

Note: If you wish to continue receiving COSSA Washington Update, please add [newsletter@coffa.org](mailto:newsletter@coffa.org) to your address book (or "buddy", "safe", "approved" or "trusted sender" lists). If you are receiving a forwarded copy of Update and would like to receive it directly, please email us at [newsletter@coffa.org](mailto:newsletter@coffa.org) or visit us on the web at [www.coffa.org](http://www.coffa.org).



# COSSA Washington Update

---

## IN THIS ISSUE:

- [House Panel Boosts NSF By Ten Percent for FY 2008](#)
- [Homeland Security Spending Bill To House Floor](#)
- [House Appropriations Labor-HHS Subcommittee Approves FY 2008 Spending Bill](#)
- [The Administration Abandons Plans to Replace SIPP](#)
- [House Subcommittee Looks At Immigration Statistics](#)
- [NIH Establishes Working Groups To Examine Peer Review](#)
- [Behavioral And Social Science Research On Understanding And Reducing Health Disparities: Applications Wanted](#)
- [Research On Interventions That Promote Research Careers: Social And Behavioral Scientists Wanted](#)

Volume 26, Issue 11

June 11, 2007

## HOUSE PANEL BOOSTS NSF BY TEN PERCENT FOR FY 2008

The House Commerce, Justice, Science Appropriations Subcommittee, chaired by Rep. Alan Mollohan (D-WV), marked up its spending bill late on the afternoon of June 11. The bill provides \$53.6 billion in discretionary funding for the many programs under the panel's jurisdiction. This is five percent more than President Bush's request and a seven percent increase over FY 2007. The size of the increase is sure to elicit a specific veto threat from the Administration.

The Subcommittee recommended \$6.5 billion for the National Science Foundation (NSF) for FY 2008. This is \$80 million above the President's request, and \$593.4 million or 10 percent above the FY 2007 level. The extra \$80 million provided an additional increase of \$72 million to the Education and Human Resources Directorate (EHR), boosting its budget to \$822.6 million, a 17.9 percent raise from FY 2007 levels.

The Research and Related Activities account received \$5.139 billion, an increase of \$8 million over the President's request, and 7.9 percent over FY 2007. The extra \$8 million goes to the EPSCOR (Experimental Program to Stimulate Competitive Research) program, which moved into this account from EHR in the FY 2008 budget.

The full House Appropriations Committee will consider the bill on June 18.

## HOMELAND SECURITY SPENDING BILL TO HOUSE FLOOR

The FY 2008 spending bill for the Department of Homeland Security (DHS) will have the honor of initiating the appropriations process on the House floor on June 12. The bill emerged from the appropriations committee on June 5, after the Subcommittee, chaired by Rep. David Price (D-NC), marked it up on May 18. The overall spending recommendation exceeds the President's request by \$2 billion, leading to threats of a presidential veto if this number holds in the final bill.

The appropriations committee provided \$777.1 million for the **Science and Technology (S&T) Directorate**, almost \$106 million below the FY 2007 level (because of restructuring the FY 2007 and FY 2008 numbers are not direct comparisons). The Committee approved the Directorate's new structure that includes \$12.6 million for a Division of Human Factors research. The Committee report notes "the importance of using behavioral and social sciences to detect, analyze, and better understand and prevent threats posed by terrorists and commends the Department for elevating the status of behavioral science with the establishment of a new Human Factors division."

The panel's FY 2008 spending bill also includes \$48.6 million for University Programs, which include the Centers of Excellence and the scholars and fellows programs. This is almost \$10 million more than requested by the Administration and would restore funding to the FY 2007 level. The Committee report asserts: "Additional funding is critical to the success of this program because S&T will award four new University Centers of Excellence late in fiscal year 2007. Without additional funding, each current University Center of Excellence program would be provided with less funding in fiscal year 2008."

