

The Society for Women's Health Research (SWHR) is pleased to have the opportunity to submit the following testimony urging renewed federal investment in biomedical research, specifically women's health and sex differences research, within the Department of Health and Human Services (HHS). We request that for fiscal year (FY) 2014, Congress fund the following agencies and the office of women's health programs at:

- **Agency for Healthcare and Research Quality (AHRQ) – \$430 million**
- **National Institutes of Health (NIH)-\$32 billion**
- **Office of Research on Women's Health (ORWH)-\$43.3 million**
- **HHS Office of Women's Health- \$34.7 million**
- **CDC Office of Women's Health- \$478,000**

SWHR is the thought leader in research on biological differences in disease and is dedicated to transforming women's health through science, advocacy, and education. We believe that sustained funding of a federal research agenda that is inclusive of biomedical and women's health research programs is absolutely essential if the U.S. is to meet the needs of its citizens, especially women. SWHR realizes that the federal government is focused on reducing our federal deficit; however, proper and sustained investment in health research will ultimately save valuable dollars that are currently wasted on inappropriate treatments and procedures.

Past investments in biomedical research propelled the U.S. into the position of world leader in biomedical research. These investments resulted in the mapping of the human genome and made it possible for scientists to discover the biological and physiological differences between women and men. The study of how these differences impact health and medicine, known as sex based biology has been a fundamental part of SWHR's mission since its inception. This research confirms that biological sex plays an important role in disease susceptibility, prevalence, time of onset and severity. Sex differences are evident in cancer, obesity, heart disease, immune

dysfunction, mental health disorders, and many other diseases. Medications can have different effects in woman and men, based on sex specific differences in absorption, distribution, metabolism and elimination. When translated into medical practice, this research will result in a personalized approach to medicine, which will transform medical practice in the U.S.

National Institutes of Health- In the past decade; NIH has faced a 20.8% decrease in buying power as a direct result of budgetary cuts. More than 83% of NIH funding is spent in communities across the nation, creating jobs at more than 3,000 universities, medical schools, teaching hospitals, and other research institutions in every state. The number of new grants funded by NIH has dropped steadily with declining budgets; and in 2012, the NIH Director, Francis Collins, reported that grant funding was at an all-time low of 20% .

A shrinking number of available grants put American scientists out of work. With a limited avenue to secure research funding, scientists will have little choice than to pursue opportunities outside of academic research, resulting in the loss of skilled bench scientists and researchers to countries like China, who continue to heavily invest in research. The U.S. desperately needs these researchers and scientist to meet the needs and challenges of an aging U.S. population.

Innovation, which can take years to bear fruit, only occurs with continual research investment. It is estimated that U.S. health spending will account for nearly one-fifth of the U.S. economy by 2021. Given this timeframe, investments made today will just be coming onto the market. Rather than implementing across the board budget cuts that will limit future treatments, SWHR believes that Congress should invest in specific areas of cost savings that will lower the overall cost of healthcare, which is the largest driver of the federal deficit. Research into new and

innovative strategies that are proven to prevent, treat, or cure chronic conditions is perhaps the single most cost effective strategy in reducing our federal deficit.

SWHR recommends that Congress set, at a minimum, a budget of \$32 billion for NIH for FY 2014. Further we recommend that NIH, with the funds provided, be mandated to report sex/gender differences in all research findings, including those studying a single sex but with explanation and justification. Additionally, NIH's mandate should be expanded to include women in all phases of basic, clinical and medical research. Current practice only mandates sufficient female subjects only in Phase III research, and researchers often miss out on the chance to look for variability by sex in the early phases of research, safety and effectiveness is determined.

Office of Research on Women's Health - ORWH is the focal point for coordinating women's health and sex differences research at NIH, and supports innovative interdisciplinary initiatives that focus on women's health and sex differences research. ORWH works in collaboration with NIH Institutes and Centers (IC's) to implement their programs and co-fund research that incorporates sex and gender differences into their ongoing studies. ORWH also promotes opportunities for and support of recruitment, retention, re-entry and advancement of women in biomedical careers.

- The Building Interdisciplinary Research Careers in Women's Health (BIRCWH) is an innovative, trans-NIH career development program that provides protected research time for junior faculty by pairing them with senior investigators in an interdisciplinary mentored environment. To date, over 490 scholars have been trained in 39 centers, and

80% of those scholars have been female. These centers have produced over 4,800 publications, and have been awarded 346 NIH research grants.

- Specialized Centers of Research on Sex and Gender Factors Affecting Women's Health (SCOR) are designed to integrate basic and clinical approaches to sex and gender research across scientific disciplines. These programs have resulted in over 665 articles, reviews, abstracts, book chapters and other publications.
- The Advancing Novel Science in Women's Health Research (ANSWHR) program promotes innovative new concepts and interdisciplinary research in women's health research and sex/gender differences. ORWH partners with 23 NIH IC's, to broaden all areas of women's health and sex differences research.
- Administrative Supplements for Research on Sex and Gender Differences, is a new trans-NIH initiative to broaden the field of sex and gender differences research. It allows ORWH to leverage on-going grants by adding new dimension to the study.

To allow ORWH's programs and research grants to continue make their impact on research and the public, Congress must direct that NIH continue its support of ORWH and provide it with a \$1 million dollar budget increase, bringing its FY2014 total to \$43.3 million.

Health and Human Services' Office of Women's Health- The HHS OWH is the government's champion and focal point for women's health issues. It works to redress inequities in research, health care services, and education that have historically placed the health of women at risk. Without OWH's actions, the task of translating research into practice would be only more difficult and delayed. **Considering the impact of women's health programs from OWH on**

the public, we urge Congress to provide an increase of \$1 million for this office, a total of \$34.7 million for FY 2014.

Under HHS, the agencies currently with offices, advisors or coordinators for women's health or women's health research include the Food and Drug Administration (FDA), Centers for Disease Control and Prevention (CDC), Agency for Healthcare Quality and Research (AHRQ), Indian Health Service (IHS), Substance Abuse and Mental Health Services Administration (SAMHSA), Health Resources and Services Administration (HRSA). These offices do important work, both individually and in collaboration with other offices and federal agencies to ensure that women receive the appropriate care and treatments in a variety of different areas. **In a time of limited budgetary dollars, Congress should invest in offices that promote working in collaboration with other agencies, which shares much needed expertise while avoiding unnecessary duplication. SWHR recommends that they are sufficiently funded to ensure that these programs can continue and be strengthened in FY 2014.**

In conclusion, Mr. Chairman, we thank you and this Committee for its support for medical and health services research and its commitment to the health of the nation. We look forward to continuing to work with you to build a healthier future for all Americans.