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COSSA Washington Update

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SENATE SET TO PASS ECONOMIC RECOVERY LEGISLATION

Following days of debate and negotiations, the U.S. Senate is ready to pass its version of the economic recovery or stimulus legislation. On February 9, the Senate is expected to invoke cloture to cut off debate, with a final vote scheduled for February 10. The bill will then go to conference with the House, which passed its bill on January 28, to reconcile differences between the two versions.

The Senate version was hammered out in negotiations with the White House, the Senate leadership, and a group of Senators led by Susan Collins (R-ME) and Ben Nelson (D-NE). The latter insisted on reducing the cost of the stimulus in order to support the bill.

The Senate package includes \$1.2 billion for the National Science Foundation (NSF), of which \$1 billion would go for Research and Related Activities (R&RA), \$50 million for Education and Human Resources (EHR), \$150 million for Major Research Facilities and Equipment, and \$2 million for the Inspector General (IG). The House version has \$3 billion for NSF, of which \$2.5 billion would go to R&RA, \$100 million for EHR, \$400 million to the Major Research Facilities and Equipment account and \$2 million for the IG.

For the National Institutes of Health (NIH), the Senate accepted an amendment sponsored by Sens. Tom Harkin (D-IA) and Arlen Specter (R-PA) to add \$6.5 billion to the provision that was already increasing NIH by \$3.5 billion. Thus, a \$10 billion boost for health research and facilities. The House version has a \$3.5 billion increase. The \$1.1 billion the House provided for healthcare effectiveness research conducted by the Agency for Healthcare Research and Quality (AHRQ), and NIH is in the Senate version as well.

The Senate matches \$1 billion for the Census Bureau in the House bill for the 2010 decennial count. Who in the Administration will oversee the spending of these funds has become an issue. President Obama has nominated Sen. Judd Gregg (R-NH) to lead the Commerce Department, where the Census Bureau is bureaucratically housed. A number of groups noting Gregg's activities making life difficult for those leading the 2000 Census objected to his having any supervision of the upcoming decennial count. On February 5, the White House announced that it would take charge of the 2010 Census. This has led other groups to howl that the White House was politicizing the Census. In addition, Rep.

Carolyn Maloney (D-NY) has introduced legislation to remove the Census Bureau from the Department of Commerce and make it an independent agency. Stay tuned!

The Senate included funding for the new competitive grants program at the U.S. Department of Agriculture. The early version of the legislation gave the new Agriculture Food and Research Initiative (AFRI) an additional \$100 million, but the Collins-Nelson compromise reduced these funds to \$50 million. The House did not provide any funding for AFRI.

The \$250 million the House included for Statewide Data Systems to help states analyze student data is not in the Senate version. Neither is the \$3 billion prevention and wellness initiative found in the House bill.

Almost all funds in the bill will remain appropriated until September 30, 2010, giving agencies about 20 months to get the money out the door.

The White House would still like to see the bill on the President's desk before Congress leaves for its President's week recess on February 13. This will force the two Houses of Congress to push very hard to reach an agreement very quickly.

NSF REPORTS DOWNWARD TREND IN FEDERAL R&D FUNDING IN FY 2008

As is their responsibility, the National Science Foundation's (NSF) Science Resources Statistics division, led by Lynda Carlson, reports each year on funding trends for Federal obligations for research and development (R&D). The numbers in its latest report for FY 2008 are not encouraging.

The data indicate that such funding decreased from \$116.7 billion in FY 2007 to \$113.2 billion in FY 2008. These are dollars allocated for research and development and R&D facilities and fixed equipment. The FY 2008 total is down 7.3 percent, in constant dollars, from FY 2005. From FY 2001-05, Federal obligations increased by 22.2 percent in real terms.

