

Burnet Institute Annual Report

2019



Burnet Institute
Medical Research. Practical Action.

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Burnet Institute is an Australian, unaligned, independent, not-for-profit organisation that aims to achieve better health for vulnerable communities globally.

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OUR MISSION

To achieve better health for vulnerable communities in Australia and internationally by accelerating the translation of research, discovery and evidence into sustainable health solutions.



OUR VALUES

We are an unaligned, independent organisation that operates with transparency and respect. We are passionate about social justice, equality, evidence-based research and development, and strive to deliver excellence and health solutions through innovation, collaboration and accountability.



Burnet Institute's vision of improving equity through better health and its unique approach of linking medical research with innovative, evidence-based practical action is making a profound impact on vulnerable communities around the world."

**Her Excellency The Honourable
Linda Dessau AC, Governor of
Victoria and Patron-In-Chief,
Burnet Institute**



OUR VISION

EQUITY THROUGH BETTER HEALTH

CHAIRMAN'S MESSAGE

I am pleased to present this Annual Report, providing a brief snapshot of Burnet Institute's activities and detailed financial statements for the financial year ended 2019. It was another successful year for the Institute.

Financially, the Institute is in a very sound position. This is due to our success in obtaining significant competitive research grants, strong philanthropic support and the performance of 360biolabs. This position has been significantly enhanced with the sale early in 2020 of the property leaseholds owned by the Institute at 85 and 99 Commercial Road, Melbourne for AUD\$106 million. These leaseholds provided rental income to the Institute since the completion of the Alfred Centre Stage Two in 2010 and were the focus of investor interest. The sale proceeds will be invested for returns to pay future rent and contribute additional income to the Institute.

360biolabs has quickly become Australia's primary specialty laboratory service supporting therapeutic, vaccine and diagnostics development. It is majority owned by Burnet and, since its inception in 2016, has grown significantly and contributed great value to the Institute.

The emergence of COVID-19 has presented both challenge and opportunity. Our strong history and expertise in infectious disease has enabled us to pivot much of our work to addressing aspects of COVID-19.

"I am very proud of the enormous contribution the Institute has made to the global, national and local response to the pandemic as well as all our ongoing non-COVID-19 work."

I would like to thank all those who so generously support the Institute and our work, especially at this challenging time. I would also like to thank all our people at Burnet for their outstanding work, our energetic and widely regarded Director and CEO, Professor Brendan Crabb AC for his leadership, his hard working and effective management team, and my fellow directors for their time and guidance.



Ms Mary Padbury
Chairman

DIRECTOR'S MESSAGE

It has been yet another stellar year for the Institute with many of our public health and laboratory research programs reaching key milestones.

While we have met many of our objectives, 2020 brings the start of a new phase for the Institute as we commence planning for the medium to longer term, through the development of a new strategic plan to take us to 2025 and beyond. This is an exciting phase for the Institute as we determine how best to progress our mission of achieving better health for vulnerable communities.

The onset of the COVID-19 pandemic has, however, brought significant challenges to the Institute, especially in the way we work, how we communicate, and how we ensure continuity of our activities both in Australia and internationally in view of what is likely to be a much tougher funding landscape. In addressing our approach to COVID-19, our focus has been across our areas of strength in development of rapid diagnostics, vaccine development, and public health research and advice. Our staff have been called upon by Australian and overseas (particularly Papua New Guinea) Governments to advise on the best approach to tackling the pandemic, and how we move through this and out the other side in

the knowledge that it will be some time before we have a vaccine and therapeutic drugs.

It is especially satisfying to know that our government is taking advice from the expert health and scientific community in their approach and we've been fortunate thus far to avoid the health catastrophes of other nations. However, there are difficult days ahead.

I would like to thank our Chairman, Mary Padbury and Board members for their guidance and support, our wonderful executive team, and our truly amazing staff and student body more generally for their dedication and commitment. A special thank you too, to our wonderful donors who are equally committed and support the Institute so enthusiastically. Our next 12 months will be challenging as with many organisations, but we are in a strong position and look forward to continuing to make a positive contribution to global health.



Professor Brendan Crabb AC
Director and CEO

OUR BOARD

Our Board comprises highly qualified individuals who each bring unique expertise and experience relevant to their governance role. Their experiences span medical research, public health, medicine, law, business development, advocacy, communications, finance, corporate governance and innovation.



DIRECTOR AND CHAIRMAN

Ms Mary Padbury
(From Feb 2019)



DIRECTOR AND CHAIRMAN

Mr Robert Milne AO
(Resigned Feb 2019)



DIRECTOR AND CHIEF EXECUTIVE OFFICER

Professor
Brendan Crabb AC

DIRECTORS



Mr Robin Bishop



Professor
Peter Colman AC



Associate Professor
Helen Evans AO



Mr Benjamin Foskett



Mr John Georgakis



Mr Leigh Jasper



Ms Alison Larsson



Professor
Sharon Lewin AO



Professor
Christina Mitchell AO



Ms Miche Paterson



Dr Sergio Scrofani



Mr Michael Ziegelaar

OUR STRATEGIC OBJECTIVES

Burnet 2020 provided a framework for our strategic direction, with six key objectives steering our activities and achievements:

AMBITIOUS BUT ACHIEVABLE GOALS

USING HIGH QUALITY RESEARCH AND KNOWLEDGE

TRANSLATING OUR RESEARCH AND KNOWLEDGE

FOSTERING A TALENTED, COMMITTED WORKFORCE

VALUE-ADDED, SUPPORTIVE WORKPLACE ENVIRONMENT

FINANCIAL SUSTAINABILITY

Burnet supporting the global COVID-19 response

Having achieved many of those objectives, Burnet Institute is entering an exciting phase, developing a new strategic plan to take us to 2025 and beyond. The COVID-19 pandemic has had a major impact globally and will shape future strategic thinking.

Burnet has responded to COVID-19 through its areas of strength in life sciences and public health research and advice, but our key focus remains how best to achieve better health for vulnerable communities.



IMPACT

ACHIEVING BETTER HEALTH FOR VULNERABLE COMMUNITIES



330+

Scientists, public health professionals and support staff



275

Peer-reviewed publications in 2019 – a record for Burnet!



\$17 million (AUD)

In NHMRC grants and fellowships



\$55.8 million (AUD)

Spent on improving health for vulnerable communities



Image: Andrea Jasper (far right) meets a new mum in PNG with our HMHB researchers Rose Suruka and Lucy Au.

