Constrained by limits on domestic discretionary spending and its need to make up shortfalls in funding for veterans' medical care, the House Appropriations Committee could not come close to funding the National Science Foundation (NSF) for FY 2004 at the level promised in the authorization bill passed last year. That legislation, which put NSF on a doubling track similar to the five year doubling of the National Institutes of Health budget, called for a FY 2004 NSF budget of $6.39 billion.

The full Appropriations panel, following the lead of its VA, HUD, Independent Agencies Subcommittee, chaired by Rep. James Walsh (R-NY), provided $5.689 billion, an increase of $329.1 million or 6.2 percent above the FY 2003 appropriation and $158 million above the President’s requested level.

For the Research and Related Activities account, the Committee recommended $4.306 billion, a $249.9 million or 6.2 percent increase over the FY 2003 level of $4.056 billion and a $200 million boost over the President’s request. The Social, Behavioral and Economic Sciences Directorate was allocated $221 million, an approximately $27 million or 13.7 percent boost over FY 2003. This should be enough to fully fund the first full year of the Human and Social Dynamics priority. The Committee also allotted the requested $20 million for the Science of Learning Centers.

(Continued on Next Page)

On July 22, the Senate Health, Education, Labor and Pensions (HELP) Committee held a hearing on the reauthorization of Head Start. Panel Democrats used the session as an opportunity to criticize Bush Administration plans to turn management of Head Start over to interested states through block grants. They also pointed to research as a means of bolstering their arguments.

In his opening remarks, Ranking Member Edward Kennedy (D-MA) set the tone for the hearing by noting, “Three decades of solid research show that Head Start works. Children who participate in the program make gains in vocabulary, become more interested in books,
APPROPRIATIONS, (Continued from Page 1)

The Education and Human Resources Directorate was funded at $904.7 million, a slight $1.5 million increase over FY 2003 and $33.3 million less than the President’s request. The legislators significantly rearranged the priorities within the directorate by reducing the Administration’s flagship program, the Math and Science Partnerships, from the requested $200 million to $140.4 million, still a 10 percent boost over FY 2003. The Committee added funding for EPSCoR (Experimental Program to Stimulate Competitive Research), Informal Science Education, Advanced Technology Education programs, the Louis Stokes Alliance for Minority Participation, and the Historically Black Colleges and Universities Undergraduate Program.

The bill (H.R. 2861), which aside from funding NSF and the Department of Veterans’ Affairs, also funds EPA, HUD, and NASA, passed the full House on July 25 by a vote of 316-109 following a squabble over veterans’ health care funding. The Senate, which had been expected to follow the House and mark up its version of the VA, HUD, Independent Agencies bill this month, might put off action until September.

CJS Bill Passes House Despite Veto Threat

On July 23, the House voted 400-21 to pass the Commerce-Justice-State appropriations bill (H.R. 2799) despite a veto threat from the White House relating to a provision dealing with media ownership rules. The bill maintained the Census and Bureau of Economic Affairs numbers within the Department of Commerce marked up by the subcommittee (see Update, July 14, 2003). Funding levels specified for Department of Justice and State programs of interest to social and behavioral scientists have also become available.

Based on a recommendation of the President’s Management Agenda proposed in the budget, the bill consolidates all Office of Justice Program (OJP) accounts under the heading “Justice Assistance.” Within OJP, the House provided the National Institute of Justice (NIJ) base funding of $59 million, a 1 percent decrease from the FY 2003 appropriation and a $2.7 million increase from the President’s budget.

The Bureau of Justice Statistics (BJS), which collects, analyzes, publishes, and disseminates data on crime and the criminal justice system, was funded at $33.7 million, an increase of $1.6 million or 4.9 percent above the FY 2003 appropriation and $1.3 million below the President’s request.

For the Office of Juvenile Justice and Delinquency Prevention (OJJDP), the Committee recommended $462.3 million, a $188 million or 69 percent increase over the FY 2003 funding level of $273.5 million and a $195.1 million boost above the President’s budget.

Within the Department of State, the House granted $345.3 million to the Bureau of Educational and Cultural Affairs, which houses the Fulbright, Humphrey, and other academic exchange programs that used to be administered by the United States Information Agency. This figure is $101.6 million or 41.7 percent greater than the FY 2003 level due to a transfer proposed in the President’s budget.

The Senate hasn’t yet taken up the CJS bill and doesn’t plan to until after the August recess.

