

Pre-college Engagement in Biomedical Science

Report of the SMRB Working Group on Pre-college Engagement in Biomedical Science

EXECUTIVE SUMMARY

In recognition that the advancement of biomedical discoveries, cures, treatments, and disease prevention interventions relies on a sustained, skilled workforce, NIH has a long and successful history of providing state of the art training to aspiring biomedical science professionals. Meeting the country's biomedical workforce needs requires a steady stream of highly-capable, dedicated, and creative young minds prepared to tackle complex scientific and health challenges. Alarming trends are evident, however, in the profile of the current and rising biomedical workforce in terms of both the preparedness level of the current and future biomedical workforce and the diversity of that workforce as it reflects the students seeking degrees and careers in relevant fields.

Those concerns —both in terms of demographics and skills or preparedness— of the United States' biomedical workforce of tomorrow and its ability to address the increasingly complex nature of biomedical research are especially acute. Today's biomedical workforce does not reflect the Nation's rapidly changing demographic profile and the U.S. pre-college STEM education system is grappling with widening achievement gaps. Globally, American students are falling behind their peers; international tests show students in the U.S. consistently rank below average in mathematics and science literacy, amidst marked gains by Asian and European students.¹ Within the American pre-college student population, education disparities are harming millions of students, specifically under-represented minorities and the financially disadvantaged. Though many enter undergraduate institutions with an expressed intent to pursue a career in science, math, or engineering, few emerge with STEM degrees. The root causes for this inequity are complex and include not only a challenged socioeconomic environment but also an inconsistent STEM curriculum in pre-college and a concentration of the most prepared and talented science teachers in already well-resourced environments, with far fewer qualified teachers in under-represented communities and schools. In aggregate, these social and educational challenges perpetuate the absence of diversity in those entering careers in biomedical sciences.

Many public and private entities are engaged in attempts to turn the tide of a future biomedical workforce that may be lacking in both preparedness and diversity. As the largest public funder of biomedical research in the U.S, NIH has an opportunity to take a leadership position. Its early career training programs situate NIH as the pre-eminent resource for cultivating the biomedical workforce at the graduate and post-doctoral stages of the educational and training pipeline. Though pre-college biomedical education is not the primary mission of the NIH, its imprimatur and stamp of importance

¹ OECD, *PISA 2012 Results: What Students Know and Can Do*, Vol 1, 2014, available at www.oecd.org/pisa/keyfindings/pisa-2012-results-volume-I.pdf.

1 may serve to galvanize new directions in pre-college STEM training. The unique expertise in biomedical
2 science embedded within the NIH and its strong influence with leading research institutions affords the
3 opportunity to catalyze efforts to interest young students in biomedical science. A surprising number of
4 extant investments of the NIH in pre-college programs, specifically greater than 240, represent de facto
5 model templates for engaging *all* students, including—and especially—underrepresented minorities, in
6 biomedical science. The expertise and guidance acquired by the purveyors of the successful NIH
7 programs can be called on to inform all stakeholders in the STEM education environment as to what
8 may best inspire and prepare America’s youth to pursue a wide array of biomedical science careers.

9 This report, in response to a directive from the NIH Director, provides advice on how NIH can maximize
10 its influence in pre-college biomedical science engagement. The Scientific Management Review Board
11 (SMRB) encourages the Agency to take a long-range, forward-thinking, and targeted approach in its pre-
12 college STEM activities. The success of this effort will have implications on the scientific and economic
13 future of this country.

14 Given the importance of pre-college STEM preparation for successful entry in the biomedical sciences
15 and the striking dearth of under-represented minorities in the setting of a substantial number of existing
16 but uncoordinated NIH efforts targeting pre-college STEM education, the SMRB begins this report with a
17 **single overarching recommendation driven by a compelling guiding principle:**

18 *NIH pre-college STEM activities need a rejuvenated integrated focus on biomedical workforce*
19 *preparedness with special considerations for under-represented minorities.*

20 To that end we recommend the establishment of a transformative body, committed to pre-college-
21 STEM, with strong galvanizing leadership and with representation of all relevant NIH Institutes, Centers,
22 and Offices and similarly committed non-NIH stakeholders. This multi-disciplinary body, formulated and
23 resourced according to the wishes of the Director, should make recommendations directly to the Office
24 of the NIH Director. The focus should address the development and oversight of the following activities:

- 25 • Development of a uniform reporting template of NIH sponsored pre-college STEM programs;
- 26 • Creation and maintenance of an inventory of all programs;
- 27 • Development of optimum processes for the functionality of all current and planned programs;
- 28 • Coordination of these programs, including synergy with other Federally supported pre-college
29 STEM activities; and
- 30 • Development of evaluative criteria to gauge the success of these programs.

31

1 Findings and recommended next steps for NIH

2 In this report, SMRB members offer the following next steps supported by key findings with pertinent
3 additional recommendations to NIH:

4 Step A. Focus pre-college efforts on the most pressing workforce needs:

5 **Key Finding #1: There are limited opportunities for under-represented minority and low SES**
6 **students to engage in biomedical science education.**

7 **Recommendations:**

- 8 • Better target NIH-funded education outreach to students from under-represented groups and
9 their teachers.
- 10 • Promulgate best practices of exemplar programs with a track record of directing under-
11 represented minority students toward careers in biomedical science.
- 12 • Utilize demonstrably successful NIH enrichment programs (e.g., summer internship programs) as
13 opportunities to enhance diversity.
- 14 • Closely monitor the outcomes of NIH's nascent undergraduate under-represented minority
15 recruitment, mentoring, and training programs [National Research Mentoring Network (NRMN)
16 and Building Infrastructure Leading to Diversity (BUILD)] to determine whether these strategies
17 could also be employed with middle and high school students and their teachers.

18 **Key Finding #2: A broadening of workforce categories is important to convey to pre-college youth**
19 **who might consider careers in biomedicine.**

20 **Recommendations:**

- 21 • Emphasize the wide range of current and future career options in biomedical sciences available to
22 all students.
- 23 • Promote the cross-disciplinary nature of innovative biomedical science.
- 24 • Coordinate NIH's STEM education programs with the work of the NIH Division of Biomedical
25 Research Workforce Programs in order to:
 - 26 ○ understand the composition of the current biomedical workforce;
 - 27 ○ project future workforce needs; and
 - 28 ○ identify emerging skills that should be fostered in pre-college education settings.

29 Step B. Coordinate and cultivate effective programs and approaches:

30 **Key Finding #3: NIH at present has a large portfolio of pre-college STEM activities. NIH should seek**
31 **to streamline these activities and enhance the effectiveness of these activities through increased**
32 **coordination.**

33

1 **Recommendations:**

- 2 • As set forth in the SMRB’s overarching recommendation, the NIH should establish a
3 transformative body to develop plans for coordinating, monitoring, and systematically evaluating
4 NIH’s pre-college activities (see page 2).
- 5 • This body should emphasize efforts to:
- 6 ○ Strongly encourage all NIH-supported STEM programs to increase outreach to under-
7 represented populations.
 - 8 ○ Identify best practices and expand exemplar programs.
 - 9 ○ Identify resources to be provided to those engaged in teaching or mentoring pre-college
10 students.
 - 11 ○ Provide an infrastructure and process to enable curriculum developers to identify and
12 collaborate with subject matter experts at NIH.

13 **Key Finding #4: There are no standard measures of success for the existing NIH pre-college STEM**
14 **activities. A more rigorous evaluation process may strengthen all activities and produce new best**
15 **practices.**

16 **Recommendations:**

- 17 • Identify and track the development of STEM education best practices and evaluation standards.
- 18 • Define successful outcomes (to include careers listed under the broader definition of the
19 biomedical workforce).
- 20 • Develop metrics needed to evaluate the effectiveness of extant NIH STEM programs.
- 21 • Apply systematic and comparable evaluation practices for NIH’s pre-college programs.
- 22 • As the evidence base for pre-college STEM education grows, determine the feasibility of
23 expanding evaluation metrics to include measures of long-term program effectiveness.
- 24 • Work with other agencies and organizations to improve the collection of longitudinal, student-
25 level data, especially as they relate to pre-college students’ exposure to biomedical and human
26 health learning experiences and eventual career trajectories.

27

28 **Step C. Leverage strengths of the public and private sectors:**

29 **Key Finding #5: There is untapped potential in NIH’s research community.**

30 **Recommendations:**

- 31 • Increase the impact and reach of STEM education efforts by leveraging existing investments in
32 university researchers, trainees, and infrastructure.
- 33 • Encourage and incentivize STEM outreach by offering supplemental funding to grantee
34 institutions, researchers, and trainees to provide educational outreach, including summer
35 internships, research seminars, science fairs, and especially hands-on science experiences.

- 1 • Communicate the importance of pre-college student and teacher engagement, especially directed
2 at low socioeconomic status (SES) and underrepresented minorities, as a cultural value of the
3 biomedical research community endorsed by NIH leadership, including all Institute and Center (IC)
4 Directors:
5 ○ Engage pre-college students and teachers in science enrichment activities;
6 ○ Elevate teaching as a career option for trainees; and
7 ○ Provide opportunities for researchers and trainees to provide sustained, long-term
8 mentorship to pre-college students and teachers.

9 **Key Finding #6: There are many opportunities to partner with other entities committed to pre-**
10 **college STEM outreach.**

11 ***Recommendations:***

- 12 • Seek opportunities to provide expertise and guidance to private and non-profit organizations that
13 support pre-college programs and biomedical science outreach and to learn from them.
- 14 • Monitor the subcommittee activities of the National Science and Technology Council’s Committee
15 on STEM Education (CoSTEM), in particular the subgroups devoted to improving the diversity of
16 biomedical students and trainees and improving preschool through 12th grade (P-12) STEM
17 instruction.
- 18 • Leverage NIH’s expertise to support government-wide efforts to improve STEM education and
19 strengthen the evidence base.
- 20 • Provide expertise to the Department of Education (ED) and the National Science Foundation (NSF)
21 as they build and implement evaluation standards for STEM programs.
- 22 • Partner with ED and NSF to improve data collection at the undergraduate and pre-college level
23 that will be useful for biomedical workforce analysis.

