HRB
Health
Research
Board

Annual Report 2025

Research. Evidence. Action.

Contents

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Copies of this report can be obtained from:
Health Research Board
Grattan House
67–72 Lower Mount Street
Dublin 2
D02 H638
Ireland

t 353 1 234 5000
f 353 1 661 2335
e hrb@hrb.ie
w www.hrb.ie

Outcomes and impact in 2025

€50.7m
overall investment, including co-funding worth €19.8m

€20.7m
invested in 10 European Joint Awards (including €14.6m in co-funding from European funding agency partners)

€10.4m
invested in 36 projects and programmes

€5.4m
invested in 7 clinical trials and intervention-related awards

912,618
live records on LINK online data system

3,477
active users on LINK

34
awards with co-funding/ co-investment

179
awards made across 22 host institutions and research performing organisations

92
committee members supported across 5 National Research Ethics Committees (NRECs) delivering 490 ethics opinions

106
number of Oireachtas debates which mentioned the HRB

8 HRB reports

11 peer-reviewed journal articles

18
evidence products delivered to the Department of Health, comprising 5 evidence reviews, 11 evidence briefs, 1 search and screen of peer-reviewed literature and 1 evidence highlight

Chair and Chief Executive's report

Gráinne Gorman
Chief Executive

Dr Tracy Cunningham
Chairperson

2025 was the final year of our Strategy 2021–2025, *Health research – making an impact*, and marked the culmination of five years of focused delivery.

Over that time, the Health Research Board (HRB) has grown in scale and ambition, investing more than €250 million in health research projects and clinical trials infrastructure, leveraging an additional €264 million, and supporting more than 600 skilled research posts.

As a result, research has been integrated into national policies and strategies in areas such as mental health, cancer, palliative care, genomics, rare diseases and drugs. It has also influenced key public health legislation in the areas of alcohol, gambling and e-cigarettes.

Advancing research excellence

We sustained this impact in 2025, investing €50.7 million in health research, including co-funding of €19.8 million. We made 179 awards across 22 host institutions and research performing organisations.

€20.7 million was invested in 10 European Joint Awards, including €14.6 million in co-funding from European funding agency partners, with €10.4 million invested in 36 projects and programmes.

Strategic investment

Our investments are focused on translating research and data into real impact for patients, the public and society – keeping people at the heart of all that we do.

2025 priorities included supporting clinical trials and infrastructure; deepening the integration of public and patient involvement (PPI) in research; strengthening Ireland's evidence synthesis capacity; investing in mental health research; and developing the next generation of health researchers.

Supporting ethical and regulatory standards

The HRB continued to play a lead role in research governance, ethics, and quality through the work of the National Office for Research Ethics Committees and the Secretariat for the Health Research Consent Declaration Committee (HRCDC). In 2025, the National Office for Research Ethics Committees supported 92 National Research Ethics Committee (NREC) members to review a total of 490 ethics applications.

The National Office deepened Ireland's engagement with Europe. It also strengthened Ireland's position as a collaborative research partner, one example being participation in a pilot project to accelerate the coordinated assessment and authorisation of clinical trials.

International collaboration

Global health challenges require international collaboration. In 2025, the HRB strengthened its engagement in European and international partnerships. This included supporting Irish researchers to access competitive funding through Horizon Europe and EU4Health. We worked with policy-makers to advance shared European and global health priorities, including compliance with the European Health Data Space (EHDS) Regulation and participation in the Health Data Access Body (HDAB).

Evidence for policy and practice

In 2025, our Evidence Centre delivered 18 evidence products to the Department of Health to support health and social care policy.

The evidence and gap map review that identified key gaps in women's health research nationally and globally helped inform the Minister for Health's announcement of €2 million for a dedicated HRB women's health research award.

Turning data into action

Our National Health Information Systems (NHIS) continued to provide robust data and insights to inform national policies and services in the areas of drugs and alcohol, disability, homeless deaths, and mental health. We published eight HRB reports in 2025 and responded quickly to the introduction of Sláintecare's Health Service Executive (HSE) health regions, delivering timely, region-specific data to inform service planning, policy and funding priorities.

Organisational excellence

To deliver our goals, we rely heavily on our Corporate Operations team, who continued to provide a strong foundation of professional expertise and guidance across human resources, governance, communications, facilities, information technology, and finance.

Advancing together

Our achievements in 2025 were made possible by the commitment, expertise and dedication of our staff, together with the valued leadership of our Board and committees, and in partnership with our research community. We extend our sincere thanks to everyone who contributed to the organisation's success this year.

Looking ahead to 2026, we look forward to delivering a new strategy, and building on strong partnerships and shared ambition to advance Ireland's health research agenda.

Snapshot of HRB activities 2025

Tralee students win HRB special prize at BT Young Scientist and Technology Exhibition 2025

Ciara, Saoirse and Laoise Murphy, sisters from Presentation Secondary School in Tralee, won the HRB Special Award, and the overall competition prize, for their medical assistance app ACT (Aid Care Treat), designed to support emergency healthcare responses. "The vision and goal is to aid, care and treat a patient in the event of a medical emergency whilst also providing critical data, personal and medical info, as well as geolocation information, directly to emergency services," Ciara said.

Highlighting trends in drug treatment demand

HRB figures show that 13,295 cases were treated for problem drug use in Ireland in 2024, which is the highest annual number recorded to date. Data from the HRB bulletin *Drug treatment demand in Ireland 2024* also show that cocaine remains the main problem drug, accounting for almost half of cases that are new to treatment.

Communicating evidence for policy

The HRB implemented a themed approach to communications focused on Evidence for Policy during 2025. Activities included webinars, a new podcast series, blogs and a national conference.

Identifying gaps in women's health research

A HRB report identified substantial gaps in global and national research into conditions affecting women, including early pregnancy loss and mental health after childbirth. Lead author, Dr Jane Murphy, said: "These findings underscore the clear need to strengthen the evidence base for conditions that have a profound impact on women's lives but remain under-researched."

HRB reports highest alcohol treatment figures in over a decade

Key findings from the HRB report *2024 Alcohol Treatment Demand* show that 8,745 cases of problem alcohol use were treated in 2024, the highest number in over 10 years. The report also found that cocaine remains the most common additional drug used alongside alcohol and that the number of people using cocaine with alcohol has trebled since 2017.

€50,000 awarded for impact in health

The HRB Impact Award 2025 was presented to Professor Andrew Murphy of the University of Galway, recognising his lifetime contribution to primary care research and chronic disease management. His work across the past 25 years has strengthened evidence-based care, informed policy development and improved patient outcomes.

HRB awards €3 million for mental health research

The investment announced by the Minister for Mental Health, Mary Butler, will support the establishment of a new all-island Collaborative Research Network in Mental Health, CO-PRIME (Co-producing and Promoting Research & Innovation in Mental Health). The funding also supports 10 new mental health research projects that focus on priority or underserved groups.

HRB National Conference

Bringing together policy-makers, practitioners and researchers, and with a special address from the Minister for Health, Jennifer Carroll MacNeill, the HRB National Conference explored the theme of advancing evidence-informed policy for health and social care in Ireland. Speakers highlighted the importance of strengthening evidence-informed decision-making, and the need for a robust evidence ecosystem.

Disability services in Ireland

Data from our National Ability Supports System's (NASS) annual bulletin, *An overview of people engaging with disability services 2024*, show a continuing need for residential services, and highlight the ageing profile of carers. More than 2,000 adults living with a disability were identified as requiring a residential place. More than 16,000 adults living with a disability reported having a primary carer; of these carers, 4 in 10 were aged 60 years and over, almost one-third were aged 70–79 years, and one-tenth were aged 80 years and over.

HRB hosts the National Drugs Forum

The National Drugs Forum explored how quality standards, assurance methods, and evaluation tools support continuous improvement in drug services. The event was opened by the Minister for Public Health, Wellbeing and the National Drugs Strategy, Jennifer Murnane O'Connor.

Fulbright awards support research and innovation

The HRB, in collaboration with the Fulbright Commission, awarded three Fulbright-HRB HealthImpact Awards to Dr Lisa Kiely (University College Cork), Professor Ronan Cahill (University College Dublin) and Dr Susanne O'Reilly (St Vincent's University Hospital). These awards support Irish professionals to undertake research or professional development in the USA.

Horizon Europe success

Ireland has performed strongly under Horizon Europe, the European Union's flagship research and innovation programme, securing more than €1 billion in funding since the programme's launch in 2021. Almost €100 million of Ireland's drawdown has been awarded to health-related projects. As host to a Horizon Europe National Contact Point and the National Delegate for Health, the HRB plays a central role in helping health and social care researchers in Ireland access this funding.

Invested €6 million to strengthen the use of evidence in healthcare decision-making through our Capacity Building in Evidence Synthesis Award. This included investment of €1.5 million from Health and Social Care Research and Development (HSC R&D) Northern Ireland.

A HRB report showed that there were 128 deaths among people who were homeless at the time of death in Ireland in 2021. 86% percent of those who died had a history of problem substance use and 34% had a mental health issue.

Awarded €1 million for research to inform the three key policy areas of secondary stroke prevention, medical workforce planning, and home support services through our Evidence for Policy Programme in collaboration with the Department of Health.

Launched a €2 million call for research projects aimed at improving women's health. The funding was announced by the Minster for Health, Jennifer Carroll MacNeill, and is a response to major gaps identified in women's health research.

Published an evidence review examining the impact of interventions to reduce sunbed use. The review highlighted the need for a combination of education and regulation interventions to effectively reduce use.

An HRB-led study using data from the National Psychiatric Inpatient Reporting System shed light on inpatient psychosis admissions in Ireland, supporting the development of early intervention approaches.

Launched *The Health Research Podcast*, which explored a range of topics around how evidence can shape real-world decisions.

The National Office for Research Ethics Committees, a unit within the HRB, marked its milestone fifth-year anniversary. It was established in 2020 as a key component in the reform of the research ethics committee framework in Ireland.

The HRB was involved in a national study on eating disorder admissions for young people which revealed a 121% rise in hospital admissions among those aged under 18 years across the period 2018–2022.

Funded €2 million in collaborative research through the HRB's Collaborative Research Networks Scheme in order to strengthen palliative care and dementia research. HSC R&D Northern Ireland contributed €250,000.

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Key deliverables in line with corporate strategy 2021–2025

The HRB is Ireland's lead public funding agency supporting innovative health and social care research.

As outlined in the HRB's *Strategy 2021–2025: Health research – making an impact*, our vision is for better health through excellent research, data, and evidence, and our mission is to support research that improves people's health, promotes evidence-informed care, and creates solutions to societal challenges.

Core elements of the HRB strategy also detail our commitment to placing people at the heart of everything we do, as led by our values as an organisation: leadership, independence, accountability, quality, responsiveness, collaboration, and inclusiveness.

In order to achieve this, our strategy describes six strategic objectives that guide our activities. This annual report highlights key achievements during 2025 in line with these objectives, and showcases examples of significant outcomes and successes.

Core elements of HRB strategy 2021–2025

Strategic Objective 1

Research that makes a difference

Research enables advances in health and social care that make a real difference to people's lives. The HRB is committed to investing in research that delivers value for health, the health system, society, and the economy.

We do this through a strategic, well-balanced funding portfolio that responds to real-world needs; collaborating with partners to address challenges and drive innovation in our health system; and supporting meaningful involvement of patients, carers, and the public in research. This ensures that HRB-funded research is applied in practice and contributes to better outcomes for Ireland and its people.

Key items delivered:

- Opened a new call for Investigator-Led Project grants to support innovative and internationally competitive projects in the areas of patient-oriented research, population health research, and health services research. The call received a particularly high number of applications (146), an increase of 34% compared with the previous round.
- Continued to collaborate with Health Research Charities Ireland (HRCI) by opening a new call for HRCI-HRB Joint Funding Scheme grants. Nine HRCI member charities participated in this round.
- Included the public voice in HRB funding decisions by securing more than 500 public reviews across 8 funding initiatives, and by having an equal number of PPI and scientific panel members in one of our grant selection panels. The HRB also provided five training workshops for public reviewers.

- Awarded a grant of €10 million for the next 5-year phase of the PPI Ignite Network: €7.3 million comes from the HRB, with €2.7 million in co-funding coming from lead sites. In 2026, the PPI Ignite Network will expand from 7 to 11 lead sites.
- Continued our work as a member of the Coalition for Advancing Research Assessment (CoARA) by participating in the Improving Practices in the Assessment of Research Proposals Working Group and the CoARA National Chapter of Ireland. We also brought together activities in responsible research assessment by publishing the first HRB CoARA Action Plan. We systematically monitored and publicly reported progress against the plan.
- Secured approval from the Department of Health (DoH) to procure a new grant management system and ran the associated tender process. The system will bring new efficiencies and functionality for internal and external users and is expected to go live in late 2026.
- Invested in six new Applied Partnership Awards, supporting research projects that we co-funded with organisations such as the Central Remedial Clinic, the National Screening Service, the Irish Blood Transfusion Service, and the HSE.
- Launched a competitive call for a new national network in mental health in line with the national mental health research strategy, *Sharing the Vision: A Mental Health Policy for Everyone*, published in 2024, and awarded €1 million to the successful applicants. CO-PRIME is the new all-island network that will support the coordination of research, build research capacity, embed lived experience within research projects, and ensure that research findings translate into real-world impact.
- Awarded €2 million to 10 new projects through the Applied Partnership Awards in order to further expand the scale and scope of mental health research. The projects range from the implementation of timely youth mental health interventions and improving outcomes for children in care, to supporting mental health and well-being among people living with multiple sclerosis and older people living with human immunodeficiency virus (HIV).
- Funded three new projects in secondary stroke prevention, medical workforce planning, and home support services through the second round of the HRB's Evidence for Policy (EfP) Programme. The Programme aims to respond directly to priority research questions from policy-makers, generating high-quality evidence in a rigorous and transparent way.

- Co-designed and announced a new round of Applied Partnership Awards in collaboration with the Women's Health Taskforce in the DoH, making more than €2 million available to fund research projects focused on women's health.
- Analysed and reported on outputs, outcomes, and impacts of HRB investments based on the first 2 rounds of submissions to Researchfish, drawing on data from more than 470 grants and representing inputs from more than 300 principal investigators.
- Funded five new Investigator-Led Clinical Trials Programme grants, which aim to deliver high-quality evidence on the efficacy, effectiveness, cost, and broad impact of drugs, devices, technologies, programmes, or services.
- Participated on the research subgroup chaired by the National Cancer Control Programme in order to advance cancer research in support of the National Cancer Strategy. Building on our previous exercise analysing national cancer research expenditure by research funders in Ireland from 2019 to 2022, we conducted a review of cancer research investments from European Union (EU) funding in Ireland from 2019 to 2022 using the United Kingdom's (UK's) Health Research Classification System (HRCS). This analysis will be shared in 2026.

Case Study 1

Strengthening PPI in health research

The HRB is scaling up the PPI Ignite Network to build national capacity for high-quality PPI through a renewed funding commitment.

The HRB is leading a €10 million investment in the PPI Ignite Network, increasing capacity and skills for high-quality, meaningful PPI in health and social care research in Ireland.

Building on previous investment, this five-year funding programme will expand the Network's reach and further embed PPI across the Irish health research system.

It will help ensure that the voices of people with lived experience are heard, making research more inclusive, relevant, and ultimately more impactful.

PPI is an essential element of high-quality health and social care research. It ensures that patients and members of the public are involved in shaping research, from planning through to delivery and implementation.

An active partnership between public, patients and researchers ensures that research reflects the needs and experiences of those it is intended to benefit, and it provides a strong evidence base to inform policy and healthcare decision-making.

All-island collaboration

The PPI Ignite Network is an all-island collaboration of universities, civil society organisations, researchers and members of the public, who work together to improve health research through the incorporation of PPI.

The Network supports and promotes excellence and innovation in PPI, embedding lived experience into research design, delivery and dissemination.

It helps institutions create the right environment, training, support and processes to enable researchers to engage patients and the public in their research from the beginning.

The new investment, approved by the HRB Board in November, builds on earlier investment through the initial PPI Ignite Programme (2017–2021) and Phase I of the PPI Ignite Network (2021–2026).

The initial programme created a local footprint in five universities, primed to evolve into a network.

Phase I focused on strengthening capacity in seven institutional PPI Ignite offices, supporting researchers and public contributors through training and guidance, and creating shared governance and coordination mechanisms at network level.

This work centred on normalising meaningful PPI within research culture, improving the consistency and quality of PPI practice across institutions, and enabling collaboration and learning across the Network. It also provided the foundation for expansion and increased ambition in Phase II.

Building on earlier investment

This new five-year funding (Phase II) will further embed PPI across the Irish health research system by broadening the pool of researchers and the types of research that incorporate PPI.

The new funding will see the PPI Ignite Network expand from 7 to 11 lead sites. This expansion will increase the reach of the Network and strengthen connections between organisations across the island.

