



Volume 25, Issue 12

June 26, 2006

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HOUSE COMMITTEE PROVIDES 8 PERCENT INCREASE FOR NSF

The House Appropriations Committee, confirming the recommendations of its Science, State, Justice, Commerce Subcommittee, provided the National Science Foundation (NSF) \$6.02 billion for FY 2007. This sum fully funds the President's requested 8 percent increase over the FY 2007 appropriation.

It confirms Subcommittee Chairman Rep. Frank Wolf's (R-VA) commitment, made at the panel's hearing in early March, to provide NSF the full request.

The Research and Related Activities account received \$4.666 billion, the same as the request and 7.7 percent above FY 2007. The Committee did not provide specific funding allocations for the individual directorates, such as the Social, Behavioral and Economic Sciences (SBE), but it expects NSF to follow the President's requested levels. Under the Administration's proposed budget SBE would receive \$213.8 million, an increase of nearly \$14 million, or just below 7 percent.

The panel recommended \$832.4 million for the Education and Human Resources Directorate (EHR). This is \$35 million above the FY 2007 level and \$16.2 million above the request. The Committee report noted: "The most critical need in this regard [NSF's education programs] is to improve K-12 and undergraduate education in science and math." The appropriation also includes significant increases for those programs that "extend greater research opportunities to under-represented segments of the scientific and engineering communities."

The full House will take up the appropriation bill the week of June 26.

Census Funding: ACS Fully Funded; Money Added to Keep SIPP Going

The Committee provided \$884 million for the Census Bureau, a \$82 million increase over FY 2006 and \$6 million above the President's request. For the Periodic Censuses account, which includes funds for the ramp-up to the 2010 Census and the American Community Survey (ACS), the panel appropriated \$694.1 million, the level requested by the President, and \$87.7 million above the FY 2006 level. The ACS was fully funded at the requested level of \$179.7 million.

The Salaries and Expenses account received \$190.1 million from the Committee, almost \$6 million above the President's request, and \$5.4 million below the current year. Rep. Jose Serrano (D-NY) sponsored a successful amendment to include an extra \$10 million for the Survey of Income and Program Participation (SIPP), which the Census Bureau has decided to replace. The President's budget included \$9.2 million for SIPP to redesign the survey. An additional \$10 million for SIPP will be made available from mandatory funds.

As the bill moves to the floor, there is concern that the Census Bureau increase will become a target for amendments that want to raise funding for law enforcement programs. This happened last year when \$20 million was lost from the Committee's allocation for the Bureau.

Recommendations for NIJ and BJS

In funding the Department of Justice (DOJ) the Subcommittee again rejected the Administration's attempt to eliminate funding for a number of programs providing law enforcement assistance to states and localities. With regard to the research and statistics arms of DOJ, the panel also rejected the Administration's attempts to include management and administration funds in the allocations for agencies such as the National Institute of Justice (NIJ) and the Bureau of Justice Statistics (BJS), keeping them in a separate account. Therefore, NIJ received a \$55 million allocation, slightly more than last year and slightly less than the request. NIJ also would receive funding under the Byrne Discretionary program, the Violence Against Women program (although the funding for NIJ was cut from \$5 million to \$2.5 million), and the DNA Initiative. The panel provided \$36 million for BJS, slightly more than in FY 2006.

MINIMUM WAGE INCREASE STALLS LABOR-HHS BILL

On June 13, the House Appropriations Committee approved its version of the Labor, Health and Human Services and Education Appropriations (Labor-HHS) bill. The measure provides \$454.6 billion for mandatory programs and \$141.9 billion for discretionary programs. While Appropriations Chair, Rep. Jerry Lewis (R-CA) has expressed his desire to have all of the appropriations bill passed by the House before the July 4th recess, Majority Leader John Boehner (R-OH) has indicated that there is a low probability that there will be floor consideration of the bill as the result of the Democrats' successful effort in attaching a \$2.10 increase in the minimum wage to the bill, the first one in nine years. Seven Republicans crossed the aisle to support the minimum wage measure. The Senate Labor-HHS subcommittee is tentatively scheduled to consider its version of the bill on July 18, with full committee action on July 20.