The Committee also asks that the S&T directorate report on how it "selects universities for a Center of Excellence contract award, determines the type of research in which each Center will specialize and evaluates the quality of work received from the Centers." In addition, the Committee wants to know what impact putting the Centers on "a time limit may have on the quality and breadth of research conducted on behalf of the Directorate."

The Committee report also urges continued support of the scholars and fellows program, but notes the panel has not approved S&T's request to limit the awards to universities that lead Centers of Excellence. The panel first wants an independent review of the scholars and fellows program.

The Senate DHS Appropriations Subcommittee, chaired by full Appropriations head, Sen. Robert Byrd (D-WV) is scheduled to mark up on June 13.

## HOUSE APPROPRIATIONS LABOR-HHS SUBCOMMITTEE APPROVES FY 2008 SPENDING BILL

On June 7, the House Appropriations Subcommittee on Labor, Health and Human Services and Education and Related Agencies (Labor-HHS) approved its FY 2008 funding bill. The measure provides \$151.5 billion in discretionary funding for the programs under its jurisdiction. This sum is an increase of \$6.9 billion, or 4.8 percent above FY 2007 funding levels and 7.5 percent more than the President's FY 2008 budget request.

The bill provides \$29.650 billion in funding for the **National Institutes of Health (NIH)**, an increase of \$750 million or 2.6 percent above the FY 2007 funding level and a 3.6 percent increase above the President's request. Included in this sum is \$300 million for the Global HIV/AIDS Fund Transfer. According to the Subcommittee, the increase would "increase the number of new and competing research grants by approximately 545" over the previous year's level. In addition, it lifts a two-year freeze on the average costs of new research grants, and provides \$110.9 million for the National Children's Study. The NIH total also includes a \$495 million direct appropriation through the Office of the Director for the Common Fund, an increase of \$12 million or 2.5 percent more than the FY 2007 funding level. The Fund remains at 1.67 percent of the total NIH appropriation.

The **Agency for Healthcare Research and Quality (AHRQ)** received a budget of \$329.6 million, an increase of \$10 million or 3.3 percent more than the FY 2007 funding level. The bill includes, per the President's request, \$78.9 million for patient safety and Health Information Technology (HIT) research (a reduction of \$ 5 million) and \$55.3 million for the Medical Expenditures Panel Survey (MEPS). The measure also provides \$15 million for comparative effectiveness research instead of the \$15 million requested by the President for a new personalized health care

initiative. The bill provides AHRQ with a direct appropriation as opposed to funding the agency with transfers from other agencies.

For the **Centers for Disease Control and Prevention (CDC)** the measure provides a program level of \$6.449 billion, an increase of \$183 million more than the FY 2007 funding level. This sum includes a little over \$1 billion for Health Promotion, an increase of \$42.6 million over the current year.

For **Health Information Technology**, the bill provides program level funding of \$61.3 million, \$56.6 million below the President's budget request.

The Subcommittee provided a \$9.9 million boost over FY 2007 for **International Education and Foreign Language programs**, providing a total of \$115.7 million. The **Fund for the Improvement of Postsecondary Education (FIPSE)** was level funded at \$22 million, as was the **Javits Fellowship Program** at \$9.7 million. The panel did restore funding for the **Legal Education Opportunities** program at \$2.9 million. This program did not receive an appropriation in FY 2007.

The **Institute of Education Sciences** received \$535.1 million from the Subcommittee, a \$17.6 million boost over FY 2007, but \$59.2 million below the Administration's request. The panel: reduced by \$5 million funding for research, development, and dissemination to \$157.5 million; increased the National Center for Education Statistics by \$6 million to \$96 million, significantly below the requested \$119 million; provided \$91.1 million for assessment rather than the \$110.6 million requested; and increased the Statewide data systems account by 50 percent to \$37.5 million, rather than the doubling asked for by the Administration.

The **Bureau of Labor Statistics** received \$576.1 million, a 5.1 percent increase over FY 2007, and slightly more than the Administration requested.

