

Opportunities for chiropractic research

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Introduction

CIHR began operations in June 2000. Its objective, expressed in the *CIHR Act* (C13) is to “excel, according to internationally accepted standards of scientific excellence, in the creation of new knowledge and its translation into improved health for Canadians, more effective health services and products and a strengthened Canadian health care system.” The investment of the federal government in CIHR is truly remarkable. Figure 1 shows the budget history of the Medical Research Council, the predecessor of CIHR, followed by CIHR. CIHR’s investment in health

research will be \$560 million in 2002–03, roughly double that of the final year of the MRC (1999–2000). Nor must we forget additional federal investment in the Canada Foundation for Innovation, which provides equipment and research infrastructure; the Canada Research Chairs, which, at steady state, will provide 700 chairs in health research at universities across Canada; Genome Canada, which supports five regional genome centres and associated projects; and most recently, an investment of \$200 million to compensate universities for the indirect costs of federally-funded research. I estimate that the total federal investment in health research performed in universities, hospitals, clinics, and research institutes will be approximately \$1.2 billion in 2002–03, a five-fold increase over a period of five years (Figure 2). This remarkable growth in investment provides opportunities for all health researchers.

The Institutes

One of the first actions of the Governing Council of CIHR was to establish the 13 constituent Institutes of CIHR (Figure 3). Collectively, the Institutes encompass the universe of health research, and each will develop and support research across the “four pillars” of CIHR: biomedical, clinical, health services, and population health research. A Scientific Director, who is guided by an Institute Advisory Board, leads each Institute. Collectively, the 13 Scientific Directors, the President of CIHR, the Director of Ethics, and myself form the Research Planning and Priorities Committee, which sets the overall research agenda for CIHR, and recommends to the Governing Council how the research budget should be allocated.

The 13 Institutes have two principal functions. They are not “bricks and mortar” structures, but an extended network of health researchers, from all disciplines, working in institutions across the country. The Institutes work with the research community to build and strengthen these networks, and each Institute receives a support grant that it

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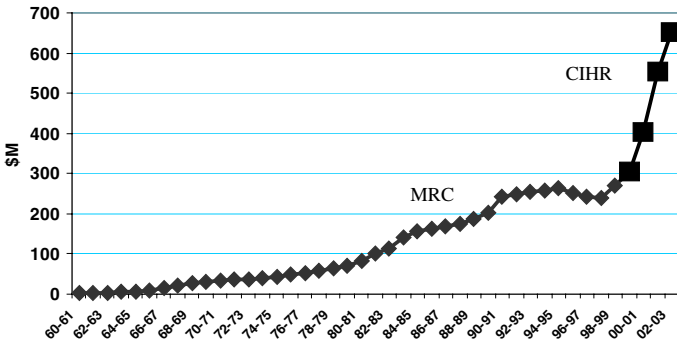


Figure 1 History of the MRC and CIHR Budget

uses to host workshops, allowing investigators across the country to come together and develop new ideas and collaborations. Support grants have been used in other imaginative ways, for example, the Institute of Neurosciences, Mental Health and Addiction uses part of its support grant for its “Brainstar” program, which provides a monthly prize to a graduate student who has published an outstanding paper.

The second function of the Institutes is to work with the research community, potential funding partners, and other stakeholders to establish and implement the research agenda of the Institute. Each Institute receives a strategic budget, which will be \$5.4 million each by the end of FY

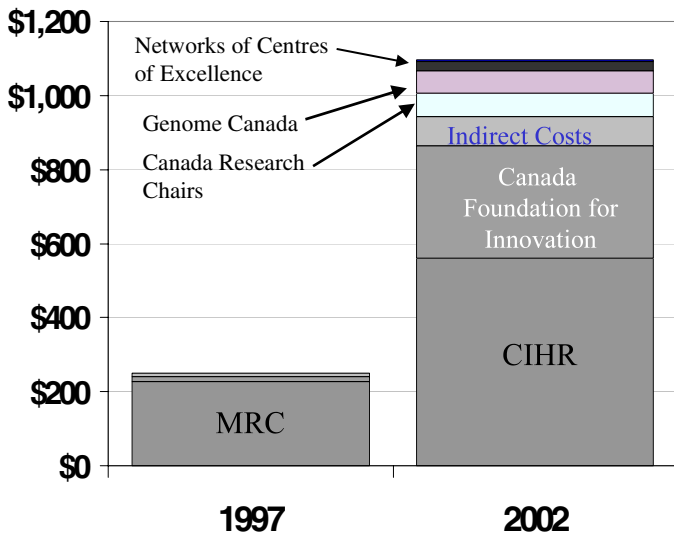


Figure 2 Estimated Federal Support for Health Research (\$M)

2002–03, to invest in thematic research programs. Many of these Institute-sponsored programs are collaborations between two or more Institutes.

