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Diversity in Research Support

Philanthropy, though not an exclusively American phenomenon, has had its most exuberant manifestations in this country. The larger endowed foundations—those with assets of \$50,000 or more—include such giants as the Ford, the Rockefeller, and the Carnegie Foundations and number more than 5200. Their total assets exceed \$11 billion. Among the 7000 philanthropic organizations not included in these totals are those that have little or no endowment and that depend for funds upon annual public appeals. In this category are the voluntary health agencies, such as the National Foundation, the American Cancer Society, and the American Heart Association.

The voluntary health agencies typically concentrate on one or, at most, several diseases and put on annual public fund-raising campaigns. Some devote the major share of their efforts to public education and to care and rehabilitation of patients; others, in addition to these functions, support research and research training in their areas of interest; still others focus exclusively on public education and research.

These agencies have made important contributions. Although criticized by some for overdramatizing the battle against particular diseases, they can show that this has been the only effective way to marshal support from the general public. They have pioneered in educating the public in the prevention and treatment of disease; in creating greater public understanding of the importance and promise of research; in ameliorating or conquering disease; and in developing effective methods for allocating research grants and fellowships. The American Cancer Society initiated an institutional grants program—one widely adopted by other agencies and authorized (but not funded) for the National Institutes of Health by Congress. The American Heart Association pioneered in making career awards—essentially lifetime professorships—for investigators of exceptional ability, and the American Cancer Society adopted a similar program. The NIH has followed suit, except that its career professorships are limited to a 5-year term, and that it has a moral but not a legal commitment to renew appointments.

Not the least of the accomplishments of the voluntary agencies is the part they have played in persuading Congress to establish the NIH within the U.S. Public Health Service. Starting with a small appropriation in 1945, the NIH—with strong support by representatives of these agencies—has enjoyed a remarkably rapid growth in appropriations: from \$52 million in 1950 to more than \$400 million in 1960.

But it is this very growth of the federal effort in research that poses a threat to the voluntary health agencies. Of the \$150 million spent on cancer research in 1960, \$91 million came from the National Cancer Institute, \$10.5 million from the American Cancer Society, and the rest from other governmental agencies and private foundations. The same holds in other categories: the government is footing well over half the research bill.

Overlapping support is not the problem, since there is complete exchange of information between all major granting agencies. The problem is that the general public, aware of the increasing federal contribution, no longer sees what part the voluntary agencies may have to play. To show the public that diversity of support is essential to flexibility and creativity in research, and that we would all be the losers if this diversity were lost, is no easy task. But it is a task that ought to be undertaken, and one that is worthy of our best efforts.—G.DuS.