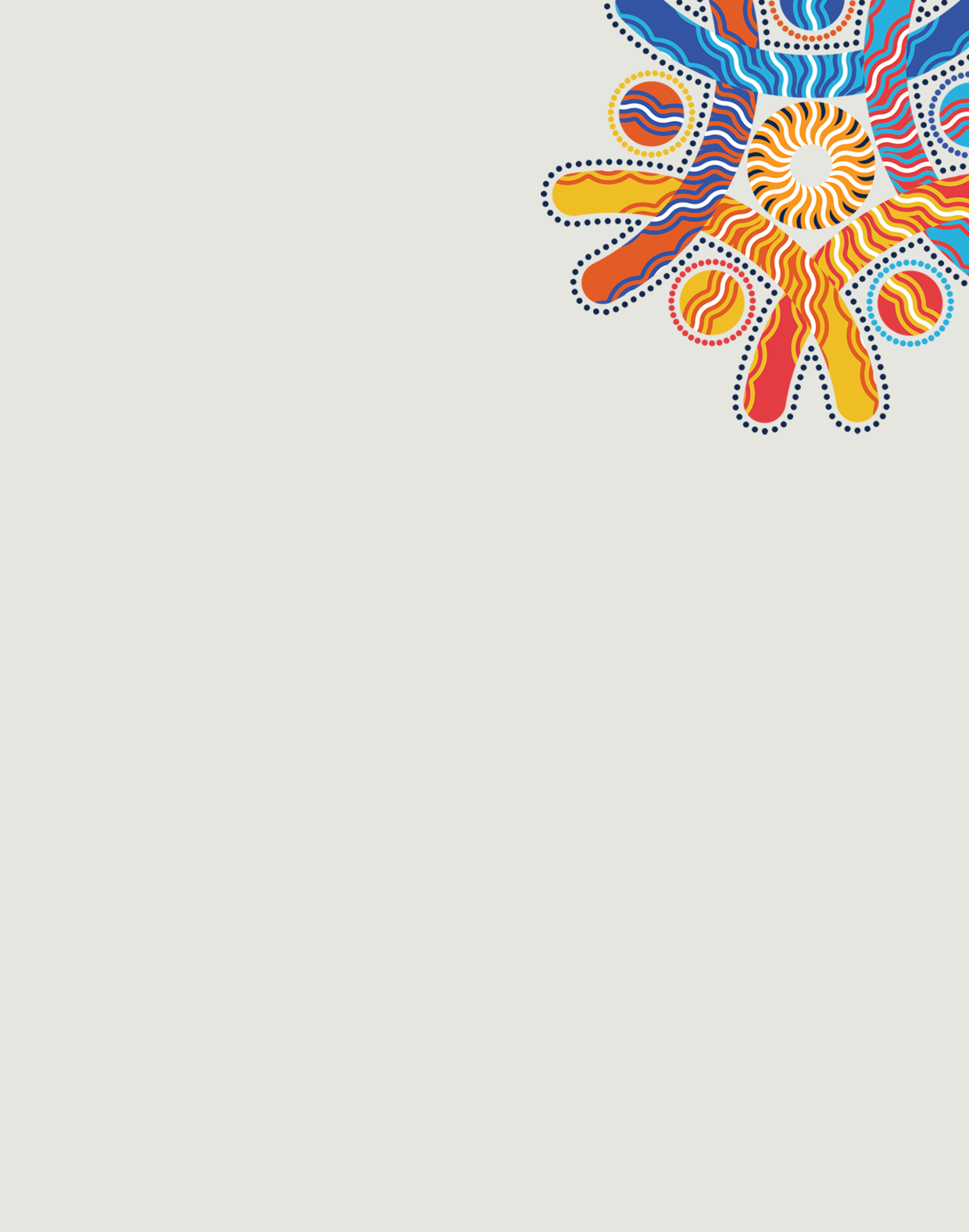
**Review of Cancer Australia’s grant programs – Summary Report**

Cancer Australia

11 April 2025



#### **Nous Group** acknowledges Aboriginal and Torres Strait Islander peoples as the First Australians and the Traditional Custodians of country throughout Australia. We pay our respect to Elders past, present and emerging, who maintain their culture, country and spiritual connection to the land, sea and community.

This artwork was developed by Marcus Lee Design to reflect Nous Group’s Reconciliation Action Plan and our aspirations for respectful and productive engagement with Aboriginal and Torres Strait Islander peoples and communities.