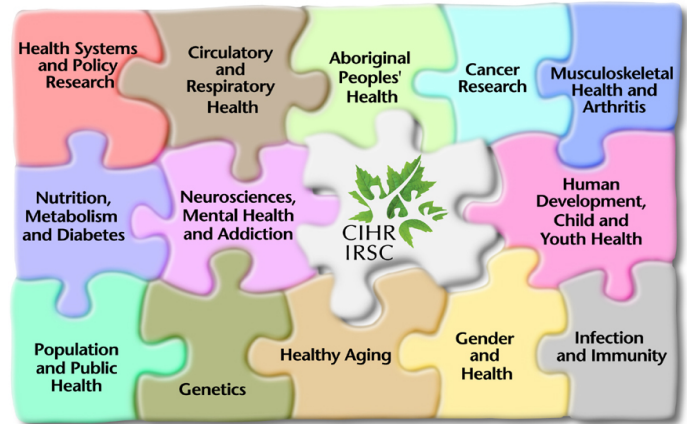


Figure 3 CIHR’s 13 Institutes

Funding Opportunities

For the investigator seeking research support from CIHR, it is important to remember that there are two broad classes of funding programs. The “open” competitions are, as the name implies, open to any qualified health researcher. CIHR has broadened its eligibility criteria so that it is no longer necessary to be a university professor to apply for a grant or an award. Please check our website (www.cihr.ca) for details. Open competitions are held at regular intervals as advertised on our website (e.g., operating grant application deadlines are March 1 and September 15), and the wide range of programs CIHR supports: grants for the direct costs of research; clinical trials; collaborative groups; research training; and the salaries of career investigators. The bulk of the CIHR budget (Figure 4) is invested in the open programs. As with all of CIHR’s funding, applications for funding are adjudicated in competition by panels of expert peer reviewers. Choosing the right peer review panel for your application is a critical step. CIHR staff will be happy to advise you if you are uncertain.

The second broad class of programs is strategic, with specific objectives and goals. These include both the Institute thematic programs mentioned above, and “CIHR strategic” programs which focus on broader issues cutting

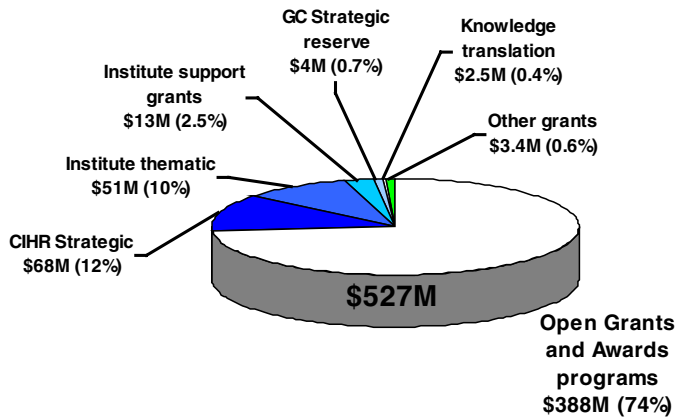


Figure 4 Allocation of the 2002–3 Grants and Awards Budget

across the mandates of several Institutes. These funding opportunities are provided to build capacity in certain underdeveloped areas of research, for example, rural health, or to stimulate certain types of activity, such as the commercialization of intellectual property. “Requests for Applications” are published on the CIHR website four times a year, advertising these strategic research opportunities. The evaluation of applications for these programs focuses both on the excellence of the research, and on the “responsiveness,” or relevance, to the objectives of the strategic program. It is important, therefore, to read the Request for Applications very carefully to see if your research topic is eligible.

CIHR and Chiropractic Research

In its first full year of operation, CIHR has launched several innovative programs. The largest is the Training Program Grants, a departure from the long tradition of funding individual trainees. These grants are provided to excellent, multidisciplinary training programs to allow them to recruit and support the best trainees, and to develop and disseminate innovative research training practices, curricula, and resources. Notably, one of the first 51 grants has gone to a team headed by Dr. Ronald Zernicke, at the University of Calgary, on bone and joint health.