Just looking at the funds for research, the FY 2008 figure of \$54.7 billion is reduced by 2.5 percent in constant dollars from the previous year. Funding also declined by an estimated average annual rate of 2.1 percent between FY 2004 and FY 2008. Between FY 1996 and FY 2003, these funds increased at an average annual rate of 6.9 percent. The report suggests that "these trends are largely driven by funding from the Department of Health and Human Services (HHS), which account for more than half of total federal research support." From FY 1998 to FY 2003 the budget of the National Institutes of Health (NIH) doubled, since then its budget has been relatively flat (although that may soon change, see other story).

Examining Federal science agencies, the NSF led in average annual increases, 4.8 percent in constant dollars, between FY 2004 and FY 2008. Also, in FY 2008 the Department of Energy's (DOE) research budget surpassed funding for research at the Department of Defense. That disparity will also most likely widen in the near future with the new Administration's plan to transform DOE to focus on alternative energy research and production.

According to the NSF report, in FY 2008 the Federal government obligated \$1.758 billion for the psychological sciences and \$1.146 billion for the social sciences. Almost all of the support for psychology comes from HHS; whereas the social science funding is spread across HHS, NSF, Agriculture, and other agencies such as the Department of Education.

The full report is available at <http://www.nsf.gov/statistics/infbrief/nsf09309/>.

INSTITUTE ON AGING COUNCIL APPROVES REPORT ON BEHAVIORAL AND SOCIAL RESEARCH DIVISION

On January 28, the National Institute on Aging's Advisory Council discussed and approved a recent report reviewing the Institute's Behavioral and Social Research Program (BSR) led by Richard Suzman. A Committee chaired by John Cacioppo of the University of Chicago and Alan Garber of Stanford University produced the report. The Committee included two Nobel Prize winners in Economics - Daniel Kahneman of Princeton and Daniel McFadden of the University of California, Berkeley - and former COSSA Board member James Jackson of the University of Michigan.

The Committee also formed subgroups to focus on nine research topic areas. They were:

- 1) Genetics - chaired by James Vaupel of Duke University and the Max Planck Institute for Demographic Research;
- 2) Demography, social epidemiology, sociology of aging - chaired by Samuel Preston of the University of Pennsylvania;
- 3) Disparities - chaired by James Smith of the RAND Corporation;
- 4) Behavioral economics and community interventions - chaired by Lisa Berkman of Harvard;
- 5) Cognitive interventions - chaired by Cacioppo;
- 6) Medicare, health services, and long term care - chaired by Garber;
- 7) Psychology of Aging - chaired by Laura Carstensen of Stanford University;
- 8) Satellite accounts - chaired by Garber; and
- 9) Social neuroscience and neuroeconomics - chaired by Cacioppo.

The Committee concluded that BSR is “creative, dynamic, and takes judicious risks.” It is a model of interdisciplinarity within the National Institutes of Health (NIH), the report noted, for supporting multilevel research that covers genetics through intervention and population research; from “individuals to societies.”

BSR, the Committee reported, also gives regular consideration to “biological measures conjoined with traditional social, behavioral, and economic measures” through its support of biodemography and neuroeconomics. It does this by managing awards that totaled \$161.9 million in FY 2007.

Since 2004, when BSR last underwent review, it has had many notable accomplishments, according to the report. “BSR has enhanced its leadership in the development of new scientific areas, continued strong leadership in the development of powerful new data sets and collaborations with other Federal agencies, and improved its relationships with the NIA Division of Neuroscience.”

Among its recommendations, the Committee agreed that BSR should promote studies that adopt a life course perspective. The report also advocated that the micro- and macro-economy of population aging should remain central to BSR’s portfolio. At the same time, the Committee endorsed BSR’s expressed intention to revitalize its social demography, epidemiology, and sociology portfolios, so that we can better understand how social networks and kinship systems impact healthy behavior and healthy aging.

While noting that “much of the research to date on health disparities has been descriptive,” the Committee proposed enhancing that research by using conceptual frameworks, such as a life course perspective. The Committee also encourages more international comparative health research with greater attention to data sharing plans.

The Committee suggested that BSR establish a Board to advise it on “how to prioritize the intervention and translation products that should be targeted.” It also urged that BSR develop a better way to review interdisciplinary research applications.

