

The National Institutes of Health (NIH) excels at basic and early-stage biomedical research, unlocking scientific discoveries that can later be translated into lifesaving global health technologies by the private sector, nonprofits, and other US agencies. While NIH primarily facilitates basic research on global health challenges through intramural programs and external grants to universities, nonprofits, and other organizations across the United States, its ongoing investment in clinical trials for HIV/AIDS and, increasingly, trials for malaria and tuberculosis products, also makes it one of the biggest global funders of clinical development in each of these disease areas.

NIH is the leading US medical research institution; a respected, world-class scientific powerhouse; and the world's largest single public funder of both biomedical research at large and research focused on neglected diseases. Its work to advance research for global infectious diseases, through the National Institute of Allergy and Infectious Diseases (NIAID); to coordinate crosscutting HIV/AIDS research, through the Office of AIDS Research (OAR); and to strengthen international research capacity, through the Fogarty International Center (FIC), forms the building blocks of future drugs, vaccines, and diagnostics that save and improve lives around the world.

NIH has led the US scientific response against COVID-19, convening public-private partnerships, setting research agendas, and coordinating major clinical trials. Much NIH-funded research that is not related to COVID-19, however, has been stalled or set back as resources and expertise have been diverted to addressing the pandemic, leading to urgent requests for research relief funding from Congress. Beyond COVID-19, additional policy changes and funding are necessary to meet longer-term needs and emerging priorities.

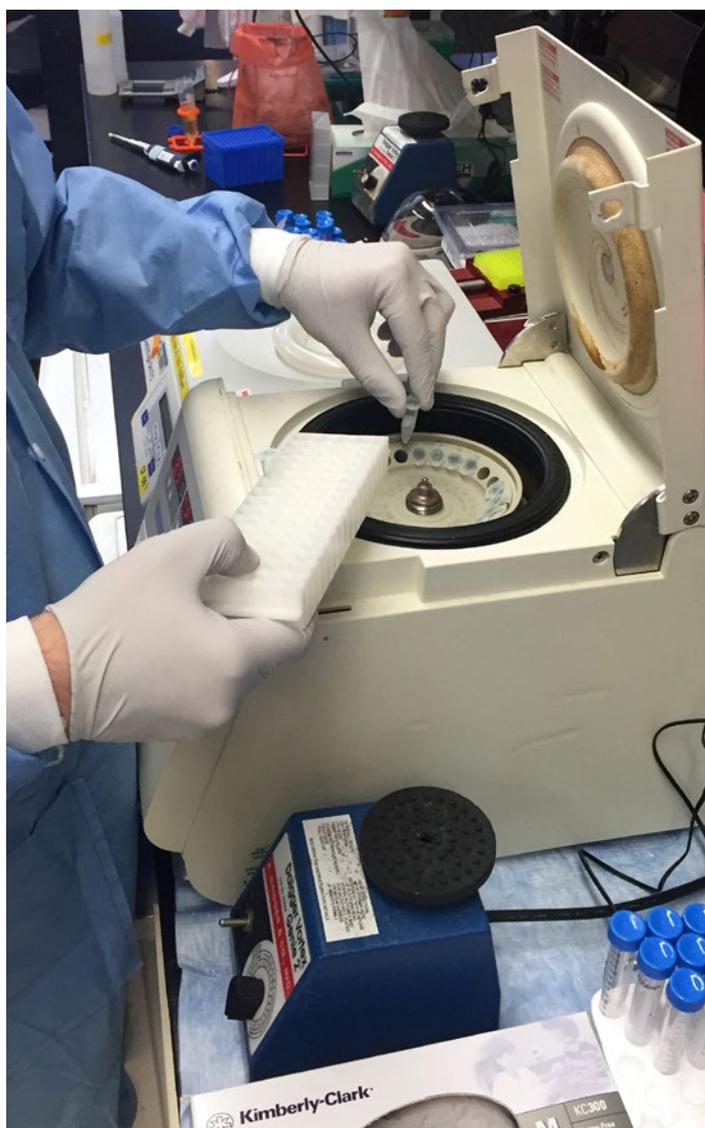


Photo credit: NIH NIAID

Policy recommendations

Expand focus on product development and translational research for health areas that lack a commercial market.

Neglected diseases are so named because their disproportionate impact on the world's poorest leads to a lack of commercial incentives strong enough to attract private-sector investment in research and development (R&D). The challenge is similar for emerging infectious diseases with epidemic potential; there is no market of patients until the disease spreads and becomes an epidemic. Developing new tools to address these diseases is unfeasible without initial government funding. NIH typically funds basic research of new medical products, which works well for disease areas where private-sector companies will eagerly invest to bring nascent discoveries from NIH-funded laboratories to market. For neglected and epidemic-risk diseases, though, fewer companies are willing to take the risk of funding the late-stage development of new products. NIH should build on its existing funding of late-stage research for emerging infectious diseases, like COVID-19 and Ebola, and select neglected diseases like HIV/AIDS, malaria, and tuberculosis. By expanding funding or co-funding of late-stage development of new products for the full spectrum of neglected diseases, NIH could provide the final push required to get these innovations across the finish line.

Progressively increase funding for the Fogarty International Center by \$10 million each fiscal year.

FIC is a critical conduit between researchers in the United States and their colleagues around the world. The center strengthens international research and laboratory capacity, facilitates global research partnerships, improves surveillance of emerging infectious diseases, and trains the scientists who make critical contributions to long-standing global public health challenges such as HIV/AIDS and emerging threats like antimicrobial resistance, Zika, Ebola, and COVID-19. FIC accomplishes this work with less than one-quarter of one percent of the NIH budget.

