
UT HEALTH INSTITUTIONS' PROGRESS TOWARD ANNUAL RESEARCH GROWTH RATE GOALS

The University of Texas System Strategic Plan 2006-2015 calls on its health institutions to “achieve an annual research growth rate of 3 percent or more above the growth rate of NIH funding.” In light of flat or declining federal support for NIH, the goal is best achieved in a two ways: (1) institutions increase their success at receiving limited NIH funding; and (2) further diversify sources of research funding.

At this time it is premature to determine whether UT System health institutions are on track to achieve this goal, but data from recent years does indicate that the institutions are well positioned. From 2002 to 2006 UT health institutions, based on reports to the Texas Higher Education Coordinating Board, have increased research expenditures by nearly 37 percent. During the same period the increase in NIH funding for all institutions of higher education was just over 18 percent (growth in all NIH awards for this period was 22%).

The total growth in research expenditures by UT System health institutions between 2002 and 2006 is impressive and the five year average for each institution (low of 6.55% to a high of 14.46%) has exceeded the five year average growth in NIH funding for all institutions of higher education (6.13%). These increases are promising, but the rates of success vary between institutions and significant challenges remain to see whether investments by UT System and the health institutions will succeed.

The doubling of the NIH budget from FY 1998-2003 led to an expansion of biomedical research across the nation and encouraged investments in research facilities and increases in the number of new faculty members.¹ This expansion of capacity now faces a NIH budget which increased by 3 percent in 2004, 2 percent in 2005 and 0 percent in 2006.² Meanwhile biomedical inflation in 2004 was 5 percent.³ The result nationwide has been increases in the number of applicants and applications for NIH funding and steady declines in the “success rates” (applications selected for funding / applications reviewed).

Because federal sources in general and NIH in particular represent a significant portion of the research expenditures at UT health institutions, federal budget pressures could influence the amount of future research funding available for the institutions. A key to exceeding the NIH growth rate in research expenditures is to capture a larger percentage of NIH funding, particularly as it relates to the NIH emphasis on basic research and technology development, translational research, and to a lesser extent clinical applications.⁴ Diversification of research support is another key to increasing research prowess. Private sector support is more likely for clinical applications and less likely to support basic research.

For FY 2004 nearly 63 percent of all research expenditures by UT health institutions were from federal sources. This percentage has declined slightly in recent years, down to 59 percent in FY 2006 and 57 percent in FY 2007, while the total research expenditures by UT System health institutions continues to increase. This can be viewed as a positive sign that the institutions are diversifying revenue streams without losing ground in federal funding.

¹ Investment in research facilities at U.S. medical schools for 2003-2007 is nearly triple the investment from 1990-1997.

² “NIH at the Crossroads: Strategies for the Future,” Elias A. Zerhouni, M.D., National Institute of Health.

³ Ibid.

⁴ Ibid.

