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Welcome to 2012

Happy New Year! Having celebrated our 30th Anniversary last November, this is the first issue of Volume 31 of the newsletter of the Consortium of Social Science Associations (COSSA). Our goal remains to inform the social and behavioral science community about activities in Washington, DC and elsewhere that have important implications for the conduct of research and its dissemination to policy makers. We appear for the most part biweekly (with the exception of February, August, and December). In early March, we will present a special issue that will analyze President Obama's proposed Fiscal Year 2013 federal budget for over 50 agencies important to the production of social and behavioral science research. We hope you will appreciate our coverage and if you have any questions or comments please let us know at coffa@coffa.org. May your New Year be productive

and enjoyable!

This year brings many historic anniversaries: 200 years since the War of 1812; 150 years from what is still the bloodiest battle in American history-Antietam; and 50 years since one of the seminal events of the nuclear age-the Cuban Missile Crisis. It is also a presidential and congressional election year and between now and November 6 we will receive millions of messages on behalf of and against various candidates. Election years always make for expedited congressional sessions and the expectation is that 2012 will be no exception. How that will affect outcomes on spending and other issues is still unclear.

We do know that the budget deal of 2011 set the parameters for overall spending for FY 2013. We also know that the failure of the Super Committee to reach an agreement to reduce the debt leaves in place, for the moment, the sequestration or across-the-board cuts scheduled for implementation in 2013. Early in 2012, the President and Congress are forced to focus again on extending the social security tax cut and other leftover items from their December 2011 confrontation.

Many bills like the reauthorization of the Elementary and Secondary Education Act and the Institute of Education Sciences are still awaiting action. With the announced resignation of Assistant Attorney General Laurie Robinson, the attempt to codify actions to ensure the independence of the National Institute of Justice and Bureau of Justice Statistics will intensify.

Members will return on January 17 for the second session of the 112th Congress. There is some hope that the confrontations that signified the first session last year may have peaked and the election year may temper the conflict somewhat. With public approval of Congress at all-time lows, the focus may turn to getting things done. The emphasis here is on the word *may*.

FY 2012 Appropriations Process Completed

Showing improvement over the FY 2011 appropriations process which was completed in April 2011, seven months after the start of the Fiscal Year, Congress completed the FY 2012 spending season on December 17, 2011 only two and half months after the commencement of the new fiscal year.

For FY 2012, Congress wrapped the twelve funding bills into two: a Minibus that passed on November 17 and contained three of the bills (see Update, [November 21, 2011](#)); and an Omnibus that was signed into law on December 23 and consisted of the nine remaining bills.

The chart below provides the numbers for the agencies that affect social and behavioral science research and data. For descriptions of the funding and related congressional directives for the agencies in the Minibus see the Update referenced above. What follows are descriptions, including some conference report language, for those agencies in the Omnibus. The results demonstrate the impact of an emphasis on reducing spending and in some cases eliminating small programs.

FY 2012 APPROPRIATIONS

(in millions)

FY 2011 APPROP	FY 2012 REQUEST	FY 2012 APPROP
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Agriculture

Econ Research Service	81.7	86.0	77.7
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National Agricul Stat Service	156.4	165.4	158.6
Agric Food and Research Init Hatch Act	264.5	325.0	264.5
Rural Development Centers	236.3	204.0	236.3
	1.0	NA	1.0

Commerce

Census Bureau	1,149.30	1,024.80	888.4
Bureau of Economic Analysis	93.4	108.8	92.2

Education

(Excludes 0.189 Percent Across the Board Cut)

Internl Educ and For Languages	75.7	125.9	74.2
Javits Fellowships	8.1	0.0	0.0
Grad Assist in Areas of Natl Need	31.0	40.7	31.0
Educ Res, Devel, Dissem	199.8	200.4	190.1
Education Statistics	108.3	117.0	109.0
Regional Educ Labs	57.5	69.7	57.5
Statewide Data Systems	42.2	100.0	38.1
Fund for Improve Higher Ed	19.6	150.0	3.5
Thurgood Marshall Legal Opport	0.0	3.0	0.0

