Moderator: New Jersey Assemblywoman, Shavonda Sumter
Panelist: Dr. Michelle McMurry-Heath, president and CEO, Biotechnology Innovation Organization (BIO)

Voiceover: Welcome to the Women In Government Podcast. Whether discussing important issues or policies of the day, this is the place where lawmakers and decision-makers unite to get the conversation started.

Assemblywoman Shavonda Sumter: All men are created equal - five simple words that, when put together, laid the foundation of what our founding fathers had in mind for this great land that we live in. To make that dream a reality for all people, especially underrepresented populations like women, people of color, and those in the LGBTQ+ community, it takes bold and brave leaders who challenge companies, the government, even ourselves to make diversity more than just a word or program, but a true part of who we are and what we stand for.

Hello, I’m New Jersey Assemblywoman Shavonda Sumter. Thank you for listening to the latest Women In Government podcast: BIOequality agenda, ensuring scientific justice by building bridges in minority communities. We're tackling some big issues by taking on the inequality, injustice, and unfair treatment aimed at women and communities of color through the positive force of biotechnology.

Joining the conversation is Dr. Michelle McMurray-Health, President and CEO of the Biotechnology Innovation Organization (BIO). Dr. Michelle McMurray-Health is a medical doctor and molecular immunologist by training, and just recently became the third chief executive to steward the world's largest biotechnology advocacy group since BIO’s founding in 1993.

Dr. Michelle McMurry-Health: Thank you so much for having me. It’s a pleasure to join you.

Assemblywoman Shavonda Sumter: Before we get started, I'd like to thank all the listeners for taking the time to hear this important discussion. Don’t forget to subscribe to, like, or share our podcast. You can also email us by visiting womeningovernment.org.

The past few months have been like no other as the COVID-19 pandemic has turned most of our lives upside-down, and social issues have dominated headlines while people support movements of equality. Both tie into your work, Dr. McMurry-Heath. There's a common thread running through your efforts in academia, government, and industry. You’ve had a burning passion to broaden access to scientific progress so more patients from diverse backgrounds can benefit from cutting-edge innovation, and you’re fearless when it comes to improving patient experiences and outcomes regardless of race or identity.

Now that we are past the 2020 presidential election, how do you see the biotechnology industry being impacted by the results?
Dr. Michelle McMurry-Heath: Well, we certainly live in interesting times, do we not? As we’re sitting here having this conversation, the election has been a bit too close to call, which was not totally unexpected. That said, BIO has really had our work planned out for us under five key themes that we really fleshed out over the summer so that we were sure we were prepared no matter who won the election. The themes won't only guide our work with the President and the administration, but also with the Congress and Governors and State Legislatures, and more importantly, with the public and with patients.

And so, at BIO we see ourselves as really focusing on five key areas. One: to be a voice of science and for science that's really standing up for scientific integrity and the incredible hard work and creativity that our innovative companies show each and every day.

Two: To really unite and empower biotech innovators and their ecosystems to improve lives. We're in the business of improving human health, nutrition and the environment, and so we really want to make sure that we empower our individual innovators, entrepreneurs, and scientists that feel so proud of the work that they are trying to do and to allow them to help each other get to their goals.

Three: To remove barriers to innovation. Now we, of course, believe in sensible regulation. I’m a former FDA regulator and so it's near to my heart that we have integrity in those systems so that the public can have confidence in the medicines and the technologies that come their way. At the same time, we don't want undue burdens to innovation that just slow down the wait that patients already face waiting for cures and solutions.

Four: To champion broad access to biotech breakthroughs and scientific equality. We think it's critically important that biotechnology is such a powerful set of possible breakthroughs and innovations, and they really have the power to transform lives. It behooves us to be out at the forefront, making sure that these breakthroughs get absolutely everyone who needs them.

Five: catalyze resilient and sustainable bio-based economies. Biotechnology can also rebuild communities and provide economic development and pathways to economic growth. And so, as we face into 2021, and we really need to rebuild our economy, it's critical that our sectors are in there doing everything we can to contribute to this economic recovery that’s so needed.

Assemblywoman Shavonda Sumter: As a physician and scientist, you have said that science is the social justice issue of our age. Can you explain what you mean by that?

