

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



COSSA Washington Update

Volume 26, Issue 5

March 19, 2007

IN THIS ISSUE:

- [NSF Faces Supportive Appropriations' Panels](#)
- [Zerhouni Defends NIH's Budget; Obey Says Children's Study Funding Will Continue](#)
- [House Appropriations Subcommittee on Labor, Health And Human Services Discusses Substance Abuse](#)
- [Census Explains Big Increase to House Appropriators](#)
- [CDC Budget Scrutinized by House Appropriations Panel](#)
- [House Clears Bill To Overturn Bush Presidential Records Order](#)
- [Strategies for Retaining "Seasoned Workers" Discussed](#)
- [NSF Seeks Proposals on Science of Science And Innovation Policy](#)
- [National Children's Study Seeks Proposals For New Study Centers](#)
- [NIH Director's New Innovator Award Program](#)
- [NIH Announces Creation of the NIH Director's Bridge Award](#)

NSF FACES SUPPORTIVE APPROPRIATIONS' PANELS

The National Science Foundation (NSF) has become a major player in America's need to compete in the changing global economy. As part of the Administration's American Competitiveness Initiative (ACI) and congressional proposals on innovation, NSF has enjoyed bi-partisan support from both ends of Pennsylvania Avenue. Its FY 2008 budget proposal has a significant increase (\$513 million and 8.7 percent above FY 2007) and introduced authorization legislation includes plans to double the agency's funding.

On March 1, NSF Director Arden Bement made his annual appearance before the House Commerce, Justice, and Science (CJS) Appropriations Subcommittee, now chaired by Rep. Alan Mollohan (D-WV). A week later, he faced the scrutiny of the Senate counterpart panel, now chaired by Sen. Barbara Mikulski (D-MD). In both appearances, Bement defended NSF and its budget increase by emphasizing the Foundation's role in the ACI "to drive innovation and sharpen America's competitive edge."

The House Subcommittee offered support for the overall budget, Mollohan noting he was "pleased to see such a robust budget request." However, he and others on the House panel, particularly Ranking Republican Rep. Rodney Frelinghuysen (R-NJ) questioned the perceived imbalance between support for the research directorates and support for the Education and Human Resources directorate, feeling the latter had been shortchanged. Bement, like other NSF directors before him, pointed out that the research directorates are also highly engaged in education support, through Research Experiences for Undergraduates and other programs. He also noted the proposed increases for NSF support of graduate students.

The Subcommittee, however, expressed more interest in K-12 activities and the dismal data on student achievement in math and science and the under-qualifications of math and science teachers at that level. Bement noted the Noyce Scholarship program that trains teachers and the Graduate K-12 program that puts graduate students in elementary and secondary classrooms to help teach math and science. He also, much to the panel's approval, indicated that NSF will continue to fund the Math and Science Partnership Program (MSP) to encourage collaboration between universities and K-12 schools. A year ago the Administration wanted to move all funding for this program to the Department of Education, which has its own MSP program. Congress rejected this idea, holding to the belief that NSF should maintain its catalyst role in K-12 math and science education.

A day earlier, reflecting its new status - it now has its own appropriation account - the National Science Board (NSB) made its own presentation to the Subcommittee. Its Chairman, former Purdue President Stephen Beering, assisted by the Board's Executive Director Michael Crosby, told the Congress that there is an external perception that NSF does not support "risky, cutting edge research." Therefore, the Board endorsed an idea from the *Rising Above the Gathering Storm* report issued by the National Academies to set-aside eight percent of NSF's Research budget for "transformative research."

Asked about this, NSF Director Bement indicated he disagreed with the NSB. He claimed every project NSF supports has the "potential to be transformative." He declared that the assertion that NSF is risk averse is "not true." He further suggested that the perception may come from researchers who have found it increasingly difficult to get a grant as NSF's success rate has declined from 28 to 21 percent due to increased proposals and recent, until FY 2007, stagnant budgets. NSF is currently conducting a survey of researchers to discern the validity of the risk-averse perception.

Rep. Harold Rogers (R-KY), who once chaired the Subcommittee when it was the Commerce, Justice, State panel, wondered what results NSF will achieve after the ACI-proposed ten year doubling of its budget. Does NSF have any metrics or milestones that would allow the Congress to assess the returns on the expenditure of taxpayer dollars, Rogers inquired? Reminding the Congressman of the lag time in measuring results of basic research, Bement mentioned the Science of Science and Innovation Policy Initiative (see solicitation notice in this newsletter).

Responding to Mollohan's question about how NSF would distribute a possible further boost in its budget, Bement stressed "NSF's unique role" as maintaining the strength of basic research "across-the-board" in all the sciences.

On the Senate side, new chair Mikulski stressed the Subcommittee's focus on "innovation, security, and accountability." She also noted that the panel would examine climate change activities, competitiveness in a global economy, and how to attract young people to science, engineering, and technology courses and careers.

The Subcommittee heard from both NSF and the National Oceanic and Atmospheric Administration (NOAA) during the same hearing. This gave Ranking Republican Sen. Richard Shelby (R-AL), whose state had just suffered devastating tornado damage, a chance to emphasize the importance of disaster response and community preparedness. With NOAA at the witness table, most of the Senators asked about continued improvements in the predictive capacity of the National Weather Service.

Shelby and others did question Bement about NSF's education programs and why certain aspects of those programs did not receive funding increases in the FY 2008 budget. The NSF Director referenced the Academic Competitiveness Council, a group led by the Secretary of Education, which is evaluating 129 identified government-sponsored math and science education programs. Its report is due soon.

Sen. Ted Stevens (R-AK), noting NSF's participation in the International Polar Year, indicated he thought that this was important particularly as Alaska faces the challenges, including social ones, as a result of global climate change.

Mikulski, as had the House panel, expressed concern about cost-overruns of projects in NSF's Major Research and Equipment Facilities Construction projects and the effect it could have on the panel's consideration of the rest of the agency's budget. Bement admitted that the overruns have had an impact on the Foundation's ability to begin new projects in this account.

Mollohan indicated that the House hopes to move the CJS bill with the FY 2008 NSF appropriation so that it receives floor consideration before the July 4th recess. Senator Mikulski gave no indication of a schedule for her Subcommittee's bill.