MAJOR GIFTS

Gifts of all sizes play a significant role at Burnet. A special thank you to all our supporters. We would like to highlight a few major gifts in 2019.

Matching Passion with Purpose

Andrea and Leigh Jasper have an entrepreneurial spirit, an interest in maternal and child health, and a desire to see research used for real world solutions. Translating research into practical action to save lives is at the heart of Burnet's ethos of 'medical research, practical action'. Matching their passion with purpose led to a three-year commitment from the Jasper Foundation to help set up our Quick Development of Solutions Lab (qDOS Lab), and support for our Healthy Mothers, Healthy Babies (HMHB) program. qDOS aims to fast-track innovative health and medical technologies developed by our researchers, from early proof-of-concept, to feasibility and finally to market. HMHB is identifying the causes of the high death rate of mothers and babies in Papua New Guinea, and developing interventions to save lives.

With special thanks to the Jasper Foundation.

Building National Antimicrobial Resistance (AMR) Surveillance Systems in the Pacific

Working with public health leaders in Kiribati, Papua New Guinea and Solomon Islands, Burnet Institute is helping to develop a roadmap for the gradual implementation of a national AMR surveillance system, and to trial tools to support microbiological data collection and laboratory management in each national reference laboratory.

With special thanks to the Australian Academy of Science (acting on behalf of the Department of Industry, Science, Energy and Resources).

Capacity Building

Building the capacity of Burnet staff and laboratories helps progress our research and projects – seed funding springboards innovative, multi-disciplinary research; the purchase of specialised equipment underpins new research discoveries; and staff fellowships enable greater collaboration, help foster a talented workforce and support independent research.

With special thanks to the many donors who gave a major gift to support capacity at Burnet.

YEAR AT A GLANCE



5

Thematic Programs



31

Research Working Groups



67

Students

PhD students: 44
Masters students: 8
Honours students: 15



Congratulations to our students awarded PhDs:

Dr Liriye Kurtovic
Dr Peter McGlynn
Dr Katherine O'Flaherty
Dr Riya Palchaudhuri
Dr Leanna Surrao
Dr Vanessa Veronese



January

Burnet collaborates with GlaxoSmithKline (GSK) to fight newborn sepsis, a leading cause of neonatal mortality in Papua New Guinea, through use of chlorhexidine.



March

Burnet's International Women's Day luncheon focused on Young Women Most-At-Risk, attracting a bumper turnout of supporters of Burnet's work in Young People's Health. Keynote speaker was Ms Liana Buchanan.



April

Burnet PhD student, Michael Traeger, is the lead author in a study published in the prestigious *Journal of the American Medical Association (JAMA)* indicating a 20 per cent increase in STIs among men using HIV pre-exposure prophylaxis (PrEP).



February

After almost two decades as a Burnet Director, including four years as Chairman, Mr Robert Milne AO retires from the Board. Ms Mary Padbury assumes the position of Chairman.



March

Dr Peter Azzopardi's landmark study on global adolescent health is published in *The Lancet*. It marks the first comprehensive snapshot of the health and wellbeing of the world's 1.8 billion adolescents.



May

The collaborative EVE-M project focusing on women's sexual and reproductive health, led by Professor Gilda Tachedjian, wins a major competitive Medical Research Future Fund (MRFF) grant to fast track its development.



My first year at Burnet has granted me new insights and perspectives into a range of global health issues. Studying here, I have access to excellent resources as well as unique opportunities to transfer my research to the field.”

Jessica Horton,
PhD student, Burnet Institute



June

Burnet partners with the UNFPA Asia-Pacific Regional Office, JHPIEGO and Laerdal Global Health, to provide maternity emergency training for midwives in Papua New Guinea’s rural and remote areas.



August

Healthy Mothers, Healthy Babies commences a new study designed to improve health services, especially antenatal, labour and birth, in East New Britain province in Papua New Guinea.



November

Burnet Institute Director and CEO, Professor Brendan Crabb AC, is acknowledged for his groundbreaking malaria research with the prestigious 2019 GSK Award for Research Excellence.



July

Hi-tech videos of malaria parasites invading human red blood cells, made by Dr Paul Gilson's team, validate important discoveries by Oxford University for the potential development of a world-first effective malaria vaccine.



August

The first national report on Australia’s progress towards the elimination of hepatitis C highlights the great strides made over the past three years, with over 70,000 Australians having accessed curative therapies by the end of 2018.



December

A simple, low-cost, rapid HIV diagnostic developed by Burnet and commercialised by our partners at Omega Diagnostics, UK, is endorsed by the Global Fund to Fight AIDS, Tuberculosis and Malaria.



OUR WORK

OUR FLAGSHIP RESEARCH INITIATIVES



“The devastating impact of the global pandemic, COVID-19, has significantly raised awareness that the answer to any of these big health problems is science. There is no other answer. You can't ‘clinical’ your way out of it, you’ve got to solve it, you’ve got to solve a complex problem.”

Professor Brendan Crabb AC,
Director and Chief Executive Officer, Burnet Institute

PROUDLY SUPPORTING THE GLOBAL COVID-19 HEALTH RESPONSE

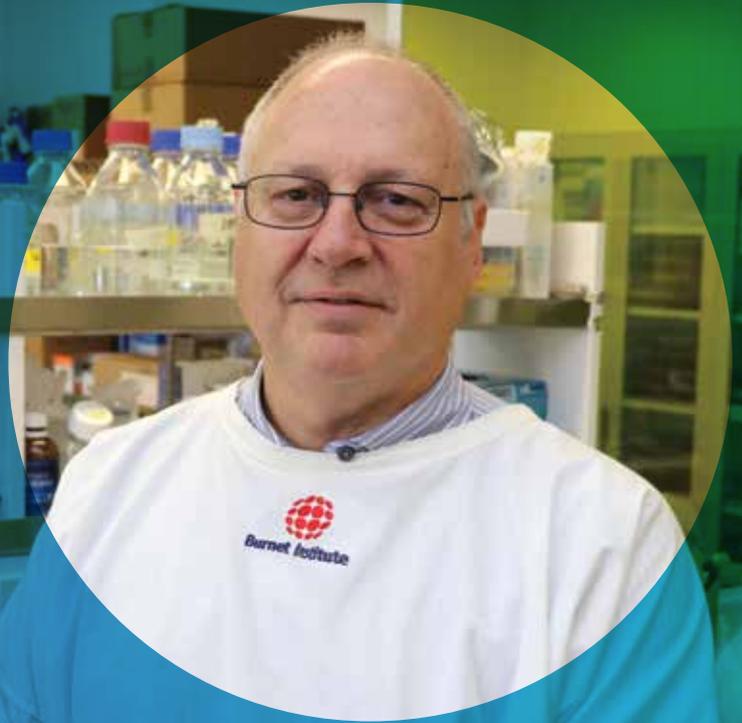


Image above: Associate Professor David Anderson in the lab developing a reliable, accurate COVID-19 point-of-care test.