Full details of these decisions await the markup by the full House Appropriations Committee scheduled for June 14 and the issuance of the Committee report.

## THE ADMINISTRATION ABANDONS PLANS TO REPLACE SIPP

Created by the Census Bureau in 1984, the Survey on Income and Program Participation (SIPP) was designed to gather detailed information about the impact of government aid on people's lives and how people move in and out of government programs. It is the only large-scale measurement of the impact of Medicaid, food stamps, school lunches, unemployment and other safety-net programs for the poor. Last year, the Census Bureau announced it would phase out SIPP and replace it with a new "improved" measure of income and poverty. Advocates complained about the loss of historical series data and set out to save SIPP. The FY 2007 appropriation included funds to keep SIPP going while beginning work on the new survey.

Rep. Carolyn Maloney (D-NY), a long-time champion of the Census and former ranking member on the Government Reform Census Subcommittee, led the opposition to SIPP's elimination. She declared: "We need the SIPP to determine which government programs are working and how to best make use of taxpayer dollars in tight fiscal times." SIPP's supporters argued that the proposed replacement survey was "untested and that even if it ultimately proved adequate, would not be ready anytime soon, thus creating an information void for several years."

Last week, those who fought to save the SIPP celebrated when Census officials confirmed that the Administration had abandoned its immediate plans to replace the program. Maloney applauded the Administration's decision to preserve the SIPP. She and Sen. Jack Reed (D-RI) have introduced a joint House-Senate resolution to keep the SIPP intact and create a multi-agency commission to review proposed changes to or elimination of the survey.

The big problem now is that the Administration's proposed FY 2008 budget did not include any funds for SIPP. Congress would have to add funds to the Census Bureau's budget to maintain the survey at its historical level. In addition, the sample size may have to be cut.

## HOUSE SUBCOMMITTEE LOOKS AT IMMIGRATION STATISTICS

With the Senate debate on immigration stalled and House leaders refusing to take up a bill until the Senate passes its own, the outlook for serious immigration reform looks bleak. In an attempt to inject solid numbers into a debate that is often subject to fuzzy math on both sides, however, the House Judiciary Subcommittee on Immigration Citizenship, Refugees Border Security, and International Law held a hearing on Thursday, June 6, "Government Perspectives on Immigration Statistics." The hearing itself was evidence of the need for concrete numbers. Various witnesses gave the number of illegal immigrants currently in the United States as anywhere from 11-20 million.

Ruth Wasem with the Congressional Research Service (CRS) testified that as of 2005, 36 million foreign-born people resided in the United States, according to estimates from the U.S. Bureau of Census and the Bureau of Labor Statistics. According to research done by the Pew Hispanic Research Center for CRS, of those 36 million, approximately one third are illegal immigrants. Wasem testified that the illegal immigrant population is comprised of three main factions: those who overstay their nonimmigrant visas; those who enter the country illegally without inspection; and those who are admitted with fake documents. Wasem cited demographer Robert Warren, when he was with the Immigration and Naturalization Service, who estimated illegal immigrant population has grown from 3.4 million in 1992 to five million in 1996, and to 11.1 million in 2001. Referring to research conducted by Jeffrey Passel, Wasem indicated that the largest share of the illegal immigrant population, about 4.4 million, has been in the U.S. for less than five years.

Michael Hoefler, Director, Office of Immigration Statistics at the US Department of Homeland Security, who also testified, put the number of illegal immigrants currently in the U.S. at 12 million, with about 57 percent coming from Mexico, and nearly half residing in California, Texas or Florida.

