BUSH PRESENTS BUDGET OUTLINE; DETAILS IN APRIL

On February 28, President George W. Bush released A Blueprint for New Beginnings: A Responsible Budget for America’s Priorities. This overview of the Fiscal Year (FY) 2002 budget offers, according to the President, “a new vision for governing the Nation for a new generation.” Although this version contains some spending plans for agencies and programs, the fully detailed budget is not expected until early April. Following release of the full budget, COSSA will prepare the annual analysis of the President’s budget that will appear in a special expanded edition of Update.

With the budget surplus projected at $5.6 trillion over the next ten years, the cornerstone of Blueprint is the President’s plan to reduce taxes by $1.6 trillion during that period. On March 8, the House passed the first part of that plan, reducing marginal rates. The tax cut faces a more difficult trial in the evenly divided Senate. President Bush’s budget outline also calls for major reform of Social Security and Medicare and a thorough review of defense strategy.

The President calls for a slowdown in spending increases “from the recent trend of more than six percent [growth] to four percent.” Senate Budget Committee Chairman Pete Domenici (R-NM) has already called limiting discretionary spending growth in FY 2002 to four percent unrealistic. He believes that an increase of 4.5 to 5 percent will produce a budget that can pay for America’s needs. Bush also predicates his spending decisions on his success at taming Congress’ penchant for providing funds for special projects within their districts, known as “earmarking” or “pork-barrel politics.” Blueprint notes that there were “an unprecedented 6,000 plus earmarks” in FY 2001 appropriations bills. Whether Bush can succeed in this attempt to trump the congressional spending prerogative could be key to his mission to control spending.

The President’s major domestic priority is “to strengthen and reform education.” He intends to increase spending on elementary and secondary programs by $1.6 billion in 2002. This includes a $700 million boost for programs outside the Department of Education, including $200 million for a Math and Science Partnership initiative in the National Science Foundation’s (NSF) budget.

Double NIH; Limit NSF

The National Institutes of Health (NIH) remains a favored agency. The proposed budget includes an increase of $2.8 billion for NIH, bringing its budget to $23.1 billion for FY 2002. According to the President, this will continue the doubling track, now in its fourth year. However, advocates for NIH, including Senate Labor, HHS, Education Appropriations Subcommittee Chairman Arlen Specter (R-PA) and Ranking Democrat Tom Harkin (D-IA) believe Bush is about $600 million short, and are calling for a $3.4 billion boost.

In contrast to the boon for NIH, the budget proposes only a $56 million or 1.3 percent increase for NSF. Its budget includes the aforementioned Math and Science Partnership initiative and an increase in stipends for the graduate fellowship programs. Given the small overall increase, however, funding for Research and Related Activities, the largest part of NSF’s activities, should remain stagnant.

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Since the release of Blueprint, a number of people have decried this small proposed increase for NSF. Senators Kit Bond (R-MO) and Barbara Mikulski (D-MD) remain committed to doubling NSF's budget over the next five years. Sen. Domenici has mentioned the disparity in the increases for NIH and NSF and suggested he will try to help NSF in the Senate Budget Committee (see following story). On the House side, VA, HUD, Independent Agencies Appropriations Chairman James Walsh (R-NY) and House Science Committee Chairman Sherwood Boehlert (R-NY) seem poised to join in the call for doubling NSF's budget. There are also numerous House Democrats who have called for larger increases for NSF. In addition, Allen Bromley, Science Adviser to President George H.W. Bush, wrote an op-ed piece in the New York Times on March 9 suggesting bluntly "No science, no surplus," and called for greater increases for NSF and other non-NIH basic research agencies.

Another interesting characteristic of Blueprint is its many references to research and the need for programs to be "evidence based." The section outlining the President's proposals for faith-based initiatives notes how "social scientists have documented the power of religion to protect families and change lives. Studies indicate that religious involvement reduces teen pregnancy, suicide, drug addiction, abuse, alcoholism, and crime. Similarly, grassroots inner-city outreach ministries have been credited by numerous leading social scientists with playing a major role in helping at-risk youth to avoid violence, achieve literacy and find jobs."