Burnet's innovative and evidence-based public health and laboratory-based COVID-19 research initiatives are contributing to solutions to the global pandemic.

Since the start of the COVID-19 pandemic, Burnet has proactively contributed to the national and global response through public health and laboratory-based research, advocacy and the provision of high-level advice to government.

The Institute's key programs are home to researchers with significant expertise and longstanding collaborations and networks that are critical to the response to COVID-19.

Our expertise in virology, rapid diagnostics, and in assessing and developing antiviral agents is well recognised internationally. Combined with our public health expertise in epidemiology, modelling, disease elimination and understanding human behaviours, Burnet is well positioned to provide a significant ongoing contribution to the COVID-19 response.

Professor Brendan Crabb AC and other researchers are involved in multiple COVID-19 responses committees, such as the National Advisory Committee on COVID-19, and provide strategic advice to Australia's Chief Medical Officer, state Chief Health Officers and Departments of Health.

The Know-C19 Hub is our gateway to research, policy and technical reports, addressing gaps in knowledge and providing novel information to inform the global response.

ADVOCACY, RESEARCH, INNOVATION, RESPONSE, RECOVERY



Diagnostics

Development of a rapid point-of-care test to identify people who have been infected and cleared the virus.



Antivirals

Screening of novel drugs with antiviral action for their ability to prevent or treat COVID-19 infection.



Vaccine

Development and evaluation of antibody assays to understand the immune response to COVID-19 in humans.



Advocacy

Providing strategic advice to Australia's Chief Medical Officer, state Chief Health Officers and Departments of Health.



Public Health

Improving our knowledge through public health measures to strengthen care and stop community transmission of COVID-19.



International Health

Supporting COVID-19 responses in Papua New Guinea, Myanmar and other countries through modelling and other strategies.

GROUNDBREAKING RESEARCH TO IMPROVE HEALTH CARE IN PAPUA NEW GUINEA



Study findings show poor nutrition is contributing to low birth weight



Healthy Mothers, Healthy Babies (HMHB) is a collaborative research program aimed at providing life-saving health care for women and children in Papua New Guinea (PNG). It is philanthropically funded and involves partnering with local representatives at district, provincial and national level in PNG.

The HMHB program is making significant progress in understanding major causes of poor maternal and child health. We are also identifying and evaluating strategies to improve health and health care.

Findings and impact of our research:

- We identified major nutritional deficiencies, demonstrating a very high level of anaemia and iron deficiency among mothers and infants.
- Our findings suggest that **poor nutrition is contributing to low birth weight** (poor growth during pregnancy) and we are investigating the specific nutritional needs required to achieve healthier mothers and babies at birth.
- We have **quantified the burden of stunting** (child growth failure) among infants and investigating the causes so interventions can be developed.

- A major finding: **50 per cent of stunting appears to be due to causes during pregnancy.** This indicates interventions are needed in pregnancy, as well as after infancy, to achieve the goal of eliminating stunting.
- Among women, we **identified for the first time in PNG a high burden of *Mycoplasma genitalium***, an infection of the reproductive tract. This infection was previously unknown in PNG and our findings have important implications for clinical care and public health policy.
- Through evaluations of health services, we **identified gaps in childhood immunisation coverage and newborn care** within the first month of life.
- We worked with the East New Britain Provincial Health Authority to conduct a successful pilot trial of a new program of newborn and maternal care after delivery.
- Our quality of care study (known as Gutpela Servis) has completed a comprehensive evaluation of health services during childbirth and immediately after birth, and **our team is working together with health services on strategies to improve care.** This will be particularly important for reducing maternal and newborn deaths.

Principal Supporter



Partners



PAPUA NEW GUINEA
INSTITUTE OF
MEDICAL RESEARCH



EAST NEW BRITAIN
PROVINCIAL GOVERNMENT



PAPUA NEW GUINEA
NATIONAL
DEPARTMENT OF HEALTH



The
UNIVERSITY OF
PAPUA NEW GUINEA



Kirby Institute



PARTNERING TO ELIMINATE HEPATITIS C



70,000

Australians accessed curative therapies by the end of 2018



180,000+

Australians still living with treatable HCV



15,000

(goal) Australians treated and cured of hepatitis C annually



A major strength of Australia's response to hepatitis C elimination has been its partnership approach, between key community organisations, government, the health sector and researchers working together"

Dr Alisa Pedrana,
Eliminate Hepatitis C Australia
Coordinator



EC Australia

Partnering to eliminate hepatitis C

EC Australia brings together researchers and implementation scientists, government, health services and community organisations to increase hepatitis C testing and treatment in community clinics. The overarching goal is to catalyse Australia's efforts to eliminate hepatitis C as a public health threat by 2030. Funded by the Paul Ramsay Foundation, EC Australia commenced in late 2018.

Key achievements for 2019 include:

- The EC Australia Project Team undertook an Australia-wide consultation process to understand the current systems and policies, and meet all key organisations and partners in the blood-borne virus and hepatitis C sector.
- Distribution of AUD\$4.7m funding over two years through agreements to all Australian states and territories, to be used to increase hepatitis C testing and treatment capacity.
- Establishment of an Aboriginal Health Plan, including dedicated resources and funding to ensure efforts to improve hepatitis C testing and treatment effectively engage and benefit the Aboriginal and Torres Strait Islander community.
 - **Key Partners:** University of Queensland and National Aboriginal Community Controlled Health Organisation
- The National Reference Group for Health Promotion co-designed an awareness campaign with the National Peer Network for people who inject drugs (PWID), to engage the PWID community in testing through targeted information and care.
 - **Key Collaborators: Co-Lead:** The Australian Injecting and Illicit Drug Users League (AIVL)
 - **Partners:** Enigma and Clear Horizon
- In partnership with the Kirby Institute, EC Australia published the first national report on progress towards eliminating hepatitis C in Australia, highlighting that over 70,000 Australians received curative therapies by the end of 2018. Multiple collaborators (see burnet.edu.au/ECAustralia for more information).

