



CONSORTIUM *of* SOCIAL SCIENCE ASSOCIATIONS

1701 K STREET NW, SUITE 1150 • WASHINGTON, DC 20006 • PHONE: (202) 842-3525 • EMAIL: WNAUS@COSSA.ORG • WWW.COSSA.ORG

**Testimony in Support of Fiscal Year 2018 Funding for the
National Institutes of Health, Centers for Disease Control and Prevention, National Center
for Health Statistics, Agency for Healthcare Research and Quality, Institute of Education
Sciences, and International Education and Foreign Language Programs**

**Prepared for the Subcommittee on Labor, Health and Human Services, Education and
Related Agencies, Committee on Appropriations, United States House of Representatives
Submitted by Angela L. Sharpe, MG, Deputy Director
Consortium of Social Science Associations
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On behalf of the Consortium of Social Science Associations (COSSA), I offer this written testimony for the official record. For fiscal year (FY) 2018, COSSA requests **an increase of at least \$2 billion above the FY 2017 appropriated level, in addition to funds included in the 21st Century Cures Act for targeted initiatives for the National Institutes of Health (NIH).** We further urge the Subcommittee to appropriate **\$7.8 billion for the Centers for Disease Control and Prevention (CDC), \$170 million for the National Center for Health Statistics (NCHS), \$364 million for the Agency for Healthcare Research and Quality (AHRQ), \$670 million for the Institute of Education Sciences (IES), and \$78.5 million for the Department of Education's International Education and Foreign Language programs.**

COSSA serves as a united voice for a broad, diverse network of organizations, institutions, communities, and stakeholders who care about a successful and vibrant social science research enterprise that leads to discoveries that benefit all. It represents the collective interests of all fields of social and behavioral science research, including but not limited to sociology, anthropology, political science, psychology, economics, statistics, language and linguistics, population studies, law, communications, educational research, criminology and criminal justice research, geography, history, and child development. COSSA appreciates the Subcommittee's continued support for NIH, CDC, NCHS, AHRQ, IES, and Title VI and

Fulbright-Hays programs. Strong, sustained funding for these agencies is essential to our national priorities of better health and economic competitiveness.

National Institutes of Health – Increase by at least \$2 billion above FY 2017

Since 2003, NIH funding has declined by 23 percent after adjusting for biomedical inflation, despite recent budget increases provided by the Congress over the past two fiscal years. The agency’s budget remains lower than it was in FY 2012 in actual dollars. COSSA appreciates the Subcommittee’s leadership and its long-standing bipartisan support of NIH, especially during difficult budgetary times. There are, however, ongoing and emerging health challenges confronting the United States and the world, which COSSA believes necessitates a funding level for the NIH of **at least \$2 billion above FY 2017, in addition to the funds included in the 21st Century Cures Act for targeted initiatives**. This funding level would enable real growth over biomedical inflation, an important step to ensuring stability in the U.S. research capacity over the long term.

As this Committee knows, the NIH supports scientifically rigorous, peer/merit-reviewed, investigator-initiated research, including basic and applied behavioral and social sciences research, as it works “in pursuit of fundamental knowledge about the nature *and behavior* of living systems and the application of that knowledge to enhance health, lengthen life and reduce illness and disability.” However, we remain extremely concerned about continued criticism of some of the NIH’s funding decisions and mischaracterizations of NIH-supported projects, primarily in the behavioral and social sciences. Such criticisms are unsupported when one looks at the important contributions the behavioral and social sciences have made to the well-being of this nation. For example, due in large part to behavioral and social science research sponsored by the NIH, we are now aware of the enormous role behavior plays in health. At a time when genetic control over disease is tantalizingly close but not yet possible, knowledge of the

behavioral influences on health is a crucial component in the nation's battles against the leading causes of morbidity and mortality, namely, obesity, heart disease, cancer, AIDS, diabetes, age-related illnesses, accidents, substance abuse, and mental illness. The fundamental understanding of how disease works, including the impact of social environment on disease processes, underpins our ability to conquer devastating illnesses.

