

Action Plan and Budget

2017

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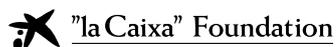
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A partnership of:



01 Presentation

The past year 2016 has been a year of positive change, marking a consolidation of the Barcelona Institute for Global Health's (ISGlobal) ability to meet the challenges of a globalised world and continue to grow and adapt since its foundation six years ago.

The greatest change we have experienced this year has been the finalisation of the merger with the Centre for Research in Environmental Epidemiology (CREAL), a ten year-old institution of excellence in advanced epidemiological research on environmental factors that affect human health. The merger of both centres into a larger ISGlobal with increased capacities is the result of a strategic alliance that started in 2013. As a result, ISGlobal has successfully consolidated a cutting-edge cluster of research expertise with capacity to address health challenges, including infectious diseases and non-communicable chronic diseases, with a strong focus on their environmental determinants.

This new and stronger institution benefits from the continuing support of key collaborative partners and patrons including Fundación Bancaria "la Caixa", Generalitat de Catalunya, the Government of Spain, Barcelona City Council, Hospital Clinic, University of Barcelona and Fundación Ramon Areces. In addition, since the merger has taken place the institution also benefits from the support of Parc de Salut Mar and Pompeu Fabra University.

The coming year 2017 will be full of challenges and opportunities for ISGlobal, and we will continue to work towards our goals and commitment to improving health and reducing inequalities around the world. This Action Plan for 2017 identifies the objectives and expected results for each area of the institution, and is developed in line with the Strategic Plan for the institution – the core around which we design our activities.

Throughout 2017, with the finalisation of the integration process of the two institutions, the new format of ISGlobal – with two campuses in Barcelona city, should prove to be ever more competitive with increased scientific production, more in-depth translational activities and global impact.

Indeed 2016 has been a year of changes internationally with the Olympics and a Zika epidemic impacting economies in Latin America and the Caribbean, elections in the USA, the decision by the UK to leave the EU as well as repeated elections at national level in Spain. In parallel, the UN General Assembly has seen an increased focus on topics of direct relevance to ISGlobal as an institution, including Sustainable Development Goals (SDGs), Antimicrobial Resistance and the United Nations Climate Change Conference, COP21 as well as the resulting Paris Agreement.

These external factors will impact national and international policies and funding available in 2017, although it is yet to become clear the precise implications. With these challenges, ISGlobal in its strengthened format will move forward as a united team with the mission to improve global health and promote health equity through excellence in research and knowledge translation.



**Dr. Antoni
Plasència Taradach**

**General Director
of ISGlobal**

02 Introduction

The Action Plan 2017 is part of a process of reflection and joint planning which involves all departments and areas of the institution. The objectives and expected results for each area are the result of an exercise of analysis of the results achieved so far and projected results for the coming year 2017.

As an institution, ISGlobal has grown significantly since its foundation in 2010, not least with the most recent changes due to mergers with the Centre for Research in Environmental Epidemiology (CREAL) in 2016, and the Barcelona Centre for International Health Research (CRESIB) in 2015.

This new paradigm requires a novel approach to activities planning, monitoring and evaluation across the institution in order to ensure good communications and consistency in approach.

Objectives of the document, implementation and monitoring

This document sets out the objectives expected to be achieved in 2017, in line with the vision, mission, values and the ultimate goal of the institution: improving global health and promoting health equity.

- **Objective 1.** Plan activities in different areas of ISGlobal 2017 (from January 1 to December 31).
- **Objective 2.** To improve internal quality in the processes for planning, monitoring and evaluation for ISGlobal activities.

Throughout the year, area leaders will monitor the implementation of the objectives and results provided in this document. To this end, a semi-annual report and a final report at the end of the year 2017 will be generated.

03. Areas

3.1. Research

Introduction to Area – Research

With the full merger of former CREAL (June 2016) and former CRESIB (June 2015) research has been integrated in a single structure including two Scientific Areas: 1) Communicable diseases and 2) Non communicable diseases and environment. Each scientific area includes the following research programs:

The SA of communicable diseases: 1) Malaria, 2) Maternal, child and reproductive health, 3) Chagas and other NTDs, 4) HIV/AIDS and TB and 5) Viral and bacterial infections and 6) Emerging activities. The SA area of Non communicable diseases and environment includes: 1) Child health, 2) Cancer, 3) Respiratory diseases, 4) Air pollution, 5) Water pollution and 6) Radiation. Synergies and cooperation between researchers of both areas is intensively promoted.

