Promoting Diversity, Equity, and Inclusion in Biomedical Research
Promoting Diversity, Equity, and Inclusion in Biomedical Research: Impetus to Addressing Challenges in 2020 and Beyond

- Events of the past year have brought into sharp focus the ongoing reality of inequities in biomedical research, and the responsibility of all of us to address this.
- Shared commitment to making changes: we must not allow this pivotal moment to pass.
- A series of intense ICD meeting discussions:
  - June 18
  - July 30
  - August 6
  - August 13
  - September 3
Candid Input From Internal NIH Groups (Early September)

- NIH Black/African American Senior Investigators
  - Proposed >10 solutions largely devoted to intramural recruitment, retention and inclusion/safety
- 8 Changes for Racial Equity (8CRE, pronounced “Acre”)
  - Proposed 8 changes addressing diversity, equity and inclusion for NIH intramural and extramural workforce
- Anti-Harassment Steering Committee
  - Provided insight on racial equity efforts related to NIH anti-sexual harassment 2019 campaign
Themes of ICO Recommendations:

- Listen, learn, and articulate findings
- Engage communities
- Change culture
- Revitalize Policies, Transparency, & Oversight
- Grow Pipeline, Training, Mentoring, & the Professoriate
- Enhance Review & Funding Deliberations
- Boost Funding & Research Support
Main Areas of Discussion

- Research shows that diverse teams outperform homogenous teams. Scientists and trainees from diverse backgrounds bring different perspectives and creativity, to address complex scientific problems, thus:
  - We must ensure that biomedical research, and the administrative system that supports it, is devoid of hostility grounded in race, sex, and other federally protected characteristics.
  - We must commit to delineate elements perpetuating the status quo across the entire NIH workforce and the biomedical research community leading to a lack of inclusiveness and diversity.
Main Areas of Discussion

▪ Difficult to predict from where the next transformative ideas will emerge, **thus we must consider diversity of thought** both within NIH and extramural efforts:
  ▪ All ideas must be given an equal and fair review, without regard to current dogma, precedents, or who presents the ideas

▪ COVID-19 has made it painfully clear that **health disparities continue to contribute to morbidity and mortality in our nation.**
  ▪ Imperative to dig deeper into the fundamental causes of disparities to understand contributing factors and identify possible effective interventions
Approach:

*Create trans-NIH committees reporting to the NIH Steering Committee and reporting out to NIH Advisory Committee to the Director (ACD) to address 5 interrelated, but distinct, workstreams*

- Understanding stakeholder experiences through listening and learning
- New research on health disparities/inequities
- Internal workforce
- Extramural research workforce
- Talking and communicating with our internal external stakeholders
Overarching Goal
• Create cultures of inclusive excellence

Program Objectives:
• Faculty cohort model for hiring, multi-level mentoring, professional development
• Integrated, institution-wide systems to address bias, faculty equity, mentoring, and work/life issues
• Coordination and Evaluation Center (CEC): Independent program evaluation - faculty and institutional level

Estimated Funds Available: $241 M over 9 years