NIH UNITE

December 9, 2022

Alfred C. Johnson, PhD

The NIH UNITE Initiative to Strengthen Diversity, Equity, and Inclusion: Together, We're Stronger.

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UNITE Overview

UNITE is a working group that reports to the NIH Steering Committee and acts as a think tank to promote equity, generate bold ideas, and catalyze new actions. Collectively, it identifies and addresses any structural racism that may exist within the NIH and throughout the biomedical and behavioral workforce.

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UNITE Progress Report

UNITE
PROGRESS
REPORT

2021–2022

Purpose:

- The UNITE Progress Report describes NIH's actions to identify and address structural racism that may exist within NIH and in the biomedical and behavioral research enterprise.

- The report (FY21–22) is the first UNITE progress report. It was developed in collaboration with UNITE co-chairs, committees, and stakeholders.

- The report focuses on health disparities and minority health research, the internal NIH workforce, and the external research workforce—topics that intersect and enable greater transparency, accountability, and communication across NIH and the biomedical and behavioral community.

Milestones and Accomplishments

- As of summer 2022, UNITE leadership and committees developed their Challenge Statements and Goals, which indicated "focus areas" for action.

- The report describes select milestones and accomplishments associated with each focus area during FY21–22.

FOCUS AREA 1 | **Elevating** health disparities and minority health research across institutes and centers	**FOCUS AREA 2** | **Promoting** equity in the NIH-supported biomedical research ecosystem
FOCUS AREA 3 | **Promoting** equity in the internal NIH workforce	**FOCUS AREA 4** | **Improving** the accuracy and transparency of racial and ethnic equity data

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Genesis of UNITE

- UNITE was publicly launched at [a special meeting of the Advisory Committee to the Director](#) on February 26, 2021, with a commitment from former NIH Director Francis Collins, M.D., Ph.D., to identify and address structural racism in biomedical and behavioral science.

- The groundwork for UNITE began with a series of pivotal internal conversations around structural racism's role in health disparities and the biomedical and behavioral research enterprise. UNITE was built on the foundation of the activities across NIH within its Institutes and Centers, and NIH Offices involved in equity and inclusion, including:

  - [Office of Equity, Diversity, and Inclusion (EDI)](#)
  - [Office of Human Resources (OHR)](#)
  - [Civil Program](#)
  - [Chief Officer for Scientific Workforce Diversity Office (COSWD)](#)
  - [Office of Extramural Research (OER)](#)
  - [Office of Intramural Research (OIR)](#)

2020

Summer 2020
NIH leadership and IC Directors meet with internal stakeholders to deliberate on societal changes highlighting the impact of racial and ethnic inequities—disproportionate morbidity and mortality from COVID-19 and racially motivated violence

October 2020
Internal launch of UNITE

2021

February 2021
Special meeting of the Advisory Committee to the Director to externally announce UNITE, and Dr. Collins publicly acknowledges structural racism in the biomedical and behavioral research enterprise

March 2021
March 1, 2021, UNITE website launched, including Dr. Collins' statement acknowledging structural racism. RFI released soliciting input from the biomedical and behavioral research community

FOAs: Common Fund Transformative Research to Address Health Disparities and Advance Health Equity

FOA: NIMHD Effects of Structural Racism and Discrimination on Health Disparities and Inequities

Establishment of an NIH-wide Anti-Racism Steering Committee

April 2021
UNITE RFI closes

August 2021
FOA: NIH-wide BRAIN Initiative Plan for Enhancing Diverse Perspectives

October 2021
Common Fund initiative makes 11 awards (RFA-RM-21-021, RFA-RM-21-022)

FIRST initiative funds six cohorts/seven institutions (RFA-RM-20-022)

November 2021
The Power of an Inclusive Workplace Recognition Project unveiled

December 2021
UNITE Data Dashboard goes live

2022

December 2021– January 2022
UNITE Listening Sessions

January 2022
Launch of UNITE Co-Chairs' Corner

April 2022
NIH ICOs submit Racial and Ethnic Equity Plans (REEPs)

Expansion of Science Education Partnership Awards Program (SEPA)

May 2022
NIGMS Council approves three concepts generated by UNITE: Institutional Climate Assessment and DEI Action Plan Development Grants, Excellence in DEIA Investigator's Grants, and Instrumentation Grant Program for Minority-Serving Institutions

NIMHD Council approves concept generated by UNITE: Institutional Research Capacity Building Needs Assessment and Action Plan Development Grants

Planned Winter 2022/2023
Launch of DEIA Institutional Prize competition

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Structure

UNITE's five committees have coordinated objectives for tackling the challenge of racial and ethnic equity in science. Each committee has a unique mission, while working collaboratively to develop methods that enhance equity across the scientific enterprise.

U COMMITTEE	**N** COMMITTEE	**I** COMMITTEE	**T** COMMITTEE	**E** COMMITTEE
Understand stakeholder experiences through listening and learning	Facilitate and develop new research on HD/MH	Improve the NIH culture and structure for equity, inclusion, and excellence	Foster transparency, communication, and accountability with internal and external stakeholders	Change policy, culture, and structure to promote diversity and inclusion in the extramural research ecosystem

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Challenge Statement and Goals

REPORT FOCUS AREA	CHALLENGE	GOAL
1 ELEVATING health disparities and minority health research across ICs	Minority Health (MH) and Health Disparities (HD) research and related disciplines and methodologies remain understudied in many areas and research prioritization and expenditures are insufficient to address existing gaps.	Encourage and provide tools to support ICs in prioritizing MH and HD research to address existing gaps, including joining relevant funding opportunity announcements (FOAs) and optimizing funding levels for MH and HD research over the next 5 years.
2 PROMOTING equity in the NIH-supported biomedical research ecosystem	Across the NIH extramural community, funding success rates for grant applications supporting scientists from underrepresented racial and ethnic groups have been shown to be lower compared with their non-Hispanic white peers.	Reduce disparities in NIH funding rates such that race and ethnicity are not predictive of or correlated with funding success. Ensure that funding success rates for institutions that have shown a historical commitment to educating students from underrepresented groups are on par with that of other institutions.