Supported by:

**paul
ramsay**
FOUNDATION

OUR PROGRAMS: TACKLING MAJOR GLOBAL HEALTH ISSUES



MATERNAL AND CHILD HEALTH

Program Goal: Equity in maternal and child health

The program aims to generate new knowledge about key contributors to poor health outcomes for women, children and young people. We are developing and testing new tools, technologies and strategies to overcome these challenges, including using mathematical modelling to ensure that limited resources are allocated appropriately.

Key Projects

- Evaluation of the WHO Labour Care Guide in India, Argentina, Nigeria, Kenya and Tanzania
- Gender counts: A quantitative assessment of gender inequality and its impacts on children and adolescents in Asia and the Pacific
- Improved point-of-care test to eliminate congenital syphilis.

Key Publications

Induction and decay of functional complement-fixing antibodies by the RTS,S malaria vaccine in children, and a negative impact of malaria exposure. Kurtovic, L., Agius, P.A., Feng, G. et al. *BMC Med* 17, 45 (2019)

The field performance and diagnostic accuracy of a low-cost instrument-free point-of-care CD4 test (VISITECT® CD4) performed by different health worker cadres among pregnant women. Luchters, S., K. Technau, Y. Mohamed, M. F. Chersich, P. A. Agius, M. D. Pham, M. L. Garcia, J. Forbes, A. Shepherd, A. Coovadia, S. M. Crowe and D. A. Anderson (2019). *J Clin Microbiol.* 2019 Jan 30;57(2). pii: e01277-18

DISEASE ELIMINATION

Program Goal: The elimination of HIV, viral hepatitis and malaria as public health threats

The program is a coordinated response focused on the elimination of three major diseases, HIV, malaria and viral hepatitis that disproportionately affect vulnerable communities and populations in Australia and in our region. Burnet's breadth of cross-disciplinary expertise brings together a highly diverse approach to tackling these diseases focusing on prevention, vaccine development and use, testing to identify new and ongoing infections, and treatment strategies.

Key Projects

- CT2: Community-based test and treat for hepatitis C in Myanmar
- Host and parasite factors that predicate drug efficacy and the global spread of antimalarial drug resistance
- A novel gel for targeting vaginal inflammation to prevent HIV transmission.

Key Publications

The case for a universal hepatitis C vaccine to achieve hepatitis C elimination. Scott N, Wilson DP, Thompson AJ, Barnes E, El-Sayed M, Benzaken AS, Drummer HE, Hellard ME. 2019. *BMC Med* 17:175

Association of HIV Preexposure Prophylaxis With Incidence of Sexually Transmitted Infections Among Individuals at High Risk of HIV Infection. Traeger MW, Cornelisse VJ, Asselin J, Price B, Roth NJ, Willcox J, Tee BK, Fairley CK, Chang CC, Armishaw J, Vujovic O, Penn M, Cundill P, Forgan-Smith G, Gall J, Pickett C, Lal L, Mak A, Spelman TD, Nguyen L, Murphy DA, Ryan KE, El-Hayek C, West M, Ruth S, Batrouney C, Lockwood JT, Hoy JF, Hellard ME, Stoové MA, Wright EJ; PrEPX Study Team. *JAMA.* 2019 Apr; 321(14):1380-1390

BEHAVIOURS AND HEALTH RISKS

Program Goal: Promote improved health and wellbeing by reducing harms related to alcohol and other drugs, and sexual and mental health

The program focuses on understanding and reducing behaviour-related harms in key populations at risk, including people who inject drugs, young people and adolescents. Our work has a major impact on policy and practice, related to injecting drug use in particular.

Key Projects

- Mobile evaluation of 'Vanessa' at Festivals
- MIDY: Mobile Intervention for Drinking in Young People
- The GIST: a digital pornography literacy program for marginalised young people.

HEALTH SECURITY

Program Goal: Improved domestic, regional and global health security through strengthened public health systems and reduced vulnerability to infectious disease threats

The program aims to strengthen core public health system capacities required to prepare for and respond to infectious diseases threats in the Asia-Pacific region. This involves improving our understanding of infectious disease threats, developing new laboratory, surveillance, clinical and public health tools to improve health security, as well as building the capacity of health professionals, researchers, policymakers and the general community to address health security issues.

Key Projects

- STRATUM: Stronger Health Systems for multidrug-resistant tuberculosis and malaria
- STRIVE PNG: Stronger Surveillance and Systems Support for Rapid Identification and Containment of Resurgent or Resistant Vector Borne Pathogens in Papua New Guinea
- Australian NGO Cooperation Program (ANCP): Kickstarting antimicrobial resistance responses in Papua New Guinea.

HEALTHY AGEING

Program Goal: Healthy ageing from birth and improved physical, mental and social wellbeing in vulnerable communities

The program focuses on ageing in vulnerable populations in Australia and the Asia-Pacific region. It contributes to knowledge about biological and psychosocial determinants of healthy ageing, develops new tools and therapeutics, promotes inclusive communities for healthy ageing, and integrates related concepts into our research and development activities.

Key Projects

- Antibody mAbs to destroy infection: Engineering the next generation treatments. Applying discoveries from our cancer mAb program to neutralise and destroy pathogens
- The role of monocytes in the development of cardiovascular disease
- Immunometabolic changes to immune cells in ageing and inflammatory disease.