Some €7.3 million is provided by the HRB and €2.7 million in co-funding comes from lead sites. In 2026, the Network's central office will move from the University of Galway to RCSI University of Medicine and Health Sciences, Dublin.

The funding will introduce new approaches to support more consistent and meaningful PPI. For the first time, members of the public will take on formal co-leadership roles within the Network, contributing to governance and oversight.

Seed fund for PPI

A dedicated seed fund of €500,000 will support early-stage PPI activity, enabling researchers and partners to develop new and existing partnerships and strengthen PPI in research design.

The Network will also use the funding to develop resources and supports for researchers to integrate PPI into data science, big data/artificial intelligence (AI) projects and patient data re-use for health research.

This investment marks a significant step forward in embedding PPI as a core component of health and social care research in Ireland.

Phase II investment will help accelerate the integration of PPI across a wider range of research areas, thus enhancing the relevance, quality and impact of research outputs.

Through this work, the HRB is supporting a research system that is better equipped to inform policy, improve services, and deliver tangible benefits for patients and the public.

Case Study 2

GAA players taking part in HRB-funded testicular diseases awareness

A PPI-led programme is using virtual reality to promote men's health literacy around testicular conditions.

A novel technology-informed approach to raising men's awareness of testicular diseases reached a significant new phase in 2025 with the completion of a HRB-funded feasibility trial.

HRB funding under the Definitive Intervention and Feasibility Awards (DIFA) scheme continued support for University College Cork's (UCC's) long-standing work in the Enhancing Men's Awareness of Testicular Diseases (E-MAT) programme.

Testicular cancer is rare, but it is the most common cancer in young men aged between 15 and 44. About 170 men are diagnosed with testicular cancer every year in Ireland.

Since its inception, E-MAT has increasingly embodied PPI principles by integrating the voices, preferences, and lived experiences of the populations most affected by testicular health issues, i.e. young and middle-aged men.

Virtual reality game

Research led by Professor Mohamad Saab in UCC, with PPI, developed a 3-level virtual reality (VR) educational game E-MAT$_{VR}$, delivered using a VR headset. Early qualitative and quantitative work with men set the direction for the intervention and highlighted gaps in awareness, hesitation about seeking help, and a preference for interactive or relatable learning styles. E-MAT$_{VR}$ uses light humour to educate men about testicular diseases and encourages them to examine their testicles and seek medical help for symptoms.

The HRB-funded feasibility trial examined the feasibility of conducting a future definitive randomised controlled trial (RCT) to test the effectiveness of E-MAT using VR intervention (E-MAT$_{VR}$), compared with E-MAT using electric information control (E-MAT$_{E}$), and to determine how to best deliver E-MAT in the future.

Implementing at scale

The study aimed to understand not only which approach works best but also how each can be implemented at scale.

Central to this has been the involvement of male athletes, particularly those affiliated with the Gaelic Athletic Association (GAA), who have acted as both research participants and collaborators shaping intervention design, recruitment, usability, and relevance.

Professor Mohamad Saab, University College Cork

E-MAT
Enhancing Men's Awareness of Testicular Diseases

Their feedback guided improvements in design, content clarity and comfort of use, helping to refine the intervention into a more engaging and accessible tool.

Approximately 74 players took part across participating clubs. Each participant completed an initial survey about their understanding of testicular health before being randomly assigned to either the VR intervention (E-MAT$_{VR}$) or the electronic version (E-MAT$_{E}$).

They then completed a second survey immediately after their session and a third three months later. This design allowed the team to measure both immediate and sustained changes in knowledge and behaviour.

Recruitment on social media

Alongside these surveys, the research team investigated the most suitable social media platforms for recruiting men into health studies. Recruitment was a key challenge in previous men's health programmes and identifying effective channels will be crucial for any future national initiative.

The study also included a cost-benefit analysis comparing VR delivery with the simpler electronic option.

The study compared the effect of E-MAT delivered using VR (E-MAT$_{VR}$) with E-MAT delivered electronically as plain text using a tablet (E-MAT$_{E}$) and found that, while knowledge improved in both the E-MAT$_{VR}$ and E-MAT$_{E}$ groups, knowledge did not differ significantly when E-MAT$_{VR}$ was compared with E-MAT$_{E}$.

This can be explained by the fact that with only 74 participants, a full definitive intervention trial with a larger sample size powered to detect the effectiveness of E-MAT$_{VR}$ is needed in order to establish effectiveness.

Overall, participants were highly satisfied with E-MAT$_{VR}$. They made valuable recommendations to enhance interactivity, reduce cost, and improve access to VR. All these recommendations will be taken into consideration when developing and testing E-MAT in the future.

Ultimately, this research determined that a larger study is worth conducting and that VR can be used to promote men's health in the future.

Strategic Objective 2

An independent voice

We aim to be an independent, credible voice for research and evidence, and a trusted thought leader. The HRB Evidence Centre continues to support the generation of independent, credible evidence to inform the decisions of policy-makers, practitioners, and the public.

We also seek to enhance coordination between those involved in evidence synthesis nationally and internationally, and strive to earn and maintain people's trust in the evidence produced, while facilitating dialogue on emerging health research topics.

Key items delivered:

- Supported 49 Conference and Event Sponsorship Scheme grants for health research-related events and workshops, including Voices Rarely Heard: Empowering Young People Living with Rare Diseases – From Lived Experience to Leadership; the Patient Safety in the Community Seminar; and The International Forum for Acute Care Trialists.
- Delivered a Rapid Evidence Support System Assessment (RESSA) of Ireland's evidence-support system for health policy-making through a dedicated project led by Evidence Synthesis Ireland (ESI) and overseen by a HRB-chaired group representing key stakeholders, including the DoH, the Department of Further and Higher Education, Research, Innovation and Science (DFHERIS), and the Global Evidence Commission.
- Awarded €6 million in Capacity Building for Evidence Synthesis funding to ESI following a competitive call. This included a contribution of €1.5 million from Health and Social Care Research and Development (HSC R&D) Northern Ireland. The award builds on the HRB and HSC R&D Northern Ireland's previous investments towards capacity building in evidence synthesis on the island of Ireland. It will further establish Ireland as a leader in global efforts to provide up-to-date, reliable evidence for better-informed policy and practice decisions in health and social care.
- Expanded and enhanced the ESI network by establishing a dedicated Evidence Synthesis Hub for emerging health threats preparedness and response via our Evidence Synthesis Ireland award. The hub will serve as Ireland's national coordination point and resource for synthesising evidence on all major health threats. It will take a 'One Health', all-hazards perspective, encompassing (but not limited to) pandemics; epidemics; infectious hazards; antimicrobial resistance; novel pathogens; and cross-cutting behavioural, scientific, and systems challenges. The award was made in line with report recommendations of the Emerging Health Threats Function Expert Steering Group following discussions with the Chief Medical Officer of the DoH.

Left to right: Dr Tonya Moloney, Research Officer at the HRB Evidence Centre; Jennifer Murnane O'Connor, Minister of State at the Department of Health with special responsibility for Public Health, Wellbeing and the National Drugs Strategy; and HRB CEO Gráinne Gorman at the launch of the HRB evidence review *The effectiveness of public health interventions in reducing sunbed use and rates of skin cancer.*

- The HRB Evidence Centre delivered 18 evidence products to the DoH. These included:
  - 5 evidence reviews covering the effectiveness of public health interventions in reducing sunbed use and rates of skin cancer; the effect of artificial community water fluoridation on dental health; an evidence and gap map review of women's health treatment interventions and outcomes; and the safety, effectiveness, and economic benefits of pharmacist prescribing
  - 11 evidence briefs, which covered a wide range of policy-relevant topics:
    1. the regulation of mental health services
    2. financial supports for infectious disease victims
    3. evaluations of services and supports for older people
    4. models of care for paediatric primary care services
    5. the operating theatre support workforce
    6. community midwifery practice
    7. injury unit delivery models
    8. models of liaison psychiatry for mental health emergency department presentations
    9. the utilisation of technology in the provision of health and social care services and supports for older people
    10. respite care for older people and their family/informal carers
    11. stroke key workers
  - 1 search and screen of peer-reviewed literature identifying evidence evaluating the effectiveness of stockpiling medical and chemical-, biological-, radiological-, and nuclear-related countermeasures for crisis scenarios, including pandemics
  - 1 evidence highlight on how Directive 2002/46/EC, concerning food supplements being placed on the market as foodstuffs, is applied in EU Member States, and how it compares with legislation in third countries.
- Published a peer-reviewed publication on the safety, cost, and environmental impact of reprocessing high-risk single-use medical devices.
- The HRB National Drugs Library responded to 528 written queries, and there were 329,616 user sessions on the library repository.
- Published three issues (90–92) of *Drugnet Ireland* and one *Drugnet Ireland* supplement.

Case Study 3

HRB reveals substantial gaps in research on women's health conditions

The HRB evidence and gap map review of 2,279 studies revealed gaps in women's health research nationally and globally.

There are substantial gaps in understanding of conditions affecting women, including abnormal menses/ symptoms, vaginosis, pelvic organ prolapse, early pregnancy loss, and postpartum mental health, a HRB report published in September 2025 found.

Women's health treatment interventions and outcomes: An evidence and gap map review was requested by the DoH in support of Action 6 of the *Women's Health Action Plan 2024–2025*.

This action commits to increasing the evidence base for women's health by strengthening clinical, academic and applied research.

Scope of the review

The HRB conducted a large-scale evidence and gap map review to examine the existing number of intervention studies for women's health conditions across Organisation for Economic Co-operation and Development (OECD) member countries.

The review included 2,279 English-language studies published between January 2019 and February 2024. Eligible study designs included:

- randomised controlled trials
- non-randomised trials
- full economic evaluations
- systematic reviews including these designs
- study protocols.

The population of interest was biological females of any age diagnosed with one or more of 10 selected health condition categories, including: abnormal menses, cancers of the reproductive tract, gynaecological conditions, menopausal symptoms, pelvic disorders, infertility, early pregnancy loss (under 20 weeks) and postpartum mental health.

Where evidence exists

The evidence and gap map analysis shows that the strongest evidence base across OECD member countries lies in gynaecological conditions, cancers of the reproductive tract, female infertility, pelvic floor disorders, and menopausal symptoms.

The review also identified several areas with limited evidence across OECD member countries, including abnormal menses (particularly the absence of menstrual periods or reduced flow) and premenstrual dysphoric disorder.

There was limited research on pelvic and vulvar vaginosis, with no identified studies on vulvitis. Evidence for postpartum mental health, including postpartum post-traumatic stress disorder, was also lacking.

There were also research blind spots identified in respect of pelvic organ prolapse, with no studies on cystourethrocele, enterocele or urethrocele; and early pregnancy loss (under 20 weeks), including septic abortion.

Evidence gaps in Ireland

The analysis revealed substantial evidence gaps when filtered to studies that were ongoing or completed in Ireland. No eligible Irish studies were identified in: menopausal symptoms, pelvic organ prolapse, pelvic and vulvar vaginosis, early pregnancy loss and postpartum mental health.

Apart from cancers of the female reproductive tract (21 studies), four or fewer Irish studies existed for every other health condition category.

There were four categories with no Irish intervention studies, which were also those with the least evidence internationally. These were pelvic and vulvar vaginosis, pelvic organ prolapse, early pregnancy loss, and postpartum mental health.

Dr Jane Murphy, Research Officer, HRB Evidence Centre, and lead author of the report

The report indicates that strengthening the evidence base is essential in order to support policy and improve outcomes for women.

Missing core outcomes

The analysis also found inconsistent reporting of standardised core outcomes across the studies examined.

Although most core outcomes were reported, those absent from the existing studies included menstrual regularity in adenomyosis, chronic anovulation in polycystic ovary syndrome, mortality in ectopic pregnancy and spontaneous abortion/miscarriage, suicidal thoughts, attempted suicide and thoughts of harming the baby in postpartum depression.

This limits the ability to build a coherent, comparable evidence base for clinical decision-making.

Conclusion

The findings of the HRB evidence and gap map analysis highlight significant national and international gaps in women's health research.

The report indicates that strengthening the evidence base is essential in order to support policy and improve outcomes for women. Future studies should consistently measure and report core outcomes, as well as involve multidisciplinary experts and women representatives in shaping research priorities, it notes.

Following publication of the report, the DoH announced €2 million in dedicated funding for women's health through a HRB research funding call in 2026–27, and also requested an evidence review to examine the safety and effectiveness of psychological interventions to treat perinatal depression and perinatal post-traumatic stress disorder.

Case Study 4

HRB highlights safety, effectiveness, and economic benefits of pharmacist prescribing

The HRB was asked by the Department of Health to undertake a comprehensive evidence review on pharmacist prescribing across primary, secondary, and tertiary care.

The HRB evidence review, *Effectiveness, safety, and cost-effectiveness of pharmacist prescribing*, published in October 2025, found generally equivalent or improved outcomes and projected cost-effectiveness.

The objective was to inform policy development following recommendations from the Expert Taskforce to Support the Expansion of the Role of Pharmacy. The review explored three core questions: Is pharmacist prescribing safe? Is it effective? And is it cost-effective?

Scope and methods

The HRB conducted a systematic review of primary quantitative studies and full economic evaluations. This involved extensive database searches, supplementary searches, data extraction and validation by independent reviewers, quality assessment using established tools, and GRADE (Grading of Recommendations Assessment, Development and Evaluation) ratings.

A total of 52 studies met the inclusion criteria, reporting on one or more of the following:

- 20 reported on safety
- 32 reported on effectiveness
- 13 reported on cost-effectiveness.

These studies spanned a range of health conditions and service settings, with pharmacist prescribing evaluated in independent, collaborative, protocol-based, and formulary models.

Safety

Safety outcomes covered 12 healthcare populations, including people with coagulation disorders, chronic kidney disease, and urinary tract infections (UTIs). Populations in long-term care, emergency care, and surgical care were also researched.

Across the evidence base, pharmacist prescribing was generally as safe as medical prescribing, with most studies reporting significant improvements or no significant differences in adverse events, hospitalisations or emergency visits related to medication use, or fewer prescribing errors.

The majority of studies reported significant improvements or no significant differences when pharmacists prescribed compared with doctors or other prescribers.

This included:

- reduced anticoagulation-related adverse events in multiple studies
- improved concordance with antimicrobial guideline in UTI management
- fewer prescribing errors in emergency and surgical settings.

One study found more hypotension-related events in a pharmacist group compared with the comparator group, and another reported increased outpatient visits (but fewer hospitalisations).

Effectiveness

The review included evidence for 13 clinical areas including diabetes, hypertension, dyslipidaemia, chronic kidney disease, UTI, contraceptive prescribing, heart failure, long-term care, and mixed chronic conditions.

The majority of studies reported significant improvements or no significant differences when pharmacists prescribed compared with doctors or other prescribers.

Outcomes commonly assessed included blood pressure, lipid levels, international normalised ratio (INR) control for blood clotting, haemoglobin targets, access to care, treatment adherence, and broader quality-of-life measures.

Notable findings:

- Diabetes studies mainly showed equivalent or improved blood sugar control.
- Coagulation disorder studies showed equivalent or improved blood clotting outcomes.
- Hypertension studies showed equivalent or improved blood pressure outcomes.

The review reported methodological limitations in the identified research which is common in this type of real-world public health research when compared with more controlled drug trials.

Áine Teahan, Senior Researcher, HRB Evidence Centre, and lead author of the report

Cost-effectiveness

Cost-effectiveness studies examined eight health conditions: diabetes, hypertension, chronic kidney disease, UTI, minor ailments, acute pharyngitis, contraception, and chronic pain.

Across these studies, pharmacist prescribing was generally projected to be:

- lower cost and more effective, or
- lower cost with equivalent effectiveness, or
- more favourable in cost-benefit terms than medical prescribing.

Examples included:

- Pharmacist-led care for diabetes and hypertension was projected to deliver better outcomes at lower cost.
- Pharmacist management of UTIs and minor ailments was projected to deliver comparable outcomes at lower cost.
- Contraceptive prescribing by pharmacists was projected to be more cost-effective than medical prescribing models.
- Only one study – on chronic pain – found usual general practice prescribing to be more cost-effective.

Policy relevance

Taken together, the evidence suggests that pharmacist prescribing can maintain or improve patient outcomes while offering potential system-level efficiencies.

Minister for Health Jennifer Carroll-MacNeill noted that the HRB review found that pharmacist prescribing offers “clear evidence of safety, effectiveness, and cost-effectiveness”.

Conclusion

The evidence review indicates that expanding pharmacist prescribing could improve access, support integrated care, and deliver economic benefits while maintaining safety and effectiveness.

Strategic Objective 3

Trusted data

Access to health and social care data, especially when linked with research and statistical data, has the potential to transform healthcare delivery and how we manage our own health. The HRB is already playing a leading role in enabling this transformation.