Health

(Excludes 0.189 Percent Across the Board Cut)

National Institutes of Health	30,685.0	31,748.0	30,690.0
Agency for Healthcare Res and Quality	372.1	366.4	369.1
Centers for Disease Prevention	5,704.3	5,872.8	5,723.1
Natl Center for Health Stats	138.7	161.9	138.7

Homeland Security

Research, Develop and Innovation	NA	659.9	265.8
University Programs	39.9	36.6	36.6

Housing and Urban

Development

(Excludes the 1% of HUD Funding Set Aside)

Office of Policy Development and Research	48.0	57.0	46.0
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Justice

(Excludes Set Aside of Two Percent of Office of Justice Programs)

National Institute of Justice	48.0	55.0	40.0
Bureau of Justice Statistics	60.0	57.5	45.0

Labor

(Excludes 0.189 Percent Across the Board Cut)

Bureau of Labor Statistics	610.2	647.0	610.2
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National Science Foundation

Total	6,859.9	7,767.0	7,033.1
Research and Related Activities	5,563.9	6,253.8	5,719.0
Education and Human Resources	860.0	911.2	829.0

Department of Education

Congress maintained the 40 percent reduction enacted in FY 2011 for the international education and foreign language programs of Title VI and Fulbright-Hays. It completely eliminated funding for the Institute for International Public Policy, which provided support for enhancing opportunities for underrepresented groups to enter foreign policy service. In rejecting the Administration's attempt to restore the FY 2011 cuts, Congress acknowledged "that funding provided in the conference agreement for international education will likely only allow funding for continuation costs." At the same time, the conferees "direct the Secretary to use international education domestic program funding to maintain a focus on continuing instruction in foreign languages that are less commonly taught, emphasize those critical for national security, and to maintain a pool of international experts for national security needs." The Department of Education is working on a whole new approach to this area having decided that after 53 years Title VI and Fulbright-Hays have outlived their purpose.

Congress also rejected the Administration's proposal to transform the Fund for the Improvement of Postsecondary Education (FIPSE) that would have provided funding for the first year of a "First in the World initiative," to encourage innovative approaches to improving college completion, support research, and to scale up and disseminate proven strategies. Instead Congress decimated FIPSE's funding, allocating only \$3.5 million, most of which the Congress specified for the Training for Realtime Writers program, the European Union-United States Atlantis Program, and the continuation of a data contract. FIPSE had cancelled the FY 2011 comprehensive program solicitation and from this allocation, it appears that program is dead.

An administration suggestion that Congress accepted was to subsume the Javits Fellowship Program, which provided graduate student support for those studying in social science, arts, and humanities disciplines, into the Graduate Assistance in Areas of National Need (GAANN) program. However, Congress did not also move the funding for Javits into GAANN. The Department of Education is currently working to determine how to merge the two programs. In the December 2011 solicitation for the GAANN program the only areas designated as "national need" that were related to the Javits' subjects were international education, foreign language training, and education research. Aside from the extinction of the Javits program, Congress refused to resuscitate the Thurgood Marshall Legal Educational Opportunity Program.

For the Institute of Education Sciences (IES), the Omnibus allocated slightly less for Research,

Development and Dissemination, and a tiny bit more for Statistics than in FY 2011. The conference agreement also provided \$11 million for "awards to public or private organizations or agencies to support activities to improve data coordination, quality and use at the local, State and national levels." This within an account the administration sought to expand and the Congress wound up reducing.

The Bureau of Labor Statistics received the same amount for FY 2012 as Congress appropriated in FY 2011. In addition, Commissioner Keith Hall has left the agency as his four year term came to an end.

John Galvin, who was Acting Deputy Commissioner following the retirement of Phil Rones, is likely to replace Hall for the time being.

