

**NEW YEAR, NEW BEGINNINGS,
NEW FACES**

The 105th Congress opened for business on January 7. Members soon departed for a recess until after the inauguration of President Bill Clinton on January 20. The Congress will begin its real work after the State of the Union address on February 4 and the unveiling of the President's FY 1998 budget proposals on February 6.

With all the elections settled, the Republicans continue to control the House with 227 members. There are 207 Democrats and 1 Independent, who usually votes with the Democrats. In the Senate, the Republicans have 55 members and the Democrats 45. Opening day's major business day was the reelection of Rep. Newt Gingrich (R-GA) as Speaker. In a dramatic personal roll call, Gingrich gained reelection by a vote of 216-205 with four voting for other candidates, six voting present, and three missing the vote. The ultimate outcome for Gingrich awaits presentation of the independent counsel's report, the House Ethics Committee's recommendation for punishment, and the vote by the full House.

The House also passed a rules package that includes an attempt to provide members with "truth in testimony." This provision would require witnesses before House committees to include a "disclosure of the amount and source (by agency or program) of any Federal grant (or subgrant thereof) or contract (or subcontract thereof) received during the current fiscal year or either of the two previous fiscal years by the witness or by an entity represented by the witness." An explanatory note suggests that such information should be given if it "is relevant to the subject matter of, and the witness' representational capacity at that hearing." The rule only applies to testimony given in person, not submitted in writing. The avowed purpose "is to give committee members, the press and the public a more detailed context" of the witness' presentation. At the moment, it is unclear as to how broadly the rule will be interpreted. Will anybody representing a university before an appropriations committee have to list all the grants received by its faculty from the agency it is testifying about?

The new Senate began without too much fuss, reelecting Sen. Trent Lott (R-MS) as Majority Leader and Sen. Tom Daschle (D-SD) as Minority Leader. Much of the commentary has focused on the loss of the 14 retiring Senators, who were viewed as moderate, conciliatory and bipartisan, compared to the more partisan, ideological, and confrontational nature of the 15 new Senators (the discrepancy is that 1 Senator was defeated for reelection).

The new Congress has completed most of its committee assignments and some committees began the process of organizing their subcommittees. The Senate Labor and Human Resources Committee made the most dramatic changes. Its new Chairman, Sen. James Jeffords (R-VT), is keenly interested in shepherding the reauthorization of the Higher Education Act. Rather than have the process begin in a subcommittee that probably would have been chaired by Sen. Dan Coats (R-IN), Jeffords simply abolished the Education, Arts and Humanities Subcommittee. This brings education, as well as the reauthorization of the embattled National Endowment for the Humanities, under the control of the full committee chairman. In addition, the Subcommittee on Disability was abolished. The Committee established a Subcommittee on Public Health and Safety to be chaired by Sen. William Frist (R-TN) a medical doctor, and a Subcommittee on Employment and Training, chaired by Sen. Mike DeWine (R-OH).

INSIDE UPDATE...

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- Health Assessment Agency Seeks Topics for Investigation
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On the House side, the appropriations committee revealed its subcommittee rosters. Reps. David Price (D-NC), Carrie Meek (D-FL) and Roger Wicker (R-MS) were added to the VA, HUD, Independent Agencies Subcommittee that has jurisdiction over funding for the National Science Foundation. Rep. Tom Latham (R-IA) was added to the Commerce, Justice, State Subcommittee which has jurisdiction over the Census, Office of Justice Programs, and the United States Information Agency.

Administration Changes

On the administration side, the many changes in the Cabinet and White House staff, include a new Chair of the President's Council of Economic Advisers. Janet Yellen, a former professor at the University of California, Berkeley and more recently a governor on the Federal Reserve Board, has been nominated to replace Joe Stiglitz, who has moved over to the World Bank. Laura Tyson has returned to UC, Berkeley, and a key White House economic adviser, Gene Sperling, has replaced her as head of the National Economic Council.