**Increases for Economic Statistics**

Reviving an initiative pushed by Michael Boskin, Chairman of the Council of Economic Advisers in the previous Bush administration, the new President Bush is proposing increased funding of $9 million for the Department of Commerce's Bureau of Economics Analysis. Blueprint notes: "With the rapid growth of electronic commerce and expanding use of stock options and other changes associated with the new economy and service sectors, investment in Commerce's statistical areas is essential to providing sound data for policy makers." For the Environmental Protection Agency there is a proposal to reform the agency's approach to data collection to "facilitate results-based management and multimedia approaches, enable data-sharing across programs, improve access to information, and integrate geographic information." Finally, the administration proposes to make permanent the Research and Development Tax Credit, a priority of many high technology companies.

The President also supports a number of provisions for budget reform. These include: instituting biennial budget and appropriations cycles, imposing automatic Continuing Resolutions if appropriations are not passed by the start of a fiscal year, requiring the President to sign the annual budget resolution giving it the force of law, and restoring the President's line-item veto authority.

In this opening shot across the bow, the administration has focused its spending proposals in areas that it considers priorities. There are many references to general spending reductions to discontinue one-time projects and to eliminate funding for short-term activities whose purposes have been met and for programs that have accomplished their initial objectives. This is only a beginning; the specifics are not spelled out yet. Furthermore, the political tug-of-war between tax cuts and spending needs will frame the politics of appropriations for the coming year. Stay tuned!
According to newly-appointed Health and Human Services (HHS) Secretary Tommy Thompson, a “vast scope of challenges” lies ahead for the Department. Thompson, in his first official appearance before a Congressional Committee, presented the framework of the President’s FY 2002 budget for HHS before the Senate Budget Committee on March 6.

“We must no longer be content to do things a certain way because ‘that’s how we’ve always done it;’ but must instead be willing to reform our business practices and seek innovative ways to manage our programs,” Thompson asserted. Advising the Committee of the need to reexamine the way things are done at the national level, Thompson made particular reference to the Health Care Finance Administration (HCFA), which is responsible for Medicaid and Medicare. Over the years, Thompson remarked, HCFA has not received the resources needed to modernize its operation. One possible reform may be removing those programs from HCFA’s purview, he observed.

NIH: A Top Priority

Despite the change in administrations, the National Institutes of Health continues to be a priority. Thompson stated that in addition to reforming the way HHS’ operations are managed, the Department’s budget seeks to enhance the groundbreaking research supported by NIH. “A top priority for the HHS is ensuring that NIH continues to have the resources necessary to help turn … promises into a reality,” stated Thompson.

While the President’s budget blueprint does not directly address the budget of the Centers for Disease Control and Prevention, Thompson noted that America has not done enough to prevent diseases. The remark was made in response to a question from Senator Gordon Smith (R-OR) regarding expanding Medicaid to include HIV-positive individuals. Citing diabetes and asthma as examples of two diseases that can be prevented and reduced, Thompson emphasized the need to examine prevention.

Budget Committee Chairman Pete Domenici (R-NM) remarked that while he is proud of the proposed increase for NIH’s budget, the Administration will come to the realization that it cannot increase funding for only one piece of science. The National Science Foundation (NSF) and the Department of Energy (DOE), the Chairman contended, also deserve adequate increases in their budget. The Administration cannot cut other science programs and think that NIH will solve all of our problems, he added, noting that he will continue to speak up on the need for adequate funding increases for NSF and DOE.

Focus On HHS Research Agenda

As indicated by Thompson, the President’s budget blueprint notes that over the years HHS has “evolved into a sprawling, loosely organized bureaucracy as program after program has been added to the inventory of HHS activities.” The framework cites overlapping activities, which duplicate and even “work at cross-purposes.” Several areas were cited as targets of examination, including the HHS-wide research agenda.

The budget blueprint notes that besides NIH, eight other HHS agencies supported over $1.2 billion in public health, health services, and policy research in 2001. There is an opportunity now to examine the HHS health research portfolio. According to the blueprint, “HHS will prioritize its research agenda to focus on activities where the Federal mission and interests are clear, and focus less on research that is more traditionally and appropriately supported by universities and other research institutions.”

ADJUST CENSUS 2000? A RESOUNDING ‘NO’

Secretary of Commerce Donald Evans announced his decision on March 6 to release only unadjusted data to the states for redistricting. His decision followed the Census Bureau’s March 1 recommendation not to release adjusted figures. (See Update, Feb. 26, 2001 and January 29, 2001 for background information.) The unadjusted data will be sent to the states to be used in drawing the boundaries of Congressional districts for the next decade.