We are committed to promoting and enabling the use of data to shape health policy, enhance healthcare delivery, and drive broader research and innovation initiatives. Moreover, we will work to increase public understanding of the importance of facilitating secure access to health and social care data for research, policy, and planning. We will also support the adoption of best practice in data management, governance, and reuse by data producers and researchers.

Key items delivered:

- Published six National Health Information Systems (NHIS) StatLink reports and bulletins with 21 associated infographics:
  - alcohol treatment demand in Ireland in 2024 (the National Drug Treatment Reporting System (NDTRS))
  - drug treatment demand in Ireland in 2024 (NDTRS)
  - annual report on the activities of Irish psychiatric units and hospitals in 2024 (the National Psychiatric Inpatient Reporting System (NPIRS))
  - overview of people engaging with disability services in 2024 (the National Ability Supports System (NASS))
  - drug poisoning deaths in Ireland in 2022 (data from the National Drug-Related Deaths Index (NDRDI))
  - deaths among people who were homeless at time of death in Ireland 2021 (NDRDI).
- Published two reports on:
  - drug use in Ireland in 2023
  - the prevalence of problematic opioid use in Ireland in 2020–2022
- Produced and co-produced 11 peer-reviewed publications focusing on:
  - hexahydrocannabinol (HHC) use in Ireland
  - trends in cocaine use and its related harms in Ireland
  - associations between childhood adversity and alcohol use in early adulthood
  - associations and mediating factors between adverse childhood experiences and substance use behaviours in early adulthood
  - eating disorder admissions among young people in Ireland
  - inpatient psychosis admissions in Ireland
  - prevalence and risk factors associated with early polysubstance use in early adulthood in Ireland
  - factors associated with cocaine use at age 17 and 20 years in Ireland
  - early and risky adolescent alcohol use as a predicator of alcohol, tobacco, cannabis and other drug use in early adulthood in Ireland
  - harms associated with prescription drug misuse in Ireland
  - gambling as a factor in suicide risk.
- Delivered 10 workbooks and 16 standard tables/structured tables to the European Union Drugs Agency (EUDA) to meet Ireland's reporting obligations to this institution.
- Delivered one structured table to the United Nations (UN) Office on Drugs and Crime to meet Ireland's reporting obligations to this institution.
- Responded to 114 requests from external data users, researchers, and academics for data from our information systems.
- Provided NPIRS data to the Central Statistics Office (CSO), which were published on the CSO open data portal PxStat, and received 591,370 hits between November 2024 and November 2025
- Made available data from the NDTRS through interactive tables on the HRB National Drugs Library website, which were viewed 1,133 times by 396 active users.
- Supported 5,437 services and 3,477 active users to submit data through LINK, the HRB's online data entry portal.
- Participated in the EU's Second Joint Action Towards the European Health Data Space (TEHDAS2) Community of Practice working groups at EU and national level, which are designed to progress the European Health Data Space work in Ireland.
- Attended the Community of Practice General Assembly in Malta.
- Supported the Secretariat to the Health Research Consent Declaration Committee (HRCDC). The Committee convened 10 times, making 20 consent declarations and approving 21 amendment requests to facilitate the use of personal data for health research in the public interest in the absence of explicit consent.
- The Secretariat also carried out the following in 2025:
  - Managed 68 annual reviews of existing consent declarations made for health research to support the monitoring of consent declarations on behalf of the HRCDC.
  - Worked closely with the Data Protection Commission and the DoH to clarify specific queries around data protection regulatory requirements.
  - Provided training and awareness sessions for research groups on the HRCDC process and introduced pre-submission meetings to aid researchers navigating the application process.
  - Acted as a member of the steering group for the HealthData@IE project in the DoH, supporting the implementation of the European Health Data Space Regulation in Ireland.

Case Study 5

Five-year trends in eating disorder admissions among children and adolescents show rising demand

A national HRB study, *Trends and description of inpatient admissions for eating disorders among children and adolescents in Ireland: 2018–2022*, reveals a 121% rise in such admissions among under-18s.

Harriet Lovett, Research Analyst, HRB, and lead author of the report

Between 2018 and 2022, Ireland experienced a marked increase in hospital admissions for eating disorders (EDs) among children and adolescents, reflecting international trends and raising concerns about service capacity and clinical need.

The collaborative study, involving the HRB and national clinical services, offers the first comprehensive national profile of acute medical and psychiatric inpatient admissions for EDs in under-18s over a five-year period.

The analysis draws from two national data sources: the Hospital In-Patient Enquiry (HIPE) system and the HRB's NPIRS – and data from two regional Child and Adolescent Mental Health Services Eating Disorder (CAMHS ED) teams.

HIPE provides anonymised, aggregated discharge data from public acute medical hospitals, while NPIRS captures admissions and discharges data from approved psychiatric centres.

Both systems record episode-based activity rather than person-based data, so individuals cannot be tracked across episodes, but together they present a national picture of ED-related inpatient activity.

Community ED service data were provided by the regional CAMHS ED teams in operation during the study period: Linn Dara Community Eating Disorder Service and the Child and Adolescent Regional Eating Disorder Service for Cork and Kerry, each serving a catchment population of around 550,000.

The retrospective observational study examined admission frequency, diagnostic category, hospital type, length of stay and community referral patterns. Children and adolescents aged under 18 years admitted with a primary ED diagnosis were included.

Across the five-year period, there were 1,573 inpatient admissions due to EDs. Most admissions were to acute medical hospitals (76%; 1,203 episodes), reflecting the central role of medical stabilisation.

Psychiatric hospitals accounted for 24% of admissions (370), with anorexia nervosa and atypical anorexia nervosa representing 91% of cases. The episode-based admission rate averaged 52.9 per 100,000 of the population for 10-18-year-olds.

The data show a striking rise in admissions: between 2018 and 2022, total ED-related admissions increased by 121%, rising from 170 to 375 episodes. There was a sharp peak in 2020 and 2021 during the COVID-19 pandemic, consistent with international evidence that demand for ED care among children and adolescents increased during the lockdown period.

Differences emerged between medical and psychiatric pathways. The average length of stay in acute medical hospitals was shorter than in psychiatric centres, at 17 versus 72 days, respectively, possibly indicating the role of acute medical hospitals in the stabilisation of ED patients prior to transfer to community services for psychiatric treatment.

There was a downward trend in mean bed days, falling by 10.9 days between 2018 and 2022. Shorter inpatient stays may be related to the work of two CAMHS ED services.

These outpatient services offer a stepped approach to ED treatment, offering greater support for patients to manage ED symptoms at home and reduce hospital length of stay.

Alongside inpatient activity, referrals to specialist community ED teams also increased. There were 902 referrals between 2018 and 2022, with a peak of 360 in 2021.

Of those assessed, 18% required inpatient care, demonstrating the continued need for access to acute medical or psychiatric inpatient care for a subgroup of patients. It also points to the need for continued roll-out of the national ED teams in line with the Model of Care for Eating Disorders.

The authors state that additional funding, better integration of inpatient services and increased specialist community capacity are essential to ensure timely and effective treatment for young people. They also highlighted the need for a national ED register to monitor the patient journey along with service demands and capacity.

Case Study 6

Informing regional health policy through timely, relevant data

In 2025, HRB National Health Information Systems (NHIS) responded quickly to the introduction of Sláintecare's HSE health regions, delivering region-specific data that informed service planning, policy development and key funding priorities under Budget 2026.

In 2025, HRB NHIS played a pivotal role in ensuring that Ireland's reconfigured health system under Sláintecare was supported by timely, relevant and regionally aligned evidence.

Sláintecare's emphasis on integrated, population-based planning depends on high-quality data that are flexible enough to adapt to new organisational models.

Rapid adaptation

As HSE health regions moved from design into operation, the HRB rapidly adapted our national datasets to meet emerging policy and planning needs, providing tailored outputs that enabled the DoH and the HSE to understand patterns of need, treatment provision and harm at regional level.

Central to this work was the HRB's ability to deliver health-region-specific data from its established national information systems, including data on disability, alcohol and drug treatment, drug poisoning deaths and related harms.

Beginning early in 2025, we supplied regionally mapped data for 2024 and, where required, confirmed and provided corresponding data for 2023.

Although the HSE formally transitioned to new health regions in October 2024, the HRB ensured continuity by retrospectively aligning earlier datasets with the new regional structures, allowing trends to be examined over time rather than in isolation.

This rapid and proactive response is core to the HRB's role: providing robust evidence that informs policy development, supports organisational change, and enables effective service planning.

Regional mapping

Regional data are provided in maps, tables and analysis, either by individual health region or all six as required.

HRB NHIS are capable of collecting precise geocoding data for each record down to small area level. This enables the systems to analyse data in many different geographic boundaries.

For the HSE health regions, access to consistent, comparable regional data will make it possible to assess current service provision, identify gaps in treatment coverage, and better understand regional variation in outcomes.

Crucially, this also established a baseline against which the impact of future reforms and investment can be monitored.

The HRB moved quickly to ensure that our national information systems remained relevant to these reforms by aligning outputs to the health regions at an early stage, thus supporting informed decision-making as responsibilities were devolved.

Evidence-informed planning

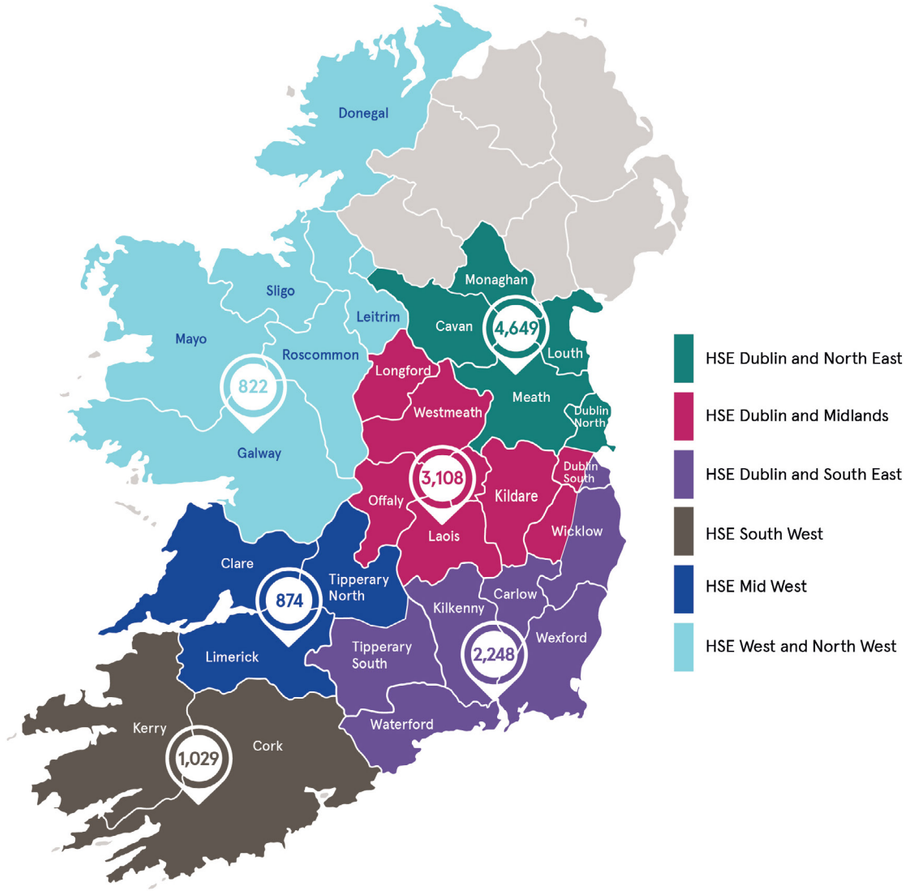
At an operational level, the evidence generated by NHIS can be used by the HSE at national level and through Sláintecare-aligned regional structures to support service planning, targeting of resources and evaluation of impact for inclusion health and drug harm reduction priorities.

This evidence base is reflected in some of the priorities outlined in Budget 2026.

Data generated through our information systems from 2025 help underpin the identification of need and capacity gaps that inform investment decisions.

In Budget 2026, €4 million in additional non-pay funding was allocated to drugs and inclusion health services, alongside targeted funding from the Dormant Accounts Fund.

Several funded priorities correspond directly with areas where NHIS data are already central.



Number of cases treated for alcohol or drugs, by HSE health region, NDTRS, 2024

Data from the National Drug Treatment Reporting System (NDTRS) and the national drug poisoning mortality system support analysis of opioid treatment provision and overdose trends, which form part of the evidence base used to understand gaps in opioid agonist treatment.

Regional treatment data also highlight variation in access and uptake, supporting targeted investment in under-served populations and regions with lower treatment rates.

Across all these domains, the HRB's NHIS provides more than data outputs. By delivering regionally aligned information at pace, the HRB enables health regions to plan services more effectively, understand treatment provision, track trends and monitor the outcomes of policy and funding decisions.

Strategic Objective 4

Thriving research environment

Health research that delivers value needs an enabling environment to thrive, from skilled researchers and access to infrastructure, to policies that support and enhance good research practice.

The HRB plays a lead role in building a strong, supportive environment for health research in Ireland, fostering connections between the academic and healthcare systems in the process. In partnership with a wide range of stakeholders, we work to ensure that funding for researchers and infrastructure is delivered effectively; that the highest standards of governance, quality, and ethics are met; and that innovative practices are developed and taken up here in Ireland.

Key items delivered:

- Completed a strategic review of our people and skills portfolio using an analysis of in-house data, supplemented by rich learning from stakeholders to inform future approaches.
- Based on the strategic review, we modified opportunities for researchers at a critical career stage by opening two postdoctoral funding opportunities: the Research in-Practice Fellowships and the Collaborative Postdoctoral Fellowships Programme. These funding opportunities will grow the pipeline of future experts and leaders in applied health and social care research in Ireland.
- Participated in an Implementation Project Group in order to develop a nationally agreed Clinical Academic Career Framework for Nurses and Midwives in line with the DoH's *Report of the Expert Review Body on Nursing and Midwifery*.
- Awarded 82 Summer Student Scholarships, which provide an opportunity for undergraduate students to gain research experience at an early stage in their career journey.
- Awarded three Fulbright-HRB HealthImpact Awards in collaboration with the Fulbright Commission, providing successful applicants with research or professional development opportunities in the USA for a period of 3–6 months.

2025 Fulbright-HRB HealthImpact Awardees (Left to right): Dr Susanne O'Reilly, St Vincent's University Hospital; Professor Ronan Cahill, University College Dublin; and Dr Lisa Kiely, University College Cork

- Participated in a new Science Europe Taskforce on Research Security to work with other funders and research performers in order to map and promote good practices for research security, engage in dialogue via thematic workshops, and refine advocacy messages and actions for research security.
- Completed a strategic review of HRB Clinical Trials Infrastructures, with insights from key stakeholders and an international panel of experts. The review considered how future HRB funding can best enable and help sustain an environment in which relevant and innovative forms of clinical trials can de designed and conducted effectively, efficiently, and transparently, in order to deliver benefits for current and future public health needs.

- Joined the National Clinical Trials Oversight Group convened by the Minister for Health to oversee a strategic roadmap for the transformation of the clinical trials landscape in Ireland. The group includes representatives from the academic and hospital sectors, the trials community, the HSE, the HRB, industry, and patient groups. The final report, *Transforming Ireland's Clinical Trials Landscape: A Blueprint for Implementation*, was launched by the Minister for Health on 20 November 2025.
- Participated as a member of the National Rare Disease Steering Group to provide guidance and advice to the DoH on the development of the National Rare Disease Strategy 2025-2030, which was launched by the Minister for Health in August 2025. The Strategy sets out a vision to improve the lives of the estimated 300,000 people living with rare diseases in Ireland. It outlines a comprehensive framework designed to enhance diagnosis, treatment, and support for people living with rare diseases, aiming to improve quality of life, promote equitable access to healthcare, and foster innovation in rare disease research and treatment.
- Continued engagement with the European Clinical Research Infrastructure Network (ECRIN) in a European Correspondent role to support Ireland's involvement in pan-European trials.

The National Office for Research Ethics Committees delivered the following:

- Supported 92 National Research Ethics Committee (NREC) members to review a total of 490 ethics applications over the course of 54 meetings, meeting all EU legislative timelines, including timelines required within the Clinical Trials Information System.
- Reconstituted the NREC membership with the reappointment of 18 members for a second term. Eight new members were appointed, with a further 14 recommended for appointment in 2026, bringing a wide range of expertise in PPI, law, general practice, oncology, statistics, and trial design.
- Developed best practice guidance for NREC members, researchers and sponsors on topics such as ethical research and healthy volunteers to ensure quality and consistency in Ireland's national research ethics system.
- Developed core governance policies on appeals, complaints, and a Clinical Trials Safety Notification Policy in collaboration with NREC chairs and deputies to strengthen operational clarity and compliance.
- Supported the University of Galway's Institute for Clinical Trials' Hypercare initiative, piloting a streamlined and accelerated process for the startup of clinical trials.