At the White House Office of Science and Technology Policy, Assistant Director for the Social and Behavioral Sciences, Ruby Takanishi, left December 1 to become President of the Foundation for Child Development. More recently, Ernest Moniz, Associate Director for Science, announced that he will be departing at the end of January. At that point, the

four Associate Directors at OSTP, who require Senate confirmation, will all be in an acting capacity. New replacements for the Assistant Directors may come earlier, since they can be appointed by OSTP Director John Gibbons, without the consent of the Senate.

At NSF, Neal Lane continues as Director, a Deputy Director is being sought, with Joe Bordogna in an acting capacity, and Bennett Bertenthal officially became the second Assistant Director for the Social, Behavioral and Economic Science Directorate on January 2. At the Department of Education, Sharon Robinson has vacated the Assistant Secretary for Educational Research and Improvement position after four years of shepherding the rebirth of that agency.

AIDS OFFICE TO FUND BEHAVIORAL RESEARCH ON PREVENTION

William Paul, Director of the National Institutes of Health (NIH) Office of AIDS Research (OAR), has asked the Institutes, Centers and Divisions (ICDs) to identify projects for the FY 1997 Prevention Science Initiative. The Initiative provides \$6 million in funding to jump start AIDS prevention science projects, particularly those that link behavioral and biomedical approaches. The funds will be transferred to the ICDs for work in the following areas identified by the OAR HIV Prevention Science Working Group convened under the auspices of the OAR Advisory Council. The proposals are due February 18, 1997.

1) The impact of new drug therapies on HIV transmission: Noting that it is critical to begin assessing the impact of new therapies on HIV transmission in the U.S., the OAR is seeking proposals that address the ability of individuals to adhere to difficult therapeutic regimens and short- and long-term HIV-related risk and/or protective behaviors among HIV-infected persons and their partners. Included are such questions as the effect of new therapies on high risk behaviors of HIV infected individuals and the impact of media stories about new therapies.

2) Primary/Acute Infection: Recent data have suggested that as many as fifty percent of new HIV infections are attributable to transmission from individuals at the early and acute stage of infection.

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The Consortium of Social Science Associations (COSSA), an advocacy organization for federal support for the social and behavioral sciences, was founded in 1981 and stands alone in Washington in representing the full range of social and behavioral scientists. *Update* is published 22 times per year. Individual subscriptions are available from COSSA for \$65; institutional subscriptions, \$130, overseas mail, \$130. ISSN 0749-4394. Address all inquiries to COSSA, 1522 K Street, NW, Suite 836, Washington, D.C. 20005. Phone: (202) 842-3525, Fax: (202) 842-2788.

As a basis for developing appropriate behavioral and pharmacological interventions for HIV-infected individuals and their partners, it is important to better understand both the behavioral and biomedical factors that contribute to this phenomenon. One area for investigation could be how can we better identify individuals at the earliest stage of infection?

3) Strategies to Prevent Perinatal HIV Transmission:

Basic and Applied Research: It is important to understand the behavioral, social and biomedical factors that contribute to the adoption or lack of adoption of perinatal HIV prevention interventions. Possible areas of scientific investigation include: What is the relationship between HIV prevention and family planning in the lives of women? How do the meanings of childbearing, motherhood, gender, ethnicity, and HIV/AIDS affect women's decision-making about pregnancy in anticipation of HIV prevention interventions?

4) Comprehensive HIV Prevention Strategies for Injection Drug Users: Since the beginning of the AIDS epidemic, basic science research (especially ethnographic research) has illuminated the diversity among the drug using population with respect to both the culture and specific activities that relate to HIV risk. While a number of HIV prevention strategies have been adopted for this diverse population, it is now evident that a comprehensive approach to HIV prevention among drug users at the community level is needed. Moreover, it is necessary to identify prevention approaches that can be assessed on scientific grounds as opposed to political or advocacy positions related to attitudes about drug abuse in general.

