

April 9, 2021

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Dear Dr. Bernard, Dr. Johnson, and Dr. Tabak:

On behalf of the Association for Psychological Science (APS), a 30,000-member scientific society dedicated to advancing research psychology for the benefit of science and society, I thank the National Institutes of Health (NIH) for launching the UNITE initiative. Properly conceived and implemented, UNITE can drive the transformative changes required to build a diverse and inclusive health sciences workforce and reduce the bias, inequity, and disparity in medical research, patient care, and health outcomes.

There is a need for a robust and sustained conversation within the scientific community about the biases inherent in how we design and conduct research. There is a need, for example, to consider how studies are classified and how study participants are recruited. New standards and practices are required to help reduce biases. NIH can help initiate these conversations for different fields by providing support for focused meetings and workshops. In addition to scientists from a particular field, these conversations should be inclusive of individuals from historically disadvantaged and underrepresented groups and engage historians of science, ethicists, and philosophers of science.

The importance of psychological science research to improving human health warrants greater investments and support from all NIH divisions. Behavioral science is centrally important to promoting healthy behaviors, supporting medical interventions, and reducing inequities and disparities in health from research to patient care. The NIH Office of Behavioral and Social Sciences Research, with appropriate new resources and authority, can provide NIH with insights about new research investments that will help achieve UNITE initiative goals.

Historically underrepresented scholars in biomedical and behavioral science face many challenges throughout their careers. A [2020 article published in *Perspectives on Psychological Science*](#) notes that one of these is in peer review: Systemic inequality exists among journal editors, authors, and even research participants, write the authors. This influences the careers of underrepresented scientists as well as their research. Scientists who tackle these challenges—many of whom come from research psychology and allied disciplines—are frequently resource limited. NIH can address these issues by providing additional funding to support research and to translate research findings into interventions. Additionally, NIH can play an important leadership role by recognizing scientists for their work in these areas.

NIH should foster conversations about how different models for the publication of research may impact equity and inclusion. Little attention has been paid to how or whether different business models for scientific journal publication support or hinder the ability of scientists, particularly early career scientists, and those from under-resourced institutions, to publish their research. The scientific community must

fully consider these issues and ensure that efforts to increase access to scientific publications do not have an unintended consequence of creating a new hurdle to publication for scientists from historically underrepresented groups and institutions. We encourage UNITE to support conversations among funders, publishers, librarians, and scientists to ensure that evolving scholarly publication business models increase equity and inclusion and do not provide barriers for individuals from historically disadvantaged groups.

There is a science to improving diversity, equity, and inclusion, and current and ongoing NIH efforts must be based on the best evidence. We appreciate NIH's inclusion of psychological and other behavioral scientists in the UNITE initiative. It is important that psychological scientists are involved in efforts to develop and implement UNITE. Research conducted by psychologists provides an understanding of factors such as implicit and unconscious bias, social processes, and workplace dynamics that are central to promoting equity and inclusion. We encourage NIH to do more to fund the behavioral and social sciences that inform these issues.

A 2019 article by Travis A. Hoppe and colleagues in *Science Advances* found that one cause of disparities is that African American and Black scientists submit grant proposals to NIH on topics with lower award rates. These topics are described by key words such as socioeconomics, health care, disparity, lifestyle, psychosocial, adolescence, and risk. These are areas within the behavioral and social sciences. These data indicate that NIH should do more to fund these areas of research.

As your committees work to develop UNITE, I encourage you to actively engage with scientific societies and professional associations. These organizations publish scientific journals, convene scholarly meetings, engage in education and public outreach, and provide mentoring and professional development opportunities to current and future scientists. These programs and services are central elements of our scientific infrastructure and should play a central role in building a more equitable and inclusive research community.

We encourage UNITE to direct resources to support focused meetings within scientific conferences and to provide additional opportunities for individuals from under-resourced institutions to participate in professional communities. Resources should be made available to under-resourced institutions and scientists to help them reduce teaching or administrative assignments at their home institutions to participate in the leadership of scientific community organizations and initiatives. We recommend that NIH support and encourage its scientists and trainees to participate in scientific society initiatives, including mentoring programs.

Thank you for your consideration of these recommendations. Please do not hesitate to contact me if APS can provide additional information or contribute in other ways to the development and implementation of UNITE.

Sincerely,



Robert Gropp, PhD
Executive Director