HOUSE PANEL CLIPS SCIENCE FOUNDATION’S PROPOSED INCREASE

Faced with a major shortfall in its allocation from the full committee, the House VA, HUD, Independent Agencies Appropriations Subcommittee provided the National Science Foundation (NSF) with $4.064 billion at the May 23 markup of the Fiscal Year (FY) 2001 bill for the agencies under the Subcommittee’s jurisdiction. Although this was a $167 million or 4.2 percent increase over last year, it was far from the $675 million or 17.3 percent requested in the President’s budget. This is the first step in what many observers predict will be a long process that will not reveal NSF’s FY 2001 final appropriation until early October.

Subcommittee Chairman Representative James Walsh (R-NY) suggested that he was doing the best he could with the low allocation. The Subcommittee, which had a $76.1 billion allocation, while the President’s requested spending amounted to $84.8 billion, also had to fund the Department of Veteran’s Affairs, particularly medical care, EPA, NASA, HUD, and the Federal Emergency Management Agency.

For the Research and Related Activities account the Subcommittee appropriated $3.135 billion. This is a $170 million, or 5.7 percent, increase over last year, but below the $405 million boost the administration sought. As it has done in recent years, the panel provided figures for each of the research directorates. The Social, Behavioral and Economic Sciences Directorate received $157.6 million, an $11.5 million gain over FY 2000, but less than half the proposed $29 million increase. The Subcommittee provided $5 million for research on children to help implement the interagency Children’s Initiative. They also asked NSF to support research on the impact of “emerging media” on kids.

The panel also allocated $694 million for the Education and Human Resources Directorate, a slight increase over FY 2000, but $34.7 million below the request. One of NSF Director Rita Colwell’s favorite new programs, the GradK-12 fellowships, where graduate and undergraduate students help teach science in elementary and secondary schools, received a $10 million increase to $19.8 million.

The House bill now moves to the full Appropriations Committee on June 6. There are tentative plans to bring the bill to the House floor on June 14. The Senate VA, HUD, and Independent Agencies Appropriations Subcommittee expects to markup the week of June 5, but that may get postponed.

“MUCH REMAINS TO BE DONE” AT THE NIH

“Investing in NIH [National Institutes of Health] is the single most important action our Nation can take to overcome the challenges of cancer, heart disease, HIV/AIDS, and other diseases and disorders,” stressed the appropriators in the Senate Appropriations Committee report accompanying the Labor, Health and Human Services, and Education Appropriation Bill for Fiscal Year (FY) 2001. Accordingly, the Committee recommended $20.51 billion for NIH, an increase of $2.7 billion, which maintains the goal of doubling NIH funding by 2003.

NIH Urged to Incorporate Behavioral Research as Part of its Core Public Health Mission

The Committee noted the “growing public awareness of the behavioral underpinnings of disease and urged the NIH to incorporate behavioral research as part of its core public health mission.” The Committee also recognized that heart disease, lung cancer, liver disease, AIDS, suicide, developmental

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disabilities, and many neurological and cognitive disorders can be “attributed directly or indirectly to unhealthy behavior.” The Committee requested a detailed description of NIH’s ongoing work in the behavioral sciences, including research and training activities within NIH’s behavioral and social science portfolio.

Emphasizing its concern regarding the disproportionately high incidence and/or mortality rates of cancer in ethnic minority, rural poor, and other medically underserved populations, the Committee urged the Institutes, Centers, and Offices with cancer-directed research agendas to work together: 1) develop and proceed with a five-year strategic plan to implement the recommendations in the 1999 Institute of Medicine study, The Unequal Burden of Cancer; 2) establish benchmarks, program evaluations, and accountability procedures; 3) allocate the necessary resources to address IOM-identified priorities; and 4) substantially increase funding for (a) population, behavioral, socio-cultural, communications, and community-based research; (b) recruiting and training efforts to attract more candidates from ethnic minority and medically underserved populations in all areas of cancer research; and (c) cancer data collection, management, and interagency coordination of data collection.

National Institute on Aging. The Committee recommended $794.6 million for NIA, $68.6 million more than the budget request and $106.7 million more than FY 2000. The Committee encouraged NIA to use the forthcoming Institute of Medicine recommendations of future directions for behavioral, cognitive, and neuroscience research as a guide for expanding its portfolio in this area. Observing that the Institute’s research program on Demography and Economics of Aging and the Office of Demography are vital to the mission of the Institute, the Committee encouraged NIA to consider increasing its support for the ten population Demography of Aging Centers which were competitively renewed last year.

