The Infectious Diseases Society of America (IDSA) appreciates the opportunity to provide written comments to the National Institutes of Health (NIH) in response to its Request for Information regarding the Framework for the NIH-Wide Strategic Plan for Diversity, Equity, Inclusion, and Accessibility (DEIA).

IDSA represents over 12,000 infectious diseases physicians, scientists, and other healthcare and public health professionals who specialize in infectious diseases (ID) medicine and research. Our members work across a variety of healthcare settings and in a wide array of infectious diseases research. IDSA is eager to work with NIH to foster DEIA in biomedical research.

**Objective 1: Implement Organizational Practices to Center and Prioritize DEIA in the Workforce**

Initial steps in addressing organizational DEIA should include reviews of NIH diversity initiatives to evaluate their success in promoting DEIA in the NIH research workforce. These reviews should focus on gaps in DEIA, and where NIH can direct support and resources to address these gaps. Additional review should be conducted to evaluate diversity of faculty and researchers at NIH funded institutions, and inclusion and equity in the workforce. Surveys suggest that clinical institutions have especially poor retention if staff identify failures in DEIA policy. Improvements in DEIA in NIH-funded institutions are critical to developing a diverse and robust workforce.

To further promote DEIA in the workforce, support must be provided early in the training pipeline to those pursuing research careers. Students, trainees and researchers from underrepresented populations must be given resources early in their education to facilitate their transition across the stages of their careers. Financial challenges and lack of mentorship for students from underrepresented populations at various stages limits recruitment and retention. Groups like first generation students and researchers are highly underrepresented in research and medicine because they are not given the needed resources and opportunities to succeed. This is especially true for first generation students who want to pursue training as physician-scientists. A study found that first generation physician-scientists are less likely to apply to MD-PhD than to MD programs, often due to a lack of social, cultural and financial capital. This failure of inclusion perpetuates a systemic lack of diversity and accessibility in the physician-scientist workforce, which in turn limits overall expansion of the physician-scientist workforce and DEIA.
considerations in patient care and clinical research. Targeted initiatives are needed to provide crucial support and resources necessary for students and researchers from underrepresented backgrounds to successfully advance through the training pipeline into the workforce.

**Recommendations to strengthen DEIA in the workforce include:**

- Create early career reviewer programs at NIH-funded institutions for investigators and physician-scientists from populations that are underrepresented in science and medicine.
- Provide stronger support for mentorship programs targeting underrepresented and first-generation students.
- Support institutional funding directed to areas not traditionally covered under grants, such as childcare costs, to improve retention of researchers and students and make research more accessible.
- Provide more funding opportunities for early-stage investigators from underrepresented groups, such as the predoctoral F31 NRSA Individual Predoctoral Fellowship to Promote Diversity in Health-Related Research mechanism. Similar initiatives could increase retention of underrepresented students.
- Support initiatives that fund high school and college research fellowships and provide resources for application preparation and test preparation for those applying to postgraduate medical and science programs (particularly for those interested in physician scientist/MD-PhD programs who need to take the MCAT and pay for school application fees).
- Attach stipends to federal funds to support travel to conferences and leadership training.
- Develop or restructure federal funds to be directed to Clinical Transitional Science Awards (CTSAs) and institutional grants which support clinical and translational scientific training and career development.

**Objective 2: Grow and Sustain DEIA through Structural and Cultural Change**

DEIA must be an institutional priority. Commitment to DEIA requires resources, funding and support for NIH-funded institutions. Additionally, it requires structural changes centered on improving representation of underrepresented groups at all levels of research through collaborative efforts. **Recommendations to grow DEIA through structural and cultural change include:**

- Increase federally supported programs at academic and other NIH-funded institutions (particularly institutions in underserved regions or communities) to send early career researchers, graduate students, and physician-scientist trainees to underrepresented and underserved communities. These initiatives facilitate mentorship and encourage individuals from underrepresented populations to pursue careers in healthcare and research.
- Foster increased collaboration among federal agencies, research institutions and community-based organizations with expertise in health disparities to develop and inform strategies to improve mentorship programs and career support for underrepresented
minorities during training. Collaboration across agencies can improve the overall uptake of effective DEIA initiatives.

- Support initiatives and funding that give chief diversity officers (CDOs) or diversity steering committees at NIH-funded institutions the resources needed to implement DEIA initiatives. Work with these institutions to ensure they have structural policies and institutional bodies in place to effectively address DEIA.

**Objective 3: Advance DEIA Through Research**

Research should hold DEIA as a central tenant, especially when working with underrepresented populations and communities. Mistrust of research in underrepresented populations stems from failures in transparent communication by researchers and investigators. When communities engaged in research such as clinical trials are not engaged as partners, it creates mistrust and limits the impact of these studies. Mistrust can also dissuade students in underrepresented communities from pursuing careers in research.

Research aimed at identifying and addressing gaps in DEIA is critical. By supporting research that identifies disparities in workforce DEIA, targeted initiatives can be developed more effectively. Furthermore, research funding can be used to facilitate mentorship, training, and funding opportunities for underrepresented trainees and students. **Recommendations to advance DEIA through research include:**

- Survey demographics of NIH investigators and study section participants with the goal of increasing representation of underrepresented groups in research. After survey and review, implement initiatives that address DEIA gaps in study sections and ensure that study section participants include individuals from underrepresented backgrounds and who understand the unique challenges encountered by trainees. Diversifying study sections helps ensure appropriate review of research applications.
- Fund studies that evaluate the impact of strategies and programs aimed at improving DEIA in faculty, students, and trainees at research institutions for effectiveness.
- Support research that seeks to build a better understanding of DEIA in the healthcare and research workforce, including what policies and initiatives designed to advance DEIA have proven effective, what gaps exist in DEIA efforts, and what barriers those seeking to join the workforce encounter.
- Fund research with a focus on interdisciplinary, collaborative work to foster team science approaches in applied research that encourage inclusion and accessibility.
- Facilitate training for researchers engaged in clinical trial studies targeted at underrepresented communities that encourage transparent communication and collaboration with the communities with whom they work. Include training for culturally competent communication through diverse communities.
- Embed training funds into large clinical trial funding to allow for broader experience and mentorship for younger researchers. Additionally, attach training grants for researchers and students from underrepresented groups to large, multi-institutional grants.
IDSA welcomes continued collaboration on the NIH Strategic Plan for DEIA, and any other DEIA initiatives or planning. If you have questions about these comments or would like to connect, please contact Amanda Jezek, IDSA Senior VP, Public Policy and Government Relations at ajezek@idsociety.org.