



NICHD Strategic Planning Group
Eunice Kennedy Shriver National Institute of Child Health and Human Development
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RE: Request for Information (RFI) on the National Institute of Child Health and Human Development (NICHD) Strategic Plan Fiscal Years 2025-2029
Notice Number: [NOT-HD-24-028](#)

October 11, 2024

Dear NICHD Strategic Planning Group:

On behalf of the Federation of Associations in Behavioral and Brain Sciences (FABBS), thank you for the opportunity to submit comments on the NICHD's proposed goals and themes for 2025-2029 to best serve the mission of the Institute.

FABBS represents 29 scientific societies and 60 academic departments dedicated to advancing knowledge in the sciences of mind, brain, and behavior. Our members bring extensive expertise in cognition and learning, human developmental science, as well as behavioral and social factors across domains. We are eager to support NICHD's [mission](#): "to lead research and training to understand human development, improve reproductive health, enhance the lives of children and adolescents, and optimize abilities for all." FABBS thanks NICHD Director, Dr. Bianchi for meeting with us this past June. Our members learned a lot from the engaging conversation and look forward to making this an annual conversation.

NICHD has indicated that this current effort is a refresh of the Institute's strategic plan that will include only minor revisions to the goals set forth in 2020. However, since that time, the COVID-19 pandemic has dramatically disrupted the world with profound impacts on children's and adolescents' health and development. In addition, FABBS researchers have made significant advances in areas of behavioral and cognitive research with the potential to help promote well-being. Further, NIH leadership, and also the federal government, have actively encouraged the increased integration of behavioral and social sciences across all institutes and centers (ICs) and federal policies. This revision of the NICHD strategic plan should reflect these notable changes since 2020.

The COVID-19 pandemic shined a bright light on the importance of behavioral and social science to both promote healthy behaviors (mask wearing and social distancing) and implement effective interventions (vaccine uptake). Researchers continue to assess and evaluate the impact on children and adolescents who were isolated from peers due to school closures time and relaying on screens more than ever before. NICHD should be prioritizing behavioral and cognitive questions raised by COVID-19 and in anticipation of future pandemics.

Over these past four years, in part thanks to funding from NICHD, the field has improved our understanding of adverse childhood experiences (ACEs). Given the profound impact that childhood trauma – of which the pandemic is an example – can have on long-term developmental outcomes, overlooking this issue risks missing opportunities for early intervention that could prevent or mitigate lifelong challenges. For instance, early interventions in childhood trauma can mitigate Attention-Deficit/Hyperactivity Disorder (ADHD) symptoms, as studies show a strong correlation between ACEs and ADHD ([Zhang et al., 2022](#)). This area warrants greater attention in the NICHD plan.

Another salient area is social and emotional learning (SEL) for children’s and adolescents’ well-being and academic achievement, and yet, this critical topic is missing from the current version of the strategic plan. SEL helps children “acquire the knowledge and skills to understand and manage emotions, establish and maintain relationships, and develop self-awareness” ([Varghese & Natsuaki, 2021](#)). Schools play an important role in SEL, through both formal and informal channels. FABBS encourages NICHD to build on invests in research that aims to better understand the benefits of SEL.

FABBS encourages NICHD to align the strategic plan with that of the NIH-wide strategic plan and incorporate the recommendations made in the Congressionally, mandated and Council of Councils approved, report: [Integration of Behavioral and Social Sciences Research at the National Institutes of Health](#). The report directs institutes and centers (ICs) to ensure that BSSR is “more consistently included and linked to the IC mission and priorities”, specifically in their strategic plans. In 2021, the [NIH-wide strategic plan](#) was updated, expanding ‘biomedical research’ to include ‘biomedical and behavioral sciences’ in its objectives. As a further indication of the growing understanding of the critical contributions of behavioral and social sciences, in May of 2024, the Office of Science and Technology Policy’s (OSTP) released the [Blueprint for the Use of Social and Behavioral Science to Advance Evidence-Based Policymaking](#). This current NICHD draft falls short on incorporating these disciplines.

Research Goal #1: Understanding the Molecular, Cellular, and Structural Basis of Development

This goal is limited in its scope, with the focus on atypical development and little mention of typical development. FABBS suggests that the goal reflect understanding of both typical and

atypical development. Furthermore, it is limited in terms of the specific factors underlying development that are emphasized. FABBS recommends that NICHD consider not just the biological basis of development, but also the cognitive, behavioral, and social factors. We encourage NICHD to revise this goal as follows: “Understanding the Molecular, Cellular, Structural, Cognitive, Behavioral, and Social Basis of Typical and Atypical Development.”