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**Statement of Acknowledgement**

Cancer Australia acknowledges Aboriginal and Torres Strait Islander people as the Traditional Custodians of Country throughout Australia. We pay our respects to Elders, past and present. We celebrate the ongoing connections of Aboriginal and Torres Strait Islander peoples to Country, culture, community, family and tradition and recognise these as integral to health, healing and wellbeing.

Cancer Australia acknowledges great diversity among Aboriginal and Torres Strait Islander peoples, and the contribution of the many voices, knowledge systems and experiences that guide all efforts to create a culturally safe and responsive cancer system that is equitable to all.

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# Summary Report

Cancer Australia engaged Nous Group (Nous) to undertake a Review of Cancer Australia’s three existing grant programs (the Review). Each grant program has different objectives, and responds to different needs, sector priorities and involves diverse stakeholders as funding partners and collaborators. This includes:

* Priority driven Collaborative Cancer Research Scheme (PdCCRS) - an annual competitive, national program that funds cancer research in priority areas.[[1]](#footnote-2)
* Support for Cancer Clinical Trials (SCCT) - supports the Multi-site Collaborative Cancer Clinical Trials Groups to develop industry-independent cancer clinical trial protocols.[[2]](#footnote-3)
* Supporting people with cancer (SPWC) - supports people affected by cancer through the provision of grants to community organisations and Aboriginal and Torres Strait Islander organisations.

As the government’s national cancer control agency, Cancer Australia aims to reduce the impact of cancer, address disparities and improve outcomes for people affected by cancer by leading and coordinating national, evidence-based interventions across the continuum of care. Cancer Australia has a legislated responsibility under the *Cancer Australia Act 2006* *(Cth)* to provide national leadership in cancer control and to oversee a dedicated budget for research into cancer.[[3]](#footnote-4) The grant programs established in 2007, 2006 and 2005 respectively, are mechanisms for Cancer Australia to enact this role.[[4]](#footnote-5)

In the context of the upcoming release of the first Australian Cancer Plan (ACP), the review was a timely opportunity to understand:

* how effective Cancer Australia’s grant programs are in achieving their aims and contributing towards reducing the impact of cancer, addressing disparities and improving outcomes for people affected by cancer, and
* the opportunities for improvement within the current suite of grant offerings and potential future directions to deliver outcomes aligned to the ACP, that positively and meaningfully impact cancer research and support.

Nous conducted the Review between January 2023 – May 2023. The review involved an analysis of over 300 documents, a domestic and international scan of other grant programs, consultations with 104 stakeholders representing 69 organisations from the sector and an online survey with over 340 responses.

## Summary of review findings

##### All three grant programs fulfill Cancer Australia’s legislative role, are compliant with Commonwealth guidelines and broadly align to the ambition of the upcoming ACP

The review assessed how the programs align to Cancer Australia’s legislative role, each grant program’s compliance with Commonwealth guidelines and alignment to the ACP.

Fulfillment of legislative role

Cancer Australia has a legislative role to provide national leadership in cancer control and overseeing a dedicated budget for research into cancer. All three grant programs demonstrate leadership in cancer control. PdCCRS and SCCT fulfill the agency’s requirement to administer a dedicated budget for cancer research (noting this is not applicable to SPWC as it is not a research grant program).

Compliance with the Commonwealth Grants Rules and Guidelines (CGRGs) 2017

Cancer Australia’s grant programs comply with the Mandatory requirements outlined by the Commonwealth Grants Rules and Guidelines 2017 – and many of the key principles including robust planning and design, collaboration and partnership, governance and accountability and probity and transparency. There are opportunities to further enhance the design and administration of Cancer Australia’s grant programs to strengthen their alignment with the key principles.

Alignment to the ACP

The grant programs broadly align with the strategic objectives and actions of the draft ACP. Opportunities to strengthen this alignment include a greater focus on prevention and early detection; consumer centred and led design; equity for priority populations and improving cancer outcomes for Aboriginal and Torres Strait Islander people.

##### Cancer Australia has contributed $300 million to cancer research through PdCCRS and SCCT since their inception

From 2012-2020, Cancer Australia’s PdCCRS and SCCT grant programs accounted for 4 per cent of all funding for cancer research projects and programs in Australia.[[5]](#footnote-6) While this represents a small proportion of total funding for cancer research projects and programs in Australia, the amount represents a substantial overall contribution.

