengths and endurance of our communities, with particular reference to Country, culture and spirituality. |
| Million Minds  Mental Health Research Mission | This mission aims to support a million Australians with mental health issues to access new approaches to prevention, diagnosis, treatment and recovery. |
| Stem Cell  Therapies Mission | The objective of this Mission is to support world-leading translational stem cell research that develops and delivers innovative, safe and effective stem cell medicines to improve health outcomes, in partnership with patients and carers. |
| Traumatic Brain Injury Mission | The objectives of this Mission are to:   * better predict recovery outcomes after a traumatic brain injury * identify the most effective care and treatments * reduce barriers to support people to live their best life after a traumatic brain injury. |
| Research translation | Medical Research Commercialisation | The objective of this initiative is to support early-stage health and medical research and innovation in Australia through to proof-of-concept and beyond, providing opportunities for commercialisation. |
| National Critical Research Infrastructure | The objective of this initiative is to establish and extend infrastructure (facilities, equipment, systems and services) of critical importance that will be used to conduct world-class health and medical research. |
| Preventative and Public Health Research | The objective of this initiative is to support research into new ways to address risk factors for chronic and complex diseases in Australia. |
| Primary Health  Care Research | The objective of this initiative is to increase Australia’s evidence base in primary health care through research to improve service delivery and patient outcomes, and translate this knowledge into action. |
| Rapid Applied Research Translation | The objective of this initiative is to support transformative translational research, so that patients can benefit from better quality of care. |
| Research Data Infrastructure | The objective of this initiative is to support strategic investments that establish and extend national research data infrastructure to support world-class health and medical research. |

Description of MRFF initiatives from the [MRFF website](https://www.health.gov.au/our-work/medical-research-future-fund/all-mrff-initiatives) (accessed 30 November 2022).

# Appendix B MRFF Disbursements since inception by theme and initiative.

Table MRFF Disbursements since inception by theme and initiative

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | Financial year ($ million) | | | | | | |  |
| **Theme** | **MRFF initiative** | **16-17** | **17-18** | **18-19** | **19-20** | **20-21** | **21-22** | **22-23** | **Total** |
| Patients | Emerging Priorities and Consumer-Driven Research | 7.0 |  | 63.4 | 54.0 | 84.5 | 84.4 | 19.1 | **312.4** |
| Clinical Trials Activity | 1.0 | 4.8 | 47.4 | 68.1 | 63.7 | 59.3 |  | **244.3** |
| Global Health |  | 2.5 | 1.8 | 3.4 | 2.7 | 3.0 |  | **13.3** |
| Researchers | Frontier Health and Medical Research |  |  |  | 20.1 | 53.6 | 61.5 | 23.7 | **158.9** |
| Researcher Exchange and Development within Industry |  |  |  | 8.0 | 10.0 | 10.0 | 4.0 | **32.0** |
| Clinician Researchers |  | 1.8 | 4.9 | 19.8 | 20.4 | 22.2 | 1.4 | **70.4** |
| Early to Mid-Career Researchers |  |  |  |  |  |  |  |  |
| Research Missions | Australian Brain Cancer Mission |  | 1.0 | 4.7 | 7.4 | 5.0 | 3.6 | 2.5 | **24.3** |
| Million Minds Mental Health Research Mission |  |  | 6.2 | 7.0 | 12.0 | 15.0 | 2.9 | **43.0** |
| Genomics Health Futures Mission |  |  | 8.8 | 37.5 | 87.4 | 69.9 |  | **203.7** |
| Dementia, Ageing and Aged Care Mission |  |  | 10.0 | 13.1 | 17.0 | 17.2 |  | **57.3** |
| Indigenous Health Research Fund |  |  | 15.0 | 22.5 | 18.8 | 11.4 |  | **67.7** |
| Stem Cell Therapies Mission |  |  |  | 6.0 | 17.6 | 18.0 |  | **41.6** |
| Cardiovascular Health Mission |  |  |  | 22.1 | 23.8 | 23.6 |  | **69.6** |
| Traumatic Brain Injury Mission |  |  |  | 5.0 | 4.0 | 3.9 |  | **12.9** |
| Research Translation | Preventive and Public Health Research | 10.0 |  | 11.2 | 35.2 | 63.9 | 31.5 | 10.0 | **161.7** |
| Primary Health Care Research |  |  |  | 6.7 | 7.1 | 4.1 |  | **17.9** |
| Rapid Applied Research Translation |  | 10.0 | 17.6 | 16.6 | 20.6 | 22.0 |  | **86.9** |
| Medical Research Commercialisation |  | 10.0 | 15.4 | 15.3 | 60.3 | 35.3 |  | **136.3** |
| National Critical Research Infrastructure |  |  |  | 7.7 | 12.6 | 119.2 | 3.7 | **143.3** |
| Research Data Infrastructure |  |  |  |  | 12.9 | 12.3 |  | **25.2** |
| **Total** |  | **18.0** | **30.1** | **206.4** | **375.5** | **597.9** | **627.4** | **67.4** | **1,922.6** |

Data represents payments made to all active grants in the relevant financial year (FY) (i.e., new grants as well as grants contracted in previous FYs). Figures for 2022-2023 are partial. Data as at 31 December 2022.

# Appendix C MRFF grants since inception by theme and initiative.

Table MRFF grants since inception by theme and initiative

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | Number in Financial Year | | | | | | |  | | |
| **Theme** | **MRFF initiative** | **16-17** | **17-18** | **18-19** | **19-20** | **20-21** | **21-22** | **22-23** | | **Total** |
| Patients | Emerging Priorities and Consumer-Driven Research | 2 |  | 23 | 38 | 28 | 36 |  | | **127** |
| Clinical Trials Activity | 1 | 18 | 32 | 43 | 25 | 43 |  | | **162** |
| Global Health |  | 5 |  | 4 |  |  |  | | **9** |
| Researchers | Frontier Health and Medical Research |  |  |  | 16 | 22 | 18 |  | | **56** |
| Researcher Exchange and Development within Industry |  |  |  | 1 |  |  |  | | **1** |
| Clinician Researchers |  | 37 | 28 | 15 | 17 | 14 |  | | **111** |
| Early to Mid-Career Researchers |  |  |  |  |  |  |  | |  |
| Research Missions | Australian Brain Cancer Mission |  | 1 | 4 | 2 | 1 |  | 3 | | **11** |
| Million Minds Mental Health Research Mission |  |  | 7 | 3 | 8 |  |  | | **18** |
| Genomics Health Futures Mission |  |  | 2 | 20 | 21 | 20 |  | | **63** |
| Dementia, Ageing and Aged Care Mission |  |  | 1 | 15 | 11 | 18 |  | | **45** |
| Indigenous Health Research Fund |  |  | 1 | 9 | 6 | 11 |  | | **27** |
| Stem Cell Therapies Mission |  |  |  | 10 | 17 | 7 |  | | **34** |
| Cardiovascular Health Mission |  |  |  | 14 | 16 | 41 |  | | **71** |
| Traumatic Brain Injury Mission |  |  |  | 3 | 6 | 3 |  | | **12** |
| Research Translation | Preventive and Public Health Research | 1 |  | 13 | 32 | 25 | 6 |  | | **77** |
| Primary Health Care Research |  |  |  | 4 | 7 | 4 |  | | **15** |
| Rapid Applied Research Translation |  | 9 | 9 | 8 | 1 | 9 |  | | **36** |
| Medical Research Commercialisation |  | 1 | 2 |  | 4 |  |  | | **7** |
| National Critical Research Infrastructure |  |  |  | 5 | 5 | 3 |  | | **13** |
| Research Data Infrastructure |  |  |  |  | 7 | 5 |  | | **12** |
| **Total** |  | **4** | **71** | **122** | **242** | **227** | **238** | **3** | | **907** |

Data represents newly awarded and announced grants in the relevant financial year. Figures for 2022-2023 are partial. Data as at 31 December 2022.

# Appendix D MRFF grant opportunities since inception by theme and initiative.

Table MRFF Grant opportunities opened since inception by theme and initiative

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | Number in financial year | | | | | | | |  |
| **Theme** | **initiative** | **16-17** | **17-18** | **18-19** | **19-20** | **20-21** | **21-22** | **22-23** | **Total** | |
| Patients | Emerging Priorities and Consumer-Driven Research | 2 | 8 | 15 | 16 | 6 | 6 | 1 | **54** | |
| Clinical Trials Activity | 1 | 3 | 3 | 5 | 7 | 3 | 2 | **24** | |
| Global Health | - | 2 | - | 1 | - | - | - | **3** | |
| Researchers | Frontier Health and Medical Research | - | - | 1 | 5 | 5 | - | - | **11** | |
| Researcher Exchange and Development within Industry | - | - | - | 1 | - | - | - | **1** | |
| Clinician Researchers | 1 | 1 | - | 1 | 1 | 1 | - | **5** | |
| Early to Mid-Career Researchers | - | - | - | - | - | 1 | - | **1** | |
| Research Missions | Australian Brain Cancer Mission | - | 3 | 1 | 1 | 1 | 3 | - | **9** | |
| Million Minds Mental Health Research Mission | - | - | 1 | 2 | 1 | - | 1 | **5** | |
| Genomics Health Futures Mission | - | - | 4 | 1 | 1 | 1 | 1 | **8** | |
| Dementia, Ageing and Aged Care Mission | - | - | 1 | 3 | 1 | 2 | - | **7** | |
| Indigenous Health Research Fund | - | - | 1 | 1 | 1 | 1 | 1 | **5** | |
| Stem Cell Therapies Mission | - | - | - | 2 | 1 | 2 | - | **5** | |
| Cardiovascular Health Mission | - | - | - | 4 | 1 | 2 | - | **7** | |
| Traumatic Brain Injury Mission | - | - | - | 1 | 1 | - | - | **2** | |
| Research Translation | Preventive and Public Health Research | 1 | - | 5 | 3 | 4 | 5 | 1 | **19** | |
| Primary Health Care Research | - | - | - | 1 | 1 | 2 | - | **4** | |
| Rapid Applied Research Translation | 1 | - | 1 | 1 | 1 | - | - | **4** | |
| Medical Research Commercialisation | - | 1 | 2 | - | 1 | 1 | - | **5** | |
| National Critical Research Infrastructure | - | - | - | 3 | 1 | 2 | - | **6** | |
| Research Data Infrastructure | - | - | - | - | 1 | 1 | 1 | **3** | |
| Various | Various a | - | - | - | 1 | - | 5 | - | **6** | |
| **TOTAL** |  | **6** | **18** | **35** | **53** | **36** | **38** | **8** | **194** | |

a: Includes grant opportunities that were funded across more than one MRFF initiative.   
Data represents all grant opportunities that had opened for applications as at 31 December 2022. Figures for 2022-2023 are partial.

# Appendix E MRFF grants with payments commencing between 7 November 2020 and 5 November 2022

Table - MRFF grant recipients with payments commencing between 7 November 2020 and 5 November 2022 inclusive

