

American Geriatrics Society Response – Request for Information on the Framework for the National Institutes of Health-Wide Strategic Plan for Fiscal Years 2027-2031

Submitted May 26, 2026

The American Geriatrics Society (AGS) submitted these comments in response to the [Request for Information \(RFI\) on the Framework for the National Institutes of Health \(NIH\)-Wide Strategic Plan for Fiscal Years 2027-2031 \(FY27-FY31\)](#). The purpose of the Strategic Plan is to outline how NIH will advance its mission to support research in pursuit of fundamental knowledge about the nature and behavior of living systems.

The mission of AGS, a not-for-profit organization, is to improve the health, independence, and quality of life of all older adults. Our 6,000+ members are pioneers in serious illness care for older individuals, with a focus on championing interprofessional teams, eliciting personal care goals, and treating older people as whole persons. AGS leads efforts to incorporate attention to older adults living with multiple chronic conditions into research and clinical care and is a champion for improving attention to the unique health care needs of older adults in workforce training.

AGS RESPONSE

PRIORITY 1: RESEARCH AREAS

Goal 1: Advance Foundational Knowledge of Human Health and Disease

AGS applauds the NIH institutes', and particularly NIA's, leadership in our effort to understand the nature of aging throughout our life course and extend our healthy, active years of life. The federal research portfolio that NIH and NIA stewards spans research focused on basic biology, understanding the complex interplay of factors across our lifespan that drive aging and age-related diseases, and identifying the most effective interventions foundational to expanding our healthspan. Concomitantly, it is crucial that this knowledge is effectively applied and translated into strengthening care systems and care delivery, ensuring implementation of treatments and accessibility for all Americans. AGS recommends using existing and novel tools to better understand the heterogeneity of diseases and enhance translational research that links biology to clinical outcomes, improving our ability to care for all of us as we age.

Goal 2: Prevent Disease and Promote Health Across the Lifespan

AGS has long advocated for supporting disease prevention and health promotion across the lifespan. Emphasizing the importance of Americans' access to preventative public health initiatives and quality primary care across the lifespan would improve population health and outcomes in the US as we all age. Despite the progress we have made on increasing our healthspan and lifespan, chronic diseases related to aging continue to afflict many adults. More than 60% of Medicare beneficiaries have four or more chronic conditions and account for nearly 83% of Medicare expenditures (https://12860544-bc49-4b5c-9d49-f592cc453792.usrfiles.com/ugd/128605_9bcc840c6346404cbc676008cb909e62.pdf). A significant focus on prevention must include longer and more comprehensive studies across populations while considering proximal outcomes and taking a holistic life stage approach. Identifying factors throughout

the life course that can promote healthy aging enables us to remain independent throughout most, if not all, of our lives. Furthermore, the knowledge gained from a robust evidence base addressing root causes and interventions, including longitudinal studies of how we age, helps reduce declines in function and susceptibility to disease or frailty and delay the onset of costly age-related diseases. We urge NIH to support research on disease prevention and health promotion across our life course given the differences among age groups based on life stage. Even within the older population, there are profoundly different health issues for advanced older ages than for the general older population. When evidence is generated from populations that do not resemble those who need care, we miss opportunities that lead to optimization of health and resilience—and avoid suffering and unnecessary costs—in the real world.

Goal 3: Advance and Optimize Interventions, Treatments, and Cures

While we appreciate that our scientific understanding of interventions is growing, real-world implementation is often challenging, particularly given the increasing number of treatments with risks and costs to patients, their families, and society. To achieve greater effectiveness and implementation in the real world, AGS recommends: 1) incorporating a whole-person lens focused on what matters to the patient guided by their values and preferences; 2) improving access and delivery; 3) focusing on and demonstrating high-value interventions; 4) collaborative research enhancing care with existing and innovative approaches; and 5) additional investments in implementation science and health systems research centered on what matters to individuals.

PRIORITY 2: RESEARCH CAPACITY

Goal 1: Develop and Sustain an Interdisciplinary Research Workforce

AGS strongly supports an interdisciplinary approach across federal research and the research workforce. Delivering high-quality, effective, efficient, and coordinated care requires solutions that will promote innovation, including research and development of care models employing interdisciplinary teams that have demonstrated a critical difference in improving health outcomes. There is increasing recognition that the most common "chronic disease" in older adults is multiple chronic conditions (MCCs). However, due to the dominance of a disease-specific, siloed approach, there is a dearth of robust evidence to guide clinical practice and inform shared clinical decision-making relevant to the care of people living with MCCs.

