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**SENATE L–HHS COMMITTEE: NIH ‘CONTRIBUTES TO ECONOMIC VITALITY OF THIS NATION’**

On July 18th, the Senate Appropriations Committee passed its version of the FY 2007 appropriations bill for the Departments of Labor, Health and Human Services, and Education and Related Agencies (L-HHS) bill (see Update, July 24, 2006). Accompanying the legislation, the largest of the non-defense spending bills, was the Committee’s report which provides details of the Members’ intentions for the funds they are allocating.

In its report, the Committee Chairman Senator Arlen Specter (R-PA) and Ranking Democrat Tom Harkin (D-IA), ardent supporters of the National Institutes of Health (NIH), emphasized that the agency “has played a unique and defining role in the advancement of this Nation’s health and well-being.” Answering “those who question the merit of investing taxpayers’ dollars in medical research,” the Committee responded that the long-term value of this national investment is without question.” The Committee cited “NIH-supported research [which] led to the discovery that intensive lifestyle interventions can reduce Type II diabetes by more than 50 percent” as one of several examples of the return on government funding for the agency.

The Committee explained that “[w]hile research supported by NIH is driven, first and foremost, by the hope of curing illness, easing suffering, and extending life, often overlooked are the significant contributions the agency makes to the economic vitality of this Nation.” Acknowledging that the U.S. is facing ongoing challenges and new threats, the Committee expressed its concern that “short-term budget savings will cloud the potential of dividends paid in the form of healthier, more productive lives; that growing pressure for immediate pay-off will take precedence over research where clinical need is greatest; and that the pipeline of new scientists . . . will be lost.”
Echoing the House regarding NIH’s budget justification submissions, the Committee explained that it relies on budget justification material submitted by NIH to carry out its oversight responsibilities. These documents, stressed the Committee, “are intended to provide an accounting of funds already appropriated as well as the rationale underlying the President’s budget request.” The panel noted that it “expects to work with NIH’s officials to develop a more consistent format that affords increased transparency of NIH research activities, both ongoing and proposed, and provides greater accountability of research dollars.”

The report highlighted that the Committee is “once again disappointed that the budget request would require NIH to break its funding commitments to existing grantees,” forcing grant recipients to reduce the scope of research already underway. The Committee expressed its belief that “to the extent resources allow, NIH should follow its cost management plan principles, which will help NIH continue to maintain the purchasing power of the research in which its invests.”

Report language addressing social and behavioral issues for the individual institutes and centers (ICs) includes:

**Office of Behavioral and Social Sciences Research (OBSSR)** - The Committee congratulated OBSSR on its tenth anniversary and encouraged the Office to continue working to build alliances among institutes that support and nurture basic behavioral and social sciences research (see Update, July 10, 2006). OBSSR is urged to partner with the National Institute of General Medical Sciences (NIGMS) and other funders of basic research to enhance support for work on methods, animal models, and the interplay of biological factors, behavioral, and social influences underlying phenomena such as stress that influence multiple health conditions.

OBSSR is also encouraged to intensify its efforts to increase scientific understanding of the elements of education and the workplace that most affect health. The Office is further strongly encouraged to increase its investment in projects and studies that focus on maintaining behavior change in the areas of disease prevention, control, and health outcomes especially in cancer, diabetes, obesity, asthma, heart disease, HIV/AIDS, chronic obstructive pulmonary disease, and stroke.

**National Cancer Institute (NCI)** - The NCI is commended for its efforts and leadership to inspire research that will overcome barriers to adoption of evidence-based interventions that previous studies have shown to be effective, but where adoption to date has been significantly delayed.

NCI is also encouraged to fund its Specialized Programs for Research Excellence (SPORE) at FY 2004 funding levels and administer the program following the FY 2004 guidelines, providing for grant renewals until such time that the Translational Research Working Group (TRWG) concludes its evaluation and provides recommendations to more effectively support translational research. FY 2004 is the last time the Congress provided a significant increase in the NCI’s budget.