- Collaborated with the Secretariat of the Health Research Consent Declaration Committee on areas of ethics, consent, and data protection, and in the continued development of an application management system.
- Presented at national events and higher education institution graduate programmes on the work of the NRECs and best ethical practices for regulated research. Events included the Health Products Regulatory Authority (HPRA) Clinical Trials Information Day, the Royal College of Physicians of Ireland Faculty of Pathology's Spring Symposium, the 'Venture Build' 2025 Life science module hosted by Enterprise Ireland, and the Association of Clinical Biochemists in Ireland's Continuing Professional Development Day, 'Enabling access to the use, re-use, and sharing of health data for research in Ireland' conference.
- Participated on national groups with its stakeholders to coordinate on key topics such as ethics, research governance, consent, ionising radiation, and health research, working towards a common goal of advancing the national health research environment.
- Collaborated with the HPRA on the EU4Health Joint Action, IncreaseNET, to produce innovative pedagogical resources to strengthen and harmonise competencies in the clinical and ethical assessment of regulated research across the EU.
- Hosted five 'Lunch and Learn' expert speaker sessions for the NRECs and the wider research ethics community. Sessions covered a breadth of topics, from human rights and mental health to ethical inclusion in genomics research and the practicalities of commencing clinical research.

Case Study 7

Supporting Ireland's Rare Disease Strategy through research and partnership

In 2025, the HRB contributed to strengthening Ireland's rare disease research ecosystem through expanded clinical trial and patient-centred research activity aligned with the new National Rare Disease Strategy.

The HRB was involved in an important point of consolidation and delivery for rare disease research and innovation in 2025 with the publication of Ireland's *National Rare Disease Strategy 2025–2030.*

The strategy places research, data and international collaboration at the centre of progress, recognising that while rare diseases are individually uncommon, collectively they affect approximately 300,000 people in Ireland.

The HRB has been closely involved in shaping and supporting this direction, ensuring that research capacity, patient involvement and international connectivity are embedded within Ireland's national response.

Dedicated research chapter

A defining feature of the strategy is its dedicated research chapter, which reflects the HRB's long-standing emphasis on evidence, innovation and collaboration.

Rare disease research presents particular challenges: patient numbers for individual conditions are often extremely small, diagnostic pathways are complex, and expertise is dispersed.

Addressing these challenges requires coordinated investment in research infrastructure and strong partnerships that extend beyond national borders. Throughout 2025, the HRB's work continued to align closely with these priorities.

The HRB-funded Rare Disease Clinical Trial Network (RDCTN) focuses on increasing rare disease clinical trial activity in Ireland, working with patients, researchers and industry.

RDCat

Central to this effort is the HRB-funded Rare Disease Research Catalyst Consortium (RDCat), hosted at University College Dublin.

RDCat unites healthcare professionals, researchers and patients in Ireland to work together across three universities – University College Dublin (UCD), Trinity College Dublin (TCD) and the RCSI – and the five Irish lead European Reference Network (ERN) hospital sites, collaborating with international partners to advance rare disease research.

Crucially, people living with a rare disease are involved, contributing lived experience and helping to identify research priority areas for improvement.

This reflects the strategy's commitment to placing patients at the centre of rare disease research and clinical service design.

RDCat strengthened patient involvement through the establishment of a new Rare Disease Irish Patient Advisory Group which contributes directly to the ERNs, research, policy advocacy and the translation of complex clinical information for non-specialist audiences.

Patient experience examined

The consortium has also enabled a new tool to be developed which examines the patient experience in order to highlight areas for improvement in care.

It was designed and validated in Ireland by people living with rare diseases, and through collaboration with Rare Diseases Europe (EURORDIS) it will now be used across the EU.

RDCat also provides education and training opportunities for future clinicians and researchers building our rare disease research capacity.

Ireland is a member of 18 ERNs, which connect experts across borders and support shared registries for rare diseases.

Left to right: Gavin Lawler, HRB Programme Manager; Professor Amy Jane McKnight, Queen's University Belfast and All-Ireland Rare Disease Interdisciplinary Research Network (RAiN) Co-Lead; Professor Suja Somanadhan, UCD and RAiN Co-Lead; Professor Susa Benseler, Children's Health Ireland (CHI); Professor Atif Awan, Clinical Lead, HSE National Rare Diseases Office; and Dr Catherine Quinlan, CHI, attending the HRB Conference and Event Scheme-sponsored All-Ireland RAiN Conference.

Enabling and enhancing Ireland's engagement with international efforts including the ERNs is a central component of RDCat's work.

As part of our work with the ERNs, five HRB-funded research coordinators from RDCat enrol patients onto the ERN registries, ensuring that people living with rare diseases in Ireland are visible and can be identified for international research initiatives, including clinical trials.

RDCat has also enabled researchers in Ireland to engage with efforts to improve diagnosis for people living with a rare disease.

In 2025, a pilot study involving enhanced genomic testing for 30 patients with previously undiagnosed rare kidney disease delivered diagnoses for 7 participants.

RDCat has also submitted genetic data for undiagnosed patients to the European Rare Diseases Research Alliance (ERDERA).

Some 189 cases of chronic kidney disease and 10 cases of epilepsy of unknown cause have already been submitted.

This initiative provides access to international expertise and the potential for further diagnoses.

Complementing this work, the HRB-funded Rare Disease Clinical Trial Network (RDCTN) focuses on increasing rare disease clinical trial activity in Ireland, working with patients, researchers and industry.

Together, these activities illustrate how the HRB's investment in research, infrastructure, patient partnership and international collaboration is helping to translate the ambitions of Ireland's National Rare Disease Strategy into practice.

Case Study 8

HRB Impact Award for contribution to general practice through evidence and innovation

Professor Andrew Murphy received the 2025 HRB Impact Award, recognising his lifetime contribution to advancing general practice and chronic disease management (CDM) in Ireland through evidence-based research.

Professor Andrew Murphy, General Practitioner in Turloughmore, Co Galway and Professor of General Practice at the University of Galway, has dedicated 25 years to strengthening Ireland's primary care system through rigorous, policy-relevant research.

His career coincided with, and helped shape, a period of profound evolution in Irish general practice, which transitioned from largely reactive, paper-based care to modern, multidisciplinary, data-enabled practice environments that emphasise structured and preventive care.

When Professor Murphy qualified as a general practitioner (GP) in 1992, 60% of practices were single-handed, working mainly from converted premises with no practice nurses and entirely paper based.

They provided largely reactive care, with patients deciding when and why to visit.

Transformed GP services

Today's GP graduates are entering a speciality providing a significant level of preventive and structured care, generally from multidisciplinary group practices in purpose-built premises with sophisticated computer systems.

Professor Murphy's work has been instrumental in this transformation, particularly the improvement of CDM in primary care.

Given that the majority of GP consultations and hospital bed days are related to chronic conditions, he recognised early on the potential for general practice to deliver high-quality, cost-effective care.

Over 25 years, his research systematically tested, refined and demonstrated how local approaches to CDM could be implemented nationally.

A defining milestone was the HRB Programme Grant Award in 2002, which enabled the all-island SPHeRE Randomised Controlled Trial.

Professor Andrew Murphy, University of Galway

It was, at the time, the largest general practice study ever conducted in Ireland. It showed that structured GP-led secondary prevention for cardiac patients reduced hospital admissions from 34% to 26% over 18 months.

These findings were later reinforced by a systematic review concluding that secondary cardiac prevention in primary care can extend life by at least six years.

This evidence informed the development of Ireland's national CDM programme introduced in 2020.

Multidisciplinary expertise

Professor Murphy's research has consistently emphasised collaboration, drawing on multidisciplinary expertise spanning behavioural science, health economics, clinical trials, epidemiology, and implementation science.

He also became a strong proponent of PPI after patient feedback in a trial prompted deeper reflection on aligning outcome measures with lived priorities. Since then, it has been consistently integrated into his research.

National and international roles

Beyond his academic contributions, Professor Murphy has directly influenced Irish healthcare policy.

His work informed the founding of Heartwatch in 2003, Ireland's first universally accessible CDM programme for heart disease. He also contributed to policies such as free nicotine replacement therapy for Medical Card holders.

Internationally, his expertise has been recognised through advisory roles to government bodies in Germany and Norway.

Writing in a blog for the HRB website, Professor Murphy said: "Health Research Board funding has been instrumental in transforming the landscape of general practice in Ireland, facilitating the development of more advanced and community-focused care models.

"I can say this confidently, considering the multiple opportunities it gave me to collaborate on the production of evidence-based approaches to improving the accessibility and quality of primary care that now underpins national healthcare policy."

About the HRB Impact Award

HRB IMPACT AWARD 2025

- The HRB Impact Award recognises current or former HRB awardees who have made a significant contribution beyond academic impact.
- The award, valued at €50,000, is granted to the recipient's chosen HRB-approved host institution to support further research. It is awarded every two years, following a nomination-based process and adjudication by an international panel.

Strategic Objective 5

Productive international partnerships

From pandemics to climate change, many of the greatest health challenges we face are global and can only be addressed through international partnership.

In order to meet these challenges, we are committed to fostering and enhancing European and international coordination, collaboration, and engagement in health research. We support Ireland's research community to compete for EU and international funding, and work with policy-makers and other stakeholders to identify opportunities to engage in initiatives that can advance health and broader Government objectives.

Key items delivered:

- Awarded a grant of €3.2 million under the US-Ireland Partnership, supporting research with partners in the Republic of Ireland, Northern Ireland and the USA. This grant is co-funded by the National Institutes of Health (NIH), Health and Social Care Research and Development (HSC R&D) Northern Ireland, Research Ireland, and the HRB, with the HRB contributing €450,000.
- Participated in the development of the third iteration of Ireland's National Action Plan on Antimicrobial Resistance (iNAP3; 2026–2030). The HRB has committed to ambitious actions under Strategic Objective 5, which aims to strengthen the research and innovation ecosystem to support evidence-based antimicrobial resistance (AMR) interventions.
- Received up to €4 million in funding from the EU's Horizon Europe 2021–2027 research and innovation programme through participation in three European Partnerships to address global health challenges. These include the EU Partnership on One Health AMR, Brain Health, and Be Ready Now.
- Awarded nine grants under joint transnational calls launched in 2024–2025, with a total value of just over €4 million. Four of these grants are co-funded by the European Commission under the European Partnerships, contributing nearly €450,000. The grants support collaboration of Irish researchers with researchers in Europe and beyond to address key research areas as follows:
  - Funded two awards with partners from Ireland under the EU Transforming Health and Care Systems (THCS) Partnership Call, 'Better care closer to home: Enhancing primary and community care'.
  - Funded three awards under the Joint Programme – Neurodegenerative Disease Research (JPND) Call, 'Health and social care research with a focus on the moderate and late stages of neurodegenerative diseases'.
  - Funded two awards under the Network of European Funding for Neuroscience Research (NEURON) Call, 'Interdisciplinary approaches to the neuroscience of pain'.
  - Funded two awards under the ERDERA Partnership Call, 'Pre-clinical therapy studies for rare diseases using small molecules and biologicals – development and validation'.
  - The HRB Horizon Europe National Contact Point (NCP) supported Irish researcher engagement in 18 individual calls from the 2025 Work Programme through three Information Days, meetings in multiple universities, one-to-one meetings with more than 50 researchers, a Cancer Mission webinar, promotion of European Commission-organised events, and an ongoing social media campaign.
- Collaborated with other EU Member States via our NCP to deliver three dedicated brokerage events: an official brokerage event with the European Commission; a joint event with Canada, France and the UK; and a North–South event.

Dr Amanda Daly, HRB Programme Manager and National Focal Point for EU4Health

- Our Horizon Europe Health National Delegate represented the HRB and broader national interests and strategic priorities in six Health Programme Committee meetings, two informal workshops, and a dedicated EU Health Partnership Day. Our National delegate also worked with the European Commission and other EU Member States to co-create the final Horizon Europe Work Programme (2026–2027), which was published in December 2025.
- Sustained Ireland's strong performance in Horizon Europe, reaching €100 million in health research drawdown in 2025. Initial results from 2025 show seven successful EU projects to date and 24 projects progressing to Stage 2 of two-stage calls. Contributed significantly to the €1 billion secured nationally across the Irish National Support Network.
- Launched Ireland's National Mirror Group (NMG) to inform the THCS Partnership. The Health Services Systems and Policy (HSSP) research groups will also inform HRB activities in HSSP more broadly.
- Funded three grants under the ERA4Health Investigator-Initiated Clinical Studies Pilot Call 'EffecTrial: Fostering Pragmatic Comparative-Effectiveness Trials in Non-communicable Diseases'. The aim of the call was to support randomised, interventional and pragmatic, comparative-effectiveness, multinational Investigator-Initiated Clinical Studies (IICS) and to encourage and enable transnational collaboration.
- Participated in the Evidence Synthesis Infrastructure Collaborative (ESIC), which saw the HRB among the funders of €107 million (126 million United States dollars) in new investments to power AI-enabled evidence synthesis for sustainable development, as announced at the UN Sustainable Development Goals (SDGs) Forum in New York in September 2025. The HRB will continue to work with ESIC via the funders interest group (FIG).

The National Office for Research Ethics Committees also:

- Expanded its active participation in key EU expert groups including MedEthicsEU, the COMBINE programme, Medical Devices Coordination Group, EU-X-CT for cross-border trials, and Accelerating Clinical Trials in the EU (ACT EU). We also co-established a MedEthicsEU subgroup on medical devices and diagnostics with our Danish counterparts.
- Completed a comprehensive European Commission-commissioned survey on the Clinical Trials Regulation (CTR) to inform future amendments to the CTR through the recently published Biotech Act, supporting efficiency-focused changes while emphasising the need to preserve the integrity of ethics review.
- Committed to participating in the FAST-EU pilot initiative (Facilitating and Accelerating Strategic Clinical Trials) in collaboration with the HPRA, a pilot project to accelerate the coordinated assessment and authorisation of clinical trials that run in multiple EU/European Economic Area countries.
- Collaborated with the European Network for Research Ethics Committees (EUREC) on the publication of its position paper titled 'Vulnerability and responsible inclusion in health research', underscoring best ethical practice, regulation, and the principles of the Declaration of Helsinki (ethical principles for medical research involving human participants).

Case Study 9

Strengthening evidence synthesis capacity through global and national investment

The HRB is connecting a €6 million programme on the island of Ireland with global efforts to advance AI-enabled evidence for the UN's Sustainable Development Goals.

HRB support for the generation and use of high-quality evidence to inform health policy and practice was reflected in two complementary developments: participation in an international initiative aligned with the UN's Sustainable Development Goals (SDGs) and a new €6 million investment to build evidence synthesis capacity on the island of Ireland.

At the UN SDG Forum in New York in September 2025, a global programme of €107 million in new funding was announced to support AI-enabled evidence synthesis for sustainable development.

ESIC

The HRB is among the funders supporting this initiative through the ESIC, alongside organisations such as the Wellcome Trust, UK Research and Innovation, the Jacobs Foundation, and the UK's National Institute for Health and Care Research (NIHR).

The ESIC Roadmap and the Cape Town Consensus Charter, which were launched at the Forum, set out a coordinated approach to improving how research evidence is identified, synthesised, and communicated to decision-makers.

The initiative is explicitly aligned with the SDGs, recognising that progress across goals such as good health and well-being (SDG 3), reduced inequalities (SDG 10), and peace, justice and strong institutions (SDG 16) depends on timely access to reliable, relevant evidence.

In complex policy environments, particularly those involving health systems, social care, and population health, delays or gaps in evidence synthesis can undermine effective decision-making.

AI-enabled approaches offer opportunities to accelerate evidence synthesis, enabling the more rapid updating of reviews, improved identification of relevant studies, and more efficient handling of large and complex evidence bases.

> We are living in an era where static publications and reviews cannot keep pace with the needs of decision-makers. AI-enabled evidence synthesis offers transformative potential to rapidly translate research and evidence into actionable insights tailored to local contexts.
>
> **Dr Teresa Maguire,**
> HRB Director of Research Strategy and Funding

Human integration with AI

However, the ESIC model emphasises the need for human expertise to be integrated with AI tools in order to ensure methodological rigour, transparency, and appropriate interpretation while addressing the risks associated with bias or uneven data representation.

Through participation in the ESIC funders interest group, the HRB contributes to shaping international coordination in this area and to ensuring that investments align with agreed standards and principles.

Dr Teresa Maguire, HRB Director of Research Strategy and Funding, who attended the Forum in New York, said, "We are living in an era where static publications and reviews cannot keep pace with the needs of decision-makers. AI-enabled evidence synthesis offers transformative potential to rapidly translate research and evidence into actionable insights tailored to local contexts."

€6 million for evidence synthesis

This global engagement is closely linked to the HRB's new €6 million Capacity Building for Evidence Synthesis award, which began rollout in late 2025, strengthening Ireland's contribution to international evidence generation and use.