National Institute on Alcohol Abuse and Alcoholism. The Committee provided $336.8 million for NIAAA, $28.2 million more than the requested level and $42.6 million above FY 2000. The Committee noted its support of NIAAA’s efforts to understand the relationships between alcohol use and violence. It also encouraged NIAAA to consider supporting more research in this area, particularly to understand the individual characteristics and environmental conditions, situations, and circumstances under which alcohol use and violent behavior are connected.

National Institute on Drug Abuse. The Committee recommended $790 million for NIDA, $64.6 million more than the budget request and $102.6 million above FY 2000. Noting its understanding that behavioral interventions are a critical, and sometimes only, component of drug addiction prevention, the Committee stated that it will continue to support NIDA’s expansion of its behavioral science portfolio. NIDA, according to the Committee, is a model of how to approach behavioral science and public health responsibilities. Likewise, NIDA was commended for its children and adolescent research initiative and urged to continue to support its research portfolio in areas of co-occurring mental disorders, developmental consequences, prenatal exposure, genetic vulnerability, and environmental risk factors.

National Institute of Child Health and Human Development. The Committee provided $986.1 million for NICHD, $81.3 million more than the budget request and $126.8 million above FY 2000. NICHD was praised for its initiatives to increase the understanding of the behavioral and cognitive aspects of child development.

The Committee commended NICHD for its aggressive support of research on the causes of demographic trends and their impact on our society. The Committee stressed that NICHD should place a high priority on providing objective information on such topics as teen childbearing, declining marriage rates, fatherhood, health disparities, racial and ethnic...
diversity, and migration within and across our borders. The Institute was further commended for its collaborative projects with other Federal agencies – the Immigration and Naturalization Service, the National Center for Health Statistics, and the Department of Education, among others – which have created innovative data sets.

Expressing its increasing concern regarding youth and health behaviors and their impact on society, the Committee noted that issues related to school violence, school failure, drug and tobacco use, and other behavioral issues have become public health priorities. The Committee lauded NICHD for its impending collaborations with the CDC, the Substance Abuse and Mental Health Services Administration, and the Health Resources and Services Administration to develop a collaborative program to examine these issues. The Committee requested that the agencies involved focus a portion of their efforts which utilize molecular neuroscience, brain mapping, and behavioral analysis on discovering approaches to intervene and prevent complex behavior problems in children and youth.

**National Institute of Mental Health.** The Committee provided $1.118 billion to NIMH, $86.6 million more than the budget request and $143.3 million above FY 2000. The Committee noted NIMH’s efforts to address major issues of concern through a balanced approach that includes basic neuroscience, behavioral research, health services research, and clinical research.

The Committee stated its support of NIMH’s efforts to encourage researchers to collaborate with basic social and behavioral scientists, noting that this collaboration will increase our understanding of how characteristics of individuals, families, and social and cultural environments affect decisions about using services and adherence to treatment, as well as the efficacy of treatment and services.

The Committee commended NIMH for developing research knowledge essential for understanding and preventing HIV transmission, particularly among people at high risk for infection (e.g., the mentally ill, minority women, youth, and rural populations) where the epidemic is spreading most rapidly.

Noting that the suicide rate has diminished only slightly despite the availability of highly effective treatments for mental disorders, NIMH was encouraged:
* to support research to address this issue as well as whether those who need treatment are not receiving effective treatments, and if current treatments are effective in reducing suicide; and
* to consider supporting additional research on protective factors to better understand phenomena such as why African American women have the lowest suicide rates but have mental disorders at rates comparable to those of white women.

Observing that mental disorders in children must be considered within the context of the family and peers, school, home, and community, the Committee supported NIMH’s efforts to increase research on children’s mental disorders and to increase the number of trained scientists available to do this crucial research. The Committee encouraged the Institute to continue to support research on multi-year, multi-component interventions at the family, school, and community levels. The Committee also urged NIMH to develop further research on early interventions in children.

The Committee commended NIMH for its new initiative in translational research to close the gap between basic and clinical research in behavioral science. It was also encouraged to consider centers to support collaboration between behavioral and clinical investigators, and to train new investigators.

**John E. Fogarty International Center.** The Committee recommended $61.3 million for FIC, $13.2 million more than the administration’s request and $17.9 million above FY 2000. The Committee noted its appreciation of the steps FIC has taken to address the relationship between health and demographic status and economic development, and to forge linkages with other organizations such as the World Bank. The Committee encouraged FIC to consider making additional investments in this program, in as much as the results could impact on many sources of disparities in health globally.

