



Canadian Institutes of Health Research

2023–24

Departmental Plan

The Honourable Jean-Yves Duclos, P.C., M.P.,
Minister of Health

The Honourable Carolyn Bennett, M.D., P.C., M.P.,
Minister of Mental Health and Addictions
and Associate Minister of Health

Canadian Institutes of Health Research (CIHR)

At the Canadian Institutes of Health Research (CIHR), we know that research has the power to change lives. As Canada's health research investment agency, we collaborate with partners and researchers to support the discoveries and innovations that improve our health and strengthen our health care system.

Canadian Institutes of Health Research

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From the Ministers

We are pleased to present the 2023–24 Departmental Plan of the Canadian Institutes of Health Research (CIHR).

In 2023–24, CIHR will continue with implementation of its 2021–2031 Strategic Plan. In the third year of implementation in this plan, the Agency will focus on a more inclusive concept of research excellence, Indigenous engagement, equity,



diversity and inclusion, anti-racism, and accessibility. This work will advance CIHR’s delivery of health research and training to improve the health for all Canadians.

CIHR has made significant investments in research focused on COVID-19 and will continue to do so as our government addresses the ongoing impact of the pandemic on Canadians and the health system in Canada.

CIHR will continue to collaborate with partners to fund research in specific areas such as the experiences of Indigenous communities with COVID-19 and the ongoing mental health and substance use challenges of Canadians. To address the long-term effects of COVID, CIHR will establish a Canadian Post COVID-19 Condition Research Network that will deepen our understanding of the long-term effects of COVID-19 infection and provide timely evidence and an equitable response to the post COVID-19 condition.

The health of children and youth in Canada has especially been affected by the prolonged pandemic. In response, CIHR is funding the Canadian Pediatric COVID-19 Research Platform to identify and mitigate the impacts of the pandemic on children, youth and families. The Agency is also funding the [Integrated Youth Services Network of Networks Initiative \(IYS-Net\)](#),ⁱ which aims to transform service delivery and improve youth mental health and substance use outcomes through a learning health systems approach. This research has been very important in supporting an integrated approach to provide wrap around services for youth, which is now being implemented across Canada. CIHR continues to address the opioid overdose crisis and other issues related to substance use through funding for the [Canadian Research Initiative in Substance Misuse](#),ⁱⁱ a national network of researchers, service providers, policy makers and people with lived experience of substance use. This kind of research is essential in determining the efficacy of substance use treatment and policy.

Through a collaboration with the International Development Research Centre, CIHR is funding the [Women Rise](#)ⁱⁱⁱ initiative to support action-oriented and gender-transformative research on how

women's health and their work have been affected in the context of COVID-19. In addition, CIHR is funding the [National Women's Health Research Initiative](#),^{iv} which promotes an intersectional lens to research and care to tackle persistent gaps for all women, including Indigenous, Black and racialized women, women with disabilities, and members of Two-Spirit, lesbian, gay, bisexual, transgender, queer, intersex and additional sexually and gender diverse (2SLGBTQI+) communities.

CIHR will continue to advance the self-determination of Indigenous Peoples in health research across the country. In partnership with Inuit Tapiriit Kanatami (ITK), CIHR is establishing an Inuit Research Network to support Inuit-led research that will lead to solutions to the distinct issues and challenges faced by Inuit in Canada.

CIHR will continue to embrace the diversity of Canada and will uphold its commitment to removing systemic barriers in the health research system. Over the next year, CIHR will publish its co-developed anti-racism and accessibility and systemic ableism action plans, which together will ensure Canada's diverse scientific talent is supported and capitalized upon.

We encourage everyone to read the 2023–24 CIHR Departmental Plan to learn more about the many CIHR-funded research efforts that are strengthening our health systems and improving health for Canadians and people throughout the world.

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Minister of Health

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Plans at a glance

The Canadian Institutes of Health Research (CIHR) invests in health research and training to support the creation of new knowledge and its translation into improved health for Canadians.

The [CIHR Strategic Plan 2021–2031: A Vision for a Healthier Future](#)^v was launched in February 2021. This plan – enacted through a series of annual strategic action plans – reflects the bold vision and strategic direction of CIHR’s Governing Council to demonstrably improve the health of future generations of Canadians and builds on successes over the past 20 years in supporting a community of health researchers that is stronger and more diverse than ever before. Priority Steering Committees (PSCs) continue to oversee and advise on the delivery of each of the five main Strategic Plan priorities (Advance Research Excellence in All Its Diversity, Strengthen Canadian Health Research Capacity, Accelerate the Self-Determination of Indigenous Peoples in Health Research, Pursue Health Equity through Research, and Integrate Evidence in Health Decisions) along with a sixth priority focused on Organizational Excellence. The Year 3 Action Plan will be published in June 2023 and will include a report on progress and achievements of the first two years of the Strategic Plan.

To support the Strategic Plan work and strengthen the planning and prioritization processes internally, the Agency will focus on five key priorities that will facilitate decision-making for operational planning for 2023–24: people management and wellness including HR policy updates and tools; reviewing CIHR’s Institute model to improve planning, governance, and engagement; co-development of a more inclusive concept of research excellence across policies, programs and processes; strategic engagement with Indigenous Peoples; and strengthening planning and prioritization processes including improving integrated planning.

Having tabled the CIHR Accessibility Plan in December 2022, implementation will occur in 2023–24, which includes developing performance indicators and a reporting procedure, in compliance with the Accessible Canada Act, to create a more accessible and inclusive public service. In response to the January 2021 Clerk’s Call to Action on Anti-Racism, Equity, and Inclusion, in 2023–24, CIHR will continue its important work on the development and implementation of action items identified in its Equity, Diversity and Inclusion (EDI) Strategy, Action Plan and Employment Systems Review. In addition, the collaborative work with CIHR’s EDI Committee and Human Resources forum for CIHR staff provides strategic and operational advice and recommendations to help identify, address, and prevent systemic barriers within CIHR’s people management practices and work culture to help meet its corporate priorities outlined in the Clerk’s Call to Action. CIHR continues to advance this cross-cutting priority by enhancing the integration of EDI considerations through improved data collection and updated training, guidance, and requirements across its activities. In 2023–24, CIHR plans to publish its co-developed anti-racism, and accessibility and systemic ableism action plans.

CIHR will continue to support the Government of Canada’s response to the COVID-19 pandemic through funding timely policy-relevant research and knowledge mobilization, for example, by investing in the study of the long-term health impacts of COVID-19 and Post COVID-19 Condition (PCC). In 2023–24, CIHR, through its Centre for Research on Pandemic Preparedness and Health Emergencies (CRPPHE), will continue to invest in research and capacity building to ensure that Canada has an emergency-ready health research system. The CRPPHE will build on Canada’s research strengths and continue to grow its capacity to be a leader in preventing, preparing for, responding to, and recovering from existing and future pandemics and health emergencies.

Building on the initial investments of the [Clinical Trials Fund](#)^{vi} (CTF), CIHR aims to engage in a deep national dialogue that will lead to a robust, pan-Canadian clinical trials strategy. CIHR is committed to engaging with a broad array of stakeholders to support the clinical trials pipeline from discovery to implementation. Through the Strategy for Patient-Oriented Research (SPOR), CIHR continues to engage with patients and its Provincial and Territorial (P/T) counterparts to accelerate the uptake of research evidence into policy and practice, thereby improving health outcomes for Canadians. In 2023–24, CIHR will launch a national dialogue on patient-oriented research to refresh this strategy, with the aim of further strengthening the impact of patient-oriented research on health policy and practice.

