

## **APPROPRIATIONS PROCESS IN CHAOS AS NEW FISCAL YEAR LOOMS**

With ten days to go before the start of Fiscal Year 2001, only two of the thirteen spending bills have been enacted into law. The other eleven are in various states of completion as the Republican led Congress and the Democratic White House maneuver to figure out ways to complete the process to each entity's maximum political advantage. So far, the word "compromise" is still not in either side's vocabulary and Congress will need to enact a Continuing Resolution to keep the government in operation past October 1.

The GOP leadership thought their solution to the problem was to "bundle" spending bills two at a time; sort of a Noah's ark approach. The idea was to take a bill that had come through a House-Senate conference and package it with a controversial bill that had not even been considered by the full Senate and send them on to the President. Congress' first attempt, putting the Legislative Branch funding bill that pays for congressional activities, with the Treasury-Postal Service bill, came to a crashing defeat on the Senate floor on September 19.

The VA, HUD, Independent Agencies bill, which includes funding for the National Science Foundation (NSF) emerged from the Senate appropriations committee on September 13 (see below). It is not scheduled to go to the Senate floor for debate and amendment, but is one of those bills the congressional leadership is looking to attach to another bill. For most of this week, the Transportation bill was the likely candidate. This has now become unclear.

The Commerce, Justice, State (CJS) spending bill is also not currently scheduled for Senate floor action. It too is now a candidate to be bundled with the Transportation bill or the Energy and Water bill. Among its many programs, the CJS bill funds the Census Bureau, National Institute of Justice and

Bureau of Justice Statistics, and the educational and cultural exchange programs of the State Department.

The huge Labor, Health and Human Services, Education appropriation emerged from a House-Senate conference at the end of July. However, the conference report has not been made public as the leadership understands they have brought forth a bill the White House will not accept. On September 20, preliminary discussions began to try and negotiate a "signable" bill.

The Agriculture and Rural Development funding bill remains tied up over the Republican leadership's attempt to deny a bipartisan coalition's desire to lift sanctions against sending food and medicine to Cuba. The Interior bill, which funds the National Endowment for Humanities and the National Park Service could move on to the President early in the week of September 25.

## **SENATE PANEL GIVES NSF TEN PERCENT BOOST**

The Senate VA, HUD, Independent Agencies Appropriations Subcommittee has provided the National Science Foundation (NSF) with a FY 2001 funding level of \$4.3 billion, a \$400 million or 10.3 percent increase over the FY 2000 appropriation.

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The Subcommittee's decisions were ratified by the full Senate appropriations committee. This is still \$275 million below the President's 17.3 percent requested increase, but \$233 million more than the House allocated.

For Research and Related Activities, the Senate provided \$3.25 billion in FY 2001, a \$287 million or 9.7 percent boost over last year. The Senate designated \$178 million of that increase for NSF's major initiatives in Information Technology, Biocomplexity, and Nanoscale Science and Engineering, and \$6.4 million for the ongoing Plant Genome Research program. The latter is a favorite of Subcommittee Chairman Kit Bond (R-MO).

In the report accompanying its bill, the panel included language recognizing NSF's funded research in the social, behavioral and economic sciences (SBE) area. The Committee noted its considerable interest in SBE's activities "to raise science literacy" and these sciences' participation in NSF's multi-disciplinary initiatives in information technology and 21<sup>st</sup> Century Workforce. The panel also asked NSF to "to formulate a plan for increasing the number of young investigators in SBE and other research areas."

For the Education and Human Resources Directorate the Committee provided \$765.4 million,

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an increase of \$74.5 million over last year and \$36.4 million above the request. The panel included strong language supporting the Graduate Research Fellowship program providing it \$55.2 million for FY 2001, \$3.4 million above the request, to allow stipends to increase to \$18,000 per award. The Committee also urged Congress to increase the program to 900 awards in the next competition. NSF proposed to reduce the number of fellowships to 850.

