



THE NATIONAL INSTITUTES OF HEALTH AND RACIAL DISCRIMINATION: A RESPONSE FROM THE ASSOCIATION OF BLACK PSYCHOLOGISTS

The Issue:

The National Institutes of Health (NIH) Research Project Grant Program (R01) is a funding initiative designed to support health related research and development. It is one of the means by which social scientists and professionals are able to explore new research ideas and investigate specific social problems. In considering the potential for research funding to contribute heavily to the body of scholarly work, it is of utmost importance for the Association of Black Psychologists (ABPsi) to respond to alarming new evidence suggesting inherent racial bias within the funding process of the NIH. According to a recent article entitled: "Race, Ethnicity, and NIH Research Awards" by Donna K. Ginther, Walter T. Schaffer, Joshua Schnell, Beth Masimore, Faye Liu, Laurel L. Haak and Raynard Kington in *Science* 19 August 2011 (Vol. 333, No. 6045, pp. 1015-1019) the researchers discussed findings which illustrated a significant difference in the racial/ethnic make-up of individuals receiving R01 research grants, even after all other factors had been controlled for. Specifically this study found that African American applicants of R01 proposals in biomedical research were 13.1 percentage points ($P < .001$) less likely to receive NIH funding than their white counterparts after controlling for demographic variables such as age and gender. Similarly, the likelihood of receiving funding for Asian and Hispanic investigators was 5.4 ($P < .001$) and 2.7 ($P < .05$) percentage points less than white applicants, respectively. The more alarming results however, indicated that even after controlling for a wide array of factors including: demographics, education, NIH training, employer characteristics, previous NIH grants, NIH review experience, and citizenship status, African Americans still remained 10 percentage points ($P < .001$) less likely than whites to receive an R01 awards. Ginther and colleagues were unable to account for the persistent racial bias against African American applicants and furthermore, critical factors such as NIH training, previous grant awards, and publication record, provided very little explanation for this outcome. Therefore, it is reasonable to assume that the source of institutional discrimination is much more intrinsic and internalized than the observable variables used in the analyses.



NIH Response:

The Director of NIH, Dr. Francis Collins along with NIH Deputy Director, Dr. Lawrence Tabak coauthored a reaction paper in the same issue of *Science* (August 19, 2011) which outlines the immediate actions NIH plans to implement to alleviate the racial disparity. In this paper they acknowledge the severity of this issue and go on to make the following statement, “The findings from Ginther et al. (2011) and others indicate that NIH’s current approaches and those of other stakeholders have not gone far enough to facilitate and encourage the recruitment and advancement of underrepresented minorities in biomedical research.” They suggest that the source of racial disparity most likely arises during the proposal review process and also present the following solutions to tackle this issue:

Strategy 1: Utilize NIH’s Early Career Reviewer Program to recruit more junior faculty members of underrepresented ethnic groups to participate on peer review panels and gain valuable experience reviewing and scoring NIH grant proposals. Findings from Ginther et al. (2011) suggest that service on a NIH grant review panel was associated with a higher probability for investigators to submit successful grant applications that are awarded funding. Therefore, providing a larger proportion of underrepresented junior faculty with the opportunity to learn the inner-workings of the NIH review process will most likely result in stronger application submissions from these researchers in the future.

Strategy 2: Investigate the impact of implicit bias on the review process of submissions through several techniques. One strategy involves measuring the prevalence of implicit bias amongst NIH staff and reviewers by using tools such as the Implicit Association Task (IAT). Another includes pilot experiments to exam whether evaluation scores are influenced by either a focus on scientific merit only or the more traditional focus on the entire grant proposal.

Strategy 3: Implement a thorough evaluation of all training programs in order to identify and expand best practices for underrepresented groups, while at the same time eliminating initiatives that aren’t producing positive results. Additionally, NIH will implement several new programs specifically designed to promote diversity in multiple areas of the sciences.

Strategy 4: NIH plans to continue to strive towards improving diversity across all levels of the organization including: NIH administrators, scientific review officers, proposal review panel members, and mentorship relationships with junior faculty.



ABPsi's Response:

The Association of Black Psychologists (ABPsi) recognizes and commends NIH for acknowledging the severity of this matter regarding the racial bias afflicting African American applicants of R01 grants. As aforementioned, the research funded by R01 grants is designed to address issues of health related research and development, a function and key objective to the many professionals that represent ABPsi. Additionally, it cannot go without mention that the disparity in funding potentially results in a lack of support for scholarly research so vital for African American professors. As we all know, the ability to acquire research funding carries a significant weight in the tenure evaluation process, and this weight is perhaps most critical for early career professionals and junior faculty, where the acquisition of an NIH R01 grant could be the defining factor for promotion. In a recent survey conducted within the ABPsi membership, respondents from several institutions across the U.S. commented on their previous experiences of applying for NIH funding. While grant proposals from some of these professionals were scored and awarded funding, an overwhelming majority received unscored proposals and were ultimately denied funding. In fact, several respondents shared concerns of racial bias in regards to the review process of their submissions. However, a much larger proportion of the sample reported that their proposal reviewers did not have a clear understanding of the needs or values pertinent to African American culture and were unfamiliar with psychological research techniques from an African-centered perspective.

From the evidence shown by Ginther et al. (2011) and a sample of Black psychologists, it is clear that definite change is needed to eliminate the disparity in funding of R01 grant proposals. The NIH has an obligation to evaluate each submission objectively and we plan to hold them accountable to this standard. We acknowledge and appreciate the strategies set forth by NIH, yet we feel that further action is still needed. In addition to implementing all of the strategies discussed previously, it is also necessary for NIH to take the following immediate actions:

- 1)** NIH should revise the current policy which only accepts a single revision of the original application. This is necessary because data from Ginther et al. (2011) indicates that African American applicants are less likely to receive R01 funding on their first or second attempts and also need to resubmit more often than other demographics in order to receive funding.
- 2)** NIH needs to provide new incentives to attract more African Americans researchers to serve on proposal review panels. Evidence from Ginther et al. (2011) demonstrates that service on



NIH review panels increases the likelihood of receiving funding on future submissions because this experience provides insider knowledge of the review process. Furthermore, African American reviewers will help to diversify NIH and also contribute an appreciation for African-centered research practices.

3) NIH should reassign proposal review panels with new personnel on a more frequent basis. This will allow for more researchers to gain valuable experience from this opportunity and also draw more input from a diverse population that could introduce new perspectives.

4) NIH should collaborate with ABPsi and/or other national Black organizations to fund programs that will provide training, professional development, and mentorship to African American graduate students and early career professionals. Although NIH already provides training for underrepresented populations, it is essential that they collaborate with these organizations so that the trainings can be tailored to become more effective and yield more positive results.

5) NIH should designate funds to implement a specific request for funding (RFA) targeted to African American researchers at third tier universities and community-based research organizations. In order for NIH to improve the amount of R01 applications from Black researchers, they need to market themselves to non-traditional university settings and reach out to community agencies which engage in rigorous research on issues affecting Black communities.