British Heart Foundation

Our research funding diversity data 2020 – 2023

Contents

Foreword

British Heart Foundation's (BHF) purpose has always been clear – funding the most impactful cardiovascular research to deliver our vision of a world free from the fear of cardiovascular disease. To do this, we know that we not only have to fund the best research but also support the brightest minds from the widest pool of talent to solve some of the greatest cardiovascular challenges.

Diversity can save and improves lives. Diversity of thought and experiences is integral to scientific innovation, creativity, and impact. Yet we know too well that there are inequalities within the research ecosystem. Women, people whose ethnicity is in the minority in the UK, especially Black people, people living with disabilities or long-term health conditions, people who are neurodivergent, and those from disadvantaged socioeconomic backgrounds are underrepresented in the Science, Technology, Engineering, Mathematics and Medicine (STEMM) sector.

In our Equality, Diversity and Inclusion (EDI) strategy, Igniting Change launched in 2022, we outlined clear commitments to addressing these issues, ensuring that BHF plays its part in creating a diverse and inclusive research environment.

To do this, we needed to first better understand the current demographics of who is successful in our research grants processes and whether there are links with their personal characteristics.

This report is our first published analysis of the diversity data that we hold, looking at the last three years of diversity data in our grant applicants, award holders and funding committee members. Many of the findings mirror much of what others have detailed in STEMM, but with some differences for BHF to better understand.

There are limitations to the data we have been able to collect and analyse so far, but they show that the demographic profile of the independent experts who currently sit on our grant funding committees is reflective of UK biosciences academic staff.

In terms of applications, there was under-representation of applications from women but the proportion of Ethnic Minority applicants for BHF funding reflected UK biosciences academic staff. However, we note that researchers from Black/African/Caribbean/Black British backgrounds were under-represented.

In terms of success rates of applications, it is pleasing to see that this did not differ by gender. Similarly, we found no difference in overall success rate for researchers from Ethnic Minority background compared to White applicants. However, for those with an Asian/Asian British ethnic background, we found the success rate was significantly lower than for White applicants. We found no difference in overall success rates amongst grant applicants living with disability or a long-term health condition, although the numbers were small.

This is the story we can tell today. More data will be needed to fully understand wider disparities and to establish any consistent trends. Based on what we learn, BHF is committed to driving the change we all want to see in the research workforce. We will do so by engaging and working with our research community to find better ways to support brilliant and underrepresented talent. This report is the start to that conversation.

Professor Sir Nilesh Samani,
Medical Director

Dr Sonya Babu-Narayan,
Associate Medical Director

Our data

What data are included in this report?

Since April 2020, we have been routinely collecting diversity data for lead applicants for BHF research grants. This has focussed on four of the Equality Act 2010 defined protected characteristics, presented throughout the report in alphabetical order: age, disability status, ethnicity, and gender.

Additionally, we used online surveys to collect diversity data from BHF personal award holders and from members of our research funding committees, which make decisions on the research we fund.

This was in line with what other UK funders were reporting on at the time, although we hope to collect and report on wider diversity data in the future.

All respondents were given the following options for responses:

- **age:** 18-29 years, 30-44 years, 45-59 years, 60+ years and prefer not to say
- **disability or long-term health condition:** yes, no and prefer not to say
- **ethnic background:** nineteen options including prefer not to say, based on the census categories used by the Office of National Statistics [1]
- **gender:** male, female, non-binary, gender variant, other and prefer not to say.

This report includes data related to diversity from the following groups:

- **lead applicants for BHF funding,** from April 2020 to March 2023
- **researchers holding BHF funded personal awards,** between October 2022 to December 2022, with the exception of PhD students and Chairs
- **members of BHF research funding committees,** between October 2022 and March 2023.

Our data

How were the data analysed?

Between 1st April 2020 and 31st March 2023, we received 1190 applications for BHF funding from 675 unique applicants. In this report, data are counted for each application or award, regardless of whether an applicant has submitted more than one application in the period reported.

Where datasets were large enough, ethnic backgrounds were broken down into groups that align with Office of National Statistics definitions [1]. In order for our analysis to be relevant and useful, we aligned with commonly used terms to ensure consistency with other public bodies and to compare against their data. However, BHF recognises that these terms remain imperfect and, wherever possible, it is important to contextualise and disaggregate data. Where numbers of applicants or grant-holders from Ethnic Minority backgrounds were small, these were aggregated into a single 'Ethnic Minority' group to avoid individuals being identifiable.

In line with the approach taken by other funders (UK Research and Innovation, Cancer Research UK and National Institute of Health and Care Research), we compared our diversity data, where relevant, to Advance Higher Education (HE) analysis. We used the Higher Education Statistics Agency (HESA) data from 2022 for UK biosciences (or Science, Technology and Engineering) academic staff population [2]. To note, this is broad sector data that is not specific to cardiovascular research. To help create a cardiovascular research specific benchmark for future iterations of this report, BHF is analysing currently available data on the UK cardiovascular research workforce.

To enable comparison of BHF data to the Advance HE analysis, we had to remove 'prefer not to say' and 'unknown' from our analysis as the Advance HE analysis did not include these categories.

Where appropriate, statistical significance was tested using the Chi-Square test for independence. In this report, p values ≤ 0.05 were considered significant.

Our data

BHF grant types

BHF funds a broad range of research grants, from personal awards to support clinical and non-clinical researchers at all stages of their careers, to grants for short and long term research projects, essential infrastructure, and strategic awards.

Where datasets were large enough, we looked at the profile of applicants, success rate and profile of awardees per type of BHF grant as follows:

- **personal awards:** including Advanced Training Awards, Career Development Research Fellowships for Nurses and Healthcare Professionals, Career Re-Entry Fellowships, Immediate Postdoctoral Basic Science Research Fellowships, Consultant Research Awards, Intermediate/Senior Basic Science and Clinical Research Fellowships, Travel Fellowships

Lead applicants for our PhD studentships are supervisors and not the PhD students, hence data related to PhD student diversity were not available for inclusion in the 'Fellowships' subgroup.

- **project awards:** including Cardiovascular Catalyst Awards, Project Grants, New Horizon Grants and Translational Grants
- **clinical study and programme awards:** including Clinical Study Grants, Personal Chairs, Programme Grants, Special Projects, Infrastructure Grants, Strategic Initiatives.

For more information about BHF funding schemes and funding decision processes, please visit BHF's website.

Our data

Limitations of these data

There are some important limitations to our current dataset which we hope to address in future reports.

It is well recognised that multiple protected characteristics may overlap (i.e., intersectionality) and then further exacerbate inequalities [3]. In this report, we analysed by single characteristics as the size of our dataset did not allow us to perform more granular intersectional analysis.

We did not have a complete diversity profile of BHF's research community. Data were missing for most current award holders, and we did not have data about researchers employed on grants. The response rate was 99% for lead applicants and awardees between 2020-23, 93% for committee members and 75% for fellows.

The proportion of respondents who chose 'prefer not to say' for each protected characteristic is summarised below (Table). We recognise that there are a multitude of reasons why individuals would prefer not to answer specific questions about their identity. Though limited analyses were possible, in the interest of sharing our data in their entirety we included 'prefer not to say' in our reporting of BHF application success rate (which did not require comparative analysis with Advance Higher Education analysis).

It is important to highlight that none of the diversity data collected, including 'prefer not to say', were made available to anyone involved in our reviewing process.

Sub-group	Prefer not to say responses				Total per sub-group
	Age	Disability or long-term condition	Ethnicity	Gender	
	No. (%)	No. (%)	No. (%)	No. (%)	
Lead applicants	58 (5%)	59 (5%)	77 (7%)	22 (2%)	1181
Awardees	10 (4%)	25 (7%)	26 (7%)	10 (3%)	374
Personal awards	–	3 (5%)	1 (2%)	1 (2%)	56
Committee members	2 (3%)	2 (3%)	2 (3%)	2 (3%)	65

Proportion of 'prefer not to say' across age, disability ethnicity and gender of lead applicants, awardees, fellows, and committee members.

