



# NIH UNITE Initiative

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# The NIH UNITE Initiative



- **Events of the past year have brought into sharp relief the ongoing reality of racial injustice in our country, and the responsibility of all of us to address this issue**
- **A series of intense Institute and Center Director meeting discussions were held to identify initial issues**
- **Two self-assembled affinity groups at NIH (8CRE, AA/B Scientists) and the Anti-Harassment SC met with NIH leadership for candid discussions that informed next steps**
- **We have arrived at a shared commitment to address structural racism: we must not allow this pivotal moment to pass**

# The NIH UNITE Initiative



## Initial Issues Identified:

- **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**
- **In this new initiative, we are committed to delineate elements that may perpetuate structural racism in biomedical research both within NIH and the extramural community leading to a lack of personnel inclusiveness, equity, and diversity**


# The NIH UNITE Initiative



## Initial Issues Identified:

- **All ideas must be given an equal and fair review, without regard to current dogma, precedents, or who presents the ideas**
- **As COVID-19 has made painfully clear, health disparities and inequities continue to contribute to morbidity and mortality in our nation, making it essential to redress the fundamental causes of these disparities/inequities and identify research programs that could identify effective interventions**

# The NIH UNITE Initiative

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- U** Understanding stakeholder experiences through listening and learning
  - N** New research on health disparities/minority health/health equity
  - I** Improving the NIH Culture and Structure for Equity, Inclusion, and Excellence
  - T** Transparency, communication, and accountability with our internal and external stakeholders
  - E** Extramural Research Ecosystem: Changing Policy, Culture, and Structure to Promote Workforce Diversity

Understanding stakeholder experiences through listening and learning



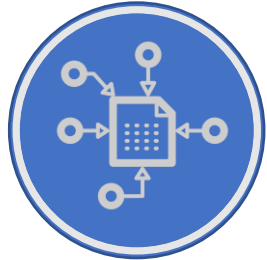
## CHARGE

**To perform a broad, systematic self-evaluation to delineate elements that perpetuate structural racism and lead to a lack of diversity, equity, and inclusion within the NIH and the external scientific community**

# Understanding stakeholder experiences through listening and learning



## Current Efforts and Next Steps



### ➤ Refine and Expand Qualitative Data Collection Plan

- Finalize Qualitative Data Collection Plan – [March 2021](#)
- Conduct comprehensive assessment across stakeholders through listening sessions, focus groups, town hall(s), anonymous submission sites, etc. – [Expected Completion: Summer 2021](#)



### ➤ Solicit Information from ICs

- Collect activities, materials, and other data from ICs on relevant past, ongoing, or planned activities – [March 2021](#)
- Compile and analyze to inform UNITE activities – [Expected Completion: Spring 2021](#)



### ➤ Publish a Request for Information

- Seek input on practical and effective ways to improve the racial and ethnic inclusivity and diversity of research-centered environments and workforce – [Published 3/1/21](#)
- Summarize results and share publicly – [Expected Completion: Spring 2021](#)

# New Research on Health Disparities/Minority Health/Health Equity



## CHARGE

**To address long-standing health disparities and issues related to Minority Health to advance health equity (HD/MH/HE) in the United States by ensuring NIH-wide transparency, accountability and sustainability in marshaling resources for HD/MH/HE research**



# New Research on Health Disparities/Minority Health/Health Equity

## Foundational Efforts



- **Phase 1 – Proposed Common Fund Initiative: “Innovations and Transformation in HD/HE Research”** (Projected FOA Release: March 2021)
  - **FOA 1:** solicit transformative and novel investigator-initiated applications with potential impact focused on elimination of health disparities broadly and in high priority areas.
  - **FOA 2:** increase the competitiveness of investigators and the research base at Minority Serving Institutions (MSIs).