Of this, €4.5 million will be provided by the HRB to Evidence Synthesis Ireland (ESI), with a further €1.5 million co-funded by HSC R&D Northern Ireland, reinforcing long-standing North–South collaboration.

The five-year programme will enhance national capacity by consolidating evidence synthesis methodologies, reducing duplication, and improving coordination across research groups.

ESIC partners, including representatives from the United Nations Development Programme offices, Cochrane, Campbell, NIHR, the Wellcome Trust, Economic and Social Research Council (ESRC), HRB, the Jacobs Foundation, and the UK and South African governments pictured at the UN SDG Forum in New York.

It will support training and education for researchers, policy-makers, and practitioners, enabling them to better understand, commission, and apply evidence syntheses in health and social care decision-making.

The programme also includes the development and testing of innovative methods, including the responsible integration of AI tools, in order to improve the timeliness and efficiency of evidence production.

Additional institutional support, including investment by the University of Galway in academic posts and postgraduate researchers, will further embed this capacity for the longer term.

By strengthening Ireland's evidence synthesis infrastructure, the programme supports more effective health system decision-making and ensures that national capacity is aligned with emerging international standards, including those promoted through ESIC.

Taken together, these national and global investments demonstrate a coherent HRB approach, ensuring that capacity building at home is also contributing to global efforts.

Case Study 10

Supporting Ireland's success in securing €100 million in Horizon Europe health research funding

Ireland's strong performance under Horizon Europe includes nearly €100 million for health-related research.

Ireland has performed strongly under Horizon Europe, the EU's flagship research and innovation programme, securing more than €1 billion in funding since its launch in 2021.

Almost €100 million of this total has been awarded to health-related research and innovation, reflecting the strength and breadth of Ireland's research ecosystem across multiple sectors.

On track for €1.5 billion

Ireland is on track to exceed its national target under Horizon Europe (2021–2027) of securing €1.5 billion, equivalent to 1.6% of the programme's €95.5 billion budget.

Figures published in December 2025 show that Ireland has already secured €1.05 billion in funding, representing 2.1% of the total awarded to date. Some 552 Irish organisations have signed 1,598 grant agreements, with one in five eligible proposals receiving funding.

The HRB plays a central role in supporting Irish participation in health-related calls under Horizon Europe.

As part of Ireland's National Support Network for Horizon Europe, and working closely with Enterprise Ireland and other stakeholders, the HRB supports researchers and organisations based in Ireland to engage effectively with these highly competitive funding opportunities.

HRB applicant support

Through its roles as NCP and National Delegate for Health, the HRB provides guidance, expertise, and strategic input across the full funding life cycle.

This includes supporting applicants to navigate the programme structure, interpret call topics, develop competitive proposals, identify suitable partners and build strong, collaborative European consortiums.

In parallel, the HRB represents Irish research priorities at the Horizon Europe Health Programme Committee, where EU Member States contribute to shaping future work programmes and funding priorities – for example, by advocating for calls aligned with Ireland's strengths in population health, clinical trials infrastructure and health system innovation.

Dr Irene Castellano, Horizon Europe National Contact Point for Health and Cancer Mission

Since the start of the Horizon Europe funding framework in 2021, Irish researchers have participated in 132 Horizon Europe health-related projects addressing a wide range of societal and scientific challenges.

These include: pandemic preparedness, chronic disease, clinical trials and health interventions, digital health, and global health.

These projects are primarily supported through the Horizon Europe Health Cluster and associated partnerships, which form part of Pillar II of the programme and focus on large-scale, collaborative research tackling global challenges.

In the 2025 Work Programme alone, €843 million was allocated to Health Cluster calls, alongside a further €117 million for initiatives under the EU Cancer Mission.

Aligned with the EU's 2025–2027 strategic priorities, these funding opportunities support research and innovation addressing environmental health impacts, mental health, pandemic preparedness, and AMR, while advancing AI- and biotech-enabled healthcare solutions.

Strengthening healthcare systems

The programme also strengthens healthcare systems and industrial competitiveness through support for advanced therapies, medical device manufacturing, regulatory efficiency, and faster market access for innovative medicines, in line with the Green Deal, the digital transformation of health and care, and EU industrial policy.

The EU Cancer Mission provides additional opportunities in translational research, environmental and paediatric cancer studies, innovative surgery and clinical trials, quality-of-life interventions, and strengthened national coordination through Cancer Mission Hubs.

These are all aimed at accelerating prevention, diagnosis, treatment, and improved outcomes for cancer patients across Europe.

Following the evaluation process, results from the 2025 calls are expected in 2026.

By combining applicant-focused support with strategic representation at EU level, the HRB helps to ensure that Irish health and social care research remains visible, competitive and influential within Horizon Europe.

Strategic Objective 6

Organisational excellence

As a leading agency for health and social care research, evidence, and data, the HRB's goal as an organisation is to be the best in every way.

We will further develop the HRB as a progressive place to work, where our people are supported to be innovative and responsive. We will maintain our culture of organisational excellence based on shared values that attract the best talent, embrace change, and deliver solutions. Our governance structures will support informed and accountable decision-making, and we will communicate with impact to strengthen our reputation across stakeholders.

Key items delivered:

- Conducted a series of workshops for Emerging Leaders (ELEVATE) in the HRB as part of our commitment to staff growth and development.
- Ensured the effectiveness of internal controls and undertook internal audits of key risk areas within the HRB in order to benchmark against best practice.
- Launched a themed approach to communication focusing on Evidence for Policy during 2025. This entailed webinars, podcasts, blogs, and a national conference, and resulted in an increase in HRB media coverage and social media engagement on the topic.

- Conducted continuous cybersecurity training for all staff, securing a 95% participation rate with a pass rate of at least 80%.
- Commenced a project to migrate the HRB's financial management system to the cloud.
- Achieved a 'substantial assurance level', the highest level possible provided by the auditors, on the *Compliance with the Code of Practice for the Governance of State Bodies* internal audit report.
- Migrated all staff to Windows 11 as part of an organisation-wide upgrade project.
- Achieved the Investors in Diversity Silver award at the 'Building Momentum' level from the Irish Centre for Diversity (ICFD).
- Introduced *The Health Research Podcast* series, covering topics from women's health research to how to break into the policy life cycle.
- Delivered support across key governance functions, including liaising with legal advisors; coordinating responses to Parliamentary Questions; assisting internal committees; and making progress on environment, social, and governance-related workstreams.
- Expanded the HRB's presence on LinkedIn to more than 12,600 followers, an increase of more than 3,045 followers in 2025. A total of 152 posts attracted strong engagement, reflecting an active and engaged audience.
- Supported the HRB Board to successfully complete its effectiveness report. The resulting action plan is currently being implemented.
- Delivered a facilities service and implemented sustainability actions in line with standard Sustainable Energy Authority of Ireland measurements.
- Organised the HRB Grant Holders Conference, which brought together our stakeholders from academic, healthcare professional, and policy backgrounds to network and provide input on our future strategy.
- Adopted AI across the organisation in line with public sector guidelines.
- Managed the recruitment process for 14 new hires and 7 leavers across the organisation in 2025. This included the recruitment of a new Chief Executive and Director.
- Resolved more than 2,439 information technology queries from staff through our online ticket system.
- Continued to develop procurement and contract management in order to help deliver our business and strategic goals.
- Launched a series of focus groups to better understand how staff connect with what we do and how we do it. These will be used to monitor staff sentiment and identify key areas for improvement as part of our organisational culture survey.

Case Study 11

Evidence for Policy initiative driving continuous cycle of improvement

The Evidence for Policy (EfP) communications initiative drew on national and global expertise to provide guidance for researchers and policy-makers on forging relationships that support the use of data and evidence in decision-making.

In 2025, the HRB accelerated its commitment to strengthening the connection between research and policy through its EfP communications initiative.

The initiative was complementary to the HRB EfP funding programme and entailed blogs, webinars, video content, and a podcast series. All of this content was collated on a dedicated web page and amplified through social media.

Aligned with the theme of the HRB National Conference 2025, the EfP initiative was a response to the enduring problem of research not informing policy as effectively or as often as it could.

Podcast

Throughout 2025, the initiative delivered a varied content programme. *The Health Research Podcast* – which attracted more than 4,500 views on YouTube and 300 listens on audio platforms – explored a wide range of topics on how evidence can shape real-world decisions.

Episode themes:

- *Influencing Health Policy and Behaviour* featured Professor Pete Lunn (Economic and Social Research Institute) and Professor Sara Burke (TCD).
- *How to Break into the Policy Life Cycle to Effect Change*, with Dr Thomas Hemmelgarn (EU Policy Lab, Brussels) and Dr Anna Visser (Department of the Taoiseach), examined how researchers can better align with policy-makers' needs.
- *Gaps in Women's Health Research* highlighted global gaps in research on conditions affecting females, with co-author of a report on the subject, Dr Jane Murphy (HRB), Dr Susan Smith (TCD) and Dr Linda Biesty (University of Galway).
- *Assessing Ireland's Ability to Produce and Act on Evidence Rapidly* explored a Rapid Evidence Support System Assessment (RESSA) with lead researcher Dr Barbara Whelan (Cochrane Ireland/Evidence Synthesis Ireland), Professor John Lavis (McMaster University, Ontario) and Dr Fergal Lynch (former Secretary General, Department of Children, Equality, Disability, Integration and Youth).
- *A National Conference Special* recorded from a mobile studio featured exclusive interviews and footage from the event, including vox pops with attendees.

Left to right: Dr Claire O'Connell, presenter of *The Health Research Podcast*; Dr Jane Murphy, Research Officer, HRB; Dr Linda Biesty, University of Galway; and Dr Susan Smith, Trinity College Dublin

Webinars

EfP webinars attracted more than 550 YouTube views. These included Professor Kathryn Oliver (London School of Hygiene and Tropical Medicine) discussing the Areas of Research Interest approach to knowledge brokerage within the UK government, where she previously worked.

This theme was picked up in a webinar featuring Professor Paul Cairney (University of Stirling), who highlighted uncertainty surrounding the conceptualisation of knowledge brokerage.

There were also two webinars featuring HRB Research Officer Dr Deirdre Mongan, who provided an overview of papers based on longitudinal data under the Growing Up in Ireland study.

Blogs

Alongside podcasts and webinars, we produced a series of blogs distilling expert insights into accessible commentary. Writers drew on webinar content, podcast discussions and published HRB reports to emphasise why evidence matters and how it can be applied in practice.

Top tips

We also invited HRB-funded researchers who have successfully influenced policy to share their tips on YouTube, which were amplified on our social media channels:

- Professor Sara Burke (TCD) shared her experience of bringing about a change to the roll-out of new health regions through local consultation.
- Her colleague, Professor Mary McCarron, explained how she used longitudinal data on the ageing of people with intellectual disability to influence the National Dementia Strategy.
- Dr Declan Devane (Evidence Synthesis Ireland/Cochrane Ireland) explained how regular engagement with decision-makers to establish their needs and timelines assisted the Government in its response to the COVID-19 pandemic.
- Professor Jonathan Drennan (University College Dublin) outlined how his team used strong research frameworks to influence policy on nurse staffing.

A continuous cycle of improvement

All of this content reinforced the core message that developing a more effective evidence for policy ecosystem at national, EU and international level will make for better evidence and better decisions. The initiative will continue to build on this bank of accessible resources throughout 2026.

Case Study 12

Equality, Diversity, and Inclusion at the HRB: Progress from Bronze to Silver

The HRB was proud to receive the Investors in Diversity Bronze award from the Irish Centre for Diversity (ICFD) in 2025.

This achievement saw our Human Resources department start the process for achieving the Silver award through staff consultation and training, and demonstrates the HRB's commitment to embedding diversity and inclusion across our organisation.

The Investors in Diversity Bronze award is the first step in the ICFD's three-stage Investors in Diversity accreditation framework. This provides a best practice roadmap that helps organisations embed the FREDIE principles – Fairness, Respect, Equality, Diversity, Inclusion, and Engagement – into systems and workplace culture.

Achieving Bronze

The Bronze award acknowledged progress already made in strengthening our internal systems and set a strong foundation for a long-term approach to developing workplace culture and corporate values in this area.

To achieve this, our Equality, Diversity and Inclusion (EDI) committee worked closely with the ICFD to develop the HRB's understanding of diversity in the workplace over the second half of 2024.

Leadership training

Management training was then undertaken to build knowledge and understanding of inclusive leadership, while enhancing awareness of how best to engage and support staff.

Alongside this, we reviewed organisational policies and developed a dedicated diversity policy aligned with current legislation.

Our EDI activity reflects the provisions of the Employment Equality Acts 1998–2015, which outlaw discrimination across nine protected grounds: gender, civil status, family status, sexual orientation, religion, age, disability, race, and membership of the Traveller Community.

These Acts apply to all stages of employment, including recruitment, training, promotion, and pay. They require employers to ensure equal treatment, provide reasonable accommodation for employees with disabilities, and prevent direct and indirect discrimination in the workplace.

Building momentum

Achieving the Bronze award created the momentum to further embed EDI across the organisation as we moved through the ICFD's accreditation framework.

Members of the HRB's EDI committee (left to right): Mellisa Tierney, D'Arcy Donnelly, and Ruth Bourke

The Bronze award recognises that we have established strong foundational structures to advance EDI, confirming that we have implemented appropriate policies, communicated them to staff, and ensured that senior leaders have completed diversity and inclusion training.

Bronze accreditation demonstrates organisational capability to progress our inclusion journey, supporting employee experience and laying the groundwork for deeper measurement, benchmarking, and long-term improvement.

Advancing to Silver

Building on this foundation, the EDI committee continued its work throughout 2025 with a view to obtaining Silver accreditation.

Pursuing Silver accreditation signals that the HRB is not only committed to EDI in principle, but is also actively measuring and improving our culture and practices.

Silver accreditation requires looking more deeply at the lived experiences of employees and assessing how well EDI is being embedded in practice across the organisation.

To this end, the EDI committee rolled out a survey to all employees and had the ICFD analyse the results.

This involved benchmarking against national and sectoral standards, collecting staff diversity demographics, and producing a comprehensive report with insights and recommendations.

The process also involved a presentation of findings to our management team and the EDI committee.

The survey was circulated in September for an 8-week period and met the mandatory 80% response rate.

The EDI committee hosted a staff information session with an ICFD representative, with additional opportunities for engagement through recorded sessions and coffee morning briefings.

This work formed the practical and consultative phase of our journey towards achieving Silver accreditation, which was awarded in October 2025.

Achieving Silver accreditation reflects our organisation-wide commitment to continuous improvement. Based on the results of our consultation and feedback, the focus for the EDI committee in 2026 will be on continuing to make advancements in EDI.

