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COVID-19 Woes: Safety, Money Worries Concern Institutions; Researchers Fear Career Disruptions

By Theresa Defino

As the pandemic continues to not only drag on but intensify, the toll on institutions and staff is becoming more evident. To get a sense of what was happening, and how it could help, NIH conducted surveys this fall. The findings provide perhaps the first large-scale—albeit limited—look at the concerns organizations and researchers are wrestling with.

Increased expenses to ensure the safety of staff and students during COVID-19 are among the factors related to the pandemic that have most substantially affected institutions, according to nearly 70% of the more than 200 research administration leaders responding to the survey.^[1] Close to 32% reported “institutional hiring freezes,” and approximately 62% cited reduced access to labs as the factors “most negatively” affecting research functions.

Extramural researchers, asked to identify the biggest negatives hurting their work, responded in a similar vein. Nearly 55% cited “reduced access to colleagues due to virtual environment,” approximately 49% identified reduced access to labs, and 41.1% called out reduced access to “core facilities.”

Some 60% reported both “societal and/or political events” and “physical and/or social isolation” as the top two factors negatively affecting their mental health. But a third also listed “disruption of promotion or tenure timeline/next career steps.” Approximately 45,000 investigators participated in the survey, which closed Nov. 13. NIH also surveyed intramural staff, who reported family concerns, among others.

Michael Lauer, NIH deputy director for extramural research, presented the data during a recent meeting of the Advisory Committee to the Director (ACD).^[2] He acknowledged the limited information he shared was a “teaser” and said more details would be released in the coming months.

Writing on his *Open Mike* blog in October as the extramural surveys were being rolled out, Lauer described them as part of NIH’s effort to “inform policy and program decisions as NIH seeks to identify ways to continue to support the biomedical research enterprise as we move forward” through the pandemic.^[3]

ACD members were not presented with specific recommendations and did not act following the discussion at the Dec. 11 meeting. The ACD is the agency’s highest-ranking advisory panel. Members meet twice yearly.

Dining, Housing Income Lost

Lauer explained that the leaders selected to respond to the survey were “vice presidents for research or equivalent.” At least 224 participated, based on the highest number of responses counted for the three questions about which NIH shared data (not all responded to each question). The overall response rate was 32%, and 67% of these individuals were based at doctorate-granting institutions.

He noted that those from “minority-serving institutions were a bit overrepresented” among the survey

respondents, which he termed “a good thing.” More specifically, Lauer’s slides indicated that minority serving institutions “accounted for 12% of institutions invited to participate, and 18% of total responses received.”

Lauer shared the responses to one question asked of both institutional leaders and researchers as well as two questions that differed among the groups.

In addition to citing reduced lab access and hiring freezes, 22.3% of institutional leaders answering the question of factors most negatively affecting research functions cited “increased virtual meetings.”

Responses to the question of pandemic-related factors substantially affecting institutions included financial costs beyond those safety measures. Approximately 52% of institutional officials listed “increased spending on technology,” and nearly 47% cited “loss of housing and dining revenue.”

Lauer: Responses ‘Not Surprising’

Asked what they considered to be “essential priorities for restoring research operations,” approximately 68% of leaders said “maintaining a healthy environment”; approximately 61% said “developing and implementing phased return plans,” which Lauer said NIH understands to be “more or less the rule”; and nearly 60% cited “maintaining financial stability.”

“I have to say, none of these findings are particularly surprising,” said Lauer after reviewing the institutional survey responses, “but nonetheless, it’s helpful to see these.”

While it was not expressed at the meeting, NIH may have been disappointed with the response rate to the extramural surveys. In his October blog post, Lauer said NIH was “very happy with the number of responses” the agency got to its related intramural survey on the effect of the pandemic. Lauer said NIH was “hoping to see similar response rates” for the extramural surveys. At the ACD meeting, it was reported that the intramural response rate was 51%.

At 32%, the institutional response rate was more than the percentage of extramural researchers who answered the survey—just 19% participated. Still, they reflect a substantial number—45,000 scientists Lauer said are “designated as personnel on NIH applications or awards.”

Of these, 77% were based at academic institutions. Lauer drew attention to the fact that 53% were faculty members, so “that may mean a substantial number of our [principal investigators] did respond since most of them are faculty members.”

‘Concerning’ Impact on Mentorship, Supervision

Lauer said responses investigators gave to the “negatives” affecting research, noted earlier relating to lab access, were “remarkably similar” to institutional leaders’ concerns.

One question NIH directed only at researchers was to describe the activities they had “spent less time on.” Responses came from 42,097 researchers; of these, 54.8% cited “scientific or medical meeting participation.” Nearly identical percentages—38.7% and 38%, respectively—identified “laboratory or animal research or support for these activities” and “receiving mentorship or supervision” as activities they were engaging in less often. Lauer said less research time “shouldn’t be surprising.”

But he called “concerning” the drop in “receiving mentorship or supervision.” NIH plans to “dig into the data a bit more” on this topic, Lauer said.

Of the 41,345 investigators who responded to the question about mental health, the specific percentage

responses were societal and/or political events, 63%; physical and/or social isolation, 60%; and disruption of promotion or tenure timeline/next career steps, 34.2%.

Lauer added that NIH is also reviewing funding application data in light of the pandemic. At the time of the ACD meeting, NIH was analyzing September–October applications, but he said thus far it “looked pretty similar to June, where we are seeing, if anything, a slight increase in the number of applications without major demographic shifts.”

NIH officials, he added, “are hearing that in many cases, people are spending time writing applications,” which might explain a bump in numbers.

Agency Employees Report Family Strains

The findings from NIH’s intramural research survey are not as current but may still reflect the reality that respondents—as well as the extramural research community—are experiencing.

This survey was conducted from July 14 to 28 and involved NIH federal staff, students, trainees, postdoctoral researchers, volunteers and contractors. NIH received 16,892 “valid responses,” which, as noted, is a 51.2% response rate.

Findings include that nearly 44% of 16,818 respondents said they had “caretaking responsibilities for individuals who live in their household or family members who do not live with them,” and 20% said their caretaking responsibilities “made work responsibilities substantially more difficult to complete.” Additionally, nearly 53% said they were “uncomfortable” with the prospect of returning to an on-site job.

Only a small number of findings were shared at the ACD meeting. More details are found in an executive summary available for download from the website of NIH’s Scientific Workforce Diversity Office.^[4]

After presentation of the data, Marie Bernard, NIH acting chief for scientific workforce diversity, discussed some suggestions that an ACD working group developed to mitigate the impact of the pandemic particularly on workforce diversity, equity and inclusion.

These include collecting data, particularly on unrepresented groups; revising funding mechanisms “to address financial strains and workforce issues”; providing “trainings, resources and support (e.g., mentoring guidance, career development)”; and considering “the long-term impacts of the pandemic on the future biomedical workforce.”

¹ Marie A. Bernard and Michael Lauer, “COVID-19 Survey of NIH and Extramural Staff – Preliminary Findings,” NIH Office of the Director, December 11, 2020, <https://bit.ly/37rGq9H>.

² NIH Advisory Committee to the Director, “Advisory Committee to the Director – December 2020 (Day 2),” webcast, December 11, 2020, <http://bit.ly/2KAJ3NL>.

³ Michael Lauer, “Encouraging Participation in Upcoming NIH Surveys to Identify Impacts of COVID-19 on Extramural Research,” *Open Mike* (blog), October 5, 2020, <http://bit.ly/3aoppPI>.

⁴ NIH Scientific Workforce Diversity Office, “NIH Workforce COVID-19 Impact Survey,” November 2020, <http://bit.ly/3amQumq>.

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