

From research to translation: Dementia, Ageing and Aged Care

A/Prof Cindy Thamrin

Director, Performance and Evaluation Section, Health and Medical Research Office

Dr Ameera Yousiph

Assistant Director, Mission Strategy and Implementation Section, Health and Medical Research Office

Dr Merran Stewart

Assistant Director, Performance and Evaluation Section, Health and Medical Research Office

Genevieve Donnelly

Assistant Secretary, Dementia, Diversity and Design Branch, Market Workforce Division

Dr Jane Reid

Director, Mission Strategy and Implementation Section, Health and Medical Research Office

August 2025



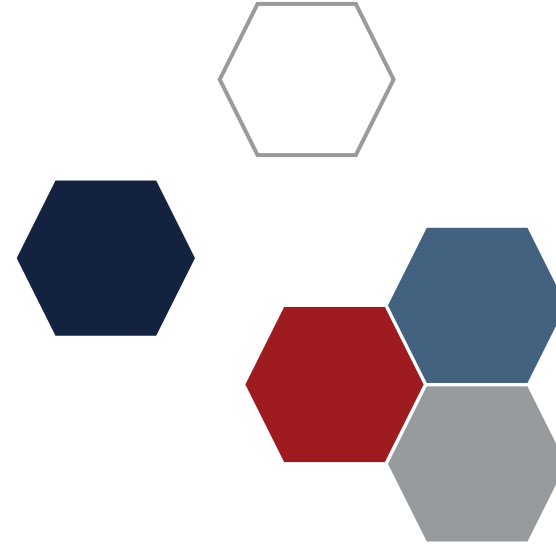
Australian Government

Department of Health, Disability and Ageing



Australian Government

Department of Health, Disability and Ageing



Medical Research Future Fund

MRFF Dementia, Ageing and Aged Care Mission
8 August 2025

Dr Ameera Yousiph
Assistant Director, Mission Strategy and Implementation Section
Health and Medical Research Office

About the Medical Research Future Fund (MRFF)

\$6.5 billion over 10 years
\$650 million per annum
22 initiatives

Established under legislation -
MRFF Act 2015 *"to improve the
health and wellbeing of
Australians"*

Expert advice informs priority setting

- Australian Medical Research Advisory Board
- Expert Advisory Panels

Merit based
independent grant assessment

Flexible/responsive

Rapid and flexible disbursements to respond to emerging issues

Priority led

Areas of unmet need; a technology with transformational potential

Collaboration, expertise investment

Harnesses resources across the system, grow research and build Australia's economy

New grant models

Uses innovative research approaches

What are MRFF Research Missions?

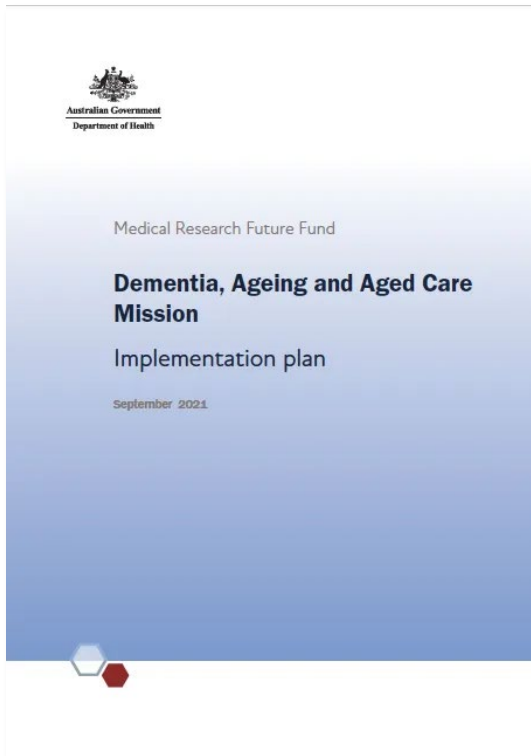
MRFF Research Missions:

- are planned 10-year programs
- tackle significant health challenges that require a coordinated national response
- Large programs of work with ambitious objectives that are only possible through significant investment, leadership and collaboration
- the Minister for Health receives advice on priority areas for research investment for each Research Mission from an Expert Advisory Panel



Mission Roadmap and Implementation Plan

- The **Roadmap** is a high-level strategic document that includes the aim, vision, goal and priorities for investment for the Mission
- The **Implementation Plan** supports the Roadmap
 - Maps the research required to achieve the goal set out for the Mission (i.e. it will guide research investments over the life of the Mission; short, medium, and long term)
 - It establishes how the outcomes from each priority will be evaluated in terms of benefit to Australian patients and facilitate tracking of the Mission's progress towards its objectives



MRFF Dementia, Ageing and Aged Care Mission

Aim	Priority areas for investment
1. Achieve measurable improvements in detection, prevention, assessment, care and support for people living with dementia	1.1 Determine and implement interventions that prevent or delay the onset of dementia symptoms — pre- and post-diagnosis
	1.2 Implement care approaches for people with dementia and their carers that provide reliable and robust strategies to manage the impact of dementia on wellbeing, quality of life and end of life
	1.3 Implement care and diagnostic pathways that improve timeliness of diagnosing dementia
2. Achieve measurable improvements in healthy life expectancy among older Australians	2.1 Discover and implement health and medical interventions in mid-life and beyond that will extend healthy, active years of life and compress the period of morbidity
	2.2 Conceive and encourage implementation of new ways to embed more proactive health management, including health literacy, for older people
	2.3 Develop interventions that address social, economic and cultural barriers to healthy ageing to reduce inequality in healthy life expectancy in Australia
3. Achieve measurable improvements in consistency and quality of care for older Australians across all care settings	3.1 Investigate and support implementation or adoption of models of care that are most effective in: <ul style="list-style-type: none">• delivering high-quality, culturally appropriate care, informed by life experience, in home and residential aged care settings, that support individuals and their informal/family carers• ensure equitable and appropriate access to quality clinical care and minimise avoidable transitions between all care settings• identify and implement ways to maximise medical, nursing and allied health impact• identify and implement ways to maximise social inclusion and multigenerational engagement in long-term care settings

MRFF Dementia, Ageing and Aged Care Mission



MRFF Dementia, Ageing and Aged Care Mission

- The **DAAC Mission** is investing \$185 million over 10 years to support research to enable older Australians to:
 - Maintain their health and quality of life as they age
 - Live independently for longer
 - Access quality care when they need it
- To date, the **DAAC Mission** has funded 78 grants to the value of \$124.3 million





DAAC Mission – Funded Grant (Ageing)

‘METformin for treating peripheral artery disease Related walking Impairment Trial (MERIT) ’

This trial will assess if Metformin can treat peripheral artery disease, a condition which affects the quality of life of over 1 million Australians.

This has the potential to positively impact older people worldwide.

James Cook University

\$1,215,182.04

CIA: Prof. Jonathan Golledge

Funded through the 2021 Dementia, Ageing and Aged Care Grant Opportunity



DAAC Mission – Funded Grant (Aged Care)

‘Development and Implementation of the National Infection Surveillance Program for Aged Care (NISPAC) ’

This project is focused on the implementation of an effective aged care infection surveillance program in all Australian aged care homes.

The expected outcome is that the number of infections in high-risk residents will significantly reduce.

