December 13, 2004  
Volume 23, Issue 21-22  

CONGRESS RELEASES FINAL APPROPRIATION NUMBERS  

This is the final issue of the COSSA Washington UPDATE for 2004. It combines Volume 23, Issues 21 and 22. Volume 24 will commence with the first issue of 2005, which will be published on January 10. COSSA and its Staff wish you all a Happy and Healthy Holiday and New Year!

FAREWELL TO 2004

The 108th Congress finished its business on December 8 after two lame duck sessions. The first, in mid-November, completed the appropriations process for FY2005, or almost did. However, because a provision that would have allowed appropriations staff access to IRS tax returns stirred up a hornet’s nest, Congress had to remove that provision and the Omnibus appropriations bill was not signed by the President until December 8. Congress also completed other unfinished business during the week of December 5 by overhauling the nation’s intelligence system as recommended by the 9/11 Commission.

The final spending package limited discretionary spending to the targets agreed upon by Congress and the Administration. According to the Appropriations Committee, the $821.9 billion represents a freeze, or zero percent growth, in non-defense discretionary funding, which totaled $388.4 billion in the bill. To accomplish

(Continued on Next Page)

DAVID B. ABRAMS APPOINTED OBSSR DIRECTOR AT NIH

On December 9, National Institutes of Health (NIH) Director Elias A. Zerhouni announced the selection of David B. Abrams as the Associate Director for Behavioral and Social Sciences Research and Director of the Office of Behavioral and Social Sciences Research (OBSSR). “His outstanding expertise and vision will provide the leadership we need to continue to strengthen our efforts in behavioral and social sciences research,” said Zerhouni, when announcing the appointment. Abrams is expected to begin his appointment in January.

Currently, Abrams serves as the Director of Behavioral Medicine Research at Brown University. He also holds joint appointments as Professor, Department of Psychiatry and

(Continued on Page 5)
CONGRESS, (Continued from Page 1)

this, the Omnibus bill included a 0.8 percent across-the-board (ATB) reduction.

The chart on pp. 6-7 reflects the final spending figures for a number of agencies that support social, behavioral, and economic science research. Aside from the National Science Foundation (NSF), most other agencies received small increases.

Into the New Term

A newly re-elected President Bush has overturned 60 percent of his Cabinet. With Homeland Security still to be filled, the President has retained only Secretary of Defense Donald Rumsfeld, Secretary of the Treasury John Snow, and four other domestic cabinet members. Thus far, he has moved three people from the Executive Office of the President into the Cabinet: Condoleezza Rice to State, Alberto Gonzales to Justice, and Margaret Spellings to Education.

The White House has been suggesting that the second term will shift the focus from redefining American foreign policy toward reforming the Social Security and Tax systems to reflect the agenda that the President has set for himself and his followers. This includes personalized accounts for Social Security, making the first-term tax cuts permanent, and overhauling the tax code in some manner that may include some type of consumption tax. The President has also promised to try and reduce the deficit by half in the next four years, which means that domestic spending will remain considerably constrained in the foreseeable future.

Congress will return in early January to organize itself, select key committee chairs, and make other committee assignments. One interesting trend has been the continuing attempts to consolidate power in the leadership. Speaker Dennis Hastert (R-IL), House Majority Leader Tom DeLay (R-TX), and Senate Majority Leader Bill Frist (R-TN) have been ceded powers to try and further control the individualistic impulses of their flocks. Hastert and DeLay have an expanded role in attempting to rein in the appropriations “Cardinals,” the chairs of the thirteen subcommittees, which make the important initial spending decisions. Both are playing a significant role in determining who will lead the House Appropriations Committee in the 109th Congress. In addition, DeLay has floated a proposal to reduce and realign the appropriations subcommittee structure. Although this may be a non-starter in the short run, it serves notice to the sometimes independent “Cardinals” that they are under intense scrutiny. Frist has been given more power over committee assignments for the GOP in the Senate. This may allow him to try and persuade some of the GOP moderates to cooperate more with a Senate GOP caucus that the 2004 elections tilted much more in the conservative direction.

Science Spending

It is clear that the halcyon days for the National Institutes of Health (NIH) are over, and the hoped for doubling of NSF funding over the next five years is not going to happen. NIH faces increased scrutiny as the Congress will try and reauthorize it next year. NSF may continue to deal with the consequences of sitting in the same appropriations subcommittee with Veterans’ and NASA spending, two agencies whose funding trajectory is ever-upward. Speaking at the AAAS post-election session, former Rep. John Porter, soon to become the Chair of Research!America, urged the science community to “defend science as you have never defended it before.”

National Science Foundation

Arden Bement officially became director of the National Science Foundation on November 24 after serving as acting director since February. Bement also officially relinquished his second job as director of the National Institute of Standards and Technology. The search for an Assistant Director (AD) for the Social, Behavioral and Economic Sciences (SBE) Directorate continues. Wanda Ward has been acting AD since Norman Bradburn’s departure in March.

With its final appropriation for FY 2005, NSF suffered the first reduction in its funding since FY 1996. The FY 2005 total of $5.472 billion is $105 million below the FY 2004 level. The budget reduction comes from the two major NSF accounts: Research and Related Activities (R&RA) and Education and Human Resources (EHR). The Omnibus funded the R&RA account at $4.22 billion, $30.8 million below the FY 2004 level. The conferees “agreed that the allocation among programs and directorates is to be determined by the National Science Foundation.” Thus far, no decisions have been made regarding the funding of the research directorates, including SBE. However, the conferees did protect research on Plant Genomes, a favorite of Senate VA-HUD Subcommittee Chairman Christopher Bond (R-MO), from any reductions.

The EHR budget for FY 2005 is $841.4 million, a drop of $97.6 million below FY 2004. The Math and Science Partnership program received $80 million and, in an accounting move, was shifted to the R&RA account. This is almost $60 million below the FY 2004
level for the program. A small amount of money was shaved from the Graduate Education account, while the programs in the Human Resources Development account, particularly those aiding minority participation in science and engineering, received increases. Congress did not fund the Workforce for the 21st Century priority area.

