NIH’s Role in the American Recovery and Reinvestment Act (ARRA)

NIH is well positioned to fund the best science in pursuit of improving the length and the quality of the lives of our citizens, while at the same time stimulating the economy. NIH conducts and supports outstanding biomedical and behavioral research, through more than 3,000 institutions across the country-- institutions that have a direct impact upon the local economies in their towns, cities, and states.

NIH Funding

The Recovery Act provides a total of $10.4 billion, all available for two years--through September 2010. We expect to spend as much as possible in FY 2009. Below is a summary:

-$8.2 billion in support of scientific research priorities
  - $7.4 billion is transferred to the Institutes and Centers and Common Fund (CF), based on a percentage-based formula
  - $800 million to the Office of the Director (OD) (not including CF)
    (For example, support for Challenge Grants), a program designed to focus on health and science problems where progress can be expected in two years.
  - To support additional scientific research-related activities that also align with the overall purposes of the Act

-$1 billion to support Extramural Construction, Repairs, and Alterations
  - Allocated to the National Center for Research Resources (NCRR) in support of all NIH funded research institutions

-$300 million Shared Instrumentation and other capital equipment
  - Allocated to NCRR to support all NIH activities

-$500 million for NIH buildings and facilities
  - To fund high priority repair, construction and improvement projects on NIH campuses that also align with the overall purpose of the Act

-$400 million for Comparative Effectiveness Research (CER)
Many types of funding mechanisms will be supported, but, in general, NIH will focus scientific activities in several areas:

1) We will choose among recently peer reviewed, highly meritorious R01 and similar mechanisms capable of making significant advances with a two-year grant. R01 are projects proposed directly from scientists across the country. We will also fund new R01 applications that have a reasonable expectation of making progress in a two-year grant.  
2) We will accelerate the tempo of ongoing science through targeted supplements to current grants. For example, we may competitively expand the scope of current research awards or supplement an existing award with additional support for infrastructure (e.g., equipment) that will be used in the two-year availability of these funds.

3) NIH anticipates supporting new types of activities that fit into the structure of the Recovery Act. It will support a reasonable number of awards to jump start the new NIH Challenge Grant program. This program is designed to focus on health and science problems where progress can be expected in two years. The number of awards and amount of funds will be determined, based on the scientific merit and the quality of applications.

4) NIH will also use other funding mechanisms, as appropriate.

The Process

NIH is working closely with the HHS Recovery Act Implementation team to ensure transparency and accountability for their Recovery Act funds. As NIH Spend Plans are approved through this process, NIH will post information about these critical projects and their impact on the economy on HHS/RECOVERY.gov

The impact is expected to extend beyond the immediate scientists who will receive funds, to allied health workers, technicians, students, trade workers and others who will receive the leveraged benefits. We understand to accomplish the goals of the Recovery and Reinvestment Act, it will take the help of the entire scientific community. Beyond the immediate economic stimulus, the long-term impact from the science funded by the Recovery Act will have a positive impact upon the health of the nation for years to come.