The University of Melbourne

\$997,734.30

CIA: A/Prof Noleen Bennett

Funded through the 2020 Dementia, Ageing and Aged Care Grant Opportunity



2025 Dementia, Ageing and Aged Care Grant Opportunity

- **Opened** 29 February 2025
- **Closes** to applications 20 August 2025
- \$24.3 million in available funding
- 2 streams of funding available
- **Outcomes** expected December 2025



2025 Dementia, Ageing and Aged Care Grant Opportunity

Stream 1 (Priority Area 2.3, Targeted Call for Research)

- **OBJECTIVE:** conduct implementation research focused on addressing inequalities in uptake of prevention activities for:
 - Topic A: Aboriginal and Torres Strait Islander people
 - Topic B: rural, regional and remote populations
 - Topic C: culturally and linguistically diverse populations.
- **OUTCOME:** Implementing interventions that extend healthy, active years of life amongst vulnerable populations
- Maximum funding available for a single grant is \$3 million
- Maximum grant period is 5 years
- Up to 15 CIs and 15 AIs



2025 Dementia, Ageing and Aged Care Grant Opportunity

Stream 2 (Priority Area 3.1, Targeted Call for Research)

- **OBJECTIVE:** conduct implementation research to understand the barriers and enablers to, and impact of, the adoption of the key components of high-quality care for older Australians across:
 - care settings
 - population groups (either by disease type, age group or other characteristic).
- **OUTCOME:** improving implementation of best practice care for older Australians
- For a single grant the maximum available is \$5 million
- Maximum grant period is 5 years
- Up to 50 CIs and 50 AIs



How is each MRFF grant opportunity unique?

Each grant opportunity:

- is different - look beyond the title to the objectives and outcomes (section 2.3), eligibility criteria (section 4) and assessment criteria (section 6)
- aligns with the current *Australian Medical Research and Innovation Priorities* (section 2.3)
- requires researchers to identify how they will contribute to the MRFF Measures of Success (section 6 – assessment criteria 1 and 4)
- includes assessment criteria that are focused on outcomes
- includes a requirement for consumer involvement

Consumer Involvement in MRFF-Funded Research

- A consumer is a person with **lived experience** as a patient, client, potential patient, user of health services, and/or providing support as a carer, family or community member
- Applicants are required to submit a **Consumer Involvement Statement** as part of their application.
- Encourages researchers to **include older people** in research about issues affecting them
- Consumers should be included across the entire **research continuum**



<https://www.health.gov.au/resources/publications/principles-for-consumer-involvement-in-research-funded-by-the-medical-research-future-fund>

Keep connected



Subscribe to MRFF News

[https://www.health.gov.au/
initiatives and
programs/medical
research future fund/mrff
news](https://www.health.gov.au/initiatives-and-programs/medical-research-future-fund/mrff-news)



Register for MRFF grants opportunities

<https://help.grants.gov.au/>



Check out the grant opportunity forecast

[https://www.health.gov.au/
our work/medical
research future fund/mrff
grant opportunities
calendar](https://www.health.gov.au/our-work/medical-research-future-fund/mrff-grant-opportunities-calendar)



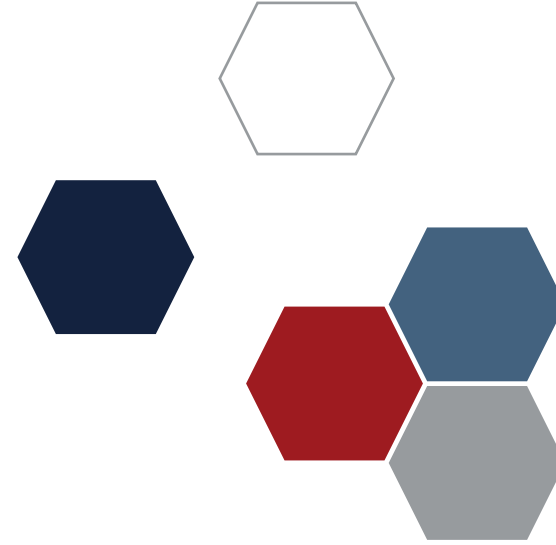
Follow Health X (formerly known as Twitter) for MRFF updates

@healthgovau
#MRFF



Send any questions to

MRFF@health.gov.au



Medical Research Future Fund

Review of the Dementia, Ageing and Aged Care Mission
8 August 2025

Dr Merran Stewart
Assistant Director, Performance and Evaluation Section
Health and Medical Research Office

MRFF Monitoring, evaluation and learning strategy

The MRFF Monitoring, evaluation and learning strategy (Evaluation Strategy) provides an overarching framework for assessing the performance of the MRFF.

Basis for all MRFF evaluation activities

Updated in August 2024

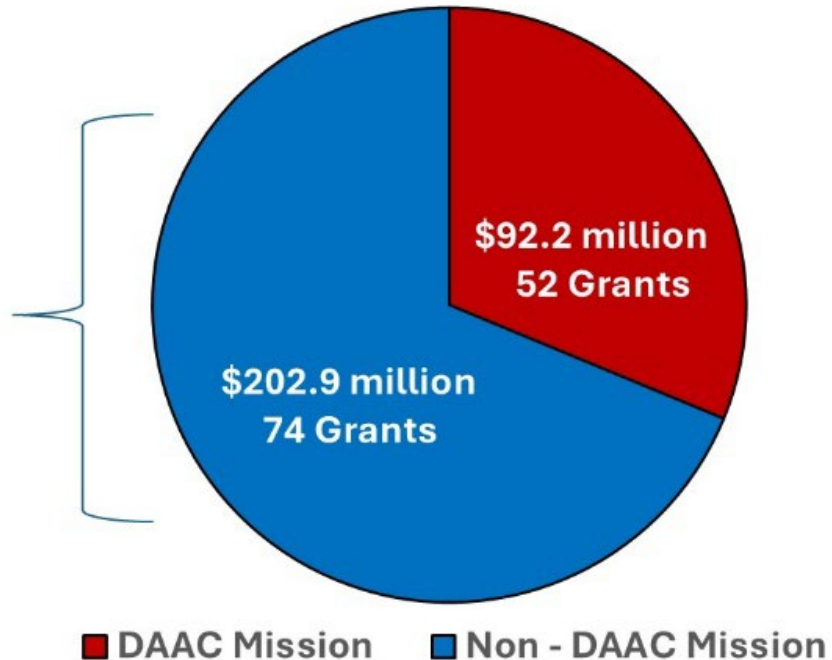


Review of the Dementia, Ageing and Aged Care (DAAC) Mission

Conducted
between
November 2024
and July 2025

Scope: all MRFF
dementia, ageing
and aged care
research
investments from
inception to 20
August 2024

Total MRFF funding for
DAAC related research:
\$295 million



BRANDON
BIOCATALYST

ANDHealth[®]
Australia's National Digital Health Initiative

The CUREator+ Dementia and Cognitive Decline program is one of several programs funded under the MRFF Medical Research Commercialisation initiative. This national incubator program aims to accelerate the translation and commercialisation of promising early-stage Australian innovations that will prolong or improve the lives of Australians currently living with dementia and cognitive decline and caregivers who support them.

Review of the Dementia, Ageing and Aged Care (DAAC) Mission

REVIEW QUESTIONS

- 1. Positioning:** How does MRFF-funded dementia, ageing and aged care research sit within the national and international dementia, ageing and aged care research funding landscape?
- 2. Contribution:** How has the MRFF contributed to dementia, ageing and aged care research in Australia?
- 3. Progress and impact:** To what extent is there alignment and progress of MRFF-funded dementia, ageing and aged care research towards benchmarks?
- 4. Opportunities:** What opportunities (if any) are there to enhance MRFF funding and granting arrangements to improve the impact of MRFF funded dementia, ageing and aged care research?