- **Examine portfolios with NIH-wide stakeholders** (Targeted Completion: April 2021)
  - Meet with key NIH stakeholders to focus proposed Common Fund Initiative, discuss intersectionality in HD/MH/HE research, and highlight the importance of cultural competence and community engagement in HD/MH/HE research

# New Research on Health Disparities/Minority Health/Health Equity



## Current Efforts and Next Steps



- **Conduct an accurate analysis** of current investments in HD/MH/HE research with key intramural and extramural stakeholders
  - **Develop and test budget and portfolio tracking** via AI data mining (Targeted Completion: December 2021)
  - **Develop Analytic Budget Tool (HD/MH/HE Resource Center Dashboard)** for use across NIH (intramural and extramural) to increase funding transparency by accurately reporting HD/MH/HE research funding (Targeted Completion: FY23)



- **Phase 2 – Proposed Common Fund Initiative on Interventional Research in HD FY23** (Immediate and Ongoing: Proposed FOA Release: Winter 2022)
  - **Create initiative on translation of multi-level interventions to reduce HD** through strategic planning process and engagement with scientific community
  - **Common Fund FOA:** focused on driving innovation and transformation in reducing health disparities and enhancing health equity across the country

# **Improving NIH Culture & Structure for Equity, Inclusion, & Excellence**



## **CHARGE**

**To change the NIH organizational culture and structure to promote diversity, equity, and inclusion throughout the NIH workforce**

# Improving NIH Culture & Structure for Equity, Inclusion, & Excellence

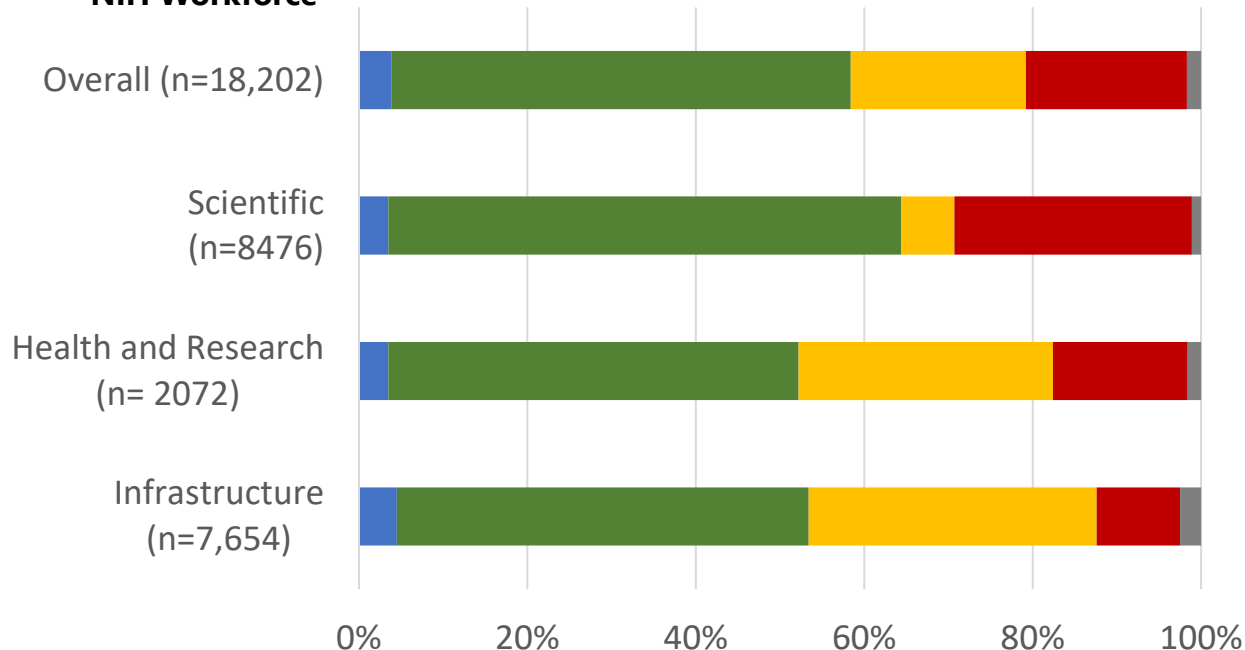


## Foundational Efforts



- Provide granular data on NIH workforce based on position and supervisory status. (Immediate: 2020 data will be analyzed Spring 2021 and shared publicly Summer 2021)