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| | MRFF initiative | Grant opportunity | Institution | Project name or description | Amount ($ excl GST) |  | | --- | --- | --- | --- | --- | --- | | Australian Brain Cancer Mission | 2020 Brain Cancer Survivorship | University of Melbourne | Responding to need: technology-enhanced brain cancer survivorship | 2,615,278.00 | a | | Australian Brain Cancer Mission | 2021 Brain Cancer Research | The Walter and Eliza Hall Institute of Medical Research | “GLIMMER” - Glioma Liquid biopsy and Multiomic-Monitoring Enabled Research platform | 4,550,471.30 |  | | Australian Brain Cancer Mission | 2021 Brain Cancer Research | The Council of the Queensland Institute of Medical Research | “Off-the-shelf” CAR-T cell immunotherapy for brain cancer | 329,489.00 |  | | Australian Brain Cancer Mission | 2021 Brain Cancer Research | University of New South Wales | A new targeted combination therapy with matched biomarker to treat intractable glioblastoma | 582,686.40 |  | | Cardiovascular Health Mission | 2020 Cardiovascular Health | University of New South Wales | CardiacAI: Deep learning to predict and prevent secondary cardiovascular events | 544,978.65 |  | | Cardiovascular Health Mission | 2020 Cardiovascular Health | The University of Queensland | Development of drugs to prevent ischemic injuries of the heart and brain | 1,499,560.20 |  | | Cardiovascular Health Mission | 2020 Cardiovascular Health | University of New South Wales | Development of novel, clinically viable strategies for reducing cardiac damage and preventing future events in myocardial infarction (MI) survivors by targeting inflammation | 2,849,891.71 |  | | Cardiovascular Health Mission | 2020 Cardiovascular Health | University of Sydney | Digital solutions for heart failure best practice care | 936,836.88 |  | | Cardiovascular Health Mission | 2020 Cardiovascular Health | Monash University | ECMO-Rehab: A Randomised Controlled Trial of Early Cardiac Rehabilitation to Improve Survival and Recovery in Critically-ill Patients on ECMO | 662,648.57 |  | | Cardiovascular Health Mission | 2020 Cardiovascular Health | University of Sydney | Guardian Angel: Implementation of a peer support program for people with heart disease | 655,522.17 |  | | Cardiovascular Health Mission | 2020 Cardiovascular Health | University of Melbourne | Improving life after stroke with tailored support: Innovation in use of national registry data | 505,704.36 |  | | Cardiovascular Health Mission | 2020 Cardiovascular Health | University of Sydney | LesioLogic | 1,102,873.15 |  | | Cardiovascular Health Mission | 2020 Cardiovascular Health | The University of Queensland | Measuring, Monitoring, and Motivating Adherence to Self-Managed Aphasia Treatment | 388,521.10 |  | | Cardiovascular Health Mission | 2020 Cardiovascular Health | Monash University | New models of rehabilitation to improve work and health outcomes after stroke | 999,056.20 |  | | Cardiovascular Health Mission | 2020 Cardiovascular Health | University of Melbourne | REACHING FOR YOUR WORDS: A Phase IIa umbrella trial of integrated UPper limb & Language Impairment and Functional Training (UPLIFT) after stroke | 992,634.36 |  | | Cardiovascular Health Mission | 2020 Cardiovascular Health | University of Sydney | Safety and Tolerability of AZD6482 in Reperfusion for Stroke (STARS) | 2,706,533.13 |  | | Cardiovascular Health Mission | 2020 Cardiovascular Health | Monash University | Statins and Progression of Coronary Atherosclerosis in Melanoma Patients Treated with Immune Checkpoint Inhibitors | 1,669,300.28 |  | | Cardiovascular Health Mission | 2020 Cardiovascular Health | The University of Newcastle | Stroke in patients with large Ischaemic Core: Assessment of Reperfusion therapy Impact on Outcome (SICARIO) | 1,515,113.87 |  | | Cardiovascular Health Mission | 2020 Cardiovascular Health | The University of Adelaide | The SPRINTS Project: Stroke - Prevention of Reperfusion Injury and Neuroinflammation - a Therapeutic Strategy | 2,563,915.78 |  | | Cardiovascular Health Mission | 2020 Cardiovascular Health | The University of Newcastle | Yarning up After Stroke | 485,061.66 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | University of Canberra | A very brief intervention for physical activity behaviour change in cardiac rehabilitation: the ‘Measure It!’ trial | 510,069.60 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | Monash University | Addressing the poor medication adherence in prevention of cardiovascular mortality and morbidity in Australia: development of a clinical decision support tool | 706,241.60 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | University of Western Australia | Alloantibody in kidney transplant recipients: is this the missing link to reduce the risk of heart disease? (AN-INSPIRE STUDY) | 996,354.00 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | Monash University | Atheroma Progression in Clonal Haematopoiesis Investigation with Imaging, Biomarkers and Genomic Sequencing (ARCHIMEDES) | 996,384.68 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | University of Sydney | Beyond Country of Birth: Transforming approaches to quantifying ethnic inequalities in access to best care for CVD | 782,008.00 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | The University of Newcastle | Cardiovascular disease and cancer: identifying shared disease pathways and pharmacological management | 999,998.00 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | Monash University | Combining Novel Imaging Biomarkers with AI-Accelerated Diagnosis for Equitable Patient Selection To Proactive Treatment With Middle Meningeal Artery Embolisation To Improve Outcomes in cSDH | 999,865.70 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | Queensland University of Technology | CTCA-POC: CT Coronary Angiography Inspired Point-of-Care Technology for Enhanced Diagnosis and Monitoring of Coronary Artery Disease | 999,995.90 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | University of New South Wales | Developing a holistic machine learning based rapid response system and end of life care system in preventing cardiac arrests and preventable deaths and improving end of life care in acute hospitals | 700,583.20 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | Monash University | Discovery of new molecular targets for stroke-Associated pneumonia to improve recovery | 663,217.60 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | University of Sydney | Discovery of new platelet targets to improve the management of coronary artery disease | 659,293.00 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | Macquarie University | Early Atrial fibrillation Screening for Indigenous people (EASI) | 574,883.90 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | University of Sydney | Enhancing engagement with eHealth approaches to prevent cardiovascular disease among adolescents: The Triple E Project | 993,682.00 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | University of Sydney | Identifying and addressing barriers and enablers to implementing best-practice cardiac rehabilitation: the Quality Improvement in Cardiac Rehabilitation (QUICR) Cluster-Randomised Controlled Trial | 894,507.20 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | Flinders University | Impact of non-invasive coronary angiography on suspected acute coronary syndromes with low concentration troponin elevation | 999,542.50 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | University of Tasmania | Improving cardiovascular health through increased transport-related physical activity: A co-designed randomised controlled trial | 767,132.85 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | Monash University | Improving short- and long-term outcomes in cardiac bypass surgery by preventing acute kidney injury | 511,208.00 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | University of New South Wales | Investigating Mechanisms of Alcohol-Induced Heart Disease | 999,995.60 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | Monash University | Love Your Brain: A stroke prevention digital platform | 944,787.90 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | The University of Adelaide | Next Generation Precision Health Platform to support Atrial Fibrillation Management | 791,555.40 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | Menzies School of Health Research | Non Expert Acquisition and Remote Expert Review of Screening echocardiography images from Child health and AnteNatal clinics (NEARER SCAN) | 999,764.40 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | University of Sydney | Non-invasive imaging of atherosclerotic plaque: quantification of disease activity for improved identification of patients with residual cardiovascular risk | 999,631.42 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | University of Melbourne | Novel targeted anti-inflammatory and anti-thrombotic mRNA therapies: Establishing innovative technologies to combat cardiovascular diseases | 689,854.82 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | University of New South Wales | Outcome PredicTion in IntraCerebral haemorrhage Study (OPTICS) with machine learning | 404,190.00 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | Monash University | PRecision Ecmo in CardIogenic Shock Evaluation: PRECISE Study | 999,779.40 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | Flinders University | Real-time measurement of renewal rate constants in pulsed field ablation of atrial fibrillation | 604,305.60 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | University of Sydney | REnal FactORs Modify HEART disease Study - REFORM HEARTS | 865,396.80 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | James Cook University | Supervised Home Exercise for Peripheral Artery Disease | 999,999.71 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | St Vincent's Institute of Medical Research | Sustained delivery of stem cell secretome for cardiac repair | 958,504.12 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | University of Melbourne | Targeting no-reflow to augment tissue salvage in stroke | 999,978.19 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | The University of Adelaide | The Asialoglycoprotein Receptor 1 (ASGR1): a novel target for atherosclerosis | 999,989.20 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | University of South Australia | The feasibility and potential of a novel robotic gait bioprosthesis for people with severe gait impairment post-stroke | 513,102.80 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | The University of Queensland | The Right Treatment for the Right Person at the Right Time. Driving High-Value Aphasia Care through Meaningful Health System Monitoring | 451,221.00 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | University of Western Australia | Towards Remote Patient Monitoring of Heart Failure Using Event-Driven AI Systems | 583,551.20 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | James Cook University | Transforming clinical pathways for abdominal aortic aneurysm through use of blood and imaging biomarkers | 999,999.60 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | University of Melbourne | Translating novel mechanism-guided therapeutics to improve functional recovery of the brain and kidneys after open-heart surgery | 998,224.25 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | University of Melbourne | Treating the impact of seizures on cardiac function to reduce death | 847,479.70 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | University of Melbourne | Use of Artificial Intelligence-Guided Echocardiography to Guide Cardiovascular Management in Rural and Remote Australia | 999,996.60 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | Monash University | Using co-design to improve accessibility and acceptability of cardiac services for vulnerable populations: The Equal Hearts Study | 597,104.30 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | The University of Newcastle | Using existing digital infrastructure for the national scale-up of an effective school nutrition program to reduce population CVD risk | 997,350.60 |  | | Cardiovascular Health Mission | 2021 Cardiovascular Health | Flinders University | Yolŋu Heart Health for Life: Person-centred, co-designed and student-assisted cardiac rehabilitation in East Arnhem Land | 633,589.00 |  | | Clinical Trials Activity | 2020 International Clinical Trial Collaborations (Round 20.1) | University of Sydney | AGITG and Scandinavian Sarcoma Group International Trial Collaboration. SSG XXII: International randomised phase III multicenter study of 3 v 5 years of adjuvant imatinib as treatment of patients with operable GIST with high risk for recurrence | 1,036,125.09 | a | | Clinical Trials Activity | 2020 International Clinical Trial Collaborations (Round 20.1) | University of Melbourne | AMEND-CRT trial | 991,197.80 | a | | Clinical Trials Activity | 2020 International Clinical Trial Collaborations (Round 20.1) | Curtin University | Nasal high-flow Oxygen Therapy After Cardiac Surgery: NOTACS | 1,460,861.70 | a | | Clinical Trials Activity | 2020 International Clinical Trial Collaborations (Round 20.1) | Queensland University of Technology | Oral bacterial lysate to prevent persistent wheeze in infants after severe bronchiolitis; a randomised placebo controlled trial (BLIPA; Bacterial Lysate in Preventing Asthma) | 1,598,380.42 | a | | Clinical Trials Activity | 2020 International Clinical Trial Collaborations (Round 20.1) | University of Sydney | SAFER (AUS) Trial: Screening for Atrial Fibrillation with ECG to Reduce stroke - a randomised controlled trial | 1,782,949.60 | a | | Clinical Trials Activity | 2020 International Clinical Trial Collaborations (Round 20.2) | Macquarie University | Determining the impact of a new primary care model for low back pain: A cluster randomised trial | 2,107,805.90 | a | | Clinical Trials Activity | 2020 International Clinical Trial Collaborations (Round 20.2) | University of Sydney | RADAR: A randomised PET-adapted study of bleomycin-free treatment of early stage Hodgkin Lymphoma | 1,395,463.00 | a | | Clinical Trials Activity | 2020 International Clinical Trial Collaborations (Round 20.2) | University of Melbourne | The C\*STEROID Trial: An international, randomised placebo-controlled trial to determine the effect of antenatal corticosteroids on newborn health when given prior to planned caesarean section birth from 35+0 to 39+6 weeks of pregnancy | 2,151,495.00 | a | | Clinical Trials Activity | 2020 Rare Cancers, Rare Diseases and Unmet Need - General | University of Melbourne | A randomized phase III study of neoadjuvant chemotherapy followed by surgery versus surgery alone for patients with High Risk RetroPeritoneal Sarcoma (STRASS 2) | 901,695.00 | a | | Clinical Trials Activity | 2020 Rare Cancers, Rare Diseases and Unmet Need - General | University of Sydney | An adaptive, randomised controlled trial to treat polyomavirus infections (BKPyV) in kidney and kidney pancreas transplant recipients (BEAT-BK) trial | 2,894,369.05 | a | | Clinical Trials Activity | 2020 Rare Cancers, Rare Diseases and Unmet Need - General | La Trobe University | Employing rational novel agent combination therapy to improve transplant cure rates for relapsed/refractory Hodgkin Lymphoma | 1,225,487.40 | a | | Clinical Trials Activity | 2020 Rare Cancers, Rare Diseases and Unmet Need - General | La Trobe University | I-124 PET Directed Redifferentiation Therapy for Radioiodine Refractory Thyroid Cancer: the I-FIRST Study | 2,708,660.70 | a | | Clinical Trials Activity | 2020 Rare Cancers, Rare Diseases and Unmet Need - General | The Council of the Queensland Institute of Medical Research | MoST-LLy (Molecular Screening and Therapeutics in Leukaemia and Lymphoma) | 2,688,736.40 | a | | Clinical Trials Activity | 2020 Rare Cancers, Rare Diseases and Unmet Need - General | University of Melbourne | POST ETERNAL Extending the time window for Tenecteplase by Effective RecanalizatioN of bAsiLar artery thrombus in patients with POSTerior circulation stroke | 2,860,248.50 | a | | Clinical Trials Activity | 2020 Rare Cancers, Rare Diseases and Unmet Need - General | Monash University | Preventing bones loss and restoring sexual function in women with premature ovarian insufficiency: a randomised, double-blind, placebo-controlled clinical trial | 912,513.66 | a | | Clinical Trials Activity | 2020 Rare Cancers, Rare Diseases and Unmet Need - General | University of New South Wales | StoPain: A randomised placebo-controlled trial to investigate the efficacy of an advanced interactive brain-computer interface neuromodulation treatment for spinal cord injury neuropathic pain | 1,780,269.60 | a | | Clinical Trials Activity | 2020 Rare Cancers, Rare Diseases and Unmet Need - General | University of Melbourne | Targeted therapies for vascular malformations | 1,699,253.60 | a | | Clinical Trials Activity | 2020 Rare Cancers, Rare Diseases and Unmet Need - General | The University of Queensland | Testing a sinonasal microbiome transplant as a therapy for Chronic Rhinosinusitis by randomised controlled trial | 707,954.00 | a | | Clinical Trials Activity | 2020 Rare Cancers, Rare Diseases and Unmet Need - General | Monash University | Third Degree Burn Wound Closure using Engineered Skin - Phase I