



<b>AUA Staff Liaison</b>	Jessica Bateman, MS
<b>Chair</b>	Toby Chai, MD
<b>Terms of Office</b>	Chair            3-year terms, non-renewable Member        3- year term (renewable once)
<b>Committee Makeup</b>	Composed of 8-12 members

### **Mission Statement**

The mission of the Research Advocacy Committee (RAC) is to effectively champion for public, private and philanthropic support of urologic research by energizing and synergizing with all stakeholders.

These efforts shall include legislative advocacy efforts working with the AUA Public Policy Council, Legislative Affairs Committee (LAC), and Annual Urology Advocacy (AUA) Summit planning committee as appropriate, and patient advocacy organizations working with the Urology Care Foundation, as well as building relationships with federal funding agencies and non-federal funding organizations. In addition, the RAC will maintain a strong working relationship with the Research Council to ensure adequate communication and collaboration with the AUA's primary research-related governance body.

### **Committee Meetings**

The Research Advocacy Committee shall meet by teleconference approximately monthly or as deemed necessary by the RAC Chair, and Public Policy Council Chair, with one to two in-person meetings per year typically at AUA Headquarters. A representative of the RAC (Chair or appointed member) is expected to attend in-person meetings of the Research Council as the RAC's liaison to the Research Council.

### **Time Commitment**

*Chair:* 3-4 hours per week (average)

This includes teleconferences and meetings with staff, various committees and representatives of external organizations/agencies. The Chair also travels up to 10 days annually for attendance at the AUA advocacy conferences and meetings, leadership meetings with federal agencies, and meetings with other AUA or Urology Care Foundation committees supporting research.

*Member:* 2 hours per week (average)

### **Responsibilities**

*Chair:* In executing responsibilities, the Chair will report to the Public Policy Council Chair and the Public Policy Council as a whole and oversee any workgroups or subcommittees that may be created. The Chair is expected to commit 3-4 hours per week working independently and in collaboration with staff, various committees and representatives of external organizations/agencies.

*Members:* Committee members must 1) be available to participate in Committee meetings, advocacy meetings, and leadership meetings and 2) serve as active liaisons between the RAC and federal agencies and other organizations.



### **Qualifications**

#### *Chair:*

- Must be an AUA Member and active in urologic research at the time of assumption of the position.
- Must be a urologist or researcher with a strong track record of achievement in urologic research and training.
- Must possess familiarity with NIH institute (e.g., NIDDK, NCI, NIA) operating procedures and leadership.
- Possess experience in advocacy at the community, state, or federal level.
- Must be available for communication with members of the Committee, Council, Board of Directors, and staff.
- Preferable: History of productive interaction with consumer advocacy organizations, as well as relationships with urologic research funders whether federal or non-federal.

#### *Members:*

- Must be an AUA Member and active in urologic research at the time of assumption of the position.
- Must have a strong track record of achievement in urologic research and/or research advocacy.
- Must be active in research-related service in research-related associations, organizations, and societies.
- Preferable: History of productive interaction with consumer advocacy organizations, as well as relationships with urologic research funders whether federal or non-federal.

### **Recent Accomplishments 2019**

- Submission of feedback to the Child Health and Human Development's (NICHD) strategic plan that was incorporated into their 2020 plan. This ensures urology remains at the forefront of the institute's key initiatives.
- Orchestrating in-person meetings with National Cancer Institute (NCI), National Institute on Aging (NIA), National Institute of Child Health and Human Development (NICHD), and National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) that included AUA leadership and key officials from NIH.
- Engagement of NIDDK leadership and Patient Centered Outcomes Research Institute in the AUA's Bladder Health Alliance Roundtable Meeting. This elevates engagement within the advocacy community to ensure research outcomes are shared effectively.
- Continued efforts to protect Congressionally Directed Medical Research Program (CDMRP) and cultivate relationships with the CDMRP leadership with the aim of obtaining an increase in NIH funding appropriations.