While funding for NIH increased by 38 percent between fiscal years 2015 and 2020, funding for FIC increased by only 19 percent. In fiscal year 2021, FIC was appropriated \$84 million. An additional \$10 million should be appropriated to FIC in each of the next five fiscal years to support sustainable growth and long-term planning in pursuit of its mission to build research capacity in partner countries.

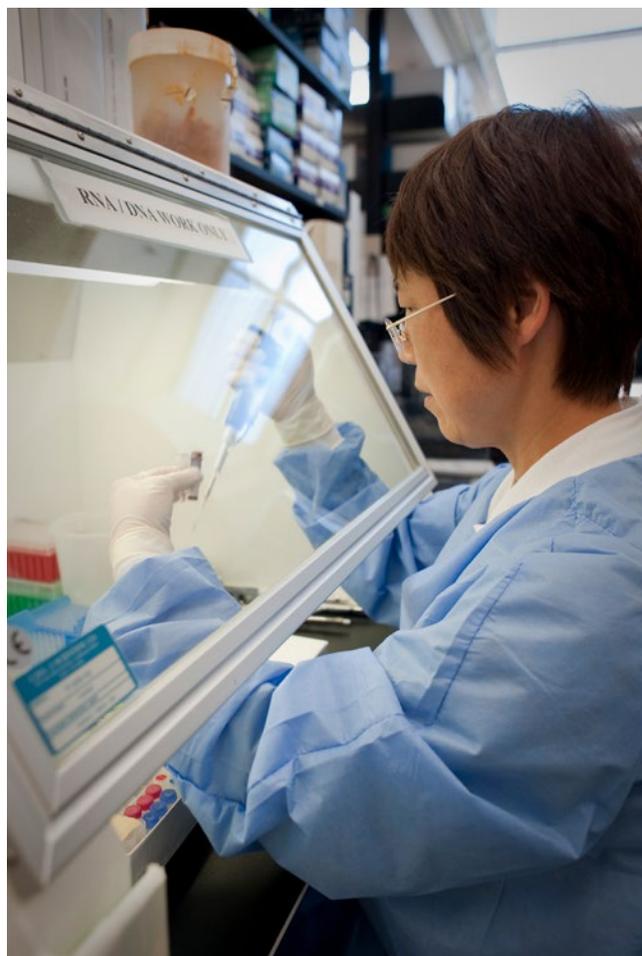


Photo credit: NIH NIAID

Sustain funding growth for the National Institute of Allergy and Infectious Diseases and the Office of AIDS Research.

Most NIH funding for neglected disease R&D is routed through NIAID, which conducts research across a range of global infectious disease threats, including HIV/AIDS, malaria, tuberculosis, neglected tropical diseases, and influenza, and epidemic diseases like Zika, Ebola, and COVID-19. Appropriations for NIAID have historically increased at approximately the same rate as those for NIH. Congress must continue to robustly fund NIAID to ensure continued progress in neglected disease R&D. Most funding for HIV/AIDS R&D is overseen by OAR, which coordinates HIV/AIDS-related research taking place across all centers at NIH, including NIAID. OAR submits an annual professional judgment budget estimating the funding needed to fulfill the scientific potential of HIV/AIDS research. OAR should receive appropriations at or exceeding the levels outlined in its annual professional judgment budgets.

Review impacts on global health research from COVID-19 and provide enhanced funding and grant flexibilities to mitigate those impacts.

All life sciences R&D has been impacted by the COVID-19 pandemic, but R&D for neglected diseases has been particularly disrupted, as COVID-19 has siphoned off a significant amount of expertise and attention, challenged international collaborations, and diverted the sector's already limited and tenuous funding, while raising the costs of doing research. Both the NIH Office of the Director and Congress should investigate these impacts and the policy and funding changes needed to mitigate them.

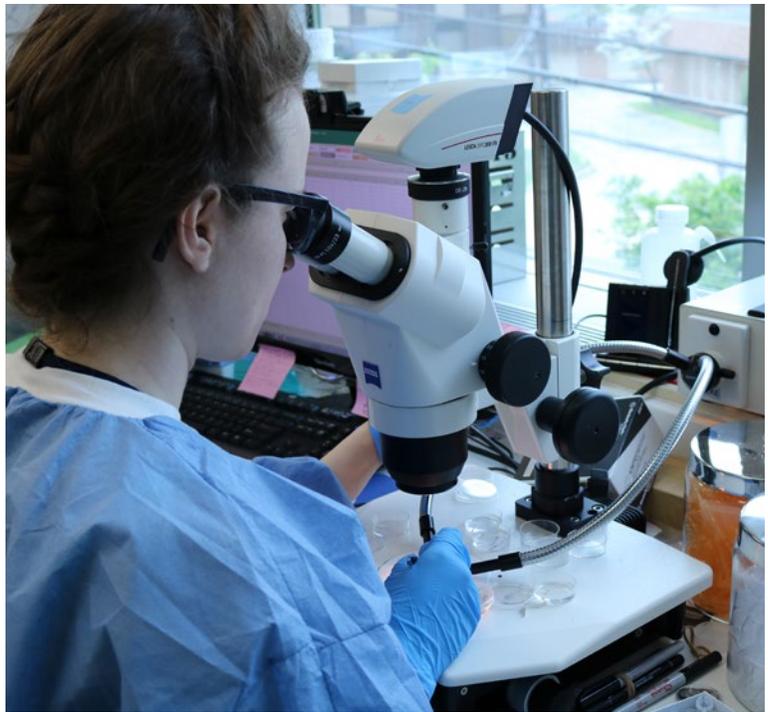


Photo credit: NIH NIAID