Clinical Trial | 2,363,239.15 | a | | Clinical Trials Activity | 2021 Innovative Therapies for Mental Illness | University of Melbourne | A Randomised Controlled Trial of MDMA-Assisted Psychotherapy for Treatment-Resistant Social Anxiety in Young Adults with Autism Spectrum Disorder | 3,762,327.90 |  | | Clinical Trials Activity | 2021 Innovative Therapies for Mental Illness | University of Sydney | A randomised, double-blind, controlled trial of MDMA-assisted exposure therapy for comorbid alcohol use disorder and post-traumatic stress disorder | 1,951,246.45 |  | | Clinical Trials Activity | 2021 Innovative Therapies for Mental Illness | University of Melbourne | Clinical Trial of Cannabidiol for Treatment Resistant Anxiety Disorders in Youth | 1,745,708.55 |  | | Clinical Trials Activity | 2021 Innovative Therapies for Mental Illness | University of Melbourne | Dimethyltryptamine (DMT)-Assisted Psychological Therapy for Treatment-Resistant Major Depression, Alcohol Use Disorder, and Dual Diagnosis | 1,977,354.90 |  | | Clinical Trials Activity | 2021 Innovative Therapies for Mental Illness | Australian National University | Evaluating the efficacy of psilocybin-assisted psychotherapy in treatment resistant depression | 2,727,173.50 |  | | Clinical Trials Activity | 2021 Innovative Therapies for Mental Illness | University of Sydney | PANOREXIA: A clinical trial of psilocybin-assisted psychotherapy in anorexia nervosa | 1,175,522.20 |  | | Clinical Trials Activity | 2021 Innovative Therapies for Mental Illness | University of Melbourne | Psilocybin-assisted therapy for refractory Functional Neurological Disorder | 1,448,343.80 |  | | Clinical Trials Activity | 2021 International Clinical Trial Collaborations (Round 21.1) | University of Sydney | Anticoagulation for Stroke Prevention In patients with Recent Episodes of perioperative Atrial Fibrillation after noncardiac surgery - The ASPIRE-AF trial | 1,816,175.10 |  | | Clinical Trials Activity | 2021 International Clinical Trial Collaborations (Round 21.1) | University of New South Wales | Dapagliflozin in advanced chronic kidney disease and kidney failure: The RENAL LIFECYCLE trial | 2,229,409.70 |  | | Clinical Trials Activity | 2021 International Clinical Trial Collaborations (Round 21.1) | University of New South Wales | Enhanced Control of Hypertension and Thrombectomy Stroke Study (ENCHANTED-MT) | 2,029,360.80 |  | | Clinical Trials Activity | 2021 International Clinical Trial Collaborations (Round 21.1) | The University of Adelaide | The single dose of antenatal corticosteroids (SNACS) randomised trial for women at risk for preterm birth | 3,025,898.90 |  | | Clinical Trials Activity | 2021 International Clinical Trial Collaborations (Round 21.2) | Monash University | Adaptive platform trial for severe community acquired pneumonia: new interventions for severe CAP and influenza | 2,824,703.40 |  | | Clinical Trials Activity | 2021 International Clinical Trial Collaborations (Round 21.2) | University of Melbourne | PET/CT for Staphylococcus aureus bloodstream infections: an international, multicentre, randomised controlled trial | 998,222.40 |  | | Clinical Trials Activity | 2021 International Clinical Trial Collaborations (Round 21.2) | University of New South Wales | Sedation, TEmperature and Pressure after Cardiac Arrest and REsuscitation (STEP CARE) trial | 844,764.00 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | University of New South Wales | 4CAST: A phase I/II study evaluating the safety and efficacy of VT-464 in combination with chemotherapy in patients with metastatic breast cancer | 668,444.00 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | Edith Cowan University | A Multicomponent Exercise Medicine Programme in Patients with Pancreatic Cancer Undergoing Neoadjuvant Therapy (the EXPAN trial): A Two-armed Phase I Randomised Controlled Trial | 561,910.00 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | University of New South Wales | A Platform trial of combination precision guided therapies for high risk childhood cancer | 1,515,180.00 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | The University of Newcastle | A precision medicine clinical trial platform to BEAT CF | 2,107,804.40 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | Flinders University | A randomised controlled trial of Standard Of Care versus RadioAblaTion in Early Stage HCC (The SOCRATES HCC Study) | 2,352,010.80 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | University of Melbourne | Accelerating clot lysis in ischemic stroke with dornase alfa in an Umbrella Bayesian Optimised Phase 2 trial | 1,453,336.70 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | University of Melbourne | Addressing the poor outcomes of young women with hormone receptor-positive, HER2-negative (HR+HER2-) early breast cancer | 4,909,215.00 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | The University of Queensland | An early phase, open label, multi-centre trial of front-line TheRapy for EBv-associated Lymphomas – 2: TREBL-2 | 2,844,744.60 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | University of Melbourne | Augmenting dietary protein during critical illness: A cluster randomised cross-sectional double cross-over clinical trial | 1,992,218.00 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | University of Melbourne | Driving functional recovery after spinal cord injury using transcutaneous electrical spinal cord neuromodulation (TESCoN) | 2,038,621.80 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | Monash University | Duration of Cardiac Antimicrobial Prophylaxis Outcomes Study (CALIPSO): multicentre, adaptive, double-blind, three-arm, placebo-controlled, non-inferiority trial examining antimicrobial prophylaxis duration in cardiac surgery | 7,979,999.10 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | University of Melbourne | Eliminating HIV that persists on antiretroviral therapy through treatment with the BCL-2 antagonist, venetoclax | 1,400,752.00 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | Monash University | Fibrinogen Early In Severe Trauma StudY II (FEISTY II) | 3,162,379.40 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | The University of Adelaide | HEPATA: Hereditary Pancreatitis and AutoIslet Transplant Trials in Australia | 2,014,561.20 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | Flinders University | Implementing a Nurse-Enabled, Shared-Care Model to Address Unmet Needs of People with Neuroendocrine Tumours: the AUS-NET Trial | 2,374,220.10 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | Queensland University of Technology | Improving clinical outcomes for children and adults with bronchiectasis: a multi-centre randomised controlled trial using a novel mucolytic with a discovery biomarker | 2,069,492.72 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | University of New South Wales | Improving the lives of people with Phantom Limb Pain - the TITAN trial (graded moTor Imagery for phanTom lImb pAiN) | 1,531,130.80 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | Monash University | INTER-EWING -1 - International clinical research program to improve outcomes in newly diagnosed Ewing Sarcoma patients - Trial 1. | 998,608.80 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | Murdoch Children's Research Institute | Is oral antibiotic treatment alone non-inferior to standard care for children with bone and joint infections? | 1,230,723.80 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | University of Melbourne | Look before you leap: How transthoracic ECHOcardiography before fractured Neck Of Femur saves lives in frail older people – the proposed Pragmatic ECHONOF III trial | 3,686,076.20 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | University of Sydney | LUMOS: Low and Anaplastic Grade Glioma Umbrella Study of Molecular Guided TherapieS | 1,982,681.32 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | Monash University | More efficient delivery of high-cost standard-of-care therapies in relapsed multiple myeloma using real-time feedback of patient-reported outcome measures: the MY-PROMPT-2 trial | 1,678,493.00 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | The University of Queensland | Optimising Care: Phase III Trial in women with metastatic breast cancer to improve quality of life via exercise and diet | 2,044,955.10 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | Monash University | REDEEM: A Randomised Controlled Trial of ECMO to Desedate, Extubate Early and Mobilise in severe acute respiratory infection | 2,534,432.00 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | The University of Adelaide | REMIT: An international, multi-centre, randomised clinical trial to compare Obinutuzumab + Calcineurin Inhibitor to Corticosteroid + Cyclophosphamide treatment regimens in Primary Membranous Nephropathy | 2,904,210.20 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | Monash University | SCANPatient: Synoptic reporting of CT scans assessing cancer of the pancreas | 2,970,301.10 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | The University of Queensland | SWiMS - Schizophrenia Weight, Metformin and Semaglutide: A double blind double dummy placebo controlled multi-centre RCT | 3,839,117.60 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | The University of Adelaide | The AIRSPACE Trial: AntI-MRSA PhAge Cocktail treatment via Acoustic Enhanced Nebulisers | 1,712,340.60 |  | | Clinical Trials Activity | 2021 Rare Cancers, Rare Diseases and Unmet Need | The University of Queensland | The SiroSkin study: A multi-centre randomised double-blind placebo-controlled trial of 1% topical sirolimus in the chemoprevention of facial squamous cell carcinomas in solid organ transplant recipients | 2,486,489.20 |  | | Clinician Researchers | 2019 Investigator Grants: Medical Research Future Fund Priority Round | University of Melbourne | A Neural Systems Model to Optimize Treatment Outcomes in Binge Eating Populations | 645,205.00 | a | | Clinician Researchers | 2019 Investigator Grants: Medical Research Future Fund Priority Round | The Walter and Eliza Hall Institute of Medical Research | Advancing Personalised Treatment in Colorectal Cancer with Tissue and Liquid Biomarkers | 1,187,350.00 | a | | Clinician Researchers | 2019 Investigator Grants: Medical Research Future Fund Priority Round | University of Western Australia | Better penicillin, better hearts: improving secondary prevention of rheumatic heart disease | 1,281,125.00 | a | | Clinician Researchers | 2019 Investigator Grants: Medical Research Future Fund Priority Round | University of Melbourne | Closing the critical knowledge gaps in perinatal genomics | 1,281,125.00 | a | | Clinician Researchers | 2019 Investigator Grants: Medical Research Future Fund Priority Round | Murdoch Children's Research Institute | Establishing the early diagnosis of atherosclerosis and cardiovascular risk factors in adults with repaired aortic arch obstruction: The key to decreasing premature death | 329,041.00 | a | | Clinician Researchers | 2019 Investigator Grants: Medical Research Future Fund Priority Round | University of South Australia | Evidence-based digital technologies for health behaviour | 1,118,593.01 | a | | Clinician Researchers | 2019 Investigator Grants: Medical Research Future Fund Priority Round | Flinders University | Meeting psychological needs to improve the quality and safety of aged care | 420,078.91 | a | | Clinician Researchers | 2019 Investigator Grants: Medical Research Future Fund Priority Round | Menzies School of Health Research | Moving together towards the elimination of chronic Hepatitis B in the Northern Territory | 1,131,125.00 | a | | Clinician Researchers | 2019 Investigator Grants: Medical Research Future Fund Priority Round | Monash University | Optimise Primary Aldosteronism Detection For Better Health Outcomes | 570,205.00 | a | | Clinician Researchers | 2019 Investigator Grants: Medical Research Future Fund Priority Round | The University of Newcastle | Personalised biomarker-guided management of asthma during pregnancy | 1,562,250.00 | a | | Clinician Researchers | 2019 Investigator Grants: Medical Research Future Fund Priority Round | University of Sydney | Policy-driven research to improve the immunisation program for young children | 1,062,555.48 | a | | Clinician Researchers | 2019 Investigator Grants: Medical Research Future Fund Priority Round | University of Western Australia | Preventing Bronchiectasis in Indigenous People | 1,131,125.00 | a | | Clinician Researchers | 2019 Investigator Grants: Medical Research Future Fund Priority Round | University of Melbourne | Saving time, saving brain through prehospital stroke care | 645,205.00 | a | | Clinician Researchers | 2019 Investigator Grants: Medical Research Future Fund Priority Round | Macquarie University | Screening and Risk Reduction for Dementia in Primary Care | 1,562,250.00 | a | | Clinician Researchers | 2019 Investigator Grants: Medical Research Future Fund Priority Round | The University of Newcastle | Sustaining the implementation of evidence-based chronic disease prevention programs in education | 1,562,250.00 | a | | Clinician Researchers | 2019 Investigator Grants: Medical Research Future Fund Priority Round | University of New South Wales | Tackling it with Tech: Using novel Internet solutions to overcome the burden of depression in youth | 620,205.00 | a | | Clinician Researchers | 2019 Investigator Grants: Medical Research Future Fund Priority Round | Monash University | Using a purpose-built digital assessment tool to determine the mechanisms driving addictive behaviours and its utility to improve treatment engagement and outcomes | 645,205.00 | a | | Clinician Researchers | 2020 Clinician Researchers: Applied Research in Health | Queensland Rural Medical Education Limited | Assessing cultural safety in GP consultations for Indigenous Australians | 120,320.00 |  | | Clinician Researchers | 2020 Clinician Researchers: Applied Research in Health | University of Melbourne | CURE-NG: A Human Challenge Model to Develop New Treatments for Gonorrhoea | 2,300,321.00 |  | | Clinician Researchers | 2020 Clinician Researchers: Applied Research in Health | University of New South Wales | Enhancing prison-to-community mental healthcare for Aboriginal prisoners | 1,180,613.00 |  | | Clinician Researchers | 2020 Clinician Researchers: Applied Research in Health | Monash University | Equipping Tertiary Care for the Optimal Diagnosis of Primary Aldosteronism | 2,993,294.00 |  | | Clinician Researchers | 2020 Clinician Researchers: Applied Research in Health | Monash University | Intensive physiotherapy to lower hospital length of stay after hip fracture | 2,930,647.00 |  | | Clinician Researchers | 2020 Clinician Researchers: Applied Research in Health | The George Institute for Global Health | Optimal Post rTPA-iv Monitoring in Ischaemic Stroke (OPTIMISTmain) | 1,774,988.00 |  | | Clinician Researchers | 2020 Clinician Researchers: Applied Research in Health | Monash University | PROMOTE: a cluster-randomised implementation trial to promote evidence use | 2,996,464.00 |  | | Clinician Researchers | 2020 Clinician Researchers: Applied Research in Health | The University of Queensland | RELEASE: REdressing Long-tErm Antidepressant uSE in general practice | 1,912,691.00 |  | | Clinician Researchers | 2020 Clinician Researchers: Applied Research in Health | University of Melbourne | Strengthening care for rural children: stepped wedge trial in primary care | 2,996,188.00 |  | | Clinician Researchers | 2020 Clinician Researchers: Applied Research in Health | University of New South Wales | The Australian Endometriosis Clinicians Collaborative (AECC) | 1,937,950.00 |  | | Clinician Researchers | 2020 Clinician Researchers: Applied Research in Health | University of Melbourne | The Australian New Zealand Oncofertility Clinical Trials Network | 2,999,970.00 |  | | Clinician Researchers | 2020 Clinician Researchers: Applied Research in Health | James Cook University | The Tele-Artery Trial (TEAL) | 2,862,084.00 |  | | Clinician Researchers | 2020 Clinician Researchers: Applied Research in Health | University of Melbourne | Transforming Clinical Research to Improve Outcomes for Preterm Infants | 2,642,199.00 |  | | Clinician Researchers | 2020 Clinician Researchers: Applied Research in Health | University of Melbourne | Validating cognitive screening for first-episode psychosis - CogScreen | 2,294,990.00 |  | | Coronavirus Research Response | 2020 Rare Cancers, Rare Diseases and Unmet Need COVID-19 | Flinders University | 3D-Printed Facial Guards to reduce P2/N95 respirator leak and protect health care workers from COVID-19 | 973,119.00 | a | | Coronavirus Research Response | 2020 Rare Cancers, Rare Diseases and Unmet Need COVID-19 | University of Melbourne | Accelerated phase I trial of targeted and tunable SARS-Cov-2 spike protein receptor binding domain recombinant protein and mRNA vaccines | 1,588,283.00 | a | | Coronavirus Research Response | 2020 Rare Cancers, Rare Diseases and Unmet Need COVID-19 | Flinders University | Prevention of SARS-CoV-2 transmission in aged care (PreSTAC): Effective evidence-based measures for rapid translation | 1,366,094.00 | a | | Coronavirus Research Response | 2020 Rare Cancers, Rare Diseases and Unmet Need COVID-19 | University of New South Wales | Statin Treatment for COVID-19 