

Report 91: The Role of Public Health Prevention in Environmental Health Research

Convener: Richard Kwok, Paul Jung

Brief History: A lot of the research that NIEHS participates in is broad and disparate. Sometimes it's not clear why we do what we do. How does NIEHS distinguish ourselves among the other research and regulatory organizations? How do we incorporate public health and prevention into what we do?

Discussion Highlights:

Should NIEHS focus on policy relevant research or investigator initiated research?

How does NIEHS coordinate with other institutes and federal agencies to avoid duplication and improve coordination?

The research project is the entity of concern, not the PI – someone should shepherd the research project from beginning to end but bring in necessary multidisciplinary team members as the project progresses from planned idea to policy implications.

We need good science in order to effect policy.

Need to have other partners at the table when making funding decisions; e.g. NAEHS council for DERT brings together other federal agencies so that funding is coordinated. This decreases duplication, increases collaboration and aligns priorities.

Prevention isn't the only thing that NIEHS does – we need to communicate the whole spectrum from basic science to intervention to prevention to direct public health impacts.

All NIEHS staff including scientists and administrators should be able to quote NIEHS mission statement / tag line and how it relates to their work.

Need feedback at multiple levels and stages of research (from development to execution) to scientists from policy makers, key decision makers and other stakeholder groups regarding the policy implications of NIEHS research.

Recommendations:

1. To encourage collaboration and coordination among federal partners, invite federal partners (e.g. NIH, CDC, NCEH, FDA, EPA, NIOSH, ATSDR, NOAA, FWS, etc.) to actively participate in NIEHS advisory committees
2. Improve communication by changing the composition of NIEHS advisory boards to include policymakers, stakeholders, end-users and decision makers so that relevant policy considerations are incorporated into scientific decisions throughout the scientific process, from planning to execution. Need to have broad stakeholder input to scientists at the beginning of research prioritization / design so that science is relevant to policy-makers.

3. Consider an “office for scientific policy implications” to help both intramural and extramural researchers understand the potential impact of their work (e.g. scientist / policy maker in residence program) and sustain a dialogue between scientists and policy-makers.
4. All individuals involved in creating the NIEHS mission statement should review the mission statements and strategic plans of all other NIH Institutes and relevant federal health agencies.
5. NIEHS should determine how it prioritizes research and make this process transparent to the public and stakeholders.
6. NIEHS should coordinate its priorities with other NIH Institutes and federal health agencies to avoid duplication and increase coordination and collaboration.
7. Create a tagline so that all NIEHS staff including scientists and administrators can quote NIEHS mission statement / tag line and how it relates to their work.
8. Tagline: “Science for Public Health”

Discussion Participants:

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