UNITE recognizes the challenges associated with addressing racial and ethnic equity in science. To create meaningful objectives, UNITE identified concrete challenges and goals. The report discusses progress toward each goal as a separate focus area.

FOCUS AREA 1 | **Elevating** health disparities and minority health research across institutes and centers
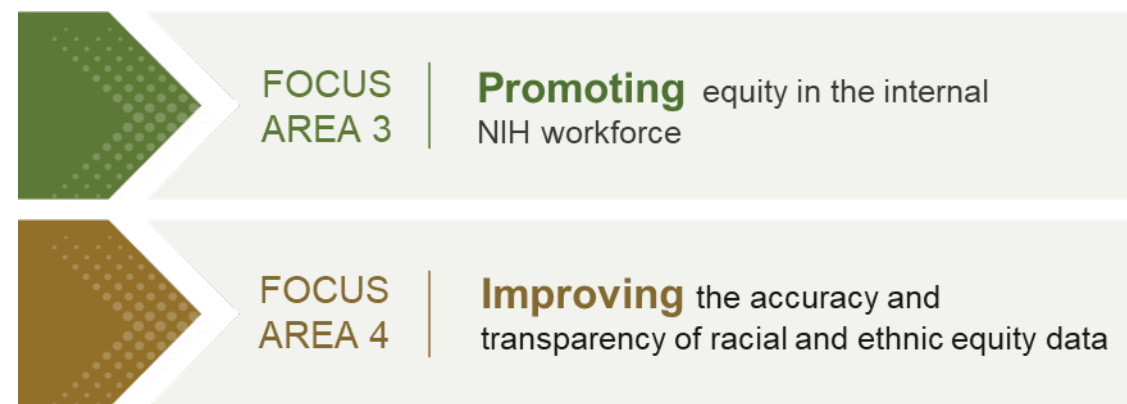
FOCUS AREA 2 | **Promoting** equity in the NIH-supported biomedical research ecosystem

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Challenge Statement and Goals

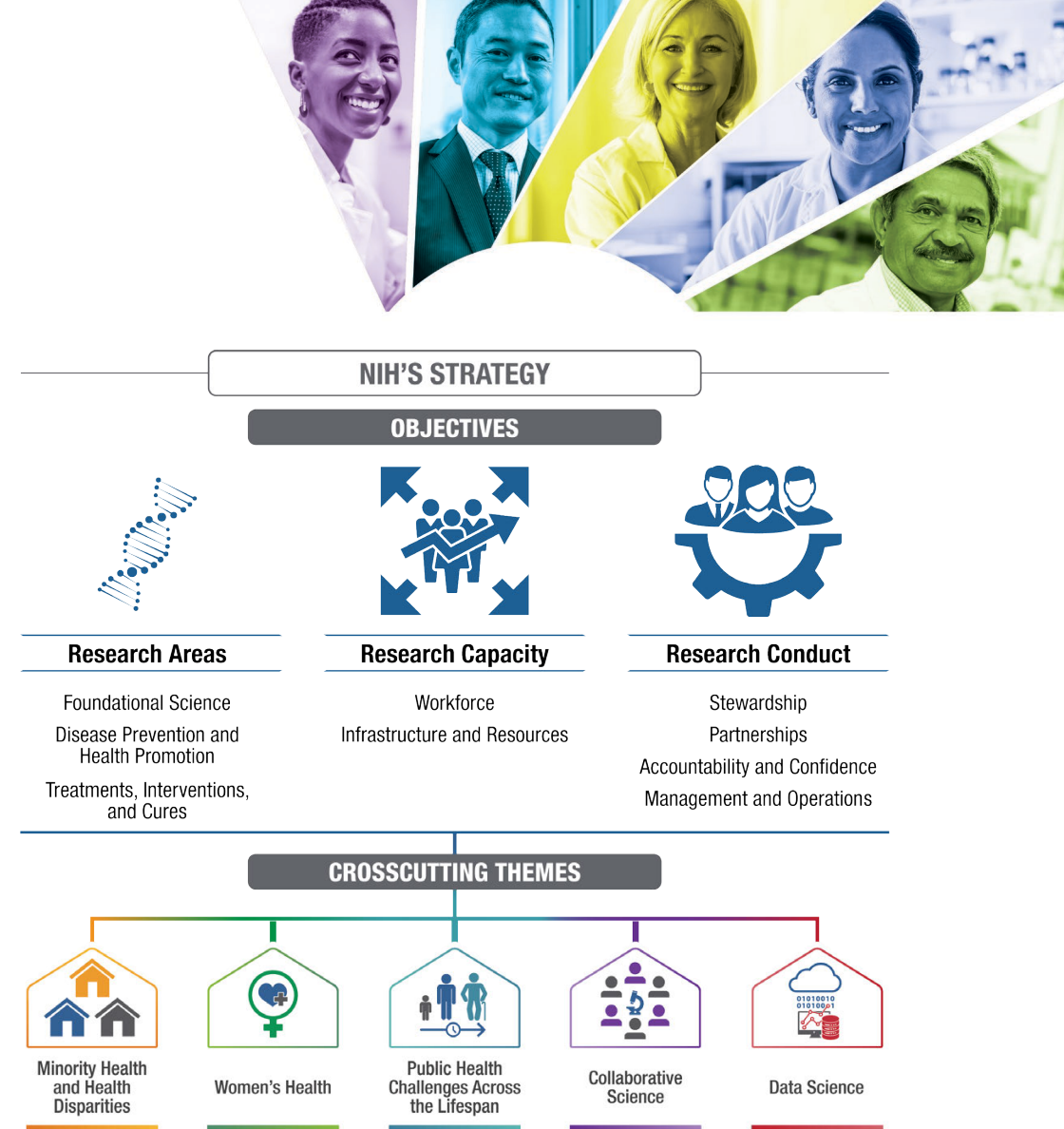| REPORT FOCUS AREA	CHALLENGE	GOAL
3 PROMOTING equity in the internal NIH workforce	A perception of barriers to employment opportunities and successful promotion into leadership positions persists for underrepresented populations across the internal NIH workforce. These perceptions may negatively affect the work environment and organizational culture and risk impacting recruitment, hiring, salary, benefits, awards, recognition, promotion, and long-term staff retention.	Promote and sustain an equitable work environment and organizational culture by ensuring equal opportunity for career success for all employees, including those from underrepresented populations across the internal NIH workforce. Ensure that race and ethnicity do not predict staff positions or grade levels at NIH.
4 IMPROVING the accuracy and transparency of racial and ethnic equity data	A lack of accurate, comprehensive, and easily accessible data hampers NIH's efforts to identify and address any structural racism and discrimination that may exist within NIH and the greater scientific community.	Improve the accuracy and transparency of racial and ethnic equity data, and ensure that aggregate data collected is broadly available and easily accessible to internal and/or external stakeholders.

