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# COSSA Washington Update

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## IN THIS ISSUE:

- Senate Confirms Groves to Lead Census Bureau
- Francis S. Collins Nominated to Lead the NIH
- Congress Keeps Spending Bills Moving
- House Panel Hears About Census Data Use in Federal Formula Funding
- Academy Report Calls for Structural Independence for BJS
- IOM Provides Priorities and Recommendations for Comparative Effectiveness Research Effort
- Federal Coordinating Council for Comparative Effectiveness Research Releases Report
- Mobility, Child Development, and School Achievement Focus of Academies' Board
- COSSA Board Member David Weisburd Announced as 2010 Stockholm Prize in Criminology Winner
- NSF Seeks Proposals in Creative Information Technology
- NIDCR to Support Small Research Grants for Data Analysis and Statistical Methodology

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## SENATE CONFIRMS GROVES TO LEAD CENSUS BUREAU



Late in the afternoon of July 13, with Census Day seven and a half months away, the U.S. Senate confirmed Robert Groves as the next director of the Census Bureau (for Groves' background see Update, [April 6, 2009](#)). Groves will take over from Acting Director Tom Messenbourg, who has led the Bureau since the departure of Steve Murdock in December, 2008.

After emerging from the Senate Homeland Security and Government Affairs Committee before Memorial Day, Groves' nomination ran into a roadblock. Last week, the Washington, DC newspaper *Roll Call* identified Sens. Richard Shelby (R-AL) and David Vitter (R-LA) as the ones who had placed a hold on the nomination thus preventing Senate consideration of Groves. Both indicated they were still concerned about the possibility of the Bureau using sampling to adjust the 2010 count, despite assurances from Groves and the Administration that this is not planned nor could it be carried out at this late date.

Another concern the Senators proclaimed is the role of ACORN (Association of Community Organizations for Reform Now), a group Republicans have accused of committing fraud during voter registration drives in the 2008 campaign. ACORN, like many other groups, including COSSA, has signed on as a 2010 Census Bureau partner to help promote the upcoming decennial count. The two Senators expressed concerns about ACORN's role and the possibility that their participation would lead to fraudulent acts concerning the hard-to-count population.

Majority Leader Harry Reid (D-NV) pushed the Senate to agree to a cloture vote (60 affirmative votes needed) to unblock the nomination and move it to the floor. The Senate voted 76-15 to invoke cloture. Once this has been accomplished, Groves was confirmed by a voice vote.

During the debate, Groves received support from Sens. Joe Lieberman (I-CT) and Susan Collins, Chairman and Ranking Member of the Senate Homeland Security and Governmental Affairs Committee. In addition, Sens. Tom Carper (D-DE) and Carl Levin (D-MI) praised Groves' credentials and professionalism.

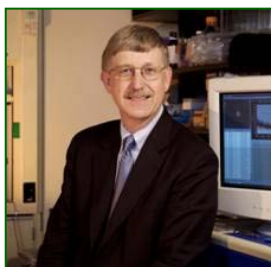
Groves takes over the Census Bureau that is in the middle of gearing up for the 2010 count, but which faces difficulties in convincing people to participate, particularly those in immigrant communities and low socioeconomic neighborhoods. The new director will probably soon hit the road to convince these folks and all Americans that getting counted is the law and important to the allocation of Federal funding (see story below).

In addition, the Bureau is in the midst of a major hiring campaign and the development of a media campaign. On July 21, the 2010 Census Advisory Committee, on which COSSA serves, will have a special summer meeting to discuss many of these issues. It will be nice to have a confirmed director in place as we move forward.

### Bostic Confirmed to Lead HUD's Policy Research Office

On July 9, the Senate confirmed Raphael Bostic as director of the Department of Housing and Urban Development's (HUD) Office of Policy Development and Research (for information about Bostic, see Update, [June 29, 2009](#)). Bostic takes over an office whose activities received major scrutiny from a National Academies' panel in a report *Rebuilding the Research Capacity at HUD*. This became the basis for a major revitalization proposed by HUD Secretary Shaune Donovan in the FY 2010 budget.

## FRANCIS S. COLLINS NOMINATED TO LEAD THE NIH



On July 8, the White House announced the nomination of Francis S. Collins as director of the National Institutes of Health (NIH). Collins replaces Raynard S. Kington who was thanked by Secretary of Health and Human Services Kathleen Sebelius for his service as Acting Director. "Under Dr. Kington's leadership, the National Institutes of Health has helped distribute millions of dollars' worth of grants funded by the American Recovery and Reinvestment Act; produced new guidelines for stem cell research and continued its critical work to support science and research. Dr. Kington, we are grateful for all your hard work."

The long-rumored nomination of the former director of the National Human Genome Research Institute (NHGRI) has been expected by the scientific community. In the release announcing Collins' nomination, President Obama stated that "The National Institutes of Health stands as a model when it comes to science and research. My administration is committed to promoting scientific integrity and pioneering scientific research and I am confident that Dr. Francis Collins will lead the NIH to achieve these goals. Dr. Collins is one of the top scientists in the world, and his groundbreaking work has changed the very ways we consider our health and examine disease. I look forward to working with him in the months and years ahead."

Collins, who stepped down in the summer of 2008 to work on writing projects and other professional opportunities, also worked on the Obama Administration's transition team. He is a physician-geneticist noted for his leadership of the Human Genome Project and as Director of NHGRI from 1993-2008. Collins has a longstanding interest in the interface between science and faith, and has written about this in *The Language of God: A Scientist Presents Evidence for Belief*. He has just completed a new book on personalized medicine, *The Language of Life: DNA and the Revolution in Personalized Medicine*, scheduled for publication in early 2010. He has B.S. in Chemistry from the University of Virginia, a Ph.D. in Physical Chemistry from Yale University, and an M.D. with Honors from the University of North Carolina. Prior to coming to NIH in 1993, he spent nine years on the faculty of the University of Michigan, where he was an investigator supported by the Howard Hughes Medical Institute. He has been elected to the Institute of Medicine and the National Academy of Sciences, and received the Presidential Medal of Freedom in November 2007.

