Jacobs Institute of Women's Health

THE GEORGE WASHINGTON UNIVERSITY

July 15, 2019

The Honorable Mikie Sherrill

Chairwoman

Subcommittee on Investigations and Oversight

1208 Longworth HOB Washington, DC 20515

The Honorable Haley Stevens

Chairwoman

Subcommittee on Research and Technology

227 Cannon HOB

Washington, DC 20515

The Honorable Ralph Norman

Ranking Member

Subcommittee on Investigations and Oversight

319 Cannon HOB

Washington, DC 20515

The Honorable Jim Baird

Ranking Member

Subcommittee on Research and Technology

532 Cannon HOB

Washington, DC 20515

Dear Chairwoman Sherrill, Chairwoman Stevens, Ranking Member Norman, and Ranking Member Baird,

The Jacobs Institute of Women's Health supports the Scientific Integrity Act, which states that "the public must be able to trust the science and scientific process informing public policy decisions" and creates infrastructure for strengthening scientific integrity at federal agencies.

The Jacobs Institute of Women's Health's mission is to identify and study aspects of healthcare and public health, including legal and policy issues, that affect women's health at different life stages; to foster awareness of and facilitate dialogue around issues that affect women's health; and to promote interdisciplinary research, coordination, and information dissemination, including publishing the peer-reviewed journal *Women's Health Issues*.

In recent years, we have seen federal agencies take actions that suggest a disturbing disregard for science. In the area of reproductive health, we have seen misrepresentations and suppression of evidence and damage to research of public health importance, all of which disproportionately imperils the ability of women of color and those with low incomes to have healthy families if, when, and how they desire. Strengthening the scientific integrity infrastructure is essential to ensuring reproductive justice—the human right to maintain personal bodily autonomy, have children, not have children, and parent the children we have in safe and sustainable communities. If

One recent example of disregarding science is the interim final rule expanding exemptions for employers and universities not wishing to cover some or all forms of contraception as the Affordable Care Act (ACA) requires, issued by three federal agencies, including the Department of Health and Human Services (HHS). In it these federal agencies misrepresented an extensive body of research on contraception and health. The agencies claimed that there is "complexity and uncertainty in the relationship between

contraceptive access, contraceptive use, and unintended pregnancy," despite the substantial body of evidence demonstrating that access to and use of contraception is associated with reductions in unintended pregnancies. They also cited poor-quality and out-of-date studies and overemphasized the health risks associated with contraception, while failing to reference relevant high-quality studies—or to note that risks associated with carrying pregnancies to term are much greater than those of using contraception. Issuing a rule that misrepresents the science on an important public health topic threatens to erode public trust in federal agencies, and weakening the ACA's contraceptive mandate reduces access to contraception for those who cannot afford to pay out of pocket for the methods they prefer.

A second example within HHS is the actions taken related to the Teen Pregnancy Prevention (TPP) Program. The Bipartisan Commission on Evidence-Based Policymaking and Bipartisan Policy Center have praised the TPP Program, funded and administered by the Office of Adolescent Health (OAH) in HHS, as an example of evidence-based policymaking. The program devotes 25% of funding to the development, implementation, and rigorous evaluation of approaches to preventing teen pregnancy, and 75% to replicating evidence-based program models that rigorous evaluations find to change behavior. In the summer of 2017, OAH notified more than 80 TPP Program grantees that their five-year projects would end two years early. This abrupt termination not only represented the removal of services from young people at sites across the country, but demonstrates a fundamental disregard for the research process. Halting a study before data collection or analysis can be completed essentially wastes the money already expended, and denies the agency and the public the knowledge that a completed project would have yielded. In addition, OAH has issued a new funding announcement that represents a troubling departure from the rigorous scientific standards of evidence and evaluation that the TPP Program has used in the past. Multiple federal courts have found these terminations and redirection of funding unlawful, it is to this program's important work.

Other examples of scientific integrity problems with significant impacts on women's health come from the Environmental Protection Agency (EPA). Last year, the White House and the EPA sought to block publication of a draft toxicological profile of per- and polyfluoroalkyl substances (PFAS), a class of synthetic chemicals that contaminate water supplies near military bases, chemical plants, and other sites. Following disclosure of this suppression and a bipartisan Congressional response, the draft profile is now public, and it reports that studies have found PFAS to be associated with adverse reproductive health outcomes, including decreased fertility, pregnancy-induced hypertension, and pre-eclampsia. People considering expanding their families should have access to this information, but it might still be unpublished if the Union of Concerned Scientists had not found evidence of its suppression via a Freedom of Information Act request.

In addition to allowing timely release of scientific and technical findings, agencies must represent findings accurately when using them to inform policy decisions. EPA scientists spent many years reviewing the evidence on the neurotoxic pesticide chlorpyrifos, including high-quality research that found prenatal chlorpyrifos exposure to be associated with lower IQs and working memory. The agency was poised to effectively ban the pesticide's use in agriculture, but then in early 2017 EPA abruptly reversed course, xi inaccurately claiming "the science addressing neurodevelopmental effects remains unresolved." xii

Farming communities—which are predominantly low-income and Hispanic—are the population most exposed to chlorpyrifos, and these families will suffer the harshest consequences from continued use of this pesticide. EPA's action is not only harmful to public health; it also demonstrates an alarming willingness to misrepresent a substantial body of high-quality evidence.

In order to achieve reproductive justice and advance women's health, federal agencies must disseminate and accurately represent scientific evidence on public health topics, and must respect the process for generating and using high-quality data in evidence-based programs. The Jacobs Institute of Women's Health strongly supports the Scientific Integrity Act because it will strengthen the infrastructure and culture of scientific integrity and, in doing so, support these key public health goals. If you have any questions, please contact Jacobs Institute of Women's Health Managing Director Liz Borkowski at borkowsk@gwu.edu.

Sincerely,

Susan F. Wood, PhD
Executive Director
Jacobs Institute of Women's Health

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