Centers for Disease Control and Prevention – \$7.8 billion, including \$170 million for the National Center for Health Statistics

COSSA urges the Subcommittee to appropriate **\$7.8 billion for the Centers for Disease Control and Prevention (CDC), including \$170 million for CDC's National Center for Health Statistics (NCHS)**. As the country's leading health protection and surveillance agency, the CDC works with state, local, and international partners to keep Americans safe and healthy. Social and behavioral science research plays a crucial role in helping the CDC carry out this mission. Scientists in fields ranging from psychology, sociology, anthropology, and geography to health communications, social work, and demography work in every CDC Center to design, analyze, and evaluate behavioral surveillance systems, public health interventions, and health promotion and communication programs that help protect Americans and people around the world from disease. Further, NCHS collects data on chronic disease prevalence, health care disparities, emergency room use, teen pregnancy, infant mortality, causes of death, and rates of insurance, to name a few. It provides critical data on all aspects of our health care system through data cooperatives and surveys that serve as the gold standard for data collection around the world. Data from NCHS surveys are used by agencies across the federal government (including NIH), state and local governments, public health officials, federal policymakers, and demographers, epidemiologists, health services researchers, and other scientists to better understand the impact of policies and programs on Americans' health.

Agency for Healthcare Research and Quality – \$364 million

COSSA urges the Subcommittee to appropriate \$364 million for the Agency for Healthcare Research and Quality (AHRQ). AHRQ funds research on improving the quality, safety, efficiency, and effectiveness of America’s health care system. It is the only agency in the federal government with the expertise and explicit mission to fund research on improving health care at the provider level (i.e., in hospitals, medical practices, nursing homes, and other medical facilities). Its work is complementary—not duplicative— of other HHS agencies. AHRQ-funded research provides us with the evidence and tools we need to tackle some of the health care system’s greatest challenges, including identifying effective strategies for helping primary care practices cope with the challenges of the opioid epidemic and reducing the incidence of healthcare-associated infections (HAIs) and medical errors. AHRQ reports and data give us vital information about the state of the U.S. health care system and identify areas we can improve. For example, the Congressionally-mandated *National Healthcare Quality & Disparities Report* is the only comprehensive sources of information on health care quality and health care disparities among racial and ethnic minorities, women, children, and low-income populations. AHRQ’s *Medical Expenditure Panel Survey* (MEPS) collects data on how Americans use and pay for medical care, providing vital information on the impact of health care on the U.S. economy. COSSA urges the Committee to ensure robust support for AHRQ’s critical health services research.

Institute for Education Sciences – \$670 million

COSSA requests a funding level of \$670 million for IES in FY 2018, which would build on the FY 2016 allocation, accounting for inflation over the past two years plus a four percent increase. As the research arm of the Department of Education, IES supports research and

data to improve our understanding of education at all levels, from early childhood and elementary and secondary education, through higher education. Research further examines special education, rural education, teacher effectiveness, education technology, student achievement, reading and math interventions, and many other areas. IES-supported research has improved the quality of education research, led to the development of early interventions for improving child outcomes, generated and validated assessment measures for use with children, and led to the establishment of the *What Works Clearinghouse* for education research (highlighting interventions that work and identifying those that do not). With an increasing demands for evidence-based practices in education, adequate funding for IES is essential to support studies that increase knowledge of the factors that influence teaching and learning and apply those findings to improve educational outcomes.

International Education and Foreign Language Programs – \$78.5 million

The Department of Education’s International Education and Foreign Language programs play a significant role in developing a steady supply of graduates with deep expertise and high quality research on foreign languages and cultures, international markets, world regions, and global issues. **COSSA urges a total appropriation of \$78.5 million (\$70.5 million for Title VI and \$8.0 million for Fulbright-Hays) for these programs**, which would represent a modest increase over current budgets. In addition to broadening opportunities for students in international and foreign language studies, such support would also strengthen the U.S.’s human resource capabilities in strategic areas of the world that impact our national security and global economic competitiveness.

Thank you for the opportunity to present this testimony on behalf of the social and behavioral science research community.