UNITE recognizes the challenges associated with addressing racial and ethnic equity in science. To create meaningful objectives, UNITE identified concrete challenges and goals. The report discusses progress toward each goal as a separate focus area.

FOCUS AREA 3 | **Promoting** equity in the internal NIH workforce

FOCUS AREA 4 | **Improving** the accuracy and transparency of racial and ethnic equity data

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UNITE and the NIH Ecosystem

UNITE operates in tandem with other DEIA-related entities within and outside of NIH. To ensure high levels of collaboration and minimize redundancies, UNITE co-chairs and committees aligned their goals with the fundamental tenets of the NIH-Wide Strategic Plan for 2021–2025 and the NIH Minority Health and Health Disparities Strategic Plan 2021–2025.

The NIH-Wide DEIA Strategic Plan for 2022–2026, slated for release in fall 2022, incorporates UNITE and its tenets within the wider DEIA umbrella.

NIH'S STRATEGY

OBJECTIVES

Research Areas	Research Capacity	Research Conduct
Foundational Science	Workforce	Stewardship
Disease Prevention and Health Promotion	Infrastructure and Resources	Partnerships
Treatments, Interventions, and Cures		Accountability and Confidence
		Management and Operations

CROSSCUTTING THEMES

Minority Health and Health Disparities — Women's Health — Public Health Challenges Across the Lifespan — Collaborative Science — Data Science

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Focus Area 1: Elevating Health Disparities and Minority Health Research Across Institutes and Centers

- **Focus Area 1.** Ensures that NIH Institutes and Centers prioritize health disparities and minority health research across clinical trials and human subject research.

- **Example of Progress.** UNITE helped facilitate the development of the Common Fund's Transformative Research to Address Health Disparities and Advance Health Equity initiative and the Community Partnerships to Advance Science for Society (ComPASS) Initiative.

- **What's Next.** UNITE will continue enhancing its understanding of NIH investments in health disparities research in partnership with NIH stakeholders and fostering the design and implementation of new initiatives to enhance HD/MH research.

Proposed Structure of the FY23 ComPASS Initiative

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10
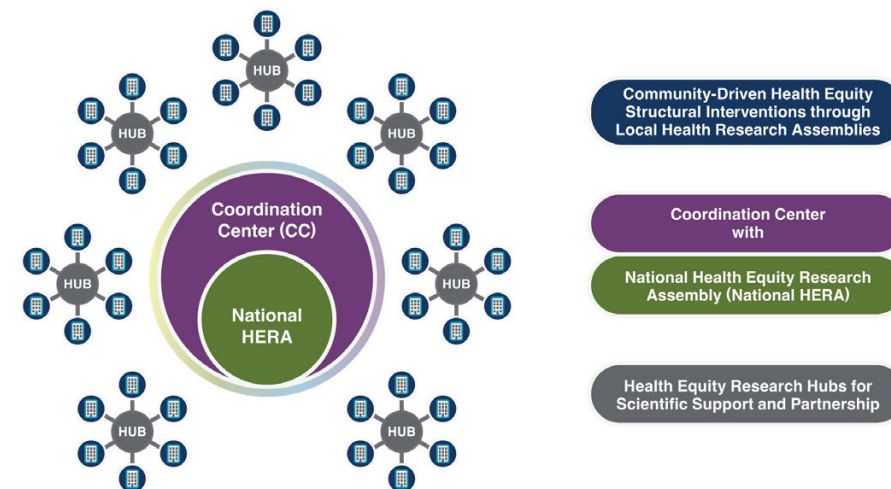
Focus Area 1: Progress Snapshot

ISSUE	ACTIVITIES	INTENDED CHANGE
Underfunded HD/MH translational research projects and low research capacity at MSIs.	• Launched Common Fund webpage for the Transformative Research to Address Health Disparities and Advance Health Equity initiative. • Released RFA-MD-21-004, RFA-RM-21-021, RFA-RM-21-022, and reissued RFA-RM-21-022.	Will fund and expand the capacity of HD/MH research at research institutions, including MSIs with a historical commitment to training individuals from underrepresented groups.
Insufficient NIH-wide transparency, accountability, and sustainability regarding HD/MH research funding.	• Developed an automated method to characterize the NIH HD/MH research portfolio and apply additional strategies to identify the research portfolio more precisely. • Worked with the National Library of Medicine (NLM) to expand Medical Subject Headings (MeSH terms) pertaining to the social determinants of health.	Will improve transparency, accountability, and sustainability of HD/MH research, and facilitate analysis of grant application and award data to assess any identified structural inequities and track progress.
Scarcity of community-driven health disparities research and structural interventions.	• Fostered the design of the FY23 Community Partnerships to Advance Science for Society initiative via the Common Fund.	Will bolster interventions to enhance HD/MH research through a 10-year research investment of nearly $400 million.

UNITE has worked to enhance this mission, incorporating HD/MH research as part of Focus Area 1 and encouraging ICs to prioritize this type of research across clinical trials and human subject research.

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Focus Area 2: Promoting Equity in the NIH-Supported Biomedical Research Ecosystem

- **Focus Area 2.** Promotes diversity and inclusion in the NIH extramural research ecosystem.

- **Example of Progress.** UNITE spurred the development of the [Harassment Reporting Portal](#) to explicitly include reports of discrimination and hostile work environments at grantee institutions.

- **What's Next.** UNITE is anticipating the release of new priority programs to enhance workforce diversity, equity, and inclusion in FY23.