##### The funding landscape has evolved significantly since the inception of the grant programs

The grant programs were assessed in the context of the domestic and international funding landscape for cancer research and supportive care programs. The assessment was based on available data and information gathered via the desktop review, consultations, and online survey. Despite some grant program adjustments since their inception, the design of the grant programs has remained relatively unchanged since their establishment.

Changes in the cancer research funding sector present both opportunities and challenges

* Larger organisations that fund cancer research including the Medical Research Future Fund (MRFF) (established in 2015) and the long-established National Health and Medical Research Council (NHMRC) contribute billions of dollars into cancer research per year. At the time of the review, 24 other funding sources for cancer research were identified in the funding landscape by respondents to the survey.
* The funding landscape for cancer research has become more crowded since the inception of Cancer Australia’s programs, can be difficult to navigate for stakeholders, and there is increased risk of duplication across funding programs.
* Attracting, supporting and retaining cancer researchers, particularly early career researchers is a critical ongoing challenge for the sector.

Within the context of the domestic funding landscape for cancer research and supportive care, the review considered the three programs and found:

* The PdCCRS shares similar features to other grant programs both domestically and internationally, including the rigorous application process and alignment to research priorities set by the funding organisation.
* While PdCCRS has achieved its objectives, stakeholders noted the scheme could improve how it targets areas of need in the cancer research sector. Examples of areas of need identified by stakeholders included: tumour types with high prevalence or high burden of disease; seed funding for researchers with the intention to support them to apply for larger grants; a specific focus on early-career researchers only to build the capacity of the research sector; targeted programs aligned to the strategic objectives in the ACP; or fund research into parts of the cancer care continuum that need more research, such as prevention or palliative care or survivorship.
* The design and intent of the SCCT program is unique in Australia and globally - no grant programs were identified with comparable aims and objectives to the SCCT grant program.[[6]](#footnote-7) The SCCT program provides critical infrastructure support and has been effective in generating clinical trial protocols. The SCCT program fills a funding gap in the cancer research sector and should be continued with enhancements to increase efficiency, expand effectiveness and continue capacity building for quality and impact of the program.
* SPWC funds community and Aboriginal and Torres Strait Islander organisations to provide supportive care in the community (rather than funding research). Priority populations including Aboriginal and Torres Strait Islander people have recognised unmet supportive care needs,[[7]](#footnote-8) and this review identified SPWC as one of a few in the domestic landscape funding supportive cancer care with an Aboriginal and Torres Strait Islander focus. This program is highly valued and should be continued within the portfolio of Cancer Australia’s investment in grant programs.

National leadership and coordination of cancer research and supportive care funding in Australia was explored through the consultations and survey

Stakeholders did not report a critical gap in Cancer Australia’s remit or role in the cancer research or supportive care funding landscape. However, there was a clear need expressed for a strategically coordinated and collective approach to align focus and priorities for cancer research. Cancer Australia was consistently perceived as well placed to set direction on future research priorities and lead identification on topics for research, gaps or needs requiring most attention or investment.

In the context of the upcoming ACP, there is appetite from the majority of stakeholders consulted for Cancer Australia to be visible in strategic collaboration and leading national approaches to direct/align cancer research priorities and investment. Further, improving equity of cancer outcomes is a defining feature of the ACP. There are key opportunities for Cancer Australia to direct effort to improve equity through its grant programs and leadership role in cancer control.