5) Bio-Behavioral Issues in Development and Utilization of HIV Prevention Methods under Female Control: As increasing numbers of women are becoming HIV-infected, it is important to develop methods for HIV prevention that are more in their control. At the same time, developing such methods must be approached in the context of women's desires about fertility and family planning. Thus, developing and utilizing female-centered and female-controlled barrier methods for HIV prevention must attend to both biological and behavioral issues simultaneously.

REPORT CALLS FOR GREATER EFFORT TO PREVENT SEXUALLY TRANSMITTED DISEASES

Concluding that an effective national system for the prevention of Sexually Transmitted Diseases (STDs) does not exist and, thus they pose a severe health burden to the U.S., the Institute of Medicine recently released *Hidden Epidemic: Confronting STDs*. The report recommends the development of a national system for STD prevention.

According to the report, STDs are hidden epidemics that have tremendous health and economic consequences for the United States. More than 12 million new cases of STDs, three million of them among teenagers, occur annually. The IOM committee estimates that direct and indirect costs of selected major STDs costs the nation \$10 billion annually; \$17 billion if sexually transmitted HIV infections are included. Women and infants, notes the report, bear a disproportionate burden of the complications associated with STD. Adolescents, who account for one-fourth of all new STD infections each year, are at highest risk for these diseases because they are biologically more susceptible to infection and are more likely than adults to have frequent unprotected sex.

The report encourages public and private sector policy makers at the local, state, and national levels to adopt four major strategies:

1) Overcome Barriers to Adoption of Healthy Sexual Behaviors: These barriers include biological, social, and structural factors and often result from this country's reluctance to openly confront issues regarding sexuality and STDs. To implement this strategy, the report urges the development of an independent, long-term, national campaign to serve as a catalyst for social change toward a new norm of healthy sexual behavior in the U.S. This would include support from the Health Resources and Services Administration, health professional schools and associations, to train educators to increase their comfort working with sexual health issues and to increase their effectiveness in sexual behavior counseling. It also means that the National Institutes of Health and other federal agencies should continue to support research on health behaviors, including sexual behaviors, and their relationship to STDs.

2) Develop Strong Leadership, Strengthen Investment, and Improve Information Systems: The report emphasizes the necessity of a highly visible and strong leadership role from elected officials, and underscores the critical role of the Department of Health and Human Services, especially the Centers for Disease Control and Prevention (CDC). This agency should lead a coordinated national effort to improve the surveillance of STDs and their associated complications and improve the monitoring of STD prevention program effectiveness. Noting, however, that the public sector does not have the resources or organizational reach to fully implement a national system of STD-related services, the report asks the private sector to take more responsibility.

3) Design and Implement Essential STD-related Services in Innovative Ways for Adolescents and Underserved Populations. According to the report, effective prevention programs are usually the result of extensive research and evaluation and continuous quality improvement. Areas of prevention-related research that need emphasis include: determinants of sexual behavior and sustained behavior change; determinants of initiation of sexual intercourse among adolescents; influence of social and other community-related factors; interventions to improve condom use and reduce high-risk behaviors; effectiveness of sexual risk behavior assessment and counseling; biomedical interventions that do not rely primarily on individual behavior such as vaccines; female-controlled prevention methods; cost-effectiveness of interventions; methods for preventing STDs among disenfranchised populations; interventions for preventing STDs among persons of all sexual orientations, and methods to assess prevention program effectiveness.

Two important recommendations for this strategy are: continuing support for both basic and applied research in STD prevention at NIH and CDC; and focusing on beginning interventions before sexual activity is initiated, which may occur before adolescence is reached.

4) Ensure Access To and Quality of Essential Clinical Services for STDs.

Copies of *The Hidden Epidemic* can be ordered by calling the National Academy Press at 1-800-624-6242.