With regard to training, the Committee endorsed mechanisms that would attract the best and brightest researchers to investigate age-related issues and train them in the multidisciplinary body of knowledge and methodological skills required. These would include: intensive two to four week sessions with researchers from different disciplines; supplements to grants that would add postdoctoral fellows to encourage greater interdisciplinary collaboration; and outreach sessions and workshops at professional conferences.

NIA Director Richard Hodes thanked the Subcommittee and agreed to issue a report on the interdisciplinary review process, which he attributed to the lack of available reviewers.

For more information go to:

<http://www.nia.nih.gov/ResearchInformation/ExtramuralPrograms/BehavioralAndSocialResearch>.

JOHN HAGAN AND ARGENTINE JUDGE WINNERS OF CRIMINOLOGY PRIZE

On February 5, Professor Lawrence Sherman of the University of Pennsylvania and Cambridge University, announced the winners of the 2009 Stockholm Prize in Criminology. This year's recipients are John Hagan, Co-Director of the Center for Law and Globalization, and John D. MacArthur Professor of Sociology and Law at Northwestern University, and Raul Eugenio Zaffaroni, a Justice on the Supreme Court of Argentina and Professor Emeritus of the Department of Criminal Law in the University of Buenos Aires. They were honored for field research and criminological theory on the causes and prevention of genocide.

According to the announcement, Hagan, who is also Senior Research Fellow at the American Bar Foundation in Chicago, and University Professor of Law and Sociology Emeritus at the University of Toronto, "pioneered the application of advanced crime measurement techniques to the study of genocide in his empirical work on violence in Darfur and in the Balkans." He used "systematic methods of estimating crime volumes from victimization surveys administered in collaboration with the American Bar Foundation and the US State Department." He and his colleagues "found substantial under-counting of murders in previous estimates." Their more advanced demographic methods produced evidence of murders in the hundreds of thousands: between 200,000 and 400,000 homicides, over four times more than previous estimates.

Zaffaroni pioneered the explanation of genocide on the basis of criminological theory. He also has developed criminological theory as the basis for assessing proposals for the prevention of any mass killings through state power, and for a critique of a purely retributive response. "Analyzing situations as diverse as Argentina's own governmental mass murders, the European Holocaust, slavery and colonial exploitation of workers under lethal workplace conditions, Zaffaroni showed how criminological theory of 'techniques of neutralization' observed among juvenile delinquents also fits the rhetorical patterns of governments creating 'enemies' as targets for genocide," the announcement declared. In addition, "his analysis of the deep causes of genocide encompassed and anticipated later explanations focusing on competition for scarce resources such as water and arable land." Furthermore, "his critique of criminal law as an inadequate means of preventing genocide raises profound questions about the role of the retributive model of international justice in the aftermath of genocide." Zaffaroni's theory, the announcement concluded, points to the likely benefits of 'secondary prevention,' minimizing the effects of such crimes by repairing harm, restoring families and communities, and developing far more intense therapeutic and conciliatory models to break the cycle of blood feuds and vengeance that can last for centuries.

The prize, administered under the aegis of the Swedish Ministry of Justice, is awarded 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 winners are chosen by an independent international jury consisting of members representing both practitioners and academics. Previous winners include: Al Blustmein, former COSSA President and Carnegie-Mellon University professor; Terrie Moffitt of the University of London and Duke University; David Olds of the University of Colorado; and John Braithwaite of Australian National University.

Hagan and Zaffaroni will receive their prizes on June 23 in a banquet that occurs in conjunction with the Stockholm Crime Symposium.

For more information about the prize and the symposium go to: <http://www.criminologyprize.com/extra/pod>.

BRIEFING REVIEWS RESEARCH ON CRIME

On February 3, the George Mason University Center for Evidence Based Crime Policy, directed by COSSA Board member David Weisburd, presented a briefing on Capitol Hill on "Reducing Violent Crime at Places: The Research Evidence." In a series of brief talks criminologists discussed a variety of research findings indicating the importance of geographic factors on strategies for coping with violent crime.