Conducted by **MH Consulting Group**, an independent contractor

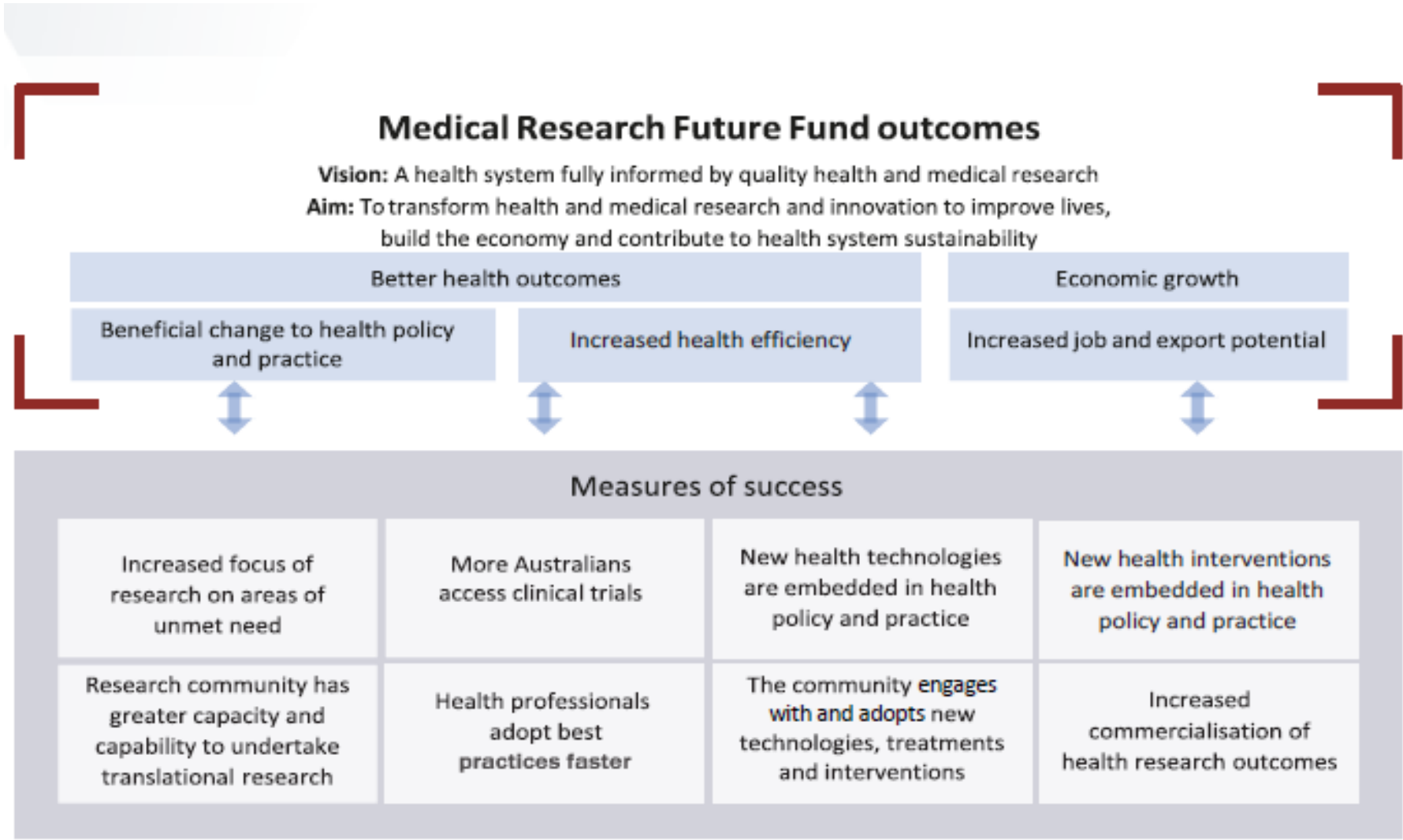


Guided by a **Mission Review Panel**, who oversaw Review, advised on collection, analysis and interpretation of data:

- **Professor Glenda Halliday**, Chair, dementia research expert
- **Professor Carol Brayne CBE**, dementia and ageing researcher and international expert
- **Professor Linda Deravin**, aged care and First Nations expert
- **Ms Imelda Lynch**, Australian Medical Research Advisory Board representative
- **Ms Bobby Redman**, consumer representative
- **Mr Tom Symondson**, aged care industry expert