Department of Health and Human Services (DHHS)

National Institutes of Health

The Omnibus provides the National Institutes of Health (NIH) $28.136 billion in funding for FY 2005, an increase of $336 million, or two percent more than the FY 2004 level.

The agreement includes language for the Office of the Director, providing $10 million for flexible research authority. It also modifies House bill language that grants specific permission to the NIH to fund a portion of the Roadmap Initiative (See UPDATE, October 18, 2004) through a uniform charge against the budgets of the Institutes and Centers (ICs). The conferees deleted a specific dollar limit on such funding so as to provide increased flexibility to NIH to adjust the amount in response to changing cost estimates and scientific needs.

NIH Director Elias Zerhouni would, however, have to notify the Appropriations Committees before exceeding the original NIH Roadmap estimate of $176.8 million. Language was also added by conferees to clarify that these provisions are not intended to limit the ability of the ICs to fund research related to the Roadmap out of their own budgets, through their normal priority setting and scientific review processes.

The Omnibus bill does not include an amendment offered by Rep. Randy Neugebauer (R-TX), which passed the House by voice vote in September, and sought to rescind two grants supported by National Institutes of Health. The Senate bill did not contain a comparable provision. The “conferees reiterate[d] their support of the two-tiered peer review process used by NIH to judge research grant applications and continue to expect NIH to ensure that its funds are allocated to research that is both scientifically meritorious and has high potential public health impact.”

The conferees commended the National Institute of Child Health and Human Development for its leadership of the National Children’s Study (see related story, p.10). They noted that the planning groups for the study have “made excellent progress in planning and preparing for full implementation of the Study. In order to assist in planning for future needs of the study, the conferees request that the NICHD provide the most recent projections of the total and annual costs of the study.”

The National Institute on Aging (NIA) is encouraged to expand its research into the treatment of mental illness in the elderly. Congress also recommended that NIA expand its collaboration with the National Institute of Mental Health (NIMH) as well the National Institute on Nursing Research to support research related to identifying effective treatments for elderly persons who suffer from depression.

The National Institute on Drug Abuse (NIDA) received a little less than the average three-percent increase as a result of the agreement excluding $6.3 million in program evaluation funding requested by the Administration to carry out surveys of drug abuse. The Senate bill did not include a comparable provision.

Agency for Health Research and Quality

The Agency for Health Research and Quality (AHRQ) received $318.7 million as proposed by the Senate, which was $15 million above the sum proposed by the House. The agreement funds AHRQ completely through the policy evaluation set-aside provision. AHRQ is exempt from the across the board cut and will receive the entire $318.7 million.

As proposed by the Senate, conferees marked $15 million within the total for clinical effectiveness research. They also encourage AHRQ to study the effectiveness of programs that utilize home health monitoring devices to manage chronic illness as a means of reducing re-hospitalization and emergency room costs.

Centers for Disease Control and Prevention

The Centers for Disease Control and Prevention (CDC) received $4.76 billion after the ATB cut, which is $282.7 million above the funding proposed by the House, but falls short of the Senate bill by $47 million. Additionally, $265.1 million is made available to the CDC under section 241 of the Public Health Service Act, the one-percent policy evaluation set-aside provision. The conference agreement also adopts the revised account structure proposed by the Senate, which includes both account changes that result from the CDC Futures Initiative and revisions made by the Senate regarding the treatment of CDC overhead, personnel, and business expenses (See UPDATE, December 3, 2003).
Of the $4.534 billion (the sum before the ATB cut), the conferees appropriated $968.9 million for HIV/AIDS, as well as STD and TB prevention, which falls $331 million below the funding levels for FY 2004. Of the $667.9 million of the proposed funds will be used for domestic HIV/AIDS activities and conferees directed that at least $97.8 million be used to fund activities that are targeted to address the growing HIV/AIDS epidemic and disparate impact on communities of color.

Additionally, the conference agreement also includes $1.033 billion for health promotion, with $907.2 million set aside for chronic disease prevention and health promotion. Occupational Safety and Health was provided $287.7 million in the conference agreement; within that amount, $87.1 million was made available to carry out research tools and approaches activities within the National Occupational Research Agenda (NORA). Another $31 million will be directed towards Public Health Research, and conferees stipulated that funds within public health research be made available to cover FY 2005 continuation costs associated with the extramural prevention research program.

Agriculture

The Cooperative State Research, Education and Extension Service (CSREES) is part of the Undersecretary for Research, Extension, and Economics office. The CSREES, led by Colien Hefferan, supports research, education, and extension through a broad portfolio of funding mechanisms, including formula, competitive, and special grants.

The final outcome for agriculture-related research budgets was generally favorable. The National Research Initiative reached its highest level ever at over $178 million, more than a $14 million increase over FY 2004. Once again, Congress ignored the Administration’s attempt to zero out the Special Grants category and, in fact, increased their levels significantly over FY 2004, to over $135 million. This included almost $1.2 million for the Rural Policies Research Institute. Congress also continued to provide over $7 million for rural Youth-At-Risk mental health programs. Hatch Act formula programs received the Administration request of $180.1 million in the initial conference report, but the across-the-board (ATB) cut left it at $178.7 million, slightly less than FY 2004.

The Economic Research Service (ERS), led by Susan Offutt, saw its budget increased, but not as much as the Administration had desired. Falling almost $6 million short of the request, ERS nonetheless received slightly more than a $3 million boost over its FY 2004 level. The Conference Committee told ERS to use the increase “to be applied to the highest priority needs for which additional funding was requested.”

The National Agricultural Statistics Service (NASS), headed by administrator Ronald Boesecker, saw its slight increase almost totally wiped out by the ATB reduction, and will have to do with $128.4 million, almost the same amount of funding as FY 2004. The Administration had asked for a $10 million increase. The agency will fund the Census of Agriculture at $22 million.