In the report accompanying the House bill, the Committee noted that it "recognizes the role of serendipity in science, but continues to believe that thorough and thoughtful strategic planning is a far superior alternative." Accordingly, it directed each NIH Institute and Center (IC) to develop and submit a report no later than February 15, 2007, that identifies, by IC, "measures to be taken to ensure that awards made via the peer review process in FY 2007 and beyond reflect the strategic plans that have been published by each IC in conjunction with the extramural community."

Interestingly, the Committee also noted that it is "troubled" with the way the NIH presents its budget and directed the NIH to provide a substantial increase in the level of detail that it provides the Committee in justification of its budget to the Congress. In its FY 2008 budget justification NIH is instructed to include: information showing funding at the program level, including comparisons between the requested level and the two prior fiscal year appropriations; information depicting major program or activity increases and decreases as compared to the previous fiscal year along with a detailed justification of the reasons for the increases or decreases; and, for each new initiative proposed in FY 2008, the cost and goals of that initiative and a detailed justification of activities proposed to be undertaken in the initiative (including costs of each major activity).

The Committee emphasized that while it does not direct funding to particular diseases and has traditionally provided maximum flexibility to NIH in order to allow it to fund programs and projects in a manner consistent with the state of the science, "it is appropriate that the American people and their elected representatives have access to more detailed information regarding the manner in which NIH invests and proposes to invest increasingly scarce taxpayer resources."

The Office of Behavioral and Social Sciences Research (OBSSR) is encouraged by the Committee to continue working to build alliances among institutes that support and nurture basic behavioral and social science research. In particular, OBSSR is encouraged to "partner with the NIGMS [National Institute of General Medical Sciences] 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 conditions."

Acknowledging that "demographic research is essential for understanding the health, socioeconomic, and geographic implications of the rapidly changing U.S. population," the Committee commended the **National Institute of Child Health and Human Development (NICHD)** for its "impressive demographic research portfolio." The Committee, however, expressed its disappointment of the "proposed elimination of funding for the **National Children's Study (NCS)**. NICHD has the lead role in directing the congressionally-mandated, multi-institute, multi-agency longitudinal study. The Committee included bill language directing NICHD to dedicate \$69 million from within funds provided to continue the NCS, including funding all Vanguard Centers and any other activities that were planned for FY 2007. The Committee stressed that if NIH wishes to request that Congress discontinue the study in future fiscal years that "a complete justification of the reasons for terminating the study accompanies the budget request, rather than one sentence tucked away in response to prior year report language."

NIH is commended for launching the Clinical and Translational Science Awards (CTSA) program. The agency is encouraged to expand "the use of this concept across multiple ICs as quickly as possible to ensure that potentially life-saving breakthroughs reach patients without delay." The Committee requested a detailed report from NIH by April 1, 2007 detailing the progress, and identifying potential barriers to widespread implementation of the CSTA program. The Committee expressed its belief that using "clinical and translational research to move scientific advances developed in the laboratory to mainstream medical practice is critical to the effort to cure disease."

The Committee supports the **National Heart, Lung, and Blood Institute (NHBLI)** efforts to place a high priority on heart disease, stroke and other cardiovascular diseases in women by increasing its resources to stimulate, strengthen, and intensify its investment in basic, clinical, translational, and trans-institute cardiovascular disease research through all available mechanisms. Recognizing that little is known about the best methods to achieve weight management in early adulthood, the Committee urges the NHLBI to develop and test innovative practical, cost-effective ways for preventing weight gain in young adults to reduce heart disease, stroke, and other cardiovascular diseases.

The **National Institute on Aging (NIA)** is commended for "supporting exceptional demographic and economic research on the implications of population aging." The Committee urges the Institute continue its support for the Health and Retirement Study (HRS) and is applauded for "proactively reviewing its data collection activities" (see other story). The Committee also recommends that NIA expand the number of Edward R. Roybal Centers on Applied Gerontology, which are designed to move promising social and behavioral basic research findings out of the laboratory and

into programs, practices, and policies that will improve the lives of older people and the capacity of society to adapt to societal aging.

The **National Institute on Drug Abuse** (NIDA) is recognized for its efforts in the Criminal Justice Drug Abuse Treatment Studies (CJ-DATS), as well as its support of research in those populations that are disproportionately impacted by the consequences of drug abuse, including geographic areas where HIV/AIDS is high and/or growing among African Americans and in criminal justice settings. The Committee also communicated its concern about the “well-known connections between drug use and crime.” Emphasizing that the “reach continues to demonstrate that providing treatment to individuals involved in the criminal justice system significantly decreases future drug use and criminal behavior, while improving social functions.”