Department of Homeland Security

For the Department of Homeland Security (DHS) Congress accepted the Administration's proposed slight reduction to the University Programs budget. The major social science Center of Excellence, the Center for the Study of Terrorism and Responses to Terrorism (START) at the University of Maryland, has received a five-year renewal. The Department's attempt to restructure the Research, Dissemination and Innovation portfolio was approved by Congress with severely reduced funding and a caveat to provide more specific information about spending to the appropriations committees.

National Institutes of Health and Other Health Agencies

For the **National Institutes of Health** (NIH), the conference agreement provided an appropriation slightly above the FY 2011 funding level, but somewhat below the President's request. Further, this total does not include any allocation for the Global Fund to Fight AIDS Tuberculosis and Malaria, funding for which is provided via the State Department.

In the conference report accompanying the bill, the conferees strongly urged the NIH to "ensure that its policies continue to support a robust extramural community and make certain sufficient research resources are available to the more than 300,000 NIH-supported scientists at over 3,100 institutions across the country." They expressed their concern that the NIH "has failed to support the number of new, competing [research project grants (RPGs)] that it estimated would be awarded in its annual congressional budget justifications." The conferees stressed that they expect the agency to "evaluate its new grant-estimating methodology to improve its accuracy and support" for as many new and competing awards as possible. Highlighting the fact that 90 percent of the NIH's budget has gone to extramural research support by the agency, the report strongly urged the agency to maintain this level in FY 2012. Congress further encouraged the NIH to establish safeguards to maintain the percentage of funds used to support basic research across the agency.

The agreement provides \$1.46 billion for the Office of the Director (OD). The report directs the NIH to ensure, "as practicable, the programs and offices within the (OD), [including the Office of Behavioral and Social Sciences Research (OBSSR)] receive increases proportional to the overall increase." NIH is also expected to continue its "long-standing policy for Common Fund projects to be short-term, high-impact awards, with no projects receiving funding for more than 10 years." Possible exceptions to this policy include the Pioneer Awards; otherwise the NIH is expected to explain any exceptions in its FY 2013 congressional budget justification. It included \$545.96 million for the Fund.

Congress allocated \$193.9 million for the **National Children's Study**.

The final FY 2012 budgets for the Institutes and Centers:

NCI	\$5,081,788,000
NHLBI	\$3,084,851,000

NIDCR	\$411,488,000
NIDDK	\$1,800,447,000
NINDS	\$1,629,445,000
NIAID	\$4,499,215,000
NIGMS	\$2,434,637,000
NICHD	\$1,323,900,000
NEI	\$704,043,000
NIEHS	\$686,869,000
NIA	\$1,105,530,000
NIAMS	\$536,801,000
NIDCD	\$417,061,000
NINR	\$145,043,000
NIAAA	\$460,389,000
NIDA	\$1,055,362,000
NIMH	\$1,483,068,000
NHGRI	\$513,844,000
NIBIB	\$338,998,000
NCCAM	\$128,299,000
NIMHD	\$276,963,000
FIC	\$69,754,000
NLM	\$338,278,000

NCRR Eliminated/NCATS Stood Up

The conference agreement included language eliminating the National Center for Research Resources (NCRR) and creating the National Center for Advancing Translational Sciences (NCATS). (See related story below.) According to the NIH, the budget for NCATS is primarily a reallocation of funds from programs previously located in the Office of the Director, National Human Genome Research Institute, and the NCRR. For translational sciences, the measure provides \$576.5 million of which up to \$10 million shall be available to implement the Cures Acceleration Network (CAN). For the Clinical and Translational Sciences Awards (CTSAs) program, the bill provides at least \$487.8 million.

While welcoming the creation of NCATS, the conferees expressed their disappointment in the request for its creation. The report notes that the President's proposed budget request for FY 2012 included a vague description of NCATS but did not formally request funding for the restructuring or provide any details about which components of NIH would be consolidated into the new Center. The conferees noted that the "failure to do so caused unnecessary uncertainty about the proposal and contributed to the impression that it was being rushed."

