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CONSORTIUM OF SOCIAL SCIENCE ASSOCIATIONS

# COSSA WASHINGTON UPDATE

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This Week . . .

Volume II, Number 1  
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A Rose By Any Other Name...  
Former Representative Heckler To Head HHS  
NSF Settles FY 1983 Budget  
Congress Acts To Protect Artifacts  
NEH Gets A Regular Appropriation  
Missing: Evaluation of Health Care Technologies

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## A ROSE BY ANY OTHER NAME...

With this issue, the COSSA newsletter takes on a new format and a new name. The new format reflects the fact that the newsletter is more than simply a periodic memo from COSSA to "Members, Affiliates, Contributors, and Friends." It is, rather, a regular communication from Washington and will be issued on a biweekly basis beginning with this issue. When it is necessary to send readers information more quickly than the next scheduled newsletter, special memos will be sent.

The new name, COSSA Washington Update, provides a more accurate description of what the newsletter has become. Originally intended to be a vehicle for communicating information about congressional actions on research budgets, the COSSA newsletter gradually expanded its scope to encompass information of interest to the social and behavioral science research community about executive branch actions, federal agencies, and the state of the social sciences in other countries.

The new format and new name should not suggest that the COSSA newsletter has become more formal or rigid. Indeed, we continue to welcome suggestions from readers on the content, scope, and outlook of the COSSA Washington Update.

Enclosed with this first issue of the COSSA Washington Update is a brief description of the Consortium of Social Science Associations and a list of its Members, Affiliates, and Contributors.

FORMER REPRESENTATIVE HECKLER TO HEAD HHS

On January 12, President Reagan nominated former Representative Margaret Heckler to replace the outgoing Secretary of the Department of Health and Human Services (HHS), Richard Schweiker. Heckler was defeated in her bid for reelection to the House of Representatives last November by Barney Frank. Both candidates in that election were incumbent Representatives who were vying for the same congressional seat because of redistricting in Massachusetts.

As the ranking Minority member of the House Subcommittee on Science, Research and Technology, Heckler had long been a strong supporter of research. During the debate on the reauthorization of the National Science Foundation (NSF) last May, Heckler unequivocally endorsed NSF programs in the social and behavioral sciences:

...we must continue to support research in the social and behavioral sciences, such as research on education, learning, and cognitive development. Moreover, social and behavioral science research, in such areas as human factors in productivity, the economic implications of changing population patterns, the location of public service and commercial facilities and survey research all contribute to an improved U.S. economic productivity and competitiveness and also improves the confidence and capability of our industrial and business base in the United States (Congressional Record, May 19, 1982).

As Secretary of HHS, Heckler will preside over major federal research agencies such as the National Institutes of Health (NIH) and the Alcohol, Drug Abuse and Mental Health Administration (ADAMHA) (which includes the National Institute of Mental Health (NIMH), the National Institute of Drug Abuse (NIDA) and the National Institute on Alcohol Abuse and Alcoholism (NIAAA), as well as many other smaller, mission-oriented research programs.

NSF SETTLES FY 1983 BUDGET

Officials at the National Science Foundation (NSF) have announced the final shape of the FY 1983 budget for NSF. The original administration budget request for the social and behavioral science programs has been increased by \$3 million. Of this amount, \$1.9 million will go to the Division of Social and Economic Sciences and \$1.1 million will go to the Division of Behavioral and Neural Sciences.

Although the \$3 million is welcome, it is a smaller increase than COSSA had expected, given the strong support in all the congressional authorizing and appropriating committees for increasing social and behavioral science research budgets. A major stumbling block to a larger increase was the fact that no authorization legislation for NSF was passed during the last

NSF SETTLES FY 1983 BUDGET (cont.)

session of the 97th Congress. Although the House of Representatives passed an authorization that increased the budgets of the social and behavioral science programs by \$17.6 million over the requested level, no Senate authorization was passed.

Two Senate committees were contending for authorization authority over the Foundation. That both of these committees voted to add \$5 million to the NSF request for the social and behavioral science programs was an important show of support in the Republican-dominated Senate, but it was not sufficient to secure a final authorization. The jurisdictional dispute between the committees, in fact, prevented the Senate authorization from reaching the floor and, as a result, Congress did not pass authorizing legislation for the Foundation. Under these circumstances, the House authorization was not binding and the NSF was free to determine for itself how much to increase the social and behavioral science research budgets.