**National Heart, Lung, and Blood Institute (NHLBI)** - The Committee observed that evidence suggests that reducing the obesity epidemic will require significant attention to preventing progressive weight gain starting in early adulthood. Little is known about the best methods to achieve weight management in this population, the report also emphasized. NHLBI is urged to initiate a project to prevent and test innovative practical, cost-effective ways to prevent weight gain in young adults, with the goal of reducing heart disease, stroke and other cardiovascular diseases.

**National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK)** - NIDDK is commended for its “continuing commitment to behavioral research on adherence to diet and
exercise regimens to prevent or slow the progression of Type II diabetes.” The Committee expressed concern, however, that the “strategic plan for research to combat Type I diabetes includes almost no behavioral research.” The Institute is encouraged to examine the impact of diet and exercise interventions on the health and glucose control of Type I diabetics.

**National Institute of Allergy and Infectious Diseases (NIAID)** - The Committee noted that it was “very pleased” with NIAID’s leadership regarding asthma research and management. The Institute is urged to continue to improve its focus and effort on asthma management, especially as it relates to children.

NIAID is also encouraged to work with OBSSR to identify and fund behavioral research on infectious diseases. “Behavioral research in areas such as risk perception, adherence to vaccination recommendations, and public health preparedness could enhance scientific research on preparation and response to pandemic influenza outbreaks,” in particular, is cited.

**National Institute of Child Health and Human Development (NICHD)** - NICHD has one of the most extensive research portfolios of the 27 ICs. Accordingly, the Committee report reflects this breadth with a significant amount of language. The Committee expressed “strong support for the broad portfolio of behavioral research at NICHD and supports its efforts to determine the biological, behavioral, and social factors that affect cognitive, social, and personality development of children in a variety of settings.” The Institute is urged to maintain its support for research and training in behavioral sciences as it engages in its priority-setting process.

The Committee also noted that is pleased that NICHD is funding behavioral intervention research focused on preventing childhood obesity. The Institute is urged to support additional clinical trials that focus on the effectiveness of behavioral interventions in settings beyond primary care, including the home, school, community, and other environments that influence physical activity and health behaviors. The Committee recognized “the critical importance of prevention efforts in this area and supports continued initiatives to promote healthy behaviors in children and adolescents, particularly for ethnic minority populations.”

NICHD’s demographic research portfolio, the Committee stressed, is essential for understanding the health, socioeconomic, and geographic implications of the rapidly changing U.S. population. The Institute is urged “to invest in demographic training programs to prepare the next generation of social scientists.” NICHD, in partnership with other Federal agencies, is also urged to continue supporting critical, accessible databases, such as the National Longitudinal Study of Adolescent Health (Add Health).

Furthermore, the panel applauds NICHD for working with other ICs and agencies to assess the science and research needs related to children exposed to domestic and community violence, war, and terrorism. It encourages the Institute to continue funding research on effective ways to promote and sustain healthy family formations, particularly for low-income families and families of color. NICHD is further encouraged to include research related to family, community and cultural factors that serve as risk or protective factors and promote resilience from exposure to violence in the home, communities and schools.

Finally, the Committee maintains its support for NICHD’s commitment to research on reading, learning disabilities and math and science cognition.

**National Institute of Environmental Health Sciences (NIEHS)** - NIEHS is commended for its partnership with the Human Genome Research Institute in the Genes and Environment Initiative (GEI). The Institute is encouraged to “take a closer look at environmental interactions with genes, and to involve expert behavioral and social scientists in the initiative to enhance the success and applicability of this important research.”
National Institute on Aging (NIA) - The Institute on Aging is encouraged to maintain its commitment to research on patterns and cycles of work in aging populations. NIA is commended for supporting demographic and economic research on the implications of population aging. In particular, the Institute is urged to continue supporting the Health and Retirement Study (HRS), which can help inform policymakers about potential changes to the Social Security and Medicare programs. On June 20, the National Institutes of Health’s Institute on Aging (NIA), and the University of Michigan’s Institute for Social Research (ISR) announced the renewal of the HRS. (See Update, June 26, 2006).

NIA is also commended for its cooperative efforts in producing a searchable database of studies and planning joint efforts to solicit research on enhancing healthy cognitive and emotional function. The panel wants the Institute to make the initiative “a priority, given the importance of maintaining and enhancing brain health as the population ages.”