Dr. Michelle McMurry-Heath: From my time as a medical student to the time I was serving as a legislative aide in the Senate or working at FDA, and even while working in the pharmaceutical industry at Johnson & Johnson, I've really tried to commit my life to the belief that medical innovation improves the lives of people around the world.
BIO is a very interesting organization because it doesn’t just cover pharmaceuticals and biotechnology breakthroughs for patients, but it also works in the field of agriculture and in industry and environment, which really paints the picture that biotechnology has the power to answer almost every major social challenge we face today.

Whether it's having access to clean water and clean air; whether it's global warming; whether it's food deserts that we face, either in inner city or sometimes even in rural communities where vulnerable communities sometimes face difficulties having access to affordable and nutritious foods; or if it's a patient's waiting on a cure - in all of those situations, science can provide the solution. And if it has the solution, then it really is a question of equity and access whether or not everyone has the ability to share in those solutions.

That's why I really firmly believe that access to science is the social justice issue of our age because science has such a power to improve all of those key challenges that we face. It's so important that we all commit ourselves to delivering the solutions equitably across the board.

**Assemblywoman Shavonda Sumter:** BIO is the world's largest trade association representing biotech companies, academic institutions, and state biotech centers across the country and in more than 30 other nations. You just took the helm on June 1 of this year. Clearly you have a vision for things to come. Where are we heading? What initiatives are you most proud of over the past four months?

**Dr. Michelle McMurry-Heath:** It's been a tumultuous time for so many and a clarifying time for our industry. We recently launched the BIOEquality Agenda, which is a national effort led by BIO in collaboration with our partner and member organizations - we represent over 1,000 member companies in the biotech sector - really to counteract systemic inequality and unfair treatment of our most vulnerable and underserved communities.

The agenda is really a critical social justice component of the overarching BIO equity diversity and inclusion strategy; and this expanded focus is especially relevant now, given the current climate of social unrest that's really facing our nation and how the COVID-19 pandemic has really spotlighted the tremendous systemic inequalities related to black and brown impoverished communities. The BIOEquality agenda really has three simple pillars: promote, invest, and expand.

Number one is promote health equity. We are in the business of health, and so we should be doing everything we can to make sure that we are trying to reduce healthcare disparities. We are trying to promote appropriate representation of all communities in clinical trials because it's really those clinical trials that tell us how well our solutions will work for patients. If you're not part of the process, you’re not part of the cure.

Two: invest in the current and next generation of scientists. We need to make sure that we have diverse points of view within our ranks. We are a creative field, and we need innovative problem-solvers. When you’re trying to solve a scientific puzzle, the more diverse points of view you have around the table, the
faster you will get to the solution. It's that speed that is most critical to our industry and to the patients and consumers who wait for what comes out the other end.

Three is to expand opportunities for women and underrepresented populations through our economic development program. As I noted earlier, our companies have very diverse supply chains. We don't just produce medicines and solutions and food, but we also purchase everything from lab equipment, to the food in our cafeterias, to the transportation we use to get our products out to patients and consumers. We're trying to do everything we can to inform our company leaders about patronizing women-owned and minority-owned businesses and other businesses that commit themselves to diversity, so that we cannot just push our own companies along, but also push along all of the companies that we support throughout our supply chains and contribute in that way to the economic growth of communities of color.

Assemblywoman Shavonda Sumter: The CDC finds race and ethnicity are recent markers for underlying conditions that impact health, including socioeconomic status, access to health care, and increased exposure to COVID-19 due to occupation, frontline workers, and essential and critical infrastructure workers.

People of color are most at risk of contracting the disease, being hospitalized and even dying from the novel coronavirus. In fact, you have a 4.7 times higher chance of dying from the virus if you're black or African American. Dr. McMurry-Heath, you've recently said the pandemic has reminded us again in stark detail at the impact of disease on communities of color is unequal. How has COVID-19 affected the priorities of your organization?

Dr. Michelle McMurry-Heath: As I listen to that question, it really hits home how urgent these issues we're discussing today are and how committed we must be trying to find solutions that even that curve, the curve of unequal illness distribution. That is something that's incredibly important to find.

