



## *Promoting Global Health Research Equity at NIH*

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# **An Update from the NIH Working Group on Global Health Research Equity**

The National Institutes of Health (NIH) recognizes the importance of promoting equity in global health research to advance the best science and achieve the greatest health impact. To this end, NIH is committed to supporting collaborative research that harnesses the rich diversity of the global biomedical workforce to advance locally relevant and sustainable solutions to global health challenges. Many NIH Institutes and Centers (ICs) have undertaken efforts to better understand current challenges to achieving more equitable international research collaborations and are exploring opportunities to further encourage and facilitate research that is conducted equitably, with full partnership among collaborators at all stages of the research process and for the advancement of global health.

For the purposes of this effort, we define “equitable research” as research collaboration that is inclusive, elevates underrepresented voices and groups, and demonstrates fairness of opportunity and fair process<sup>1</sup>.

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1. COHRED: Council on Health Research for Development. The Research Fairness Initiative. [RFI Summary Guide](#).

To facilitate this work, an NIH-wide Working Group on Global Health Research Equity was established, with representation from nine NIH ICs with significant commitments to and portfolios in global health research, particularly in low- and middle-income countries (LMICs). The following ICs are currently participating in this effort, but the working group will expand to engage other parts of NIH as our efforts progress.

**Working Group members include:**

John E. Fogarty International Center (FIC)  
National Cancer Institute (NCI)  
National Heart, Lung, and Blood Institute (NHLBI)  
National Institute of Allergy and Infectious Diseases (NIAID)  
*Eunice Kennedy Shriver* National Institute of Child Health and Human Development (NICHD)  
National Institute of Environmental Health Sciences (NIEHS)  
National Institute of Mental Health (NIMH)  
National Institute of Neurological Disorders and Stroke (NINDS)  
National Library of Medicine (NLM)

## NIH Working Group Mission Statement

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Identify and implement NIH actions that will encourage and enable global research collaborations grounded in these four attributes: a shared vision among all partners; equitable input and decision-making throughout the research process; fair access to data and sharing of benefits and research outcomes; and bi-directional learning and capacity strengthening.

We recognize that this work requires an ongoing commitment to:

- continuous humility, reflection, and action;
- actively listening to and elevating LMIC voices;
- addressing power imbalances;
- identifying and amplifying strategies for inclusive agenda setting; and
- harnessing scientific talent in LMICs.

## Request for Information on Promoting Equity in Global Health Research

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In May 2022, the NIH Working Group on Global Health Research Equity issued a Request for Information (RFI) to gather broad input on [approaches NIH might take to promote greater equity in global health research](#) conducted in LMICs. We received 186 responses from a diverse range of organizations, including academic institutions, government agencies, nongovernmental organizations, and professional associations, with a majority based at academic institutions. The respondents represented 46 different countries.

The [NIH Summary Report on Request for Information on Promoting Equity in Global Health Research](#), published in June 2023, details key themes and outlines barriers to equitable research extracted from the RFI responses, and includes summaries of the respondents' proposed solutions and strategies to address those barriers at NIH.

## Relevant Initiatives

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Several NIH ICs have been working to increase equity and diversity in NIH-supported global health research, as well as to strengthen capacity in key areas. While we highlight below a few illustrative examples of the critical work already taking place at NIH, we acknowledge that there is more to be done and that supporting more equitable global research will require continued learning and action.

### **Promoting Diversity, Equity, and Inclusion Across Global Health Research Teams**

Supporting researchers from diverse backgrounds and varied life experiences is critical to identifying the most effective, locally appropriate, and sustainable solutions to key global health challenges. Respondents to the RFI shared that a key strategy for improving equity in global health research is to encourage and support diversity and inclusion within the research teams themselves.

Through a recent [Notice of Special Interest \(NOSI\) for Administrative Supplements to FIC Training Grants](#), the [Fogarty International Center has awarded more than \\$1.7 million](#) in additional funding to currently funded grants to promote diversity, equity, and inclusion (DEI) in its research training programs. These supplements have the potential to reach hundreds of trainees from groups who are underrepresented among researchers, especially in LMICs, providing critical research training and supporting new partnerships with institutions in the areas where trainees live.

### **Building Grants Management and Administrative Capacity in LMICs**

Limited administrative infrastructure and lack of grants management capacity in LMICs significantly disadvantages LMIC investigators and LMIC institutions when applying for and administering NIH grants. RFI respondents emphasized the need for increased training and funding for grant writing, grants management, and research administration in LMICs. While there is a need to explore how we might bolster these efforts, several programs at NIH are already working to address this gap.

The [Global Infectious Disease Research Administration Development Award for LMIC Institutions](#) from the National Institute of Allergy and Infectious Diseases (NIAID) supports LMIC senior administrators to receive advanced training in NIH grants policy and financial management, including compliance with NIH scientific reporting requirements. This initiative aims to enable LMIC senior administrators to serve as institutional grants management leaders by providing them with access to best practices for managing awards, assisting administrative staff in developing, enhancing, and/or implementing standard operating procedures for tracking grant expenditures and compliance, and assisting or training other administrators within the region.

Additionally, NIAID holds annual regional post-award grants policy and training workshops to help foreign research partners successfully manage grants and cooperative agreements. While these workshops have helped many attendees, there are opportunities to increase the reach of these training opportunities.

