

COSSA

WASHINGTON UPDATE



SPECIAL EDITION

PROPOSED FY 2012 BUDGETS

FOR SOCIAL AND BEHAVIORAL SCIENCE

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PROPOSED FY 2012 BUDGETS FOR SOCIAL AND BEHAVIORAL SCIENCE

“Winning the Future Amidst a Mountain of Debt”

On February 14, President Obama released his FY 2012 budget proposal that would “put forward a plan to rebuild our economy and win the future by out-innovating, out-educating, and out-building our global competitors.” He also stated that the U.S. should “invest in our people without leaving them a mountain of debt.” His priorities in the proposal included science and technology, education, and national infrastructure.

This task has become more difficult in the continuing failure of the Congress and the White House to reach an agreement on the budget for FY 2011, which began on October 1, 2010. On March 18, the President signed the congressionally-enacted sixth Continuing Resolution (CR) to keep the government open. This CR runs out on April 8. As you read this, Washington is rife with talk of a coming government shutdown.

For COSSA, producing this special issue that analyzes the president’s budget proposals has presented a dilemma. Do we continue to wait for the final FY 2011 numbers or do we move ahead. After two months we have decided to do the latter. When the final appropriations for the current fiscal year are known we will amend the charts in the issue and post them on COSSA’s web page.

On February, the Republican-led House of Representatives laid down its marker by enacting H.R. 1, which proposed reductions of \$61 billion from the FY 2010 appropriated levels and included a number of policy riders unacceptable to the Senate and the White House. As negotiations over FY 2011 continue, House Budget Committee Chairman Paul Ryan (R-WI) expects to announce his plan for the FY 2012 spending resolution that the House will enact. Soon the Administration will ask Congress to raise the debt ceiling, so the U.S. can keep borrowing to pay its obligations. This could create another fiscal crisis as some Republicans have balked at doing this without more spending reductions.

Over on the Senate side, we have been hearing for weeks about a bipartisan effort to craft a budget proposal that would incorporate many of the recommendations of the National Commission on Fiscal Responsibility and Reform, led by Erskine Bowles and Alan Simpson. These proposals include reducing federal spending, dealing with entitlement programs such as Medicare, Social Security, farm subsidies, and others, and reforming the tax system. So far, the Senate proposal remains unrevealed.

The obstacles to fiscal health are demonstrated by the numbers. In FY 2009, the federal deficit was \$1.413 trillion or 10 percent of Gross Domestic Product. In FY 2010, as the great recession receded a bit and the President’s stimulus package took effect, the deficit decreased to \$1.293 trillion or 8.9 percent of GDP. The White House estimate for FY 2011 is a deficit of \$1.645 trillion or 10.9 percent of GDP. In FY 2012, the Administration calculates a deficit of \$1.1 trillion or 7 percent of GDP.

As he did in his FY 2011 proposal, the President announced a freeze in non-security discretionary spending. For FY 2012, the Administration proposes spending \$1.34 trillion, of which \$884 billion would occur in the security discretionary category and \$456 in non-security discretionary programs. Mandatory programs in FY 2012 would cost \$2.142 trillion and net interest on the debt \$242 million. Receipts from taxes and other levies for FY 2012 are estimated to reach \$2.627 trillion or 16.6 percent of GDP, after historically low numbers in FY 2009 and 2010.

Another interesting phenomenon is that for many agencies the President's FY 2012 request is below what he asked for in FY 2011. He has also eliminated or reduced funding for over 200 programs, some of which have been eliminated in the FY 2011 CRs.

Science and Technology Budget

Science and Technology (S&T) are keys to "winning the future" according to the Administration because research is the key to innovation. The President's plan for S&T in FY 2012 includes a "substantial increase" for the National Science Foundation (NSF) to keep it on a doubling path. The first year of that path and the last year seem to have gotten lost in the rhetoric.

Other priorities include: moving toward a clean energy future; defeating dangerous diseases and achieving better health outcomes; understanding global climate change and its impacts; developing technologies to protect our troops, citizens, and national interests; and infrastructure, including supporting wireless innovations. The Administration requests \$3.4 billion in FY 2012 for Science, Technology, Engineering and Mathematics (STEM) Education across the Federal government. The Administration also remains committed to multi-agency research and development (R&D) activities with increases over FY 2010 for the National Nanotechnology Initiative (up 10.4 percent), Networking and Information Technology R&D (up two percent), and Climate Change R&D (up 20.4 percent).

Despite all this commitment, the budget proposal seeks a total of \$147.9 billion in FY 2012, up from spending of \$147.4 billion in FY 2010, with the FY 2011 request at \$147.7 billion. The request for Basic Research in FY 2012 is \$32.9 billion, up from \$29.4 billion in FY 2010, and a request of \$31.3 billion in FY 2011. Applied research goes to \$33.2 billion in FY 2012 compared to \$29.8 billion in FY 2010 and \$30.3 billion in the FY 2011 request. Again the development and facilities and equipment categories face reductions, but some of that comes from the transfer of funding for the International Space Station from R&D facilities to research.

National Science Foundation

The National Science Foundation (NSF), under its new director Subra Suresh, seeks to remain the "engine of innovation" for the U.S. as its premier basic research agency that funds all the sciences and engineering. The FY 2012 request is \$7.767 billion, a thirteen percent increase over FY 2010. H.R. 1, on the other hand, wants to reduce NSF's FY 2011 spending \$359 below the FY 2010 level.

The Research and Related Activities account, which funds the research directorates, including SBE, has a proposed 12.4 percent boost over FY 2010 to \$6.254 billion. The Education and Human Resources directorate's proposed funding goes up by 4.4 percent over FY 2010 to \$911.2 million.

With the FY 2012 proposed increase NSF would enhance its commitment to a number of interdisciplinary and cross-directorate programs. The Science, Engineering, and Education for Sustainability (SEES) initiative would rise to almost one billion dollars. SEES is designed to foster innovative insights about the environment-energy-economy nexus. Cyberinfrastructure Framework for 21st Century and Science and Engineering (CIF21) would develop and deploy advances in cyberinfrastructure to accelerate the ability of data intensive activities to effectively address the complex problems facing science and society. Other programs include: a national robotics initiative, a wireless innovation fund, enhancing access to the radio spectrum (EARS), and research at the interface of the biological, mathematical, and physical sciences.

In the STEM education arena, NSF will introduce three new programs: Teacher Learning for the Future, Widening Implementation and Demonstration of Evidence-based Reform (WIDER), and Transforming Broadening Participation through STEM. NSF will continue increasing the number of new Graduate Fellowships, while at the same time eliminating the GK-12 fellowship program.

Under the President's FY 2012 proposal, the Social, Behavioral, and Economic Sciences (SBE) directorate would receive a \$45 million increase from FY 2010 to \$301 million. SBE plays a significant role in SEES, and has pieces of CIF21, EARS, and some of the other Foundation-wide initiatives like Cybersecurity. A new area for SBE will fund research on population focusing on migration and aging. With the enactment of the renewal of the America COMPETES Act at the end of 2010, the former Science Resource Statistics division has become the National Center for Science and Engineering Statistics.

SBE will continue its support in FY 2012 for the Science of Science and Innovation Policy (SciSIP) research and the development of STAR METRICS, a program that will help the federal government document the value of its investments in research and development. By contrast, SBE will begin the phasing out of the Science of Learning Centers.

National Institutes of Health and Other Health Agencies

The enactment of the Affordable Care Act (aka health reform) in 2010 has provided a significant influx of funding for research and evaluation activities. Most significant is the Prevention and Public Health Fund (PPHF), which will boost funding for the Agency for Healthcare Research and Quality (AHRQ), the Assistant Secretary for Planning and Evaluation (ASPE), the Centers for Disease Control and Prevention (CDC), and the National Institutes of Health (NIH). In addition, all of these agencies have a role in funding Comparative Effectiveness Research.

The Administration proposes to increase funding for NIH to \$31.987 billion for FY 2012, a 2.4 increase over FY 2010. By contrast, H.R. 1 calls for a \$1.6 billion reduction from NIH's FY 2010 level. Social and behavioral research continues to achieve recognition across all the NIH Institutes and Centers. The Basic Behavioral and Social Sciences Opportunity Network (OppNet) initiative, although not reaching the funding levels the community hoped for, has become a program in which almost all the Institutes have agreed to participate. The Science of Behavior Change initiative included in the Common Fund has also boosted the centrality of these sciences.

A National HIV/AIDS Strategy developed by the Administration recognizes the role of the behavioral and social sciences in stemming the pandemic by helping to prevent new cases and supporting those living with the disease. The National Institute on Drug Abuse has funded investigations on the HIV/AIDS problem in criminal institutions. Many institutes have incorporated support for research on health disparities. The Genome Institute remains interested in funding research on Gene-Environment interaction and the Ethics, Legal, and Social Implications related to genomics.

Health economics has gained a foothold in the Director's Common Fund and across many of the Institutes, while the National Institute on Aging continues its significant support for the Health and Retirement Survey, combining economics, biomarkers, and behavior to examine options and decisions for those retired and about to retire. Support for the National Children's Study continues with the main study scheduled to begin in 2012.

Under new director Francis Collins, NIH has begun a new emphasis on translational medicine with a new proposed national center that has raised some discussion in Congress as it seeks to eliminate the National Center for Research Resources. The Institutes have also increased their commitment to training the next generation of health researchers.

AHRQ maintains its focus on determining health outcomes and the effectiveness of health expenditures and a special emphasis on the implementation and evaluation of Health Information Technologies.

CDC, aside from its major role in the PPHF, provides an increase for the National Center for Health Statistics to enhance its health surveys, although the magnitude of the increase is the same requested last year.

Research and Data in the Departments

At the Department of Agriculture, Catherine Woteki has returned to government service to become the Undersecretary for Research, Education and Economics. With the demise of earmarks, much lamented by members of the House Agriculture and Rural Development Appropriations Subcommittee, overall funding for the Department was reduced in the President's proposal. The main formula funding activity of the National Institute on Food and Agriculture (NIFA), the Hatch Act, also saw a significant decrease in the request. However, NIFA's Competitive Grants program has a requested increase to \$325 million, not as large a requested boost as in FY 2011, but \$62.5 million above the FY 2010 number.

The Economic Research Service proposes a new Center for Behavioral Economics and once again asks to lead a statistical-system wide effort to improve data access and processing and to conduct an administrative record pilot project. The National Agriculture Statistics Service gets a slight increase and will continue to fund the Census of Agriculture.

The taking of the 2010 decennial census is over. The Census Bureau has released the national data as well as the state-by-state data for reapportionment and redistricting purposes. The decennial count was completed in such an efficient manner that the Bureau returned \$1.8 billion of appropriated funds to the Treasury. As in all early years of the next decennial cycle, the Bureau's budget would decline in the Administration's FY 2012 proposal. The Bureau conducts the Census of Governments and the Economics Census in 2012 and hopes to begin research to prepare for a 2020 census in a time of uncertainty. The Bureau also continues to seek an increase in the sample size for the American Community Survey, which has come under political attack with amendments to abolish it proposed during the consideration of H.R. 1 and a new bill to make it voluntary, sponsored by Rep. Ted Poe (R-TX).

The Administration proposes another significant increase for the Bureau of Economic Analysis to implement a number of initiatives, some of them back from last year's proposal, to improve data on energy usage, household income and spending.

In the Education Department, the reauthorization of the Elementary and Secondary Education Act to fix No Child Left Behind remains on the congressional agenda. Education is clearly part of "winning the future." The Administration provides enhanced resources for the Institute of Education Sciences, particularly for research and evaluation, in its FY 2012 proposal. It also seeks to implement a proposal that has been on the drawing board for a number of years, moving the Javits Fellowship program for graduate students in the social sciences, humanities, and arts into the Graduate Assistance in Areas of National Need (GAANN) program.

Despite repeated calls for American students to beef up their foreign language skills, the Administration level funds the Title VI and Fulbright Hays programs. Taking advantage of the end of earmarks, the President proposes to use the Fund for the Improvement of Postsecondary Education (FIPSE) to initiate a major effort, called First in the World, to encourage research on innovative approaches to improving college completion.

At the Department of Homeland Security, the Science and Technology Directorate has reorganized its research accounts to give it more flexibility. It remains interested in human factors, particularly behavioral detection. The President again proposes a decrease in the funds for the Office of University Programs, which could result in the elimination of one or more Centers of Excellence.

The Department of Housing and Urban Development continues to seek funding for its Transformation Initiative, which provides for a one percent set-aside of program funds to help support research and evaluation. In FY 2010 this led to a \$26 million transfer into the Office of Policy Development and Research. After requesting a major increase for OPD&R in FY 2011, the Administration has lowered its sights and provides a \$9 million boost from FY 2010.

The idea of a set-aside for research and statistics has also become part of the President's request for the Office of Justice Programs (OJP). In FY 2010 the set-aside was one percent of OJP program funding, in FY 2011 and now in the FY 2012 proposal, it has increased to three percent. With John Laub and James Lynch at leaders of the National Institute of Justice (NIJ) and the Bureau of Justice Statistics (BJS), these agencies are in a position to increase their important activities. However, the base budgets of both agencies remain small and in BJS' case the FY 2012 request is smaller than the FY 2010 level. BJS will continue to revamp the National Crime Victimization Survey. NIJ, has its National Academies' report to implement, including investing more in social science research.

At the Department of Labor, an emphasis continues on program evaluations. The proposed FY 2012 budget for the Bureau of Labor Statistics includes funding for a new youth cohort of the National Longitudinal Study. To get the new cohort, the proposal would spread out the field operations for the older 1979 and 1997 cohorts.

With improving national infrastructure as another key to "winning the future," the President has asked for a significant increase for the Department of Transportation in FY 2012 tied to the reauthorization of the Surface Transportation Act and a National Infrastructure Bank. To enhance data collection under these initiatives, the Bureau of Transportation Statistics would have its budget increase to \$35 million, after many years in the \$27 and \$28 million range.

Growth for the exchange programs in the Education and Cultural Affairs Bureau at the State Department has slowed in recent years and the Obama Administration's emphasis continues on Muslim countries. The Woodrow Wilson Center has a new leader; former Congresswoman Jane Harman has replaced former Congressman Lee Hamilton. The Center gets a slight increase for FY 2012 from the Administration's proposal. The United States Institute of Peace, which loses most of its funding in H.R. 1, has a slight decrease in the FY 2012 request from its FY 2010 funding.

Finally, the National Endowment for the Humanities would suffer a reduction in the President's FY 2012 proposal, with the elimination of the Bush Administration's We the People Initiative. The National Historical Publication and Records Commission, a part of the National Archives that has been a target for budget cutters for many years, would see its \$10 million funding halved under the Administration's FY 2012 request.

The priority for cutting spending is the dominant budgetary message promulgated, not only by House Republicans, but throughout Washington. The big question is by how much? The attempts to fashion a comprehensive solution to the nation's budgetary fix could gain momentum in the next few weeks and months. The window may be short, given we are entering presidential campaign time. How this affects the final decisions on FY 2011 and the fate of the FY 2012 budget proposals discussed in this issue, remain. Given that these are debates over the priorities for the nation, now and in the future, and the quite different visions of the major protagonists in this battle, the outcomes are difficult to predict or even fathom.

Howard J. Silver, April 2011.

How to interpret budget figures in this issue

COSSA's budget issue provides figures for Fiscal Year 2012 budget authority. All figures in the agency tables are in millions of current dollars, and, in most cases, are rounded to one figure after the decimal. Totals may contain rounding error.

Two types of data are compiled in the tables. Five columns provide recent and current budget figures, with the Current FY 11 column conspicuously blank. Without these numbers the comparison columns are different than in previous years.

Actual FY 10	ARRA Actual FY 10	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
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Column 1 provides actual spending figures for FY 2010. Column 2 provides FY 2010 spending (where the agency reported it), for the second year of funding under the American Recovery and Reinvestment. Column 3 offers requested funding in President Obama's FY 2011 budget request. Column 4 is blank as we await the conclusion of the FY 2011 funding impasse. Column 5 provides the Administration's new funding recommendation for FY 2012. Column 6 shows the percentage change from the President's proposed funding in FY 2011 and to the President proposed funding for FY 2012, reflecting changes in the Administration's priorities. Column 7 compares the proposed FY 2012 funding with actual FY 2010 funding, reflecting the Administration's budget presentation rhetoric. (In calculating the percentages, the FY 2010 numbers do not include the ARRA funding.)

COSSA would like to thank:

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Institute of Education Sciences
International Education and Foreign Language Studies
Fund for the Improvement of Postsecondary Education
Graduate Education

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Assistant Secretary for Health
Assistant Secretary for Planning and Evaluation
Agency for Health Care Research and Quality
Centers for Disease Control and Prevention
National Institutes of Health
Office of the Director
Office of Aids Research
Office of Behavioral and Social Sciences Research
Office of Disease Prevention
Office of Research on Women's Health
John E. Fogarty International Center for Advanced Study in the Health Sciences
National Cancer Institute
National Center for Complementary and Alternative Medicine
National Center for Research Resources
National Eye Institute
National Heart, Lung and Blood Institute
National Human Genome Research Institute
National Institute on Aging
National Institute on Alcohol Abuse and Alcoholism
National Institute of Allergy and Infectious Diseases
National Institute of Arthritis and Musculoskeletal and Skin Diseases
National Institute of Biomedical Imaging and Bioengineering
National Institute of Child Health and Human Development
National Institute on Deafness and Other Communication Disorders
National Institute on Dental and Craniofacial Research
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National Institute on Drug Abuse
National Institute of Environmental Health Sciences
National Institute of General Medical Sciences
National Institute of Mental Health
National Institute of Minority Health and Health Disparities
National Institute of Neurological Disorders and Stroke
National Institute of Nursing Research
National Library of Medicine

DEPARTMENT OF HOMELAND SECURITY
Science and Technology Directorate

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT
Office of Policy Development and Research

DEPARTMENT OF JUSTICE
Bureau of Justice Statistics
National Institute of Justice

DEPARTMENT OF LABOR
Bureau of Labor Statistics

DEPARTMENT OF STATE
Bureau of Educational and Cultural Affairs

DEPARTMENT OF TRANSPORTATION
Research and Innovative Technology Administrations
Bureau of Transportation Statistics

INDEPENDENT AGENCIES
National Archives and Records Administration
National Endowment for the Humanities
National Science Foundation
United States Institute of Peace
Woodrow Wilson International Center

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DEPARTMENT OF AGRICULTURE

Tom Vilsack, former Governor of Iowa, is the Secretary of Agriculture (USDA). Catherine E. Woteki is the Under Secretary for Research, Education and Economics and Chief Scientist for the Department.

The FY 2012 proposed discretionary spending budget for USDA is \$23.9 billion compared to the actual budget of \$27 billion in FY 2010. A large portion of the USDA budget consists of Mandatory Spending on things like farm subsidies and nutrition assistance programs, estimated at \$122 billion in FY 2011. If Mandatory Spending becomes part of the overall deficit reduction discussion, then these programs could face cuts.

National Institute of Food and Agriculture (NIFA)

www.nifa.usda.gov

Roger Beachy heads the National Institute of Food and Agriculture (NIFA), established in the 2008 Farm Bill. NIFA has the primary responsibility for providing linkages between the Federal and State components of a broad-based, national agricultural research, extension, and higher education system. NIFA provides funding for projects conducted in partnership with the State Agricultural Experiment Stations, the State Cooperative Extension System, land grant universities, colleges, and other research and education institutions. NIFA distributes funds to universities and institutions by statutory formula funding, competitive awards, and grants. NIFA is responsible for administering USDA's primary competitive research grants program, the Agriculture and Food Research Initiative (AFRI), which supports investigator-initiated research with strong potential to contribute to breakthroughs in agricultural science.

For FY 2012, the Administration's proposal of \$325 million for AFRI reflects a substantial decrease from the proposed FY 2011 amount, roughly 24 percent, but an increase over FY 2010 of \$63 million. AFRI areas of focus for FY 2012 are: bioenergy, global climate change, global and domestic food security, including in-production agriculture, nutrition and health, food safety, foundational programs, and NIFA fellowships. Some of the new funds for AFRI are drawn from the Graduate Fellowships Program and the Institution Challenge Grants Program (two small, stand-alone programs that support collegiate academic activities and graduate fellowships.) A portion of the proposed AFRI increase (\$9.5 million) will support activities similar to those previously funded through these two programs to train the next generation of agriculture scientists. Some of the funds for this increase also come at the expense of Special Grants. These designated congressionally-sponsored projects, historically seen in appropriations bills, have been eliminated. The major formula funding mechanism is the Hatch Act program which funds research conducted by the State Agricultural Experiment Stations. The Administration proposes a significant decrease for this program in FY 2012.

The Administration is also proposing an increase of \$2.5 million for the Secondary Education, Two-Year Postsecondary Education, and Agriculture in the K-12 Classroom Challenge Grants (SPECA) program. These funds will promote and strengthen secondary education and two-year postsecondary education in agriscience and agribusiness in order to help ensure the existence in the United States of a qualified workforce to serve the food and agricultural sciences system. Further, the budget proposes an increase of \$0.9 million for the Hispanic-Serving Institutions (HSIs) Education Partnership Grants Program. This funding will support the establishment of alliances among HSIs to strengthen Science, Technology, Engineering, and Mathematics (STEM) education programs in the food and agricultural sciences through the funding of innovative teaching enhancement projects with the potential for regional or national impact.

	Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
Hatch Act	215.0		215.0		204.0	-51%	-5.1%
Agricultural and Food Research Initiative (AFRI)	262.5		428.8		325.0	-24.4%	23.8%
Special Grants	105.2		18.2		0	-100.0%	-100.0%

Economic Research Service (ERS)

www.ers.usda.gov

ERS, whose administrator is Katherine R. Smith, provides economic and other social science information and analysis on agriculture, food, the environment, and rural development. ERS produces such information and analyses to inform policy and program decisions made across the spectrum of USDA missions, and supplies them in outlets that are also accessible to USDA stakeholders and the general public.

ERS sees a slight decrease from FY 2011 in the proposed amount for FY 2012. However, this request does include \$2.4 million to fund a new research initiative called The Center of Excellence for Behavioral Economics. The new Center would extend the approach the agency is currently using in its analysis of food and nutrition programs to gain a better understanding of the current and potential policy and program outcomes of the Department's land conservation, climate change, and rural prosperity initiatives. ERS argued that USDA and its customers would benefit from this analysis as it informs how programs are designed for cost efficiencies and greater effectiveness. The budget also proposes an increase of \$2 million to develop data and conduct economic research on the access to affordable and nutritious local foods in low-income communities. This initiative would lead to a better understanding of how the Department can better support sustainable and healthy communities.

The FY 2012 proposed budget also includes a number of increases pushed over from the FY 2011 budget. Among these is an increase of \$4 million to strengthen the Department's statistical protocols and tools. This includes a \$2 million initiative to establish a structure among statistical agencies, with ERS providing project management, to improve data access, develop tools for data processing, and increase the utility of Federal data. The FY 2012 budget also includes an increase of \$2 million for an administrative data pilot project, which was also seen in the FY 2011 budget. Administrative data, information collected in conjunction with administering government programs, provide an opportunity for increasing the statistical ability to understand and address critical policy issues. The goal of this initial project will be to understand how nutrition assistance and other government programs work together to provide a social safety net and how nutrition assistance and health care policy work together to improve dietary and health outcomes.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
82.5		87.2		86.0	-1.4%	4.2%

National Agricultural Statistics Service (NASS)

www.usda.gov/nass

The mission of NASS is to provide timely, accurate, and useful statistics in service to U.S. agriculture. NASS statistics provide the information necessary to keep agricultural markets stable and efficient and to help maintain a consistency for all users of agricultural statistics. In addition to other projects, the agency conducts the quinquennial U.S. Census of Agriculture. Cynthia Clark is NASS' Administrator.