Conventional wisdom predicted the Census Bureau would decide in favor of adjustment, in order
to improve the accuracy of the Census or to steal House seats from the Republicans, depending on whom you talked to. However, the Bureau concluded it didn't yet have the information it needs to make the decision, and so recommended that only unadjusted data be released to the states for redistricting.

The Bureau explained that they could not, by April 1, conclude adjusted data are more accurate for use in redistricting based on the data and other information currently available. They determined this after detecting inconsistency in population growth over the decade as estimated by the Accuracy and Coverage Evaluation (A.C.E.) and demographic analysis. Resolving these differences, they explained, would be impossible in the time available.

The report of the Executive Steering Committee for A.C.E. Policy (ESCAP), sent to Secretary Evans, found that “under reasonable scenarios . . . adjustment would result in more accurate data at the state, congressional district, and county levels.” They qualified, however, that further research could reverse this finding, and so recommended against adjustment.

Groups concerned about Census issues are now looking to future uses of the data, specifically for determining how to distribute billions of dollars in federal funds over the next ten years. Addressing this issue, Evans said that this is a decision for the future and will be considered in the months ahead.

The Census Bureau will continue to release the results of the 2000 Census over the coming months and years, at various scales and in different media formats. The release schedule is available on the Census Bureau's website: www.census.gov.

ELECTION REFORM REMAINS HOT TOPIC

Election reform remained a hot issue in Washington these last two weeks as several events were held on the topic on Capitol Hill and around the city.

The Congressional Black Caucus convened a hearing on February 27 to discuss the problems encountered in Florida last November and possible improvements in the system for future elections.

Testimony from some officials on the panels focused on problems faced by African-Americans as they attempted to vote in Florida on Election Day, 2000, ranging from difficulty using punch-card ballots to assertions that several individuals had been purged from voter rolls due to phantom felony convictions. Other witnesses advocated varied reforms, including adopting a uniform national ballot, funding improved voting technology, voter education, poll worker training, and making Election Day a national holiday.

On March 1, the National Commission on Federal Election Reform was introduced at the National Press Club following its first meeting. The Commission is a bipartisan group of prominent public leaders chaired by former Senator Howard Baker (R-TN) and former Carter and Clinton White House Counsel Lloyd Cutler. Former Presidents Gerald Ford and Jimmy Carter have agreed to serve as Honorary Co-Chairs. The venture is privately funded and was organized by the University of Virginia’s Miller Center of Public Affairs and the Century Foundation. The Commission will hold several public meetings around the country this year and will be supported by three academic task forces that will bring together top historians, political scientists, and legal experts. The Commission will issue a report of their findings in September of this year.

Also, the results of a National Science Foundation-funded workshop on internet voting were released on March 6 during a press conference at the Internet Policy Institute (IPI). The study was conducted by the IPI, a non-partisan research institute that studies policy issues affecting the internet, and the University of Maryland, whose President, C.D. Mote, Jr., chaired the seminar.

The participating experts, including a number of social scientists, considered the feasibility of implementing three distinct types of internet voting. The first, poll site systems, could be implemented soon and were generally recognized by the participants as more efficient than traditional systems. Public kiosk voting terminals, the second
option, present voter authentication and on-site coercion issues, but the panel concluded that "most of the challenges could, at least in principle, be resolved with extensions of current technology." The third model, remote internet voting, presents a variety of problems according to the participants, and "should not be fielded for use in public elections until substantial technical and social science issues are addressed." The social science issues raised by the panel include a number of demographic questions, related primarily to economic, geographic, and education-level disparities.

Reminder: COSSA will host a seminar on election reform on March 16 from 8:30 – 10:30 a.m. in Room B338 of the Rayburn House Office Building in Washington. For more information, contact socscience@aol.com.

DOCTORS STRESS IMPORTANCE OF SOCIAL AND BEHAVIORAL RESEARCH

"Behavioral and social science research and interventions can improve the lives of a wide swath of our population, including lower-income Americans who are less likely to benefit from cutting-edge medical care," observed the President of The Robert Wood Johnson Foundation, Steven A. Schroeder, M.D., at a recent gathering of public health stakeholders.

Research!America (R!A), a national, membership-based advocacy group, designed the conference to facilitate discussion of the results of R!A's one-year feasibility study on building stronger national support for health promotion and disease prevention research. Specific objectives include collecting data on attitudes toward, support for, and questions about prevention research (social and behavioral); assessing the feasibility of developing compelling messages about the importance of investing in more prevention research; and producing unified objectives, messages, and strategies among all stakeholders for making prevention and behavioral research a higher priority.