HEAD START, (Continued from Page 1)

and learn to get along better with other children. Children from the same backgrounds who do not participate in Head Start do not make these gains.” Kennedy also expressed his opposition to “any effort to block grant Head Start – not in 50 states, not even in one state.”

Windy Hill, Associate Commissioner for the Head Start Bureau at the Department of Health and Human Services, set out to defend the Bush plan, explaining that the Administration wants to focus on learning and preparing Head Start kids for school by building a strong academic foundation. She emphasized that the plan requires the Secretary of Health and Human Services to approve a state proposal before a grant can occur. The state must commit to maintain services currently available.

G. Reid Lyon, Chief of the Child Development and Behavior Branch at the National Institute of Child Health and Human Development (NICHD), did not comment on the state block grant issue, but he did assert that the focus of Head Start should be comprehensive – not solely on academics. He noted that research has demonstrated the importance of social and emotional development to preschool programs and that “children need these skills in addition to an academic base to be fully ready for school.”

Committee Chairman Judd Gregg (R-NH) stressed a need for consistency throughout the Head Start system and asked Lyon, “What’s an identifiable academic standard that can be applied to Head Start?” Lyon responded that getting students to an average
level for their age in terms of cognitive ability could be considered a success. Kennedy asked Lyon to discuss the indicators available to measure Head Start success. The NICHD official replied that the indicators aren’t adequate, especially for social and emotional development.

Kennedy then returned to his attack on the block grant proposal, remarking that the states haven’t had a great record in their own preschool programs. He asked Hill to explain why we should “roll the dice” and turn Head Start over to the states. Hill asserted that several states have demonstrated that they will take the initiative needed to do the best for the kids. Sen. Chris Dodd (D-CT) was the next to take up the case, pointing out that cuts are ongoing in state preschool programs as a result of budget deficits. Hill told the Senator that only states that can make a full commitment and maintain its services and number of participants will be invited into the program.

Sen. Hillary Rodham Clinton (D-NY) mentioned the State Children’s Health Insurance Program (SCHIP) as a possible example for the Head Start reauthorization. SCHIP requires states to match Federal grants to a certain proportion or they will lose the Federal funding. She also stressed the gains that were made in the Head Start program during the Clinton Administration and expressed her hope that we won’t take any steps backward. Clinton concluded her defense of the current Head Start model by emphasizing that “We should fund what we know works based on research.”

The lively hearing marked the Senate’s first formal foray into this year’s Head Start reauthorization. The House leadership had been planning to vote on a bill along the lines of the Administration’s proposal for several weeks now, but they had to stall repeatedly as the result of disparate objections from Republican conservatives and moderates. Finally, on July 25, the House passed the bill (H.R. 2210) by one vote, 217-216. To appease moderates, the Leadership guaranteed funding to all Head Start centers for the entire five-year reauthorization period and tightened the eligibility for states to participate in the block grant pilot program.

Sen. Dodd had intended to introduce a bill of his own at the hearing, but he changed his plans at the request of Gregg. Dodd may still introduce legislation next week, and he may have an ally in Sen. Lamar Alexander (R-TN). Alexander, a former Secretary of Education, expressed skepticism about the Administration’s proposal during the hearing and promised to work with his colleagues in an effort to find the best way to involve the states in running preschool programs. Gregg’s plans are unclear.

BUSH ANNOUNCES INTENT TO NOMINATE INDIVIDUALS TO TWO KEY HHS POSTS

On July 23, President Bush announced his intention to nominate Cristina Beato and Michael O’Grady to fill top positions at the Department of Health and Human Services (HHS).

Beato would serve as Assistant Secretary for Public Health and Science. She currently occupies the Principal Deputy Assistant Secretary position in the same office at HHS. Surgeon General Richard Carmona has been serving as acting Assistant Secretary. Beato formerly served as Associate Dean for Clinical Affairs at the University of New Mexico (UNM) Health Services Center. She holds a BA and Masters from UNM.

O’Grady will be nominated as Assistant Secretary for Planning and Evaluation (ASPE). He is currently a Senior Health Economist for the Congressional Joint Economic Committee and would replace acting ASPE William F. Raub. O’Grady earned his undergraduate degree at Alfred University and a Ph.D. from the University of Rochester.

Both positions require Senate confirmation.

SACHRP HOLDS INAUGURAL MEETING: WILL EXAMINE CHILDREN, PRISONERS

Holding its inaugural meeting on July 22, the Secretary’s Advisory Committee on Human Research Protections (SACHRP) decided that its first order of business would focus on the Common Rule and how it pertains to research on children and prisoners.