The modest proposed increase for FY 2012 over the FY 2011 proposal includes nearly \$12 million in new initiatives which are offset by \$8.3 million in terminations of low-priority programs, which includes eliminating a land tenure survey largely comprised of farm operators that are accounted for in the Agricultural Resource Management Survey. The budget includes \$3.4 million to improve the data quality of the County Estimates program which is used within the Department to administer crop insurance programs that provide U.S. farmers a safety net ensuring protection against unstable growing conditions, as well as crop revenue support programs, emergency assistance payments, and the Conservation Reserve Program. The proposed budget also includes \$42 million to support the third year of the 2012 Census of Agriculture's five year cycle.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
161.8		164.7		165.4	0.4%	2.2%

DEPARTMENT OF COMMERCE

President Obama has nominated Commerce Secretary Gary Locke as the United States' next Ambassador to China. Rebecca Blank, former Dean of the University of Michigan's Ford School of Public Policy and a COSSA Annual Meeting Speaker, is the current Acting Deputy Secretary. The Department's proposed discretionary budget for FY 2012 is \$8.8 billion, a significant decline from the FY 2010 enacted level of \$13.9 billion. This reflects the large decline in the funding for the U.S. Census Bureau in light of the completion of the operations phase of the 2010 decennial count.

U.S. Census Bureau

www.census.gov

The mobilization to conduct the 2010 decennial census is over and the Census Bureau has released the population data for the country and the individual states and territories for reapportionment and redistricting purposes. We now know the 308,745,438 Americans counted on April 1, 2010 represent a rapidly changing American demographic. Robert Groves directs the Bureau as it continues to release the data products from the decennial. At the same time, the American Community Survey (ACS) maintains its annual updates of the America's population characteristics, even in the face of political attacks on its worthiness.

With most of the government still operating under a Continuing Resolution (CR) for FY 2011 at FY 2010 funding levels, the Census Bureau was given an anomaly in the CR and is currently funded at \$1.223 billion. During the action on H.R. 1 in the House in early 2011, the House proposed to reduce the Bureau's funding by another \$153 million. For FY 2012 the Administration requests \$1.025 billion in discretionary spending for the U.S. Census Bureau. This is a considerable reduction from the high-water spending of \$6.175 billion in FY 2010. Of those funds, \$5.702 billion went to conduct the decennial and the ACS, well below the appropriated amount as the Bureau returned \$1.8 billion in unspent funds to the Treasury.

The FY 2012 request is also below the FY 2011 request of \$1.267 billion. The Bureau also spends \$30 million for two mandatory programs: the Survey of Program Dynamics and data collection related to the State Children’s Health Insurance Program.

The proposed FY 2012 budget of \$247.5 million for the ACS again calls for expanding the sample size to 3.5 million housing units, as well as quality improvement activities. This will help with small and remote areas’ data collection and analysis. The rest of the \$752.7 million proposed for the Periodic Censuses and Programs account will include funding to produce data and evaluate the decennial as well as to fund the continuous updating of the Master Address File (MAF) and TIGER digital mapping system throughout the coming decade. In addition, the Bureau will use FY 2011 funds to conduct the 2012 Economic Census and Census of Governments. The Bureau also asks for funding to initiate the research and testing phase of the 2020 Census.

In order to spend more on ACS and other activities, the Bureau proposes to reduce or eliminate programs such as the Federal Financial Statistics and the Statistical Abstract.

The Salaries and Expenses account covers the Survey of Income and Program Participation (SIPP), with proposed funding of \$51 million, and other ongoing surveys that collect demographic, economic, and social data. The request includes \$9 million to expand the Bureau’s administrative records infrastructure and \$5 million to expand research and production capabilities to “supplement the official poverty measures with annual, alternative measures of poverty from the Current Population Survey.”

	Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
Salaries and Expenses	259.0		280.4	259.0	272.1	-3.0%	5.1%
Periodic Census and Programs	5,915.7		986.3	964.3	752.7	-23.7%	-87.3%
Census Totals	6,174.7		1,267.0	1,253.3	1,024.8	-19.1%	-83.4%

Bureau of Economic Analysis (BEA)
www.bea.gov

The BEA is part of the Economic and Statistics Administration (ESA). The non-BEA part of ESA provides policy research and support for the Department and has requested funding of \$4.1 million for FY 2012, a slight increase over FY 2010.

The BEA, led by Steve Landefeld, provides vital economic information, including the gross domestic product (GDP) and international balance of payments, which are essential to decision making by the President, Congress, American business leaders, and participants in the world’s financial markets. To accomplish this, BEA collects source data, conducts research and analysis, develops and implements estimation methodologies, and disseminates statistics to the public.

For FY 2012, the Administration requests \$108.8 million for BEA, an increase of \$15.4 million over FY 2010 funding. The Administration asked for \$109.3 million for BEA in FY 2011. The BEA request includes funding for four initiatives, three of which are left over from last year’s request: A New *Economic Dashboard* – \$5.2 million for an initiative to expand and realign the statistical coverage of the business, government, and international sectors and to develop new data series that, together, will provide more detail on economic sectors and the drivers of economic growth; *Everyday Economics* – \$3.9 million for an initiative to create a new suite of measures of household income, expenses, debt,

and savings, including statistics on State-level personal consumption expenditures, alternative measures of disposable personal income, and greater detail on the nature of household wealth; and *Energy's Economic Impact* – \$1.2 million to extend the U.S. economic accounts to include new and expanded statistics on energy usage. The new initiative is part of the government-wide effort to *Modernize Statistical Production* – \$3 million to improve and modernize BEA's outdated and disparate statistical production technology infrastructure and processing systems.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
93.4		109.2		108.8	-0.4%	16.5%

DEPARTMENT OF EDUCATION

President Obama's FY 2012 budget request for the Department of Education shows his administration's continued support for education reform and research. Despite the call in Washington for greater austerity, the administration is seeking \$48.8 billion, an increase of \$2 billion over the FY 2010 budget.

In a March 9, hearing before the House Committee on Education and the Workforce, Education Secretary Arne Duncan justified the \$2 billion increase. He acknowledged that, "these are challenging times, but we can't delay investments that will secure our future. We must educate our way to a better economy by investing responsibly, advancing reform and demanding results."

The President's budget proposal identifies five top priorities for education investment: early childhood education, Race to the Top (RTT), teachers, college completion, and low performing schools.

Research shows that the benefits from high quality early education have affects beyond academic results. Well-designed pre-school education programs not only produce long term academic improvements, but also have been associated with reduced delinquency and crime throughout childhood and well into adult years. The President's budget proposes \$350 million for the Early Learning Challenge Fund, a new competitive fund that will support statewide models of high quality early learning systems. This is in addition to the administration's proposed \$866 million increase for Head Start and \$1.3 billion for quality child care.

The President's FY 2012 budget proposal maintains the Administration's commitment to education reform, with a \$900 million request for a district level RTT with a separate carve out for rural areas.

Developing highly qualified and effective teachers remains a central priority to the administration's education reform efforts. The budget proposal includes \$975 million to help recruit, prepare, reward and retain teachers and allows for the creation of a new fellowship program—the Presidential Teaching Fellows. This program would encourage the highest achieving students to enter the teaching profession by awarding them \$10,000 scholarships. In addition, the Administration includes funds to help make those teachers already in the field more effective, by asking for \$500 million for the Teacher and Leader Innovation Fund that would help develop and reward highly effective teachers by creating new teacher evaluation systems, professional development, and compensation systems. The President also addresses the nation's need for more teachers in the Science, Technology, Engineering, and Mathematics (STEM) fields by requesting \$80 million to help meet the administration's goal of recruiting 100,000 new math and science teachers over the next 10 years.

The President's American Graduation Initiative hopes to raise the college graduation completion rate to 60 percent by the year 2020. To accomplish this, the Administration supports helping students finance their education. The Department expects the demand for Pell grants to reach 9.6 million students next year, up from six million in 2008. The FY 2012 budget would allocate \$41.2 billion for

Pell grant spending, protecting the current maximum grant of \$5,550. The FY 2011 funding bill, H.R. 1, passed by the House, would reduce the maximum Pell Grant to \$4,015.

The Administration's fifth budget priority is support for at-risk students. The proposed budget recommends the creation of a \$300 million program to recognize and reward successful high poverty districts and schools. The budget also maintains the efforts to turn around consistently low-performing schools by allocating an additional \$54 million for a total of \$600 million.

While the budget does call for an additional \$2 billion in spending, the administration has identified ways to save money through increased efficiency of student aid programs and by making changes in the Pell Grant policy that will help close a \$20 billion shortfall. The Department also has proposed eliminating 13 programs, which would save the department \$147 million. Many of these programs, on recent Administration's cut lists, were zeroed out in the Continuing Resolutions currently funding the government in FY 2011.

International Education and Foreign Language Studies

www.ed.gov/about/offices/list/ope/iegps/

President Obama's FY 2012 budget request provides level funding of \$125.9 million for the 14 International Education and Foreign Language Studies programs supported under Title VI and the Fulbright-Hays legislation. These programs support comprehensive language and area study centers within the United States and overseas, and serve the Department's economic, diplomatic, and national security interests.

	Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
Domestic Programs	108.4		108.4		108.4	0.0%	0.0%
Overseas	15.6		15.6		15.6	0.0%	0.0%
Institute for International Public Policy	1.9		1.9		1.9	0.0%	0.0%
Totals	125.9		125.9		125.9	0.0%	0.0%

Fund for the Improvement of Postsecondary Education

www.ed.gov/about/offices/list/ope/fipse

The Fund for the Improvement of Postsecondary Education (FIPSE) awards competitive grants to support locally developed innovative reform projects in postsecondary education. The FY 2012 request of \$150 million would provide funding for the first year of a First in the World initiative, which would apply the lessons learned from the Investing in Innovation (i3) program. First in the World would provide funds to encourage innovative approaches to improving college completion, support research, and to scale up and disseminate proven strategies. The overall FIPSE request represents a decrease of \$9.4 million due to the elimination of funding for earmarks and other small programs, but it also represents an increase of \$93 million in the amount available for competitive grants compared to the FY 2010 level.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
159.4		64.0		150.0	134.4%	-5.9%

Graduate Education

www.ed.gov/programs/jacobjavits/index.html

The Graduate Assistance in Areas of National Need Fellowship (GAANN) provides fellowships, through competitive grants to postsecondary institutions, to graduate students with superior ability and high financial need studying in areas of national need. The FY 2012 request of \$40.7 million includes the consolidation of funding from the Javits fellowship program.

The Javits Fellowship Program, funded under the FY 2010 level at \$9.7 million, provides up to four years of competitively awarded support to students of superior academic ability and high financial need who are pursuing doctoral degrees, or the highest terminal degree, in the social sciences, humanities, and arts. The President's budget recommends consolidating the Javits program under GAANN in FY 2012. The Department has not provided any details as to the implementation of the proposed consolidation. One important note is that with the exception of education research, no discipline in the social sciences or humanities has ever been designated an "area of national need" under the GAANN program.

The Administration recommends continuing support for the Thurgood Marshall Legal Educational Opportunity program with a proposed FY 2012 budget of \$3 million. The program provides minority, low income or disadvantaged college students with the information, preparation, and financial assistance needed to gain access to law school and for the completion of their studies. The Administration proposes a FY 2012 competition to award the funds for this program.

	Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
Javits Fellowships	9.7		9.7		0.0	-100.0%	-100.0%
Thurgood Marshall Legal Opportunity Program	3.0		3.0		3.0	0.0%	0.0%
Graduate Assistance in Areas of National Need (GAANN)	31.0		31.0		40.7	31.3%	31.3%

Institute of Education Sciences

www.ed.gov/offices/IES

The Institute of Education Sciences (IES) supports sustained programs of research, evaluation, and statistics that are relevant to the needs of educators and policymakers. IES identifies effective instructional and program practices, tracks student achievement, and measures the impact of educational reform through its four centers: the National Center for Education Research, the National Center for Education Statistics, the National Center for Education Evaluation and Regional Assistance, and the National Center for Special Education Research.

For FY 2012, the Administration is seeking \$760.5 million for IES, an increase of \$101.5 million over the FY 2010 level. H.R. 1, the House-passed FY 2011 appropriation would reduce IES funding to \$530 million. The FY 2012 request would enable IES to award up to \$40 million in new research and development grants in early learning and elementary, secondary, and postsecondary education.

The FY 2012, budget request for research, development, and dissemination is \$260.4 million, an increase of \$60.2 million over the FY 2010 level. The increase would support investments in education research, development, dissemination, and evaluation. The request also would fund additional awards under existing programs of research and development and evaluations of efforts to expand college access and completion as well as the Promise Neighborhoods program, which seeks to build a complete continuum of cradle-to-career solutions of both educational programs and family and community supports, with great schools at the center.

The National Center for Education Statistics (NCES) informs the IES research agenda and is operated primarily through competitively awarded contracts. Through its mission, the NCES provides general statistics about trends in education, collects data to monitor reform, and measures educational progress. The FY 2012 request of \$117 million, which includes an increase of \$8.5 million over the FY 2010 budget, would allow NCES to undertake its first study of sub-baccalaureate education and training for adults, provide fall testing for the Early Childhood Longitudinal Study to study summer learning loss, and develop enhanced reporting and data tools that will improve access to and usability of NCES data.

The National Assessment of Educational Progress (NAEP) and the National Assessment Governing Board FY 2012 request is \$143.8 million. NAEP measures and reports on the status of and trends in student learning over time, and is the only nationally representative and continuing assessment of US student achievement. The FY 2012 budget would provide funds for conducting the 12th grade economics assessment and a long-term assessment that would follow the academic progress of 9, 12, and 17 year-old students in reading and mathematics.

The Statewide Data System program supports competitive awards to state educational agencies to foster the design, development, and implementation of longitudinal data systems. The Statewide Data Systems program budget request of \$100 million is a significant increase from the FY 2010 level. Most of the request would support new awards to states that would allow them to expand and improve their data systems, including linking elementary, secondary, postsecondary, and workforce data systems. In addition, up to \$15 million would provide awards to public or private agencies and organizations to support activities to improve data coordination, quality, and use at the local, state, and national levels.

The Regional Educational Laboratories provide a bridge between education research and practice, addressing important issues of policy and practice. The proposed budget of \$69.7 million would fund new five-year contracts. The \$1 million decrease proposed for FY 2012 reflects the completion of funding for the program evaluation.

The Research in Special Education program supports discretionary grants and contracts for research to improve special education and early intervention services for children with disabilities. The FY 2012 budget request of \$58.1 million is \$13 million less than the FY 2010 level. The Special Education and Evaluations program supports competitive grants, contracts, and cooperative agreements to assess the implementation of the Individuals with Disabilities Education Act. The request of \$11.5 million would provide support for a new study of outcomes from preschool special education and continued support for studies of transition and learning outcomes for students with disabilities and, finally, promising teacher preparation for teachers of students with disabilities.

	Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
Research and Dissemination	200.2		260.7		260.4	<0.1%	30.0%
Regional Education Labs	70.7		69.7		69.7	0.0%	-1.4%
Statistics (NCES)	108.5		117.0		117.0	0.0%	7.8%
Assessment (incl. NAGB)	138.8		143.8		143.8	0.0%	3.6%
Statewide Data Systems	58.3		65.0		100.0	53.8%	71.5%
Special Education Studies and Evaluations	11.5		11.5		11.5	0.0%	0.0%
Research in Special Education	71.1		71.1		58.1	-18.3%	-18.3%

DEPARTMENT OF HEALTH AND HUMAN SERVICES

The largest domestic agency, representing almost one-quarter of federal expenditures, the Department of Health and Human Services (HHS), led by Secretary Kathleen Sebelius, includes more than 300 programs covering a wide spectrum of activities, including health and social science research. It will play a major role in the President's plans for revising America's health care system. Most of HHS' funding goes to mandatory programs such as Medicare and Medicaid. The FY 2012 discretionary budget request for HHS is \$79.9 billion, down from the \$81 billion FY 2011 request. The FY 2012 budget for HHS includes funding to implement the Affordable Care Act (ACA).

Assistant Secretary for Health www.hhs.gov/ash

The Office of the Assistant Secretary for Health (OASH) serves as the Secretary's primary advisor on matters involving the nation's public health and oversees the U.S. Public Health Service (PHS) for the Secretary. OASH is led by Howard K. Koh. The Office of Public Health and Science (OPHS) is under the direction of the OASH. OPHS performs both a policy and program role. The Office of Minority Health, Office of Population Affairs (OPA)/Adolescent Family Life (AFL) and the Office of Women's Health are located within OPHS.

Office of Minority Health (OMH): The mission of OMH is to improve and protect the health of racial and ethnic minority populations through the development of health policies and programs that will eliminate health disparities. Established in 1986, it advises the Secretary and the OPHS on public health program activities affecting non-Caucasian Americans. The Administration requests \$58 million for OMH in FY 2012, \$2 million above the FY 2010 funding level, to provide resources to continue disease prevention, health promotion, service demonstration, and educational efforts to reduce and ultimately eliminate disparities in racial and ethnic minority populations.

Office of Adolescent Health (OAH): OAH is responsible for coordinating activities of the Department with respect to adolescent health, including coordinating program design and support, evaluation, trend monitoring and analysis, research projects, and training of healthcare professionals. The Office is charged with carrying out demonstration projects to improve adolescent health as well as implementing and disseminating information on adolescent health. In FY 2010, OAH issued joint funding opportunity announcements with both the Administration for Children and Families' Personal

Responsibility Education Program and the Centers for Disease Control and Prevention's Safe Motherhood Program. The Secretary has designated Reducing Teen and Unintended Pregnancy as one of her key inter-agency Collaboration areas. OAH also implements and administers the Pregnancy Assistance Fund, Support for Pregnant and Parenting Teens and Women, authorized in the Affordable Care Act (ACA).

The FY 2012 budget request for OAH is \$1.3 billion, an increase of \$750,000 over the FY 2010 funding level. In FY 2012, OAH intends to provide continued support for existing activities as well as initiate the Second Decade Project which is designed to maximize health and healthy development in the second decade of life (ages 10-19) through enhanced coordination and integration of the many health-relevant interventions and activities that affect persons in this age group.

Teen Pregnancy Prevention (TPP): TPP is a new discretionary grant program to support evidence-based teen pregnancy prevention approaches. The program is under the direction of OAH. The Office's funding supports competitive grants to public and private entities to fund medically accurate and appropriate programs designed to reduce teen pregnancy and for the Federal costs associated with administration and evaluation. TPP is a key element of the Secretary's inter-agency collaboration to *Reduce Teen Pregnancy and Unintended Pregnancy*. TPP funds support both the replication of evidence-based models and demonstration programs to replicate one or more of 28 evidence-based program models, identified by HHS through an independent systematic review of the literature. OAH is currently funding 75 grants. Nineteen additional grants are being funded to develop, refine and test additional models and innovative strategies for preventing teen pregnancy. Additionally, in collaboration with the Centers for Disease Control and Prevention (CDC), TPP is supporting eight grants to implement and test multi-component community-wide initiatives. OAH is also collaborating with the Assistant Secretary for Planning and Evaluation (ASPE), the Administration for Children and Families (ACF), and CDC in implementing TPP program and evaluation activities. OAH is also partnering with ASPE to support an ongoing annual review of the evidence base. The FY 2012 budget request (included in the Prevention and Public Health Fund) for TPP is \$110 million; the same as the FY 2010 funding level.

Longitudinal Study of Teen Pregnancy Project: The FY 2012 budget request includes \$4.5 million in PHS evaluation funds for OASH to carry out longitudinal evaluations. Most of these funds support the Evaluation of Adolescent Pregnancy Prevention Approaches (PPA) study. This is one of 23 evaluation programs designed to strengthen the quality and rigor of Federal program evaluation. OASH intends to work with ASPE, the Office of Management and Budget and the Council of Economic Advisors during the planning, design, and implementation of the study.

Office of Population Affairs (OPA)/Adolescent Family Life (AFL): OPA administers the Family Planning Program under Title X of the Public Health Service Act which is funded through the Health Resources and Services Administration (HRSA). AFL is administered by the Office of Adolescent Pregnancy Programs, created in 1981 by Title XX of the Public Health Service Act. AFL's budget provides funding for care demonstration, prevention, and research. HHS is not requesting funds for the AFL program for FY 2012. Mandatory funding for the Pregnancy Assistance Fund was included in the Patient Protection and Affordable Care Act. The new program directs resources to similar populations and activities, making the AFL program duplicative.

Office of Research Integrity (ORI): ORI's mission is to promote integrity in the research programs of the Public Health Service (PHS), both intramural and extramural, including responding to allegations of research misconduct. In recent years, ORI has placed greater emphasis on education, research, evaluation, and prevention activities. In response to these changes, ORI adopted an action plan that would: 1) establish a research program to study the factors influencing research integrity; 2) support an education program on the responsible conduct of research; and 3) foster ongoing collaborations with ORI's teaching and research partners, including academic and scientific societies, and numerous individual institutions.

The FY 2012 budget request of \$9.7 million is an increase of \$591 thousand above the FY 2010 funding level. In FY 2012, the ORI Initiatives are categorized broadly into these programs: 1) Research Integrity Officer Training; 2) Extramural Research on Research Integrity; 3) Conferences and Workshops; 4) Educational Resources Development; and 5) Communications. In addition, ORI plans to support a website for Research Integrity Offices. The Extramural Research Program will continue in partnership with NIH to provide funds for studies on research integrity.

Office on Women's Health (OWH): Established in 1991, the OWH's mission is to provide leadership to promote health equity for women and girls through gender-specific approaches, with the vision of ensuring that "all women and girls are healthier and have a better sense of well-being." The OWH achieves its mission and vision through the development of innovative programs, by educating health professionals, and motivating behavior change in consumers through the dissemination of health information. OWH instituted a Strategic Plan for FY 2010 - FY 2015, which became effective in October 2008. Under this plan, OWH funds evidence-based interventions to address gaps in women's health areas that are not addressed at the national level by any other public or private entity. These interventions focus on disparities in women's health, in which minority status, disabilities, geography, family history, low socioeconomic status (SES), chronic conditions, and infectious diseases are contributing risk factors. The FY 2012 budget request for OWH is \$33.7 million, the same as FY 2010 funding.

Prevention and Public Health Fund (PPHF): The Affordable Care Act (ACA) established a mandatory appropriation for prevention and public health activities. The Act provided \$500 million beginning in FY 2010. For FY 2012 the law appropriates \$1 billion into the Fund. The Fund's purpose is "to expand and sustain national investment in prevention and public health programs to improve health and help restrain the rate of growth in private and public sector health care costs."

ACA provides the Secretary with the authority to transfer appropriated amounts to accounts within HHS. The FY 2012 HHS allocation for the \$1 billion available in the PPHF provides approximately one-third to support public health infrastructure and workforce, a third supports community and State prevention activities, and a third supports critical areas in prevention research, health screenings, tobacco and obesity prevention, and health care surveillance. The FY 2012 HHS allocation includes the following agencies: ASPA (Assistant Secretary for Public Affairs, \$9.1 million), ASPE (\$100 thousand), and OASH (\$3.8 million).

ASPE's allotment is expected to provide funds to evaluate the obesity prevention and fitness activities funded with resources from the Prevention Fund. APSA's PPHF allotment is intended to support disease prevention efforts, education to consumers and patients about programs and procedures to help them live healthier lives.

Assistant Secretary for Planning and Evaluation (ASPE) www.aspe.hhs.gov

ASPE serves as the principal policy advisor to the Secretary of HHS on issues related to health, disability, aging, human services, and science. ASPE conducts research and evaluation studies; provides critical policy analysis, development, and advice; provides policy planning, coordination, and management; conducts research, evaluation, and data collection; and estimates the costs and benefits of policies and programs under consideration by HHS or Congress. ASPE has a long history of leading special initiatives on behalf of the Secretary (e.g., health care and welfare reform), and provides direction for HHS-wide strategic, evaluation, legislative and policy planning.