Key Publications

Effect of Intranasal vs Intramuscular Naloxone on Opioid Overdose: A Randomized Clinical Trial. Dietze P, Jauncey M, Salmon A, et al. *JAMA Netw Open* 2019;2:e1914977

Not my child: Parenting, pornography, and views on harm reduction. Davis A, Wright C, Curtis M, Lim MSC, Hellard M, Temple-Smith M. *Journal of Family Studies*: published online 03/09/19

Injection drug network characteristics as a predictor of injection behaviour. Spelman T, Sacks-Davis R, Dietze P, Higgs P, Hellard M. *Epidemiology and Infection* 2019;147:e173

Key Publications

The emergency response to multidrug-resistant tuberculosis in Daru, Western Province, Papua New Guinea, 2014–2017. Morris L, Hiasihri S, Chan G, Honjepari A, Tugo O, Taune M, Aia P, Dakulala P, Majumdar, SS. *Pub Health Act.* 2019 Sep; 9(Supplement 1):S4-S11

Harnessing synergies at the interface of public health and the security sector. Thomson N, Littlejohn M, Strathdee SA, Southby RF, Coghlan B, Rosenfeld JV, Galvani AP. *The Lancet.* 2019 Jan 19;393(10168):207-209

Building a tuberculosis-free world: The Lancet Commission on tuberculosis. Reid MJA et al. *The Lancet.* 2019 Mar; 393(10178):1331-1384

Key Publications

Monocytes from men living with HIV exhibit heightened atherogenic potential despite long term viral suppression with ART. Angelovich TA, Trevillyan JM, Hoy JF, Wong ME, Agius PA, Hears AC, Jaworowski A. *AIDS.* 2019 doi: 10.1097/QAD.0000000000002460

The Human Fc RII (CD32) Family of Leukocyte FcR in Health and Disease. Anania JC, Chenoweth AM, Wines BD, Hogarth PM. *Front Immunol.* 2019;10:464. doi:10.3389/fimmu.2019.00464

TRANSLATING OUR RESEARCH



There is a focus on bringing investment into the Institute that supports and furthers priority research agendas, and fostering collaboration both within the Institute and with external partners.”

Mr Geoff Drenkhahn,
Director, Strategic Funding and Partnerships, Burnet Institute

Working closely with our collaborators, partners and the communities we serve both in Australia and internationally is crucial to achieving our ambitious goals. Burnet has a solid track record of translating its research and knowledge into commercial outcomes. The Institute has a strong collaborative portfolio, both with research and industry partners, and several spin-off entities to commercially develop advanced technologies and provide highly specialised services.

We are proud of our landmark programs and innovative breakthroughs including:



A bold and innovative collaborative research program aiming to transform the sexual and reproductive health of women globally. Led by Burnet Institute’s Professor Gilda Tachedjian, EVE-M is a multidisciplinary and multinational team. It’s one of only 10 projects awarded Medical Research Future Fund (MRFF) Frontier Program Stage One funding, the only one led by a female Principal Investigator.



Image: Mbereko+Men project participants in Mutare, Zimbabwe. Credit: OPHID

MEASURING EFFECTIVENESS

Mbereko+Men: Transforming men’s roles, care and support for family health in rural Zimbabwe.

Burnet participated in the pilot Story of Significant Change technique through the Australian NGO Cooperation Program (ANCP) to assist Australia’s Department of Foreign Affairs and Trade to refine the monitoring, evaluation and learning framework.

Together with our implementing partner OPHID, we submitted a story: ‘Mbereko+Men: Transforming men’s roles, care and support for family health in rural Zimbabwe’ that contributed to the ANCP’s intermediate outcome ‘ANGOs, with in-country partners, deliver effective programs with a focus on Gender Equality and Social Inclusion’.

The project actively challenged the prevailing patriarchal norms and substantially improved family health, and wellbeing. This resulted in both direct and measurable change in health service uptake over the project period, but also in more fundamental transformative change in communities and households. The story of change was tested through an independent verification process, and selected for presentation at the ANCP Learning Event held in Canberra in November 2019.

WHERE WE WORK



While Australia, Papua New Guinea and Myanmar remain our priority countries, we support a range of research and public health programs in many other countries in the Asia-Pacific Region and Africa.

Our Australian-based and international health work continues to reflect the strategic direction of Burnet Institute and the strategic plans of our thematic programs – Maternal, Child and Adolescent Health; Disease Elimination; Behaviours and Health Risks; Health Security and Healthy Ageing.

Our cutting-edge medical research is undertaken in our Melbourne-based laboratories and HMHB laboratory in Kokopo, East New Britain, PNG.

Burnet PNG operates across five sites – Kokopo, Port Moresby, Daru, Kavieng and Kimbe.

In Myanmar, we operate at three local field sites, supported by our main office in Yangon, and also Melbourne, to implement research activities across all 14 states and divisions.

Discover the breadth of our research and public health projects underway in Australia and internationally to create equity through better health for vulnerable communities.



Australia



China



Fiji



India



Indonesia



Kenya



Lao People's Democratic Republic



Myanmar



Papua New Guinea



Thailand



Timor-Leste



Vietnam



Zimbabwe

Burnet is fully accredited by the Australian Government's Department of Foreign Affairs and Trade. This status represents the Australian Government's confidence in our organisational effectiveness, governance and development programs.



SUPPORT OUR WORK



“ I have witnessed the scope of the medical research that is undertaken at Burnet, and truly understand the importance of ongoing financial assistance to sustain that work. Burnet Institute is close to my heart and I will endeavour to assist the amazing staff there to carry on their valuable work.”

Libano Dias,
Monthly Donor

Image above: *Libano (left) with his family.*

IN APPRECIATION

Gifts in Wills

Gifts in Wills, or bequests, help to secure our long-term efforts to achieve better health for vulnerable communities.

We thank the late **Bruce Robin Haylock, George Findon Miller, Donald Southwood Phelts, Dorothy Schwab** and **Marion Alice Wakefield** for their generous and thoughtful bequests to the Institute.

Trusts and Foundations

Thank you to the charitable trust and foundations that support us:

Angior Family Foundation

Australian Academy of Science (acting on behalf of the Department of Industry, Science, Energy and Resources)

Australian Philanthropic Services Foundation

Centenary Foundation –
The Peter Leith Riddell Memorial

Club Melbourne Ambassador Program

Drakensberg Trust

Eirene Lucas Foundation

Gras Foundation

Harbig Family Foundation

Harold and Cora Brennen Benevolent Trust
(managed by Equity Trustees)

Harold Mitchell Foundation

HMA Foundation Pty Ltd

Hon Geoffrey Connard AM Travel Scholarship
(a charitable fund account of Equity Trustees Foundation)

Hopetoun Fund (a sub-fund of Australian Communities Foundation)

Janina and Bill Amiet Foundation

Jasper Foundation

Joe White Bequest

Joyce Adelaide Healey Charitable Trust Fund

June Canavan Foundation

Marshall Fund (a charitable fund account of Lord Mayor's Charitable Foundation)