Stephen Mastrofski of George Mason presented the data on violent crimes - the U.S. as more violent than most of the rest of world; the general decline of crime in recent years; the masking by that data of increases in certain places; and the concentration of crime at block levels in certain neighborhoods. He also noted the importance of new tools such as Geographic Information Systems (GIS) that allow police and researchers to highlight the importance of place in crime fighting.

Mastrofski's George Mason colleague Cody Telep, using the Campbell Colloquium technique of examining scientifically valid evaluations of interventions, discussed "what we know works for law enforcement." He concluded that "police can be most effective in reducing violent crime when they are proactive, use specific strategies, focus on small places (or groups operating in small places), and develop tailor-made solutions that make use of a careful analysis of local problems and conditions." In most cities with crime problems, Telep related, only about five percent of the places within a city have violence, so that targeting these areas "can significantly reduce a city's overall violent crime rate." Most effective, he suggested, are combining the geographic targeting with multi-agency, focused interventions that would include social services.

Examining Camden, NJ (the second most violent city in the country after New Orleans), Jerry Ratcliffe of Temple University found that drug-dealing, gang-controlled street corners are best dealt with by a "place-based strategy of denying good drug-dealing locations to all gangs." Earlier police interventions had stressed focusing on eliminating single gang activity, which according to Ratcliffe "may actually create a local power vacuum and unintentionally create disputed corners," where gangs fight it out leading to much more violence.

Many cities have instituted Business Improvement Districts (BIDs) to help improve public safety. John MacDonald of the University of Pennsylvania investigated whether these BIDs actually work in reducing crime. Examining the multi-BID environment of Los Angeles, MacDonald and his colleague, Ricky Blumenthal of RAND, found that the BIDs "have marginal effects on reducing total violent crime rates, and are associated with significantly larger than expected reductions in robbery rates." These effects are "strongest in BIDs that place a greater focus on public safety or have undergone significant economic development."

"Pulling Levers" Strategy Shows Promise; No Causality Between Disorder and Violence

Anthony Braga of Harvard and the University of California, Berkeley, related the impact of the "Pulling Levers" strategy to help prevent gang violence. Pioneered in Operation Ceasefire in Boston, this strategy involves interventions that "focus criminal justice, social service, and community attention on a small number of chronically offending gang members responsible for the bulk of urban crime problems." There have been promising results in a number of jurisdictions. David Kennedy of the John Jay College of Criminal Justice described the efforts using this strategy in High Point, NC to the National Institute of Justice research conference last year and they were also presented to the Senate Judiciary Committee last September (see Update, [July 28, 2008](#) and [September 22, 2008](#))

Project Safe Neighborhoods (PSN) was launched by the Department of Justice in 2001 to reduce gun violence at the local level. Tim Bynum and Edmund McGarrell, both of Michigan State University, with support from the National Institute on Justice (NIJ), reported on how well it is working. Coordinated by the 94 U.S. Attorney's Offices, PSN includes significant participation by local and state law enforcement, prosecutors, correctional agencies, as well as community residents and groups, and involves research-based problem solving, multi-agency and community partnerships, focused deterrence, communication of the deterrence message, and attempts to link potential offenders to social support. Bynum declared that "highly focused and intensive intelligence-driven enforcement and prosecution activities can be effective in the reduction of gun crime." McGarrell indicated that data from U.S. cities of 100,000 or more people revealed that "PSN target cities in high dosage districts experienced a 13.1 percent decrease in violent crime," compared to a 7.8 percent increase in non-target, low dosage cities.

Laura Dugan of the University of Maryland and a former COSSA Seminar speaker focused on intimate violence against women. Using data from the National Crime Victimization Survey (NCVS), which Dugan noted is the only way to get national data on this topic, she found that risk factors of violence - single parenthood, frequent household moving, being separated - are more likely to lead to spousal violence than stranger violence. Protective factors - owning your own home - do not necessarily help against spousal violence. Dugan concluded that "because the victim has a private relationship with the offender, successful intervention usually depends on the victim's willingness to seek help."

