TO: COSSA Members, Affiliates, Contributors and Friends
FROM: Roberta Balstad Miller, Executive Director

COSSA LEGISLATIVE REPORT
July 16, 1982

This Week ... Congress Returns to Work
NSF Update
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Congress Returns to Work

Congress returned to work this week to face a humid Washington summer and a mounting agenda of undone tasks. Adding to the Congressional workload was the inability of the House of Representatives to override President Reagan's second veto of the urgent supplemental appropriation for FY 1982. Late yesterday, July 15, Congress passed a third version of the supplemental appropriation that will provide the funds necessary to keep the government operating through the rest of the fiscal year. The bill, which is $400 million below the second supplemental appropriation, contains $1.3 billion in added spending for the Guaranteed Student Loan program. An additional $5.623 million was also included for program funding at the Bureau of Labor Statistics (BLS). Without these funds, BLS would have had to furlough its employees for at least six weeks. Senate sources indicate the President is expected to sign the third version if it is passed.

Still to be enacted are the 13 specific appropriations bills necessary to fund the government in FY 1983. Each of these bills must be marked up in the relevant subcommittee and full committee, passed on the floor of each chamber, go through a conference committee to reconcile differences between the House and Senate.
versions, and receive final passage in both Houses. It is highly unlikely that the Congress will complete action on the appropriations bills before the end of FY 1982. What will probably happen is that once again the government will be funded through a continuing resolution.

The inability of Congress to handle its workload is also likely to trigger a provision in the first budget resolution concerning spending limits. Under the current budget process, the first budget resolution sets recommendations or goals for overall spending to guide the appropriations process. However, the budget process calls for a second budget resolution in September which can reaffirm or change the original goals. The second budget resolution changes those goals into actual spending limits. This year's first budget resolution specifies that, should Congress fail to pass a second budget resolution, the recommendations in the first resolution automatically become spending limits. These spending limits become critical if the appropriation legislation proposes spending beyond the limits of the budget resolution. In this case, the appropriations will be blocked and sent back to committee prior to a floor vote. Relevant subcommittees may also be directed by the Budget Committee to come up with amendments which will bring previously enacted FY 1983 appropriations into line with the second budget resolution.

Although research and development appropriations have not exceeded budget limitations in the past, it is not clear what will happen this year. Under current uncertain conditions, it may be difficult to transform the favorable authorizations for social and behavioral science research in FY 1983 into favorable appropriations.

National Science Foundation Update

The House Appropriations Subcommittee on HUD-Independent Agencies, which determines the NSF appropriation, plans to mark up the NSF budget before the end of July. Although a date for the mark up has not been set as of this writing, it is expected that the mark up will be scheduled for the week of July 26. COSSA is asking members of the Subcommittee to add funds for the social and behavioral science programs at NSF, restoring these programs to their FY 1980 level as permitted by the House authorization.

All social scientists in the districts of Members of the Subcommittee are urged to telephone or telegraph their representative this week about the appropriation for social and behavioral science research at NSF. A list of Members of the Subcommittee with their Washington telephone numbers is given below:
Majority Members

Edward Boland, Chairman (D-MA,2)  
202/225-5601

Bob Traxler (D-MI,8)  
202/225-2806

Louis Stokes (D-OH,21)  
202/225-7032

Lindy Boggs (D-LA,2)  
202/225-6636

Martin Olav Sabo (DFL-MN,5)  
202/225-4755

For further information, contact the COSSA office.

Minority Members

Bill Green, Ranking (R-NY,18)  
202/225/2436

Lawrence Coughlin (R-PA,13)  
202/225-6111

C. W. Bill Young (R-FL,6)  
202/225-5961

Congressional Seminar on Minority Youth Unemployment

On Thursday, July 15, COSSA co-sponsored a Congressional seminar on minority youth unemployment. Other co-sponsors were the American Association for the Advancement of Science (AAAS), which organized the seminar, the Subcommittee on Employment Opportunities of the House Committee on Education and Labor, the Congressional Science and Technology Caucus, and the Congressional Black Caucus. Speakers at the seminar were Bernard E. Anderson, Director of the Social Sciences Division of the Rockefeller Foundation, and Robert Taggart, Director of the Youth Knowledge Development Project of the National Council on Employment Policy. Drs. Anderson and Taggart discussed recent increases in minority youth unemployment and summarized social science research on programs designed to alleviate the problem. The seminar, which was organized by the AAAS Office of Opportunities in Science, was attended by both Congressmen and Congressional staff.