Applications 2020-2023

Between April 2020 and March 2023, BHF received 1190 applications and awarded 375 grants to 302 researchers across 22 funding schemes.

The following pages report the profile of our applicants, their success rate, and the profile of awardees across each of the four protected characteristics disclosed by applicants (age, disability status, ethnicity, and gender identity, presented in alphabetical order).

We compared BHF data for each of the characteristics to data for biosciences academic staff at UK higher education institutions reported by the Higher Education Statistics Agency (HESA). The exception was age because this was captured by BHF using age ranges that are different to those used by HESA.

Where numbers allow, a breakdown per type of funding scheme is provided.

Age

- Applicants

Proportion of applications by age range for all applications and by applications for fellowships, project, clinical study and programme awards (2020-23).

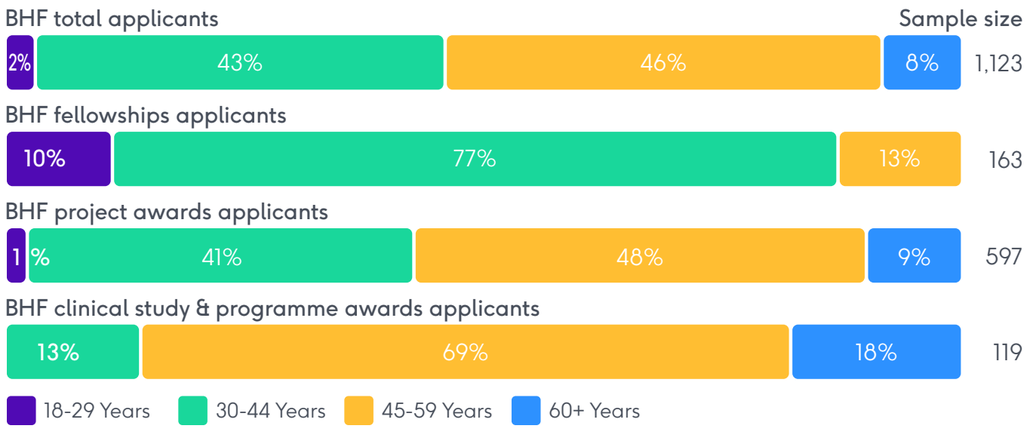
Researchers between 30 to 44 years of age and 45 to 59 years together accounted for 89% of all applicants.

However, there were differences when breaking down these data into different funding streams.

The majority of our fellowship applicants (77%) were aged 30 to 44 years, which is in line with the ambition for most of our fellowship schemes to support early to mid-career level researchers.

The majority of lead applicants for programme awards and clinical study grants were aged 45-59 years, which is consistent with the leadership of these awards being aimed at more established researchers.

Our project grant awards however had a more diverse pool of applicants in terms of age, which was consistent with the nature of this type of funding for short-term research projects for applicants at any stage of their career.



Note: *58 (5%) applicants chose not to disclose their age. Lead applicants for our PhD studentships are supervisors and not the PhD students and hence data related to PhD student diversity were not available for inclusion in the 'fellowships' subgroup.*

Age

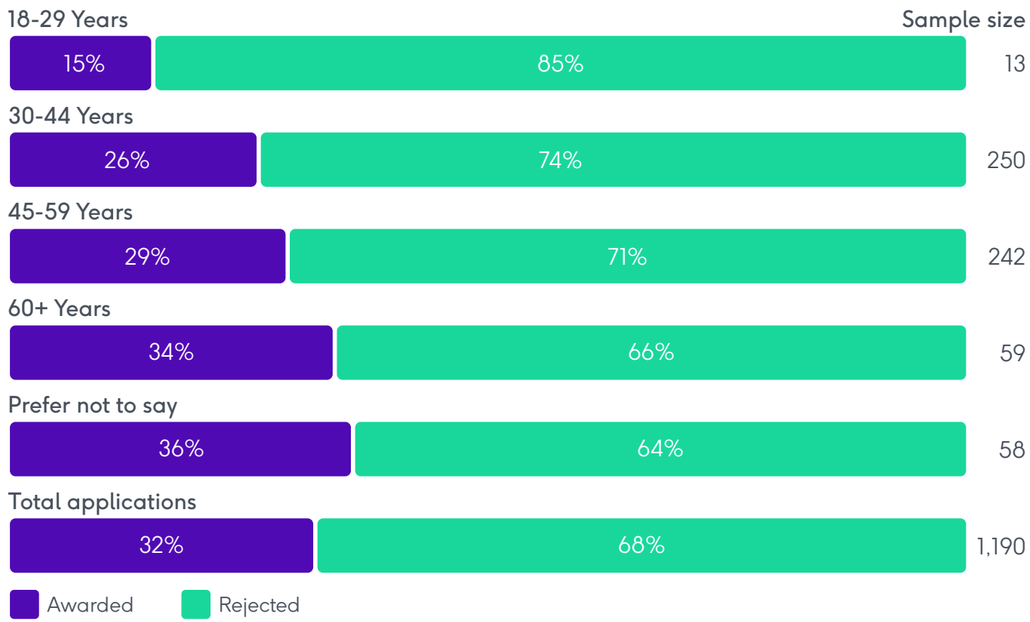
- Success rate

Application success rate shown by age range for all applications (2020-23).

Data suggested that success rate increased with the age of the applicant. This could be linked to the fact that the majority of applicants who were 18 to 29 years old and 30 to 44 years old applied for fellowship schemes, which were more competitive in nature with a 29% success rate across all fellowships (excluding PhD studentships) compared to 36% success rate for other funding schemes.

Researchers with a longer track-record of applying for research funding may also have had a better understanding of how to craft a successful funding application.

There was no significant difference between the success rate of researchers who chose not to disclose their age compared to the success rate of total applications.



Age

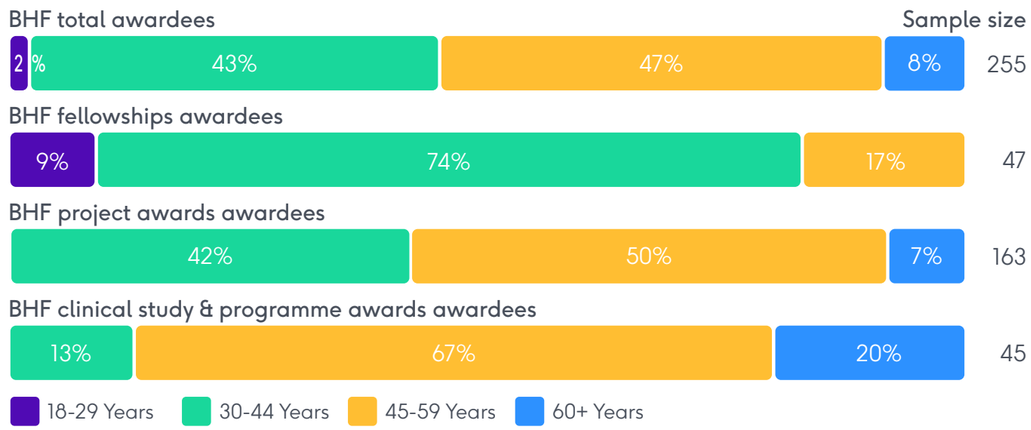
- Awardees

Proportion of applications by age range for all applications and by applications for fellowships, project, clinical study and programme awards (2020-23)

The age range of BHF awardees closely reflected the age range of applicants.

Researchers aged 30 to 44 years and 45 to 59 years formed the largest proportion of our awardees.