Rudy Giuliani and Bill Bratton readily embraced George Kelling's notion of "Broken Windows" policing during their tenures as Mayor and Police Commissioner of New York City as an effective way to fight crime. Targeting attention on minor crimes and nuisance behaviors, they believed that eliminating such problems would reduce more serious crimes. Such zero-tolerance policing has been copied around the world. Sue-Ming Yang of Georgia State University wanted to explore empirically whether this strategy actually works. Examining longitudinal data bases in Seattle, WA from 1989-2004, she discovered that "despite the fact that disorder and violence seem to cluster geographically, places with disorder do not necessarily have violence problems." In addition, she declared, there does not appear to be any causality between disorder and violence.

Closing the session, Thomas Feucht of the National Institute of Justice asked: "How do we more effectively and persistently harness together the research enterprise and the work of practice and policy?" One way, he suggested, is that researchers need to listen to practitioners to help them understand "how something works." "We need," he

declared, “a taxonomy of evidence” that clearly distinguishes and values the many types of research evidence. In addition, he noted, citing a paper by Akiva Lieberman, now at the National Institute on Drug Abuse, policy makers should not only implement policy that draws on evidence, but should seek policies that can *generate* evidence. Since most policies are unlikely to be entirely effective, Feucht concluded, there are always opportunities to improve these policies based on research.

For further information go to <http://gemini.gmu.edu/cebcp>.

HUNGER IN AMERICA REDUX

On, February 6, the Center for American Progress, whose President John Podesta led the Obama Transition Team, held a discussion on food insecurity, “All You Can Eat? How Hungry is America in Good Times and Recession?”

From December 2007 to December 2008, the cost of food rose by 6.6 percent. For low income families the cost was even greater. According to the Thrifty Food Plan, the Department of Agriculture’s estimate of what it would cost to purchase a minimally adequate diet, the cost of food rose by 8.3 percent in the same period.

In 2007, 36 million people, including 12.4 million children lived in households that were struggling with hunger. That number rose from 33.2 million in 2000, and 35.5 million in 2006. Households with very low food security rose from 8.5 million in 2000 to 11.1 million in 2006, and then again to 11.9 million in 2007. The U.S. Conference of Mayors cited a survey in which 20 of the 21 cities reporting indicated growth in the number of requests for emergency food assistance in 2008.

Joel Berg, executive director of the New York City Coalition Against Hunger, said that while we don’t have people dying in the streets of starvation like in some countries, we do have people who are forced to make hard decisions. People sometimes have to choose between food and medication, and/or between food and rent. In addition, people are forced to ration their food, or to choose more filling but less nutritious food options.

The Thrifty Food Plan serves as the government’s basis for Food Stamp allotments. However, studies have shown that the benefits that people receive based on the plan are not sufficient. Jim Weill, President of the Food Research and Action Center (FRAC), called the Thrifty Food plan “unrealistic.” FRAC points out that the plan assumes that shoppers know what food is most nutritious, and that they know how to choose the least expensive but still healthy foods. The plan also makes assumptions that people have the time to prepare food from scratch, or access to transportation or grocery stores that will allow bulk buying.

President Barack Obama and Vice President Joseph Biden have proposed several efforts to end hunger, including ending childhood hunger by 2015, increasing the Supplemental Nutrition Assistance Program (SNAP), formerly the Food Stamp program, and expanding the Earned Income Tax Credit. There are significant funds in the economic recovery bills for the program.

Berg also contended that one way to help eliminate childhood hunger would be to expand the free breakfast program and make it universal, free for all children regardless of household income. He cited evidence that child nutrition programs improve the quality of early childhood education, improve school achievement, and help reduce obesity.