Welcoming the committee members, Acting Director of the Office of Human Research Protections (OHRP) and Acting Executive Secretary of SACHRP Bernard Schwetz explained that the Committee would address many of the issues that were previously being considered by the now defunct National Human Research Protection Advisory Committee (NHRPAC). The goal of SACHRP’s first meeting is to identify priority issues and “back burner” issues that may become priority issues, Schwetz explained.
Responding to OHRP's request that SACHRP consider the creation of a subcommittee to provide expert review of research referred to the Department of Health and Human Services (HHS) under the provisions of 45 CFR (Code of Federal Regulations) 46.407 (research not otherwise approvable which presents an opportunity to understand, prevent, or alleviate a serious problem affecting the health or welfare of children) and the development of specific recommendations on the interpretation of subpart D, the Committee decided to establish three subcommittees: subpart D, subpart C, and accreditation. The subpart D and subpart C subcommittees would have as their first priority the 407 process. For extensive background on this section of regulations, please go to http://ohrp.osophs.dhhs.gov/polasur.htm.

Ernest Prentice, Associate Vice Chancellor for Academic Affairs and Regulatory Compliance and Associate Dean for Research at the Nebraska Medical Center in Omaha and Chair of the Committee, noted that SACHRP has an "ambitious agenda." Prentice publicly acknowledged the work of NHRP AC but noted that it "was unable to finish its activities" and had planned some future reports.

Striking the right balance on subpart D is the key, he emphasized. He also noted that a report from the Institute of Medicine (IOM) on pediatric research is scheduled for completion in March 2004 and that perhaps it would be more expedient to wait until the results of the IOM study are available before SACHRP began its consideration of subpart D.

Subpart C on children, Prentice related, was issued in 1978 and needs to be reexamined. "We are at a time of opportunity, when we have the opportunity to advance the field by providing appropriate guidance and recommendations to the HHS."

Committee member Celia Fisher of Fordham University noted that an examination of the consistency between subparts B, C, and D was needed. "Research is critical," Fisher related. "We want to make sure through consistency we have the handling of good research that benefits the participants," she added.

With regards to accreditation, the Committee discussed whether it had a role, if there is one, of advising OHRP on the accreditation of human research protection programs by non-Federal accrediting bodies. Several of the SACHRP members indicated that they are associated with the Association for the Accreditation of Human Research Protection Programs (AAHRPP) or the National Committee for Quality Assurance (NCQA)/Joint Commission on Accreditation of Healthcare Organizations (JCAHO). (For more information on AAHRPP, see Update, June 4, 2001).

Secretary of Health and Human Services (HHS) Tommy Thompson signed SACHRP's charter in October 2002. (See Update, November 4, 2002). Members were appointed in January of this year. (See Update, January 13, 2003). NHRPAC’s charter expired in June 2002.

In addition, to renaming the Committee, Thompson expanded its charter to include "human embryos" as human subjects. (See Update, November 4, 2002). SACHRP’s charter specifies that the committee will provide advice relating to the responsible conduct of research involving human subjects with particular emphasis on:

- Special populations, such as neonates and children, prisoners, and the decisionally impaired;
- Pregnant women, embryos, and fetuses;
- Individuals and populations in international studies;
- Populations in which there are individually identifiable samples, data, or information;
- Investigator conflicts of interest.

The Charter also stipulates that SACHRP will be responsible for reviewing "selected ongoing work and planned activities" of the Office of Human Research Protections (OHRP) along with other entities within HHS responsible for human subjects protection.

In 1999, then-Secretary Donna Shalala established NHRPAC and appointed Mary Faith Marshall, a Professor of Medicine and Bioethics at the University of Kansas Medical Center, Chair. During its tenure the Committee addressed a variety of issues, including: children, genetics, social and behavioral sciences, decisionally impaired, informed consent, and conflicts of interest. Just prior to its dissolution, the panel established a working group on prisoners and another to examine whether all disciplines should come under the Common Rule.
IOM REPORT IDENTIFIES CRITICAL ISSUES RELATED TO PSYCHOLOGICAL CONSEQUENCES OF TERRORISM

According to the recently released Institute of Medicine (IOM) report, Preparing for the Psychological Consequences of Terrorism: A Public Health Strategy, "the Nation's mental health, public health, medical, and emergency response systems are not able to meet the psychological needs that result from terrorism." There are gaps in the coordination of agencies and services, training and supervision of professionals, public communication and dissemination of information, financing, and knowledge- and evidence-based services, according to the report.