CIHR has developed a Domestic Engagement Strategy (DES), which takes a sectoral approach to engaging with stakeholders across the health research ecosystem on areas of shared interest and priority, including implementation of the CIHR Strategic Plan and in the development of core business functions such as funding opportunities, funding policies/processes and peer review. Through the DES, CIHR has existing engagement mechanisms in place with the National Alliance of Provincial Health Research Organizations (NAPHRO), the Health Charities Coalition of Canada, the academic sector, and with Indigenous partners through the work of CIHR’s Priority Steering Committee C. During 2023–24, the focus will be on the implementation of the DES. Engagement with the academic sector is a key priority within the DES. CIHR meets regularly with institutions and associations of researchers to hear their perspectives on the health research funding ecosystem. As well, CIHR regularly visits academic institutions across the country. In 2023 CIHR has planned a series of academic visits to multiple institutions.

CIHR will continue to work with agencies and departments on the Canada Research Coordinating Committee (CRCC) to advance federal priorities and create an inclusive internationally competitive research ecosystem in Canada. Work will focus on strengthening research excellence by creating a more equitable, diverse, and inclusive research environment across all disciplines; increasing Canadian engagement in interdisciplinary, international, high-risk/high-reward, rapid-response research; and positioning Canada as a valued partner in global research.

In addition, the Agency and its CRCC partners including those at the Natural Sciences and Engineering Research Council of Canada (NSERC) and the Social Sciences and Humanities Research Council of Canada (SSHRC) will collaborate to better support trainees and early career researchers in all fields, including the development of a future Tri-Agency Training Strategy (TATS). Together with Indigenous Peoples (First Nations, Métis, and Inuit), CIHR and its CRCC partners will implement an interdisciplinary research and research training model that contributes to reconciliation. As demonstrated by Priority C of the CIHR Strategic Plan, as well the strategies throughout the plan, CIHR continues to acknowledge the significant and ongoing contributions of First Nations, Inuit and Métis Peoples to research and continues to support Indigenous communities to lead health research founded in Indigenous ways of knowing focused on resilience and wellness.

In 2021, the House of Commons Standing Committee on Science and Research (SRSR) was established to review and report on all matters relating to science and research in Canada. In 2023–24, CIHR will continue to inform and support the work and studies of this committee, including through committee appearances and written briefs.

In collaboration with its CRCC colleagues, CIHR will also continue to support the Government of Canada’s implementation of the recommendations of the [Advisory Panel on the Federal Research Support System](#)^{vii} to modernize the system to maximize the impact of investments and position Canadian researchers for success.

For more information on the Canadian Institutes of Health Research’s plans, see the “Core responsibilities: planned results and resources” section of this plan.

Core responsibilities: planned results and resources

This section contains information on the department’s planned results and resources for each of its core responsibilities.

Funding Health Research and Training

Description

CIHR is Canada’s health research investment agency. By funding research excellence, CIHR supports 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. This is done by providing grants that fund health research and/or provide career and training support to the current and next generation of researchers.

Planning highlights

In support of its Core Responsibility to fund health research and training, CIHR delivers activities through three main Programs: Investigator-Initiated Research (IIR), Training and Career Support (TCS), and Research in Priority Areas (RPA). Full listing of research focus areas, funding opportunities, and announcements can be found on [CIHR’s website](#).^{viii} Exemplars of work CIHR is doing in each Program in 2023–24 are provided below.

Departmental Result # 1: Canada’s health research is internationally competitive

CIHR’s support for health research excellence through IIR and RPA investments has contributed to making Canada’s health research internationally competitive and internationally recognized.

For 2023–24, CIHR’s International Action Plan (IAP) will focus on: finalizing the performance management framework and implementation framework for the 5-year IAP; ensuring the collaboration criteria and the risk and non-compliance assessment framework for international collaborations are updated to align with the new Partnership Framework, once it has been finalized; developing a strategy to ensure international collaboration information, data and best practices are better shared internally and externally; and drafting engagement plans for the six established priority countries/regions identified in the IAP.

In 2023–24, the Centre for Research on Pandemic Preparedness and Health Emergencies (CRPPHE) will further develop core processes and governance mechanisms to support a coordinated, whole of government health research response to COVID and post-COVID condition as well as other emerging or re-emerging health emergencies such as mpox (monkeypox). The CRPPHE is currently leading CIHR’s engagement with PHAC and Health Canada to respond to the recommendations in Canada’s Chief Science Advisor’s Task Force report on PCC to advance our understanding of PCC, how to prevent and treat it, and its effects on society. The CIHR and PHAC Presidents co-chair the steering committee for the newly

established PCC secretariat mandated to coordinate a whole of government approach to respond to the health and socioeconomic effects of PCC.

Through a \$20M investment provided through Budget 2022, the CRPPHE launched a funding opportunity to establish a PCC research network that will improve the understanding of the biological, clinical, mental health, health systems and population health impacts of PCC. Part of this work will bring together the PCC Research Network team and key knowledge brokers and users across the Government, and to promote a coordinated and coherent federal research response to PCC.

CIHR will be expanding Patient-Oriented Research (POR) beyond the Strategy for Patient-Oriented Research (SPOR) to advance research excellence in this field. In 2023–24, CIHR and its Institutes will build a coordinated organizational approach to POR to drive key organizational priorities of research and organizational excellence. Research that involves patients and people with lived/living experience (PWLE) and health care decision-makers is known to improve the relevance of health research and patient outcomes. CIHR is at the forefront internationally in terms of its work to involve PWLE in research, governance committees and peer review panels. Through the new SPOR National Training Entity, SPOR Networks, and SPOR Training and Capacity Building funding opportunities, researchers, PWLE and others in the research ecosystem are supported to understand and undertake patient-oriented research.

SPOR investments are also strengthening capacity for innovative clinical trials in Canada, with a focus on comparative effectiveness and implementation research to enhance evidence-informed health care practice. Through CTF, CIHR is supporting three funding streams from 2022 to 2025: a Pan-Canadian Clinical Trials Consortium; Clinical Trials Training Platforms; and Clinical Trials Projects. In 2023–24, CIHR will continue to engage with the funded teams to further support improvements to the Canadian clinical trials ecosystem and to assess the impacts of these investments through the CTF.

In 2023–24, CIHR’s Antimicrobial Resistance (AMR) research initiative, under the co-leadership of the Institute of Infection and Immunity (III) and the Institute of Population and Public Health (IPPH), will begin to fund projects focused on the evaluation of population-level interventions to reduce inappropriate antimicrobial use and prevent the spread of resistant pathogens. Using a ‘One Health’ approach, these projects will support research evaluating domestic or international population-level interventions to reduce inappropriate antimicrobial use and prevent the spread of resistant pathogens in humans, animals and the environment. Careful study of population-level solutions including regulatory, guideline, communication, legislation, service provision, environmental/social planning and fiscal interventions will contribute to building a body of evidence to support Canadian and international AMR decision-makers as they address the multi-faceted challenges of AMR. This \$1.2M investment will also contribute new knowledge to advance the Government of Canada’s Pan-Canadian Action Plan on Antimicrobial Resistance.

Departmental Result # 2: Canada’s health research capacity is strengthened

Through direct (recipient of CIHR training awards) and indirect (from a researcher’s CIHR grant) funding to trainees and postdoctoral fellows, CIHR investments will strengthen Canada’s health research capacity by supporting the development of scientific, professional and organizational leaders within and beyond the health research enterprise. In 2023–24, CIHR will continue to implement strategies detailed in the Strategic Plan priorities to enable the Agency to improve delivery on CIHR’s mandate.

