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| **S No.** | **Point for Input** | **Input** |
| **1.** | Priority areas for Cancer Research In India | A. Region-specific common cancers (e.g. Gastric cancer in South India; Gall bladder cancer in Gangetic belt; oesophageal cancer in north and north-east)B. Translational research and clinical trials in common cancers |
| **2**. | Suggestions to make the Task Force more effective | A. For the full term of this Task Force, Members should not be PI or co-Investigators in new projects coming up for consideration in this committee. This will help avoid bias and ensure transparency.  |
| **3.** | Designing modes for creation of Institutional/ Infrastructure/ Fellowships/ Training programmes: to be created for increasing the effectiveness of Cancer Research | A. Will be worthwhile to stratify support at different levels of Institutions – e.g., Colleges, Universities, Institutions of National Importance (IISc etc), Regional Cancer Centers. B.C. |
| **4.** | Relationship and mechanism with International Cancer funding agencies: possibility for exploring joint funding programs | A. May be helpful if priority areas are identified. |
| **5.** | To achieve the balance between PI driven and generated program grants/ monitoring of the same | A. I guess both are important. PI driven projects especially important for youngsters – allows them to generate newer ideas. B.C. |