24 Improving NIH’s outreach to students and teachers in pre-college educational environments comes at an
25 opportune time. NIH has recently redoubled its efforts to enhance the diversity of its college and post-
26 graduate trainees through the “Enhancing the Diversity of the NIH-Funded Workforce” program. The
27 agency can maximize the success of these programs with smart, targeted investments in the pre-college
28 space.

29

1 **I. INTRODUCTION**

2 The National Institutes of Health (NIH) Reform Act of 2006 (Public Law 109-482) reaffirmed certain
3 organizational authorities of Agency officials to: (1) establish or abolish national research institutes; (2)
4 reorganize the offices within the Office of the Director, NIH, including adding, removing, or transferring
5 the functions of such offices or establishing or terminating such offices; and (3) reorganize divisions,
6 centers, or other administrative units within an NIH national research institute or national center,
7 including adding, removing, or transferring the functions of such units, or establishing or terminating
8 such units. The Reform Act also established the Scientific Management Review Board (hereinafter,
9 SMRB or Board) to advise the NIH Director and other appropriate Agency officials on the use of these
10 organizational authorities and identify the reasons underlying the recommendations.

11 This report distills the deliberations and findings of the SMRB and provides recommendations to NIH
12 regarding how the Agency can optimize activities aimed at engaging pre-college students in biomedical
13 science. NIH charged the SMRB with recommending ways to optimize these activities such that they
14 both align with the NIH mission and ensure a continued pipeline of biomedical science students and
15 professionals. SMRB members were asked to:

- 16 • Examine the evidence base for successful approaches for pre-college biomedical science
17 programs aimed at strengthening the biomedical workforce pipeline;
- 18 • Identify the attributes, activities, and components of effective pre-college biomedical science
19 programs, including the role and relative importance of teacher training programs;
- 20 • Identify those points in the pre-college biomedical workforce pipeline where NIH's efforts could
21 be applied most effectively, given finite resources; and
- 22 • Define ways for NIH to improve the evidence base for effective pre-college biomedical science
23 programs.

24 SMRB members who formed the Working Group on Pre-college Engagement in Biomedical Science
25 provided updates to and solicited input from the entire SMRB during its public deliberations on March
26 25, 2014; May 7, 2014; July 7, 2014; October 14, 2014; and December 15, 2014. During SMRB and
27 Working Group meetings, members heard from experts and stakeholders in pre-college engagement in
28 biomedical research (Appendix A). Consultants included NIH program officials, non-profit education
29 program representatives, science teachers, experts in education program evaluation, and experts in
30 STEM education and career disparities.

31 **II. BACKGROUND ON THE STATE OF PRE-COLLEGE STEM EDUCATION AND**
32 **ENGAGEMENT IN BIOMEDICAL SCIENCE**

33 Spurred by the Cold War and the launch of the Sputnik satellite by the Soviet Union, the mid-20th
34 century was a time of unprecedented interest in math and science careers among U.S. youth. This
35 interest was fueled by increased attention to and investments in science, technology, engineering, and
36 mathematics (STEM) education at all levels of government. Coupled with a national-level “intensity and
37 attention to science,” this investment in STEM education, together with public and private sector

1 investments in research and development, resulted in clear U.S. dominance in science and technology
2 for many decades.²

3 **Challenges to US STEM Education**

4 Today, however, this dominance is threatened. As the R&D intensities (expenditures in research and
5 development as a share of GDP) in some European and Asian economies have increased, U.S.
6 expenditure has stagnated.³ Compounding this decline, the current state of pre-college STEM education
7 is in need of serious reform. The U.S. government will invest \$2.9 billion in pre-college STEM education
8 in FY 2015,⁴ yet American students lag behind many of their international counterparts in average test
9 scores, and this achievement gap continues to widen.⁵ In 2012, the Program for International Student
10 Assessment (PISA) conducted an assessment of 15-year-olds' performance in reading, math, and science
11 in 65 countries.⁶ Among the 34 member countries of the Organisation for Economic Cooperation and
12 Development (OECD), U.S. student performance was average in science and reading and below average
13 in math, in which the U.S. ranked approximately 26th. Even America's top math students – those in the
14 90th centile – ranked below the average students in Shanghai.⁷

15 STEM educators face numerous challenges. The uneven distribution of skilled science teachers and
16 resources is well documented. These educational disparities harm millions of students, especially
17 minority and low income students. The Board also learned that lower academic and career expectations
18 often plague under-represented minority students, and there are wide-ranging state- and local-level
19 discrepancies in the rigor of pre-college science standards and quality of science curriculum. At a time
20 when the demographic profile of the U.S. student-age population is increasingly racially and ethnically
21 diverse, and more than half of college students are female, this trend is especially troubling for the
22 future of the Nation's research and development capacity. Efforts to address these discrepancies are
23 often controversial. These issues and many more will only be solved when political and community
24 leaders, policy makers, and other decision makers at all levels of government coalesce around sound
25 strategies and principles.

26 Calls for the pressing need to improve U.S. STEM education have come from many different quarters.
27 For example, in its 2007 report *Rising Above the Gathering Storm: Energizing and Employing America for*
28 *a Brighter Economic Future*, the National Academies recommended several steps for improving pre-
29 college science and mathematics education, including strategies to recruit and strengthen the skills of

² Cornelia Dean, "When Science Suddenly Matter, in Space and in Class", The New York Times, September 25, 2007, available at <http://www.nytimes.com/2007/09/25/science/space/25educ.html>.

³ Organisation for Economic Cooperation and Development (OECD), *Main Science and Technology Indicators*, 2014, available at stats.oecd.org/Index.aspx?DataSetCode=MSTI_PUB.

⁴ Office of Science and Technology Policy, *Progress Report on Coordinating Federal Science, Technology, Engineering, and Mathematics (STEM) Education*, March 24, 2014, available at www.whitehouse.gov/sites/default/files/microsites/ostp/STEM-ED_FY15_Final.pdf.

⁵ Center on International Education Benchmarking, *Trends in the Performance of the Top Performers on PISA 2003-2012*, March 6, 2014, available at www.ncee.org/2014/03/statistic-of-the-month-trends-in-the-performance-of-the-top-performers-on-pisa-2003-pisa-2012/.

⁶ OECD, *PISA 2012 Results: What Students Know and Can Do*, Vol 1, 2014, available at www.oecd.org/pisa/keyfindings/pisa-2012-results-volume-i.pdf.

⁷ OECD, *PISA 2012 Result in Focus*, 2014, available at www.oecd.org/pisa/keyfindings/pisa-2012-results-overview.pdf.

1 science teachers and several means for creating opportunities and incentives for middle-school and
2 high-school students to acquire advanced STEM training.⁸

3 **The Federal Response**

4 National leaders are beginning to respond to these calls. The Obama Administration has placed a high
5 priority on STEM education, launching in 2009 the Educate to Innovate initiative, a Nation-wide effort
6 that includes over \$700 million in public-private investments. Congress has also responded to the
7 challenge by enacting the America COMPETES Act of 2007 and its reauthorization in 2010.⁹ Much of the
8 COMPETES Act focuses on strengthening pre-college STEM education. For example, included in the
9 provisions of the 2010 reauthorization is a directive to the White House Office of Science and
10 Technology Policy to establish a committee that will coordinate federal program and activities in support
11 of STEM education. The Committee on Science, Technology, Engineering, and Math Education (CoSTEM),
12 a committee of the National Science and Technology Council, was established in 2011.¹⁰ In 2013,
13 CoSTEM issued a five-year strategic plan that outlined a number of national goals for improving STEM
14 education. The five major goals of the plan are to: 1) improve preschool through grade 12 (P-12) STEM
15 instruction; 2) increase and sustain youth and public engagement in STEM; 3) enhance STEM experience
16 of undergraduate students; 4) better serve groups historically underrepresented in STEM fields; and 5)
17 design graduate education for tomorrow's STEM workforce. These goals are being implemented through
18 the recently constituted Federal Coordination in STEM Education Task Force (FC-STEM, a sub-committee
19 of CoSTEM), which consists of fourteen federal agencies.¹¹

20 These nation-wide efforts are focused on STEM education broadly and therefore include all federal
21 agencies with scientific research portfolios. Given its mission to promote the progress of science in
22 general, the National Science Foundation (NSF) plays a leading role, as does the Department of
23 Education (ED), given its mission to promote student achievement and preparation for global
24 competitiveness by fostering educational excellence and ensuring equal access.

25 **The Role of NIH in STEM Education**

26 As the largest public funder of biomedical research in the United States, including the biological and
27 behavioral sciences, NIH has an important role to play in these many efforts to improve STEM education.

⁸ Institute of Medicine, National Academy of Sciences, and National Academy of Engineering. *Rising Above the Gathering Storm: Energizing and Employing America for a Brighter Economic Future*. Washington, DC: The National Academies Press, 2007.

⁹ The full title of the American COMPETES Act is the American Creating Opportunities to Meaningfully Promote Excellence in Technology, Education, and Science Act, P.L. 110-69.

¹⁰ The NSTC is a Cabinet-level Council and is the principal means within the executive branch of the U.S. government to coordinate science and technology policy across the diverse entities that make up the Federal research and development enterprise.

