This Week . . .

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NSF APPROPRIATIONS; NIH GRANTS; BUDGET RESOLUTION PASSED

Congress has recessed for the month of August to vacation, junket, and work their districts. Before leaving Washington they managed to make progress on appropriations bills, settle the question of how many grants the National Institutes of Health (NIH) would award in FY 1985, and pass a budget resolution that nobody is very happy with, but which claims budget reductions of $56 billion for FY 1986.

Ignoring the struggle over the budget resolution, the House of Representatives passed 8 of the 13 FY 1986 appropriations bills. On July 25 the HUD-Independent Agencies bill, which includes the National Science Foundation (NSF), passed 340-73. Most of the drama focused on amendments to reduce housing programs, as Subcommittee Chairman Rep. Edward Boland (D-MA), unaccustomed to being challenged on the House floor, lost on two housing amendments.

Rep. Paul Henry (R-MI) offered an amendment to reduce the spending levels for both NSF and the National Aeronautical and Space Administration (NASA) to FY 1985 appropriations levels. Being coupled with NASA served NSF well, as the debate focused on the glories and applications of space exploration. NSF was mentioned in passing. The other factor in the debate was whether
the appropriations bill would override the earlier House vote to freeze at 1985 levels the authorizations for these two agencies. The House voted 300-112 to defeat the Henry amendment and indeed do such a thing.

Thus, from the House the NSF wound up with $1.524 billion for FY 1986, a slight 2% increase over FY 1985 appropriated levels. Research and Related Activities received a 3% increase of $45 million to $1.347 billion. The House noted that $7 million of the increase should be spent on "high priorities," which they defined as advanced scientific computing, ocean drilling, and the program that enhances the participation of women and minority researchers.

These increases still put NSF below the administration request for FY 1986. In Research and Related Activities there is a reduction of $50 million dollars from that request. Thus, when the NSF allocates the booty between divisions the 19% increase for social and economic science and the 6% increase for behavioral science proposed in the budget will be pared considerably -- the question is how much? Science and Engineering Education received $60.5 million in new appropriations, plus a $31.5 million carryover, for a total of $92 million.

The Senate Appropriations Committee met on July 31 to markup their version of the NSF FY 1986 appropriations bill. The HUD-Independent Agencies Subcommittee, chaired by Sen. Jake Garn (R-UT), had met the previous day to iron out the numbers. The NSF total was slightly higher than the House number at $1.539 billion. The Senate's Research and Related Activities figure was $1.363 billion — some $16 million higher than the House number. The Senate agreed with the House on the Science and Engineering Education numbers. The full appropriations committee agreed to the Subcommittee numbers on NSF, but decided to withhold filing their report with the Senate until after the budget resolution was settled. Sen. Dennis DeConcini (D-AZ) asked Committee Chairman Sen. Mark Hatfield (R-OR) whether this meant that in September the committee would reconsider what they had done that afternoon. Hatfield said he believed that the delay in filing the report was due more to the recess than the problems with the budget resolution; therefore the action by the committee would stand.

The compromise on the budget resolution was passed on Thursday, August 1. It freezes the science function at the FY 1985 appropriated levels, but since the function of the budget does not completely parallel the appropriations process the appropriations committees have room to maneuver the dollars.

Prior to the recess Congress also finished work on the FY 1985 Supplemental Appropriations bill. This bill finally settled the NIH grant level question by agreeing to the support of 6,200 new and competing grants for FY 1985. This is below the appropriated level of 6,500 grants, but above the White House-Senate
compromise of 6,000 grants (score one for House HHS appropriations subcommittee Chairman William Natcher (D-KY)), and way above the proposed 5,000 grant level in the president's budget submitted (score one for the biomedical and behavioral research community). All grant-making units of the NIH have been sitting on lists of peer-reviewed, Council-approved grants, ranked for funding. Official notifications to researchers will now follow -- as soon as the NIH Director's office allocates each institute's share. While most FY 1985 awards will have been delayed for most of the year, researchers receiving back-to-school presents will presumably feel, better late than never. The FY 1986 grant level has yet to be determined but 6,200 is a good bet, at least until next year's administration budget.

ED SEEKS GRADUATE FELLOWS; PART OF BOARD NAMED

The Department of Education has sent notices to the presidents and deans of institutions of higher education awarding doctoral degrees in the arts, humanities and social sciences soliciting nominations for the National Graduate Fellows program. Nominations are due at the Department by August 15, 1985, although students will be able to apply directly for the fellowships (that deadline is September 15, 1985).

The program, funded for the first time in FY 1985, will award fellowships to graduate students in disciplines to be determined by the National Graduate Fellowship Board. (See Update July 12, 1985 for earlier story.)