Four policy offices within ASPE (Health Policy, Science and Data Policy, Human Services Policy, and Disability and Long Term Care Policy) perform these functions with a focus on their primary population or issue of interest. The FY 2012 request for ASPE is \$57.3 million (excluding the Children's Health Insurance Program and the Prevention and Public Health activities). The FY 2012 funding level would allow ASPE to continue a variety of independent policy research and evaluation activities across the

spectrum of the HHS's programs, with particular attention to strategic plan goals, Secretarial strategic initiatives, priorities, key interagency collaborations, and crosscutting initiatives. Set-aside funds are used to conduct research and collect data for evaluation studies; and estimate the costs, benefits and impacts of policies and programs under consideration by HHS or the Congress. ASPE's work supports HHS' mission and achievement of the Strategic Goals: to transform health care, advance scientific knowledge and innovation, and advance safety, health, and well-being.

ASPE maintains a grants program to support academically-based research centers and has a long history of supporting research and evaluation of important and emerging social policy issues associated with income dynamics, poverty, individual and family functioning, marriage and family structure, transitions from welfare to work, child wellbeing, and special populations. Federal support for the poverty center program, with both national and regional foci, has been continuous since 1968. ASPE instituted support for a national center on family and marriage research in FY 2007.

ASPE's grants for academic research institutes range from \$350,000 to \$750,000 per year. All of the centers develop and mentor social science researchers whose work focuses on these issues. The poverty center program conducts a broad range of research to describe and analyze national, regional and state environments (e.g., economics, demographics) and policies affecting the poor, particularly families with children who are poor or at-risk of being poor. It also focuses on expanding our understanding of the causes, consequences and effects of poverty in local geographic areas, especially in states or regional areas of high concentrations of poverty, and on improving our understanding of how family structure and function affect the health and well-being of children, adults, families and communities.

Agency for Health Care Research and Quality (AHRQ)

www.ahrq.gov

AHRQ funds health services research initiatives that seek to improve the quality of health care in America. It conducts and supports health services research, both within AHRQ as well as in leading academic institutions, hospitals, physicians' offices, health care systems, and many other settings across the country. Carolyn Clancy is the AHRQ Administrator.

The FY 2012 budget request for AHRQ is \$366.4 million, a reduction of \$30.7 million and 7.7 percent below the FY 2010 funding level in PHS Evaluation Funds. The agency's total FY 2012 Program level, including transfers from the Patient-Centered Outcomes Research Trust Fund is \$390.4 million.

Within the Health Costs, Quality and Outcomes (HCQO) budget activity, AHRQ supports research related to five research priorities. These research portfolios include: Patient-Centered Health Research, Prevention/Care Management, Value Research, Health Information Technology, and Patient Safety. In addition, AHRQ supports Crosscutting Activities Related to Quality, Effectiveness and Efficiency Research. Crosscutting Activities include a variety of research projects that support all of the research portfolios. These activities include data collection, measurement, dissemination and translation, program evaluation, grant review support, and other crosscutting contracts. The FY 2012 budget request for research on HCQO is \$232.6 million, 14.1 percent below the FY 2010 Actual funding level in PHS Evaluation Funds. At the total program level, HCQO funding is \$19.5 million below the FY 2010 funding level. The FY 2012 request is provided using PHS Evaluation Funds and, in addition, AHRQ is scheduled to receive transfers.

Patient-Centered Health Research is designed to inform health-care decisions by providing evidence on the effectiveness, benefits, and harms of different treatment outcomes. The FY 2012 budget request is \$21.6 million, 2.9 percent above the FY 2010 funding level. In FY 2012 AHRQ plans to provide support \$12 million for evidence synthesis, \$7 million for evidence generation, \$500 thousand for grant commitments for translation and dissemination, and \$1.5 million for training and career development. The FY 2012 budget request does not provide funding for horizon scanning (the identification of current

or emerging medical interventions available to diagnose, treat, or otherwise manage a particular condition), evidence gap identification, or the community forum.

The goal of AHRQ's Value Research Portfolio is to help assure that consumers and patients are served by health care organizations that reduce unnecessary costs while maintaining or improving quality. The FY 2012 budget request is \$3.7 million, the funding level for FY 2010. In FY 2012, AHRQ intends to focus on further developing measures and data, expanding and enhancing MONAHRQ (a Web-builder), growing the evidence base on successful payment, and partnering with providers, communities and other stakeholders in implementing strategies to improve healthcare value.

AHRQ's Health Information Technology Research (Health IT) Portfolio's aim is to identify challenges to health information technology adoption and use, solutions and best practices for making health IT work, and tools that will help hospitals and clinicians successfully incorporate new health IT. The FY 2012 budget request is \$27.6 million, \$73 thousand below the FY 2010 level. In FY 2010, AHRQ plans to provide \$6.2 million in new research grants for investigator-initiated IT research and for research on consumer-focused uses of health IT and health care decision making. Since 2004, AHRQ has provided research grants to increase the understanding of the ways health IT can improve health care quality. The FY 2012 budget request for Research on Utilizing Health IT to Improve Quality is \$14.3 million, an increase of \$1.4 million above the FY 2010 Actual funding level. Within this sum, \$8.1 million is continuation funding for research grants, including \$1 million for health IT Centers for Education & Research on Therapeutics (CERTs). The FY 2012 request also provides \$62 million in new research grants for investigator-initiated health IT research and for research on consumer-focused uses of health IT and health care decision making.

AHRQ's Prevention/Care Management program is designed to improve the delivery of primary care services and is accomplished through the support of health services and behavioral research and facilitation of translation of evidence into effective primary care practice. Through the program, AHRQ fosters the generation of new knowledge about prevention and chronic conditions with a focus on the care of complex patients with multiple chronic conditions. In 2010, the portfolio received the final reports from 18 development grants exploring the complex prevention and care needs of people with multiple chronic conditions. The FY 2012 budget request for the program is \$7 million, an increase of \$2.5 million above the FY 2010 funding level. Investing in the new research grants is the portfolio's highest priority and is designed to ensure a stable level of grant funding. It intends to provide \$2.8 million in new grants to further improve prevention and care management for complex patients.

The FY 2012 budget request for AHRQ's Clinical Decision-making for Preventive Services is \$11.5 million, an increase of \$5.5 million above the FY 2010 funding level. The majority of the funding for this program is intended for the U.S. Preventive Services Task Force (USPSTF), \$11.3 million, an increase of \$7 million in PHS Evaluation Funds and \$1.9 million above the FY 2010 Program level which included \$5 million from the Prevention and Public Health Fund. The funding will support evidence reviews; methods development including modeling; management of public comment processes to enhance transparency; technical assistance in translation and dissemination of USPSTF recommendation statements; and expanding outreach activities with stakeholders.

AHRQ's Patient Safety Portfolio supports health services research in: patient safety threats and medical errors, patient safety organizations, patient safety and medical liability reform, and health-care-associated infections. The FY 2012 budget request is \$64.6 million, 28.7 percent below FY 2010 funding. The majority of the decrease for research in this area occurs because of a one-time investment in FY 2010 for the multi-year Patient Safety and Medical Liability Reform projects. In FY 2012, AHRQ plans to direct \$34 million to research related to healthcare associated infections.

AHRQ's Crosscutting Activities area supports investigator-initiated and targeted research that focus on health services research in the areas of quality, effectiveness and efficiency. The FY 2012 budget request is \$91.8 million, 17.9 percent below the FY 2010 level. In FY 2012, AHRQ plans to provide \$6.3 million in funding for new grants, of which \$3.3 million would fund new investigator-initiated research

and \$3 million is planned for targeted research grants. The FY 2012 budget request provides \$40 million for Health Services Research Grants.

In addition to research, AHRQ supports the **Medical Expenditure Panel Survey (MEPS)**, the only national source of annual data on the specific health services that Americans use, how frequently they are used, their costs, and the sources for paying them. This data is used to create economic models of health care use and expenditures. The FY 2010 budget request for MEPS is \$59.3, an increase of \$500,000 above the FY 2010 spending.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
403		610.9		390.0	-36.2%	-3.2%

Centers for Disease Control and Prevention (CDC)

www.cdc.gov

The mission of the Centers for Disease Control and Prevention’s (CDC) is to promote health and quality of life by preventing and controlling disease, injury, and disability. The CDC monitors health, detects and investigates health problems, conducts research to enhance prevention, develops and advocates sound public health policies, promotes healthy behaviors, implements disease prevention strategies, and maintains national health statistics. Headquartered in Atlanta, the CDC is comprised of 18 institutes, centers and offices. Thomas Frieden, former New York City Health Commissioner, directs CDC.

The FY 2012 President’s budget request includes a total funding level of \$11.255 billion in discretionary and mandatory budget authority, Public Health Service Evaluation funds, transfers from the Supplemental Appropriations Act of 2009 and the Affordable Care Act—an overall increase of \$370.9 million above the FY 2010 enacted level. The discretionary budget request is \$5.9 billion.

The FY 2012 request includes reductions or eliminates the following programs: Preventive Health and Health Services Block Grant (-\$100.3 million), the Racial and Ethnic Approach to Community Health (-\$39.3 million), Education and Research Centers (-\$24.4 million), the National Occupational Research Agenda (-\$23 million), the Built Environment (-\$2.7 million), Climate Change (-\$.972 million), and Genomics (-\$11.6 million).

Included in the FY 2012 budget is an increase of \$560.7 million for CDC from the Affordable Care Act Prevention and Public Health Fund (ACA/PHFF). Of the \$1 billion available in the Fund, HHS has allocated \$752 million for CDC programs that would: Promote Information for Action (\$45 million), Build Essential Public Health Detection and Response (\$132.2 million) and Prevent the Leading Causes of Death (\$573.3 million)

HHS proposes to allocate \$45 million from the Prevention and Public Health Fund (PPHF) in FY 2012 to support select investments that will aid the description of the health, wellness and disease of populations. The objectives are to: 1) advance state and community epidemiology, surveillance, and policy environments, 2) develop public health clinical decision support tools for infectious and non-communicable diseases, 3) track a wide range of measures of health status, health risk factors, insurance coverage, access to care, unmet needs and use of services for critical subgroups, 4) provide information about the organizations and providers that supply health care, the services rendered, and the patients they service across diverse clinical and community settings, and 5) accelerate the adoption and implementation of evidence-based recommendations at the state and local levels.

Within CDC's PPHF allocation is \$10 million, a \$5 million increase, to support the reauthorization of the Community Guide/Community Preventative Task Force to accelerate the movement of research into practice and disseminate evidence-based, proven interventions for wellness and prevention.

In FY 2012, within CDC's allocation, the proposed budget seeks \$35 million, a \$15.1 million increase above the FY 2010 level, to support the agency's health care surveillance activities. The request includes increases above the FY 2012 base request for the National Health Interview Survey, selected surveys of providers, and the Behavioral Risk Factor Surveillance System (BRFSS), a state-based system of health surveys that collects information on health risk behaviors, preventive health practices, and health care access primarily related to chronic disease and injury. For FY 2012, the Administration requests \$15.2 million for BRFSS that would fund tracking the impact of the ACA on access to and utilization of health care resources and to evaluate the impact of ACA on prevalence estimates for diseases, health conditions, and risk behaviors for the leading causes of death and disability.

The National Center for Health Statistics: The National Center for Health Statistics (NCHS) is the nation's principal health statistics agency, providing the data to identify and address health issues. The FY 2012 budget request for Health Statistics is \$161.9 million, an increase of \$23.2 million above the FY 2010 funding level and the same as last year's request.

NCHS's National Health and Nutrition Examination Survey (NHANES) produces estimates of both diagnosed and undiagnosed medical conditions. The National Health Interview Survey (NHIS) is the largest household health survey providing data for analysis of broad health trends, as well as the ability to characterize persons with various health problems, determine barriers to care, and compare functional health status, health related behaviors, and risk factors across racial and ethnic populations. The NHIS will include questions to track the ACA impact on access and utilization of care. The survey will also monitor ACA's impact on health and health care disparities, including utilization of services such as screening tests and diagnostic and therapeutic procedures.

CDC's National Vital Statistics System (NVSS) supplies the nation's official vital statistics data based on the collection and registration of birth and death events at the state and local level. It is the most complete and continuous data available to public health officials at the national, state, and local levels, and in the private sector. The FY 2012 request includes funding to fully support electronic birth records in all 50 states.

HIV/AIDS, Viral Hepatitis, STD, and TB Prevention: In this area, the agency works in collaboration with its partners at the community, state, national and international levels applying well-integrated, multidisciplinary programs of research, surveillance, risk factor and disease intervention and evaluation. These efforts are guided by three overarching priorities: reducing health disparities; encouraging program collaboration and service integration; and maximizing global synergies.

The FY 2012 budget is \$1.2 billion, including \$30.4 million from the ACA/PPHF, a \$68.8 million increase above the FY 2010 funding level. The request also includes a transfer of \$40 million from the Chronic Disease Prevention and Health Promotion budget for the comprehensive school health program to achieve closer coordination with CDC's HIV program and activities. The request provides a substantial investment to achieve the goals of the National HIV/AIDS Strategy (NHAS).

For Domestic HIV/AIDS Prevention and Research, the FY 2012 budget request is \$857.6 million, including \$30.4 million from ACA/PPHF, an increase of \$58.3 above the FY 2010 funding level. CDC will transfer one percent of its domestic HIV/AIDS budget to the HHS to support cross cutting efforts to implement NHAS. In FY 2012, among other things, the CDC intends to combine biomedical, behavioral, and structural approaches and integrate them through program activities and demonstration projects within CDC's HIV prevention portfolio, specifically for six to 10 high burden jurisdictions to develop, monitor, and evaluate innovative models for prevention (\$9.7 million allocation from the ACA/PPHF).

The CDC's FY 2012 budget request for HIV Surveillance is \$115.8 million. The funding would support the three primary goals the NHAS: 1) reducing HIV incidence, 2) increasing linkage to quality care and retention in care of previously diagnosed individuals, and 3) reducing health disparities. The agency intends to continue to fund, as part of the National HIV Behavioral Surveillance system, 20 project areas to conduct surveillance for behavioral risks among three different populations at increased risk for HIV infection.

The CDC's budget request for the Chronic Disease Prevention and Health Promotion is \$1.185 billion, including \$460.3 million from the ACA/PPHF. The FY 2012 program level includes an increase of \$72.4 million for the new Chronic Disease and Health Promotion Grant Program. The FY 2012 request eliminates the following programs: Healthy Communities (\$22.6 million), and REACH (\$39.3 million). The request also eliminates the Preventive Health and Health Services Block Grant, a decrease of \$100.3 million below the FY 2010 funding level.

The CDC's budget request creates a new approach to Preventing Chronic Diseases through a new Comprehensive Chronic Disease Prevention Program (CCDPP) by consolidating CDC's Heart Disease and Stroke, Diabetes, Cancer, Arthritis and other Conditions, Nutrition, Health Promotion, Prevention Centers, and select school health activities into one competitive grant program. The FY 2012 request includes a \$72.4 million increase for this new program, of which \$420 million would fund performance incentive awards or grantees that have substantially improved health outcomes.

The FY 2012 budget request for CCDPP is \$705.4 million which includes \$157.7 million from the ACA/PHFF. The request creates the Chronic Disease Prevention and Health Promotion Grant Program to improve the outcomes and reduces the national burden of chronic disease. For CDC's Global Health program, the FY 2012 budget request of \$381.2 is \$26.8 million above the FY 2010 funding level.

	Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
Immunization and Respiratory Diseases	708.3		N/A		647.2	N/A	-8.6%
HIV/AIDS, Viral Hepatitis, STD and TB Prevention	1,088.3		N/A		1,157.1	N/A	6.3%
Emerging and Zoonotic Infectious Diseases	261.2		N/A		289.1	N/A	10.7%
Chronic Disease Prevention and Health Promotion	865.4		N/A		725.2	N/A	-16.2%
Birth Defects, Developmental Disabilities, Disability and Health	143.6		N/A		143.9	N/A	.2%
Environmental Health	181		N/A		128.7	N/A	-28.9%

Injury Prevention and Control	148.8	N/A	147.5	N/A	-.9%
Preventive Health and Health Services Block Grant	100.2	N/A	0	N/A	-100%
Public Health Scientific Services	160.6	N/A	205.9	N/A	28.2%
NCHS	(138.7)	(161.9)	(161.9)	(0%)	(16.7%)
Occupational Safety and Health	282.9	N/A	0	N/A	-100.0%
Global Health	354.4	N/A	381.2	N/A	7.6%
Public Health Leadership and Support	144.2	N/A	121.4	N/A	-15.8%
Buildings and Facilities	69.1	N/A	30	N/A	-56.6%
Business Services Support	366.7	N/A	417.5	N/A	13.9%
Public Health Preparedness and Response	1,522.3	N/A	1,422.6	N/A	-6.5%
CDC Total, L/HHS/Ed-BA	6,397.2	N/A	5,817.4	N/A	-9.1%
Agency for Toxic Substances and Disease Registry	76.8	N/A	76.3	N/A	-.7%
Total, CDC/ATSDR Budget Authority	6,474	N/A	5,893.7	N/A	-9%

National Institutes of Health (NIH)

www.nih.gov

The NIH's mission is science in pursuit of fundamental knowledge about the nature and behavior of living systems, and the application of that knowledge to extend healthy life and reduce the burdens of illness and disability. The research supported by the agency extends from basic research that explores the fundamental workings of biological systems and behavior, to studies that examine disease and treatments in clinical settings, to prevention and population-based analyses of health status and needs. The agency is led by Francis Collins, the NIH's 16th director. The mission of NIH is pursued by 27 Institutes and Centers (ICs) and offices, which support and conduct research through a far-reaching extramural research community and an intramural research program.

The extramural community is composed of non-Federal scientists at universities, medical centers, hospitals, and research institutions throughout the country and abroad. More than 300,000 scientists and research personnel affiliated with more than 3,100 organizations make up the extramural

community. NIH funds are primarily awarded through a two-tiered independent review system designed to ensure that the best proposals are funded. Approximately, 10 percent of NIH's budget supports a core program of basic and clinical research activities administered and staffed by NIH physicians and scientists.

The President's FY 2012 budget request for the NIH is \$31.987 billion, 2.4 percent above the FY 2010 funding level. The FY 2012 budget request "reflects an effort, amid economic uncertainty and fiscal constraint to fulfill the President's unwavering commitment to international leadership in science and progress in biomedical research." Presidential initiatives in the FY 2012 budget request include support for cancer, autism, and Alzheimer's research. Other NIH priorities for FY 2012 include Type 1 diabetes, and HIV/AIDS. In H.R. 1, the House proposed to reduce NIH's funding by \$1.6 billion below the FY 2010 level.

In FY 2012, NIH proposes the creation of the National Center for Advancing Translational Sciences (NCATS). The program would "place the agency in a pivotal position to contribute to re-engineering the pipeline for diagnostics and therapeutics discovery and development." NIH will release the budget details for NCATS later this year.

NCATS is intended to align and bring together a number of trans-NIH programs that do not have a specific disease focus in one organization. NCATS programs are expected to include the following components: the Molecular Libraries Program (MLP), which provides researchers with access to technology for assay development; the Therapeutics for Rare and Neglected Diseases (TRND) program, designed to bridge the gap between basic research discovery and testing of a new drug in humans; the NIH Rapid Access to Interventional Development (RAID) program, which assists in filling the gap and reducing common barriers that block progress of therapeutic discoveries from the bench to the bedside; and the Cures Acceleration Network (CAN) authorized by Congress in the Affordable Care Act of 2010 to advance the development of "high need cures" through the reduction of barriers between research discovery and clinical trials. NCATS will be involved in the new NIH-FDA Partnership formed in 2010 to foster regulatory science, "a specialized and interdisciplinary area of biomedical research that generates new knowledge and tools for assessing experimental therapies, preventatives, and diagnostics." The NIH Clinical and Translational Science Awards (CTSAs), which provide funding for a nationwide consortium of biomedical research institutions, will also be subsumed in NCATS. Launched in 2006, the CTA program currently includes 55 medical research institutions in 28 states and the District of Columbia.

The NIH intends for NCATS to focus research efforts in high-need areas that attract insufficient commercial interest, areas that will not detract from the agency's emphasis on fundamental knowledge but rather stimulate the pursuit of new avenues of scientific inquiry. The intent is for the Center's scientific agenda to evolve to meet the emerging needs of the field.

In FY 2012, the agency plans to emphasize three areas that would pave the way for more rapid scientific advances across all areas of human health and disease, including global applications: (1) technologies to accelerate discovery; (2) enhancing the evidence for health care decisions; and (3) attracting new investigators to the agency.

The agency has established policies to guide its investments while at the same time limiting inflationary cost increases. These policies include: a one-percent increase in the average cost of competing and non-competing Research Project Grants (RPGs), the primary mechanism for funding investigator-initiated medical research; a one percent increase in Research Centers and Other Research, awards to institutions on behalf of a program director and a group of collaborating investigators; and a one-percent increase for Intramural Research and Research Management and Support. The agency is also planning to constrain staffing levels.

The NIH budget request is designed to protect critical activities, including new and competing RPGs, to the extent possible within overall funding constraints and requirements to support extramural

commitments and NIH's infrastructure. In FY 2012, the NIH plans to increase funding for RPGs by \$436 million to \$16.909 billion. This focus will lead to 424 more competing RPGs than in FY 2011, but 228 fewer RPGs than in FY 2010. The number of RPGs will increase by 43 grants to 36,852. The FY 2012 budget request for Research Centers is \$3.03 billion, a decrease of \$41 million from FY 2010. This total will reduce the number of awards by 18. For Other Research, the FY 2012 budget request is \$1.8 billion, an increase of \$25 million from FY 2010.

Office of the Director (OD)
<http://www.nih.gov/icd/od/>

The OD centrally coordinates: extramural and intramural research activities; science policy and related social, ethical, and legal issues; health information, dissemination and education functions; legislative activities; oversight of the agency's stewardship of public funds; and technology transfer and intellectual property protection policies for NIH. The FY 2012 budget request for the OD is \$1.298 billion, 10.2 percent above the FY 2010 funding level. The majority of the increase is designated for the Cures Acceleration Network. The OD's budget includes \$194 million for the NCS, the same amount as in FY 2010.

In FY 2012, NIH intends to continue to fund several trans-NIH initiatives that benefit all or most of the Institutes and Centers (ICs) through assessments on the ICs, typically based on their proportion of the overall NIH budget, or their estimated use of the activity or equipment funded through the initiative. The agency plans to continue to fund several such initiatives in FY 2012, including providing \$10 million for the OppNet, the NIH Basic Behavioral and Social Sciences Opportunity Network, a trans-NIH initiative designed to expand the agency's funding of basic behavioral and social sciences research. Funding associated with these assessments is incorporated within each IC's budget. The NIH Office of Behavioral and Social Sciences Research (OBSSR) intends to provide support to OppNet, although an amount is not specified in the President's budget request.

OppNet has made significant progress since its launch in the fall of 2009. National Institute of Aging director Richard Hodes and National Institute of General Medical Sciences director Jeremy Berg provide scientific leadership as Steering Committee co-chairmen. In FY 2010 it solicited applications and awarded 35 competitive revisions for \$7.1 million to add basic science projects to existing research project grants. OppNet also awarded eight competitive revisions to Small Business Innovation Research/Small Business Technology Transfer projects for \$1.6 million, and 16 career grants to mid-career and senior scientists for training opportunities in basic social and behavioral sciences or for basic researchers who seek training in complementary areas for \$1.6 million.

The FY 2010 strategic planning process initiated by OppNet included a request for information on health and well-being issues, which yielded 352 collected responses. These responses subsequently informed a planning process that resulted in the issuance of 10 funding opportunity announcements for FY 2011 in basic biobehavioral mechanisms related to sleep and social environments, basic mechanisms of behavioral maintenance, building intellectual capacity in basic behavioral and social sciences, self-regulation mechanisms, and psychosocial stress-related issues (including the development of comprehensive and conceptually-based measures, and the integration of behavioral and psychosocial processes. The program is scheduled to sunset at the end of FY 2014.