FRAC, Weill noted, believes there are three key budgetary and legislative steps that need to happen to reduce food insecurity: 1) include a SNAP benefit boost and other nutrition initiatives in the stimulus recovery legislation; 2) include in the 2010 budget a significant funding boost that will assure a strong child nutrition reauthorization bill in 2009; and 3) start investing more funds to achieve President Obama’s goal to eliminate childhood hunger by 2015.

Weill concluded that it is “insane and morally bankrupt for a nation as wealthy as ours has people who go hungry.”

NIH PROJECTS, FUNDING DETAILS AVAILABLE FOR PUBLIC VIEWING ON WEBSITE

As part of a wider effort by the National Institutes of Health (NIH) to enhance public accessibility to reports, data, and analyses of its research activities, the agency recently launched its new Web site called RePORT (the Research Portfolio Online Reporting Tool, <http://report.nih.gov/rcdc>). RePORT is designed to give the public a single access point to quickly and easily find data, including information on NIH expenditures and the results of NIH-supported research.

In January, the agency added the new Research, Condition, and Disease Categorization (RCDC) reports to the RePORT site. RCDC is a computerized process the NIH uses at the end of each fiscal year to sort and report the amount it funded in each of 215 historically reported categories of disease, condition, or research area, including social and behavioral science research, and basic behavioral and social science research. RCDC results will show the amount NIH funded in each of the same 215 categories it has historically reported to Congress and the public. The results will be accessible through the RePORT Web site. Each category will provide detailed information, including for the first time a complete list of all NIH-funded projects included in that category. Links to patents and publications associated with each project will eventually become available.

The RCDC process does not reflect the entire NIH research portfolio and budget. RCDC does not affect the way NIH funds research or determines its research priorities. It will not change the way NIH makes awards throughout the year for medical research or the way researchers apply for grants. For those unfamiliar with the workings of the NIH, the agency explicitly states on the website that the "NIH does not expressly budget by category. The annual estimates reflect amounts that change as a result of science, actual research projects funded, and the NIH budget. The research categories are not mutually exclusive. Individual research projects can be included in multiple categories so amounts depicted within each column of this table do not add up to 100 percent of NIH-funded research."

The RCDC process was initiated at the request of Congress as part of the NIH Reform Act of 2006 to provide consistent and transparent NIH research funding information. The previous reporting process did not allow for uniform results and at times led to wide variability in the way research categories were coded. Conversely, RCDC uses sophisticated text data mining (categorizing and clustering using words and multiword phrases) in conjunction with NIH-wide definitions used to match projects to categories. RCDC's use of data mining is designed to improve the consistency and eliminates the wide variability in defining the research categories reported. The definitions for research categories are a list of terms and concepts. The agency cautions that as a result of significant methodology changes, it is likely that annual totals for categories (year over year) will exhibit a noticeable one-time adjustment. To illustrate the effect of the RCDC methodology change, the report includes a side-by-side comparison view of FY 2007 levels produced with the prior method compared with levels that would have resulted if the new methodology had been implemented.

Additional Features on RePORT Site

The RCDC results table is one of six features within the RePORT site. Other features include the Extramural Data Book, and later in the year, NIH plans to add a new, enhanced version of CRISP-on-the-Web. CRISP, (Computer Retrieval of Information on Scientific Projects) is a "searchable database of federally funded biomedical research projects conducted at universities, hospitals, and other research institutions." The database is maintained by the NIH Office of Extramural Research and includes projects funded by the NIH, Substance Abuse and Mental Health Services (SAMHSA), Health Resources and Services Administration (HRSA), Food and Drug Administration (FDA), Centers for Disease Control and Prevention (CDC), Agency for Health Care Research and Quality (AHRQ), and Office of Assistant Secretary of Health (OASH).

The new tool, called RePORTER (RePORT Expenditures and Results) will include RCDC categories and project listings. RePORTER is being designed to allow users to search NIH-funded research and find more information associated with funded projects, including budget information and links to publications and patents resulting from NIH-funded research. For now, all current CRISP features remain the same, and the CRISP hit lists will retain their original appearance. Additional CRISP improvements to be made over the next year include new indexing and automated disease categorization methods, and more extensive and flexible options for searching for grants and contracts that reflect current research investments in specific diseases and other conditions.