While overall at BIO our priorities remain the same where we're committed to improving lives through biotechnology, what has changed is that what we are living through today because of the pandemic is a time when every person on the planet is depending upon science to restore their way of life and keep their loved ones safe. It's a time when scientists and researchers in biotech are in the spotlight and demonstrating what we do on the inside. What we've known for some time is that our industry has complete dedication to bringing these life-changing medicines and other technologies that will help save the planet.

So I see an essential part of my job and by extension a central role for BIO as helping the outside world really see the passion, the commitment, the brilliance, and the dedication that our member companies show in changing the world in improving the health of people around the world.
It’s a puzzlement to many people in our industry how we got to a situation where any company that makes bio pharmaceuticals is disparaged or misunderstood, and I hope that’s starting to change with COVID, but COVID is also going to be a litmus test for us.

We have to make sure that we’re not just producing cures and therapies, which may give the public the opportunity to give us a second look, but we also have to make sure that we’re out there advocating just as hard that everyone who needs those cures and therapies - everyone needs access to a safe and effective vaccine - gets it. Part of what you’ve seen through the summer and fall at BIO is not just an extreme commitment to facilitating the science, which is so critical, but also starting to have those really important dialogues and pulling together different stakeholder groups to make sure when the science is done, everyone who needs it can have it. So, in September, we had our first-ever BIOequality Agenda Summit, and the topic was equal access to COVID therapeutics once they become available. We're not waiting on the science this time.

Now often, the science will be produced and then we'll talk about how to equitably make sure it’s distributed to everyone who needs it. In this instance, we’re really trying to work hard to make sure that we smooth that path before they even get to the market so that we can really ensure that patients get what they need as quickly as possible.

**Assemblywoman Shavonda Sumter:** In a [video](#) on the BIO website, you mentioned that COVID is the latest in a long line of diseases that show stark disparities in health outcomes. What is your position on patient costs for COVID vaccines and therapeutics?

**Dr. Michelle McMurry-Heath:** The COVID-19 pandemic has just exposed some deep and systemic inequities in our healthcare system - you pointed to them earlier - especially as it relates to access to new therapies. BIO strongly advocates every person in the US have free access to a COVID-19 vaccine. We’re encouraged to know that the [COVID-19 vaccine will be free to all Americans](#), since Operation Warp Speed contracts with companies to include a vaccine purchased by the federal government.

But we also believe that patients should not have to pay any out-of-pocket costs for COVID-19 treatments and therapies. As you know, BIO has a long history of really standing firm to try to decrease as sharply as possible the out-of-pocket costs for all patients for all therapies.

We're advocating for a moratorium, or at least a limit, on patient cost sharing obligations for COVID-19 treatments in both public plans like Medicaid and private insurance markets like Massachusetts and DC, where they are finally requiring that [fully insured plans cover COVID-19 treatments](#). So, while Congress is also exploring this idea, it’s really important that BIO is out there advocating for it strongly as possible. Two versions of the Heroes Act, both of which passed the House of Representatives, included [a provision to eliminate cost sharing](#) for COVID-19 treatment in Medicare, Medicaid, and commercial insurance markets - and this is something critically important.
Let’s just talk about this more broadly. COVID is a crucible for some of the challenges we face more broadly as a society in this case as in so many others. It’s key that we find new ways to make sure that patients have easy access to new therapies but at the same time do so without slowing down the generation of new therapies and cures. We know so many illnesses hit vulnerable communities much, much harder than they do majority communities. That’s not just in COVID - we see it again and again and again.

We need to make sure that all of those diseases that don’t have really comprehensive cures and solutions today - diabetes, heart disease, stroke, sickle cell - that all of those diseases that disproportionately impact communities of color are seeing the most rapid rate of scientific progress and innovation. We can’t slow down the generation of new cures for tomorrow. It makes no sense to fight as hard as we possibly can to give people access to what’s available today when what they need most is the innovations that have yet to come tomorrow. We have to not shortchange our future at the cost of today.

**Assemblywoman Shavonda Sumter:** Big companies often shy away from headline news, but after George Floyd’s death in Minneapolis, we’ve seen many take a stance on racial injustice. It would be remiss of me to not bring up social issues considering we’re talking about such an important topic - you even discuss it on the BIO website. How has the BLM movement affected your current business strategies?