Margaret Walkom Bequest

Montgomery Foundation Pty Ltd

Nancy E Pendergast Charitable Trust Fund

Naylor-Stewart Ancillary Fund

Norman Beischer Medical Research Foundation

Orloff Family Charitable Trust

Pat (OAM) and Helen La Manna Cancer/
Stroke Research Legacy

Paul Ramsay Foundation

PayPal Giving Fund

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State Trustees Australia Foundation –
Ruby C Thomas and Ronald R Fraser

The CASS Foundation

The Financial Markets Foundation for Children

The Flew Foundation

The Wadham Family Gift

Thomas John Beresford Will Trust

Violet Norma Sanders Charitable Trust

William and Georgena Bradshaw Charitable Trust

William Angliss Charitable Fund

Corporates

Thank you to the corporations that support us:

Arnold Bloch Leibler

Ashurst

Bank South Pacific (PNG)

Jean Hailes for Women's Health

Lazard

Lynton Crabb Photography

Steamships Trading Company Ltd

Tropicana Ltd

Wyndham City Council



THANKS TO OUR SUPPORTERS

It is only through your generosity that we are able to make many advances in medical research and help those most in need in Australia and internationally.

Image above: Dr Berhan Ayele Haile and Dr Riya Palchoudhuri.

Philanthropic Support

There are many different ways to support Burnet, and we thank everyone who has supported us throughout the year. Every dollar counts, no matter how you choose to give, and your generosity really does make a difference.

Appeals

We run four major appeals every year that focus on our funding needs as they arise. A special thanks to everyone who supported our major fundraising appeals. In 2019 your gifts supported:



The Alastair Lucas Prize for Medical Research to pursue research into major health issues



Ongoing research to develop a hepatitis C vaccination



HIV research and project work, including the development of an HIV test for babies



The Low Birth Weight Project as a part of the Healthy Mothers, Healthy Babies program



I'd like to say a special thank you to donors who support our work 'where the need is greatest' whether through major single gifts, monthly donations or bequests. Donating funds in this way allows us to react quickly, divert funds to support new discoveries and keep long-term research projects on track."

Professor Brendan Crabb AC,
Director and CEO, Burnet Institute

Monthly Giving

Giving a gift every month is a great way to support Burnet's work, with your gift, most often, going where the need is greatest. Thank you to everyone donating monthly.

Workplace Giving

Giving through your employer is another great way to support Burnet and receive a tax advantage, and in many cases employers match gifts so your support goes twice as far. Thank you to everyone donating through their employer.

Find out how you can support Burnet Institute's work by contacting us on 03 9282 2111, info@burnet.edu.au or visit burnet.edu.au.

FINANCIAL SUMMARY

In 2019, the Institute spent more than AUD\$55.8 million on improving health for vulnerable communities in Australia and globally.

Basis of Preparation

The Statements of Financial Position and Comprehensive Income provided in this section were extracted from the audited general purpose financial statements of the consolidated operations of Burnet Institute.

The summary financial information does not include all the information and notes normally included in a statutory financial report.

The statutory financial report (from which the summary financial information was extracted) was prepared in accordance with Australian Accounting Standards adopted by the Australian Accounting Standards Board and the

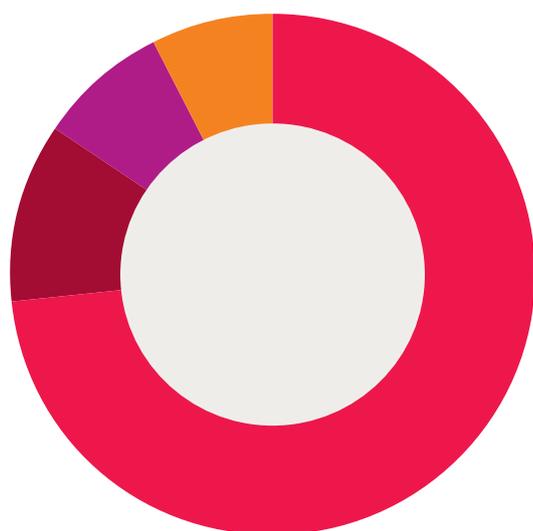
Australian Council for International Development Code of Conduct and the Australian Charities and Not-for-Profit Commission Regulations. The basis of preparation of the statutory financial report is set out in Note 1 to the consolidated financial statements.

The Group recorded a surplus in the current year of \$2,374,912 (2018: deficit \$385,500).

Depreciation and amortisation amounted to \$2,759,094 (2018: \$2,610,472). Other than for 360biolabs Pty Ltd and Biopoint Hong Kong Ltd, income tax is not applicable. The 2019 consolidated result includes a surplus of \$3,613,192 (2018: \$587,454 surplus) from commercial activities.

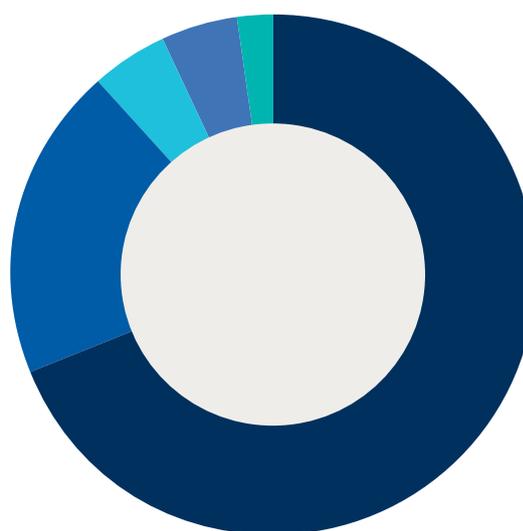
For a full copy of the 2019 audited general purpose financial report please contact Burnet Institute on +61 3 9282 2111, email info@burnet.edu.au or visit burnet.edu.au.