2

Appendices

Appendix A

List of HRB publications in 2025

HRB REPORTS

Mongan D, Millar SR and Galvin B (2025) *Drug use in Ireland 2023: Findings from the Healthy Ireland Survey.* Dublin: Health Research Board. Available from: https://www.drugsandalcohol.ie/43420/

Hanrahan MT, Millar SR, Mongan D, Lyons S and Galvin B (2025) *Prevalence of problematic opioid use in Ireland, 2020–2022.* Dublin: Health Research Board. Available from: www.drugsandalcohol.ie/42700/

Riordan F, Gopalakrishnan A, Kelleher C and Lyons S (2025) *Deaths among people who were homeless at time of death in Ireland, 2021.* HRB StatLink Series 22. Dublin: Health Research Board. Available from: www.drugsandalcohol.ie/42963/

Ní Luasa S, O'Neill D, O'Sullivan M and Lyons S (2025) *2024 Alcohol treatment demand.* HRB StatLink Series 22. Dublin: Health Research Board. Available from: www.drugsandalcohol.ie/43408/

Lynch T, Tierney P and Lyons S (2025) *2024 Drug Treatment Demand.* HRB StatLink Series 23. Dublin: Health Research Board. Available from: www.drugsandalcohol.ie/43052/

Daly A, Lovett H and Lynn E (2025) *Annual Report on the Activities of Irish Psychiatric Units and Hospitals 2024.* HRB StatLink Series 26. Dublin: Health Research Board. Available from: www.drugsandalcohol.ie/43691/

Kelleher C, Riordan F and Gopalakrishnan A (2025) *Drug Poisoning Deaths in Ireland in 2022: Data from the National Drug-Related Deaths Index (NRDI).* HRB StatLink Series 28. Dublin: Health Research Board. Available from: www.drugsandalcohol.ie/44591/

Fanagan S, Caffrey N, Cassidy L, Beegan J and Lynn E (2025) *Overview of people engaging with disability services, 2024.* HRB StatLink Series 24. Dublin: Health Research Board. Available from: www.hrb.ie/publication/overview-of-people-engaging-with-disability-services-bulletin-2024/

Irish Focal Point to the EUDA (2025) *Drugnet Ireland.* Issue 91, Spring 2025. Dublin: Health Research Board. Available from: https://www.hrb.ie/publication/drugnet-91/

Irish Focal Point to the EUDA (2025) *Drugnet Ireland.* Issue 92, Autumn 2025. Dublin: Health Research Board. Available from: https://www.drugsandalcohol.ie/44408/1/Drugnet_Issue_92.pdf

Irish Focal Point to the EUDA (2025) *Drugnet Ireland.* Supplement to Issue 92, Autumn 2025. Drug use prevalence in Ireland: Findings from recent population studies and estimates of problematic use. Dublin: Health Research Board. Available from: https://www.hrb.ie/wp-content/uploads/2025/10/HRB-Drugnet-92-Supplement_FINAL.pdf

EVIDENCE REVIEWS

Murphy J, Farragher L, O'Brien N, *et al.* (2025) *Women's health treatment interventions and outcomes: An evidence and gap map review.* Dublin: Health Research Board. Available from: https://www.hrb.ie/publication/womens-health-treatment-interventions-and-outcomes-an-evidence-and-gap-map-review1/

Moloney T, Mucheru D, Lee C, McGrath N and Long J (2025) *The effectiveness of public health interventions in reducing sunbed use and rates of skin cancer: An evidence review.* Dublin: Health Research Board. Available from: https://www.hrb.ie/publication/the-effectiveness-of-public-health-interventions-in-reducing-sunbed-use-and-rates-of-skin-cancer/

Teahan Á, Sharp M, Farragher A, Moloney T and Long J (2025) *Effectiveness, safety, and cost-effectiveness of pharmacist prescribing: An evidence review.* Dublin: Health Research Board. Available from: https://www.hrb.ie/publication/effectiveness-safety-and-cost-effectiveness-of-pharmacist-prescribing/

Long J, Waldron C and Farragher A, et al. (2025) *Effect of artificial community water fluoridation on dental health: An evidence review.* Dublin: Health Research Board. Available from: https://www.hrb.ie/publication/effect-of-artificial-community-water-fluoridation-on-dental-health-an-evidence-review/

Keane M, Murphy L, Farragher L, Moloney T and Long J (2025) *Health-promoting interventions in prisons: An evidence review.* Dublin: Health Research Board. Available from: https://www.hrb.ie/publication/health-promoting-interventions-in-prisons/

PEER-REVIEWED JOURNAL ARTICLES

Mongan D, Killeen N, Millar SR, Matias J, Keenan E and Galvin B (2025) Hexahydrocannabinol (HHC) use and harms in Ireland: New findings from the 2024 European Web Survey on Drugs. *Int J Drug Policy*, 145: 105011. Available from: https://www.sciencedirect.com/science/article/pii/S095539592500307X?via%3Dihub

Brennan MM, Mongan D, Doyle A, *et al.* (2025) Polysubstance use in early adulthood and associated factors in the Republic of Ireland: An analysis of a nationally representative cohort. *Addiction,* 121(1): 150–162. Available from: https://doi.org/10.1111/add.70182

Mongan D, Millar SR, Carew AM, et al. (2025) Trends in cocaine use and cocaine-related harms in Ireland: a retrospective, multi-source database study. *BMC Public Health,* 25(1): 2285. Available from: https://link.springer.com/article/10.1186/s12889-025-23224-y

Mongan D, Millar SR, Brennan MM, Doyle A, Galvin B and McCarthy N (2025) Longitudinal associations between childhood adversity and alcohol use behaviours in early adulthood: Examining the mediating roles of parental and peer relationships. *Child Abuse Negl,* 161: 107302. Available from: https://www.sciencedirect.com/science/article/pii/S0145213425000572

Brennan MM, Cavallaro M, Mongan D, et al. (2025) Factors associated with cocaine use at 17 and 20 years old: A longitudinal analysis of a nationally representative cohort. *J Adolesc Health,* 76(3): 488–498. Available from: https://www.jahonline.org/article/S1054-139X(24)00551-2/fulltext

Brennan MM, Mongan D, Doyle A, et al. (2025) Early and risky adolescent alcohol use independently predict alcohol, tobacco, cannabis and other drug use in early adulthood in Ireland: a longitudinal analysis of a nationally representative cohort. *BMC Public Health*, 25(1): 1129. Available from: https://link.springer.com/article/10.1186/s12889-025-22262-w

Mongan D, Millar SR, Brennan MM, Doyle A, Galvin B and McCarthy N (2025) Associations and mediating factors between adverse childhood experiences and substance use behaviours in early adulthood: a population-based longitudinal study. *Addict Behav,* 161: 108194. Available from: https://www.sciencedirect.com/science/article/pii/S0306460324002430?via%3Dihub

McGrath N, Waldron C, Farragher A, Walsh C and Polisena J (2025) Safety, cost and environmental impact of reprocessing high risk single-use medical devices: a systematic review and meta-analysis. *GMS Hyg Infect Control,* 20: Doc25. Available from: https://journals.publisso.de/en/journals/hic/volume20/dgkh000554

Reynolds CME, Cox G, Lyons S, McAvoy H, O'Connor L and Kavalidou K (2025) A qualitative analysis of people who died by suicide and had gambling documented in their coronial file. *Addict Behav,* 163: 108267. Available from: https://doi.org/10.1016/j.addbeh.2025.108267

Lovett H, Casey C, Daly A, Lynn E, O'Driscoll DJ and Clifford M (2025) Trends and description of inpatient admissions for eating disorders among children and adolescents in Ireland: 2018-2022. *J Eat Disord,* 13(1): 174. Available from: https://doi.org/10.1186/s40337-025-01372-1

Lovett H, Lynn E, Daly A, Corcoran C and O'Connor K (2025) The clinical and demographic profile of inpatient psychosis admissions in Ireland. *Ir J Psychol Med*, 42(2): 133–142 Available from: 10.1017/ipm.2024.69

Appendix B

List of HRB awards made in 2025 to Principal Investigators

PROJECTS AND PROGRAMMES

Title	Host institution	Scheme	Lead researcher title	Lead researcher name	Total awarded (€)
An Exploration of Emergency Gynaecological Care in Ireland	RCSI University of Medicine and Health Sciences	Applied Partnership Awards	Dr	Naomi Burke	75,930
Characterisation of platelet production methodologies and functionality to expand platelet transfusion therapy in Ireland	RCSI University of Medicine and Health Sciences	Applied Partnership Awards	Dr	Ingmar Schoen	197,307
Co-production of an adapted Physical Activity Referral Scheme to enhance community participation by young people with physical disability (CO-PARtake)	RCSI University of Medicine and Health Sciences	Applied Partnership Awards	Dr	Ailish Malone	197,584
Designing an integrated Women's Mental Health service: Enhancing QUality And inTEgration of women's mental healthcare	University College Dublin	Applied Partnership Awards	Dr	Anne Doherty	200,000
Development of a theory-informed implementation intervention to facilitate adoption and uptake of the National Physical Activity Pathways in Healthcare: the iPAPH Study	University College Dublin	Applied Partnership Awards	Dr	Gráinne O'Donoghue	199,501
Enabling General Practitioners to develop an extended role in adult ADHD diagnosis and management in primary care	University College Cork	Applied Partnership Awards	Professor	Emma Wallace	198,915

PROJECTS AND PROGRAMMES

Title	Host institution	Scheme	Lead researcher title	Lead researcher name	Total awarded (€)
Exploring experiences and co-producing supports to promote mental wellbeing and improve access to mental health services for children with physical disabilities in Ireland	RCSI University of Medicine and Health Sciences	Applied Partnership Awards	Dr	Jennifer Ryan	200,000
Improving outcomes for children in care	Trinity College Dublin	Applied Partnership Awards	Professor	David Hevey	199,724
Improving the mental health and wellbeing of priority population groups: An evaluation of the Act Belong Commit mental health promotion Initiative in Irish community settings	University of Galway	Applied Partnership Awards	Professor	Margaret Barry	199,728
Integrating smoking cessation interventions into mental health services: National survey, guideline development and pilot service evaluation	University College Dublin	Applied Partnership Awards	Professor	Brian O'Donoghue	198,999
Managed Clinical Rehabilitation Network (MCRN): Routinely Collected Data, Core Outcomes, and Cost-Effectiveness of Neuro-Rehabilitation in Ireland	Trinity College Dublin	Applied Partnership Awards	Professor	Dominic Trépel	200,000
PARTNER: Optimising Public and Patient Involvement in Regulation of Pharmacy and Healthcare Professions	RCSI University of Medicine and Health Sciences	Applied Partnership Awards	Professor	Michelle Flood	199,934
Person- and Place-Centred Integrated Long-Term Care in Peripheral Contexts – Context-Care: Investigating the impact of dissonance, digitalisation and local practices in care solutions	University of Galway	Applied Partnership Awards	Professor	Kieran Walsh	200,122

PROJECTS AND PROGRAMMES

Title	Host institution	Scheme	Lead researcher title	Lead researcher name	Total awarded (€)
Project ACCESS (Advancing Care through Single-Session Therapy): Examining the Implementation of Timely Youth Mental Health Interventions in Jigsaw Ireland	University College Dublin	Applied Partnership Awards	Dr	Amanda Fitzgerald	199,326
Shifting the paradigm-empowering paramedic educators to better support practitioner mental health, through an evidence-based, scaffolded teaching faculty curriculum	RCSI University of Medicine and Health Sciences	Applied Partnership Awards	Dr	Michelle O'Toole	199,734
SMILE MS: Supporting Mental Health by Improving the Lives and Emotional Wellbeing of People with Multiple Sclerosis	Maynooth University	Applied Partnership Awards	Dr	Rebecca Maguire	195,436
Understanding and Addressing Mental Health, Loneliness and Quality of Life in Older People Living with HIV in Ireland: A Pathway to Social Prescribing	Trinity College Dublin	Applied Partnership Awards	Dr	Louise Brennan	195,311
Working with key stakeholders to co-design strategies to support participation of young adults with Type 1 and Type 2 diabetes in Diabetic Retina Screening	University of Galway	Applied Partnership Awards	Dr	Jenny McSharry	199,464
CO-ACT – Co-Designing Adaptive Care Transformations for Ageing Communities	University of Galway	European Partnership on Transforming Health and Care Systems	Professor	Molly Byrne	426,989
Smart Technology for Remote Intervention in Diabetic foot ulcEr prevention in COMmunity settings (STRIDE-COM)	University College Cork	European Partnership on Transforming Health and Care Systems	Professor	Patricia Kearney	421,370
Development of Medical Workforce Management Framework for Staffing and Skills Mix Assessment for Resilient Teams in Ireland (Med-SMART): a mixed-methods design	RCSI University of Medicine and Health Sciences	Evidence for Policy	Dr	Siobhan McCarthy	292,085

PROJECTS AND PROGRAMMES

Title	Host institution	Scheme	Lead researcher title	Lead researcher name	Total awarded (€)
Informing National Policy for physical activity based secondary prevention of stroke in IREland (INsPIRE)	Trinity College Dublin	Evidence for Policy	Professor	Susan Smith	299,552
The Attune Project: Enhancing responsiveness of Ireland's home support services through the lived experience of older adults	RCSI University of Medicine and Health Sciences	Evidence for Policy	Dr	Elizabeth Morrow	300,000
DIgital markers of Social Cognition for diagnosis & pRognosis in Neurodegeneration (DISCeRN)	Trinity College Dublin	EU Joint Programme – Neurodegenerative Disease Research	Professor	Agustín Ibáñez	430,000
Empowering Needs-based Social Health and inclUsive care for RarEr Dementias in moderate to advanced stages (ENSURED)	Dublin City University	EU Joint Programme – Neurodegenerative Disease Research	Dr	Louise Hopper	400,036
Quality of life correlates of bulbar and pseudobulbar dysfunction in late stage MND: clinical determinants, screening tools, opportunities for evidence-based QoL-focused interventions (QualBulMND)	Trinity College Dublin	EU Joint Programme – Neurodegenerative Disease Research	Professor	Peter Bede	530,000
Translational Pain Discovery: BridGing MicE, Rat, aNd HUman Studies (GENUS)	University of Galway	ERA-NET NEURON – The Network of European Funding for Neuroscience Research	Dr	Michelle Roche	430,000
Understanding how stress and negative affect exacerbate chronic neuropathic pain: Unlocking new therapeutic avenues (STRESSPAIN)	University of Galway	ERA-NET NEURON – The Network of European Funding for Neuroscience Research	Professor	David Finn	530,000
Assessing Status and Trends in Diabetes Care in Ireland and the Early Impact of Health Care Reform	RCSI University of Medicine and Health Sciences	Secondary Data Analysis Projects	Professor	Edward Gregg	328,750
Digital and Real-World Leisure Activities: Tracking the Wellbeing Impacts of Teen Pastimes	University of Galway	Secondary Data Analysis Projects	Dr	Caroline Heary	348,955

PROJECTS AND PROGRAMMES

Title	Host institution	Scheme	Lead researcher title	Lead researcher name	Total awarded (€)
IrelandICUdb-Optimizing outcomes from weaning from invasive mechanical ventilation in Ireland: Establishing a Federated, FAIRAligned ICU Database for Benchmarking and Policy Translation	University of Galway	Secondary Data Analysis Projects	Dr	Bairbre McNicholas	349,505
Leveraging Predictive Analytics to Reduce Avoidable Hospitalisations and Mortality in Haemodialysis Patients	University of Limerick	Secondary Data Analysis Projects	Professor	Austin Stack	349,960
Optimising the use of antipsychotic medications in first episode psychosis by examining effectiveness, outcomes from discontinuation and the potential for personalised treatments	University College Dublin	Secondary Data Analysis Projects	Professor	Brian O'Donoghue	349,926
PROACT: Predictive Analytics for Optimised Care in Youth Mental Health	University of Limerick	Secondary Data Analysis Projects	Dr	Ruth Melia	349,715
The Role of Community Water Fluoridation in Human Health: Neurodevelopmental, Cognitive and Dental Health Outcomes Across Generations	Trinity College Dublin	Secondary Data Analysis Projects	Dr	Lina Zgaga	349,926
Ultra-processed Foods, Diet Quality, and Cardiometabolic Health: An Inter-disciplinary Trans-Atlantic Collaborative Project	University College Dublin	US-Ireland R&D Partnership Programme	Professor	Lorraine Brennan	450,116
				Total:	€10,393,900

CAPACITY BUILDING AND LEADERSHIP ENHANCEMENT

Title	Host institution	Scheme	Lead researcher title	Lead researcher name	Total awarded (€)
Evaluation of MRCP as a screening tool for pancreatic cancer in people with cystic fibrosis	University College Dublin	Fulbright-HRB HealthImpact Award	Dr	Susanne O'Reilly	9,478
Deployment of Artificial Intelligence and Computer Assistance in Colorectal Surgery	University College Dublin	Fulbright-HRB HealthImpact Award	Professor	Ronan Cahill	8,839
Morphea, rare disease and skin disorder	University College Cork	Fulbright-HRB HealthImpact Award	Dr	Lisa Kiely	13,309
Temporal, spatial, and quantitative analysis of glycolytic complexes in mammalian primary intestinal epithelial cells	University College Dublin	Summer Student Scholarships	Mr	Marko Sicic	3,200
The impact of serum ketones on liver fatness in obese individuals on a low carbohydrate diet	University of Galway	Summer Student Scholarships	Miss	Bridget Reddington	3,200
Examining patterns of breast cancer among younger and older women	RCSI University of Medicine and Health Sciences	Summer Student Scholarships	Ms	Khushboo Gupta	3,200
Assessment of the structure and diagnostic accuracy of the QbTest in a new neurodevelopment ADHD pathway for children in Ireland	University College Cork	Summer Student Scholarships	Miss	Orlaith Finn	2,400
Longitudinal Analysis of Proteinuria and eGFR Trends in Biopsy-Proven IgA Nephropathy Patients at Galway University Hospitals	University of Galway	Summer Student Scholarships	Miss	Chung Ying Lip	2,800
Creating and optimize an evidence-based clinical pathway for eating disorders in an Irish Child and Adolescent Mental Health Service, as part of a Learning Health System	University of Galway	Summer Student Scholarships	Ms	Jumanah Al Ibrahim	3,200