Innovation is a transversal area, closely linked to Research, Policy and Translation as well as Training and Development which supports knowledge translation to the field and fosters the development of additional high value capabilities and business lines. After completing the key actions agreed in the Strategic Basis 2016, the Innovation area is considering the priorities outlined below for the coming year.

The action plan for the research area follows the development of the planned activities in the Strategic Bases.

Objectives for 2017

1. Strengthen research in the existing areas of excellence, increasing the novelty and relevance of knowledge, technology and methods.
2. Identify and build on synergies between the areas of CDs and NCDs and Env.
3. Explore and develop new research areas.
4. Strengthen the partnership with the international platforms and other research centres.
5. Strengthen the role and resources for horizontal scientific services and identify areas for improvement.
6. Promote scientific excellence, leadership and internationalization.
7. Promote knowledge transfer and innovation, set up a team to provide internal support to ISGlobal on these matters as well as ensuring that PIs and initiative leaders are aware of the innovation support available.
8. Improve the network of innovation alliances and joint projects with relevant external parties.
9. Organize and implement an optimal scientific organization.

3.2. Global Development and Policy

Introduction to Area – Global Development and Policy

The Global Development and Policy department is structured in two complementary areas, ISGlobal will prioritise the strategies that have been decided during the last year in order to strengthen a model of translation from science into policy making and impact projects that need to be fine-tuned due to the integration of a twofold agenda (CD and NCD) of the former infectious disease portfolio and the new environment and health areas research.

As a Think Tank in policy throughout 2017, we will strengthen analysis through the scope of the new global health agenda framed by the Sustainable Development Goals (SDGs). For the first time, the ISGlobal **Policy department** will go beyond publications of robust proposals and recommendations relating to infectious diseases, and will also examine new challenges in climate and environment as determinants of health, as well as equity as a new parameter to decide priorities. ISGlobal will reinforce this component through multidisciplinary analysis to support the institutional initiatives and research areas, as well as introducing the SDGs as a leverage for further actions.

In the **Global Development department**, challenges in 2017 include defining a bespoke model which will be shared internally to ensure the department expands ISGlobal activities beyond science to achieve impact through development projects. This will be a priority through the ISGlobal initiatives and new opportunities that might reinforce our capacity to develop new projects including technical assistance in areas of ISGlobal knowledge. At the same time, this area will also prioritise development capacities through the platforms, including the creation of a regional observatory for North Africa, one of the results expected for 2017. For Mozambique and Bolivia priorities are fixed on the capacity to assure their sustainability, exploring new sources of support. With this in mind, during 2017 ISGlobal will reinforce the links at the EU level in order to find partners and funding capacities at the level of development. Similarly, ISGlobal continues to build networks and participate in consultations in order to promote integration of institutional priorities (both development and scientific) at EU level.

Last, not least, the existing advocacy grant provided by the Gates Foundation will end in January 2017, coinciding with the formation of a new government in Spain and pressure to increase ODA is on the rise. As such, ISGlobal Global Development and Policy department aims to renew the Gates funded advocacy grant to be sure that this strategic area of action continues to form part of the department's strategy.

Global Development Objectives for 2017

1. **Communications:** strengthening the communication actions (internal and external) in the area of Global Development.
2. **EU and USA:** open opportunities; improve donor engagement, participate in consultation processes on research policy planning (EU, USA and country level).
3. **Migrant health:** implement and consolidate the strategy of migrant health in Morocco and to start the regional process.

03. Areas

4. **Platforms:** promote translation activities (or actions) in each ISGlobal platform (Mozambique, Bolivia and Morocco).
5. **Initiatives:** coordination with the ISGlobal initiatives to implement translation activities.
6. **New action models:** strengthen and develop new action models in coordination and linked with all the areas in ISGlobal.
7. **Advocacy:** promote the commitment of government officials towards increasing the percentage of the Gross National Income devoted to Overseas Development Assistance, increasing also the percentage devoted to health, and enhancing the quality of aid including the funding to multilaterals on Global health.

