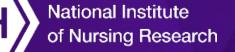
#### NATIONAL ADVISORY COUNCIL FOR NURSING RESEARCH

WORKING GROUPS ON WORKFORCE DIVERSITY AND PARTICIPANT INCLUSION IN NINR SUPPORTED STUDIES

Interim Report of Progress May 2022





#### DISCLAIMER

The views discussed today are the sole opinions of the Working Groups on **Diversity and Inclusion and** do not necessarily represent the views of the NIH, NINR, or federal government.

# Guiding Principles for NINR-Supported Research

- All NINR-supported research:
  - Tackles today's pressing health challenges and stimulates discoveries to prepare for, prevent, or address tomorrow's challenges
  - Discovers solutions across clinical, community, and policy settings to optimize health for individuals, families, communities, and populations
  - Advances equity by removing structural barriers from research, cultivating diversity in perspectives and ideas, and fostering inclusion and accessibility in designing, conducting, and participating in research
  - Is innovative, develops or applies the most rigorous methods, and has the potential for the greatest impact on health

#### Formation of Working Groups

#### Working Group on Diversity



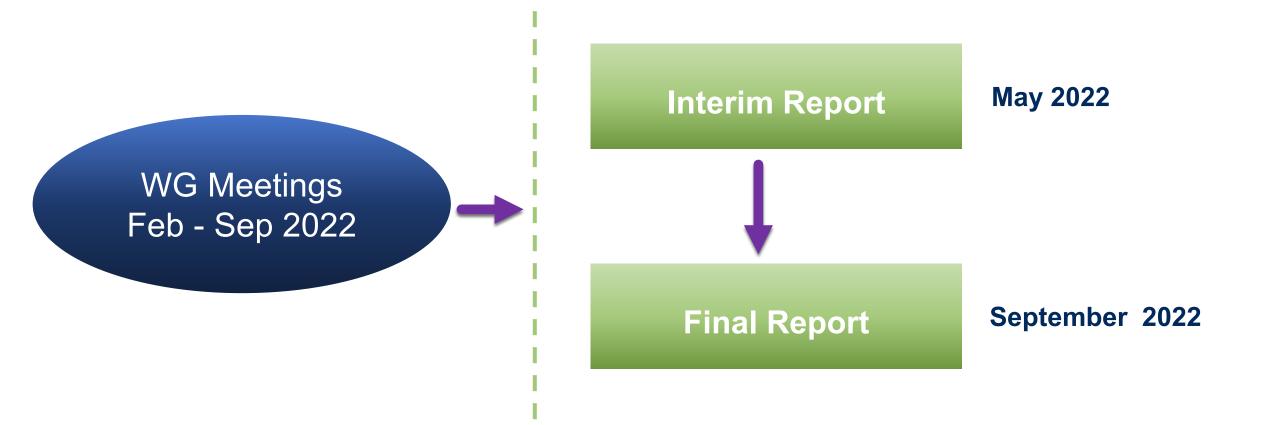
#### Working Group on Inclusion

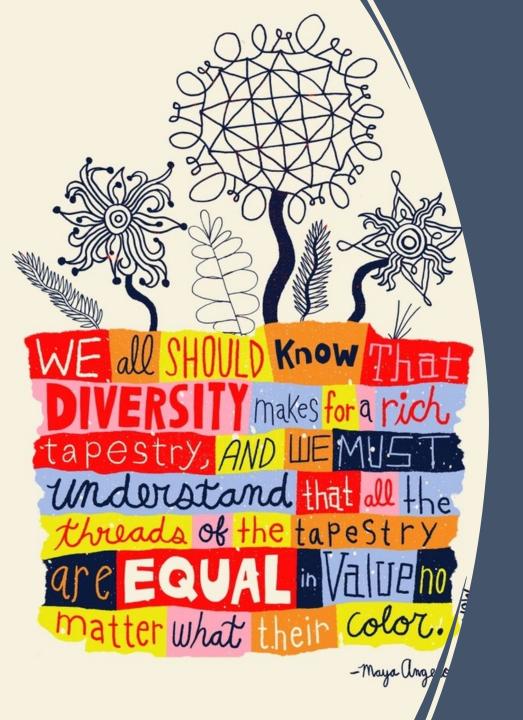


### Framework for Working Group Discussions

- The Why?
  - The Problem
- The What?
  Actionable Strat
  - Actionable Strategies
- The How?Implementation Approaches

