

Funding Biomedical Research: A David in Goliath's Field

TINA M. ERICKSON

The Blowitz-Ridgeway Foundation

When it comes to funding biomedical research, there is a perception among health grantmakers that only the Goliaths of the world can make a difference. A foundation must be as large as the Burroughs Wellcome Fund, for instance, to hire a sophisticated staff that can comprehend complex scientific protocols. It must have the deep pockets and staying power of a Howard Hughes Medical Institute to afford the notoriously expensive equipment and salaries, and to take a gamble on a payoff that may be long in coming, if ever.

While these organizations and other private funders have provided invaluable and significant contributions to advance our understanding of health and disease over the years, smaller foundations can also play a role. The experience of The Blowitz-Ridgeway Foundation demonstrates that it is, indeed, possible for funders with broader health missions and slimmer budgets to have an impact on the future of medicine.

Our primary funding areas are health care and social service programs for children, adolescents, and the disadvantaged. The foundation defines *health care* in broad terms: It's not just the care provided to the sick, but the steps taken to prevent injuries and abuse, the enrichment of the lives of those emotionally or physically challenged, and – central to this article – the efforts made to find a cure for diseases.

In 1990, the foundation made its first foray into biomedical research funding with a single grant of \$5,700. Today, our research program accounts for 20 percent to 30 percent of our annual \$1.25 million grantmaking budget, with average awards of \$100,000 over a two-year period.

WHY RESEARCH?

Private philanthropy can never match the funds available at the federal level for biomedical research. The National Institutes of Health, for instance, has an annual budget of approximately \$15 billion for health research. Nevertheless, only one out of three proposals that reach NIH is ever recommended for funding, leaving many promising projects and researchers on the sidelines.

This is where private philanthropy can be pivotal, helping to launch new careers; funding cutting edge, independent projects; and providing bridge support to more established investigators. One of the goals of The Blowitz-Ridgeway Foundation's program, for instance, is to help young

researchers obtain the preliminary data necessary to compete successfully for federal funding. When one of our awardees goes on to receive a \$1 million NIH grant to continue the project, or has study results published in a peer-reviewed journal, we know our initial \$50,000 investment has made a difference.

THE POWER OF TWO

So how does a foundation with \$25 million in assets, two staff, and only one Ph.D. investigator on its board of trustees go about implementing a research program? Initially, we awarded one-time grants in many different areas, but soon realized – if we really wanted to have an impact – we needed to refine our goals. Shortly thereafter, we discovered a relatively simple yet effective formula that other smaller foundations could replicate.

First, the foundation decided to focus its research interests on a few select, targeted areas such as cancer, hepatitis C, arthritis, Parkinson's disease, and childhood asthma. We then approached organizations with proven expertise in the chosen research area such as the American Cancer Society (Illinois Chapter), American Liver Foundation, the Arthritis Foundation (Chicago Chapter), United Parkinson's Foundation, and the American Lung Association (Chicago Chapter) that could act as intermediaries for the foundation. In conjunction with these intermediary partners, we developed the following protocol that has helped both the foundation and the agencies achieve our shared goals.

- The foundation and the intermediary agency jointly decide upon a schedule for releasing a request for proposals (RFP). The amount of funding available is usually \$25,000-\$50,000 per year for two years, contributed by the foundation, or more if the agency decides to match the foundation's funding. While the normal funding period is two years, one-year projects are sometimes considered and supported. Longer-term projects are unlikely to be funded.
- The intermediary agency then issues the RFP, acknowledging that funding for this opportunity is made possible through a special initiative of The Blowitz-Ridgeway Foundation. Using the latest Blowitz-Ridgeway research application form or a hybrid of the foundation and inter-

mediary's forms, interested researchers then file applications with the intermediary agency.

- The agency identifies, selects, and contacts several experienced researchers with expertise in the agency's field to serve as peer reviewers (often their research review committee). Peer reviewers, most of whom perform this function for free or a small honorarium, agree to evaluate all proposals received through the RFP, providing scores and a written review of each proposal. They then submit a prioritized list of the projects they are recommending for funding, along with copies of their scores and comments, to the foundation.
- The foundation's board of trustees selects the grant recipient, usually the highest ranked researcher according to the intermediary's peer reviewers. Depending upon the outcome of the peer review, the foundation may end up not funding any proposals in a specific field in a given year; at other times, we may fund two or three because of the universally high caliber of the proposals. The grant is then issued to the university where the researcher is working or to the intermediary agency, with the funds designated for the specific research project.
- Post-grant reports are required every six months for the duration of the grant, and the intermediary may be requested to assist in the timely submission of those reports. Prior to issuing the second-year check, the intermediary agency provides a peer review of the 12-month report to ensure the researcher is making adequate progress and the second year of funding is warranted.
- Because the foundation is interested in increasing awareness of its biomedical research program within the scientific community, we require all award recipients to acknowledge support from The Blowitz-Ridgeway Foundation in press releases, publications, and other materials.

Through trial and error, we moved from funding a few isolated research projects on our own to this far more satisfying system that has the ability to both attract higher quality projects and also promote the foundation's program to key institutions and investigators. Depending upon the geographic range of the agency, RFPs have been issued both nationally and locally which further enhances the foundation's reputation and reach.

The result has been a win-win-win situation: The foundation has its name associated with respected national organizations, the intermediaries are able to issue RFPs for additional funding in their field, and, most importantly, new research is under way...research that may result in a breakthrough now or in the years ahead.

Tina M. Erickson is administrator for The Blowitz-Ridgeway Foundation. The foundation was created in 1984 from the proceeds of the sale of Chicago's Ridgeway Hospital, a nonprofit psychiatric facility focusing on low-income adolescents. For more information about The Blowitz-Ridgeway Foundation's research funding policies, contact Ms. Erickson at 847.446.1010.

CONCLUSION

As more health care foundations are created and established foundations expand, The Blowitz-Ridgeway Foundation wants to encourage all grantmakers to consider the option of funding biomedical research. Despite our modest asset base and staff size, we have been able to fund high quality projects with the assistance of respected intermediaries. A small investment in research today may reduce the tremendous health care demands of tomorrow.

LESSONS LEARNED

DOs

- Work in committee to establish your board's priorities.
- Fund only researchers who earned high scores from the peer reviewers.
- Concentrate on researchers who are on a tenured track, so you can have a degree of assurance they will stay in research and move on to bigger projects.
- Focus your areas of interest.
- Consider inviting a Ph.D. investigator to sit on your board to help guide the program and process.
- Make two-year awards, whenever possible. It's a lot of time and effort to invest for just one year of research.
- Review your targeted areas periodically and add new research areas as your grantmaking budget increases.

DON'Ts

- Award all the funds for a two-year grant at one time. Require satisfactory progress reports before the balance of the grant dollars are distributed.
- Recruit just one peer reviewer. Rating research proposals is hard work. With several reviewers on board, the odds are better that all of your proposals will be evaluated, even if one reviewer needs to withdraw for some reason.
- Establish unrealistic deadlines for the peer reviewers. The best peer reviewers are themselves busy academic investigators. Allow them sufficient time to complete the process.

VIEWS FROM THE FIELD is an occasional series offered by GIH as a forum for health grantmakers to share insights and experiences. If you are interested in participating, please contact Leslie Whitlinger, GIH's director of communications, at 202.452.8331 or lwhitlinger@gih.org.