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SPECTER AND HARKIN STILL CHAMPION NIH

On April 6, National Institutes of Health (NIH) Director Elias Zerhouni appeared before the Senate Labor, Health and Human Services, and Education Appropriations Subcommittee. The Chair of the Subcommittee, Senator Arlen Specter (R-PA), once again characterized the agency as “the crown jewel of the federal government, and perhaps the only jewel of the federal government.” Observing that the work of the NIH “is a vital matter for America and for the world,” Specter referenced the lead that he and Ranking Member Tom Harkin (D-IA) have taken to increase NIH’s funding. Their amendment to the Senate budget resolution, which passed in the chamber, would provide an additional \$1 billion for the agency. Specter also expressed his concerns regarding the NIH’s “new standards of ethics” and stem cell research.

Expressing his “sense of disappointment” with the President’s proposed budget for the NIH, Harkin stressed that “Congress didn’t intend to double NIH’s funding so we could cut it to the bone from then on out... It’s the wrong time to hold the NIH budget basically flat,” he lamented. He stressed that there is no higher priority in this appropriations bill than funding NIH at an adequate level. Harkin acknowledged that he, too, is “troubled” by the new interim regulations dealing with conflict of interest.

Zerhouni reiterated the themes that he outlined for the House Subcommittee hearing (see *UPDATE*, March 21, 2005). He presented several results of the investment made in NIH, including a 60 percent reduction in mortality for heart

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ENDING FORMULA FUNDING FOR AGRICULTURE RESEARCH “JUST ISN’T GOING TO HAPPEN”

Appearing before the House Agricultural and Rural Development Appropriations Subcommittee on April 7, officials from the U.S. Department of Agriculture’s (USDA) Research, Education, and Economic agencies learned that the Administration’s proposal to phase out formula funding programs such as the Hatch Act and McIntyre-Stennis, “just isn’t going to happen.” While Rep. Tom Latham (R-IA) spoke these words, the sentiments were also echoed by Subcommittee Chairman Henry Bonilla (R-TX).

The proposal would replace the formula funding programs with increases in the National Research Competitive Grants (NRI) program and the initiation of a new

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disease over the past 30 years, a marked decrease in both mortality and morbidity due to better hypertension management, and a “very real decrease” in cancer mortality over the past decade.

Referencing the NIH Roadmap for Medical Research, Zerhouni explained that the agency’s vision has been strengthened through a “systematic coordination across all the institutes.” He also underscored the NIH’s trans-agency plan for obesity research and highlighted the FY 2006 NIH Neuroscience Blueprint. He concluded his opening statement by noting that while the agency has established priorities, “the budget this year is going to have to lead to difficult choices.” He further observed that even though the agency is facing “difficult budgets, it’s important to do the right thing, even if it’s not the right budgetary time.”

Responding to Specter’s question about the meaning of “the right budgetary time,” Zerhouni explained that despite the fact that there is a flat budget, there are scientific opportunities in neurosciences and behavioral sciences that he, as well as the directors of the 15 institutes and centers that make up the NIH Neuroscience Blueprint, have identified. It is important, he continued, “to have a coordinated plan to advance our knowledge of the brain and the nervous system and the impact of behavior and behavioral factors on health.”

When the Chairman asked whether the NIH was efficient in its use of Congressional appropriations support, Zerhouni responded by stressing that the NIH’s investment in research, development, and knowledge equals approximately \$96 per American per year. Conversely, he noted, \$5,500 per year is spent on healthcare, which is rising at a much higher rate than inflation. Zerhouni further emphasized “the need to accelerate our knowledge so that we can change the paradigm of how we treat patients today. It would be more effective if we could develop methods of intervening years before the disease develops, rather than do what we do today, which is intervene after the disease has struck.”

Senator Thad Cochran (R-MS) expressed his hope that the budget increase proposed by the President would “permit the NIH to continue its research into health disparities, examining why a disproportionate number of African Americans, for example, suffer from heart disease than the rest of the population.” Cochran went on to add that “Taking the research to the underserved areas of our country is beneficial.”

