SUMMARY NIH INTERNATIONAL REPRESENTATIVES MEETING July 13, 2004

<u>Welcome and Introduction of Speakers</u>: Dr. Sharon Hrynkow, Chair, and Acting Director, FIC, welcomed the IC representatives. She introduced the two guest speakers, Mr. Kenneth Stith, Director, Office of Financial Management, and Dr. Altaf Lal, DHHS Health Attaché, U.S. Embassy New Delhi. She also welcomed Dr. Michael Chang, the new representative of NCRR.

NIH Participation at International Conferences: Mr. Stith gave an update on staff travel to international conferences. For foreign travel, the OpDivs are required to have all planned travelers, and related information, entered into the NFT not later than 30 days before departing on the trip. The NIH has a process that looks at largely attended events across the ICs, and the Department has given the NIH unique authority, through the scientific travel budget process, to decide who gets to go on domestic and foreign trips. Recently, though, the Department has ramped up its efforts to review all foreign travel where the number of attendees is expected to be 40 or more. The 40 or more attendee target is not a ceiling but a dashboard indicator for the Department to do a more detailed review on the number of travelers. OpDivs are also required to develop and submit annual foreign travel plans to the Department for all largely attended meetings (defined as 20 or more) at the beginning of each year. The NIH, although vested with unique authority, has been required to submit an annual foreign travel plan as well. The Department has been more vigilant, of late, in review and have requested, and we have provided, detailed information pertaining to certain trips....most notably the Brain Mapping meeting held in Budapest and the recent virology and immunology conferences held in Canada. The department has been especially interested in obtaining travel information to Canada, but is concerned also about foreign travel in general. Per Department officials, they are looking to balance the fact that NIH has this unique authority and their need to assure some departmental discipline and equity for travel to some of these meetings where other OpDivs, which have very strict attendance limits imposed, are participating.

Of the conferences in the past four weeks, one was reduced from 75 to 57. This particular trip was not on the NIH's foreign travel plan nor was it on our internal largely attended events matrix. For the Budapest brain mapping conference, virtually all planned participants were approved to travel. In the most recent meeting in Canada (the Immunology Conference), all requesting participants, including junior scientists presenting posters were authorized to attend. The fact that the event was on the annual foreign travel plan and on our internal largely attended matrix helped our case.

The NIH has more to do to enhance input to the NFT system. There have been several examples of "stragglers"; i.e., those expecting to attend meetings at the last minute. This presents problems in the NIH's ability to pass along certain country clearance requests, and places the NIH at risk in its ability to provide a comprehensive, timely listing in

response to the Department's request. We need to be more attentive to timely input into the NFT system, quality input into the internal largely attended matrix and the foreign travel plan development processes, to shift the debate to the impact on science.

<u>Update from the DHHS Health Attaché:</u> Dr. Altaf Lal provided an update of activities related to NIH research interests in India. Several ICs expressed an interest in pursuing biotechnology activities and to exploring opportunities in collaborations in the areas of chronic diseases and palliative care. Dr. Lal encouraged the ICs to identify areas of priorities that he can pursue with the Indian Government. Discussions also touched on the lengthy process of obtaining country clearance for travelers to regions of unrest.

Arctic Health: Dr. Philip Chen, Senior Advisor to the Director for Intramural Research, spoke briefly on his more than 20-year association represnting NIH and DHHS on the government-wide Artic Health Council. He noted that FIC will now represent NIH in interagency discussions related to health issues in the Arctic, an area comprised of 8 countries and a population of 3 million. Dr. Hrynkow commented that FIC is looking forward to the opportunity to help address health disparities in this region. She noted that FIC will contact the ICs in the near future for input to the biennial report on arctic activities prepared by NSF, on the International Polar Year (200708), for which FIC has suggested that human health issues be highlighted. Ms. Natalie Tomitch, FIC/DIR, will serve as the chief focal point on Arctic issues in FIC.

Announcements:

Dr. Danuta Krotoski announced that NICHD is expanding its Extramural Grants Program, which it administers on behalf of NIH, to include a focus on training for research institute administrators in developing countries. NICHD is working on an RFA and is seeking partner ICs. Dr. Lois Cohen noted that NIDCR has developed a similar training module in response to a request from a Korean funding institution, and Dr. Zakir Bengali added that CSR, working with FIC, has also been asked to provide training to Japanese grant administrators. It was suggested that it would be helpful to have a separate meeting of the IC representatives to coordinate a standardized program for these training modules.

Dr. Hrynkow also reported that the first awardees of the new FIC/Ellison Fellowship in Global Health and Clinical Research program were currently attending a 3-week orientation at the Stone House in preparation of their year abroad. (Please see the press release and the roster of awardees at http://www.nih.gov/news/pr/jul2004/fic-09.htm) She noted that this program received enthusiastic support from Secretary Thompson when she briefed him during their trip to Moscow and St. Petersburg at the beginning of July. To acknowledge the positive role of health diplomacy, the Secretary is proposing to write a paper on "Science as a Bridge."

Dr. Hrynkow announced that Dr. Zakir Bengali, Chief of the Biochemical Sciences Integrated Review Group at the Center for Scientific Review, will begin a detail as

International Health Program Officer for South Asia in the FIC Division of International Relations. Dr. Bengali has been the CSR international representative for many years.

Responding to the comment regarding clearances for travelers, Dr. Melinda Moore, Office of Global Health Affairs, noted that DHHS has posted health representatives in several countries, who can be a valuable point of contact for the ICs. She identified the countries as India, South Africa, China, Iraq, Thailand, Afghanistan, as well as at the U.S. Mission in Geneva, the EU in Brussels, UNESCO in Paris, and Hawaii.

The next meeting of the NIH IC International Representatives will be on **Tuesday**, **November 9, 2004, at 1 pm in the Stone House**.

Attendance:

Dr. Sharon Hrynkow, FIC Acting Director; Mr. Richard Millstein, FIC Acting Deputy Director; Dr. Zakir Bengali, CSR; Drs. Lois Cohen and Kevin Hardwick, NIDCR; Ms. Julia Royall, NLM; Dr. Joe Harford, NCI; Drs. Karl Western and Michael Hollingdale, NIAID; Mr. John Whitaker, NEI; Dr. Karen Babich, NIMH; Dr. Danuta Krotoski, Weam Ali, and Thomas Bachrach, NICHD; Dr. Yuan Liu, NINDS; Dr. Pat Needle, NIDA; Dr. Ruth Hegyeli, NHLBI; Dr. Sharon Pope, NIDDK; Dr. John Haller, NIBIB; Dr. Michael Chang, NCRR; Dr. Philip Chen, OD/OIR; Michael Airumian, OAR; Ms., NIAAA; Dr. Melinda Moore, HHS/OGHA. FIC staff: Mr. Kevin Bialy, Dr. Kenneth Bridbord, Mr. Gregg Davis, Dr. Jean Flagg-Newton, Dr. Pierce Gardner, Dr. Karen Hofman, Ms. Judy Levin, Ms. Sonja Madera, Dr. Barbara Sina, and Ms. Natalie Tomitch.