**Dr. Michelle McMurry-Heath:** I started at BIO the week before George Floyd’s funeral, and I remember we were planning our big annual BIO convention, which we had converted to digital, and we were trying to find a sensitive way to make sure that the programming was sensitive to the funeral services and the other memorials that were taking place.

In doing that research, I stumbled on the fact that George Floyd was actually being buried in the same cemetery that my father is buried in. And it really just hit home to me, as it has to so many other leaders over the summer and fall, that none of us escape from this. We all must do our part, and it affects all of us, whether or not you’re from a community of color or not, whether or not you see yourself as intimately integrated into these issues today or not. It impacts all of us.

We really tried to put our heads together at BIO to see what we could do to really have influence in our sphere - make a difference in the ways that are most appropriate for us but are part of rebuilding a more equitable society. So, the COVID pandemic has just been a reminder, again in stark detail, of the impact of disease on communities of color and how unequal it can be.

America is really plagued with a chronic disease, the disease of systemic racism, as well as the COVID pandemic, and we really have to do everything we can to try to produce solutions that will reduce this inequality. And I think that’s why you see such a strong commitment in the BIOEquality agenda to reducing health care disparities because that’s our science, that’s what we know. So, can we train that scientific lens to solving this issue because it’s so critical for all of us getting back on equal footing.
Assemblywoman Shavonda Sumter: BIO is challenging the industry and its partners to find solutions for an equitable healthcare delivery, disparate economic development and nutritional and environmental disparities in the US and around the globe. The BIOEquality agenda revolves around three pillars of change that will support stronger and healthier communities.

We can dive in a little deeper here. I know that your own past family experiences navigating clinical trials and funding uncertainties within the rare disease community has ignited your passions. Can you explain pillar number one with regards to diversity in clinical trials and promoting access to vaccines and therapeutics for uninsured and underserved populations, especially related to COVID?

Dr. Michelle McMurry-Heath: We got to touch a little bit on some of the summits and conversations we've been having through the summer and fall at BIO around ensuring equal access to COVID vaccines and therapeutics. That's critically important. But we're really using that as a test case of how we more broadly attack healthcare disparities and lack of representation in clinical trials.

The clinical trial piece is so interesting and so important. We don't fully understand, for example, why COVID has such higher mortality rates in black and brown communities. It could be comorbidities, it could be access to quality care, but it could be underlying biology as well. It could be underlying genetics, and we just don't know. And that's similar to what we see in so many disease areas. The diseases are hitting black and brown communities harder, and we don't understand what proportion of that impact is due to socioeconomic factors and what is due to underlying differences in our bodies.

The only way we can make sure that the cures and solutions we're producing work equally well for all communities is to make sure that all communities are represented in clinical trials so that when we're testing a new solution we know that it is showing efficacy for both communities of color and other communities as well.

There's been a lot of resistance and consternation in communities of color over the summer around participating in COVID-19 vaccine trials and therapeutic trials. But I just think it's so much more powerful when we are being asked to participate, when we are being included in the science, so that we know the science that comes out the other end will work for our communities. That is very, very important.

This is giving us an opportunity, like COVID has in so many instances, to take a second look and say what actually is going to help here? We've been spending a lot of time talking to organizations like The National Association of Black Churches, National Urban League, The Congressional Black Caucus, really trying to understand what are some of the barriers to better inclusion and participation. What's interesting, like so many efforts to improve diversity and inclusion - when we really look under the hood and figure out what's going to work and really change the game - it's something that doesn't just help communities of color, it helps all patients.
We need to make clinical trials more user friendly. We need to make it easier for people to participate, cheaper for people to participate, less disruptive to their lives. And when we do so, we'll improve minority participation, but we'll also improve participation from many different types of patients in clinical trials. So once again, moving to improve diversity and make things more inclusive will actually help all communities and not just communities of color.

Assemblywoman Shavonda Sumter: The country's business landscape has significantly changed over the past two decades. Employment in science, technology, engineering, and math (STEM) has grown, outpacing overall job growth. According to Pew Research, black workers continue to be underrepresented in the STEM workforce. Blacks make up roughly 11% of the US workforce overall but represent 9% of STEM workers. This leads me to pillar number two; how do you plan on investing in the current and next generation of scientists, particularly those who fall in underrepresented populations?