Commerce

The total for Periodic Censuses and Programs, $551.7 million, is considerably below the $608 million requested. However, the Omnibus bill provided $146 million for the American Community Survey (ACS), allowing full implementation of this replacement for the Census long-form questionnaire. Under the current ACS plan, according to the Census Bureau, population and housing profiles for 2005 will become available in 2006 and every year thereafter for places of 65,000 or more. In the following years, estimates will become available for progressively smaller geographic areas. Three-year average estimates will be available in 2008, and five-year average estimates will be available in 2010 for the smallest areas, such as census tracts, small towns, and rural areas. Beginning in 2010, and every year thereafter, the nation will have a replacement for the long form decennial census. The new shorter form will provide a community information resource that shows change over time, even for neighborhoods and rural areas.

The conference also provided $82.3 million to help improve the Master Address File/Topologically Integrated Geographical Encoding and Referencing system (MAF/TIGER). In addition, the Omnibus bill contained language directing the Census Bureau that it must continue to offer “some other race” as a category when collecting data on race identification.

For the Salaries and Expenses part of the Census Bureau budget, the Omnibus provided $197.2 million, slightly above the FY 2004 level.

The Omnibus also marked $79.4 million for the economic and statistics programs of the Department of Commerce. About $73 million of that total will go to the Bureau of Economic Analysis (BEA), close to a $6
million increase over FY 2004. Congress told BEA to give a $2 million grant to the National Academy of Public Administration (NAPA) “to conduct a comprehensive study on the effects of off-shoring on the U.S workforce and economy.” In doing the study, NAPA should collect “information and opinion” from “stakeholders in business, education, and government, as well as professional associations and employee organizations.”

Congress rejected the President’s budget proposal to reduce the funding at the National Oceanographic and Atmospheric Administration (NOAA) for paleoclimate and abrupt climate change research, social science research related to climate variability, including the human dimensions of climate change, and educational outreach. Funding was continued at the FY 2004 levels.

Education

Although Congress did not complete the reauthorization of the Higher Education Act in 2004, it will be back for the 109th Congress. COSSA expects renewal of the controversy over curricula in Title VI International Programs. Congress did reauthorize the Individuals with Disabilities Education Act (IDEA). The implementation of No Child Left Behind remains the focus of the Administration and the education community.

Institute of Education Sciences

The Institute of Education Sciences (IES), led by Russ Whitehurst, is the research, statistics, dissemination, and assessment arm of the Department of Education. The Congress level funded research and dissemination, statistics, and assessment for FY 2005, with slight decreases occurring because of the ATB cut. Congress also rejected, once again, the Administration’s attempts to eliminate the Regional Laboratories. The Omnibus moved research on special education to IES.

The final appropriations bill also funded a new competitive grant program to State Educational Agencies “to enable such agencies to design, develop, and implement, statewide, longitudinal data systems to manage, analyze, disaggregate, and use individual student data.” The report also urged IES to maintain its focus on the use of randomized controlled trials, longitudinal studies, and other research that meets the standards set by the National Research Council.

Congress accepted language from the Coalition for Evidence-Based Policy that “strongly encourages IES to work with the Secretary to create a competitive preference system whereby schools would receive priority for awards by agreeing to participate in randomized research studies. One potential system would entail funding schools in pairs, where at random one school would receive a new program immediately and the other would receive it a year later, thereby creating conditions conducive to randomized controlled studies.”

International Education and Foreign Language Studies

There are 14 programs under this umbrella that “strengthen the American educational system in the area of foreign languages and international studies.” These programs support Title VI comprehensive language and area study centers within the U.S., research and curriculum development, and international business education centers. The Fulbright-Hays program provides opportunities for American scholars to study abroad, and the Institute for International Public Policy (IIIP) helps to increase the number of underrepresented minorities in international service.

The Omnibus bill includes language that allots $1.5 million taken from the Title VI and Fulbright-Hays program for a National Research Council review of both programs. The full report is due in two years, with an interim report in 15 months.

Bill language also stated that funding for these programs may be used to support study abroad for advanced foreign language training and international studies for students planning to enter careers in government, the profession, or international development.

Before the ATB reduction, Congress had restored to these programs the $4 million it had cut in FY 2004. With the ATB reduction, domestic programs are funded at $92.5 million, Fulbright-Hays at $12.7 million, and IIIP at $1.6 million.

Graduate Education

The Javits Fellowship program continues to lose ground from across-the-board cuts in recent years, and FY 2005 is no exception. Funding for supporting graduate students in the Arts, Humanities, and Social Sciences, has fallen to below $9.8 million, down slightly from FY 2004.

The Senate prevailed in the conference and brought the Thurgood Marshall Legal Education Opportunity Program back to life. The program, which helps low-
income, minority or disadvantaged students gain access to and complete law school study, will receive $3 million in FY 2005. It received no appropriation in FY 2004 and $5 million in FY2003.

**Fund for the Improvement of Postsecondary Education (FIPSE)**

Despite spending constraints, the FIPSE budget received over $145 million in earmarks and congressionally-mandated projects, bringing its total budget to $162.6 million for FY 2005. This is approximately a $5 million boost over FY 2004. The Administration tried to eliminate the earmarks and requested a budget of $32 million. The large amount of earmarked dollars leaves no funding to support new grants in the comprehensive and international consortia programs.

**Office of Justice Programs**

The Office of Justice Programs (OJP) will have a new leader in President Bush’s second term as Deborah Daniels recently announced her resignation as Assistant Attorney General to return to Indiana, where her brother Mitch, former Director of the Office of Management and Budget, has just been elected Governor.

The Omnibus Act funded the National Institutes of Justice’s (NIJ) core budget at $54.6 million, an increase of about $7 million over FY 2004. Within this core budget, Congress has designated slightly less than $10 million for social science research and evaluation, an increase of almost $4 million from last year, when the Senate bill threatened to eliminate all funding for this research. NIJ will receive a little less than $5 million from the Violence Against Women
Appropriation, down from the $5.2 million that had been transferred in recent years. Further funding for NIJ social science research will come from the Prison Rape Prevention and Prosecution program as well as the Law Enforcement Family Support program. Additionally, NIJ gets a little less than $2.5 million from the Byrne Justice Assistance Grants, primarily for technology assistance to the States.