DAAC Mission Review benchmarks

MRFF measures of success

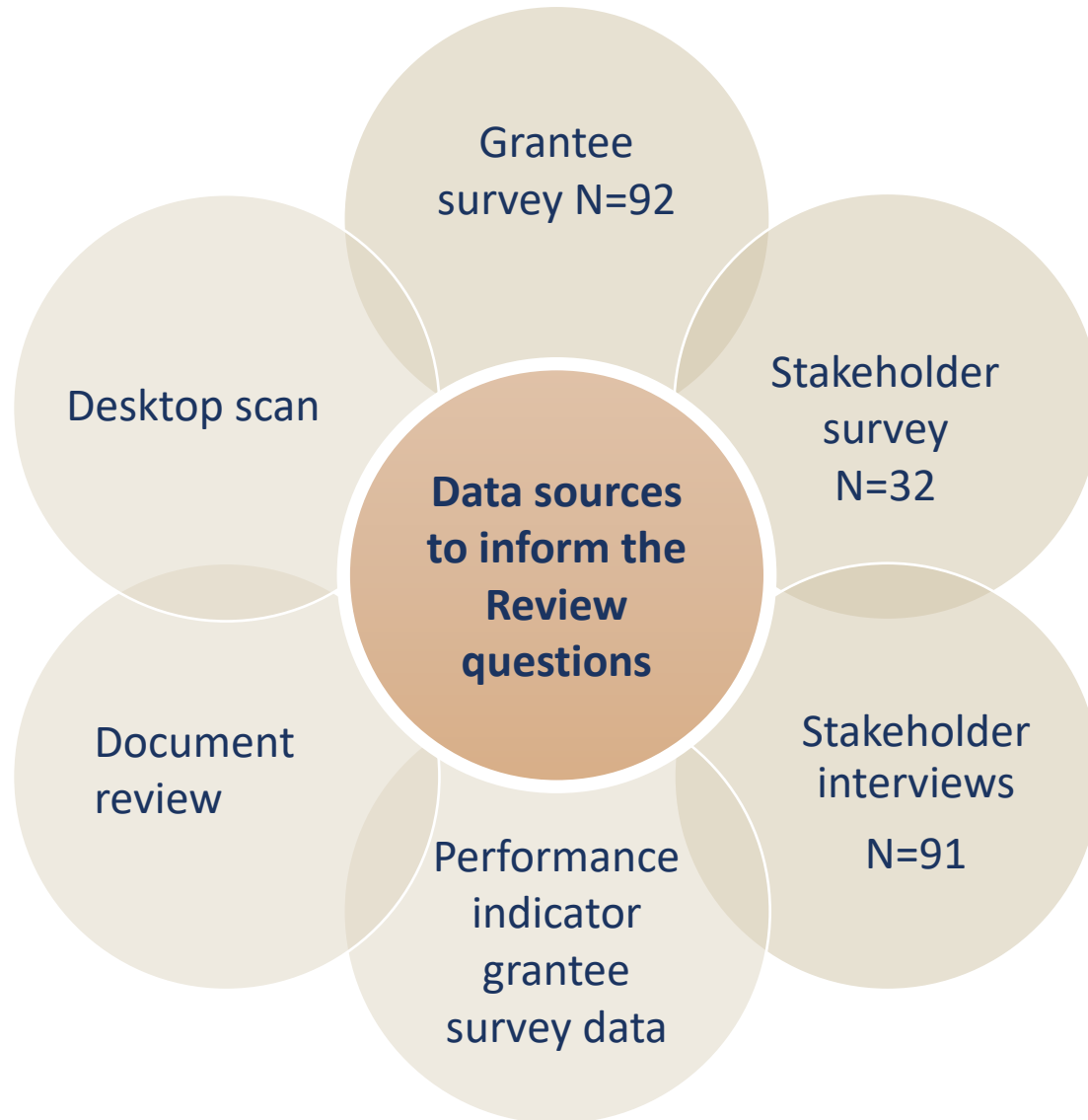


DAAC Mission Review benchmarks

DAAC Mission aims and priorities

Aim	Priority areas for investment
1. Achieve measurable improvements in detection, prevention, assessment, care and support for people living with dementia	1.1 Determine and implement interventions that prevent or delay the onset of dementia symptoms – pre- and post-diagnosis
	1.2 Implement care approaches for people with dementia and their carers that provide reliable and robust strategies to manage the impact of dementia on wellbeing, quality of life and end of life
	1.3 Implement care and diagnostic pathways that improve timeliness of diagnosing dementia
2. Achieve measurable improvements in healthy life expectancy among older Australians	2.1 Discover and implement health and medical interventions in mid-life and beyond that will extend healthy, active years of life and compress the period of morbidity
	2.2 Conceive and encourage implementation of new ways to embed more proactive health management, including health literacy, for older people
	2.3 Develop interventions that address social, economic and cultural barriers to healthy ageing to reduce inequality in healthy life expectancy in Australia
	3. Achieve measurable improvements in consistency and quality of care for older Australians across all care settings
	3.1 Investigate and support implementation or adoption of models of care that are most effective in: <ul style="list-style-type: none"> delivering high-quality, culturally appropriate care, informed by life experience, in home and residential aged care settings, that support individuals and their informal/family carers ensure equitable and appropriate access to quality clinical care and minimise avoidable transitions between all care settings identify and implement ways to maximise medical, nursing and allied health impact identify and implement ways to maximise social inclusion and multigenerational engagement in long-term care settings

Inputs to the DAAC Mission Review



ORGANISATIONS

Government agencies responsible for dementia, ageing, and/or aged care policy and programs or funding (federal, state/territory and international) (n=30) E.g., NHMRC, Aged Care Quality and Safety Commission, First Nations Aged Care Commissioner

Philanthropic organisations and NGOs (n=1) ARIIA

Aboriginal and Torres Strait Islander organisations (n=4) E.g., NACCHO

Commercial and industry groups (n=11) E.g., Medicines Australia, Dementia Discovery Fund (UK/US)

Consumer advocacy groups (n=15) E.g., Dementia Australia, Council on the Ageing

Academic and research institutions (n=14) E.g., Research Australia, NARI, AAMRI

Dementia and aged care service provider organisations (n=5) E.g., HammondCare, ACCPA

Professional clinical groups (n=6) E.g., Allied Health Professions Australia, RACGP

Members of the Dementia, Ageing and Aged Care Mission Expert Advisory Panel (n=5)



Review Findings



REVIEW QUESTION 1: Positioning
How MRFF-funded research sits within the national and international funding landscape

MRFF is the second highest national funder, with the highest average grant size for both DAAC Mission and non-DAAC Mission

	Total research funding (million; AUD)	Average annual funding (million; AUD)	Number of grants	Average grant size (million; AUD)
DAAC Mission	\$92.16	\$13.17	52	\$1.77
Non-DAAC Mission	\$202.87	\$28.98	74	\$2.74
Total MRFF	\$295.03	\$42.15	126	\$2.34
NHMRC	\$495.32	\$61.92	391	\$1.27
Australian Research Council (ARC)	\$74.40	\$9.30	124	\$0.60
Dementia Australia	\$17.13	\$2.86	112	\$0.15
Aged Care Research and Industry Innovation Australia (ARIIA)	\$9.20	\$4.60	62	\$0.15

REVIEW QUESTION 1: Positioning

How MRFF-funded research sits within the national and international funding landscape

MRFF is more focussed towards translation, and has more comprehensive consumer engagement

- DAAC Mission priorities broadly align with priorities of national and international funders
 - The DAAC Mission has a unique focus on improving aged care models
 - Other funders have different priorities and priority populations, formal co-funding partnerships, support for EMCR and clinical researchers and adopt innovative funding models
- The DAAC Mission has a broader range of priority populations
- The MRFF has a more comprehensive approach to consumer engagement throughout all stages of research
 - NHMRC-MRFF Consumer Advisory Group, expert advisory panels, roundtables and public consultations, specific streams of funding, and grant assessment committees.



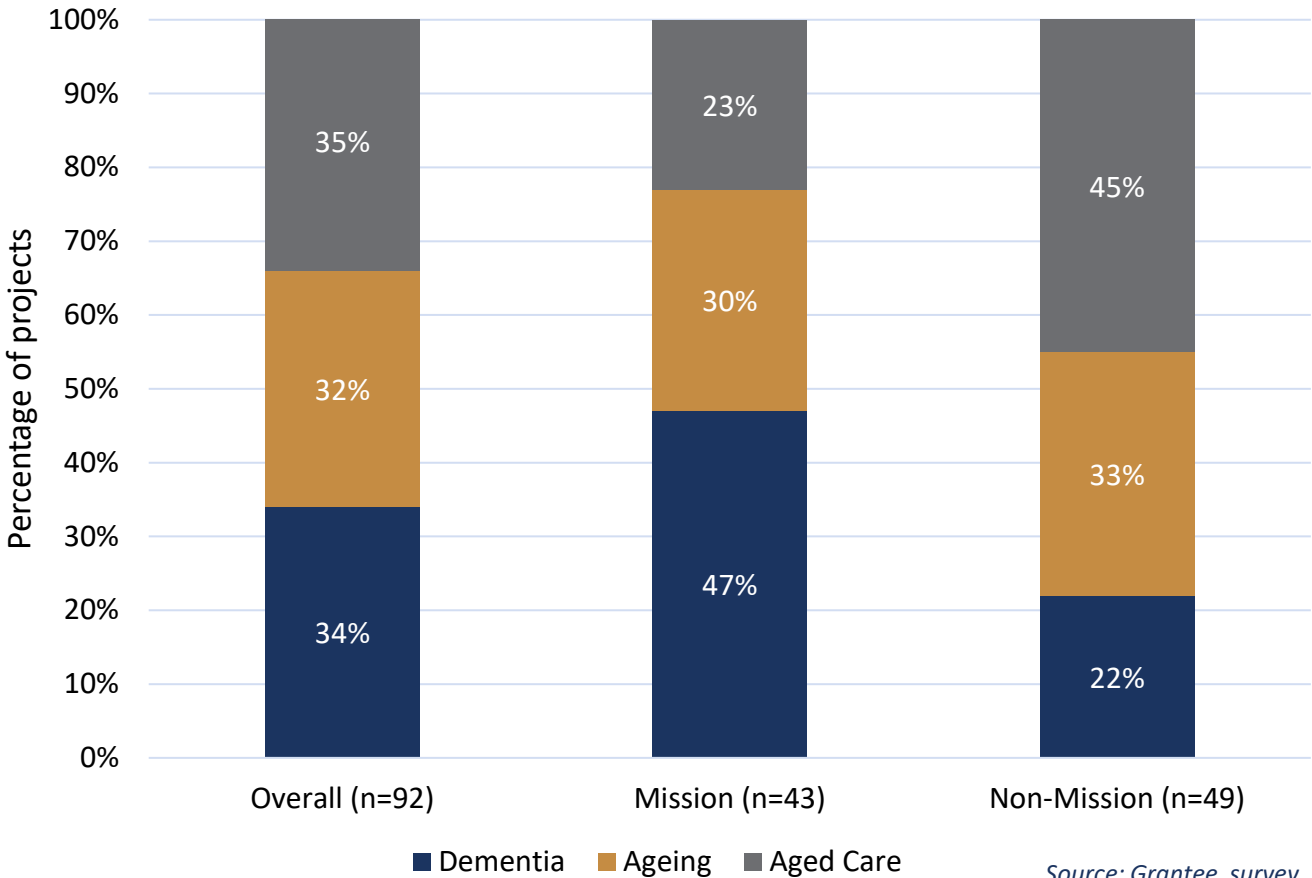
REVIEW QUESTION 2: Contribution

How the MRFF has contributed to dementia, ageing and aged care research in Australia