The Committee on Responding to the Psychological Consequences of Terrorism, chaired by Lewis R. Goldfrank of the Bellevue Hospital Center, was charged with highlighting some of the critical issues in responding to the psychological needs that result from terrorism and to provide possible options for intervention. Accordingly, the Committee identified gaps in knowledge necessary to inform policies and procedures for planning, preparedness, and interventions. Gaps in planning, preparedness, and the public health infrastructure were also identified. A variety of approaches to interventions to limit "adverse psychological consequences are provided, as well as recommendations for options on how to optimize the public health response in the long term and short-term psychological consequences of terrorism."

Noting that the body of literature examining the psychological consequences of terrorism is growing, the Committee relates that "much of what is used to determine how individuals and communities may react to terrorism is derived from the broader trauma literature, including that which examines disaster."

Gaps in the Current Infrastructure

Taking a public health approach to the psychological consequences of terrorism that focuses on prevention and health promotion as well as treatment, the Committee observes that the nation's infrastructure should provide ten functions to effectively protect and respond to the public's psychological health as it relates to terrorism:

1. Basic resources.
2. Interventions and programs to promote individual and community resilience.
4. Screening of psychological symptoms at the individual level.
5. Treatment for acute and long-term effects of psychological trauma.
6. Response for longer-term general human service needs that contribute to psychological functioning (e.g., housing, financial assistance when the event creates job loss).
7. Risk communication and dissemination of information to the public, medical, political leaders, and service providers.
8. Training of service providers to respond to a terrorism event and to protect themselves against psychological trauma.
9. Capacity to handle a large increase in demand for services.
10. Ability to locate individuals who have not utilized mental health services but need them, including underserved, marginalized, and unrecognized groups of people (e.g., undocumented immigrants, homebound individuals) and others with unidentified needs.

Research Recommendations

The Committee offered several recommendations under the principle of universal preparedness for all hazards, all segments of the population, and all phases of the event. These recommendations are grouped into five categories: (1) preventive measures, (2) education and training for providers, (3) workplace preparedness, (4) research needs, and (5) ensuring preparedness through a comprehensive public health strategy.

It is underscored that research following terrorism events presents a multitude of practical and ethical challenges. This research, the Committee notes, can be facilitated by improving cooperation and coordination among Federal funding and regulatory agencies as well as by developing the high-quality methodology necessary for the conduct of these investigations.

Accordingly, the Committee recommended that: Federal agencies such as the Centers for Disease Control and Prevention (CDC), the National Institutes of Health, the Substance Abuse and Mental Health Services Administration, and the CDC's National Institute for
Occupational Safety and Health should coordinate research agendas, cooperate in establishing funding mechanisms, and award timely and sufficient funding research on best practices to inform and guide interventions that will address the psychological consequences of terrorism. In addition:

- These Federal research agencies should develop an integrated and coordinated research agenda directly addressing psychological consequences of terrorism across the pre-event, event, and post-event phases to ensure the development of individual, population, community, and clinically-based interventions.

- Research should not only assess psychiatric disease in the affected population but also address restoring family, social, school, occupational, community, and individual functioning and building individual and community resilience.

- Institutional review boards should be encouraged to review research proposals on the psychological consequences of terrorism, cognizant of the short turn-around time required for obtaining early post-disaster data and the unique difficulties and challenges of disaster research.

For more information, see www.nap.edu/catalog/10717.html.

FORMER APSA PRESIDENT WILSON, HISTORIAN BARZUN RECEIVE PRESIDENTIAL MEDAL OF FREEDOM

At a July 23 White House ceremony, President Bush presented historian Jacques Barzun and political scientist James Q. Wilson with the Presidential Medal of Freedom, the nation's highest civilian award presented to those the president "deems to have made especially meritorious contributions to the security or national interests of the United States, to world peace, or to cultural or other significant public or private endeavors."

Barzun was born in France and became a U.S. citizen in 1933. He served as a long-time member of the Columbia University faculty and his latest book, about the last 500 years of Western culture published in 2000, was a best seller. Wilson, a conservative academic who has written extensively about moral values and serves on the President's Council on Bioethics (see Update, January 28, 2002), held faculty appointments at Harvard and UCLA and served as American Political Science Association (APSA) President in 1992.