Congress also provided the Bureau of Justice Statistics (BJS) with $33.7 million for FY 2005, about $2 million over FY 2004 levels. Of these funds, $2 million is for the continued conversion of the National Crime Victimization Survey “from primarily a paper and pencil operation to a fully automated data collection operation.” BJS will also receive funds for the Prison Rape Prevention and Prosecution program for data collection.

The Office of Juvenile Justice and Delinquency Prevention received an appropriation of $381.1 million. A little less than $10 million of those funds have been designated for “research, evaluation, training, and technical assistance.” In addition, Congress continued the provision in bill language “that not more than 10 percent of each amount may be used for research, evaluation, and statistics activities designed to benefit the programs or activities authorized.”

Finally, Congress partially accepted the Administration’s proposal for a DNA analysis and capacity enhancement program, including eliminating casework backlogs, eliminating offender backlogs, strengthening crime lab capacity, training of the criminal justice community, and identifying missing persons. The original proposal was for a budget of $178 million and included funding for research and evaluation. Congress, however, provided only $110 million. Thus, whether the research and evaluation component will survive remains uncertain.
Labor

The Bureau of Labor Statistics (BLS), led by Kathleen Utgoff, is the principal Federal statistical agency collecting and disseminating data in the broad field of labor economics. The Bureau was slated for a $15 million increase over FY 2004 in the President’s budget, and Congress delivered it. The ATB cut, however, reduced the increase by $3.6 million. The Conference report’s only directive to BLS was to continue spending $5 million on the mass layoff statistics program.

State

The Bureau of Educational and Cultural Affairs (ECA) funds exchange programs to support U.S. foreign, economic, and security policy objectives as well as assist in the development of peaceful relations between the U.S. and other countries by fostering mutual understanding through international exchange and training activities. This bureau supports the Fulbright programs, American Overseas Research Centers, fellowship and scholarship programs named after Benjamin Gilman, George Mitchell, Mike Mansfield and Hubert Humphrey, all former members of Congress, and various bilateral programs with former Soviet Eastern European countries, Pakistan, and Ireland. Congress also told it to provide enhanced support for engaging Arab and Muslim audiences through exchange programs. Congress provided $357.9 million for these programs in FY 2005, a significant increase over both the FY 2004 level and the FY 2005 request of $345.3 million.

ABRAMS (Continued from Page 1)

Human Behavior, Brown University School of Medicine; Director, Miriam Hospital Centers for Behavioral and Preventive Medicine; and Founding Director, Brown University Centers for Behavioral and Preventive Medicine.

Abrams received his Masters of Science and Ph.D. degrees in Clinical Psychology from Rutgers University. He completed his internship and postdoctoral training at Brown University.

His areas of expertise include integrating fundamental sciences with translational applications and policy research; addressing issues along the entire wellness-disease continuum; examining health needs and behaviors in a diversity of populations, including the underserved; and crossing lifespan transitions. As a scientist/academician he has been especially interested in creating education that fosters transdisciplinary integration among biomedical, behavioral, and public health disciplines. Abrams succeeds Raynard S. Kington as the third director of the OBSSR. Kington is currently the Deputy Director of NIH.

NIH WORKING GROUP REPORTS ON BASIC SOCIAL/BEHAVIORAL RESEARCH

At the December 2 meeting of the Advisory Committee to the Director (ACD) of the National Institutes of Health (NIH), the Working Group of the NIH Advisory Committee to the Director on Research Opportunities in the Basic Behavioral and Social Sciences, released a draft of its latest report. The Working Group reported that: “Basic behavioral and social science research is of critical importance to the mission of the NIH.”

Linda Waite, Professor of Sociology at the University of Chicago and a member of the ACD who is rotating off, chaired the Working Group. The panel was established earlier this year and charged with reviewing the existing portfolio of basic behavioral and social sciences research, identifying areas of opportunity, examining barriers to the submission and review of applications in this area, and making recommendations for improving NIH’s program for basic research in these sciences (See UPDATE, September 27, 2004). Joining Waite in presenting the report to the ACD were psychologists Robert Levenson (UC-Berkeley), Susan Fiske (Princeton), and Bruce McEwen (Rockefeller University).

Waite explained that the impetus for establishing the Working Group included the recognition that: 1) basic behavioral and social science research (BBSSR) and training is critical to the NIH mission; 2) greater support for BBSSR is needed throughout NIH and the National Institute of General Medical Sciences, in particular; 3) recent changes in the National Institute of Mental Health’s priorities that would curtail funding for BBSSR could cause important basic research to be lost; 4) a trans-NIH strategy for BBSSR and training is needed; and 5) the Office of Behavioral and Social Sciences Research (OBSSR) was asked to coordinate a Working Group to the Advisor in order to study these issues.
She also pointed out that it is clear to many biomedical researchers that social and behavioral factors affect many aspects of health and illness, according to a large body of basic behavioral and social science research. Understanding the relevance of new breakthroughs in genetics, neural circuitry, biomarkers, and neurotransmitters to health will require increasingly sophisticated and precise behavioral and social methods, measures, and constructs, Waite explained.

The Report

The report stressed that “as the recent policy and priority shifts within ICs (Institutes and Centers) make clear, the current support structure for basic behavioral and social science research at NIH is fragile, pointing to the need for a secure and stable home” for this research. Such a home at NIH would greatly facilitate the translation of the research to health and disease applications as well as dramatically enhance the integration of basic and applied research in these sciences at the NIH.

In the report, the group explained that “although this work does not directly address disease outcomes per se, behavioral and social processes play a critical role in understanding the links of molecular, genetic, and neural processes with health and disease. Basic behavior and social science research provides knowledge, methodology, and measures that are essential for prediction, prevention, understanding individual variation, and controlling illness for minimizing the collateral impact of disease and for promoting health. Because of its centrality to the NIH mission, it is crucial that basic behavioral and social science research be supported and nurtured.”