Projects funded across areas of dementia, ageing and aged care, with strong priority population reach

- In addition to the \$295M invested, funded projects
 - leveraged an additional \$22M in cash and in-kind investments
- Projects were distributed across the areas of dementia, ageing and aged care
- Many (75%) projects addressed priority populations, but several priority populations were underrepresented

Research project alignment with research areas as reported by project CIA



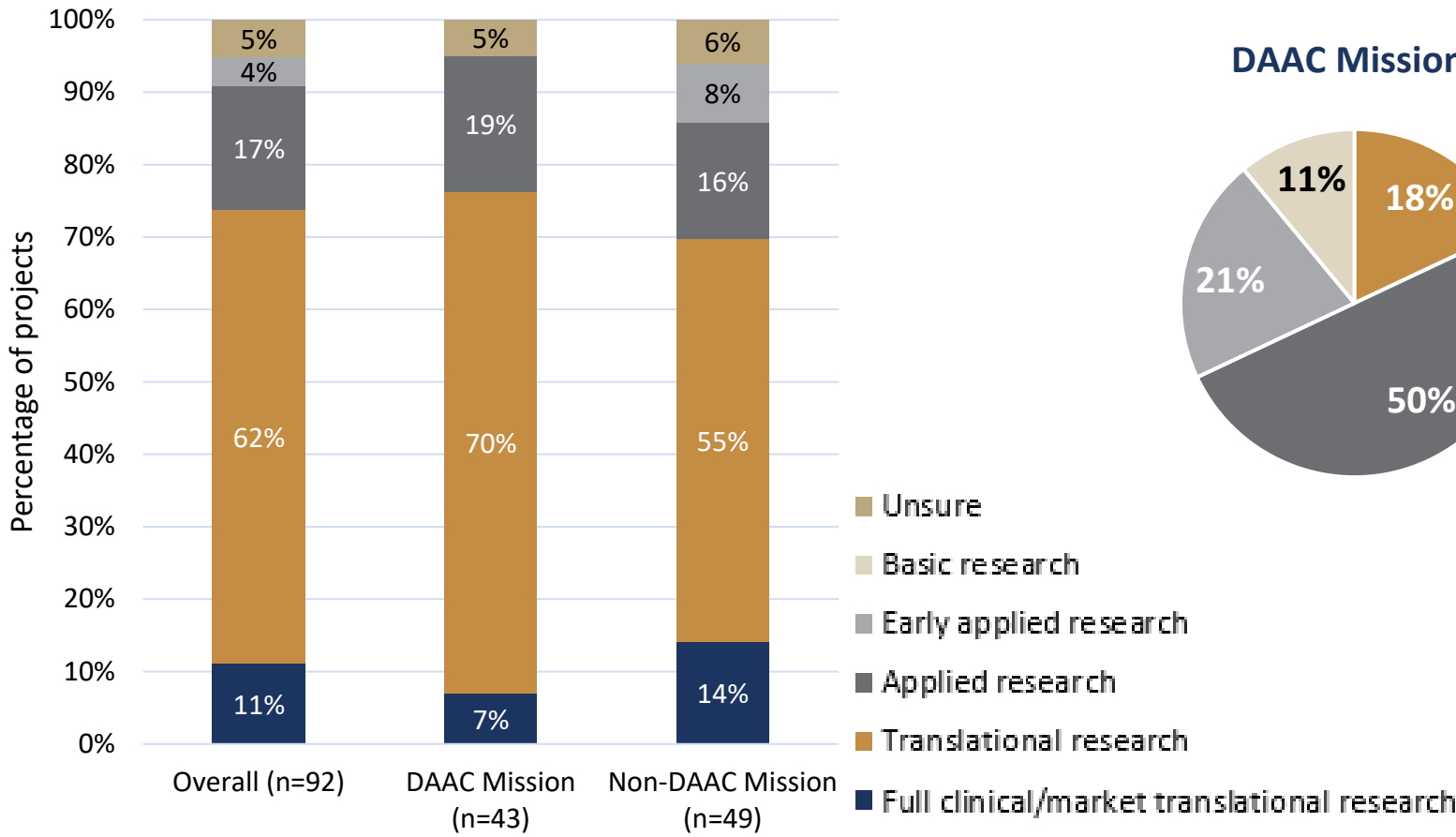
Source: Grantee survey

REVIEW QUESTION 2: Contribution

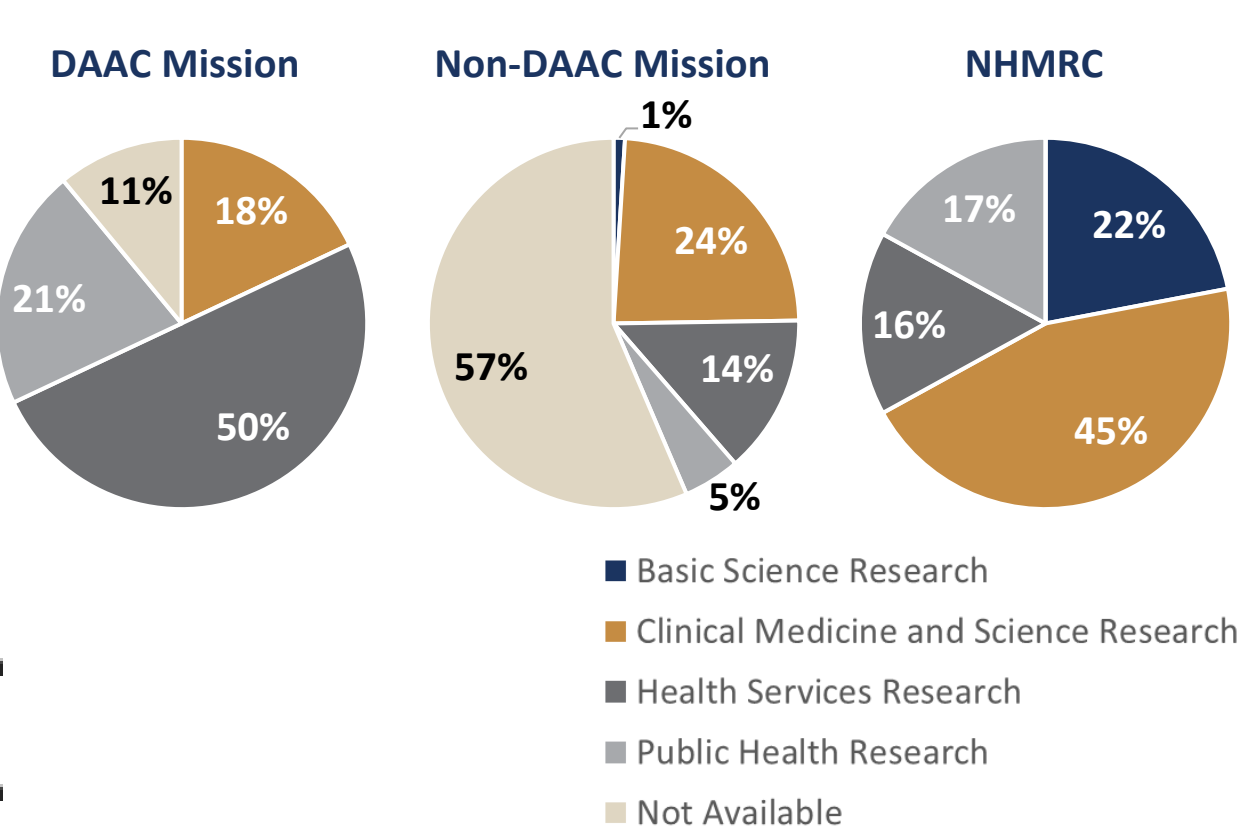
How the MRFF has contributed to dementia, ageing and aged care research in Australia

