American Society for Nutrition (ASN) Comments in Response to the National Institutes of Health (NIH) Request for Information (RFI): Inviting Comments and Suggestions to Advance and Strengthen Racial Equity, Diversity, and Inclusion in Biomedical Research and Advance Health Disparities and Health Equity Research

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Name (First and Last)

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Name of Organization (if applicable)

American Society for Nutrition

Respondent Type

Professional society

The NIH seeks comments on any or all of, but not limited to, the following topics:

All Aspects of the Biomedical Workforce

• **Perception and reputation of NIH** as an organization, specifically as an employer (e.g., culture), with respect to support of workforce diversity and as an overall advocate for racial and gender equity in NIH-funded research

The American Society for Nutrition (ASN) appreciates the efforts that the National Institutes of Health (NIH) have made over time in broadening diversity among NIH leadership and staff. The NIH has made great strides toward increasing diversity and inclusiveness in many aspects of NIH, including both the intramural and extramural programs and NIH leadership. The creation of the National Institute on Minority Health and Health Disparities (NIMHD) in 2010 was an important step forward in the availability of grants and contracts for minority investigators. NIMHD and other Institutes/Centers (I/Cs) support research opportunities jointly and have active capacity building programs for limited research resource institutions and investigators. ASN recommends that the NIH increase efforts to promote the NIMHD and bring increased visibility to the important work and offerings of the NIMHD. NIH has provided many grantsmanship workshops and conducted outreach to those who have need for amplified assistance to compete successfully for NIH research support. ASN applauds these efforts and encourages their continuation. ASN encourages the NIH to continue to further increase the diversity among NIH staff, including I/C directors, senior staff, program officers and grant management specialists, increasing underrepresented groups, including women. Personnel data¹ from the Office of Intramural Research shows that in fiscal year 2020 intramural research program senior investigators and branch chiefs were primarily White (76% and 84%, respectively) and male

 $^{{\}color{red}^{1}\,\underline{https://oir.nih.gov/sourcebook/personnel/irp-demographics/intramural-research-program-personnel-demographics-end-fy20}$

(75% and 76.5%, respectively). Workforce inequities should receive early education emphasis, as noted in ASN's comments below. In addition, ASN encourages the NIH to provide targeted trainings and behavioral interventions to combat implicit/unconscious bias as suggested in the February 2021 NIH *Advisory Committee to the Director Working Group on Diversity Racism in Science Report*², especially for extramural staff such as review panel members. This is of particular importance as extramural staff are the gate keepers to NIH grant support and can improve diversity in NIH-funded research. ASN applauds the NIH UNITE initiative and the steps that the Center for Scientific Review (CSR) is already undertaking to address individual and systemic biases in peer review, including an interactive training module on bias.

• New or existing influence, partnerships, or collaborations NIH could leverage to enhance its outreach and presence with regards to workforce diversity (both the internal NIH workforce and the NIH-funded biomedical research enterprise); including engagement with academic institutions that have shown a historical commitment to educating students from underrepresented groups (especially Historically Black Colleges and Universities (HBCUs), Hispanic-Serving Institutions (HSIs), Tribal Colleges and Universities (TCUs), and other institutions), racial equity organizations, professional societies, or other federal agencies

There are many creative diversity-related partnerships and collaborations that enhance workforce diversity opportunities for HBCUs, HSIs, and TCUs and broaden training opportunities in biomedical research. ASN appreciates the work of the NIH Research Centers in Minority Institutions (RCMIs) to develop and strengthen the research infrastructure and the next generation of researchers from underrepresented populations. Given the turmoil academic institutions are facing because of the COVID-19 pandemic, traditionally limited research resource institutions and their investigators will need support more than ever. Therefore, ASN encourages the initiation of new joint capacity building programs among the NIH I/Cs with NIMHD and RCMIs. NIH should also provide more grant writing workshops targeting underrepresented investigators (at any academic level) and institutions that have had minimal or no NIH grant funding in the past. ASN encourages the NIH to collaborate across the federal government and with relevant professional societies and graduate programs to enhance its outreach and presence with regards to workforce diversity.

• Factors that present obstacles to training, mentoring, or career path (e.g., training environments) leading to underrepresentation of racial and ethnic groups (particularly Black/African Americans) in the biomedical research enterprise throughout the educational and career continuum and proposed solutions (novel or proven effective) to address them

Young investigators from underrepresented groups and/or at limited research resource institutions often do not have the opportunities to participate in research at the undergraduate level since many RO1s provide support for graduate students and post docs. Crafting more grant announcements in general and those targeting HBCUs, HSIs, and TCUs, in particular, to

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² National Institutes of Health. February 14, 2021. The Advisory Committee to the Director Working Group on Diversity Racism in Science Report. Accessed April 5, 2021. Microsoft Word - ACD WGD Racism in Science Report 20210214.docx (nih.gov)

encourage specific support for undergraduate participation in grant-based research could help to increase diversity among biomedical scientists of the future.

A key obstacle for success is obtaining individual extramural grants such as RO1s. Extramural review committees for NIH should receive targeted trainings and behavioral interventions to combat implicit/unconscious bias as suggested in the February 2021 NIH *Advisory Committee to the Director Working Group on Diversity Racism in Science Report*¹, as the gate keepers to NIH grant support. This is essential to continue to improve racial and gender equity in NIH-funded research.

