CMAJ 2011 election survey: research

It has become almost axiomatic in Canada that the bulk of new health research investments made by the federal government is reserved for targeted, specific initiatives aimed at one discipline or another or glittering big-ticket programs that funnel vast pools of money at superstar researchers.

That shift began during ex-Liberal Prime Minister Jean Chretien's tenure, which essentially transformed the Canadian academic landscape with a series of measures, including the creation of the Canadian Research Chairs and Canada Foundation for Innovation programs, the establishment of the Canadian Institutes of Health Research (CIHR) from the ashes of its predecessor, the Medical Research Council of Canada, and the provision of funding for indirect research costs such as overheads.

The Liberals contended that a transformation of the landscape was necessary for Canada to consistently achieve anything like research excellence. It could not compete in all fields with the world's research superpowers, as the world of science had evolved to the point where a minimum critical mass, in terms of people and finances, was necessary to achieve breakthroughs. Universities could not be all things to all people and like the country itself, did not have the resources to pursue vigorous research programs in all disciplines.

The big ticket programs were aimed at achieving greater specialization within, and more differentiation between, universities and to that end, the Liberals began imposing such mechanisms as requirements that institutions develop strategic plans, complete with priorities and choices, if they wanted to qualify for some pots of federal money.

Critics have argued that over time, the measures have largely resulted in two categories of Canadian universities: large, research-intensive ones that gobble up the bulk of science funding, and all the rest, who scramble for what

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Both the Conservative and Liberal parties plan a substantial new investment in brain research.

they can get by essentially focusing their research efforts in select fields or concentrating their efforts on the provision of undergraduate education and only conducting modest studies, primarily in the social sciences and humanities.

Since the Conservatives took office in 2006, they have maintained that strategy, if only by default, by continuing to funnel most new research monies into targeted programs, while also promoting initiatives aimed at greater commercialization of university research.

If anything, the targeting has become more pronounced, as vast sums of monies were tossed at specific initiatives like the Centres of Excellence for Commercialization and Research program. In that instance, the Tories even exempted eight institutes from anything like peer review. Seven of them — the Brain Research Centre at the University of British Columbia, the Canada School of Sustainable Energy at the universities of Alberta, Calgary and Lethbridge, the Li Ka Shing Knowledge Institute at the University of

Toronto's St. Michael's Hospital in Ontario, the Heart and Stroke Foundation Centre for Stroke Recovery affiliated with the universities of Toronto and Ottawa, the Montreal Neurological Institute and Hospital at McGill University, the National Optics Institute in Québec City, Quebec and the Life Sciences Research Institute affiliated with Dalhousie University in Halifax, Nova Scotia — were awarded \$15 million apiece to develop their proposals to become commercialization centres of excellence, while an eighth, the Perimeter Institute for Theoretical Physics in Waterloo, Ontario, was granted \$50 million (www.cmaj.ca/cgi/doi/10.1503/cmaj.070518)

Among other targeted initiatives subsequently unveiled by the Conservatives were a \$50 million allocation for a quantum physics institute (www.cmaj.ca/cgi/doi/10.1503/cmaj.090166), \$10 million over seven years to each of 20 science superstars under a "Canada Global Excellence Research Chairs program" (www.cmaj.ca/cgi/doi/10.1503/cmaj.080331), and most recently, \$100

million for a Canada Brain Research Fund (www.cmaj.ca/cgi/doi/10.1503/cmaj.109-3845).

Meanwhile, investigator-initiated basic science continued to be squeezed. In their recent budget, the Conservatives proposed modest, but deceptive, base budget increases of \$15 million, \$15 million and \$7 million, respectively, for CIHR, the Natural Sciences and Engineering Research Council and the Social Sciences and Humanities Research Council. But those increases didn't offset the collective \$43 million hit for fiscal 2011/12 that was imposed on the granting councils in the 2009 budget.

The upshot is that targeted research funding has basically become the norm in Canadian science.

Where would the parties focus future investments?

The Conservatives declined to participate in *CMAJ*'s 2011 election survey but indicate in their platform that if re-elected, they will proceed with a \$100 million allocation for Brain Canada, a nonprofit foundation whose current honorary and former chair (2003–2006) is ex-Tory finance minister Michael Wilson. The Tories will match monies raised by the foundation and its partners to create a Canada Brain Research Fund that will support neurosciences studies undertaken by collaborative, multidisciplinary and multi-institutional teams.

The Liberals, if elected, say they would also target brain health, by funneling \$100 million over two years into a Canadian Brain Health Strategy that “will encompass such diseases as Alzheimer's Disease, Multiple Sclerosis, and Parkinson's Disease.” The New Democrats would focus investments on

comparative effectiveness research on pharmaceuticals, while the Bloc Québécois says the federal government should “withdraw completely” from financing health research. — Wayne Kondro, *CMAJ*

Survey question: In what specific areas of health research (for example, dementia) would your party bolster research funding?

Conservative response:

No response. Rather than participate in *CMAJ*'s 2011 election survey, the Conservatives forwarded a weblink to their party platform. Asked what the rationale was for declining participation, party spokesperson Ryan Sparrow says the weblink constitutes a response to the survey. “That response is the response from the campaign.”

Liberal response:

“A Liberal government will consult with provinces, stakeholders and experts, and put in place a Canadian Brain Health Strategy in its first year in office. Its main objective will be helping Canadian families cope and it will encompass such diseases as Alzheimer's Disease, Multiple Sclerosis, and Parkinson's Disease.

The Brain Health Strategy will provide \$100 million over the first two years of a Liberal government, targeting research into new treatments and therapies for neurological disorders, and accelerating progress in understanding, treating and preventing brain diseases. This investment of new federal funds will be channeled through leading national research bodies.”

New Democrat response:

“As part of our commitment to make medicines more affordable we will work with the provinces and terri-

tories to save Canadians money on the cost of prescription drugs. One area of research that would be of benefit to Canadians is the adopting a strong proactive drug assessment program, ensuring the inclusion of drugs on the formulary is evidence based.”

Bloc Québécois response:

“De façon générale, la santé et les services sociaux sont des domaines de compétence qui relèvent exclusivement du Québec et des provinces et à ce titre, le Bloc Québécois juge que le Québec et les provinces sont les mieux à même de définir leurs priorités en matière de recherche afin de répondre adéquatement aux besoins de leur population respective. Ainsi, le Bloc Québécois estime que le gouvernement fédéral doit se retirer complètement de ce champ d'activité tout en octroyant au Québec les moyens d'assumer ces responsabilités.”

CMAJ 2011. DOI:10.1503/cmaj.109-3877

Editor's note: Fifth of a series of stories on *CMAJ*'s 2011 election survey:

Part 1: Health transfers

(www.cmaj.ca/cgi/doi/10.1503/cmaj.109-3865)

Part 2: Pharmacare

(www.cmaj.ca/cgi/doi/10.1503/cmaj.109-3870)

Part 3: Health human resources

(www.cmaj.ca/cgi/doi/10.1503/cmaj.109-3875)

Part 4: Home/palliative care

(www.cmaj.ca/cgi/doi/10.1503/cmaj.109-3876)