The “Inclusion of Women, Minorities and Children” document is required for all human subjects research. Additional requested documentation for phase III clinical trials is outlined on page two below.

**Format:**
Attach this information as a PDF file. See NIH's Format Attachments page.

**Content:**
Organize your attachment into two sections, following the headings and specified order below, and discuss each of the points listed below. Start each section with the appropriate section heading - "Inclusion of Women and Minorities" and "Inclusion of Children." Also include any additional information requested in the FOA.

1. Inclusion of Women and Minorities
Address the following points:
- Describe the planned distribution of subjects by sex/gender, race, and ethnicity.
- Describe the rationale for selection of sex/gender, racial, and ethnic group members in terms of the scientific objectives and proposed study design. The description may include, but is not limited to, information on the population characteristics of the disease or condition under study.
- Describe proposed outreach programs for recruiting sex/gender, racial, and ethnic group members.
- Inclusion and Excluded Groups: Provide a reason for limiting inclusion of any group by sex/gender, race, and/or ethnicity. In general, the cost of recruiting certain groups and/or geographic location alone are not acceptable reasons for exclusion of particular groups. See the Inclusion of Women and Minorities as Participants in Research Involving Human Subjects - Policy Implementation Page for more information.
- Existing Datasets or Resources. If you will use an existing dataset, resource, or samples that may have been collected as part of a different study, you must address inclusion, following the instructions above. Generally, you must provide details about the sex/gender, race, and ethnicity of the existing dataset/resource and justify the details as appropriate to the scientific goals of the proposed study. For more information about what is considered an existing dataset or resource for inclusion policy, see the NIH FAQs on Monitoring Inclusion When Working with Existing Datasets and/or Resources.

2. Inclusion of Children
For the purposes of the Inclusion of Children, individuals under 18 are defined as a child; however, exclusion of any specific age or age range group (e.g., older adults) should be justified in this section. In addition, address the following points:
- Children are expected to be included in all NIH-defined clinical research unless there are scientific or ethical reasons not to include them. Discuss whether children (as a whole or a subset of individuals under 18) will be included or excluded. If children will be included, include a rationale for selecting a specific age range of children, if relevant. If children will be excluded, provide a rationale for exclusion. See the NIH Policy and Guidelines on the Inclusion of Children as Participants in Research Involving Human Subjects for additional information about circumstances that may justify the exclusion of children.
- Include a description of the expertise of the investigative team for working with children of the ages included, of the appropriateness of the available facilities to accommodate the children, and the inclusion of a sufficient number of children to contribute to a meaningful analysis relative to the purpose of the study.
- When children are involved in research, the policies under HHS' 45 CFR 46, Subpart D - Additional Protections for Children Involved as Subjects in Research apply and must be addressed in the Protection of Human Subjects attachment.
**NIH-Defined Phase III Clinical Trials.** If the proposed research includes an NIH-Defined Phase III Clinical Trial, the "Inclusion of Women, Minorities, and Children" attachment **MUST** address plans for how sex/gender, race, and ethnicity will be taken into consideration in the design and valid analysis of the trial. See the instructions for "Valid Analysis" and "Plans to test for Differences in Effect among Sex/gender, Racial, and/or Ethnic Groups" below. Additional information about valid analysis is available on the NIH Policy and Guidelines on The Inclusion of Women and Minorities as Subjects in Clinical Research page.

**Valid Analysis** (for NIH-Defined Phase III Clinical Trials only):
Address the following issues for ensuring valid analyses:

- Inclusive eligibility criteria - in general, the cost of recruiting certain groups and/or geographic location alone are not acceptable reasons for exclusion of particular groups;
- Allocation of study participants of both sexes/genders and from different racial and/or ethnic groups to the intervention and control groups by an unbiased process such as randomization;
- Unbiased evaluation of the outcome(s) of study participants; and
- Use of unbiased statistical analyses and proper methods of inference to estimate and compare the intervention effects by sex/gender, race, and/or ethnicity, particularly if prior evidence strongly suggests that such differences exist.

Plan to Test for Differences in Effect among Sex/gender, Racial, and/or Ethnic Groups (for NIH-Defined Phase III Clinical Trials only):
Applicants also should address whether they plan to test for differences in effect among sex/gender, racial, and/or ethnic groups and why such testing is or is not appropriate.
This plan must include selection and discussion of one of the following analysis plans:

- Plans to conduct analyses to detect significant differences in intervention effect among sex/gender, racial, and/or ethnic subgroups when prior studies strongly support these significant differences among one or more subgroups, or
- Plans to include and analyze sex/gender, racial, and/or ethnic subgroups when prior studies strongly support no significant differences in intervention effect between subgroups. (Representation of sex/gender, racial, and ethnic groups is not required as subject selection criteria, but inclusion is encouraged.), or
- Plans to conduct valid analyses of the intervention effect in sex/gender, racial, and/or ethnic subgroups (without requiring high statistical power for each subgroup) when the prior studies neither support nor negate significant differences in intervention effect among subgroups.