As our lifespans lengthen and with chronic disease disproportionately affecting older people, it is crucial to increase opportunities for interprofessional research teams and to engage in a team-science approach. For example, the NIH-funded Health Care Systems Research Network (HCSRN) and Older Americans Independence Centers (OAICs) Advancing Geriatrics Infrastructure & Network Growth (AGING) Initiative catalyzes an expansion of interdisciplinary research around the science of MCCs, advancing multiprofessional collaborations and capacity to focus on complexity-focused research that impact how we care for older people across settings and will improve the health and well-being of all of us as we age. An interdisciplinary research framework—engaging the perspectives of biology; behavioral, social, and economic research; brain health and neuroscience; geriatrics and clinical gerontology; and more—uniquely poises NIH to deliver insights about healthy aging to the American public, especially for chronic disease prevention.

Goal 2: Build, Improve, and Sustain Research Resources and Infrastructure

AGS appreciates the goal to build, improve, and sustain research resources and infrastructure. NIH plays a critical role in the delivery and improvement of health care in the US, supporting scientific innovation that improves health outcomes across the country, including clinical trials and the development of new treatment techniques and therapies. For state-of-the-art research to ensure NIH continues this role, the research infrastructure needs state-of-the-art resources, technology, equipment, and facilities. We believe advancing and modernizing the NIH research enterprise is pivotal to expanding access to high-quality clinical trials and increasing the real-world impact of the research. As the US population rapidly ages, access to innovative and appropriate care techniques for medically complex older adults informed by robust evidence is imperative to maintaining health and quality of life for all of us as we age. AGS also recommends providing infrastructure support to institutions that have demonstrated success in fostering specific areas of research and that does not dilute them across many areas. We encourage NIH to maintain long-standing investments in understanding how our health changes as we age (e.g., the Framingham Heart Study) and to ensure that it is implementing new technologies in ways that democratize access to data in order to support broader access by investigators who may be embarking on their careers or located at less well-funded institutions.

PRIORITY 3: RESEARCH OPERATIONS

Goal 1: Enhance Scientific Stewardship and Decision-Making

To ensure scientific stewardship and decision-making, we require skilled, dedicated, and passionate leaders who are prepared to lead tidal changes in aging. AGS recommends increasing efforts to recruit and support the next generation of aging researchers and ensure that all researchers have the training that is necessary for including complex older adults in research. Doing so would ensure carefully stewarded federal resources by implementing whole-person-focused studies of the diseases and conditions we all face as we age. Inclusion of older adults across NIH-funded research will lead to medical advances that have meaningful impact on clinical outcomes for this population.

Goal 2: Foster Transparency and Accountability to Improve Public Trust in Science

AGS believes that a fundamental element of research is dissemination and communication about research and science, including to the public in order to foster public engagement that is focused on improving clinical care for all of us as we age. Advancing and building knowledge requires a robust infrastructure for scientific publications and sharing what we have learned with other investigators and the public. This allows the scientific community to learn from others; sparks new ideas for avenues of inquiry; creates opportunities for collaboration; and advances science that supports all of us to live healthier lives. The existing network of high-quality peer-reviewed journals is vital to ensuring that we invest in science that builds upon prior work and that has been vetted and enhanced by the peer review in advance of publication.

Peer-reviewed journals provide an essential service to the American given their rigorous approach to peer review and publication of gold standard science that contributes to improving healthcare for all of us as we age. The science that is funded by NIH produces rich datasets and initial publications are focused on the primary endpoints of the research. However, it is impossible to cover the rich data in a

single article and therefore it is critically important that NIH provides sufficient support for multiple articles to be published, particularly for research involving special populations, including older adults. We encourage NIH to engage with the publishing community to identify ways in which NIH could collaborate with publishers given the value of journal peer review which provides an independent expert assessment of the validity of research findings and their relevance to clinical care. Further, peer-reviewed journals provide an important service to investigators with their attention to the clarity of communication about findings and ensuring that these are not overstated.

NIH should develop strategies for proactive communication and engagement with the public to improve understanding of the scientific process, research studies, and outcomes while ensuring benefits are not overstated and risks understated to foster transparency and accountability. This will help create awareness about how we can all be supported to remain active, independent, and engaged in our communities as we age. NIH could also play an important role in creating standards for transparent communication of research results to the public to guide journalists and others who translate scientific findings for the public.