The report responds to the concerns expressed by many in the social and behavioral science community and in Congress. It addresses: 1) the need for greater funding for BBSSR throughout the NIH and at the National Institute of General Medical Sciences (NIGMS), in particular, and 2) the lack of a trans-NIH strategy for training in the behavioral and social sciences, again with a specific concern about NIGMS support.

The “most basic behavioral and social science research does not examine diseases or interventions directly, but rather aims to measure, understand, and control processes in ways that will later enable them to be applied to disease and treatment in meaningful ways,” states the report. It also emphasizes that, as with all types of basic research, “the direct link between a theoretical construct and health is a result of incremental discoveries that accumulate over time. The location of this basic research at NIH fosters the integration of findings from basic behavioral and social science research with biology, chemistry, and genetics and translation into clinical practice.” Location at NIH also serves to focus this basic research on health.

Highlighting the scientific gains that have been made in the past decade in understanding the function of neural circuitry in the brain, the report underscores that the “application of these scientific advances to the amelioration of disease will certainly require a much better understanding of the ways genes, neural circuits, and neurotransmitters impact behavioral and social processes.”

The report stresses that in order for the link between the actions of certain gene groups and particular neural circuits to be built, new methods, theories, and a thorough understanding of social and behavioral functions will need to be developed. On a broader level, however, the report points out that “It is equally clear that environmental contexts and psychological, social, and cultural processes facilitate or constrain vulnerability to disease, risk-taking behaviors, health promotion, proper health care, and re-entry into community living.”

Basic Research at NIH

To complete its charge, the Working Group reviewed the current behavioral and social sciences basic research portfolio at NIH. The group found a number of “strong and vibrant programs that contribute to basic scientific knowledge,” and discovered that “many other NIH institutes do not support much, if any, basic behavioral and social sciences research.”

The Institutes with strong programs include Aging; Child Health and Human Development; Drug Abuse; Cancer; Alcoholism and Alcohol Abuse; Heart, Blood, and Lung; and Mental Health. The Working Group applauded these particular Institutes for their support. However, despite their support for this research, the group noted: “all of these Institutes that have been supporting basic behavioral and social science research are either linked to a particular developmental period… or a particular set of diseases. There is a clear need for a home for basic behavioral and social science research that is critical for the NIH mission but does not fit into the framework of a particular period or disease.”
Recommendations

The Group made two general recommendations: 1) A secure and stable home should be established at NIH that can foster basic research not closely linked to the missions of the categorical Institutes and Centers. This will require both staff with appropriate expertise and a sufficient budget for the task; 2) The basic behavioral and social science research programs that are currently doing well within Institutes and Centers (ICs) should continue in their present form. Efforts should also be made to encourage researchers whose work is applicable to specific diseases, conditions, or developmental periods to seek support from the relevant ICs.

The Working Group explained that the goals of providing a secure and stable home for BBSSR at NIH and ensuring NIH-wide support of training in the BBSSR can be most effectively achieved through a two-pronged strategy. This strategy requires that the OBSSR receive increased planning and budget authority for basic research in the behavioral and social sciences that fits within existing ICs. The Office would help develop priorities for basic research in conjunction with the ICs and with the advice of the research community. This would require additional OBSSR funding and staff for which the Working Group recommends that NIH seek Congressional appropriations.

NIH Responds

NIH Director Elias Zerhouni began the discussion of the Working Group’s report and recommendations by asking whether BBSSR research should be funded by NSF. Noting that he felt “very uncomfortable” with the “specific structural recommendations” made by the Working Group because they are “always a prescription,” Zerhouni related that the Group seemed to be talking about a gap that is not being addressed. But the issue, he explained, is that whenever you have such a gap, an opportunity cost analysis must be done relative to the portfolio.

He pondered to what extent the NIH could have a “deeper look into this issue” because the question of undifferentiated BBSSR was “difficult” for him to understand in terms of the total NIH portfolio. The concept of having a portfolio analysis, however, is one that resonates with him, he stated.

Zerhouni emphasized that from the standpoint of NIH, “we recognize the importance of behavioral factors.” If you look at disease burden, 50 percent of disease burden is driven by interaction between biology and behavior, he added. Noting that the NIH is proceeding into an era of tight budgetary constraints, he explained that doing “something new” will require scaling down another program. He concluded his discussion of the report by thanking the Working Group for its work and explaining that the NIH needs “to have a deeper look at what we need to accomplish.”

Members of Congress Weigh In

Meanwhile on November 19, Reps. Brian Baird (D-WA) and Patrick Kennedy (D-RI) wrote again to the NIH asking for an update about “basic behavioral science research and training at NIH, specifically, at the National Institute of General Medical Sciences” (NIGMS). Baird and Kennedy explained that they “are more concerned today” than they were at the last meeting. The members noted their awareness that the National Institute of Mental Health (NIMH), “a traditional funding source for basic behavioral science, is reducing its support, saying that, like many other Institutes, it needs to concentrate on more disease-specific research.” Acknowledging their “sympathy with this perspective,” Baird and Kennedy explained that this is part of their reasoning for pushing NIGMS as far as they have. “But this also means that more than ever, NIGMS now must unequivocally support basic behavioral science research.”

Baird and Kennedy also reiterated that support for the behavioral perspective “has been encouraged by both the House and Senate Appropriations Committee for many years now.” They additionally cited NIGMS’ statutory responsibility for “the conduct and support of research [and] training… with respect to general or basic medical sciences and related natural or behavioral sciences…”

Noting their patience, given that this issue has been the subject of repeated encouragement by the Appropriations Committee and Congress, Baird and Kennedy concluded their letter by restating their eagerness to support NIH efforts in developing a process for structuring behavioral research and training at NIGMS. “We hope you agree that some specific course of action must be more of a priority, given the context of Congressional support for basic behavioral research, the strength of the NIGMS budget, changes at NIMH, and most important, the need to bring this research to bear on the numerous physical and mental health conditions involving behavioral factors.” For more information on the draft report see: http://obssr.od.nih.gov/activities/Basic%20Beh%20Rep ort_complete.pdf
IMPLEMENTATION OF NATIONAL CHILDREN’S STUDY BEGINS

On November 16, the National Institutes of Health (NIH), the Centers for Disease Control and Prevention (CDC), and the U.S. Environmental Protection Agency announced the implementation phase of the National Children’s Study (NCS), the largest and most comprehensive study of children’s health and development ever conducted in the U.S. NCS will follow 100,000 children from before birth through age 21 (See UPDATE, July 26, 2004).