There is a tutorial for new users on the website (<http://report.nih.gov/tutorial/index.aspx>). For additional information see:

- The RCDC process, see <http://report.nih.gov/rcdc>
- Frequently Asked Questions about the RCDC process, see <http://report.nih.gov/rcdc/faqs>
- How the NIH developed RCDC definitions, see http://report.nih.gov/rcdc/category_process; and
- On the *Reasons the Reported Funding Levels for Categories in RCDC Might Change as Compared with Previously Reported Year*, see <http://report.nih.gov/rcdc/reasons/>

NIH HOLDS SCIENCE OF DISSEMINATION AND IMPLEMENTATION CONFERENCE

On January 28 and 29, the National Institutes of Health (NIH) held the *2nd Annual NIH Conference on the Science of Dissemination and Implementation: Building Research Capacity to Bridge the Gap From Science to Service*. The day and a half meeting was sponsored by the NIH Office of Behavioral and Social Sciences Research (OBSSR) in collaboration with

the Cancer Institute (NCI), the Institute on Drug Abuse (NIDA), the Institute of Mental Health (NIMH), the Institute of Nursing Research (NINR), the Heart Lung, and Blood Institute (NHLBI), the Institute of Dental and Craniofacial Research (NIDCR), the Center for Research Resources (NCRR), the Institute of Child Health and Human Development (NICHD), and the Fogarty International Center (FIC).

Welcoming the standing room only audience to NIH, OBSSR's Helen Meissner explained that it doesn't necessarily follow that advances in science, medical breakthroughs, or effective health interventions translate into public health practice or improved health outcomes. The Dissemination and Implementation meeting is in recognition that in order to optimize public health locally and globally, there is a need to focus efforts on bridging the gap between the findings and the practices, said Meissner. She noted that it was "particularly encouraging to see greater interest in dissemination and implementation research" and the growing presence at the NIH, which received a record number of requests from those wanting to attend the conference. Similarly, Meissner reported that there was also an overwhelming response to the call for proposals. The interest, she noted, highlights not only the growth of the field but the need for a dedicated venue in which to exchange ideas and share experiences conducting this type of research.

OBSSR's Acting Director Christine Bachrach further explained that the meeting was inspired by an ongoing initiative and funding opportunity announcement on dissemination and implantation in health spearheaded by NIMH and nine other institutes and centers, including the OBSSR. According to Bachrach, the overarching goal is to bring science approaches and tools to a question which is absolutely critical to the scientific enterprise but rarely is the subject of science inquiry itself -- how do you translate research findings into practical applications, and how do you implement them effectively and efficiently in real world settings, disseminating application broadly to stakeholders and helping them to be adapted by institutions and organizations and maintained over time. Invoking the mission of the NIH, Bachrach asked how do we ensure that science makes a difference in extending health life and reducing the burden of illness and disability.

She explained that the OBSSR takes a special interest in this question because the mechanisms it invokes are behavioral and social in character. The processes of dissemination and implementation translation involve the human creative process needed to adapt knowledge and information to practical application and specific environments that involves learning and diffusion of information, ideas, and just will across professional and social networks, noted Bachrach. The barriers to this process that are caused by disconnect, structure values, incentives and norms in the institutions that produce knowledge and the settings in which knowledge needs to be applied. She pointed out that one of the four strategies identified by OBSSR in its 2007 strategic prospectus is population impact, specifically the need for more effective translation and dissemination (see Update, [January 14, 2008](#)). The prospectus, she explained, also pointed to the need to understand the processes involved in successfully transferring evidence-based interventions from the settings in which they were tested to local settings which may be different. This involves considering such factors as capacity, organizational values, and the dynamics of practice networks, stated Bachrach. She noted that this effort must also address the many contextual variables involved in adoption and sustained maintenance of evidence-based practices. She encouraged the audience to look at the strategic prospectus on the OBSSR's website.