National Institute of Nursing Research (NINR) - “The Committee realizes the importance of behavioral research in preventing and treating disease. While understanding the biological basis of disease is essential, it is understood that behavioral factors have a critical influence on the onset, course, and duration of disease and in the successful management of many disease conditions.” NINR is encouraged to devote significant efforts to behavioral research, including studies that examine the interactions of biological and behavioral factors and their effect on treatment and prevention.

The panel urged NINR to fund research into the causes of health disparities and into new ways to overcome such disparities and recognized it for promoting end-of-life research.

National Institute on Alcohol Abuse and Alcoholism (NIAAA) - NIAAA is commended for its team approach in developing and guiding its research programs to understand the many factors that contribute to the onset of drinking and abuse of alcohol by young people. Highlighting the fact that recent research has demonstrated “that many individuals transition out of alcohol dependence without professional treatment, the Committee encouraged NIAAA to investigate the mechanisms which individuals alter their drinking behavior without professional treatment in order to design more effective treatments for alcohol use disorders.”

National Institute of Drug Abuse (NIDA) - The Committee congratulated NIDA on its “Drug Abuse and HIV—Learn the Link” public awareness campaign targeting young people, and urged continuation of support for research that focuses on developing and testing drug-abuse related interventions designed to reduce the spread of HIV-AIDS. The Committee also expressed its strong support for NIDA’s research efforts involving the criminal justice system, particularly the Criminal Justice Drug Abuse Treatment Studies (CJ-DATS), “which demonstrates that providing treatment to individuals significantly decreases future drug use and criminal behavior while improving social functioning.”

NIDA is encouraged to continue supporting research that provides reliable data on emerging drug trends, particularly among youth and in major cities across the country. Recognizing that the consequences of drug abuse disproportionately impact minorities, especially African Americans, the Committee stressed that it is pleased to learn that NIDA is encouraging researchers to conduct more studies in this population. The Institute is also urged to continue to encourage researchers to target their studies in geographic areas where HIV/AIDS is high and/or growing among African Americans, including in criminal justice settings.

NIDA is applauded for its involvement in the recently released “social neuroscience” request for applications. The Institute is encouraged to continue its focus on the interplay between genes, environment, and social factors and their relevance to drug abuse and addiction.
National Institute of Mental Health (NIMH) - The Committee urged NIMH to “maintain its support for the research on the promotion of mental health and the study of psychological, social, and legal factors that influence behavior.” In particular, NIMH is encouraged to “continue its commitment to basic behavioral research that examines the basic psychological functions that promote mental health or become disturbed in mental disorders.”

The report recognized NIMH for its collaboration with other ICs surrounding mental health and older adults, including the Cognitive and Emotion Health Project. The Institute is encouraged to continue its “pivotal role as the primary institute for mental health and aging research” by expanding its research on older adults to include large-scale, multi-site trials of behaviorally-based treatments of depression, anxiety, and for managing behaviors associated with cognitive impairments as well as increasing opportunities for training future behavioral scientists focused on older adults.

The Committee joined the House in expressing disappointment in learning that “NIMH intends to reduce its commitment to training minority scientists through the Minority Fellowship Program and the Career Opportunities in Research Program,” noting that both programs have demonstrated success in training biomedical and behavioral scientists who are addressing critical ethnic minority mental health issues (see Update, June 26, 2006).

The Committee expressed its support for NIMH research related to the psychological impact of both acute and chronic exposure to threats of violence. It encouraged the Institute to expand its portfolio to include research related to psychosocial factors that promote detection or prediction, prevention, and post-exposure recovery and resilience.

The Committee also expressed its support for NIMH’s efforts to advance the application of behavioral research and interventions in clinical settings to address the public health burden of mental disorders. It emphasized that behavioral interventions are especially needed for children and adolescents with mental disorders, including post-traumatic stress disorder, eating disorders, attention deficit-hyperactivity disorder, and the most common forms of depression. It also emphasized that translational research in the behavioral sciences is especially needed to address how basic behavioral processes, such as cognition, emotion, motivation, development and social interaction, inform the diagnosis, treatment and delivery of services for mental disorders.