# Deliverables





Working Group on Diversity (WGD) in the NINR-Supported Scientific Workforce

Interim Report to NACNR

May 2022

# WGD Group Charge

- Provide advice to the NACNR on effective strategies to enhance the diversity of the NINR-supported nursing science workforce.
- Provide recommendations for improving success rates for groups underrepresented nationally in biomedical and health research who apply for NINR grant and training funding.



# Working Group on Diversity (WGD)

Co-Chair: Dr. Christopher S. Lee	Co-Chair: Dr. Shalanda A. Bynum (NINR)
<ul> <li>Dr. Brian C. Castrucci</li> <li>Prof. Daniel E. Dawes</li> <li>Dr. Cheryl Giscombé</li> <li>Dr. Laura N. Gitlin</li> <li>Dr. Emily A. Haozous</li> <li>Dr. Mallory O. Johnson</li> <li>Dr. Randy A. Jones</li> </ul>	<ul> <li>Dr. Phoenix A. Matthews</li> <li>Dr. Elias Provencio-Vasquez</li> <li>Dr. Therese S. Richmond</li> <li>Dr. Roland J. Thorpe, Jr.</li> <li>Dr. Jing Wang</li> <li>Dr. Linda Washington-Brown</li> <li>Dr. Lisa Lucio Gough (NINR Liaison)</li> </ul>
<ul> <li>Dr. Cheryl Giscombé</li> <li>Dr. Laura N. Gitlin</li> <li>Dr. Emily A. Haozous</li> <li>Dr. Mallory O. Johnson</li> </ul>	<ul> <li>Dr. Therese S. Richmond</li> <li>Dr. Roland J. Thorpe, Jr.</li> <li>Dr. Jing Wang</li> <li>Dr. Linda Washington-Brown</li> </ul>





Assess the scope of the problem and identify barriers to diversifying NINR-supported scientific workforce

Prioritize barriers and determine strategies to address them

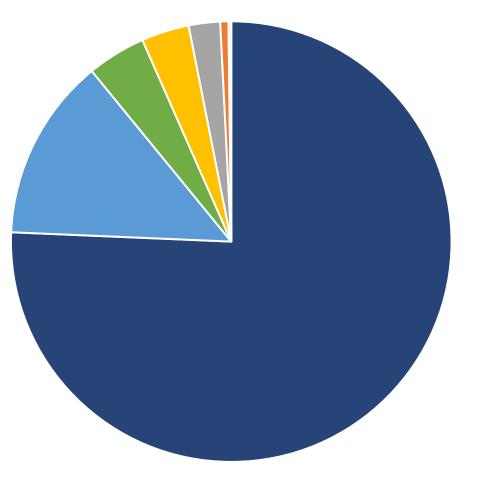
Compile strategies into a final report

Determine implementation of strategies

#### NINR-Supported R-Grant Investigators by Race, FY2015-2019



- 75.6% White
- 13.4% Asian
  - 4.3% Black/African American
  - 2.3% Unknown
  - 0.6% > 1 Race
  - 0.2% American Indian/Alaska Native
  - 0.0% Pacific Islander/Native Hawaiian