¹¹ FC-STEM participating agencies and organizational divisions include the Department of Agriculture, the Department of Commerce, the Department of Defense, the Department of Education, the Department of Energy, the Department of Health and Human Services (including NIH), the Department of Homeland Security, the Department of the Interior, the Department of Transportation, the Environmental Protection Agency, the Executive Office of the President, the National Aeronautics and Space Administration, the National Science Foundation, and the Smithsonian Institution.

1 The success of NIH in alleviating disease and disability for all Americans and around the globe depends
2 upon a robust, diverse, and skilled biomedical research workforce now and in the future. Thus, a stated
3 goal of the Agency is to “develop, maintain, and renew the biomedical scientific workforce.”

4 Recognizing the importance of developing and sustaining a world-class biomedical workforce, NIH
5 makes substantial investments in scientific training. Given the complexity and specificity of biomedical
6 research, most of this investment is directed toward the latter stages of the educational pipeline,
7 supporting young scientists at their post-baccalaureate, predoctoral, postdoctoral, and early investigator
8 stages. NIH’s investment in specialized training in the biomedical sciences is unique as the vast majority
9 of graduate students and postdoctoral fellows in the U.S. are supported on a combination of NIH
10 training grants, fellowships, and research project grants.¹²

11 NIH also recognizes that in order to ensure a continued robust and skilled workforce, interventions to
12 engage youth in the biomedical sciences must also occur earlier in their educational experience. The
13 research that drives today’s—and tomorrow’s—advances in health requires not only acquisition of a
14 quality education on STEM core subjects, but increasingly relies upon advanced problem solving skills,
15 excellent communication, and the ability to analyze large amounts of complex information. Given the
16 number of public and private players investing in pre-college STEM education, NIH supports
17 substantially fewer programs aimed at engaging youth in their pre-college and college years. Because
18 biomedical research encompasses more advanced and applied concepts in the biological and behavioral
19 sciences, NIH’s pre-college STEM education investments are primarily targeted at youth in middle school
20 and high school, as well as their teachers, rather than the primary grades.

21 **The Purpose of this Report**

22 As careful stewards of the public’s investment in biomedical research, NIH regularly seeks to assess the
23 effectiveness of its efforts to develop the biomedical workforce and to forecast future needs. In 2011,
24 NIH Director Francis Collins charged his Advisory Committee to the Director (ACD) with examining the
25 current workforce and recommending ways to strengthen NIH’s approach toward its development. Two
26 reports were published in 2012, one that examined the diversity of the biomedical workforce¹³ and one
27 that focused on modeling the current and future workforce.¹⁴ The reports identified several areas in
28 which NIH could strengthen its investment in training young scientists at the college, pre-doctoral, and
29 postdoctoral levels. The scope of those initial reports did not include NIH’s pre-college STEM education
30 efforts, but the importance of catching and cultivating the interests and abilities of America’s youth
31 before college became a common refrain during the ACD’s deliberations.

32 The NIH Director subsequently charged the SMRB with articulating the role NIH should play in pre-
33 college engagement in the biomedical sciences. While NIH is not the driving force in this space, the

¹² Biomedical Research Workforce Working Group, The Advisory Committee to the Director (2012). *Biomedical Research Workforce Working Group Report*.

¹³ Working Group on Diversity in the Biomedical Research Workforce, The Advisory Committee to the Director (2012). *Report of the Advisory Committee to the Director Working Group on Diversity in the Biomedical Research Workforce*.

¹⁴ Biomedical Research Workforce Working Group, The Advisory Committee to the Director (2012). *Biomedical Research Workforce Working Group Report*.

1 weight and reach of NIH is substantial; local communities across the country house an extraordinary
2 network of NIH-funded scientists and clinicians. In keeping with its mission to foster the next generation
3 of America’s biomedical workforce, this report to the NIH Director offers potential strategies and
4 leverage points that the agency can use to spark the interest of young people in biomedical science and
5 ultimately draw them into careers in the biomedical sciences and allied health fields.

6 Though this report is intended for the Director, the findings, recommendations, and especially the
7 landscape survey represent important information for all stakeholders committed to pre-college STEM
8 education and preparation of the biomedical workforce. Educational organizations, other science
9 organizations, community groups, and parents may find the information in this report of benefit.

10 **III. FINDINGS AND RECOMMENDATIONS**

11 **A. THE CURRENT AND PROJECTED BIOMEDICAL WORKFORCE**

12 **Key Finding #1: There are limited opportunities for under-represented minority and low SES students** 13 **to engage in biomedical science education**

14 The advancement of biomedical discoveries, cures, and treatments relies on a sustained, skilled
15 biomedical workforce. In considering the current state of the workforce, the Working Group focused on
16 three factors: the quantity of professionals entering biomedical science careers, the quality of their
17 training and preparedness, and whether they reflect the diverse make-up of American society.

18 Determining whether there is a sufficient supply of graduate students and postdoctoral fellows entering
19 the biomedical workforce pipeline is difficult, considering the many factors that must be weighed, such
20 as economic factors (e.g., levels of funding available through public and private sources) and scientific
21 opportunities (e.g., demand for computational biologists who can analyze huge data sets and model
22 complex biological phenomena). The Working Group learned that there was no consensus on the
23 optimal size of the biomedical workforce, hearing from some experts who feel the workforce is
24 inadequate for the challenges of the future,¹⁵ while others maintained that U.S. investment in scientific
25 training has produced more scientists than the biomedical enterprise is capable of absorbing.¹⁶

26 Assessing the quality and preparation of individuals entering the biomedical workforce is also difficult,
27 and is likely to vary greatly across the many disciplines and job categories encompassed by the
28 biomedical sciences. Members of today’s biomedical workforce must have an increasingly sophisticated
29 and nuanced view of the myriad determinates of health amidst the growing pervasiveness of science
30 and technology within our society and the world. Yet despite the U.S. having the largest expenditures on
31 higher education (as a percentage of GDP),¹⁷ levels of U.S. educational attainment in 25-34 year olds

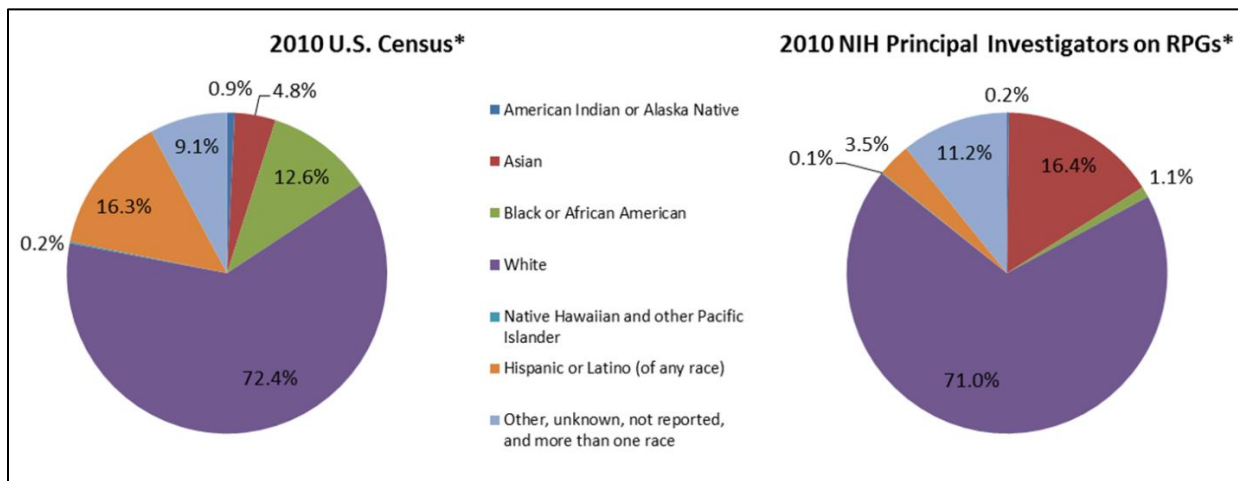
¹⁵ Institute of Medicine, National Academy of Sciences, and National Academy of Engineering. *Rising Above the Gathering Storm: Energizing and Employing America for a Brighter Economic Future*. Washington, DC: The National Academies Press, 2007.

¹⁶ Alberts B, Kirschner MW, Tilghman S, Varmus H. *Rescuing US biomedical research from its systemic flaws*. Proc Natl Acad Sci 111: 5773–5777, 2014.

¹⁷ <http://www.nsf.gov/statistics/seind12/c2/c2s4.htm>, accessed on December 11, 2014.

1 have been surpassed by Norway, the Netherlands, Denmark, Korea, and New Zealand.¹⁸ As noted
 2 previously by the ACD, the Working Group found that traditional conceptualizations of the biomedical
 3 workforce have focused narrowly on academic investigators. Without a broader conceptualization of
 4 cross-disciplinary scientific needs and a more encompassing definition of careers in biomedical science,
 5 as well as allied health fields and pre-college education, it is difficult to assess the quality of the
 6 workforce and especially difficult to define future needs.

7 What is unambiguously clear, however, is that the biomedical research workforce is decidedly lacking in
 8 diversity, especially in positions of leadership. In 2012, NIH asked the ACD to closely examine NIH’s track
 9 record in supporting a diverse workforce and recommend ways to address disparities in funding. The
 10 ACD, which focused on NIH’s undergraduate and post-graduate activities, reported that: “Black
 11 applicants were significantly less likely to receive NIH research funding than were White applicants. Even
 12 after controlling for education, country of origin, training, employer characteristics, previous research
 13 awards, and publication record, a highly significant gap in success rate persisted.”¹⁹ Figure 1, re-printed
 14 from the ACD’s final report, shows that compared to the make-up of the overall U.S. population,
 15 American Indian or Alaska Natives, Blacks or African Americans, Hispanics or Latinos (of any race), and
 16 Native Hawaiian and other Pacific Islanders represent a disproportionately small component of the NIH-
 17 funded investigators.