IOM Report on Behavior and Health

At the end of June, the Institute of Medicine/National Academy of Sciences published a report on the importance of social and behavioral science research in health and longevity. Titled Health and Behavior: Frontiers of Research in the Biobehavioral Sciences, the report emphasizes behavioral factors in both the prevention and the treatment of disease and physical disfunction. The Institute of Medicine released the report at a dinner on June 24 which was attended by agency heads, members of Congress, and representatives of the research community. A summary of the report is enclosed as attachment 1.
Summer Reading

The Swedish Council for Research in the Humanities and Social Sciences has recently inaugurated a new publication series which it calls Brytpunkt or Breaking Point. Edited by Bo Ohngren, the series will publish essays which contribute to discussions on research directions and research policy in Sweden. Both the research community and those who are concerned with social science research policy are the intended audience for the series, which will deal with problems and policies of interest to social scientists in the United States as well.

The first volume in the series, published last month, is called Memoir on History and Anthropology by David Gaunt of the University of Umeå. In this essay, Dr. Gaunt describes changes in the relationship between history and anthropology over the past several decades and surveys work in historical anthropology and anthropological history in the Western European nations and the United States. He concludes with recommendations for Swedish research policy in this area. In these recommendations, Dr. Gaunt stresses the need for sustained collective activities such as regularly scheduled discussions among researchers and annual symposia. He also emphasized the need for resource and teaching materials in this field.

Memoir in History and Anthropology is written in English. It can be obtained from the Swedish Research Council Publishing House, Box 6710, S-113 85 Stockholm, Sweden.
TIES BETWEEN LIFE STYLE AND HEALTH OPEN NEW RESEARCH AREAS

FOR IMMEDIATE RELEASE

WASHINGTON - Growing scientific evidence that health and disease are related directly to behavior has opened new opportunities for health research in the United States, an Institute of Medicine committee said today. It recommended that research in the life sciences be broadened to embrace a new dimension—the role of human behavior in preventing and curing disease.

Following a two-and-a-half-year study*, the committee concluded that "the biobehavioral sciences can make substantial and unique contributions toward dealing with much of the disease that now constitutes the main burden of illness in this country." The committee cited government estimates that as much as 50 percent of mortality from the 10 leading causes of death can be traced to life style.

For example, three out of four Americans will die of cardiovascular disease, cancer, accidents, or violence. Epidemiological studies, the committee said, have found that behavior plays an important role in each of these causes of death. Indeed, the death toll from each is so large that if only a fraction of the population were to adopt healthier habits, the results would be impressive in the number of lives saved, the committee said.

(MORE)

*The committee's report, Health and Behavior: Frontiers of Research in the Biobehavioral Sciences, is available from the National Academy Press at the letterhead address for $15.50 (prepaid). Reporters may obtain copies from the Office of Information also at the letterhead address.
"...[A]lcohol abuse, cigarette smoking, nonadherence to proven medical regimens, and overeating to obesity are present disproportionately among patients with high hospitalization costs," the committee pointed out. It also described other risk factors for numerous diseases: stressful life experiences such as bereavement, divorce, unemployment, hazardous work environment, or disruptive work schedules; "Type A" personality exemplified by the competitive, aggressive, impatient workaholic; socioeconomic disadvantage characterized by poverty, poor education, inadequate medical care, and unhealthy environment; poor nutrition or a diet excessive in salt or fats; lack of exercise; physiological and psychological changes that accompany aging; and the misuse of drugs.

Moreover, the committee pointed out, with the nation's health-care bill approaching $300 billion a year, plus an even higher cost in terms of lost earnings through premature death or disability and the incalculable price of human suffering, actions by society to improve health "may well reduce...the immense costs of modern health care."

That personal habits and environmental influences are important to health is not a new theory. "From the earliest days of medicine, physicians have recognized that behavioral activities and social context can profoundly affect a person's health, well-being, productivity, and longevity," the committee said.