Zerhouni agreed, noting that the Senator’s points were “absolutely on target.” The NIH, he explained, is “acutely aware of the disparate impact these conditions have on the American population.” He noted that as part of the Roadmap, the NIH is developing the idea of a community-based core of clinical researchers that will be included within the underserved areas of the country and connected to a better information system, so that more patients in those communities can participate.

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program to provide the State Agricultural Extension Stations with \$75 million in competitive grants for researchers at Land Grant colleges and universities, exclusively. Bonilla questioned whether this idea was “well thought through.” USDA Undersecretary Joseph Jen responded by saying that “the changes had been discussed for many years.” Colien Hefferan, Administrator of the Cooperative State Research, Education, and Extension Service (CSREES) pointed out the large and lengthy consultation process that took place with over a thousand citizens as well as stakeholders from the Land Grant system.

Latham expressed skepticism about the whole effort. He suggested that the new programs would reward “good grant writers at certain places” and take away resources from local and regional entities that have provided important research over the years. Jen also admitted to Latham that the whole idea came from the Office of Management and Budget, not USDA. In addition, Rep. Joanne Emerson (R-MO) spoke out against the change, wondering why private universities with large endowments, “including a certain one in Missouri,” needed federal dollars in the first place.

In addition to the discussion about formula funding programs, the hearing spent a significant amount of time focusing on USDA’s efforts to help the nation’s fight against obesity. Jen outlined the programs in the Agricultural Research Service (ARS), the CSREES, and the Economic Research Service (ERS) dedicated to preventing Americans from becoming overweight. He even mentioned the role of psychologists in researching “people’s behavior choices.” ARS is contributing to the “What We Eat in America” component of the National Health and Nutrition Examination Survey. CSREES is asking for an increase of \$7.5 million in the NRI to focus on understanding the environmental and social factors influencing behaviors leading to childhood obesity.

In addition, the ERS budget includes funds to support a behavioral economic research program to identify strategies for developing effective nutrition messages that motivate consumers to adopt more healthful diets, as well as a Consumer Data and Information system.

The hearing also noted the Administration's annual attempt to eliminate earmarks or special grants from the USDA research and extension budget. Both Bonilla and Senator Robert Bennett (R-UT), whose Agriculture and Rural Development Appropriations Subcommittee held a brief hearing on April 13, asked Jen if he would be surprised if the Subcommittees restored the special grants. Jen said no.

GERBERDING DISCUSSES CDC BUDGET WITH APPROPRIATORS

On April 6, Centers for Disease Control and Prevention (CDC) Director Julie Gerberding appeared before the House Labor, Health and Human Services (HHS), and Education Appropriations Subcommittee to present testimony regarding the CDC's FY 2006 budget request. Despite criticism of the agency delivered by an independent panel at the National Academies of Science in late February and reports of significant internal dissension at the CDC, Gerberding received a warm reception from Subcommittee members and was commended multiple times throughout the hearing for her leadership (and programmatic works).

Gerberding opened her testimony by informing Subcommittee Members that the CDC is charged with responding to the "challenges that affect people throughout their life stages, like obesity, and we have challenges that appear and disappear, and some of those come in the context of urgent health threats." She continued: "Prior to 9/11, we had very little need for an emergency operations center... since September 11th of 2001, we have been in operation mode almost constantly at our agency."

While her prepared testimony focused primarily on the Agency's responses to and successes in dealing with disabilities, diabetes, tobacco, chronic illness, bio-terrorism, disaster preparedness, vaccines, and viral outbreaks, Gerberding emphasized that "Our work at CDC is comprehensive. We have important health problems that affect people in every stage of life."

Obesity: "We've got to do more."

