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FOR IMMEDIATE RELEASE

Tigerlily Foundation Submits Comments Opposing Politicization of Medical Research

Washington, D.C. – Tigerlily Foundation, a national women's health and oncology organization, this week submitted formal comments opposing the Office of Management and Budget's (OMB) proposed rule that would fundamentally restructure how federal research grants are awarded and managed. The rule would replace independent, science-driven peer review with oversight by political appointees guided by subjective "President's policy priorities."

For nearly two decades, Tigerlily Foundation has worked to ensure that every woman facing breast cancer has equitable access to care, treatment, and hope. The organization serves women before, during, and after cancer, with a particular focus on young women and communities of color who face significant health disparities.

> "The proposed OMB rule threatens to replace independent, science-driven peer review with political appointees deciding which research gets funded," said Maimah Karmo, President and CEO of Tigerlily Foundation and a triple-negative breast cancer survivor. "When politics determine what research moves forward, we risk missing critical breakthroughs in early detection, treatment, and survivorship. For the young women we serve, delay in research means delay in cures. It means treatments that may not work for their bodies because studies fail to include diverse populations. It means more Black and brown women dying from diseases that could have been treated. Politicizing science puts patients in harm's way, plain and simple."

In its formal comments, Tigerlily Foundation raised five critical concerns about the rule's impact on patients and the future of medical innovation.

The Danger of Politicized Science

Under the proposed rule, political appointees would become the primary decision-makers for grant awards, with peer review recommendations demoted to merely advisory status [200.205(d)]. Appointees would select recipients based on vague, subjective criteria such as "national interest" and avoidance of "anti-American values" [200.205(b)]. This is not science; it is ideological control. Researchers would be forced to craft "safe" proposals anticipating political preferences rather than pursuing the most scientifically promising ideas, stifling innovation and delaying cures. For patients navigating cancer's fear and uncertainty, this delay is life and death.

Compounding Health Disparities

The rule creates multiple barriers to health disparities research [200.300, 200.218]. It prohibits funding for diversity, equity, and inclusion efforts, which in scientific research are simply trying to achieve equitable care for all, and removes protections against discrimination based on sexual orientation or gender identity [200.300(b)(2)]. It also disallows disparate impact studies [200.218] that seek to understand unanticipated discriminatory effects in public policies. Restricting such research will undermine cancer outcomes for millions and efforts to ensure representative clinical trial participation.

Tigerlily works to end disparities of age, stage, and color. Black women are more likely to die from breast cancer than white women, and young women face unique barriers to diagnosis and treatment. If we cannot study why disparities exist or invest in solutions, we condemn generations of patients to preventable deaths. The rule sends a devastating message: your lives, your experiences, and your outcomes do not matter.

Restricting Publication and Free Access to Research

The rule disallows researchers from using federal grants for publication costs, including article-processing charges to make articles freely available [200.461]. Existing policy requires all federally funded research to be free to read upon publication. For patients, this is devastating. When research findings are locked behind paywalls or never published because grant funds cannot be used for dissemination, the people who need that information most cannot access it. A young woman diagnosed with breast cancer should be able to read the research that informs her treatment options. A community health center serving underserved populations should be able to access the latest findings on reducing disparities. Blocking publication funds means blocking patients, providers, and communities from lifesaving knowledge.

Termination Without Due Process

The rule expands authority to terminate active grants mid-award for reasons unrelated to performance, including shifts in "agency priorities" or "national interest" [200.340]. Previously, grant terms did not allow such broad cancellation, but the rule requires cancellation provisions in all new grant agreements. In the past year, thousands of grants were terminated or frozen, wasting hundreds of millions in taxpayer dollars. In many cases, no reason was given. Institutions reduced biomedical graduate admissions, researchers are leaving for more stable environments, and other countries recruit U.S. researchers. A recent survey of NIH K-award recipients found that 96% reported federal policy changes had negatively affected their career stability, essentially driving talented scientists to seek more stable opportunities elsewhere. For patients, this instability means vital cancer research can halt without warning, delaying or denying treatments.

Proven Health Intervention Programs Could Be Curbed

Federal grants significantly impact cancer prevention, early detection, diagnosis, treatment, and survivorship. The CDC provides financial assistance to state, local, and tribal health departments, universities, nonprofits, and health systems to provide millions of cancer screenings, collect and analyze cancer data, support community coalitions, and educate the public on cancer risk. A reduction or loss in these programs due to the rule would limit access to proven cancer programs and increase preventable deaths.

Lizzie Wittig, Vice President of Tigerlily's HEAL Policy Center of Excellence, shared: "My mom participated in a clinical trial that gave her an extra six years after doctors told her she had less than a year to live. I know firsthand the power of federally funded research. I cannot fathom allowing this rule that would replace peer reviewed, scientific priorities with political ideology, restrict disparities research, block publication of findings, and allow grants to be terminated without cause. These are not abstract policy issues. Every barrier we put in the way of research is time stolen from patients and families. Only allowing research that follows the president's current policy priorities will keep more people from the time they deserve with their loved ones."

Tigerlily Foundation urges OMB to withdraw the proposed rule and preserve the merit-based, apolitical process that has made the United States the world leader in health research. The American people, and especially the young women the organization serves, deserve nothing less.

About Tigerlily Foundation: Tigerlily Foundation is a national 501(c)(3) organization dedicated to educating, supporting, advocating for, and empowering young women before, during, and after cancer. The organization works to end disparities of age, stage, and color in women's health and cancer outcomes through education, advocacy, and support programs.

About Tigerlily's HEAL Policy Center of Excellence: The HEAL Policy Center of Excellence works to educate, empower and amplify patient voices to lead systemic changes through policy at the state and federal level to (1) end barriers to accessing and receiving quality, equitable care for all, (2) lead smart policy & innovation through patient-leadership and (3) achieve health equity and ensure access to cancer care, especially for young women.