The hope in the science community is that the 10.3 percent boost for NSF will increase in final negotiations. Key Senators including Chairman Bond, Appropriations Committee Chairman Ted Stevens (R-AK), Ranking Subcommittee Democrat Barbara Mikulski (D-MD) and Majority Leader Trent Lott (R-MS) have all expressed their support for doubling NSF's budget in the next five years. Nearly 40 Senators have signed the Bond-Mikulski doubling letter (see *UPDATE*, July 24, 2000 Number 14). House Subcommittee Chairman Representative James Walsh (R-NY) has also suggested that he would like to elevate NSF's appropriation. The White House has made it clear in meetings with the science community throughout this year that they consider NSF a major priority. Will all this good karma come together in the end?

#### APPOINTMENTS...

##### Office of Science and Technology Policy

The White House Office of Science and Technology Policy (OSTP) announced the appointment of James Griffin as the new Assistant Director for Social and Behavioral Sciences. He has been detailed to OSTP from the Office of Educational Research and Improvement (OERI) at the Department of Education.

While at OERI, Griffin helped develop the Interagency Education Research Initiative, working with the National Science Foundation and the National Institute on Child Health and Development. He has also worked extensively on research related to early childhood education, including evaluation

work with Head Start when he was with the U.S. Department of Health and Human Services.

Griffin is a clinical psychologist, with a B.A. from the University of Cincinnati and a Ph.D. from the University of Rochester. He completed a Postdoc in psychiatric epidemiology at Johns Hopkins University before joining the government.

### **National Science Foundation**

Phillip Rubin is the new director of the Behavioral and Cognitive Sciences (BCS) Division of the Social, Behavioral and Economic Sciences Directorate (SBE) at the National Science Foundation. Rubin replaces Hilleary Everist who left NSF last year. Steve Breckler, Social Psychology program officer, has served as acting division director since Everist's departure.

Rubin comes to NSF from the Haskins Laboratories in New Haven, CT, where he has been the Chief Operating Officer. Haskins is a research laboratory affiliated with Yale University and the University of Connecticut. Most of the Laboratories' current research projects are focused on problems in human communication, including speech perception and language development. Haskins is also particularly well known for its research on reading. Rubin has been with Haskins since 1976. He also has appointments as an Adjunct Professor in the Department of Surgery (Otolaryngology) at the Yale University School of Medicine and as a Research Affiliate in the Psychology Department at Yale University.

He has authored numerous papers and made many presentations on speech production, including the development of a computational model. He edited a special issue of *Speech Communication* in 1998. Rubin has a B.A. from Brandeis, and an M.A. and Ph.D. in experimental psychology from the University of Connecticut. As the BCS expands its research support in cognitive neuroscience (there is a major increase proposed for the FY 2001 budget), Rubin's expertise will help oversee that effort.

### **NEW HEAD OF HUMAN SUBJECTS PROTECTION OFFICE CRITICIZES SYSTEM**

The current system of protecting human subjects in research is "somewhat dysfunctional," declared Greg Koski, director of the new Department of Health and Human Services' (HHS) Office for Human Research Protection (OHRP). Named to the position in June, and officially on the job just a little over 24 hours, Koski spent his first days (September 12- 13) speaking before the National Bioethics Advisory Commission (NBAC) regarding "Ethical and Policy Issues in the Oversight of Human Research in the United States." NBAC, a presidential advisory commission established by Executive Order 12975 in October 1995 and chaired by Princeton President Harold Shapiro, is examining the current federal system for the protection of human subjects in research.

Koski, viewed as a leading national figure in the area of protection of human subjects in research, formerly led the human subjects protection program for three teaching hospitals affiliated with Harvard University. His background is in both human-subject protection and clinical research. He was previously Director of Human Research Affairs at Partners HealthCare System in Boston and Associate Professor of Anesthesia at Harvard Medical School.

OHRP, which replaces the National Institutes of Health's (NIH) Office of Protection from Research Risks (OPRR), has been elevated to an office within the HHS and now reports to the assistant secretary for Health, Surgeon General David Satcher. OHRP will provide leadership for all 17 federal agencies which support research involving human subjects under a regulation known as the "Common Rule."

Indicating his interest in the efforts of NBAC, Koski told the Commission that he is "anxiously waiting" their report. He emphasized that the opportunity to "examine human subjects protection is a challenge and a responsibility." While there is an essential need for research, he emphasized that it is not without costs. In the past, these costs were borne by individual participants and not by society.