A second innovative program is the New Emerging Teams (NET), which provides long-term funding for a group of investigators, “anchored” by an established researcher, who seek to develop their research expertise in

an underdeveloped area of health research. Funding includes support for new investigators to be recruited to the team. The idea is that at the end of the NET funding the team will be ready to graduate to the very competitive “big time” collaborative support offered through CIHR’s other programs. The thematic research areas in which the first round of NETs were offered included: aging, where grants were made in pain assessment and treatment, and in balance and mobility problems; asthma; chronic disease; and neurodevelopment.

CIHR offers many opportunities through its programs of research support for those interested in chiropractic research. While all the open programs are available, I must point out that competition is intense. Only one in four new grant applications is successful. If you have not been involved in research previously, I suggest that you begin your relationship with CIHR by collaborating with more experienced colleagues who have an affiliation with a university or research institute. Recently, CIHR has increased funding opportunities for chiropractic researchers, particularly in the form of personnel support, in order to increase capacity for research in this area. Our summer studentship program for undergraduate health professions has been expanded to include students enrolled in chiropractic. CIHR has partnered with the Canadian Memorial Chiropractic College, the Canadian Chiropractic Association, and the Chiropractic Foundation for Spinal Research (now the CCRF) to offer training opportunities in areas relevant to research in chiropractic. Five fellows and one research chair (Dr. Gregory Kawchuk, University of Calgary) are currently supported.

While a number of Institutes are involved in relevant research areas, perhaps the closest scientific affiliation for chiropractic research is with the Institute of Musculoskeletal Health and Arthritis (IMHA), led by Dr. Cy Frank of the University of Calgary, and the Institute of Neurosciences, Mental Health and Addiction (INMHA), led by Dr. Rémi Quirion of the Douglas Hospital Research Centre, McGill University. The CCA Research Committee was represented at a national roundtable on research collaboration, sponsored by INMHA in June 2001. Responsibility for the health services aspects of chiropractic and other forms of complementary and alternative health care rests with the Institute of Health Services and Policy Research (INSPR), led by Dr. Morris Barer, University of British Columbia. You should pay special atten-

tion to the website of these institutes (accessible through www.cihr.ca) for funding opportunities.

What to expect from CIHR in the near future? Given the remarkable interest in training program grants, it is planned to run a second competition in the spring and summer of 2002. The NET program will be offered again, once more in certain target areas where additional research capacity is needed.

The Scientific Directors, as the Research Planning and Priorities Committee, are contemplating the launch, over the next 12 months, of research opportunities in a few, large, cross-cutting research areas such as global health, gene-environment interactions, and, of special interest to chiropractic, regenerative medicine. We also hope to provide new, better, and more types of support for clinical research and researchers, in all health professions. This initiative is being led by Dr. Bruce McManus, Scientific Director of the Institute of Circulatory and Respiratory Health. A comprehensive discussion paper on the topic of the clinician investigator is available on the CIHR website (www.cihr.ca/institutes/icrh/whatsnew/clinician_scientist_e.shtml).

Last, but of great importance to those interested in applying to CIHR for funding, we are in the middle of a major redesign of our website, which should be more “user-friendly” and easier to navigate.

The exciting plans for the future of CIHR are surrounded by uncertainty about CIHR’s future budgetary situation. Despite the large recent increases in funding, success rates in our competitions have not risen, because many more applicants have seized the opportunities avail-

able through CIHR’s new mandate and directions. Rather paradoxically, the large increases of the past few years have created an unstable financial situation. CIHR, like all federal organizations, cannot carry forward unspent funds from one fiscal year to the next. It’s “use it or lose it.” When we receive a budget increase, we invest it in urgently needed health research, but these investments are for longer than a year: you can’t do good research on a year-at-a-time basis. Increased support for research today commits ever greater amounts of future year budgets, leaving less available in future years for new grants and awards. If the CIHR budget suddenly levels off after this period of rapid growth, our ability to support new applications will plummet. CIHR needs a three-year budget horizon in order to plan the most effective investments in long-term, excellent research. We are hopeful that the CIHR budget will continue to increase in a planned fashion towards our \$1 billion-a-year target (or a mere 1 percent of Canadian spending on health care), but we will need help from all our friends to make this happen.

Among the many modalities of complementary and alternative health care, the chiropractic profession has distinguished itself by its desire to subject its practices and outcomes to rigorous enquiry, and has taken significant steps to encourage and develop research interest and expertise among its members. CIHR hopes that it can work with the profession and its individual investigators to continue this trend. With chiropractic therapy used so widely by Canadians, we have a strong common interest in determining the efficacy and safety of this important aspect of health care.

Help Support Chiropractic Research

Become a member of the Canadian Chiropractic Research Foundation