Further, it is noted that the "process for evaluating the merits of NCATS reorganization did not comply with the NIH Reform Act of 2006 with respect to the role of the Scientific Management Review Board (SMRB)." Accordingly, NIH is encouraged to let the "lessons learned" regarding the standing up of NCATS "guide" it as the agency considers another proposed restructuring, "one that would involve consolidating NIDA [Drug Abuse], NIAAA [Alcohol Abuse, and Alcoholism] and components of other Institutes and Centers (ICs) into a new Institute devoted to research on substance use, abuse and addiction." The report added that NIH plans to "adopt a more deliberate approach" in evaluating the need for this Institute. Accordingly, the conferees "strongly recommend that this approach should include full consideration by the SMRB and that if the administration ultimately decides to seek such a restructuring, it should provide sufficient details in a formal budget request to Congress."

The report recommended that the CTSA receive full funding as it nears full implementation. The NCATS Director is expected "to ensure the current focus on the full spectrum of translational research is maintained, and CTSA resources are not diverted. The inclusion of patient-centered research, community engagement, training, dissemination science, and behavioral research is extremely important to the translation and application of basic science discoveries and success of the CTSA. To ensure that the five-year investment in the CTSA is maintained, the conferees urge the NIH to support a study by the Institute of Medicine (IOM) that would evaluate the CTSA program and recommend whether changes to the current mission are needed. The review should include stakeholders' input and be available no later than 18 months after the enactment of this bill."

For the **Agency for Healthcare Research and Quality (AHRQ)**, Congress allocated slightly less funding for FY 2012 than in FY 2011. The conferees provided \$43.4 million for AHRQ's investigator-initiated research in the Crosscutting Activities Related to Quality, Effectiveness and Efficiency Research portfolio.

For the **Centers for Disease Control and Prevention (CDC)**, the conference agreement includes a program level of \$5.72 billion. The measure funds the Preventive Health and Health Services Block Grant program, which had been proposed for elimination, at \$80 million.

NIGMS Reorganizes: Creates Division of Training, Workforce Development, and Diversity

The standing up of the National Center for Translational Sciences (NCATS), required adjustments the organization of a number of the NIH Institutes and Centers (ICs), including the National Institute of General Medical Sciences (NIGMS). On January 4th, Acting NIGMS director Judith Greenberg announced that the institute established two new divisions to integrate the programs transferred to it from the National Center for Research Resources (NCRR). The new divisions include the Division of Training, Workforce Development, and Diversity and the Division of Biomedical Technology, Bioinformatics, and Computational Biology.

The Division of Training, Workforce Development, and Diversity (TWD) merges the Institute's Division of Minority Opportunities in Research (MORE) and the NCCR's Institutional Development Award program. This division will be lead by former MORE director Clifton A. Poodry. In announcing the Division's creation, Greenberg noted that it was created because NIGMS recognizes "that training and the development of an outstanding and diverse biomedical workforce are intimately connected." She also emphasized that the reorganization is "consistent with key elements of our strategic plans and reflects input [the Institute] received from many stakeholders.

According to NIGMS, TWD will support programs that foster research training and the development of a strong and diverse biomedical research workforce. Accordingly, it will fund research training, career development, diversity and capacity-building activities through a variety of programs at the undergraduate, graduate, postdoctoral, faculty and institutional levels.

Additional information about the TWD is available on the Institute's website at: <http://www.nigms.nih.gov/About/Overview/twd.htm>.

Annual MTF Report Examines Teens' Drug and Alcohol Use

On December 14, the National Institute on Drug Abuse (NIDA) and the National Institutes of Health (NIH) released its annual Monitoring the Future (MTF) survey which was administered in classrooms earlier this year. This survey, conducted by researchers at the University of Michigan, with a grant from NIDA, polls eighth, 10th, and 12th-graders. The MTF first began surveying students in 1975. Since then questions have expanded as have the age groups monitored, but it remains a vital source of information about drug, cigarette and alcohol abuse among teens.