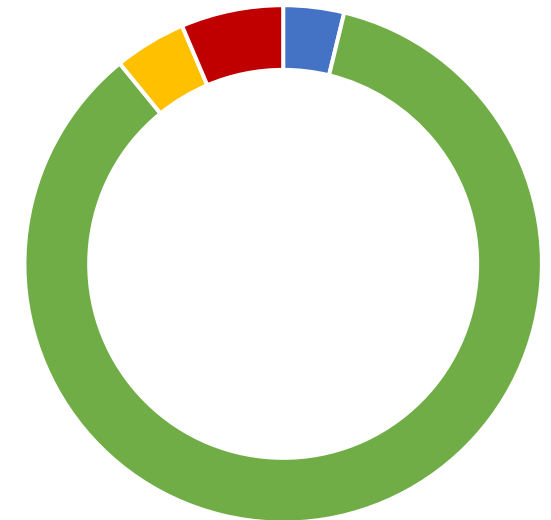
**NIH Workforce**



**Hispanic or Latina/o/x (any race)**  
**White (alone)**  
**Black or African American (alone)**  
**Asian (alone)**  
 American Indian, Alaska Native, Native Hawaiian, Pacific Islander, Two or More Races

**NIH Senior Leadership (n=157)**

I/C Director, Deputy Dir, Scientific Dir, Clinical Dir, Executive Officer



**Scientific Workforce** leads or has oversight over research; e.g., investigator, staff scientist, health science administrator

**Health and Research Workforce** supports research; e.g., nurse, lab technician

**Infrastructure Workforce** undergirds the scientific enterprise but not “scientific” or “health and research”; e.g., program analyst, grants management, IT

# Improving NIH Culture & Structure for Equity, Inclusion, & Excellence

## Current Efforts and Next Steps



- Expand NIH policies to more explicitly acknowledge racial discrimination. Establish a campaign to make NIH staff aware of options for reporting racist actions. (Revised policies finalized: Spring 2021; published in NIH manual chapter: Summer 2021)



- Expand recruitment efforts for NIH investigators, including those with tenure, from underrepresented groups. (Fall 2021)



- Establish anti-racism steering committee and coordinate actions with an anti-racism plan from each institute. (Spring 2021)



- Work with NIH senior leadership to appoint a diversity, equity, and inclusion officer in every IC, with direct access to the IC Director, to track, advance, and coordinate IC-specific diversity, equity, and inclusion efforts and actively participate in NIH-wide diversity efforts. (2021, on a rolling basis)

**Transparency, communication, and  
accountability with our internal and external  
stakeholders**



## **CHARGE**

**To ensure Transparency, Accountability, and Sustainability  
of all UNITE efforts amongst NIH Internal and External  
Stakeholders.**

# Transparency, communication, and accountability with our internal and external stakeholders

## Current Efforts and Next Steps



- **Publicly commit to identifying and correcting any NIH policies or practices that may have helped to perpetuate structural racism (w/ OCPL) – February/March 2021**

- **Webpage**

- Central portal for anti-racism policies and efforts
- Acknowledge internal, external workforce demographics and funding metrics

- **External Facing Awareness Campaign**

- Editorials in scientific journal, mainstream media, townhall style meetings

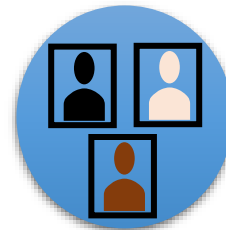


- **Launch Internal Awareness Campaign – March 2021**

- “Racism, Discrimination, and Harassment don’t work here!”
- Implement and communicate policy changes promoting anti-racism (with Committees I and U)

- **Diversify the portraiture around the NIH – Spring/Summer 2021**

- Digital campaign of UNITE: “Together We’re Stronger”
- Additional portraits and exhibits reflecting our goals for recruitment and retention
  - starting with Buildings 1, 10, 31