At his final hearing as NHGRI director in July 2008 before the Senate Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies (Labor-HHS), Collins was asked by Sen. Tom Harkin (D-IA) about the advances in genetics and the implications for the future. Collins emphasized that while "it is a glorious time in genome research," there is more that the Institute could be doing. "One of the things we really need to understand more about," he insisted, "is how the genetic risk factors interact with the environment. . . It is an interaction

between those genetic risks and environmental exposures, such as diet and lifestyle and medical surveillance and whatever's in the air and the water that determines whether somebody is going to get sick or not."

Collins' nomination needs the consent of the Senate in a confirmation process that may take some time.

## CONGRESS KEEPS SPENDING BILLS MOVING

Keeping the momentum going, the 111<sup>th</sup> Congress continued to move the FY 2010 spending bills through the process. The House has now passed seven of the 12 bills and two others are through the Appropriations Committee. The Labor, Health and Human Services, Education bill has been marked up at the Subcommittee level. The large Defense bill and the Transportation and Housing and Urban Development bill are the only two that have yet to begin the journey through the House. On the Senate side, two bills have been passed, seven others are awaiting floor action, and three are at the beginning of the process.

On July 9, the House by a vote of 266-160 passed the FY 2010 Agriculture and Rural Development spending bill (for relevant allocations, see Update, [June 29, 2009](#)). During consideration of the bill on the House floor, Rep. Rosa DeLauro (D-CT), chairperson of the Subcommittee that oversees the legislation, added \$3 million for bee research to the National Institute for Food and Agriculture's (NIFA) competitive programs allocation. Rep. Kevin Brady (R-TX) also succeeded in adding \$50,000 to the FY 2010 funding for the Economic Research Service. Brady explained the purpose of his amendment "is to have the Office of the Chief Economist work jointly with the Economic Research Service and the Foreign Agriculture Service to conduct an independent, objective study on the potential growth in U.S. agriculture exports that would result from implementation of the pending trade promotion agreements with Colombia, Panama, and South Korea within 90 days of this legislation becoming law."

On July 7, the Agriculture and Rural Development bill emerged from the Senate Appropriations Committee. The bill provided \$82.1 million for the Economic Research Service, \$400,000 less than the request and the House number. The Committee recommended \$161.8 million for the National Agricultural Statistics Service, same as the request and the House.

Under the NIFA Appropriation, the Senate Committee provided \$215 million for Hatch Act formula funds, about \$5 million more than the House. The Agriculture and Food Research Initiative (AFRI) received \$296.7 million from the Senate panel, compared to \$210 million from the House. The Regional Rural Development Centers got \$1.3 million from the Senate appropriators, same as the House.

The Senate passed the FY 2010 Homeland Security Appropriations bill by a vote of 84 to 6 on July 9 (for details of the bill, see Update, [June 29, 2009](#)).

A preliminary table from the House Labor, HHS, Education Appropriations Subcommittee, chaired by Rep. David Obey (D-WI), indicates that the House panel provided the National Institutes of Health \$30.967 billion for FY 2010, a boost of \$941.8 million over FY 2009 (without the Recovery Act funds) and \$500 million above the President's request.

The House Committee recommended \$6.682 billion for the Centers for Disease Control and Prevention, an increase of \$67.3 million over FY 2009, and \$25.6 million above the request. The allocation for the Bureau of Labor Statistics was \$611.6 million, the same as the request. For the Institute of Education Sciences, the Subcommittee appropriated \$664.3 million, \$47.1 million above FY 2009 (without the Recovery Act funds) and \$25 million below the request.

More details, including report language, will become available following consideration of the bill by the full House Appropriations Committee the week of July 13.

## HOUSE PANEL HEARS ABOUT CENSUS DATA USE IN FEDERAL FORMULA FUNDING

On July 9<sup>th</sup>, the House Information Policy, Census and National Archives Subcommittee of the Oversight and Government Reform Committee held a hearing to discuss how census data is used in the allocation of federal formula grant funds. Subcommittee Chairman Rep. William 'Lacy' Clay (D-MO) spoke of the importance of an accurate census count upon which these allocations are made. Testifying to the Subcommittee, Census Bureau Acting Director Thomas Messenbourg noted that an analysis of 140 federal grant and direct assistance programs in FY 2007 and concluded that over \$400 billion are distributed annually using data sources from the Bureau.

Although the Census Bureau is not involved in developing, administering, or evaluating the programs that use its data in their funding formulas, the Bureau produces the data used by the agencies. The three main data collections are the decennial census, the American Community Survey (ACS), and the Population Estimates Program.

According to Messenbourg, both the 2010 Census and the demographic, social, economic, and housing characteristics provided annually by the ACS are included in the Decennial Census Program. The ACS collects data monthly for population and housing characteristics that were previously collected in the decennial census long form, while the Population Estimates Program produces population estimates for the Nation, states, counties, cities, and towns on an annual basis and updates the most recent decennial census counts each year with new information on births, deaths, and net migration.

Messenbourg explained the Population Estimates Program, suggesting it relies heavily on data from the latest available census, as those data serve as the basis on which the estimates are built. To arrive at the estimates, according to the Acting Director, the Bureau takes the decennial census counts, adds births to U.S. resident women, subtracts deaths of U.S. residents, and adds an estimate of net international migrants. Data on the number of births and deaths are provided by the National Center for Health Statistics and the states. The number of net international migrants is estimated by the Census Bureau using a method that capitalizes on the latest available data from the ACS as well as other data sources.

To produce the state-level population estimates, the Census Bureau follows a similar formula, with the addition of an estimate of state-to-state migration based on information derived from federal tax records and Medicare enrollment data. A similar procedure is followed to produce county-level estimates.