18 **Figure 1: Race and Ethnicity of the 2010 U.S. Population and the 2010 NIH Principal Investigators on**
 19 **research project grants (RPGs)**

20 **Notes:** 2010 U.S. Census Bureau Report, <http://2010.census.gov/2010census/data/2010> (left); NIH Principal Investigators on
 21 RPGs, NIH IMPAC II (right). *Total percentage is over 100 because those identified as Hispanic/Latino may also have
 22 identified as other races. PI information collected by NIH includes the option for an applicant to signify both race and
 23 ethnicity.
 24

25 The ACD offered numerous recommendations at the undergraduate level aimed at increasing the
 26 number of underrepresented minorities in the workforce pipeline, including strategies to improve
 27 evaluation of its training programs, enhance mentoring and career preparation for underrepresented

¹⁸ <http://www.nsf.gov/statistics/seind12/c2/c2s4.htm>, accessed on December 11, 2014.

¹⁹ Working Group on Diversity in the Biomedical Research Workforce, The Advisory Committee to the Director (2012). *Report of the Advisory Committee to the Director Working Group on Diversity in the Biomedical Research Workforce.*

1 minority trainees, provide more support to under-resourced institutions, and reduce bias in the merit
2 review of research and training applications.²⁰ In response, NIH has launched a number of initiatives to
3 increase workforce diversity, including Building Infrastructure Leading to Diversity (BUILD), the National
4 Research Mentoring Network (NRMN), and the Coordinating and Evaluation Center (CEC) that will serve
5 both the BUILD and NRMN grantees. These programs are aimed at attracting and retaining under-
6 represented minority students in undergraduate and graduate education programs. If successful, they
7 could serve as models for engaging and retaining pre-college students.

8 The lack of diversity in the biomedical workforce is not unique, but is endemic to all areas of science, as
9 well as many other esteemed career paths in our society. The ACD also cited evidence that individuals
10 from underrepresented minorities are less likely to receive undergraduate and graduate STEM degrees,
11 including those in biological sciences, chemistry, and physics.²¹ As noted by the National Science
12 Foundation, “Women, persons with disabilities, and three racial/ethnic groups—blacks, Hispanics, and
13 Native Americans—are considered underrepresented in science and engineering because they
14 constitute smaller percentages of science and engineering degree recipients and of employed scientists
15 and engineers than they do of the population.”²²

16 Research has shown that this disparity in engagement in science begins early in the educational pipeline.
17 Student attitudes toward STEM are positive at a young age across gender and racial/ethnic groups, yet
18 STEM performance of under-represented racial/ethnic minorities begins to fall behind at young ages,
19 and the performance gap grows larger over time. Underrepresented minorities declare undergraduate
20 STEM majors in the same proportion to the majority students, but fewer remain in these academic
21 disciplines,²³ due in large part to poor high school preparation as well as the broader trend for minorities
22 to leave college without a degree.²⁴ Gender differences also persist. Girls earn higher grades than boys
23 in STEM coursework overall and take advanced courses at similar rates, but middle school girls express
24 less positive attitudes about STEM than do boys. Once in college, women enter into some STEM majors
25 at lower rates (e.g., engineering, computer sciences, and mathematics and statistics), but are just as
26 likely as men to persist in STEM major once chosen.²⁵

27 Stakeholders identified a range of potential levers for addressing disparities in early STEM education,
28 including increasing access to qualified teachers, role models of potential careers, rigorous curriculum,
29 advanced coursework, extracurricular programs, resources, supplies, and infrastructure. Technology
30 used both inside and outside of the classroom may bridge access gaps. And for any intervention,

²⁰ Working Group on Diversity in the Biomedical Research Workforce, The Advisory Committee to the Director (2012). *Report of the Advisory Committee to the Director Working Group on Diversity in the Biomedical Research Workforce*.

²¹ National Science Foundation’s “Women, Minorities, and Persons with Disabilities Report 2011” (Tables 5.7 and 7.4, reporting 2000-2008 data)

²² National Science Foundation, “Women, Minorities, and Persons with Disabilities in Science and Engineering: 2013,” http://www.nsf.gov/statistics/wmpd/2013/pdf/nsf13304_digest.pdf

²³ National Academy of Sciences, National Academy of Engineering, and Institute of Medicine. *Expanding Underrepresented Minority Participation: America’s Science and Technology Talent at the Crossroads*. Washington, DC: The National Academies Press, 2011.

²⁴ Hrabowski FA. *Boosting Minorities in Science*. Science; 331 (6014), p. 125, 2011.

²⁵ National Science Foundation, “Women, Minorities, and Persons with Disabilities in Science and Engineering: 2013,” http://www.nsf.gov/statistics/wmpd/2013/pdf/nsf13304_digest.pdf

1 program effectiveness should be consistently and rigorously evaluated. Program developers and
2 managers should also keep in mind that student retention is best with long-term, sustained STEM
3 programs and those that engage families and peers.

4 A key goal of NIH's STEM programs should be to engage and retain students from under-represented
5 populations and provide them with experiences that will encourage them to enter the biomedical
6 research workforce and be successful. NIH could use its resources and leverage to introduce young
7 students to biomedical science, provide hands-on educational opportunities for interested students and
8 teachers, and attract and retain the interest of students from diverse backgrounds. NIH-funded
9 education outreach should be targeted to those from under-represented minority groups, students who
10 would not otherwise receive exposure to biomedical science, and teachers from schools with a large
11 share of under-represented minority students or low SES students.

12 As noted, many other organizations are involved in pre-college STEM engagement, and NIH should
13 identify and promulgate best practices of exemplar programs that target under-represented minorities
14 and have demonstrated a track record of directing students toward careers in the biomedical science
15 workforce, either via effective studies and job training in the technical and support services field or via
16 successful matriculation at the undergraduate level with a focus on careers in biomedical science. One
17 such program is the Stanford Medical Youth Science Program, which has had considerable success in
18 training, mentoring, and supporting low-income and under-represented minority high school students
19 and their parents. As another example, State-level Junior Academies of Science and their national
20 Association (AJAS), affiliated with the American Association for the Advancement of Science, attract
21 many high school students, including minorities, to mentor relationships, research competitions, and in-
22 depth experience annually at the AAAS national meetings.

Recommendations for NIH:

- Better target NIH-funded education outreach to students from under-represented groups and their teachers.
- Promulgate best practices of exemplar programs with a track record of directing under-represented minority students toward careers in biomedical science.
- Utilize demonstrably successful NIH enrichment programs (e.g., summer internship programs) as opportunities to enhance diversity.
- Closely monitor the outcomes of NIH's nascent undergraduate under-represented minority recruitment, mentoring, and training programs [National Research Mentoring Network (NRMN) and Building Infrastructure Leading to Diversity (BUILD)] to determine whether these strategies could also be employed with middle and high school students and their teachers.

1 **Key Finding #2: A broadening of workforce categories is important to convey to pre-college youth who**
 2 **might consider careers in biomedicine**

3 The current conceptualization of the biomedical science workforce, especially in academic training
 4 environments, is narrowly focused on principal investigators and clinician scientists. The biomedical
 5 science sector constantly evolves new job categories and opportunities for young people to engage in
 6 more cross-disciplinary science and other emerging areas of research, education, and implementation.²⁶
 7 This puts a premium on teaching and learning experiences that recognize and anticipate these changes.
 8 Just as the ACD concluded in its Biomedical Workforce report, the SMRB also feels that the cross-
 9 disciplinary nature of innovative biomedical science and the wide range of current and future career
 10 options available to students should be emphasized and promoted.²⁷

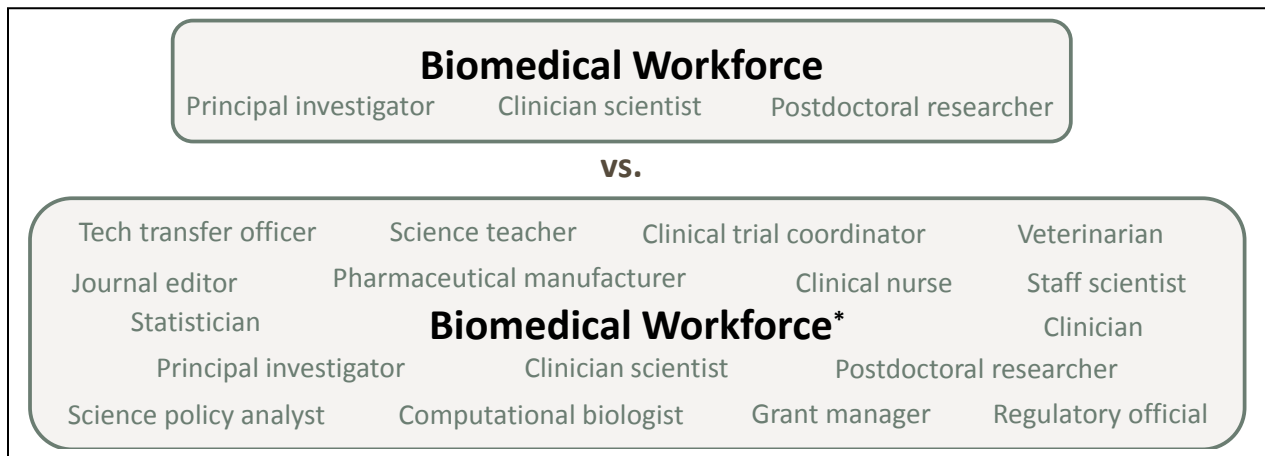


Figure 2: Outmoded Workforce Categories in the Biomedical Science Enterprise

11 NIH has the presence to encourage a broader definition of career paths in the biomedical sciences
 12 beyond principal investigators and clinician scientists (Figure 2). There is a need to influence popular
 13 perceptions of STEM careers and increase support in the biomedical science community for teaching,
 14 mentoring, and providing educational opportunities for pre-college students. NIH can advance this cause
 15 by embracing related activities as successful outcomes of NIH-funded training and projects.