## Extramural Research Ecosystem



## CHARGE

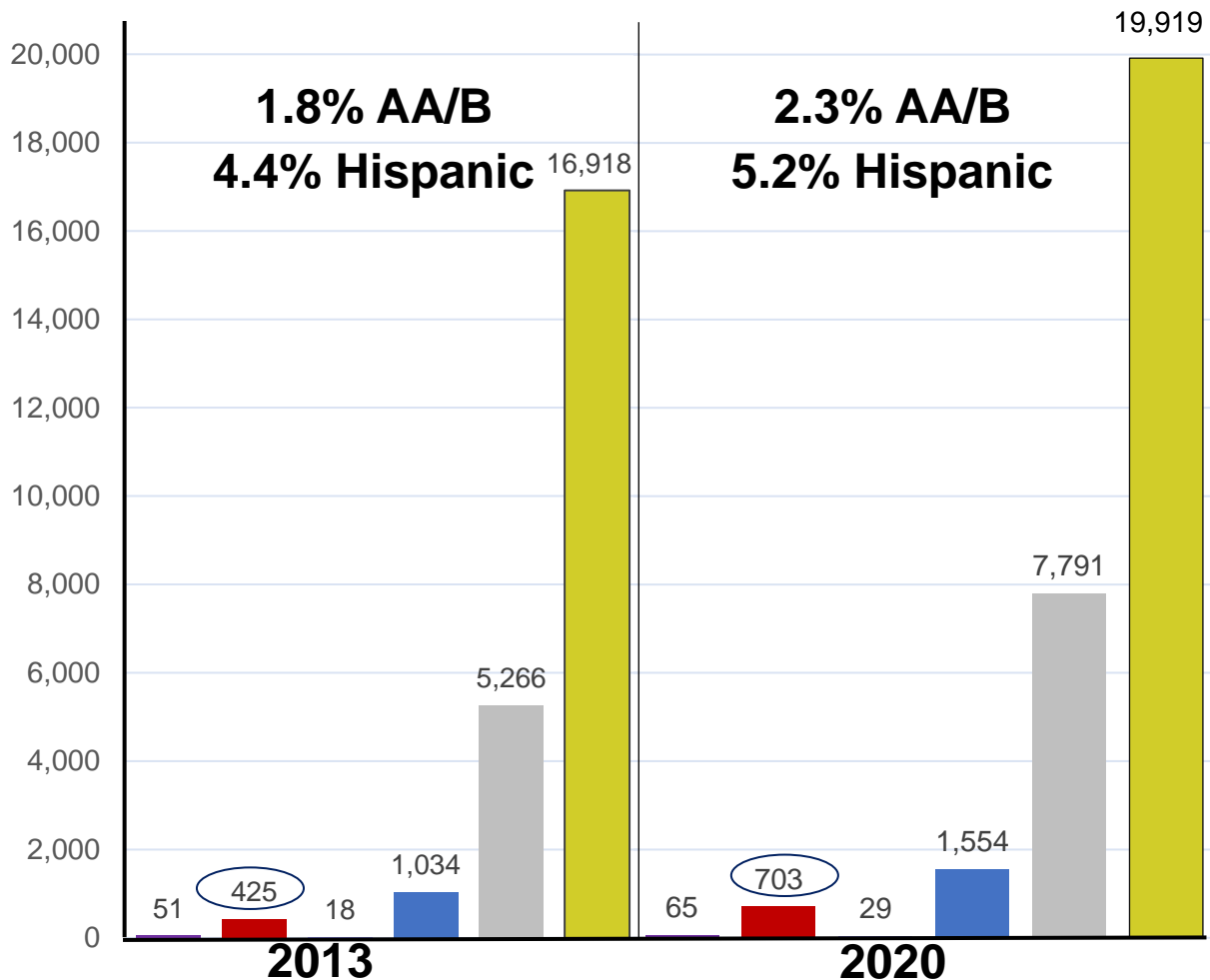
**To perform a broad systematic evaluation of NIH extramural policies and processes to identify and change practices and structures that perpetuate a lack of inclusivity and diversity within the extramural research ecosystem**

*Includes developing strategies to address funding disparities and increase applications that would support individuals from under-represented groups*