#### Characteristics of NINR Trainees, FY2015-FY2019

Race	NINR Mentored Researchers (Ks) 2015-2019	NINR NRSA Institutional Trainees (Ts) 2015-2019	NINR NRSA Fellows (Fs) 2015-2019
African American/ Black	4.0%	11.4%	12.3%
American Indian, Alaska Native	4.0%		0.0%
Asian	26.0%	10.2%	9.4%
Native Hawaiian, Pacific Islander	0.0%	0.0%	0.0%
More Than One Race	2.0%	0.0%	1.9%
White	68.0%	75.0%	70.8%
Unknown or Withheld	0.0%	3.4%	5.7%
Ethnicity			
Hispanic*	4.0%	9.1%	6.4%
Non Hispanic	96.0%	88.6%	82.3%
Unknown or Withheld	0.0%	2.3%	11.3%

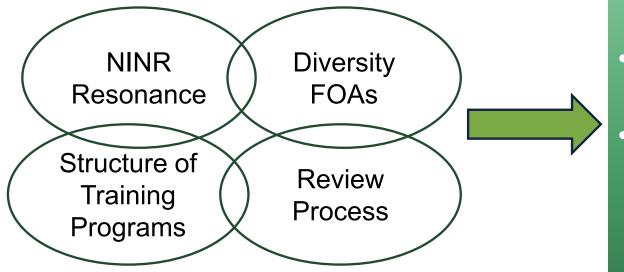
Internal NIH Data: NINR Career Development and NRSA Training Awardees, FY2015-2019

# **Identification of Barriers**

Approach

- Open-ended questions posed to the WGD
  - Factors Internal to NINR
  - Factors External to NINR
  - Factors that Contribute to Funding Disparities
- Barriers grouped into categories by co-Chairs
- Categories presented to WGD for concurrence and discussion

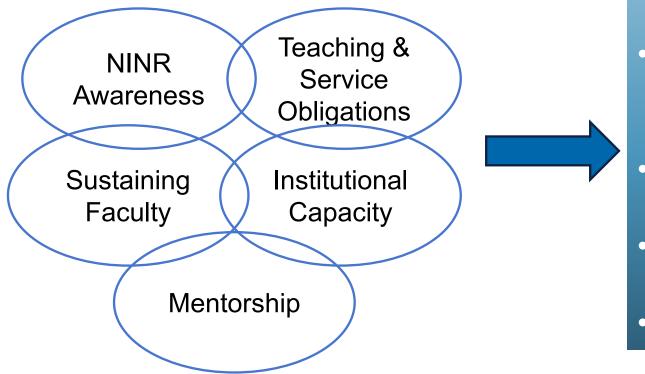
# Factors Identified by the WGD: Internal



- NINR focal areas may not resonate with diverse researchers
- Partial leveraging of NIH diversity FOAs
- Competitive nature of training programs limits opportunities for lower resourced institutions and networked students
- Lack of diversity on review panels and understanding of the review process

Question: What structures, policies, or practices internal to NINR/NIH limits diversity within the NINR-supported nursing science workforce?

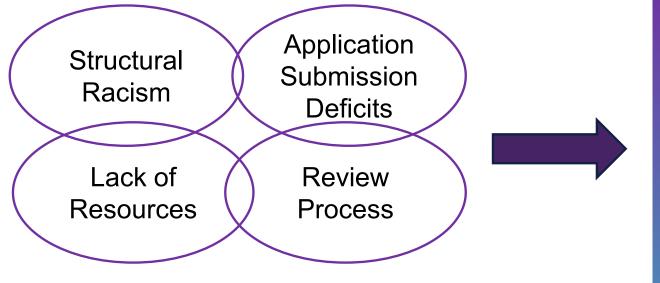
# Factors Identified by the WGD: External



- Unawareness of NINR areas of scientific interest
- Underrepresented researcher's obligations detract from the time/resources needed to apply
- Academic culture may not foster belongingness and support
- Limitations to MSIs infrastructure for grant submission + award processes
- Lack of engaged mentorship

**Question**: What structures, policies, or practices external to NINR/NIH limits diversity within the NINR-supported nursing science workforce?