ZERHOUNI DEFENDS NIH BUDGET; OBEY SAYS CHILDREN'S STUDY FUNDING WILL CONTINUE

On March 1st and 6th, the House Appropriations Subcommittee on Labor, Health and Human Services (Labor-HHS) Subcommittee began examining the proposed FY 2008 budgets of the agencies under its jurisdiction, including the National Institutes of Health (NIH). Rep. David Obey (D-WI), Ranking Democrat under the then-Republican-controlled House, replaces Rep. Ralph Regula (R-OH) as Chairman of the Subcommittee. Rep. James Walsh (R-NY), is now the ranking Republican on the Subcommittee.

At the March 6 hearing, NIH Director Elias Zerhouni discussed the proposed NIH FY 2008 budget. While the Subcommittee has not yet returned to hearing from all of the 27 institute and center directors, Zerhouni was accompanied by Duane Alexander (Child Health and Human Development), John Niederhuber (Cancer), Anthony Fauci (Allergy and Infectious Diseases), Elizabeth Nabel (Heart, Lung, and Blood), and John Ruffin (Center for Minority Health and Health Disparities). Also available to answer questions were: Francis Collins (Human Genome Research), Griffin Rodgers (Diabetes and Digestive and Kidney Diseases), Barbara Alving (Center for Research Resources), and Samuel Wilson (Environmental Health Sciences).

Chairman David Obey (D-WI) opened the hearing by explaining that he is asking every subcommittee hearing to examine: "What is this country going to look like in 10 years? What will the demographic changes be, what will the traffic needs be, what will the environmental problems be, what are the scientific opportunities that we should be thinking about," in the case of NIH? Obey stressed that he wants the agencies to look at every program in their budgets "in those terms rather than simply looking at numbers and not understanding what is behind them." The country will be larger and older and is going to "have a lot more environmental pressures," he insisted.

Obey noted that when the Democrats became the majority party in November, they faced the problem of having to pass last year's budget. Accordingly, they had to make tough decisions, including cutting nearly 60 programs. NIH's program was not cut, but instead was provided an increase of more than \$600 million above the President request, because if the Congress had not done so the agency would not have been able to support as many as 500 grants. "Because we increased that funding, it means that the budget presented by the President this year is actually a decrease from the previous year," Obey contended.

Ranking Member Rep. James Walsh (R-NY) noted that he is "continually impressed at the discoveries that come from NIH and the research that is done there each day. There is no question" that these discoveries have the potential to change medicine, not only in the U.S., but around the world, and to cure and prevent disease and promote health." Underscoring the need "for sound financial management," Walsh, however, expressed concern that "everything possible" is done to make sure those advances reach local doctors and community hospitals. Noting earlier congressional support for doubling NIH's budget, he emphasized the need "to make sure that investment is being placed wisely and where it can do the most good."

Zerhouni attempted to give Congress a sense of where the Nation has moved over the past 30 years, noting that "clearly, Americans live longer and healthier lives," as a result of a "plurality of advances." The investment in NIH over this period was \$4 per year per American, he informed the Subcommittee. The resulting impact of this investment is that the number of early deaths has been reduced by approximately 1.3 million people. It also has an "enormous economic return evaluated by economists," between \$1.5 to \$2.5 trillion, he explained. He also noted the drop in the chronic disability indices measured since the 1980s, revealing a decrease of 30 percent in disability rates for Americans over the age of 65, with the decrease actually accelerating. Yet, Zerhouni noted that 75 percent of current health care expenditures are related to chronic conditions.

Pre-empting Disease: The Gene Environment Initiative

The discoveries made over the past 30 years, Zerhouni maintained, have changed the "challenges we face today." According to the NIH Director, if "we practice medicine in 15 years the way we practice medicine today, we will not be able to overcome the challenges that are facing us." These challenges are the result of socioeconomic drivers, demographics, including an aging population, and changes in the prevalence of diseases in different ethnic groups, he related. Global health issues have also become much more important, presenting many new scientific opportunities.

For the past 20 years NIH has developed a symptom management approach, related Zerhouni. But the 21st century paradigm is to pre-empt disease, intervening earlier in the natural history of the disease process, at the molecular stage. It is for that reason the agency has launched the Gene Environment Initiative, to find over the next three years all of the genes potentially involved, he explained. But that is not the end of the work we have to do, he informed the Subcommittee. "A gene only codes for a particular process. We need to do the research on every one of these genes, and hopefully find out what is the primary deficit in one disease, what is the primary event, and hopefully pre-empt it. ..The future paradigm of medicine is going to be driven not by intervening late, but by being able to predict who, how, and when a disease will develop in what environment. What kinds of behaviors drive a disease? What kind of social construct can tell us in fact, you will be at a higher risk for a disease? This is what we call predictive medicine," explained Zerhouni.

The second part of this is personalized medicine, Zerhouni noted. "None of us respond the same way to either environmental factors or behavioral factors or genetics. And we need to personalize the treatment we give." It will require the participation of communities with individuals taking "more responsibility" for their own care earlier than ever before.

NIH: An Exclusive Club?

Rep. Jerry Lewis (R-CA) noted his concern that "from the outside, a lot of people look on NIH as kind of a club." Zerhouni explained that this feeling is not justified by the facts. When you look at the NIH's research portfolio only 50 percent of NIH grants get renewed after the investigators' first approval. In addition, Zerhouni declared, after five years, only 25 percent of investigators get their grants renewed, followed by 12 percent over a 15-year period. The number of scientists who have received funding for more than 20 years is less than five percent, he insisted. He added that European societies and funding agencies are adopting the NIH's peer review system.

"How important is physical activity in mental health," inquired Rep. John Peterson (R-PA), noting that he thought "it might be more important than these wonderful drugs you're coming out with." Responding, NICHHD director Duane Alexander explained that it was a "jointly shared" role. The problem with getting people to engage in physical activity is an issue of "compliance." It is very difficult to get patients to comply with advice to get more exercise, he argued.

Rep. Tim Ryan (D-OH) inquired about the issue of stress and its role in chronic conditions. He noted that he did not see "the kind of research done on it that maybe we need to see." He emphasized that when you talk about heart disease, high blood pressure and some of the other chronic issues "that we're going to have to deal with long-term, it seems that we are going to have to deal with the role of stress. Echoing Peterson, he noted that it "seems like we're not teaching, as a major component of our health care system how to deal with this...What do we need to do? Do we need to provide more research? Do we know enough to about it?"