## Simplifying NIH's Peer Review Framework

Respondents to the RFI expressed concern that the peer review process and funding decisions potentially reflect reputational and seniority bias and therefore foreign applicants who have previously received NIH funding, authored high impact papers, and/or had opportunities to visit NIH are believed to be more likely to receive funding. RFI respondents also highlighted the challenge of institutional bias and that well-established LMIC investigators and institutions are perceived to dominate the NIH LMIC grantee pool.

While we recognize the need to further evaluate LMIC participation and involvement in peer review for research in LMIC settings, NIH has recently taken steps to improve the peer review process for all applicants and to limit reputational bias. In October 2023, NIH announced it would implement a new [Simplified Peer Review Framework for NIH Research Project Grant \(RPG\) Applications](#) for all grant deadlines in effect after January 25, 2025. The simplified framework is intended to focus the reviewers on the scientific and technical merit of grant applications and to diminish the impact of reputational bias. Under the new framework, an investigator's expertise and resources are rated solely on whether they are sufficient to conduct the research in the suggested context. In order to provide resources and guidance in light of the impending changes for investigators and reviewers, NIH has launched a new [Simplified Review Framework Webpage](#) that includes training, events, and published resources.

## Using Language in Notices of Funding Opportunities (NOFOs) to Promote Equitable Partnerships

RFI respondents shared several strategies for achieving equitable partnerships, including recommendations related to NIH application requirements. Relatedly, several NIH ICs have embedded key components of equitable partnerships into application requirements within their notices of funding opportunities (NOFOs) and proposal scoring criteria.

For example, a recent National Institute of Mental Health (NIMH) funding opportunity—which aims to advance the development of novel and innovative implementation research to improve the availability and accessibility of post-acute services in LMICs—has embedded equitable partnerships, community engagement, and reciprocal learning into the scope and objectives of the program as well as the application requirements and scored review criteria.

Applicants to the NOFO titled, [Effectiveness and Implementation Research for Post-Acute Interventions to Optimize Long-Term Mental Health Outcomes in Low- and Middle-Income Countries](#), are required to have a program director/principal investigator with a primary appointment at an LMIC institution, and applicants are expected to engage key groups related to the implementation of the study, including patients or their representatives, ministries of health, policymakers, and local institutions. Moreover, within the research strategy section of all proposals, applicants are asked to describe both the team's

expertise on the social and cultural contexts of the LMIC where the study takes place and to describe participation and leadership of LMIC investigators and key personnel. Letters of commitment from all partner organizations are also required.

Within the review criteria for this opportunity, applications will be evaluated and scored on the extent to which key personnel have sufficient knowledge of the social and cultural contexts of the LMIC where the study would take place. They will also be scored on the extent to which the team includes appropriate participation and leadership by LMIC investigators, key personnel, and interested partners.

## Supporting Locally Driven Research Priority Setting

The RFI responses highlighted the need for research priority setting that aligns better with local agendas and elevates the voices of LMIC researchers and institutions in the priority-setting process. RFI respondents emphasized that funding priorities of high-income country (HIC) funders often do not reflect the needs and disease burden of LMICs. To help address this challenge, respondents suggested funders provide greater support and establish pathways through which researchers and institutions can identify locally relevant research questions and study designs that can be implemented.

The National Heart, Lung, and Blood Institute (NHLBI) strategically partners with the [Global Alliance for Chronic Diseases \(GACD\)](#) to address the global burden of hypertension. The GACD Hypertension 2.0 Program aims to support multidisciplinary and cross-sectoral research projects that test late-stage implementation research strategies for optimally and sustainably scaling up evidence-based hypertension interventions in LMICs, and/or in small island developing states. GACD 2.0 Hypertension grantees design and plan their research in collaboration with in-country government agencies, nongovernmental organizations (NGOs), and health care institutions and organizations. Through these collaborations, research teams are more able to respond to local needs, interests, and capacities; embrace cultural and health system factors; and increase likelihood of long-term sustainability.



# Next Steps

Since preparing and publishing the RFI summary report in June 2023, the NIH Working Group has been developing next steps to address the barriers and challenges highlighted in the RFI, in other peer-reviewed and gray literature, and in numerous consultations with LMIC and U.S. investigators. Utilizing the recommended strategies and solutions outlined in the RFI responses as a starting point, the Working Group has established five Action Groups on the following priority areas:

- Equitable Research Partnerships and Community Engagement
- Grants Application and Management Capacity
- Data Sharing, Management, and Scientific Capacity
- Peer Review
- Funding Opportunities, Mechanisms, and Application Requirements

Each of these Action Groups has representation from multiple ICs and will identify and prioritize possible steps that NIH ICs can collectively pursue, based on feasibility and potential impact. Notably, certain possible actions will be more appropriate for individual ICs to consider, and some may necessitate NIH-wide changes in policy and practice.

We will provide updates regularly and share progress as these efforts move forward. We appreciate the constructive input provided through the RFI and remain committed to understanding and addressing research inequities in our role as a U.S. public research funding agency.

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To learn more about NIH's ongoing work to promote research equity, please reach out to [blythe.beecroft@nih.gov](mailto:blythe.beecroft@nih.gov) and [jenna.durham@nih.gov](mailto:jenna.durham@nih.gov).