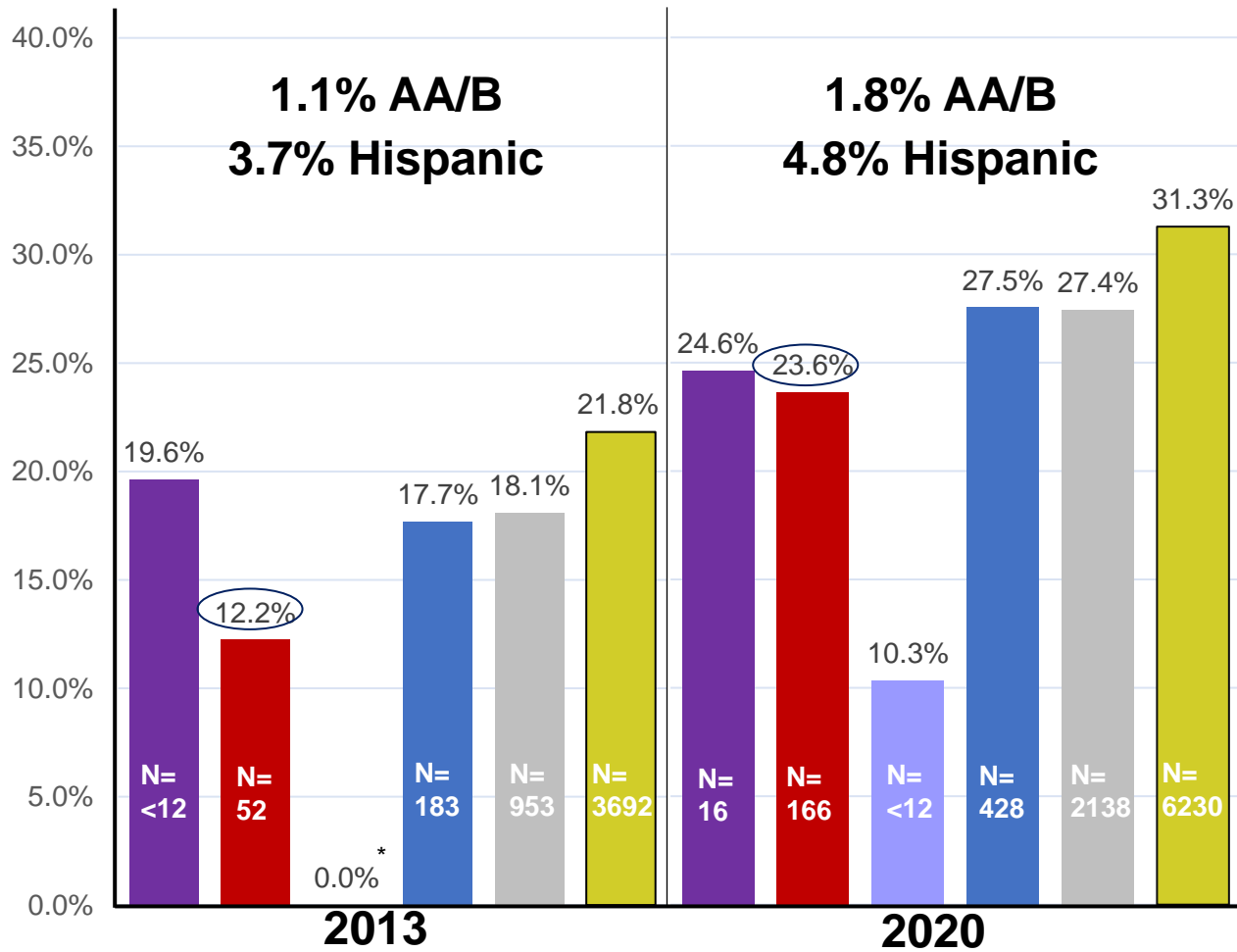


# R01eq Applicants and Funding Rates Type 1 and Type 2: FY2013 and FY2020 (by Race/Ethnicity)

## Number of Applicants



## Funding Rates



■ AI/AN 
 ■ AA/B 
 ■ NH/PI 
 ■ Hispanic 
 ■ Asian 
 ■ White

\* No Awarded Applicants

# Extramural Research Ecosystem

## Current Efforts and Next Steps



➤ **Stakeholder Engagement** – With U committee

- Publish RFI - [Spring 2021](#)
- Listening sessions - [Spring/Summer 2021](#)



➤ **Report Grantee Demographics in NIH Databook** – With OER, U, and T committees

- Expand existing extramural grant funding data – [Spring/Summer 2021](#)



➤ **Develop Possible Programmatic Proposals** ([Spring 2021](#)), e.g.,:

- **Career Pathways** – Strengthen NIH's centralized education, outreach and evaluation efforts for existing training and diversity programs
- **Institutional Culture** – Provide support for academic institutions to conduct in-depth climate assessments and self-studies and to act on the results
- **NIH Processes** – Assess interactions between NIH staff and extramural community to identify barriers and bias to inform new programs and enhance equity in NIH processes
- **Minority-Serving Institutions** – Expand technical assistance and funding opportunities for HBCUs and MSIs

# Summary of Initial UNITE Recommendations



- **Publicly commit to identifying and correcting any NIH policies or practices that may have helped to perpetuate structural racism**
- **Continue to aggressively implement approaches to address the “Ginther Gap” and enhance portfolio diversity**
- **Launch a multi-phased, -tiered, and -integrated Common Fund Initiative focused on transformative health disparities research initiatives to reduce health disparities/ inequities**
- **Ensure a robust NIH Enterprise-wide commitment to support the NIMHD FOA focused on the effects of structural racism and discrimination on health disparities/ inequities; encourage funding levels that are commensurate with overall IC resources**
- **Develop a sustainable process to systematically gather and make public the demographics of our internal and external workforce**

