What are people saying about ARRA and science?

This discussion, led by Jim Jorkasky of the National Alliance for Eye and Vision Research, and Mona Miller of the Society for Neuroscience, focused on the connection that needs to be made between the ARRA funding given to NIH, and the scientific advances that the funding helped to discover. They discussed the need to weave a strong story about increased funding advancing science, including what additional funding in the past (i.e. NIH’s doubling and the FY 2008 supplemental) has produced.

Full Membership Discussion

• The focus needs to be on both FY 2010 and FY 2011 in order to prevent a major cliff for NIH.
• Congressional offices have expressed that they are on NIH’s side, but they need specific examples of the science the funding has produced.
• Many on the Hill currently do not view additional NIH funding as urgent as other health care priorities that did not benefit from substantial ARRA funding. We as a community need to be sure to use the ARRA funding as a reason to move NIH up on the priority list.
• It is important to point out to offices that ARRA funding cannot fund all meritorious projects. Most ideas will require more than two years of funding, and therefore did not qualify for ARRA support. These projects require sustained, increased support of the regular NIH budget.
• It was suggested that it might be a good idea to hold another town hall meeting for the Ad Hoc Group, focusing entirely on ARRA funding.

What have we learned about the prospects for FY 2010?

This discussion, led by Jennifer Zeitzer from the Federation of American Societies for Experimental Biology (FASEB), was an opportunity for everyone to share what they have been hearing from various offices about what should be expected for the FY 2010 appropriations cycle. Jennifer began by expressing some of the concerns she has heard, including Congress’s belief that ARRA funding “took care” of NIH, the need to meet the President’s spending priorities, the Labor-HHS 302(b) allocation being under the President’s request, and the disconnect in scoring between OMB and CBO. She also noted that there will be pressure from appropriators for the community to support their bill, regardless of what it looks like.

Full Membership Discussion

• Various people reported that they have had positive reactions from Congressional offices for an ask of up to a 10% increase. They reported that offices have stressed that it is critical not to backtrack and lose the previous investment Congress has put in to NIH. Others briefly noted differing experiences.
• Before the President released his budget request, Ad Hoc members were finding it helpful to use his campaign pledge to double NIH and science research as a selling point for increases.
• Some offices have expressed a desire to have a unified funding request from the research community.
• Staffers have expressed concern about an emerging “trend” of some organizations requesting disease specific research increases for NIH.
• Some offices have said that FY 2010 is not going to be the problem, FY 2011 will be. Along those lines, it was pointed out that Congress has not expressed any real strategy for NIH in FY 2011, so it is essential that the community continue to push for increases for both funding years.
• Approximately 1/3 of the members in attendance raised their hands to indicate that their organizations have either already put out alerts to their membership about FY 2010 funding, or are planning to do so within the next week.

How are organizations preparing to react to the FY 2010 House and Senate bills?

This discussion, led by Jon Retzlaff of Lewis-Burke Associates, allowed members to discuss with one another how their organizations are planning to react to FY 2010 appropriations bills that may not meet the community’s expectations for NIH. This also included some discussion about the President’s desire to see 65% of the proposed increase for NIH go specifically to cancer and autism research.

Full Membership Discussion

• It is important to vocalize the consequences for low funding levels. This includes a loss of post-docs and graduate students, and also the loss of research capacity.
• Some participants expressed that their organizations cannot embrace a 1.4% increase, as the President has requested. They feel that funding NIH with an increase below inflation would have serious consequences for scientific research.
• It was pointed out that although many organizations feel that the appropriations bill should not legislate what diseases to spend the money on, organizations are reluctant to appear to oppose increases in research funding for diseases such as cancer and autism. Some feel it would be easier to fight for an increased total than the elimination of that proposal.
• Former Labor-HHS Appropriations Committee Chairman Rep. John Porter, who is currently the Chair of Research!America, was asked for his opinion about the discussion and possible reactions. He expressed a strong belief that organizations should not put out press releases going against Chairman Obey and the House bill. His suggestion is that organizations would do better if they waited a little while, then put out an email to their membership about their displeasure with the bill. Mr. Porter also believes that there should not be a big focus on the impact that funding cuts have on scientists, unless it is focused on the possible loss of young investigators. He suggested putting more of a focus on how low funding levels impact future/possible advances in human health.
  o Mr. Porter also discussed that NIH typically receives between 19 and 20% of the Labor-HHS budget. Even with the lower 302(b) allocation, 19.5% would still be a $1 billion
increase, which would be around 3%. He feels as though this proves that there is room in the allocation for a healthy increase, or at least an inflationary increase.

How can the community engage the Administration for FY 2011?

This discussion, led by Lyle Dennis of Cavarocchi-Ruscio-Dennis Associates, invited members to discuss their interactions with the Administration, as it relates to both FY 2010 and FY 2011. Besides the Ad Hoc Group Steering Committee, very few members in attendance had met with OMB, or any other Administration entity, to discuss NIH funding in FY 2011.

Full Membership Discussion

- It is important that while groups begin thinking about strategies for FY 2011 they do not surrender FY 2010.
- Talking about the need to retain young scientists is a concept that generally resonates well with Congressional offices.
- OMB appears to be more interested now than ever before in having open dialogues with interested groups. People are encouraged to set up meetings with them to discuss the FY 2011 budget.
- Possible people/entities that would be worth meeting with: Secretary Sebelius, Ellen Murray (nominee for Asst. Secretary for Budget at HHS), the incoming NIH Director, OSTP, Kavita Patel in Valerie Jarrett’s office, and Larry Summers.
- Groups and their members can begin to lay the groundwork now for the future, using tools such as Letters to the Editor and Op-Eds.
- There should also be a focus on global health, and the role NIH plays in that.
- It is important to keep stressing the integration of ARRA funding, using specific examples of scientific and human health advances.
- There should be a renewed focus on growing science spending in general.
- As groups continue to meet with offices, it is important to remember that we were all told that $10 billion in ARRA funding was too much, and NIH would never get it. Just because an office says your request is too much does not mean you shouldn’t continue to ask for it.
- This is a period of phenomenal scientific advances and opportunity. Groups must continue to stress this when talking about funding increases.
- Basic research at NIH has an impact on the environment and energy research as well.
- The RePORT tool on the NIH website is a great resource for state and local information to use in meetings. It is possible to break down research by Congressional district and institution. (http://report.nih.gov/index.aspx)