The Senate jurisdictional dispute resulted from an attempt by the Committee on Commerce, Science, and Transportation to obtain NSF authorizing authority from the Committee on Labor and Human Resources. However, the leader of the effort, Senate Harrison Schmitt (R-NM), Chairman of the Science, Technology, and Space Subcommittee of the Commerce Committee, was not reelected in the November elections, and the jurisdictional dispute may be resolved in the next session of the Congress.

At this point, the most concrete news about the FY 1984 budget for NSF comes from a British publication, Nature. In its issue of December 23-30, 1982, Nature announced that the NSF would receive an 18 percent increase in its budget in FY 1984, possibly giving it the largest budget increase of any federal agency. For additional information, see Attachment 1.

CONGRESS ACTS TO PROTECT ARTIFACTS

In the final days of the lame-duck session in December, Congress passed the Convention on Cultural Property Implementation Act. It went to the President as part of the Miscellaneous Tariff Bill. This Act, which has long been supported by archaeologists, is expected to stem the illicit trade in antiquities and ethnological artifacts.

The legislation provides sanctions against importing illicitly exported artifacts. These sanctions could be imposed by the President to prevent the pillage of archaeological or ethnological sites. The legislation had been supported by every administration since that of Richard Nixon and was widely promoted within the scientific and museum communities.

NEH GETS A REGULAR APPROPRIATION

On December 30th, President Reagan signed the FY 1983 Interior Appropriation Bill, which provides \$130.1 million in FY 1983 for the National Endowment for the Humanities (NEH).

Although the Reagan administration had requested that the NEH budget be reduced from its FY 1982 level of \$130.6 million to \$96 million, the Congress reduced it by only \$500,000. This cut, which was in the NEH budget for administration costs, was approved because the NEH had returned \$800,000 in unused administration funds to the Treasury last year. Representative Sidney Yates (D-IL), Chairman of the House appropriations subcommittee responsible for funding NEH, is credited with maintaining funding for NEH. (See Attachment 2.)

MISSING: EVALUATION OF HEALTH CARE TECHNOLOGIES

On September 30, 1982, the National Center for Health Care Technology (NCHCT) officially went out of business, four years after its creation. The Center was established to conduct and support studies of medical technologies used in the diagnosis, prevention, and treatment of disease and in health promotion. NCHCT attempted to evaluate health care technologies on the basis not only of their safety and efficacy, but also of their economic, ethical, social and legal implications. For example, the Center convened conferences on the economic, ethical and social issues surrounding coronary artery bypass surgery, subjects overlooked in the initial rush to develop successful coronary bypass surgical techniques.

NCHCT was unusual in the biomedical research field in its emphasis on the social and economic effects of health care practices. The American Medical Association and the Health Industry Manufacturers Association, however, objected to NCHCT's "interference" in medical decisions and successfully lobbied for the Center's elimination. As a result, questions about the effectiveness and implications of emerging medical procedures will remain unanswered. (See Attachment 3.)

## Protecting basic research

*The US administration plans a generous science budget. It must not look for quick returns.*

Curious things are happening at the National Science Foundation, where the ebullient Dr Edward Knapp took over as director a few weeks ago (see *Nature* 11 November, p.100). The good news, or at least the advance reports thereof, is that the federal government's budget for the year beginning next October, to be published when the new Congress has convened in January, will ask the Congress to approve a substantial increase in the foundation's budget by about 18 per cent, well above the rate of inflation (now down to 6 per cent). This development seems to be but a part of the Administration's determination that whatever happens in the next year or two ahead, basic research will not be starved of funds. The principle seems to be that while systematically ridding itself of obligations to carry through further technological demonstration projects — Clinch River is an exception — on the grounds that industry itself should pay for potentially money-making projects, the Administration appears to have acknowledged its own continuing responsibility towards basic research. Other agencies than the foundation, the National Institutes of Health in particular, will now be anxious to find out if the Administration's new-found generosity applies to them.

The other side of the same coin is that the Administration is looking for results — prosperity and all that — but results that it cannot yet clearly define. The argument seems to be that if the Administration has been so good as to agree with academic scientists that basic research is ultimately the wellspring of industrial innovation, and has written its cheques accordingly, it is perfectly within its rights to ask that innovations should flow thick and fast once the cheques are in the mail — and preferably before the next election twenty months or so from now. In the circumstances, it is understandable that Dr Knapp should have been advised to get rid of the three assistant directors whom he inherited (see *Nature* 16 December, p.567); the well known phenomenon that new brooms are rendered ineffectual by the tired servants who use them (to mix a mixed-up metaphor) is in this case complicated by the Administration's need to know who will be responsible for what befalls in the years ahead. The changing of the guard at the foundation is, as of now, politic and not political; Dr Knapp, supported strongly by his previous colleague at Los Alamos, Dr George Keyworth (now the President's adviser on science and

technology at the White House), is promising to change the world, perhaps even to break the mould or shift the paradigm; those who will be writing the cheques in the fiscal years ahead want to know who should be blamed if Dr Knapp fails to deliver.