Selection of diverse review committees is equally important. ASN appreciates the ongoing efforts of CSR to expand the pool of qualified reviewers and suggests that CSR utilize relevant professional societies to help identify new qualified scientists to assist with NIH peer review. ASN also suggests that the NIH establish and implement a set of criteria related to diversity, inclusion, and equity for extramural review committees to ensure reviewers from diverse backgrounds are adequately represented on each review committee.

ASN encourages the NIH's current efforts to simplify peer review criteria and decouple the science from the investigator/environment criteria which may introduce bias. ASN appreciates the revisions recently made to the NIH biosketch which give the applicant more opportunity to highlight previous successes and support and may provide NIH with additional mechanisms to determine the ability of the investigator to execute a study. The biosketch should continue to be periodically reviewed and revised as needed to determine the requirements that best showcase quality of a submitted proposal and investigator ability vs. which components may promote bias. The fiscal year 2021 pilot by NIH to anonymize peer review for the NIH Director's Transformative Research Award applications in an effort to increase the diversity of recipients will provide a useful case study for NIH to consider, as well as CSR's pilot of multi-stage, partial double-blinded review for tR01 applications. Anonymizing applications when possible allows reviewers to focus on the merit of the research and limit implicit/unconscious bias.

• Barriers inhibiting recruitment and hiring, promotion, retention and tenure, including the barriers scientists of underrepresented groups may face in gaining professional promotions, awards, and recognition for scientific or non-scientific contributions (e.g., mentoring, committees), and proven strategies or novel models to overcome and eliminate such barriers

The continued recruitment and strong support of a diverse and interdisciplinary biomedical research workforce throughout training and early independent career is needed. The NIH and its I/Cs have built many opportunities for young scientists to obtain training through practicums and seminars. However, awareness of these opportunities is not as broad spread as it could be. ASN encourages NIH to more fully engage with relevant professional societies and university communications centers to increase knowledge about these training opportunities. Linking the NIH Office of Communications with the communications departments of relevant professional societies and universities, particularly HBCUs, HSIs, and TCUs, has the potential to reach a broader, more diverse audience.

Policies and Partnerships

• Existing NIH policies, procedures, or practices that may perpetuate racial disparities/bias in application preparations/submissions, peer review, and funding, particularly for low resourced institutions, and proposed solutions to improve the NIH grant application process to consider diversity, inclusion, and equal opportunity to participate in research (e.g., access to application submission resources, changes to application submission instructions/guidance, interactions with and support from NIH staff during application process)

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 Best practices or proven approaches to build new or enhance existing partnerships and collaborations between investigators from research-intensive institutions and institutions that focus on under-resourced or underrepresented populations but have limited research resources

ASN values the request for ideas to further successful research at limited research resource institutions and suggests that NIH provide institution-based partnership grants to support underrepresented populations with limited research resources. If a proposal ranks well and represents an idea worthy of funding, NIH should pursue providing the investigator with mentors and partner facilities, as needed, to promote execution of a worthy proposal. NIH could establish a series of annual grants targeted specifically to provide resources and stimuli to the development of partnership applications between research-intensive institutions and academic institutions that have shown a historical commitment to educating students from underrepresented groups, including HBCUs, HSIs, and TCUs, and/or limited research resource institutions. These planning and development grants could only be awarded to those proposing to develop joint applications between traditional institutions and minority-based institutions for projects that are truly joint in nature, with faculty from both institutions participating in the proposal development and planned research effort. The partnership grants could require that co-principal investigator be from each institution. Such projects would be expected to support scientists at all levels in their careers,

including young scientists not only at the graduate but at the undergraduate level, to further the growth of young minority professionals, as well as midcareer and advanced career minority scientific leaders.

NIH should also offer more grant opportunities that promote diversity in health-related research. These types of grants should specifically support investigators from diverse backgrounds (at any academic level) that have had minimal or no NIH grant funding in the past.

Research Areas

• Significant research gaps or barriers to expanding and advancing the science of health disparities/health inequities research and proposed approaches to address them, particularly those beyond additional funding (although comments could include discussion of distribution or focus of resources)

As the Centers for Disease Control and Prevention (CDC) has identified, obesity and other nutrition-related chronic diseases disproportionately impact some racial and ethnic minority groups. Non-Hispanic Black adults (49.6%) had the highest age-adjusted prevalence of obesity, followed by Hispanic adults (44.8%), with non-Hispanic Asian adults accounting for 17.4%. American Indian and Alaska Native people are also disproportionately impacted by obesity. Obesity-related conditions are the leading causes of preventable death. Expanding and advancing health disparities/ inequities research for nutrition-related chronic diseases, and obesity in particular, reaches across the missions of all the NIH I/Cs. ASN encourages NIH to pursue instituting an effort across multiple I/Cs with dedicated research funding to investigate nutritional and other biomedical and molecular mechanisms contributing to obesity and obesity-related conditions and the related health disparities/inequities. Culturally relevant approaches or interventions are required along with biomedical and molecular approaches.

Further Ideas

• *Additional ideas* for bold, innovative initiatives, processes or data-driven approaches that could advance the diversity, inclusion, and equity of the biomedical research workforce and/or promote research on health disparities

NIH should conduct innovative outreach to high school and undergraduate students, particularly students from underrepresented groups, to help encourage interest in the biomedical research workforce. NIH should also consider providing opportunities specific for high school and undergraduate students to encourage their interest.