Dr. Michelle McMurry-Heath: During graduate school, I was fortunate enough to participate in a fellowship program that Merck, one of our member companies, ran in partnership with the United Negro College Fund (UNCF). I was the first African American to graduate from Duke University's combined MD and PhD program. It was such an interesting experience because I had always loved science, I loved medical research, I loved being at the bench. And yet, being in one of those situations where you're really under the microscope for being the representative first just really highlighted the extra added responsibility and pressure that many of our scientists of color face as they enter new fields.

It's critically important that we understand what's going to help the scientists and entrepreneurs be successful, what's going to support their efforts, and what's going to help them navigate the climate until there's better representation and until there's more people that look like them around the table.

That's why we really want to make sure that the programs that a lot of our companies have undertaken for decades - programs to support and train scientists of color, entrepreneurs of color - really are highlighted and that we improve the impact that they have. Rather than reinvent the wheel and create completely new training programs, what we really are trying to do at BIO is link the alumni from all of these different training programs to make sure that talent that comes out of these training programs is visible to each and every company in the BIO network so that when they're going to fill roles, they have access to this highly qualified, highly committed pool of minority and women scientists and entrepreneurs. They can use that pool to fill their critical roles.

The UNCF-Merck fellowship was so fantastic for me. It really transformed my life, and it gave me a front row seat to how our companies really change the scientific breakthroughs that academic scientists make into solutions that actually work for patients. It showed me how committed our industry was and is to improving patient lives, and it gave me some independence that allowed me to really advocate for myself within graduate school, which every graduate student knows is incredibly important.
But sometimes once you go through these programs, you’re a little bit lost to follow-up, and so that’s a role we think BIO can play, really bringing alumni together and creating a network of these amazing scientists and entrepreneurs that can be utilized within our company.

**Assemblywoman Shavonda Sumter:** I’m going to reflect on the same research I talked about earlier. Gains in women's representation in STEM jobs have been concentrated among them holding advanced degrees, although women still tend to be underrepresented among such workers. It's time to talk about pillar number three, which focuses on expanding opportunity for women and other underrepresented populations. How will you help expand opportunities for women in the growing biotech economy?

**Dr. Michelle McMurry-Heath:** In many of our companies, women do play pivotal roles, and we want to support and increase and improve that because it's so critically important. One of the areas where we're still fighting really, really hard is for women-led businesses and for women's representation on boards.

BIO has a tradition over the last three or four years of really standing tall and supporting the hiring and onboarding of women on biotech boards. We know this is important because it's really the boards that set the agenda for our companies and judge whether they're being successful or not. The pathway for women CEOs and for women to really lead companies has also been somewhat of a challenge, so we're trying to lead by example there as well and making sure that our companies are more easily identifying and patronizing women-owned businesses.

This is the path to show how creative and successful these businesses have been and contribute to their further economic trajectory. You'll see more and more of a focus on this at BIO, and it really adds to the overall diverse points of view and diverse leadership perspectives and styles that can be brought to our industry, and that overall will give us greater success.

**Assemblywoman Shavonda Sumter:** As a woman of color yourself in the biotechnology industry, how can you help expand opportunities to other women of color in this growing field?

**Dr. Michelle McMurry-Heath:** This is always the question that keeps women and minority leaders up at night. You know the path that you've walked, you know the barriers you’ve faced and surmounted, and you want to help each and every woman and person of color who’s coming along behind you to successfully face those and go forward.

So, I’ve always mentored, I will continue to mentor, but I’m also trying to be more systematic about it as well. There’s only so much we can do one by one, but we can start to lay foundations that will really help generations reduce the barriers for a greater number of people so that as they're forging their own individual career paths, they can find a somewhat easier path to get to their destination.

That’s really the leap we’re all trying to struggle with and all trying to make, which is how do we move from that one-on-one helping hand, which is still very important, to really changing the entire
foundations and trajectory for the people coming up behind us. That's just my personal commitment, and I know it's a personal commitment of so many women and minority leaders.

Assemblywoman Shavonda Sumter: The Small Business Innovation Research Program (SBIR), also known as America's Seed Fund, is one of the largest sources of early-stage capital for technology commercialization in the United States. This program is quite competitive and helps small businesses participate in federal research and development to develop lifesaving technologies while creating jobs. How can we help promote diversity with this type of grant?