16 One important offshoot of the ACD Biomedical Workforce report was the establishment of a new office
 17 dedicated solely to workforce analysis and strategy development, the NIH Division of Biomedical
 18 Research Workforce Programs (DBRWP). NIH’s pre-college STEM education programs should be
 19 informed by the work of the DBRWP, which is currently building its capacity to measure the supply,
 20 demand, and racial/ethnic/gender makeup of the biomedical workforce. Information about workforce
 21 composition and the demand for certain skills and knowledge can be used to inform the development
 22 and priority setting of pre-college programs.

²⁶ Alberts B, Kirschner MW, Tilghman S, Varmus H. *Rescuing US biomedical research from its systemic flaws*. Proc Natl Acad Sci; 111: 5773–5777, 2014.

²⁷ Biomedical Research Workforce Working Group, The Advisory Committee to the Director (2012). *Biomedical Research Workforce Working Group Report*.

Recommendations for NIH:

- Emphasize the wide range of current and future career options available to students.
- Promote the cross-disciplinary nature of biomedical science.
- Coordinate NIH’s STEM education programs with the work of the NIH Division of Biomedical Research Workforce Programs in order to:
 - understand the composition of the current biomedical workforce,
 - project future workforce needs, and
 - identify emerging skills that should be fostered in pre-college education settings.

B. NIH’S PRE-COLLEGE ENGAGEMENT PORTFOLIO IN RELATION TO THE PRE-COLLEGE STEM EDUCATION EVIDENCE BASE

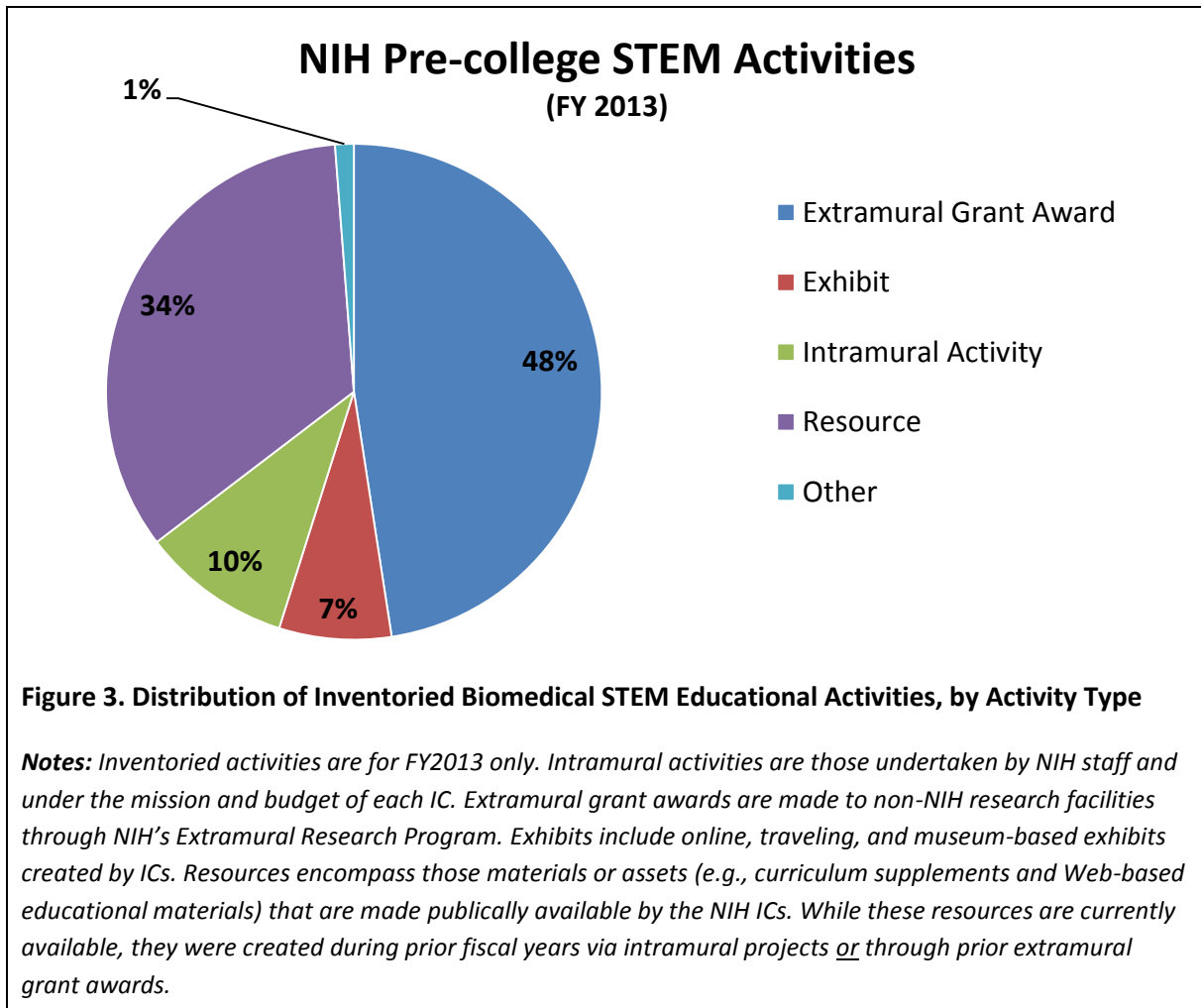
As part of the charge to prioritize the most cost effective uses of NIH’s efforts and resources for attracting young people to careers in the biomedical sciences, the SMRB asked NIH Institutes and Centers (ICs) to provide information on Fiscal Year (FY) 2013 programs and activities aimed at pre-college students and their teachers. The resulting inventory is subject to reporting variances and represents only a snapshot of NIH’s diverse investment in pre-college education. However, it is elucidative of the breadth, depth, and variety of NIH’s programming in this arena.

The inventory tallied 246 programs and activities across 25 ICs. The largest share (48%, n=117) of these activities are grant awards made from 15 ICs to extramural institutions (see Figure 3). Most of these (87) awards are resource grants for education projects that are geared toward increasing understanding of biomedical research, providing training, and/or creating programs that disseminate scientific discoveries to the public. Such grants support a variety of projects designed to, for example: enhance teacher skills through summer research immersion experiences; use food, diet, and nutrition to teach basic research, science, and math concepts to middle school students; and employ common ciliate protozoa as a focal point to teach high school students the relationships between science, biotechnology, and society. A small number (5) of awards were made under the Small Business Innovative Research (SBIR) mechanism, meant to stimulate research with the potential for commercialization. These grants support the development of neuroscience-focused education tools, such as interactive case studies, videogames, learning “kits,” and other interactive media.

Ten percent (n=24) of the inventory are active intramural projects. Over half (14) offer teachers and students opportunities to have hands-on experiences with biomedical research in the laboratories of the NIH intramural program. Other inventoried intramural projects include outreach programs in which NIH intramural scientists directly engage students in after-school, adopt-a-school, or science festivals. In addition, half (12) of the inventoried intramural programs are focused on direct engagement—ranging from summer internships to after-school programs—of students from underrepresented groups.

Another 34% (n=84) of programs and activities are resources maintained or provided by ICs through their websites or clearinghouses, such as a blog for teens that focuses on drug abuse science and news;

1 repositories of educational materials on topics such as eye health, biotechnology, genetics and
2 genomics, and neuroscience; and 19 curriculum supplements on topics ranging from mental illness to
3 bioethics. The remaining inventoried activities are exhibits at science museums and other venues (7%,
4 n=18) and other activities (2%, n=3), such as the development of science fair awards.



5
6 NIH invests primarily in activities geared toward middle school (6th–8th grade) and high school (9th–12th
7 grade) students, with 61% (n=149) of activities focused exclusively on middle and high school students.
8 When all inventoried activities involving middle or high school students are tallied, that number rises to
9 83% (n=203). A minority of inventoried activities (7%, n=16) are focused exclusively on students at grade
10 5 or below.

11 These programs are evaluated in a variety of ways, including summary reports, milestone reports,
12 surveys, interviews, and use statistics/reporting (e.g., web analytics). While the majority (71%, n=175) of
13 the inventoried activities report that the activities are evaluated in some manner, there is no
14 predominate or standard method for conducting such evaluations. Inventoried activities that included
15 no reported evaluation typically consisted of curriculum supplements, brochures, exhibits, and videos.

1 **The Pre-college STEM Education Evidence Base**

2 As a key element of the SMRB’s charge, and to assess the current state of NIH’s existing pre-college
3 activities, the Working Group examined the evidence base for successful pre-college biomedical science
4 programs. The intent was to identify the attributes, activities, and components of approaches that have
5 proven effective at preparing and attracting youth in biomedical science careers. However, there is little
6 empirical evidence on specific methodologies or educational approaches that are effective, either for
7 improving science teaching or student learning outcomes. As a case in point, the Department of
8 Education (ED) routinely and systematically identifies studies that provide credible and reliable evidence
9 of the effectiveness of educational practices, rating the rigor of such studies and publishing their
10 independent assessments online in the *What Works Clearinghouse (WWC)*.²⁸ Of the more than 8,000
11 research studies on educational intervention reviewed and rated by ED, only 32 examine interventions
12 to improve science learning, and only 3 of those interventions have been rated as “potentially
13 effective.”²⁹

14 While the evidence-base is thin, the Working Group did hear about a number of promising practices
15 from pre-college education practitioners and evaluators, which may prove effective in the long-run.
16 Real-world research experiences appear, in many cases, to be pivotal for capturing and retaining the
17 interest of students and teachers in biomedical science. Technology and mobile resources have shown
18 promise in increasing access to research experiences. The importance of sustained outreach and
19 mentorship, rather than one-off, short-term activities was also emphasized in the Working Group’s
20 deliberations. Lastly, simply surveying undergraduate students regarding what sparked their interest in
21 science may provide ideas worthy of testing in NIH’s portfolio.