The Committee is “disappointed to learn that the **National Institute of Mental Health** (NIMH) intends to reduce its commitment to training minority scientists through the Minority Fellowship Program and the Career Opportunities in Research program.” NIMH is encouraged to continue to fund programs to meet the demands for research on disparities in mental disorders.

Acknowledging its awareness of new **National Institute on Alcohol Abuse and Alcoholism** (NIAAA)-funded research findings suggesting that exposure to alcohol advertising increases the likelihood that young people will drink and drink heavily, the Committee urges that NIAAA engage in additional study of alcohol advertising issues as an underage drinking prevention research priority. The Committee further encourages that this research include data on youth brand and beverage preferences.

The **National Institute of Nursing Research** (NINR) supports a substantial amount of behavioral research. In its direction to NINR, the Committee recognizes the importance of behavioral research in preventing and treating disease. While highlighting that it understands the biological basis of disease is essential and behavioral factors have a critical influence on the onset, course, and duration of disease and in successful management of many disease conditions, the Committee recommended the support of behavioral research, “including research that examines the interactions of biological and behavioral factors and their effect on treatment and prevention.”

Report language addressing the **Agency for Healthcare Research and Quality** (AHRQ) pertained to the Committee’s concern about the “prevalence of undiagnosed and untreated mental illness among older Americans.” It emphasizes that while there are effective treatments for affective disorders, including depression, anxiety, dementia, and substance abuse and dependence available, there is an urgent need to translate advancements from biomedical and behavioral research to clinical practice. The Committee wants the AHRQ to support evidence-based research projects, particularly those focused on the diagnosis and treatment of mental illness in the geriatric population, and to disseminate evidence-based reports to physicians and other health care professionals.

The Committee noted that it is conscious of the fact that obesity rates in children have risen dramatically in recent years and that obesity may soon overtake tobacco as the leading preventable cause of death. It is requested that the agency submit a report on the effectiveness of weight reduction programs to the Committee no later than 18 months after passage of the bill. The report should evaluate the available scientific evidence regarding the safety and effectiveness of the programs, behavioral modifications, and other weight loss methods, and how successful the programs are in helping individuals achieve short-term and long-term weight loss and sustain long-term weight maintenance.

SENATE JOINS APPROPRIATION GAME: AGRICULTURE BILL ALLOCATIONS MADE

On June 20, the Senate Agriculture and Rural Development Appropriations Subcommittee became the first Senate panel to mark up its FY 2007 appropriations bill. The Subcommittee’s recommendations were ratified by the full Appropriations committee a few days later. With action at the subcommittee and full committee level on the Homeland Security, Energy and Water, Interior and the Environment, and Legislative Branch bills, the Senate has finally begun its role in the annual funding game.

The Appropriations Committee provided slightly less than \$76 million for the **Economic Research Service** (ERS), about \$0.8 million above the FY 2006 level, \$5 million below the House number, and \$6.6 million below the Administration’s request. Unlike the House, which provided the funds to implement the proposed Agricultural and Rural Development Information System to monitor the changing economic health of rural areas, the Senate Committee appeared only concerned with the “Organic Production and Market Data Initiative.”

The panel recommended \$148.7 million for the **National Agricultural Statistics Service** (NASS). This is a \$9.6 million boost over FY 2006, \$500,000 more than the House, but \$3.8 million less than the request.

The Senate panel provided \$185.2 million for the **Hatch Act** programs, almost \$9 million over last year and \$1.9 million above the House. The **National Research Initiative Competitive Grant program** (NRI) received \$190.2 million, a \$9 million increase from last year, slight more than the House. Like the House, the Senate panel rejected the Administration’s attempt to move some of the Integrated Activities’ programs into the NRI, continuing to fund them in a separate account.

As usual, the panel rejected the Administration’s call for eliminating earmarks, appropriating \$119.3 million directed at specific programs in specific states for projects Congress believes are important. The Rural Policies Research Institutes (RUPRI) in Nebraska, Iowa, and Missouri received \$1.2 million.