Knapp's prospectus is startling not merely because of the promises it makes on behalf of basic science as the fountain from which innovations spring but because it acknowledges that basic research is educative. Only two years after having offended almost everybody in sight by deleting from the foundation's budget those line-items concerned with the support of science education (in translation, the equivalent of curriculum development in the 1960s mould), the Administration is about to go to Congress saying that the National Science Foundation has a part to play in the education of scientists but this time at a professional level, perhaps by means of partnerships between industry and universities that will be sweetened by modest support from the National Science Foundation. Some of the schemes now being canvassed in Washington are not very different from those tried out in the past decade by the Science and Engineering Council in the United Kingdom. If that is how the budget indeed turns out, the consequence will be that even the next administration (due to be elected in 1984) will not know what to make of Dr Knapp's promises.

What follows is what is called normative or prescriptive advice. Understandably but also rightly, Knapp is impatient that so little (in the way of innovation) has been accomplished by so much expenditure. Among such people, impatience is a virtue. Academic scientists, the foundation's chief pensioners, are almost wilfully indifferent to the needs of industry, their students obstinately persuaded that the academic life is best. A direct attack on these familiar conventions from somebody such as Knapp could help invigorate the system by means of which institutions of higher education train professional scientists. The result, with luck, could be not so much a spate of industrially relevant innovation as a modest cadre of able people. But none of these benefits would show up within what politicians would consider a reasonable time, and certainly not before the next election. More might be accomplished through the National Institutes of Health, which have at least a chance of understanding (not curing) cancer. So Dr Knapp must now keep talking (in public) about other people's opportunities in the hope that he will eventually be recognized as the man who made the National Science Foundation into what it should always have been — a low-budget agency with disproportionately large responsibilities.

# Chicago and the Arts: Merging Constituencies

By IRVIN MOLOTSKY

Special to The New York Times

WASHINGTON, Dec. 27 — Whatever success President Reagan may have enjoyed in persuading Congress to reduce nonmilitary spending, he has consistently failed in his attempts to cut Federal funds for the arts and humanities. To a large extent, this is because of the efforts of a Congressman from Chicago, Sidney R. Yates.

With the Federal deficit listing toward \$200 billion, with unemployment the highest in 42 years and with bankruptcies mounting, Representative Yates, chairman of the House subcommittee that originates appropriations bills for the arts and humanities, keeps putting money for the arts back into appropriations bills.

This has led some of his critics to suggest that he is a legislative Nero fiddling away amid the flames of economic disaster. Of course Mr. Yates, an Illinois Democrat, sees things differently. He prefers to compare himself to another Roman, Horatius, standing at the bridge, defending the Federal role in the arts and humanities.

"Yes, we have big deficits and we have high unemployment, but the difference I have with this Administration is over whether there should be any Federal assistance for the arts at all," he said the other day. "I think the Reagan Administration would be against any Federal funds for the arts."

## 'Economic Contribution' Cited

Mr. Yates charged that the Reagan Administration's Office of Management and Budget "classified the arts as the lowest of the priorities and wanted to cut them in half on the way to ending them entirely." He readily conceded that jobs and citizens' personal security should have the highest priority, but he argued that the arts and humanities also make very important contributions to the life of the country.

"The arts make an economic contribution to the prosperity of the country as well as enhancing the quality of life of the American people," he said. "That's why I think it is important to make a Federal contribution to the arts."

He asserted that it would not be in keeping with the traditions of the nation to remove the subsidies. Besides, he noted, Federal aid to the arts and humanities accounts for only a small fraction of a Federal budget that amounts to nearly three-quarters of a billion dollars.

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Rep. Yates

Mr. Reagan, who is committed to cutting Federal support for the arts while encouraging the private sector to take up the slack, had proposed cutting the latest budget for the National Endowment for the Arts from \$143 million to \$100 million. At Mr. Yates's behest, Congress appropriated \$143 million.

Similarly, the President proposed cutting the National Endowment for the Humanities from \$130 million to \$96 million. Congress appropriated \$130 million.

And so it has gone vote after vote. Following Mr. Yates's lead, Congress has restored funds for the Institute of Museum Services, the Smithsonian Institution, the National Gallery of Art and the Historic Preservation Fund.