In 2023–24, CIHR will continue to support research into all forms of diabetes in Canada, through the newly launched [Framework for diabetes in Canada](#),^{ix} ongoing investigator-initiated Project Grants, and Strategic investments including the *100 Years of Insulin: Accelerating Canadian Discoveries to Defeat Diabetes* led by the CIHR Institute of Nutrition, Metabolism and Diabetes, with external partners, including Diabetes Canada, Juvenile Diabetes Research Foundation (JDRF) Canada, the Kidney Foundation of Canada, and Fonds de recherche du Québec–Santé (FRQS). New research resulting from Budget 2021 launched in partnership with the JDRF Canada will result in new research teams to be announced from three funding opportunities: 1) [Team Grant: CIHR-JDRF Type1 Diabetes and Precision Medicine](#);^x 2) [Diabetes, Psychosocial Health, Prevention and Self-Management](#);^{xi} 3) [Team Grant: CIHR-JDRF Type 1 Diabetes Screening Research Consortium](#).^{xii}

Budget 2022 announced \$20M over 5 years, starting in 2022–23, for CIHR to ramp up efforts to learn more about dementia and brain health, to improve treatment and outcomes for persons living with dementia, and to evaluate and address mental health consequences for caregivers and different models of care. This investment will provide CIHR the opportunity to increase support for the most promising research that addresses critical knowledge gaps in dementia and brain health in aging, through strategic funding opportunities.

In 2023–24, CIHR will continue to support knowledge mobilization activities related to the National Standards for Mental Health Services Initiative and Integrated Youth Services Network of Networks Initiative (IYS-Net). These activities include end-of-grant reporting and workshops (e.g., strengthening workshop, end-of-grant workshop).

Initiatives beginning funding in 2023–24 to support mental health include the [Mental Health in the Early Years Implementation](#)^{xiii} and [Psilocybin-assisted Psychotherapy](#),^{xiv} as well as the Catalyst Grant: Towards Pan-Canadian Standards for Children and Youth Mental Health Services. The Catalyst Grant aims to support research to inform standards specific to mental health and/or substance use health services for children, youth, and young adults (ages 0 to 25), including the perinatal period.

In 2023–24, CIHR will support IYS-Net by continuing to build and strengthen research and knowledge mobilization capacity; catalyzing collaborations and knowledge sharing and use diverse research methods such as Indigenous ways of knowing; supporting the uptake of

common data approaches and open science practices; and, facilitating effective and meaningful youth and caregiver/family engagement all within and across networks.

CIHR has a longstanding commitment to Indigenous health research through its Institute of Indigenous Peoples' Health (IIPH) and the CIHR [Action Plan: Building a Healthier Future for First Nations, Inuit, and Métis Peoples](#).^{xv} In its support for the next generations of researchers, the Network Environments for Indigenous Health Research (NEIHR) Program will continue to contribute to the Indigenous health research ecosystem in ways that align with the CIHR Strategic Plan. The NEIHR Program addresses the unique health needs of Indigenous Peoples (First Nations, Inuit and Métis Peoples) in Canada. The existing nine (9) NEIHR Centres and the NEIHR Coordinating Centre (NCC) form a national network providing supportive research environments for Indigenous community-based research driven by and grounded in Indigenous communities, Indigenous research paradigms and traditional knowledge.

CIHR continues to work with its Tri-Agency partners to identify and reduce administrative barriers that restrict access to research funding for Indigenous Peoples and in support of the Indigenous Health Research ecosystem with the [Setting New Directions \(2019-2022\) Strategic Plan](#).^{xvi} To guide the implementation of the strategic directions outlined in this plan, the Indigenous Leadership Circle in Research was created. This group will advise the presidents of Canada's three federal research funding agencies on matters related to Indigenous research and reconciliation.

As work accelerates in the fields of genomic and personalized medicine, there is growing need for clear guidance and protocols to conduct this type of work with Indigenous Peoples (First Nations, Métis, and Inuit), including urban Indigenous communities in Canada. In 2023–24, CIHR will begin funding research through the [First Nations Biobanking and Genomic Research](#),^{xvii} providing First Nations Peoples with information about biobanking research to aid in the design of guidelines and protocols that are culturally relevant.

In 2023–24, CIHR will continue to strengthen Canada's health research capacity through a range of [Award Programs and Other Health Research Training Initiatives](#).^{xviii} In addition to established scholarship and fellowship programs, this year CIHR will deliver a range of strategic funding opportunities led by CIHR Institutes and/or as part of initiatives in line with key government priority areas. For example, Phase 1 of the [CIHR Research Excellence, Diversity, and Independence \(REDI\) Early Career Transition Award](#)^{xix} will be funded. The REDI award aims to support the transition of post-doctoral researchers, clinical fellows, and research associates from specific underrepresented groups to faculty positions in academic, health system and research institutions in Canada. Its first launch is open to racialized women and Black people and future rounds will focus on additional groups. CIHR will also continue to deliver the Health System Impact Fellowship and provide some of the brightest minds with the opportunity to work directly within Canadian health systems and related organizations. In addition to continuing to provide funding for doctoral and postdoctoral fellows, the current competition includes a new stream for

early career embedded researchers. CIHR will also continue to deliver phase 2 of the POR Transition to Leadership Awards, which aims to support the timely career launch of the next generation of patient-oriented researchers.

In 2023–24, CIHR will continue to implement the [CIHR Strategic Action Plan on Training](#)^{xx} detailed in the Strategic Plan, while simultaneously advancing work to develop a new CIHR Training and Career Support Framework and Action Plan. CIHR will also continue to work with NSERC and SSHRC on joint efforts aimed at supporting researchers along the career pathway, including the development of a future CRCC/TATS and the ongoing implementation of the Tri-Agency Early Career Researchers (ECR) and Equity, Diversity and Inclusion (EDI) Action Plans. Beginning in 2023–24, CIHR, NSERC, and SSHRC will deliver the Black Scholars initiative through established scholarships and fellowships programs. This \$40.9M investment over 5 years across the three agencies (with \$9.7M shared ongoing after), will contribute to strengthening the research capacity of Black scholars and enrich Canadian research and innovation. CIHR continues to be the lead agency on managing the Vanier Banting Secretariat which not only includes delivering the said programs but also managing the governance for program design, funding, and policy decisions.

Departmental Result # 3: Canada’s health research is used

Knowledge translation is a fundamental part of CIHR’s mandate to improve health for Canadians, more effective health services and products, and strengthen the Canadian health care system. CIHR’s Strategic Plan saw the Agency shift from using the term ‘knowledge translation’ to using ‘knowledge mobilization’ (KM), with the aim of fostering a more inclusive and action-oriented approach to evidence uptake. In 2023–24, CIHR will release its KM definition and launch a new KM Framework and Action Plan, informed by extensive, multi-phased engagements with diverse stakeholders. The KM Framework and Action Plan will guide CIHR’s approach for achieving the 10-year vision, laid out in the Strategic Plan, of ensuring research evidence is integrated seamlessly with Canadian health policy and practice.

As part of this KM Framework and Action Plan, CIHR plans to increase Agency-led KM offerings and continue to maximize opportunities to play a brokering role between research and policy. CIHR will also continue to fund a wide range of strategic initiatives and funding opportunities focused on building KM capacity and furthering KM practices. For example, CIHR will fund grants to catalyze research aligned with the opportunities identified in the companion document of the [2022 Chief Public Health Officer \(CPHO\) Annual Report](#).^{xxi} In addition, building on previous investments and past results to advance the Quadruple Aim of improved patient experience, better population health, improved provider experience and better value, as

well as to improve health equity for all, CIHR will fund a Knowledge Mobilization and Impact Hub to support and advance evidence-informed integrated care transformation.

In 2023–24, CIHR will collaborate with Tri-Agency partners to explore approaches to advance key open science objectives, such as requiring immediate open access to agency-funded research publications. CIHR will also continue implementation of, and begin monitoring compliance with, the Tri-Agency Research Data Management (RDM) Policy, recognizing Indigenous data sovereignty and respecting the distinct rights and interests of First Nations, Inuit and Métis Peoples.

In 2023–24, CIHR will continue to position itself as a learning health research system, a system where health funding priorities evolve based on evolving knowledge gaps, and to support learning health system focused research efforts. In doing so, CIHR will ensure research evidence is routinely integrated in health decisions.