Now, there are real risks not only to individuals, he continued, but also to groups and society.

Accordingly, Koski declared, there is a “heightened need to pay attention to the conduct of research.” There is a “gaping hole” in the protection process, he explained to the Commission. OPRR puts too much emphasis on the front end, while the Food and Drug Administration (FDA) focuses too much of its attention on “post-hoc audits,” which cannot do much to protect the research subjects. The great challenge is to bridge this gap, he emphasized.

### **The Problems With Institutional Review Boards**

Acknowledging bridging that gap will not be easy, Koski underscored that the mainstays of human subject protection have been the Institutional Review Boards (IRBs), and the informed consent process. IRBs, he continued, are not well positioned to protect research subjects. They have little contact with researchers and research participants during the actual conduction of the research, he said. Instead, IRBs focus too much on paperwork and procedure. Furthermore, they are frequently caught in the middle — a fundamental flaw in the human subjects protection’s process, Koski said. This flaw leads to the feeling that IRBs are “impediments to research.”

A new model that will serve us better, argued Koski, is one that is performance-based. Every party associated with research would be responsible for the protection of human subjects. Implementation of such a system, he stressed, would require the addition of “responsibility and caring” to the existing process. Scientists would “do the right thing because it is the right thing to do,” he explained. Caring would require the “subjugation of our own interests.”

Noting that such a model is “certainly idealistic in one dimension,” he stressed that “oversight is critically important.” It must be expanded to achieve the accountability required. Training is essential, he declared. Researchers’ activities would be limited to those things that they are actually trained to do. He

indicated support for the development of uniform national standards to guide IRBs.

Koski further emphasized that it is critical that the public become more engaged, fully informed, and understand that there are both risks and benefits to participating in research. However, it is not practical, he said, to abandon the current system. Doing so would halt research. OHRP, concluded Koski, has “broad leadership and will catalyze efforts as changes are introduced in an expedient manner and within the limits now governing NIH, FDA, and the other federal research agencies.”

### **AMERICA GETTING OLDER: REPORT CITES NEED FOR BETTER DATA**

A new interagency report, *Older Americans 2000: Key Indicators of Well-Being*, provides a picture of the health and well-being of Americans age 65 or older. The report is the first chart book in what will be a continuing series prepared by the Interagency Forum on Aging-Related Statistics, a coalition of nine Federal agencies. A number of Federal agencies provided data on various aspects of the challenges facing this growing segment of our population.

The publication provides 31 key indicators selected to portray aspects of the lives of older Americans and their families. These indicators are categorized into five subject areas: population, economics, health status, health risks and behaviors, and health care.

**Population** — The report notes that the “demographics of aging continue to change dramatically.” Today, there are an estimated 35 million persons age 65 or older in the United States, accounting for almost 13 percent of the total population. This population is expected to double over the next 30 years to 70 million by the year 2030. Furthermore, over the next 50 years, the population age 85 and older is expected to grow faster than any other age group.

**Economics** — The report explains that in general the economic status of older people has “improved markedly over the past few decades.” However, it

also finds that major disparities exist, with older blacks and older women reporting fewer financial resources. Social Security accounts for nearly 80 percent of income for people in the lowest two-fifths of the income spectrum.

**Health Status** — An overwhelming majority of older Americans rate their health as good or excellent. However, chronic disease, memory impairment, and depressive symptoms affect large numbers of older people, and the risk of such problems often increase with age.

**Health Risks and Behaviors** — Emphasizing that social and behavioral aspects of life for older Americans can make a difference in health and well-being, the report highlights that most older people report being socially active, which may contribute to their emotional and physical health.

**Health Care** — There are large differences in health expenditures and use of services between persons ages 65 to 69 and persons age 85 or older. These disparities are closely associated with age and disability status.

While the report generally addresses the U.S. population age 65 and older, because life expectancy is increasing and larger numbers of people will be entering older age cohorts, future reports will aim to include information on the populations ages 85 to 94 and 95 and older.