In an effort to produce the most accurate population estimates for all geographic areas, last year, Messenbourg told the Subcommittee that the Census Bureau conducted a large research effort to evaluate the method we use to against a series of alternative methods. "The method we currently use performed very well," Messenbourg concluded.

In addition, the Census Bureau, Messenbourg testified, supported the Federal State Cooperative Program for Population Estimates (FSCPE). Established in 1967 as a partnership with the States to foster cooperation in the annual production of population and housing estimates for states, counties, and subcounty areas, it allows the state members to input data for the estimates and to review the results prior to their public release. The state representatives also provide advice and guidance on technical issues involved in the production of estimates and participates in the review and evaluation of the 2010 Census counts.

The Census Bureau also has a program in place referred to as the Challenge Program, which allows local entities to provide additional data to the Census Bureau to help improve the population estimates. The data provided by local areas can often make our population estimates more accurate. However, in the end, Messenbourg declared, the most important part of the estimate is the starting point which is the decennial census number.

### **Census Bureau Data Integral to Education Programs**

Stuart Kerachsky, Acting Director of the National Center for Education Statistics, told the Subcommittee: "From the beginning of NCES' allocation work, data from the Census Bureau have been integral to the allocation process. In particular, Census Bureau data are critical for determining most allocations for the Department's elementary and secondary education programs. Most of our elementary and secondary education allocation formulas are based on the latest data for some relevant subset of the population, such as children ages 5-through 17. At times during the past 30 years, as much as 90 percent of formula grant funding at the elementary and secondary education level has been based in whole or in part on counts of the 5-through 17-year-old age group. In 2009, of the more than \$50 billion that the Department of Education is spending on elementary and secondary education, approximately 80 percent is being allocated either directly based on Census Bureau calculations of population subgroups or on shares of allocations under Title I of the Elementary and Secondary Education Act (ESEA), which, in turn, are based on Census Bureau data.

Jamie Alderslade of the Social Compact, Inc. proclaimed that "Census estimates matter to cities. They help to determine funding allocations from the federal government; inform investors like retailers and banks about where and when to invest in our cities; they ensure that city administrations make sound policy decisions grounded in accurate census data, and; they greatly influence the perception of cities." Therefore, he suggested, the formulas used by federal agencies need to be better understood, and supported by cities. "When formula grants are perceived to not reflect the need of communities, they serve as a disincentive for cities and, local governments in general, to partner with the Census Bureau and ensure the most accurate information." Alderslade added that significant new research is required to ensure that formula grants capture and reflect needs of cities, calculate the impact of census data on

funding for local governments, support local governments' understanding of their population change and corresponding adjustments in funding.

Arturo Vargas, Executive Director of National Association of Latino Elected and Appointed Officials (NALEO) Educational Fund, stressed that an undercount of the Latino community will have a serious detrimental impact on the federal resources available to states and localities with large Latino communities. Vargas points out that according to Census Bureau estimates, in the 2000 count, the enumeration may have missed as many as one million Latinos. "Based on this undercount, Los Angeles County alone, home to 4.7 million Latinos, lost \$600,000,000 in federal funding since the last Census.

Robert Goldenkoff of the Government Accountability Office (GAO) presented testimony that struck a discordant note. He suggested that "although population counts play an important role in the distribution of federal funds, other factors, such as the design of the grant formulas, can mitigate the effect that any population changes have on funding levels. It does not necessarily follow that an increase or decrease in population size would have a proportional effect on the amount of federal assistance an entity ultimately receives." As GAO analyses have noted, Goldenkoff admitted, this generalization does not apply to all federal programs.

## ACADEMY REPORT CALLS FOR STRUCTURAL INDEPENDENCE FOR BJS

In a report released on July 10<sup>th</sup>, a panel formed by the Committee on Law and Justice of the National Academies recommended removal of the Bureau of Justice Statistics (BJS) from its current position within the Office of Justice Programs and that BJS' leaders report directly to the Attorney General or Deputy Attorney General. "BJS should position itself as a statistical *resource* to DOJ [Department of Justice], not an "arm" for the furtherance of any policy objectives," declared the report. BJS collects and disseminates statistics on crime and criminal justice in the U.S. It is currently led by Acting Director Michael Sinclair.

The committee that produced the report, *Ensuring the Quality, Credibility, and Relevance of U.S. Justice Statistics*, was chaired by the new Census Bureau Director Robert Groves, then at the University of Michigan. The panel had produced an earlier report *Surveying Victims: Options for Conducting the National Crime Victimization Survey* [NCVS] that focused on redesigning and improving BJS' centerpiece survey. The Congress and the Obama Administration have reacted positively to the earlier report providing enhanced funding for BJS to improve the NCVS.

In addition to the structural move, the panel also called for making the BJS director a fixed-term presidential appointee with the advice and consent of the Senate. The report also noted: "To insulate the BJS director from political interference, the term of service should be no less than four years." The panel reviewed what it called "major shocks" to BJS' independence in recent years, including an attempt in 2005 by Department of Justice (DOJ) officials to alter the findings presented in a statistical press release.

Examining BJS' activities, the committee found that the agency's "data collection portfolio is a solid body of work, generally well justified by public information needs or legal requirements." At the same time, the report called the NCVS BJS' "most underutilized collection, undercut by scarce resources, diminishing sample size, and - to a degree - a lack of innovation in analyzing and promoting the data."

The corrections' data series "is a good example of a well-designed and integrated system of collections," according to the report. On the other hand, "BJS' work in law enforcement is hindered by an overly restrictive focus on management and administrative issues, with little direct connection to data on crime, much less providing the basis for assessing the effectiveness of police programs."

The report also critiqued BJS' work on adjudication, suggesting however, this occurred because of the "general difficulty of measurement in the justice system." Information in state court systems, the panel found, "vary strongly in their accessibility and sophistication."