Most BHF fellows were aged 30 to 44 years, reflecting that BHF fellowships are aimed at early to mid-career level researchers; whilst the majority of recipients of programme awards and clinical study awards were aged 45-59 years, which is consistent with the leadership of these awards being aimed at more established researchers.

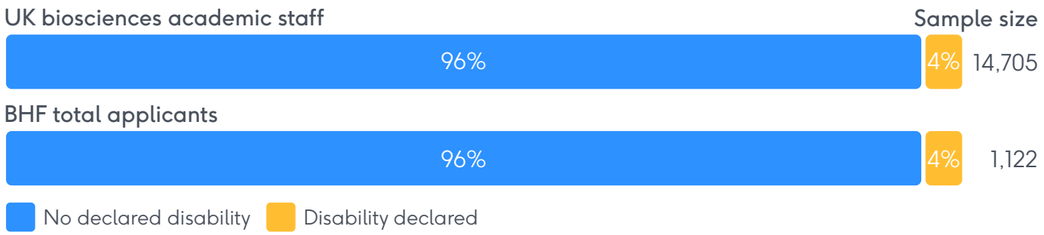


Note: *10 (4%) awardees chose not to disclose their age. Lead applicants for our PhD studentships are supervisors and not the PhD students hence data related to PhD student diversity were not available for inclusion in the 'fellowships' subgroup.*

Disability status

• Applicants

Proportion of applications by disability status for all applications (2020-23), compared with UK biosciences academic staff (2022).

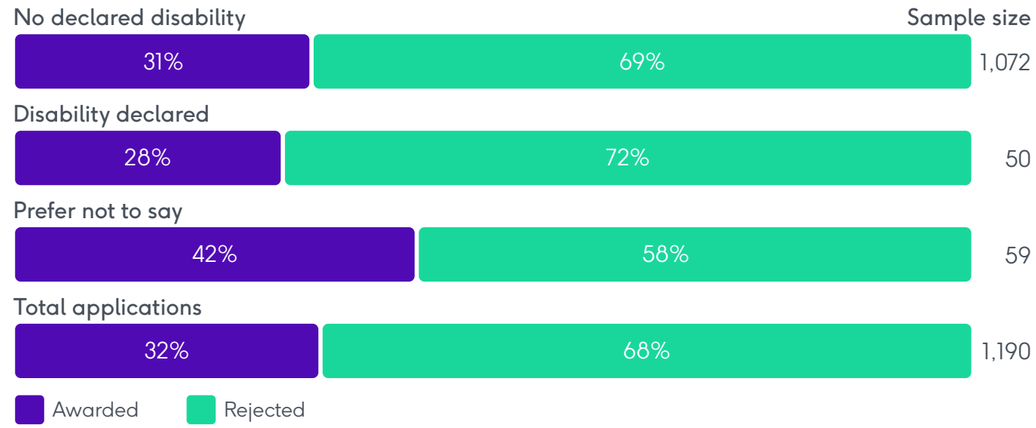


Between 2020 and 2023, 4% of our lead applicants declared a disability or long-term health condition. This was comparable to the proportion of UK bioscience academic staff who disclosed a disability in 2022 [2].

Note: *59 (5%) of applicants chose not to disclose information related to living with a disability or long-term health condition.*

• Success rate

Application success rate shown by disability status for all applications (2020-23).



The success rate for applicants who declared a disability or long-term health condition appeared to be similar to the success rate for applicants who reported no disability or long-term health condition.

We were unable to break these data down further by type of funding scheme due to the limited number of applications.

There was no significant difference between the success rate of researchers who chose not to disclose their disability status compared to the success rate of total applications.

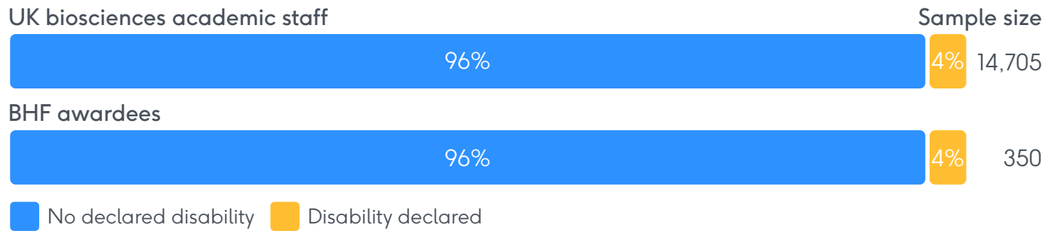
Disability status

- Awardees

Proportion of applications by disability status for all applications (2020-23).

Between 2020 and 2023, 4% of our awardees declared a disability or long-term health condition, similar to the proportion of UK bioscience academic staff who disclosed a disability in 2022 [2].

This was also comparable to the proportion of BHF applicants who disclosed a disability or long-term health condition in that same period, showing that the disability status of our applicants did not affect their chance of securing funding.



Note: *25 (7%) awardees chose not to disclose information related to living with a disability or long-term health condition.*

Ethnicity

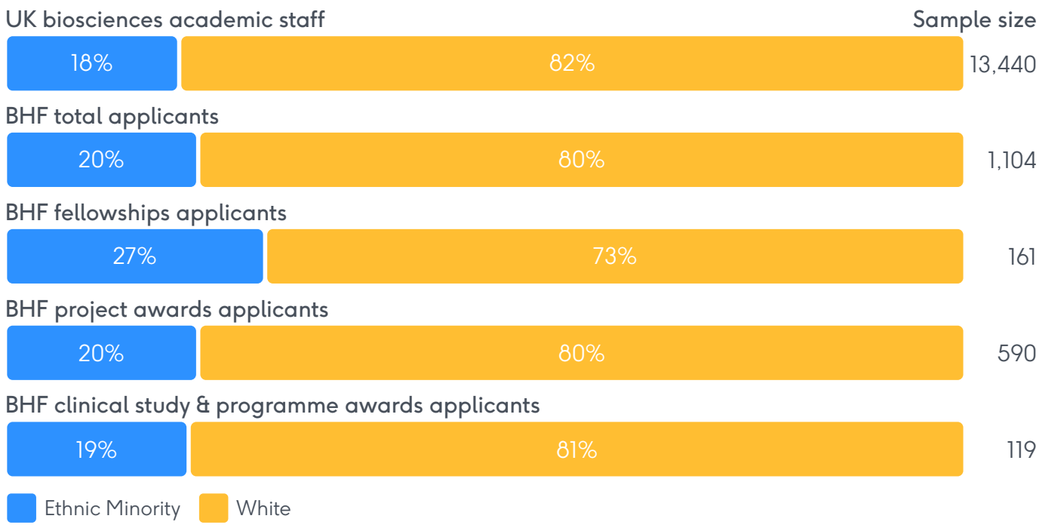
- Applicants

Proportion of applications by ethnicity for all applications and by applications for fellowships, project, clinical study and programme awards (2020-23), compared with UK biosciences academic staff (2022).

The proportion of BHF applicants from Ethnic Minority backgrounds was similar to the proportion of Ethnic Minority background UK biosciences academic staff [2].

However, there were key variations when breaking down by type of funding schemes applied for.

The proportion of researchers from Ethnic Minority backgrounds applying for BHF fellowship funding was significantly higher than the proportion of Ethnic Minority biosciences academic staff in the UK [2].