"It's a multi-factorial problem," Zerhouni answered, emphasizing that he thought it is a mistake to think this is just a health care issue. "In fact, we are encouraging behavioral and social sciences research to a great degree," he noted. He then highlighted the strategic plan under development by the Office of Behavioral and Social Sciences Research led by David Abrams.

Zerhouni explained that research has taught us "that you cannot look at physical education in isolation from behavioral change in that person, the environment of that person, and social changes around that person." He also pointed out that the National Institute of Environmental Health Sciences is examining how the environment affects obesity. It is a combination of policy, urban environment, and the built environment, citing the example of erecting buildings with no elevators for the first three floors, except for disabled individuals. "There is a socioeconomic behavioral aspect to this which cannot be resolved by a doctor visit...The issue is a major issue of systems. What is our social-societal system that forces behaviors and incentives towards good behaviors or bad or untoward behaviors," he concluded.

Congress Will Provide the Funding for the National Children's Study

Closing out the hearing, the Chairman indicated that some in Congress have been frustrated by NIH's reluctance to support the National Children's Study, which is a major nationwide effort to follow a large sample of children from birth to age 21 to learn more about the effect of the environment on health and development. Responding to Obey's question if NIH's reluctance to support that study is based upon scientific opposition to the study or simply budgetary

considerations, The NIH Director explained that is “simply an issue of prioritization” in a budgetary constrained environment. Zerhouni noted that he consulted with the NICHD director and his advisory council. Unless additional resources are provided, “it wouldn’t have been wise to sacrifice the next generation for this study . . . There’s no opposition or scientific reluctance on our part.” Obey replied that the Congress is going to “put that money back next year, too, and it will not squeeze other research because we will expand the institutes’ budget, just as we did last year.”

HOUSE APPROPRIATIONS SUBCOMMITTEE ON LABOR, HEALTH AND HUMAN SERVICES DISCUSSES SUBSTANCE ABUSE

At the hearing on March 1, the Subcommittee explored the NIH’s proposed FY 2008 budget with a theme hearing on the subject of substance abuse. Testifying before the Subcommittee were Ting-Kai Li, director of the National Institute on Alcohol Abuse and Alcoholism (NIAAA), Nora Volkow, director of the National Institute on Drug Abuse (NIDA), and Thomas Insel, Director of the National Institute of Mental Health (NIMH), along with Terry Cline, director of the Substance Abuse and Mental Health Services Administration (SAMHSA).

Volkow began by informing the Subcommittee of a “continued decline in illicit substance abuse in high school students in the U.S. and cigarette smoking is at its lowest it has ever been since 1979” when NIDA began supporting the Monitoring the Future (MTF) survey. According to Volkow, latest survey results show a 23 percent decline over the last five years in any past-month illicit drug use by students in the 8th, 10th and 12 grades combined (see Update, [January 15, 2007](#)). These “remarkable accomplishments,” she emphasized, “highlight the importance of prevention as a crucial strategy to decrease the catastrophic consequences of drug abuse and addiction to the individual and society.” Despite the success in decreasing the abuse and addiction of illicit drugs, Volkow emphasized that the abuse of prescription medication has continued unabated over the same period of time. While the abuse of prescription medication occurs at all ages, she stressed that it was “particularly problematic in adolescents since this is the time when individuals are most vulnerable to addiction.”

The main priority for NIDA, Volkow told the Subcommittee is to “fund research that will allow us to prevent drug abuse and addiction more efficiently.” We need to understand better the interaction between factors contributing to addiction, such as: genes, since at least 50 percent of the vulnerability to drug addiction is genetically determined; environments, since environments can either facilitate or prevent drug use; and development, since most of the problem with drug experimentation and dependence develops either during adolescence or during adulthood. Volkow cited how comprehending the social environment’s affect on gene expression in the brain and brain function could allow for the prevention of some of the debilitating effects of parental neglect or social pressure.

The second priority for NIDA, stated the director, is treatment. Findings from basic and clinical research have provided new promising targets. Volkow explained that a major roadblock to progress in developing medications, however, is the limited involvement of the pharmaceutical industry which lays the responsibility of bringing this treatment into the clinic “solely” on NIDA. She highlighted the Institute’s investments designed to take advantage of technology to guide behavioral interventions for treatments. She cited as an example the use of “imaging for biofeedback whereby a person is taught how to inhibit a specific area of the brain” - in this case the region of the brain that may be involved with craving - “by looking in real time at the objectivity of the brain.”

Volkow stressed that the Institute recognizes that “for science to be brought into the clinic we need to promote services research.” Discussing the criminal justice system, Volkow asserted that research has consistently shown that treatment significantly decreases drug abuse and recidivism. Yet, it is estimated that of approximately 70 percent of individuals that end up in the criminal justice system who could benefit from treatment, at most, 20 percent of them get it.

The third priority for NIDA, explained Volkow, is HIV/AIDS, because “drugs contribute to the infection of HIV and the dissemination of the epidemic.” She stressed that the consequences from this secondary effect are over represented in minority populations. “Moreover,” she continued, NIDA-supported research “has shown that treatment for drug abuse is an effective measure for preventing HIV dissemination.” Noting that NIDA’s comprehensive portfolio is strategically positioned to capitalize on new scientific opportunities, Volkow concluded that the Institute is working

toward a future in which early recognition of risk for addiction is no different than early recognition of other chronic diseases.

Mental Illness: A Growing Economic Burden

The most important message for the Subcommittee, according to Insel, is that while health care is a growing part of the economic challenge in this country (16 percent of GDP), “what we struggle with in the world of mental illness and substance abuse are what we often talk about as the indirect costs, the cost of social services.”

What that means according to the president’s New Freedom Commission, Insel continued, is: of the 1.6 million people who receive supplementary security income, 35 percent have mental disorders at a cost of approximately \$8.2 billion (2002 data, the latest available); of the 1.7 million receiving Social Security Disability Income, 26 percent are people with mental disorders at a cost of \$18 billion in 2002; of the individuals incarcerated 61 percent have mental disorders; and within the homeless population 46 percent have a serious mental illness.

Mental disorders, including substance abuse, are chronic illness just like diabetes, hypertension, heart disease, dementia, and stroke, Insel explained. “But what makes them different is that these are the chronic diseases of young people in this country. Epidemiological studies published in the last year show that 50 percent of adults with mental illnesses describe an onset by age 14, 75 percent by age 24. It is a very different picture from the rest of medicine,” Insel concluded.