Gender-based analysis plus

CIHR has a [Gender-based Analysis \(GBA\) Plus Framework](#)^{xxii} that seeks to build GBA Plus capacity and to sustain the practice of using a GBA Plus lens through three streams:

- ***GBA Plus in CIHR-Funded Research: CIHR’s Sex and Gender-based Analysis (SGBA) in Research Action Plan***^{xxiii} aims to ensure that sex and gender are integrated into all CIHR-funded research. More recently, CIHR has started integrating requirements in funding opportunities to ensure that EDI and Indigenous Rights considerations are meaningfully considered in research proposals, including on research teams, to ensure that CIHR-funded research is relevant and impactful for Canada’s diverse population. In 2023–24, CIHR will continue to support this work by developing new and enhanced resources for applicants to support integration of EDI considerations into all stages of the research process.
- ***GBA Plus in CIHR’s Funding System: CIHR’s Equity Strategy***^{xxiv} aims to ensure equitable access to funding for all eligible individuals. In 2023–24, CIHR will continue to monitor equity and diversity in applicants to and recipients of CIHR funding, as well as members of peer review committees, using data collected through the expanded Tri-Agency Self-Identification Questionnaire. This data will be used to identify barriers and exclusions in CIHR’s funding system and develop appropriate strategies to address them. CIHR will also produce new and enhanced resources for peer reviewers to help mitigate bias in the peer review process.
- ***GBA Plus in CIHR’s Workplace:*** This stream aims to ensure that CIHR conducts its business in an equitable manner. In 2023–24, CIHR will continue work on the development of an EDI Strategy and Action Plan. CIHR will aim to improve EDI in its workforce by reviewing the findings and recommendations from an Employment Systems Review (ESR). CIHR will look at new data sets and continue to work with its Employee EDI Committee to identify systemic barriers that impede employment opportunities and career progression for the four designated employment groups (women, Indigenous Peoples, visible minorities, and persons with disabilities).

In 2023–24, CIHR will also continue to develop and launch an action plan to address systemic racism across all areas of CIHR. In 2023–24, CIHR and the [CIHR External Advisory Committee on Accessibility and Systemic Ableism](#)^{xxv} will continue to co-develop an in-depth action plan focused on systemic ableism and barriers to accessibility in the health research funding system. These plans will preserve and uphold CIHR’s commitment to remove systemic barriers to accessing research funding and enhance the participation and retention of researchers from all under-represented groups.

United Nations 2030 Agenda for Sustainable Development and the UN Sustainable Development Goals

In 2023–24, CIHR will continue to support the achievement of the following UN Sustainable Development Goals (SDG) 2030s.

- ***SDG 3: Ensure healthy lives and promote well-being for all at all ages.*** CIHR’s Strategic Plan will contribute to advancing SDG 3 by enabling health researchers across Canada to generate new scientific knowledge and mobilize findings into new health practices, products, and policies for all. CIHR will continue to make investments towards advancing research in SDG priority areas such as Indigenous Peoples’ health, chronic diseases, substance use, health systems, mental health, sexually transmitted and blood-borne infections and other communicable diseases, and pandemic preparedness, among others.

CIHR will continue to implement its Framework for Action on Global Health Research. The Framework centres around the vision of Canada being a world leader in leveraging the power of research to accelerate global health equity for all. CIHR will continue to collaborate with domestic and international organizations to improve health in developing countries through activities such as ongoing leadership roles in the Global Alliance for Chronic Diseases (GACD) (e.g., participating in the GACD funding opportunity focused on chronic co-morbidities) and the Global Research Collaboration for Infectious Disease Preparedness (GloPID-R), and initiatives such as the Healthy Life Trajectories Initiative (HeLTI).

- ***SDG 4: Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all.*** CIHR will continue to implement its strategic plan 2021–31 commitments to EDI, which includes an emphasis on the advancing health equity, as well as strengthening and diversifying Canada’s health research capacity. CIHR will also continue to work with the other federal research granting agencies to: ensure equitable and inclusive access to its funding opportunities by all members of the research community; and, to foster an equitable, diverse, and inclusive culture in Canadian post-secondary institutions through targeted programming, such as [Dimensions EDI Canada](#)^{xxvi} and EDI Institutional Capacity Building Grants.
- ***SDG 5: Achieve gender equality and empower all women and girls.*** CIHR will initiate a refresh of its Gender Equity Framework and will develop innovative approaches to address gender inequality within the research landscape. CIHR will also continue to implement proactive measures to ensure that the research it funds is relevant and

impactful for women, girls, gender-diverse individuals, and other intersecting identity groups, including investing in specific research initiatives focused on gender-transformative interventions.

- ***SDG 8: Promote sustained, inclusive, and sustainable economic growth, full and productive employment and decent work for all.*** CIHR will continue to collaborate with partners on activities that promote entrepreneurship and innovations that strengthen our health care system and Canada’s health research capacity. CIHR will also sustain implementation of its Strategic Action Plan on Training, which aims to generate scientific, professional, and organizational leaders within and beyond the Health Research Enterprise, by supporting trainees so that they will be able to: lead high-impact, interdisciplinary research in a rapidly evolving environment of advancing technologies and globalization; apply their scholarship and talent to lead innovation across different sectors of Canada's knowledge-based economy; and establish and fill Canadian priority areas of specialized expertise and advance the frontiers of science. At the same time, it will advance work to develop a new CIHR Training and Career Support Framework and Action Plan.
- ***SDG 10: Reduce inequality within and among countries.*** In 2023–24, CIHR will continue its work to integrate, across the Canadian global health research ecosystem, the use of principles (known collectively as ‘Principles for Global Health Research’) that are designed to support researchers in Canada to embrace ethical and equitable approaches to global health research into action.
- ***SDG 11: Make cities and human settlements inclusive, safe, resilient and sustainable.*** CIHR will continue to invest in initiatives such as the Healthy Cities Research Initiative (HCRI). HCRI is designed to deepen Canada's scientific leadership in planning, designing and building healthy cities.
- ***SDG 12: Ensure sustainable consumption and production patterns.*** CIHR is supporting the Government of Canada’s goal and the net-zero procurement target. CIHR is also supporting the goal of waste diversion targets by integrating environmental considerations into procurement management processes and controls, motivating suppliers to reduce the environmental impact of the goods and services they deliver and their supply chains, and ensuring that decision-makers, material management and procurement specialists have the necessary training and awareness to support green procurement.
- ***SDG 13: Take urgent action to combat climate change and its impacts.*** As a part of Budget 2017’s commitment to support the government’s Pan-Canadian Framework on Clean Growth and Climate Change, CIHR implemented targeted investments in health and climate change. The outcomes of these investments will contribute to new knowledge, tools, and resources to collectively manage and reduce the health impacts of climate change, as well as build an evidence base to support effective health and non-health interventions to enable climate change adaptation.

Innovation

CIHR will further its workflow automation across the Agency using the Joget DX software, beginning with the automation of workflows used to manage the President’s correspondence. This automation project will also reduce CIHR’s technical debt by replacing a current legacy system. CIHR will also seek to implement a proof of concept in Joget DX for the automation of its currently manual security screening process, with the goal of reducing processing time by digitalization.

CIHR will complete the operationalization of its Cloud Strategy by the end of 2023–24 by migrating its application portfolio from its on-premises data centre to the cloud. Analysis is underway to determine how best to migrate its Oracle-specific applications to the cloud while balancing the cost of Oracle licensing. CIHR plans to reduce the current on-premises VMware CPUs by less than half, reducing cost, while still maintaining the same performance output.

CIHR will explore the use of the Metaverse for training spaces, virtual peer review and hybrid governance, to provide a richer experience in virtual spaces using Virtual reality (VR) and augmented reality (AR) technologies.

Planned results for Funding Health Research and Training

The following table shows, for funding health research and training, the planned results, the result indicators, the targets and the target dates for 2023–24, and the actual results for the three most recent fiscal years for which actual results are available.

