



October 29, 2020

The Honorable James E. Clyburn
Chairman, House Select
Subcommittee on the Coronavirus Crisis
2157 Rayburn House Office Building
Washington, D.C. 20515

The Honorable Steve Scalise
Ranking Member, House Select
Subcommittee on the Coronavirus Crisis
2157 Rayburn House Office Building
Washington, D.C. 20515

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The Hon. John Edward Porter

Dear Chairman Clyburn and Ranking Member Scalise,

On behalf of the Board and membership of Research!America, thank you for your leadership on the House Select Subcommittee on the Coronavirus Crisis. Your bipartisan efforts are extraordinarily meaningful. The Subcommittee's work can propel our nation to a position of unprecedented strength. This is a landmark moment for the United States: the easier path would be to respond as best we can to COVID-19, attempt to better prepare in the event of a similar crisis going forward, and let time lure us back into a false sense of security. The harder path -- which we believe is the right one -- is to up our game, stepping up boldly to preempt, outsmart, and out-innovate the panoply of unmet threats jeopardizing the health, wellbeing, and prosperity of the American people. COVID-19 is signaling the need for major, future-affecting change. You will play a key role in whether we act on or ignore that need.

Recently, Research!America held a three-day virtual National Health Research Forum focused on building a science strong future. We recognize that science alone cannot position our country for a future in which every generation lives healthier and longer, with the capability to defeat complex threats and without the society-fracturing impediments to broadly available economic opportunity, shared freedoms, and inalienable rights. But the truth is this: no society can avoid decline, much less expect to continue to lead and prosper, without the strengths in science and technology needed to respond to societal threats and innovate our way to sustained economic strength in an increasingly competitive global economy.

We hope the following insights, gleaned from the Forum, assist your efforts going forward.

Health equity should not an aspiration, it should be an imperative

A significant part of the Forum focused on the disproportionate impact of COVID-19 on communities of color, low-income individuals, and other historically disadvantaged groups. Forum speakers emphasized that unfortunately, other viruses and diseases have long affected these populations at rates greater than Caucasians. However, Forum participants argued that the data from the impact of COVID-19 can be leveraged to build back stronger and attack those deep-seated disparities, and that Congress should encourage the research community to boldly embed health equity

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missions in all activities. It was suggested that one way to go about this would be to direct federal grantmakers to hold grantees accountable when asked to help create an ecosystem of diversity and inclusion.

Dr. David Williams, Professor of Public Health, Harvard University T.H. Chan School of Public Health, and Chair, Department of Social and Behavioral Sciences, and a Forum participant, spoke about the need for a “Marshall Plan” for disadvantaged communities that expands access to public education, health care, housing, and employment options to combat entrenched health and socioeconomic disparities (a proposal he developed before the Forum).¹ It was pointed out that implementing this plan would also help to build trust in minority communities and must acknowledge past medical misuse of minority populations. Forum speakers acknowledged that while many efforts have been made in this space over the years, we have the ability to truly change this landscape and achieve meaningful, lasting health equity; now is the time to act.

The need for diversity and equity in clinical trials was another key topic during the Forum, as a space where the lessons of COVID-19 are ripe for strategic changes moving forward. Forum participants pointed out that recruitment of diverse volunteers for clinical trials has been a long-standing challenge but that, right now, actions can be taken to make tangible improvements. We note that important efforts are underway. Pharmaceutical companies like Johnson & Johnson and Eli Lilly have launched major efforts to increase diversity in clinical trials, including legislative proposals that would facilitate public-private sector communication and collaboration to realize this crucial goal. NIH and FDA are both working to increase clinical trial diversity, and Congress can and should reinforce these important efforts.

Forum participants maintained that there must also be a renewed commitment to encourage minority populations and women to participate in clinical trials, and that the clinical trial community must engage with trusted leaders across neighborhoods, towns, and cities to demystify the clinical trial process and address barriers to participation. One speaker suggested that one possibility to boost participation is to address “clinical trial deserts” by establishing partnerships between smaller community hospitals and large clinical trial epicenters. Another speaker said the potential future and use of decentralized clinical trials to improve participant recruitment and retention should be explored.

Also in the clinical trial space, participants suggested that the National Library of Medicine and the Agency for Healthcare Research and Quality (AHRQ) collaborate on conducting a full inventory of clinical trial capacity that can be utilized during public health emergencies. It has been widely reported that this pandemic compelled an array of businesses across industries to shift in real time towards using their capacity in the fight against COVID-19 - clothing companies shifted production to making masks and PPE for health care workers, and auto manufacturers reworked production to build ventilators and respirators for use in hospitals.² Forum participants emphasized that steps

¹ “Public health expert: ‘Marshall Plan’ needed to redress coronavirus race disparities,” <https://chicago.suntimes.com/coronavirus/2020/4/16/21222757/public-health-expert-marshall-plan-needed-to-redress-coronavirus-race-disparities>.