Rep. Dana Rohrabacher (R-CA), a witness at this hearing, stated that the United States has more illegal immigrants than all other countries combined. He put the number of illegal immigrants at somewhere between 15-20 million. He argued that "if we give illegals hope that they will receive amnesty and benefits it will turbo-charge a flood of illegals into our country." He argued against the proposal for blanket amnesty saying that "being irrationally benevolent to illegals is a crime against our own people." He mentioned evidence that illegal immigrants are threatening our educational system, breaking our strained judicial system, and will devastate our social security system, especially in places like California.

Ronald Bird, Chief Economist Office of the Assistant Secretary for Policy Department of Labor, testified that 28 percent of the foreign-born labor force that is 25 years old or older don't have a high school diploma compared with about six percent of the native-born labor force. Representative Lamar Smith (R-TX), Ranking Member of the Judiciary Committee remarked that every immigrant that does not have a high school diploma is contributing to the destabilization of social security.

Rep. Rohrabacher echoed Smith's sentiments stating that "illegal immigrants have had a devastating effect on the social security system." He stated that more than half of illegal immigrants are paid cash under the table, and therefore, neither they nor their employers, contribute to the already overburdened system. He also argued that because illegal immigrants bring down wages, the result of these depressed wages is that employees and employers pay less into social security. Jeffrey Passel's research, however, suggests these arguments affect only a small part of the labor force. Passel estimates that illegal immigrants in March 2005 accounted for about 4.9 percent or about 7.2 million workers out of a labor force of 148 million.

Testifying on the other side of this contentious debate was Rep. Joseph Crowley (D-NY). Crowley testified that immigration reform is vital to our country's future success. In direct opposition to Rohrabacher's statements, he stated that "immigrants are not a drain on taxpayers or the economy." He also stressed that their involvement in the labor force is "essential to our nation's growth and prosperity." Crowley gave as evidence the fact that a number of illegal immigrants, in the hopes of becoming legal residents, do pay their taxes and contribute to the social security system, and that an unprecedented number filed tax returns last year in order to show they are good citizens.

Rohrabacher countered that by allowing those who have worked illegally in the U.S. to participate in the social security system would be perpetuating a fraud. He questioned how the government would be able to check into claims that illegal immigrants actually paid into social security under a false social security number, and what would prevent them from lying when the stakes are so high?

In closing, Crowley stated that instead of punishing the illegal immigrants we have, we need to address the situation of our porous borders, and do more to enforce the laws we already have. Similarly, programs need to be developed in the countries that contribute the most to our illegal immigration problem to help them increase their prosperity and economic opportunities that would allow potential immigrants to remain in their country of origin.

As often happens in these controversial debates, data and research get lost in the emotional pitches made on both sides of the issue.

## NIH ESTABLISHES WORKING GROUPS TO EXAMINE PEER REVIEW

On June 8, National Institutes of Health (NIH) director Elias Zerhouni announced the formation of two working groups to examine the NIH peer review process with the ultimate goal of maximizing its effectiveness. The working groups, internal and external, will seek input from the scientific community, including investigators, scientific societies, grantee institutions, voluntary health organization, and from within the NIH. The groups are tasked to study the context, criteria, and culture of peer review to make sure that the most talented individuals and reviewers are engaged in the process.

“Peer review is such a fundamental and critical part of the research process, that it requires our constant vigilance,” said Zerhouni. “With the increasing breadth and complexity of science, along with the increased number of research grant applications, we need to take a comprehensive look at our review process, and make the necessary changes to strengthen it for applicants and reviewers alike.” The NIH director emphasized that while the agency’s peer review system is “outstanding and emulated throughout the world” he wants to make it “even better.” Zerhouni also stressed that the agency must “continue to adapt to rapidly changing fields of science and ever-growing public health challenges.” It must also continue to draw on the most talented reviewers and fund the most promising research, he maintained.