The DAAC Mission bridges the gap between basic research and later-stage translation and commercialisation

Placement of MRFF-funded research along the research translation pipeline



Comparisons of DAAC Mission, non-DAAC Mission and NHMRC funding across broad research areas

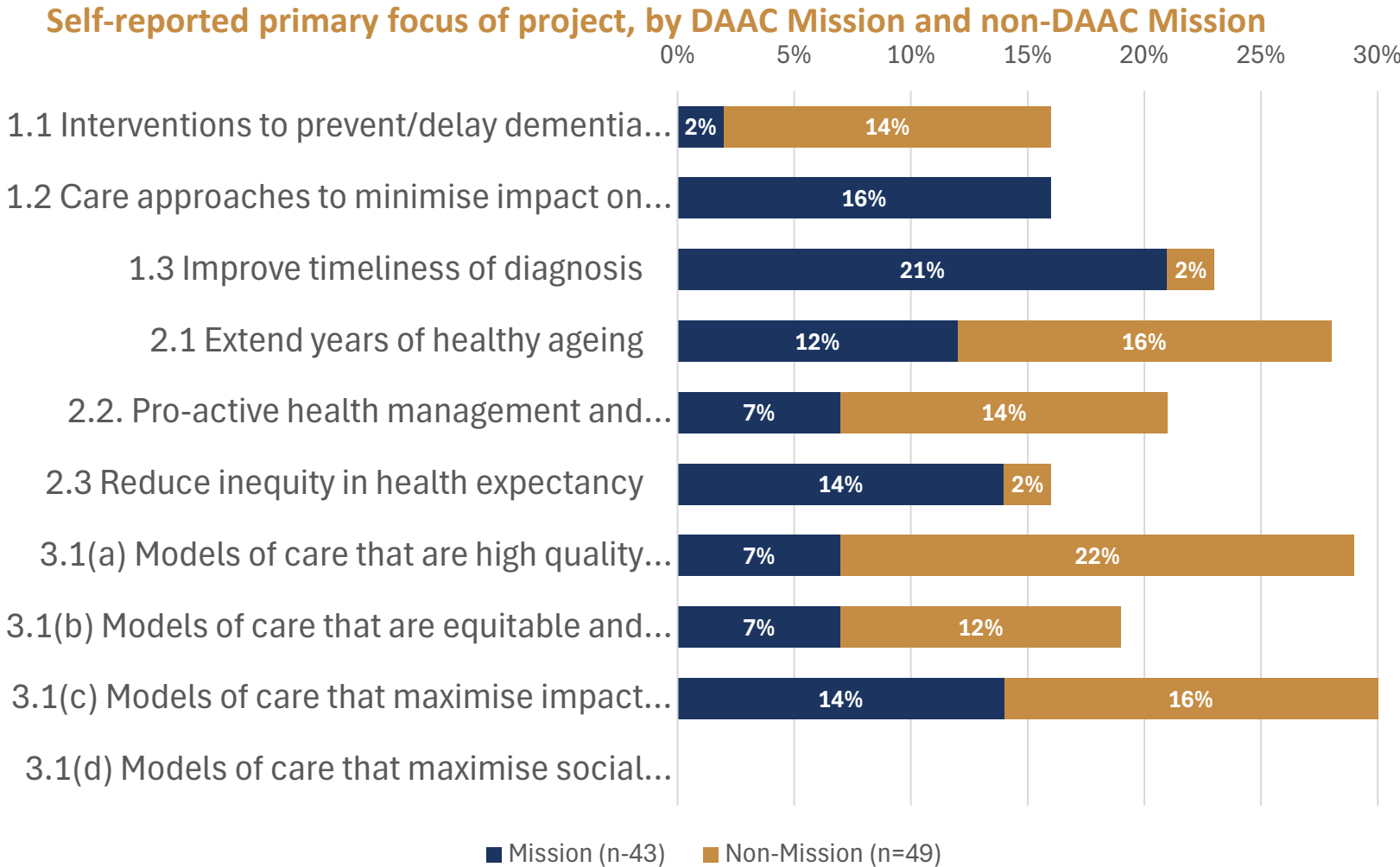


REVIEW QUESTION 3: Progress and impact

Progress and alignment of MRFF-funded research against DAAC Mission benchmarks

Most projects are still in progress and are well-aligned with priorities, with emerging priorities identified

- At this mid-term point, only 12% of projects are completed
- Good progress is evident across most DAAC Mission benchmarks
- Projects are distributed across all DAAC Mission aims and almost all priority areas for investment
- Stakeholders had mixed views of the DAAC Mission priorities and identified emerging priority areas



REVIEW QUESTION 3: Progress and impact

Progress of MRFF-funded research against MRFF benchmarks

Funded projects are making progress towards Measures of Success, strongest outcomes relating to areas of unmet need

79% of projects reported progress towards areas of **unmet need**

57 clinical trials set to engage over 21,000 participants

Participant enrolments	Total
Number of enrolments (May 2024)	1,917
Planned enrolments (May 2024)	21,054
Number of planned enrolments per grant (range)	12 – 3,456