WOMEN AND GIRLS IN THE CRIMINAL JUSTICE SYSTEM

According to Bureau of Justice Statistics data, the number of female prisoners rose more than twice as much as the increase among men during 2004. The rise of women and girls as offenders is a developing trend that has sparked the attention of many social and behavioral scientists. In addition, women as victims of crime, has also engendered considerable research interest.

On May 19, the Consortium of Social Science Associations (COSSA), in conjunction with the American Sociological Association (ASA) and the Institute for the Advancement of Social Work Research (IASWR), held a Capitol Hill briefing on the state of women and girls in the criminal justice system to further examine these issues.

A panel of social scientists presented research results on girls and women as offenders and victims. Margaret Zahn of RTI International and North Carolina State University co-directs the Girls Study Group, a multidisciplinary group of researchers and practitioners attempting to answer questions about such factors, as the causes and correlates of female delinquency. Funded by the Office of Juvenile Justice and Delinquency Prevention, the Girls Study Group evaluates programs to help determine the best interventions for female delinquents. Recent data shows that 29 percent of juveniles who are arrested in this country are girls, and they account for 15 percent of the juveniles who are in custody. The primary offense in these cases was usually simple assault.

Zahn pointed out that girls and boys experience many of the same risk factors that lead to delinquency, but the difference among boys and girls is in the sensitivity to and the rate of exposure to those factors. Risk and protective factors associated with delinquency that are more important for girls are: early puberty or developmental factors, sexual assault, depression and anxiety, cross-gender peer influence, and attachment and bonding to your school.

Candace Kruttschnitt highlighted findings from a National Institute of Justice supported study that examined the 'life course perspective' of the violent victimization of women. The University of Minnesota sociologist professor described a life-course perspective as one that "draws attention to the question of whether victimization experiences unfold across relationships over time." Kruttschnitt further explained that this perspective "draws attention to relationships and linked lives and asks to what degree do specific relationships, parent, child, dates, acquaintances, strangers, shape the kinds of violence that occurs within them." Using data conducted from the National Violence Against Women Survey, Kruttschnitt explained that relationship type has a strong impact on the nature of violence women experience.

Barbara Solt of the IASWR presented the results of research conducted by Sheryl Pimlott Kubiak of Wayne State University. Kubiak was unable to attend the seminar because of a death in the family. Solt clarified the misperceptions about the classification of female offenders in the criminal justice system. "Often when we think about women in the criminal justice system we think about prison," she said. "However, 85 percent of women in the criminal justice system are in the community, on parole, and or probation" and these women are generally lumped into services designed for and by men. She argued that the increase in women and girls in the criminal justice system calls for a deeper look into the design of service systems. "Understanding who the women are and what their service needs are is the first step in designing appropriate interventions" concluded Solt.

To obtain a transcript of this briefing please email coffa@coffa.org.

NIH AND THE UNIVERSITY OF MICHIGAN CONTINUE PARTNERSHIP

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 Health and Retirement Study (HRS). The renewal provides HRS approximately \$70 million dollars in funding over the next six years.

Mandated by Congress in 1992, HRS follows more than 22,000 people over the age of 50 to examine the scientific and policy challenges that the U.S. will face as the population ages. It is the nation's leading source of data for the over 50 age group. Rep. John Dingell (D-MI), who attended the announcement ceremony, called HRS "a very important and critical national survey." ISR Director and COSSA Board Member James S. Jackson and HRS co-director David Weir also attended the announcement by NIA Director Richard Hodes.

HRS comprises researchers from the fields of economics, health, sociology, psychology, and family science. The study examines relationships between health, income, and wealth as Americans get older. The data collected provide useful information for researchers, policy analysts and program planners researching the effects of the "senior boom" on the nation. HRS focuses not only on biomedical measures such as blood pressure, cholesterol, and blood sugar, and also examines psychological effects like interpersonal relationships and mental well being. HRS has begun collecting DNA, with participants' permission, to be stored for possible future research.

In July 2004, COSSA presented a congressional briefing on the results of the HRS. Edited transcripts of "Growing Old in an Aging America" are available by contacting COSSA at: coffa@coffa.org.

TOBACCO USE: THE STATE-OF-THE-SCIENCE CONFERENCE HELD

"A national, coordinated strategy for tobacco control that casts a wide net" is needed to address the "important challenge facing the public health, medical, and political communities" of how to achieve further progress in reducing tobacco usage. This is according to a NIH panel convened for a State-of-the-Science Conference held on June 12-14 in Bethesda, MD. The conference was designed to assess the available scientific evidence on tobacco use prevention, cessation, and control.