Results from the working groups will be presented to the full Advisory Committee to the Director (ACD) in December 2007. The internal NIH steering committee working group will also present its findings to the NIH Director’s Steering Committee in December 2007 (see Update, [July 28, 2003](#)). Both working groups will meet in January 2008 to develop a set of integrated recommendations for next steps. Members of the ACD Working Groups on Peer Review include:

### External ACD Working Group on Peer Review

Keith Yamamoto	University of California, San Francisco (co-chair)
Lawrence Tabak	National Institute of Dental and Craniofacial Research, NIH (co-chair)
Bruce Alberts	University of California, San Francisco
Mary Beckerle	University of Utah
David Botstein	Princeton University
Helen Hobbs	University of Texas-Southwestern, Howard Hughes Medical Institute
Erich D. Jarvis	Duke University
Alan Leshner	American Association for the Advancement of Science
Philippa Marrack	National Jewish Medical and Research Center, University of Colorado, Denver
Marjorie Maj	University of Hawaii
Edward N. Pugh	University of Pennsylvania
Tadataka Yamada	Bill and Melinda Gates Foundation
Norka Ruiz Bravo	Office of Extramural Research, NIH, ex officio

### Internal Steering Committee Working Group on Peer Review

Jeremy Berg	National Institute of General Medical Sciences, co-chair
Lawrence Tabak	National Institute of Dental and Craniofacial Research (co-chair)
Story Landis	National Institute of Neurological Disorders and Stroke
Marvin Kalt	National Institute of Allergy and Infectious Diseases
Roderic Pettigrew	National Institute of Bioimaging and Bioengineering
Norka Ruiz Bravo	Office of Extramural Research

Antonio Scarpa	Center for Scientific Review
Lana Skirboll	Office of Science Policy
Brent Stantfield	National Institute of Diabetes and Digestive and Kidney Diseases
Jane Steinberg	National Institute of Mental Health
Betty Tai	National Institute on Drug Abuse
John Bartrum	Office of Budget, ex officio
Jack Jones	Acting NIH Chief Information Technology Officer, ex officio
Catherin Maniz	Office of General Counsel, NIH, ex officio
Jennifer Spaeth	Office of Federal Advisory Committee Policy, ex officio

## BEHAVIORAL AND SOCIAL SCIENCE RESEARCH ON UNDERSTANDING AND REDUCING HEALTH DISPARITIES: APPLICATIONS WANTED

The National Institutes of Health (NIH) Office of Behavioral and Social Sciences Research (OBSSR), along with 19 NIH institutes and centers (ICs) and the Office of Public Health Research at the Centers for Disease Control and Prevention (CDC) are seeking research proposals designed to encourage behavioral and social science research on the causes and solutions to health and disabilities disparities in the U.S. population and to develop and test more effective interventions for reducing and eventually eliminating health disparities.

The research opportunities identified in the announcement (PAR-07-379) are the result of discussions between the extramural research community and the NIH Behavioral and Social Sciences Research Coordinating Committee as well as the [NIH Conference on Understanding and Reducing Disparities in Health: Behavioral and Social Sciences Research Contributions](#). The announcement highlights important areas for investigation that may not be included in the health disparities strategic plans of individual NIH ICs.

The program announcement recognizes that health disparities between, on one hand, racial/ethnic populations, lower socioeconomic classes, and rural residents and, on the other hand, the overall U.S. population are major public health concerns. The announcement places emphasis on research in and among three broad areas of action: 1) public policy, 2) health care, and 3) disease/disability prevention. It gives particular attention to reducing "health gaps" among groups. The goal is to move beyond documenting the existence of health and disability disparities to addressing causes and solutions. Accordingly, the announcement emphasizes 1) basic research on the behavioral and social - acting through biological - pathways that give rise to disparities in health and 2) applied or translational research on the development, testing, and delivery of interventions to reduce disparities. It encourages a multi-level analytic framework (i.e., ranging from individuals to societies) investigating public health issues and their interactions (e.g., multiple morbidities rather than single illnesses) as well as attention to risk factors or causal processes common to various health conditions (e.g., smoking, diet, exercise, and access to health care).