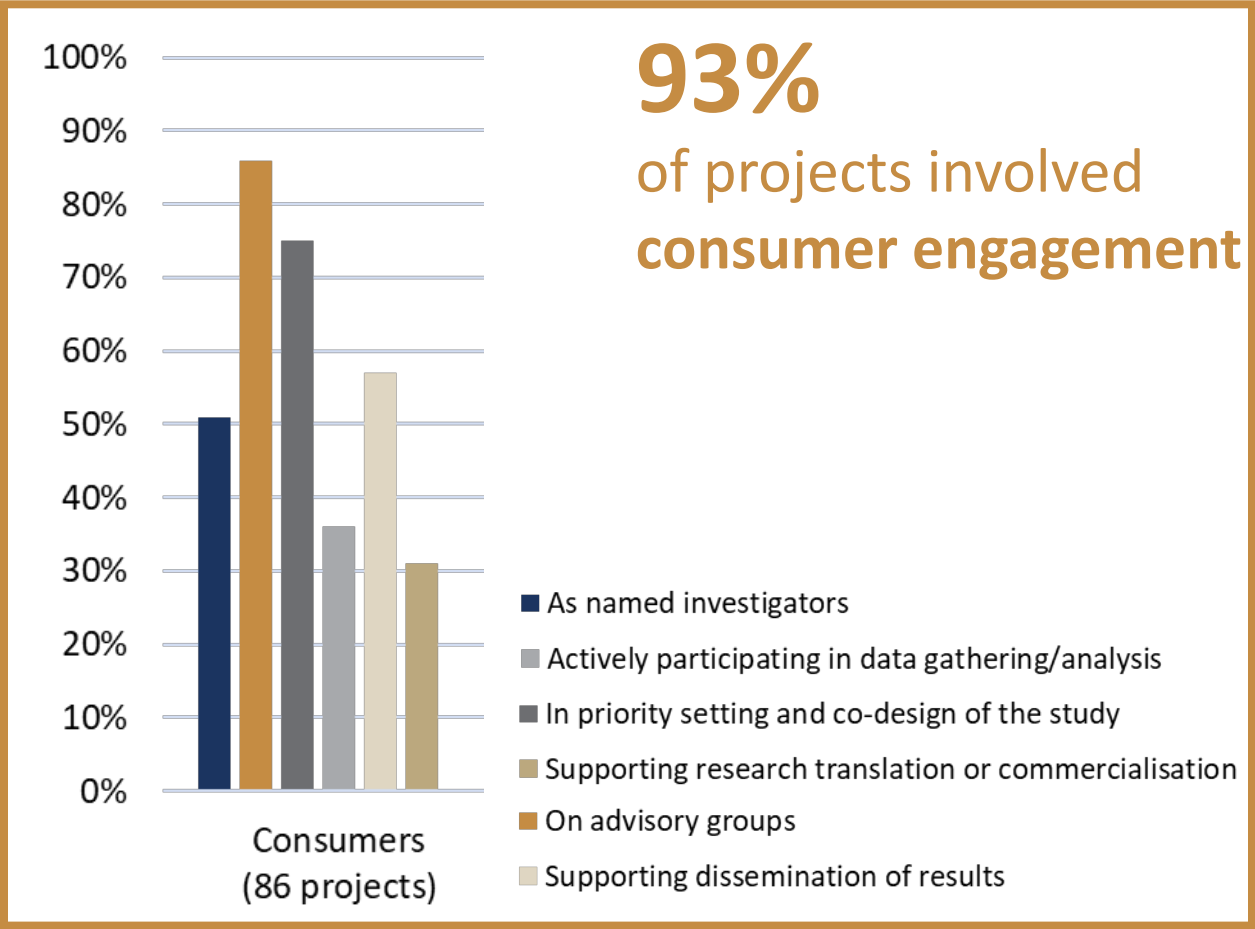
Research community capacity and capability

MRFF-funded projects supported a diverse and interdisciplinary research workforce

Position of researchers	Total (n=95)
Total number of researchers	578
Early to mid-career researchers	293 (51%)
Cultural and linguistically diverse people	147 (25%)
Allied health professionals	125 (22%)
Located in regional, rural or remote areas	50 (9%)
Nurses	51 (9%)
Researchers based in industry	40 (7%)

REVIEW QUESTION 3: Progress and impact
Progress of MRFF-funded research against MRFF benchmarks

Funded projects are making progress towards Measures of Success, noting challenges in translation into practice



Increased commercialisation
21 Industry projects reported co-funding of **\$7M**

28% of DAAC Mission projects have made significant progress towards embedding new health technologies and interventions into practice
(technologies)

20%
(interventions)



REVIEW QUESTION 4: Opportunities to enhance MRFF funding and granting arrangements to improve the impact of MRFF-funded dementia, ageing and aged care research

1. What research is conducted

1.1 Recognise the ‘real world’ overlap across dementia, ageing and aged care within the Mission*

1.2 Refocus research priorities to support aged care reform*^

1.3 Continue and expand research focused on priority populations to support equity*

2. How research is funded

2.1 Embed translation expectations in funding and reporting to drive real-world impact*

2.2 Foster collaboration between Australian research institutions, not competition*^

2.3 Introduce targeted funding streams for currently underfunded areas and emerging needs*^

2.4 Strengthen coordination of national DAAC research funding*^

3. How research is conducted

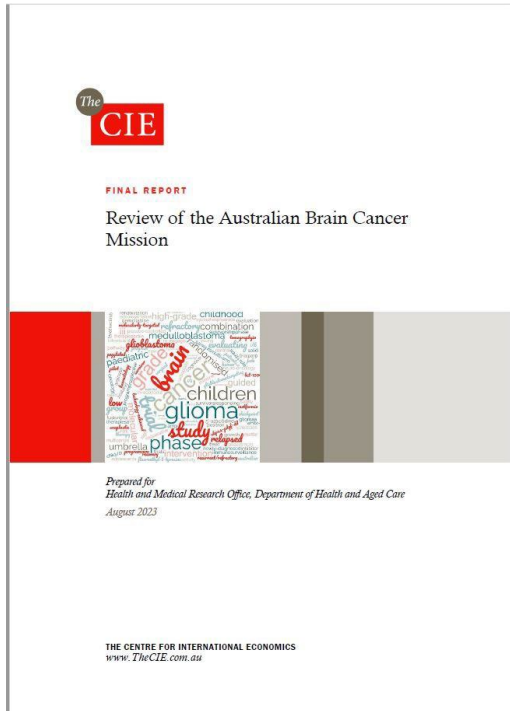
3.1 Strengthen end-user involvement across all research stages to ensure relevance and impact*^

4. How research is used

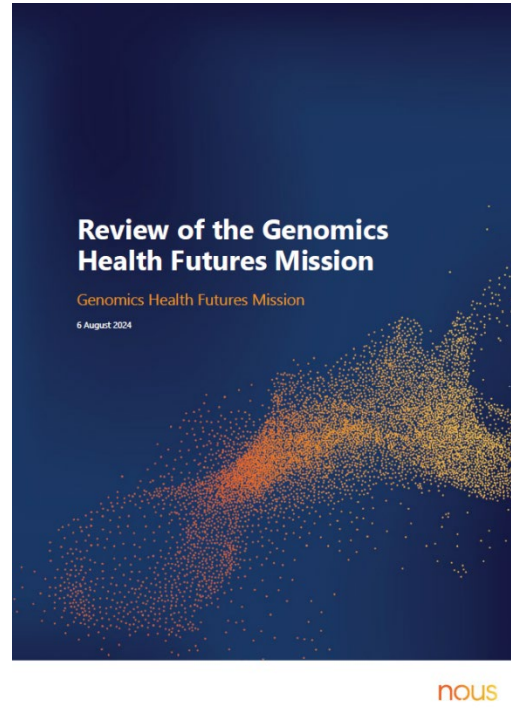
4.1 Enhance communication about MRFF DAAC research^

Recent MRFF evaluation activities

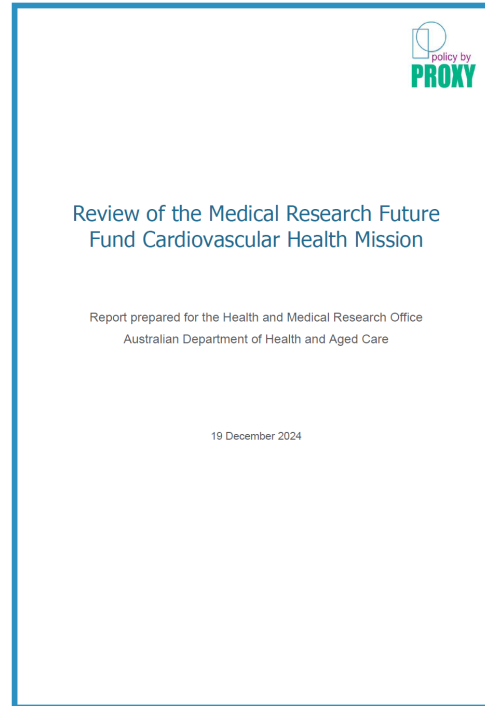
Questions: MRFF@health.gov.au



Review of the Australian Brain Cancer Mission (2023)



Review of the Genomics Health Futures Mission (2024)