Initially, participants in the NCS will come from three distinct groups: pregnant women and their partners, couples planning pregnancy, and women who are of childbearing age, but who are not planning a pregnancy. It will be the first study designed to capture exposure prior to and early in pregnancy, and to then track the participants for more than 20 years. The Study Plan focuses on several priority health themes: outcomes in pregnancy, child growth and development, injury, asthma, and psychological and emotional health.

“We look to the National Children’s Study to provide important information that will safeguard the health of our children and the adults they will become,” said Duane Alexander, director of the National Institute of Child Health and Human Development, when announcing the beginning of the implementation phase.

By design, NCS hopes to be able to answer future questions regarding children’s health that science has yet to ask. While the NCS is hypotheses-driven, it is recognized that no single hypothesis fulfills all of the goals for the study. Biological, chemical, physical, and psychosocial exposures will be collected, measured, and tracked against pregnancy and birth outcomes, stages of child development, and medical events.

Ninety-six (96) locations that roughly correspond to U.S. counties or groups of adjoining counties have been designated across the country for the study. The locations were selected using a probability-based method that helps to ensure that children across the nation are fairly represented in the study. In addition, by design, the locations selected are geographically distributed and demographically varied. The variables used for determining site locations included the number of births in the county, demographics, and numbers of babies born at a low birth weight.

The locations selected include 75 metropolitan counties, as designated by the U.S. Census Bureau, and 21 rural, non-metropolitan areas. Eight of the locations have been selected as potential “Vanguard” locations—the first to implement the study. This group will include rural, suburban, and urban environments. Locations being considered include: Orange County, CA; Orange County, FL; Lincoln, Pipestone, and Yellow Medicine Counties, MN; Duplin County, NC; New York City (Queens), NY; Montgomery County, PA; Salt Lake County, UT; and Waukesha County, WI.

The decision as to which of these eight locations will become Vanguard centers in 2005 will be made following a review of the proposals received. These centers will help to refine the Study Plan and procedures for recruitment, informed consent, as well as data and sample collection and analysis.

Using the Vanguard locations, the study planners will work to develop a focused plan for recruitment with the chosen research institutions. The NCS planners determined that the majority of the participants will be selected through door-to-door, Census-type screening. The rest will be chosen through physician’s offices, health clinics, and hospitals.

The sampling strategy for the NCS was selected based on the input from a national panel of experts in sampling, study design, and epidemiology. It was also reviewed by several working groups and the National Children’s Study Advisory Committee.

Beginning with birth outcomes, findings from the Study Plan will become available within two to three years after the NCS is launched. Currently, the plan for the NCS is written as an outline so that it may evolve as the participants age and as new scientific developments occur. More detailed study protocol and operational manuals will be developed with input from the investigators at the Vanguard and coordinating centers.

For more information about the NCS see: www.nationalchildrensstudy.gov.

UNDERSTANDING RACIAL AND ETHNIC HEALTH DIFFERENCES IN LATE LIFE: A RESEARCH AGENDA

Despite the enormous amount of research that has confirmed the existence of large and persistent differences in health between various racial and ethnic groups in the U.S., a recently released National
Research Council (NRC) report, *Understanding Racial And Ethnic Differences In Health In Late Life: A Research Agenda*, argues that “there are still large and persistent differences in health by racial and ethnic groups that have not been fully explained.”

One explanation for this lack of progress, the report notes, is that while the disciplines “have made broad theoretical and empirical contributions to the debate...scholars have not been able to integrate these diverse contributions into a unifying model of causal process.” It also recognizes that the fluid nature of the social construct of race further complicates the study of racial and ethnic differences in health.

“Both academic and popular understandings of racial and ethnic identities have not been fixed and the picture of racial and ethnic differences in health has been heavily influenced by how these understandings have changed over time and how data and race and ethnicity have been collected,” the report explains.

Recognizing the need for continuing research on these health disparities as well as the increasing diversity of the U.S. population, the National Institute on Aging asked the National Academies to organize a two-day workshop in order to summarize current research, identify future direction for research, and to prepare a summary of the state of knowledge with recommendations for further work. To date, little of this research has been directed specifically towards the elderly.

The Academies’ Panel on Race, Ethnicity, and Health in Later Life was established in 2001. Norman B. Anderson, Chief Executive Officer of the American Psychological Association and the former and first director of the National Institutes on Health (NIH) Office of Behavioral and Social Sciences Research (OBSSR) served as chair.

The panel identified 18 research needs which are based on three main themes:

- The roots of health differences must be examined across the life course, taking a longitudinal view and integrated account of the effects of such factors as socioeconomic status, behavior risk factors, prejudice and discrimination, as well as the effects across cohorts, periods of selection processes, and social policy.

- All factors should be investigated in terms of their links to stress and biopsychosocial mechanisms leading to impaired health.

- Interventions designed to reduce health differences should be evaluated, along with determining the role of health care quality in racial and ethnic differences, which may range from possible geographic variability to differences in patient compliance and the use of alternative therapies.

**Research Needs**

- Attempt a systematic decomposition of racial and ethnic differences in mortality and morbidity among older people to determine the relative contribution each particular disease or condition. Try to assign differences in the prevalence of specific diseases and conditions to differences in the prevalence of major risk factors.

- Clarify the contrasts between mortality rankings and morbidity rankings, particularly between older whites and Hispanics, and assess the relative contributions of diseases and conditions to differences in mortality and overall health.