Extramural Research Ecosystem – Framework

Career Pathways

Promoting Equity at Extramural Institutions: Environment & Culture

Evaluation & Stakeholder Engagement

Immediate Actions

Develop Short- & Long-Term Objectives

Research Resources & Capacity at MSIs

Promoting Equity at NIH: Policies & Procedures

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Focus Area 2: Progress Snapshot

ISSUE	ACTIVITIES	INTENDED CHANGE
Urgent need to ensure that diverse scientific talent is nurtured, recognized, and supported across all groups.	• Launched Faculty Institutional Recruitment for Sustainable Transformation (FIRST) program.	Will facilitate institutions in the recruitment of early-career faculty who have a demonstrated commitment to inclusive excellence, and positively support faculty development, retention, progression, and eventual promotion.
Students from underserved communities experience barriers to advancement in their scientific training, leading to persistent underrepresentation of certain groups in the scientific workforce.	• Expanded the Science Education Partnership Awards (SEPA).	Will provide opportunities for students from underserved communities to consider careers in basic or clinical research, provide teachers with professional development in science content, and improve community health literacy.
Institutions are not sufficiently incentivized to prioritize DEIA as a foundation of their operations.	• Planned and solicited public comment for DEIA Institutional Prize.	Will acknowledge and reward transformative interventions developed by institutions to create research environments that promote and value DEIA.
Certain groups remain underrepresented in the scientific workforce due to systemic and structural barriers.	• Received NIGMS Council clearance for three new initiatives to support extramural DEIA efforts. • Received NIMHD Council clearance for a new initiative to support extramural DEIA efforts and enhance MSI capacity.	Institutions will receive support to conduct organizational climate assessments and conduct needs assessments. Support will enhance the research portfolio of Principal Investigators who prioritize DEIA and develop research capacity at low-resource MSIs.

Scientific innovation and progress are driven by a workforce that is diverse, inclusive, and equitable. The report highlights some of the extramural DEIA initiatives that NIH is engaged in.

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Focus Area 3: Promoting Equity in the Internal NIH Workforce

- **Focus Area 3.** Concentrates on enhancing equity within the NIH internal workforce, role modeling expectations of the external biomedical ecosystem.

- **Example of Progress.** New initiatives driven by UNITE include the Anti-Racism Steering Committee (ARSC), comprised of more than 500 volunteers, which was established to help address racial and ethnic equity in the internal NIH workforce.

- **What's Next.** UNITE will continue to bolster NIH's culture of inclusive excellence and support diverse and equitable hiring practices.

Focus Area 3: Progress Snapshot

ISSUE	ACTIVITIES	INTENDED CHANGE
Need for a coordinated anti-racism advisory body, akin to the Anti-Harassment Steering Committee, with representation from all NIH ICs.	• Established the NIH-wide Anti-Racism Steering Committee. • Generated a new initiative to enhance outreach regarding NIH job opportunities to ensure a broad range and diversity of applicants.	Will guide NIH-wide efforts to address organizational issues to promote equity.
Variations in IC-level organizational cultures lead to racial and ethnic disparities in IC workforces.	• Guided the development of NIH IC and OD Racial & Ethnic Equity Plans.	Will identify areas that may lead to apparent inequities and provide interventions or policy changes to mitigate any identified issues.
Insufficient transparency and accountability of NIH-internal workforce metrics to assess progress toward equity goals.	• Published data on the demographic composition and profiles of the NIH workforce to promote transparency.	Will enhance the availability and quality of NIH workforce data.
Limited staff representation and diversity in NIH building portraits.	• Spearheaded The Power of an Inclusive Workplace Recognition Project.	Staff will see themselves represented throughout NIH buildings and online and experience a greater sense of inclusiveness.
Disparities in nominations for NIH Director's Awards by demographics, grade, and workforce category.	• Establish a task force to recommend changes to the NIH Director's Awards.	Will recognize and celebrate the accomplishments of staff at all levels and across all workforces.
Perception of structural inequity for staff at the GS-11 level and below.	• Developed a career development opportunity for staff at the GS-11 and lower levels.	Will provide skills development opportunities and focus on equity in NIH-wide career development opportunities.

NIH seeks to solve many of the world's health and well-being challenges. The mission relies on the contributions of thousands of diverse staff and researchers.

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Focus Area 4: Improving Accuracy and Transparency of Racial and Ethnic Equity Data

- **Focus Area 4.** Improves accuracy and transparency of racial and ethnic and equity data by maintaining and disseminating its data dashboard and associated data visualizations.

- **Example of Progress.** UNITE hosted [14 internal and external listening sessions](#) with over 1,300 participants to learn and gather information, which is being translated into action.

- **What's Next.** UNITE will continue to intentionally create opportunities to listen to the needs and experiences of its audiences.

"The general principle of data sharing equals good science. It ensures transparency, it ensures a greater confidence in what scientists are doing. And obviously, it also extends the value of what scientists are doing." – Larry Tabak, D.D.S., Ph.D.

Source: https://hdsr.mitpress.mit.edu/pub/kdgve0dl/release/4

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Focus Area 4: Progress Snapshot

ISSUE	ACTIVITIES	INTENDED CHANGE
Lack of robust, recent baseline data on scientists' needs and experiences pertaining to racial and ethnic equity.	• Fielded a UNITE RFI with over 1,100 responses. • Conducted 14 listening sessions with the extramural community with over 1,300 attendees to understand needs and priorities.	Will provide robust, thoughtful baseline data from a diverse pool of individuals related to their racial and ethnic equity needs, experiences, and priorities. Will affirm current UNITE directions and guide future developments.
Need to improve transparency and accountability in communicating UNITE progress to partners, stakeholders, and the public.	• Developed, launched, and maintained a public-facing Data Dashboard. • Launched UNITE Co-Chairs' Corner with monthly updates on UNITE developments. • Communicated UNITE news and updates via GovDelivery. • Promoted events and updates using the UNITE LinkedIn page. • Promoted events, news, published articles, and diversity, equity, and inclusion content on the Ending Structural Racism (ESR) website and intranet.	Clear, publicly available information on aggregated facts and figures regarding diversity, equity, and inclusion-related data and analyses from NIH. Ongoing, real-time information regarding UNITE—with 6,600+ included in the GovDelivery notifications as of September 28, 2022.