Ten members of that Board were named by President Reagan on July 10. Five more members need to be named. Social scientists on the Board include: Reed Browning, Professor of History at Kenyon College; William F. Campbell, Professor of Economics at Louisiana State University; Eugene Hickok, Associate Professor of Political Science at Dickinson College; John A. Grant, a lawyer and State Representative from Florida; and Tibor Machan, Professor of Political Philosophy at University of San Diego. Others named so far are: James Walton, President of the Carnegie Institute in Pittsburgh; Peter Greer, Superintendent of Schools in Portland, Maine (who included a recommendation from Education Secretary William Bennett in his biographical packet); James Kirschke, Associate Professor of English at Villanova University; Anne Paolucci, Chairman of the English Department at St. John's University in New York; and J. Ronald Thornton, an engineer by training, and now the Director of the NASA-Florida State Technology Applications Center at the University of Florida.

The issues of concern in the graduate education community regarding the fellowship program are the identity of the Chair of the Board, the directions from the Education Department to the Board, and whether the committees of peer reviewers that recommend the fellows will be more ideologically diverse than the members of the Board.
HEARINGS HELD ON VOTER REGISTRATION BILL

On July 30, the House Postal Operations and Service Subcommittee, chaired by Rep. Mickey Leland (D-TX), conducted hearings on legislation which would allow people who change their residence to re-register to vote automatically when they turn in a change-of-address form to the post office (H.R. 1668).

Rep. Mel Levine (D-CA) introduced the legislation last March based on a proposal by political scientist Raymond Wolfinger (see Update April 5, 1985). The general idea of easier re-registration was supported by witnesses at the hearing, although some had problems with specific provisions of the bill. The Postal Service opposed the bill based on cost considerations.

Rep. Levine is currently re-working the bill to correct the loopholes in it noted at the hearings. Chairman Leland hopes the subcommittee will mark-up H.R. 1668 when Congress returns in September.

COSSA STAFF GETS AROUND

COSSA Executive Director David Jenness recently visited the President and senior staff of the Social Sciences and Humanities Research Council of Canada (Conseil de recherches en sciences humaines du Canada), in Ottawa.

The Council, whose closest U.S. equivalents are the National Science Foundation and the National Endowment for the Humanities, awards research grants, grants for scholarly communication and international cooperation, and support for specialized collections. It also provides 'strategic grants,' which support research or other scholarly work on subjects of national importance; help to establish a knowledge base on particular social needs or problems; and attempt to redress underdevelopment in specific research areas. Currently, 'thematic research' is encouraged in population aging, family and the socialization of children, the human context of science and technology, women and work, and managing the organization in Canada.

On July 17, Howard Silver, Associate Director for Government Relations at COSSA, participated in a panel at the 1985 Assembly of the Council for the Support and Advancement of Education (CASE). The topic of the session was "The Higher Education Associations and the Voice of Higher Education: Who Talks, to Whom, and About What?" Appearing with Dr. Silver were Charles Saunders, Vice President for Government Relations of the American Council on Education (ACE), Jack Crowley, Director of Federal Relations for Science Research of the Association of American Universities (AAU), and David Morse, Director of Federal Relations at the University of Pennsylvania. The panel was arranged by Walter Lambert, Director of Federal Relations at the University of Tennessee.
From time to time the Update publishes articles aimed at providing an interpretive, in-depth look at certain federal agencies or programs of particular significance for the social and behavioral sciences. In this issue we examine the National Center for Health Services Research and Health Care Technology Assessment, a research agency that had an auspicious beginning but then witnessed a gradual erosion of its budget over the past decade.

Established in 1968, the National Center for Health Services Research and Health Care Technology Assessment (abbreviated here as NCHSR for brevity's sake) is the primary source of federal support for research on problems related to the quality and delivery of health services. The mission of NCHSR is to create new knowledge and better understanding of the processes by which health services are made available, and how they may be provided more efficiently, more effectively, and at lower cost.

The extramural research program at NCHSR is directed toward five areas: 1) health promotion and disease prevention; 2) technology assessment; 3) the role of market forces in delivery of health care services; 4) primary care; and 5) state and local health problems. Most research is basic, multidisciplinary social/behavioral science or has a significant social science component, i.e. socio-environmental factors influencing adaptation or efficacy of new devices. It is one of the few agencies in the Department of Health and Human Services (HHS) that supports non-contract research focused on assessing and improving health care services.

The intramural research program, staffed primarily by social and behavioral scientists, is more policy-oriented than the extramural program. It performs ongoing studies of hospital use and costs, long-term care, health status and health promotion, and health care expenditures. The National Health Care Expenditures Study, a large national survey which examines how Americans use and pay for health care services, has evolved as a major source of data for both researchers and policymakers.

NCHSR research is targeted to the needs of health care policymakers, including executive and legislative officials at federal, state, and local levels; those who operate hospital and other health care institutions; and individuals who are responsible for health care expenditures.