Following Gerberding's remarks, Subcommittee members launched into an extensive question and answer session that predominately revolved around the CDC's response to the obesity epidemic plaguing America's health and well-being. Of the Subcommittee members present, seven had prepared questions regarding what more the CDC could do to trim the waistlines of the nation.

Early in the hearing, Chairman Regula asked Gerberding if she has had problems getting the educated people needed to staff CDC research activities and to staff agency operations, generally.

Gerberding responded, "The whole public health system suffers from the lack of a talented and educated pipeline of workers... We have got to do more to encourage people to engage in these kinds of careers and I think that's part of what we're hoping our new work force development activity that CDC can take on... We want kids in grade school to know what public health is and to know what it means to be a disease detective, and be excited and interested in the fields so that we can get them in the schools and into our workforce."

Rep. Nita Lowey (D-NY) got the obesity discussion rolling when she brought up an article published on March 17 in the New England Journal of Medicine, indicating that our children may face a lower life expectancy than our own generation due to an increase in obesity and a decrease in physical activity.

Lowey asked if the "CDC is engaging in evaluations of ongoing obesity prevention programs, disseminating evidence-based strategy of best practices," as well as whether Congress should "fund more states with nutrition, physical activity grants, school health funding." She concluded by asking the important question: "what are we doing about it?"

Gerberding responded to Lowey's question by saying, "Well, we've got to do more. That's the first message. The second message is I really appreciate what you said at the very beginning which is what does the science tell us? What actually is working and do we know and can we find out?"

She went on to state, "My biggest fear is that in five years, after all of this talk and all of these ideas that have been used, we still don't know what we should be investing in... But those projects are very early, and we

don't have enough time under our belts yet to know how successful they are and what we can easily disseminate... A lot has been done, but a lot more needs to [be done], and it is a very, very critical priority for CDC."

"Health impact has to be our driving force."

Gerberding also explained that the CDC has invested the \$21 million appropriated by Congress last year for new health protection research money in the business sector, because the Agency believes that from a corporate business perspective, employers and workers have a stake in fitness and good health because it affects profits of the company if health benefits are expensive and productivity declines.

Rep. Anne Northup (R-KY) asked Gerberding: "What sort of insights are you providing so that there are examples of programs that have actually not only had good results... but that actually affected these outcomes?"

"I think the key word here is leveraging," said Gerberding. "How can we leverage the programs that we do invest in to be sustainable, but also to teach us what others could do effectively to get the best outcome for the investment that they are making...[?]" She went on to add: "... so we put money into extramural, academic training grants. We put money into individual investigator awards and academic centers."

Gerberding surmised that the challenge in the fight against obesity right now is that the CDC simply doesn't know what to tell the states, local governments, and schools to do. "If we don't do this [programmatic] evaluation, we won't be able to say, 'If you do this, you can expect this result. This is what it will cost. And this is the best way to invest whatever resources that you have.'"

Gerberding concluded her testimony by telling the Subcommittee, "We have initiated the whole strategic transformation of CDC based on one concept, and that is: Health impact has to be our driving force, that we need to align our goals, know what they are and align our performance measures with those goals and align our budget in ways that help us accomplish those goals and measure and reveal and try to document our progress in getting there."

RESTORE FISCAL SANITY: "IT'S HEALTHCARE, STUPID!"

Speaking at a Brookings Institution seminar to celebrate the publication of *Restoring Fiscal Sanity 2005: Meeting the Long-Run Challenge*, Senior Economist Henry Aaron summarized the message of the book and many of the Brookings scholars who spoke by paraphrasing Clinton political strategist James Carville, asserting: "It's Healthcare, Stupid."

Both in the book and in their presentations, co-editors Alice Rivlin and Isabel Sawhill noted the exploding costs of Medicare and Medicaid over the next forty years. If these are not addressed and Federal revenues stay at the current 16 percent of GDP, they predicted that healthcare costs would "eat up" the entire federal revenue base by 2030. In contrast to these problems, Peter Orszag noted, the Social Security problem is manageable.