In 2021, former NIH Director Dr. Francis Collins publicly committed to stand against structural racism in biomedical and behavioral research by identifying and correcting scientific policies and practices that may have helped to perpetuate structural racism. Foundational to these efforts is strengthening the accuracy and transparency of data.

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What's Next for UNITE?
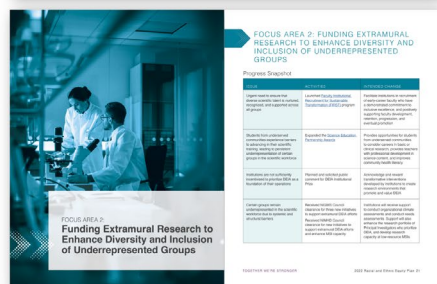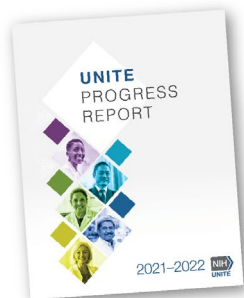
UNITE intends to expand its efforts in the coming years—from new funding opportunities, to expanded educational programs, to enhanced data transparency. This will be done with an eye to evaluating the program's short, medium, and long-term impacts. NIH is proud of UNITE's achievements thus far and looks forward to additional meaningful achievements with the help of its dedicated volunteers and subject matter experts.

"Injustice anywhere is a threat to justice everywhere. We are caught in an inescapable network of mutuality, tied in a single garment of destiny. Whatever affects one directly affects all indirectly."
– Dr. Martin Luther King, Jr.
"Letter from Birmingham Jail"

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18

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Focus Area 1: Elevating Health Disparities and Minority Health Research

Monica Webb Hooper, PhD

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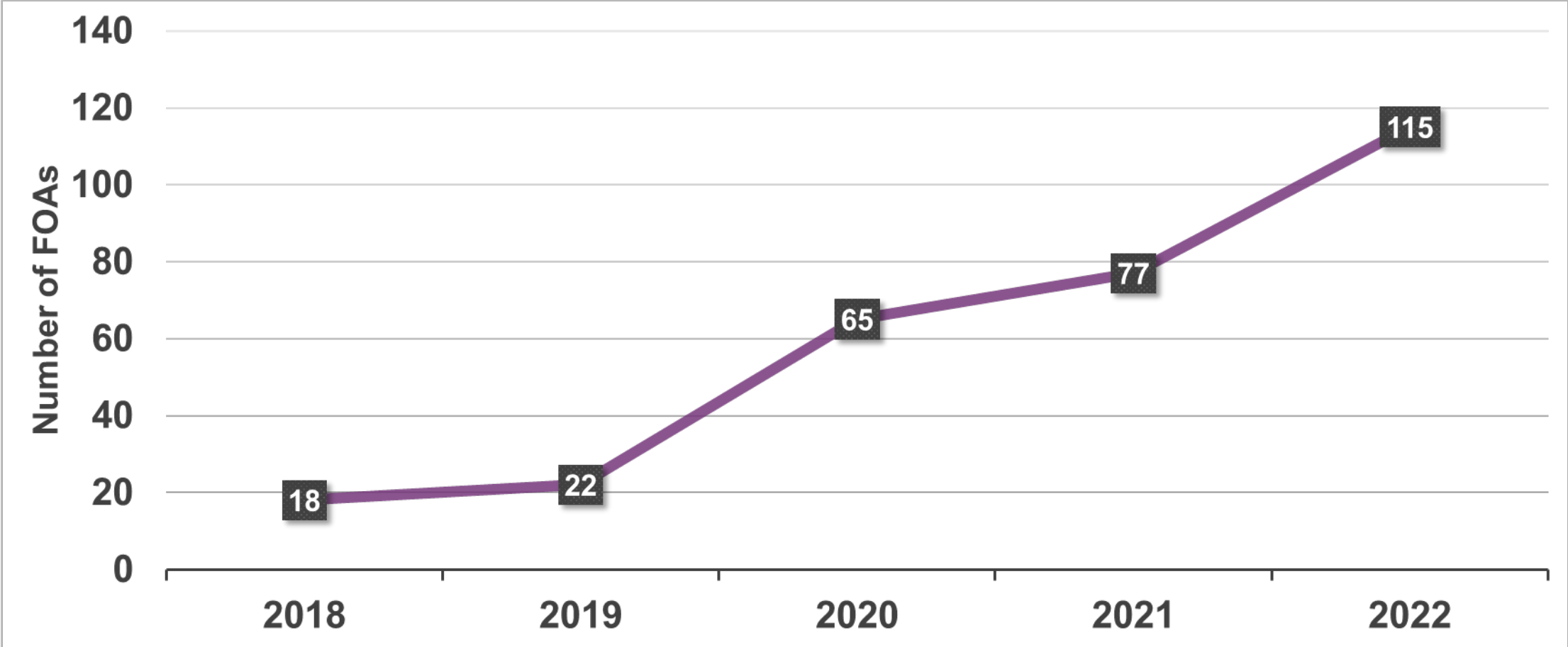
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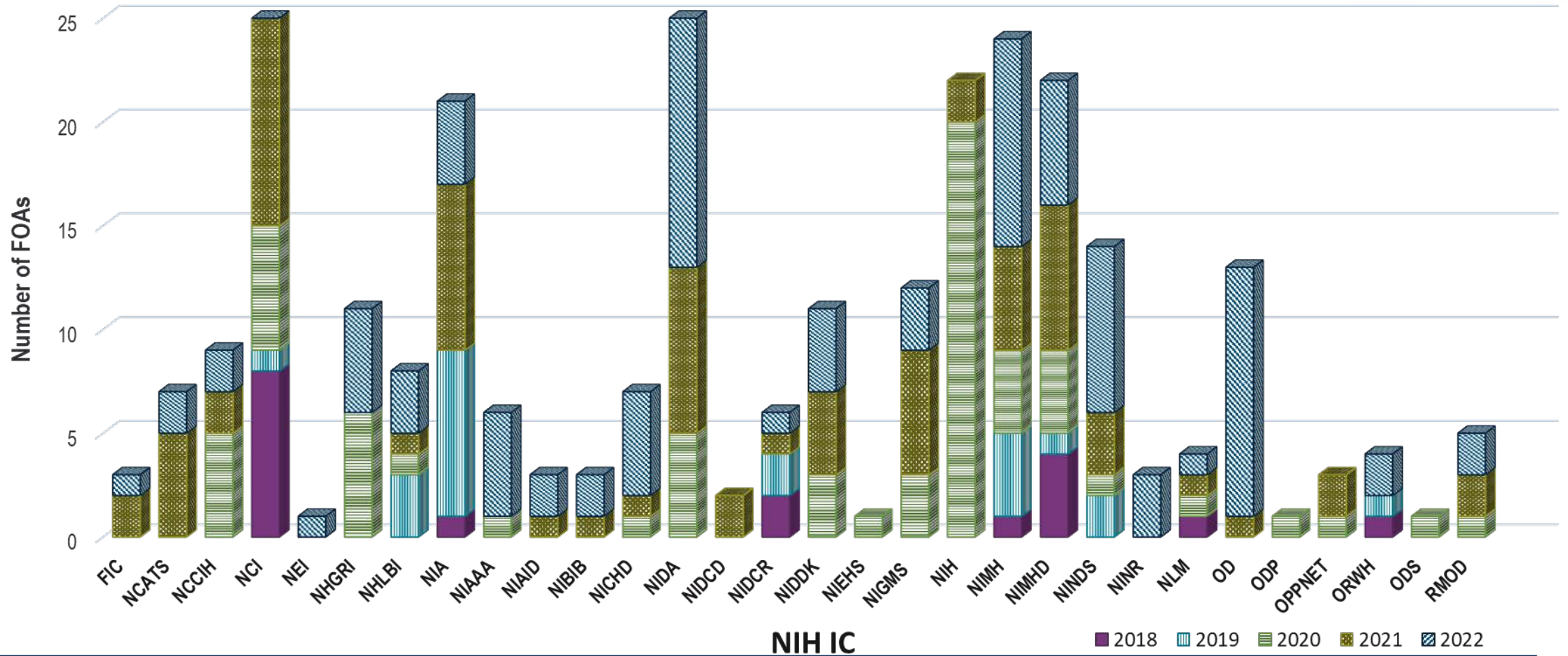
Facilitate. Communicate. Amplify