- When particular diseases are especially prevalent for specific racial and ethnic groups, collect more indicators of biological and functional performance in order to identify possibilities for intervention.

- Identify and quantify the various selection processes that affect health differences among racial and ethnic groups.

- Assess genetic and environmental factors in racial and ethnic differences in health simultaneously, in designs that permit identification of both main effects and interactions.

- Clarify the degree to which socioeconomic status accounts for racial and ethnic differences in health over the life course.

- Identify the mechanism through which socioeconomic status produces racial and ethnic health differences among the elderly, and identify other factors that complicate its efforts.

- Study how behavioral risk factors act over the life course in different racial and ethnic groups.

- Characterize the distribution of social and psychological resources in different older populations and investigate whether their effects on health vary by race and ethnicity.

- Determine the lifetime effects of prejudice and discrimination on health using longitudinal data and a framework that centers on stress and its effects.

- Evaluate the effects of prejudice and discrimination on the health of minorities other than blacks.

- Study populations of different racial and ethnic groups to assess the connection between health and the stresses that accumulate over a lifetime.

- Clarify how bio-psychosocial factors affect health
outcomes over time in racial and ethnic groups of middle-aged and older adults.

- Identify differences in health care – access, use, and quality – for racial and ethnic minority populations other than blacks.
- Determine the reasons for differences in health care quality, focusing on the contributions of geographic variation, characteristics of health care institutions, provider behavior and stereotyping, and patient adherence to care recommendations.
- Place particular emphasis on panel studies that follow cohorts in order to study the differences in health among racial and ethnic groups over the life course.
- Measure the use of complementary and alternative therapies.
- Characterize long-term trends (and possible lags) in the effects of changing social policy – federal, state, and local – on health differences and on public health.

The papers commissioned by the panel and presented at the two-day workshop are available in a companion volume, *Critical Perspectives on Racial and Ethnic Differences in Health in Late Life*.

**CONGRESS COMMENTS ON NIH OPEN ACCESS**

After pushing the National Institutes of Health (NIH) to move quickly in providing increased public access to NIH-funded research with report language in the House version of the Labor, Health and Human Services, Education Appropriations bill, the conference report to the Omnibus bill also took note of the proposed policy.

NIH published its notice in August and closed the comment period in mid-November. Under the proposal, NIH would request investigators to voluntarily electronically submit the final, peer-reviewed author’s copy of their scientific manuscripts. Six months after the publisher’s date of publication, NIH would make this copy publicly available through PubMed Central.

The conferees told NIH “to give full and fair consideration to all comments before publishing its final policy. The conferees request NIH to provide the estimated costs of implementing this policy each year in its annual Justification of Estimates to the House and Senate Appropriations Committees. In addition, the conferees direct NIH to continue to work with the publishers of scientific journals to maintain the integrity of the peer review system.”

COSSA joined many other organizations in providing comments to NIH regarding this policy. The COSSA statement is reprinted below:

The Consortium of Social Science Associations (COSSA) is composed of over 100 professional associations, scientific societies, universities and research centers and institutes. Its mission is to promote attention to and federal funding for the social, behavioral and economic sciences (SBE). It serves as a bridge between the academic research community and Washington policymaking community.

Many of our associations and societies publish peer-reviewed journals and are quite interested in this announcement. You will probably hear from some of them individually.

Our members are strongly in favor of producing quality knowledge that is widely accessible. The question is how to do that consistent with the needs of professional associations, scientific societies, publishers of scientific information, researchers, and the public. It appears clear that both quality and access will cost money. Open access does not equal free access. As always, the devil may be in the details.

It is the purpose of this response to raise some concerns and urge NIH to move cautiously when it decides to implement the proposed policy. We are delighted that you have agreed to conduct a study to evaluate the effects of the proposed policy, but we ask that you examine and test some of the unintended consequences, before mandating the new policy.

One clear effect that is already happening in many cases is to shift the cost of publication from the reader to the author. Page charges and authors’ fees are now becoming standard in order to provide free electronic access to peer-reviewed journals. This has a number of consequences. Somebody has to pay for this. The hope is that grants will now include, as some already do, supplements for publication.

However, many journals will still publish non-NIH funded articles. Who will pay the fee for these authors? Will such charges discourage junior faculty from research and publication? Will author’s fees cover the actual costs of peer review and printing the article as well as preparation for deposit in an electronic database? The experiment of the Public Library of Science appears to have required substantial subsidies from a Foundation grant to maintain itself. We are not sure of the answers to these questions and mandating, rather than testing, the new policy may prove detrimental to scientists.

The proposed policy acknowledges that balancing the need for free access to NIH-funded research with the need of the ability of journals and publishers to preserve their critical role in the peer review, editing, and scientific quality control process is very important.
In addition, the archiving function must also be preserved. The National Academy of Sciences recognized this, suggesting “that publishers of journals should retain enough income from whatever model is adopted to be able to continue to provide these... essential services.” You also indicate that the economic and business implications of any changes to the current paradigm must be considered. We hope that this will continue to be a focus of the NIH, if the policy goes forward. There is considerable concern about the ability of scientific societies to maintain many of their activities, if revenue streams that often subsidize other important facets, such as programs for under-represented groups, are eliminated.

Another concern that our groups have is the likelihood that this initiative, although at the moment limited to NIH, will soon spread to the rest of the government agencies that provide research support. Although NIH supports an increasingly significant amount of social/behavioral research, it is still mainly a biomedical research agency. The NAS has also warned that the proposed model “may not be replicable for research supported by other agencies, or in disciplines with different funding levels of different modes of research communication.” Thus, we have a concern with a perceived one-size-fits-all mentality. While we understand that the proposal affects only NIH, we are concerned with its precedent setting for other agencies, and hope that any evaluation of the policy will take the NAS warning into account.

Above all, we ask that NIH slow down the process and take another hard look at the consequences of this proposal on the dissemination of knowledge and those who do the disseminating, namely scholars and their scholarly communities.