The National Center for Health Care Technology (NCHCT) was created in 1978 to provide assessments of health care technologies and provide evaluations for the Health Care Financing Administration about whether certain procedures should be reimbursed by Medicare. The Center officially went out of business four years later when the powerful health care industry successfully lobbied Congress and HHS to eliminate the agency. (The Center was still on the books, but zero-funded.) The
primary functions of the Center, still viewed as essential, were then transferred to NCHSR. Congress officially changed the name of NCHSR two years later to include "Health Care Technology Assessment" to highlight those added responsibilities.

The field of health services research, barely 20 years old and primarily nurtured by support from NCHSR, has made significant contributions to the clinical side and to the research side of health care delivery. Many research projects funded by NCHSR have been adapted for nationwide use. Others have been instrumental in shaping national health care policy. For example, under a recently completed research grant, a team at the University of Washington has developed an abbreviated, reliable version of the Halstead-Reitan Neuropsychological Test Battery which will give hospitals quicker and cheaper assessments of major cognitive impairment resulting from head injuries. The NCHSR intramural staff recently produced a series of papers examining the question of who has health insurance and what would be the effects of various policy options, including a tax on health insurance benefits.

Despite a general acceptance by the research community and federal policymakers that health services research is a valid and important enterprise, and that NCHSR should be the primary federal supporter of that enterprise, NCHSR has, for the last decade, suffered from an identity crisis, and thus a funding crisis. In FY 1972 NCHSR supported a total of 408 grants and contracts at a total cost of $49.3 million. In FY 1985, NCHSR will support approximately 68 grants and contracts for a total of $11.4 million. Even that amount is uncertain at the moment. Although last year Congress stated in its conference report on the FY 1985 HHS budget that NCHSR should receive 7.5% of 1% of all Public Health Service evaluation funds (or approximately $5 million) to supplement its budget, only $1.5 million of that amount has been released so far.

The dwindling away of NCHSR's budget has, for the most part, been a gradual process. The largest cut, to $8.1 million for extramural research, came in FY 1982, the same year that the function of the National Center for Health Care Technology was transferred to NCHSR. In addition, the agency has been subjected to a series of reductions in force (RIFs), going from a staff of 233 to their current level of 150.

Contributing to the erosion of the NCHSR budget has been the lack of a clear identity for the agency. NCHSR has long been batted about within HHS. Once located in the Health Resources and Services Administration (HRSA), it was moved in 1980 to the Office of the Assistant Secretary for Health (OASH), where it now resides. Almost annually, however, Congress proposes a relocation. HRSA would like NCHSR returned to them, which is understandable since HRSA would then have access to its discretionary research budget. NCHSR staff vigorously oppose this idea, however, as they would then be in a position of competing for funds with maternal and child care service programs. Congress
has frequently debated the merit of transferring NCHSR to the National Institutes of Health (NIH). NIH officials oppose this move, citing the fact that NCHSR research is not 'biomedical'."

John E. Marshall, Director of NCHSR, is satisfied with the agency's placement in OASH, but feels it is too often viewed as just another management service rather than a distinct research agency. Marshall stated:

"...the Public Health Service needs to be cognizant of that difference because our position and our budget tends to be confused with [OASH] administrative overhead. When Congress says that OASH must cut overhead, that doesn't imply that the research budget at NCHSR should be included....What happened to NCHSR has been directly the result of increases for biomedical research against fixed budget ceilings imposed by OMB and Congress. When internal allocations are made within PHS and OASH, NCHSR has been one of the ones sacrificed."

Why would an agency with the reputation for supporting high-quality, policy-relevant research be allowed to wither away? One reason is the lack of a clearly defined constituency. The health services research community encompasses a wide range of social and behavioral scientists, public health researchers, and biomedical scientists in a variety of academic and non-academic settings. As Marshall put it, "Our constituency is a fragmented one in which many of the active researchers identify themselves more with an academic social science discipline than with health services research."

The lack of a clear identity for NCHSR within HHS and the research community is compounded by the fact that proposals to NCHSR go through the Division of Research Grants at NIH. Many researchers assume, therefore, that NCHSR is part of NIH. Thus the belief that the steady increases in the NIH budget must include increases for NCHSR. Conversely, those who are aware of the trend toward decreasing support of non-biomedical research at NIH may erroneously be discouraged from seeking funding from NCHSR.

Although Congress has begun nudging the budget for NCHSR back up since FY 1983, the possibility that the agency will ever return to its halcyon days of the early 1970s seems highly unlikely. Whether NCHSR goes out "not with a bang, but a whimper," or if it simply maintains its current status with marginal annual budget increases, will probably be determined by the degree to which the research community chooses to become involved.

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