The Brookings scholars argued that "big choices must be made" to get the federal fiscal house in order. The demographics of an aging population and paying its health costs will drive federal spending up to unprecedented levels by 2030. Without new revenues, a "huge gap opens between projected spending and historic revenue levels," leading to another borrowing explosion that drives up the government's interest costs. They asked several critical questions, including whether taxes should increase to European levels, if certain federal activities should diminish or disappear, and whether adjustments need to be made in our promises to the elderly.

Rivlin and Sawhill presented two extreme solutions. A smaller government scenario would keep revenues at or below the current level with wholesale reductions in spending. Under these circumstances: seniors pay more as Social Security benefits are indexed to prices, not wages; medical costs are held to the growth of the economy; most commercial and agricultural subsidies, education, housing, job training, environmental, and crime programs are eliminated; and defense spending is held below \$400 billion, which would result in a 20 percent reduction. This scheme precludes funds for unforeseen contingencies or new initiatives.

The other extreme is the larger government scenario. This would leave Social Security, Medicare, and Medicaid unchanged. New spending, equal to 1.5 percent of GDP, would occur in areas such as health care, education, and global poverty. Defense spending

would grow in line with the Pentagon's future plan through 2022. Under this scenario, taxes would need to increase significantly; they estimated that the average American family would pay about \$11,000 more. Even with this increase, Americans' tax burden, they argued, would remain lower than in 17 other advanced countries. Total spending would increase from 20 percent of GDP in 2005 to 28 percent in 2030.

As everyone noted, the "real" answer lies somewhere in-between. Bringing a dose of political reality to the discussion were former Louisiana Democratic Senator John Breaux, now a lobbyist at Patton, Boggs, and Blow, and former Minnesota House Republican Bill Frenzel, who has been a Guest Scholar at Brookings since leaving Congress in January 1991. Breaux is chairing and Frenzel is a member of President Bush's Commission on Tax Reform, which is supposed to make its recommendations on simplifying the tax code in July 2005.

Breaux suggested that the current climate and atmosphere in Congress makes Capitol Hill "a difficult place to find a consensus." He called the House of Representatives a "polarized war zone," and noted the Senate was becoming more like the House.

Frenzel suggested he had "no immediate grounds for optimism" because our leaders "don't feel it in their political guts." There is no pressure from the core constituencies of either party to deal with the "unsustainable path" the country is on. He concluded that the "public needs to get off their duffs" and demand more.

A certain COSSA Executive Director inquired as to whether the situation called for another Ross Perot-type leader to compel the country to demand a solution to the deficit problem. Breaux suggested it would take another billionaire willing to buy a bully pulpit in order to make the case.

Thus, despite historical data suggesting that Presidential leadership and bipartisan compromise are the keys to mitigating future damage from current deficits and runaway healthcare costs, nobody, including many of those who have helped to solve these problems in the past, surveyed by Ron Haskins of Brookings, seemed very optimistic that fiscal sanity will happen in the near future. However, the authors' warn that "the sooner this is done, the less costly and painful it will be."

STEELE NEW HEAD OF ADVANCED STUDY CENTER

The Board of Trustees for the Center for Advanced Study in the Behavioral Sciences has announced that Claude M. Steele, Lucie Stern Professor in the Social Sciences at Stanford University, will become the seventh director of the Center on September 1, 2005. Steele will replace Doug McAdam, who will return to the Stanford sociology department after four years as director.

The Center recruits scholars in both the social and behavioral sciences as well as other related fields in the humanities and brings them to Palo Alto for a year-long fellowship in which they have the intellectual freedom, interdisciplinary stimulation, and support to engage new and challenging ideas.

Steele, who came to Stanford in 1991, also directs its Center for Comparative Studies in Race and Ethnicity. His research interests include: how people cope with self-image threats; how group stereotypes can influence intellectual performance; and addictive behaviors. Steele has received many plaudits for his work on compliance behavior and self-evaluative processes, as well as for his identification of the phenomenon and concept of stereotype threat.