CAPACITY BUILDING AND LEADERSHIP ENHANCEMENT

Title	Host institution	Scheme	Lead researcher title	Lead researcher name	Total awarded (€)
Prevalence and Outcomes of Delirium in the Intensive Care Unit in Sligo University Hospital – A Retrospective Analysis	University of Galway	Summer Student Scholarships	Miss	Najla Alsaadon	3,200
Perceptions in Irish adults of the role of physical activity in preventing and treating obesity	University of Galway	Summer Student Scholarships	Ms	Fiona Loughman	3,200
Rehabilitation following 1st carpometacarpal replacement: a systematic review	University of Limerick	Summer Student Scholarships	Mr	Lee Traynor	3,200
Heterogenous tumour phantoms for focussed ultrasound	University College Dublin	Summer Student Scholarships	Mr	Shaz Raja	3,200
Validation of Cancer Incidence Using Irish GP Data: A Retrospective Cohort Study Comparing Primary Care and National Registry Data	RCSI University of Medicine and Health Sciences	Summer Student Scholarships	Mr	Alexander Carroll	3,200
A Realist Review of mHealth Interventions to Enhance Cancer Screening Uptake Among Underserved Populations	RCSI University of Medicine and Health Sciences	Summer Student Scholarships	Mr	Ricardo Zaidan	2,400
Investigating the anti-cancer activity of MAIT cells in obesity	Maynooth University	Summer Student Scholarships	Miss	Zofia Terzyk	3,200
Evaluation of the Impact of Implementing a Future Care Plan with patients with Palliative Care Needs	University College Cork	Summer Student Scholarships	Miss	Caoimhe Moloney	2,400
Examining the relationship between suicidal thoughts and behaviours and long-lasting conditions or disabilities: Secondary analysis of Healthy Ireland Survey	National Suicide Research Foundation	Summer Student Scholarships	Miss	Ha Trang Nguyen	3,200

CAPACITY BUILDING AND LEADERSHIP ENHANCEMENT

Title	Host institution	Scheme	Lead researcher title	Lead researcher name	Total awarded (€)
Investigating sialylation-mediated inhibition of NK cell function by stromal cells in multiple myeloma	University of Galway	Summer Student Scholarships	Miss	Dervla McManus	3,200
Frailty in the Acute Hospital Setting: Prevalence, Outcomes, and Trends	University of Galway	Summer Student Scholarships	Mr	Paschal Walsh	3,200
Barriers and facilitators to employer implementation of workplace breastfeeding policies: A rapid qualitative evidence synthesis	University of Galway	Summer Student Scholarships	Miss	Shannen Taylor	3,200
Exploring the Relationship Between Caffeine Consumption and Cognitive Function in the Irish Population	University of Galway	Summer Student Scholarships	Mr	Nirupam Srinivasan	3,200
Quality of Life Assessment in Diabetic Patients Undergoing Bariatric/Metabolic Surgery	University of Galway	Summer Student Scholarships	Ms	Mia Rossi	3,200
Mapping Comorbidities and Survival in Patients Suffering From Chronic Limb-Threatening Ischemia	University of Galway	Summer Student Scholarships	Mr	Evan Rea	3,200
Investigating the Immunomodulatory Role of Stromal Cells in the Colorectal Tumor Microenvironment and Their Impact on T Cell-Mediated Immunity	University of Galway	Summer Student Scholarships	Miss	Koyena Pal	3,200
Nanosponge-packaged mitotane in the management of adrenocortical carcinoma	University of Galway	Summer Student Scholarships	Mr	David McDonnell	3,200
The Impact of Meal-Time Boluses and Carbohydrates Consumed on Glycaemic Indices in People with Type 1 Diabetes Using a Hybrid-Closed Loop System	University of Galway	Summer Student Scholarships	Ms	Mairéad McCann	3,200

CAPACITY BUILDING AND LEADERSHIP ENHANCEMENT

Title	Host institution	Scheme	Lead researcher title	Lead researcher name	Total awarded (€)
The association of polypill and dementia: a systematic review and meta-analysis	University of Galway	Summer Student Scholarships	Mr	Anandakrishnan Karadiyil Anilkumar	3,200
Towards a Unified Antimicrobial Stewardship Framework for Irish Hospitals: A Comparative Review of Current Guidelines	University of Galway	Summer Student Scholarships	Mr	Hussein Hashem	3,200
Analysis of thrombi from thrombectomies in ischaemic stroke patients for C-reactive protein and Interleukin 6; studying inflammation in stroke	University of Galway	Summer Student Scholarships	N/A	Sahil Gupta	3,200
Prospective comparative evaluation of Artificial Intelligence Clinical Decision Support System (AI-CDSS) for hypertension with gold standard treatment decisions	University of Galway	Summer Student Scholarships	Miss	Michelle Gormley	3,200
Biocompatibility assessment of synthetic cartilage	University of Galway	Summer Student Scholarships	Ms	Hannah Foy	3,200
Gender and Sexual Orientation Disparities in STI testing: Identifying Barriers Among Diverse Subgroups	University of Galway	Summer Student Scholarships	Mr	Kyle Foo	3,200
Investigating FOXP1 in schizophrenia aetiology	University of Galway	Summer Student Scholarships	Mr	Noah Folan-García	3,200
LifeLab	Dublin City University	Summer Student Scholarships	Ms	Antonia Kevin	3,200
Soft Robotic Drug Delivery: Mapping Diffusions Patterns in Foreign Body Response Mimics	University of Galway	Summer Student Scholarships	Miss	Amirah Aljohani	3,200

CAPACITY BUILDING AND LEADERSHIP ENHANCEMENT

Title	Host institution	Scheme	Lead researcher title	Lead researcher name	Total awarded (€)
Characterisation of a wound healing cell therapy product that uses human umbilical cord mesenchymal stromal cells cultured under macromolecular crowding conditions on a collagen sponge	University of Galway	Summer Student Scholarships	Mr	Abdulrahman Albader	3,200
CT imaging in colon cancer and its predictability of primary tumour visibility and nodal presence and its correlation with final histopathology	University of Galway	Summer Student Scholarships	Miss	Anwaar Albahri	3,200
Single Surgeon Comparative Analysis of Post-Operative Blood Loss in Coronary Artery Bypass Graft (CABG) and Aortic Valve Replacement (AVR)	University College Cork	Summer Student Scholarships	Mr	Yash Mathur	2,400
Investigating the impact of the human lung microenvironment on the antibiotic susceptibility of Mycobacterium abscessus	Trinity College Dublin	Summer Student Scholarships	Ms	Dora Foster	3,200
Evaluation of Caru Programme: a national programme supporting palliative, end-of-life and bereavement care in Nursing homes in Ireland using muti-methods evaluation	University College Dublin	Summer Student Scholarships	Ms	Sophie Keegan	2,400
PEARL: Partnership Evaluation and Resource Toolkit for Public and Patient Involvement in Clinical Pharmacy and General Practice	University College Cork	Summer Student Scholarships	Mr	Seán Meskell	3,200

CAPACITY BUILDING AND LEADERSHIP ENHANCEMENT

Title	Host institution	Scheme	Lead researcher title	Lead researcher name	Total awarded (€)
Participation in Research on Puberty: Adolescent and Parent Perspectives on Barriers and Facilitators relevant to Engagement in Research on Puberty	University College Cork	Summer Student Scholarships	Miss	Andrea Marshall	3,200
Knowledge, Attitudes and Practices of Pain Management in Diabetic Neuropathy in Primary Care: A Cross-Sectional Study	University College Cork	Summer Student Scholarships	Mr	Seng Yew Sean Lee	3,200
New Mothers' Experiences and Opinions of Breastfeeding Supports Provided by Hospital Staff at CUMH	University College Cork	Summer Student Scholarships	Miss	Sinead Treacy	3,200
Predicting and Evaluating the Outcomes of Alternative Surgical Interventions in Failed Spinal Fixation Surgeries using Finite Element Analysis	University College Dublin	Summer Student Scholarships	Mr	Rohan Tewari	3,200
Investigating the relationship between social media use and mental health problems in young people; a population based study	RCSI University of Medicine and Health Sciences	Summer Student Scholarships	Ms	Delia Cotter	3,200
Healthcare professionals' experiences and preferences when assessing infant feeding and child anthropometric outcomes	University College Cork	Summer Student Scholarships	Miss	Grace Hernan	3,200
The Impact of Assistance Dogs on Occupational Performance in Children with Autism Spectrum Disorder: A Parent-Reported Study in Ireland	University College Cork	Summer Student Scholarships	Mr	Rory Dalton	3,200

CAPACITY BUILDING AND LEADERSHIP ENHANCEMENT

Title	Host institution	Scheme	Lead researcher title	Lead researcher name	Total awarded (€)
Hypertensive disorders of Pregnancy and the long-term risk of maternal peripheral vascular disease: a systematic review and meta-analysis	University College Cork	Summer Student Scholarships	Miss	Hio Weng Chu	3,200
Optimisation of Fluoroscopic Imaging used in Fertility Investigations (Hysterosalpingography)	Technological University Dublin	Summer Student Scholarships	Miss	Lucy Paul	2,800
Evaluating the Sensitivity of Ultrasound Elastography for Detecting Microstructural Changes in Adipose Tissue: Implications for Early Cancer Diagnosis in Breast Tissue	Trinity College Dublin	Summer Student Scholarships	Miss	Simone Daranyi	2,400
An Exploration of Patient Perspectives on Patient Initiated Reviews (PIR) in Optimising Sarcoma Care Efficiency: A Mixed Methods Approach	Trinity College Dublin	Summer Student Scholarships	Mr	Thayumaan Bissoonauth	3,200
Assessing Health-Related Quality of Life in Infants with Pierre Robin Sequence	RCSI University of Medicine and Health Sciences	Summer Student Scholarships	Miss	Sidi Bao	3,200
A Decade on: Investigating Mortality Trends and Causes of Death Among Individuals Experiencing Homelessness in the Dublin Region (2015–2025)	Trinity College Dublin	Summer Student Scholarships	Miss	Vera Lee	2,800
Tracking Ireland's progress on Sláintecare – a comparison of the health system before and during the implementation of Sláintecare	Trinity College Dublin	Summer Student Scholarships	Ms	Jia Yi Ong	2,400
Evaluation of a novel method for editing motor unit firing trains in people with ALS using high density electromyography	Trinity College Dublin	Summer Student Scholarships	Miss	Natalia Melnicka	3,200

CAPACITY BUILDING AND LEADERSHIP ENHANCEMENT

Title	Host institution	Scheme	Lead researcher title	Lead researcher name	Total awarded (€)
Comparative analysis between Photoplethysmography (PPG) and Electrocardiography (ECG) for monitoring Heartbeat Evoked Potentials (HEP)	Trinity College Dublin	Summer Student Scholarships	Mr	Patrick McPartlan	3,200
An Exploration of Patient Use of Transdermal Gel-based Oestrogen Hormone Replacement Therapy	Trinity College Dublin	Summer Student Scholarships	Ms	Anna Morris	3,200
Analysis of EMIS 2024 Behavioral Surveillance Data: Sexual Health Trends and Policy Implications in Ireland (2017–2024)	Trinity College Dublin	Summer Student Scholarships	Miss	Noor Ainah Gulzar Ahmad	3,200
Cognitive Reserve, Brain Vasculature, and Alzheimer's Risk in Midlife: the PREVENT Dementia Study	Trinity College Dublin	Summer Student Scholarships	Ms	Charlotte Connolly	3,200
Understanding immuno-metabolism and mitochondrial biology across different solid malignancies	Trinity College Dublin	Summer Student Scholarships	Ms	Ava Power	2,400
Assessing the role of GPR55 in brain tumour related epilepsy	Trinity College Dublin	Summer Student Scholarships	Ms	Ksenija Agafonova	3,200
Development of an educational intervention to improve understanding of mental health in a rare neurodevelopmental-related genetic condition	Trinity College Dublin	Summer Student Scholarships	Miss	Cliodhna Conway	2,400
Empowering Adolescents with Asthma: A Patient-Oriented Digital Resource for Enhanced Self-Management and Improved Health Outcomes	Trinity College Dublin	Summer Student Scholarships	Ms	Beauty Ihekwereme	3,200

CAPACITY BUILDING AND LEADERSHIP ENHANCEMENT

Title	Host institution	Scheme	Lead researcher title	Lead researcher name	Total awarded (€)
Study of Iron Dysregulation in Alveolar Macrophages and its Role in Susceptibility to Bacterial Infections and Immune Dysfunction in COPD patients	Trinity College Dublin	Summer Student Scholarships	Miss	Nicole Butler	3,200
A Retrospective Descriptive Analysis of Stroke in the Young Adult Irish Population	Trinity College Dublin	Summer Student Scholarships	Miss	Sneha Thomas	3,200
Development and Optimisation of an Assay to Evaluate Granulocyte Transfusion Potency Against Aspergillus, Candida and Magnusiomyces Species	Trinity College Dublin	Summer Student Scholarships	Miss	Heba Bangash	3,200
Rehabilitation needs in patients living with and beyond cancer	Trinity College Dublin	Summer Student Scholarships	Miss	Ganna Eissa	3,200
Frame for Complex MDT Guidelines: Establishing Best Practices in Infectious Diseases and Orthopaedics	Trinity College Dublin	Summer Student Scholarships	Mr	Adam Adnan	3,200
What matters most to older patients with frailty in Ireland?	Trinity College Dublin	Summer Student Scholarships	Mr	Conal Cunningham	3,200
Advancing Rheumatology Care: A Retrospective Study of Inpatient Rehabilitation Effectiveness	Trinity College Dublin	Summer Student Scholarships	Miss	Alicia Olotu-Jubril	3,200
Monocyte activation and trained immunity in smokers	Trinity College Dublin	Summer Student Scholarships	Ms	Ei Thant Htoo	3,200
ARCADIC: AlteRed Circadian rhythm And immune Dysfunction In children with Cerebral palsy	Trinity College Dublin	Summer Student Scholarships	Miss	Susan Mosunmade Adetunji	3,200
Development of a cancer organoid microarray platform to analyse drug response biomarkers	Dublin City University	Summer Student Scholarships	Miss	Xuanlin Lu	3,200

CAPACITY BUILDING AND LEADERSHIP ENHANCEMENT

Title	Host institution	Scheme	Lead researcher title	Lead researcher name	Total awarded (€)
Identifying nutritional risk among pregnant women with Hyperemesis Gravidarum: A pilot study using the Malnutrition Universal Screening Tool (MUST)	Technological University Dublin	Summer Student Scholarships	Ms	Grace Shimmons	3,200
Defining the role of macrophage metabolic reprogramming during fibrotic lung disease	University College Dublin	Summer Student Scholarships	Ms	Claire Grencikova	3,200
Informal Nutrition Advice from Support Networks to those living with and beyond cancer: An Exploratory Study	Atlantic Technological University	Summer Student Scholarships	Miss	Martina Bellante	3,200
Outcomes and Management of Sports-Related Spinal Cord Injuries in Ireland: A 15-Year Retrospective Analysis of Clinical Interventions and Rehabilitation	RCSI University of Medicine and Health Sciences	Summer Student Scholarships	Mr	Munasib Hossain	3,200
Investigation of the effect of ARDS patient serum on MSC cytoprotective function in vitro	Maynooth University	Summer Student Scholarships	Miss	Aimee Mccormack	3,200
Drug response profiles in patient-derived atherosclerotic plaque smooth muscle cells: tailoring therapy for patients with atherosclerosis	University College Dublin	Summer Student Scholarships	Miss	Isobel McCabe	3,200
Stigma, psychological distress and quality of life in adults with muscular dystrophy and similar neuromuscular conditions in Ireland	University College Dublin	Summer Student Scholarships	Ms	Monami Ito	3,200

CAPACITY BUILDING AND LEADERSHIP ENHANCEMENT

Title	Host institution	Scheme	Lead researcher title	Lead researcher name	Total awarded (€)
Evaluating the Efficacy and Safety of Platelet-Rich Plasma Compared to Autologous Serum Eye Drops for Aqueous-Deficient Dry Eye: A Systematic Review and Meta-Analysis	RCSI University of Medicine and Health Sciences	Summer Student Scholarships	Ms	Anna Mulcahy	3,200
Prolyl hydroxylase domain inhibition and reactive oxygen species scavenging as the next generation stroke therapy? Investigations using an oxygen glucose deprivation (OGD) brain slice model	University College Dublin	Summer Student Scholarships	Ms	Victoria Dranko	3,200
				Total:	€282,426

ENABLERS

Title	Host institution	Scheme	Lead researcher title	Lead researcher name	Total awarded (€)
"Understanding Dementia Together": an interprofessional workshop in collaborative dementia care	University College Cork	Conference and Event Sponsorship Scheme	Ms	Trish O'Sullivan	4,205
10th Annual Public & Patient Involvement Summer School	University of Limerick	Conference and Event Sponsorship Scheme	Dr	Jonathan Salsberg	5,000
12th Annual National Lean Healthcare Symposium	University College Dublin	Conference and Event Sponsorship Scheme	Dr	Seán Paul Teeling	5,000
18th Annual Engaging Dementia Conference	Engaging Dementia	Conference and Event Sponsorship Scheme	Ms	Kimberly Tully	5,000
Advancing Research on Social Determinants of Child Health in Ireland: Insights for Improving Outcomes	Children's Research Network	Conference and Event Sponsorship Scheme	Ms	Niamh Buckle	5,000
African Health Summit Ireland 2025	University College Dublin	Conference and Event Sponsorship Scheme	Mr	Olayinka Aremu	5,000
All-Ireland Multiple Sclerosis Research Network (AIMS-RN) Symposium	Maynooth University	Conference and Event Sponsorship Scheme	Dr	Rebecca Maguire	5,000
Brain Health and Dementia: What You Need to Know	The Alzheimer Society of Ireland	Conference and Event Sponsorship Scheme	Dr	Laura O'Philbin	4,922
Breathing better, learning better: How the classroom air affects children's health and education	University College Cork	Conference and Event Sponsorship Scheme	Dr	Asit Kumar Mishra	5,000
Collaborative and Proactive Solutions: Bridging the gap between knowing better and doing better to support people perceived as having complex behaviour	University of Limerick	Conference and Event Sponsorship Scheme	Professor	Donal Fortune	5,000
Connectivity for Brain Health - The 2025 Neuroscience Ireland Conference	Neuroscience Ireland	Conference and Event Sponsorship Scheme	Professor	Dara Cannon	5,000