Income 2019



- Competitive Grants/Contracts: 73.5%
- Fundraising: 11.0%
- Investments: 8.1%
- Operational Infrastructure: 7.4%

Expenditure 2019



- Research/Health Programs: 69.0%
- Facilities & Administration: 19.5%
- Business Development: 4.7%
- Amortisation/Depreciation: 4.7%
- Fundraising: 2.1%

CONSOLIDATED STATEMENT OF COMPREHENSIVE INCOME

(For The Year Ended 31 December)

	NOTE	2019 \$'000	2018 \$'000
Operating revenue	3	53,569	42,535
Other income	3	4,399	4,620
Research and development laboratory consumables expenses		(7,012)	(5,001)
Personnel expenses	4	(26,447)	(24,344)
Depreciation and amortisation expenses		(1,474)	(1,326)
Depreciation and amortisation expenses – property management		(1,285)	(1,285)
Research and development non-laboratory expenses		(9,687)	(7,815)
Other expenses from ordinary activities	5	(8,722)	(6,864)
Results from operating activities		3,341	520
Financial income	7	254	220
Financial expenses	7	(918)	(1,049)
Net finance costs		(664)	(829)
Share of loss in associate		(124)	(50)
Net results of equity accounting		(124)	(50)
Surplus/Deficit Before Income Tax		2,553	(359)
Income tax expense		(192)	–
Surplus/(Deficit) After Income Tax		2,361	(359)
Surplus/(Deficit) After Income Tax Attributable to:			
Members of the Company		1,418	(529)
Non-controlling interests		943	170
Surplus/(Deficit) After Income Tax		2,361	(359)
Other comprehensive income			
Foreign currency translation differences – foreign operations		14	(27)
Total Comprehensive Surplus/(Deficit) for the Period		2,375	(386)
Total Comprehensive Surplus/(Deficit) Attributable to:			
Members of the Company		1,430	550
Non-controlling interests		945	(164)
Total Comprehensive Surplus/(Deficit) for the Period		2,375	(386)

The Consolidated Statement of Comprehensive Income is to be read in conjunction with the Notes to the Consolidated Financial Statements.

CONSOLIDATED STATEMENT OF FINANCIAL POSITION

(As At 31 December)

	NOTE	2019 \$'000	2018 \$'000
Current Assets			
Cash and cash equivalents		19,488	19,224
Trade and other receivables	8	8,555	4,914
Investments	10	–	–
Inventories		28	27
Other Assets – prepayments		448	344
Assets Held for sale	9	52,653	–
Total Current Assets		81,172	24,509
Non-Current Assets			
Lease receivables		1,707	2,061
Investments	10	2,629	2,753
Property, plant and equipment	11	5,047	58,254
Total Non-Current Assets		9,383	63,068
Total Assets		90,555	87,577
Current Liabilities			
Trade and other payables		2,716	3,556
Borrowings	12	879	1,095
Current tax liabilities		536	461
Provisions	13	3,659	3,225
Deferred income	14	23,197	19,173
Total Current Liabilities		30,987	27,510
Non-Current Liabilities			
Borrowings	12	31,189	32,081
Provisions	13	681	1,139
Deferred income	14	5,861	6,690
Derivatives	15	521	1,216
Total Non-Current Liabilities		38,252	41,126
Total Liabilities		69,239	68,636
Net Assets		21,316	18,941
Equity			
Retained deficit		(9,251)	(8,418)
Building reserve		29,256	27,005
Foreign Currency Translation Reserve		128	114
Non-controlling interests		1,183	240
Total Equity		21,316	18,941

The Consolidated Statement of Financial Position is to be read in conjunction with the Notes to the Consolidated Financial Statements.

The Macfarlane Burnet Institute for Medical Research and Public Health Limited is a signatory to the Australian Council for International Development (ACFID) Code of Conduct. The Code requires members to meet high standards of corporate governance, public accountability and financial management. In accordance with the ACFID code of conduct, the Institute had nil balances in the following categories as at the end of the financial year which are required to be disclosed separately:

- Current Assets: assets held for sale, and other financial assets;
- Non-Current Assets: trade and other receivables, other financial assets, investment property, intangibles, and other non-current assets;
- Current Liabilities: other financial liabilities and other current liabilities;
- Non-Current Liabilities: trade and other payables, other financial liabilities and other non-current liabilities.

BURNET INSTITUTE INTERNATIONAL DEVELOPMENT ACTIVITIES OPERATING STATEMENT

(For The Year Ended 31 December)

	2019 \$'000	2018 \$'000
Revenue		
Donations and gifts – monetary	84	289
Donations and gifts – non-monetary	–	–
Bequests and legacies	–	–
Grants:		
• DFAT	5,832	5,318
• Other Australian	1,077	1,671
• Other Overseas	3,265	2,148
Investment Income	–	–
Commercial Activities Income	–	–
Other Income	792	1,115
Revenue for international political or religious proselytisation programs	–	–
Total revenue	11,050	10,541
Expenditure		
International aid and development programs expenditure		
International programs:		
• Funds to international programs	9,895	9,862
• Program support costs	1,309	1,745
Community education	–	–
Fundraising costs:		
• Public	–	–
• Government, multilaterals and private	–	–
Accountability and administration	196	421
Non-monetary expenditure	–	–
Total international aid and development programs expenditure	11,400	12,028
Expenditure for international political or religious proselytisation programs	–	–
Domestic programs expenditure	39	39
Commercial activities expenditure	–	–
Other expenditure	–	–
Total expenditure	11,439	12,067
(Shortfall)/Excess of revenue over expenditure	(389)	(1,526)
Other Comprehensive Income	–	–
Total Comprehensive Income	(389)	(1,526)

Notes:

This operating statement represents IFRS financial information and is extracted specifically for the operations of the International Health Programs as required by the ACFID Code of Conduct. The deficit represents the Institute's additional financial contribution to the programs.



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The Macfarlane Burnet Institute for Medical Research and Public Health Limited is a signatory to the Australian Council for International Development Code of Conduct. The Code requires members to meet high standards of corporate governance, public accountability and financial management. These financial statements have been prepared in accordance with the requirements set out in the ACFID code of conduct. More information about the ACFID Code of Conduct can be obtained from ACFID.

Independent Auditor's Report

To the members of Macfarlane Burnet Institute for Medical Research and Public Health Ltd

Opinion

We report on the **Summary Financial Statements** of Macfarlane Burnet Institute for Medical Research and Public Health Ltd (the **Group**) as at and for the year ended 31 December 2019. The Summary Financial Statements are derived from the audited financial report of the **Group** (the Audited Financial Report).

In our opinion, the accompanying Summary Financial Statements of Macfarlane Burnet Institute for Medical Research and Public Health Ltd are consistent, in all material respects, with the Audited Financial Report, in accordance with the basis of preparation described in the Note to the Summary Financial Statements.