Departmental result	Departmental result indicator	Target	Date to achieve target	2019–20 actual result	2020–21 actual result	2021–22 actual result
Canada’s health research is internationally competitive	Canada’s rank among the Organization for Economic Co-operation and Development (OECD) nations on the citation score of related health research publications	Greater than or equal to 17	March 31, 2023	17	15	11 ¹
	Percentage ² of funded research involving international collaborations	Greater than or equal to 13.5%	March 31, 2023	14.1%	14%	13.4%
	Number of research projects funded jointly by CIHR and (an) international partner(s)	Greater than or equal to 151	March 31, 2023	151	123 ³	117

Canada's health research capacity is strengthened	Percentage of newly funded recipients who self-identify as women	Greater than or equal to 33.3%	March 31, 2023	33.3%	47.3%	48.9%
	Percentage of newly funded recipients who self-identify as visible minorities	Greater than or equal to 13.5%	March 31, 2023	13.5%	23.6%	26.4%
	Percentage of newly funded recipients who self-identify as Indigenous Peoples ⁴	Greater than or equal to 1.1%	March 31, 2023	1.1%	2.6%	2.3%
	Percentage of newly funded recipients who self-identify as persons with disabilities	Greater than or equal to 1.6%	March 31, 2023	1.6%	3.0%	3.6%
	Percentage ² of research that addresses sex or gender considerations	Greater than or equal to 67%	March 31, 2023	67%	72%	78.2%
	Percentage of total research investments in grants and awards addressing Indigenous health ⁵	Greater than or equal to 4.6% of CIHR's total annual Grants and Awards expenditures	March 31, 2023	4.0%	4.1%	4.8%
	Percentage of funded research trainees reporting using their research knowledge in their current position	Greater than or equal to 90%	March 31, 2023	97%	Not available ⁶	94%
Canada's health research is used	Partner funding for research projects	Greater than or equal to \$24.7M	March 31, 2023	\$24.7M	\$29.2M	\$26.8M
	Percentage of CIHR-funded research cited in patents	Greater than or equal to 13%	March 31, 2023	13%	15%	14.5%
	Percentage of grants reporting stakeholder involvement in the research process	Greater than or equal to 84%	March 31, 2023	84.5%	81.6%	86.9% ⁸
	Percentage ² of research contributing to improving health for Canadians	Greater than or equal to 39%	March 31, 2023	38%	35%	40.2% ⁸

¹ The data available for 2021–22 represents the last available data year, which is the 2019 calendar year due to the nature of data availability and validation.

² This indicator was changed to have the “%” read as “Percentage” in the 2021–22 DRF amendment process for clarity and alignment with other indicators. The calculation did not change.

³ The methodology for identifying international partners was refined in 2020–21, which partially accounts for the decrease in the number of partners.

⁴ This indicator was changed from “% of research investments addressing Indigenous health” to “Percentage of total research investments in grants and awards addressing Indigenous health” in the 2021–22 DRF amendment process for clarity. The calculation did not change. Note that this is the aggregate investment, which is calculated separately from the indicator on percentage of *newly* funded researchers

⁵ The data for 2020–21 were not collected from researchers through the dedicated survey due to Business Continuity Plan (BCP) activation in March 2021 and COVID-19 pandemic.

⁶ Note that this is the indicator on percentage of newly funded researchers, which is separate from the aggregate investment

⁷ The indicator “Percentage of federal health documents citing CIHR-funded research” was removed in the 2021–22 DRF amendment process.

⁸ This indicator is based on self-reported data collected from end of grant reports. As is typical of funded research outcomes, it is not uncommon to see fluctuations from year to year.

The financial, human resources and performance information for CIHR’s program inventory is available on [GC InfoBase](#).^{xxvii}

Planned budgetary spending for Funding health research and training

The following table shows, for funding health research and training budgetary spending for 2023–24, as well as planned spending for that year and for each of the next two fiscal years.

2023–24 budgetary spending (as indicated in Main Estimates)	2023–24 planned spending	2024–25 planned spending	2025–26 planned spending
1,309,864,420	1,309,864,420	1,292,616,373	1,211,866,832

Financial, human resources and performance information for CIHR’s program inventory is available on [GC InfoBase](#).^{xxviii}

Planned human resources for Funding health research and training

The following table shows, in full-time equivalents, the human resources the department will need to fulfill this core responsibility for 2023–24 and for each of the next two fiscal years.

2023–24 planned full-time equivalents	2024–25 planned full-time equivalents	2025–26 planned full-time equivalents
344	332	302

Financial, human resources and performance information for CIHR’s program inventory is available on [GC InfoBase](#).^{xxix}

Internal services: planned results

Description

Internal services are the services that are provided within a department so that it can meet its corporate obligations and deliver its programs. There are 10 categories of internal services:

- ▶ management and oversight services
- ▶ communications services
- ▶ legal services
- ▶ human resources management services
- ▶ financial management services
- ▶ information management services
- ▶ information technology services
- ▶ real property management services
- ▶ materiel management services
- ▶ acquisition management services

Planning highlights

CIHR as an organization continues to manage risks relating to fulfilling the Agency’s mandate, including monitoring organizational priorities, reprioritizing work through innovative integrated planning processes to address capacity issues, and support employee wellness. In 2023–24, CIHR plans to implement a new Corporate Risk Profile and update the Agency’s risk management processes and documentation through a risk process update led by an external consultant firm.

In collaboration with SSHRC and NSERC, internal services will support finalizing the Discovery phase of the Tri-Agency Grants Management Solution (TGMS) and start the implementation phase subject to funding confirmation. The three federal research granting agencies’ existing grants management systems will be replaced with a modern cloud-based solution that is flexible to the needs of the diverse research community and enhance Canada’s competitiveness in the global research ecosystem. The implementation of this new solution will advance the agencies’ alignment with several Government of Canada policies especially in relation to digital and client-centric service design and delivery, and aid in removing systemic barriers for the research community.

In 2023–24, the Evaluation Unit will lead the completion of the following evaluations: the Banting Postdoctoral Fellowships Program, SPOR, and the AMR Initiative. In addition, the unit will initiate evaluations of the CIHR’s HIV/AIDS and STBBI Research Initiative, and the Clinical Trials Fund, and complete an evaluation framework for the CRPPHE and COVID-19 Research Investments. The evaluation unit will also support the completion of the Canada Research Chairs (CRC) Program Evaluation (led by SSHRC), the Talent Evaluation (led by

NSERC), and the Horizontal Evaluation of the Canadian Drugs and Substances Strategy (led by Health Canada).

Planning for Contracts Awarded to Indigenous Businesses

CIHR is required to achieve 5% of our total contracting value directed towards Indigenous vendors in 2023–24.

The Agencies must complete and submit Procurement Plans, through templates provided by ISC, for the following:

- Planned procurement leases in the Nunavut Settlement Area; and
- Annual Indigenous Procurement Plans to identify fiscal year 2022–23 planned procurement, through to fiscal year 2024–25.

CIHR does not have any procurement leases in the Nunavut Settlement Area, nor do it anticipate having any given our mandate. As such, a submission of *Nil* to the Planned Procurement Leases in the Nunavut Settlement Area has been entered.

CIHR achievements were mostly realized through IT suppliers' purchases made through SSC procurement vehicles. In 2022–2023, CIHR faced a major reorganization in its procurement sector. New procedures will be put in place to ensure that the 5% is met. Plans for 2023–24 on other measures undertaken for the internal to the organization and in support of Mandatory Procedures include:

Action Plan

1. Request to DSS and PSPC that CIHR IT contracts be prioritized with Indigenous companies;
2. When possible, at the request stage, internal customers must indicate their intention to use an indigenous company;
3. Mandatory training for procurement employees through the Canada School of Public Service and other;
4. Information and awareness sessions for our internal customers will be carried out by the procurement department;
5. The CIHR procurement department will ensure that indigenous companies are included in procurement processes where possible;
6. Establishment and implementation of global contracts for the CIHR for our knowledge keepers and Elders' needs in order to facilitate access to all;
7. Implementation of tools to capture information for reporting and presentation of reports to CIHR management including tools to capture all inquiries made to

- Indigenous businesses, even if they have not submitted bids or been declared winners of a process;
8. Establish agreement(s) as needed with external organizations that have access to Indigenous communities; and
 9. Continuous monitoring of our progress throughout the fiscal year, leading to the evaluation of the achievements against our targets.