Note: *77 (7%) applicants chose not to disclose information related to their ethnic background. Lead applicants for our PhD studentships represent supervisors and not the PhD students hence data related to PhD student diversity were not available for inclusion in the 'fellowships' subgroup.*

Ethnicity

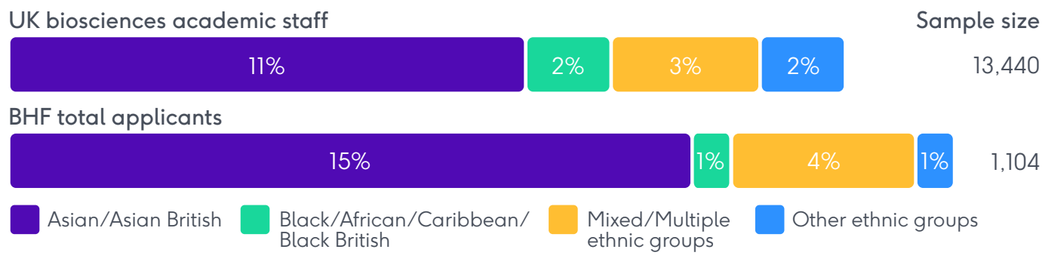
- Applicants

Proportion of applications by different Ethnic Minority groups for all applications (2020-23), compared with UK biosciences academic staff (2022).

When breaking down the data based on the Office of National Statistics classification of ethnic groups [1], there were differences compared with UK biosciences academic staff [2].

The proportion of BHF applicants who were from Asian/Asian British backgrounds and Mixed/ Multiple ethnic backgrounds was significantly higher compared to UK biosciences academic staff [2].

The proportion of BHF applicants who were from Black/African/Caribbean/Black British or Other ethnic groups was however significantly lower compared with UK biosciences academic staff [2].

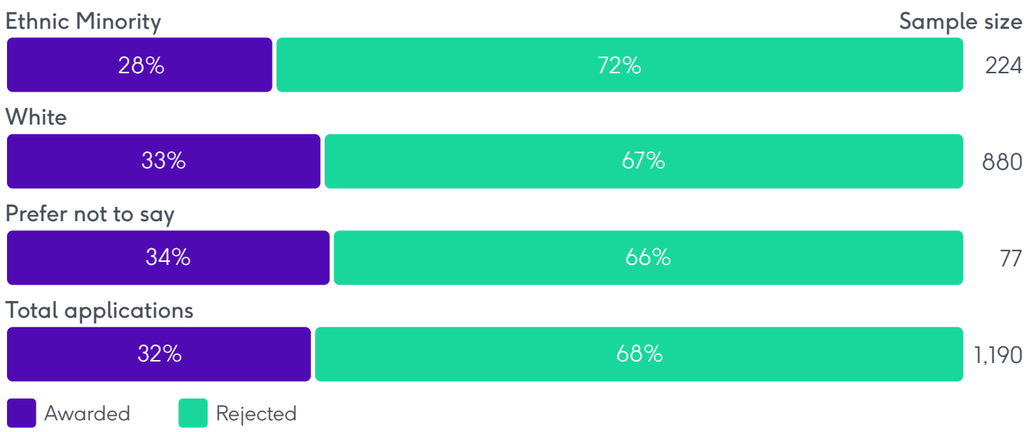


Note: 77 (7%) applicants chose not to disclose information related to their ethnic background.

Ethnicity

- Success rate

Application success rate shown by ethnicity for all applications (2020-23).

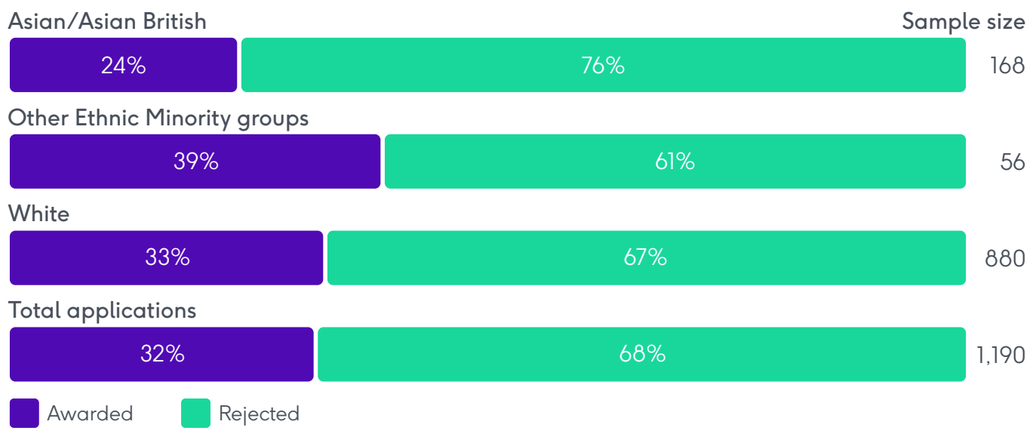


Across all our funding schemes, the success rate for applicants from Ethnic Minority backgrounds was slightly, but not statistically, lower compared with applicants from White ethnic backgrounds.

There was no significant difference between the success rate of researchers who chose not to disclose their ethnicity compared to the success rate for total applications.

Note: *77 (7%) applicants chose not to disclose information related to their ethnic background*

Application success rate shown by ethnic group for all applications (2020-23).



When breaking down the data based on the Office of National Statistics classification of ethnic groups [1], we noted a significantly lower success rate for Asian/Asian British applicants.

The number of applications from researchers from Black/African/Caribbean/Black British; Mixed/Multiple ethnic groups and Other Ethnic Minority groups, 56 in total, was too small to allow for a detailed breakdown analysis. When grouped under 'Other' Ethnic Minority groups, there was no significant difference in success rate compared with White applicants.

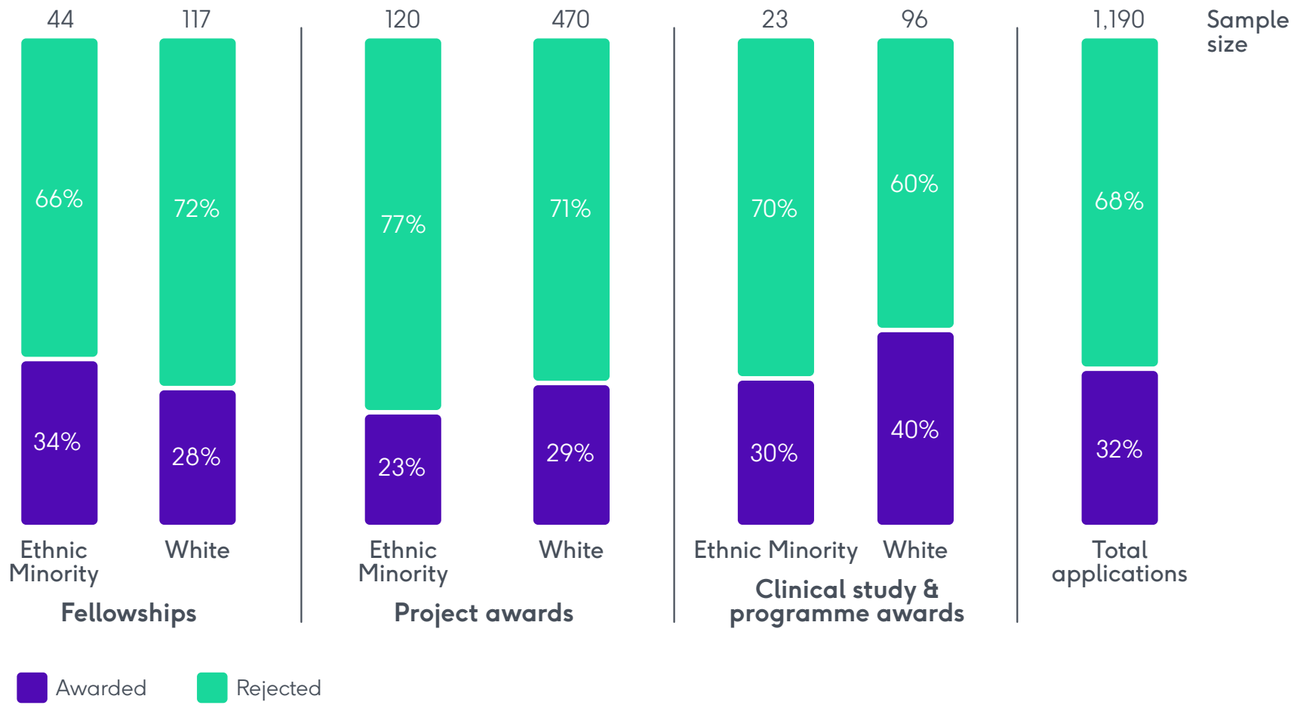
Note: *77 (7%) applicants chose not to disclose information related to their ethnic background.*

Ethnicity

- Success rate

Application success rate for fellowships, project, clinical study and programme awards by ethnicity (2020-23).