22 Well-trained, highly-motivated, and sufficiently resourced teachers are key to engaging pre-college
23 students in the sciences. The most effective way to bring experiential learning to students may be
24 through their teachers, who should be provided the time, resources, and training to incorporate hands-
25 on science learning both inside and outside the classroom. Moreover, scientists, and the universities
26 who support them, should seek opportunities in local school districts to demonstrate the importance of
27 biomedical research to students and their teachers and emphasize its role in improving health.

28 One large-scale, multi-year experience in recruiting highly-motivated teachers to K-12 classrooms in
29 many of the most disadvantaged communities in the U.S. is Teach for America. This program has grown
30 over more than 20 years to place 5,000 college graduates from >50,000 applicants each year in dozens
31 of urban areas, several rural areas, and several Native American nations. Diversity and STEM have been
32 major emphases for years. In its 2014 teacher cohort, 50% identify as people of color, including 22%
33 African-American and 13% Latino; 47% are Pell Grant recipients; and 34% are first-generation college
34 students. Twenty percent of TFA teachers majored in a STEM subject in college, and one-third teach

²⁸ The What Works Clearinghouse (<http://ies.ed.gov/ncee/wwc/>) is curated by the Department of Education’s Institute of Education Sciences (IES) and provides independent review of education research.

²⁹ Per online search of the What Works Clearinghouse (<http://ies.ed.gov/ncee/wwc/>) conducted on December 2, 2014. Based upon a number of assessment factors, the WWC utilizes a 6-point effectiveness rating scale: Positive, Potentially Positive, Mixed evidence, No Discernible evidence, Potentially Negative, and Negative.

1 math or science since many economics and finance majors are qualified to teach math. NIH could
2 examine the STEM experience of programs such as Teach for America as potentially disruptive models
3 for change in pre-college STEM training (see Appendix C).

4 In the longer term, building up the evidence base will require rigorous research on effective pre-college
5 STEM education practices and more data – about students, schools, teachers, the interventions used,
6 and outcomes. Schools and universities, faced with tight budgets and tight timeframes, may not collect
7 the data necessary to create an evidence base or follow students’ educational outcomes, much less their
8 career outcomes. However, the state-of-the-art in educational practice and evaluation is a moving
9 target, and other governmental and private organizations are working hard to strengthen the STEM
10 education evidence base. Together, ED and NSF are leading in the development of standards for
11 evaluating educational research programs. In August 2013, the two agencies co-published a report,
12 *Common Guidelines for Education Research and Development*.³⁰ The guidelines are designed to improve
13 the quality, coherence, and pace of research in STEM education. NSF has also been working to identify
14 and disseminate effective approaches in pre-college STEM learning. In 2011, NSF commissioned the
15 National Research Council (NRC) to publish a report, *Successful K-12 STEM Education*,³¹ and in a follow-
16 up study in 2013, the NRC laid out a set of metrics for tracking the implementation of successful STEM
17 programs.³² Metrics included indicators of students’ knowledge and access to quality learning,
18 educators’ capacity, and the number of material investments made by federal, state, and local entities in
19 pre-college STEM education, among others. As these efforts continue to mature and advance, NIH
20 should apply best practices developed by ED and NSF to its own pre-college STEM activities.

21 **Key Finding #3: NIH at present has a large portfolio of pre-college STEM activities. NIH should seek to**
22 **streamline these activities and enhance the effectiveness of these activities through increased**
23 **coordination.**

24 The suite of current NIH programs lacks both a central reporting structure and an ongoing infrastructure
25 to ensure accountability. NIH supports a number of biomedical STEM programs targeted at 6th–12th
26 grade students and teachers (e.g., Science Education Partnership Awards, summer research programs),
27 but these efforts are largely ad hoc and uncoordinated across the NIH.

28 Enhanced coordination and consolidation would enable NIH to maximize the effectiveness of its STEM
29 activities by providing a viewpoint from which to address global (NIH-wide) needs and opportunities. To
30 better coordinate STEM activities, a complete inventory of the NIH’s current and planned pre-college
31 biomedical STEM programs is needed. The expenditures to support these programs should be collated
32 and summed, and metrics to assess the effectiveness of extant NIH STEM programs need further
33 development. This report should serve as a dynamic repository with periodic updates and re-
34 assessments.

³⁰ <http://ies.ed.gov/pdf/CommonGuidelines.pdf>

³¹ National Research Council. *Successful K-12 STEM Education: Identifying Effective Approaches in Science, Technology, Engineering, and Mathematics*. Washington, DC: The National Academies Press, 2011.

³² National Research Council. *Monitoring Progress Toward Successful K-12 STEM Education: A Nation Advancing?*. Washington, DC: The National Academies Press, 2013.

1 Aided by routine tracking and assessment of trans-NIH activities, the agency would be better equipped
2 to optimize existing efforts across NIH such that they advance NIH’s STEM education engagement goals,
3 are scalable, and follow existing best practices. Improved assessment activities will help determine, for
4 example, whether NIH should direct more resources to those engaged in teaching or mentoring 6th-12th
5 grade students and whether NIH is maximizing each activity’s outreach to under-represented and low
6 SES populations.

Recommendations for NIH:

- NIH should establish an oversight body focused on pre-college STEM, with galvanizing leadership and with representation of all relevant NIH Institutes, Centers, and Offices and non-NIH committed stakeholders.
- The Steering Committee should develop plans for and oversee implementation of the following activities:
 - Development of a uniform reporting template of NIH sponsored pre-college STEM programs;
 - Creation and maintenance of an inventory of all programs;
 - Development of optimum processes for the functionality of all current and planned programs;
 - Coordination of these programs including synergy with other Federally supported pre-college STEM activities; and
 - Development of evaluative criteria to gauge the success of these programs (see specific recommendations in the next section).
- Additionally, this body should emphasize efforts to:
 - Strongly encourage all NIH-supported STEM programs to maximize outreach to under-represented populations.
 - Identify best practices and expand exemplar programs.
 - Identify resources to be provided to those engaged in teaching or mentoring pre-college students.
 - Provide an infrastructure and process to enable curriculum developers to identify and collaborate with subject matter experts at NIH.

7

8 The SMRB recognizes that no one office alone holds sole interest in the state of the biomedical
9 workforce and the engagement of our Nation’s youth in the biomedical sciences. Many NIH divisions
10 have a stake in engaging students and diversifying the workforce. Thus a structure that provides
11 centralized coordination will enhance success.

12

1 **Key Finding #4: There are no standard measures of success for the existing NIH pre-college STEM**
2 **activities. A more rigorous evaluation process may strengthen all activities and produce new best**
3 **practices.**

4 Closely related to NIH's coordination needs, the variety of evaluative methods evidenced in our
5 inventory speaks to a key challenge of the STEM education enterprise: the lack of strong, evidence-
6 based criteria by which to gauge effectiveness. While it is possible to measure aspects of program
7 implementation and certain short-term outputs of funded activities, the current inability to relate these
8 short-term outputs to long-term STEM outcomes (e.g., STEM aptitude, interest, undergraduate and
9 graduate retention, and career trajectories) inhibits sound decision-making for future directions. There
10 is a dearth of evidence for what works in STEM education. Without such evidence, it is impossible to
11 precisely define the attributes of effective STEM programs and thus create a common evaluative
12 standard for NIH's STEM education activities (both within and outside of classroom settings).

13 Another challenge to the evaluation of NIH's pre-college activities is their placement, in many cases,
14 outside the formal academic setting. A sizable number of NIH's inventoried activities fall under the
15 category of "informal science." Informal science is loosely defined as science education activities outside
16 of the formal academic setting and outside of preparation for standardized college admissions tests.
17 Examples of informal science include science fairs, mobile laboratories, and science-oriented television
18 programs like Sesame Street and CSI: Crime Scene Investigation. The engagement and hands-on
19 opportunities informal science offers students are likely invaluable, leaving lasting impressions on
20 children. However, informal science is nearly impossible to evaluate because of the difficulties in
21 attributing long-term outcomes to what may be one of many experiences with informal science
22 activities. Informal science activities are often short-term, and additional variables make it difficult to
23 tease out the effects of just one activity. Standard formal evaluations may show no outcome, leading
24 evaluators to (perhaps incorrectly) conclude that there has been no effect.

25 Despite the challenges faced in implementing evidence-based programs and evaluating the overall
26 effectiveness of its pre-college STEM activities, there are opportunities for NIH to improve. In the near-
27 term, NIH can identify and broadly adopt a set of common assessment metrics to capture core, defining
28 characteristics of its pre-college activities. For example, best practices can be applied to measure factors
29 related to program/activity implementation (e.g., has the program been implemented as planned?),
30 intervention characteristics (e.g., what is the type of intervention?; who is the target population for the
31 program/activity?), and short-term outputs (e.g., how many people were served by the
32 program/activity?; at its conclusion, were participants more interested in pursuing biomedical
33 coursework or career paths?). As illustrated in the inventory of current NIH pre-college programs and
34 activities, many of these factors are being measured already, albeit inconsistently. In particular, given
35 the importance of increasing the participation of under-represented minorities in the biomedical
36 workforce, NIH should consistently assess the demographic characteristics of participants and account
37 for differing demographics in short-term outputs.