- **Facilitate** monitoring and evaluation of the [NIH Minority Health and Health Disparities Strategic Plan 2021-2025](#)
  - Automated methodology to identify, characterize, and analyze the minority health and health disparities research portfolio

- **Communicate** trends (between 2018-2022) in funding opportunity announcements (FOAs) focused on minority health and health disparities research

- **Amplify** active and upcoming minority health and health disparities research initiatives across NIH

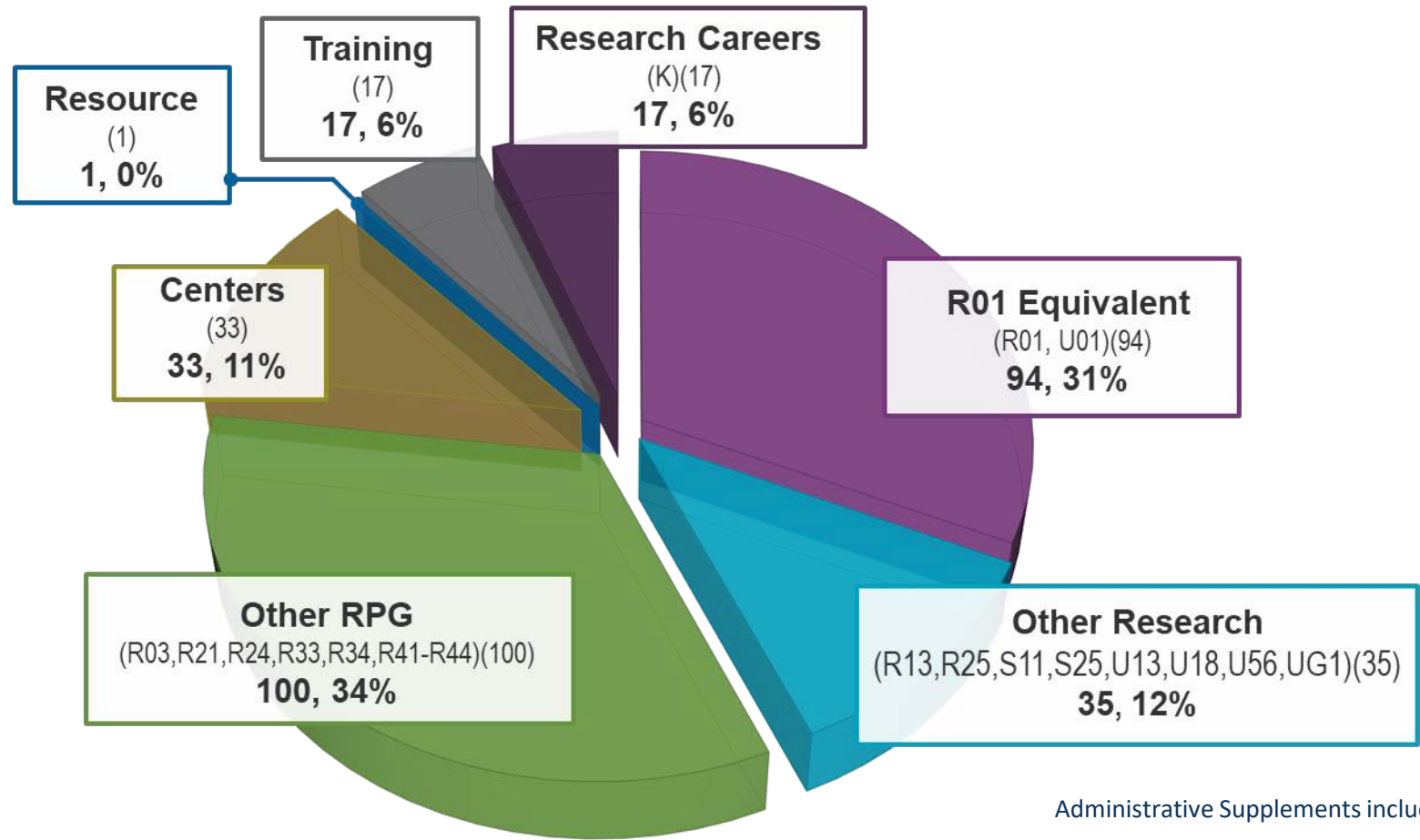# FOAs Related to Minority Health and Health Disparities, 2018-2022