As highlighted in the NIH Council of Councils report on [Trans-NIH Research Opportunities in the Basic Behavioral and Social Sciences](#), one area of research that is ripe for BSSR integration is the field of epigenetics, which studies how behavioral and environmental factors influence gene expression. FABBS recommends expanding research into epigenetics, especially in relation to environmental factors such as neighborhood disadvantage, which is essential for understanding development at the molecular level ([Reuben et al., 2020](#)).

Cognitive research is also critical to understanding both typical and atypical development. For example, the Council of Councils report indicates that cerebellum research has largely been neglected across the NIH. Recent studies, such as ["Little brain, little minds" \(Olson, 2023\)](#) and ["Population-wide cerebellar growth models" \(Gaiser et al., 2024\)](#) underscore the cerebellum’s crucial role in children’s cognitive and emotional development, including social interaction and language. Addressing this gap presents an opportunity for NICHD to enhance our understanding of human development.

Research Goal #4: Improving Child and Adolescent Health and the Transition to Adulthood

FABBS recommends revising this goal to include infants, as it is not clear how “child” is defined. This goal should be about improving health from infancy through adolescence and young adulthood.

FABBS encourages NICHD to build on its individual-level and dyadic analyses (e.g., mother-child interactions) by broadening to encompass larger contexts, such as family systems, peer groups, and non-familial caregivers. Moreover, family structures have changed greatly over recent decades, with more single parents, divorced parents, same-sex parents, and blended families. We encourage NICHD to invest in research that studies such “non-traditional” family structures.

Notably, there is no mention of learning disabilities, such as dyslexia and ADHD. Studies on gene-environment interactions show that children with certain genetic predispositions for ADHD experience more severe symptoms in stressful environments ([Schwabe et al. 2024](#)). Similarly, in dyslexia, genetic factors interact with environmental influences, such as limited language exposure and socioeconomic conditions, which can either worsen or mitigate reading difficulties. Increased research in this area is needed to better understand these conditions and inform targeted interventions.

FABBS members encourage NICHD to increase attention to youth mental health, both in respect to illness and normative mental health development, especially given the ongoing [youth mental health crisis](#). The absence of the latter, in particular, limits research central to understanding and identifying prevention and early intervention opportunities. Moreover, mental health illnesses can manifest differently in children and adolescents compared to adults. Therefore, it may not be sufficient to leave the study of mental health solely to the National Institute of Mental Health (NIMH). FABBS recommends that NICHD and NIMH collaborate to ensure that youth mental health is not overlooked.

Goal 5: Advancing Safe and Effective Therapeutics and Devices for Pregnant and Lactating Women, Children, and People with Disabilities

FABBS encourages NICHD to include behavioral interventions in addition to technological and medical. Behavioral interventions can be leveraged to both promote well-being and prevent or treat serious problems. For example, home visiting programs targeting parents who have abused their children can reduce the recurrence of that abuse ([Han & Oh, 2022](#)).

BSSR is also important to the development and implementation of medical and technological interventions. As we saw during the pandemic, an intervention's efficacy is quickly degraded by noncompliance: A vaccine is useless if people will not receive it. BSSR can shed light on why individuals refuse effective medical care or interventions.

Cross-Cutting Themes

FABBS recommends distinguishing between health disparities and social determinants of health (SDOH), as they are often conflated. Health disparities refer to preventable differences in health outcomes between different population groups, often driven by unequal access to healthcare, discrimination, and other systemic issues. For example, significant racial and ethnic disparities in maternal mortality are an ongoing crisis in the United States ([Howell, 2018](#)). Reducing health disparities requires data-driven interventions and policy changes to address these inequities.

In contrast, SDOH encompass the broader social, economic, and environmental conditions – such as housing, education, and community resources – that influence overall health. Addressing SDOH involves cross-sector collaboration and investments in these upstream factors to improve health outcomes at a population level. FABBS encourages NICHD to pursue research in both areas.

We value the chance to contribute to the discussion on the draft goals and themes for NICHD's upcoming strategic plan. FABBS looks forward to ongoing collaboration to advance our mutual goals of understanding and improving the health and development of children and families. FABBS welcomes any questions or opportunity to be a resource as NICHD moves forward with revisions to the strategic plan.

Sincerely,

A handwritten signature in black ink that reads "Juliane Baron". The signature is written in a cursive, flowing style.

Juliane Baron
Executive Director
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