Policy Objectives for 2017

1. To position ISGlobal as a relevant player in the global debate on SDGs and health.
2. To consolidate and make sustainable our current strategy on the reconsideration of the model of pharmaceutical innovation and access to medicines.
3. To continue underpinning ISGlobal's advocacy strategy on the Spanish and European cooperation models.
4. To provide strategic support to the scientific initiatives.
5. To underpin ISGlobal's communication and development strategies by providing policy contents and exploring new policy communication tools.
6. To guarantee a pipeline of policy products and publications (off and online) in order to sustain our strategy.

3.3. Education and Training

Introduction to Area – Education & Training

Since its creation in 2010, the Education & Training Department at ISGlobal has grown and expanded the offer of postgraduate (master and PhD) programmes, short courses, and capacity strengthening projects. In the last two years, we achieved to project our education & training activities at international level with a considerable increase in the number of foreign students attending our postgraduate programmes and short courses.

In 2016 we achieved the integration of CREAL and ISGlobal, and in 2017 we wish to integrate education and training programmes/courses in the area of public health, NCDs and environmental epidemiology with the already existing in global/international health.

The Education & Training Department is committed to reinforce education & training activities in the context of the initiatives, contribute to the new institutional PhD programme, support internal training of our researchers and supporting staff, and engage in academic activities for the local, national and global institutional development of ISGlobal.

Objectives for 2017

1. Expand the international projection of ISGlobal through its postgraduate education programmes and capacity strengthening projects.
2. Integrate education & training programmes/courses in the area of NCDs and environmental health.
3. Contribute to the deployment of the new ISGlobal PhD Programme.
4. Reinforce the education & training activities in cross-collaboration with ISGlobal initiatives.
5. Contribute to the academic activity developed in the context of ISGlobal as university research institute of UB and UPF.
6. Support the institutional development of ISGlobal at local, national and international level.
7. Support the internal training programme developed with the area of HHRR.

04. Global Initiatives

4.1. Chagas Disease

Introduction to Area – Chagas Disease

Chagas disease (CD) is caused by the parasite *Trypanosoma cruzi* and is one of 17 recognized neglected tropical diseases. Updated findings published in 2015 estimate that between 6 and 7 million people worldwide have *T. cruzi* infection and that 25 million remain at risk of infection. Originally limited to Latin America, CD is now a global health problem as a result of migration flows from traditional endemic zones. In Spain alone, between 48,000 and 87,000 persons are estimated to have CD.

An important achievement for the programme has been to obtain the Bolivian project entitled: Fortalecimiento del Programa Nacional de Control de Chagas para el manejo integral de la enfermedad en Bolivia (Convenio 10-CO1-039), funded by AECID. Through this project, we have initiated a model of comprehensive care of patients with chronic Chagas disease in order to: improve access to diagnosis and treatment; train health professionals; and create a joint scientific platform for research on Chagas with CEADES. In 2015 we have started the second phase of the project, aiming to involve primary health centres in the model of care for patients with chronic Chagas disease. In this sense, in Bolivia, we have established a team able to conduct clinical trials (3 until now) with new drugs for Chagas diseases.

The initiative coordinates: the NHEPACHA network, a Latin-American network focused on the discovery of biomarkers of therapeutic response after an anti-parasitic treatment in patients with Chagas disease; and the Chagas Coalition. The Chagas Coalition's mission is to implement a global advocacy program that will increase awareness of Chagas disease through increased political commitment by Chagas-affected policy makers calling for increased access to treatment, the commitment of funds for Chagas disease programs (including treatment) and Research & Development programs. Coalition Founding Partners include: DNDi, Fundación Mundo Sano, ISGlobal, CEADES, Sabin Vaccine Institute, and the National School of Tropical Medicine at Baylor College of Medicine.

ISGlobal has signed a collaboration agreement with The Health department of Catalonia to give support to the screening program of Chagas disease in the antenatal care Units. In this framework ISGlobal has given support in the last year to the Health Department of the Catalonian government in the Chagas disease screening program through capacity building actions and collaborating in the revision of the protocol of such program.