The report identified four major substantive gaps in the BJS portfolio, on which it said "the principal statistical agency of the DOJ should be able to speak authoritatively:"

- White-collar crime, including various types of fraud, public corruption, and Internet crimes;
- Civil justice matters, ranging from prosecution of nonviolent crimes to property disputes to divorce and custody arrangements;



- Juvenile justice, where the authority to collect data is in the purview of the Office of Juvenile Justice and Delinquency Prevention; and
- Contextual factors such as the interaction between drugs and crime that cut across various part of the criminal justice system.

The panel acknowledged that improved efforts in these four areas would require solving “major methodological complexities” and “increased and sustained support from Congress and the administration in terms of staff and fiscal resources.”

In addition, the panel recommended the development of a crime reporting system based on a probability sample of police administrative records. This would augment the NCVS and the FBI’s Uniform Crime Reports, but not replace them, since the committee agreed that the U.S. is “well served by having multiple indicators of crime and justice.”

For the full report go to: [http://www.nap.edu/catalog.php?record\\_id=12671](http://www.nap.edu/catalog.php?record_id=12671).

## IOM PROVIDES PRIORITIES AND RECOMMENDATIONS FOR COMPARATIVE EFFECTIVENESS RESEARCH EFFORT

On June 30, the Institute of Medicine (IOM) Committee on Comparative Effectiveness Research Prioritization released, *Initial National Priorities for Comparative Effectiveness Research* (CER), a list of 100 initial priorities for CER funding. The report is the IOM’s response to a Congressional mandate. As part of the American Recovery and Reinvestment Act of 2009 (ARRA), Congress appropriated \$1.1 billion (\$400 million to the Office of the Secretary, Department of Health and Human Services, \$400 million to the National Institutes of Health, and \$300 million to the Agency for Healthcare Research and Quality) as the preliminary investment towards providing strong federal support for CER. The ARRA funding for CER is “to evaluate the relative effectiveness of different health care services and treatment options” and “to encourage the development and use of clinical registries, clinical data networks, and other forms of electronic data to generate outcomes data.” It also charged the IOM to form a consensus committee and solicit stakeholder input to recommend a list of priority topics to be the initial focus of a new national investment in comparative effectiveness research.

At the same time, Congress established a Federal Coordinating Council for Comparative Effectiveness Research (FCCER), which also released its report on June 30 (*see story below*). Decision-makers will have to reconcile what are at times conflicting recommendations starting with two different definitions.

The IOM Committee acknowledged “CER can be very broad in scope depending on what is “compared,” how one defines “effectiveness,” and what constitutes “research.” It further recognized that “[a]though research comparing the effectiveness of health care strategies and interventions has been conducted for more than a century, the term ‘comparative effectiveness research’ has taken on new meaning in recent years.” The fundamental principle underlying the definition of CER, the committee emphasized, is that it must be relevant to decision makers, particularly patients and providers. Accordingly, after examining the various existing CER definitions, the IOM Committee came up with its own:

**“Comparative effectiveness research (CER) is the generation and synthesis of evidence that compares the benefits and harms of alternative methods to prevent, diagnose, treat, and monitor a clinical condition or to improve the delivery of care. The purpose of CER is to assist consumers, clinicians, purchasers, and policy makers to make informed decisions that will improve health care at both the individual and population levels.”**

According to the Committee, this definition “encompasses the breadth of interventions that influence the individual and public health of Americans, whether through prevention, diagnosis, or management of disease.”

The IOM Committee also stressed that “[a] balanced CER portfolio includes not only studies of those *diseases and conditions* with the greatest effects on the health of the U.S. population, but also includes rare diseases and conditions that disproportionately and seriously affect *subgroups of populations* (such as women, minorities, and different groups across the age continuum).” It also incorporated into the options for interventions CER that examines different means of delivering health care, considered to be an important determinant of quality by the Committee. It further stressed that CER priorities “should be balanced in the primary methodologies employed to conduct them: systematic reviews, database research, observational studies, and randomized trials.”

## IOM Identified CER Priorities for Funding

According to the Committee, the 100 priority areas reflect the insights of health professionals, consumer advocates, policy analysts, and others who submitted nominations through an online form that was open to any individual or organization and through presentations at public meetings. The committee received 1,268 unique topic suggestions, which it narrowed to 100 based on a set of criteria that included its charge to develop a balanced portfolio. The list reflects a range of clinical categories, populations to be studied, categories of interventions, and research methodologies. The topics are listed by quartile (groups of 25), and ranks from 1-4 with the first quartile considered the highest priority group and the fourth quartile the lowest. Within each group, however, the order of individual topics does not indicate rank. The list provides a starting point for what the report says should be a sustained effort to conduct comparative effectiveness research. Priorities include:

- Compare the effectiveness of pharmacologic and non-pharmacologic treatments in managing behavioral disorders in people with Alzheimer's disease and other dementias in home and institutional settings.
- Compare the effectiveness of school-based interventions involving meal programs, vending machines, and physical education, at different levels of intensity, in preventing and treating overweight and obesity in children and adolescents.
- Compare the effectiveness of interventions (e.g., community-based multi-level interventions, simple health education, usual care) to reduce health disparities in cardiovascular disease, diabetes, cancer, musculoskeletal diseases, and birth outcomes.
- Compare the effectiveness of therapeutic strategies (e.g., behavioral or pharmacologic interventions, the combination of the two) for different autism spectrum disorders (ASD) at different levels of severity and stages of intervention.
- Compare the effectiveness of pharmacologic treatment and behavioral interventions in managing major depressive disorders in adolescents and adults in diverse treatment settings.
- Compare the effectiveness of treatment strategies (e.g., cognitive behavioral individual therapy, generic individual therapy, comprehensive and intensive treatment) for Post-traumatic Stress Disorder stemming from diverse sources of trauma.
- Compare the effectiveness of HIV screening strategies based on recent Centers for Disease Control and Prevention recommendations and traditional screening in primary care settings with significant prevention counseling.
- Compare the effectiveness of treatment strategies for obesity (e.g., bariatric surgery, behavioral interventions, pharmacologic treatment) on the resolution of obesity-related outcomes such as diabetes, hypertension, and musculoskeletal disorders.
- Compare the effectiveness of smoking cessation strategies (e.g., medication, individual or quit line counseling, combinations of these) in smokers from understudied populations such as minorities, individuals with mental illness, and adolescents.
- Compare the effectiveness of different strategies for promoting breastfeeding among low-income African American women.

