To Hon. Jane PhilpottMinister of Health

House of Commons Ottawa, Ontario, Canada K1A 0A6 27th June 2016

Open Letter to the Minister of Health, the Honourable Jane Philpott,

Dear Minister Philpott,

We, the undersigned, wish to address the imminent crisis facing Canadian health researchers. We are sure that you have already heard of the significant and broadly based concerns of this research community regarding the reformed programs and peer review processes at CIHR, but we wish to explain the current situation and why immediate action is imperative.

Funding the best science is the keystone of national science agendas that aim to achieve the highest and most lasting impact. Thus, a funding agency's primary job is to ensure that it effectively selects the very best research proposals to receive funding. It is by no means an easy task as quality assessment is about judging future promise and by its very nature, research is unpredictable and risky and requires expert peer evaluation. Scientific research is also a global activity where there are no silver or bronze medals. Canada competes with the best in the world (and has done very well). It was therefore with considerable trepidation that we, as a research community, watched the CIHR propose and implement a radical series of changes to both its primary investigator-initiated research programs and to its methodology for peer review, colloquially known as the "Reforms". Common sense would dictate that reforms be implemented carefully to avoid harming the very research infrastructure they are meant to support. However, the CIHR chose a different route. They implemented 3 distinct reforms simultaneously; 1) they changed the grant funding streams; 2) they changed the grant writing process and 3) they abandoned the international gold standard of face-to-face peer review.

The primary reason for this letter is to express our extreme alarm at the course these reforms have taken. Of gravest concern, the adjudication process of the first major "Project" grant competition has revealed significant flaws that have severely undermined the confidence of the Canadian health research community. The problems are several-fold. Firstly, because CIHR initiated the Reforms at a time when funding was declining in real terms, they had to cancel two competitions. As a consequence, the majority of this country's health researchers applied to the latest competition. Despite warnings, CIHR scrambled to find sufficient reviewers, at least some of whom were inexperienced or unqualified. In turn, this led to a significant delay in sending applications to reviewers, such that they were given only 2-3 weeks to complete their tasks (CIHR had the grants for 2 months prior). Likely as a consequence, a substantial number (estimates are ~15%) of reviews were not even submitted by the deadline. The experience has been documented by a number of reviewers as well as "Virtual Chairs" – these are ~140 respected scientists tasked with ensuring reviewers were complying and trying to resolve discrepancies in their relative scoring. The level of frustration of the Virtual Chairs who have spoken out is remarkable. For example, they've consistently reported that a significant fraction of reviewers simply didn't participate in the asynchronous, online discussions.

The design of the new peer review system shows deep flaws and erroneous assumptions. Instead of having grant proposals be reviewed by expert panels of scientists in the same place, as is the practice of virtually every other Canadian granting agency, and worldwide, CIHR abruptly switched to an online review process. This removed the peer pressure for reviewer performance. Multiple Virtual Chairs noted instances of poor reviewing behaviour (independent of seniority of the reviewer) that simply was not experienced in the face-to-face system previously employed. By contrast, scientists do not come to physical meetings unprepared and they are 100% focused on the review discussion.

These problems were entirely foreseen by the broader research community, which repeatedly presented these concerns to CIHR leadership over the past 3 years. Responses from CIHR were largely dismissive or pointed to the fact these are "pilot" competitions that will be improved. But when over 75% of active Canadian health researchers have no choice but to apply to the latest Project competition, this can no longer be viewed as a test. These researchers had no options as other opportunities for funding were removed. Their research support is rapidly running out and there are thousands of jobs and postgraduate degrees on the line. Moreover, the situation is very likely to get worse as there are only two competitions in the current fiscal year, but three planned for the next. The new processes have injected unpredictability, causing widespread lack of confidence in the review process and the agency itself. There is little hope that the best ideas and projects will be funded. We posit this represents a fundamental failure of CIHR's primary mandate.

We suggest there is a solution and the sooner it is implemented, the less damage will be incurred. That is for CIHR to suspend the roll out of the Reforms and to reinstate expert panel-based reviewing where scientists meet and discuss in person. With a motivated research community, this could be achieved in time for adjudication of the competitions this Winter – but requires a decision be made by mid-Summer. Such a return to proven adjudication methods would go far in returning the confidence of Canadian health researchers and their trainees (our future), and restore CIHR to the internationally accepted gold standard of scientific review. We urge you to act now to require CIHR to return to face-to-face expert panels, as time is of the essence. There is much at stake for far too many of our colleagues to endure another episode of this failed experiment.

Sincerely,

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Juan Carlos Zuniga-Pflucker, Professor & Chair, Department of Immunology, University of Toronto; Senior Scientist, Sunnybrook Research Institute*Initial CIHR Foundation grant awardees

Note, if you are a Canadian health researcher, you are welcome to add your own name/affiliation via comments - will be incorporated into the listing alphabetically within a day. Please do not edit the body of the letter as that would require re-permissioning of the signatories. Google doc seems to be struggling. If so email me at woodgett-at-lunenfeld.ca if you are having difficulty.

1342 signatures as of July 26, 2016

Mark Bichin, Doctoral Student, Neuroscience Graduate Program and Pediatrics, University of British Columbia - hi Mark, we're limiting to investigators. There is another open petition here: https://www.csmb-scbm.ca/advocacy/Petition.aspx