Objectives for 2017

1. Consolidate existing research lines and promote new lines of research focused on the interactions host-parasite and identified Research priorities for CD (*see priority R&D lines detected at the end of 2015 in Chagas Initiative Strategic meeting*)
2. Consolidate and expand the Platform model of integrated CD care
3. Provide scientific evidence relevant for impacting health policies on CD
4. Consolidate and expand the training offer for CD

4.2. Maternal, Child and Reproductive health

Introduction to Area – Maternal, Child and Reproductive health (RMNCH)

Recognizing that the status of women and the biological differences expose them to greater inequities and risks to their health and that the health of women is also an effective entry point for other health interventions that fundamentally affect their children, ISGlobal established in 2012 Initiative on Maternal, Infant and Reproductive (MCRH or SAMIR in Spanish). Moreover, after the conclusion of the MDGs in 2015, improving maternal and neonatal health are two issues most lagging behind. In the current context of the new SDG agenda that has included new and more ambitious targets such as ending epidemics of HIV, TB and malaria and all preventable maternal and child deaths – all with a greater focus on equity, the aim of the initiative is to contribute to improve the health of women and the most vulnerable children in middle and low income countries, through its different areas of activity (i.e. research, training, analysis and technical assistance). The MCRH initiative is led by Dr. Clara Menéndez and coordinated by Anna Lucas. Doctors Azucena Bardají and Quique Bassat provide technical support since its inception. Other ISGlobal researchers are also linked through research projects in the initiative priority areas.

Objectives for 2017

1. Undertake and strengthen R&D in maternal, newborn, child and reproductive health (RMNCH), with focus on:
 - Malaria in pregnancy
 - Determination of causes of death
 - HIV
 - Zika
 - Maternal Immunization
 - Anaemia
 - Environmental health
2. Disseminate RMNCH evidence generated in decision-making forums to inform/influence policies
3. Consolidate and expand the existing training in RMNCH
4. Increase visibility and awareness RMNCH issues among different audiences
5. Undertake technical assistance, consultancy and analysis on RMNCH issues

04. Global Initiatives

4.3. Antimicrobial Resistance

Introduction to Area – Antimicrobial Resistance (AMR)

Bacteria become resistant to antibiotics either by mutations in specific genes or acquisition of genes encoding resistant determinants transferred from one bacterium to another. Nowadays, the use and abuse of antibiotics can easily select these resistant pathogens, increasing the prevalence of multidrug resistant (MDR) bacteria. A recent report published by Lord Jim O’Neill indicate that annually over 700,000 people die worldwide due to infections caused by MDR pathogens, and it is predicted that this number will achieve 10 million deaths by 2050 unless new policies and actions are implemented. Resistance to antibiotics has become a threat to public health all over the world. A One Health approach is needed to tackle this problem, as it is not only limited to humans; antibiotics are importantly used to prevent infections in the animal industry and are even used as “growth promoters” for fattening in some countries, further increasing the problem of resistance.

In the last years the number of available antimicrobial agents active against resistant bacteria has decreased, reducing the therapeutic options to treat infections due to MDR bacteria. Although MDR bacteria are mainly causing infections in the hospital, the figures regarding infections caused by MDR bacteria in the community are increasing. When resistance to first-line drugs increases, infections last longer and become more expensive to treat, with hospitalization required in many cases. This situation increases health costs and poses a serious risk to the progress made in global health by countries, communities and individuals in the past decades.

Objectives for 2017

- 1. Research and Development (R&D):** Our main goal on 2017 regarding the research area is to obtain new funding sources for the research group in order to develop innovative research lines as well as being able to continue the lines already established. Another of the objectives of 2017 will be to constitute a spin-off focused on three aspects: 1) discovery of new antibiotics and new biomarkers for improving diagnostics, 2) set up a new delivery method of intestinal microbiota for multiple applications 3) establish a portfolio to provide different tools and services to the pharmaceutical & biotechnological industry.
- 2. Policy and Global Development (P&GD):** We plan to contribute to define an antimicrobial resistance mapping in areas where there is a lack of information, particularly in low and middle-income countries (LMICs). In this context, we plan to establish the basis for the development of a standardized surveillance system in LMICs as in Morocco through the Mediterranean Health Observatory, for tracking and monitoring antibiotic resistance.
- 3. Training and Dissemination (T&D):** We plan to organize some activities addressed to professionals in the field of microbiology and AMR (Summer School, International Symposium), others addressed to the general public (workshops at “Science Events”, actions in pharmacies, supervision of “Treballs de Recerca” at High Schools) and to scientific journalists.

4. **Communication (Com):** A brochure of the AMR Initiative need to be defined. Moreover, computer graphics and educational guides in the context of the training activities will be required to support them.

4.4. Malaria Elimination

Introduction to Area – Malaria Elimination

The Malaria Elimination Initiative at ISGlobal is devoted to advancing the elimination of the malaria parasites through the generation of relevant scientific evidence and the incorporation of novel knowledge into local and international health policies. It is also engaged in training the human resources in charge of leading elimination programs in the field, and it contributes to advocating for the goal of malaria elimination at the national, regional and global levels, from the highest political instances to the civil society.

