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Submitted for the Record

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Before the House Appropriations Subcommittee on Labor, Health and Human Services, Education, and other Related Agencies

The Society for Women's Health Research (SWHR) is pleased to have the opportunity to submit the following testimony urging renewed investment in scientific and medical research within the Department of Health and Human Services (HHS). For almost 25 years, our organization has been considered 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 a robust federal research agenda that is inclusive of women's health research is critical for the U.S. to meet the needs and expectations of its citizens. We request that for fiscal year (FY) 2015, Congress fund the following agencies and programs at the following levels:

- Agency for Healthcare and Research Quality –\$471 million
- Centers for Disease Control and Prevention- \$6.904 billion
- Health Resources Services Administration- \$6.113 billion
- National Institutes of Health -\$32 billion
- Substance Abuse and Mental Health Services Administration- \$3.6 billion
- Office of Research on Women's Health at NIH-\$42 million
- HHS Office of Women's Health- \$35 million

SWHR remains concerned with the ramifications of the Budget Control Act and sequestration. Funding levels for Department of Health and Human Services (HHS), were significantly cut and those agencies that fall underneath the umbrella of HHS; The Agency for Healthcare Research and Quality (AHRQ), Centers for Disease Control and Prevention (CDC), Health Resources Services Administration (HRSA), National Institutes of Health (NIH), Substance Abuse and Mental Health Services Administration (SAMHSA), all play vital roles

in improving and protecting the health of Americans but are forced to do more with less funding. **Continued cuts to public health agencies decrease public health emergency preparedness and response capabilities, reducing funding for states to monitor air quality and offer mental health services, and increasing the risk for infectious disease outbreaks. These are essential public health services that save lives and protect our health.** Currently, healthcare spending is the largest driver of the federal deficit. By 2021, estimates indicate that this spending will account for nearly one-fifth of the U.S. economy. Proper and sustained Congressional investment in medical and scientific research can ultimately save valuable healthcare dollars that are wasted on inappropriate and ineffective treatment. We realize that the current budgetary environment limits the amount of monies available for a substantial increase; however, the benefit from every dollar invested in medical research outweighs the cost many times over and is, perhaps, the single most cost effective strategy in reducing our federal deficit.

Past investments in medical research have allowed scientists to begin unraveling the biologic and genetic underpinning of disease. This research has shown that biological sex impacts every organ of the body, and plays an important role in disease susceptibility, prevalence, time of onset and severity. Sex differences are evident in all major disease categories, including cancer, obesity, and heart disease. These differences are also evident in drug absorption, distribution, metabolism and elimination. The medical community has now begun to tailor treatments to meet the needs of individual patients, taking the first step towards truly personalized medicine.

*National Institutes of Health-* NIH serves as the America's premier medical research agency and is the largest source of funding for biomedical and behavioral research in the world. Many of the medical advances in recent decades are direct results from investments in the agency. Unfortunately, years of flat-funding, without controlling for rising inflation, has meant that NIH's overall budget has decreased by 10% between 2004 and 2014, and its purchasing power has decreased by 22%. This number does not just impact NIH's campus in Maryland. Approximately 85% of NIH funding is spent in communities across the country, creating jobs at

more than 3,000 universities, medical schools, teaching hospitals, and research institutions. In 2013, NIH funded 750 fewer grants than in 2012 and grant funding fell to an all-time low of 20%. A shrinking number of available grants put scientists out of work. With limited opportunities for research funding, scientists have little choice than to pursue opportunities outside of academic research in the U.S, resulting in the loss of skilled bench scientists and researchers to Asia, the European Union and the United Kingdom, who continue to heavily invest in research.

Unfortunately, the Administration's request of a 0.7% increase doesn't make much headway in reversing the \$1.5 billion cut the agency sustained under sequestration in FY 2013, nor does it keep up with biomedical inflation rate, projected by the HHS's Biomedical Research and Development Price Index, to be 2.2%. Once that inflation rate is taken into account, the Administration's budget request results in another cut to the Agency.

**SWHR recommends that Congress set, at a minimum, a budget of \$32 billion for NIH for FY 2015.**

**Further we recommend that Congress expand NIH's mandate on the inclusion of women in basic research 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.

*Federal offices of women's health-* The offices of women's health within the federal health agencies do critical 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. Under HHS, the agencies currently with offices, advisors or coordinators for women's health or women's health research include the AHRQ, CDC, FDA, HRSA, Indian Health Service (INS), and SAMHSA. 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 these offices that promote working in collaboration with other agencies, which shares much needed expertise

while avoiding unnecessary duplication. **SWHR recommends that these offices be sufficiently funded to ensure that these programs can continue to provide much needed services to women and their families in FY 2015.**

*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 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 pairs junior faculty with senior investigators in a mentored environment. Approximately 500 scholars, the majority of them female, have been trained at 39 centers and have produced approximately 5,000 publications. ORWH's administrative supplements for research on sex and gender differences, a trans-NIH initiative to broaden the field of sex and gender differences research, adds new dimensions to on-going studies. The 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 and has resulted in over 650 articles, reviews, abstracts, book chapters and other publications. **To allow ORWH's programs and research grants to continue make their impact on the research community, Congress must direct that NIH continue its support of ORWH and provide it with a \$1 million dollar budget increase, bringing its FY2015 total to \$42 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 address inequities in research, health care services, and public education gaps, which 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 \$35.7 million for FY 2015.**

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.