The Committee commended FIC for addressing the global burden of noncommunicable diseases, in particular smoking prevention and cessation and the burden of mental illness. Additionally, in the area of genomics/genetics, the Committee encouraged the support of transcultural studies on the ethical, legal, and social implications of genome research and the effect of the diet and environment on gene expression.
National Cancer Institute. The Committee recommended $3.804 billion for NCI, $299 million more than the request, and an increase of $492.3 million above FY 2000. The Committee commended NCI for expanding its infrastructure to fund behavioral and population research in cancer prevention, treatment, and control. It also encouraged NCI to expand its investigation of the effective provision of mental health services to improve the course of cancer treatment and to aid in the adjustment to cancer survivorship. The Committee noted its interest in expanding health promotion research focused on children and youth, and interdisciplinary research on tobacco addiction and cessation. NCI was also urged to expand its research on adherence to treatment regimens and to health-promoting behaviors such as physical activity and healthy diet.

National Institute of Diabetes and Digestive and Kidney Diseases. The Committee provided $1.318 billion in funding for NIDDK, $108.9 million more than the budget request and $176.7 million above FY 2000. The Committee noted its interest in learning more about NIDDK’s plans for setting a behavioral and social sciences research agenda for diabetes. NIDDK was encouraged to continue to partner with the Office of Behavioral and Social Sciences Research and other Institutes to support basic and applied research on the prevention and treatment of diabetes and obesity. The Committee further encouraged NIDDK to explore partnerships with other Institutes on health services delivery research that can improve communication among health providers, and between health providers and their patients, to enhance treatment for diabetes.

National Heart, Lung, and Blood Institute. The Committee recommended $2.328 billion for NHLBI, $191.3 million more than the budget request, and $301.6 million above FY 2000. Noting that an estimated 106 million Americans age 20 and older are overweight or obese, a condition that increases the risks of heart attacks, stroke, high blood pressure, and diabetes, the Committee urged NHLBI to launch studies to improve understanding of weight loss maintenance and to examine behaviors that influence obesity, weight loss, and weight loss maintenance. The Committee also urged NHLBI to expand its research on innovative theories about behavioral, cultural, social, psychological, and environmental methods to increase adherence to lifestyle and medical regimen.

National Institute of Dental and Craniofacial Research. The Committee recommended $309.9 million for NIDCR, $25.7 million more than the budget request and $40.7 million above FY 2000. NIDCR was commended for its multi-disciplinary approach to oral health promotion, particularly its comprehensive Dental Health Centers. The Institute was encouraged to expand its behavioral research on reducing health disparities among minority populations. In particular, the Committee encouraged NIDCR to expand its investigation of effective dental care and oral cancer prevention programs in minority populations.

National Institute of Nursing Research. The Committee recommended an appropriation of $106.8 million for NINR, $14.3 million more than the budget request and $17.3 million above FY 2000. The Committee encouraged NINR to take advantage of significant new research opportunities in the following areas: enhancing adherence to diabetes management behaviors; biobehavioral research for effective sleep in health and illness; prevention of low birth weight in minorities; and expanded opportunities for pre- and post-doctoral training in nursing research at schools of nursing.

National Institute of Arthritis and Musculoskeletal and Skin Diseases. For NIAMS, the Committee recommended $401.2 million, $32.4 million more than the budget request and $51.7 million above the FY 2000 funding level. Observing that the portion of the NIAMS research portfolio devoted to behavioral and social sciences research is significantly lower than the NIH average, the Committee encouraged NIAMS to foster promising behavioral and social science research.

CDC URGED TO “PROVIDE LEADERSHIP” IN PROMOTING HEALTHY LIFESTYLES

The Senate Appropriations Committee provided the Centers for Disease Control and Prevention (CDC) a $167.5 million increase over its Fiscal Year (FY) 2000 level to bring its funding to $3.204 billion. This amount, however, is $34.9 million below the administration’s budget request. The Committee noted that one of the agency’s priorities is to “provide leadership in the implementation of nationwide prevention strategies to encourage responsible behavior and adoption of lifestyles that are conducive to good health.”
The Committee continued its support of Tobacco Prevention Research Network to increase the knowledge base on the most effective strategies for preventing and reducing youth tobacco use, as well on the social, physiological, and cultural reasons for tobacco use among children.