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Distribution of Minority Health and Health Disparities FOAs by Year and ICs, 2018-2022

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Distribution of Minority Health and Health Disparities FOAs by Mechanism, 2018-2022

Training (17) — 17, 6%

Resource (1) — 1, 0%

Research Careers (K)(17) — 17, 6%

Centers (33) — 33, 11%

R01 Equivalent (R01, U01)(94) — 94, 31%

Other RPG (R03,R21,R24,R33,R34,R41-R44)(100) — 100, 34%

Other Research (R13,R25,S11,S25,U13,U18,U56,UG1)(35) — 35, 12%

Administrative Supplements included in Other Research

Understanding and Addressing the Impact of Structural Racism and Discrimination on Minority Health and Health Disparities

(RFA-MD-21-004, R01 Clinical Trial Optional)

The initiative supports:

(1) **Observational** research to understand the role of structural racism and discrimination (SRD) in causing and sustaining health disparities

(2) **Intervention** research that addresses SRD to improve minority health or reduce health disparities.

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Understanding and Addressing the Impact of Structural Racism and Discrimination on Minority Health and Health Disparities

(RFA-MD-21-004, R01 Clinical Trial Optional)

- Number of Participating ICOs: 25

- Number of Applications: 163

- Number Awarded: 38 (23%)

- PI Early-Stage Investigator: 5

- PI New Investigator (not ESI): 10

- ***Types of Studies***: Majority Observational

- ***Populations:*** ~62% focus on multiple groups (Highest single group focus was African American at 21%)

- ***Themes:*** Wide range of disease/conditions and approaches consistent with the ICO mission.

  - Examples – Alzheimer's, medication treatment for opioid use disorder, emergency department transfers, HIV treatment, and environmental systems and occupational health policy impact on agricultural workers

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Cross-Cutting Themes and Emphases among New Minority Health and Health Disparities-Related FOAs Published in 2022

- Approaches to reduce health disparities, advance health equity across the lifespan

- Roles of social determinants of health (SDOH) in health and disparities
  - Individual SDOH (e.g., access to healthcare, food insecurity, perceived racism, medical mistrust, stigma, social support)
  - Structural SDOH (e.g., structural racism, poverty, neighborhood and built environment)

- Community engagement and principles of community engaged research

- Multilevel interventions (e.g., interpersonal, community, health systems)

- Increase recruitment of populations with health disparities

- *Example disease, condition, and behavioral areas:* HIV/AIDS, cancer, cardiovascular disease, mental health, and substance misuse (including opioids and alcohol)

New 2022 MH and HD-Related FOAs Exemplifying Cross-Cutting Themes

- Maternal Health Research Centers of Excellence (RFA-HD-23-035)

- NIDA REI: Addressing Racial Equity in Substance Use and Addiction Outcomes Through Community-Engaged Research (RFA-DA-23-013)

- Notice of Special Interest (NOSI): Preventive Interventions to Address Cardiometabolic Risk Factors in Populations that Experience Health Disparities (NOT-OD-22-154)

- HEAL Initiative: Prevention and Management of Chronic Pain in Rural Populations (RFA-NR-23-001)

- Notice of Special Interest (NOSI): Increasing Uptake of Evidence-Based Screening in Diverse Populations Across the Lifespan (NOT-OD-22-106)

- Understanding and Addressing Misinformation among Populations that Experience Health Disparities (RFA-MD-22-008)

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Community Partnerships to Advance Science for Society (COMPASS)

Overall Goals:

❖ *To catalyze, deploy, and evaluate community-led health equity structural interventions that leverage partnerships across multiple sectors to reduce health disparities*

❖ *To develop a new health equity research model for community-led, multisectoral structural intervention research across NIH and other federal agencies*

Funding Opportunities Published

- OTA-22-007: ComPASS Program: Community-Led, Health Equity Structural Interventions Initiative

- RFA-RM-23-001: Community Partnerships to Advance Science for Society (ComPASS): Coordination Center

Three-Phased Approach

1. PLANNING (Year 1-2)
2. IMPLEMENTATION (Year 3-8)
3. DISSEMINATION (Year 9-10)

HEALTH EQUITY

Research Opportunity Announcement
Community-Led, Health Equity Structural Intervention Initiative (CHESI)

REQUIRED letter of intent is due by 11/18/22

Community-Led, Health Equity Structural Interventions (CHESIs)

Health Equity Research Hubs (Hubs)

ComPASS Coordination Center (CCC)

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Focus Area 2: Funding Extramural Research to Enhance Diversity and Inclusion

Alfred C. Johnson, PhD

Requirements for Internal Controls

- Recipient organizations' internal controls should be in compliance with guidance in "[Standards for Control in the Federal Government](#)." (45 CFR 75.303(a)). Thus, recipient organizations are expected to establish codes of conduct which define expectations of integrity and ethical values and criteria of competence of personnel involved in the work supported by NIH grant funds.

- Codes of conduct should articulate expectations to assure compliance with terms and conditions of award, including but not limited to … assuring work environments are free of discriminatory harassment and are safe and conducive to high-quality work (NIH GPS Chapter 4).