Division of Program Coordination, Planning and Strategic Initiatives (DPCPSI)

<http://dpcpsi.nih.gov/>

Fulfilling the requirements of the NIH Reform Act of 2006, the OD established the Division of Program Coordination, Planning and Strategic Initiatives (DPCPSI). The Division oversees management of the Common Fund, and organizes the trans-NIH effort to identify, plan, and implement the NIH Roadmap for Medical Research initiatives supported by the Common Fund. James M. Anderson heads DPCPSI

DPCPSI is also the home of four other OD programmatic offices: the Office of Behavioral and Social Sciences Research (OBSSR), the Office of Disease Prevention (ODP), the Office of Research on Women's Health (ORWH), and the Office of AIDS Research (OAR). The FY 2012 budget request for DPCPSI is \$8.4 million, two percent above the FY 2010 funding level. In FY 2012, DPCPSI plans to implement enhancements to its portfolio analysis efforts and coordinate and collaborate on related activities with other Federal agencies and the private sector.

The 2006 NIH Reform Act codified the **Common Fund (CF)** to support important areas of emerging scientific opportunities, rising public health challenges, or knowledge gaps that deserve special emphasis and would benefit from conducting or supporting additional research that involves collaboration between two or more national research institutes or national centers, or would otherwise benefit from strategic coordination and planning. The programs are designed for five to 10 years of CF support. The FY 2012 budget request is \$556.9 million, 2.5 percent above the FY 2010 funding level. The CF plans to support a one-percent inflationary increase for non-competing and competing grants.

Strategic Planning for FY 2012 programs began in May 2010 with a brainstorming session with leading external panel members. NIH will pursue ideas discussed at and following that meeting in the current fiscal year. Strategic planning for the CF in 2010 resulted in three new CF programs in FY 2011 to assist in reforming the health care system. These include the Health Economics program, the HMO Research Network Collaboratory program and projects funded through the High Risk/High Reward initiative.

The Health Economics Common Fund program was launched during the consideration of national health care reform and is designed to support a series of projects; some that build on the findings of comparative effectiveness research (CER), to identify and develop new approaches to improve health and at the same time increase the efficiency and quality of health care delivery. The program supports initiatives investigating economics of prevention strategies, costs and outcomes of health care delivery, and improvement of data infrastructure resources. A major challenge of health care reform is to slow the rate of cost growth without jeopardizing access to high-value care or slowing technological innovation. The FY 2012 budget request for Health Economics is \$11.6 million.

The HMO Research Network Collaboratory (HMORC) program, created in FY 2010, is designed to leverage and expand existing informational technology, electronic records systems, and scientific capacity within HMO health service networks to accelerate epidemiology studies and clinical trials that address cross-cutting NIH priorities. The FY 2012 budget request for the program is \$5.2 million, an increase of \$4.2 million above the FY 2010 level.

The projects funded through the High Risk/High Reward initiatives have been designed to enhance the evidence base for clinical care by identifying and examining behavioral aspects of patient health, compliance, and health costs. In FY 2011, Collins expanded the High Risk/High Reward program via the creation of the Early Independence Award (EIA) initiative, recognizing the need for further stimulation of the biomedical workforce, specifically to support researchers at the beginning of their independent careers. The program is designed to support exceptionally creative individuals at the end of their graduate training to move directly into independent research careers and skip the traditional post-doctoral period. Four CF initiatives are designed to foster innovation, risk-taking, and transformative research in any area of health research chosen by the investigators: 1) the NIH Director's Pioneer Award Program, 2) the NIH Director's New Innovator Award Program, 3) the Transformative Research Projects (TR01 program) and, 4) the NIH Director's Early Independence Award program. The FY 2012 budget request for the High Risk/High Reward program is \$229 million, an increase of \$54.1 million or 30.9 percent above the FY 2010 Enacted level. The increase comes from an expansion of the FY 2011 NIH Director's Early Independence Award program and the TR01 program in FY 2011 and FY 2010 to support two new cohorts of investigators.

In FY 2011, the NIH launched the **Science of Behavior Change Common Fund** program to improve the understanding of human behavior change across a broad range of health-related behaviors. The initiative supports basic research designed to improve the understanding of human motivation and

maintenance of behavior change across multiple diseases and conditions and then use this knowledge to develop more effective and economical behavioral interventions. The FY 2012 budget request for the Science of Behavior change program is slightly less than \$5 million, a 6.8 percent increase above the FY 2010 level. The request reflects the NIH's continued support of grants investigating behavior change at the social, contextual, behavioral, psychological, neurobiological, or genetic level of analysis.

The NIH Director plans to convene a series of trans-NIH workshops and brainstorming sessions beginning in FY 2011, supported through the Common Fund Strategic Planning Funds, to identify new research opportunities for FY 2012. These sessions will involve external and internal experts, public and private sector partners, and stakeholders. The FY 2012 budget request for the Strategic Planning Funds is \$2.6 million, an increase of \$1.75 million, more than doubling FY 2010 spending.

The Clinical and Translational Science Awards (CTSAs) program, established through Common Fund support, will not receive any CF funds in FY 2012. The program's funding and management, slated to transition to the National Center for Research Resources (NCRR), would be incorporated in NCATs, upon the establishment of the new entity (see above). NIH created the CTSAs program in 2006 to catalyze the development of a new discipline of clinical and translational science to facilitate research across the NIH ICs and the broader research community. The program's design enables researchers to provide and deliver new treatments more efficiently and quickly to patients. The program is currently funded jointly by NCRR and the NIH Common Fund.

In FY 2012 the Common Fund's Interdisciplinary Research Consortia program support will transition to the individual ICs. CF support of the program ends in FY 2011 with the expectation that ICs will continue to use the award mechanisms as needed to support interdisciplinary approaches, working together to foster research that cuts across IC mission boundaries. A major focus of the CF has been to foster new modes of conducting research with emphasis on the need for interdisciplinary approaches to address complex health problems. Nine Interdisciplinary Research Consortia were awarded funds to explore new ways to integrate different scientific disciplines to address critical health challenges. The program also piloted new award mechanisms for Interdisciplinary Research and Training as well as new methods of review for Interdisciplinary Research. The program also resulted in a change of policy within the NIH to recognize multiple Principle Investigators on NIH grants and developed new methods of inter-IC award management.

The FY 2012 budget request for the **National Children's Study (NCS)** is \$194 million, the same as in FY 2010. In FY 2012, the OD will support continuation of the NCS pilot or feasibility phase known as the Vanguard Study and the commencement of the NCS Main Study. The FY 2012 budget request is intended to allow the NCS to finalize the design of the Main Study based on the data generated from the Vanguard Study experience. An expert panel convened by the NIH Director will peer review the protocol in the first quarter of FY 2012 before field implementation of the Main Study, which is expected to launch in the second quarter of FY 2012. The NCS also plans to use FY 2012 funds to provide community outreach and communications for the Main Study, to support bio-specimen and environmental collections, and for administrative components including data coordination, an information management system, and study logistics.

The Office of Science Education (OSE) develops programs, instructional materials, and career resources that serve the nation's science teachers, their students (kindergarten through college), and the public. The activities are conducted through strategic partnerships with internal and external organizations. OSE also advises NIH leadership on education policy issues, coordinates related activities with NIH extramural and intramural offices, and represents NIH in federal education initiatives. The FY 2012 budget request for OSE is \$4.1 million, a two percent increase above the FY 2010 funding level.

In FY 2012, the NIH plans for the Office of Science Policy to continue to manage the initiative on bioethics established in FY 2010 for \$5 million. The initiative is part of the agency's broader goal to embed bioethics research and training projects across the NIH ICs.

The Director's Discretionary Fund (DDF) allows the NIH Director to respond quickly to new and high-priority research opportunities and health priorities. The FY 2012 budget for request for DDF is \$10 million, the same as the FY 2010 funding level.

	Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
Common Fund	544.0		561.6		556.9	-0.8%	2.4%
OAR	64.2		65.5		65.8	0.5%	2.5%
OBSSR	27.4		38.2		27.9	-27.0%	1.8%
OD Operations	151.0		158.4		153.9	-2.8%	1.9%
ORWH	43.0		44.3		43.8	-1.1%	1.9%
Director's Discretionary Fund	10.0		10.0		10.0	0.0%	0.0%
NCS	193.9		194.4		193.9	-0.3%	0.0%

Office of AIDS Research (OAR)

www.nih.gov/od/oar

The Office of AIDS Research has overall responsibility to plan and coordinate the NIH AIDS research programs sponsored by the 27 NIH ICs. As mandated by law, each year's priorities are determined through a collaborative process involving the ICs and non-government experts from academia and industry. Jack Whitescarver is the director of OAR.

The FY 2012 budget request for OAR is \$65.8 million, 2.4 percent increase above the FY 2010 funding level. The President's FY 2012 budget request for the trans-NIH research program is \$3.15 billion, an increase of \$74.2 million and 2.4 percent above the FY 2010 funding level. This sum includes \$26.7 million to be transferred to the Office of the Assistant Secretary of Health (OASH) in support of the National HIV/AIDS Strategy.

Early NIH-funded social and behavioral studies evaluated risk by associating specific behavior with AIDS, and later, with HIV transmission, according to the agency. Over time, sophisticated, comprehensive models incorporating multiple behavioral and social variables emerged to measure the risk attributable to specific behavioral and social factors and to quantify relationships among variables. Despite the advances over the past two decades in understanding and predicting risk behaviors, the agency recognizes that there is still a great need to translate research findings and reduce HIV transmission rates.

In July 2010, the Administration released the first comprehensive National HIV/AIDS Strategy for the United States (NHAS). The Strategy focuses on three overarching goals: 1) reducing the new HIV infections, 2) increasing access to care for people living with HIV; and 3) improving disease outcomes, reducing HIV-related health disparities, and achieving a more coordinated response.

In FY 2012 OAR's overarching research priorities include: expanding basic discovery research, reducing new infections, improving disease outcomes, reducing HIV-related disparities, and translating research from bench to bedside to community. Key prevention research areas include vaccines, microbicides, and behavioral and social science. Research is needed to better understand the causes of HIV-related health disparities, their role in disease transmission and acquisition, and their impact on treatment access and effectiveness. These include disparities among racial and ethnic populations in the U.S. as well as disparities between: developed and resource-constrained nations; men and women; youth and older individuals; and sexual identities. NIH intends to support research training for new investigators from racial and ethnic communities, development of research infrastructure, community outreach, information dissemination, and research collaboration to help reduce these disparities. Research that focuses on analyses of the feasibility, effectiveness, and sustainability required for the scale-up and implementation of interventions from a structured behavioral or clinical study to a broader "real world" setting, including critical epidemiologic and natural history studies, and collaborative networks will be supported in FY 2012. Research to address the global pandemic will remain a priority in FY 2012.

NIH supports research designed to gain a better understanding of how to change the risk behaviors that lead to HIV infection and disease progression, as well as how to maintain protective behaviors once they are adopted. It also supports studies that develop and evaluate interventions directly targeting the substance abuse and sexual behaviors associated with HIV transmission. The President's FY 2012 budget request for Behavioral and Social Science HIV/AIDS research is \$443.4 million, 3.3 percent above the FY 2010 funding level. NIH intends to continue to fund research to develop and evaluate effective interventions to prevent HIV transmission and acquisition by reducing HIV-related risk behaviors and increasing protective behaviors. It also plans to direct resources toward several new prevention initiatives, including studies integrating behavioral and social science methods with biomedical prevention strategies, community-based approaches to engaging and retaining persons in care, and the impact of improved care on reducing HIV transmission. A better understanding of biological-behavioral interactions will lead to the development of combination prevention interventions that can be used in different populations, including adolescents and older individuals.

The NIH recognizes that effective information dissemination approaches are integral to HIV prevention and treatment efforts and critical in light of the continuing advent of new and complex antiretroviral treatment regimens, issues related to adherence to prescribed treatments, and the need to translate behavioral and social prevention approaches into practices. The flow of information among researchers, health care providers, and the affected communities provides new opportunities to rapidly translate research results into practice and to shape research directions. The FY 2012 budget request of HIV/AIDS Information Dissemination is \$57.4 million, one percent above FY 2010 funding.

Natural history and epidemiologic research is crucial for monitoring epidemic trends, developing and evaluating prevention modalities, following the changing clinical manifestation of HIV disease in different populations, and measuring the effects of treatment regimens. As the AIDS epidemic continues to evolve, there is a critical need to continue to conduct epidemiologic studies in both domestic and international settings. The studies have delineated the significant health disparities that are critical factors in the epidemic. The FY 2012 budget request for Natural History and Epidemiology is \$280.6 million, a two percent increase above the FY 2010 level. In FY 2012, NIH intends to continue to provide support for high-priority epidemiology studies of groups and populations affected by HIV and at high risk of infection, including individuals over fifty years of age, men who have sex with men (MSM), especially MSM of color, and adolescents. NIH will also direct resources towards implementation/operational science including the evaluation of strategies to scale up efficacious and cost-effective interventions at the community level.

Office of Behavioral and Social Sciences Research (OBSSR)

www.obssr.od.nih.gov

The Office of Behavioral and Social Sciences Research (OBSSR) recognizes the critical role behavioral and social factors play in health, including prevention. OBSSR serves as the focal point for coordination and development of NIH policies, goals, and objectives in the behavioral and social sciences at NIH. OBSSR serves as a liaison between the NIH intramural and extramural communities, other federal agencies, academic and scientific societies, national voluntary health agencies, the biomedical research community, the media, and the general public on matters pertaining to behavioral and social sciences research. Robert M. Kaplan became OBSSR's fourth Director in February 2011.

The FY 2012 budget request for OBSSR is \$28 million, a two percent increase above the FY 2010 Actual funding level. In FY 2012, OBSSR plans to support the NIH Basic Behavioral and Social Science Opportunity Network (OppNet). The Office also intends to support two new initiatives. In the first, OBSSR will partner with the NIH ICs and other federal agencies to fund Mobile Technology Research to Enhance Health, focusing on using mobile technologies to facilitate research and health care delivery. The second, Population Health Consortium, will focus on enhancing, supporting and promoting sustainable population health research across existing NIH-funded centers and investigators.

In FY 2012, OBSSR plans to continue to support multi-year programs, including research to reduce or eliminate health disparities; a program to enhance the behavioral and social sciences content of medical school curricula; research to develop and translate basic behavioral and social science research into effective health behavior interventions; research on social networks and health; and studies using systems science methodologies to address policy resistant problems in public health. OBSSR also intends to support research which applies system approaches to health disparities through the Network on Inequality, Complexity, and Health.

In FY 2012, the Office plans to offer its annual summer training institutes: systems science methodology and health; randomized clinical trials involving behavioral interventions; dissemination and implementation research in health; and mobile health. OBSSR also intends to offer an online educational program in genetics for behavioral and social scientists and host the fifth annual trans-NIH conference on the science of dissemination and implementation.

Office of Disease Prevention (ODP)

www.prevention.nih.gov/

The mission of ODP is to foster, coordinate and assess research in prevention as a cost-effective means to improve public health in the nation and the world. The Office collaborates with other federal agencies, academic institutions, the private sector, nongovernmental organizations and international organizations to formulate research initiatives and policies designed to promote public health. Barnett Kramer is ODP's director.

ODP takes the lead at NIH in developing Healthy People 2020. It is also the lead NIH office that works with the Office of the Secretary on the development of the National Prevention Strategy within the Affordable Care Act. In that capacity, ODP advises the Office of the Secretary on the science base of clinical and community based preventive interventions. The FY 2012 budget request for ODP is \$1.4 million, two percent above the FY 2010 funding level.

In FY 2012, ODP intends to continue to stimulate disease prevention research across the NIH and to coordinate and collaborate on related activities with other federal agencies and the private sector. Like the other OD offices, excluding OAR, ODP does not have research grant authority or funds. It will work through convening the trans-NIH, trans-Agency Prevention Research Coordinating Committee. The Office will also regularly convene joint meetings with the National Health Interview Survey and the National Prevention Strategy planning staff of the Centers for Disease Control and Prevention to nurture collaborations.

Office of Research on Women's Health (ORWH)

www4.od.nih.gov/orwh

ORWH serves as the focal point for women's health research at NIH. ORWH collaborates through the NIH ICs as well as the scientific and advocacy community to implement a research agenda on women's health and provide funding and/or co-funding. Vivian Pinn is the director of ORWH.

In 2010, ORWH undertook a strategic planning process designed to determine future priorities for women's health and sex differences research and for career development initiatives for the coming decade. The resulting report, *Moving into the Future with New Dimensions and Strategies: a Vision for 2020 for Women's Health Research*, provides recommendations for advancing women's health research, based on progress and newer methodological advances. The FY 2012 budget request is \$43.8 million, two percent above the FY 2010 funding level. In FY 2012 ORWH plans, in partnership with NIH Institutes and Centers, to coordinate the implementation of the new strategic plan.

The Office, through a research grant program, intends to encourage investigators to apply emerging technologies to sex differences research. It also plans to support a new round of awards of the ORWH-sponsored Specialized Centers of Research (SCOR) on Sex Differences. The Centers explore research from the basic level to translation into clinical practice. ORWH intends for the Centers to focus on developing more accessible, accurate and personalized prevention, diagnostics, and therapeutics that are sex and gender appropriate. The Office expects the centers to accelerate the application of research results to the clinical care of diverse populations.

ORWH also plans to maximize the domestic and global impact of women's health research via collaborative alliances. The Office plans to begin the development of strategic global initiatives in women's health and gender research to address issues such as the effect of environmental factors on women's health in the context of the lifespan, reproduction and aging in the global community.

Through the Expanding on the Building Interdisciplinary Research Careers in Women's Health (BIRCWH) program, ORWH aims to implement interdisciplinary research career development opportunities to address the organizational, institutional, and systemic factors that impeded the careers of women and men scientists across career stages.

John E. Fogarty International Center for Advanced Study in the Health Sciences (FIC)

www.fic.nih.gov

The Fogarty Center's core mission is to use science to reduce the deepening global disparities in health. Roger Glass is the director of Fogarty.

Research supported by FIC ranges from the genetic basis of disease to strategies to prevent transmission of HIV. The efforts are often multidisciplinary, embracing behavioral, clinical, epidemiological, and biomedical research. FIC-supported research and research training programs encompass a wide range of diseases and needs, including HIV/AIDS, malaria, TB and other infectious diseases; non-communicable diseases such as brain disorders, cancer, autism, and tobacco-related illness; and critical areas that foster a research environment, including ethics and informatics for health research. Fogarty also supports the training of U.S. investigators to conduct global health research and actively engages in international scientific collaborations. The FY 2012 budget request for FIC is \$71.3 million, 1.9 percent above the FY 2010 level.

Noncommunicable diseases, such as heart disease, stroke, cancer, and diabetes are the leading causes of worldwide mortality, accounting for 60 percent of all deaths and representing a serious threat to economic development. Fogarty is addressing this challenge through its expanded program on Chronic, Non-Communicable Diseases and Disorders across the Lifespan, which supports training of in-country

scientists to conduct research on these diseases.

The FY 2012 budget request for FIC’s Research Capacity Strengthening program is \$38.4 million, two percent above the FY 2010 level. Fogarty’s new strategic plan for 2009-2013 has as its first goal mobilizing the scientific community to address the growing epidemic of chronic, non-communicable diseases related to increased longevity and changing lifestyles in the developing world. FIC’s Millennium Promise Awards in Non-Communicable Disease Program would provide \$1.5 million a year to support non-communicable diseases research training, with seven awards annually. FIC is working with other NIH ICs and private partners to develop further chronic disease initiatives.

In 2005, Fogarty launched the Framework Programs for Global Health, which provides competitive grants to universities in the U.S. and low- and middle-income countries (LMIC) to develop multidisciplinary curricula in global health and stimulate the participation of faculty and students from a wide range of disciplines in global health education and research. In 2010, FIC expanded the program using American Recovery and Reinvestment Act funds to include a problems-based multidisciplinary pilot training program - the Framework Programs for Global Health Signature Innovations Initiative. It was designed to provide one-year support to U.S. universities and their partners to explore models for training postdoctoral investigators to carry out multidisciplinary research likely to produce innovative devices, practices or policies in global health. The FY 2012 budget request for the Framework program is \$1.2 million. In FY 2012, Fogarty intends to build on these programs through a solicitation for an updated program that will combine the institutional capacity building approach of the original Frameworks program with the multidisciplinary problem-based training model of the Innovations initiative.

Training researchers in LMIC remains a high priority for Fogarty. The FY 2012 budget request for Sustainable Development of Human Resources for Global Health Research is \$4.9 million, 1.3 percent above the FY 2010 level. Fogarty intends to expand the number of overseas research experiences available for young U. S. scientists in order to encourage them to adopt careers in global health. The Center also plans to continue its research training partnerships between U.S. and foreign institutions and strive to enhance research opportunities for any foreign scientists when they return home.

Fogarty supports research partnerships between U.S. and LMIC scientists in several high-priority areas through its International Collaborative Research program. The FY 2012 budget request for the program is \$13.8 million, one percent above the FY 2010 level. The program encourages implementation science to address the “know-do” gap, and would expand research training opportunities for U.S. and foreign scientists. It would also foster a sustainable research environment in LMICs, and build strategic partnerships to further global health. FIC intends to expand its International, Clinical, Operational and Health Services Research Training Award program for AIDS and TB and reinforce the initiative’s support for implementation research.

FIC’s International Tobacco and Health Research and Capacity Building Program seeks to reduce the global burden of tobacco consumption and the need to generate solid evidence base that can inform effective local tobacco control strategies and policies. The program supports epidemiological and behavioral research, prevention, treatment, communications, implementation, health services and policy. The National Institute for Drug Abuse and the National Cancer Institute currently partner with FIC. It anticipates the participation of additional NIH partners when this program recompletes in FY 2012.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
69.9		73.0		71.2	-2.5%	1.9%

National Cancer Institute (NCI)
www.nci.nih.gov

The Nation's response to the burden of cancer is led and coordinated by the National Cancer Institute (NCI). Former NIH Director Harold Varmus is the director of the NCI.

The Institute focuses on research on all aspects of cancer including prevention, detection, diagnosis, treatment, survivorship, and causes. NCI's extramural research focuses on understanding the mechanisms of cancer, understanding the causes of cancer, improving early detection and diagnosis, developing effective and efficient treatments, supporting Cancer Centers, Specialized Centers and SPOREs (Specialized Programs of Research Excellence), and supporting research workforce development. The FY 2012 budget request for NCI is \$5.196 billion, an increase of \$95.3 million above the FY 2010 funding level. NCI's budget request includes funds to support several trans-NIH initiatives such as the Basic Behavioral and Social Sciences Opportunities Network (OppNet.)

NCI supports research designed at Understanding the Causes of Cancer. The Institute notes that the likelihood of developing cancer is determined by a complex interplay of environmental, behavioral, and genetic factors. Its past investment in population cohorts has laid the groundwork for additional studies to identify these factors and a variety of population-based and laboratory research has helped to define the nature of these interactions. The FY 2012 budget request for its Understanding the Causes of Cancer program is \$1.284 billion, an increase of four percent above the FY 2010 level.

NCI Cancer Prevention and Control Research focuses on: understanding and modifying behaviors that affect risk, mitigating the influence of genetic and environmental risks, and interrupting cancer development through early intervention. Cancer control research seeks to better understand the factors that influence cancer outcomes, quality of care, quality of life, and cancer-related disparities. The FY 2012 budget request for the NCI Cancer Prevention and Control Programs is \$232 million, a one percent increase of \$3 million above the FY 2010 funding level.

Since 1997, NCI's Division of Cancer Control and Population Sciences (DCCPS), has supported research intended to reduce the risk, incidence, and deaths from cancer as well as enhance the quality of life for cancer survivors. The Division supports an integrated program of genetic, epidemiologic, behavioral, social, applied, and surveillance cancer research. It also plays a central role within the federal government as a source of expertise and evidence on issues such as the quality of cancer care, the economic burden of cancer, geographic information systems, statistical methods, communication science, tobacco control, and the science of implementation. DCCPS provides grants for research, particularly in the behavioral sciences, to identify improved methods for changing personal lifestyles and to promote informed decisions about health-related behaviors. Robert Croyle heads the Division.