When breaking down the data by type of funding schemes, there were no statistically significant differences between the success rates of Ethnic Minority applicants and those from a White background.



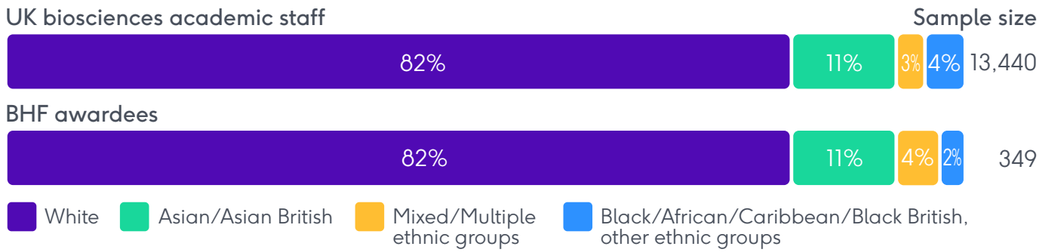
Note: *77 (7%) applicants chose not to disclose information related to their ethnic background. Lead applicants for our PhD studentships represent supervisors and not the PhD students, hence data related to PhD student diversity were not available for inclusion in the in the 'fellowships' subgroup.*

Ethnicity

- Awardees

Number of awardees by ethnicity (2020-23), compared with UK biosciences academic staff (2022).

The proportion of BHF awardees from Ethnic Minority backgrounds was similar to the proportion of Ethnic Minority UK biosciences academic staff [2].



Note: *26 (7%) awardees chose not to disclose information related to their ethnic background.*

Gender

- Applicants

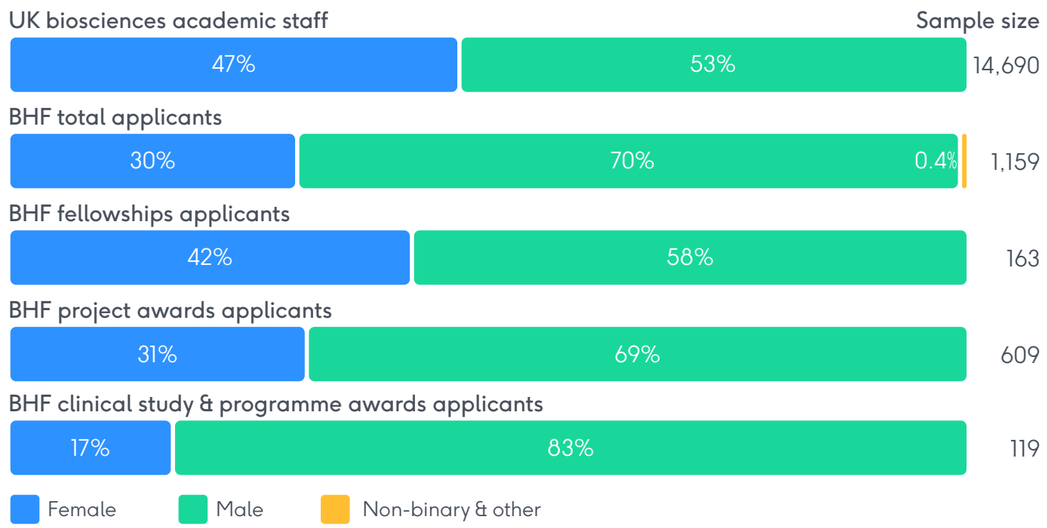
Proportion of applications by gender for all applications and by applications for fellowships, project, clinical study and programme awards (2020-23), compared with UK biosciences academic staff (2022).

The proportion of female researchers applying for BHF funding was significantly lower than the proportion of female academic staff working in UK biosciences [2].

However, there were key variations when breaking down by type of funding schemes applied for.

The proportion of female researchers applying for fellowships was comparable to the proportion of female in UK biosciences academic staff [2].

Nonetheless, the proportion of female researchers applying for clinical study and programme awards (17%) was significantly lower than the proportion of female researchers in UK biosciences academic staff (47%) [2]. It is important to note that the leadership of these awards is aimed at more established researchers. For context, the proportion of female researchers that are professors in UK biosciences is 25% [2].With regards to clinician researchers, we know that the proportion of female consultants in cardiology in the UK was around 16% in 2021 and this has not increased for over a decade [4]. This may drive lower numbers of women applying for clinician driven research or clinician fellowship awards.



Note: *22 (2%) applicants chose not to disclose their gender. Lead applicants for our PhD studentships represent supervisors and not the PhD students, hence data related to PhD student diversity were not available for inclusion in the 'fellowships' subgroup.*

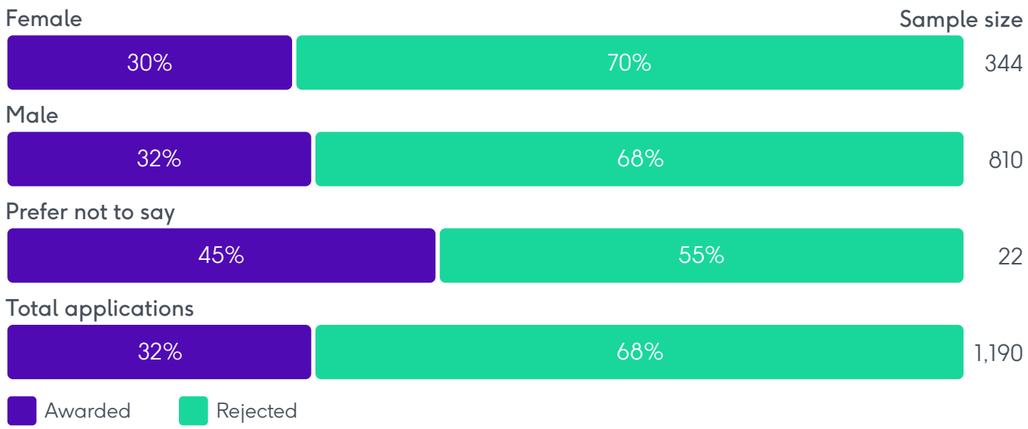
Gender

- Success rate

Application success rate shown by gender for all applications (2020-23).

Across all our funding schemes, our data showed that the success rate for female applicants was similar to the success rate for male applicants.

There was no significant difference between the success rate of researchers who chose not to disclose their gender compared to the success rate for total applications.