Alcohol: ‘The Third Leading Cause of Preventable Death in the U.S.’

Li quantified the burden of illness attributable to alcohol, highlighting the fact that the Centers for Disease Control and Prevention “rank alcohol as the third leading cause of preventable death in the United States.” The consequences of excessive alcohol use cost this country an estimated \$185 billion a year in 2000, the last year for which data is available, he continued.

He described how NIAAA is working to reduce the burden of illness due to alcohol, “recognizing that alcohol has very different effects and consequences at different stages of life that necessitate different research strategies.” Li stressed that underage drinking is a priority for the Institute, noting that NIAAA “has a large portfolio addressing key questions about underage drinking including identifying potential short-term and long-term effects on a developing brain and the degree to which the brain can recover from the damage that is attributable to alcohol.” Understanding the events in brain development that underlie a wide range of adverse behavioral outcomes and co-morbid mental health disorders and determining how early they can be detected and how best to intervene is a research priority for NIAAA, he informed the Subcommittee.

Another priority for the Institute is improving the diagnosis of alcohol problems, said Li. The current diagnostic criteria for alcohol abuse require that individuals experience negative consequences from drinking as part of the diagnosis of the problem. The exposure amount and the frequency of exposure are not taken into consideration. So if we want to identify individuals who are at risk for adverse health outcomes such as alcohol dependence because of their drinking behavior, we have to show how the quantity and pattern of drinking that is harmful relates to the problem that is manifest as diagnosed alcohol use disorders, he explained. NIAAA hopes through future studies to determine appropriate cutoffs for individuals who have heightened risk, such as those with a family history of alcoholism or with co-morbid mental health disorders, Li added. He concluded by noting that “just as physicians treat high cholesterol before an individual experiences a heart attack, we should be able to intervene before an individual loses control of drinking or experiences withdrawal.”

Translating Science into Practice

Cline informed the Subcommittee that despite an overall five-percent reduction in SAMHSA’s FY 2008 budget; the agency has “set an aggressive agenda that supports [its] vision of life in the community for everyone, as well as supporting [SAMHSA’s] mission of building resilience and facilitating recovery for individuals.” SAMHSA, according to Cline, is investing available resources in the priority areas of children’s mental health services, HIV and AIDS, suicide and school violence prevention, screening and intervention, criminal and juvenile justice and other prevention areas.

The agency will also continue to expand choice through its Access to Recovery Program, transforming the mental health system, and “creating a healthier United States through the strategic prevention framework.”

SAMHSA’s three strategic goals include accountability, capacity, and effectiveness, and are tied to the agency’s performance-based budget, testified Cline. He echoed Li regarding underage age drinking and noted that it is the “one area” where there has been “little progress.” He stressed that in the coming years there will be a “concentrated effort around this very important public health concern.”

In terms of effectiveness, SAMHSA is working to improve service quality through outcomes and incorporating evidence-based practices. The agency’s national registry of evidence-based programs (NREPP) and practices is essential to achieving this goal, he explained. The registry allows SAMHSA to “make informed decisions about prevention and treatment interventions.” It is a prime example of SAMHSA’s collaboration with NIDA, NIAAA, and NIMH, Cline noted. A goal of the NREPP, he explained, is to make sure that the agency is moving evidence-based practice to the field. Currently, there is more than a decade delay in moving science into the field.

Obey: NIH’s Budget is ‘Headed in the Wrong Direction’

Subcommittee Chairman David Obey (D-WI) expressed his frustration at hearing people say programs are “level funded.” He exclaimed, “To get an understanding of what happens over time with your programs and others we have to look at the previous year’s budget and then we have to adjust them not just for inflation, but for population growth in order to understand the real per capita terms.” According to Obey, such a look reveals that the “budget for NIH is down almost 13 percent in real per capital terms...We are headed in the wrong direction.” He added that it is his belief that “one of the most serious problems we have in this country is children’s depression.”

Ranking Member James Walsh (R-NY) questioned whether the Institutes could take credit, through the research, for the decline in drug use. “Is it a societal change? Is it a trend? Is it what’s cool? Or is it some of the things that you’ve discovered in your research,” he asked. Volkow responded that “there are multiple things that have happened over the past five years. . . Science has solidified in such a way that . . . [it] can guide prevention interventions.” She also stressed that we cannot negate the importance of the media because it changes the attitudes of people. In addition, she explained, “we can never underestimate” the access to drugs. “We have seen from science that one of the factors that predicts the prevalence of a given drug is how easily accessible” it is. She further highlighted the ability of agencies to work together as a contributing to the decline. Li echoed Volkow, noting that it is important to understand the “contributions of the environment. Clearly, if you are not exposed to alcohol in the environment, you’re not going to be diagnosed as alcohol-dependent.”

Tim Ryan (D-OH) expressed concern regarding the role of stress in drug and alcohol use and if there were efforts to teach young kids how to deal with stress. Emphasizing that “stress is a very complex issue,” Volkow responded that Ryan was “actually touching on probably the most important environmental factor in terms of increasing the vulnerability, not just for substance abuse but also for some of the mental disorders.” She noted further that in addition to “stressors of performance . . . there are other social stressors that are as devastating,” for instance, “parental neglect.” A lack of that interaction, Volkow explained, has been shown to “actually significantly change the expression of genes and the way that the brain functions.” NIDA, she continued, is trying to understand what social stressors, drug abuse, parental neglect, and poverty are “doing to our brain such that they make us more vulnerable to take drugs . . . If we understand how the environment works affect a function of your brain, then we can do behavioral interventions that can compensate . . . So we are emphasizing the basic knowledge so that we can tailor better prevention strategies.” She added that in parallel, “there are many prevention studies that have shown which interventions work,” noting further that prevention interventions that are universal are more effective.”

Responding to Rep. Tom Udall’s (D-NM) inquiry of how the U.S. compares to other industrialized countries and what it says about societal patterns here, Insel answered that from a preliminary look at the survey data being collected by NIMH in conjunction with the World Health Organization, it looks “like rates in the United States are higher particularly for disorders that could be related to stress, such as depression.” He added that soon-to-be released data suggest that “there are ways of addressing some of the problems we face that are being done in other countries that are just so much more effective.” He cited pretty good outcomes in India where there is much less of an emphasis on medications, and much greater emphasis on family and social support systems.