The **Summary Financial Statements** comprise:

- Summary consolidated statement of financial position as at 31 December 2019;
- Summary consolidated statement comprehensive income;
- Burnet Institute International Development Activities Operating Statement; and
- Basis of preparation note.

The Summary Financial Statements are contained in the Annual report on pages 23 to 25 and page 22 has the Basis of preparation note.

The **Group** consists of Macfarlane Burnet Institute for Medical Research and Public Health Ltd (the Company) and the entities it controlled at the year-end or from time to time during the financial year.

Scope of the Summary Financial Statements

The Summary Financial Statements do not contain all the disclosures required by *Australian Accounting Standards – Reduced Disclosure Requirements* applied in the preparation of the Audited Financial Report. Reading the Summary Financial Statements and this Auditor's Report thereon, therefore, is not a substitute for reading the Audited Financial Report and our auditor's report thereon.

The Audited Financial Report and our auditor's report thereon

We expressed an unmodified audit opinion on the Audited Financial Report in our auditor's report dated 21 April 2020.

Emphasis of matter – basis of preparation and restriction on use

We draw attention to the note to the Summary Financial Statements, which describes the basis of preparation.

The Summary Financial Statements have been prepared to assist the Directors of Macfarlane Burnet Institute for Medical Research and Public Health Ltd for the purpose of complying with the presentation and disclosure requirements set out in the Australian Council for International Development (ACFID) Code of Conduct. As a result, the Summary Financial Statements and this Auditor's Report may not be suitable for another purpose. Our opinion is not modified in respect of this matter.



This Auditor's Report is intended solely for the Directors of Macfarlane Burnet Institute for Medical Research and Public Health Ltd for the purpose of complying with the presentation and disclosure requirements set out in the Australian Council for International Development (ACFID) Code of Conduct and should not be used by or distributed to parties other than the Directors of Macfarlane Burnet Institute for Medical Research and Public Health Ltd. We disclaim any assumption of responsibility for any reliance on this Auditor's Report, or on the Summary Financial Statements to which it relates, to any person other than the Directors of Macfarlane Burnet Institute for Medical Research and Public Health Ltd or for any other purpose than that for which it was prepared.

Other Information

Other information is financial and non-financial information in Macfarlane Burnet Institute for Medical Research and Public Health Ltd.'s annual reporting which is provided in addition to the Financial Report and the Auditor's Report. The Directors are responsible for the Other Information.

Our opinion on the Financial Report does not cover the Other Information and, accordingly, we do not express any form of assurance conclusion thereon.

In connection with our audit of the Financial Report, our responsibility is to read the Other Information. In doing so, we consider whether the Other Information is materially inconsistent with the Financial Report or our knowledge obtained in the audit, or otherwise appears to be materially misstated.

We are required to report if we conclude that there is a material misstatement of this Other Information, and based on the work we have performed on the Other Information that we obtained prior to the date of this Auditor's Report we have nothing to report.

Responsibility of the Directors for the Summary Financial Statements

The Directors are responsible for the preparation of the Summary Financial Statements in accordance with the basis of preparation described in the Note to the Summary Financial Statements, including their derivation from the Audited Financial Report of the Group as at and for the year ended 31 December 2019.

Auditor's responsibility for the Summary Financial Statements

Our responsibility is to express an opinion on whether the Summary Financial Statements are consistent, in all material respects, with the Audited Financial Report based on our procedures, which were conducted in accordance with *Australian Auditing Standard ASA 810 Engagements to Report on Summary Financial Statements*.

KPMG

Tower Two
Collins Square
727 Collins Street
Melbourne VIC 3008, Australia

Simon Dubois
Partner

Melbourne
30 July 2020

MEDICAL RESEARCH. PRACTICAL ACTION

Director and CEO:

Professor Brendan Crabb AC, BSc (Hons), PhD.

Deputy Directors:

Associate Professor David Anderson, BSc (Hons), PhD;

Professor Margaret Hellard AM, MBBS, PhD;

Professor James Beeson, MBBS, PhD.

Company Secretary:

Mr Peter Spiller, BBus, CPA.

Editorial Manager:

Tracy Parish.

Design:

Celsius Design.

Macfarlane Burnet Institute for Medical Research and Public Health Ltd (Burnet Institute) gratefully acknowledges funds received from the Victorian Government principally under its Operational Infrastructure Support Program, and from the Australian Government principally through the Department of Foreign Affairs and Trade, and the National Health and Medical Research Council.

Burnet places accountability at the forefront of our work and upholds the highest standard of practice. We are an active member of the Australian Council for International Development (ACFID), and are committed to full adherence to the ACFID Code of Conduct. Information about how to make a complaint on any breach of conduct can be found at www.acfid.asn.au.

We take all complaints seriously and will handle these in a timely and sensitive manner protecting the privacy of stakeholders. Complaints should be made by calling +61 3 9282 2111, emailing feedback@burnet.edu.au or in writing to EGM Public Affairs and External Relations, Burnet Institute, GPO Box 2284 Melbourne 3001.

People in local communities are at the centre of our work. Burnet has an organisational Safeguarding Code of Conduct with a strong commitment to child safeguarding and the prevention of Sexual Exploitation Harassment and Abuse to ensure the wellbeing of our local partners and community members are always our priority.

A full copy of the Financial Report is available on our website. Alternatively, for a printed copy please call +61 3 9282 2111. The Financial Report has been prepared in accordance with the requirements set out in the *Corporations Act, 2001* and the ACFID Code of Conduct.

Burnet Institute is a member of the Association of Australian Medical Research Institutes (AAMRI), the peak body representing Australia's pre-eminent independent medical research institutes. All members of AAMRI are internationally recognised as leaders in health and medical research.

Burnet is fully accredited by the Australian Government's Department of Foreign Affairs and Trade. This status represents the Australian Government's confidence in our organisational effectiveness, governance and development programs.

Auditors:

KPMG.

Partner:

Simon Dubois. Registered Company Auditor,
727 Collins Street, Melbourne VIC 3008.

Front cover image:

Lynton Crabb Photography

For more information about our work, visit burnet.edu.au or call +61 3 9282 2111.





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Overseas

We have offices or representatives in Papua New Guinea and Myanmar, and also contribute to activities in other Asian, Pacific and African countries.

For more information contact us at info@burnet.edu.au or call +61 3 9282 2111

ABN 49 007 349 984

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