ENABLERS

Title	Host institution	Scheme	Lead researcher title	Lead researcher name	Total awarded (€)
DRATgons' Den: A Knowledge Exchange Event for Early Career Researchers to showcase their Research & Communication Skills to an audience of peers & experts, hosted by the Dementia Research Advisory Team	The Alzheimer Society of Ireland	Conference and Event Sponsorship Scheme	Ms	Cíara O'Reilly	4,851
Empowering Research Nurses and Midwives: Fostering Excellence, Advancing Leadership	RCSI University of Medicine and Health Sciences	Conference and Event Sponsorship Scheme	Ms	Simone Walsh	5,000
Fetoscopy 2025	RCSI University of Medicine and Health Sciences	Conference and Event Sponsorship Scheme	Professor	Fergal Malone	4,994
Ignite Insight: National Public and Patient Involvement (PPI) in PhD Research Symposium	University College Cork	Conference and Event Sponsorship Scheme	Professor	Patricia Kearney	4,990
InFACT 2.0: The International Forum for Acute Care Trialists: Establishing the Irish Critical Care Clinical Trials Network as a regional hub of InFACT and strengthening global research collaboration	University College Dublin	Conference and Event Sponsorship Scheme	Professor	Alistair Nichol	5,000
Innovation in Evaluation of Swallowing Difficulties	Trinity College Dublin	Conference and Event Sponsorship Scheme	Ms	Eadaoin Flynn	5,000
Intersex Insights: Heritage, Visibility, and Recognition	Dublin City University	Conference and Event Sponsorship Scheme	Dr	Marta Prandelli	5,000
Irish Research Radiation Oncology Group Conference 2025	HSE – St Luke's Hospital (Rathgar)	Conference and Event Sponsorship Scheme	Professor	Sinead Brennan	5,000
Join us for a 'Picnic in the Park' to celebrate World Microbiome Day 2025	University College Cork	Conference and Event Sponsorship Scheme	Professor	Paul Ross	5,000
Patient safety in the community seminar	University of Limerick	Conference and Event Sponsorship Scheme	Dr	Anna Chatzi	5,000

ENABLERS					
Title	Host institution	Scheme	Lead researcher title	Lead researcher name	Total awarded (€)
Peptide Computational Methods and Applications	University College Dublin	Conference and Event Sponsorship Scheme	Dr	Aidan Murphy	5,000
Positive Health Summit 2026: Connecting Communities, Inspiring Well-being	RCSI University of Medicine and Health Sciences	Conference and Event Sponsorship Scheme	Dr	Padraic Dunne	4,910
Postgraduate Immersion Day 2025: Fostering the Future in Obstetrics and Gynaecology	RCSI University of Medicine and Health Sciences	Conference and Event Sponsorship Scheme	Dr	Karen Flood	4,767
RAiN FEST 2025: Rare Disease Research, Education & Innovation in Action	University College Dublin	Conference and Event Sponsorship Scheme	Dr	Suja Somanadhan	4,900
Sharing insights for a 'good' life after stroke	RCSI University of Medicine and Health Sciences	Conference and Event Sponsorship Scheme	Professor	Frances Horgan	5,000
Snapshots of Sjögren's: A Photovoice Journey Through Living with Sjögren's in Ireland	RCSI University of Medicine and Health Sciences	Conference and Event Sponsorship Scheme	Dr	Nikki Dunne	4,953
Teacher Mental Health and Wellbeing: Translating Research into Action for Policy and Practice	Dublin City University	Conference and Event Sponsorship Scheme	Dr	Sabrina Fitzsimons	5,000
TransCare seminar – Developing creative practices around trans, gender-diverse and intersex inclusive healthcare research and education	University College Cork	Conference and Event Sponsorship Scheme	Dr	Valeria Venditti	5,000
Trinity College Dublin's Open Day for Lewy Body Dementia Awareness	Trinity College Dublin	Conference and Event Sponsorship Scheme	Professor	Iracema Leroi	5,000
22nd Annual 'Psychology, Health and Medicine' (PHM) Conference	RCSI University of Medicine and Health Sciences	Conference and Event Sponsorship Scheme	Dr	Maria Pertl	4,815

ENABLERS					
Title	Host institution	Scheme	Lead researcher title	Lead researcher name	Total awarded (€)
Advancing Public and Patient Involvement and Engagement (PPIE) in Health Economics Research	University College Cork	Conference and Event Sponsorship Scheme	Dr	Ann Kirby	4,998
AI in Clinical Neurology National Conference: Maximising Opportunities, Navigating Challenges	Beaumont Hospital	Conference and Event Sponsorship Scheme	Professor	Norman Delanty	5,000
All Island Children's Palliative Care Conference	University College Dublin	Conference and Event Sponsorship Scheme	Dr	Stacey Power Walsh	5,000
All-Island Medication Safety Conference	Department of Health Northern Ireland	Conference and Event Sponsorship Scheme	Mrs	Bronagh Ward	5,000
Bridging the Genomics Gap in Clinical Neurology	University College Dublin	Conference and Event Sponsorship Scheme	Dr	Patrick Moloney	5,000
Co-Creating a Roadmap for a National Mental Health Data Registry in Ireland: A One-Day Multi-Stakeholder Workshop	Mental Health Reform	Conference and Event Sponsorship Scheme	Miss	Giulia Camera	5,000
Connecting the paediatric research and innovation community in Dublin: CHI Research and Innovation Day 2026	Children's Health Ireland (CHI)	Conference and Event Sponsorship Scheme	Dr	Karl Egan	5,000
Emerging Minds, Exploration of Brain Health- The 2026 Neuroscience Ireland Early Career Researchers Conference	University College Dublin	Conference and Event Sponsorship Scheme	Ms	Susan Burke	5,000
Exploring FemTech in Healthcare: Women's Experiences and Healthcare Professionals' Priorities	University College Cork	Conference and Event Sponsorship Scheme	Ms	Jennifer Cooney-Quane	4,620
Forward momentum: advancing the delivery of preconception, pregnancy and postpartum physical activity support and guidance through co-creation and collaboration across the island of Ireland	Ulster University	Conference and Event Sponsorship Scheme	Dr	Lizzy Deery	4,987

ENABLERS

Title	Host institution	Scheme	Lead researcher title	Lead researcher name	Total awarded (€)
From Evidence to Impact: Addressing Multimorbidity in Irish Healthcare	University College Cork	Conference and Event Sponsorship Scheme	Dr	Joice Cunningham	5,000
HSE West/North West Dementia Conference. The goal of the conference is to bring together health professionals from across the region to learn and network with professionals working in dementia care	Health Service Executive	Conference and Event Sponsorship Scheme	Mrs	Paula Noone	4,800
Irish preconception health, care and research network	University College Cork	Conference and Event Sponsorship Scheme	Dr	Rita Forde	4,928
Pathways to Healthy and Active Ageing: From Insight to Action	University College Cork	Conference and Event Sponsorship Scheme	Dr	Ruth McCullagh	5,000
Research Seminar: Optimising Recruitment and Retention in Clinical Trials	University College Dublin	Conference and Event Sponsorship Scheme	Dr	Linda O'Neill	5,000
The Health Consequences of Loneliness	Maynooth University	Conference and Event Sponsorship Scheme	Dr	Joanna McHugh Power	4,966
Trinity St James's Cancer Institute: 13th International Cancer Conference 2026: Transforming Cancer Research and Care – Changing Lives	Trinity College Dublin	Conference and Event Sponsorship Scheme	Dr	Patricia Doherty	5,000
Voices Rarely Heard: Empowering Young People Living with Rare Diseases – From Lived Experience to Leadership	University College Dublin	Conference and Event Sponsorship Scheme	Dr	Suja Somanadhan	4,950
				Total:	€242,555

CLINICAL TRIALS AND INTERVENTIONS

Title	Host institution	Scheme	Lead researcher title	Lead researcher name	Total awarded (€)
Risk-based treatment strategy in ELEVATEd blood pressure (ELEVATE): a pragmatic randomized clinical trial	University of Galway	ERA4Health Partnership - Investigator Initiated Clinical Studies	Professor	J. William McEvoy	994,478
Strategies for antiplatelet management following acute coronary syndrome	RCSI University of Medicine and Health Sciences	ERA4Health Partnership - Investigator Initiated Clinical Studies	Professor	Robert Byrne	958,135
The PARTUM Trial: A pragmatic non-inferiority trial comparing low-dose aspirin versus usual care low-molecular-weight heparin for postpartum VTE prevention	University College Dublin	ERA4Health Partnership - Investigator Initiated Clinical Studies	Professor	Fionnuala Ní Áinle	996,749
Women's Aneurysm Research: Repair Immediately or Routine Surveillance, Trial and Registry (Irish Centres)	University of Galway	Investigator-Led Clinical Trials Programme	Professor	Stewart Walsh	207,961
A harmonized Platform for Randomized Adaptive Clinical Trials in acute hypoxaemic respiratory failure in Ireland (PRACTICAL-Ireland)	University College Dublin	Investigator-Led Clinical Trials Programme	Professor	Danny McAuley	1,319,904
A feasibility randomised controlled trial of a digital obesity management programme for women living with obesity and infertility	University College Dublin	Investigator-Led Clinical Trials Programme	Professor	Carel Le Roux	428,938
Feasibility of a Safety-Netting and Early Referral Intervention for Cancer in Primary Care	RCSI University of Medicine and Health Sciences	Investigator-Led Clinical Trials Programme	Professor	Patrick Redmond	447,285
				Total:	€5,353,450

INFRASTRUCTURE AND NETWORKS					
Title	**Host institution**	**Scheme**	**Lead researcher title**	**Lead researcher name**	**Total awarded (€)**
PPI Ignite Network 2026	RCSI University of Medicine and Health Sciences	PPI Ignite Network	Professor	Michelle Flood	7,337,836
CO-PRIME (CO-producing and Promoting Research and Innovation in Mental Health)	Maynooth University	The Collaborative Research Network in Mental Health	Professor	Sinéad McGilloway	999,965
Evidence Synthesis Ireland	University of Galway	Capacity Building for Evidence Synthesis*	Professor	Declan Devane	6,299,780
				Total:	€14,637,581

* This includes €1.8 million made available by the Chief Medical Officer's budget towards the establishment of an Evidence Synthesis Hub.

Appendix C

HRB co-funded awards in 2025				
Scheme	**Co-funding partner**	**Co-funding allocation (€)**	**HRB share (€)**	**Total awarded (€)**
Applied Partnership Awards	Health Service Executive	**19,070**	**75,930**	**95,000**
Applied Partnership Awards	Irish Blood Transfusion Service	**44,475**	**197,307**	**241,782**
Applied Partnership Awards	Central Remedial Clinic	**39,998**	**197,584**	**237,582**
Applied Partnership Awards	The Rotunda Hospital	**19,951**	**200,000**	**219,951**
Applied Partnership Awards	Health Service Executive	**40,000**	**199,501**	**239,501**
Applied Partnership Awards	Irish College of GPs	**21,600**	**198,915**	**220,515**
Applied Partnership Awards	Central Remedial Clinic	**20,000**	**200,000**	**220,000**
Applied Partnership Awards	Tusla – Child and Family Agency	**20,000**	**199,724**	**219,724**
Applied Partnership Awards	Health Service Executive	**40,000**	**199,728**	**239,728**
Applied Partnership Awards	RCSI University of Medicine and Health Sciences	**47,932**	**198,999**	**246,931**
Applied Partnership Awards	Health Service Executive	**40,000**	**200,000**	**240,000**
Applied Partnership Awards	Pharmaceutical Society of Ireland	**40,000**	**199,934**	**239,934**
Applied Partnership Awards	Health Service Executive	**49,878**	**200,122**	**250,000**
Applied Partnership Awards	Jigsaw National Office	**20,674**	**199,326**	**220,000**
Applied Partnership Awards	Pre-Hospital Emergency Care Council	**20,000**	**199,734**	**219,734**
Applied Partnership Awards	Multiple Sclerosis Society of Ireland	**19,800**	**195,436**	**215,236**
Applied Partnership Awards	St James's Hospital	**15,950**	**195,311**	**211,261**
Applied Partnership Awards	National Screening Service	**39,824**	**199,464**	**239,288**
Capacity Building for Evidence Synthesis	HSC R&D Division, Northern Ireland	**1,499,927**	**6,299,780**	**7,799,706**
ERA4Health Partnership - Investigator Initiated Clinical Studies	Other national funders: France DGOS; Poland NCBR; Italian Ministry of Health; Latvia LCS	**2,151,812**	**994,478**	**3,146,290**
ERA4Health Partnership - Investigator Initiated Clinical Studies	Other national funders: France FR-MoH; Poland NCBR	**1,179,765**	**996,749**	**2,176,514**

HRB co-funded awards in 2025

Scheme	Co-funding partner	Co-funding allocation (€)	HRB share (€)	Total awarded (€)
ERA4Health Partnership - Investigator Initiated Clinical Studies	Other national funders: Spain National Institute of Health Carlos III; Research Council of Norway; Italy Ministry of Health; Latvian Council of Science; Spain CSCJA	**2,439,000**	**958,135**	**3,397,135**
Fulbright-HRB HealthImpact Award	Fulbright Commission	**3,334**	**9,478**	**12,812**
Fulbright-HRB HealthImpact Award	Fulbright Commission	**3,334**	**8,839**	**12,173**
Fulbright-HRB HealthImpact Award	Fulbright Commission	**3,334**	**13,309**	**16,643**
PPI Ignite Network	1. Dublin City University 2. Maynooth University 3. Queen's University Belfast 4. RCSI (also hosting the National PPI Programme Office) 5. South East Technological University 6. Trinity College Dublin 7. Technological University Dublin 8. University College Cork 9. University College Dublin 10. University of Galway 11. University of Limerick	**2,699,211**	**7,337,836**	**10,037,047**
US-Ireland R&D Partnership Programme	Research Ireland	**450,116**	**450,116**	**900,232**
ERA-NET NEURON – Network of European Funding for Neuroscience Research	NHMRC (Australia); UKRI - MRC (UK)	**1,252,788**	**430,000**	**1,682,788**
ERA-NET NEURON – Network of European Funding for Neuroscience Research	ANR (France); UKRI - MRC (UK); BMBF/DFG (Germany); SNSF (Switzerland); SAS (Slovakia)	**1,417,860**	**530,000**	**1,947,860**
EU Joint Programme – Neurodegenerative Disease Research	ZonMw (Netherlands); FNR (Luxembourg); TÜBITAK (Turkey); BMBF (Germany); NCN (Poland)	**1,160,607**	**400,036**	**1,560,643**

HRB co-funded awards in 2025

Scheme	Co-funding partner	Co-funding allocation (€)	HRB share (€)	Total awarded (€)
EU Joint Programme – Neurodegenerative Disease Research	ANR (France); ZonMw (Netherlands); CIHR & BCF (Canada); IT-MOH (Italy); F.R.S.-FNRS (Belgium)	**1,431,778**	**430,000**	**1,861,778**
EU Joint Programme – Neurodegenerative Disease Research	BMBF (Germany); NCN (Poland); CIHR & BCF (Canada); ANR (France)	**1,003,647**	**530,000**	**1,533,647**
European Partnership on Transforming Health and Care Systems	FD (Denmark); RCN (Norway); ISCIII (Spain); CIHR (Canada)	**1,607,993**	**421,370**	**2,029,363**
European Partnership on Transforming Health and Care Systems	NWO-SIA (Netherlands); ZonMw (Netherlands); AKA (Finland); FCT (Portugal)	**950,745**	**426,989**	**1,377,734**
	Total:	**19,814,403**	**23,694,129**	**43,508,531**

Corporate Governance and Financial Statements

The Corporate Governance and Financial Statements information will be published in a Part 2 to this document upon receipt of the audited financial statements from the Office of the Comptroller and Auditor General.

An Bord Taighde Sláinte
Teach Grattan
67–72 Sráid an Mhóta Íochtarach
Baile Átha Cliath 2
D02 H638
Éire

Health Research Board
Grattan House
67–72 Lower Mount Street
Dublin 2
D02 H638
Ireland

t 353 1 234 5000
f 353 1 661 2335
e hrb@hrb.ie
w www.hrb.ie

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