NCI supports Cancer Centers which were established to actualize the benefit of research conducted by interdisciplinary partnerships, information sharing, and close links to health care delivery systems. The programs are increasingly reaching out to community oncology practices and minority and underserved patient populations. There are 66 NCI-designated Cancer Centers which conduct basic, translational, and population research. The FY 2012 budget request for the Cancer Centers program is \$44.1 million, seven percent below the FY 2010 funding level. In FY 2011 and FY 2012 NCI intends to seek to identify savings and reductions in the Cancer Centers program in order to award more competing Research Project Grants (RPG). It is expected that many of the new RPGs will go to investigators at the Cancer Centers.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
5,100.8		5,264.6		5,196.1	-1.3%	1.9%

National Center for Complementary and Alternative Medicine (NCCAM)
www.nccam.nih.gov

The National Center for Complementary and Alternative Medicine (NCCAM) is dedicated to exploring complementary and alternative healing practices in the context of rigorous science, training CAM researchers, and disseminating authoritative information. Josephine Briggs is NCCAM’s director.

To fulfill its mission, NCCAM collaborates with multiple ICs as well as other Federal agencies, including the Centers for Disease Control and Prevention (CDC) and the Agency for Healthcare Research and Quality (AHRQ). The FY 2012 budget request for NCCAM is \$131 million, \$2.2 million above the FY 2010 level. NCCAM’s budget request includes funds to support several trans-NIH initiatives such as the Basic Behavioral and Social Sciences Opportunities Network (OppNet.)

NCCAM is focusing its research efforts on specific areas of scientific promise. The Institute’s newly accepted Strategic Plan is built around three long-range goals aimed at improving the state and use of scientific evidence for treating health problems and support or promoting better health and well-being. The three goals are to: 1) advance the science and practice of symptom management; (2) develop effective, practical, personalized strategies for promoting health and well-being; and (3) enable better evidence-based decision making regarding CAM use and its integration into health care and health promotion.

NCCAM’s extramural research funds multidisciplinary clinical investigations into various CAM modalities. This research ranges from small pilot studies to large-scale clinical trials and epidemiological studies supported through solicited research initiatives, collaborations between NIH ICs and the CDC, and investigator-initiated research. NCCAM intends to explore the use of outcomes and effectiveness research in developing practice-based evidence on how CAM approaches could aid in better symptom management. The FY 2012 budget request for extramural clinical research is \$48.2 million, two percent above the FY 2010 level.

Because researchers from many different biomedical and behavioral disciplines have the expertise required for in-depth investigation of the basic biological, physiological, and clinical effects and safety of CAM interventions, NCCAM supports programs designed to attract these researchers to CAM research and partnerships with CAM practitioners. The NCCAM FY 2012 budget request for extramural research training and capacity building is \$11.5 million, a 1.6 percent increase.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
128.8		132.0		131.0	-0.8%	1.7%

National Center for Research Resources (NCRR)
www.ncrr.nih.gov

The National Center for Research Resources (NCRR) provides NIH-supported laboratory and clinical researchers with the infrastructure, tools, and training they need to understand, detect, treat, and prevent a wide range of diseases. Barbara Alving is director of NCRR.

This support spans basic, translational, and clinical research and connects researchers with one another and with patient and communities across the nation. In 2011 NIH intends to submit a proposal to Congress eliminating NCRR as an organizational unit in FY 2012 while maintaining its programs. Meanwhile, the FY 2012 budget request for NCRR is \$1.297 billion, an increase of \$29.6 million above the FY 2010 funding level.

NCRR’s **Clinical and Translational Science Award (CTSA)** program is in its fifth year supporting a national consortium of academic health centers that work together to transform the discipline of clinical and translational research. Additionally, CTSA’s are expected to provide the support needed for comparative effectiveness research. The program is near its targeted goal of supporting 60 academic health centers across the country. The FY 2012 budget request for the CTSA’s is \$484.8 million, a 4.3 percent increase of \$20 million. FY 2011 was the final year of funding provided by the Common Fund.

NCRR’s **Science Education Partnership Award (SEPA) Program** is designed to: 1) increase the pipeline of future scientists and clinicians, especially from minority, underserved, and rural kindergarten to grade 12 (K-12) students; and 2) to engage and educate the general public on the health-related advances made possible by NIH-funded research. SEPA provides professional development for teachers and mentoring opportunities for students. In FY 2010, NCRR funded 57 SEPAs, 47 K- 12 students and 10 science center/museum projects, to engage students and the public in health sciences. There is an emphasis by the program on rural and underserved populations with 18 of the 23 Institutional Development Award (IDeA) states and Puerto Rico receiving a total of 89 SEPA awards since 1991. The FY 2012 budget request for the SEPA program is \$18.7 million, a small increase over the FY 2010 funding level. In FY 2012, NCRR plans to continue to develop outreach efforts informing high schools about opportunities to participate in the program and encouraging science museums to promote the benefits of NIH-supported research.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
1,268.3		1,308.7		1,297.9	-0.8%	2.3%

National Eye Institute (NEI)
www.nei.nih.gov

NEI’s mission is to conduct and support research, training, health information dissemination, and other programs with respect to blinding eye diseases, visual disorders, mechanisms of visual function, preservation of sight, and the special health problems and requirements of the blind. Paul Sieving is the director of NEI.

The FY 2012 budget request for NEI is \$719.1 million, a 1.8 percent increase above the FY 2010 funding level. NEI’s budget request includes funds to support several trans-NIH initiatives including the Basic Behavioral and Social Sciences Opportunities Network (OppNet.)

In FY 2012, NEI intends to renew its national plan to identify current needs, gaps, and opportunities in research to improve eye health. It also plans to reinvigorate its strategic planning process and include three new components: 1) assembling expert panels in all six of its major program areas to develop a

national plan; 2) developing an implementation guide to describe NEI operations, policies, and priorities; and 3) periodically convening workshops that address emerging needs and opportunities in vision research.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
706.6		724.4		719.1	-0.7%	1.8%

National Heart, Lung and Blood Institute (NHLBI)
www.nhlbi.nih.gov

The National Heart, Lung, and Blood Institute (NHLBI) provides leadership for research in diseases of the heart, blood vessels, lung, and blood; blood resources; and sleep disorders. Susan Shurin, the Institute’s Deputy Director, is currently Acting Director for NHLBI.

NHLBI plans and directs research in the development and evaluation of interventions and devices related to prevention, treatment, and rehabilitation of patients suffering from such diseases and disorders. The Institute also conducts educational activities, including development and dissemination of materials for health professionals and the public in the above areas, strongly emphasizing prevention. The FY 2012 budget request for NHLBI is \$3.149 billion, a two percent increase above the FY 2010 Funding level. NHLBI’s budget request includes funds to support several trans-NIH initiatives including the Basic Behavioral and Social Sciences Opportunities Network (OppNet.)

NHLBI’s Division of Prevention and Population Sciences (DPPS) supports and provides leadership for population- and clinic-based research on the causes, prevention, and clinical care of cardiovascular, lung, and blood diseases. Research supported by the DPPS includes a broad array of epidemiological studies including: studies to describe disease and risk factor patterns in populations and to identify risk factors for disease; clinical trials of interventions to prevent disease; studies of genetic, behavioral, sociocultural, and environmental influences on disease risk and outcomes; and studies of the application of prevention and treatment strategies to determine how to improve clinical care and public health. The Division also supports training and career development for these areas of research.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
3,095.3		3,187.5		3,147.9	-1.2%	1.7%

National Human Genome Research Institute (NHGRI)
www.nhgri.nih.gov

The National Human Genome Research Institute (NHGRI) was established in 1989 to head the NIH’s efforts in the Human Genome Project (HGP). In 2010, Eric Green was appointed by NIH director Francis Collins as his successor as director of NHGRI.

In 2003, NHGRI expanded its mission to encompass a broad range of studies aimed at understanding the structure and function of the human genome and its role in health and disease. The Institute recognizes that for “individualized preventive medicine” to make a profound contribution to human health, it needs to address the accompanying ethical, legal, and social implications (ELSI).” Furthermore, it acknowledges the responsibility to address the broader implication of newfound

abilities to decipher genetic information, Congress legislatively mandated the Institute to commit up to five percent of its annual extramural research budget for ELSI activities. The FY 2012 budget request for NHGRI is \$524.8 million, a 1.8 percent increase above the FY 2010 funding level. NHGRI's budget request includes funds to support several trans-NIH initiatives including the Basic Behavioral and Social Sciences Opportunities Network (OppNet.)

NHGRI's **Genes, Environment and Health Initiative (GEI)** is designed to build tools and a knowledge base to allow better understanding of the interplay of the genome with environmental factors, ranging from diet to physical activity to exposure to pollutants in health. In FY 2009, NHGRI, in collaboration with the National Institute of Environmental Health Sciences, began to emphasize development of real-time environmental monitoring technologies, and the advancement of tools to measure psychosocial stress and its influence on gene expression, for use in studying the interactions of genes and environment. NHGRI expects to complete the GEI in 2011, with the findings released later that year and early 2012.

The **Centers of Excellence in ELSI Research (CEERS)**, a component of the ELSI program, were established to: foster the multi-disciplinary approaches necessary to make advances in understanding the issues that progress in genomic science will raise; conduct ELSI research to inform the development of research, health, and public policies and practices and; train the next generation of ELSI researchers. Four CEERS were originally established in FY 2004; in FY 2008, two new centers were funded. Center sites include: Case Western Reserve University, Duke, University of Pennsylvania, Stanford, University of North Carolina, and University of Washington. Additionally, NHGRI funded two new three-year Exploratory Centers at Oregon Health & Science University, and Columbia University. The FY 2012 budget request for ELSI is \$19.1 million, a two percent increase.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
515.8		534.0		524.8	-1.7%	1.7%

National Institute on Aging (NIA)
www.nia.nih.gov

The National Institute on Aging (NIA) supports and conducts genetic, biological, clinical, behavioral, social, and economic research related to the aging process, diseases and conditions associated with aging, and other special problems and needs of older Americans. Richard Hodes is NIA's director.

NIA-supported behavioral and social scientists are describing the economic and societal consequences of a rapidly aging population and using insights from the emerging field of behavioral economics to develop and test interventions that promote healthy behaviors among older people. The FY 2012 budget request for NIA is \$1.129 billion, a one percent increase above the FY 2010 funding level. NIA's budget request includes funds to support several trans-NIH initiatives such as the Basic Behavioral and Social Sciences Opportunities Network (OppNet.)

The Institute is also continuing its efforts to enhance the evidence base for health decisions at both the individual and societal levels. Notably, NIA is emerging as a leader in research comparing the effectiveness of various interventions in diverse populations. The Lifestyle Interventions and Independence for Elders (LIFE) Study, a major comparative effectiveness research (CER) study, compares the effects of a moderate-intensity physical activity program to a health education program on prevention of mobility loss in older Americans.

The Institute provides support for social and behavioral science research through its Behavioral and Social Research Program (BSR), led by Richard Suzman. The Individual Behavioral Processes (IBP)

Branch and the Population and Social Processes (PSP) Branch make up the BSR, which supports basic social and behavioral research that focuses on how people change with aging, the interrelationships between older people and social institutions, and the societal impact of the changing age composition on the population. A goal of the Institute's social and behavioral research is to maintain or enhance the health and well-being, including physical and cognitive function, of older individuals throughout the lifespan. Social and behavioral research is also supported by NIA's program in Neuropsychology and Neuroscience of Aging, as well as the programs of the Gerontology Research Centers and Epidemiology, Demography, and Biometry.

Training the next generation of researchers in aging is high priority for NIA. The institute supports several programs, including its annual Summer Institute on Aging Research which provides junior investigators the opportunity to be mentored in the substance and methodology of aging research by recognized experts in the field to enhance participants' potential for success as independent investigators. The Beeson Awards, co-supported by NIH, offer three- to-five year faculty development awards to outstanding junior and mid-career faculty who are committed to academic careers in aging-related research, training and practice.

Regarding international aging issues, NIA supports a number of projects devoted to understanding the implications of population aging at the global level, including an initiative to consolidate and standardize findings from multiple large health surveys from around the world.

The FY 2012 budget request for BSR is \$185.9 million, a two percent increase above the FY 2010 funding level. BSR coordinates the long-running Health and Retirement Study (HRS), the nation's leading source of combined data on health and financial circumstances of Americans over age 50. As the larger Baby Boomer generation moves into retirement, HRS data have greatly informed the understanding of the effects of early-life exposures and later-life health, variables associated with cognitive and functional decline in later life, and trends in retirement, savings and other economic behaviors. NIA collaborates with the Social Security Administration on retirement research, including funding the HRS work on pensions and retirement expectations. David Weir of the University of Michigan heads the HRS.

BSR is also collaborating with the Bureau of Labor Statistics and the National Academies to foster the development of useful measures of subjective well-being for policy and health analyses, including measures suitable for use in large-scale surveys in the United States and abroad. In addition, the Common Fund initiative in Health Economics has significant BSR input. Recent initiatives have included studies of Long-Term Care Insurance, comparative effectiveness findings on care delivery, and the economics of prevention.

In addition, BSR is moving forward to integrate genetics with social and behavioral research. Aside from the HRS activity in this area, a related initiative has promoted research on the effects of gene-social environment on health and behavior in later life. NIA has organized workshops and fostered exchanges on the role of genetic and environmental factors across the life course, improved measurement of economic and psychosocial phenotypes, and phenotype harmonization for behavioral, social, and genetic research.

BSR also supports 14 Centers on the Demography of Aging at leading universities and policy organizations around the United States. The Centers are designed to foster research in demography, economics and epidemiology of aging and to promote use of important datasets in the field. Research topics investigated by the Centers include Medicare, Social Security, and the implications of health care reform on the elderly. The Roybal Centers for Translation Research on Aging are intended to improve the health, well being, and productivity of older people through the translation of basic behavioral and social science research into practical applications. The Centers currently focus on research areas of social networks and health, extending behavioral economics approaches to financial decision making about health, older drivers, health and mobility, disease and pain management, decision making and behavioral change, and better data measurement, and forecasting. The Roybal

Centers are supported by BSR in partnership with the NIH Office of Behavioral and Social Sciences Research, the Department of Education, the Agency for Healthcare Research and Quality, and the Social Security Administration. Three Roybal Centers for Translational Research on Aging focus on behavioral economics.

Other programs supported by NIA include the Resource Centers for Minority Aging Research (RCMARs), the Baltimore Longitudinal Study of Aging (BLSA), the Healthy Aging in Neighborhoods of Diversity across the Life Span (HANDLS), and the Work, Family, Health Study, among others. HANDLS is a multidisciplinary, community-based, prospective longitudinal epidemiologic study examining the influence of race and socioeconomic status on the development of age-related health disparities among socioeconomically diverse African Americans and whites living in Baltimore. The Work, Family, Health Study, a collaboration with the NICHD, is a multi-site intervention in the long-term care and telecommunication industries exploring how changes in the work environment can improve the health of workers and their families while benefiting organizations.

Comparative Effectiveness Research (CER) is an emerging research area at NIA. The Institute supports an evolving portfolio of specific interventions in subpopulations such as older adults; the best way to define complex outcomes such as quality of life, as well as outcomes assessed over variable time periods; and the challenges of comparing outcomes across differently-based treatment (e.g., behavioral versus drug) and across different health system and care contexts. Supported projects include a CER study that will take advantage of a unique health insurance lottery currently underway in Oregon to evaluate the effects of access to enhanced insurance on health care usage and health outcomes among low income adults.

In its **Neuroscience Program**, NIA supports research aimed at better understanding age-related and pathological changes in the structure and function of the aging nervous system and how these changes affect behavior. The Program also supports research relevant to problems arising from psychiatric and neurological disorders associated with aging. NIA is the lead federal agency for research on Alzheimer's disease (AD). In 2010, the program supported a Cognitive Aging Summit, a follow-up to an earlier 2007 conference. The latest meeting brought together experts in a variety of research fields to discuss advances in understanding brain and behavioral changes associated with normal aging, including translational research for prevention of age-related cognitive decline. The FY 2012 budget request for the Neuroscience Program is \$467.8 million, two percent above the FY 2010 funding.

The **Institute's Geriatrics and Clinical Gerontology Program** supports research on health, disease, and disability in the aged. Focus areas include age-related physical changes and their relationship to health outcomes, the maintenance of health and the development of disease, and specific age-related risk factors for disease. The program coordinates with the other NIH ICs for its research on diseases and conditions that are common among older people or represent a growing threat. The program coordinates the Claude D. Pepper Older Americans Independence Centers Program, which has the goal of increasing scientific knowledge leading to better ways to maintain or restore independence in older persons. The FY 2012 budget request for the Geriatrics and Clinical Gerontology Program is \$153.1 million, two percent above the FY 2010 funding.

NIA's Intramural Research Program (IRP) conducts research in the areas of basic, behavioral, clinical, epidemiologic, and translational research. The IRP's high priority research endeavors and areas of specific focus in behavioral research includes: personality, cognition, and psychophysiology. IRP's high priority areas for epidemiology include frailty, cognition, body composition, disability, and molecular biomarkers of aging. The FY 2012 budget request for the Intramural Research Program is \$115.6 million, one percent above FY 2010 funding.

NIA also supports research on the global phenomenon of population aging in developing and developed nations through its program on Population Aging and Global Health. NIH-supported investigators have identified potential causes for why the U.S. has lagged behind other high-income countries in life expectancy since 1980. It funded a National Academies' report on international differences in

longevity. The Institute is also particularly active in the area of international demographic and economic research. NIA co-supports the development of longitudinal studies similar to the ongoing HRS in Europe, Asia, and Latin America. A major effort is underway to enhance cross-comparability of these surveys and facilitate innovative cross-national research. NIA works with other agencies and organizations, including the World Health Organization and the Census Bureau, to support international demographic research projects.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
1,109.6		1,142.3		1,129.9	-1.1%	1.8%

National Institute on Alcohol Abuse and Alcoholism (NIAAA)
www.niaaa.nih.gov

NIAAA supports basic and applied research related to the etiology, prevalence, prediction, diagnosis, prognosis, treatment, management, and prevention of alcoholism and other related problems. Kenneth Warren, NIAAA’s Deputy Director, is currently serving as the Institute’s Acting Director.

NIAAA-supported research has reframed the understanding of alcohol use and its impact on health, including the recognition that the nature of alcohol-related problems significantly change over the course of the lifespan. Increased understanding of alcohol dependence has created a paradigm shift in alcohol research. Given that research shows that the majority of individuals who meet diagnostic criteria for alcohol dependence do not access treatment, NIAAA-supported research is evaluating screening and brief intervention in venues other than specialty treatment facilities. The FY 2012 budget request for NIAAA is \$469.1million, an increase of \$7.1 million above the FY 2010 funding level. NIAA’s budget request includes funds to support several trans-NIH initiatives such as the Basic Behavioral and Social Sciences Opportunities Network (OppNet.) NIAAA also participates in the NIH Science of Behavior Change Common Fund initiative.

NIAAA supports extensive research to develop new medications and behavioral treatments to address the full spectrum of alcohol dependence. This research includes identifying what works for which individuals, what underlies success and how to provide those effective elements in an affordable, accessible and appealing way.

NIAAA’s **Youth and Adolescent** (ages 0-17) program supports research that targets this period of life and focuses on the effects of alcohol use on the developing body and brain, and the interplay of development, genes and environment on adolescent alcohol use. The Institute is supporting research to integrate intervention for underage alcohol use into primary health care. In 2011 NIAAA plans to release an alcohol screening guide for health care providers to identify alcohol use and alcohol use disorders in children and adolescents, and to identify risk for alcohol use, especially for younger children. NIAAA’s research in this area includes studies that focus on: 1) the effects of alcohol use on the developing body and the brain, and 2) the interplay of development, genes, environment and adolescent alcohol use. The FY 2012 budget request for the Youth and Adolescent program is \$61.5 million, 1.2 percent above FY 2010 spending. NIAAA intends to build on the initial set of pilot projects designed to determine best practices for assessing the short and long-term impact of alcohol use on the developing adolescent brain by supporting a second phase of pilot projects in FY 2012 that will inform a larger, future, longitudinal study. Complementing the human studies, the Institute plans to continue to support ongoing multidisciplinary studies focused on the persistent brain and behavioral functional changes following adolescent alcohol exposure including changes in gene expression, neurocircuitry and/or epigenetic modifications.

The Institute's **Young Adult** (ages 18-29) program focuses on risk assessment, universal and selective prevention, and early intervention and treatment. Recent NIAAA-supported research has demonstrated that college-aged individuals respond well to web-based screening and self-change programs. Based on the research, NIAAA has released a free web-based consumer-oriented booklet, *Rethinking Drinking*, which is designed to help people of all ages assess their own drinking. For those unable to change on their own, NIAAA is focusing on understanding the basic science of behavior change for younger people. The FY 2012 budget request for the Young Adult program is \$174.3 million, a 1.2 percent increase above FY 2010.

NIAAA's **Midlife/Senior Adult** program includes support for research that focuses on development of treatment strategies for alcohol dependence that are tailored to specific populations and treatment of individuals with co-existing psychiatric and medical disorders. The FY 2012 budget request for the Midlife/Senior Adult program is \$ 133.9 million, a 1.2 percent increase above FY 2010 funding.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
462.1		474.6		469.2	-1.1%	1.5%

National Institute of Allergy and Infectious Diseases (NIAID)
www.niaid.nih.gov

NIAID conducts and supports basic and applied research to better understand, treat, and ultimately prevent infectious, immunologic, and allergic diseases. The director of NIAID is Anthony Fauci.

NIAID has long been the leading agency supporting research on the AIDS pandemic, particularly the development of an effective vaccine. The Institute recognizes that ending the pandemic and curbing the spread of the disease will require multi-pronged biomedical and behavioral approaches. As care and treatment initiatives expand in non-industrialized countries, the Institute believes that it is essential to assure that prevention research is an integral part of these efforts. Accordingly, a priority of NIAID is the encouragement of further development and evaluation of behavioral interventions and communication strategies to reduce high-risk behavior associated with HIV transmission.

Another priority for the Institute is development and maintenance of international multi-disciplinary research capacities - including infrastructure, training, and networks - to support research on global and regional priorities that will improve public health in the United States and around the world. The FY 2012 budget request for NIAID is \$4.916 billion, an one percent increase of \$99.9 million.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
4,816.1		4,977.1		4,915.9	-1.2%	2.1%

National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS)
www.niams.nih.gov

The National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS) is the lead Federal agency for research into the causes, treatment, and prevention of these diseases. NIAMS' director is Stephen Katz.

Since most of these diseases are chronic, NIAMS is focused on research, prevention and treatment of disorders characterized by a continuing disease process with progressive deterioration. Many of the diseases within the mission of the NIAMS have a disproportionate impact on women and minorities. In FY 2012, NIAMS will celebrate its 25th anniversary. The FY 2012 budget request for NIAMS is \$547.9 million, 1.7 percent above FY 2010 funding. NIAMS' budget request includes funds to support several trans-NIH initiatives, including the Basic Behavioral and Social Sciences Opportunities Network (OppNet.)

The Institute supports research that has identified the barriers that keep people who are economically disadvantaged as well as people from diverse ethnic backgrounds from complying with their prescribed medical treatments, including fear of side effects, belief that the medicines are not working, problems with the health system environment, and medication costs. NIAMS believes that this research is important as it addresses the issues of health disparities, identifying the many, complex factors that make some populations more vulnerable to diseases within its mission areas.

As part of the Institute's planning process, in 2010, NIAMS hosted a full-day discussion with extramural researchers to identify research needs related to the integration of psychosocial and behavioral therapies with other treatments for patients with musculoskeletal or rheumatic diseases. The Institute recognizes that research into how health care providers can combine non-invasive, non-pharmacological approaches with other modalities to improve patients' function could directly influence health care reform by allowing individuals to benefit more fully from existing treatments. The Institute also devoted a portion of its annual scientific planning retreat to key gaps and opportunities in its comparative effectiveness research portfolio.