CENSUS EXPLAINS BIG INCREASE TO HOUSE APPROPRIATORS

On March 7, the House Appropriations Subcommittee on Commerce, Justice, and Science, chaired by Rep. Alan Mollohan (D-WV), held a hearing on the FY 2008 budget request for the Economic and Statistics Administration and its components; the U.S. Census Bureau and the Bureau of Economic Analysis (BEA). Cynthia Glassman, the Commerce Department's Undersecretary for Economic Affairs, Louis Kincannon, who announced his resignation in November 2006, but who is still leading the Census Bureau, and Steve Landefeld director of the BEA were the witnesses.

The President's FY 2008 budget request seeks \$1.23 billion in discretionary funds for the Census Bureau, close to a 40 percent increase over the FY 2007 appropriation. Glassman declared Fiscal Year 2008 an important ramp-up year for the 2010 Census program, stating that the "increases, though large, are critical to the success of the decennial count as well as to maintain and improve the bureau's other economic demographic programs." The ramp-up activities include a 2008 census dress rehearsal in Fayetteville, NC and Stockton, CA, modernizing the processing system, continuing improvement and enhancement of the Master Address File and Census maps to take advantage of GPS capabilities.

Kincannon stated that success of the bureau's plans for a less costly 2010 short-form decennial census was contingent upon the continued full implementation of the American Community Survey (ACS). The FY 2008 budget includes sufficient funding to continue interviewing in group quarters. Rep. Rodney Frelinghuysen (R-NJ), Ranking Member of the Subcommittee, asked about the adequacy of the ACS as a substitute for the long-form. Kincannon asserted that the ACS was tested and the results mirrored the long-form in 2000. Glassman added that ACS data proved very useful in evaluating the impact of Hurricane Katrina, whereas waiting for the 2010 long-form decennial data would have been costly.

The Director also noted that the budget request also contained funding for the 2007 Economic Census, the Census of Governments, and an initiative to expand quarterly and annual coverage to all 12 service sectors. BEA Director Landefeld strongly supported this last initiative as "one of the most important improvements in the GDP estimates."

The Subcommittee members honed in on budget issues related to Census partnerships and promotions, suggesting the FY 2008 budget request contained insufficient funds for these activities. Kincannon declared that the Bureau planned to allocate communications' funding roughly comparable to that spent during the 2000 decennial life cycle. He recognized the important role the Census Advisory Committee, of which COSSA is a member, plays in partnering to promote the census. Kincannon also affirmed that the ACS will give the Bureau up-to-date information that will allow it to conduct target mailings to specific populations.

Mollohan recalled last year's floor fight over amendments to cut Census funding, saying "Census was a bill-payer for every amendment that came on the floor" and asked what the effect would have been if the cuts had remained in the final budget. Kincannon suggested that the costs of the 2010 Census would have increased by more than \$1 billion and the accuracy of the results would have diminished. Mollohan suggested that the Bureau's budget might again serve as a target in 2007 for Members seeking money for other agencies and programs and noted: "I may have to help you on the floor when this comes up."

In a hearing held the day before, the Subcommittee heard testimony from Commerce Secretary Carlos Gutierrez. At this hearing, Members raised concerns over plans to terminate the Bureau's Survey of Income and Program Participation (SIPP) before a replacement survey has been fully developed. Gutierrez explained that the plan to move away from SIPP was a way to utilize improved survey methodology and technology to achieve more current and reliable data with less reliance on costly and burdensome longitudinal methodology. The planned transition is expected to create a 4-month data gap, but these small gaps in data have occurred in the past without causing problems, Gutierrez asserted.

With regard to BEA, Rep. Mike Honda (D-CA) expressed interest in BEA's budget initiative to measure the impact of Research and Development (R&D) on the economy. Landefeld explained that it involves taking R&D expenditures, and rather than treating it as an expense, treating them as an investment - "It's an idea that has been around for a long time, but never implemented." He suggested that the initial estimates indicate a very large impact, about 6.5 percent of GDP growth. "That may not sound like much, but, by comparison, all investments in commercial buildings and other structures of that sort account for 2 percent of GDP growth," he remarked. Furthermore, Landefeld noted that if you

look at it in terms of the resurgence in economic productivity growth during the last decade, "R&D's contributions rival those of computers and information technology in raising our competitiveness over the last decade or so."

CDC BUDGET SCRUTINIZED BY HOUSE APPROPRIATIONS PANEL

On March 9th Centers for Disease Control and Prevention (CDC) Director Julie Gerberding appeared before the House Appropriations Subcommittee on Labor, Health and Human Services and Education (Labor-HHS) to discuss the agency's proposed FY 2008 budget. According to Gerberding, despite the progress that has been made in the areas of immunization, teen pregnancy rates, tuberculosis rates, and breast and cervical cancer, the U.S. continues to have a big problem with health disparities. The nation has a "long way to go before we've reached the goals of the Healthy People 2010 in some of the important areas," she informed the Subcommittee.

The biggest problems the nation is likely to face in the next decade, according to the CDC director, include things like climate change, poverty, and the "extremism that is creating so much conflict in the world." While these issues do not "at first glance seem like public health issues," she explained, "they conspire to create the incubator for a number of very important big problems:" terrorist attacks, emerging infectious disease like pandemics, the kinds of natural disasters that we seem to be increasingly engaged in on a macro scale, including hurricanes and tsunamis. These "urgent threats can happen at any time, anywhere, to anybody," she insisted, and the CDC has had to "scale up and speed up" its ability to be a part of the overall emergency preparedness and response effort.

Gerberding also noted the problems accompanying an aging society. She explained that the demographic trends for the U.S. over time reveal that an increasing proportion of the population will be senior citizens over the age of 65. Seniors are becoming less healthy as the chronic diseases catch up to them. She referred to the "urgent realities," explaining that "the extreme aging, the extreme lifestyles, and the extreme environment" are working together "to create a very growing threat."

She highlighted the growing obesity epidemic, noting that right now there are 10-13 million overweight children in the U.S. One in three of these children, she maintained, will develop diabetes in their lifetime if the trend is not reversed. If we do not do something about these problems, the benefits achieved in the last century in terms of lifespan are threatened, she argued. The CDC has a "very important role to play in combating" cardiovascular disease, cancer, and diabetes, she related.

Gerberding concluded her testimony by asking: "Are we really investing in primary prevention? Are we really doing what we need to protect people's health before they acquire the risk factors or diseases that require expensive treatment down the road? We are spending less than three percent of our budget on prevention."