### Recommendations for a 'Robust CER Infrastructure'

In addition to providing a list of 100 initial priorities for the \$400 million provided for CER to the HHS Secretary's office under the ARRA time frame, the Committee, "based on stakeholder input and its own deliberations," made ten recommendations designed to ensure a "robust CER infrastructure . . . to sustain CER well into the future, including carrying out the research recommended in this report and studying new topics identified by future priority setting." The Committee argues that the list contained in the report is not "sufficient, however, to ensure the needs of a future in which new interventions and new diseases will mandate new priorities for CER." The Committee recommendations included:

1. Prioritization of CER topics should be sustained and continuous process, recognizing the dynamic state of disease, interventions, and public concern. Public participation in the priority-setting process is imperative to

provide transparency in the process and input to delineating research questions. A national CER enterprise should, on an ongoing basis, collate national data concerning the significance of diseases and conditions as well as information about current research gaps and redundancies related to the specific research topics under consideration.

2. Consideration of CER topics requires the development of robust, consistent topic briefs providing background information, current practice, and research status of the conditions and its interventions.
3. Regular reporting of the activities and recommendations of the prioritizing body is necessary to evaluate the portfolio's distribution, its impact for discovery, and its translation into clinical care in order to provide a process for continuous quality improvement.
4. The Secretary of Health and Human Services should establish a mechanism - such as a coordinating advisory body - with the mandate to strategize, organize, monitor, evaluate and report on the implementation and impact of the CER program.
5. The CER Program should fully involve consumers, patients, and caregivers in key aspects of CER, including strategic planning, priority setting, research proposal development, peer review, and dissemination. The Program should also encourage broad participation in CER in order to create a representative evidence base that could help identify health disparities and inform decisions by patients in special populations groups. The Committee noted that there is a significant need for better research methods. It cited as an example the need for research on how to identify and use evidence from observational studies on intervention effectiveness and how to assess a heterogeneous body of evidence. Additionally, it cited the need for new analytic techniques to evaluate the effects of bias due to confounding when assessing comparative effectiveness using large observational datasets.
6. The CER Program should devote sufficient resources to research and innovation in the methods of CER, including the development of methodological guidance for CER study design such as the appropriate use of observational data and more informative, practical, and efficient clinical trials.
7. The CER Program should help to develop large-scale, clinical and administrative data networks to facilitate better use of data and more efficient ways to collect new data to inform CER.
8. The CER Program should develop and support the workforce for CER to ensure the nation's capacity to carry out the CER mission. Important new steps include: development of a strategic plan for research workforce development, and long-term, sufficient funding for early career development including expanding grants for graduate and postgraduate training opportunities in comparative effectiveness methods as well as career development grants and mid-career merit awards.
9. The CER Program should promote rapid adoption of CER findings and conduct research to identify the most effective strategies for disseminating new and existing CER findings to health care professionals, consumers, patients, and caregivers and for helping them to implement these results into daily clinical practice.

The study was funded by the U.S. Department of Health and Human Services. The IOM Committee was co-chaired by Harold C. Sox (American College of Physicians of Internal Medicine, Philadelphia, PA) and Sheldon Greenfield (Center for Health Policy Research, University of California, Irvine).

A copy of the report may be found at: <http://www.nap.edu/catalog/12648.html>.

## FEDERAL COORDINATING COUNCIL FOR COMPARATIVE EFFECTIVENESS RESEARCH RELEASES REPORT

On June 30, the Federal Coordinating Council for Comparative Effectiveness Research (FCCER) released its *Report to the President and the Congress*. The FCCER was established in the American Recovery and Reinvestment Act (ARRA) "to foster optimum coordination of comparative effectiveness research (CER) conducted or supported by Federal departments and agencies." The legislation mandated that the FCCER submit a report containing information describing current Federal activities on CER and recommendations for such research conducted or supported from funds from ARRA.



The FCCER report specifically focused on recommendations for the \$400 million provided in ARRA for use by the Office of Secretary (OS) to fill high priority gaps that are less likely to be funded by other organizations and therefore represent unique opportunities for these funds.

For its purposes, the Council established the following definition of CER, building on previous definitions:

“Comparative effectiveness research is the conduct and synthesis of research comparing the benefits and harms of different interventions and strategies to prevent, diagnose, treat and monitor health conditions in “real world” settings. The purpose of this research is to improve health outcomes by developing and disseminating evidence-based information to patients, clinicians, and other decision-makers, responding to their expressed needs, about which interventions are most effective for which patients under specific circumstances.

- To provide this information, comparative effectiveness research must assess a comprehensive array of health-related outcomes for diverse patient populations and subgroups.
- Defined interventions compared may include medications, procedures, medical and assistive devices and technologies, diagnostic testing, behavioral change, and delivery system strategies.
- This research necessitates the development, expansion, and use of a variety of data sources and methods to assess comparative effectiveness and actively disseminate the results.”