38 Devising strategies to gauge the long-term effectiveness of NIH's pre-college efforts will take more time
39 and will need to be implemented in a step-wise manner as the evidence base grows. NIH will need to

1 monitor the progress of other agencies and organizations as they build the evidence base for STEM
2 education. Relevant offices within NIH should also continue to keep abreast of and contribute to the
3 literature regarding what interventions work, as well as continue efforts to link pre-college student data
4 with information about the biomedical research workforce. ED's What Works Clearinghouse will be a
5 critical resource for tracking the growth of the STEM education evidence base over time. Eventually, the
6 agency should expand appropriate metrics and outcome measures, and improve the collection of
7 student-level data so that successful programs can be studied and replicated. As NIH's evaluation
8 capacity grows, the agency should consider the feasibility of requiring regular, consistent evaluation of
9 pre-college engagement programs to determine their impact, effectiveness, and scalability. Based on
10 this information, NIH would be in the best position to consider rebalancing its education portfolio to
11 respond to evaluation results and address program priorities.

Recommendations for NIH:

- Identify and track the development of STEM education best practices and evaluation standards.
- Define successful outcomes (to include careers listed under the broader definition of the biomedical workforce).
- Develop metrics needed to evaluate the effectiveness of extant NIH STEM programs.
- Apply systematic and comparable evaluation practices for NIH's pre-college programs.
- As the evidence base for pre-college STEM education grows, determine the feasibility of expanding evaluation metrics to include measures of long-term program effectiveness.
- Work with other agencies and organizations to improve the collection of longitudinal, student-level data, especially as they relate to pre-college student's exposure to biomedical and human health learning experiences and eventual career trajectories.

12 **C. MAXIMIZING THE IMPACT OF NIH'S PRE-COLLEGE STEM INVESTMENTS**

13

14 **Key Finding #5: Untapped potential of NIH's research community**

15 The Working Group determined that leveraging NIH's existing network of funded research centers offers
16 an effective and cost-efficient opportunity to increase NIH's impact on pre-college engagement in
17 biomedical science. NIH supports more than 300,000 research personnel at over 2,500 universities and
18 research institutions. The reach of NIH is extensive—NIH-funded universities and institutions can be
19 found in every U.S. state and territory. In addition, about 6,000 scientists work in NIH's own Intramural
20 Research laboratories, located in Bethesda, Baltimore, and Frederick, Maryland, as well as in Research
21 Triangle Park, North Carolina and Hamilton, Montana. Many NIH-funded universities, investigators, and
22 trainees already devote time and resources to teaching, tutoring, mentoring, and providing hands-on
23 research experiences to pre-college students and teachers. NIH should continually identify effective,
24 scalable programs at U.S. universities that can be highlighted and emulated around the country.

1 For example, the Working Group heard about the [Stanford Medical Youth Science Program \(SMYSP\)](#)
2 which is supported by NIH and other public and private sources. The SMYSP offers university- and
3 school-based science education programs for low-income and under-represented minority high school
4 students, their parents, and teachers across California. The program has emerged as a national model
5 for enriching and diversifying scientific and health professions. NIH could expand the reach of such
6 model activities and find more ways to encourage researchers and trainees to engage in educational
7 outreach and provide youth with genuine research experiences. To encourage innovation, NIH should
8 avoid overly prescriptive guidelines regarding outreach activities.

9 In developing and testing such promising practices, NIH should consider providing support for
10 supplemental educational materials to increase student access to hands-on research experiences, such
11 as high-tech classrooms and mobile laboratories. NIH can use various mechanisms to encourage
12 research universities to engage in outreach to local schools, for example by adopting a local school and
13 opening their research facilities to students and teachers. This would expose students to functioning
14 laboratories and active scientists and might lead to more opportunities for interaction between
15 scientists, students, and teachers. NIH has summer research programs for students and teachers, but
16 more sustained investments and year-round STEM outreach may be needed.

17 At a broader level, the biomedical research community needs to make pre-college student outreach part
18 of its culture. Such a culture change would place ambassadors for science, role models, and potential
19 mentors in the lives of students and teachers across the U.S. A widely-known example is the
20 engagement by Leroy Hood and his colleagues and trainees with the public schools in Pasadena and for
21 the past 20 years in Seattle. Increased commitment to pre-college outreach would likely also elevate
22 teaching as a career option among trained scientists. It is important to note that increasing the number
23 and quality of science teachers can only be effective if schools hire and retain these teachers, prioritize
24 science, and give teachers adequate classroom time and resources, including resources for hands-on
25 learning.

Recommendations for NIH:

- Increase the impact and reach of pre-college STEM education efforts by leveraging existing investments in university researchers, trainees, and infrastructure.
- Encourage and incentivize STEM outreach by offering supplemental funding to grantee institutions, researchers, and trainees to provide educational outreach, including summer internships, research seminars, science fairs, and hands-on science experiences.
- Communicate the importance of pre-college student and teacher engagement, especially directed at low SES and underrepresented minorities, as a cultural value of the biomedical research community endorsed by NIH leadership, including all Institute and Center (IC) Directors:
 - Engage pre-college students and teachers in science enrichment activities;
 - Elevate teaching as a career option for trainees; and
 - Provide opportunities for researchers and trainees to provide sustained, long-term mentorship to pre-college students and teachers.

1 **Key Finding #6: Opportunities for partnering with other entities committed to pre-college STEM**
2 **outreach**

3 Many institutions and organizations recognize the importance of engaging students in STEM to prepare
4 them for careers in the increasingly competitive and global economy. As NIH's unique strength is its
5 expertise in biomedical research, the agency needs to seek opportunities to share that expertise with
6 the many other public and private organizations engaged in outreach to pre-college students and
7 teachers. NIH and the varied entities in this space could improve the coordination of their collective
8 efforts with the goal of complementing each other's roles and influencing audiences beyond the reach
9 of single organizations, thus achieving greater impact than working in isolation.

10 There are growing opportunities for NIH to capitalize on mutual interests in the private and non-profit
11 sector. The Working Group learned about numerous STEM efforts spearheaded by non-governmental
12 organizations, including biomedical and pharmaceutical industry, medical and health research
13 professional societies, and philanthropic organizations. One example noted above is the network of
14 Junior Academies of Science, linked with AAAS, which has a deep commitment to STEM education
15 through its Project 2061 and many other initiatives. The SMRB also learned about recognition of and
16 financial support for pre-college science teachers from Amgen, Inc. The Working Group also gathered
17 extensive information about the recruitment of highly qualified science and math majors, many of them
18 minorities themselves, to teach in highly disadvantaged communities by Teach For America (see
19 Appendix C). NIH could reach out to some of their partners, such as the Society of Black Engineers.

20 Some estimates suggest that the private sector is providing upwards of \$1 billion in philanthropic
21 funding for pre-college STEM education programs every year. Many of these groups embrace pre-
22 college science education as a core value, promote the inclusion of biomedical science in their outreach
23 activities, and share NIH's goal of strengthening the biomedical workforce pipeline. NIH should explore
24 ways to convene these organizations for the purpose of coordinating activities, identifying areas of
25 unmet need, sharing best practices, and demonstrating the wide range of rewarding career paths.

26 With the elevation of STEM education as a national priority by the Obama Administration, federal
27 investments and interagency coordination in this area have expanded in recent years. ED and NSF are
28 responsible for the largest share of federal STEM education programs, many of which fund research to
29 identify what works in STEM instruction.³³ As discussed earlier in the report, ED and NSF are leading
30 efforts to both improve the STEM evidence base and to develop evaluation practice approaches and
31 guidelines. Again, NIH should monitor those efforts closely.

32 NSF is also the lead federal entity for collecting data on post-secondary STEM education and career
33 outcomes. The data collected by NSF's Center for Science and Engineering Statistics is used to
34 understand the composition of the biomedical workforce and to reveal long-term workforce trends, but
35 opportunities may exist to enhance and expand these data sets. For example, NIH would benefit from
36 more granular data on the many types of careers specifically involved in biomedical research as well as

³³ Committee on STEM Education, National Science and Technology Council (2011). *The Federal Science, Technology, Engineering, And Mathematics (STEM) Education Portfolio*.

1 the types of individuals who fill those positions. Moreover, strategies to link longitudinal pre-college
2 student education data with existing post-secondary STEM education and workforce data, would
3 provide a powerful resource to track whether national efforts are improving STEM education and long-
4 term retention in STEM careers.

5 The interagency Committee on Science, Technology, Engineering, and Math Education (CoSTEM) offers a
6 venue in which NIH can learn about other agencies' STEM programs and identify areas to collaborate. As
7 described above in the Introduction (Federal Landscape of Pre-College STEM activities), CoSTEM and its
8 related working groups (collectively called FC-STEM) are working together to implement a five year,
9 federal-wide strategic plan aimed at improving STEM education and engagement, from preschool
10 through the graduate level. NIH should carefully monitor and contribute biomedical research expertise
11 to the two FC-STEM efforts that are particularly relevant to pre-college STEM activities: one focused on
12 improving the diversity of biomedical students and trainees and the second on improving preschool
13 through 12th grade (P-12) STEM instruction.

Recommendations for NIH:

- Seek opportunities to provide expertise and guidance to private and non-profit organizations that support pre-college programs and biomedical science outreach and to learn from them.
- Monitor the subcommittee activities of the National Science and Technology Council's Committee on STEM Education (CoSTEM), in particular the subgroups devoted to improving the diversity of biomedical students and trainees and improving P-12 STEM instruction.
- Leverage NIH's expertise to support government-wide efforts to improve STEM education and strengthen the evidence base.
- Provide expertise to ED and NSF as they build and implement evaluation standards for STEM programs.
- Partner with ED and NSF to improve data collection at the undergraduate and pre-college level that will be useful for biomedical workforce analysis.