Picking up on Gerberding's last point, Ranking Member James Walsh (R-NY) noted that Congress establishes priorities by the way it spends money but argued that he did not believe that was the way that CDC operated because "prevention, obviously, would be a priority." Walsh made two subsequent points. First, on the issue of prevention, he noted that "a majority of chronic health conditions... are preventable by modifying lifestyle factors." Conversely, only "14 percent of CDC's proposed FY 2008 budget is proposed for the National Center for Chronic Disease Prevention and Health Promotion." Second, Walsh pointed out the "Steps Toward a Healthier U.S. initiative is proposed for a 40 percent reduction." Walsh stressed that it "looks like we're actually going in the opposite direction of where probably should go in terms of prevention."

Gerberding replied that the CDC estimates that approximately 70 percent of chronic disease is preventable through lifestyle changes that address the main risk factors: tobacco, poor nutrition, lack of physical exercise and excessive alcohol use. "If we could deal with those risk factors, we really could attenuate the majority of the chronic diseases that our cities are facing," she answered. In recognition that "we don't have the science around how to influence lifestyles and behaviors that we need to know what it is that we should invest in to make a bigger difference," Gerberding explained that the CDC is investing in something called the National Center for Health Marketing. As for the Steps Toward a Healthier U.S. program, she explained that the program was "always intended to be a starter program with a five-year grant cycle." The agency is reinvesting the money freed up from programs that have come to the end of their funding cycle to support a new initiative designed to reach adolescents in schools around nutrition, lifestyle, and exercise, said Gerberding.

Walsh questioned whether CDC is spending the right balance on chronic disease prevention, noting that that prior to September 11, 2001 approximately \$200 million of CDC's budget was dedicated to terrorism preparedness and emergency response. Double that amount was spent on chronic disease prevention, he contended. Since that time it has flipped, and the agency is now spending more money on terrorism-related concerns and less on chronic disease. Gerberding replied that these are "both important aspects of public health," and the agency needs to be able to do both well.

Rep. Nita Lowey (D-NY) expressed concern that the President's proposed adolescent health school promotion initiative to combat obesity seems to be funded through cuts in other physical activity promotion programs with no new funds for other obesity programs. Lowey mentioned her bill, the Stop Obesity in Schools Act, and asked how is the CDC working with the Department of Education to assess the wellness policies that have been developed by school districts? The director responded that the CDC has an evidence-based tool called the School Health Index that has systematically looked at the science around what programs work, what is the most effective way to make a difference in the health status of students in various grade levels. Gerberding added that the purpose of the proposed adolescent health initiative is to "get some resource into as many schools as possible to connect them with scientists at CDC who are experts in the evidence base of what works to give schools the technical support and access to the agency's expertise."

Rep. Tim Ryan (D-OH) applauded the School Health Index, calling it a "great idea." Likewise, he lauded the proposed adolescent health promotion initiative and the Steps to a Healthier U.S. He asked Gerberding to share some of the agency's "novel prevention ideas." Responding, Gerberding noted that the agency is developing some over-arching health goals by life stage. Currently, CDC is struggling with the fact that the agency receives its money according to disease categories, she explained. The agency is working to bring people from the different categorical perspectives to build more integrated programs. There are a "set of things that need to come together in an integrated way and a more holistic approach," she explained, adding that CDC may eventually have to come back and ask Congress for flexibility in how the agency's "money is amalgamated." It is CDC's belief that it is one of the ways it can get more impact from the science that it has.

Tom Udall (D-NM) noted that Gerberding "sounded the alarm but there is little in this budget that shows an increased commitment to prevention." Calling the budget "extremely shortsighted," he asked the director to explain the disconnect between the recognition of the problem and the commitment to providing the resources necessary to solve it. Gerberding answered that "really hard choices have had to be made."

Sharing "some random observations, "Chairman Obey wrapped up the hearing by underscoring that the CDC is "dropping backwards" in terms of its budget because "by the time you factor in inflation and population growth...it means that funding for CDC has dropped by 14 percent in those real terms since 2005."

HOUSE CLEARS BILL TO OVERTURN BUSH PRESIDENTIAL RECORDS ORDER

On March 14, the new Democratic majority in the House asserted itself, by pushing through legislation, H.R. 1255, to overturn President Bush's Executive Order (EO) from 2001. The EO has made it more difficult for historians and scholars to gain access to presidential records.

Sponsored by House Government Reform Committee Chairman Rep. Henry Waxman (D-CA), the legislation reasserts the provisions of the Presidential Records Act (PRA) of 1978, which the EO restricted. The bill restores to the archivist of the United States control of access to presidential records and information. It also negates the language in the EO that permitted a designee of former Presidents, including heirs, to assert executive privilege after the president's death and gave former Vice Presidents the authority to assert privilege over their own documents. Speaking on the House floor, Waxman noted that the legislation "has a straightforward goal. It ensures that future historians have access to Presidential records as the Presidential Records Act intended."

In 1978 Congress enacted the PRA to establish governmental control over Presidential records. The PRA mandates that the National Archivist shall take custody of these records when each President leaves office, and make them available to the public. The President could prior to the end of his term specify a period, not to exceed 12 years, to restrict access to certain specified categories of information. The PRA represented an effort by Congress to establish a balance between the public's right to know and a President's right of privacy and confidentiality with regard to sensitive records.

In the closing days of his second term President Ronald Reagan issued Executive Order (EO) 12667 on January 18, 1989. The order essentially required the National Archivist to notify the incumbent President and the former President of his intention to publicly disclose presidential records which were not otherwise subject to protection under the terms of the PRA. Under Reagan's EO the National Archivist had to identify any specific material in disclosed records that could raise a question of executive privilege.

In November 2001, President George W. Bush further changed the PRA when he issued Executive Order 13233. This replaced President Reagan's EO. The key provisions of 13233 are: the National Archivist will notify both the incumbent and former Presidents of all requests for records of a former President after the 12 year restriction period expires; the National Archivist is prohibited from releasing the records unless both the incumbent and former President agree, or he is ordered to do so by a final court order; a former President may designate a representative to act on their behalf; and the establishment of a 90 day target date for the review of materials requested by the public however, this review period can be extended indefinitely.

