



Dearth of Feedback: A Critical Flaw in the European Commission's Horizon Europe Health Research & Innovation Review Process

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Abstract

The European Union (EU) faces a host of health, social, cultural, security, climate and economic challenges. In response to these the European Commission (EC) launched the Horizon Europe Research & Innovation program. This commentary critiques the review process in the Horizon Health program. A valuable opportunity to provide feedback to those progressing from Stage One to Stage Two of the review process is not being adopted, despite feedback being given to unsuccessful research teams. This may critically weaken the quality of submissions and may lead to significant wastage of time and resources. Peer review remains an important element in our research review systems and should be used to maximum impact. In evaluating potential wastage, it is crucial to incorporate opportunity costs into any such assessment.

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The health of the population of the European Union (EU) is compromised across a wide range of domains (1). Although the threats are many (2), it is the risks from cancer (3), and future infectious disease outbreaks (4), that are probably at the forefront of most people's concerns. In response to these threats, as well as other issues and priorities, the EU launched the Horizon Europe research and innovation funding program with a budget of €95.5 billion from 2021 to 2027 (5). The health component of this program has been allocated a budget €8.246 billion (6). The quality of the final projects and interventions funded is obviously vitally important in responding to these challenges, particularly in the health arena.

The Review Process

This critique is based on the involvement of the author in stage one of a two-stage review process of one element of Horizon Europe's Health program at the end of 2023. The call inviting proposals yielded 93 tenders, 85 of which were deemed eligible for review. Each proposal, which was a maximum of ten pages long, was assigned to three different subject experts for review. Reviews were scored independently in advance, and then debated, revised as required, and agreed over an intense seven-day period involving parallel sessions.

The resources involved in this process were considerable. Reviewers, including the author, were assigned only 8 reviews in order to maintain the quality of each review. Including reviewers, recorders, facilitators and observers, as well as technical and administrative staff involved, it is probable that 50 or more individuals participated in this process for just stage one of this particular call. The strikingly international pool of individuals involved in these reviews not only had subject expertise, but the ability to operate in the *lingua franca* of the review process, English. Such expertise and skills are not cheap. The professional fees paid vary from call to call, but in this case were a nominal €225 per half-day in meetings, as well €135 per independent review conducted in advance of the 7-day block. Significant investment in the research assessment process is warranted, as this call alone included a proposed budget of €30 million to support approximately 5 successful tenders of about €6 million each.

A large number of projects fail to achieve minimum standards and so are ineligible for funding, regardless of the number of tenders received. Given limited funding, only a selection of the best



projects were selected to go through to the second stage of the review process. The progression to stage two decision is not determined on the basis of a fixed score. Instead it is calculated on a dynamic ratio of project costs and is between a multiple of 2.5 and 3 times the total budget available (so projects totaling €75 million - €90 million in this case). As per European Commission guidelines there is no final re-grading at the end of stage one and so, in the session this author was involved in, a total of 20 projects were progressed to stage two because of a large number of proposals with an equal score.

However, although the 65 lowest scoring submissions receive feedback on their proposal the top twenty projects progressing to stage two did not. This is a critical flaw in the Horizon Health review process. A number of these proposals had what were deemed minor shortcomings that may well remain in their proposals as the researchers involved may be unaware of them (whereas any proposals with anything designated as a weakness was rejected). When questions were asked of administrators on this point somewhat flimsy responses were given along the lines of not wishing to either unfairly advantage certain projects, or steer other projects in particular directions. Such responses are nonsensical. Firstly, no individual projects are given an advantage when such feedback is given to all project teams. Secondly, feedback was given to the 65 lowest scoring projects to help them improve their proposals for potential submissions to a subsequent funding round. Finally, although extensively critiqued (7), peer-review remains the gold standard of quality measurement in the academic world (8).

The review process produces feedback as part of the review process and yet it is withheld, despite the substantial costs involved in reviewing the projects. The absence of this feedback to the research teams leading the proposals is inexcusable. High quality tender proposals may be re-submitted to other calls, or into the future. The time and resources involved in Horizon Health applications are significant. Although the initial proposals are just ten pages long, they have to score at least four out of five across two criteria (Excellence & Impact), simply to be eligible for funding. In the review process in which this author was involved, the minimum score to progress was nine out of ten. The effort involved in developing tenders of this high quality is very substantial.

Another minimum eligibility criteria was the involvement of research groups from at least three different countries, which involves considerable coordination efforts. The intense burden of this



process on individuals, research teams, institutions, reviewers, the European Commission and affiliated agencies, as well as EU taxpayers must not be ignored, but used to maximum effect. Identifying shortcomings in the proposal is crucial as the second stage review is based on a more in-depth document. This will undoubtedly involve considerably more time, effort and coordination. To progress this resource intensive process without appropriate feedback is potentially extremely wasteful, particularly when such reviews have already been conducted. In determining such wasted resources it is very important to also consider the opportunity cost of this policy, i.e. how might these resources have been better spent to promote health and wellbeing in the bloc? The dubious ethics behind this European Commission policy that will inevitably lead to the wastage of valuable resources need to be re-examined and revised.

Conclusion

The current review process of the European Commission's Horizon Health program is critically flawed. Significant resources are currently being used to minimal effect and the current procedures will inevitably lead to further wastage. This wastage of finite resources is unethical. The European Commission should revise their procedures as soon as possible to better support proposals successfully going from stage one to stage two of the review process.

References

1. OECD and European Union. Health at a Glance: Europe 2022. Brussels: OECD and European Union; 2022. <https://doi.org/10.1787/507433b0-en>
2. Vasco Santos, J., Souza, J., Valente, J., Vera, A., Ramalho, A., Viana, J., Ricciardi, W., & Freitas, A. The state of health in the European Union (EU-28) in 2017: an analysis of the burden of diseases and injuries. *The European Journal of Public Health*, 2019. 30(3): 590–595. doi:10.1093/eurpub/ckz203
3. Commission to the European Parliament and the Council. Europe's Beating Cancer Plan. Brussels: European Commission; 2021.
4. Gallina, S. Preparing Europe for future health threats and crises: the European Health Union. *Euro Surveillance*, 2023 ;28(5):2300066. doi: 10.2807/1560-7917.ES.2023.28.5.2300066.
5. European Commission. Horizon Europe Research and Innovation. See: https://research-and-innovation.ec.europa.eu/funding/funding-opportunities/funding-programmes-and-open-calls/horizon-europe_en



6. Health Research Board. Your guide to navigating Horizon Europe. See: <https://www.hrb.ie/funding/eu-funding-support/horizon-europe-information/horizon-europe-health-guide-for-researchers/#:~:text=Horizon%20Europe%20is%20the%20main,is%20dedicated%20to%20health%20research>.
7. Houghton, F. Keep calm and carry on: moral panic, predatory publishers, peer review, and the emperor's new clothes. *Journal of the Medical Librarian's Association*, 2022. 110(2): 233-239.
8. Morley, C.P., & Grammer, S. Now More Than Ever: Reflections on the State and ⁱImportance of Peer Review. *PRiMER*, 2021. 5: 36. doi: 10.22454/PRiMER.2021.216183.

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