Schroeder, the event’s keynote speaker, remarked, "while it is not difficult to make the case for tackling the social and behavioral determinants of health, it has been difficult to translate the findings into a sustained, aggressive, well-supported research agenda." He observed that the AIDS epidemic has encouraged even "the most hard-core bench scientists" to accept the need to understand the behavioral component of disease prevention. Schroeder cited other examples that underscore the need for social and behavioral science research, including nicotine addiction and obesity among Americans (the last 10 years saw a 66 percent increase in obesity).

Schroeder noted that key constituencies are beginning to respect the importance of the social and behavioral sciences. He cited a lecture he presented before the Council of Medical School Deans emphasizing the importance of social and behavioral research. Using "instant secret electronic polling," he asked the medical school deans how appropriate the size of the investment in behavior research is at their medical center. Fully 88 percent, said Schroeder, answered that it is underfunded. The vast majority (92 percent) expected that in 10 years there would be more social and behavioral science research supported. Further, 76 percent of the deans said that more than 10 percent of the National Institutes of Health’s budget should go toward behavioral research, Schroeder revealed.

Two streams of effort are needed to "defuse the impact of ... preventable causes of death and disability," he maintained. First, we must continue to build the science base of prevention. Second, we must turn research findings into effective public health practice. But the translation challenge goes beyond the sensitive area of individuals making healthy lifestyle choices, he said. Change is needed at the institutional and policy level as well," Schroeder explained.

Concluding his remarks, Schroeder emphasized that the "bottom line is that our medical research is only as good as its ability to penetrate medical care, personal health practices, and public policy to improve people's health. As support for research increases, so must support for initiatives that help bridge the gap between research findings and practice. With a public that tends to seek health from personal medical care, dazzling discoveries, and quick fixes, we must continue to push hard at the social and behavioral barriers to health and well-being."

Others expressing similar points of view included: Samuel C. Silverstein, M.D., College of Physicians and Surgeons of Columbia University,
William Roper, M.D., Dean of the School of Public Health at the University of North Carolina at Chapel Hill and former director of the Centers for Disease Control and Prevention, and Noreen Clark, M.D., Dean of the University of Michigan’s School of Public Health and Marshall H. Becker Professor of Public Health.

Research!America will produce a transcript of the conference. For more information see R!A’s website: http://research!america.org.

CENTER ON HEALTH DISPARITIES LAUNCHED

On February 9, 2001, the Advisory Committee on Research on Minority Health met to discuss the newly-created National Institutes of Health’s (NIH) National Center on Minority Health and Health Disparities (NCMHD). NIH’s Office of Behavioral and Social Sciences Research (OBSSR) Director Raynard Kington presented remarks on the importance of social and behavioral science for the new Center.

NCMHD’s Director John Ruffin (appointee of former Secretary of Health and Human Services Donna Shalala and former director of ORMH) discussed how the Center plans to carry out its mandate. The statute requires NCMHD to advise the NIH director and Institutes and Centers (IC) directors on the development of NIH-wide policy issues related to minority health disparities research, research on other health disparities, and related research training.

He indicated that in December an implementation plan of the Center’s budget was approved by Shalala. A copy of the plan was printed in the Federal Register (v.66, n. 14; Monday, January 22, 2001).

According to the plan, NCMHD will have both a national advisory committee and a trans-NIH Coordinating Committee on Health Disparities (made up of representatives from the other 26 NIH Institutes and Centers). The Center itself has been organized into three divisions: 1) Division of Research; 2) Division of Scientific Planning and Policy Analysis; and 3) Division of Community-Based Research and Outreach.

Ruffin further indicated “that better than fifty percent” of the NCMHD’s portfolio will be used to partner with the ICs. He reported that specific challenges for the new Center include constructing a “tracking system” for all of the resources allocated by NIH to support minority health and health disparities research. The Center also has the responsibility, said Ruffin, to create health messages that are culturally appropriate.

Division of Research

James Hildreth, M.D., Ph.D., former Associate Dean for Graduate Student Affairs at Johns Hopkins University (JHU) School of Medicine, will direct NCMHD’s Division of Research. He will advise Ruffin and help to establish the Center’s research priorities, establishing goals for research and training and creating programs to increase minority participation in research.