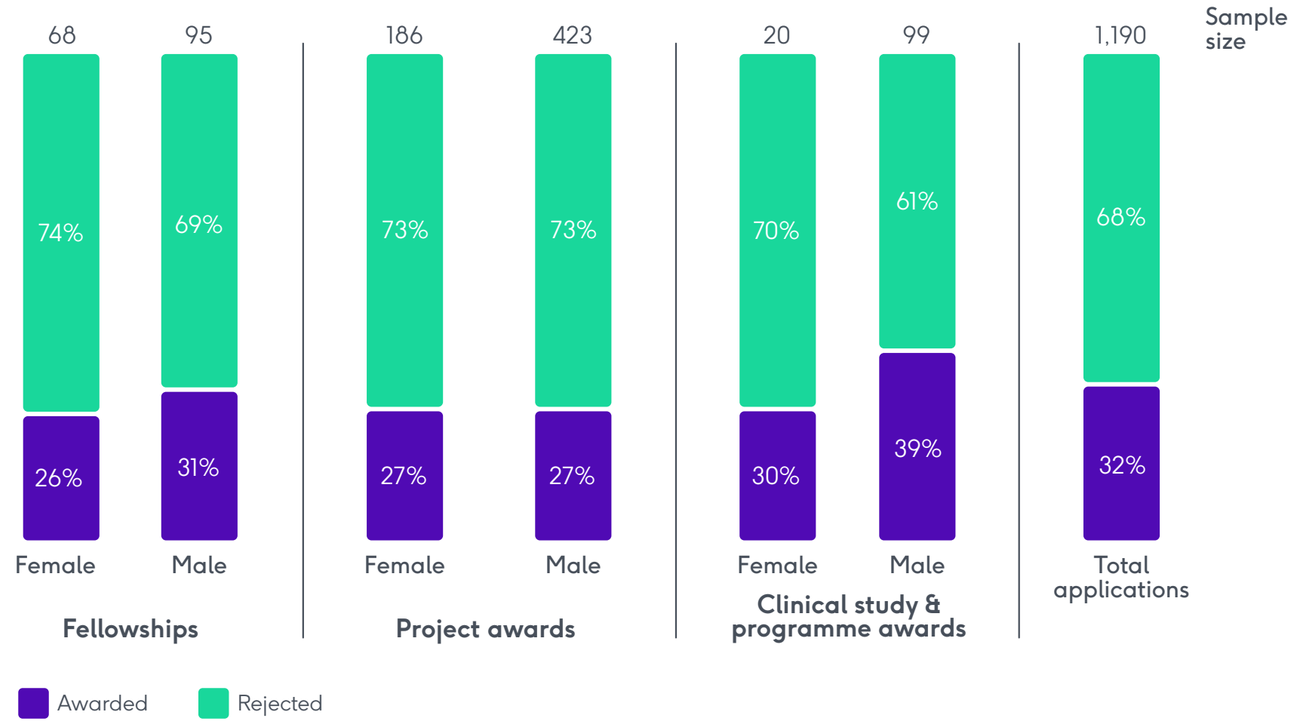
Note: *Applications from five applicants who identify as non-binary or other gender identity are not represented in the breakdown as the number does not meet the agreed minimum requirements for reporting disaggregated data.*

Gender

- Success rate

Application success rate for fellowships, project, clinical study and programme awards by gender (2020-23).

Looking at the success rates across various types of funding schemes, there were no differences in the success rates for female and male applicants for fellowships and project awards. There was a slightly lower success rate for female applicants compared with males for clinical study and programme grants but this was not statistically significant, perhaps due to the small proportion of female researchers applying for these schemes (20 female applicants out of 120 applications). This is something we will monitor.



Note: *22 (2%) applicants chose not to disclose their gender. Data from awardees who identified as non-binary are not represented in the breakdown by type of funding scheme as the number does not meet the agreed minimum requirements for reporting disaggregated data. Lead applicants for our PhD studentships represent supervisors and not the PhD students, hence data related to PhD student diversity were not available for inclusion in the 'fellowships' subgroup.*

Gender

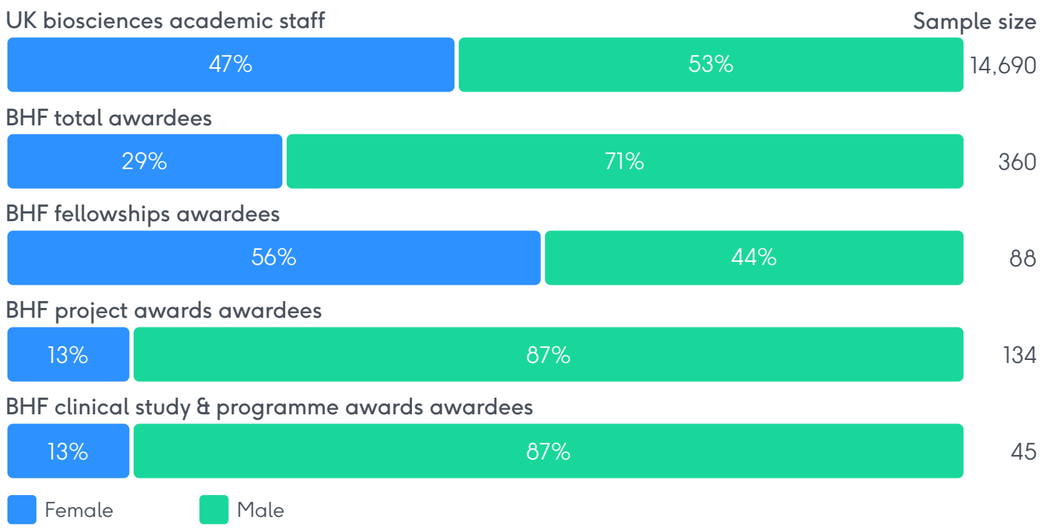
- Awardees

Proportion and number of awards made for fellowships, project, clinical study and programme awards by gender (2020-23).

The proportion of female researchers who received a BHF award in 2020-2023 was significantly lower than the proportion of female researchers amongst UK biosciences academic staff [2].

The lower proportion of female BHF grant recipients was in keeping with the lower number of female BHF applicants shown in the previous section.

It is important to note that the leadership of clinical study and programme awards is aimed at more established researchers. For further context, the proportion of female researchers that are professors in UK biosciences is 25% [2] and the proportion of female consultants in cardiology in the UK was around 16% in 2021 [4].



Note: *10 (3%) awardees chose not to disclose their gender information. Data from awardees who identified as non-binary are not represented in the breakdown by type of funding scheme as the number does not meet the agreed minimum requirements for reporting aggregated data. Lead applicants for our PhD studentships represent supervisors and not the PhD students, hence data related to PhD student diversity were not available for inclusion in the 'fellowships' subgroup.*

BHF Personal awards

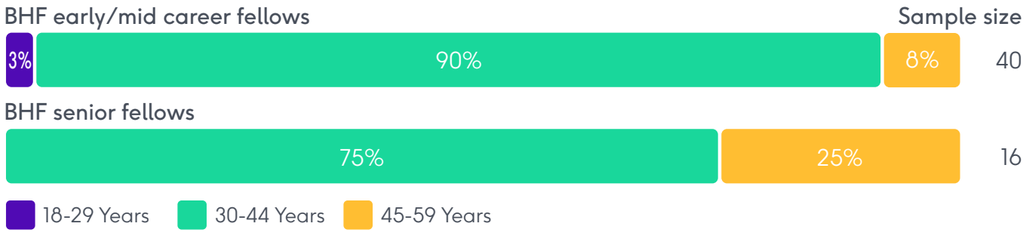
BHF provides career development opportunities via personal awards across all career stages – from studentships to intermediate and senior level awards as well as Chair awards. These cover different types of science, from basic science to clinical research.

The following pages report data for the age, disability status, ethnicity, and gender identity disclosed by 56 fellows that were funded by BHF in November 2022. These include recipients of most of our personal award schemes, except for PhD studentships and BHF Chairs whose data could not been captured for this report. We are looking to address this in the future.

The data were captured via an online survey, with an overall response rate of 75%, which limits disaggregation of data. When numbers allow, the data are segmented based on the level of seniority to illustrate the profiles of funded fellows across the fellowship ladder (early to mid-career vs senior). However, finer details such as the types of fellowship were not possible to examine due to the small number of BHF fellows within individual categories.

Age

Age range disclosed by BHF fellows, stratified by seniority of fellowships (2022).