HOUSE APPROPRIATORS HOLD SPECIAL CENSUS HEARING/NEW DATA TO BE RELEASED

On June 29 the U.S. House of Representatives approved three amendments that would cut a total of $58.3 million from the Census Bureau’s 2007 budget before passing the Science, State, Justice and Commerce Appropriations bill (H.R. 5672). The reduction would leave the agency with $815.7 million, about $14 million over current year funding. Following the House action, the Census Bureau issued an “impact statement,” saying the proposed funding reduction would force it to abandon plans to use GPS-equipped hand-held computers to collect information from unresponsive households in the census. Among other things, the impact statement also noted that group quarters’ coverage could be cancelled in the American Community Survey (ACS). (See Update July 10, 2006).

On July 27, the House Subcommittee on Science, the Departments of State, Justice and Commerce and Related Agencies Committee on Appropriations held a special hearing to further discuss planning for the reengineered 2010 Decennial Census. Subcommittee Chairman Frank Wolf (R-VA), stressed that the committee has been working “to ensure the planning and implementation of the 2010 census fully utilizes high-technology improvements to increase accuracy, accountability, and controlled costs.”
Census Bureau Director Charles Kincannon along with Brenda Farrell, Acting Director for Strategic Issues at the U.S Government Accountability Office (GAO), testified before the Subcommittee, which sought to understand the need for increased census funding. “The Congress, including this committee, will continue to aggressively examine every dollar that is spent by the bureau and question the need for such an enormous increase over the 2000 Census,” Wolf emphasized.

Several census stakeholders and key interests groups such as the Census Project, of which COSSA is a member, have increased efforts to educate Congress on the critical nature of the Census following the cuts made in the House. Kincannon made clear that with the constraints of the House action in place, as well as the reductions from the Senate Appropriations Committee (see Update, July 12, 2006) “it will almost certainly affect the fundamental design of the reengineered census,” and will affect the ability of the bureau to carry out its automation plans. The Bureau has not made public its plan on how it will manage these budget cuts, if they are maintained through the FY 2007 appropriations process. Whatever happens, the Census Bureau must begin its preparations for the 2008 Census Dress Rehearsal next year.

U.S. Census Bureau to Release 2005 ACS Social and Demographic Estimates

On Tuesday, August 15, 2006, the U.S. Census Bureau will release the 2005 American Community Survey (ACS) data on social and demographic characteristics for the Nation, all 50 states and the District of Columbia, every congressional district, and all counties and places with populations of 65,000 or more. The release covers 6,800 geographic entities and marks the first time that ACS data will be available for areas with populations of less than 250,000. It is part of the full implementation of the survey, which will provide updated data on an annual basis for all levels of geography (including census tracts and block groups) by 2010.

An online "Guide to the 2005 ACS Data Products" will be released prior to August 15. Included in the Guide are a list of data products, a list of geographical areas for which data are available and step-by-step instructions for accessing the data on the Census Bureau's American Fact Finder (AFF).

The August 15 release date is the first of four scheduled ACS releases of the 2005 data. Economic data will be released in conjunction with the Census Bureau’s annual release of income, poverty and health insurance data on August 29, with housing characteristics data planned for release on October 3. On November 14, the Bureau will provide selected population profiles with data by race, Hispanic origin and ancestry. Comparable data from the Puerto Rico Community Survey also will be available under the same schedule.

The first scheduled release of ACS data for all areas of 65,000 or more will cover demographic and social characteristics, including:

- Race and ethnicity
- Origins and language
- Age and sex
- Education
- Marital status
- Grandparents as caregivers
- Veterans status
- Disability status
- Household size
- Citizenship and year of entry
Economic data from the ACS, available on August 29, will cover the following characteristics:

- Income
- Poverty
- Employment status
- Occupation
- Industry
- Journey to work

The planned October 3 release of housing characteristics will include information on:

- Housing occupancy
- Units in structure
- Year structure built
- Rooms
- Bedrooms
- Housing tenure
- Year householder moved into unit
- Vehicles available
- House heating fuel
- Occupants per room
- Value
- Mortgage status and selected monthly owner costs
- Gross rent

The data ready on November 14 will include approximately 200 selected population tables with data by race, Hispanic origin and ancestry. For more information on the data releases please email cmo.acs@census.gov.