This year's report revealed that cigarette and alcohol use by 8th, 10th and 12th-graders are at their lowest point since the MTF began in 1975. Unfortunately, it also revealed that the rate of decline in teen smoking is slowing and abuse of other tobacco products, marijuana, and prescription drugs remains high. More of today's teens abuse marijuana than cigarettes and alcohol is still the drug of choice among all three age groups monitored by the survey.

The 2011 results showed that 18.7 percent of 12th-graders reported current (past month) cigarette use, which is a very low number compared to the recent peak rate of 36.5 percent in 1997 and 21.6 percent five years ago. However, Howard K. Koh, Assistant Secretary for Health, declared that "while it is good news that cigarette use has declined to historically low rates, we can and must do more to accelerate that decline...the actual decline is relatively small compared to the sharp declines we witnessed in the late nineties."

A major surprise in this year's results came from the first time inclusion of synthetic marijuana, known as K2 or spice. A startling 11.4 percent of 12th graders reported using synthetic marijuana within the last year. Gil Kerlikowske, Director of the Office of National Drug Control Policy, declared that "we will continue to work with the public health and safety community to respond to this emerging threat but in the meantime, parents must take action....parents are the most powerful force in the lives of young people."

Also announced with the release of the survey results was NIDA's new PEERx section of their website. This section is meant to help educate teens about the dangers of prescription drug abuse using interactive videos and other tools. The survey results for non-medical use of prescription drugs were mixed this year, with the use of Vicodin down slightly among 12th graders, but stable numbers for OxyContin and ADHD medicine abuse.

For more information about the MTF and the 2011 results, please visit [here](#).

CAP Report Addresses Climate Change, Mitigation, and Conflict

The Center for American Progress (CAP) recently released a report titled *Climate Change, Migration, and Conflict* that addresses complex crisis scenarios in the 21st Century. This report, written by Michael Werz and Laura Conley, is the first in a series of papers from CAP that will examine the nexus of climate change, migration, and conflict and its ramifications. The series will also examine how these three factors affect key regions around the world and investigate the ways in which U.S. policy must adapt to meet the challenges they present.

This initial report declares that a warmer climate is inevitably in our future, even if nations were to take immediate steps to decrease carbon emissions. Further, CAP notes that these temperature changes will affect U.S. national security interests and global stability, impacting the sustainability of coastal military installations, the stability of nations with poor resources and weak government, and more. As temperatures rise and these issues accelerate, human migration and world conflict will inevitably be impacted, according to CAP.

The report asserts that climate change is among the newly visible issues sparking conflict in today's world. Four recent reports from the administration, among them the Presidential Policy Directive on Global Development, acknowledge climate change as a major factor in planning global development and security strategies. CAP's report hails the Presidential Policy Directive as an important first step in the right direction. The next steps by the U.S. will be taken as the climate, migration, and conflict nexus forces lawmakers to make important decisions and navigate this new realm.

The U.S. does not have the policy postures vital to addressing climate change, migration, and conflict in a proactive manner, according to the report. The authors claim that our ability to

address these issues is complicated by the organizational disorder of our various foreign-assistance programs and climate change skeptics in government. In addition, the lack of serious buy-in from Congress limits funding for vital programs to address this problem.

The report notes that much of what needs to happen will have to be tailored to specific regions on a case-by-case basis. However, the authors note, there are useful things that can be done in the U.S. and abroad, that meet these new challenges. The U.S. must execute some institutional reforms to prepare for these cases. These reforms include:

- **Prioritize planning for the long-term humanitarian consequences of climate change and migration as a core national security issue.** This planning should be done across agencies and then combined into a comprehensive plan.
- **Create a unified national security budget.** This should integrate defense, diplomacy and development funding.
- **Address the development-security relationship.** We must determine exactly how U.S. development and security policy should be combined to address the link between climate and security.
- **The Global Development Policy needs to specifically address climate migration.** We must expand the debate on complex crisis scenarios to include the realities of climate migration as a threat to global security.
- **Support USAID's analysis on the intersection of Adaption, Conflict, Management and Mitigation.** The U.S. should establish a coordinating mechanism for discussions of how climate change's threat to food and water security can potentially lead to conflict.
- **Develop strategies to strengthen intergovernmental cooperation on trans-boundary risks in different regions of the world.**