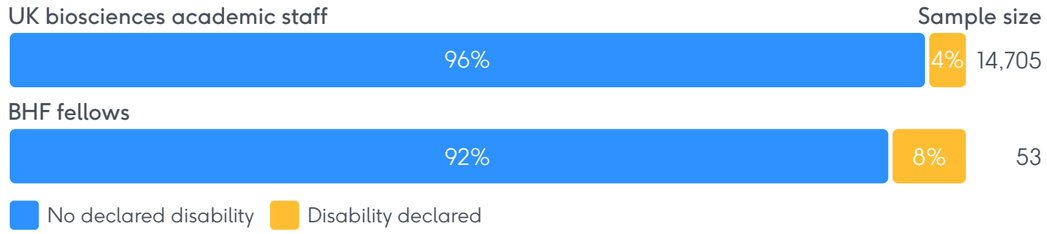
The data presented are segmented into 2 stages of career: early to mid-career stage which comprises 20% early-career and 80% mid-career research fellows; and senior career stage including senior clinical and basic science research fellows.

We note a substantial overlap between the age reported by our early/intermediate and senior fellows, with the vast majority of researchers in both categories being aged between 30 and 44 years.

Note: *The data were not known for 19 (25%) fellows.*

Disability status

Proportion of BHF fellows who disclosed having a disability or long-term health condition, compared with UK biosciences academic staff (2022).

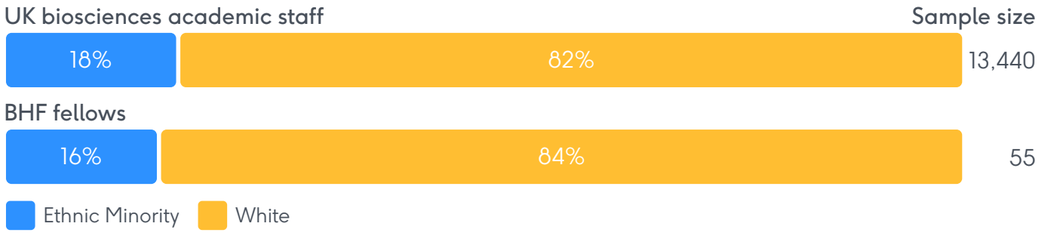


The data presented show aggregated numbers of BHF fellows across all funding schemes. The proportion of fellows who responded to our survey and who declared having a disability or long-term health condition was not significantly different from the proportion of UK biosciences academic staff declaring having a disability [2].

Note: *The data were not known for 19 (25%) fellows and three (5%) fellows chose not to disclose that information related to living with a disability or long-term health condition.*

Ethnicity

Ethnicity disclosed by BHF fellows, compared with UK biosciences academic staff (2022).



The data presented shows aggregated numbers of BHF fellows across all funding schemes.

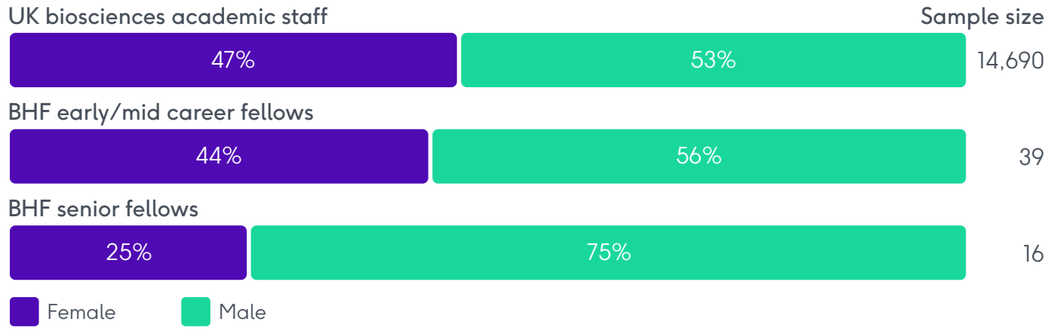
The proportion of BHF fellows from Ethnic Minority backgrounds was similar to the proportion of UK biosciences academic staff from Ethnic Minority backgrounds [2].

However, it is important to note that 67% of the respondents who identified as coming from Ethnic Minority backgrounds were Asian/Asian British and 33% were from Mixed/Multiple or Other ethnic groups (based on the Office of National Statistics classification of ethnic groups). None of the respondents reported to be from a Black/African/Caribbean/Black British ethnic background (although this could be linked to the small number of BHF fellows surveyed).

Note: *The data were not known for 19 (25%) fellows and one (2%) fellow chose not to disclose information related to their ethnic background.*

Gender

Gender identity disclosed by BHF fellows, compared with UK biosciences academic staff (2022).



At the early to mid-career stage, the proportion of female fellows was similar to the proportion of female academic staff working in UK biosciences [2].

The difference in the proportion of senior female fellows compared to female academic staff working in UK biosciences was not significant but this is likely due to the small group of senior fellows funded by BHF.

Note: *The data were not known for 19 (25%) fellows and one (2%) fellow chose not to disclose their gender.*

Committee members

Applications for BHF funding go through a rigorous independent committee and external peer-review process. We have five independent research funding committees including the Chairs and Programme Grants Committee, the Clinical Studies Committee, the Fellowships Committee, the Project Grants Committee, and Translational Awards Committee. These committees are made up of independent subject matter experts and the Clinical Studies Committee additionally has two lay members.

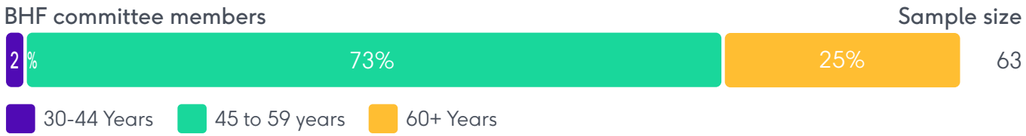
As committed in our strategy for equality, diversity and inclusion, we want to review who is involved in our decision-making processes. We believe that having a more diverse pool of people at key decision points can challenge 'group think' and improve our decision-making processes.

The following pages report data for age, disability status, ethnicity, and gender identity disclosed by 65 members who sat on our funding committees between October 2022 and February 2023. We compared the profile of our committee members to the profile of UK biosciences academic staff [2].

This insight will be used to inform future action to increase representation in our funding committees over time.

Age

Age range disclosed by funding committee members.



Whilst there were younger committee members, the largest proportion of members on our funding committees were in the 45 to 59 year age group and 98% were 45 years old or older.

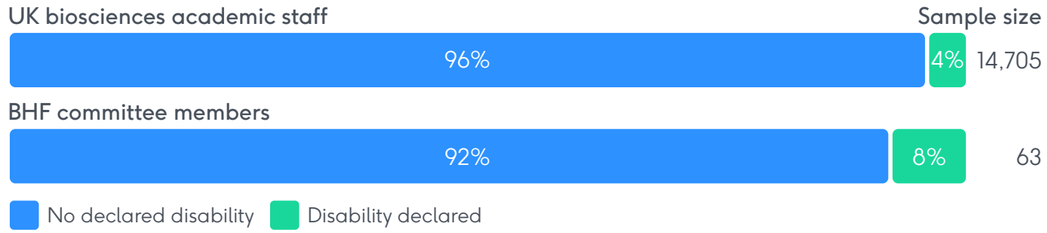
Traditionally committees have included members that are senior leaders in their field with extensive experience and expertise.

For context, in the science, engineering and technology disciplines, the largest proportion of professors is in the 51 to 56 age category [2].

Note: *The data were not known for five (7%) committee members and two (3%) committee members chose not to disclose their age. Our Clinical Studies Committee includes two lay members.*

Disability status

Proportion of funding committee members who disclosed having a disability or long-term health condition, compared with UK biosciences academic staff.