Other recipients included famous chef Julia Child, baseball great Roberto Clemente (posthumously), pianist Van Cliburn, former Czech President Vaclav Havel, actor Charlton Heston, physicist Edward Teller, Wendy's founder Dave Thomas (posthumously), former Supreme Court Justice Byron White (posthumously), and former UCLA basketball coach John Wooden. The award citations for Barzun, Wilson, and their fellow honorees are on the White House website at http://www.whitehouse.gov.

BEHAVIORAL SCIENCE DIVISION AT NSF SEEKS NEW DIRECTOR

Phillip Rubin, Director of the Behavioral and Cognitive Division (BCS) at the National Science Foundation (NSF), is returning to the Haskins Laboratory and Yale University at the end of September. Norman Bradburn, Assistant Director of the Social, Behavioral, and Economic Sciences Directorate (SBE), of which BCS is a part, is seeking candidates to replace Rubin.

The BCS Director is a key member of the SBE Directorate leadership team and presides over a division whose programs include: anthropology, archaeology, geography and regional sciences, linguistics, human cognition and perception, social psychology, cognitive neuroscience, and learning and developmental sciences. The BCS leader will also play an important role in the implementation of the NSF priority in Human and Social Dynamics and with other NSF priorities that include the social and behavioral sciences, such as Biocomplexity and the Environment. The Division Director provides overall direction and management to a division that includes a staff of approximately 20 employees and a FY 2003 budget of about $64.9 million. Information about the BCS Division's mission and programs is provided on its Home Page (http://www.nsf.gov/sbe/bcs).

The person employed in this Senior Executive Service (SES) position may serve on a permanent or temporary basis in the Federal service or under Intergovernmental Personnel Act (IPA) provisions. The announcement for the position can be found under Current Vacancies-Executive at: (http://www.nsf.gov/oirm/hrm/jobs/start.htm). The application deadline is August 29, 2003.
Mind-Body Interactions and Health

The National Institutes of Health invites applications in support of research on mind-body interactions and health (RFA OD-03-008). "Mind-body interactions and health" refers to the relationships among cognitions, emotions, personality, social relationships, and health.

Three areas of research are emphasized and special importance is given to mind-body research in diverse racial/ethnic and socioeconomic status populations (e.g. cultural beliefs regarding health; perceived racism and health; distrust of the health care systems and health care utilization; perceived disability and health). The formation of multidisciplinary teams is viewed as essential.

The effect of cognitions or personality (e.g., beliefs, attitudes, and values; modes of thinking) and of emotions on physical health is the first area of emphasis. What are the physiological, behavioral, and social pathways by which beliefs, attitudes, and values or particular stress-management interventions affect health?

Determinants or antecedents of health-related cognitions is the second area of emphasis. Given that some beliefs and attitudes have been shown to affect health, how are these beliefs, attitudes, and values developed, maintained, or changed? The RFA specifically address such issues as: How do social class, family, culture, disability, age, gender, or ethnicity influence health-related beliefs, attitudes, values, or cognitive styles.

The third area of emphasis is on how stress influences physical health. This includes such issues as: Through which psychological or physiological pathways do stress management approaches affect health.

A letter of intent is due November 17, 2003 and applications must be received by December 17, 2003. For more information contact Ronald P. Abeles, (301) 496-7859 or abeles@nih.gov or see http://grants.nih.gov/grants/guide/rfa-files/RFA-OD-03-008.html.

ZERHOUNI FORMS NIH STEERING COMMITTEE

On July 25th, just days before the scheduled release (July 29th) of a congressionally-mandated Institute of Medicine report on the National Institutes of Health’s (NIH) organizational and management structure (see Update, August 5, 2002), Director Elias A. Zerhouni announced the formation of an NIH steering committee to give "crisp strategic direction" to the agency and streamline its decision making processes. The panel will focus on NIH-wide policies and necessary operational decisions.

Chaired by Zerhouni, the steering committee will consist of a rotating membership of ten Institute and Center (IC) directors. It is designed to help develop and oversee policies common across the NIH. The three largest NIH institutes will have permanent seats: Cancer; Heart, Lung, and Blood; and Allergy and Infectious Diseases. The other seven members will be chosen to represent the remaining ICs and will serve three-year terms on a staggered, rotating basis. Human Genome; Aging; Arthritis and Musculoskeletal and Skin Diseases; Library of Medicine; Center for Complementary and Alternative Medicine; Dental and Craniofacial; and Drug Abuse fill out the first group. NIH Deputy Director Raynard Kington will serve as an ex-officio member and chair the committee in the absence of the NIH Director.

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