Key risk or other challenges in achieving the mandatory minimum target of 5%, and any mitigation strategies.

As a small institute with a narrow mandate, we have a limited number of contracts. Most contracts by the nature of our services offered are service contracts for specific types. Indigenous company that are in the right field or have capabilities to fulfill our contracts may be limited in relation to our needs.

Attempts were made in 2022–2023 to find companies to provide the services of knowledge keepers and Elders as these are the biggest of our needs. Unfortunately, even after contacting ISC, Kumeric, over 20 Indigenous companies or universities, colleges, etc., we are still looking. It is extremely difficult to receive answers. In addition, most of the time, we invite companies to bid, but we do not receive any response from them.

We are continuing our efforts to be able to have contracts that can meet our indigenous needs.

The following table shows in % the actual, forecasted and planned value for the target.

5% reporting field description	2021–22 actual % achieved	2022–23 forecasted % target	2023–24 planned % target
2.19 %	N/A	N/A	5%

Planned budgetary spending for internal services

The following table shows, for internal services, budgetary spending for 2023–24, as well as planned spending for that year and for each of the next two fiscal years.

2023–24 budgetary spending (as indicated in Main Estimates)	2023–24 planned spending	2024–25 planned spending	2025–26 planned spending
41,776,361	41,776,361	41,194,790	38,468,786

Planned human resources for internal services

The following table shows, in full-time equivalents, the human resources the department will need to carry out its internal services for 2023–24 and for each of the next two fiscal years.

2023–24 planned full-time equivalents	2024–25 planned full-time equivalents	2025–26 planned full-time equivalents
281	270	261

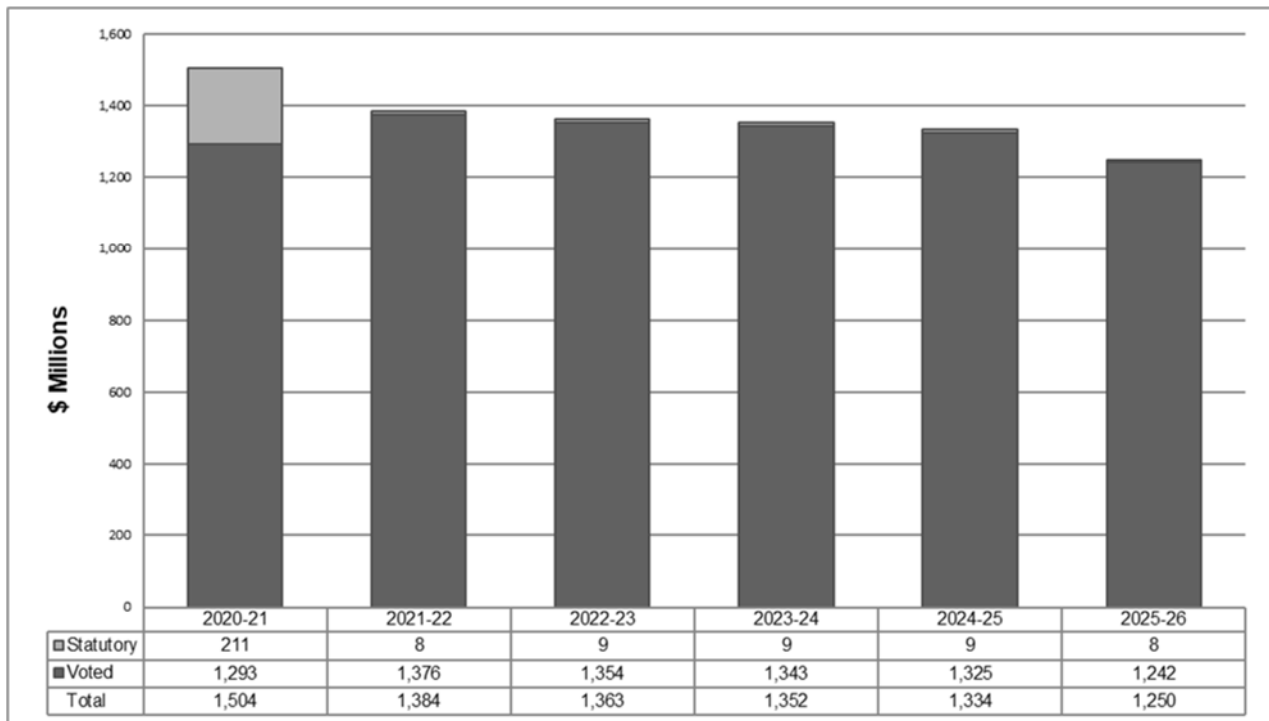
Planned spending and human resources

This section provides an overview of the department’s planned spending and human resources for the next three fiscal years and compares planned spending for 2023–24 with actual spending for the current year and the previous year.

Planned spending

Departmental spending 2020–21 to 2025–26

The following graph presents planned spending (voted and statutory expenditures) over time.



The increase in statutory authorities in 2020–21 reflects the additional \$204M of funding measures pursuant to the Public Health Events of National Concern Payments Act as part of the Government of Canada’s response to address COVID-19.

Budgetary planning summary for core responsibilities and internal services (dollars)

The following table shows information on spending for each of CIHR’s core responsibilities and for its internal services for 2023–24 and other relevant fiscal years.

Core responsibilities and internal services	2020–21 actual expenditures	2021–22 actual expenditures	2022–23 forecast spending	2023–24 budgetary spending (as indicated in Main Estimates)	2023–24 planned spending	2024–25 planned spending	2025–26 planned spending
Funding Health Research and Training	1,470,094,381	1,348,771,749	1,319,798,458	1,309,864,420	1,309,864,420	1,292,616,373	1,211,866,832
Subtotal	1,470,094,381	1,348,771,749	1,319,798,458	1,309,864,420	1,309,864,420	1,292,616,373	1,211,866,832
Internal services	33,367,179	35,527,516	43,432,000	41,776,361	41,776,361	41,194,790	38,468,786
Total	1,503,461,560	1,384,299,265	1,363,230,458	1,351,640,781	1,351,640,781	1,333,811,163	1,250,335,618

CIHR’s actual spending in 2020–21 is the result of surge time-limited funding received to support COVID-19 research. CIHR’s actual spending reached approximately \$1.4B in both 2021–22 and 2022–23 and its planned spending is expected to remain relatively stable for 2022–23 and 2023–24. The decrease starting in 2024–25 is the result of time-limited funding received through Federal Budgets for specific targeted research initiatives.

There is a net variance of \$11.6M between 2022–23 and 2023–24, mainly due to the following decreases, for a total of \$39.7M:

- \$10.3M for responding to mpox (monkeypox) outbreaks in Canada as time-limited funding was specific to 2022–23;
- \$5.6M due to the transfer of the Networks of Centres of Excellence Program to the New Frontier Research Fund announced in Budget 2018;
- \$5.2M due to the transfer of the Centres of Excellence for Commercialization and Research and the Business-led Networks of Centres of Excellence programs to the Strategic Innovation Fund announced in Budget 2018;
- \$5.0M for the COVID-19 Outpatient Therapeutic Study as time-limited funding was specific to 2022–23;
- \$4.7M for the Clinical Trials Fund (Budget 2021) due to varying annual funding levels;
- \$3.0M for Post-traumatic stress injuries as time-limited funding ended in 2022–23;
- \$3.0M for Pediatric Outcome Improvement through Coordination of Research Networks as time-limited funding ended in 2022–23;
- \$2.9M due to the transfer of the Drug Safety and Effectiveness Network program to the Canadian Agency for Drugs and Technology in Health.

