

# Advancing the Nation's Health Needs: NIH Research Training Programs

# The Starting Point

- Available data
  - Data are old and incomplete
- Work force models
  - Indicate present status and tend to self-balance
  - Foreign input/output question mark
- Extrapolation into the future
  - Depends on unknown/uncontrollable factors
- Best judgment
  - Diverse and expert committee
- What can reasonably be done

# Recognized Values of the NRSA

- Attracts quality people into biomedical research
- Directs training into specific areas
- Establishes training standards
- Provides support for emerging areas
- Promotes interdisciplinary research
- Provides trainees the opportunity of exploring different areas of research

# Primary Recommendations

- For the three major areas, the total number of NRSA positions should not fall below the fiscal 2003 level
  - System appears in balance – low unemployment, postdoc population stable or declining
  - Should increase in proportion to total NIH extramural research funding
  - Importance of basic research
  - Research grant support for graduate students/postdoctorates should not be converted to NRSA, since a diversity of support/training mechanisms is important

# Additions to Current Programs

- Size and scope of MSTP Program should be expanded by at least 20%
  - Highly successful
  - Outstanding pool of students
  - Training in more diverse areas desirable
- Training programs for physicians to learn the tools of clinical research
- Behavioral and social sciences training programs should be integrated across NIH

# Interdisciplinary/Emerging Fields

- A standing committee should be charged with advising NIH on emerging fields of research
- Quantitative subject matter should be required for all training programs
- Individual NRSA should be targeted for emerging areas

# Career Development

## Restructure K Award Programs

Consistency across NIH is needed and they should address:

- Transition between postdoctoral study and independence
- Provide beginning faculty with free time for research
- Allow senior faculty for moving into new areas
- Bridge personal demands (e.g. child bearing)
- Provide research training for clinical personnel

# Career Development

- Postdoctoral fellows should receive employee benefits
- Develop programs with other Federal agencies to encourage students at pre-college level to pursue science/medicine
- Underrepresented racial and ethnic minorities:
  - Supplements to training grants for undergraduate/high school students/teachers
  - Need to concentrate on K-12; college is too late

# Oral Health Research

- Pool of dental students who are interested in research is almost nonexistent
- Dental schools need mind-set change to encourage research in faculty/curriculum
- The DSTP program should be fully funded
- Research component of loan forgiveness program requires better documentation

# Nursing Research

- In nursing, as in other clinical fields, educational programs need to place a greater emphasis on research
- A pool of students is not available
- Research starts too late in the career cycle
- A new T32 programs need to be added that focus on moving nurses into research early in their careers

# Health Services Research

- Health care improvements are a national and international priority
- Health care delivery practices need analysis
- Training should be expanded and strengthened across NIH
- AHRQ training program should be expanded

# Additional Recommendations

- A standing committee should monitor biomedical, clinical, and behavioral and social sciences research personnel
  - To evaluate the training of such personnel
  - To assess the number and nature of research personnel required
  - To assist in the collection of data
  - To make recommendations to NIH
- Additional data collection, analysis and tracking recipients of training support by NIH