# Factors Identified by the WGD: Funding Disparities



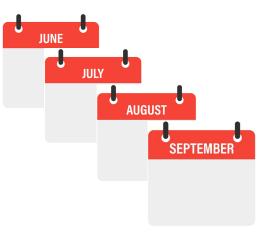
- Unfair review and funding outcomes
- Limited potential applicant pool
- Inability to obtain and sustained involved mentorship
- Insufficient resources to support grant submission

**Question**: What factors might contribute to funding disparities among historically underrepresented scientists?

# **Next Steps**

Conduct 4 more Working Group meetings





Focus on actionable strategies

Develop final Report of Recommendations



#### NATIONAL ADVISORY COUNCIL FOR NURSING RESEARCH WORKGROUP ON STRATEGIES TO STRENGTHEN INCLUSION IN NINR-SUPPORTED RESEARCH (WGI)



#### Inclusion Working Group Charge

Review participant inclusion in NINR-supported studies and consider the range of factors that may affect it, such as:

- Pl and research team expertise;
- Research topic;
- Study design,
- Inclusion and exclusion criteria,
- Recruitment strategies; and
- NINR policies and practices.

# Diversity, Equity, and Inclusion

#### **Inclusion in NINR-Supported Studies**

#### **Co-Chair: Dr. Cindy Munro**

- Dr. Liz Aquino
- Dr. Bob Atkins
- Ms. Mary Douglas Brown
- Dr. David H. Chae
- Dr. Elizabeth Cohn
- Mr. Adolph P. Falcón
- Rev. Patricia Fears
- Dr. Mary Magee Gullatte

**Co-Chair (NINR): Dr. Dionne Godette-Greer** 

- Mr. Michael Hahn
- Dr. Rosalba Hernandez
- Dr. Grayson N. Holmbeck
- Dr. Johnnye Lewis
- Dr. Wenjun Li
- Dr. Lorna H. McNeill
- Dr. Jesus Ramirez-Valles
- Dr. Catherine Timura (NINR Liaison)



#### NACNR Inclusion Workgroup Guardrails

#### NIH Revitalization Act of 1993 ensures that :

- Women are included as subjects in each project of such research
- Members of minority groups are included in such research
- Enrollment data must be reported by sex/gender, race and ethnicity from all grants and contracts with human subjects (grants only analyzing existing data excluded)

#### The 21st Century Cures Act, PL 114-255, enacted December 13, 2016

- Requires triennial inclusion reporting from all Institutes and Centers. Inclusion data is available through NIH Reporter.
- Requires entities conducting applicable clinical trials submit results of valid analyses by sex/gender, race, and ethnicity in Clinicaltrials.gov

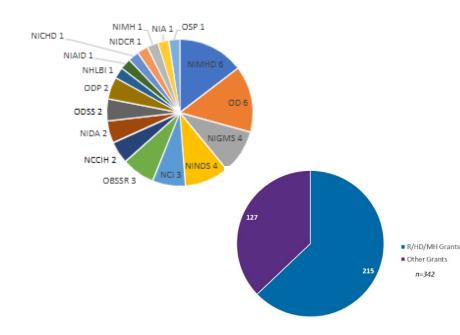
**Inclusion Across the Lifespan**, January 25, 2019 - Individuals of all ages, including children (i.e. individuals under the age of 18) and older adults, must be included in all human subjects research, conducted or supported by the NIH, unless there are scientific or ethical reasons not to include them



National Institute of Nursing Research

#### Workgroup Data Review

- NINR Institutions, Investigators and Participants
- Diversity and Inclusion of research participants comparing NINR to NIH
- Who is conducting research supported by NINR







- NINR support of Health Disparities, Minority Health and/or Rural Health Studies
- Active funding opportunity collaborations with other Institutes
- Shared published resources on participant inclusion in health research

### Multilevel Determinants of Inclusion

- Participant: Factors directly related to patient/client/participant obstacles to participation in clinical research and other non-clinical research designs
- Investigator: Factors related to investigator obstacles to inclusion of diverse study participants (e.g., trial design and site selection, proper understanding of NIH inclusion policy)
- Structural and Institutional: Factors, such as policies and resources, that shape investigator and participant enrollment patterns in research

