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by email to: community.affairs.sen@aph.gov.au

The Chair
Legislation Committee
Senate Standing Committees on Community Affairs
PO Box 6100
Parliament House
Canberra ACT 2600

Dear Committee,

The Medical Research Future Fund Bill 2015
-Improving the Health of Australians

The Council of Academic Public Health Institutions Australia (CAPHIA) and its Member Universities (list attached) strongly support the establishment of the Medical Research Future Fund because of the unique opportunity it provides for significant new funding for health and medical research to improve the health and wellbeing of Australians.

The MRFF should complement the research funded and committed through the NHMRC and the ARC. The Government is encouraged to look at the big picture challenges that need to be addressed to improve the health of all Australians including our most vulnerable population groups. This requires funding support for the gaps in public health and health services research to improve population health outcomes. It requires the MRFF to support broad research that is focussed on illness prevention and health promotion, as well as management and cure.. Such a focus will lead to a healthier nation and reduce the escalating health system and social costs of preventable illnesses.

A commitment to public health research will reduce demands on the hospital system, which is the most expensive environment in which to provide health care, reduce overall costs to the health system, allowing resources to go further, and empower individuals to lead healthier, more productive lives. A commitment is needed in the MRFF for public health translational research which specifically includes population level health outcomes, and evidence-based health policy and programs that builds on existing research findings. Health budgets are finite and there needs to be an explicit focus on public health, health services and health economics for equitable and appropriate resource allocation.

For national capacity building we also recommend that fellowships for early career, mid-career and senior researchers in Australia be included in the MRFF, given the severe contraction of funding available for research fellowships in recent years. We note many promising early career researchers are leaving Australia to seek a more secure research career overseas, and that the

outgoing CEO of the NHMRC Professor Warwick Anderson himself highlighted the decreasing opportunities for research careers in Australia. If we do not ensure funding for our best researchers, we will face a significant brain drain in the near future and loss of critical national capacity.

The importance of a greater focus on prevention and health promotion has been highlighted in the Government's Intergenerational Reports, as well as the Australian Institute of Health and Welfare Review of "Australia's Health 2010"; both identifying the unsustainable costs of the projected health and ageing challenges which will impact greatly on the future health care of all Australians. In addition, on 6 April 2015, US President Obama announced that his administration is "shifting the focus of the Country's health care system from sickness and disease to wellness and prevention" with a range of initiatives.

The MRFF should seek to address the gaps in NHMRC funding for health and medical research, including the recognised gaps on public and population health, health economics and health systems research. This must also address infrastructure needs which are no longer funded through the NHMRC following the removal of Enabling Grants. Whilst there is an investment in this in some areas (MRIs) it does not underpin the breath of research the MRFF aspires to cover, and new funding mechanisms are needed for that given the constraints in the current NHMRC model of governance.

To ensure a rigorous MRFF funding program the appropriate governance structure is critical. CAPHIA supports the Government's proposal for an expert Advisory Board and that the Board must take into account in setting the priorities:

- The burden of disease on the Australian community, and inequitable burden in particular vulnerable population groups;
- How to deliver practical benefits to as many Australians as possible from health and medical research and innovation;
- How to ensure that financial assistance provided under this Act provides the greatest value for all Australians; and
- How to ensure that financial assistance provided under this Act complements and enhances other funding provided for health and medical research and innovation.

To address the above priorities the Advisory Board needs to include expertise from the key sectors (within and outside biomedical and hospital-based experts) contributing health and medical research, including representatives with expertise in research translation for improving population health outcomes. We also caution against funding the MRFF by making cuts to health care in other areas, as this may not result in a net positive gain.

The MRFF needs to be accessible to researchers in Universities through competitive grants or fellowships. Much of the innovation that drives advances in medical research comes from our universities, and for our universities and researchers to remain world-class, we need to fund the ideas and implement the research findings that our researchers generate through evidence-based policy and practice. World class universities, where students are taught by world-renowned experts in health and medical fields, are good for the country as a whole.

CAPHIA would welcome the opportunity to discuss its submission in more detail with the Committee.

Yours faithfully,

Professor Catherine Bennett
President, Council of Academic Public Health Institutions Australia (CAPHIA)
and Head, School of Health and Social Development, Deakin University

Council of Academic Public Health Institutions Australia

CAPHIA is the peak national organisation representing universities and institutes that offer educational programs, research and community service activity in public health throughout Australia. The membership includes all the leading universities in Australia with significant public health teaching and research programs. CAPHIA Member Universities actively support public health research, and train public health researchers and the broader public health workforce.

Member Universities
Research School of Population Health, Australian National University
Faculty of Health Sciences, Australian Catholic University
Australasian Faculty of Public Health Medicine, Royal Australasian College of Physicians
Menzies School of Health Research, Charles Darwin University
School of Public Health, Curtin University
School of Health and Social Development, Deakin University
School of Exercise & Health Sciences, Edith Cowan University
School of Health Sciences, Flinders University
School of Medicine, Griffith University
School of Public Health, Tropical Medicine and Rehabilitation Sciences, James Cook University
School of Public Health & Human Biosciences, La Trobe University
School of Public Health and Preventive Medicine, Monash University
School of Public Health and Social Work, Queensland University of Technology

Public Health, Torrens University Australia
School of Population Health, University of Adelaide
Faculty of Health, University of Canberra
Melbourne School of Population & Global Health, University of Melbourne
School of Medicine and Public Health, University of Newcastle
School of Public Health and Community Medicine, University of New South Wales
School of Medicine, University of Notre Dame Australia
School of Public Health, University of Queensland
School of Population Health, University of South Australia
School of Health and Sport Sciences, University of the Sunshine Coast
Sydney School of Public Health, University of Sydney
Medicine & Paramedicine, Faculty of Health, University of Tasmania
School of Population Health, University of Western Australia
School of Science and Health, University of Western Sydney
School of Health & Society, University of Wollongong