The White House reacted to the House action by issuing a veto threat, calling H.R. 1255 "counterproductive...misguided, and [it] would improperly impinge on the President's constitutional authority, in violation of settled separation of powers and principles." They blamed the delays in document release on "the ever increasing volume and demand for such records and the inadequate number of trained archivists available at each Library to shepherd such requests." The Administration said it is "willing to work with interested parties to strike a meaningful balance of competing interests."

The House vote of 333-93 is enough to override a presidential veto. The Senate presents another hurdle. So far, there is no companion bill in that body.

On the same day, the House passed H.R. 1309, sponsored by Rep. William Lacy Clay (D-MO) to strengthen the Freedom of Information Act (FOIA) to enhance public access to government records. Clay said the legislation would re-establish the policy of the Clinton administration, under which agencies were directed to disclose requested information unless the disclosure would result in some harm. The current administration, he charged, has encouraged agencies to be more aggressive in asserting statutory exemptions to deny FOIA requests.

Witnesses Decry Limiting Public Access to Presidential Records

Earlier on March 1, the House Committee on Oversight and Government Reform's Subcommittee on Information Policy, Census and National Archives, chaired by Clay, convened a hearing on the PRA. The witnesses included: The Honorable Allen Weinstein, Archivist of the United States, National Archives and Records Administration (NARA); Harold Relyea, from the Congressional Research Service; Thomas Blanton, Director National Security Archive at George Washington University; Scott Nelson, senior attorney Public Citizen; Robert Dallek, author of many presidential biographies; historian Anna Nelson from The American University; and Steven Hensen of Duke University, representing the Society of American Archivists.

Weinstein defended Bush's EO, contending the concerns raised are unfounded. He proclaimed that "since EO 13233 went into effect in November 2001, NARA has opened over 2.1 million pages of Presidential records," and executive privilege has only been used one time and only for 64 pages of records in the Reagan Library. Weinstein asserted "there should be no question that, to date, EO 13233 has not been used by former Presidents or the incumbent President to prevent the opening of records to the public."

Most of the others disagreed with Weinstein. Hensen commented that the "unwarranted extension of presidential power and privilege" to former presidents' representatives was "troubling." He noted an archivist's primary commitment is to maintain the integrity of records, and that access to the records of public officials is essential to this mission. Hensen believes President Bush's EO undermines the PRA and its principles of public access and accountability.

Scott Nelson, who has joined a lawsuit against NARA, called EO 13233 a violation of the PRA. The basis of the lawsuit is that EO 13233 is flawed both legally and constitutionally. In Nelson's opinion, the President's EO is illegal because of the "new and improper substantive standards that displace and subvert the PRA's provisions for public access to presidential materials." The EO also represents a substantial threat to the PRA's fundamental goals, by creating the possibility that a former president may indefinitely delay access to his records. He also asserted that the EO expands

executive privilege beyond its legitimate boundaries by allowing a former president's family or personal representative the ability to exert executive privilege over Presidential records.

According to Blanton, since President Bush's EO went into effect in 2001, five years have been added to the process of releasing presidential records to the public. In his experience conducting research at the Reagan Presidential Library, the delay has increased from 18 months in 2001 to an astounding 78 months as of February 2007. Blanton noted that the EO is not the only reason for this problem. He pointed out that NARA suffers severe resource constraints, and has an enormous backlog of records that have already been declassified, but due to under staffing have not been processed and prepared for public access.

The panelists agreed that Congress needs to pass legislation that would invalidate Bush's EO by rescinding the veto power given to former presidents and their descendants, and restore the 30 day notification process. They agreed that presidential records are crucial not only to our history, but the world's and the PRA protects that history and allows us to learn from it. Anna Nelson summed it up by suggesting: "We should think of the presidential papers as raw material for specialized books and articles. The ideas and conclusions gained by these few researchers are refined and become subjects of influential books and articles."

STRATEGIES FOR RETAINING "SEASONED WORKERS" DISCUSSED

On February 28, the Senate Special Committee on Aging held a hearing on "The Aging Workforce: What Does it Mean for Businesses and the Economy." The committee heard testimony from: David Walker, Comptroller General, U.S. Government Accountability Office (GAO); Donald Kohn, Vice Chairman, Board of Governors of the Federal Reserve System; Marcie Pitt-Catsouphes, Director at the Center on Aging & Work/Workplace Flexibility; Preston Pulliams, District President, Portland Community College; and Javon Bea, President and CEO, Mercy Health System.

It is critical to our economy that we incorporate older workers into the workforce. The aging of the baby boom generation, increased life expectancy and declining birth rates are expected to significantly increase business dependence on an older workforce. In fact according to the U.S Census the share of the U.S. population age 65 and older is projected to increase from 12.4 percent in 2000 to 19.6 percent in 2030. This aging population will have severe consequences for social security and Medicare systems. In 1950, there was one person aged 65 or older for every eight people between the ages of 15-64, however that ratio moved to one in five in 2000, and is expected to decline to one to three by 2050.

The witnesses on both panels testified there were several key obstacles to "seasoned workers," as Walker referred to them, remaining in the work place. These include: employer perceptions about the costs associated with the hiring and retention of seasoned workers; workplace age discrimination; the necessity for older workers to keep their skills and technical knowledge up to date; strong financial incentives for workers to retire; and inflexible work schedules.

At the same time, the panelists agreed that there are strategies to help seasoned workers remain in the workforce including: strengthening the financial literacy of workers to help them better prepare for the economic reality of retirement; offering a variety of flexible work schedules; increasing the availability of part-time work; encouraging telecommuting; and increasing the amount of technical and job training provided.

Walker feels the Federal government could play a major role in encouraging employers to hire older workers and ensuring they stay in the workforce. He believes the government could do this by engaging and retaining its own workforce of baby boomers nearing retirement, and thus becoming an example for the private sector. The Federal government could also help foster public/private partnerships that could promote a national discussion on this issue, as well as help provide the training older workers need to allow them to remain a vital part of the workforce.

The benefits touted for the use of seasoned workers are that working past retirement will: allow employees to bolster their retirement savings; help employers deal with future projected labor shortages; and contribute to economic growth and increased federal revenues while helping to defray some of the costs of social security and Medicare.

Unlike most companies, Javon Bea's Mercy Health System has put into practice plans to help hire and retain the seasoned worker. Mercy Health System employs 3,856 workers. Of those 28 percent are over the age of 50 and that

number is expected to continue to grow. They have accommodated these workers by giving them a more flexible work schedule encompassing everything from part-time to seasonal work.