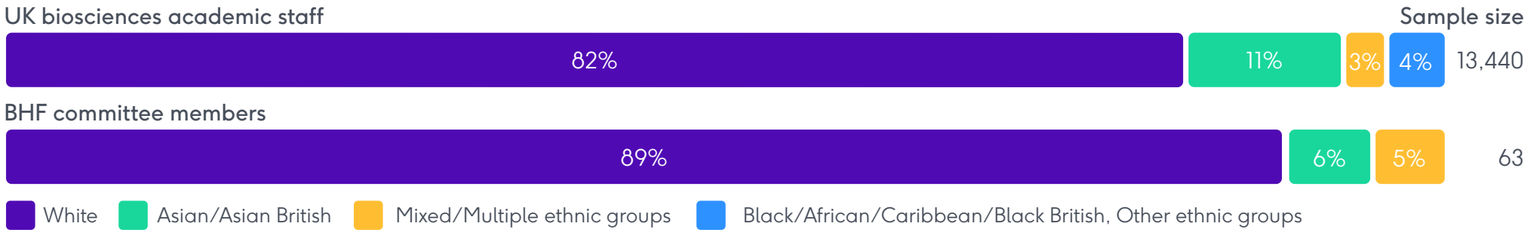


As of January 2023, 8% of our funding committee members had disclosed a disability or long-term health condition. This was not statistically different from the proportion of bioscience academic staff who disclosed a disability at 4%.

Note: *The data were not known for five (7%) committee members and three (5%) committee members chose not to disclose information related to living with a disability or long-term health condition. Our Clinical Studies Funding Committee include two lay members.*

Ethnicity

Ethnicity disclosed by funding committee members.



The large proportion of our funding committee members were from a White ethnic background at 89%. This figure was similar to the proportion of researchers from a White ethnic background working across the UK biosciences academic sector (82%) [2].

In January 2023, the proportion of Ethnic Minority committee members stood at 11%, which was not a statistically significant difference compared with the proportion of Ethnic Minority researchers amongst UK bioscience academic staff (18%).

When breaking down the data into distinct ethnic groups, there was no statistically significant difference in the proportion of Asian/Asian British or Mixed/Multiple ethnic group members when compared to UK biosciences academic staff [2]. However, there was no representation of Black/African/Caribbean/Black British background currently (while they represented 2% of UK biosciences academic staff), nor any representation of the Other Ethnic groups category (2% of biosciences academic staff).

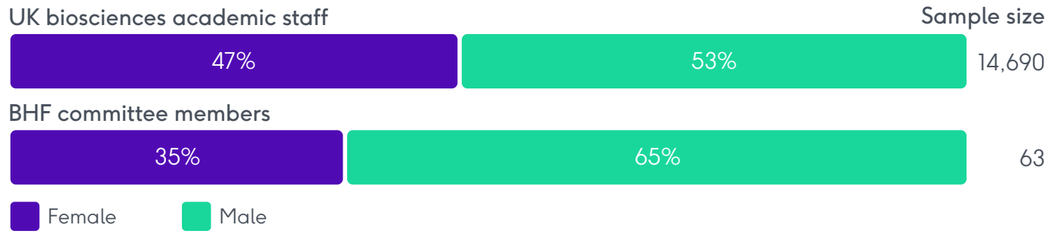
***Note**: The data were not known for five (7%) committee members and two (3%) committee members chose not to disclose information related to their ethnic background. Our Clinical Studies Funding committee include two lay members.*

Gender

Gender identity disclosed by funding committee members.

There was no statistically significant difference in the proportion of female members on our funding committees and the proportion of female researchers amongst UK biosciences academic staff [2].

The proportion of female members in our funding committees was comparable to the proportion of female professors in the UK biosciences academic community (25%) [2].



Note: *The data were not known for five (7%) committee members and two (3%) committee members chose not to disclose their gender. Our Clinical Studies Funding committee includes two lay members.*

Conclusion

This is our first report of data collected over a 3-year window from 2020-2023 related to diversity of our applicants and awardees and of those who currently contribute to funding recommendations.

Analysis of these data gives us a snapshot of the profile of individuals applying for BHF funding and receiving research grants, enabling testing of whether any of the protected characteristics so far studied were associated with applicant success rate. It also shows the current profile of BHF fellows and independent experts involved in our funding committees.

There may be other further disparities that we cannot yet unveil due to important limitations in our dataset. We did not have data related to all legally protected characteristics and readily available statistics for appropriate comparisons are lacking, both of which will need to be addressed.

Nevertheless, these signals from our first three-year snapshot of data establish a baseline for future comparison and for identifying trends.

Some of our key findings include:

- A lower proportion of applicants for BHF funding are women compared to UK biosciences academic staff. Female and male applicants for BHF funding have equal success rates.

- The proportion of applicants for BHF funding from Ethnic Minority backgrounds reflects their representation amongst UK biosciences staff and overall there is no difference in success rate. But there are differences within Ethnic Minority groups. The success rate for Asian/Asian British applicants is significantly lower than for White applicants.

- The proportion of applicants for BHF funding who declared a disability or long-term health condition is similar to the profile of UK biosciences academic staff and they have a similar success rate to applicants with no disability or long-term health condition.

- The demographic profile of the independent experts sitting on our BHF grant funding committees largely reflects the profile of UK biosciences academic staff.

Next steps

We know that the findings in this report chime with other STEMM data and therefore we need to start committing to actions to help address under-representation in cardiovascular research.

We will better understand actual and perceived barriers cardiovascular researchers face

For example, we will do this by:

- **Improving the breadth and depth of demographic data collected:**
  We have worked with our Grants Management System provider to improve the capture of diversity data on our grants management system and before the end of the year, we will be able to capture diversity data from a wider pool of stakeholders – reviewers, committee members and staff members as well as all the people we fund including PhD students and BHF Chairs. We will look to capture information across more protected characteristics including religious beliefs and sexual orientation.
- **Continually engaging with the research community to examine in more depth actual and perceived barriers faced by under-represented groups:**
  We will continue to invite cardiovascular researchers to tell us about the barriers they face so that we can play our part to remove them wherever we can, to support people to overcome them and share this information to influence the wider research ecosystem.
- **Evaluating the cardiovascular research workforce in the UK:**
  We have commissioned in depth analyses of demographics of the current UK cardiovascular research and clinical workforce to give context to our findings and our progress. This will provide an evidence base for our actions and for BHF policy and influencing work, including recommended actions for Government to meet its Research and Development workforce ambitions.

We will promote inclusivity and transparency in our research funding decision-making

For example, we will do this by:

- **Working in partnership with other cardiovascular research funders:**
  We will work in partnership nationally and globally to promote inclusive research practices to save and improve lives affected by cardiovascular disease.
- **Using key strategic investments to drive our EDI agenda:**
  Our strategic investments will require adherence to BHF EDI principles. For example, the next funding call for BHF's Research Excellence Awards includes a specific requirement for applicants to consider representation and diversity including in their senior leadership structure and for clear plans articulating how any award would promote EDI at all levels among researchers.
- **Implementing an expression of interest process for independent reviewers of our grants and members of our funding committees:**
  We will implement an expression of interest process so that our funding decisions can draw from the widest pool of talent informing and encourage researchers from under-represented groups, including women and researchers from an Ethnic Minority background to apply.

This is the start of our journey.

By engaging with researchers and in partnership with others
we will work towards a better, more inclusive and diverse research ecosystem.

References

[1] Office for National Statistics, “Ethnic group, national identity and religion,” [Online]. Available: https://www.ons.gov.uk/methodology/classificationsandstandards/measuringequality/ethnicgroupnationalidentityandreligion.

[2] Advance HE, “Staff statistical report 2022,” 2022.

[3] S. L. Chellappa, “Intersectional inequities in academia,” The Lancet, vol. 401, no. 10382, p. 1076, 2023.

[4] Royal College of Physicians, “Working differently in the shadow of COVID-19: the 2021UK census of consultant, higher specialty trainee and SAS physicians”, 2021

British Heart Foundation

bhf.org.uk

If you have any questions or feedback about this report or BHF's strategy for equality, diversity and inclusion, get in touch by emailing diversityinresearch@bhf.org.uk.