
Executive summary

Advisory Council on Health Research. Paying upfront. The problem of matching European subsidies for health research. The Hague: Health Council of the Netherlands, 2009; RGO no. 61.

European subsidies for health research cover only part of the total cost of the research. A research institute that accepts a subsidy takes on an obligation to pay the remaining costs, i.e. to match the subsidy by means of co-funding.

This advisory document published by the Advisory Council on Health Research (Raad voor Gezondheidsonderzoek, RGO) deals with the matching of European subsidies for health research. The point of departure was the question that the Ministry of Health, Welfare and Sport placed before the RGO as to whether Dutch participation in European health research programmes could be promoted by establishing a 'matching fund', i.e. a fund from which research institutes that obtain a European subsidy can get co-funding to fulfil their matching obligations.

In preparation for its advice the Council commissioned a check on whether such a matching fund was compatible with European legislation and whether other European countries had taken similar measures. The Council also held talks with executive staff of national knowledge institutes that maintain relationships with the ministry, university medical centres (UMCs) and patients' organisations. This approach was adopted in order to form an impression of the nature and seriousness of the matching problems encountered by these organisations and of the potential solutions that they envisage.

The RGO concluded that a matching fund is permissible under the rules and that similar funds exist (or have existed) in other European countries. The talks

conducted by the RGO revealed that for many years NIVEL (Netherlands Institute for Health Services Research), RIVM (National Institute for Public Health and the Environment), TNO Quality of Life and the Trimbos Institute (Netherlands Institute of Mental Health and Addiction) had been experiencing problems in matching European research subsidies and that they would warmly welcome the establishment of a matching fund. On the whole the matching problems experienced by UMCs appeared slightly less urgent than those confronting the national knowledge institutes. While UMCs felt that matching obligations obstructed the growth of successful research groups they had broadly speaking been able to get by so far thanks to improvisation. Moreover, the problems that UMCs encounter when matching European research subsidies are – more prominently than at the knowledge institutes – part of a wider matching problem whereby roughly speaking Dutch research subsidies account for a far greater share than the European subsidies. The talks conducted by the RGO revealed that patients' organisations regularly identify relevant research questions for which they would like to secure the interest of researchers in Europe and put them in touch with each other. They would benefit greatly from the financing of the preparation of European research projects.

Based on these findings the Council advises the Minister of Health, Welfare and Sport to establish a matching fund. The fund should in any event be open to applications from national knowledge institutes that maintain relationships with the Ministry of Health, Welfare and Sport, on condition that their research proposals are aligned to the 'public interest tasks' formulated by the ministry. The establishment of a matching fund will encourage these institutes to apply for European research subsidies instead of refraining from doing so. As part of the deliberations the Council recommends considering the circumstance that the Dutch investment in the fund will be amply exceeded by the financial benefits in the form of European research subsidies.

The Council further advises the Minister to make it possible for other public knowledge institutes, including UMCs, to seek recourse to the fund, to the extent that their research projects can be expected to contribute directly to ministerial policies aimed at the 'public interest tasks'.

Patients' organisations, which the Council believes should also be considered public knowledge institutes in the present context, would benefit not only from a matching fund, but also from a subsidy scheme that reimburses (in full or in part) the costs that they incur when preparing and writing subsidy applications for submission to European programmes. The Council advises the Minister for Health, Welfare and Sport to create such a scheme.

The advisory document includes two recommendations with a wider scope. The Council advises the Minister for Economic Affairs and the Minister for Education, Culture and Science to examine the desirability and feasibility of stimulating across-the-board Dutch participation in European research programmes by establishing a matching fund usable by research institutes within and outside the health research field.

The advisory document finishes by concluding that the matching of non-cost-covering research subsidies, regardless of the party that provides them, is increasingly causing problems in the health research domain. Sooner or later research groups successful in obtaining such subsidies will be thwarted in their development because of the matching obligations. The Council advises the Minister for Education, Culture and Science to do everything possible to resolve this more general matching problem, which extends beyond the health research field.