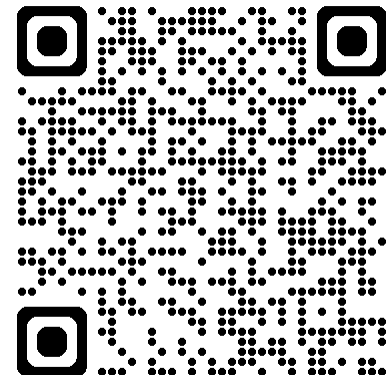


Review of the Cardiovascular Health Mission (2024)



Review of the Dementia, Ageing and Aged Care Mission (2025)

<https://www.health.gov.au/our-work/mrff/about/monitoring-evaluation-learning#reports>





Australian Government

Department of Health, Disability and Ageing

Dementia policy in practice

Genevieve Donnelly

Assistant Secretary

Dementia, Diversity and Design Branch

[Full quote](#)



Impact of dementia

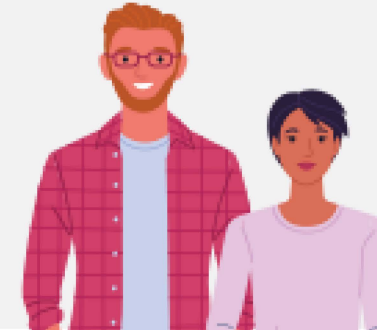
Over
400,000

people are
estimated to be
living with dementia



More than
28,400

people under 65
are living with
younger onset dementia



Number of people
living **with dementia**
is projected to **more
than double**
by the year **2058**

5x
longer
hospital stays
on average



Younger onset
dementia cases
expected to rise to

39,000 by
2050



2nd

leading cause
of **disease
burden** in
Australia

67%

of people living **with
dementia** live in
the community

2nd

leading **cause
of death** for
Australians and
**leading cause
of death for women**

\$3 billion

annually directly
spent on health and
aged care for people
with dementia



National Dementia Action Plan 2024-2034

Australia's national dementia policy framework: 8 high-level actions

1. Promote equity and human rights
2. Tackle stigma, improve awareness and promote inclusivity
3. Empower individuals and communities to minimise risk where they can, and delay onset and progression
4. Improve dementia diagnosis and post-diagnostic care and support
5. Improve treatment, coordination and support for people living with dementia
6. Support carers of people living with dementia
7. Build capability of the workforce to care for and support people living with dementia
8. Improve dementia data, maximise the impact of dementia research and promote innovation



National Dementia Action Plan

2024–2034

Government responsibilities

Australian Government	State and territory governments	Local governments	Shared responsibility
<ul style="list-style-type: none"> • Medicare Benefits Schedule (MBS) • Pharmaceutical Benefits Scheme (PBS) • Supporting and monitoring the quality, efficiency and effectiveness of primary health care services • Funding community controlled Aboriginal and Torres Strait Islander primary healthcare services 	<ul style="list-style-type: none"> • Managing and administering public hospitals and memory clinics • funding and managing community and mental health services 		<ul style="list-style-type: none"> • Funding public hospitals • Preventive health services • Transition care services • Palliative care
<ul style="list-style-type: none"> • Aged care regulation and funding • Funding veterans health care • Dementia programs 	<ul style="list-style-type: none"> • Multipurpose services 	<ul style="list-style-type: none"> • Municipal services and community aged care services 	<ul style="list-style-type: none"> • Older adult mental health services
<ul style="list-style-type: none"> • National Disability Insurance Scheme (NDIS) administration 			<ul style="list-style-type: none"> • NDIS funding and governance
		<ul style="list-style-type: none"> • Accessible buildings and urban planning and design 	<ul style="list-style-type: none"> • Community infrastructure

Implementation approach

Collective Priority Frameworks

- Collaboratively developed with the Australian Government and state and territory governments
- 3 Frameworks over 10 years
- Set key focus areas for governments to align efforts

Monitoring and reporting

- Data collection and analysis to measure progress
- Annual Reports
- Mid-point review

Governance

- Implementation Group

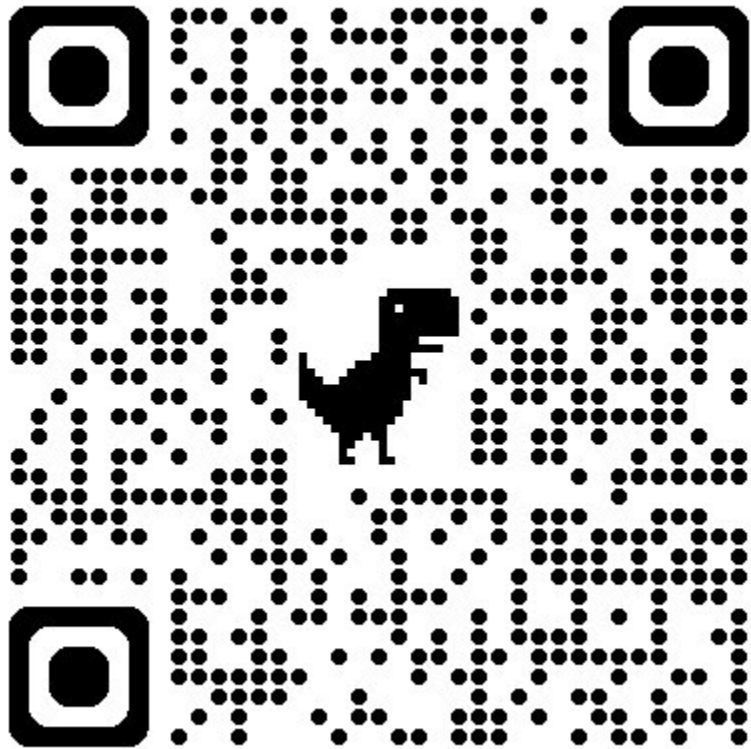
Image: Snapshot from the National Action Plan indicators dashboard, Australian Institute of Health and Welfare

<https://www.aihw.gov.au/reports/dementia/ndap-indicators-dashboard/contents/summary>

Measure of progress	Indicator	Baseline value	Baseline timepoint	Data source
8.1 Lived experience involvement ¹	National research guidelines require lived experience involvement.	Partial achievement	2018–2023 for various guidelines	AIHW assessment of various Australian grant guidelines
8.2 Australian dementia studies ¹	Number of open access Australian dementia publications.	228	2023	PubMed search of peer-reviewed articles
8.2 Australian dementia studies ¹	Number of all Australian dementia publications.	489	2023	PubMed search of peer-reviewed articles
8.3 Dementia research grants ¹	Number of government-funded dementia research grants approved.	54	2023	NHMRC, MRFF, ARC
8.3 Dementia research grants ¹	Value of government-funded dementia research grants approved.	\$58.7 million	2023	NHMRC, MRFF, ARC
8.3 Dementia research grants ¹	Value of dementia research grants as a proportion of all government-funded research.	2.4%	2023	NHMRC, MRFF, ARC
8.4–8.5 Improved national dementia data ¹	Better estimates of the number of people living with dementia.	Substantial limitations	2022–2023	AIHW assessment of key data sources
8.4–8.5 Improved national dementia data ¹	More national data sources include dementia information.	Partial achievement	2022–2023	AIHW assessment of key data sources
8.4–8.5 Improved national dementia data ¹	Better dementia data on high priority groups.	Substantial limitations	2022–2023	AIHW assessment of key data sources

Thank you

For more information on the **National Dementia Action Plan**



Our email: DementiaPlan@health.gov.au

More information on **Australian Government initiatives and programs for people living with dementia**



Thank you!

Any questions?

MRFF@health.gov.au

DementiaPlan@health.gov.au



Australian Government

Department of Health, Disability and Ageing