The Committee noted that in many instances, premature death, avoidable illness, and disability are caused by personal behavior, exposure to toxic substances, and/or natural disasters. Prevention of the concurrence and progression of chronic diseases, noted the Committee, is based on reducing or eliminating behavioral risk factors, increasing the prevalence of health promoting practices, detecting disease early to avoid complications, assessing human risks from environmental exposures, and reducing or eliminating exposures to environmental hazards. Regarding injury control prevention centers, the Committee noted the continued need for them and encouraged the CDC to increase funding for these centers.

The Committee included $10 million to continue the ten national centers of excellence at academic health centers that will serve as national models for the prevention of youth violence. The centers, according to the Committee, should: (1) develop and implement a multidisciplinary research agenda on the risk and protective factors of youth violence, on the interaction of environmental and individual risk factors, and on preventive and therapeutic interventions; (2) develop and evaluate preventive interventions for youth violence; (3) develop a community response plan for youth violence, bring together diverse perspectives; and (4) develop a curriculum for the training of health care professionals on violent behavior identification, assessment, and intervention with high risk youth, and integrate this curriculum into medical, nursing, and other health professional training programs.

The Committee noted its expectation that the CDC take the lead in a collaborative effort between the agency and the Department of Justice in researching the behavioral and psychosocial factors relating to violence against women.

Noting that the National Occupational Research Agenda (NORA) is the largest stakeholder-based research agenda in the United States, the Committee urged the CDC to provide the National Institute for Occupational Safety and Health (NIOSH) the necessary resources to sustain the momentum of NORA and continue to expand the overall scientific effort to address occupational safety and health research, collaborate with NIH and other agencies, target important new initiatives to prevent and reduce work-related hazards, and conduct evaluations of the impact of prevention strategies.

The Committee provided the administration’s request for the national health and nutrition examination survey (NHANES), the only national source of objectively measured health status data, and essential to interpreting information from other survey components.

For health disparities demonstration projects to address racial health disparities, the Committee included $30 million. The funds will support research demonstration projects which address the six identified areas of health disparities: infant mortality, cancer screening and management, cardiovascular disease, diabetes, HIV/AIDS, and immunizations.

SENATE PROVIDES FUNDS FOR AHRQ; URGES AGENCY TO FOCUS ON REDUCING MEDICAL ERRORS

The Senate Appropriations Committee provided $269.9 million for the Agency for Healthcare Research and Quality (AHRQ). The funds are provided through transfers available under section 41 of the Public Health Service Act.

The Committee noted that it was troubled by the statistics associated with medical errors and directed AHRQ to devote $50 million to determine ways to reduce medical errors. The funds are to be used to develop guidelines on the collection of uniform data related to patient safety, to establish a competitive demonstration program for health care facilities and organizations to test best practices for reducing errors,
and to determine ways to improve provider training in order to reduce errors.

The Committee encouraged AHRQ to continue its evaluation research on ways to improve provider training in the reduction of medical errors, including the examination of curriculum development, technology training, and continuing medical education.

COSSA BRIEFING EXAMINES LANGUAGE AND ITS IMPACT ON LEARNING

The Consortium of Social Science Associations, along with the Center for Applied Linguistics and the Linguistic Society of America, held its inaugural event in the 2000 congressional briefing series on May 8. A panel of linguists discussed the importance of language to a person’s educational success and future economic well-being.

The overriding theme of the briefing was the need for an educational system that not only provides the proper resources — teachers and classroom materials — to promote the mastering of language skills but also enthusiastically supports language learning, especially for those children from diverse linguistic backgrounds. Another important theme was the need to improve the reading skills of students attending inner-city schools.

After a brief introduction by COSSA Executive Director Howard Silver, Donna Christian, President of the Center for Applied Linguistics and moderator of the event, opened the briefing by noting that language is the hidden agenda of schooling. This is a tragedy and we must work to take language learning out of the shadows, said Christian.

What Every Educator Needs to Know

Lily Wong Fillmore, Professor of Education at the University of California, Berkeley, noted that there is currently a widespread ignorance in the Nation’s education system of language and its impact on learning. Fillmore said that there is virtually no attention paid in schools of education to the importance of language on a child’s educational success.

The Nation’s schools, she stated, do a good job educating children who come from mainstream backgrounds. On the other hand, they do a poor job educating children “who come from low income, ethnic minority and immigrant families, especially if they speak languages or varieties of English other than the standard one spoken by the mainstream.”

Further, Fillmore exclaimed that “we do an especially poor job with some groups — Latinos, African-Americans, and Native Americans.”

Given the problems our schools have had in the teaching of English language and literacy, a great many children are in special education although their learning problems stem from inadequate instruction rather than from a real learning disability. This leads Fillmore to observe that teachers are not being prepared to deal with linguistic diversity in the classroom. Students, therefore, are suffering from teachers’ inability to discern language differences from language problems.