NIAMS's Arthritis and Rheumatic Diseases program is designed to advance high quality basic, translational, and clinical biomedical and biopsychosocial research to treat and prevent arthritis and other rheumatic diseases. The Institute is committed to pursuing new opportunities designed to identify risk factors for these disorders, to enhance disease prediction, and advance prevention strategies. In FY 2011, it cosponsored a conference held on the NIH campus on translating scientific advances into clinical treatment of pain disorders, including arthritis and other rheumatic diseases. The FY 2012 budget request for this program is \$115.6 million, a 1.4 percent increase above FY 2010. In FY 2012, NIAMS intends to implement the testing and validation of tools created by the Common Fund's Patient-Reported Outcomes Measurement Information System (PROMIS) initiative, to measure health care outcomes in diverse populations represented by the Institute's portfolio. The Institute intends to offer institutions the opportunity to establish Multidisciplinary Clinical Research Centers or Centers of Research Translation focusing on rheumatologic, musculoskeletal, or skin conditions.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
538.8		555.7		547.9	-1.4%	1.7%

National Institute of Biomedical Imaging and Bioengineering (NIBIB)
www.nibib.nih.gov

The National Institute of Biomedical Imaging and Bioengineering (NIBIB) is devoted to merging the physical and biological sciences to develop new technologies that improve health. NIBIB’s director is Roderic Pettigrew.

The Institute’s goal is to accelerate the pace of discovery and speed the development of biomedical technologies that prevent illnesses or treat them when they do strike. Unlike many other NIH institutes, the NIBIB’s mission is not limited to a single disease or group of illnesses; rather it spans the entire spectrum. The FY 2012 budget request for NIBIB is \$332.2 million, 1.8 percent above FY 2010 spending. NIBIB’s budget request includes funds to support several trans-NIH initiatives including the Basic Behavioral and Social Sciences Opportunities Network (OppNet.)

NIBIB emphasizes that health information technology research requires an interdisciplinary approaches to enable the integration of clinical, diagnostic, and treatment data with the patient’s medical history in a comprehensive electronic health record designed to improve clinical decision-making. The Institute is spear-heading research into new technologies to address issues such as: interoperability of data systems, compatibility of computer software across medical institutions, security of data during transmission, Health Insurance Portability and Accounting Act (HIPAA) compliance, and availability of affordable data systems for patient care providers.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
316.4		325.9		322.1	-1.2%	1.8%

**Eunice Kennedy Shriver National Institute of Child Health and Human
Development (NICHD)**
www.nichd.nih.gov

NICHD remains a major source of funding for social and behavioral sciences research, including research on the dynamics of human behavior at both the individual and population level. NICHD’s director is Alan Guttmacher.

The Institute’s broad mission includes investigations of infant mortality, prevention of birth defects, learning disabilities, demographic and behavioral factors. Research supported by the NICHD increasingly crosses disciplinary boundaries to link psychological and behavioral processes in cognitive, social, and personality development with underlying biological processes, and to understand how social and economic factors affect developmental outcomes. The FY 2012 budget request for NICHD is \$1.252 billion, a 1.8 percent increase of \$22.3 million above FY 2010. NICHD’s budget request includes funds to support several trans-NIH initiatives including the Basic Behavioral and Social Sciences Opportunities Network (OppNet.)

NICHD has made significant investments in trans-disciplinary science that addresses the biological, behavioral, and social factors that affect children’s development. This includes research focusing on: the effects of poverty on child development; the effectiveness of early childhood programs or interventions in promoting school readiness; and tools to measure important early childhood competencies. NICHD also has a longstanding interest in the study of normal language and reading development, learning disabilities, and disorders that adversely affect the development of listening, speaking, reading, writing, and mathematics abilities. The Institute also provides strong support for demographic research, investing in the collection and dissemination of population data.

In recent years, NICHD has funded several studies focused on disaster-related research, including adversity and resilience after Hurricane Katrina; the social and economic effects of natural disasters; and marriage, birth, and divorce after terrorist attacks. In FY 2010, the Institute joined with three other institutes to call for expanded behavioral and social research on disasters and health. The goal is to prevent and mitigate harmful consequences and health disparities. NICHD has also supported social and behavioral research on the impact of multiple deployments and reintegration of military personnel on children living in military families. An ongoing grant is evaluating a community-based, longitudinal intervention of a marriage education program specifically adapted for young Army couples from an existing evidence-based intervention targeting risk and protective factors for marital conflict and distress, particularly those factors that have been shown to be strongly associated with a range of individual and family problems.

The Institute recognizes that many scientific domains key to its mission are entering a period of unprecedented new opportunity. Accordingly, NICHD has begun a process to create a new scientific vision for the Institute. According to the Institute, the process, currently underway, will identify the most important and promising scientific opportunities of the next ten years across the full breadth of the NICHD mission. Cross-cutting topics, such as global health, translational research, implementation science, and innovative approaches to training and mentoring have an important place in the Institute’s vision activities.

NICHD’s **Center for Population Research** focuses on reproductive health and biology, including human fertility, infertility, and reproductive disorders, as well as population research and behavioral science. The Center also supports behavioral and social science research on issues related to contraception use, the spread of sexually transmitted infections (STI), and health risk behaviors. Research projects supported by the Center seek to understand the consequences of changes in population composition, size and distribution; the factors that affect family formation, functioning, and stability; and the influence of families on child health and development. The FY 2012 budget request for the Center for Population Research is \$336.7 million, 1.7 percent above FY 2010.

The **Center for Research for Mothers and Children** supports an array of maternal and child health research, including studies of factors that affect growth and development, gestational diabetes, obesity and overweight, growth restriction, early origins of adult diseases, and congenital and factious diseases, including the prevention of HIV/AIDS in children, adolescents, and women. The Center also funds research on mechanisms of neurobiological, cognitive, emotional, and social development; genetic and environmental influences on development; causes of and treatments for specific learning disabilities; and health promotion and disease prevention in children and adolescents. In addition, the Center has a strong international presence. The FY 2012 budget request for the program is \$359.1 million, 1.7 percent above FY 2010. In FY 2012, the Center intends to maintain its strong research portfolio on diabetes in children, in collaboration with the National Institute of Diabetes and Digestive and Kidney Diseases, and its ongoing research on factors contributing to childhood overweight and obesity. The intent of both initiatives is to translate research discoveries into effective preventive and therapeutic approaches that can be easily incorporated into a patient’s daily life. The Center also plans, in collaboration with other federal agencies, to enhance its effort to study the effects of parents’ military deployment and return on children in families.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
1,328.8		1,368.8		1,352.2	-1.2%	1.8%

National Institute on Deafness and Other Communication Disorders (NIDCD)
www.nidcd.nih.gov

The National Institute on Deafness and Other Communication Disorders' (NIDCD) mission is to support and conduct research and research training in the normal processes and the disorders of human communication, including hearing, balance, smell, taste, voice, speech, and language. James Battey is NIDCD's director.

The FY 2012 budget request for NIDCD is \$426 million, a 1.8 percent increase above the FY 2010 funding level. NIDCD's budget request includes funds to support several trans-NIH initiatives including the Basic Behavioral and Social Sciences Opportunities Network (OppNet.) In FY 2012, NIDCD intends to continue to support new and early stage investigators, and maintain an adequate number of RPGs, particularly investigator-initiated investigators.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
418.6		429.0		426.0	-0.7%	1.8%

National Institute of Dental and Craniofacial Research (NIDCR)
<http://www.nidcr.nih.gov/>

The National Institute of Dental and Craniofacial Research's (NIDCR) mission is to support the Nation's ongoing efforts to improve oral, dental, and craniofacial health. Former NIDCR director Lawrence Tabak replaced Raynard Kington as NIH's Deputy Director. Isabel Garcia, NIDCR's Deputy Director, currently serves as NIDCR's Acting Director.

The Institute is beginning to fund research that will contribute to the understanding of the complex interplay of factors that contribute to dental caries, including research that explores a wide range of factors that include genetics, family contextual factors, psychosocial determinants, diet, neighborhood settings and environmental factors, and their interactions. NIDCR's Health Disparities Research Program supports the full spectrum of research to identify practical, sustainable approaches to oral health. The FY 2012 budget request for NIDCR is \$420.4 million, a 1.8 percent increase above the FY 2010 level. NIDCR's budget request includes funds to support several trans-NIH initiatives including the Basic Behavioral and Social Sciences Opportunities Network (OppNet.)

In its 2009-2013 strategic plan the Institute stresses its commitment to the support of basic and applied research in the behavioral and social sciences. NIDCR is in the process of re-invigorating its behavioral and social sciences intervention research program based on the recommendations of expert consultants from diverse stakeholders. Among the recommendations NIDCR has implemented already are: the establishment of an intensive training workshop to encourage use of rigorous methods for developing and testing oral health interventions, the development of a Funding Opportunity Announcement to support pilot testing of new interventions to improve oral health; and the sponsorship of a special journal issue focused on providing researchers with guidance about the state-of-the-science methods in behavioral and social intervention research to improve oral health. The program commissioned a set of manuscripts on *Psychosocial Intervention Essentials*, available March 2011, in the Journal of Public Health Dentistry. The issue's topics include how to conduct cost analyses in behavioral and social intervention research.

In addition to the intervention studies, NIDCR supports the key foundational research required before intervention development begins, including those studying the psychosocial needs of infants and families with oral disease or associated conditions - early childhood caries, craniofacial anomalies, very low birth weight and early respiratory problems, and family dietary patterns and early obesity. NIDCR

also supports research on the social determinants of oral health and disease among infants and their mothers, including studies of childhood oral health in households in which interpersonal violence exists, or parents have varying degrees of oral health knowledge, or in communities in which there is limited access to quality oral health care.

In FY 2012, NIDCR intends to provide support to highly meritorious new research projects and ongoing initiatives, and a new initiative involving individual tailoring and community targeting of social and behavioral interventions to improve oral health.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
413.0		423.5		420.4	-0.7%	1.8%

National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK)
www.niddk.nih.gov

The mission of NIDDK is to support research to combat diseases that are mostly common, chronic, have severe health consequences, and are costly to individuals and their families. They include: diabetes and other endocrine and metabolic diseases, liver and other digestive diseases, nutritional disorders, obesity, kidney and urologic diseases, and hematologic diseases. The Institute also supports diseases that are less wide-spread such as cystic fibrosis and other genetic diseases. Griffin Rodgers is NIDDK’s director.

The FY 2012 budget request for NIDDK is \$1.987 billion, 1.6 percent above the FY 2010 funding level. NIDDK’s budget request includes funds to support several trans-NIH initiatives including the Basic Behavioral and Social Sciences Opportunities Network (OppNet.)

NIDDK co-chairs the **NIH Obesity Research Task Force** and supports a multidimensional research portfolio on obesity. The Institute also supports research that impacts health care reform efforts by identifying cost-effective ways to translate findings from diabetes and obesity intervention studies to real-world clinical practice and community settings. An example of this research is the Institute’s *Action for Health Diabetes (Look AHEAD)*, an ongoing intervention study that builds on past research and is testing a lifestyle intervention to help prevent common, costly, and often deadly cardiovascular complications in people with type 2 diabetes. NIDDK also supports comparative effectiveness research, ranging from identifying the best procedures for treating obesity and type 2 diabetes with bariatric surgery, to comparing strategies for engaging providers and patients in efforts to delay or prevent type 2 diabetes in women with gestational diabetes.

The NIDDK’s **Diabetes, Endocrinology, and Metabolic Diseases program** is designed to increase the understanding of diabetes and other diseases and disorders of the endocrine system and metabolism, and to develop and test potential prevention and treatment strategies. The FY 2012 budget request for the Program is \$651.3 million, 1.7 percent above the FY 2010 funding level. In FY 2012, NIDDK would support research capitalizing on new opportunities to identify diabetes risk genes in minority populations, to advance progress toward developing new therapeutic approaches, and to support comparative effectiveness research. NIDDK also plans to continue to fund translational research in FY 2012 and support health information dissemination activities to bring scientific discoveries in diabetes and obesity to real world medical practice and other community settings. It also intends to continue an initiative encouraging collaborative, multidisciplinary research teams to work on complex biomedical problems in diabetes, endocrinology, and metabolic diseases.

NIDDK’s **Digestive Diseases and Nutrition** program is designed to increase understanding of digestive diseases, nutrition, and obesity, and to develop and test strategies for disease prevention and

treatment. The FY 2012 budget request for the Program is \$508.4 million, a 1.7 percent increase of \$8.6 million above the FY 2010 funding level.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
1,957.1		2,007.6		1,987.9	-1.0%	1.6%

National Institute on Drug Abuse (NIDA)
www.nida.nih.gov

The National Institute on Drug Abuse (NIDA) is the lead Federal agency and predominant source of funding for research on drug abuse and addiction. Nora Volkow is NIDA’s director.

NIDA seeks to explore the scientific basis for the development of effective biomedical, behavioral, and psychosocial approaches to the prevention and treatment of drug abuse. The Institute is also charged with supporting research on the relationship between drug use and AIDS, tuberculosis, as well as other medical problems. The FY 2012 budget request for NIDA is \$1.1 billion, a two percent increase above the FY 2010 funding level. NIDA’s budget request includes funds to support several trans-NIH initiatives including the Basic Behavioral and Social Sciences Opportunities Network (OppNet.)

NIDA participates in a variety of activities supported through the NIH Common Fund, including OppNet - the Basic Behavioral and Social Sciences Opportunity Network; and the Neuroscience Blueprint. The Institute has the lead role on an OppNet-supported Request for Applications, the Effects of the Social Environment on Health, which will fund research to investigate structural, behavioral, sociocultural, environmental, cognitive, emotional, and/or biological mechanisms by which the social environment affects health outcomes; and the NIH Blueprint-supported Institutional Training Grants on Computational Neuroscience and Neuroimaging - Integrating First Principles and Applications.

NIDA is also supporting Comparative Effectiveness Research (CER) in the criminal justice setting, where drug use disorders are over-represented and where, without treatment, offenders remain at high risk for relapse, recidivism, and even overdose upon their return to the community. The Institute also supported a randomized controlled trial of the Communities that Care (CTC) coalition-based prevention system which identifies community-specific risk and protective factors and implements evidence-based interventions that address them to attend to the research-to-practice gap for implementing evidence-based prevention.

NIDA has sought to learn more about the linkage of the HIV/AIDS epidemic and drug abuse and addiction, both to understand the critical role of drug abuse in the spread of HIV and to learn how to best prevent and treat these intertwined conditions. Individuals involved in the criminal justice system represent a vulnerable population with disproportionately high rates of substance abuse disorders and HIV/AIDS. In FY 2010, NIDA and the National Institute of Mental Health funded 12 research applications to develop and test strategies for identifying individuals within criminal justice systems who have not recently been tested, provide them with HIV testing, and initiate, monitor, and maintain Highly Active Antiretroviral Therapy for those who test positive. NIDA also continues to support research to increase HIV/AIDS and drug abuse prevention efforts among offender and other under-served populations, specifically targeting women, juvenile offenders, and racial and ethnic minorities disproportionately affected by the HIV epidemic.

To better understand the interconnected health problems faced by returning veterans and their families, NIDA is collaborating with NIAAA, NCI, and the Department of Veterans Affairs to support research directed primarily at substance abuse and related conditions experienced by veterans returning from the Iraq and Afghanistan wars.

NIDA's **Basic and Clinical Neuroscience Programs** are two programs that work together to increase the understanding of the neurobiological, genetic/epigenetic, and behavioral factors underlying drug abuse and addiction. These factors include those affecting increased risk and/or resilience to drug abuse, addiction, and drug-related disorders; the mechanisms of addiction; and the effects of drugs on the brain and behavior. The FY 2012 budget request for these programs is \$501.1 million, 1.9 percent above the FY 2010 funding level.

The Institute's **Epidemiology, Services and Prevention** program seeks to promote integrated approaches to understand and address the interactions between individuals and environments that contribute to the continuum of drug abuse-related problems. The division supports research and major data collection systems, as well as surveillance networks. The FY 2012 budget request for the program is \$249.2 million, 1.9 percent above the FY 2010 funding level.

NIDA's **Clinical Trials Network (CTN)** comprises 16 research nodes and more than 240 individual community treatment programs. The CTN works to develop treatment protocols for drug abuse and addiction and related conditions, testing the real-world effectiveness of promising medication and behavioral treatment approaches with diverse patient populations and community treatment providers. The CTNs also serve as a research and training platform to help the Institute respond to emerging public health areas. There are currently 46 projects. The Network celebrates its 10th anniversary in FY 2012. The FY 2012 budget request for the CTNs is \$45.6 million, 1.8 percent above the FY 2010 funding level.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
1,059.3		1,094.1		1,080.0	-1.3%	2.0%

National Institute of Environmental Health Sciences (NIEHS)
www.niehs.nih.gov

(NIEHS) mission is to reduce the burden of environmentally-associated diseases. Linda S. Birnbaum is NIEHS' director.

The Institute has identified a need for research into the influence of poverty and environmental pollution into human health needs. For years, the environment was considered to have a minor role in the etiology of human illness. With the expansion of the definition of 'environment' to include diet and nutrition, behavior and other social and cultural factors, the relationship is now worthy of study. The FY 2012 budget request for NIEHS is \$700.5 million, 1.6 percent above the FY 2010 funding level. NIEHS' budget request includes funds to support several trans-NIH initiatives including the Basic Behavioral and Social Sciences Opportunities Network (OppNet.)

NIEHS supports research to understand the role of physical and social influences on the environmental impact of toxic pollutants, including the involvement of community-based organizations in educating vulnerable or susceptible populations, children, adults from poor socioeconomic status and minorities. The Institute also supports several epidemiological studies to understand, among other things: community-based approaches to study the potential benefits of preventive interventions, such as the use of air filters and air conditioners in childhood asthma; and the influence of modifiable social and physical factors in susceptible populations.

The Institute is also a leader in supporting research focusing on understanding, predicting, and preventing adverse health impacts resulting from changes in the Earth's climate. It leads an Interagency Working Group on Climate Change and Health which includes representatives from NIH, the

CDC, EPA, the National Oceanic and Atmospheric Administration, NASA, and the U.S. Department of Agriculture, among other Federal agencies. The Working Group is compiling a report with recommendations for basic and applied research needs on the human health effects of climate change for use by all Federal agencies with a human/environmental health mission.

NIEHS's Clinical and Translational Research: Bench to Bedside to Public Health program is designed to encourage integration of clinical, population, and community-linked research to effectively translate findings into improved public health practice and disease prevention. The FY 2012 budget request for the program is \$201.8 million, a 12.5 percent increase above the FY 2010 funding level.

NIEHS' Pathways for Future Environmental Health Scientists hopes to attract young students and scientists into the environmental health sciences field. The program provides opportunities for laboratory-based training at the high school and undergraduate levels; institutional and individual training grants including a new training initiative designed to prepare individuals to study environment and genetic factors in disease etiology at the graduate level; and grants for young investigators and short term sabbatical awards at the faculty level. The Institute's signature career development program is the Outstanding New Environmental Scientists (ONES), an investigator-initiated program for new independent investigators. The FY 2012 budget request for the Institute's training programs is \$51.7 million, an increase of \$2 million above the FY 2010 funding level.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
689.4		707.3		700.5	-1.0%	1.6%

National Institute of General Medical Sciences (NIGMS)
www.nigms.org

The fundamental biomedical and behavioral research supported by the National Institute of General Medical Sciences canvasses a wide spectrum, ranging from experiments with organisms, cells, genes and molecules to studies of systems biology that examine the behavior of interconnected networks. NIGMS's director Jeremy Berg will be leaving this summer. A search is underway for a new NIGMS director.

NIGMS supports basic behavioral and social sciences research and training related to its mission areas. The research is supported through the following centers and divisions: Bioinformatics and Computational Biology; Genetics and Developmental Biology; Minority Opportunities in Research; and Pharmacology, Physiology and Biological Chemistry. NIGMS-supported basic behavioral and social sciences research activities include: 1) basic behavioral research in model organisms; 2) computational modeling of human populations including social and behavioral factors; 3) studies of the efficacy of interventions in promoting research careers; 4) support of a range of behavioral and social sciences research at minority-serving institutions; and 5) predoctoral training at the interface between behavioral and biomedical sciences. The Institute continues to explore the potential for new directions in its funding of basic behavioral and social sciences research. The FY 2012 budget request for NIGMS is \$2.102 billion, 2.5 percent above the FY 2010 funding level. NIGMS's budget request includes funds to support several trans-NIH initiatives including the Basic Behavioral and Social Sciences Opportunities Network (OppNet.)

In addition to its role in OppNet, NIGMS continues to develop additional research areas in basic behavioral research, particularly on modeling approaches such as those used in the NIGMS-funded Models of Infectious Disease Agent Study (MIDAS) program. This program develops computational models for conducting virtual experiments to test how emerging pathogens might spread in the presence and absence of interventions. Behavioral and social scientists collaborate with computer

scientists to test the understanding of the impact of a range of social and other interventions on the behavior of populations. Using data from real populations and geographical locations, interdisciplinary MIDAS researcher teams have created computer simulations that help predict a range of public health outcomes for epidemics of flu and other diseases in the U.S., Mexico, and India.

A cornerstone of the Institute’s mission is its support of Research Training for the next generation of biomedical and behavioral researchers. In 2010, NIGMS completed an intensive process to develop a strategic plan for future research training and career development. A key theme of the plan is the importance of putting the needs of trainees first by focusing on mentoring, career guidance, and diversity. The Plan is available on NIGMS’ website and printed copies should be available in April. The FY 2012 budget request for the Research Training program is \$203.5 million, three percent above the FY 2010 funding level. In FY 2012, NIGMS intends to continue its new program supporting research training of basic behavioral scientists and will promote strategies outlined in the NIGMS Strategic Plan for Biomedical and Behavioral Research Training.

The Minority Opportunities in Research (MORE) program aims to increase diversity within the biomedical and behavioral research workforce. Efforts target diversity broadly, addressing groups underrepresented in biomedical and behavioral sciences, including certain racial and ethnic minorities, people with disabilities, and people from low income families. The program provides research support for faculty at minority-serving institutions, and this support enhances opportunities for student participation in research projects. In FY 2010, MORE funded a workshop to promote greater collaboration between biomedical and social scientists, testing assumptions and hypotheses that undergird interventions for boosting careers in biomedical and behavioral research. The FY 2012 budget request for the MORE program is \$141.9 million, 3 percent above the FY 2010 level. In FY 2012, MORE intends to continue to examine the current state of research on interventions that influence the participation of underrepresented minorities in the biomedical and behavioral sciences.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
2,050.6		2,125.1		2,102.3	-1.1%	2.5%

National Institute of Mental Health (NIMH)
www.nimh.nih.gov

The mission of NIMH is to reduce the public health burden of mental and behavior disorders through research on mind, brain, and behavior. NIMH is led by director Tom Insel.

To fulfill its mission, the Institute: conducts research on mental disorders and the underlying basic science of brain and behavior; and collects, analyzes, and disseminates information on the causes, occurrence, and treatment of mental illnesses. The FY 2012 budget request for NIMH is \$1.517 billion, 1.8 percent above the FY 2010 funding level. NIMH’s budget request includes funds to support several trans-NIH initiatives including the Basic Behavioral and Social Sciences Opportunities Network (OppNet.)

NIMH’s research portfolio includes services and intervention research designed to overcome the many challenges to providing optimal mental health care. According to the Institute, while behavioral treatments for mental disorders exist, many patients in community settings do not receive them, in part because clinicians vary in how closely they adhere to evidence-based treatment protocols. In FY 2012, NIMH intends to support research into how to enhance and maintain community-based care providers’ fidelity to empirically-supported behavioral treatments for mental disorders.