##### Key findings for the PdCCRS

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| KEY FINDINGS | The PdCCRS has made substantial positive impact since its inception.  While there are opportunities to enhance PdCCRS in its current form, the review found the scheme is not creating optimal impact. The current investment in the scheme should be reconsidered to increase the impact aligned to the ACP. |
| OUTCOMES | |
| * The PdCCRS has provided $170m of funding to 485 cancer research projects since 2007 in collaboration with 23 funding partners, including 22 non-government funding partners and one government funding partner.[[8]](#footnote-9) * PdCCRS funding data and survey responses indicate the PdCCRS supports a pipeline of cancer specific research projects and has led to numerous research publications. Eighty-three percent of grant applicants responding to the survey, identified a successful publication linked to the PdCCRS grant supported research. * Overall, the review found the objectives of the PdCCRS have been met. Funded projects included those that support innovative cancer research projects, tumour areas with high burden of disease and research that supports the priorities of Cancer Australia and its funding partners. There is limited data available to demonstrate impact on longer term outcomes. | |
| STRENGTHS | |
| * PdCCRS is the only national, government funded and administered research grant scheme dedicated to cancer (all tumour types) and facilitates collaborative investment across multiple funding partners. * The PdCCRS enables the coordination of investment from funding partners and thereby creates economies of scale and reduces the administrative burden for its funding partners. It has also brought funding partners together and created opportunities for collaboration within and outside the PdCCRS. * The NHMRC assessment process is seen by many funding partners to bring robustness, quality and credibility to the scheme. * The majority of PdCCRS stakeholders perceive the PdCCRS’ funding intent as complementary to the NHMRC grants. Stakeholders noted the importance of the PdCCRS potentially funding research projects that don’t receive NHMRC support, and dedicated funds for early-career researchers (an ongoing area of funding need). * The strong emphasis on consumer involvement in PdCCRS is seen to be effective overall, and successful in demonstrating the value of consumer engagement to the sector. * PdCCRS recipients are generally satisfied with the management of the grant, including the timeliness of funding payments and reporting requirements. | |
| OPPORTUNITIES AND RATIONALE | |
| * The PdCCRS is relatively small in size and scale compared to other grant programs in the Australian funding landscape for cancer research, and has similarities with other programs. Collaborative planning to focus on key priorities with other available grant programs including NHMRC, MRFF and other cancer organisations who fund cancer research grants through separate programs[[9]](#footnote-10) is minimal. Due to the aligned administration processes with NHMRC, the PdCCRS shares similarities with NHMRC’s Ideas Grant and Clinical Trials and Cohort Studies Grant. * There are mixed views on the value of the NHMRC review process – while it brings credibility in the eyes of funding partners and some stakeholders, it is seen as duplicative and onerous by applicants and as excluding some worthwhile research projects. Projects awarded through the PdCCRS appear to have gradually shifted in recent years from the program’s original intent of translational research to fund higher proportions of basic science projects, possibly influenced by NHMRC application requirements and its close links with the NHMRC Ideas Grant scheme. * The maximum value of an individual PdCCRS grants and the duration of the grant are considered small to deliver intended outcomes of research projects (particularly when compared to similar MRFF and NHMRC grants). Available grant funding has not grown in line with rising costs since its inception in 2007. * Funding partners don’t have consistent success in funding research projects which sufficiently align to their priorities (which can be dependent on applications received). * Stakeholders suggest the approach to identifying the funding priorities of the program could be driven more from community and sector need, and in line with the new ACP. | |

##### Key findings for the SCCT program

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| KEY FINDINGS | The SCCT program is globally unique, fills a research funding gap in Australia, supports advancement in cancer prevention, treatment and care programs.  Its impact can be enhanced by adjustments to grant design, reporting and administration. |
| OUTCOMES | |
| * The SCCT program has provided over $120m to Clinical Trial Groups (CTGs) and National Technical Services (NTS’), to support advancement in cancer prevention, treatment and care through industry-independent clinical trials.[[10]](#footnote-11) For the 2013-2018 and 2018-2021 grant rounds, 217 competitive grants have been awarded to the CTGs, and 292[[11]](#footnote-12) clinical trials have been activated.[[12]](#footnote-13) * CTG reporting data and survey responses indicate the SCCT program has increased the number of clinical trials and improved cancer clinical trial capacity through improvements in protocol planning, and the establishment of clinical sites. * The review found that the SCCT objectives have been met and is highly valued by stakeholders. It has supported an increase in the number and value of successful competitive grant submissions, increased in the number of clinical sites opened and the number of patients recruited in clinical sites. There is limited data available to demonstrate impact on longer term outcomes. | |
| STRENGTHS | |
| * The SCCT program is globally unique in its purpose to fund development of clinical trial protocols and builds sector capacity through core infrastructure funding. It is perceived as complementary to the NHMRC and MRFF grant programs as SCCT supports development of robust protocols, which enables greater success rates in competitive research grant applications. * The SCCT program provides vital funding to the CTGs and NTS’ and keeps the large majority of these organisations financially sustainable. * The SCCT program is critical to ensure a strong pipeline of cancer clinical trials, and stakeholders including cancer researchers and key stakeholders within and outside the CTGs and NTS’ emphasised there would be substantial disruption to cancer clinical trial capacity in Australia without the program. * There are strong relationships across the CTGs and NTS’ and collaboration through the Executive Officer Network[[13]](#footnote-14) has been an efficient channel to leverage knowledge and capacity across the organisations. * The Health and Pharmaco-economic Technical Services (HE), and the Quality-of-Life Technical Services (QoL) NTS’ are useful in providing protocol guidance and advice to develop high quality and competitive clinical trial protocols. | |
| OPPORTUNITIES AND RATIONALE | |
| * There are opportunities to re-design the KPIs in collaboration with the CTGs and NTS’ aligned to the purpose and scope of the program, so that measurement is weighted towards protocol development. The SCCT program’s current reporting metrics are more focused on subsequent clinical trial delivery outcomes (which are important to track at a high level), rather than development of clinical trial protocols.[[14]](#footnote-15) * Compliance with Commonwealth guidelines could be enhanced to ensure proportionality in reporting requirements for the relative size of the grants. * The SCCT program’s reporting processes could be more targeted and transparent by improving the understanding amongst the CTGs of why and how data collected through reporting is used. * There are opportunities to streamline and improve the efficiency of the current grant variation process, and to streamline and digitise reporting processes. Leveraging Cancer Australia’s new online grants management system to support CTGs and NTS’ efficiency in administration should minimise operational impacts on CTGs. * The quantum of total funding for the program, the length of three-year funding periods, and individual grant values could be reconsidered to reflect the increasing costs associated with the development of clinical trial protocols, inflation and salary growth, especially for CTGs that are well established and have been longstanding funding recipients. * Collating and sharing the achievements from SCCT grant reports would support greater awareness of the program and its impact, promote ongoing cancer research throughout the sector and could assist in identifying future priorities for cancer research and clinical trials. * CTGs value the support from the NTS’ and there are opportunities to review the requirements and ways of working between CTGs and NTS’, with particular attention on the Genomics Cancer Clinical Trials Initiative (GCCTI). * There is some demand among CTGs for support and coordinated technical advice on Aboriginal and Torres Strait Islander engagement, and on Biostatistics. | |