Dr. Michelle McMurry-Heath: This early seed funding is so critical for entrepreneurs that get that great idea and want to turn it into a company but haven't necessarily done that before and don't necessarily know where to turn. The representation levels and in the SBIR, the small business innovation grant programs, for example, out of the NIH (National Institutes of Health), is vanishingly small. We really want to make sure that we're doing everything we can to publicize the program to support minority and women applicants to the program. We want to make sure that the bio revolution that we see is coming, that will really have a huge impact on economic development and wealth creation, is equally accessible to communities of color as we try to climb out of this hole that we find ourselves in today.

There's tremendous buying power in our industry and through our member companies, and we need to be intentional about patronizing women-owned businesses in the supply chain. It's also about making sure that the small business innovation research grants and small business tech transfer programs are reaching all communities equally.

Our program has five goals when it comes to the 11 federal agencies that participate in these types of grants. The first is to meet federal research and development needs. The second is to increase private sector commercialization of innovation derived from federal research and development funding. The third is we want to stimulate technological innovation, the fourth is to foster and encourage participation in innovation by women and socioeconomically disadvantaged communities, and finally, the fifth is to foster technology transfer through cooperative R&D (Research and Development) agreements between small businesses and research institutions. So, we need to ensure that all of those 11 agencies adhere to the goal of encouraging participation by women and minorities. We're using our influence and visibility to really underscore that, and to help the grantees find these programs and participate.

We also have the opportunity to speak about this on Capitol Hill and make sure that the funders, the Congressional funders of those programs, really encourage better minority and women representation. There's a lot to do in this area, it's the tip of the iceberg -- but it's an area you'll hear us speak more and more about in the coming years.

Assemblywoman Shavonda Sumter: Dr. McMurry-Heath was previously a key science policy leader in government. President Obama named her Associate Science Director of the FDA's Center for Devices and Radiological Health. In that role, she championed clinical trial evolution, the use of real-world evidence in product evaluation, and an embrace of the patient's voice in health research so new medical
products deliver outcomes that matter to them. Based on your experience and vast knowledge of
government, are there legislative or regulatory avenues you will pursue to enhance diversity in clinical
trials?

Dr. Michelle McMurry-Heath: The US Food and Drug Administration is a very interesting agency, right?
It’s the global gold standard for really finding new ways to examine whether our new medical
technologies do what we expect them to do and are as safe as we expect them to be. In doing so, the
FDA has put many different parameters in place and some of them have unintended consequences.

One of the things we’ve been looking at very closely this summer is inclusion and exclusion criteria. Now
what’s that? Sometimes, to be able to help really clearly whether a new drug works in a clinical trial or
not, the FDA will say to a company:

‘Well, when you're enrolling in your clinical trial, don't include patients with diabetes, don't
include patients with HIV, don't include patients that have obesity. We don't want to be trying
to interpret the data to see whether or not those other comorbidities or those other existing
conditions impact the outcome of the performance of the drug in the trial.’

And yet sometimes, those inclusion and exclusion criteria - the cutting out of those other patient
populations - also reduces the diversity of the clinical trial. So, we want to make sure that we're calling
attention to those unintended consequences and not inadvertently reducing representation in our
clinical trials for something that doesn't even matter.

The perfect example this summer is one of our companies that is working on the COVID vaccine. We
cover the landscape of all the companies working in the space, but one of them was really trying to
improve the diversity of the vaccine trial, and they noticed that they have an exclusion criteria for
patients that have HIV, even though there were many HIV-positive patients that had their illness under
control who wanted to participate. And so, they really asked themselves was this necessary, and they
looked into it and they dug into it closely and found that actually no it wasn't necessary, they can be
more inclusive. That was one way for them to have a better, more diverse set of patients in the trial.
Now that's just one small example, and that brought in more white patients as well as patients of color,
but it's just to say that sometimes we make unnecessary steps that have unintended consequences. And
so, we at BIO want to be on the lookout for those sorts of things.

Assemblywoman Shavonda Sumter: I'm sure you have something to say about how we can bring trust
back into government and science. Dr. McMurry-Heath, with so much effort being placed on education,
collaboration, and advocacy, can you tell us what other type of work is being done to provide tools to
accelerate gender, racial, ethnic, and LGBTQ+ representation on biotech company boards and C-suites,
and in functional leadership positions?

