This Week . . .

- House Passes NSF Appropriations; Senate Committee Acts Too
- House, Senate Pass Authorization Bills
- House Passes Labor, Health & Human Services, Education Money Bill
- COSSA Seminar Focuses on Child Care Quality
- Sources of Research Support: Department of Health and Human Services

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HOUSE PASSES NSF APPROPRIATIONS: SENATE COMMITTEE ACTS TOO

By a vote of 377-40 the House of Representatives passed the HUD-Independent Agencies Appropriations bill on June 22. Included in the bill was $1.885 million for the National Science Foundation for FY 1989, a 9.8% increase over last year's appropriation. The Research and Related Activities account received $1.578 million, $25 million below the request, but a $125 million increase (9%) over FY 1988. The separate $150 million request to fund the Science and Technology Centers program for five years was eliminated. The NSF was instructed to initiate a limited number of centers from the funds in the research account. The Science and Engineering Education Directorate received $171 million, a $15 million increase from the request, and a $32 million (23%) boost over FY 1988.

Also on June 22, the Senate Appropriations Committee gave approval to the Senate version of the HUD-Independent Agencies
Appropriations bill. For NSF, $1.880 billion was allocated, $5 million below the House level. The Senate committee provided more funds for Research and Related Activities than the House, $1.593 billion, but it too eliminated the separate funding for the new Science & Technology Centers program. Science and Engineering Education was funded at the requested level of $156 million.

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<thead>
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<th>FY 1989 (in thousands)</th>
<th>Request</th>
<th>House</th>
<th>Senate Committee</th>
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HOUSE, SENATE PASS AUTHORIZATION BILLS

Attempting to avoid another year without a bill authorizing its activities, the National Science Foundation (NSF) was pleased that both the House and Senate have passed authorization legislation. The House bill passed on June 9 by a vote of 405-5. It is a two-year bill covering FY 1989 and FY 1990. The House bill authorizes funding for FY 1989 at the president’s request, reallocates funding for the Science and Technology Centers, and provides for a new academic research facilities program authorized at $85 million in FY 1989. (Note: There are no appropriations for this program.)

The Senate bill passed on June 17 by a vote of 88-1. The bill authorizes the doubling of the Foundation’s budget over the next five years. It also includes a facilities program, codifies the existing Experimental Program to Stimulate Competitive Research (EPSCOR), and authorizes a new College and University Innovation Research Program to assist academic researchers to transfer their research into products and services.

Both bills earmark augmented funding for specific programs at NSF. In addition, they both include a "Buy America" provision for the purchase of a new icebreaker for the Antarctic program. This last provision is unacceptable to the NSF and the White House, and thus the bill may face a veto, after the House and Senate reconcile their differences in a conference committee.<<

6/24/88
HOUSE PASSES LABOR, HEALTH & HUMAN SERVICES, EDUCATION MONEY BILL

On June 15 the House of Representatives voted 362-46 to pass the FY 1989 appropriations bill for the Departments of Labor, Health and Human Services, and Education, and a number of independent agencies. The House once again demonstrated strong support for AIDS and other health research, and increased funding for education programs. What follows is a breakdown of the bill by agencies of interest to social and behavioral scientists. Specific comments about an agency are based on the language of the appropriations committee report. For fuller descriptions of the programs mentioned below see the special budget issue of Update (March 4, 1988).

Labor

The Bureau of Labor Statistics received $190.4 million, the amount of the administration’s request, and an 8% increase over FY 1988 funding. Funds were provided to restore the current population survey for local-area data statistics for major metropolitan areas. The requested program and staffing increases for the development of the Central Business Establishment List were also approved.

The research, development, and evaluation budget at the Employment and Training Administration took a $5 million reduction from the request and is funded at $13.6 million. After several years of increased funding for this function, other areas within Title IV of the Job Training Partnership Act were given priority for FY 1989.

Health and Human Services

The bill includes $1.235 billion for activities related to AIDS in the National Institutes of Health, the Centers for Disease Control (CDC), the Health Resources and Services Administration, the Alcohol, Drug Abuse and Mental Health Administration, and the Office of the Assistant Secretary for Health. This is the same as the request and represents a 33% increase over FY 1988 funds. (The Food and Drug Administration will provide another $65 million for AIDS under the provisions of another appropriations bill.) The House has once again rejected the administration’s request to place the funds in one consolidated account in the Office of the Assistant Secretary for Health. They have appropriated the funds directly to the program agencies (see below).