By 2025 Oregon expects to have the fourth oldest population of any state in the country. Pulliams argued that community colleges can support older students who will need retraining or upgrading of their skills to satisfy the needs of the workplace. By increasing their flexibility in class scheduling and content, providing credit for work experience, expanding counseling and advising services, and developing internships and other workplace training, Pulliams believes these colleges can help older workers remain a vital component in the workplace.

NSF SEEKS PROPOSALS ON SCIENCE OF SCIENCE AND INNOVATION POLICY

With its FY 2007 budget in hand, the National Science Foundation (NSF) is soliciting grant proposals for the new initiative in the Science of Science and Innovation Policy (SSIP). This year's competition expects to make three year awards with a maximum budget of \$400,000. The total budget for this year's solicitation is \$7 million. Full proposals are due **May 22, 2007**.

The initiative, which is housed in NSF's Social, Behavioral and Economic Sciences Directorate (SBE), evolved from a speech given on a number of occasions, including the 2005 COSSA Annual Meeting, by Presidential Science Adviser John Marburger. He expressed interest in developing an understanding of the contexts, structures, and processes of the science and engineering enterprise and determining a way of measuring the tangible and intangible returns from investments in that enterprise.

The new competition is limited to two emphasis areas: 1) Developing Analytical Tools that focus on methodologies to analyze science and technology data and related information and to develop novel means to convey the information to a variety of audiences; and 2) Developing behavioral and analytical conceptualizations, frameworks or models that have applications across the broad SSIP goals noted above.

For a full description of the solicitation go to: http://www.nsf.gov/funding/pgm_summ.jsp?pims_id=501084&org=SBE. For further information contact: Kaye Husbands Fealing: khusband@nsf.gov ; 703/292-7267.

NATIONAL CHILDREN'S STUDY SEEKS PROPOSALS FOR NEW STUDY CENTERS

The National Children's Study (NCS) is ready to begin the next phase and has issued a request for proposals to award contracts to up to 20 new study centers. The centers will manage operations in up to a total of 30 communities across the U.S. The request represents the next step in implementing the study, which began in 2005 with the awarding of contracts to seven initial, or Vanguard, centers in seven communities.

The study has identified a representative group of 105 communities across the U.S. where it will recruit and enroll eligible participants. The new study centers must successfully demonstrate such capabilities as collection and management of biological and environmental specimens; the capacity to develop community networks for identifying, recruiting, and retaining eligible mothers and infants; and the ability to secure privacy of the data collected.

NCS was authorized by the Children's Health Act of 2000, a directive from Congress to undertake a national, long-term study of children's health and development in relation to environmental exposures. For more information on NCS see <http://www.nationalchildrensstudy.gov>. For more information on the request for proposals see <http://fs1.fbo.gov/EPData/HHS/Synopses/6726/RFP-NIH-NICHD-NCS-07-11/RFP-07-11-3-1.pdf>

NIH DIRECTOR'S NEW INNOVATOR AWARD PROGRAM

The National Institutes of Health (NIH) is seeking applications for the NIH's Director New Innovator Award (RFA-RM-07-009) designed to support "exceptionally creative new investigators who propose highly innovative approaches that have the potential to produce an unusually high impact. The award, created this year, addresses two NIH goals: 1) stimulating highly innovative research approaches to important biomedical behavioral research problems and 2) nurturing unusually creative investigators at the early stages of their research careers. It is part of the NIH's commitment to increasing the success of new investigators.

Awards will be for up to a total of \$1.5 million in direct costs for a five-year budget/project period, plus applicable Facilities and Administrative costs to be determined at the time of award. According to the NIH, the proposed research need not be in a conventional biomedical or behavioral discipline, but must be relevant to the mission of NIH. Women and members of groups underrepresented in biomedical or behavioral research are especially encouraged to apply. Applications are due by May 22, 2007.

For more information see <http://grants.nih.gov/grants/guide/rfa-files/RFA-RM-07-009.html>.

NIH ANNOUNCES CREATION OF THE NIH DIRECTOR'S BRIDGE AWARD

In an effort to "buttress investigators" whose R01 (investigator initiated) applications receive review scores near the Institute or Center nominal payline and who have limited additional support, the National Institutes of Health (NIH) recently announced the creation of the NIH Director's Bridge Award (NDBA). The award is designed to provide continued but limited funding for new and established grantees who have submitted a competing renewal grant application that "describes a highly meritorious project." The continued funding will permit the Principal Investigator additional time to strengthen a revised application. The award is good for one year.

According to the NIH, the award is designed for investigators submitting a competing renewal research project grant application or the first revision of the competing renewal application (A1), who just miss the nominal funding payline for an Institute or Center (IC) to which it is primarily assigned. The award allows the application to be nominated for the NDBA by the administering NIH Institute. The applicant, however, must have less than \$200,000 in other support (total costs) from all sources to fund their research. The NIH Office of the Director will make the final selection. In addition, applications submitted for funding in FY 2007 and applications submitted in FY 2006 that are still being considered for funding may be nominated for the NDBA. Total costs approved by the Institute or Center for the first year of the project up to \$500,000 will be provided using a one year R56 grant (High Priority, Short-Term Project Award) mechanism. At this time, the second revision (A2) of an R01 will not be considered for selection as an NDBA. Applicants will not be allowed to apply for an R56 grant. Likewise, they cannot nominate themselves.

The creation of the award is part of the NIH's financial operating policy for FY 2007 (see <http://grants.nih.gov/grants/guide/notice-files/NOT-OD-07-030.html> and <http://grants1.nih.gov/grants/financial/index.htm>) as a result of the enactment of PL 110-005: Revised Continuing Appropriations Resolution, 2007 on February 15, 2007. The NIH is able to provide such funding as a result of receiving \$91 million in the FY 2007 Revised Continuing Appropriations Resolution to support vulnerable research programs.

CONSORTIUM OF SOCIAL SCIENCE ASSOCIATIONS
COSSA

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

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

UPDATE is published 22 times per year. ISSN 0749-4394. Address all inquiries to COSSA at newsletters@cossa.org

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

GOVERNING MEMBERS

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

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

MEMBERSHIP ORGANIZATIONS

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

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

COLLEGES AND UNIVERSITIES

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

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

CENTERS AND INSTITUTES

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

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