Teachers who don’t have proper linguistic knowledge often have misconceptions of children who do not speak standard English: “they are unprepared for school; their parents have neglected them; or there is something wrong with them” (that they are learning disabled). She concluded by asking: What do teachers need to know about language to teach in a diverse society? A lot more than they presently do, she answered.

Bilingualism: A Desirable Outcome

Maria Estela Brisk, Professor of Education at the Lynch School of Education at Boston College, discussed “Bilingualism: A Desirable Educational Outcome.” She argued that bilingualism is a desirable outcome for those who speak English as a first language, as well as for those who speak other languages. It is a trait, she said, that offers many advantages: academically and culturally.

Referencing several different research studies, Brisk noted that high levels of bilingualism are correlated with higher achievement in a variety of areas: educational expectations, the ability to read and do math, the ability to formulate scientific hypotheses, and the ability to think about language and analyze linguistic input.

Bilingualism, according to Brisk, is also a way for those from separate cultures to successfully integrate into another country, including those who choose to live in the United States. Becoming bilingual, however, is a difficult process, she said.
Students, therefore, require a lot of support from their communities, their families, and their schools.

Brisk explained that a student’s performance in learning new languages depends on four factors: 1) situational factors (linguistic, cultural, economic, political, and social characteristics), 2) school factors (climate, staff, peers, curriculum, and learning materials), 3) personal characteristics, and 4) the family. Like Fillmore, Brisk observed that more needs to be done to develop values and the proper environment within schools and communities that promote bilingualism.

Raising Inner-City Reading Levels

William Labov, Professor of Linguistics and Psychology and Director of the Linguistics Laboratory at the University of Pennsylvania, discussed raising reading levels in inner-city schools. He exclaimed that the failure of inner-city schools to teach reading effectively is among the most serious social problems facing the country.

The principal investigator of the linguistic component of the African American Language and Culture Project, Labov noted that a majority of students in many inner-city schools fail to achieve reading skills that are strong enough to allow them to use reading to learn math, science, or any other subject. This situation, he said, is found in most large cities and largely affects those living in poverty and those in minority groups. This “minority differential in reading achievement,” he said, “is a persistent problem that has not changed substantially in four years.” Low reading skills make it difficult for “children to take advantage of the educational system to improve their life chances.”

Labov explained that this differential reading achievement is not a psychological problem but one of the English language. He pointed to research that indicates that learning to read in English is more difficult than learning to read in other languages. One example of this difficulty is the fact that the alphabet was created for languages with five vowel sounds, but English has 16 vowel sounds, he said. In addition, the English language has borrowed vocabulary patterns from several different languages which has complicated the “sound-to-spelling rules” — crucial to learning to read.

In his examination of the minority differential reading achievement, Labov noted that this disparity is “accompanied by the home language of children that may affect reading.” For example, he pointed to the “large systematic and regular differences between African American English and other dialects.” The home language of African Americans and Latino children is often different from the standard language taught in the classroom. He said that researchers are unsure, however, if these differences impair a child’s ability to master phonemic awareness — knowing how words and syllables are built out of consonants and vowels.

Labov also pointed to a social dimension as part of the explanation for reading difficulties. He said that by the fourth grade children begin to read for content and those who “cannot read begin to have a sense of failure.” It is at this grade that pre-adolescent peer groups are also first fully formed. These groups align themselves for or against the goals of the adult community and the school system. Those who see themselves as failing at reading may “reject reading in school programs as a whole.”

For children to become successful readers of English, Labov noted that they should be taught both phonics and whole language approaches. The National Research Council report on reading, of which Labov was a committee member, declared that these two approaches must be combined for a successful approach to teaching reading.

John Baugh, Professor of Education and Linguistics at Stanford University, served as the closing speaker. During his brief remarks, Baugh suggested the irony of having a briefing on linguistic diversity here, “where Members of Congress bring with them the standard dialects from their home regions and treat each other with tremendous decorum and respect.” He said that he would like to “see that model extended to the educational arena.”

Linguistic abilities have direct economic consequences. This, he said, is particularly important with the advent of the global economy. In this global environment, people with diverse linguistic abilities have a resource and are greatly advantaged by their language abilities. Children coming to this country from abroad have historically been told to abandon their home languages to talk like “Tom Brokaw or Jane Pauley.” Baugh called this a mistake and stressed that linguistic diversity needs to be accepted.

A transcript of the briefing will be available in four to six weeks.
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