Public policy may be defined as the means employed by governments and other institutions to influence the function and well-being of individuals groups, communities and society as a whole. Advancing knowledge about the potential for reducing health disparities through policy mechanisms requires a broad set of research studies, including both basic and intervention research. It is emphasized that interdisciplinary efforts are needed to bridge the many kinds of economic, social, behavioral, and biological processes involved in translating public policy into public health. Examples include research on:

- The interacting and cumulative effects of health disparities of policies formulated at a variety of levels - national, state, local, and nongovernmental.
- The behavioral and social mechanisms and processes linking policy to health disparities, including the role of social, cultural, and economic factors in mediating impacts and producing variations in policy implementation that affect outcomes.
- Knowledge transfer in the context of policy formation and implementation. Incorporating scientific knowledge with other kinds of information in the community, economic, bureaucratic, and legal processes that leads to the development of policies to affect health disparities.

- Cost-effectiveness of different policy strategies for addressing health disparities.
- Development of research designs and methodologies for studying policy effects on health disparities, including experimental, comparative, and other observational methods.

Health-care is defined as the timely delivery of care and/or medical services by general or specialty providers to persons in need for the purpose of diagnosis, assessment, or treatment in order to improve or protect health status. Differences in the quantity and quality of health care targeted to and received by members of population groups are critical to understanding the disparities in health. The announcement notes that increased conceptual and empirical efforts are needed to identify and understand the processes leading to differentials in health care and to develop intervention strategies. It is emphasized that explanatory analyses of the origins of differential rates or evidence-based interventions to improve rates are the announcement's focus.

Finally, the announcement explains that prevention research encompasses investigations designed to yield results directly applicable to identifying and assessing risk, and to developing interventions for preventing or ameliorating high-risk behaviors, the occurrence of disease/disorder/injury or progression of detectable but asymptomatic disease. Prevention research also includes research studies to develop and evaluate disease/disability prevention and health promotion recommendations and public health programs. Included is research on:

- Identification of modifiable risk and protective factors for diseases/disorders/injuries that may differ across populations.
- Development of population-appropriate methods, drawing upon behavioral and social science findings, for screening and identification of markers for those at risk for onset or progression of asymptomatic diseases/disorders, or at risk for adverse high-risk behaviors/injuries.
- Using behavioral and social science theory and findings to develop and evaluate individual- or group-level interventions to promote health of individuals or populations without recognized signs or symptoms of the target condition.
- Effectiveness studies that explicate behavioral and social factors related to the organization, management, financing, and adoption of prevention services and practices.

To achieve the twin goals of a more comprehensive understanding of the causes of health disparities and to design and implement effective interventions to reduce and ultimately eliminate health disparities, the announcement encourages the application of several research perspectives and themes, including: interdisciplinary collaborations, levels of analyses, systems science methodologies, life-course perspective, community-based participatory research, prejudice and discrimination, and social context.

Researchers are strongly encouraged to review the general research interests of the participating organizations and the examples of topics of interest specific to health/disabilities disparities posted at [http://obssr.od.nih.gov/Content/Health\\_DisparitiesPAR\\_R01.htm](http://obssr.od.nih.gov/Content/Health_DisparitiesPAR_R01.htm).

Participating ICs include: Cancer; Center for Complementary and Alternative Medicine; Eye; Heart, Lung, and Blood; Arthritis and Musculoskeletal and Skin Diseases; Allergy and Infectious Diseases; Child Health and Human Development; Dental and Craniofacial; Diabetes and Digestive and Kidney Diseases; Environmental Health Sciences; General Medical Sciences; Mental Health; Neurological Disorders and Stroke; Nursing, Aging; Alcohol Abuse and Alcoholism; Deafness and Communication Disorders; Drug Abuse; and the Library of Medicine. For more information see: <http://grants.nih.gov/grants/guide/pa-files/PAR-07-379.html>