Prior to coming to Stanford, Steele served on the faculties of the University of Michigan, University of Washington, and University of Utah. His research has received major support from the National Institute of Mental Health, the National Institute on Alcohol Abuse and Alcoholism, and the Russell Sage Foundation. He has been the President of the Society for Personality and Social Psychology and the Western Psychological Association. In addition, Steele has served on the Board of Directors of the American Psychological Society (APS) and currently serves on the Center's Board of Trustees. He has received the Distinguished Scientific Career Award from both the American Psychological Association and the APS. He is a member of the National Academy of Sciences, the American Academy of Arts and Sciences, and the National Academy of Education.

Steele received his B.A. from Hiram College, and his M.A. and Ph.D. from the Ohio State University. He was selected by a search committee that was chaired by Patricia Albjerg Graham of the Harvard Graduate School of Education, and whose other members included Craig Calhoun of the Social Science Research Council and Harriet Zuckerman of the Andrew W. Mellon Foundation. Stephen Stigler of the University of Chicago and Chairman of the Center's Board of Trustees served on the committee ex-officio.

NEW NSF CYBERSECURITY CENTER: SOCIAL AND BEHAVIORAL SCIENCE INCLUDED

The National Science Foundation (NSF) has announced it will establish a new Science and Technology Center on cybersecurity. The University of California, Berkeley will lead a collaborative effort that will include scholars from Carnegie Mellon, Cornell, Mills College, San Jose State University, Smith College, Stanford University, and Vanderbilt University. The NSF has awarded the Center a grant of \$19 million over five years, with the possibility of a second five-year extension.

S. Shankar Sastry, professor of electrical engineering and computer sciences at UC Berkeley, will direct the Center, which has been dubbed the Team for Research in Ubiquitous Secure Technology (TRUST). The research will focus on investigating the integration of computing and communication technologies across “critical infrastructures” in areas such as finance, energy distribution, telecommunications, and transportation.

In recent years, members of Congress, led by House Science Committee Chairman Sherwood Boehlert (R-NY), have expressed concern about the potentially large-scale disruptions that a terrorist cyberattack could cause to America’s economy and society. Boehlert and the Science Committee spearheaded legislation that Congress enacted to provide support for the research that NSF is now funding.

TRUST will develop new technologies based on findings from studies of software and network security, trusted platforms, and applied cryptographic protocols. It will also look at system problems through several methods, including: modeling and analysis; development of secure, embedded systems; and the integration of trusted components and secure information management software.

The leaders of the Center also recognize that there are important cybersecurity questions that require input from social scientists. Therefore, it will merge the above efforts with investigations of social science questions involving economics, public policy and societal challenges, human-computer interfaces, and privacy, among other issues. According to Sastry, system design has thus far not sufficiently accommodated human users and the usability of systems, which can often provide the weakest link in information assurance.

Among the social scientists involved in TRUST, all from UC Berkeley, are: Michael Nacht, Dean of the

School of Public Policy; Pamela Samuelson of the Boalt Hall School of Law and its School of Information Management Systems (SIMS); Steven Weber of the Political Science Department; Hal Varian of the Business School and SIMS; and Deidre Mulligan, also from the law school.

The project will also have industry support, including Bellsouth, Boeing, General Motors, Raytheon, Cisco Systems, Hewlett Packard, IBM, Intel, Microsoft, Qualcomm, Sun Microsystems, and Symantec. In addition, TRUST will have an outreach program to K-12 schools and undergraduate institutions serving underrepresented populations.

SOURCES OF RESEARCH SUPPORT

COSSA provides this information as a service and encourages readers to contact the sponsoring agency for further information. Additional application guidelines and restrictions may apply.