This decrease has been offset mostly by the following increases, for a total of \$26.9M:

- \$8.5M for the Canada First Research Excellence Fund 2022 competition;
- \$7.4M to develop a national strategy for drugs for rare diseases (Budget 2019);
- \$4.3M due to:
 - The distribution of the Canada Graduate Scholarships; and
 - Support to Canada’s Black students and postdoctoral fellows announced in Budget 2022;
- \$3.6M in funding for the long-term health impacts of COVID-19 announced in Budget 2022;
- \$3.1M to support a national women’s health research initiative announced in Budget 2021.

Since its inception in 2000, while delivering an increasing number of funding programs and initiatives, CIHR’s operating budget has remained extremely lean, currently representing 6% of its total budget.

Planned human resources

The following table shows information on human resources, in full-time equivalents (FTEs), for each of CIHR’s core responsibilities and for its internal services for 2023–24 and the other relevant years.

Human resources planning summary for core responsibilities and internal services

Core responsibilities and internal services	2020–21 actual full-time equivalents	2021–22 actual full-time equivalents	2022–23 forecast full-time equivalents	2023–24 planned full-time equivalents	2024–25 planned full-time equivalents	2025–26 planned full-time equivalents
Funding Health Research and Training	263	282	330	344	332	302
Subtotal	263	282	330	344	332	302
Internal services	234	256	275	281	270	261
Total	497	538	605	625	602	563

The net increase from 2020–21 and 2021–22 is largely attributable to the creation and staffing of temporary positions in 2020–21 to address CIHR’s role in supporting COVID-19 research through delivery of COVID-19 related health research funding opportunities and to address immediate operational requirements.

The increase from 2021–22 to 2023–24 results from the extension of some of these positions, and new temporary positions created to support initiatives announced in Budget 2021 and Budget 2022, such as the Clinical Trials Fund, mental health, pediatric cancer, diabetes, women’s health, long-term health impact of COVID-19 and dementia. As these initiatives are time-limited, the respective temporary positions to support these initiatives are ending between March 2024 and March 2025, which explains the decrease in full-time equivalents in future years.

Estimates by vote

Information on CIHR’s organizational appropriations is available in the [2023–24 Main Estimates](#).^{xxx}

Future-oriented condensed statement of operations

The future-oriented condensed statement of operations provides an overview of CIHR’s operations for 2022–23 to 2023–24.

The forecast and planned amounts in this statement of operations were prepared on an accrual basis. The forecast and planned amounts presented in other sections of the Departmental Plan were prepared on an expenditure basis. Amounts may therefore differ.

A more detailed future-oriented statement of operations and associated notes, including a reconciliation of the net cost of operations with the requested authorities, are available on CIHR’s [website](#).^{xxxix}

Future-oriented condensed statement of operations for the year ending March 31, 2024 (dollars)

Financial information	2022–23 forecast results	2023–24 planned results	Difference (2023–24 planned results minus 2022–23 forecast results)
Total expenses	1,373,753	1,362,138	(11,615)
Total revenues	7,483	4,193	(3,290)
Net cost of operations before government funding and transfers	1,366,270	1,357,945	(8,325)

Total expenses include grants and awards payments for health research training of approximately \$1,280.2M in 2022–23 and \$1,270.9M in 2023–24, a decrease of less than 1% year over year. Changes in funding to specific programs are included above in the ‘Planned budgetary spending for funding health research and training’. The remaining amount of \$93.6M in 2022–23 and \$91.2M in 2023–24 relate to operating expenses such as salaries and goods and services.

Total revenues include funds received from external partners for health research and training, as well as any refunds of prior year grants and awards payments. Revenues are anticipated to be slightly higher in 2022–23 as a result of previous extensions made on grants during the COVID-19 pandemic. The extension periods have now ended, and refunds of any unspent funds are occurring in 2022–23, in addition to typical returns. Refunds are expected to return to pre-pandemic levels in 2023–24.

Corporate information

Organizational profile

Appropriate minister(s): The Honourable Jean-Yves Duclos, P.C., M.P. and The Honourable Carolyn Bennett M.D., P.C., M.P.

Institutional head: Dr. Michael J. Strong, President

Ministerial portfolio: Health

Enabling instrument(s): *Canadian Institutes of Health Research Act*^{xxxii} (S.C. 2000, c. 6)

Year of incorporation / commencement: 2000

Raison d'être, mandate and role: who we are and what we do

Information on the Canadian Institutes of Health Research's raison d'être, mandate and role is available on the Canadian Institutes of Health Research's [website](#).^{xxxiii}

Information on the Canadian Institutes of Health Research's mandate letter commitments is available in the [Minister's mandate letter](#)^{xxxiv} and the [Associate Minister's mandate letter](#).^{xxxv}

Operating context

Information on the operating context is available on the Canadian Institutes of Health Research's [website](#).^{xxxvi}

Reporting framework

The Canadian Institutes of Health Research's approved departmental results framework and program inventory for 2023–24 are as follows.

Core Responsibility: Funding Health Research and Training		
Departmental Results Framework	Departmental Results: Canada's health research is internationally competitive	
	Indicator: Canada's rank among the Organization for Economic Co-operation and Development (OECD) nations on the citation score of related health research publications	
	Indicator: Percentage of funded research involving international collaborations	
	Indicator: Number of research projects funded jointly by CIHR and (an) international partner(s)	
	Departmental Results: Canada's health research	Indicator: Percentage of newly funded recipients who self-identify as women
		Indicator: Percentage of newly funded recipients who self-identify as visible minorities
Indicator: Percentage of newly funded recipients who self-identify as Indigenous Peoples		
Internal Services		

	capacity is strengthened	Indicator: Percentage of newly funded recipients who self-identify as persons with disabilities	
		Indicator: Percentage of research that addresses sex or gender considerations	
		Indicator: Percentage of total research investments in grants and awards addressing Indigenous health	
		Indicator: Percentage of funded research trainees reporting using their research knowledge in their current position	
	Departmental Results: Canada's health research is used	Indicator: Partner funding for research projects	
		Indicator: Percentage of CIHR-funded research cited in patents	
		Indicator: Percentage of grants reporting stakeholder involvement in the research process	
		Indicator: Percentage of research contributing to improving health for Canadians	

Program Inventory	Program: Investigator-Initiated Research
	Program: Training and Career Support
	Program: Research in Priority Areas

Supporting information on the program inventory

Supporting information on planned expenditures, human resources, and results related to the Canadian Institutes of Health Research’s program inventory is available on [GC InfoBase](#).^{xxxvii}

Supplementary information tables

The following supplementary information tables are available on the Canadian Institutes of Health Research’s [website](#):^{xxxviii}

- ▶ Details on transfer payment programs
- ▶ Gender-based analysis plus
- ▶ Horizontal initiatives
- ▶ Up-front multi-year funding
- ▶ United Nations 2030 Agenda for Sustainable Development and the Sustainable Development Goals

Federal tax expenditures

The Canadian Institutes of Health Research’s Departmental Plan does not include information on tax expenditures.

Tax expenditures are the responsibility of the Minister of Finance. The Department of Finance Canada publishes cost estimates and projections for government-wide tax expenditures each year in the [Report on Federal Tax Expenditures](#).^{xxxix} This report provides detailed information on tax expenditures, including objectives, historical background and references to related federal spending programs, as well as evaluations, research papers and gender-based analysis plus.