But recent advances in the neurosciences--specifically the detection of numerous chemicals through which the brain controls the function of other organs--established a biological basis for this thesis. Stress and other behavioral influences have been shown in animals and humans to change the levels of these hormones, or more precisely "neuroregulators." Abnormalities in the way the body processes neuroregulators are thought to be involved in cardiovascular disease, mental illness, diabetes, Parkinson's disease, and many other health problems.

This confluence of biology and behavioral science is "biobehavioral science," an interdisciplinary approach to understanding human behavior. The committee compared it to biochemistry, which "not so long ago...was viewed suspiciously by chemists as weak chemistry and by biologists as weak biology; today this hybrid discipline is central to all biomedical research."
"In the foreseeable future, it should be possible to construct a reasonably unified biobehavioral science pertinent to health and disease, with major applications in all the health professions and by the public at large," the committee predicted.

Much remains to be learned about how to motivate people to make permanent changes in their life styles. Even when there is little doubt that a practice is dangerous to health, many people find it difficult to change. Smoking is the obvious example. Although some 30 million smokers try to break the habit every year, only about one tenth of them quit permanently.

Methods must be found for applying what is known about the learning process to large-scale prevention programs, the committee said. This will require first identifying a pattern of behavior as a risk factor for disease, then determining whether a change in behavior will help prevent or heal the disease, and finally designing the most cost-effective programs for reaching the most people. "But the task now seems to be determining how to do it best, rather than whether it can be done at all," the committee noted.

Collaboration between the biomedical and the behavioral sciences is essential to any comprehensive approach to improving the nation's health, the committee said, but the initiative will have to come from the funding agencies. It recommended that agencies supporting health-sciences research earmark a portion of funds for collaborative proposals. It also suggested that universities and medical schools foster closer cooperation among academic departments through special interdisciplinary centers or through cross-disciplinary research.

The report is the final phase of a study for the Alcohol, Drug Abuse, and Mental Health Administration and the National Institutes of Health to identify behavioral components in major public-health problems and to suggest ways in which the biobehavioral sciences can collaborate with the biomedical sciences in improving the nation's health.

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For the initial phase of the study a steering committee—headed by David A. Hamburg, director, division of health policy research and education, Harvard University, and former president of the Institute of Medicine—convened six invitational conferences. Each conference brought together representatives of several different disciplines to examine a specific public-health problem.

The conferences and titles of subsequent reports on each were: Smoking and Behavior; Combining Psychosocial and Drug Therapy: Hypertension, Depression, and Diabetes; Biobehavioral Factors in Sudden Cardiac Death; Infants at Risk for Developmental Dysfunction; Health, Behavior, and Aging; and Behavior, Health Risks, and Social Disadvantage. (All are available from the National Academy Press at the letterhead address.)

Judith Rodin, department of psychology, Yale University, served as vicechairman. Other members of the steering committee were Jack D. Barchas, department of psychiatry and behavioral sciences, Stanford University School of Medicine; Mildred Mitchell-Bateman, department of psychiatry, Marshall University School of Medicine; Peter B. Dews, laboratory of psychobiology, Harvard Medical School; Carl Eisdorfer, president, Montefiore Hospital and Medical Center, and department of psychiatry, Albert Einstein College of Medicine; Leon Eisenberg, department of social medicine and health policy, Harvard Medical School; Ruth T. Guze, department of pediatrics, Stanford University School of Medicine; Samuel B. Guze, department of psychiatry and president, Medical Center, Washington University School of Medicine; Robert J. Haggerty, president, W.T. Grant Foundation, New York City; Jules Hirsch, laboratory of human behavior and metabolism, The Rockefeller University; Irving Janis, department of psychology, Yale University; C. David Jenkins, department of behavioral epidemiology, Boston University Medical Center; Seymour S. Kety, department of psychiatry, Harvard Medical School, and Mailman Research Center, McLean Hospital, Belmont, Mass.; Gardner Lindzey, president and director, Center for Advanced Study in the Behavioral Sciences, Stanford, Calif.; Neal E. Miller, laboratory of physiological psychology, The Rockefeller University; Henry W. Riecken, University of Pennsylvania School of Medicine; Lee N. Robins, department of psychiatry, Washington University School of Medicine; Solomon H. Snyder, department of pharmacology, Johns Hopkins University Medical School; and Albert J. Solnit, director, Child Study Center, Yale University.

The committee was organized by the Institute of Medicine Division of Mental Health and Behavioral Medicine. Delores L. Parron was study director.