# Summary of Initial UNITE Recommendations



- **Implement policy changes that promote anti-racism and remove barriers to professional growth for staff from diverse backgrounds, including underrepresented groups**
- **Appoint a diversity, equity, and inclusion officer in every IC, with direct access to the IC Director, to track, advance, and coordinate IC-specific equity, diversity, and inclusion efforts and actively participate in NIH-wide diversity efforts**
- **Expand the Distinguished Scholars Program to Senior Investigators hired with tenure and enhance recruitment of researchers from underrepresented groups as candidates for open IRP investigator positions**

# Acknowledgement



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*“To those individuals in the biomedical research enterprise who have endured disadvantages due to structural racism, I am truly sorry. NIH is committed to instituting new ways to support diversity, equity, and inclusion, and identifying and dismantling any policies and practices at our own agency that may harm our workforce and our science.”*

— Francis S. Collins, M.D., Ph.D., NIH Director

”

<https://www.nih.gov/ending-structural-racism>

# Action



## Request for Information (RFI): Inviting Comments and Suggestions to Advance and Strengthen Racial Equity, Diversity, and Inclusion in the Biomedical Research Workforce and Advance Health Disparities and Health Equity Research

**Notice Number:**  
NOT-OD-21-066

### Key Dates

**Release Date:** March 1, 2021

**Response Date:** April 09, 2021

### Related Announcements

None

### Issued by

Office of The Director, National Institutes of Health (OD)

### Purpose

This Notice is a Request for Information (RFI) inviting feedback on the approaches NIH can take to advance racial equity, diversity, and inclusion within all facets of the biomedical research workforce, and expand research to eliminate or lessen health disparities and inequities.

Open 3/1/21 – 4/23/21 – More than 1000 responses; Soon to be followed by listening sessions

# Action



## NIH Common Fund Transformative Research to Address Health Disparities and Advance Health Equity – Committed up to \$24M

Two FOAs released 3/26/21:

- 1) RFA-RM-21-021 Transformative Research to Address Health Disparities and Advance Health Equity (U01 Clinical Trial Allowed) - <https://grants.nih.gov/grants/guide/rfa-files/RFA-RM-21-021.html>
- 2) RFA-RM-21-022 Transformative Research to Address Health Disparities and Advance Health Equity at Minority Serving Institutions (U01 Clinical Trial Allowed) - <https://grants.nih.gov/grants/guide/rfa-files/RFA-RM-21-022.html>

# Action



Funding Opportunity Title	Understanding and Addressing the Impact of Structural Racism and Discrimination on Minority Health and Health Disparities (R01 Clinical Trial Optional)
Activity Code	R01 Research Project Grant
Announcement Type	New
Related Notices	None
Funding Opportunity Announcement (FOA) Number	RFA-MD-21-004
Companion Funding Opportunity	None
Number of Applications	See <a href="#">Section III. 3. Additional Information on Eligibility.</a>

**With the commitment of up to \$30.8 M by 25 ICOs:**

- **Letters of intent due 7/20/21**
- **Applications due 8/24/21**

<https://grants.nih.gov/grants/guide/rfa-files/RFA-MD-21-004.html>



# Action



## Notice of Special Interest (NOSI): Understanding and Addressing the Impact of Structural Racism and Discrimination on Biomedical Career Progression and the Biomedical Research Enterprise

**Notice Number:**  
NOT-GM-21-033

### Key Dates

<b>Release Date:</b>	March 11, 2021
<b>First Available Due Date:</b>	May 17, 2021
<b>Expiration Date:</b>	October 04, 2022

### Related Announcements

[PAR-19-295](#) - Research to Understand and Inform Interventions that Promote the Research Careers of Individuals in the Biomedical Sciences (R01 - Clinical Trial Not Allowed)

[PAR-19-367](#) - Maximizing Investigators' Research Award (R35 - Clinical Trial Optional)

[PAR-20-117](#) - Maximizing Investigators' Research Award (MIRA) for Early Stage Investigators (R35 - Clinical Trial Optional)

### Issued by

National Institute of General Medical Sciences ([NIGMS](#))

