



CONSORTIUM *of* SOCIAL SCIENCE ASSOCIATIONS

1701 K STREET NW, SUITE 1150 • WASHINGTON, DC 20006 • PHONE: (202) 842-3525 • EMAIL: WNAUS@COSSA.ORG • WWW.COSSA.ORG

Testimony in Support of Fiscal Year 2018 Funding for the
National Institutes of Health, Centers for Disease Control and Prevention, National Center for
Health Statistics, Agency for Healthcare Research and Quality, Institute of Education Sciences,
and International Education and Foreign Language Programs

Prepared for the Subcommittee on Labor, Health and Human Services, Education and Related
Agencies, Committee on Appropriations

United States Senate

Submitted by Wendy A. Naus, Executive Director

Consortium of Social Science Associations

June 2, 2017

On behalf of the Consortium of Social Science Associations (COSSA), I offer this written testimony for the official record. For fiscal year (FY) 2018, COSSA requests **an increase of at least \$2 billion above the FY 2017 appropriated level for the National Institutes of Health (NIH), in addition to funds included in the 21st Century Cures Act for targeted initiatives.** We further urge the Subcommittee to appropriate **\$7.8 billion for the Centers for Disease Control and Prevention (CDC), \$170 million for the National Center for Health Statistics (NCHS), \$364 million for the Agency for Healthcare Research and Quality (AHRQ), \$670 million for the Institute of Education Sciences (IES), and \$78.5 million for the Department of Education's International Education and Foreign Language programs.**

COSSA serves as a united voice for a broad, diverse network of organizations, institutions, communities, and stakeholders who care about a successful and vibrant social science research enterprise that leads to discoveries that benefit all. It represents the collective interests of all fields of social and behavioral science research, including but not limited to sociology, anthropology, political science, psychology, economics, statistics, language and linguistics, population studies, law, communications, educational research, criminology and criminal justice research, geography, history, and child development. COSSA appreciates the Subcommittee's continued support for NIH, CDC, NCHS, AHRQ, IES, and International Education programs. Strong, sustained funding for these agencies and activities is essential to our national priorities of better health and economic competitiveness.

National Institutes of Health, U.S. Department of Health and Human Services

Since 2003, NIH funding has declined by 23 percent after adjusting for biomedical inflation, despite recent budget increases provided by the Congress over the past two fiscal years. The agency's budget remains lower than it was in FY 2012 in actual dollars. COSSA appreciates the Subcommittee's leadership and its long-standing bipartisan support of NIH, especially during difficult budgetary times. There are, however, ongoing and emerging health challenges confronting the United States and the world, which COSSA believes necessitates a funding level for the NIH of **at least \$2 billion above FY 2017, in addition to the funds included in the 21st Century Cures Act for targeted initiatives.** This funding level would enable real growth over biomedical inflation, an important step toward ensuring stability in U.S. research capacity over the long term.

As this Committee knows, the NIH supports scientifically rigorous, peer/merit-reviewed, investigator-initiated research, including basic and applied behavioral and social sciences research, as it works "in

pursuit of fundamental knowledge about the nature *and behavior* of living systems and the application of that knowledge to enhance health, lengthen life and reduce illness and disability.” However, we remain extremely concerned about continued criticism of some of the NIH's funding decisions and mischaracterizations of NIH-supported projects, primarily in the behavioral and social sciences. Such criticisms are unsupported when one looks at the important contributions the behavioral and social sciences have made to the well-being of this nation.

Due in large part to behavioral and social science research sponsored by the NIH, we are now aware of the enormous role behavior plays in health. At a time when genetic control over disease is tantalizingly close but not yet possible, knowledge of the behavioral influences on health is a crucial component in the nation’s battles against the leading causes of morbidity and mortality, namely, obesity, heart disease, cancer, AIDS, diabetes, age-related illnesses, accidents, substance abuse, and mental illness. The fundamental understanding of how disease works, including the impact of social environment on disease processes, underpins our ability to conquer devastating illnesses.

Thanks to strong Congressional commitment to the NIH in years past, our knowledge of the social and behavioral factors surrounding chronic disease health outcomes is steadily increasing. This support has allowed the NIH’s behavioral and social science portfolio to emphasize the development of effective and sustainable interventions and prevention programs targeting those very illnesses that are the greatest threats to our health, but the work is just beginning.