The Institute's **Neuroscience and Basic Behavioral Science** program provides support for research in the areas of basic neuroscience, genetics, basic behavioral science, research training, resource development, technology development, drug discovery, and research dissemination. The FY 2012 budget request for the program is \$470.4 million a 2.2 percent increase above the FY 2010 funding level. In FY 2012, NIMH plans to give priority to projects that seek to understand the biological functions of genes, gene products, cells, and brain circuits in normal and abnormal mental function. High priority projects also include those that identify in diverse populations genetic variants, epigenetic mechanisms, and gene-environment interactions that influence vulnerability to mental disorders and treatment response.

NIMH's **AIDS Research** program supports research and research training to develop and disseminate behavioral interventions that prevent HIV/AIDS transmission and to clarify the biological, psychological, and functional mental health effects of HIV/AIDS infection and its associated consequences. The Health and Behavior components of the Division of AIDS and Health and Behavior Research have been dissolved by the Institute and have been distributed to the Institute's non-AIDS research divisions. The FY 2012 budget request for the Program is \$184.0 million, a 2.4 percent increase above the FY 2010 funding level. In FY 2012, the Institute intends to support research to address the primary goals of the National HIV/AIDS Strategy (NHAS) released in July 2010. The Institute intends to issue two new Funding Opportunity Announcements in FY 2011 to expand interventions research, targeting populations with the highest risk for HIV infection. NIMH is partnering with other NIH ICs, as well as the CDC, to better integrate behavioral science into biomedical strategies to prevent HIV infection. The Institute's FY 2012 program plans will emphasize innovative, interdisciplinary HIV prevention research designed to better understand individual, community, social, and structural factors that impact HIV risk-reduction in order to improve preventative behaviors. The program will further support innovative, interdisciplinary prevention science research that examines the psychosocial needs of children affected by AIDS, particularly children in low-resource settings.

The Institute's **Adult Translational Research and Treatment Development** program plans, supports, and administers programs of research, research training, and resource development aimed at: understanding the biological, psychological, and functional changes that are involved in the causes and course of mental illness and; hastening the translation of science advances into innovations in clinical care. The FY 2012 budget request for the Program is \$277.8 million, a 2.2 percent increase above the FY 2010 funding level. In FY 2012, NIMH intends to give high priority to research that advances the understanding of the biological underpinnings of mental illness and hasten the translation of behavioral science and neuroscience advances into innovations in clinical care. The Institute also plans to emphasize research that evaluates the safety and efficacy of novel pharmacological agents and behavioral interventions that target features of mental illness that are inadequately addressed by current therapies and prevention strategies.

NIMH's **Developmental Translational Research** program supports research and research training with the goal of preventing and curing mental disorders that originate in childhood and adolescence. The program stimulates and promotes an integrated program of research across basic behavioral/psychological processes, environmental processes, brain development, genetics, developmental psychopathology, and therapeutic interventions. The FY 2012 budget request for the program is \$163.2 million, a 2.2 percent increase above the FY 2010 funding level. In FY 2012, NIMH intends to support research that speeds the translation of emerging findings from neuroscience into novel treatment approaches, as well as research that identifies the trajectories of brain, cognitive, and emotional development in children at risk for serious mental disorders so that earlier interventions may be developed to prevent the onset of disease.

The **Services and Intervention Research** program supports research to evaluate the effectiveness of pharmacologic, psychosocial, rehabilitative, and combination interventions on mental and behavior disorders. The program also supports mental health services research, including services organization and delivery; interventions to improve the quality and outcomes of care; and research on the dissemination and implementation of evidence-based interventions into service settings. In FY 2010,

the program launched a major initiative, the Mental Health Research Network (MHRN), which will connect nine established public domain research centers that are based in integrated not-for-profit health care systems. Researchers have begun to use the network to address such issues as: the development of a geographically and ethnically diverse autism spectrum disorder research registry; a pilot study for a new type of therapy for postpartum depression; and a longitudinal analysis of how suicide warning labels on antidepressants affect later suicidality among youth. Suicide research including, early detection, assessment, interventions, and services for individuals across all populations and ages remains a high priority for NIMH. The FY 2012 budget request for the Services and Intervention Research program is \$174.1 million, a 2.2 percent increase above the FY 2010 funding level.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
1,489.5		1,540.3		1,517.0	-1.5%	1.8%

National Institute on Minority Health and Health Disparities (NIMHD)
www.ncmhd.nih.gov

Authorized by the Affordable Care Act of 2010, the former National Center on Minority Health and Health Disparities (NCMHD) is now the National Institute on Minority Health and Health Disparities. John Ruffin is NIMHD’s director.

The new Institute’s mission is to conduct and support research, training, information dissemination, and other programs aimed at reducing the disproportionately high incidence and prevalence of disease, burden of illness, and mortality in racial and ethnic minorities and other groups such as the urban and rural poor. NCMHD emphasizes that increased research focus is necessary to study the interplay of prevailing and emerging social and economic determinants that perpetuate health disparities, and the potential of a restructured healthcare system for improving the health of underserved populations. The Center also emphasizes that innovative cross-disciplinary approaches from diverse research fields are necessary to understand the biological, behavioral, social, economic, and environmental determinants of health. The FY 2012 budget request for NIMHD is \$214.6 million, an increase of \$3.1 million above the FY 2010 funding level. NIMHD’s budget request includes funds to support several trans-NIH initiatives including the Basic Behavioral and Social Sciences Opportunities Network (OppNet.)

Over the past decade, health disparities have become a recognized scientific field of study. There is increased focus on non-biological factors such as socioeconomic, politics, discrimination, culture, and environment that research suggests has a significant correlation to disparities in health experienced by racial/ethnic minority, rural, and low-income populations. NIMHD notes that the field of health disparities has evolved from documenting and investigating differences in health status and risk factors among affected populations, to addressing health disparities using traditional and nontraditional research approaches such as community participation, novel interventions, and cross collaborations.

NIMHD’s Health Disparities Research Centers of Excellence program serves as a foundation to conduct research, to compare the benefits of different interventions and strategies via comparative effectiveness research, and to enhance the evidence base for health care decisions involving health disparity populations. Since 2002, NIMHD has supported 91 COE sites in 35 states, the District of Columbia, Puerto Rico, and U.S. Virgin Islands. The FY 2012 budget request for all Health Disparities Research is \$110.5 million, an increase of 1.9 percent. In FY 2012, NIMHD intends to continue funding for investigator-initiated health disparities research awards and provide funding for new Centers of Excellence.

NIMHD's Outreach and Information Dissemination activities include its Community-Based Participatory Research (CBPR) program that supports collaborative partnerships between health disparity communities and researchers to develop, implement, and disseminate findings from behavioral interventions. The FY 2012 budget request for NIMHD's Outreach and Information Dissemination is \$23.8 million, an 8.7 percent increase above the FY 2010 funding level.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
211.5		219.0		214.6	-2.0%	1.5%

National Institute of Neurological Disorders and Stroke (NINDS)
www.ninds.nih.gov

The National Institute of Neurological Disorders and Stroke (NINDS) supports research on the causes, prevention, diagnosis, and treatment of neurological disorders and stroke, and funds basic research in related scientific areas to reduce the burden of neurological disease. Story Landis is NINDS' director.

NINDS supports a broad portfolio of basic behavioral research, which includes studies on a variety of cognitive and behavioral processes. Examples include research: exploring the neural bases of language and cognitive development, understanding the neural substrates of decision making, and examining the cellular and molecular mechanisms of learning and memory. The Institute also sponsors a wide range of training grants, fellowships, and career development awards in all areas of the neurological sciences, including basic behavioral and social science research. The FY 2012 budget request for NINDS is \$1.664 billion, 1.8 percent above the FY 2010 funding level. NINDS' budget request includes funds to support several trans-NIH initiatives including the Basic Behavioral and Social Sciences Opportunities Network (OppNet.)

NINDS supports a number of activities to ameliorate the long-term effects of stroke on the quality of life of its survivors and their families. The Institute is funding a study to address psychosocial impact of stroke on family caregivers. The aim of the project is to understand how stroke affects depression, physical health, health care access and use, and quality of life in primary caregivers identified from the Reasons Geographic and Racial Differences in Stroke (REGARDS) study. The project is designed to assess how depression, quality of life, and stressfulness experienced by the caregiver can impact the physical and emotional recovery of the stroke survivor.

Through its various offices NINDS supports infrastructure for clinical research and clinical trials, training and career development, research resources, diversity in the research workforce, and research on minority health and health disparities that serves these activities throughout NINDS extramural programs. The Office of Clinical Research supports increased efficiency and effectiveness of NINDS clinical research programs, which include early phase clinical trials through large, multi-site phase III trials, as well as large epidemiological studies and other clinical research. NINDS is working with the research community to develop common data elements that will enable comparison and sharing of clinical data across studies. The Office of Minority Health and Research (OMHR) coordinates programs to attract, retain, and develop minority neuroscience health and research professionals and research to reduce population disparities for disorders of the nervous system. The Office of Training and Career Development oversees NINDS grant programs to support training and career development of investigators at all career levels who have research interests in line with the mission of the Institute. The Office of International Activities supports the coordination and development of programs and initiatives that foster international research, training and collaborations that are relevant to the institute's mission.

The FY 2012 budget request for the estimate for its Infrastructure, Training Programs, and Resources program is \$240.6 million, two percent above the FY 2010 funding level. In FY 2010, two NINDS Strategic Planning Advisory Panels on Health Disparities and on Workforce Diversity undertook an intensive, data driven assessment of the Institutes activities in these areas. The panel’s reports and recommendations, scheduled for presentation to the NINDS Advisory Council in 2011, will guide the Institute’s activities in these areas.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
1,635.4		1,681.3		1,664.3	-1.0%	1.8%

National Institute of Nursing Research (NINR)
www.ninr.nih.gov

NINR supports basic and clinical research designed to establish a scientific basis for the care of individuals across the life span, research on the reduction of risks for disease and disability, and the promotion of healthy lifestyles. Patricia Grady is the NINR’s director.

In FY 2012, NINR celebrates its 25th anniversary. A dominant theme of NINR’s research portfolio is the linkage between biological and behavioral research. The science supported by NINR seeks to advance a patient management paradigm that is increasingly person-centered rather than disease-oriented, that focuses on preventing the development of chronic illness rather than treating it, and that features the person as an active participant in their health. As the lead NIH Institute for end-of-life research, NINR supports studies that explore key end-of-life areas such as clinician/family member communication, decision-making, and issues of pediatric end-of-life and palliative care. The FY 2012 budget request for NINR is \$148.1 million, \$2.5 million above the FY 2010 funding level. NINR’s budget request includes funds to support several trans-NIH initiatives including the Basic Behavioral and Social Sciences Opportunities Network (OppNet.)

In FY 2012, NINR plans to continue to fund research highlighted in its strategic plan, including: self-management, symptom management and caregiving; health promotion and disease prevention; research capacity development; and, technology integration. Through its Office of Research on End-of-Life Science and Palliative Care, Investigator Training, and Education, established in 2009, NINR will maintain its leadership on these issues. The Institute has launched a major evaluation study, supported with funding from the NIH OD, to assess current and future needs of EOL/PC science across Federal and private research entities. NINR and the NIH Common Fund awarded, via the American Recovery and Reinvestment Act, \$7.1 million in funding to support a Palliative Care Research Cooperative, a multi-institution cooperative effort to conduct collaborative research on palliative care, including a multi-site clinical trial focuses on statin use in patients who are near death.

NINR’s Self-Management, Symptom Management, and Caregiving program addresses the challenges of short- and long-term management of symptoms resulting from disease and disability by supporting research to: enhance the individual’s role in managing disease; manage debilitating symptoms; and improve health outcomes for individuals and caregivers. The FY 2012 budget request for the program is \$44.1 million, one percent above the FY 2010 funding level.

The Institute’s **Health Promotion and Disease Prevention (HPDP)** program fund studies on the key biological, behavioral, and social factors that promote health and healthy behaviors and prevent the development of disease. This activity also supports scientific discoveries of health predictors and prevention strategies across conditions, diseases, and settings, often focusing on minority and/or underserved communities. NINR recently sponsored an initiative to examine informed decision-making in racial and ethnic minority males, a population that continues to experience disparate health

outcomes. The FY 2012 budget request for the HPDP is \$38.7 million, two percent above the FY 2010 funding level.

NINR's **End-of-Life** research program applies interdisciplinary biological, behavioral, and social science strategies to advance understanding the challenges of a life threatening illness with respect to the needs of the individual and their caregivers. Specific research topics and activities include: improving awareness and relief of pain, suffering, and distressing symptoms through effective palliative care; understanding and facilitating decision-making by patients, caregivers, and providers, including through the use of advance directives; promoting wellness and self-management of symptoms through meaningful health activities; and developing new investigators in this area of science. The FY 2012 budget request for the End-of-Life program is \$12.9 million, a two percent increase above the FY 2010 funding level. In FY 2012, NINR intends to expand its efforts in this area.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
145.6		150.2		148.0	-1.5%	1.6%

National Library of Medicine (NLM)
www.nlm.nih.gov

NLM is the world's largest library of the health sciences and has extensive Web-based information resources for the scientific community, health professionals, and the general public. Donald Lindberg is NLM's director.

Begun in 1836, NLM applies its resources broadly to the advancement of medicine. 2011 marks the 175th anniversary of NLM. The Library collects materials in all areas of biomedicine and health care, as well as works on biomedical aspects of technology, the humanities, and the physical, life, and social sciences. The FY 2012 budget request for NLM is \$387.2 million, 10.3 percent above the FY 2010 Enacted Level. NLM's budget request includes funds to support several trans-NIH initiatives including the Basic Behavioral and Social Sciences Opportunities Network (OppNet.)

NLM's extramural programs focus on three priority areas: (1) the creation and enhancement of information infrastructure and knowledge resources for biomedicine; (2) biomedical informatics research to develop and test sophisticated computational approaches for acquiring, integrating, managing, mining and presenting biomedical data, information and knowledge; and (3) training for research careers in biomedical informatics. To accomplish its extramural goals in 2012, NLM will offer grants in five categories: training support; career transition awards; research project grants; resource grants; and SBIR/STTR grants. The FY 2012 budget request for the Extramural Research program is \$16.7 million, a \$4.3 million decrease below the FY 2010 funding level.

In the past, NLM's Informatics Research grants have supported research and development in computational intelligence in medicine, clinical decision support, protection of privacy in electronic medical records, secondary use of routine clinical data for research purposes, regional health data integration, health applications of advanced telecommunications networks, automated bio-surveillance, and information management in disasters. NLM grant programs support both basic and applied research; both large and small projects, ranging from major research resources to small business innovation research; and investigator-initiated projects as well as focused requests for applications in target areas important to NLM's mission. The FY 2012 budget request for informatics research is \$43.8 million, 28.7 percent above the FY 2010 level. In FY 2012, NLM intends to issue funding solicitations in advanced informatics focus areas such as computational data mining, natural language understanding, and intelligent personal health records. NLM also intends to participate in multi-IC initiatives on topics of interest to NLM, such as health literacy and comparative effectiveness

research.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
351.0		364.3		387.2	6.1%	10.3%

DEPARTMENT OF HOMELAND SECURITY

Former Arizona Governor Janet Napolitano remains as the Secretary of the Department of Homeland Security (DHS). The FY 2012 request for DHS is \$56.9 billion up from \$56 billion actual spending in FY 2010 (this includes mandatory fees and trust funds). The FY 2011 request was \$56.3 billion. Last year, DHS completed the first ever Quadrennial Homeland Security Review (QHSR), which established a unified, strategic framework for homeland security missions and goals, as well as the first ever Bottom-Up Review (BUR), which aligned DHS' programmatic activities and organizational structure to better serve those missions and goals.

The Department now has six missions: Preventing Terrorism and Enhancing Security; Securing and Managing Our Borders; Enforcing and Administering Our Immigration Laws; Safeguarding and Securing Cyberspace; Ensuring Resilience to Disasters; and Providing Essential Support to National and Economic Security. DHS has asked for \$236.9 million to fund 3,336 Behavioral Detection Officers, an increase of 350 positions. These officers, according to DHS, serve as an additional layer of security in airports by providing a non-intrusive means of identifying individuals who may pose a risk of terrorism or criminal activity. Congress is not so sure about their effectiveness and the House Committee on Science, Space, and Technology's Investigation and Oversight Committee will have a hearing on the program in early April.

Science and Technology Directorate

www.dhs.gov/xres

Tara O'Toole is the Undersecretary for the Science and Technology (S&T) Directorate. The Directorate ensures that DHS and the homeland security community have "the science, technical information and capabilities they need to more effectively and efficiently prevent, protect against, respond to, and recover from all-hazards and homeland security threats." The FY 2012 budget request for the S&T Directorate is \$1.176 billion, an increase over the FY 2010 figure of \$1.007 billion. The transfer of the Radiological and Nuclear research program into the S&T directorate accounts for all of the increase. All the other components of the Directorate would see their budgets decrease under the FY 2011 request.

The Human Factors/Behavioral Sciences Division has now been absorbed into a Research, Development, and Innovation (RD&I) budgetary line that allows DHS S&T more flexibility. The RD&I proposed budget for FY 2012 is \$659.9 million, \$61.4 million above a comparable FY 2010 figure. The Human Factors component is led by Sharla Rausch and "develops and applies the social, behavioral, and physical sciences to improve identification and analysis of threats, to enhance societal resilience, and to integrate human capabilities into the development of technology." The Division is comprised of three thrust areas: Personal Identification Systems; Human Technology Integration; and Social and Behavioral Threat Analysis. The first focuses on biometric research. The second integrates human factors into the development and use of homeland security technologies with the goal of achieving high levels of system effectiveness, safety, and acceptance. The third area "applies the social and behavioral sciences to improve the detection, analysis, and understanding of threats posed by individuals, groups, and radical movements. It also addresses the psychological, social, and economic impacts of catastrophic events to enhance risk analyses, risk communications, preparedness, response, resiliency, and recovery efforts."

The Office of University Programs engages the academic community to conduct research and provides education and training programs to support DHS priorities and enhance homeland security capabilities. The FY 2012 request would reduce funding for the Office to \$36.6 million, a reduction of \$12.8 million from the FY 2010 level. The Office supports the 12 Centers of Excellence, including the National Consortium for the Study of Terrorism and Responses to Terrorism led by the University of Maryland, which is the social/behavioral science research center. A number of the other Centers have social/behavioral research components including the Center for Risk and Economic Analysis of Terrorism Events (CREATE), led by the University of Southern California, and the National Center for Border Security and Immigration, led by the University of Arizona and the University of Texas at El Paso, which is assessing threats and vulnerabilities, improving surveillance techniques, including behavioral screening, and analyzing immigration trends.

The Department also awards undergraduate scholarships to students interested in pursuing innovations that can be applied to the DHS mission. In addition, DHS sponsors the Summer Research Team Program for Minority Serving Institutions to provide faculty and students with the opportunity to conduct research at the DHS Centers of Excellence. The proposed budget decrease could mean a reduction in the number of Centers and the elimination of the scholarship program.

	Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
University Programs	49.4		40.0		36.6	-8.5%	-25.9%
Research, Development and Innovation	598.5		N/A		659.9	N/A	10.3%

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT (HUD)

HUD Secretary Shaune Donovan remains committed to transforming his Department. The FY 2012 overall request for the Department's discretionary funding is \$41.7 billion, down from \$42.9 billion in FY 2010 spending. The Administration has once again asked for transfer authority of up to 0.5 percent (down from one percent in FY 2010) of program funds or \$120 million for the Transformation Initiative (TI). According to the Secretary, HUD proposes to use these funds for three complementary purposes: research, evaluation and program metrics; program demonstrations; and technical assistance and capacity building.

Office of Policy Development and Research (OPD&R)

www.huduser.org

OPD&R is led by Assistant Secretary Raphael Bostic, one of the speakers at the 2009 COSSA Annual Meeting. OPD&R's primary function is to support HUD's mission and the policy agenda of the Secretary. OPD&R performs policy analysis, research, surveys, studies, and evaluations to help the Secretary and other staff make informed decisions on HUD policies, programs, and budget and legislative proposals.

In FY 2011 the Administration proposed a huge increase for OPD&R from \$48 million in FY 2010 to \$87 million. The proposed increase for FY 2012 is much more modest, a boost of \$9 million over FY 2010 to \$57 million. In FY 2010, the Department supplemented the \$48 million appropriation with \$26 million in TI Research, Evaluation, and Program Metrics funds. Funded projects included a Native American Needs Assessment and Tenant-Based Rental Assistance Costing Model project.

Of the \$57 million request, OPD&R expects to spend \$47 million to fund its Housing Market Surveys, including the American Housing Survey, the Survey of New Home Sales and Completions, the Survey of Market Absorption of Multifamily Units, the Survey of New Manufactured Housing Placements, and a new Rental Housing Finance Survey. The FY 2012 funding would also support enhanced research

dissemination and clearinghouse activities, a Doctoral Research Grant Program and a Young Scholars Post-Doc research program. OPD&R will continue to collect and make available basic data on the economic and social conditions of cities and to update the State of the Cities database. The Rockefeller Foundation has provided support for a Fellowship Placement Program through the development and funding of two-year fellowship grants.

With the TI funding, OPD&R will continue to conduct research and demonstrations. For FY 2011, HUD anticipates that anywhere from \$10 million to \$30 million might become available for research, evaluation, and performance metrics activities. For FY 2012, the Department anticipates allocating approximately \$25 million to research projects. OPD&R expects to partner with other Federal agencies, such as the Departments of Transportation and Energy, and the Environmental Protection Agency, on research topics of mutual interest.

The Department has also identified several areas of research interest that could be considered. These include: Voucher Cost Standardization Testing; Final Assessment of 15 Early HOPE VI Developments; Rental Demand and the Foreclosure Crisis; Evaluation of Impacts of Supplemental Vouchers for the Homeless; Impact of Supportive Housing on Frequent Users of Medicaid Services; Success of Mixed-Income Housing and Mixed Finance; Public Housing Health Intervention Evaluations; and Costs and Benefits of Inclusionary Zoning.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
48.0		87.0		57.0	-34.0%	18.8%

DEPARTMENT OF JUSTICE

At the first meeting of the Office of Justice Programs' (OJP) Scientific Advisory Board in late January 2011, Attorney General Eric Holder said it was important to put "science back in the DNA of the Department" so that criminal justice decision making will get better and every dollar will count in these constrained budget times. The Board, he added, needed to encourage the scientific talent within the criminal justice field and "meld it into an arm of criminal justice policy."

OJP Assistant Attorney General Laurie Robinson remains committed to evidence-based criminal justice policy and to revitalizing the Justice Department's research and statistics agencies. She convinced the Administration to nominate two distinguished criminologists, John Laub and James Lynch, to lead the National Institute of Justice (NIJ) and the Bureau of Justice Statistics (BJS), and after a long delay the Senate finally confirmed them in early summer 2010.

In the FY 2010 request the Department requested, and Congress agreed, that to further improve funding for research and data up to one percent of OJP funds may be used for research or statistical purposes by the NIJ and BJS. In FY 2011 the Department boosted that set-aside figure to three percent in the request. It has done so again in the FY 2012 proposal.

OJP proposes to use the set-aside for: maximizing the value of forensic evidence; establishing the effectiveness of criminal justice diversion methods and strategies; eliminating rape kit backlogs - pilots; conducting research on Indian Country crime and victimization and improving Indian country statistics; reducing law enforcement deaths associated with vehicular accidents; supporting a pilot and evaluation on prescription drug monitoring; improving inmate re-entry; improving risk-based decision-making in the criminal justice system; and establishing a better understanding of the risk-based factors that may lead to domestic radicalization, and related acts of violence/terrorism.

Bureau of Justice Statistics (BJS)

www.ojp.usdoj.gov/bjs

BJS' mission is to collect, analyze, publish, and disseminate information on crime, criminal offenders, victims of crime, and the operation of justice systems at all levels of government. These data are critical to Federal, State, and local policymakers in combating crime and ensuring that justice is both efficient and evenhanded. Former COSSA Board member James Lynch is the Director.