HEALTH ASSESSMENT AGENCY SEEKS TOPICS FOR INVESTIGATION

The Agency for Health Care Policy and Research (AHCPR) invites nominations of topics for evidence reports on the prevention, diagnosis, treatment, and management of common diseases and clinical conditions, and where appropriate, the use of alternative/complementary therapies, and for technology assessments of specific medical procedures or health care technologies.

Criticized by Congress for developing clinical practice guidelines sometimes at odds with judgments of professional societies, AHCPR will no longer be in that business. It will now "serve as a science partner with private-sector and other public organizations in their efforts to improve the quality, effectiveness and appropriateness of health care delivery in the U.S."

In an effort to narrow the gap between what is known and what is done in health care, AHCPR will support Evidence-based Practice Centers (EPC) to provide a strong scientific foundation for private and public organizations to use in their own efforts to improve clinical practice. The EPCs will conduct literature reviews and assess and synthesize scientific evidence to produce evidence reports and technology assessments. These will provide systems of care, provider societies, health plans, public and private purchasers, States and others, scientifically supported information to develop and implement their own practice guidelines, clinical pathways, review criteria, performance measures and other tools to improve the quality of care in their own settings and populations. The reports and assessments can inform health care decisions, such as coverage policies, based on the effectiveness or appropriateness of specific services, procedures and technologies.

The topics nominated should focus on specific aspects of prevention, diagnosis, treatment and/or management of a particular condition, or on an individual treatment, or technology. Nominators should carefully define the potential topics, so that within six to 12 months databases can be searched, evidence reviewed, supplemental analyses performed, and final reports produced. Some of the criteria for selection include: high incidence of prevalence in the general populations or in major subpopulations;

significance for the needs of Medicare and Medicaid; high costs associated with the condition, procedure or technology; controversy or uncertainty about the effectiveness of available strategies or technologies; and the potential to improve patient or provider decision making,

Nomination of topics for these reports and assessments should be submitted by February 21, 1997 to Dr. Douglas B. Kammerow, Director of the Office of the Forum for Quality and Effectiveness in Health Care, AHCPR, 6000 Executive Boulevard, Willco Building, Suite 310, Rockville, MD 20852 or as an ASC II file to epctopic@ahcpr.gov. Selected topics will be announced from time to time in the Federal Register. Additional information may be obtained from Margaret Coopey 301/594-4015 or mcoopey@po6.ahcpr.gov. To receive a copy of the contract solicitation for the EPCs see AHCPR's Web Site: www.ahcpr.gov/news/.

CONFERENCE EXPLORES SELF REPORT DATA AS TOOL FOR SCIENCE

What we remember -- and what we choose to tell others -- is a fragile underpinning of data used by a wide range of scientists and clinicians. To discuss obtaining accurate information about symptoms, behaviors and experiences the NIH Office of Behavioral and Social Sciences Research (OBSSR) convened a conference in late 1996 to present recent findings about using self reported information. The two-day event drew such a large turnout that it was broadcast to other sites at NIH to accommodate the level of interest.

In his welcoming remarks, OBSSR Director Norman Anderson said self report data is important to the entire domain of health research, including basic clinical and biomedical research. SUNY-Stony Brook's Arthur A. Stone, the conference chair, said it is clear that the limitation of self report data and the new methods for improving it need to be appreciated by clinicians and scientists. He said no scientific discipline is immune from these issues.

The conference presented an opportunity to address not just methodology, but fundamental issues about why and when we can expect to use such data,

said Wendy Baldwin, Deputy Director of the NIH Office Extramural Research. She emphasized that participants must not minimize the difficulties associated with self report data, or the efforts of social and behavioral scientists to find independent measures.