The chairman of the Congressional Arts Caucus, Representative Thomas J. Downey, Democrat of Suffolk, has high praise for Mr. Yates. "This is good news, very good news, for the arts and humanities," he said of the restored monies. "These funding levels will insure that artistic activity will continue to grow across America."

Mr. Yates points out that he has supported a wide range of programs, such as those in health, education and science, and that he was a leader in opposing an American supersonic transport. It is Mr. Reagan, he contends, who has but a singular area of interest, the military.

As for the Administration's goal of having the private sector do more while the Federal Government does less, Mr. Yates said, "Even in prosperous times, the private role was not adequate to take care of the needs of the arts and humanities, to keep theaters alive, to keep the dance alive.

Operas and symphonies were strapped." Now, he said, with the economy in its long recession, the Federal role is needed even more.

"Kennedy and Johnson found that the arts were a proper role for the Government," Mr. Yates continued. "Every President, including Republicans, funded the arts on higher levels until the Reagan Administration came along."

## 'One of the Most Liberal'

Unlike some of his ideological kin in Congress these days, Mr. Yates cheerfully accepts being described as a liberal. "That's true," he said. "I am one of the most liberal members of the House." But he says that his liberalism has less to do with his support of the arts and humanities than does his Chicago background.

"Chicago is one of our great cities for museums," he said, noting that his district contains a number of institutions that stand to gain from Federal grants to the arts and humanities. "I attended the University of Chicago, which is known for its humanities programs, and I've always supported the humanities."

Mr. Yates's legislative power comes partly from his persuasiveness and partly from his chairmanship of the Appropriations Subcommittee on the Interior. The chairmanship came about in part as a result of his seniority. Mr. Yates was first elected to Congress in 1948 and will be the seventh-highest ranking member of the House in the 98th Congress; he would have been the third-highest ranking member if he had not skipped the 1962 House contest to run an unsuccessful race for the Senate against Everett McKinley Dirksen.

"Sure, I'm senior," he said. "I would have been more senior if I hadn't run against Dirksen. He had a tremendous following, but I thought I had a chance. Mayor Daley asked me if I wanted to run and, since I wanted to be a Senator, I said yes."

Mr. Yates had to run for re-election last November in a new district that included some suburbs that normally are more Republican than the city of Chicago, and he was targeted for defeat by some conservative groups. But he won with 67 percent of the vote, a big margin even though it was 6 percentage points below his best showing in 1980.

"Those who think the conservatives have taken over are wrong," Mr. Yates said. "There is a big following for liberals."

# Fishing for a Forum on Health Policy

*Congress phases out a federal center while the private sector tries to fill the gap*

The recent medical extravaganza in Salt Lake City, in which an artificial heart was implanted into a patient with serious heart disease, raises a host of questions about medical care, its safety, efficacy, economics, and ethics. It is also a classic example of the way in which advances in technology force difficult political and economic choices. Who is an appropriate candidate for coronary artery bypass surgery? Who should perform the operation? How effective is the new diagnostic tool called nuclear magnetic resonance? Should Medicare cover the cost of liver transplants?

In spite of the importance of such issues, opposition from the American Medical Association (AMA) and manufacturers of medical devices last year killed a federal agency that most agree was doing a useful job in examining the questions. The issues are vexing enough on scientific grounds. But their complexity is compounded by the fact that they pit powerful and competing groups against one another.

In light of this, the federal agency, called the National Center for Health Care Technology, was considered especially valuable because it provided a nonpartisan forum in which all the players in health policy—the federal government, medical societies, private insurers, and the device industry—could hash things out. During the past year, a handful of private organizations have developed programs to fill the gap left by the center's demise. But health care leaders say that none of the programs is satisfactory because each is subject to charges of bias.

The National Center for Health Care Technology was established by Congress in 1978. It was a small agency with a big mission—too big, some say. With a \$4-million budget, the center was charged with reviewing health care including its safety and costs. It was designated to work closely with the Medicare program and private insurers in developing its projects. Its staff had hopes of awarding grants to researchers to conduct clinical trials, but the plan never got off the ground.

The center's most visible achievements were numerous reports that examined the clinical value of certain medical procedures. It reviewed, for example,

the state of the art of coronary artery bypass surgery, set guidelines when dental x-rays should be used, and outlined when cesarean sections should be performed.

But the center also issued reports that were important in terms of cutting health costs. Based on six recommendations by the center, Medicare saved potentially \$100 million to \$200 million a year, according to studies by the University of California at Los Angeles. The agency, for instance, advised Medicare not to cover radial keratotomy, a controversial eye surgery to correct myopia, hyperthermia in cancer treatment, and dialysis for schizophrenias. In a seventh study, the center advised Medicare not to reimburse patients for plasmapheresis to treat rheumatoid arthritis. That recommendation alone would have saved Medicare perhaps \$10 billion a year if coverage had been granted, according to the University of California study.