to optimise Neurological Recovery (STRONGER) trial | 2,375,779.00 | a | | Coronavirus Research Response | 2020 Rare Cancers, Rare Diseases and Unmet Need COVID-19 | University of Melbourne | The Pomerium Trial: Protecting Aged Care Residents from the Pandemic via Specialised Nutritional Supplementation | 1,189,527.00 | a | | Coronavirus Research Response | 2020 Rare Cancers, Rare Diseases and Unmet Need COVID-19 | University of Melbourne | Use of Cardioprotective Therapy to Manage Persistent Cardiovascular Effects of COVID-19: A Pathway to Recognition and Treatment of Subclinical Disease | 2,574,943.00 | a | | Coronavirus Research Response | 2020 Communication Strategies and Approaches During Outbreaks | Monash University | Effectiveness of tailored COVID-19 message for vulnerable Australians | 315,961.00 | a | | Coronavirus Research Response | 2020 Communication Strategies and Approaches During Outbreaks | Macquarie University | Harnessing the health communication power of the early childhood sector | 174,992.00 | a | | Coronavirus Research Response | 2020 Communication Strategies and Approaches During Outbreaks | Deakin University | Inclusive Health Communication in Specialist Disability Accommodation | 109,047.00 | a | | Coronavirus Research Response | 2020 Rapid Response Digital Health Infrastructure | University of Sydney | Integrating remote monitoring technology into digital health infrastructure | 670,406.00 | a | | Coronavirus Research Response | 2020 Rapid Response Digital Health Infrastructure | Monash University | Real-time modelling of Australia's COVID-19 response | 810,300.00 | a | | Coronavirus Research Response | 2020 Rapid Response Digital Health Infrastructure | Monash University | Towards a national data management platform and Learning Health System | 1,922,584.00 | a | | Coronavirus Research Response | 2020 Antiviral Development for COVID-19 | The Walter and Eliza Hall Institute of Medical Research | Biologics for the prophylaxis and treatment of COVID-19 | 5,000,000.00 | a | | Coronavirus Research Response | 2020 COVID-19 Vaccine Candidate Research (Round 2) | University of Sydney | A single dose, globally accessible vaccine to combat emerging SARS-CoV-2 variants | 1,556,560.00 | a | | Coronavirus Research Response | 2020 COVID-19 Vaccine Candidate Research (Round 2) | University of South Australia | Accelerated clinical development of a next generation COVID-19 vaccine using the established Sementis Copenhagen Vector platform system | 2,983,909.00 | a | | Coronavirus Research Response | 2020 COVID-19 Vaccine Candidate Research (Round 3) | University of Melbourne | AdaptiVax-CoV: A novel adaptable SARS-CoV2 VLP vaccine to produce broad humoral and T cell responses to S, E and M viral proteins | 2,999,862.00 | a | | Coronavirus Research Response | 2020 COVID-19 Vaccine Candidate Research (Round 3) | University of Melbourne | Chimeric next generation COVID vaccines | 3,000,000.00 | a | | Coronavirus Research Response | 2020 Stem Cell Therapies Mission | The Commonwealth Scientific and Industrial Research Organisation | The sySTEMs initiative: systems biology-augmented, stem cell-derived, multi-tissue panel for rapid screening of approved drugs as potential COVID-19 treatments | 998,355.93 |  | | Coronavirus Research Response | 2021 COVID-19 Health Impacts and Vaccination Schedules | Monash University | Bringing Optimised COVID-19 vaccine Schedules To ImmunoCompromised populations (BOOST-IC) | 2,911,774.24 |  | | Coronavirus Research Response | 2021 COVID-19 Health Impacts and Vaccination Schedules | University of New South Wales | Comparing Immunisation-boosting Regimens for COVID-19 Upon Initiation of immunosuppressive Therapies (CIRCUIT Study) | 2,752,966.61 |  | | Coronavirus Research Response | 2021 COVID-19 Health Impacts and Vaccination Schedules | Murdoch University | Molecular phenomic approaches to improve understanding of Post-Acute COVID-19 Syndrome – a biomarker-augmented strategy for risk based stratification and targeted intervention to improve clinical outcomes | 3,395,672.56 |  | | Coronavirus Research Response | 2021 COVID-19 Health Impacts and Vaccination Schedules | University of Melbourne | Predicting the neurological impact of SARS-CoV-2 Variants of Concern-protecting Australians from long-COVID brain injury | 1,776,244.02 |  | | Coronavirus Research Response | 2021 COVID-19 Health Impacts and Vaccination Schedules | University of Western Australia | The Platform trial In COVID-19 vaccine BOOsting (PICOBOO) | 4,157,377.94 |  | | Coronavirus Research Response | 2021 COVID-19 Vaccine-Associated Thrombosis With Thrombocytopenia Syndrome | Monash University | A national, multi-centre study evaluating Thrombotic Thrombocytopenia Syndrome (TTS) associated with ChAdOx1 (AZD1222) and other SARS-CoV-2 vaccines (viral vector and m-RNA) | 2,917,087.28 |  | | Coronavirus Research Response | 2021 COVID-19 Treatment Access and Public Health Activities | The Walter and Eliza Hall Institute of Medical Research | A lethal and irresistible combination: Simultaneous targeting of the SARS-CoV-2 proteases Mpro and PLpro | 999,687.40 |  | | Coronavirus Research Response | 2021 COVID-19 Treatment Access and Public Health Activities | University of Melbourne | Aerosol Infection Research: Better mOdels to Reduce iNdoor Exposure (AIRBORNE) | 998,338.80 |  | | Coronavirus Research Response | 2021 COVID-19 Treatment Access and Public Health Activities | University of New South Wales | Aerosol transmission of SARS-CoV-2 experimentally and in an intensive care setting | 992,908.20 |  | | Coronavirus Research Response | 2021 COVID-19 Treatment Access and Public Health Activities | Curtin University | Compound repurposing into novel therapeutics to treat SARS-COV2 infection | 998,520.00 |  | | Coronavirus Research Response | 2021 COVID-19 Treatment Access and Public Health Activities | University of New South Wales | Development of antiviral RNA therapeutics targeting SARS-CoV-2 infection | 998,339.60 |  | | Coronavirus Research Response | 2021 COVID-19 Treatment Access and Public Health Activities | Esfam Biotech Pty Ltd | Experimental Validation of the Target of ESFAM289 - a molecule with in vivo efficacy against SARS-CoV-2 | 1,000,000.00 |  | | Coronavirus Research Response | 2021 COVID-19 Treatment Access and Public Health Activities | University of Melbourne | Immune responses to SARS-CoV-2 variants across age groups and vulnerable populations | 3,001,424.40 |  | | Coronavirus Research Response | 2021 COVID-19 Treatment Access and Public Health Activities | University of Melbourne | Intranasal TLR2/6 activation to prevent COVID infection in the elderly | 3,883,462.60 |  | | Coronavirus Research Response | 2021 COVID-19 Treatment Access and Public Health Activities | University of Melbourne | mRNA-based antiviral therapeutics for SARS-CoV-2 using Cas13 | 1,000,000.00 |  | | Coronavirus Research Response | 2021 COVID-19 Treatment Access and Public Health Activities | Monash University | Pre-clinical testing of novel inhaled RNA therapies for stability, safety and effectiveness against SARS-CoV-2 to demonstrate proof of concept | 499,697.24 |  | | Coronavirus Research Response | 2021 COVID-19 Treatment Access and Public Health Activities | Monash University | PROPHECY: Profiling immune RespOnse in Paediatric and High-risk populations to SARS-CoV-2 | 6,327,279.57 |  | | Coronavirus Research Response | 2021 COVID-19 Treatment Access and Public Health Activities | University of Western Australia | The Platform Trial in COVID-19 Boosting: stage 2 (PICOBOO-2) | 3,830,631.40 |  | | Coronavirus Research Response | 2021 COVID-19 Treatment Access and Public Health Activities | Australian Institute of Health and Welfare | Towards an Australian COVID-19 Register and linked data set | 2,986,054.40 |  | | Coronavirus Research Response | 2021 COVID-19 Treatment Access and Public Health Activities | Monash University | A coordinated multiplatform randomised trial for hospitalised patients with COVID-19 | 3,997,914.20 |  | | Dementia, Ageing and Aged Care Mission | 2020 Dementia, Ageing and Aged Care | The University of Queensland | Alignment, Harmonisation, and Results: translating Core Outcome Measures to Improve Care (COM-IC) for People Living with Dementia into Australian practice | 999,286.80 |  | | Dementia, Ageing and Aged Care Mission | 2020 Dementia, Ageing and Aged Care | University of Melbourne | Blood testing to predict and discriminate dementias | 3,999,909.28 |  | | Dementia, Ageing and Aged Care Mission | 2020 Dementia, Ageing and Aged Care | Flinders University | Creating partnership in iSupport program to optimise carers' impact on dementia care | 1,406,657.60 |  | | Dementia, Ageing and Aged Care Mission | 2020 Dementia, Ageing and Aged Care | University of Melbourne | Development and Implementation of the National Infection Surveillance Program for Aged Care (NISPAC) | 997,734.30 |  | | Dementia, Ageing and Aged Care Mission | 2020 Dementia, Ageing and Aged Care | University of New South Wales | Development, validation and implementation of a computerised tool to assess instrumental activities of daily living | 1,252,778.00 |  | | Dementia, Ageing and Aged Care Mission | 2020 Dementia, Ageing and Aged Care | National Ageing Research Institute | Drawing out care: Using animation and digital technologies to support Culturally and Linguistically Diverse (CALD) family carers and people living with dementia | 797,773.60 |  | | Dementia, Ageing and Aged Care Mission | 2020 Dementia, Ageing and Aged Care | University of Melbourne | IMpleMenting Effective infection prevention and control in ReSidential aged carE (IMMERSE) | 757,520.30 |  | | Dementia, Ageing and Aged Care Mission | 2020 Dementia, Ageing and Aged Care | Monash University | Knowledge brokers for evidence translation to improve quality use of medicines in residential aged care | 1,952,566.00 |  | | Dementia, Ageing and Aged Care Mission | 2020 Dementia, Ageing and Aged Care | University of Melbourne | Music Attuned Technology Care eHealth (MATCH): A music based mobile eHealth solution to support care of people with dementia | 1,998,865.50 |  | | Dementia, Ageing and Aged Care Mission | 2020 Dementia, Ageing and Aged Care | The University of Queensland | SENSEcog aged care: Hearing and vision support to improve quality of life for people living with dementia in residential aged care | 1,200,710.20 |  | | Dementia, Ageing and Aged Care Mission | 2020 Dementia, Ageing and Aged Care | The University of Queensland | Technology Assisted and Remotely Delivered Anxiety Psychotherapy Intervention for People living with Dementia and Their Care Partners (Tech-CBT) | 1,626,883.28 |  | | Dementia, Ageing and Aged Care Mission | 2021 Dementia, Ageing and Aged Care | The University of Newcastle | A Preventative Care Program to optimise mental health during transition into residential aged care | 200,000.00 |  | | Dementia, Ageing and Aged Care Mission | 2021 Dementia, Ageing and Aged Care | Monash University | Better Environment, Healthier Ageing | 200,000.00 |  | | Dementia, Ageing and Aged Care Mission | 2021 Dementia, Ageing and Aged Care | Monash University | EMBED: A stepped wedge cluster randomised trial of a tailored, integrated model of care to reduce symptoms of depression in home aged care | 1,997,775.71 |  | | Dementia, Ageing and Aged Care Mission | 2021 Dementia, Ageing and Aged Care | University of Sydney | Evaluation of primary care and help-seeking promotion programs to increase dementia diagnosis and early treatment | 1,999,814.75 |  | | Dementia, Ageing and Aged Care Mission | 2021 Dementia, Ageing and Aged Care | The University of Queensland | Frailty KIT: An Australian Frailty Network to Create Knowledge, Implement Findings and Support Training | 4,993,238.54 |  | | Dementia, Ageing and Aged Care Mission | 2021 Dementia, Ageing and Aged Care | Edith Cowan University | Getting to the heart of healthy ageing: a behaviour change program to promote dietary pattern changes | 506,834.96 |  | | Dementia, Ageing and Aged Care Mission | 2021 Dementia, Ageing and Aged Care | Torrens University Australia Ltd | IMPAACT: IMproving the PArticipation of older Australians in policy decision-making on Ageing-related CondiTions | 584,430.14 |  | | Dementia, Ageing and Aged Care Mission | 2021 Dementia, Ageing and Aged Care | University of Melbourne | Implementation of a co-designed exercise and fall prevention program for older people from CALD backgrounds | 200,000.00 |  | | Dementia, Ageing and Aged Care Mission | 2021 Dementia, Ageing and Aged Care | Deakin University | Implementing innovative technology promoting self-awareness of brain health and self-determination in obtaining a timely dementia diagnosis | 1,052,176.56 |  | | Dementia, Ageing and Aged Care Mission | 2021 Dementia, Ageing and Aged Care | James Cook University | MEtformin for treating peripheral artery disease Related walking Impairment Trial (MERIT) | 1,215,182.04 |  | | Dementia, Ageing and Aged Care Mission | 2021 Dementia, Ageing and Aged Care | The University of Queensland | Navigating Fitness to Drive with Patients with Dementia in Primary Care: Delivering an innovative Online Driver Safety Assessment and Management Package to Practitioners | 1,316,765.43 |  | | Dementia, Ageing and Aged Care Mission | 2021 Dementia, Ageing and Aged Care | University of Melbourne | No more shame: Changing health providers recognition and response to elder abuse to reduce Associated stigma | 1,561,144.75 |  | | Dementia, Ageing and Aged Care Mission | 2021 Dementia, Ageing and Aged Care | Monash University | Residential Aged Care - Enhanced Dementia Diagnosis | 200,000.00 |  | | Dementia, Ageing and Aged Care Mission | 2021 Dementia, Ageing and Aged Care | University of South Australia | The Australian Consortium for Aged Care - Quality Measurement Toolbox (ACAC-QMET): Improving Quality of Care through Better Measurement and Evaluation | 2,999,445.80 |  | | Dementia, Ageing and Aged Care Mission | 2021 Dementia, Ageing and Aged Care | University of Melbourne | The ENJOY Seniors Exercise Park IMP-ACT project: IMProving older people's health through physical ACTivity: a hybrid II implementation project design | 2,011,748.53 |  | | Dementia, Ageing and Aged Care Mission | 2021 Dementia, Ageing and Aged Care | Monash University | The right to rehabilitation for people with dementia: tackling stigma and implementing evidence-based interventions | 1,015,820.66 |  | | Dementia, Ageing and Aged Care Mission | 2021 Dementia, Ageing and Aged Care | Macquarie University | Transforming residential aged care through evidence-based informatics | 992,386.00 |  | | Dementia, Ageing and Aged Care Mission | 2021 Dementia, Ageing and Aged Care | The University of Queensland | Unspoken, Unheard, Unmet: Improving Access to Preventative Health Care through Better Conversations about Care | 2,014,394.33 |  | | Emerging Priorities and Consumer-Driven Research | 2020 Childhood Cancer Research | University of South Australia | ABOLISH Neuroblastoma: Defining the Aetiology and underlying BiOLogy of neuroblastoma to Innovate and SHape new options for prevention, diagnosis and treatment | 1,420,132.30 | a | | Emerging Priorities and Consumer-Driven Research | 2020 Childhood Cancer Research | The University of Adelaide | Adolescents with Acute Lymphoblastic Leukaemia: Focussing on the gut microbiota, its role in therapeutic response and potential as an effective adjunct therapeutic in this High-Risk group | 1,292,871.49 | a | | Emerging Priorities and Consumer-Driven Research | 2020 Childhood Cancer Research | University of Sydney | Alternative Lengthening of Telomeres (ALT): Target Discovery to Treatment | 1,484,000.00 | a | | Emerging Priorities and Consumer-Driven Research | 2020 Childhood Cancer Research | University of New South Wales | Improving outcomes for children with high risk cancer | 1,497,517.83 | a | | Emerging Priorities and Consumer-Driven Research | 2020 Childhood Cancer Research | University of New South Wales | Rationalised inclusion of HDAC inhibitors with standard-of-care chemotherapy to improve outcomes for primary and relapsed neuroblastoma | 614,017.00 | a | | Emerging Priorities and Consumer-Driven Research | 2020 Childhood Cancer Research | St Vincent's Institute of Medical Research | Reducing tumour incidence in adolescents with germ-line mutations in RECQL4 | 957,598.55 | a | | Emerging Priorities and Consumer-Driven Research | 2020 Childhood Cancer Research | University of Melbourne | Studying the origins, maintenance and resistance mechanisms of poor prognosis paediatric leukaemia at single cell resolution to develop novel therapeutic approaches | 1,488,670.80 | a | | Emerging Priorities and Consumer-Driven Research | 2020 Improving Diagnosis in Cancers With Low Survival Rates | The University of Queensland | Implementing a Multivariate Index Assay for the Earlier Detection of Ovarian Cancer | 2,664,278.15 |  | | Emerging Priorities and Consumer-Driven Research | 2020 Improving Diagnosis in Cancers With Low Survival Rates | The University of Queensland | Lung cancer screening for early detection | 2,836,143.00 |  | | Emerging Priorities and Consumer-Driven Research | 2020 Improving Diagnosis in Cancers With Low Survival Rates | University of New South Wales | Microbial based biomarkers powered by artificial intelligence for early detection of liver cancer in Australia. The Australian Liver Cancer Microbiome