Dr. Michelle McMurry-Heath: It’s a busy time. Many of your listeners will be aware of the California
initiative that came a few years back around female representation on the boards of publicly traded
companies. It laid down a goal for companies to have 40% women on their boards within a certain
amount of time. At the time, it was a highly criticized move and there was a huge projected backlash,
and everyone cried about the shortage of qualified women out there and how would they possibly comply. And yet, what we've seen in the years sense is that it has had a huge impact on the number of women on corporate boards, and it has worked in a way that little else has.

Now we're seeing a consideration of using this type of tool to improve the representation of people of color and LGBTQ+ representation on biotech company boards as well. California once again just recently [passed an initiative](https://www.biovictoria.org/podcast) to demand that companies have, within one year, at least one member of one of these groups on each board of each publicly traded company that's headquartered in California, and two or three more over the next several years.

It's interesting to see that those sorts of movements can perhaps potentially have an impact, and we at BIO are definitely watching closely, seeing what we can to support company responses to them, and really being helpful. According to a 2017 MassBio and Liftstream study, there's still a gender gap in the life sciences perpetuated by company cultures, processes, and talent management. Women enter the industry in equal proportion to men almost 50/50, 49.6% of women vs. 50.4% of men, but the gender gap continues to grow as you move up the ladder in all career stages. Despite women aspiring to the C-suite and board positions the same as men, the data show that by the time the women reach the C-suite, they actually count for just 24%, and at the board level it's just 14.4%.

In addition to the BIOEquality agenda, addressing inequities in health care delivery, STEM programs, and minority entrepreneurship, we've also been undertaking our [‘Right Mix Matters’](https://www.biovictoria.org/podcast) initiative that we launched last year to really accelerate gender, racial, ethnic, and LGBTQ+ key representation on biotech company boards, C-suites, and functional leadership positions. We believe that the biotech industry cannot just save lives, which it will do and does do, but it can also advance equal opportunity by creating more entry points for diverse leaders to really help guide our industry. We also have an obligation to make sure that our transformative scientific breakthroughs are accessible to all communities, so you'll see more and more of our emphasis on that as we go forward.

**Assemblywoman Shavonda Sumter:** Now I’d like to provide you some time for closing statements. What would you like to leave our listeners with?

**Dr. Michelle McMurry-Heath:** 2020 has been such an interesting year - and maybe that's the understatement of the century - but it really has been a year that's allowed us to take a pause, see what's critically important, and see how we can each do a little bit more to improve our country and our world.

BIO has taken advantage of that pause to really say these are the things our industry can really contribute to making sure that progress goes forward - that scientific progress occurs - and that health, nutrition, and the environment continue to improve, perhaps at a faster rate than they had previous to the pandemic.

I'm just so grateful to have this opportunity to work with such an amazing group of professionals at BIO, a group that has been so committed to seeing these innovative breakthroughs get through to more and more people every day for almost 25 years now, and to work with the member companies that have this core mission and see access to science as their passion.
I couldn’t be prouder of our sector and of our organization, and I really look forward to collaborating with other women leaders as they tackle these same challenging issues and come up with novel solutions and approaches because I think we can all learn from each other going forward.

**Assemblywoman Shavonda Sumter:** 2020 will forever be remembered as a year of disruption. During this time of uncertainty, a set of new normals emerged, including business leaders eager to challenge existing systems. We’ve learned that BIO remains committed to amplifying efforts to develop solutions for patients with an emphasis being placed on three key pillars: promote, invest, and expand.

Over the next several years, they plan to aggressively pursue the BIOEquality agenda by any means necessary, including education, collaboration, and advocacy. I’d like to thank Dr. Michelle McMurry-Heath for meeting the challenge head on. She clearly is not afraid to address important issues of injustice now so that in the future we can call it justice through equity. Thank you, Dr. McMurry-Heath.

**Dr. Michelle McMurry-Heath:** Thank you so much for having me, it was wonderful to get a chance to meet you.

**Assemblywoman Shavonda Sumter:** I’d also like to thank all the listeners for taking the time to hear this important discussion. Don’t forget to subscribe to, like, or share our podcast. You can also email us by visiting womeningovernment.org.

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