## RESEARCH ON INTERVENTIONS THAT PROMOTE RESEARCH CAREERS: SOCIAL AND BEHAVIORAL SCIENTISTS WANTED

The National Institute of General Medical Sciences (NIGMS) is seeking social and behavioral scientists to support research that will test assumptions regarding existing or potential interventions that are intended to increase the preparedness for careers in biomedical and behavioral research, "with a particular interest in those interventions specifically designed to increase the number of underrepresented minority students entering careers in biomedical and behavioral research." The proposed research, however, need not be restricted to underrepresented minority students. **Applications are due October 22, 2007.**

The request for applications (RFA) [RFA-GM-08-005](#) is recognition by the National Institutes of Health (NIH) that there is a significant under-representation of minority scientists engaged in biomedical and behavioral research. To redress this disparity a number of programs have been instituted over the past 30 years. The programs, according to the RFA, have supported three main types of objectives: 1) increasing the participant pool generally by stimulating students' interest at multiple stages, starting as early as middle school; 2) retaining the participant pool via remediation, support services such as tutoring and financial aid, bridging programs, and activities designed to motivate; and 3) strengthening the participant pool via acquisition of knowledge, academic enrichment and development of skills deemed important for success as a scientists.

The RFA notes that while these objectives and interventions are generally held to be necessary and sufficient, the specifics of their implementations are based on implicit assumptions, such as: 1) when students are provided the opportunity to engage in state-of-the-art biomedical and behavioral research, with appropriate facilities, support and mentorship, their appetite will be whetted to enter careers in such research; and 2) once focused, they will show improvement in academic and other skills need to successfully pursue a research career in these fields. It is acknowledged, that to date, the assumptions underlying these interventions have generally not been systematically analyzed. Neither have the interventions been subjected to rigorous research.

The funding opportunity is designed to support research that will test explicitly identified assumptions and hypotheses that undergird existing or potential interventions intended to increase interest, motivation and preparedness for careers in biomedical and behavioral research, with a particular interest in those interventions specifically designed to increase the number of underrepresented minority students' careers in biomedical and behavioral research.

Relevant questions include but are not limited to:

- Are some characteristics of a student (e.g., skills, preparation, and knowledge) more determinative in career choice?
- Are some characteristics more subject to intervention?
- Can an optimum window for intervention be identified either by student age or level of maturity?
- Can behavior pattern for critical for a successful biomedical/behavioral research career be taught effectively?
- Does the choice of a research career lead to an increased academic focus and a corresponding increase in performance?
- Can the influence of mentors or other role models be measured, linked to outcome and modified?
- Can specific forms of teaching, styles of pedagogy and mentoring be identified that lead to the pattern of student engagement that leads to a biomedical/behavioral research career?
- Do research experiences (including collaborations at majority institutions) positively affect career choice; and what are the principle components?
- With respect to the decision to enter (or remain) in a research career, can the influence of peers, family, community and economics be distinguished, measured, linked to outcome and modified?

The RFA encourages collaboration among natural, behavioral and social scientists, and other appropriate experts, as needed. A desirable outcome of the proposed research would be the identification of new principles that would inform practice. The RFA, however, is not designed to support evaluation of existing programs. It will, on the other hand, support individuals and possibly multi-site multidisciplinary research grants. To foster rigor, validity,

generalizability, and integration of these elements, a collaborative effort among researchers, program administrators, educators, psychologists, sociologists, biostatisticians, and/or economists, etc., as appropriate, is encouraged.

NIGMS' Division on Minority Opportunities in Research sponsored through the National Academies' a two-day workshop on "Understanding Interventions that Encourage Minorities to Pursue Research Careers: Major Questions and Appropriate Methods," on May 3-4, 2007 (see Update, [May 28, 2007](#)).