The Malaria Elimination Initiative works within an international context increasingly demanding scientific evidence to support malaria elimination programs, and the emergence of new challenges in the field of vector borne diseases that makes necessary the integration of vector control strategies.

Within ISGlobal, the initiative works in close collaboration with the different areas, including Research, Training and Policy & global development, providing an umbrella to all activities related to the field of malaria elimination. It is responsible for identifying and putting in place new projects that are likely to have a real impact in the clearance of malaria parasites in determined geographical regions, and leads the establishment of institutional collaborations with key stakeholders, including national governments, international organizations and research institutions.

Besides its tasks of internal coordination, launching new projects and setting priorities, the Malaria Elimination Initiative coordinates two key initiatives: the pilot study in Southern Mozambique to define best strategies to eliminate malaria in a highly endemic scenario, and the Malaria Eradication Scientific Alliance (MESA), a platform dedicated to the advancement and sharing of scientific evidence to achieve malaria eradication.

The initiative leads the establishment of key partnerships and is deeply involved in global discussions on the malaria eradication landscape, including when, where and how the international community should engage in a global eradication program. It also coordinates the ISGlobal activities that makes this institution a World Health Organization Collaborating Centre for Malaria Control, Elimination and Eradication, and participates in a variety of technical advisory committees to ensure that elimination strategies are based on the best available evidence.

04. Global Initiatives

Objectives for 2017

1. Generate scientific evidence relevant to malaria elimination, conduct analysis of key questions across the field and ensure its synthesis is openly available to the malaria community.
2. Facilitate the incorporation of best available evidence into malaria national and international policies, provide technical support and analyse relevant lessons from malaria and other diseases elimination and eradication experiences.
3. Generate interest in malaria elimination and facilitate the search for novel funding sources.
4. Contribute to the training and capacity building of the next generation of leaders.
5. Contribute to the international goals related to malaria elimination through strategic alliances with international partners.

4.5. Urban Health

Introduction to Area – Urban Planning, Environment and Health Initiative

By 2050 nearly 70% of the world's population will live in urban areas, representing the largest urban growth in human history. Health is an indicator of and a prerequisite to sustainable development. Natural disasters, epidemics and climate change highlight the intertwined existence of humans and their environment, nowhere more so than in cities. Cities can be leaders in tackling problems such as high air pollution and noise, heat island effects, lack of green space and sedentary behaviour. ISGlobal has created the Urban Planning, Environment and Health Initiative. The initiative brings together experts, practitioners and decision-makers across sectors to address the challenges posed by urbanisation, putting health and **wellbeing** at the centre of urban development. Through research, advocacy, policy and capacity building the Urban Planning, Environment and Health Initiative engages with key stakeholders and the public for transformative action and impact in society.

Objectives for 2017

The Objective for 2017 is: Develop a new initiative on Urban Planning and Environment and Health, leading a new proposal for bringing the initiative to the global level, with the following goals:

1. Translate scientific evidence to make it accessible and relevant for policy and decision making.
2. Create a community of practice among urban and transport planners, health professionals, and economic and environmental specialists to create common language and criteria across sectors.
3. Foster innovative tools and approaches to address health challenges posed by urbanisation.

4. Engage with the public and other key stakeholders inform priorities and ensure uptake of our work.
5. Build capacity through education and training programs to train current practitioners and future leaders.

05. Cross-cutting Areas

5.1. Communications

Introduction to Area – Communications

The external communications department is conceived as a cross-cutting area that supports all the Institute areas with the aim of achieving the greatest impact of ISGlobal activity. Much of the work of the External Communications area is carried out on the Web, where throughout the year we publish a constant number of news items, blog posts and other contents such as graphic material and data visualisations, on the research and translation activity generated by the Institute. Moreover, the external communication area interacts with mass media (news-papers, radio and television) to better translate the knowledge generated in the Institute to scientists, politicians, and society in general.

As a consequence of the merger of ISGlobal and CREAL during 2016, in 2017 the communication channels and tools of the two centres will be totally integrated and we will all share one same communicative culture.