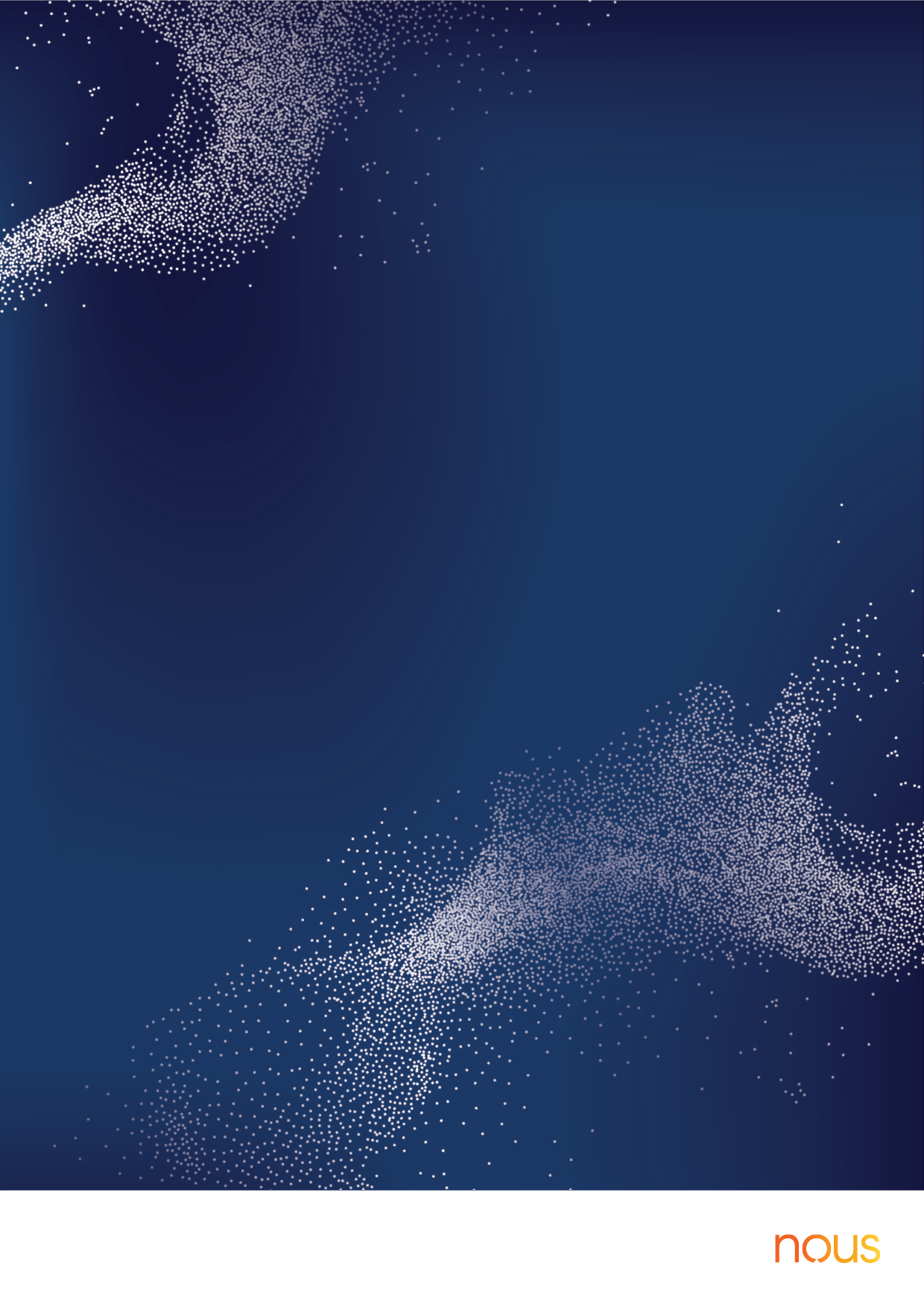
##### Key findings for the SPWC program

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| KEY FINDINGS | The SPWC program has a strong value proposition, contributes to the priorities of the ACP and Closing the Gap and has been effective in enabling grassroots organisations to support people with cancer.  Its impact could be enhanced though increased awareness of the program, engagement with Aboriginal and Torres Strait Islander organisations and an increased focus on projects that support priority populations in alignment with national strategic and policy directions. |
| OUTCOMES | |
| * The SPWC grant program has provided around $10m to community and Aboriginal and Torres Strait Islander organisations to support people with cancer and encouraged over $8.7m in co-contributions.[[15]](#footnote-16) * SPWC reporting and funding data and survey responses indicate the program has effectively reduced barriers for priority groups to access supportive cancer care through ‘grassroots’ organisations. * Overall, the objectives of the scheme have been met. This includes funding projects that have increased access to cancer support, fostering collaboration and partnerships. There is limited data available to demonstrate impact on longer term outcomes. | |
| STRENGTHS | |
| * The SPWC program enables funding of community led projects built on an understanding of community needs. The program complements grant recipient skills and knowledge and enables them to elicit change in ways appropriate for local communities. * The SPWC program is unique in its goal to increase access to supportive care, and contributes to national priorities and reforms including the ACP and Closing the Gap. * Tailored assessment criteria for applicants from Aboriginal and Torres Strait Islander organisations has shown early indications of increasing application numbers and success rates for this stream.[[16]](#footnote-17) * The SPWC program is closely aligned to the ACP’s objective ‘to achieve equity in cancer outcomes for Aboriginal and Torres Strait Islander people’ and is supporting to build the capacity of the community sector to provide supportive care. * The SPWC program is administered flexibly by Cancer Australia. Grant recipients value Cancer Australia’s engagement in program outcomes, and pragmatism in reviewing applications from grassroots organisations. The grant review process is perceived as rigorous and fit-for-purpose. | |