Despite the existing data available, the “Older American” report emphasizes that there are still areas where “scant data exist.” These areas include:

**1) More Extensive Age-Reporting Categories**  
**2) Information on Older Minority Americans** — There is a lack of basic data about aging minority populations, largely due to the small sample sizes of these populations as well as to language barriers that prevent certain racial and ethnic groups from participating in surveys. Given the increasing number of immigrants, more data on nativity and analysis of generational differences in health and well-being is necessary. The report further stresses that “policy changes and cultural perceptions have

brought increasing complexity to the definition and measurement of race and ethnicity.” Explaining that currently only the decennial census has adequate coverage of some of the smallest racial and ethnic groups, the report emphasizes that even those data lack critical information on health and disability essential to adequately study the well-being of older minorities.

**3) Measures of Disability** — The report stresses that “the concept of disability encompasses many different dimensions of health and functioning, and complex interactions with the environment.” Further, disability has been measured in different ways across surveys and censuses, and this has led to conflicting estimates of the prevalence of disability.

**4) Institutional Populations are Not Represented in National Surveys**

**5) Different Types of Long-term Care Facilities and the Transitions That Occur Between Them** — Current surveys and censuses that include information on older populations rarely distinguish between types of “institutional” residences.

**6) National Statistics on Elder Abuse** — The need for a national study of elder abuse and neglect is supported by the growing number of older people, increasing public awareness of the problem, new legal requirements for reporting abuse, and advances in questionnaire design.

**7) Understanding the Reasons for Improvements in Life Expectancy and Functioning** —

“Understanding the underlying reasons for the improvements in longevity and functioning is a critical first step to further advances towards these goals,” emphasizes the report. Accordingly, information is needed to understand the long-term improvements in the health of the older population stemming from better nutrition, increased access to medical care, improvements in the public health infrastructure, changes in lifestyles, better treatment of chronic diseases through new medical procedures and pharmaceuticals, and use of assistive devices and other technology.

**8) Better Data to Measure Both Income and Wealth** — Highlighting that collecting data on economic well-being is often a difficult task, the report notes that most surveys use only income-based measures. According to the report, this “type of survey methodology does not capture the

accumulated wealth (including the value of future pension payments) and assets on which many older persons rely.” New methods should be encouraged in surveying older people on this dimension.

**9) The Impact of Transportation Needs on the Quality of Life of Older Americans** — “The ability to move freely from place to place, while often taken for granted, is as crucial to the well being of older people as it is to the rest of the population.” Additional data are needed on the number of trips older persons take and the types of transportation they use.

The Interagency Forum on Aging Related Statistics is made up of the following agencies: Administration on Aging; Bureau of Labor Statistics; Bureau of the Census; Health Care Financing Administration; National Center for Health Statistics; Office of Management and Budget; Office of the Assistant Secretary for Planning and Evaluation, Department of Health and Human Services; and Social Security Administration.

Copies of the report may be viewed at: [www.agingstats.gov](http://www.agingstats.gov). Single printed copies are available from the National Center for Health Statistics, at 301/458-4636 or by sending an e-mail request to [nchsquery@cdc.gov](mailto:nchsquery@cdc.gov).

## **IOM REPORT CALLS FOR MORE INTERDISCIPLINARY RESEARCH**

“To achieve the health goals of the 21<sup>st</sup> century, scientific training and research must bring together many scientific fields that offer different insights and technologies,” emphasizes a recently released Institute of Medicine (IOM) report, *Bridging Disciplines in the Brain, Behavioral, and Clinical Science*. The report, released by the Division of Neuroscience and Behavioral Health of the Committee on Building Bridges in the Brain, Behavioral, and Clinical Services, highlights that “[i]nterdisciplinary efforts need to be facilitated at all levels of teaching and research.” The report further underscores that “[n]ever before have there been such opportunities to understand the human brain and behavior.”

The report, commissioned by the National Institute of Health’s (NIH) Office of Behavioral and Social Sciences Research, National Institute of Mental Health, National Institute on Nursing Research, and National Institute on Aging, offers recommendations “to delineate, enhance and accelerate a process that is already reflected in many training and research programs.”