Consortium | 3,989,421.75 |  | | Emerging Priorities and Consumer-Driven Research | 2020 Improving Diagnosis in Cancers With Low Survival Rates | University of South Australia | Predicting and Preventing Ovarian Cancer: a machine learning approach | 1,260,168.70 |  | | Emerging Priorities and Consumer-Driven Research | 2020 Improving Diagnosis in Cancers With Low Survival Rates | University of Melbourne | Ready to screen. Targeting the high-risk population to improve lung cancer diagnosis | 1,999,923.40 |  | | Emerging Priorities and Consumer-Driven Research | 2020 Improving Diagnosis in Cancers With Low Survival Rates | Flinders University | Shining Light into the “unknown” on Indigenous and non-Indigenous Australians with Cancer of Unknown Primary | 2,401,509.40 |  | | Emerging Priorities and Consumer-Driven Research | 2020 Improving Diagnosis in Cancers With Low Survival Rates | Swinburne University of Technology | Solving Unknown Primary cancER Earlier Diagnosis (SUPER-ED): A stepped wedge cluster randomised controlled trial implementing a new model of care to support earlier diagnosis | 2,366,198.20 |  | | Emerging Priorities and Consumer-Driven Research | 2020 Improving Diagnosis in Cancers With Low Survival Rates | University of Western Australia | The IC3 Trial: Identifying Cirrhosis and Liver Cancer in Primary Care | 3,192,950.55 |  | | Emerging Priorities and Consumer-Driven Research | 2020 Medicinal Cannabis Clinical Trials | Queensland University of Technology | A prospective multicentre randomised blinded two arm parallel trial of medicinal cannabis products for alleviating symptom burden in children with advanced cancer | 692,016.90 | a | | Emerging Priorities and Consumer-Driven Research | 2020 Medicinal Cannabis Clinical Trials | The University of Queensland | Medicinal Cannabis randomised multicentre double blind placebo-controlled trial to assess THC/CBD to relieve symptom burden in patients with cancer | 1,526,796.49 | a | | Emerging Priorities and Consumer-Driven Research | 2020 Medicinal Cannabis Clinical Trials | The University of Adelaide | The CANnabinoids for CANcer Therapy (CANCAN) Trial | 1,486,715.40 | a | | Emerging Priorities and Consumer-Driven Research | 2020 Neurofibromatosis Research | Murdoch Children's Research Institute | A randomised control trial of remote microphone listening devices in children with neurofibromatosis type 1 and central auditory deficits | 599,283.40 |  | | Emerging Priorities and Consumer-Driven Research | 2020 Neurofibromatosis Research | Monash University | Defining NF1 clinical variation at the microscale to discover new therapeutic targets | 818,472.00 |  | | Emerging Priorities and Consumer-Driven Research | 2020 Neurofibromatosis Research | Murdoch Children's Research Institute | Malignant Peripheral Nerve Sheath Tumour Genomics in Neurofibromatosis 1 (MaGeN) | 1,593,512.65 |  | | Emerging Priorities and Consumer-Driven Research | 2020 Neurofibromatosis Research | The University of Newcastle | The Neurofibromatosis type 1 (NF1) Cutaneous Neurofibroma Consortium: Identifying Genetic modifiers of disease burden to inform treatment pathways | 1,607,737.60 |  | | Emerging Priorities and Consumer-Driven Research | 2020 Paediatric Cancer | Monash University | The Victoria Paediatric Cancer Consortium: A Multi-institutional Partnership to Catalyze Advances in Childhood Cancer Research and Clinical Implementation | 9,599,999.61 |  | | Emerging Priorities and Consumer-Driven Research | 2020 Primary Care Fracture Liaison Services Pilot Project | Osteoporosis Australia | Primary Care Fracture Liaison (PCFLS) Pilot Project | 2,808,000.00 | a | | Emerging Priorities and Consumer-Driven Research | 2020 Silicosis Research | The University of Queensland | Silicosis – Harnessing new ideas to conquer the re-emergence of an ancient lung disease – The SHIELD Study | 2,216,631.00 | a | | Emerging Priorities and Consumer-Driven Research | 2020 Silicosis Research | Monash University | The NLRP3 inflammasome as a potential biomarker and therapeutic target for silicosis | 645,763.70 | a | | Emerging Priorities and Consumer-Driven Research | 2020 Silicosis Research | University of Tasmania | The role of particle size in the pathogenesis of engineered stone-associated accelerated silicosis | 665,842.70 | a | | Emerging Priorities and Consumer-Driven Research | 2020 Silicosis Research | University of Sydney | Transforming diagnosis of silicosis: a novel AI approach | 1,481,686.00 | a | | Emerging Priorities and Consumer-Driven Research | 2021 Chronic Musculoskeletal Conditions in Children and Adolescents | Monash University | A national functional diagnostic program for therapy development in congenital muscle disease | 2,498,200.00 |  | | Emerging Priorities and Consumer-Driven Research | 2021 Chronic Musculoskeletal Conditions in Children and Adolescents | University of Sydney | A3BC for Kids | 2,496,875.50 |  | | Emerging Priorities and Consumer-Driven Research | 2021 Chronic Musculoskeletal Conditions in Children and Adolescents | The University of Queensland | ACTIVE KNEECAPs! tArgeted effeCTIVE treatments for adolescent KNEECAP pain | 2,043,046.84 |  | | Emerging Priorities and Consumer-Driven Research | 2021 Chronic Musculoskeletal Conditions in Children and Adolescents | University of New South Wales | Advancing congenital and childhood-onset muscle disease diagnosis and treatment - a cross-disciplinary Australian collaboration | 2,499,988.00 |  | | Emerging Priorities and Consumer-Driven Research | 2021 Chronic Musculoskeletal Conditions in Children and Adolescents | The University of Queensland | Australian Cerebral Palsy Musculoskeletal Health Network | 2,498,384.20 |  | | Emerging Priorities and Consumer-Driven Research | 2021 Chronic Musculoskeletal Conditions in Children and Adolescents | Murdoch Children's Research Institute | Bridging Evidence Gaps - Developmental Dysplasia of the Hip (DDH) | 2,499,714.14 |  | | Emerging Priorities and Consumer-Driven Research | 2021 Chronic Musculoskeletal Conditions in Children and Adolescents | Monash University | Children with Lower Limb Pain (CLLiP): Working with families, community and health care provider’s to improve outcomes | 1,809,204.97 |  | | Emerging Priorities and Consumer-Driven Research | 2021 Chronic Musculoskeletal Conditions in Children and Adolescents | University of Melbourne | Force-reducing minimalist footwear for adolescents with chronic knee pain: a randomised clinical trial | 994,740.80 |  | | Emerging Priorities and Consumer-Driven Research | 2021 Chronic Musculoskeletal Conditions in Children and Adolescents | University of Sydney | JIA KidsLink: Joint Venture to improve surveillance, clinical pathways and health outcomes of children with juvenile idiopathic arthritis | 1,597,811.40 |  | | Emerging Priorities and Consumer-Driven Research | 2021 Chronic Musculoskeletal Conditions in Children and Adolescents | Curtin University | myPAinhealTH (myPATH): a digitally-enabled adaptive learning system to support quality care of young Australians living with chronic musculoskeletal (MSK) pain | 1,474,044.60 |  | | Emerging Priorities and Consumer-Driven Research | 2021 Chronic Musculoskeletal Conditions in Children and Adolescents | University of Sydney | Pain Smart: Integrating education and clinical care for adolescents with pain | 1,242,434.80 |  | | Emerging Priorities and Consumer-Driven Research | 2021 Chronic Neurological Conditions | Curtin University | Developmental Delay: Enabling early and accurate detection of speech impairment through a web-based assessment application | 312,583.90 |  | | Emerging Priorities and Consumer-Driven Research | 2021 Chronic Neurological Conditions | The Bionics Institute of Australia | Earlier intervention for infants with auditory neuropathy for lifelong benefit | 392,940.00 |  | | Emerging Priorities and Consumer-Driven Research | 2021 Chronic Neurological Conditions | The University of Queensland | Early Sleep Interventions to Improve Outcomes in Children with Neurodisability | 1,614,882.40 |  | | Emerging Priorities and Consumer-Driven Research | 2021 Chronic Neurological Conditions | Monash University | Early, novel and accessible intervention for children with developmental regression | 1,995,974.54 |  | | Emerging Priorities and Consumer-Driven Research | 2021 Chronic Neurological Conditions | Griffith University | Enhancing Quality of Life through an early InTervention co-developed with the autistic communitY (E-QoL-ITY) | 579,747.48 |  | | Emerging Priorities and Consumer-Driven Research | 2021 Chronic Neurological Conditions | Monash University | Targeted Surveillance of Developmental Delay and Impairments for Young Children Born Very Preterm | 1,829,994.60 |  | | Emerging Priorities and Consumer-Driven Research | 2021 Chronic Neurological Conditions | University of New South Wales | Using technological innovations to provide equitable access to early identification of child developmental needs and integrated health and social care using a blended service delivery framework | 1,964,142.00 |  | | Emerging Priorities and Consumer-Driven Research | 2021 Chronic Neurological Conditions | University of Sydney | We hear your voice! A consumer-codesigned program to customize, evaluate and implement speech recognition technology, for people with chronic degenerative neurologic diseases | 1,990,688.40 |  | | Emerging Priorities and Consumer-Driven Research | 2021 Improving the Health and Wellbeing of Aboriginal and Torres Strait Islander Mothers and Babies | Children's Ground Limited | Arelhe ante areyele arntarnte-arelhetyeke ampe akweke arle atnyenetyenheke (Arrernte). Women guiding women who are going to have babies (English) | 200,000.00 |  | | Emerging Priorities and Consumer-Driven Research | 2021 Improving the Health and Wellbeing of Aboriginal and Torres Strait Islander Mothers and Babies | Institute for Urban Indigenous Health Ltd | Birthing in Our Community: gold standard Indigenous maternal infant health | 4,999,156.00 |  | | Emerging Priorities and Consumer-Driven Research | 2021 Improving the Health and Wellbeing of Aboriginal and Torres Strait Islander Mothers and Babies | Charles Darwin University | Birthing on Country: RISE SAFELY in rural, remote and very remote Australia | 4,998,540.00 |  | | Emerging Priorities and Consumer-Driven Research | 2021 Improving the Health and Wellbeing of Aboriginal and Torres Strait Islander Mothers and Babies | University of Western Australia (Kimberley Aboriginal Medical Services Limited) | Optimisation of screening and management of hyperglycaemia in pregnancy | 3,236,071.00 |  | | Emerging Priorities and Consumer-Driven Research | 2021 Improving the Health and Wellbeing of Aboriginal and Torres Strait Islander Mothers and Babies | University of Melbourne | Replanting the Birthing Trees to Support First Nations Parents and Babies | 4,999,905.00 |  | | Emerging Priorities and Consumer-Driven Research | 2021 Traumatic Brain Injury | Monash University | INFORMED: INtegrative approaches For Optimizing Recognition, Management and EDucation of concussion at the community sports level | 996,288.20 |  | | Emerging Priorities and Consumer-Driven Research | 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care | Flinders University | “There must be a better way”: partnering with consumers to implement a digitally enabled geriatric urgent care unit to improve hospital flow | 1,116,756.25 |  | | Emerging Priorities and Consumer-Driven Research | 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care | University of Sydney | Giving patients an EPIC-START: An evidence based, data driven model of care to improve patient care and efficiency in emergency departments | 2,847,592.24 |  | | Emerging Priorities and Consumer-Driven Research | 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care | University of Tasmania | IMplementing clinical Pathways for Acute Care in Tasmania (IMPACT) | 2,919,107.99 |  | | Emerging Priorities and Consumer-Driven Research | 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care | Griffith University | Improved Respiratory Support in Remote Settings for Children: A Paediatric Acute Respiratory Intervention Study (PARIS), PARIS on Country | 1,630,153.35 |  | | Emerging Priorities and Consumer-Driven Research | 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care | The University of Adelaide | Improving Acute Atrial Fibrillation Management for better patient outcomes | 1,075,421.05 |  | | Emerging Priorities and Consumer-Driven Research | 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care | University of Western Australia | OPERATE: Older Persons Early Recognition Access and Treatment in Emergencies | 2,918,995.31 |  | | Emerging Priorities and Consumer-Driven Research | 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care | University of Sydney | Reshaping the management of low back pain in emergency departments | 2,818,123.56 |  | | Emerging Priorities and Consumer-Driven Research | 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care | Menzies School of Health Research | StreamlinED – improving the effectiveness and efficiency of Northern Territory (NT) Emergency Departments | 2,917,464.19 |  | | Emerging Priorities and Consumer-Driven Research | 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care | South Australian Health and Medical Research Institute Limited | Using a State-wide Learning Health System for the Rapid Deployment, Evaluation and Translation of New Models of Care in South Australia to Reduce Pressure on Emergency Departments and Acute Care | 2,919,835.56 |  | | Emerging Priorities and Consumer-Driven Research | 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care | Macquarie University | Working together: innovation to improve Emergency Department (ED) performance, and patient outcomes and experience for five complex consumer cohorts | 2,836,550.50 |  | | Frontier Health and Medical Research | 2020 Frontier Health and Medical Research (Cohort 1, Stage Two) | Australian Lung Health initiative Pty Ltd | 4D Functional diagnosis: a new frontier in lung health for children | 28,867,540.00 | a | | Frontier Health and Medical Research | 2020 Frontier Health and Medical Research (Cohort 1, Stage Two) | University of Melbourne | The Australian Epilepsy Project | 30,080,129.00 | a | | Frontier Health and Medical Research | 2020 Frontier Health and Medical Research (Cohort 1, Stage Two) | University of Melbourne | The Stroke Golden Hour: delivering urgent stroke care to all Australians | 40,167,052.00 | a | | Frontier Health and Medical Research | 2021 Frontier Health and Medical Research | The Walter and Eliza Hall Institute of Medical Research | Australian Centre for E3 Therapeutics (ACE3T) | 999,999.00 | a | | Frontier Health and Medical Research | 2021 Frontier Health and Medical Research | University of Sydney | Australian Corneal Bioengineering: Novel Therapies to Fight Blindness | 999,224.00 | a | | Frontier Health and Medical Research | 2021 Frontier Health and Medical Research | University of Western Australia | Disruptive Technologies for Precision Medicine in Coronary Artery Disease | 896,606.00 | a | | Frontier Health and Medical Research | 2021 Frontier Health and Medical Research | The University of Queensland | Earlier Diagnosis and Personalised Treatments for Endometriosis (EndoAIMM) | 927,741.00 | a | | Frontier Health and Medical Research | 2021 Frontier Health and Medical Research | University of New South Wales | EpiWatch – Artificial Intelligence Early-Warning System for Epidemics | 799,788.00 | a | | Frontier Health and Medical Research | 2021 Frontier Health and Medical Research | University of Sydney | New Frontiers in Personalised Prevention of Coronary Artery Disease | 997,562.00 | a | | Frontier Health and Medical Research | 2021 Frontier Health and Medical Research | Snoretox Pty Ltd | Novel, Innovative Modified Tetanus Toxin Drugs for Weak Muscle Conditions | 994,509.00 | a | | Frontier Health and Medical Research | 2021 Frontier Health and Medical Research | University of Sydney | Phage Australia | 999,999.00 | a | | Frontier Health and Medical Research | 2021 Frontier Health and Medical Research | Monash University | The Artificial Heart Frontiers Program | 999,570.00 | a | | Frontier Health and Medical Research | 2021 Frontier Health and Medical Research | Synchron Australia Pty Ltd | The Brain-Machine Interface Frontier: Pioneering Endovascular Bionics | 996,000.00 | a | | Genomics Health Futures Mission | 2019 Pathogen Genomics | Monash University | Genomics, Digital Health and Machine Learning: the SuperbugAi Flagship | 3,403,772.00 | a | | Genomics Health Futures Mission | 2019 Pathogen Genomics | University of New South Wales | H2Seq: Viral genomics for public health interventions in HIV and HCV | 6,629,162.00 | a | | Genomics Health Futures Mission | 2019 Pathogen Genomics | University of Melbourne | META-GP: Delivering a Clinical Metagenomics Platform for Australia | 6,984,360.00 | a | | Genomics Health Futures Mission | 2019 Pathogen Genomics | University of Melbourne | Precision Public Health in Australia through Integrated Pathogen Genomics | 9,999,499.00 | a | | Genomics Health Futures Mission | 2020 Genomics Health Futures Mission | Flinders University | A liquid biopsy DNA methylation blood test for personalised treatment of patients with gastrointestinal cancers | 1,980,810.10 |  | | Genomics Health Futures Mission | 2020 