The National Institutes of Health received $6.27 billion for non-AIDS related activities and $588 million for AIDS research, a total appropriation of $6.8 billion. In addition, the committee, as is traditional, deferred allocations for those programs without authorizations (mostly in research training), whose request was $320 million. The non-AIDS increase is 7% over FY 1988 while the AIDS increase is 26% over FY 1988. Individual-investigator research projects will receive $4.165 billion, an increase of 10% over FY 1988.
The committee once again emphasized "its strong support for health and behavior research at NIH," noting that the proportion of the NIH budget allocated to such research has remained constant in recent years at 3%. The National Institute on Aging (NIA) received $202.1 million, an 8% increase over FY 1988, and a 3% increase over the FY 1989 request. NIA received $452,000 for AIDS. The National Institute of Child Health and Human Development (NICHD) received $407.7 million, an increase of 7% over FY 1988, and only 1% over the FY 1989 request. Included in this amount is $20.4 million for AIDS activities.

Research funding at the National Institute of Mental Health (NIMH) increased to $276.8 million, 9% more than FY 1988 funding and 2% more than the request. NIMH also received $49.4 million for AIDS activities, a 59% increase over the funding for FY 1988. The National Institute on Drug Abuse (NIDA) and the National Institute on Alcohol Abuse and Alcoholism (NIAAA) had their funding deferred, except for AIDS. NIDA received $122 million, an increase of 60% over FY 1988, while NIAAA received $6.3 million, a 31% increase over FY 1988.

The Centers for Disease Control (CDC) received $408.2 million for AIDS activities. Of this amount, $268.9 million is for information/education programs. The National Center for Health Statistics (now part of CDC) received the requested amount of $48.9 million for FY 1989, a slight (1%) increase over FY 1988. Policy-research funding in the Office of the Assistant Secretary for Planning and Evaluation received an almost 70% increase over the FY 1988 funding level and the FY 1989 requested funding level of $5 million, to $8.4 million. The additional funds are for continued support for the Institute for Research on Poverty at the University of Wisconsin.

**Education**

The bill includes $83.5 million for education research and statistics programs. Of this amount, $50.3 million is for research, dissemination, and information services within the Office of Educational Research and Improvement. These programs received $46.6 million in FY 1988, and the FY 1989 request was $51.5 million. The National Center for Education Statistics (NCES) received $33.2 million, of which $9.5 million was for the National Assessment of Educational Progress. In addition, $6.6 million was transferred to NCES from the department’s management account. Statistics programs received $21 million in FY 1988, and the administration had requested $29.5 million for FY 1989. The committee’s major concern for education research was to expand programs on rural schools at the regional laboratories.

International education and foreign language programs were level-funded at $30.6 million. The Fund for the Improvement of Postsecondary Education received a $2 million increase over FY 1988 to $13.6 million, the same as the request. The Law School Clinical Experience Program received $4 million, a slight increase over the $3.8 million in FY 1988. The Jacob Javits Fellowship Program received $8.3 million, a large 24% increase over FY 1988.
COSSA SEMINAR FOCUSES ON CHILD CARE QUALITY

It is becoming increasingly clear that child care quality has an impact on children, their families, and society as a whole; in order to improve the quality of child care in the United States, government at all levels must be willing to come to the aid of the parents and child care providers. This dual message was delivered at a COSSA-sponsored congressional breakfast seminar on June 21. Three prominent speakers addressed the child care issue: Carole Joffe, professor of sociology at Bryn Mawr's Graduate School of Social Work and Social Research; Kathleen McCartney, assistant professor of psychology at the University of New Hampshire; and Heidi Hartmann, director of the Institute for Women's Policy Research and director of Women's Studies at Rutgers University.

The event, one in a series of seminars designed to educate Congress on the latest findings in social and behavioral science research, was also sponsored by two COSSA Affiliates: the National Council on Family Relations, and the Society for Research in Child Development. The seminar, attended by more than 70 people, also enjoyed the support of three congressional sponsors: the House Select Committee on Children, Youth, and Families; Rep. Dale Kildee (D-MI), in his capacity as chairman of the House Subcommittee on Human Resources; and Sen. Christopher Dodd (D-CT), in his capacity as chairman of the Senate Subcommittee on Children, Family, Drugs, and Alcoholism.

Joffe offered an overview of past attempts to establish child care policy on a national level, beginning with the veto by President Nixon in 1971 of a major child care bill. Throughout the remainder of the 1970’s, further legislative attempts failed, according to Joffe, in large part because of "incredibly effective conservative mobilization" against them.