According to the Committee, both single disciplinary and interdisciplinary research are needed to develop methods for prevention, diagnosis, and treatment of disease and to understand the basic mechanisms of brain and behavior.

**Interdisciplinary research** is defined by the Committee “as a cooperative effort by a team of investigators, each expert in the use of different methods and concepts, who have joined in an organized program to attack a challenging problem. Ongoing communication and reexamination of postulates among team members promote broadening of concepts and enrichment of understanding. Although each member is primarily responsible for the efforts of his or her own discipline, all share responsibility for the final product.”

Observing that the need for interdisciplinary research appears to be increasing, the Committee explains that “many of the chronic conditions that challenge us today do not respond well to the single investigator, single discipline model that worked well in the past, as in the paradigm of infectious disease.” The report warns, however, that “interdisciplinary research is an approach, not an end and should arise out of a response to a problem that cannot be embraced by a single discipline.”

## **Barriers to Interdisciplinary Research**

The “Bridging Disciplines” report also highlights the “traditional and persistent barriers to interdisciplinary research,” including disciplinary jargon, cultural differences, perceptions of interdisciplinary science as second rate, and a “sense of superiority within each discipline and the view that other disciplines are less rigorous or important also present barriers.” Concerns that interdisciplinary fields will not prepare graduates for a career are

observed. Despite these barriers, the report recognizes that interdisciplinary programs are growing at academic institutions.

In recognition of the need for MDs to understand the behavioral and sociological aspects of disease, to address the important issues of behavior change and adherence, and to “think globally about population and environmental factors in disease,” the report “strongly encourages” training in these nontraditional fields.

### **Translational Research Needed**

The IOM report underscores the need to translate the findings of research to the clinic or from the clinic back to the laboratory. According to the report, translating findings is considered an important aspect of interdisciplinary research, although sometimes difficult to achieve.

Federal funding agencies, including NIH, are encouraged to identify areas that can be most effectively investigated with interdisciplinary approaches and to remove the barriers to interdisciplinary research and training. These would include MD/Ph.D. programs in the social and behavioral, as well as biomedical sciences. Although existing program language permits such graduate study, training in social and behavioral science (e.g., anthropology, economics, psychology, and sociology) is undertaken infrequently. NIH can highlight the need for such graduates and encourage grantees to recruit them.

### **REPORT FINDS ‘SNAIL’S PACE’ IMPROVEMENT IN MATH AND READING**

The Brookings Institution recently released its first annual *Brown Center Report on American Education: How Well Are American Students Learning*. This year’s report, written by Center Director Tom Loveless, focuses on math and reading achievement.

Loveless, and his Research Assistant Paul DiPerna, analyzed data from the National Assessment of Educational Progress (NAEP) to

determine how today’s nine-, thirteen-, and seventeen-year old American students are performing in mathematics and reading. The Department of Education began administering the “trend” NAEP in math in 1973. The trend test has remained substantially unchanged during the last 27 years and focuses more heavily on an understanding of whole number arithmetic, fractions, decimals, percents, and integers. The second, newer “main” NAEP, added in 1990, follows the National Council of Teachers of Mathematics (NCTM) framework which focuses more heavily on geometry and problem solving, allows students to use calculators on a portion of the test, and includes items on which students may receive partial credit despite incorrect answers. The “main” NAEP also differs from the “trend” test in that the former is modified periodically to reflect changes in curriculum and instructional practices.

The data show that all three groups made very small gains in reading achievement from 1971 to 1999, with nine-year-olds showing the greatest gains. The achievement gains in math since 1973 for the three age-groups have been greater, actually reaching their highest level ever in 1999. The report, however, also shows that the “middle grade slump” — the significant slowing of achievement gains from the middle school years through high school so prominent in the Third International Math and Science Study (TIMSS) results — continues to affect American students. The math gains for seventeen year olds, according to the report, have barely increased from 1973 levels, while scores for younger children have risen, albeit slowly. Loveless noted, “Our report shows that gains in academic achievement over the last decade have proceeded at a snail’s pace.”

The full report can be viewed on the Brookings website at: [www.brook.edu/browncenter](http://www.brook.edu/browncenter)

### **SOURCES OF RESEARCH SUPPORT**

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