The report also called for several immediate steps from the US:

- **Improving U.S. civilian capacities to respond to mega-crises by further enhancing the work of Disaster Assistance Response Teams (DART).** DART teams need the resources to develop plans to deploy senior humanitarian coordinators in the initial days of a response to a crisis, and facilitate integrated planning among development, diplomatic and security communities.
- **Increasing funding for the Global Climate Change Initiative.** Underfunding this initiative now will lead to higher costs later.

Finally, the report called for research to better understand the nexus of climate change, migration, and conflict:

- Adapt current migration-monitoring tools to better assess people's motivations for moving, and to understand slow and cumulative vulnerabilities created by population displacement and movement before they reach critical thresholds.
- Support the best science to expand the knowledge base on specific interactions-such as desertification, rainfall variability, disaster occurrence, and coastal erosion-in relation to human migration and conflict challenges.
- Identify regions particularly vulnerable to climate-induced migration, including forced voluntary mobility, in order to target aid, information, and contingency planning capabilities.
- Analyze migration as proactive strategy by local populations under pressure due to increasing environmental change.

For more information about this report, please visit CAP's website [here](#).

Small Grants for Behavioral Research in Cancer Control

Research suggests that the U.S. cancer burden can be reduced by approximately 50 percent through modification of lifestyle behavior such as tobacco use, physical inactivity, poor eating habits, unsafe sexual practices, excessive alcohol consumption, and sun exposure. To date, according to the National Cancer Institute (NCI), discoveries in behavioral and social science have contributed to a reduction in cancer incidence via behavioral interventions (risk communication, smoking cessation, dietary modification, and physical activity) and early detection (screening and genetic testing). Discoveries related to the physiological, psychosocial and economic effects of treatment and survivorship have led to advances in practitioner-patient communication, amelioration of side effects, and health promotion.

To enhance basic and applied behavioral research in the context of cancer control, NCI is inviting investigator-initiated Small Research Grants (ROs) applications for research projects that can be carried out in a short period of time with limited resources in behavioral research in cancer prevention and control. A secondary goal of the funding opportunity announcement (FOA) (PAR-12-035) is to attract new investigators to the field from a variety of biomedical, behavioral, and public health disciplines.

Research projects could include pilot or feasibility studies, secondary analysis of existing data, and meta analyses particularly in the areas of: (1) basic biobehavioral and psychological services; (2) behavioral genetic, (3) cancer survivorship and bereavement, (4) health behaviors, (5) health communication and informatics, (6) health disparities, (7) processes of cancer care including delivery and utilization, and (8) tobacco control. Examples of research that priority research may include:

Basic Biobehavioral and Psychological Services Research

- Basic research in social, cognitive, and psychological processes (e.g., social comparison, mechanisms underlying neurocognitive changes associated with cancer treatment, emotion, and motivation);
- Biological mechanisms of psychosocial or behavioral processes related to cancer control (e.g., stress/behavioral regulation of tumor biology);
- Medical decision making (e.g., role of numeracy in medical decision making, elucidating decision processes involved in maintenance of healthy lifestyle behaviors);
- Methodology and measurement in behavioral science research (e.g., psychophysiological assessment, measurement of stress and other psychological constructs);
- Psychosocial and behavioral consequences of cancer risk assessment (e.g., risk perception);
- Integration of social psychology and personality constructs and theories to advance understanding of cancer related behavior;
- Basic processes of interpersonal communication;
- Ethical issues associated with cancer control behavioral research (e.g., informed consent, privacy, use and availability of data, and confidentiality).