<https://grants.nih.gov/grants/guide/notice-files/NOT-GM-21-033.html>

# Action – BRAIN FOA

First NIH FOA using Plan to Enhance Diverse Perspectives as a consideration for scoring



## Department of Health and Human Services

### Part 1. Overview Information

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**Participating Organization(s)**

National Institutes of Health (NIH)

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**Components of Participating Organizations**

National Institute of Mental Health (NIMH)

National Eye Institute (NEI)

National Institute on Aging (NIA)

National Institute on Alcohol Abuse and Alcoholism (NIAAA)

National Institute of Biomedical Imaging and Bioengineering (NIBIB)

Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD)

National Institute on Deafness and Other Communication Disorders (NIDCD)

National Institute on Drug Abuse (NIDA)

National Institute of Neurological Disorders and Stroke (NINDS)

National Center for Complementary and Integrative Health (NCCIH)

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**Funding Opportunity Title**

<https://grants.nih.gov/grants/guide/rsa-files/RFA-MH-21-180.html>

**BRAIN Initiative: Reagent Resources for Brain Cell Type-Specific Access and Manipulation to Broaden Distribution of Enabling Technologies for Neuroscience (U24 Clinical Trial Not Allowed)**

# Action – NIH Data by Race/Ethnicity, Disability Status



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Topic:  Funding Mechanism:  Fiscal Year:

Admin Institute/Center:  Activity:

Portfolio:  Variable:

2 records found.

Report Title	Topic	Variable	Start Year	End Year	Format
▶ Research Grant Investigators by Mechanism, Gender, Race, Ethnicity, and Disability Status, FY2016-FY2020	Investigators, Funded Investigators, Funding Rates Investigators, Gender Investigators, Race/Ethnicity	Disability Status FY Gender IC Mechanism Race/Ethnicity	2016	2020	VIEW REPORT

[https://report.nih.gov/sites/report/files/docs/NIH Principal Investigators by Gender Race Ethnicity and Disability 2016-2020 02 23 2021 PDF.pdf](https://report.nih.gov/sites/report/files/docs/NIH_Principal_Investigators_by_Gender_Race_Ethnicity_and_Disability_2016-2020_02_23_2021_PDF.pdf)

# Action

## *Anti-Racism Steering Committee*

### ARSC Membership

- Open to ALL members of the NIH workforce – current membership 460+

### Goal

- To redress issues regarding policies and procedures that lead to wrongs
- The ARSC will not be addressing individual cases – that's the role of EDI

[NIHANTIR-STEERINGCMTE@mail.nih.gov](mailto:NIHANTIR-STEERINGCMTE@mail.nih.gov)





*Injustice anywhere is a threat to justice  
everywhere*

*Martin Luther King, Jr*

# The NIH UNITE Initiative

## UNITE Co-Chairs:

- Marie A. Bernard, National Institute on Aging/NIH Office of the Director
- Alfred Johnson, NIH Office of the Director/Office of Management
- Lawrence Tabak, NIH Office of the Director

## UNITE Program Manager

- Victoria Rucker, Center for Information Technology/NIH Office of the Director

## UNITE Program Support

- Jordan Gladman, NIH Office of the Director
- Melissa Espinoza, National Institute on Aging

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Dexter Collins (FIC)  
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Brian Trent (NEI)  
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+Stephanie Land (NCI)  
+Vanessa Marshall (NIMHD)  
+Kamilah Rashid (IMOD/OD)

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Anna María Nápoles (NIMHD)  
Robert Rivers (NIDDK)  
Gwen Bishop (NIDCD)  
Vence Bonham (NHGRI)  
Juanita Chinn (NICHD)  
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Asha Storm (NIBIB)  
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+Melissa Espinoza (NIA)

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Alfred Johnson (OM/OD)  
Talin Barnes (NIEHS)  
Gwyn Collins (NCI)  
Charles Egwuagu (NEI)  
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Camille Hoover (NIDDK)  
Shawn Lewis (NINR)  
Marguerite Matthews (NINDS)  
Shaun Sims (NIBIB)  
+Melissa Espinoza (NIA)

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John Burklow (OCPL/OD)  
Sadhana Jackson (NINDS, NCI)  
Mohammed Aiyegbo (NIAID)  
Albert Avila (NIDA)  
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Committee Co-Chairs  
+Staff Leads

