

## Building Back Better Townhall July 22, 2020 – follow up notes

Thanks to all who participated in the [Building Back Better Townhall](#). There were some exciting ideas shared as well as some follow-up dialogue via email that I am bringing to the entire listserv.

- [Here](#) is the recording of that session.
- Links to some thought-provoking pre-reading were posted on the website (“[Saving Science](#)” and “[Asking the Right Questions in Alzheimer’s Research](#)”).

Below are thoughts shared in the webinar and in follow up emails. Should we have a series of follow up discussions on a particular topic? Please join the discussion as to how we can capitalize on the ideas shared in the Townhall!! Add your thought to these ideas and suggest next steps for HRA.

1. **Grantee Institution Eligibility:** Can we expand what the criteria for an eligible grantee institution is? We might need to look outside academic medical centers to make a difference.
2. **Generating Transformative and Actionable Ideas:** What strategies might funders take to incentivize scientists to rethink their own approaches and suggest ways for transformative change without necessarily tying it to grant funding? How to we incentivize thinking of strategies THEN running the experiments?
  - Can HRA sponsor general survey/essay competition with a prize for best answer, like a cash prize and/or publication in a journal (with an option to be anonymous)?
  - What about a competition among teams/departments to help go from idea to implementation?
3. **Foster more equity in health outcomes:** There is an immense opportunity to make a difference in the fact that health disparities have much to do with racial disparities. Can the biomedical research community (funders in particular) be more concrete about how we are responding to the raised conscience about systemic racism? Here are just 3 ideas. What are others?
  - We won’t support clinical trials that aren’t representative of the people impacted by the disease.
  - Look at the diversity of our own portfolios and extend out outreach to researchers who haven’t been engaged traditionally.
  - How are we engaging diverse patient populations in the grant review process?
4. **Sending Signals to Researchers: A first step in changing behavior:** If we want our researchers to change their behavior, we need to send them clear signals that this new behavior is valued.
  - The NASEM Roundtable is encouraging funders and institutions to do that for Open Behavior. Suggested text is included in [Sending Signals Text: From NASEM Roundtable](#).
    - Can we also add examples of when they have published negative results or done other work such as a replication study?
    - Can we encourage reviewers to take these non-traditional forms of impact into account when assessing track record?
  - Can we use this tactic to foster behaviors that address **racial inequities and health disparities**?
    - If you are recruiting for clinical trials, are you recruiting a patient population that reflects the population impacted by the disease?
    - Ask grantees about diversity of their trainees and their advocacy/mentorship practices.
    - Ask institutions to provide data about diversity of researchers and students, and their outreach efforts to diverse populations, etc.
    - Tie overhead (or another reward) to metrics linked to diversity (or open science).
    - Encourage reviewers to take these non-traditional forms of impact into account

If we want to change behavior, we need to make it clear what behavior we value - first by asking, then by rewarding/penalizing. We could even be pushing against an open door and institutions/researchers want to make changes and funder pressure will spur them to do it.

5. **COVID 19: Can funders foster how COVID will change biomedical research** such as learning how to:
  - Decentralize clinical trials
  - Better use telemedicine
  - Accelerate drug/vaccine/therapeutic discovery