| OPPORTUNITIES AND RATIONALE | |
| * Targeted promotion of the program through engagement with Aboriginal and Torres Strait Islander organisations should increase awareness of the program and application numbers. Many program applicants discover the SPWC program by chance. GrantConnect and Cancer Australia’s website are the primary avenues for prospective applicants to become aware of the program (58 per cent of SPWC applicants that responded to the survey discovered the SPWC program through these channels).[[17]](#footnote-18) * There are opportunities for Cancer Australia to leverage new and existing partnerships with Aboriginal and Torres Strait Islander organisations to: strengthen relationships across the sector, build awareness of the program, co-design and improve program operations and increase applications from Aboriginal and Torres Strait Islander organisations. * There are opportunities to streamline SPWC application processes and provide more feedback to unsuccessful applicants. Grant applicants reported delays in receiving the outcome of their application, causing challenges for applicant project and program planning. * A longer SPWC funding period could facilitate more impactful and longstanding change for SPWC projects. As many projects involve cultural change or learning components, short funding periods create challenges to achieve intended project outcomes. Longer funding periods may help to achieve lasting cultural and attitudinal change where applicable. * There is appetite from SPWC grant recipients for Cancer Australia to provide links to existing materials and resources to support project outcomes and/or working with recipients to identify relevant research or resources, for example the [Our Mob and Cancer](https://www.ourmobandcancer.gov.au/) website. This could be facilitated through an established Community of Practice for SPWC grant recipients across the sector. * There is an opportunity in line with the ACP to increase the focus of SPWC on Aboriginal and Torres Strait Islander people and other priority populations, and further reduce the barriers for applicants supporting these groups through targeted engagement. * There are opportunities to refine the data collection process to support Cancer Australia’s internal budget and planning for the SPWC program. | |