14 **IV. CONCLUSION**

15 *To be written following vote on report by the full Board.*

16

1 APPENDIX A: Speakers

2 Hal Salzman, Ph.D., *Professor, E.J. Bloustein School of Planning & Public Policy, J.J.*
3 *Heldrich Center for Workforce Development, Rutgers University*

4 Stephen Pruitt, Ph.D., *Senior Vice President of Content, Research & Development,*
5 *Achieve, Inc.*

6 Sharon Milgram, Ph.D., *Director, Office of Intramural Training & Education, National*
7 *Institutes of Health*

8 Carol Krause, M.A., *Chief, Public Information and Liaison Branch, National Institute on*
9 *Drug Abuse, National Institutes of Health*

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- 4 Claus von Zastrow, Ph.D. *Chief Operating Officer and Director of Research, Change the*
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7 *National Science Foundation*
- 8 Jane Hannaway, Ph.D. *Founding Director, CALDER (National Center for Analysis of*
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- 11 William E. J. Doane, Ph.D. *Research Staff Member, Science and Technology Policy*
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- 13 Luci Roberts, Ph.D. *Director of Planning and Evaluation, Office of Extramural Research,*
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- 18 David M. Omenn, *Vice-President for Recruitment, Teach For America*
19

1 **APPENDIX B: Summary statistics for NIH's pre-college activities in FY 2013**

Table B1. Inventoried Biomedical STEM Educational Activities, by, by IC

IC	Grades P-12			Grades 6-12, exclusive		
	Total	Count	%	Total	Count	%
Unattributed	1					
CC	3	2	67%	3	2	67%
NCATS	1			1		0%
NCI	7	5	71%	6	4	67%
NCRR	1		0%			
NEI	12	1	8%	3	1	33%
NHGRI	3			3		0%
NHLBI	15	3	20%	13	3	23%
NIA	2	1	50%	2	1	50%
NIAAA	4			3		0%
NIAID	10	9	90%	7	6	86%
NIAMS	3	1	33%	2	1	50%
NIBIB	7			7		0%
NICHD	1					
NIDA	32	1	3%	19	1	5%
NIDCD	3			1		0%
NIDCR	2	1	50%	1	1	100%
NIDDK	4	3	75%	3	2	67%
NIEHS	13	1	8%	8	1	13%
NIGMS	6	4	67%	4	3	75%
NIMH	6	1	17%	5	1	20%
NIMHD	3	3	100%	3	3	100%
NINDS	16	1	6%	5	1	20%
NINR	1			1		0%
NLM	26	2	8%	13	1	8%
OD	64	63	98%	35	34	97%
Grand Total	246	102	41%	148	66	45%

Notes: Inventoried activities are for FY2013 only. Exclusive 6th-12th grade activities reflect those inventoried activities that focus exclusively on grades 6 through 12.

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Table B2. Distribution of Inventoried Biomedical STEM Educational Activities, by Activity Type and Grade Focus

Activity Type	All Activities		6th-12th Activities, Inclusive		6th-12th Activities, Exclusive	
	Count	%	Count	%	Count	%
Extramural Grant Award	117	47%	95	47%	66	44%
Exhibit	18	7%	15	7%	9	6%
Intramural Activity	24	10%	22	11%	18	12%
Resource	84	34%	68	34%	54	36%
Other	3	2%	2	1%	2	1%
Grand Total	246		202		149	

Notes: Inventoried activities are for FY2013 only. Inclusive 6th-12th grade activities reflect all inventoried activities that include, but are not limited to, 6th-12th grade students. Exclusive 6th-12th grade activities reflect those inventoried activities that focus exclusively on grades 6 through 12. Intramural activities are those undertaken by NIH staff and under the mission and budget of each IC. Extramural grant awards are made to non-NIH research facilities through NIH's Extramural Research Program. Exhibits include online, traveling, and museum-based exhibits created by ICs. Resources encompass those materials or assets that are made available by the NIH ICs. While these resources are currently available to the community, they were created during prior fiscal years via intramural projects or through prior extramural grant awards.

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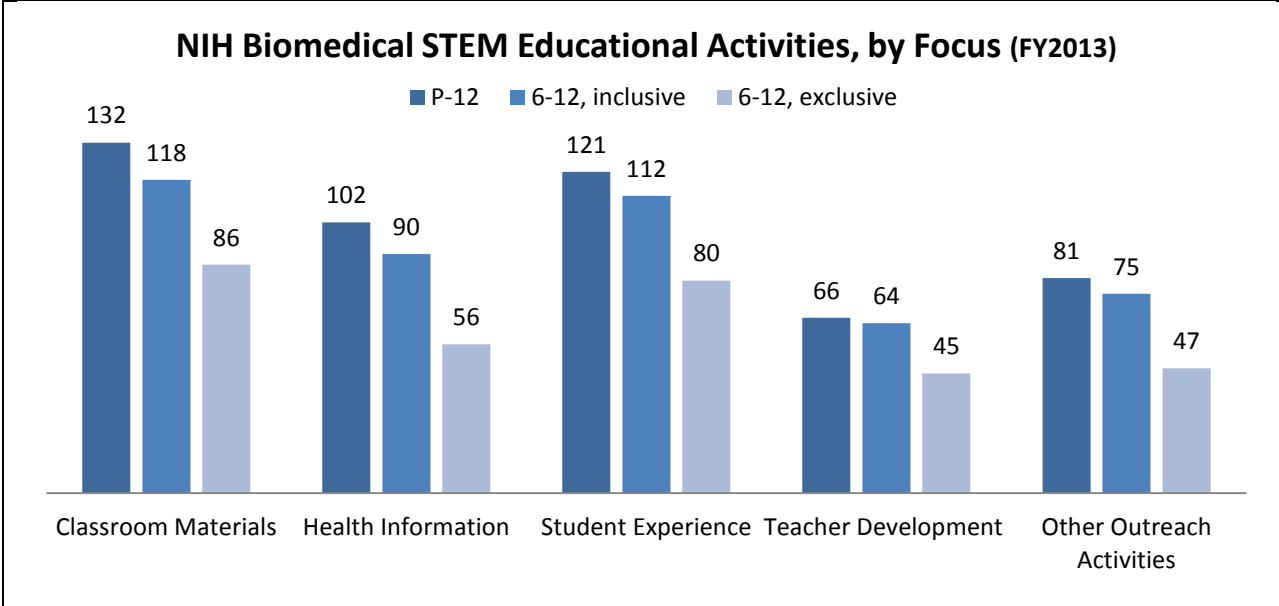


Figure B1. Focus of NIH Inventoried Biomedical STEM Education Activities, FY2013.

Notes: Inventoried activities are for FY2013 only. Inclusive 6th-12th grade activities reflect all inventoried activities that include, but are not limited to, 6th-12th grade students. Exclusive 6th-12th grade activities reflect those inventoried activities that focus exclusively on grades 6 through 12. Inventoried activities may be reported with multiple foci.

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1 APPENDIX C. The Experience of Teach for America

2 Teach For America (TFA), a not-for-profit, non-federal, national organization conceived by a single
3 college student in her thesis project in 1989, has >20 years of experience recruiting and placing highly-
4 motivated college graduates (and some graduate students) in K-12 classrooms in many of the most
5 disadvantaged communities in the United States. This program now places 5,000 college graduates
6 from >50,000 applicants each year in dozens of urban areas, several rural areas, and several Native
7 American nations. Diversity and STEM have been major emphases for years. In the 2014 Teacher Corps
8 cohort, 50 percent identify as people of color, including 22 percent African-American and 13 percent
9 Latino. Forty-seven percent are Pell Grant recipients—a proxy for lower-income background—and 34
10 percent are first-generation college students. Twenty percent of TFA teachers majored in a STEM subject
11 in college; 33% teach math or science since many economics and finance majors are qualified to teach
12 math. The ethnicity reflects the total Corps. All teach in schools where the vast majority of students
13 come from low-income households; 90% of students taught by Corps members are African-American or
14 Latino. A fundamental mission is to raise the aspirations of these children, as well as Native American
15 children, while catching up on grade-level.³⁴ Incoming teachers are provided robust training and
16 ongoing support to ensure they obtain the classroom skills to succeed as a teacher. Partnering schools
17 now seek multiple TFA placements, which provide mutual support and greater chances for children to
18 have reinforcing experiences. TFA launched a national STEM Initiative in 2006 to help combat the
19 extreme shortage of qualified math and science teachers in low-income schools, partnering with
20 organizations like Tau Beta Pi, the National Society of Black Engineers, and the American Indian Science
21 and Engineering Society to form a coalition committed to ensuring content experts consider teaching.

22 Career trajectories have been followed closely. Of 37,000 alumni, 32% remain in K-12 classrooms, 24%
23 pursue other education-related careers (assistant principals, charter school founders, educational
24 technology, law, policy), and an additional 20% work directly with low-income communities in other
25 sectors. Others pursue a wide range of careers, including medical and health sciences careers after
26 gaining personal maturity in these challenging teaching assignments.

27 On campuses, TFA staff meet with local chapters to share the stories of teachers and alumni who have
28 made teaching a part of a long-term path of impact in education, health care, and medicine. Many of the
29 skills doctors must possess mirror the characteristics developed by teachers: explaining complex topics
30 in ways people can understand, making decisions and demonstrating judgment in moments of stress,
31 persevering in the face of challenge, and more. Teach For America also partners with graduate schools,
32 including medical schools and PhD programs, to encourage top students to teach for at least two years
33 before entering their programs. Corps members going into science careers are kept involved to show
34 kids the positive career opportunities and show TFA applicants that the two years of teaching add to
35 their career development instead of delaying it.

³⁴ <http://www.teachforamerica.org/our-organization/special-initiatives/math-and-science-education-initiative-stem>.