Genomics Health Futures Mission | Murdoch Children's Research Institute | A national large scale automated reanalysis program to increase rare disease diagnosis | 2,999,982.60 |  | | Genomics Health Futures Mission | 2020 Genomics Health Futures Mission | University of Western Australia | Closing the gap in diagnosis of neurological disorders including ataxias and neuropathies – a trans-Australia collaboration | 2,996,253.50 |  | | Genomics Health Futures Mission | 2020 Genomics Health Futures Mission | University of Melbourne | Diagnosis, discovery and novel phenotype characterisation using multimodal genomics in patients with inherited bone marrow failure and related disorders | 2,997,450.25 |  | | Genomics Health Futures Mission | 2020 Genomics Health Futures Mission | University of Melbourne | Evaluating clinically relevant biomarkers to improve early detection and treatment of head and neck cancer | 2,231,954.50 |  | | Genomics Health Futures Mission | 2020 Genomics Health Futures Mission | University of Melbourne | Genetic mosaicism as a stable and robust blood DNA biomarker for precision risk assessment for cancer | 2,122,301.10 |  | | Genomics Health Futures Mission | 2020 Genomics Health Futures Mission | University of Sydney | Genomic risk prediction and risk-tailored screening and early detection for common cancers | 2,999,860.35 |  | | Genomics Health Futures Mission | 2020 Genomics Health Futures Mission | The University of Queensland | Improving genomic testing rates for inoperable lung cancer patients | 2,492,446.30 |  | | Genomics Health Futures Mission | 2020 Genomics Health Futures Mission | Macquarie University | Integrated Multimodal Precision Liquid biopsy to Enhance MElanoma and NSCLC Treatment (IMPLEMENT) | 2,031,178.80 |  | | Genomics Health Futures Mission | 2020 Genomics Health Futures Mission | Murdoch Children's Research Institute | Mitochondrial Diagnostic Network for Genomics and Omics | 2,999,999.66 |  | | Genomics Health Futures Mission | 2020 Genomics Health Futures Mission | Murdoch Children's Research Institute | New technologies for improved diagnosis of ataxia and the repeat expansion disorders | 653,299.00 |  | | Genomics Health Futures Mission | 2020 Genomics Health Futures Mission | University of Melbourne | Novel predictive disease modelling using liquid biopsies to improve outcomes in melanoma | 2,049,125.70 |  | | Genomics Health Futures Mission | 2020 Genomics Health Futures Mission | Monash University | Population genomic screening of young adults to prevent cancer in Australia | 2,968,057.20 |  | | Genomics Health Futures Mission | 2020 Genomics Health Futures Mission | University of Melbourne | Precision Diagnosis for the Remaining 50% of Unsolved Developmental and Epileptic Encephalopathies | 2,992,144.21 |  | | Genomics Health Futures Mission | 2020 Genomics Health Futures Mission | Murdoch Children's Research Institute | The Australian Functional Genomics Network | 5,999,547.00 |  | | Genomics Health Futures Mission | 2020 Genomics Health Futures Mission | Murdoch Children's Research Institute | The Australian Undiagnosed Diseases Network (UDN-Aus): An internationally networked national approach for transforming diagnosis for individuals living with rare diseases | 2,974,134.60 |  | | Genomics Health Futures Mission | 2020 Genomics Health Futures Mission | James Cook University | The KidGen National Kidney Genomics Program – improving genomic outcomes for Australian families with genetic kidney disease | 2,999,537.40 |  | | Genomics Health Futures Mission | 2021 Genomics Health Futures Mission | The Walter and Eliza Hall Institute of Medical Research | Advancing genetic diagnosis and health by leveraging high-throughput functional assay data into existing disease-agnostic variant platforms | 2,573,362.20 |  | | Genomics Health Futures Mission | 2021 Genomics Health Futures Mission | Murdoch Children's Research Institute | Assessing benefits of extended genomic newborn screening trialled on 100,000 infants from Generation Victoria | 2,999,919.80 |  | | Genomics Health Futures Mission | 2021 Genomics Health Futures Mission | University of New South Wales | Developing a long-read nanopore sequencing platform for Indigenous genomics | 986,060.00 |  | | Genomics Health Futures Mission | 2021 Genomics Health Futures Mission | The Council of the Queensland Institute of Medical Research | Ensuring genetics based prediction of glaucoma can benefit all Australians | 997,796.80 |  | | Genomics Health Futures Mission | 2021 Genomics Health Futures Mission | Australian National University | Establishing epigenetic biomarkers in Indigenous Australians for precision health | 991,506.00 |  | | Genomics Health Futures Mission | 2021 Genomics Health Futures Mission | University of Sydney | Ethical governance for clinical and genomic data | 4,999,986.85 |  | | Genomics Health Futures Mission | 2021 Genomics Health Futures Mission | Murdoch Children's Research Institute | Genomic Newborn Screening for personalised lifelong healthcare in Australian babies | 2,998,078.35 |  | | Genomics Health Futures Mission | 2021 Genomics Health Futures Mission | University of Sydney | gEnomics4newborns: integrating Ethics and Equity with Effectiveness and Economics for genomic newborn screening | 2,117,960.40 |  | | Genomics Health Futures Mission | 2021 Genomics Health Futures Mission | University of New South Wales | High throughput functional genomics assays for ion channelopathies | 2,877,650.40 |  | | Genomics Health Futures Mission | 2021 Genomics Health Futures Mission | Australian National University | High throughput validation of genomic variants in Indigenous Australians and their contribution to kidney and immune disease | 975,502.80 |  | | Genomics Health Futures Mission | 2021 Genomics Health Futures Mission | University of Sydney | Newborn GEN SEQ TRAIL: Newborn GENomicSEQuencing in screening: TherapyReadyAndInformation for Life | 2,954,189.32 |  | | Genomics Health Futures Mission | 2021 Genomics Health Futures Mission | The University of Adelaide | Newborn screening model using Integrated multi-omics in South Australia (NewbornsInSA) | 2,941,351.00 |  | | Genomics Health Futures Mission | 2021 Genomics Health Futures Mission | Australian National University | Pathways to benefit for Indigenous Australians in Genomic Medicine | 4,986,948.70 |  | | Genomics Health Futures Mission | 2021 Genomics Health Futures Mission | University of Melbourne | Perioperative Pharmacogenomic Testing (PPGx): A Feasibility and Randomised Controlled Pilot Study | 355,255.20 |  | | Genomics Health Futures Mission | 2021 Genomics Health Futures Mission | The University of Adelaide | PERSYST: Pathogenic Evaluation of Recalcitrant Variants by Systematic Transactivation | 2,996,428.00 |  | | Genomics Health Futures Mission | 2021 Genomics Health Futures Mission | The University of Queensland | Preparing Australia for use of genomics in prevention of heart-disease: Focus on South Asian Australians | 928,898.92 |  | | Genomics Health Futures Mission | 2021 Genomics Health Futures Mission | University of Melbourne | RDMassSpec: Mass-Spectrometry based Functional Genomics Platform for solving Rare Genetic Disorders | 2,998,604.40 |  | | Genomics Health Futures Mission | 2021 Genomics Health Futures Mission | University of Sydney | RNA-4RD: Disease-agnostic, nationally-accessible pipelines of clinical RNA Diagnostics | 2,991,954.80 |  | | Genomics Health Futures Mission | 2021 Genomics Health Futures Mission | University of New South Wales | The Australian Genetic Diversity Database: towards a more equitable future for genomic medicine in Australia | 9,996,894.20 |  | | Genomics Health Futures Mission | 2021 Genomics Health Futures Mission | The University of Queensland | TRIAGE: A disease agnostic computational and modelling platform to accelerate variant classification | 2,997,498.50 |  | | Indigenous Health Research Fund | 2020 Indigenous Health Research | University of Melbourne | Healing the Past by Nurturing the Future: Trauma-integrated perinatal care to improve health outcomes for Indigenous parents and infants in a rural setting | 1,499,041.20 |  | | Indigenous Health Research Fund | 2020 Indigenous Health Research | The Sax Institute | Indigenous Led Evaluation of Aboriginal Programs (ILEAP) | 1,499,251.70 |  | | Indigenous Health Research Fund | 2020 Indigenous Health Research | University of New South Wales | Understanding how cultural resilience impacts Aboriginal health & quality of life | 560,209.30 |  | | Indigenous Health Research Fund | 2020 Indigenous Health Research | University of Sydney | Understanding the contribution of Aboriginal and Torres Strait Islander culture and wellbeing to health: Implementation of the What Matters 2 Adults wellbeing measure | 998,036.60 |  | | Indigenous Health Research Fund | 2020 Indigenous Health Research | University of Sydney | VOICE - Validating Outcomes by Including Consumer Experience. Developing a Patient Reported Experience Measure for Aboriginal and Torres Strait Islander people accessing primary health care | 1,430,917.85 |  | | Indigenous Health Research Fund | 2020 Indigenous Health Research | The University of Adelaide | Working with Aboriginal families and health and social service providers to assess the feasibility of a novel care package to reduce cannabis and alcohol use and social stress in pregnancy | 675,286.00 |  | | Indigenous Health Research Fund | 2021 Indigenous Health Research | The University of Adelaide | A silver fluoride intervention to improve the life trajectories of Indigenous young people and reduce dental disease across the life course | 3,208,372.40 |  | | Indigenous Health Research Fund | 2021 Indigenous Health Research | University of Western Australia | Building a Culturally Safe Mental Health System for Aboriginal and Torres Strait Islander Young People | 713,520.00 |  | | Indigenous Health Research Fund | 2021 Indigenous Health Research | Flinders University | Child Protection Services in Health: Fostering community led solutions to minimise trauma and change trajectories of pregnant Aboriginal women, their children and their families | 2,297,754.60 |  | | Indigenous Health Research Fund | 2021 Indigenous Health Research | South Australian Health and Medical Research Institute Limited | Co-Designing a Coordinated, Sustainable and Supportive Patient Navigator Program to Improve Kidney Health Outcomes | 986,773.80 |  | | Indigenous Health Research Fund | 2021 Indigenous Health Research | Menzies School of Health Research | Examining the impact of extreme temperature on primary healthcare services utilisation in remote Central Australia to inform adaptation strategies | 480,027.60 |  | | Indigenous Health Research Fund | 2021 Indigenous Health Research | Curtin University | Improving coverage, confidence and knowledge about COVID-19 vaccination among Aboriginal Women of child-bearing age in Western Australia | 805,458.80 |  | | Indigenous Health Research Fund | 2021 Indigenous Health Research | Flinders University | Knowledge interface co-design of a diabetes and metabolic syndrome intervention with and for Aboriginal and Torres Strait Islander peoples living on Ngarrindjeri country | 756,623.00 |  | | Indigenous Health Research Fund | 2021 Indigenous Health Research | The University of Queensland | Multidisciplinary co-design of innovative, client-centred models for Indigenous mental health services in South East Queensland | 999,912.20 |  | | Indigenous Health Research Fund | 2021 Indigenous Health Research | University of New South Wales | Our Wisdom, Our Ways supporting Aboriginal Women carers using a strengths based approach to the development of carer and clinician resources that support the carer to continue to care | 479,465.00 |  | | Indigenous Health Research Fund | 2021 Indigenous Health Research | James Cook University | Strong Community, Strong Health: Exploring opportunities for chronic disease prevention in the Torres Strait | 473,642.00 |  | | Indigenous Health Research Fund | 2021 Indigenous Health Research | The University of Queensland | Type 2 diabetes prevalence and management in patients attending an Aboriginal and Torres Strait Islander Health Service in Southeast Queensland over a twelve-year period: factors Associated with good management and low risk of hospitalisation | 392,285.00 |  | | Medical Research Commercialisation | 2020 Early Stage Translation and Commercialisation Support | ANDHealth Limited | Delivering Research, Impact and Health Outcomes in Digital Health (DROID) | 19,750,000.00 |  | | Medical Research Commercialisation | 2020 Early Stage Translation and Commercialisation Support | MTPConnect | MedVentures - Medical Devices Research Commercialisation Program | 19,750,000.00 |  | | Medical Research Commercialisation | 2020 Early Stage Translation and Commercialisation Support | MRCF Pty Ltd | The MRCF's Commercialisation Incubator (#1) | 19,750,000.00 |  | | Medical Research Commercialisation | 2020 Early Stage Translation and Commercialisation Support | MRCF Pty Ltd | The MRCF's Commercialisation Incubator (#2) | 19,750,000.00 |  | | Million Minds Mental Health Research Mission | 2020 Mental Health Research | University of Sydney | Growing Minds Australia: A National Trials Strategy to Transform Child and Youth Mental Health Services | 11,930,126.00 | a | | Million Minds Mental Health Research Mission | 2020 Mental Health Research | Deakin University | Mental Health Australia General Clinical Trial Network (MAGNET) | 11,998,907.76 | a | | National Critical Research Infrastructure | 2019 Rural, Regional and Remote Clinical Trial Enabling Infrastructure | Ministry of Health, NSW | Improving access to innovative healthcare in RRR NSW and ACT | 30,548,184.00 | a | | National Critical Research Infrastructure | 2019 Rural, Regional and Remote Clinical Trial Enabling Infrastructure | Border Medical Oncology Research Unit | ReViTALISE Project Bridging the metro - regional trials gap by 2025 | 18,583,563.00 | a | | National Critical Research Infrastructure | 2019 Rural, Regional and Remote Clinical Trial Enabling Infrastructure | Department of Health, Queensland | The Australian Teletrial Program - access to clinical trials closer to home | 75,240,166.00 | a | | Preventive and Public Health Research | 2020 Efficient Use of Existing Medicines | The University of Queensland | A novel use of sterile water for injection to relieve pain in labour | 302,942.48 | a | | Preventive and Public Health Research | 2020 Efficient Use of Existing Medicines | University of New South Wales | A Phase III randomised placebo-controlled trial of mirtazapine as a pharmacotherapy for methamphetamine (“Ice”) dependence | 4,899,579.86 | a | | Preventive and Public Health Research | 2020 Efficient Use of Existing Medicines | University of New South Wales | A Prospective Randomised Controlled Trial of Adults with Perianal Fistulising Crohn’s Disease and Optimised Therapeutic Infliximab Levels: PROACTIVE Trial | 834,374.30 | a | | Preventive and Public Health Research | 2020 Efficient Use of Existing Medicines | University of Sydney | Cost-Utility Comparison of Down-Titration Strategies for Safer and More Efficient Use of Biologics in Adults with Rheumatoid Arthritis and Psoriatic Arthritis | 2,720,942.80 | a | | Preventive and Public Health Research | 2020 Efficient Use of Existing Medicines | University of Sydney | MOTIVATE C: The Methodical evaluation and Optimisation of Targeted IncentiVes for Accessing Treatment of Early stage hepatitis C | 2,126,775.89 | a | | Preventive and Public Health Research | 2020 Efficient Use of Existing Medicines | Melanoma Institute Australia | NADINA Phase 3 trial comparing response driven neo-adjuvant combination of ipilimumab + nivolumab versus adjuvant nivolumab | 2,023,376.40 | a | | Preventive and Public Health Research | 2020 Efficient Use of Existing Medicines | University of Melbourne | Repurposing BCL-2 inhibitors for immune manipulation to improve outcomes in allogeneic stem cell transplantation | 599,595.60 | a | | Preventive and Public Health Research | 2020 Efficient Use of Existing Medicines | La Trobe University | Repurposing valproate for the treatment of colorectal cancer | 751,884.70 | a | | Preventive and Public Health Research | 2020 Maternal Health and First 2000 Days, Exercise and Nutrition and Early Childhood | University of South Australia | A multi-site guideline implementation randomised controlled trial to improve physical activity and screen time in Out of School Hours Care | 1,451,734.59 | a | | Preventive and Public Health Research | 2020 Maternal Health and First 2000 Days, Exercise and Nutrition and Early Childhood | Monash University | Benchmarking for healthy stores in remote Aboriginal and Torres Strait Islander communities | 1,450,376.89 | a | | Preventive and Public Health Research | 2020 Maternal Health and First 2000 Days, Exercise and Nutrition and Early Childhood | The University of Newcastle | Effectiveness and cost effectiveness of a time-efficient school-based physical activity intervention for adolescents living with disability | 712,779.71 | a | | Preventive and Public Health Research | 2020 Maternal Health and First 2000 Days, Exercise and Nutrition and Early Childhood | La Trobe University | Exploring the impact of midwife-led group antenatal care on caesarean section rates and infant health: a multi-site randomised controlled trial | 1,284,106.01 | a | | Preventive and Public Health Research | 2020 Maternal Health and First 2000 Days, Exercise and Nutrition and Early Childhood | University of Melbourne | HipHealth: an exercise and weight loss telehealth program to improve outcomes for Australians living with hip osteoarthritis | 1,124,557.63 | a | | Preventive and Public Health Research | 2020 Maternal Health and First 2000 Days, Exercise and Nutrition and Early Childhood | Murdoch Children's Research Institute | Infant2Child: Optimising nutrition in early life to reduce childhood dental caries | 1,267,826.21 | a | | Preventive and Public Health Research | 2020 Maternal Health and First 2000 Days, Exercise and Nutrition and Early Childhood | The University of Queensland | Mothers and their Children’s Healthcare Experience Study (MatCHES) | 659,448.80 | a | | Preventive and Public Health Research | 2020 Maternal Health and First 2000 Days, Exercise and Nutrition and Early Childhood | Monash University | Optimising the delivery of antenatal interventions in public healthcare: Improving equity, access and engagement for better maternal and neonatal health outcomes | 1,450,942.83 | a | | Preventive and Public Health Research | 2020 Maternal Health and First 2000 Days, Exercise and Nutrition and Early Childhood | The University of Queensland | School Readiness child outcomes of early neuroprotection/early neurorehabilitation for infants at high risk of Cerebral Palsy in the first 2,000 days | 1,451,738.18 | a | | Preventive and Public Health Research | 2020 Maternal Health and First 2000 Days, Exercise and Nutrition and Early Childhood | Monash University | The protective effect of maternal immunisation on obstetric outcomes: characterising the underlying mechanisms and impact on newborn immune function | 1,146,489.15 | a | | Preventive and Public Health Research | 2020 Quality, Safety and Effectiveness of Medicine Use and Medicine Intervention by Pharmacists | University of Sydney | A Systems approach to enhancing community-based medication review | 2,432,288.00 |  | | Preventive and Public Health Research | 2020 Quality, Safety and Effectiveness of Medicine Use and Medicine Intervention by Pharmacists | The University of Queensland | Activating pharmacists to reduce medication related problems: ACTMed | 2,498,824.00 |  | | Preventive and Public Health Research | 2020 Quality, Safety and Effectiveness of Medicine Use and Medicine Intervention by Pharmacists | University of Sydney | Pharmacy-based screening and quality use of medicines in kidney disease | 1,894,075.00 |  | | Preventive and Public Health Research | 2020 Quality, Safety and Effectiveness of Medicine Use and Medicine Intervention by Pharmacists | University of Sydney | Safer medicines To reduce falls and fractures for OsteoPorosis (#STOP) | 2,337,170.00 |  | | Preventive and Public Health Research | 2020 Quality, Safety and Effectiveness of Medicine Use and Medicine Intervention by Pharmacists | Monash University | The ALLIANCE Trial | 2,493,400.00 |  | | Preventive and Public Health Research | 2021 Optimising the Clinical Use of Immunoglobulins | University of Sydney | antiCD20 treatment to rationalise the use of IV/SC-IG in CIDP | 2,891,769.00 |  | | Preventive and Public Health Research | 2021 Optimising the Clinical Use of Immunoglobulins | University of Sydney | Australian CIDP National Registry: Dissecting Phenotypes and Immunoglobulin Usage Requirements | 812,889.00 |  | | Preventive and Public Health Research | 2021 Optimising the Clinical Use of Immunoglobulins | Monash University | eVidence synthesis to inform the optimAL UsE of Immunoglobulin (The VALUE-Ig Study) | 1,723,772.00 |  | | Preventive and Public Health Research | 2021 Optimising the Clinical Use of Immunoglobulins | Monash University | Generating evidence to improve use of immunoglobulin replacement to reduce infections in blood cancers: the RATIONAL Platform Trial | 3,984,139.00 |  | | Primary Health Care Research | 2020 Primary Health Care Research | Flinders University | A hybrid, implementation-effectiveness trial of a nurse-enabled, shared-care MOdel between primary and acute care for proStatE cancer Survivors (The MOSES Trial) | 1,625,286.65 | a | | Primary Health Care Research | 2020 Primary Health Care Research | Bond University Limited | Activating primary care COPD patients with Multi-morbidity (APCOM) study | 977,628.15 | a | | Primary Health Care Research | 2020 Primary Health Care Research | University of Sydney | Health4Me: Improving adolescent physical activity and nutrition behaviours via primary care | 511,750.50 | a | | Primary Health Care Research | 2020 Primary Health Care Research | Curtin University | Improving diet quality of patients living with obesity: A randomised controlled trial to build effective dietetic service delivery in a primary health care setting | 1,060,354.10 | a | | Primary Health Care Research | 2020 Primary Health Care Research | Flinders University | Improving the social and emotional wellbeing of Aboriginal and Torres Strait Islander men in South Australia | 1,255,051.40 | a | | Primary Health Care Research | 2020 Primary Health Care Research | Australian National University | Optimising primary health care in Australia: multi-method whole-of-population investigation of the impact of telehealth on uptake and quality of care | 1,520,219.65 | a | | Primary Health Care Research | 2021 Primary Health Care Research | Curtin University | CP Movetime | 1,538,149.96 |  | | Primary Health Care Research | 2021 Primary Health Care Research | Flinders University | Equitable access to full blood evaluation testing at the point-of-care in remote primary health | 2,996,294.25 |  | | Primary Health Care Research | 2021 Primary Health Care Research | University of New South Wales | Transforming blood pressure control in primary care using the next generation of wearable blood pressure devices: The NEXTGEN-BP randomised trial | 1,936,263.10 |  | | Primary Health Care Research | 2021 Primary Health Care Research | Bond University Limited | Wearables Integrated Technology to support healthy behaviours in people with Type 2 Diabetes (Wear-IT) | 1,093,405.00 |  | | Rapid Applied Research Translation | 2020 Rapid Applied Research Translation | Central Australian Aboriginal Congress Aboriginal Corporation | Aboriginal prosperity through community driven translational research | 9,760,245.00 |  | | Rapid Applied Research Translation | 2020 Rapid Applied Research Translation | Florey Institute of Neuroscience and Mental Health | Building Australia's First Young Stroke Service | 9,932,108.00 |  | | Rapid Applied Research Translation | 2020 Rapid Applied Research Translation | Western Alliance Health Research Ltd | Delivering enhanced healthcare at home for older people in rural Australia | 9,067,407.00 |  | | Rapid Applied Research Translation | 2020 Rapid Applied Research Translation | The George Institute for Global Health | Implementing holistic burn care through a culturally safe integrated model | 2,410,958.00 |  | | Rapid Applied Research Translation | 2020 Rapid Applied Research Translation | St Vincent's Institute of Medical Research | Pathway to use of immunotherapy in clinical practice for type 1 diabetes | 2,676,000.00 |  | | Rapid Applied Research Translation | 2020 Rapid Applied Research Translation | The Garvan Institute of Medical Research | P-OMICs-flow: Integrating precision oncology into clinical programs | 5,868,917.00 |  | | Rapid Applied Research Translation | 2020 Rapid Applied Research Translation | University of New South Wales | Scaling up infectious disease point-of-care testing for Indigenous people | 9,967,326.00 |  | | Rapid Applied Research Translation | 2020 Rapid Applied Research Translation | Menzies School of Health Research | Top End Partners: translational research to improve health outcomes (TOP R) | 5,802,202.00 |  | | Rapid Applied Research Translation | 2020 Rapid Applied Research Translation | COVIU Global Pty Ltd | Transforming Wound Care through Telehealth in Aged Care | 6,499,695.00 |  | | Research Data Infrastructure | 2020 Primary Health Care Research Data Infrastructure | The University of Adelaide | Imagendo: Diagnosing endometriosis with imaging and AI | 1,990,998.00 |  | | Research Data Infrastructure | 2020 Primary Health Care Research Data Infrastructure | The University of Queensland | Improving surveillance infrastructure for Indigenous primary health care | 1,990,329.00 |  | | Research Data Infrastructure | 2020 Primary Health Care Research Data Infrastructure | Monash University | Optimising health information exchange during aged care transfers | 1,949,557.00 |  | | Research Data Infrastructure | 2020 Primary Health Care Research Data Infrastructure | University of Melbourne | Platform to Enhance Prostate Cancer Shared care Integration (PEPSI) | 1,995,611.00 |  | | Research Data Infrastructure | 2020 Primary Health Care Research Data Infrastructure | Kimberley Aboriginal Medical Services Limited | Regional collaboration to create a Kimberley Health Evidence Data Platform | 1,027,835.00 |  | | Research Data Infrastructure | 2020 Primary Health Care Research Data Infrastructure | South Australian Health and Medical Research Institute Limited | Registry of Senior Australians: Improving Care and Outcomes in Aged Care | 1,966,031.00 |  | | Research Data Infrastructure | 2020 Primary Health Care Research Data Infrastructure | Menzies School of Health Research | Territory Integrated Care: Primary health data Linkage Using Software | 1,962,185.00 |  | | Research Data Infrastructure | 2021 Research Data Infrastructure | University of Melbourne | Appropriate Antimicrobial Use: Scaling Surveillance Using Digital Health | 2,962,654.00 |  | | Research Data Infrastructure | 2021 Research Data Infrastructure | The University of Queensland | Digital Infrastructure For improving First Nations Maternal & Child Health | 2,999,587.00 |  | | Research Data Infrastructure | 2021 Research Data Infrastructure | University of New South Wales | EndoLinked: Identifying fertility outcomes for women with endometriosis | 689,236.00 |  | | Research Data Infrastructure | 2021 Research Data Infrastructure | Monash University | National Transfusion Research Data Infrastructure initiative | 2,999,557.00 |  | | Research Data Infrastructure | 2021 Research Data Infrastructure | University of New South Wales | Next-gen clinical registries: common data models, AI & cloud computing | 2,645,724.00 |  | | Stem Cell Therapies Mission | 2020 Stem Cell Therapies Mission | The University of Adelaide | A Precision Medicine Based Approach to Treat Craniosynostosis in Children | 441,370.75 |  | | Stem Cell Therapies Mission | 2020 Stem Cell Therapies Mission | The University of Adelaide | Developing an Evidence-Based Model for Building Trust in Australian Stem Cell Research and Therapies | 995,406.75 |  | | Stem Cell Therapies Mission | 2020 Stem Cell Therapies Mission | The University of Adelaide | Engineered human stem cells for mutation-specific eradication of myelofibrosis | 853,274.50 |  | | Stem Cell Therapies Mission | 2020 Stem Cell Therapies Mission | Murdoch Children's Research Institute | Evaluating safety and efficacy of bioengineered heart tissue for congenital heart repair | 998,838.15 |  | | Stem Cell Therapies Mission | 2020 Stem Cell Therapies Mission | University of South Australia | Identification and assessment of new treatment options for the childhood cancer Neuroblastoma | 982,101.20 |  | | Stem Cell Therapies Mission | 2020 Stem Cell Therapies Mission | Macquarie University | Improving decisions about access to stem cell interventions | 799,543.40 |  | | Stem Cell Therapies Mission | 2020 Stem Cell Therapies Mission | University of Sydney | Induced pluripotent stem cell derived cardiomyocytes: a new therapy for “no-option” end stage heart failure | 4,978,360.66 |  | | Stem Cell Therapies Mission | 2020 Stem Cell Therapies Mission | Murdoch Children's Research Institute | Insights into CDKL5 neuronal regulation: pathways to improving neurological outcomes for CDKL5 Deficiency Disorder | 854,205.00 |  | | Stem Cell Therapies Mission | 2020 Stem Cell Therapies Mission | University of Melbourne | iPSC clinical trials - population wide screening of patient iPSC’s to reassess high value drug targets for motor neuron disease | 1,000,000.00 |  | | Stem Cell Therapies Mission | 2020 Stem Cell Therapies Mission | Monash University | Locally administered extracellular vesicles for perianal fistulising Crohn's disease | 935,629.60 |  | | Stem Cell Therapies Mission | 2020 Stem Cell Therapies Mission | Murdoch Children's Research Institute | New therapies preventing heart damage during chemotherapy | 879,205.45 |  | | Stem Cell Therapies Mission | 2020 Stem Cell Therapies Mission | University of Wollongong | Novel SMART AAV vectors for gene therapy for Friedreich’s Ataxia | 982,861.60 |  | | Stem Cell Therapies Mission | 2020 Stem Cell Therapies Mission | University of Sydney | Stem Cell Derived-Retinal Organoids to Test Novel Genetic Therapies | 498,419.00 |  | | Stem Cell Therapies Mission | 2020 Stem Cell Therapies Mission | Murdoch Children's Research Institute | Stem cell models of glomerular kidney disease for understanding disease and developing treatments | 934,253.30 |  | | Stem Cell Therapies Mission | 2020 Stem Cell Therapies Mission | University of Melbourne | Stem cell therapies for digestive disease | 583,614.00 |  | | Stem Cell Therapies Mission | 2020 Stem Cell Therapies Mission | The University of Queensland | Transforming the paradigm of epilepsy care with precision medicine | 999,807.95 |  | | Stem Cell Therapies Mission | 2021 Stem Cell Therapies | Cartherics Pty Ltd | Gene modified pluripotent stem cells to generate and empower innate immune cells against poor-prognosis cancers | 5,376,696.00 |  | | Stem Cell Therapies Mission | 2021 Stem Cell Therapies | University of Melbourne | Cartilage based stem cell therapies for joint deformity and facial disfigurement. A framework for point-of-care manufacturing and delivery (ARISTOCRAT) | 6,999,671.10 |  | | Stem Cell Therapies Mission | 2021 Stem Cell Therapies | University of Sydney | Development of photoreceptor cell therapy to treat blindness | 2,566,652.72 |  | | Stem Cell Therapies Mission | 2021 Stem Cell Therapies | Griffith University | Drug discovery for schizophrenia using patient-derived stem cells | 1,425,156.50 |  | | Stem Cell Therapies Mission | 2021 Stem Cell Therapies | University of Western Australia | Eyes and Ears: a human retinal and inner ear organoid platform for pre-clinical screening of novel therapeutics for Usher Syndrome | 2,215,017.62 |  | | Stem Cell Therapies Mission | 2021 Stem Cell Therapies | University of Melbourne | Necessary steps to advance a pluripotent stem cell-derived tissue repair therapy to the clinic for stroke | 2,065,971.00 |  | | Stem Cell Therapies Mission | 2021 Stem Cell Therapies | Monash University | Pre-clinical evaluation of selective adenosine A1 receptor positive allosteric modulators for the treatment of Drug-resistant epilepsy | 3,849,003.60 |  | | Traumatic Brain Injury Mission | 2020 Traumatic Brain Injury Mission | Curtin University | An informatics approach to predict outcomes and monitor intervention efficacy following moderate to severe traumatic brain injury | 499,815.70 |  | | Traumatic Brain Injury Mission | 2020 Traumatic Brain Injury Mission | The University of Queensland | Australian Clinical Practice Guidelines for the Assessment and Management of Mild Traumatic Brain Injury and Post-Concussion Symptoms | 497,834.00 |  | | Traumatic Brain Injury Mission | 2020 Traumatic Brain Injury Mission | University of Tasmania | Clinical practice guidelines for the management of psychosocial disorders following adult traumatic brain injury | 448,051.00 |  | | Traumatic Brain Injury Mission | 2020 Traumatic Brain Injury Mission | Monash University | Exercise therapy for mild traumatic brain injury (mTBI) and persistent post-concussion symptoms (PPCS) across the lifespan | 499,705.00 |  | | Traumatic Brain Injury Mission | 2020 Traumatic Brain Injury Mission | University of Sydney | From injury to long-term physical activity for people living with traumatic brain injury | 406,506.00 |  | | Traumatic Brain Injury Mission | 2020 Traumatic Brain Injury Mission | Monash University | PRECISION-TBI – Promoting evidence-based, data driven care for critically ill moderate-to-severe TBI patients | 499,477.70 |  | | Traumatic Brain Injury Mission | 2020 Traumatic Brain Injury Mission | Monash University | The Australian Traumatic Brain Injury National Data (ATBIND) Project | 365,995.00 |  | | Traumatic Brain Injury Mission | 2020 Traumatic Brain Injury Mission | University of Tasmania | Transforming Awareness, Literacy & Knowledge of Traumatic Brain Injury (TALK-TBI) | 999,998.00 |  | | Traumatic Brain Injury Mission | 2021 Traumatic Brain Injury | Curtin University | AUS-mTBI: designing and implementing the health informatics approaches to enhance treatment and care for people with mild TBI | 2,999,658.00 |  | | **Total** |  |  |  | **1,177,307,965.77** |  | |
| a Grants included in the 2018–2020 reporting period, but with payments commencing during the 2020–2022 reporting period.  Note: The grant recipients are listed on the [MRFF website](https://www.health.gov.au/resources/publications/medical-research-future-fund-mrff-grant-recipients?language=en). Figures may not add up exactly due to rounding. |