Cognitive Processes

Norman Bradburn of the National Opinion Research Center, a leading researcher in the multi-disciplinary area of cognitive aspects of survey methodology, noted that often self report requires respondents to remember, not only when a certain event happened, but also to place it in real time. Our memories are usually bad for dates and time. These are not good retrieval cues for events, he said. He added that the dating of past events is largely reconstructed and most dates have to be estimated with other memories. "Time," he continued, "is related to the accuracy of the recall -- the longer ago an event happened the more difficulty we have recalling it." Noting further that accuracy declines with time and the variation in reports around the true date increases with time, Bradburn said that not only do we make more mistakes about events in the past, but we do so in systematic ways. He added that this increase in variability has not been greatly studied.

The Self Report of Sensitive Topics

Christine Bachrach, of the National Institute of Child Health and Human Development, said many health behaviors and characteristics that are studied are sensitive in nature -- drug and alcohol abuse, sexually transmitted diseases, spouse abuse. These sensitive behaviors present special challenges in collecting self report data. The asking of sensitive questions seems to elicit from some respondents the tendency to present themselves in a socially desirable way, noted Nora Cate Schaeffer, a sociologist at the University of Wisconsin- Madison.

In discussing what are considered by most to be sensitive topics -- the number of sex partners, whether or not a woman has had an abortion, and the use of marijuana -- Schaeffer said there are techniques to reduce errors caused by threatening and sensitive topics. These techniques include varying the modes of asking questions, varying the context of the question and varying the structure or working of the questions.

Charles Turner, Research Triangle Institute, pointed out that computer assisted telephone surveys generated much higher frequency reports of these behaviors than human interviewers elicited. Schaeffer noted, however, that the use of a self-administered instrument does not improve reporting in every experiment. However, this method seems to perform more consistently than the other experimental manipulations that have been attempted when discussing sensitive behavior. Moreover, she said the effect is often the greatest for reports about recent behavior which are arguably more threatening. She emphasized that it is not obvious how the mode of interview or other such manipulations affect cognitive processes, which we can think of as intervening between the interview situation and the answer that it actually produces. Emphasizing that recent research has made considerable progress in reducing such errors, Schaeffer said that further improvements are likely to require more specific theorizing about the stages of the process at which these errors arise and the role of automatic processing and conscious decision making in that processing.

Alternative Techniques to Self Report

Douglas S. Massey of the University of Pennsylvania discussed an alternative to using self report data. He described the ethno-survey, a multi-method data gathering technique that combines ethnographic and survey methods. It is a technique that allows the researcher to collect data across multiple levels simultaneously -- gathering data from the individual, the household, the household head, and the community, he said. Massey stated that the interview schedule's key feature is the gathering of individual life histories. Massey, as did a number of the presenters, pointed out that people have a difficult time recalling specific dates and events, "but if you lead them through their lives they can reconstruct their lives and tie things together in a reasonably accurate fashion." Noting that qualitative and quantitative procedures of the ethno-survey complement one another, Massey said the ethno-survey allows one method's weaknesses to become the other method's strengths. This will yield a body of data with greater reliability and more internal validity than is possible to achieve using either method alone.

Cultural Variation of Experience

Spero Manson, Department of Psychiatry University of Colorado School of Medicine, presented 20 years of his research that addressed the question: How does culture structure the human experience and the ways we have for sharing that experience and making ourselves understood? In the context of psychopathology, Manson said the question is how culture organizes the understanding of the nature of such experiences, how it affects interpretation of such experiences, and ultimately the manner in which we disclose it to others.

One way to understand this phenomenon, Manson said, is eloquently stated by Arthur Kleinman in the notion of explanatory models, where he points out that each of us professionally, as well as the lay public, hold modes for making sense out of a variety of experiences. According to Manson, researchers now have a variety of techniques for identifying, eliciting and incorporating cultural material into diagnostic assessment efforts. These techniques hold potentially dramatic implications for the kinds of conclusions we are likely to draw, the reliability and validity of those results, and the confidence that we place in them, he stated.