Organizational contact information

Mailing address

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TTY: 1-888-603-4178

Fax: 613-954-1800

Email: support-soutien@cihr-irsc.gc.ca

Website(s): www.cihr-irsc.gc.ca^{xl}

Appendix: definitions

appropriation (crédit)

Any authority of Parliament to pay money out of the Consolidated Revenue Fund.

budgetary expenditures (dépenses budgétaires)

Operating and capital expenditures; transfer payments to other levels of government, organizations or individuals; and payments to Crown corporations.

core responsibility (responsabilité essentielle)

An enduring function or role performed by a department. The intentions of the department with respect to a core responsibility are reflected in one or more related departmental results that the department seeks to contribute to or influence.

Departmental Plan (plan ministériel)

A document that sets out a department's priorities, programs, expected results and associated resource requirements, covering a three-year period beginning with the year indicated in the title of the report. Departmental Plans are tabled in Parliament each spring.

departmental result (résultat ministériel)

A change that a department seeks to influence. A departmental result is often outside departments' immediate control, but it should be influenced by program-level outcomes.

departmental result indicator (indicateur de résultat ministériel)

A factor or variable that provides a valid and reliable means to measure or describe progress on a departmental result.

departmental results framework (cadre ministériel des résultats)

A framework that consists of the department's core responsibilities, departmental results and departmental result indicators.

Departmental Results Report (rapport sur les résultats ministériels)

A report on a department's actual performance in a fiscal year against its plans, priorities and expected results set out in its Departmental Plan for that year. Departmental Results Reports are usually tabled in Parliament each fall.

full-time equivalent (équivalent temps plein)

A measure of the extent to which an employee represents a full person-year charge against a departmental budget. Full-time equivalents are calculated as a ratio of assigned hours of work to scheduled hours of work. Scheduled hours of work are set out in collective agreements.

gender-based analysis plus (GBA Plus) (analyse comparative entre les sexes plus [ACS Plus])

An analytical tool used to support the development of responsive and inclusive policies, programs and other initiatives. GBA Plus is a process for understanding who is impacted by the issue or opportunity being addressed by the initiative; identifying how the initiative could be tailored to meet diverse needs of the people most impacted; and anticipating and mitigating any barriers to accessing or benefitting from the initiative. GBA Plus is an intersectional analysis that goes beyond biological (sex) and socio-cultural (gender) differences to consider other factors, such as age, disability, education, ethnicity, economic status, geography, language, race, religion, and sexual orientation.

government-wide priorities (priorités pangouvernementales)

For the purpose of the 2023–24 Departmental Plan, government-wide priorities are the high-level themes outlining the Government’s agenda in the 2021 Speech from the Throne: building a healthier today and tomorrow; growing a more resilient economy; bolder climate action; fighter harder for safer communities; standing up for diversity and inclusion; moving faster on the path to reconciliation and fighting for a secure, just, and equitable world.

high impact innovation (innovation à impact élevé)

High impact innovation varies per organizational context. In some cases, it could mean trying something significantly new or different from the status quo. In other cases, it might mean making incremental improvements that relate to a high-spending area or addressing problems faced by a significant number of Canadians or public servants.

horizontal initiative (initiative horizontale)

An initiative in which two or more federal organizations are given funding to pursue a shared outcome, often linked to a government priority.

non-budgetary expenditures (dépenses non budgétaires)

Net outlays and receipts related to loans, investments and advances, which change the composition of the financial assets of the Government of Canada.

performance (rendement)

What an organization did with its resources to achieve its results, how well those results compare to what the organization intended to achieve, and how well lessons learned have been identified.

plan (plan)

The articulation of strategic choices, which provides information on how an organization intends to achieve its priorities and associated results. Generally, a plan will explain the logic behind the strategies chosen and tend to focus on actions that lead up to the expected result.

planned spending (dépenses prévues)

For Departmental Plans and Departmental Results Reports, planned spending refers to those amounts presented in the Main Estimates.

A department is expected to be aware of the authorities that it has sought and received. The determination of planned spending is a departmental responsibility, and departments must be able to defend the expenditure and accrual numbers presented in their Departmental Plans and Departmental Results Reports.

program (programme)

Individual or groups of services, activities or combinations thereof that are managed together within a department and that focus on a specific set of outputs, outcomes or service levels.

program inventory (répertoire des programmes)

An inventory of a department's programs that describes how resources are organized to carry out the department's core responsibilities and achieve its planned results.

result (résultat)

An external consequence attributed, in part, to an organization, policy, program or initiative. Results are not within the control of a single organization, policy, program or initiative; instead, they are within the area of the organization's influence.

statutory expenditures (dépenses législatives)

Expenditures that Parliament has approved through legislation other than appropriation acts. The legislation sets out the purpose of the expenditures and the terms and conditions under which they may be made.

target (cible)

A measurable performance or success level that an organization, program or initiative plans to achieve within a specified time period. Targets can be either quantitative or qualitative.

voted expenditures (dépenses votées)

Expenditures that Parliament approves annually through an Appropriation Act. The vote wording becomes the governing conditions under which these expenditures may be made.

Endnotes

- i Integrated Youth Services Network of Network Initiatives (IYS-Net), <https://cihr-irsc.gc.ca/e/52912.html>
- ii Canadian Research Initiative in Substance Misuse (CRISM), <https://cihr-irsc.gc.ca/e/44597.html>
- iii Women RISE, <https://www.idrc.ca/en/initiative/women-rise>
- iv National Women’s Health Research Initiative, <https://cihr-irsc.gc.ca/e/53095.html>
- v CIHR Strategic Plan 2021–2031, <https://cihr-irsc.gc.ca/e/52331.html>
- vi Clinical Trials Fund, <https://cihr-irsc.gc.ca/e/52987.html>
- vii Advisory Panel on the Federal Research Support System: Member biographies, <https://ised-isde.canada.ca/site/panel-federal-research-support/en/advisory-panel-federal-research-support-system-member-biographies>
- viii Canadian Institutes of Health Research, <https://www.cihr-irsc.gc.ca>
- ix Framework for diabetes in Canada, <https://www.canada.ca/en/public-health/services/publications/diseases-conditions/framework-diabetes-canada.html>
- x Pre-Announcement: CIHR-JDRF Team Grants: Precision Medicine in Type 1 Diabetes (Anticipatory), <https://cihr-irsc.gc.ca/e/52939.html>
- xi Pre-Announcement: Operating Grants in Diabetes, Psychosocial Health, Prevention and Self-Management (Anticipatory), <https://cihr-irsc.gc.ca/e/52938.html>
- xii Pre-Announcement: CIHR-JDRF Type 1 Diabetes Screening Research Consortium (Anticipatory), <https://cihr-irsc.gc.ca/e/53049.html>
- xiii Pre-announcement: Mental Health in the Early Years Implementation Science Team Grants, <https://cihr-irsc.gc.ca/e/52804.html>
- xiv Launched - Operating Grant: Psilocybin-assisted Psychotherapy for Mental Health and Substance Use Disorders, <https://cihr-irsc.gc.ca/e/51551.html>
- xv Action Plan: Building a healthier future for First Nations, Inuit, and Métis Peoples, <https://cihr-irsc.gc.ca/e/50372.html>
- xvi Setting new directions to support Indigenous research and research training in Canada 2019 - 2022 <https://www.canada.ca/en/research-coordinating-committee/priorities/indigenous-research/strategic-plan-2019-2022.html>
- xvii First Nations Biobanking and Genomic Research, <https://www.researchnet-recherchenet.ca/rnr16/vwOpprntnyDtls.do?launchMonth=3&launchYear=2022&next=1&prog=3635&resultCount=25&type=EXACT&view=search&language=E>
- xviii Award Programs and Other Health Research Training Initiatives, <https://cihr-irsc.gc.ca/e/50508.html>
- xix CIHR REDI Early Career Transition Award, <https://www.researchnet-recherchenet.ca/rnr16/vwOpprntnyDtls.do?prog=3798&view=currentOpps&org=CIHR&type=EXACT&resultCount=25&sort=program&all=1&masterList=true&language=E>
- xx CIHR’s Strategic Action Plan on Training, <https://cihr-irsc.gc.ca/e/50519.html>
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