GUTMANN NAMED COSSA PRESIDENT; NEW MEMBERS JOIN BOARD

Myron Gutmann, director of the Inter-university Consortium of Political and Social Research (ICPSR), was named the new President of COSSA for a two-year term commencing January 1, 2005 at COSSA’s recent Board of Directors Meeting. He replaces Orlando Taylor, Dean of the Graduate School at Howard University.

ICPSR is an integral part of the infrastructure of social science research, maintaining and providing access to a vast archive of social science data for research and instruction, and offering training in quantitative methods to facilitate effective data use. ICPSR is located at the University of Michigan, where Gutmann, is also a Professor of History.

At Michigan in 2001, Gutmann was a Professor of History and Geography and the Director of the Population Research Center at the University of Texas, Austin. He received his Ph.D. from Princeton and has broad interests in interdisciplinary historical research concerning health, population, the economy, and the environment.

Gutmann has served as chair of the Social Sciences, Nursing, Epidemiology and Methods Study Section at the National Institutes of Health, and is a member of the National Academy of Sciences’ Committee on the Human Dimensions of Global Change.

New At-Large Board Members

James S. Jackson, William B. Lacy, and Cora Marrett are the new at-large members of COSSA’s Board of Directors. Jackson is Professor of Psychology, Director of the Center for Afro-American and African Studies, and a Research Scientist in the Research Center for Group Dynamics at the Institute for Social Research, all at the University of Michigan. He serves on the Board of Scientific Counselors at the National Institute on Aging, and has a Ph.D. in psychology from Wayne State University.

Lacy is the Provost of University Outreach and International Programs as well as a Professor of Sociology at the University of California-Davis. He is an AAAS Fellow and past President of the Rural Sociological Society. His has a Ph.D. in sociology/social psychology from the University of Michigan.

Marrett is the Senior Vice President for Academic Affairs for the University of Wisconsin system. She has served as Provost at the University of Massachusetts and was the first Assistant Director for the Social, Behavioral and Economic Sciences Directorate at the National Science Foundation. She has a Ph.D. in sociology from the University of Wisconsin-Madison.

Former COSSA President Taylor will remain on the Board. Rotating off as at-large members of the Board are: Ann Masten, Director of the Institute for Child Development at the University of Minnesota; Claudia Mitchell-Kernan, Dean of the Graduate School at UCLA; Janet Norwood, former COSSA President and Commissioner of the Bureau of Labor Statistics; Wallace Oates, Professor of Economics at the University of Maryland; and Gregory Ward, Professor of Linguistics at Northwestern University. COSSA deeply appreciates their service.

COSSA BOARD MEMBER SAFFRAN PASSES AWAY
COSSA regrets to announce the passing of Bernard Saffran, who represented the American Economic Association on the COSSA Board of Directors. Saffran, who was a Professor of Economics at Swarthmore College, died suddenly of a heart attack on November 29; he was 68.

Saffran was the Franklin and Betty Barr Professor of Economics, served as economics department chair from 1978 to 1983, and was actively involved in teaching and faculty governance at the time of his death. Saffran also served as Senior Staff Economist on the President's Council of Economic Advisers in 1971-72 and was a consultant to the U.S. Treasury Office of Tax Analysis.

NEXT CAMPBELL COLLOQUIUM SCHEDULED FOR FEBRUARY IN LISBON

The Fifth Annual Campbell Collaboration Colloquium will focus on systematic reviews of high-quality evidence on the effects of interventions in crime and justice, education, and social welfare and consider how systematic reviews may be used in policy and program settings. The Colloquium will be held in Lisbon, Portugal, on February 23—25, 2005.

It will bring together policymakers, researchers, and consumers with an interest in better evidence of what works. People from more than 20 countries participated in earlier colloquia in Philadelphia, Stockholm, and Washington, DC. The 2005 agenda includes presentations of systematic reviews developed by Campbell Collaboration participants and reviews generated by other organizations that are trying to provide better evidence for making decisions. Individuals and organizations that are interested in promoting evidence-based policy and practice and are current or potential consumers or producers of systematic reviews based on rigorous and transparent standards should attend the Colloquium. For more information, please see the website: www.campbellcollaboration.org.

2005 LUXEMBOURG INCOME STUDY WORKSHOP

The Luxembourg Income Study has made comparable over 10 large microdata sets containing comprehensive measures of income and economic well-being for a set of 29 modern industrialized welfare states. The LIS databank currently covers countries including: Australia, Austria, Belgium, Canada, the Czech Republic, Denmark, Estonia, Finland, France, Germany, Hungary, Ireland, Israel, Italy, Luxembourg, Mexico, the Netherlands, Norway, Poland, Romania, Russia, the Slovak Republic, Slovenia, Spain, Sweden, Switzerland, Taiwan, the United Kingdom, and the United States.

The LIS Summer Workshop is a one-week pre- and post-doctoral workshop designed to introduce young scholars in the social sciences to comparative research in income distribution and social policy using the :LIS database. The 2005 Workshop will be held in Luxembourg. Arrival will be the evening of Sunday, July 10 and departure will be the afternoon of Saturday, July 16. Tuition of 1,200 Euros will cover instructional materials, accommodations, and full board. Transportation to and from Luxembourg is the responsibility of the student. Applications are available at: www.lisproject.org/workshop.htm and are due by April 15, 2005.

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.

Violence Against Women Research and Evaluation

The National Institutes of Justice (NIJ) is soliciting concept papers for research and evaluation on violence against women in three research areas: sexual violence, intimate partner violence, and stalking. Proposed research should have the potential to reduce the level of violence against women, increase the safety of women, and improve criminal justice policy and practice. Papers should state the problem under investigation and the relevance of the project to public policy, practice, or theory. It should describe in sufficient detail the research methods and analytic strategy. The deadline for concept papers is January 5, 2005, 8:00 P.M. eastern time. For more information and submission instructions, see: http://www.ojp.usdoj.gov/fundopps.htm.