## Summary of future considerations and opportunities

This review identified considerations for Cancer Australia’s strategic leadership role, each program, and cross-cutting grant management practices. These are summarised below.

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| 1. Improve strategic collaboration with government and leadership in the cancer research and supportive care sector, in line with the ACP. This could include: improved collaboration with MRFF & NHMRC; and priority and direction setting to align the cancer research sector. 2. Continue to fund SCCT and SPWC programs, reflecting the success and impact of each program. There are opportunities to promote the visibility of the two programs to showcase their impact and successful case studies. Consider enhancements to administration and management. For SPWC, there is an opportunity to increase the focus on projects that support priority populations in line with the upcoming ACP and other strategic and policy directives. 3. Revise the PdCCRS to increase the impact of the current investment aligned to the ACP. Both options below will require careful and sensitive change management support for funding partner transition, alternative partnering opportunities, or introductions for new collaborations.   Option 1: Redesign a scheme to optimise impact and alignment to the ACP priorities e.g. consider larger, longer grants, target focus aligned to ACP to address gaps/need (for example a targeted call for research).  Option 2: Remove the scheme and reallocate funds e.g. to SCCT and SPWC budget envelopes, grant management process enhancements, or strategic collaboration.   1. Revisit grant management practices to streamline and improve administration, processes and experience across the grant programs. This will also enhance compliance with CGRG principles. |



1. Including PdCCRS international (PdCCRSi) [↑](#footnote-ref-2)
2. Including funding of the National Technical Services. [↑](#footnote-ref-3)
3. Australian Government. *Cancer Australia Act 2006* (Cth). Available from: <https://www.legislation.gov.au/Details/C2014C00376/Html/Text> [↑](#footnote-ref-4)
4. Note: The SCCT and SPWC were established by the National Breast and Ovarian Cancer Centre prior to the establishment of Cancer Australia in 2006. Cancer Australia overtook administration of SCCT in 2008, and SPWC in 2009. [↑](#footnote-ref-5)
5. Cancer Australia, Cancer Research in Australia: An overview of funding for cancer research projects and programs in Australia 2012 to 2020. [↑](#footnote-ref-6)
6. An international scan of grant programs in Canada, the UK, USA and New Zealand that were similar to Cancer Australia’s grant programs was undertaken as a part of this review. [↑](#footnote-ref-7)
7. Bernades et al., [*Unmet supportive care needs among Indigenous cancer patients across Australia*](https://pubmed.ncbi.nlm.nih.gov/31521102/), Rural Remote Health. September 2019. [↑](#footnote-ref-8)
8. Cancer Australia PdCCRS reporting data. [↑](#footnote-ref-9)
9. This does not include PdCCRS funding partners. [↑](#footnote-ref-10)
10. Cancer Australia SCCT reporting data. [↑](#footnote-ref-11)
11. Based on Nous’ analysis of CTG Final Reports available to the review: 117 clinical trial protocols were activated between 1 July 2013 and 30 June 2018; and 175 clinical trial protocols were activated between 1 July 2018 and 31 December 2021. [↑](#footnote-ref-12)
12. Clinical trials activated does not include clinical trials listed as ‘In Development’, ‘Awaiting Funding’, ‘On Hold’ or ‘Other’ in CTG reports. [↑](#footnote-ref-13)
13. This collaborative network evolved organically through CTG relationships supported by the SCCT program. [↑](#footnote-ref-14)
14. Based on a comparison of SCCT objectives, and CTG reporting data. This was supported by survey responses and SCCT stakeholder consultations. [↑](#footnote-ref-15)
15. Cancer Australia SPWC reporting data. [↑](#footnote-ref-16)
16. Ibid. [↑](#footnote-ref-17)
17. Based on survey data. [↑](#footnote-ref-18)