Objectives for 2017

1. To harmonize the communicative culture on both campuses.
2. To strengthen our brand as a reference research and translation centre with a global focus.
3. To increase the visibility of the Initiatives and support them to achieve their communications objectives.
4. To contribute to the Institute's fundraising campaigns.
5. To consolidate ISGlobal's audio-visual archive.
6. To enhance ISGlobal's contacts database.
7. To ensure the public visibility of ISGlobal's trustees.

5.2. Administration

Introduction to Area – Administration

The Administration area in ISGlobal works to add value not only to the day to day work of the institution, but also contributes to strategic decision making.

Since mid-2016, the integration of two management structures in Campus Mar and Campus Clinic has been ongoing, and 2017 will see that process continue. A significant quantitative increase in the volume of managed funds has recently occurred, and the management of these changes as well as other challenges will be tackled during 2017, including for example the unification of information systems, office-space management and Human Resources. Unified procedures and fluid administration across two campuses will **add value to the work of ISGlobal** while offering **improved support** for the different areas of the institution throughout 2017.

High quality financial information is key to decision making at institutional level and remains a core aspect of the Administration area's work. The development of processes and tools for the integration of the two campuses is essential to ensuring the objectives for the Administration area are achieved. With this in mind, there will be a focus in 2017 on the implementation of a unified IT system and the roll out of the new projects office design.

Objectives for 2017

1. Ensure high quality financial information for 2017, for researchers, directors, trustees for the process of budgeting, implementation of work and reporting.
2. Implement the EU Human Resources Strategy HRS4R, development of a clear career track for non-academic staff, implementation of the Gender Plan, promote internal training and facilitate improved internal communication.
3. Optimise fund sourcing and project management, through more diversification of funding sources, greater capacity to apply for international grants at institutional level, ensure project management policies and procedures are integrated across two campuses.
4. Implement a state of the art information and communication technology (ICT) infrastructures and system, by integrating a single IT system for both campuses, implement personal data protection procedures and develop a unified intranet for both campuses.
5. Improve current office and laboratory spaces and infrastructure, and identify possible new spaces.

5.3. Institutional Development

Introduction to Area – Institutional Development

ISGlobal is now entering a new phase as an institution with a global reputation in different areas having successfully integrated with CREAL and CRESIB over the last two years.

Governance mechanism have been adapted to the new design of the institution and changes will continue throughout 2017 to ensure successful implementation of elements such as an Academic Committee, an adaptation of the International Council on Global Health and the Scientific Advisory Board.

In order to ensure that approaches are in line with the institutional Strategic Plan for the next five year period, Institutional Development planning will be adaptable and will include a review of the Annual Action Plan and its Monitoring and Evaluation.

A matter of central importance to the institution is the diversification of funding sources, this ongoing process will continue throughout 2017 with the aim of reducing reliance on competitive funding. It aims to promote new mechanisms especially oriented private sector fundraising.

The objectives in terms of institutional development during 2017 will focus on three areas:

Objectives for 2017

1. Develop governance mechanisms.
2. Maintain and improve the planning system and ISGlobal annual monitoring.
3. Diversify sources of non-competitive funding for all areas.
4. Develop a five year Strategic Plan.

06. Budget

The following table shows the budget of expenditure for 2017:

EXPENDITURE	P-2017
Administration and infrastructure	2.698.843
Research	3.034.849
Global Policy	259.299
Training	201.401
Global Development	192.390
Global Health Initiative	1.260.344
Communications	239.489
Projects	15.527.542
GRAN TOTAL	23.414.158

Expected income for 2017 is of 23.414.158 euros, coming 33 % from ISGlobal Trustees contributions and 67 % from competitive funding, as shown in following table:

	P-2017
TRUSTEES	7.886.616
COMPETITIVE PROJECTS	15.527.542
TOTAL	23.414.158

Fundació Bancària la Caixa is the principal Trustee in terms of funding, assuring through its commitment the core expenses and running costs of the institution.

TRUSTEES	P-2017
Private (Fundació Bancària La Caixa)	4.000.000
Public (Various)	3.886.616
TOTAL	7.886.616

The main funder for competitive projects in 2017 is the European Commission, followed by Bill and Mellinda Gates Foundation and different US federal funders.

COMPETITIVE FUNDING	P-2017
EUROPEAN COMISION	8.796.268
BMGF	3.712.672
NIH-CDC	1.277.301
ISCIH	705.311
MINECO	281.897
AGAUR	102.523
OTHERS	651.570
TOTAL	15.527.542

