

Current Policy Issue Resources



Overview

Ensuring robust and consistent funding and support for ataxia research is integral to FARA's mission. Therefore, FARA is committed to closely monitoring changes to funding and other policies that implicate research and clinical trial participation. Additionally, we continue to engage with the scientific community to understand the impacts of the emerging policy issues laid out below.

If you're interested in receiving updates on the policy areas that we are tracking, we encourage you to subscribe to our advocacy newsletter on the [FARA website](#)!

Funding Cuts

Recently there has been many changes that affect federal research funding. Budgets at federal research agencies as well as grant programs at both the NIH and DOD (CDMRP) have been reduced. The impact of these changes are still developing.

For more information about changes to funding, visit:

- [Science, Biomedical research takes hits in U.S. budget deal](#)
- [Nature, These US labs risk imminent closure after Trump cuts](#)
- [Center for American Progress, How cuts to NIH funding would hurt states](#)

Indirect Costs

On February 7th, 2025, the NIH capped indirect costs at 15% through a notice titled “[Supplemental Guidance to the 2024 NIH Grants Policy Statement: Indirect Cost Rates](#).” Previously, indirect costs were negotiated with an average of 27%. **Direct costs** include things specific to the study, such as faculty and postdoctoral salaries and equipment bought for that specific study, while **indirect costs** include all of the other important things that keep labs running (i.e. administrative and clerical staff salaries, equipment shared with other labs, building upkeep and utilities, etc.). Without the anticipated funding for indirect costs, labs are left financially insecure. There are pending legal challenges to this notice.

For more information on indirect costs, visit:

- [Associated Press, Federal judge blocks drastic funding cuts to medical research](#)
- [AcademyHealth, February 2025 Situation Report](#)

Federal Workforce Cuts

The Trump Administration has prioritized reducing the federal workforce in order to reduce government spending. So far, 20,000 employees have either been fired or resigned in exchange for severance pay. The majority of those affected by the layoffs have been from the FDA. The FDA has always been a strong partner with FARA, and we will continue to look for areas to collaborate with the new administration.

For more information about the federal workforce reduction, visit:

- [HHS Announces Transformation to Make America Healthy Again](#)
- [The Hill, RFK Jr. defends HHS Job cuts: “We’re not cutting front-line workers.”](#)
- [Axios, HHS begins laying off 10,000 employees](#)

Section 504

Section 504 is a provision in the Rehabilitation Act of 1973 that prevents discrimination on the basis of disability from the federal government or federally funded entities. Currently, this statute is under review in a Texas court. In *Texas v. Becerra*, seventeen states are suing the federal government claiming Section 504 is unconstitutional. This claim stems from a prior rule that held that gender dysphoria might qualify as a disability. However, rather than just striking down the rule on gender dysphoria, the states are asking for Section 504 to be revoked.

While Section 504 is generally thought of in the context of education, it touches any program or entity that receives federal funding, including hospitals, clinics, clinical trial sites, and more, mandating that these places are accessible to people with disabilities. With potential impacts to research, FARA will continue to follow developments in the case.

For more information on *Texas v. Becerra* and ways that you can take action, visit:

- [DREDF, *Texas v. Becerra* FAQs](#)
- [DREDF, Protect Section 504 Webinar and Action Page](#)