Hildreth commented on the recent National Research Council’s report, Addressing the Nation’s Changing Needs for Biomedical and Behavioral Scientists, which said the United States has a national problem of overproduction of biomedical Ph.D. students and fellows. He expressed his hope that NCMHD will fund M.D./Ph.D.s to increase the number of individuals who receive their Ph.D.s in the social sciences and public health disciplines. These disciplines, Hildreth continued, add another perspective to the challenge of understanding and solving health problems. The spread of HIV/AIDS, he noted, demonstrates the need to look at cultural, linguistic, and other behavioral factors in combating disease.

Kirchstein Proud of New Center

Addressing the advisory committee, Principal Deputy Director Ruth Kirchstein noted her pride in the Center’s creation. She also reflected on the initial fear surrounding the creation of the NCMHD. Some had suggested that if NIH gave all the responsibility to such a center, other NIH components would not do their part in supporting research to reduce and ultimately eliminate racial and ethnic health disparities. That fear is no longer there, she said.

Kirchstein concluded her remarks by acknowledging that with the exception of a few institutions, the NIH does not do a lot of social and
behavioral research. She nevertheless noted her delight with the OBSSR Director’s participation in NCMHD’s council.

**COSSA Comments on Trans-NIH Health Disparities Plan**

One of NCMHD’s mandates is the development and implementation of a trans-NIH health disparities strategic plan. COSSA and several of its member associations provided comments. COSSA commended Ruffin and his colleagues on the drafting of the NIH-wide plan and emphasized that the social and behavioral sciences have much to contribute toward examining the factors and conditions that give rise to health disparities.

COSSA urged NCMHD to support basic social and behavioral science research on race and ethnicity. COSSA cited the recently released National Research Council report, *New Horizons in Health: An Integrative Approach,* which emphasized, “Disparities in health following from ethnic/racial status and related experiences of discrimination, racism, and stigmatization must be key priorities under the broader rubric of social inequalities. There is also a pressing need to study cumulative experience along pathways to adverse health outcomes via long-term tracking of chronic features of economic, educational, and racial/ethnic disadvantage.”

COSSA also expressed its concern with the tremendous need to recruit and train minority researchers, as well as researchers who plan to focus on health disparities. Social and behavioral scientists have benefited less from NIH’s training programs than biomedical scientists in recent years. Institutional grants are critical; too few are available to social and behavioral science research programs. Additionally, COSSA expressed its support for social and behavioral scientists’ access to clinical training programs at NIH.

A copy of COSSA’s comments can be found on our website: www.COssa.org.

**SOURCES OF RESEARCH SUPPORT**

COSSA provides this information as a service and encourages readers to contact the sponsoring agency for further information. Additional application guidelines and restrictions may apply.

**CSISS Summer Workshop and Participant Scholarships**

The Center for Spatially Integrated Social Science (CSISS) invites registration and scholarship applications for their summer, 2001 workshops. The series includes: Accessibility in Space and Time: A GIS [Geographic Information System] Approach; Map Making and Visualization of Spatial Data in the Social Sciences; and Introduction to Spatial Pattern Analysis in a GIS Environment.

There are no registration fees for the workshops. Successful applicants are guaranteed a spot in the workshop and a scholarship of up to $500 for expenses. Application deadline is May 1, 2001. Full details are available at http://CSISS.org/events/workshops.

Clarification: An article in our February 26 issue, *Members of Congress Tackle Exit Polling,* featured two potentially misleading statements. To clarify: 1) Dr. Paul Biemer of the Research Triangle Institute did not directly advocate the discontinuation of exit polling in his February 14 testimony before the House Energy and Commerce Committee. 2) The bill mentioned in the last paragraph was introduced by Rep. Ed Markey (D-MA) and co-sponsored by numerous members, including Rep. Chris Cox (R-CA) and Rep. Billy Tauzin (R-LA), the Committee’s Chairman.

Visit COSSA on the web: www.cossa.org

Mark your calendars for COSSA’s Seminar, *Living Longer, Staying Well: Promoting Good Health for Older Americans,* April 27, 8:30-10:30 a.m. in Room B-369 of the Rayburn House Office Building. For more information, email socscience@aol.com.
Consortium of Social Science Associations

1522 K Street, NW, Suite 836, Washington, D.C. 20005