Centers for Disease Control and Prevention, U.S. Department of Health and Human Services

COSSA urges the Subcommittee to appropriate **\$7.8 billion for the Centers for Disease Control and Prevention (CDC), including \$170 million for CDC’s National Center for Health Statistics**. As the country’s leading health protection and surveillance agency, the CDC works with state, local, and international partners to keep Americans safe and healthy. Social and behavioral science research plays a crucial role in helping the CDC carry out this mission. Scientists in fields ranging from psychology, sociology, anthropology, and geography to health communications, social work, and demography work in every CDC Center to design, analyze, and evaluate behavioral surveillance systems, public health interventions, and health promotion and communication programs that help protect Americans and people around the world from disease. These scientists play a key role in the CDC’s surveillance and monitoring efforts, which collect and analyze data to better target public health prevention efforts, and in identifying and understanding health disparities. The social and behavioral sciences also play an important role in the evaluation of CDC programs, helping policymakers make informed, evidence-based decisions on how to prioritize in a resource-scarce environment.

COSSA requests \$170 million for the National Center for Health Statistics (NCHS), the nation’s principal health statistics agency. NCHS collects data on chronic disease prevalence, health care disparities, emergency room use, teen pregnancy, infant mortality, causes of death, and rates of insurance, to name a few. It provides critical data on all aspects of our health care system through data cooperatives and surveys that serve as the gold standard for data collection around the world. Data from NCHS surveys like the National Health Interview Survey (NHIS), the National Health and Nutrition Examination Survey (NHANES), and the National Vital Statistics System (NVSS) are used by agencies across the federal government (including NIH), state and local governments, public health officials, federal policymakers, and demographers, epidemiologists, health services researchers, and other scientists to better understand the impact of policies and programs on Americans’ health.

Agency for Healthcare Research and Quality, U.S. Department of Health and Human Services

COSSA urges the Subcommittee to appropriate \$364 million for the Agency for Healthcare Research and Quality (AHRQ) and reject the proposal from the Administration to transfer AHRQ to the NIH. AHRQ funds research on improving the quality, safety, efficiency, and effectiveness of America’s health care system. It is the only agency in the federal government with the expertise and explicit mission to fund research on improving health care at the provider level (i.e., in hospitals, medical practices, nursing homes, and other medical facilities). Its work is complementary—not duplicative— of other HHS agencies. AHRQ-funded research provides us with the evidence and tools we need to tackle some of the health care system’s greatest challenges. For example, AHRQ-funded research has been instrumental in reducing hospital-acquired conditions by 17 percent in five years, translating to 87,000 lives and nearly \$20 billion in health care costs saved; identifying strategies to help primary care practices cope with the challenges of the opioid epidemic; and helping doctors make better decisions and improve patients’ health by taking advantage of electronic health records and other IT advances. Without AHRQ, important research on topics like reducing waste and unnecessary costs, improving access to health care, and getting the best treatments into the hands of providers would fall through the cracks.

Further, AHRQ reports and data give us vital information about the state of the U.S. health care system and identify areas we can improve. For example, the Congressionally-mandated *National Healthcare Quality & Disparities Report* is the only comprehensive sources of information on health care quality and health care disparities among racial and ethnic minorities, women, children, and low-income populations. AHRQ’s Medical Expenditure Panel Survey (MEPS) collects data on how Americans use and pay for medical care, providing vital information on the impact of health care on the U.S. economy.

Institute for Education Sciences, U.S. Department of Education

COSSA requests a funding level of \$670 million for IES in FY 2018, which would build on the FY 2016 allocation, accounting for inflation over the past two years plus a four percent increase. As the research arm of the Department of Education, IES supports research and produces statistics and data to improve our understanding of education at all levels, from early childhood to elementary and secondary education, through higher education. Research examining special education, rural education, teacher effectiveness, education technology, student achievement, reading and math interventions, and many other areas is also supported by IES.

Findings from IES-supported research have improved the quality of education research, led to the development of early interventions for improving child outcomes, generated and validated assessment measures for use with children, and led to the establishment of the *What Works Clearinghouse* for education research (which highlights interventions that work and identifies those that do not). With increasing demands for evidence-based practices in education, adequate funding for IES is essential to support studies that increase knowledge of the factors that influence teaching and learning and apply those findings to improve educational outcomes. Further, adequate funding will allow IES to continue to support this important research, data collection and statistical analysis, and dissemination. A strong FY 2018 investment in the Institute will allow IES to build upon existing findings and to conduct much-needed new research.

International Education and Foreign Language Programs, U.S. Department of Education

The Department of Education’s International Education and Foreign Language programs play a significant role in developing a steady supply of graduates with deep expertise and high-quality research on foreign languages and cultures, international markets, world regions, and global issues. **COSSA urges a total appropriation of \$78.5 million (\$70.5 million for Title VI and \$8.0 million for Fulbright-Hays) for these**

programs. This sum represents a modest increase in funding, which would broaden opportunities for students in international and foreign language studies. It would also allow us to strategically strengthen our human resource capabilities in the areas of the world that most impact our national security and global economic competitiveness.

Thank you for the opportunity to present this testimony on behalf of the social and behavioral science research community. Please do not hesitate to contact me should you require additional information.