The Council also developed prioritization criteria for scientifically meritorious research and investments, which include:

- Potential impact (based on prevalence of condition, burden of disease, variability in outcomes, costs, potential for increased patient benefit or decreased harm)
- Potential to evaluate comparative effectiveness in diverse populations and patient sub-groups and engage communities in research
- Uncertainty within the clinical and public health communities regarding management decisions and variability in practice
- Addresses need or gap unlikely to be addressed through other organizations
- Potential for multiplicative effect (e.g., lays foundation for future CER such as data infrastructure and methods development and training, or generates additional investment outside government)

In addition, the FCCER recommended a strategic framework for CER activities and investments which can be grouped into four major categories and three themes:

1. **Research** (e.g., comparing medicines for a specific condition or discharge process A to discharge process B for readmissions)
2. **Human and Scientific Capital** (e.g., training new researchers to conduct CER, developing CER methodology)
3. **CER Data Infrastructure** (e.g., developing a distributed practice-based data network, longitudinal linked administrative or Electronic Health Record (EHR) databases, or patient registries)
4. **Dissemination and Translation of CER** (e.g., building tools and methods to disseminate CER findings to clinicians and patients and translate CER into practice)

The themes are: 1) **conditions** (e.g., cancer, heart failure), 2) **patient populations**, and 3) **type of intervention** (e.g., devices, behavioral change, and delivery system).

FCCER conducted an inventory of CER and data infrastructure to help identify gaps in the current CER landscape. The first draft of this inventory is included in the report. The Council cautions, however, that evaluation of current activities and the identification of gaps in order to inform priority-setting must be iterative and continue in the future. It recommends that the primary investment of the ARRA funding “should be data infrastructure.” Secondary areas of investment are dissemination and translation of CER findings, priority populations, and priority types of interventions.

The report stressed the need for “focused attention” on priority populations, including racial and ethnic minorities, individuals with disabilities, children, persons with multiple chronic conditions, and the elderly, not only because of their under-representation in current research but also because the increased disease burden and health disparities faced by these groups. According to the report, multiple research challenges exist for priority populations, including the need for increased diversity in research populations, expanded data sources for evidence-based studies in diverse populations, enhanced collection of racial and ethnic health data, a better understanding of the effectiveness of interventions in the context of comorbidities, and a greater focus on implementation research.

## Challenges for Federal CER efforts in the near Term

FCCER, like the IOM, also noted a number of clear issues and challenges for Federal CER efforts in the near term. According to the Council, these issues reflect both the fact that comparative effectiveness research remains in its infancy and that it must be seen as a continuous and iterative process that needs to constantly evolve based on the changing needs of the patient. These challenges include:

- **Listening and Engaging Stakeholders** - It is critical that the Council continues to have a patient-centered focus going forward.
- **Continued Coordination** - Coordination will need to become embedded across the Federal Government. As the government makes investments in CER, the Council calls for putting a mechanism in place to track and coordinate investments and avoid duplication of efforts.
- **Building Scientific and Human Capital** - To maximize the potential benefit of investments in CER, more researchers trained in the applicable research methods and further development of these methodologies is needed. This presents both a short-term and a long-term challenge.
- **Maintaining Gains** - These investments represent only the beginning of CER efforts. New research findings will need dissemination and successful translation of evidence efforts should be expanded. New databases and data sets need to be maintained and kept current, and the catalog of Federal activities and data infrastructure in CER needs to become a living document.
- **Building Leverage** - The government needs to find innovative ways of partnering with the private sector to leverage government investments and help private-sector investment better serve patients.
- **Keeping it Current** - There are no widely accepted and applied common standards or approaches for periodically re-evaluating CER to ensure that previous conclusions still hold. A system must be developed to ensure that the conclusions from CER remain valid over time.

### Next Steps

The legislation requires the development and submission of a strategic plan by July 30, 2009 from the Secretary of Health and Human Services. According to the Council, the steps leading to this integrated strategy and spending plan include: integrating the IOM and Council's strategic recommendations and leveraging the investments, resources, and capacity identified through the initial inventory effort; providing more specific recommendations for a portfolio of initiatives for all of HHS' Recovery Act funds within the framework outlined in the report; defining metrics for evaluating success; coordinating the submission of CER Recovery Act spending plans to ensure that they cover the gaps in CER outlined in the Council's report.

The Council is also required to provide an annual report of its activities and recommendations regarding the infrastructure needs, organizational expenditures, and opportunities for better coordination of CER by relevant Federal department and agencies. The first annual report will likely appear in June 2010. A copy of the current report can be viewed at <http://www.hhs.gov/recovery/programs/cer/cerannualrpt.pdf>.

## MOBILITY, CHILD DEVELOPMENT, AND SCHOOL ACHIEVEMENT FOCUS OF ACADEMIES' BOARD

The National Academies' Board on Children, Youth and Families is examining the impact of frequent mobility on children, school districts, and communities. On June 29 and 30, a planning committee chaired by Steve Raudenbush of the University of Chicago held a workshop on the topic. The Foundation for Child Development, the W.K. Kellogg Foundation, and the Annie E. Casey Foundation sponsored the sessions.

Ann Masten, Institute of Child Development at the University of Minnesota and a former COSSA Board member and congressional seminar speaker, provided an overview of the themes and questions for the committee. Does mobility disrupt or enhance development? Does timing matter - moving in elementary schools vs. moving before the senior year of high school? What are the risk factors and protective processes involved in helping students? How do we promote academic resilience in students who move frequently? School mobility not only affects students who move, but also schools, teachers and classmates, caused by the frequent disruption of students leaving and coming into the classroom.

According to Eric Hanushek, Stanford University and the Texas School Project at the University of Texas-Dallas, one-sixth of families will change their residence each year, and low-income families have higher rates of mobility. Frequent moves can adversely affect a child in many ways including the lack of stability and consistency, the severing

of relationship bonds with friends and teachers, as well as the underlying reason behind the move, particularly if it was a negative move. Parents often move due to economic reasons, such as job loss, or the inability to pay rent or a mortgage. They may also move because of domestic violence issues. One of the major difficulties facing researchers and policymakers is to disentangle the affects of mobility from the other risk factors associated with low socioeconomic status.