Since that time, the demands of everyday life have changed considerably, paving the way for child care’s current incarnation as a "legitimate" issue, Joffe said, noting that today lawmakers on both sides of the aisle are sponsoring various child care bills. Nevertheless, through her own research on social policy, Joffe contends that because of their controversial nature, family-oriented social programs tend to be shaped as conservatively as possible, with a limited role for government. What the nation's child care problem requires, Joffe contends, is a strong, direct government response which acknowledges the real costs involved in improving the current, aimlessly drifting system.

Referring to her own and others' research on child development and child care, McCartney, too, supported a strong response from government at all levels, as well as strong involvement on the part of the private sector. According to McCartney, child care needs are defined by different points of reference: for children, it's the quality of the program; for parents, it's affordability; for providers, it's wages and working conditions. McCartney noted that these reference points
are competing with one another, characterizing a system that's "about to self-destruct."

Several years' worth of research suggests that high-quality child care is good for children, McCartney said, referring to studies of provider-child ratios, group size, training and education of providers, and staff turnover. She also noted the importance of staff-child interaction in enhancing children's social development, and further made the observation that while government cannot legislate interaction, it can legislate factors (provider-child ratios, provider training, etc.) that enhance interaction. Furthermore, the effects of child care quality may stretch beyond the children, according to McCartney. For example, researchers are now finding that low-quality child care may diminish the mother's self esteem, and in turn may negatively affect her productivity on the job.

Echoing McCartney's concern about staff turnover, Hartmann, an economist, noted that child care workers' salaries are astoundingly low. Citing 1986 census bureau data, Hartmann reported that more than 40% of full-time child care providers earn less than $5.00 per hour, while less than 18% of all full-time workers have salaries that low. Three-fourths of part-time child care providers earn less than $5.00. To put these salary levels into context, Hartmann noted that California's welfare reform program mandates that no welfare recipient be required to take a job for less than $5.14 per hour; below that level, the state has determined that a family would be more impoverished by entering employment than by remaining on welfare.

Hartmann also noted that many child care providers receive no health benefits, paid vacation leave, or paid holidays. Nevertheless, census figures show that the average educational attainment level of providers is 14.6 years--more than two years above the national average--and the majority of providers have some college education.

Considering this inequity between pay and education, it's unsurprising that child care careers are "not fashionable," said Hartmann. The results: increasing rates of turnover at centers, decreasing rates of retention in the profession, and an erosion of continuity of care within child care settings. These factors, as McCartney mentioned in her discussion of research findings, have a negative impact on quality and, in turn, on the children.

Hartmann, referring to economic theory, likened the child care system to a market that "clears," but nevertheless needs "non-privatized" outside support. Hartmann noted that while there is a real need to increase the wages of providers in order to improve child quality, this will price many families out of the market; high-quality child care care is "labor-intensive," and therefore expensive. At the same time, good child care, like high-quality education, has universal social and economic benefits; in other words, healthy, happy, productive children grow up to be productive adults. As such, Hartmann concluded, child care deserves and requires strong government support."
The Centers for Disease Control (CDC) have announced a program of grants and/or cooperative agreements for epidemiological studies of AIDS and HIV infection and surveillance of pediatric AIDS. These awards are designed to assist researchers in the study of epidemiological questions concerning the risks of HIV transmission, evaluating the surveillance of pediatric AIDS, the prevalence and trends of disease in certain populations, and the development and evaluation of behavioral recommendations for reducing AIDS and HIV infections. Because of the large numbers of AIDS cases reported among minorities, the CDC is particularly encouraging applications for programs that examine the impact of AIDS and HIV infection on minority populations.

Four research concerns have been identified for funding under this program in FY 1988. These programmatic concerns are: prospective epidemiological studies of the transmission of HIV among monogamous heterosexual and homosexual couples; the epidemiological study of genital ulcer disease as a risk factor for HIV infection in heterosexual couples; epidemiological study to determine whether HIV can be transmitted in settings involving close contact among young children or children who are neurologically handicapped; and the extent to which the surveillance definitions used for AIDS in children and pediatric case reporting measure pediatric HIV-related morbidity.

Budget: $2 million is available in FY 1988 to fund approximately 8 new cooperative agreements or grants. Awards are expected to range from $100,000 to $350,000.

Funding Mechanism: Grants and/or cooperative agreements; initially for 12 months but renewable on an annual basis for up to 5 years.

Deadlines: July 15 for projects starting September 30; December 1 for projects starting April 1, 1989.

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