The private sector found the center evaluations useful too. Lawrence Morris, a senior vice president of Blue Cross-Blue Shield Association in Chicago remarks that the organization found several reviews helpful. Steven Severts, an official at Blue Cross-Blue Shield of New York says that the center, which was directed by a former National Institutes of Health scientist, Seymour Perry, was "highly efficient, ran on a low budget, and was highly respected."

The center generated wide support from groups including the American College of Physicians, the Association of American Medical Colleges, insurance carriers such as Mutual of Omaha, and Representative Henry Waxman (D-Calif.). "It had great potential," says Linda J. White, a health care analyst at the American College of Physicians.

But two groups felt particularly threatened by the agency—the AMA and the Health Industry Manufacturers Association. Both viewed the center as a regulatory agency and they wanted no part of it. Last year, they lobbied successfully to ax the center's budget.

The center's charge included a mandate to examine economic issues in health care. The AMA complained that the subject should be taboo for the center. Cost was a consideration only for the individual physician, AMA argued. It

said the center should not make general statements about appropriate medical care. All in all, the AMA argued, the center was trying to dictate the practice of medicine. Perry rebutted the association's arguments in a special report in the *New England Journal of Medicine*: "How an average practitioner, conscientious and thorough as he or she might be, could be expected to determine the safety and efficacy of such complex technologies as positron emission tomography or percutaneous transluminal coronary angioplasty was never made clear by the AMA."\*

The center was also empowered to name medical procedures or devices that it considered experimental rather than standard medical practice. The Health Industry Manufacturers Association raised a howl, accusing the agency of attempting to stifle innovation.

The center "was an easy target," says Charles Sanders, former chairman of the center's advisory council, who is executive vice president of E. R. Squibb & Sons. Although many groups did not actively oppose the center, neither did they come to its aid on Capitol Hill. "Everyone was trying to protect his own turf," says Sanders.

After the center folded, the Department of Health and Human Services (HHS) maintained a staff to undertake similar responsibilities according to the staff's new director, Harold Margolise. He notes that its budget is nearly the same as the center's at \$3.6 million and that the staff has almost doubled.

But another HHS official in health care policy complains that only a skeleton of the old center remains. The new unit, the Office of Health Technology Assessment, avoids the subject of cost analysis, he says. The unit conducts a review only at the suggestion of Medicare, but not of private insurers or others. The Medicare review program is "limping along," the HHS official said.

To some outside the government, the office seems very obscure and of little consequence. William Dolph of the AMA said that the federal unit "seems extraordinarily confused. I just really don't know what they're doing."

Meanwhile, medical societies, insur-

ers, and the medical device industry have either established or stepped up their own programs. But they have all been subject to charges of bias.

The various plans differ in the type of information they gather. The AMA's new project will take an opinion poll of its members to evaluate a certain procedure or instrument. The AMA staff will review the scientific literature and compare its findings with the poll. As one HHS official says, "It's democratic, but it's not scientific."

At present, the program avoids the subject of cost. But according to one AMA official, that may change. The official says he is not sure how the association will fend off the same charge it leveled at the federal center—that it is dictating medical practice.

The American College of Physicians has set up a project that is more sophisticated than the AMA's. Its reports will be compiled from opinions garnered from various medical specialty organizations and a literature review. Their reports will be peer reviewed by members and non-members of the organization.

Blue Cross-Blue Shield has intensified its review program and is working closely with the American College of Physicians. On the basis of its own study, the company recently announced a major

change in coverage that is expected to generate annual savings of several hundred million dollars. The company stated that respiratory therapy is administered much too often and unnecessarily. Under new policy it will pay for it only in limited circumstances. The Blue Cross position was endorsed by the American College of Physicians, the American College of Surgeons, and the American Academy of Pediatrics.

The Institute of Medicine is also considering the idea of creating a health care panel, but discussions are very preliminary. The thinking is that the institute group would substitute for the federal center as a neutral body. But there is already grumbling from representatives of medical societies and insurance companies that ideas for the formation and specific duties of the panel are too nebulous.

Many policy analysts would like to see a federal center revived. Morris of national Blue Cross-Blue Shield says that it makes sense if only because the federal government is a major buyer of health care through Medicare.

A place is needed where all the groups can sit down and discuss health care issues, said one HHS official. "But there's no place to go right now."

—MARJORIE SUN