

March 17, 2023

PCORI
1828 L Street, NW, Suite 900
Washington, DC 20036

[By online submission at workforcedevelopment@pcori.org]

RE: RFI on Enhancing Workforce Development to Accelerate Patient-Centered Outcomes Research (PCOR)

The Infectious Diseases Society of America (IDSA) appreciates the opportunity to comment on PCORI's RFI to enhance and grow the PCOR Workforce. IDSA represents over 12,000 infectious diseases physicians and scientists devoted to patient care, disease prevention, public health, education, and research in infectious diseases (ID). Our members work across a variety of healthcare settings and in a wide array of ID and health research.

PCORI leads support of comparative effectiveness research and continues to hold a unique role in identifying areas of critical research essential to patient outcomes. IDSA is eager to work with PCORI in developing the PCOR workforce involved in health research. Below are recommendations to further PCORI's goal of growing, diversifying, and supporting the health research workforce.

1). What are the greatest opportunities for health research workforce development? In particular, please comment on opportunities, gaps, and challenges in any of the following areas: engagement; data and technology; methods; and organizational issues such as culture change, diversity, equity and inclusion, and skills and capacities to effect system change (for example, accelerating progress toward a learning health system).

One of the key ways to develop the health research workforce is by developing efforts to increase diversity, equity, inclusion, and accessibility (DEIA). Despite improvements in the inclusion of underrepresented groups in research, the proportion of students in health research who are Black/African American, Latinx, and Native American still falls short. [A study](#) from the National Center for Science and Engineering showed that 70% of STEM doctorates were earned by white students. These disparities are also true in health research, where students from underrepresented backgrounds pursuing a career in the field may drop from the pipeline before or soon after entering the workforce. Students, trainees and researchers from underrepresented populations need resources early in their education to facilitate their transition across the stages of their careers. Financial challenges and lack of mentorship for students from underrepresented populations at various stages limit recruitment and retention. Groups like first generation students and researchers are highly underrepresented in research because they lack the needed resources and opportunities to succeed. This failure of inclusion perpetuates a systemic lack of diversity and accessibility in the physician-scientist workforce, which in turn limits overall expansion of the physician-scientist workforce and DEIA considerations in patient care and the execution of health research. Evidence demonstrates that having researchers from diverse fields

creates diversity in the types of research topics studied, and thus the potential benefit for different parts of the health care system influencing a diverse set of patients. Targeted initiatives are needed to provide crucial support and resources necessary for students and researchers from underrepresented backgrounds to successfully advance through the training pipeline into the health research workforce.

Recommendations to develop and grow DEIA in the health research workforce include:

- Support funding directed to areas not traditionally covered under grants, such as childcare costs, to improve retention of researchers and students and make health research more accessible.
- Designate more funding opportunities for health research for early-stage investigators from underrepresented backgrounds to increase retention of these researchers.
- Fund and foster collaboration between PCORI funded research institutes and teams and community-based organizations to develop and inform strategies to improve mentorship programs for underrepresented members of the health research workforce. Mentorship opportunities can help increase retention of these researchers and promote DEIA through collaboration.
- Work with PCORI funded institutions to ensure there are structural policies and institutional bodies in place at these institutions that effectively address the DEIA needs of the health research workforce.

2). What programs and engagement strategies might PCORI consider developing to serve the workforce development needs of those who lead and partner in research?

As previously stated, one of the most effective ways to grow the health research workforce is by intervening early in the pipeline to provide support to those interested in health research. This requires programs implemented at PCORI funded institutions with a focus on mentorship, career development, and overall support for those engaged in health research. Younger researchers, trainees, and students require this level of support to remain in the workforce. Often, this can be built into grants and funding awarded to research institutions. These can also be PCORI-wide efforts aimed at supporting younger researchers and trainees funded by PCORI.

Additionally, this requires targeted approaches for specific subsections of the workforce. Physician-Scientists (P-Ss) are an essential component of the workforce and have unique abilities to transform clinical research observation into research hypotheses and subsequent medical advances. However, [studies](#) show the size of this subset of the workforce decreased dramatically from 2003 to 2012 and continues to decline. [Studies](#) also show that infectious diseases specialists especially struggle to secure funding for protected research time in their third year of training. Often, the additional funding required for training as a P-S limits which students are able to choose this career, and thus the overall growth of the workforce. A study found that first generation physician-scientists are less likely to apply to MD-PhD than to MD programs, often due to a lack of social, cultural, and financial capital. These students not only need financial support to conduct research, but also require mentorship and career development opportunities that will increase their chances of retention in the workforce.

Recommendations for engagement strategies and programs to meet the workforce needs of those engaged in health research include:

- Develop programs through PCORI funded institutions to send early career researchers, graduate students, and P-S trainees to schools in underrepresented and underserved communities. These initiatives facilitate mentorship and encourage individuals from underrepresented populations to pursue careers in health research.
- Increase funding opportunities for those pursuing careers as P-Ss, as these researchers are an important part of the workforce. Often, the additional training needed to pursue this career deters students, especially if they have difficulty acquiring funding for their training.
- Embed training funds into PCORI funding for research and/or clinical trials to allow for broader experience and mentorship for younger researchers. Additionally, attach training grants for researchers and students from underrepresented groups to large, multi-institutional health research grants.
- When possible, attach stipends to PCORI funded research to support travel to conferences and leadership training to support career development for early-stage investigators.

IDSA welcomes continued collaboration on developing the health research workforce. If you have questions about these comments or would like to connect, please contact Eli Briggs, IDSA director of public policy, at ebriggs@idsociety.org.