**NIGMS CREATES PREDOCTORAL TRAINING AT THE INTERFACE OF THE BEHAVIORAL AND BIOMEDICAL SCIENCES AWARD**

In recognition that behavioral factors are important contributors to health and disease and often interact with biological factors to influence health, the National Institute of General Medical Sciences (NIGMS) recently announced a new training grant program, *Predoctoral Training at the Interface of the Behavioral and Biomedical Sciences (PAR-06-503)*, designed to train scientists at the interface of the behavioral and biomedical sciences. The program is intended to respond to the “numerous reports from the NIH and the National Academy of Sciences [which] have concluded that basic behavioral research is critical to the mission of NIH and to ‘understanding the links of molecular, genetic and neural processes with health and disease outcomes.’"

Those reports, including the *Report of the Working Group of the NIH Advisory Committee to the Director on Research Opportunities in the Basic Behavioral and Social Sciences*, and the National Research Council’s (2005) *Advancing the Nation’s Health Needs*, identify the need for training future scientists in basic behavioral science that is not targeted to a specific developmental stage or disease, but which is fundamental to a range of diseases and health conditions (see *Update, September 25, 2005*).
The program will award Ruth L. Kirschstein National Research Service Award (NRSA) Institutional Grants (T32) to eligible institutions to support pre-doctoral research trainees with the goal of developing basic behavioral scientists with rigorous broad-base training in the biomedical sciences who are available to assume leadership roles related to the Nation’s biomedical, clinical and behavioral research needs. It is designed to support basic behavioral research training that is broad-based and transcends the mission of the many of the 27 NIH institutes and centers (ICs). The programs “must include equal participation of both biomedical AND behavioral faculty and leadership, and must provide an interdisciplinary research training experience and curriculum for predoctoral trainees that integrate both behavioral and biomedical perspectives, approaches, and methodologies.”

Applicants will need to describe an interdisciplinary program that integrates training in the conceptual models, methods, and approaches of both behavioral and biomedical sciences. One of the main challenges in this training program cited in the announcement is to “bridge scientific cultural differences between disciplines.” The requirements of the announcement are intended “to be sufficiently flexible to allow applicant institutions to tailor their proposed training program to take advantage of the resources available to them and the areas of strength at their institutions.” The announcement emphasizes that this should be a joint effort between the faculty and leadership of departments from both side of this interface which could include, but is not limited to, departments of psychology, anthropology, behavior, demography, and economics on the behavioral side, and departments of biology, physiology, cellular and/or molecular biology, pharmacology, neuroscience, biochemistry, biophysics, immunology, genetics, and biomedical engineering on the biomedical side.


### NATIONAL SYMPOSIUM ON HOMELESSNESS RESEARCH REQUEST FOR PROPOSALS

The Office of the Assistant Secretary for Planning and Evaluation (ASPE) at the U.S. Department of Health and Human Services (HHS) and the Office of Policy Development and Research (PD&R) at the U.S. Department of Housing and Urban Development (HUD) seek proposals from emerging minority social science researchers on issues related to homelessness.

A grant totaling $5,000 will be awarded to develop a research paper to be presented at the National Homelessness Research Symposium in March 2007. Minorities, individuals with disabilities, individuals from disadvantaged backgrounds and other underrepresented groups are strongly encouraged to apply. Applicants should be currently enrolled in a social science Ph.D. program or have received their Ph.D. within the last five years. Packets must include a letter of intent, a two page abstract summary, a copy of the Institutional Review Board (IRB) approval or exemption statement and a current curriculum vita or vitae.

For more details on the eligibility requirements, specifics on the application process and other questions please contact Anne Fletcher at anne.fletcher@hhs.gov.

### CONGRESS RECESSES, UPDATE TAKES A HIATUS
As the 109th Congress takes an August recess, COSSA Washington Update will too. Please look for Update to resume on Monday, September 10 to report on what should be a very interesting fall.
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