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Focus Area 4: Improving Accuracy and Transparency of Data

Alfred C. Johnson, PhD

Background

- Released March 1 – April 23, 2021, with 9 questions covering four areas

- **Over 1,100 responses**
  - Self-selection at time of submission
  - HBCUs coded using U.S. Department of Education HBCU list

Distribution of Respondent Types

46%	**13%**	**11%**
Academic (Includes 2% HBCUs)	**NIH Staff**	**Health Professional**
8%	**6%**	**16%**
Nonprofit/ Professional Society	**Student/ Postdoc Researcher**	**Other** (e.g., Advocacy Organizations, Members of the Public, and more)
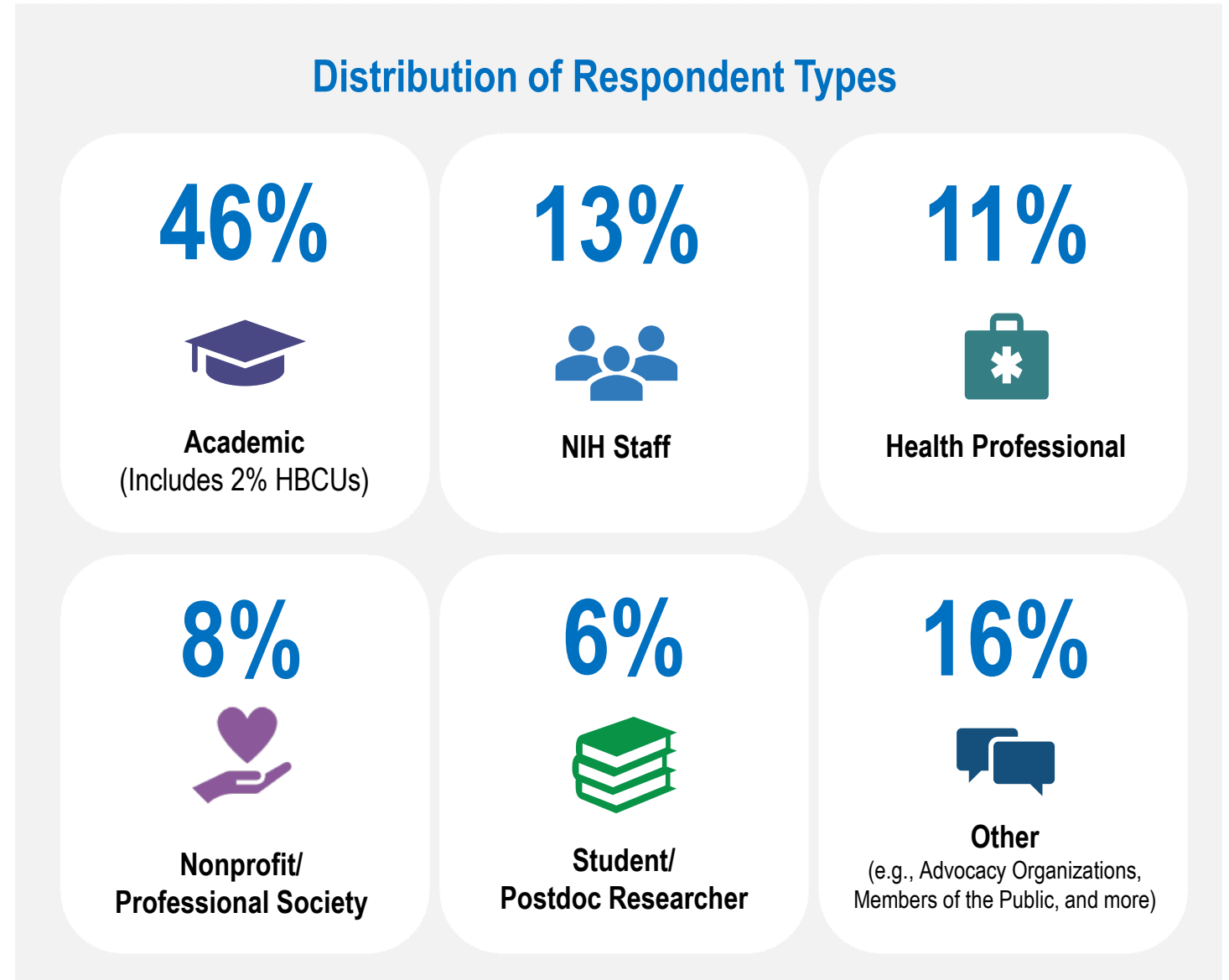
Approach

- To capture, organize, and provide a summation of the responses to the RFI

- Recommendations proposed by respondents
  - Some may not be within NIH's purview
  - Some have already been proposed, considered, implemented

- Terminology within the report **reflects respondents' language** to the greatest extent possible to **avoid inaccurate interpretation** or **overinterpretation** of respondent comments

Key Topic Areas of Feedback

Grants Process	Student-to-Workforce and Career Pathways	Biomedical Research Workforce	Health Disparities and Health Equity Research	Community Partnership and Outreach

Expand the
Scope of
Inclusion

Implement DEI
Initiatives

Operationalize
Diversity
Metrics

Enhance and
Expand DEI
Training

Improve
Communication
and Outreach

Acknowledge
Structural Racism
and Its Impact

Cross-Cutting Themes

common threads that emerged throughout the 5 key topic areas

Rollout

Publish Full Report and Executive Summary on the UNITE website and shared through various channels

Provide report to those who responded to the RFI and provided contact information

Utilize responses to continue to *listen* and *learn and enhance* our work!

UNITE Leadership Changes: New Co-Chairs

Alfred C. Johnson, PhD

nih.gov/ending-structural-racism   The NIH UNITE Initiative to Strengthen Diversity, Equity, and Inclusion: Together, We're Stronger.

New UNITE Co-Chair

Noni Byrnes, PhD
Center for Scientific Review

New Committee Co-Chairs

U Committee

Shelli Avenevoli, PhD
National Institute of Mental Health

N Committee

Kathy Etz, PhD
National Institute on Drug Abuse

N Committee

Monica Webb Hooper, PhD
National Institute on Minority Health and Health Disparities

N Committee

Xinzhi Zhang, MD, PhD, FACE, FRSM
National Heart, Lung, and Blood Institute

New Committee Co-Chairs

I Committee

Laura M. Koehly, PhD
National Human Genome Research Institute

I Committee

Kevin Williams
Office of Equity, Diversity and Inclusion

T Committee

Mohammed Aiyegbo, PhD
National Institute of Allergy and Infectious Diseases

Moving Forward

- Continue to center focus areas to guide UNITE activities and reporting

- Shift to annual update to ACD

nih.gov/ending-structural-racism   The NIH UNITE Initiative to Strengthen Diversity, Equity, and Inclusion: Together, We're Stronger.

41

NIH National Institutes of Health
Turning Discovery Into Health

Questions?

Read the **UNITE Progress Report**
Follow UNITE: **in**
Sign up for **UNITE Updates**
Read the monthly **Co-Chairs' Corner**
Thank you!