In a meta-analysis of studies investigating the affect of mobility on school success, Arthur Reynolds of the University of Minnesota suggested there is a relationship between frequent moves and poor student performance, with the largest estimated impact on dropping out of school. However, according to Reynolds, a lot more work is necessary to gauge the longer term effects of mobility.

Although school mobility is often a result of decisions made by parents, it is not always in their hands. School districts can affect mobility through school closings or district reshuffling. Mobility can also occur as a result of other non-parental factors such as expulsion, suspensions or natural disasters.

In addition, not all school mobility leads to negative outcomes. Parents' dissatisfaction with their child's school often leads to proactive mobility. By moving to better neighborhoods or enrolling the child in charter or private schools, parents hope to improve their academic performance.

As Sandra Newman, head of the Institute of Public Policy at Johns Hopkins University, noted, U.S. housing policy encourages mobility, especially for low-income families. The Housing Voucher program provides opportunities for families to move to better neighborhoods and better schools. However, families with young children who use the program, according to Newman, do not stay very long, less than two years, in their new housing. David Johns from the Office of Sen. Edward Kennedy (D-MA) told the panel about legislative activities, particularly the development of comprehensive programs that will help overcome the risk factors that prevent a child, whether his family is mobile or not, from getting a good education.

The panel also had an interest in data sources for looking at the problem. Don Hernandez of the University of Albany, SUNY reviewed for the committee the Panel Study on Income Dynamics, the National Longitudinal Study of Youth, and the Early Childhood Longitudinal Study, Kindergarten-First Grade Waves. He explained that they each provide mobility measures and child outcome measures over lengthy periods of time that are useful in examining the topic. However, he indicated, these sources are limited by their small samples for many specific race-ethnic and immigrant groups.

Greta Gibson of the University of California, Santa Cruz, argued for using qualitative data to supplement the longitudinal data series and Dennis Culhane of the University of Pennsylvania advocated using administrative data as a ready source of information on the variables under consideration in the discussion.

The panel will provide a summary of the workshop and hopes to explore the topic further in a full-blown National Academies' study.

## COSSA BOARD MEMBER DAVID WEISBURD ANNOUNCED AS 2010 STOCKHOLM PRIZE IN CRIMINOLOGY WINNER



The Swedish Ministry of Justice has announced that the 2010 Stockholm Prize in Criminology will go to David Weisburd. Weisburd holds dual appointments as the Walter E. Meyer Professor of Law and Criminal Justice at the Hebrew University Institute of Criminology in Jerusalem and Distinguished Professor and Director of the Center for Evidence-Based Crime Policy at George Mason University. He also represents the American Society of Criminology on the COSSA Board of Directors and is President of the Academy of Experimental Criminology.

The prize is given for outstanding achievements in criminological research or for the application of research results by practitioners for the reduction of crime and the advancement of human rights. The 2009 winners were John Hagan of Northwestern University and Eugenio Raúl Zaffaroni of the Supreme Court of Argentina (see Update, [February 9, 2009](#)). A previous winner of the five-year old prize was Alfred Blumstein of Carnegie Mellon University, a former COSSA President.

Stockholm University Professor Jerzy Sarnecki and Cambridge University Professor Lawrence Sherman chaired the international jury that selected Weisburd. That jury cited Weisburd's series of experiments showing that intensified police patrol at high crime "hot spots" does not merely push crime around. This work on spatial displacement, according to the jury, was the most influential single contribution of his wider body of work that has helped to bridge the gap between criminology and police practice. This line of research encourages police around the world to concentrate crime prevention efforts at less than five percent of all street corners and addresses where over fifty percent of all urban crime occurs, yielding far less total crime than with conventional patrol patterns. Weisburd's research has also produced evidence to demonstrate that the introduction of a prevention strategy in a small, high-crime place often creates a "diffusion of benefits" to nearby areas. This leads to reduction of criminal activity in the immediate zones around the high-crime target place.

Weisburd, the jury also noted, has been a leader among the growing number of criminologists whose evidence shows how the application of research findings can help to reduce not only crime, but also the unnecessary impositions on public liberty from policing activities that do not address a predictable crime risk.

The prize winner's other research encompasses a wide range of criminological questions, from the causes of Jewish settler violence in Israel to the punishment of white-collar crime in the US. It also includes methodological and statistical work, such as the unexpected loss of power to test hypotheses as sample sizes increase because the samples become more diverse.

In addition to his research and teaching on two continents, Weisburd is the editor of the *Journal of Experimental Psychology*, Co-Chair of the Campbell Collaboration Crime and Justice Group, and a Fellow of the American Society of Criminology.

Weisburd will receive the prize next June 15<sup>th</sup> in Stockholm in conjunction with the annual Stockholm Criminology Symposium that engages police and criminologists from around the world.

## NSF SEEKS PROPOSALS IN CREATIVE INFORMATION TECHNOLOGY

In its ever-increasing effort to encourage cross disciplinary investigations and cooperation, the National Science Foundation (NSF) has announced a solicitation for proposals in what it is calling Creative Information Technology. This program seeks proposals for projects, according to NSF, "that explore synergistic cross disciplinary research in creativity and computer science and information technology. Information technology is playing an increasing role in extending the capability of human creative thinking and problem solving. The study of creativity and computing as a way to advance computer science and information technology, cognitive science, engineering, education, or science can lead to new models of creativity and creative computational processes, innovative approaches to education that encourage creativity, innovative modes of research that include creative professionals, and new technology to support human creativity."

NSF has laid out research areas that can serve as guidelines for proposed projects. These are:

*Understanding Creative Cognition and Computation.* Research in this area develops or applies cognitive models that serve as inspiration for computational models of creativity, support for human creativity, or approaches for educating people to be more creative. This research is typically done by adopting or adapting a model of cognition and evaluating its creative performance in different contexts, or developing a new model of creativity based on empirical or ethnographic studies. The emphasis in this area is the development of new models of cognition and computation that explain or simulate creativity and how these models open up new research areas in computing and cognitive science.