Remembering What Never Happened

According to Elizabeth Loftus of the University of Washington, there is a stronger interest in under reporting than over reporting. Saying she is concerned about "people reporting events that never occurred," Loftus described several experiments where people have been exposed to misinformation about experiences they have had in the past. In exposing individuals to misinformation, you depress their memory performance, said Loftus. She said it is entirely possible to create entirely false reports about events. Conversely, Linda Williams of the Family Research Laboratory at Wellesley College, noted that people can forget some traumatic events that happened in childhood.

Ethical Issues in the Collection of Self Report

"The administration of self report surveys may be more ethical than the use of unobtrusive measures or research designs that rely on deception," said Donald N. Bersoff of the Villanova University School of Law,

and a former member of the COSSA Board of Directors. He said that beyond the scientific issues related to self report, there are ethical issues as well, including concerns about informed consent. Self report measures are usually more straightforward, he added, suggesting this occurred because these measures require the respondent's informed consent. Bersoff emphasized that, by definition, studies relying on unobtrusive data gathering or deception lack meaningful consent.

While noting the lack of publications on the ethical issues confronting those gathering data in a research context, Bersoff credited NIH for putting ethical issues on the agenda. Unlike the methodological problems that "dominated" the conference, very few researchers consider the ethical implications of their work, said Bersoff. Self report research has a strong ethical component requiring complex decision making. Those issues should not remain in the closet, and "not in our files unreported and undiscussed," he argued.

UNESCO TO PRODUCE WORLD SOCIAL SCIENCE REPORT

The United Nations Educational, Scientific and Cultural Organization (UNESCO), from which the United States withdrew in 1984, maintains a social and human sciences division. The division's major project for the past few years has been the Management of Social Transformations (MOST) program. MOST supports international social science research that is interdisciplinary and usually comparative between countries. It has published four policy papers on: new development strategies, social exclusion and social cohesion, the cybernetics of global change, and multiculturalism.

The division has now announced it will produce a *World Social Science Report*. UNESCO hopes to publish such a document by 1999, in time for the scheduled World Science Conference, and then to update the report every two years. This new report follows the earlier UNESCO publication of a *World Science Report* and a *World Education Report*.

Ali Kazancigil, Director of Social Research Policy of the Social and Humanities Division, described plans for the report at the recent meeting of the International Social Science Council (ISSC) in Paris. He said that the social science report will describe, quantitatively

as far as possible, the production, consumption, and transmission of the social sciences in the countries of the world. It will review the state of the various social sciences. It will also focus on social science applications to practical problems in the world today. Finally, the report will consider the place of the social sciences in the worlds of knowledge and action.

To produce the Report, UNESCO will hold consultative meetings to conceptualize further the overall articulation of the document and to secure the participation of world class scholars. UNESCO will also establish a scientific editorial committee. This committee will advise UNESCO on precise themes and authors for the sections and chapters, on the basis of which texts will be commissioned. UNESCO will then edit and publish these texts along with the quantitative data collected.

EDITOR'S NOTE

This is the first issue of *Update* for 1997. *Update*, published biweekly, is written and produced by the COSSA staff and covers federal policies and debates relevant to social and behavioral scientists.

Our focus is on activities in Congress and the Executive Branch affecting the social and behavioral science portfolios of the National Science Foundation, the National Institutes of Health, the Departments of Agriculture, Commerce, Education, Justice, and Labor, and many other federal agencies.

We welcome your questions and comments, as well as ideas for future issues. Our address is 1522 K Street, NW, Suite 836, Washington, D.C. 20005. Phone: (202) 842-3525, Fax: (202) 842-2788. COSSA Executive Director Howard J. Silver can also be reached at hjsilver@tmn.com. The editor of *Update*, Michael Buckley, is COSSA's Associate Director for Public Affairs and can be reached at mbuckley@tmn.com.

Also, a topical index for the 1996 issues of *Update* is available, at no cost, by contacting COSSA.

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