NIH Roadmap: Administrative Supplements for Interdisciplinary Research in the Behavioral, Social and Biological Sciences (NOT-RM-007)

The National Institutes of Health (NIH) is announcing the availability of one-year administrative supplements (up to \$150,000) designed to stimulate interdisciplinary research in humans that integrates the behavioral or social sciences with the biological sciences. The funds are intended to support partnerships between behavioral or social scientists and biological scientists to meld these disciplines’ typically disparate perspectives, approaches, and methodologies into interdisciplinary research efforts that will improve the ability to prevent, detect, diagnose, and treat disease and disability as well as improve symptom management.

Appropriate topics include, but are not limited to:

- Studies designed to elucidate the genetic, neural, endocrine, cellular or molecular mechanisms underlying human behaviors such as ingestion, addiction, physical activity, communication, cognition or perception, and the role of abnormal mechanisms in physical and behavioral disorders.
- Research exploring how interactions between genetics/genomics and social factors influence physiology, behavior, health, and disease.
- Research examining the biological mechanisms by which ethnicity, education, economics, social or cultural factors, early parenting or stress influence behavior, health, and disease.

- Research investigating the influence of the behavioral and social context on immune function as well as on susceptibility and response to treatment for infectious disease.
- Studies characterizing neural, endocrine, and genetic influences on temperament, personality, emotion, affect and motivation, and interactions among them, in both normal and patient populations.
- Research establishing the biological bases of individual differences in behavior, particularly those relevant in understanding vulnerability to and course of disease, including relapse.
- Studies identifying genetic and other biological markers that predict abnormal or risky behaviors.

This is a one-time announcement. Applications are due by June 15, 2005. For more information contact Deborah H. Olster, Office of Behavioral and Social Sciences Research at olsterd@od.nih.gov or see: <http://grants.nih.gov/grants/guide/notice-files/NOT-RM-05-007.html>

Developmental Research on Elder Mistreatment

The National Institute on Aging (NIA) and the Office of Behavioral and Social Sciences Research (OBSSR) have issued a request (RFA-AG-05-009) for initial developmental applications designed to ultimately provide the scientific basis for understanding, preventing, and treating elder mistreatment. The RFA is in recognition that critically, scientifically gathered knowledge of the prevalence, incidence, and risk factors associated with community and institutional elder mistreatment in the U.S. is missing and needs to be gained prior to the creation of a national policy on preventing elder mistreatment. The funding entities emphasize that developmental research prior to a full incidence/prevalence study is a necessary first step. The RFA is intended to fund these initial steps.

NIA and OBSSR plans to fund six to eight area-based or community-targeted pilot investigations to develop and test feasibility, validity, reliability, and generalizability of methodologies for measuring the prevalence and incidence of elder mistreatment.

There are three objectives for the RFA: 1) to develop and pilot test methodologies and techniques for estimating elder mistreatment that might be replicated subsequently in a national prevalence and incidence study; 2) to explore potential obstacles to a single national study; and 3) to increase the scientific infrastructure of scholars for conducting sound research in the broad area of elder mistreatment.

Based on the initial steps discussed as research priorities in *Elder Mistreatment: Abuse, Neglect and Exploitation in Aging America* (National Research Council, 2003), the priorities for the RFA include: developing standardized conceptual and operation definitions of elder mistreatment, which includes physical, psychological abuse, sexual abuse, neglect, and financial exploitation; building a community-wide approach such that all avenues of elder mistreatment detection and remediation are included; developing a triangulation of methods for detecting elder mistreatment at the community level; designing and fielding prevalence and incidence studies of elder mistreatment that can be replicated at the national level; and expanding the infrastructure for conducting elder mistreatment research to include experts in other fields currently studying socially sensitive and stigmatized behaviors.

A letter of intent is due by June 1, 2005 and applications are due June 23, 2005. For more information see: <http://grants1.nih.gov/grants/guide/rfa-files/RFA-AG-05-009.html> or contact: Sidney M Stahl, Behavioral and Social Research Program, NIA, at (301) 402-4156 or Sidney_Stahl@nih.gov.

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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 sciences.

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