*Creativity to Stimulate Breakthroughs in Science and Engineering.* This area considers the role and performance of creative professionals in developing new technologies, discovering new patterns in information, and in finding new ways of seeing, knowing, and doing computing, science and engineering. This area seeks to foster research that is conducted with groups of people from different backgrounds in which the creative synergy is focused on a specific context, problem, or perceived need. The result of this research is a new product, new model, or new area of research. The evaluation of the results of this kind of research does not follow directly from existing metrics or performance criteria and therefore may need to redefine relevant performance criteria.

*Educational Approaches that Encourage Creativity.* This area considers a broad range of approaches to learning that encourages creativity: multi-disciplinary teaching and learning, design studio environments, skills development through making and doing, serious games, and open-ended problem-based learning. This area includes the

development and evaluation of innovative computational environments for learning that reward creativity leading to transformative changes in curriculum objectives and structure.

*Supporting Creativity with Information Technology.* This area develops new software and interaction design to support people in being more creative and evaluates their performance through user studies either in controlled environments with empirical studies or in the context of a complex problem or situation with ethnographic studies. The emphasis in this area is the development of new computing environments where the environment itself may be a creative product, and the environment is intended to support people in their creative activities.

NSF will consider both pilot and major projects under this solicitation. *Pilot Projects* typically have a single PI and a single undergraduate or graduate student and last for one to three years. A pilot project identifies a synergy from understanding creativity in a specific context in which a computing environment has the potential to lead to innovative and creative advances in one or more disciplines. These projects will start with a set of objectives that are consistent with the CreativeIT program and will pursue a methodology, including a plan for evaluation that is consistent with the claims or objectives in the proposal. The outcomes of a Pilot Project may be an innovative solution, model, or area of research that will benefit from further development.

*Major Projects* have one or more PIs and multiple undergraduate and graduate students for a duration of three years with a maximum budget of \$800,000. A Major project brings together a group of people to develop a synergistic effect that can transform our understanding of models, computing environments or education relevant to CreativeIT. While the research may use a design approach in which the specifics of the problem and solution may change during the life of the project, the overall objectives and methods are well defined. This type of project is well founded on previous research in the individual or combined disciplines involved in the project.

NSF is also encouraging synergies with already existing programs including:

*Behavioral and Cognitive Sciences:* The Creative IT program encourages PIs to consider synergies with research focused on advancing neural, developmental, cognitive, and social theories of human creativity, particularly with respect to how scientists and engineers produce new discoveries and innovations. Creativity is a primary driver of progress and transformation in our nation's science and engineering disciplines. Thus a better understanding of human creativity, using both empirical and computational research methods, promises to inform tool development as well as policy development aimed at supporting transformative progress in science and engineering. The cognizant program manager in Behavioral and Cognitive Sciences is Betty Tuller: [btuller@nsf.gov](mailto:btuller@nsf.gov).

*Science of Science and Innovation Policy:* The Creative IT program encourages PIs to consider synergies with research focused on developing usable knowledge and theories of creative processes and their transformation into social and economic outcomes. Characterizing the dynamics of discovery and innovation is important for developing valid metrics, for predicting future returns on investments, for constructing fruitful policies, and for developing new forms of workforce education and training. The cognizant program manager in the Science of Science and Innovation Policy program is Julia Lane: [jlane@nsf.gov](mailto:jlane@nsf.gov).

*Education and Workforce in Computing:* The CreativeIT program encourages PIs to consider new approaches that encourage creativity in learning computing subjects at all levels: K-12, undergraduate, graduate and workforce development. Research related to creative learning environments that increase the diversity of the workforce and broaden participation in all levels of computing education are encouraged. The cognizant program managers in Education and Workforce in Computing are Joan Peckham: [jpeckham@nsf.gov](mailto:jpeckham@nsf.gov) and Anita La Salle: [alasalle@nsf.gov](mailto:alasalle@nsf.gov).

NSF expects to make an estimated 15 to 20 awards based on an anticipated budget of \$7 million. **The Full Proposal Deadline is October 13, 2009.**

For the full solicitation go to: [http://www.nsf.gov/pubs/2009/nsf09572/nsf09572.htm?govDel=USNSF\\_25](http://www.nsf.gov/pubs/2009/nsf09572/nsf09572.htm?govDel=USNSF_25) .

## NIDCR TO SUPPORT SMALL RESEARCH GRANTS FOR DATA ANALYSIS AND STATISTICAL METHODOLOGY

The National Institute of Dental and Craniofacial Research (NIDCR) seeks to support meritorious research projects that involve secondary data analyses or statistical methodology using existing dental or craniofacial database resources. The Institute supports an extensive portfolio of clinical trials and large-scale epidemiologic research projects wherein numerous data collection activities are required to meet each project's specific aims.



The Small Research Grants for Data Analysis (R03) program is designed to provide investigators with the support necessary to conduct such secondary data analyses or develop statistical methods for analyzing oral health data utilizing existing database resources. Applications may be related to, but must be distinct from, the specific aims of the original data collection. Grant recipients may use this to develop new statistical methodologies or to test new hypotheses using existing data. Hypothesis-generating research in the absence of hypothesis testing will be considered only if carefully described and justified. This award may also support secondary analyses of data derived from other sources.

The funding opportunity is designed to provide up to \$100,000 annual in direct costs for up to two years. NIDCR anticipates that the size and duration of each award will vary. The total amount awarded and the number of awards will depend upon the numbers, quality, duration, and costs of the applications received.

Applicants should consider the relevance of their proposed analyses to NIDCR programs and priorities as described in "NIDCR Strategic Plan" which is available at <http://www.nidcr.nih.gov/AboutNIDCR/StrategicPlan/>.

For more information on applying see <http://grants.nih.gov/grants/guide/pa-files/PAR-09-182.html>.

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