# Appendix F MRFF funding with payments commencing between 7 November 2020 and 5 November 2022

Table Total funding by MRFF initiative, with payments commencing between 7 November 2020 and 5 November 2022

|  |  |  |
| --- | --- | --- |
| Theme | MRFF initiative | Funding amount ($) |
| Patients | Emerging Priorities and Consumer-Driven Research | 133,890,304.62 |
| Clinical Trials Activity | 140,935,111.71 |
| Global Health | 0.00 |
| Researchers | Frontier Health and Medical Research | 163,790,374.58 |
| Researcher Exchange and Development Within Industry | 0.00 |
| Clinician Researchers | 48,697,612.40 |
| Early to Mid-Career Researchers | 0.00 |
| Research missions | Australian Brain Cancer Mission | 8,077,924.70 |
| Million Minds Mental Health Research Mission | 23,929,033.76 |
| Genomics Health Futures Mission | 130,170,721.91 |
| Dementia, Ageing and Aged Care Mission | 42,051,843.06 |
| Indigenous Health Research Fund | 18,256,577.05 |
| Stem Cell Therapies Mission | 43,213,415.78 |
| Cardiovascular Health Mission | 53,712,471.41 |
| Traumatic Brain Injury Mission | 7,217,040.40 |
| Research translation | Preventive and Public Health Research | 51,925,712.23 |
| Primary Health Care Research | 14,514,402.76 |
| Rapid Applied Research Translation | 61,984,858.00 |
| Medical Research Commercialisation | 79,000,000.00 |
| National Critical Research Infrastructure | 130,761,257.40 |
| Research Data Infrastructure | 25,179,304.00 |
| Total |  | 1,177,307,965.77 |

# Appendix G Funded rates of MRFF grant opportunities opened between 7 November 2020 and 5 November 2022

Table Funded rates of MRFF grant opportunities

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| MRFF initiative | Grant opportunity | Applications | Applications funded | Funded rate |
| Australian Brain Cancer Mission | 2021 Brain Cancer Research | 14 | 3 | 21.4% |
| 2021 GBM AGILE | This grant opportunity was withdrawn. | | |
| 2022 Australian Brain Cancer Research Infrastructure | 2 | 1 | 50% |
| Cardiovascular Health Mission | 2020 Cardiovascular Health | 75 | 16 | 21.3% |
| 2021 Cardiovascular Health | 100 | 41 | 41.0% |
| 2022 Cardiovascular Health | 51 | 14 | 27.5% |
| Clinical Trials Activity | 2021 Clinical Trials Activity | 105 | 31 | 29.5% |
| 2021 Innovative Therapies for Mental Illness | 16 | 7 | 43.8% |
| 2021 International Clinical Trial Collaborations (Round 21.1) | 24 | 4 | 16.7% |
| 2021 International Clinical Trial Collaborations (Round 21.2) | 24 | 3 | 12.5% |
| 2021 Rare Cancers, Rare Diseases and Unmet Need | 97 | 29 | 29.9% |
| 2022 International Clinical Trial Collaborations (Round 22.1) | 20 | 3 | 15% |
| 2022 International Clinical Trial Collaborations (Round 22.2) | No outcome available at the time this report was written. | | |
| Clinical Trials Activity and Emerging Priorities and Consumer-Driven Research | 2022 Multiple Sclerosis Research | No outcome available at the time this report was written. | | |
| 2022 Pancreatic Cancer Research | 9 | 4 | 44.4% |
| Clinician Researchers | 2020 Clinician Researchers: Applied Research in Health | 181 | 14 | 7.7% |
| 2022 Clinician Researchers: Nurses, Midwives and Allied Health | 124 | 15 | 12.1% |
| Coronavirus Research Response | 2021 COVID-19 Vaccine-Associated Thrombosis with Thrombocytopenia Syndrome | 1 | 1 | 100% |
| 2021 COVID-19 Health Impacts and Vaccination Schedules | 26 | 5 | 19.2% |
| 2021 COVID-19 Treatment Access and Public Health Activities | 31 | 14 | 45.2% |
| Dementia, Ageing and Aged Care Mission | 2020 Dementia, Ageing and Aged Care | 60 | 11 | 18.3% |
| 2021 Dementia, Ageing and Aged Care | 55 | 18 | 32.7% |
| 2022 Dementia, Ageing and Aged Care | 36 | 15 | 41.7% |
| Early to Mid-Career Researchers | 2021 Early to Mid-Career Researchers | 428 | 23 | 5.4% |
| Emerging Priorities and Consumer-Driven Research | 2020 Improving Diagnosis in Cancers With Low Survival Rates | 20 | 8 | 40.0% |
| 2020 Neurofibromatosis Research | 9 | 4 | 44.4% |
| 2020 Paediatric Cancer | 1 | 1 | 100% |
| 2021 Chronic Musculoskeletal Conditions in Children  and Adolescents | 28 | 11 | 39.3% |
| 2021 Chronic Neurological Conditions | 16 | 8 | 50.0% |
| 2021 Improving the Health and Wellbeing of Aboriginal and Torres Strait Islander Mothers and Babies | 19 | 5 | 26.3% |
| 2022 Mitochondrial Donation Pilot Program | 3 | 1 | 33.3% |
| 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care | 25 | 10 | 40.0% |
| Genomics Health Futures Mission | 2020 Genomics Health Futures Mission | 41 | 17 | 41.5% |
| 2021 Genomics Health Futures Mission | 41 | 20 | 48.8% |
| 2022 Genomics Health Futures | No outcome available at the time this report was written. | | |
| Indigenous Health Research Fund | 2020 Indigenous Health Research | 20 | 6 | 30.0% |
| 2021 Indigenous Health Research | 22 | 11 | 50.0% |
| 2022 Indigenous Health Research | No outcome available at the time this report was written. | | |
| Medical Research Commercialisation | 2020 Early Stage Translation and Commercialisation Support | 12 | 4 | 33.3% |
| 2021 BioMedTech Incubator | 5 | 1 | 20% |
| National Critical Research Infrastructure | 2021 mRNA Clinical Trials Enabling Infrastructure | 7 | 5 | 71.4% |
| 2022 National Critical Research Infrastructure | 142 | 19 | 13.4% |
| Preventive and Public Health Research | 2020 Quality, Safety and Effectiveness of Medicine Use and Medicine Intervention by Pharmacists | 53 | 5 | 9.4% |
| 2021 Chronic Respiratory Conditions | 33 | 10 | 30.3% |
| 2021 Consumer-Led Research | 102 | 14 | 13.7% |
| 2021 Maternal Health and Healthy Lifestyles | 29 | 11 | 37.9% |
| 2021 Optimising the Clinical Use of Immunoglobulins | 4 | 4 | 100% |
| 2022 Assessment of High-Cost Gene Treatments and Digital Health Interventions | No outcome available at the time this report was written | | |
| 2022 Quality, Safety and Effectiveness of Medicine Use and Medicine Intervention by Pharmacists | 19 | 10 | 52.6% |
| Preventive and Public Health Research and Emerging Priorities and Consumer-Driven Research | 2022 Effective Treatments and Therapies | 33 | 16 | 48.5% |
| Primary Health Care Research | 2021 Primary Health Care Digital Innovations | 36 | 6 | 16.7% |
| 2021 Primary Health Care Research | 25 | 4 | 16.0% |
| Rapid Applied Research Translation | 2020 Rapid Applied Research Translation | 72 | 9 | 12.5% |
| Research Data Infrastructure | 2020 Primary Health Care Research Data Infrastructure | 34 | 7 | 20.6% |
| 2021 Research Data Infrastructure | 92 | 5 | 5.4% |
| 2022 Research Data Infrastructure | No outcome available at the time this report was written. | | |
| Stem Cell Therapies Mission | 2020 Stem Cell Therapies Mission | 59 | 17 | 28.8% |
| 2021 Stem Cell Therapies | 27 | 7 | 25.9% |
| 2022 Stem Cell Therapies | 44 | 13 | 29.5% |
| Traumatic Brain Injury Mission | 2020 Traumatic Brain Injury Mission | 26 | 8 | 30.8% |
| Traumatic Brain Injury Mission and Emerging Priorities and Consumer-Driven Research | 2021 Traumatic Brain Injury | 11 | 2 | 18.2% |

Table represents the subset of grant opportunities open and assessed between November 2020 to data available at the time this report was written. Applications funded includes projects that are not listed in Appendix E as payment commenced outside the period between 7 November 2020 and 5 November 2022. The grant recipients are listed on the [MRFF website](https://www.health.gov.au/resources/publications/medical-research-future-fund-mrff-grant-recipients?language=en).

# Appendix H Methodology used in this report

## Grant opportunities and grants awarded

The *Australian Medical Research and Innovation Priorities 2020–2022* were in force from 7 November 2020 to 5 November 2022. For the purpose of this report at the time it was written, the included grant opportunities are those open during the period 7 November 2020 to 5 November 2022. Grants awarded and announced refers to grants with payments commencing between 7 November 2020 and 5 November 2022. Due to the usual process of awarding grants after a grant opportunity closes, grants awarded in this report includes grants from opportunities that were opened before 7 November 2020. This methodology is consistent with the approach used in the *Financial assistance to support the Australian Medical Research and Innovation Priorities 2018-20* (2018-2020 report)*.*

The Australian Medical Research and Innovation Priorities 2016-2018 were in force from 9 November 2016 to 8 November 2018 and Australian Medical Research and Innovation Priorities 2018-2020 were in force from 8 November 2018 to 6 November 2020.

All amounts in this report are in Australian dollars and GST exclusive. Grants awarded can include projects conducted by partner organisations that were funded from a single MRFF grant, as well as grants relinquished and/or withdrawn. The grant recipients are listed on the [MRFF website](https://www.health.gov.au/resources/publications/medical-research-future-fund-mrff-grant-recipients?language=en).

## Funded rates and gender of Chief Investigators

Data for grant opportunities, that are included in this report, was obtained from MRFF applications submitted through the NHMRC and BGH. The number of applications includes those deemed ineligible during the assessment phase. The data range is 7 November 2020 to 30 June 2022 and only includes grant opportunities where a funding outcome was known. Not all grant opportunities listed in Table 3 and Table 25, and not all grants listed in Table 3, Appendix E and Appendix G are included in this analysis.

The analysis of gender was based on self-identification provided by CIs as ‘Male’, ‘Female’, ‘Intersex or Indeterminate’, or ‘Not stated’. Updated terminology in the application form has gender self-identification options as ‘Man or male’, ‘Women or female’, ‘Non-binary’, ‘I use a different term’ or ‘Prefer not to answer’. This report uses ‘Man’, ‘Woman’, ‘Intersex or Indeterminate’, or ‘Not stated’. For privacy reasons, the published information only includes people identified as a woman or man due to the low numbers of people self-identified as Indeterminate or Intersex. Further, any subcategory analysis with less than 10 people identified is not reported for privacy reasons.

The criteria of the age of a CI, Broad Research Area and Field of Research data is only available for NHMRC-administered grants. This information is nominated by applicants in the application form. There may be a difference in terms that applicants nominate in the application compared to the description of MRFF initiatives.

## Grant Assessment Committees

Information on panels of GACs was provided by the NHMRC and BGH. Gender and terms describing expertise were self-assigned by the GAC members. Australian organisations identified by GAC members as their employer or organisation they were representing. The data includes grant opportunities where the GAC met during the reporting period. Not all grant opportunities listed in Table 25 are included in this analysis.

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All information in this publication is correct as at May 2023

1. Australian Medical Research Advisory Board (2021). Australian Medical Research and Innovation Strategy 2021–2026, AMRAB, Canberra. [↑](#footnote-ref-2)
2. Medical Research Future Fund – Outcomes of Performance Audit by the Australian National Audit Office (ANAO) at <https://www.health.gov.au/resources/publications/medical-research-future-fund-outcomes-of-performance-audit-by-the-australian-national-audit-office-anao> [↑](#footnote-ref-3)
3. Australian Medical Research and Innovation Priorities 2016-2018 were in force from 9 November 2016 to 8 November 2018 and Australian Medical Research and Innovation Priorities 2018-2020 were in force from 8 November 2018 to 6 November 2020. [↑](#footnote-ref-4)
4. Note about data in analysis of MRFF 2020-2022 activities: This section includes grant opportunities that opened for applications between 7 November 2020 and 5 November 2022. Not all grant opportunities had closed or undergone the assessment phase by 5 November 2022. The awarded grant numbers and funding figures are based on MRFF-funded grants with payment commencing between 7 November 2020 and 5 November 2022. These figures include grants from opportunities that were opened before 7 November 2020. Information such as Broad Research Area and Field of Research data is only collected for NHMRC-administered grants. These terms are self-nominated by applicants and there may be a difference to descriptions of MRFF initiatives. Therefore, the total number of grant opportunities, grants and funding for NHMRC-administered grants will be less than figures in Table 3 for all MRFF grants for the same period. More information on the methodology is at Appendix H. [↑](#footnote-ref-5)