## CONSORTIUM OF SOCIAL SCIENCE ASSOCIATIONS

# COSSA

Executive Director: Howard J. Silver, Ph.D.  
Deputy Director for Health Policy: Angela L. Sharpe  
Associate Director for Public Affairs: Pamela L. Pressley  
Assistant Director for Government Affairs: La Tosha C. Lewis  
President: Susan Cutter

The Consortium of Social Science Associations (COSSA) is an advocacy organization promoting attention to and federal support for the social and behavioral sciences.

*UPDATE* is published 22 times per year. ISSN 0749-4394. Address all inquiries to COSSA at [newsletters@coffa.org](mailto:newsletters@coffa.org)

---

1522 K Street, NW, Suite 836  
Washington, D.C. 20005  
Phone: (202) 842-3525; Fax: (202) 842-2788

## GOVERNING MEMBERS

American Association for Public Opinion Research  
American Economic Association  
American Educational Research Association  
American Historical Association  
American Political Science Association  
American Psychological Association  
American Society of Criminology  
American Sociological Association  
American Statistical Association

Association of American Geographers  
Association of American Law Schools  
Law and Society Association  
Linguistic Society of America  
Midwest Political Science Association  
National Communication Association  
Rural Sociological Society  
Society for Research in Child Development

## MEMBERSHIP ORGANIZATIONS

American Agricultural Economics Association  
American Association for Agricultural Education  
Association for Asian Studies  
Association for Public Policy Analysis and Management  
Association of Research Libraries  
Council on Social Work Education  
Eastern Sociological Society  
International Communication Association  
Justice Research and Statistics Association  
Midwest Sociological Society  
National Association of Social Workers  
National Council on Family Relations

North American Regional Science Council  
North Central Sociological Association  
Population Association of America  
Social Science History Association  
Society for Research on Adolescence  
Society for the Psychological Study of Social Issues  
Society for the Scientific Study of Sexuality  
Sociologists for Women in Society  
Southern Political Science Association  
Southern Sociological Society  
Southwestern Social Science Association

## COLLEGES AND UNIVERSITIES

Arizona State University  
Brown University  
University of California, Berkeley  
University of California, Davis  
University of California, Irvine  
University of California, Los Angeles  
University of California, San Diego  
University of California, Santa Barbara  
Carnegie-Mellon University  
University of Chicago  
Clark University  
Columbia University  
Cornell University  
Duke University  
George Mason University  
George Washington University  
University of Georgia  
Harvard University  
Howard University  
University of Illinois  
Indiana University  
University of Iowa  
Iowa State University  
Johns Hopkins University  
John Jay College of Criminal Justice, CUNY  
Kansas State University  
University of Kentucky  
University of Maryland  
Massachusetts Institute of Technology  
Maxwell School of Citizenship and Public Affairs, Syracuse

University of Michigan  
Michigan State University  
University of Minnesota  
New York University  
University of North Carolina, Chapel Hill  
North Carolina State University  
Northwestern University  
Ohio State University  
University of Oklahoma  
University of Pennsylvania  
Pennsylvania State University  
Princeton University  
Purdue University  
Rutgers, The State University of New Jersey  
University of South Carolina  
Stanford University  
University of Tennessee  
State University of New York, Stony Brook  
University of Texas, Austin  
Texas A & M University  
Tulane University  
Vanderbilt University  
University of Virginia  
University of Washington  
Washington University in St. Louis  
West Virginia University  
University of Wisconsin, Madison  
University of Wisconsin, Milwaukee  
Yale University

## CENTERS AND INSTITUTES

American Academy of Political and Social Sciences  
American Council of Learned Societies  
American Institutes for Research  
Brookings Institution  
Center for Advanced Study in the Behavioral Sciences  
Cornell Institute for Social and Economic Research  
Institute for Social Research, University of Michigan

Institute for the Advancement of Social Work Research  
Institute for Women's Policy Research  
National Bureau of Economic Research  
National Opinion Research Center  
Population Reference Bureau  
Social Science Research Council