Tobacco use remains the leading preventable cause of premature death. More than 440,000 Americans die from disease caused by tobacco use. According to available research, in the last 50 years, "tobacco use per capita has decreased from about 14 pounds a year in the 1950s to about 5 pounds per year in 2000, suggesting that interventions work." The Panel, led by David Ransohoff, University of North Carolina at Chapel Hill, addressed six questions:

1. What are the effective population- and community-based interventions to prevent tobacco use in adolescents and young adults, including among diverse populations?

2. What are the effective strategies for increasing consumer demand for and use of proven, individually oriented cessation treatments, including among diverse populations.
3. What are the effective strategies for increasing the implementation of proven, population-level, tobacco-use cessation strategies, particularly by health care systems and communities?
4. What is the effect of smokeless tobacco product marketing and use on population harm from tobacco use?
5. What is the effectiveness of prevention and of cessation interventions in populations with co-occurring morbidities and risk behaviors?
6. What research is needed to make the most progress and greatest public health gains nationally and internationally?

"It's important to recognize tobacco use as a serious, chronic health issue that requires sustained attention, said Ransohoff. "Quitting is a struggle, but researchers have learned a lot about what help people to quit smoking. We need to make sure that effective interventions reach the people who need them most."

The Agency for Healthcare Research and Quality provided an evidence report, Evidence Report on Tobacco Use: Prevention, Cessation, and Control, summarizing available evidence on the effectiveness of community- and population-based efforts to prevent tobacco use and encourage smoking cessation, and on the impact of smokeless tobacco marketing.

The 14-member Panel included experts in the fields of medicine, general and pediatric psychiatry, addiction medicine, nursing, social work, population science, cancer prevention, minority health and health disparities, clinical study methodology, clinical epidemiology, and a public representative.

Additional research needed to improve and implement effective interventions and policies, to develop new population- and community-based interventions, and address the issues around infrastructure and smokeless tobacco cited by the Panel include:

- Understand the role of different media (TV, print, Web, radio, etc.) in increasing consumer demand for and use of effective, individually oriented tobacco-cessation treatments for diverse populations.
- Identify and reduce barriers faced by providers, insurers, policymakers, and others to implement effective strategies to increase and sustain demand for smoking-cessation treatment.
- Examine the effectiveness of different components of telephone-based counseling (population quit lines vs. provider-associated programs, self-referral vs. provider referral to telephone-based counseling, bundling of services within programs).
- Increase policymakers' and the public's awareness of effective strategies for preventing tobacco use, promoting smoking cessation, and decreasing harm from environmental tobacco exposure.
- Improve school-based interventions to achieve sustained tobacco prevention. Potential improvements might include targeting programs to diverse populations, starting programs in elementary schools, and learning the role of after school programs.
- Determine the effectiveness of implementing interventions in settings other than schools and health care facilities, such as homes, community organizations, faith-based institutions, pharmacies, stores, bars, workplaces, military institutions, and correctional institutions.
- Determine the effectiveness of incorporating social context (e.g., culture, neighborhoods, and social networks) in interventions to prevent or to stop tobacco use.
- Evaluate the long-term effects of social marketing strategies on tobacco use, particularly to counter tobacco advertising.
- Standardized definitions and methods to describe tobacco-use status, interventions, processes, and outcomes so that studies may be compared more readily. Encourage cost and economic studies.
- Educate providers, including physicians, dentists, nurses, and allied health professionals about the importance of tobacco-related diseases and the availability and delivery of effective interventions.
- Conduct research on the impact of smokeless tobacco.

For more information see: <http://consensus.nih.gov/2006/2006TobaccoSOS029html.htm>

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The Consortium of Social Science Associations (COSSA), an advocacy organization for Federal support for the social

and behavioral sciences, was founded in 1981 and stands alone in Washington in representing the full range of social and behavioral sciences.

UPDATE is published 22 times per year. Individual subscriptions are available from COSSA for \$80; institutional subscriptions - \$170; overseas mail - \$170. ISSN 0749-4394. Address all inquiries to COSSA at newsletters@coffa.org

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