#### **Barriers to Inclusion**

community

#### Participant

Lack of trust Limited resources (childcare, time off) Privacy concerns

Investment in Research topics not incentives for participation Research topics not important to community Ensuring data privacy

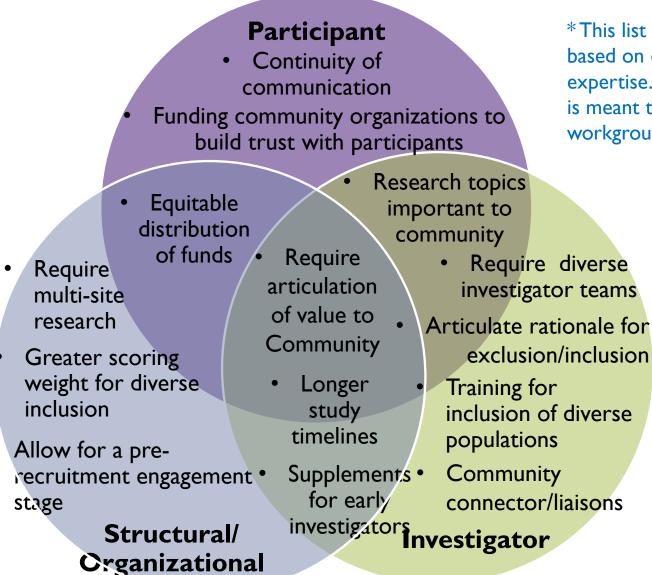
> Involve Community

Identify community partners Diverse Review Teams Structural/ Organizational

\* The list of potential barriers is not a comprehensive list. It is meant to serve as exemplars from workgroup discussions based on data and workgroup member expertise.

**Diverse** Pls

#### **Promoters of Inclusion**

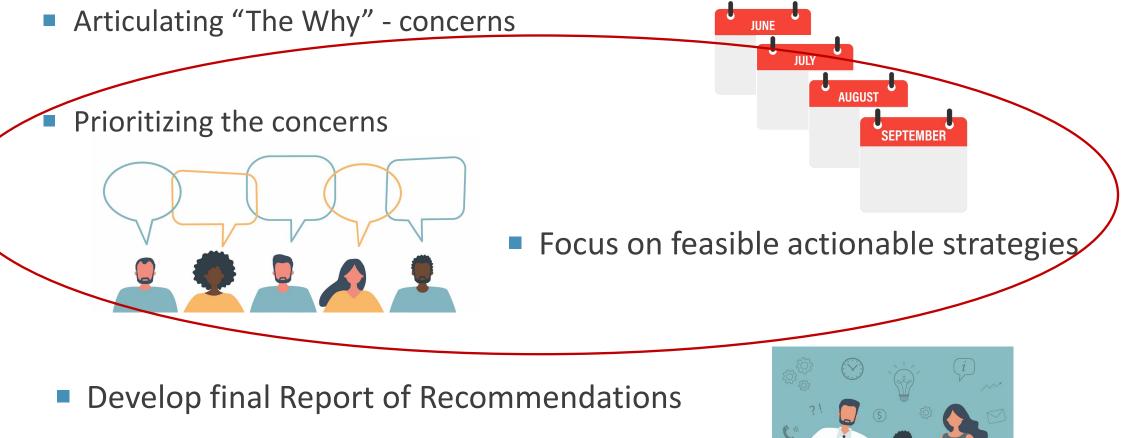


\* This list was generated by the workgroup based on data and workgroup member expertise. The list is not comprehensive and is meant to serve as exemplars from workgroup discussions.

# Next Steps for Workgroup on Inclusion

- Selection of priority barriers and recommended strategies
- Implementation of Select Strategies:
  - At each level, what might be accomplished:
    - —In 6 12 months?
    - —In 24 months?
    - -By the end of the current NINR Strategic Plan period (2022 2026)
- How might these strategies be evaluated? What metrics should be used?

#### NEXT STEPS









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