Congress accepted the FY 2010 request to significantly increase funding for BJS to implement the recommendations of the National Academies' report: *Ensuring the Quality, Credibility, and Relevance of U.S. Justice Statistics*. Much of that increase is funding improvements in the National Crime Victimization Survey (NCVS), BJS' major data collection program. For FY 2012 the Department asks for \$57.5 million for BJS, a \$5 million reduction from the FY 2011 request.

Within that request, \$26 million will fund the continuation of the NCVS and \$15 million will go to the NCVS redesign. The rest of BJS's budget supports collection, analysis and dissemination of data on: populations under correctional supervision; federal criminal offenders and case processing; administration of law enforcement agencies and correctional facilities; prosecutorial practices and policies; state court case processing; felony convictions; characteristics of correctional populations; criminal justice expenditure and employment; civil case processing in State courts; and special studies on other criminal justice topics.

BJS also provides assistance to State, local, and tribal governments through the National Criminal History Improvement Program (NCHIP), the State Justice Statistics (SJS) Program for Statistical Analysis Centers, and the Tribal Justice Statistics Assistance Center (TJSAC).

BJS also receives funds from the Bureau of Prisons through Prison Rape Elimination Act. In FY 2010 BJS received \$2 million to add to previously obligated funds to fully fund the next round of data collection in juvenile facilities. In FY 2011 \$750,000 came over to support one year of collection of administrative records, i.e., Survey of Sexual Violence, and fund data enclave at BJS. The proposed FY 2012 budget includes a little over \$1 million to fund one year of collection of administrative records and contribute to update of sampling frames for prisons and jails.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
60.0		62.5		57.5	-8.0%	-4.2%

National Institute of Justice (NIJ)

www.ojp.usdoj.gov

NIJ is the research, development and evaluation agency of the U.S. Department of Justice and supports research on crime control and justice issues. NIJ strives to provide evidence-based knowledge and tools to help national, state, and local officials deal with the challenges of crime and justice. John Laub is the Director.

A National Academies' panel, chaired by Charles Wellford of the Department of Criminology at the University of Maryland, and including former Attorney General Ed Meese and current Philadelphia Police Chief Charles Ramsey, issued its report in July 2010, *Strengthening the National Institute of Justice*. The report recognizes that NIJ "has accomplished a great deal" in its forty-year history including developing a body of knowledge on such important topics as hot spot policing, violence against women, the role of firearms and drugs in crime, drug courts, and forensic DNA analysis. NIJ,

the report continues, has also built a crime and justice research infrastructure and widely disseminated the results of the research it supported to help guide practice and policy.

Yet, the report also recognized that NIJ's efforts "have been severely hampered by a lack of independence, authority, and discretionary resources to carry out its mission." In FY 2011 the Administration sought a major increase asking for a \$70 million budget for NIJ, up from \$48 million in FY 2010. The goal was to "reinvigorate NIJ's social science research mandate." For FY 2012, with deficit concerns front and center, the proposed increase is \$7 million above FY 2010 or \$55 million.

The \$55 million includes \$10 million for Stopping Violence Block-by-Block Field Experiments, \$10 million for the Arrestee Drug Abuse Monitoring (ADAM) Program, \$3.8 million for the Sexual Assault Problem Solving Initiative (an outgrowth of the Memphis Strategic Approaches to Community Safety Initiative), and \$1 million for an internet-based clearinghouse providing information on evidence-based criminal justice strategies. The FY 2012 budget would provide no continuation funding for the National Law Enforcement and Corrections Technology (NLECTC) System.

The FY 2012 budget proposal continues the \$3 million transfer NIJ receives for research and evaluation on violence against women and related issues addressed by grant programs of the Office on Violence Against Women as well as \$5 million from the Byrne Justice Assistance Grants program.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
48.0		70.0		55.0	-21.4%	14.6%

DEPARTMENT OF LABOR

Former California Congresswoman Hilda Soldis continues her tenure as Secretary of Labor. The Department requests \$12.8 billion for FY 2012, significantly below the \$13.5 billion spent in FY 2010. Aside from the Bureau of Labor Statistics, there are pockets of research, data, and evaluation throughout the Department. For FY 2012 the Department proposes to do more than double funding to \$18.4 million from its \$8.5 million level in FY 2010, for its evaluation efforts in the Office of the Assistant Secretary for Policy.

The Department also proposes spending \$13.8 million on its Workforce Data Quality Initiative which enables state workforce agencies to build longitudinal data systems that merge workforce information with education data. The implementation of this initiative complements Education's State Longitudinal Data System (SLDS) Grants funded by the Recovery Act. This program was a target for elimination by H.R.1, the House's attempt to provide FY 2011 funding for the rest of the fiscal year.

Bureau of Labor Statistics (BLS)

www.bls.gov

The BLS is an independent national statistical agency within the Department of Labor, led by Commissioner Keith Hall, responsible for measuring labor market activity, working conditions, and price changes in the economy. It collects, analyzes, and disseminates essential economic information to support public and private decision-making. The BLS comprises five activities: Labor Force Statistics, Prices and Cost of Living, Compensation and Working Activities, Productivity and Technology, and Executive Direction and Staff Services.

The FY 2012 request of \$647 million is \$36 million above the FY 2010 level and slightly more than the Administration requested in FY 2011. Part of the increase would spend \$10 million to establish a new youth cohort of the National Longitudinal Survey (NLS). To partially offset the cost of the new cohort,

BLS proposes a \$6 million reduction that would extend the time between field operations for the 1979 and 1997 cohorts.

Other initiatives for FY 2012 for BLS include: modernize the Consumer Expenditure Survey by using diaries, increasing the sample size, and adding geographic areas; increase the number of CPI commodity and services price quotes; add one annual supplement to the Current Population Survey (CPS); publish the first set of industry employment data on the green economy; support for the Census Bureau’s supplemental statistical poverty measure; and develop ways to capture data on the contingent and alternative workforce.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
611.4		645.4		647.0	0.2%	5.8%

DEPARTMENT OF STATE

According to the Administration, support for educational, professional, cultural, and youth programs play central roles in the President’s Global Engagement Initiative. President Obama, speaking in Turkey argued that “...exchanges can break down walls between us that’s where progress begins,” thus making them a strategic element of America’s foreign policy.

Bureau of Educational and Cultural Affairs (ECA)

www.exchanges.state.gov

Faced with the costs of wars and other military activity and amidst growing concern about the nation’s fiscal future, the ability to sustain the large increases that ECA experienced in the latter Bush years has diminished significantly. The President’s proposed FY 2012 request for ECA is \$637.1 million, slightly increased from FY 2010 and proposed FY 2011 funding. According to ECA, the FY 2012 budget will again concentrate resources on countries with significant Muslim populations including such high priority countries as Afghanistan, Pakistan, and Iraq. The programs will also continue to focus on global education, women, youth, underserved audiences, and the formation of critical global communities.

ECA’s Academic Programs include the J. William Fulbright Scholarship Program for the exchange of scholars, students, and teachers; the Hubert H. Humphrey Fellowships for mid-career professionals from developing nations (a Fulbright activity); and the Benjamin Gilman program for American undergraduates with financial need to study abroad. Other Academic Programs involve bringing foreign participants to the United States; English language programming abroad; English Access Microscholarships for underserved populations; and exchanges involving specially targeted teachers, graduate students, and postdoctoral scholars. The request for these programs in FY 2012 is \$359 million, a slight increase from the FY 2010 actual level. The Administration would fund the Fulbright Programs at \$252.7 million in FY 2012. The budget proposes a \$2 million increase to the Gilman Study Abroad scholarship program to allow an additional 400 financially-disadvantaged U.S. students to seek opportunities in destinations outside of Western Europe. Students who study critical languages during their study abroad program could receive additional funding.

The Administration also seeks support to “increase recognition of the value, quality, and accessibility of a U.S. education among international students.” To increase the competitiveness of U.S. higher education worldwide, ECA proposes to create a global marketing campaign to raise the visibility of U.S. higher education in the “marketplace.”

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
635.0		633.2		637.1	0.6%	0.3%

DEPARTMENT OF TRANSPORTATION (DOT)

Former Illinois Congressman Ray LaHood (R-IL) is the Secretary of the Department of Transportation (DOT). The most important law governing DOT funding is the Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU), enacted in 2005. Congress has yet to enact a comprehensive new version of the law, simply extending its expiring provisions. Congress will try again in 2011. The proposed FY 2012 budget for DOT is \$129 billion, a whopping 66 percent increase above FY 2010 levels. The increase includes a \$556 billion six-year surface transportation reauthorization proposal to improve the Country's highways, transit, and rail infrastructure and to ensure that these systems are safe. It also includes the President's call for a National Infrastructure Bank.

Research and Innovative Technology Administration (RITA)

www.rita.dot.gov

According to RITA, its FY 2012 budget request is \$52.6 million, an increase of \$12.6 million over the FY 2010 level. Of that amount, \$17.6 million funds research and development, mostly technology focused. The overall request reflects RITA's part of the surface transportation reauthorization proposal to greatly enhance the data collection and statistical analysis program in support of data-driven decision-making across the DOT. RITA also receives \$600 million in other funds from DOT agencies to support research, including a number of competitive programs.

Bureau of Transportation Statistics

www.bts.gov

Within RITA is the Bureau of Transportation Statistics (BTS), led by its new administrator Patricia Hu. BTS collects, analyzes, and disseminates high quality data and information for all transportation modes. Users include federal, state and local agencies, researchers, and public and private sector transportation decision-makers. BTS provides data through programs that address: Freight and Travel Statistics (National and International); Transportation Economics; Geospatial Information Systems; Statistical Methods and Standards Performance Metrics; and Airline Statistics, which is funded through the research and development appropriation.

BTS receives its funds from the Highway Trust Fund. The budget request for BTS is \$35 million, an increase of \$8 million over the FY 2010 funding level. This represents a new baseline based on the highway act reauthorization proposal noted above.

The increase would fund a new Safety Data and Analysis Program to support the collection, statistical expertise, and methodology to improve safety data access, as well as to address emerging issues in transportation safety. It would also allow, within the Freight Statistics Program, the expansion of the Commodity Flow Survey (CFS), the Vehicle Inventory and Use Survey (VIUS), and the International Freight Data System (IFDS). These programs collect, compile and analyze freight data across all modes of transportation and provide analytic reports and stakeholder-focused products from multimodal and intermodal perspectives.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
29.0		30.0		35.0	16.7%	20.7%

INDEPENDENT AGENCIES

National Archives and Records Administration (NARA)

www.archives.gov

The National Archives was established in 1934 by President Franklin Roosevelt to manage the Government's archives and records, and operate the presidential libraries. David Ferriero, former director of the New York Public Libraries, became the nation's 10th Archivist in November 2009.

NARA preserves textual records, maps, charts, architectural drawings, photographs, machine-readable data sets, films and videotapes. In addition, NARA is managing the rapidly growing number of electronic Government records. The Electronic Records Archives (ERA) is the strategic response to the challenge of preserving, managing, and providing access to these records. ERA will keep essential electronic Federal records retrievable, readable, and authentic for as long as they remain valuable. NARA also assists non-Federal institutions through the National Historical Publications and Records Commission (NHPRC) Grants program.

The Administration proposes \$422.5 million for NARA's budget in FY 2012, an 8.2 percent decrease from the FY 2011 budget request of \$460.3 million. In H.R. 1, the House proposes to cut NARA funding for FY 2011 to \$336.4 million. The FY 2010 funding level was \$469.8 million. Most of the decrease in the FY 2012 Administration request will come from the decision to stop development of the ERA and move it directly into an operations and maintenance mode. This transition at the end of FY 2011 will reduce program expenditures by \$36.3 million. For the National Historical Publications and Records Commission (NHPRC), the grant-making arm of the National Archives, the President proposes to cut the funding in half to \$5 million.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
469.8		460.2		422.5	-8.2%	-10.1%

National Endowment for the Humanities (NEH)

www.neh.gov

NEH is an independent federal agency created by Congress in 1965. As one of the largest funders of humanities programs in the United States, NEH provides critical support for research, education, preservation, and public programs in the humanities through grants to a wide range of educational institutions, non-profit organizations, and individual scholars nationwide. Former Iowa Congressman and co-founder of the Congressional Humanities Caucus James Leach is the current NEH Chairman.

NEH's grant programs are administered by divisions and offices that work with prospective applicants, recruit and oversee peer-review panels, provide analysis of panel results to members of the National Council on the Humanities and the agency's senior staff, conduct site visits of projects that have received NEH support, and represent NEH at regional, national, and international conferences in the humanities. These include the: Division of Education Programs; Division of Preservation and Access; Division of Public Programs; Division of Research Programs; Federal/State Partnership; Office of Challenge Grants; and the Office of Digital Humanities.

The proposed FY 2012 funding for NEH is \$146.3 million. This marks a \$21 million or 13 percent reduction from the FY 2010 enacted level of \$167.5 million. H.R.1 would cut NEH funding in FY 2011 to \$145 million.

The Administration's requested budget proposes to "zero out" funding for the agency's *We the People* program, a Bush Administration initiative designed to encourage and enhance the teaching, study, and understanding of American history, culture, and democratic principles. The FY 2012 budget proposal recommends \$4 million, a \$1.5 million increase over the proposed FY 2011 request, for the new *Bridging Cultures* initiative that highlights the role of the humanities in enhancing understanding and respect for diverse cultures and subcultures within America's borders and around the globe.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
167.5		161.3		146.3	-9.3%	-12.7%

National Science Foundation (NSF)

www.nsf.gov

In late September 2010, the Senate confirmed Subra Suresh as NSF Director replacing Arden Bement, who left the Foundation at the end of May. In the interim, sociologist Cora Marrett, after serving as Acting Deputy Director, became Acting NSF Director. Marrett had previously been NSF's first Assistant Director for the Social, Behavioral and Economic Sciences directorate and Assistant Director for the Education and Human Resources directorate. In August 2010, President Obama nominated Marrett for the Deputy Director's slot. The Senate did not confirm her before the end of the 111th Congress. On January 5, 2011 Obama re-nominated her. She still awaits Senate confirmation.

Suresh has observed that we are in a new era of observation, data, and information, and this will drive NSF's investments in the future. Speaking to the President's Council of Advisers on Science and Technology in early January 2011, Suresh told them that his goal is to maintain the Foundation's role as the "U.S. innovation engine" through "proactive leadership."

As the 111th Congress drew to a close, it passed the renewal of the America COMPETES Act, which included the NSF's reauthorization. In that legislation Congress and the Obama Administration remain committed to significant increases for NSF over the three years.

In FY 2010, NSF spent \$6.972 billion and an additional \$600.2 million left over from the American Recovery and Reinvestment Act's (ARRA) \$3 billion allocation to the Foundation. In FY 2011, in keeping with the commitment of COMPETES, the Administration asked for an eight percent increase to \$7.424 billion. In the 112th Congress, the House in H.R. 1 proposed reducing funding for NSF by \$359 million from the FY 2010 level. For FY 2012, the Administration has requested \$7.767 billion.

The Research and Related Activities Account, which funds all the research directorates and many of the offices within NSF, spent \$5.615 billion in FY 2010 and an additional \$439.2 million from ARRA funds. For FY 2011, the President requested \$6.019 billion. The request for FY 2012 is \$6.254 billion.

Key interdisciplinary activities for the NSF in FY 2012 would include: increases for the Science, Engineering, and Education for Sustainability (SEES) initiative; Cyberinfrastructure Framework for the 21st Century (CIF21); research at the interface of Biological, Mathematical, and Physical Sciences; a Wireless Innovation Fund; and a focus on Enhancing Access to the Radio Spectrum (EARS).

	Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
Biological Sciences	714.8	0.4	767.8		794.5	3.5%	11.2%
Computer, Information, Science, Engineering	618.7		684.5		728.4	6.4%	17.7%
Engineering	775.9		825.7		908.3	10.0%	17.1%
Geosciences	891.9	0.4	955.3		979.2	2.5%	9.8%
Mathematics and Physical Sciences	1,368.0	15.7	1,409.9		1,432.7	1.6%	4.7%
Social, Behavioral, and Economic Sciences	255.3	0.3	268.8		301.1	12.0%	17.9%
Office of Cyberinfrastructure	214.7		228.1		236.0	3.5%	9.9%
Office of Polar Programs	451.8	2.2	528.0		477.4	-9.6%	5.7%
Office International Science and Engineering	47.8	0.1	53.3		58.0	8.8%	21.3%
Integrative Activities	274.9	420.2	295.9		336.2	13.6%	22.3%

Social, Behavioral, and Economic Sciences Directorate (SBE)

Former COSSA President and Inter-university Consortium on Political and Social Research director Myron Gutmann became the Assistant Director for the SBE Directorate in November 2009.

NSF indicates it supports 57 percent of academic basic research in the social sciences. FY 2010 funding for SBE was \$255.3 million. For FY 2012, NSF proposes to increase SBE's funding to \$301.1 million.

SBE will commit funds to participating in NSF's Cross Directorate programs such SEES, CIF21, and the Comprehensive National Cybersecurity Initiative. There is also a new proposed \$4 million commitment to funding research to understand population change in the 21st century focusing on migration and aging and its implications for job creation.

The FY 2012 budget proposes \$113.8 million for the Social and Economic Sciences (SES) division, led by Rachel Croson, a boost of almost \$15 million over the FY 2010 level. A significant part of the increase will go to SEES investigations. SES will also support research on community-based networks as part of CIF-21. As part of the Cybersecurity initiative, SES would support research on the intersection of cybersecurity, economics, and society. The new budget also includes funding to increase access to data generated from SBE's three large surveys: the Panel Study on Income Dynamics, the General Social Survey, and the American National Elections Studies.

The Behavioral and Cognitive Sciences (BCS) division, led by Mark Weiss, would increase by \$11.3 million to \$105.9 million under the FY 2012 proposed budget. Most of the increase would go to core programs, but BCS would also fund research as part of SEES to support investments in understanding human behavior and decision making about energy use, interactions among natural and human systems, and vulnerability and resilience. BCS will also increase support for interdisciplinary activities in learning and the brain sciences.

The America COMPETES legislation renamed the Science Resources Statistics (SRS) division; it is now the National Center for Science and Engineering Statistics (NCSES), but still directed by Lynda Carlson. The proposed FY 2012 funding of \$38 million represents a \$3.4 million increase over FY 2010. The increase would allow the NCSES to increase support for the National Survey of College Graduates. NCSES would also begin a pilot project to test the feasibility of tagging and extracting federal agencies' administrative records to improve the quality and timeliness of the federal research and development surveys.

SBE's new Office of Multidisciplinary Activities (SMA) has a proposed FY 2012 budget of \$43.4 million, up from \$26.9 million in FY 2010. This large increase would include support for the SEES and CIF21 initiatives, and fund research at the intersection of the economic and computer sciences. SMA would also continue its support for the Science of Science and Innovation Policy (SciSIP) and STAR METRICS programs. SBE has also proposed to initiate a "gradual phasing down" of the Science of Learning Centers program and would decrease funding in FY 2012 from \$19.8 million to \$13.7 million.

	Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
Division of Behavioral and Cognitive Sciences	94.6	0.2	99.2		105.9	6.8%	11.9%
Division of Social and Economic Sciences	99.1	<0.1	104.1		113.8	9.3%	14.8%
National Center for Science and Engineering Statistics	34.8		36.7		38.0	3.5%	9.2%
Office Of Multidisciplinary Activities	26.9		28.7		43.4	51.2%	61.3%

Education and Human Resources Directorate (EHR)

The Education and Human Resources Directorate (EHR) is led by Assistant Director Joan Ferrini-Mundy, who served as Acting Assistant Director for over a year. The Directorate is a leader in the government-wide effort to promote science, technology, engineering and mathematics (STEM) education. EHR's goals are to strengthen U.S. education at all levels, in both formal and informal learning settings, and to support continued U.S. economic and research preeminence.

In FY 2010, EHR spent \$872.8 million and an additional \$15 million in ARRA money to fund the Professional Science Master's program. The FY 2012 proposed budget is \$911.2 million, a 4.4 percent increase over FY 2010 actual.

The three priorities that focus the FY 2012 request are: improving K-12 STEM student and teacher learning, with more dramatic results in student outcomes; building a diverse and highly qualified STEM workforce; and advancing evaluation methods, designs, and approaches to strategic investments.

The division of Research on Learning in Formal and Informal Settings (DRL) has a proposed increase to \$264 million, \$4 million over current funding. Within these funds, NSF asks for a \$10 million boost to \$22 million for the Research and Evaluation on Education in Science and Engineering (REESE) program in order to support research, evaluations, syntheses, and comparison studies to improve assessments of STEM education and workforce programs. EHR proposes a \$100 million Teacher Learning for the Future program to fund research on STEM teacher preparation and continuing education.

The Division of Human Resource Development (HRD) continues to support programs to broaden participation in science. After congressional rejection of the attempt to consolidate HRD's programs in

the FY 2011 request, NSF has not repeated that proposal in FY 2012. HRD's budget would increase from \$138.5 million in FY 2010 to \$160 million in FY 2012. HRD transfers its Research on Disabilities in Education and Research on Gender in Science and Engineering to the DRL.

NSF will continue to increase the number of Graduate Fellowships under its FY 2012 budget proposal. NSF expects to award 2,000 new fellowships in FY 2012, maintaining the doubling of new awards achieved in FY 2010. At the same time NSF proposes to eliminate the GK-12 program that sent graduate students into K-12 classrooms to help teach science and math.

In the Undergraduate Division, a new \$20 million program, Widening Implementation and Demonstration of Evidence-based Reforms (WIDER), would fund research on how to implement proven instructional practices across the education system to enhance STEM teaching and learning.

	Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
Research on Learning in Formal and Informal Settings	260.5		247.9		264.1	6.5%	1.4%
Undergraduate Education	292.4		290.0		295.4	1.9%	1.0%
Graduate Education	196.4		185.3		191.8	3.5%	-2.3%
Human Resource Development	138.5		168.9		160.0	-5.3%	15.5%
EHR Total	892.8	15.0	892.0		911.2	2.2%	2.1%

United States Institute for Peace (USIP)

www.usip.gov

The United States Institute of Peace (USIP) is an independent, nonpartisan institution established and funded by Congress. Its goals are to help prevent and resolve violent international conflicts, promote post-conflict stability and development, and increase conflict management capacity, tools, and intellectual capital worldwide. Specific work performed by the Institute includes: operating on-the-ground in zones of conflict to mediate and facilitate dialogue among the conflicting parties; performing cutting-edge research for practitioners, policymakers, and academia that has resulted in over 400 publications; identifying best practices and developing innovative peace-building tools; providing training on conflict management, including mediation and negotiation skills; and educating college and high school students. Richard Solomon remains USIP's President.

USIP also supports the Jennings Randolph Program for International Peace that awards residential fellowships to senior researchers and practitioners. Since the program's inception, Senior Fellows have produced more than 125 books and special reports. The Jennings Randolph program also awards non-resident Peace Scholar Fellowships to students at U.S. universities working on doctoral dissertations related to the Institute's mandate.

The Administration's FY 2012 budget proposes \$42.5 million for USIP. In H.R. 1, the House reduced funding for USIP in FY 2011 by \$42.7 million.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
49.2		46.6		42.5	-8.8%	-13.6%

Woodrow Wilson International Center for Scholars
www.wwics.si.edu

Created by an Act of Congress in 1968, the Woodrow Wilson International Center for Scholars is named after our only President with a Ph.D. In February 2011, Jane Harman resigned her California congressional seat and was appointed director, succeeding former Indiana Congressman Lee Hamilton, who led the Center for 12 years. The Center awards approximately 20-25 residential fellowships annually to individuals with outstanding project proposals in a broad range of the social sciences and humanities on national and/or international issues. The Center facilitates scholarship in the social sciences and humanities, fosters discussion of those studies through seminars, conferences, and its publication, *The Wilson Quarterly*. The FY 2012 proposed budget is \$11 million, slightly below the FY 2010 level.

Actual FY 10	Actual FY 10 ARRA	Proposed FY 11	Current FY 11	Proposed FY 12	(P)FY12/ (P)FY11	(P) FY 12/ (A) FY 10
12.2		9.9		11.0	11.1%	-9.8%