² “Gap Inc. is using its factories to make masks, gowns, and scrubs for healthcare workers,” <https://www.businessinsider.com/gap-to-make-masks-healthcare-workers-coronavirus-2020-3> and “Joint Statement on Collaboration to Increase Ventilator Production,” <https://media.gm.com/media/us/en/gm/home.detail.html/content/Pages/news/us/en/2020/mar/0320-coronavirus-update-4-vent.html>.

should be taken now to identify clinical trial resources and capacity that can be mustered for use in a future pandemic.

Capitalize on what we have learned to speed progress

This pandemic has upended Americans' daily lives to an extent not seen for generations. Forum participants emphasized that we would be remiss not to treat it like the life-altering watershed it is. At multiple points during the Forum, it was suggested that a 9/11-like commission should be created to investigate our national pandemic response from all angles.

Conversations during the Forum also highlighted other concrete steps that can be taken *now* to utilize what this pandemic has taught us to speed medical, health, and scientific progress. Several Forum participants stated that the U.S. should lead in developing global public private partnerships to support new vaccines, monitor biothreats, improve diagnostics, promote data sharing, and implement preventive measures. Participants pointed out that the pandemic has touched every country around the globe; now is the time to boost international, collaborative public-private partnerships to seed time-saving, cost-saving, and most importantly, life-saving response strategies for the next pandemic.

Forum discussions also brought up that public-private partnerships can and should play an even greater role than they do today in the domestic U.S. arena. Some Forum speakers suggested the creation of a National STEM Council to focus on collaborative STEM-based approaches to spur health, medical, and scientific progress. Specifically, speakers suggested the Council could be charged with coordinating STEM R&D and activities across federal departments and agencies to form multi-agency and public-private partnerships, focused initially on public health and health care; the environment and climate change; energy production, utilization, and storage; and agriculture, food, and water security.

Several Forum speakers also said that steps should also be taken to improve data sharing abilities between public health institutions, pointing out that viruses like the coronavirus do not respect state boundaries; accordingly, a patchwork public health system cannot work effectively and at the speed that urgent public health threats demand. Public health departments and institutions must be able to share data securely and efficiently to make informed, rapid health care decisions.

Several Forum participants also highlighted the need to strengthen the U.S. Food and Drug Administration's (FDA) role as a convener, engaging in a joint problem-solving approach. The FDA is one of the agencies at the crux of the fight against COVID-19. Multiple Forum speakers argued that FDA's resources should be expanded to allow for the continuation of the accelerated pace at which the agency is currently operating. Dr. Peter Marks, Director of the Center for Biologics Evaluation and Research (CBER) at the FDA, said during the Forum that "'I don't think we are losing a lot by moving faster. Even if we only retain some of what we've done we will be better off. In terms of efficiency, getting guidance [and] moving fast is a good thing."³

³ "Will COVID-19 Impact the Speed of Patient Innovation in the Long-Term?," <https://www.youtube.com/watch?v=XvuMSQDfs1U>.

Transparency and communication (and trust) are key

A great deal of Forum discussion focused around the point that there are a range of instances demonstrating that through science, our knowledge and understanding can evolve.⁴ According to multiple Forum speakers, the pandemic has brought that reality to the forefront and it is incumbent upon the scientific community and those in positions of leadership to help the public understand that science is essential to solving health threats such as COVID-19, and to also reinforce the fact that as science-uncovered knowledge grows, science-based policies and advice may, and should, evolve accordingly. New advice based on accumulated knowledge is not a signal that science is untrustworthy, but rather that it adheres to factual integrity. If new knowledge suggests new advice, it is in the societal interest to make that course correction.

During several Forum discussions, various speakers maintained that consistent and clear communication of scientific rigor is essential to combating misinformation and improving public awareness and understanding. Several speakers said that trusted community leaders should be equipped with that knowledge to help educate people in their neighborhoods, towns, and cities.

Similarly, across the three days of the Forum, a number of participants said that actions should be taken to address the very real barriers to vaccine acceptance, pointing out while there was a concerning rise in vaccine hesitancy before the pandemic, the causes and, therefore, the remedies may differ today. Experts in this area stated that key components of any successful vaccination effort require 1) identifying the concerns of particular segments of the population; 2) tailoring messages and incentives to address those concerns; and 3) reaching out through trusted sources – health care providers, public health departments, and others in the community. They noted the need for research in order to develop effective responses to concerns about the COVID-19 vaccine. Congress can charge federal agencies to equip those on the ground who are responsible for COVID-19 vaccination with the communication tools needed to address both longstanding and new barriers to vaccine confidence.

The areas highlighted in this letter are by no means exhaustive. We hope the Subcommittee will take these policy ideas into consideration as it advances its vital work. Thank you again for your leadership and we stand ready to assist you in your efforts.

Sincerely,



President and CEO
Research!America

⁴ “Are eggs good or bad for you? New research rekindles the debate,” <https://www.statnews.com/2019/03/15/are-eggs-good-or-bad-for-you-new-research-rekindles-the-debate/> and “Dietary fat and cardiometabolic health: evidence, controversies, and consensus for guidance,” <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6053258/>.