Bachrach acknowledged that the focus on population impact forces scientists to work both forward and backward from the research findings to their potential applications and implications and also from the realities of the real world practices, back through the complex pathway that link findings to action. There is an enormous gap between what we know can maximize the quality of health care and what is currently being delivered in practice and community setting Bachrach stated. This new field seeks to generate knowledge that will narrow and may even in the long run close this gap, she concluded.

Jim Yong Kim, Harvard Medical School, a keynote speaker, shared with the audience that he always imagined that there were a group of people like those in the audience working on this problem somewhere. It is a critical problem and is referred to as the second translational block, he explained. He was "especially joyful" to be there with all of those trying to do this science. Discussing "Bridging the Implementation Gap in Global Health," Kim explained that the real change in global health began with HIV before the advent of HIV antiretroviral medicine. What happened with HIV and PEPFAR (the U.S. President's Emergency Plan for AIDS Relief launched in 2003 to combat global HIV/AIDS - the largest commitment by any nation to combat a single disease in history) is the donor community agreed to a chronic intervention for a chronic disease, caring for poor people the rest of their lives.

According to Kim, global health is suffering from an intervention bottleneck. He acknowledge the work of the Gates Foundation which is focused on technology, noting that it was very important that the Foundation was taking on these neglected areas such as new TB drugs and malaria vaccines. Kim, however, expressed his concern that if we have all of these new tools the bottleneck is going to get tighter. He stressed that what you will see that instead of creating health equity, the mission of the Gates Foundation, there will be an increase in health inequity. He noted that the US is not doing well when it comes to implementation, hence the need for the conference. He pondered the outcome if the US were to follow the Gates model of discovery, development, and delivery. Right now the global health strategy to date, explained Kim, consists of countries and districts working in isolation; project based, donor preference driven,

experimental pilots that are never scaled up; competition among implementers; a cottage industry approach; fragmentation of services; inflexible and non-results oriented; an absence of technology and measurement orientation; and resources diverted for overhead and consultants.

The question for us, Kim posited, "Is there a place for a new field in health education?" The curriculum would include basic science (what is the pathophysiology), clinical science (what is the diagnosis and appropriate intervention), health care delivery (how do we best deliver the intervention to everyone), and evaluation science (does the intervention delivery model work). He emphasized, however, that there is no question that there is a need for more people in the laboratory. Can we turn this into a vibrant activity inside of medical schools, he asked. He concluded that for global health "it has to be a multidisciplinary approach."

Portions of the meeting, including Kim's address maybe viewed via NIH's videocast at <http://videocast.nih.gov/default.asp>. Select past events.

NCI CAREER DEVELOPMENT AWARD

The National Cancer Institute's (NCI) Cancer Prevention, Control, Behavioral and Population Sciences Career Development Award (PAR-09-079) provides up to five years of support (salary and research) for individuals with health professional or science doctoral degrees who are not fully established investigators and who want to pursue research careers in cancer prevention, control, population, and/or behavioral sciences. "The primary objective of the program is to increase the number of investigators who have made commitments to focus their research endeavors on cancer prevention, control, behavioral, and the population sciences."

The program provides individuals lacking skills in data management, statistics, epidemiology, study design, clinical trial design, hypothesis development the opportunity to participate in courses designed to overcome these deficiencies. Examples of relevant disciplines and research areas include:

- Any aspect of research on the prevention of human cancers (e.g., modifiable risk factors; basic prevention sciences);
- Patient-oriented research focused on cancer prevention;
- Research including new animal models pertinent to cancer prevention and extrapolation of this research to human cancer;
- Behavioral research and behavioral intervention trials in cancer prevention;
- Human nutrition, behavioral and social sciences, health promotion, health services and health policy research; and
- Medical decision analysis, survivorship and quality of life as they relate to cancer.

For more information on how to apply see: <https://grants.nih.gov/grants/guide/pa-files/PAR-09-078.html>.

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

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