Behavioral Genetics

- Genetic determinates of cancer risk factor reduction related health behaviors (e.g. diet, satiety, physical activity or sedentary behavior, smoking, decision-making and sun safety/exposure);
- Impact of gene interaction and health-related behaviors (e.g. diet, physical activity, smoking and sun safety/exposure) on cancer risk or disease progression;
- Impact of genetic testing on screening, psychological (e.g. emotion, stress) and cancer risk factor reduction related behaviors (e.g. dietary and physical activity) on obesity and/or cancer risk;
- Genetic and environmental influences on health behaviors related to cancer control

- mediators and moderators of adaptation and coping;
- Psychological and social environments as moderators of genetic susceptibility to cancer including research that links levels of analysis from broad social influences to biological mechanisms;
 - Integration of genes, eating behaviors and correlates (e.g. taste preferences), and physical activity and sedentary behaviors as related to obesity risk and by extension cancer control.

Cancer Survivorship and Bereavement

- Examine adverse and/or positive effects of cancer diagnosis and treatment;
- Studies that have the potential to improve the physical and psychosocial outcomes of cancer survivors, their families, and caregivers including pilot investigations focusing on the development, delivery, and/or evaluation of interventions, as well as behavioral, clinical and/or epidemiologic research;
- Prevalence and control of post-cancer morbidity, second cancers, and chronic diseases other than cancer. Examples include: projects examining the prevalence of late effects, behavioral risk factors for second cancers and other chronic diseases, and interventions to reduce risk for iatrogenic morbidity;
- Analyses of the economic cost of cancer survivorship, including work and employment issues, financial hardship, and issues related to maintaining adequate health insurance coverage;
- Secondary data analysis of national data bases that elucidate survivorship needs and behaviors directed toward addressing treatment side effects, and work/employment issues;
- Health promotion of cancer survivors, their families, and caregivers, such as tobacco and alcohol control, exercise promotion, and dietary interventions;
- Survivorship studies of the health and psychosocial outcomes of older adults, including those with complex medical conditions. Studies could explore the intersection of cancer-related comorbidity, aging, and chronic illness. Studies could also test the feasibility of existing interventions or develop novel interventions for those age 65 and older;
- Delivery of follow-up care, including studies of care coordination, care planning, care plans, and systems and patterns of care and their impact on survivor, provider or healthcare system level outcomes and costs.

Health Behaviors Research

- Promote improvement or maintenance of cancer preventive behaviors and/or promote new behaviors, such as those that improve healthy diet, increase physical activity, decrease sedentary behavior, and ultimately, achieve optimal energy balance as it relates to obesity prevention (in both adults and children). Studies are also encouraged to examine the role of sleep behaviors as they relate to energy balance and obesity prevention;
- Examination of decreasing and preventing virus exposure (e.g., HPV) and skin cancer prevention (e.g. UV exposure, sun safety, indoor tanning);
- Improve understanding of psychosocial risk factors relevant to healthy behaviors and reducing incidence, morbidity, or mortality from cancer;
- Examination of multiple cancer preventive behaviors (i.e., 2 or more cancer preventive behaviors) to understand patterns of overall behavioral risk, and examine underlying mechanism of how: 1) behavior may be associated with or "spill over" to other cancer preventive behaviors; and 2) correlates associated with these patterns of risky behaviors to prevent cancer;
- Address social determinants (e.g. housing, employment/workplace, culture, discrimination, gender, literacy) of health behaviors in cancer risk and prevention as correlates of health behavior change and its relationship with psychosocial risk factors in application and testing of behavioral theories;
- Interpersonal contexts in which cancer risk factor reduction related health behaviors occur (e.g., romantic relationships, parents and children, families), including how close others

positively or negatively impact behavior change attempts, how people negotiate health behavior change within a relational context, and the potential positive or negative impact of attempted behavior change on relationship quality.

- Generational influences on mechanisms of cancer preventive behavior change including intergenerational norms, behaviors, patterns and history of prior chronic diseases within families;
- Translation of recommended cancer risk factor reduction related health promotion guidelines into behavioral counseling and clinical practice more broadly (e.g., primary care);
- Methodology to test theory-driven models, cognitive-affective, motivational and other mechanisms of behavior change, or the use of innovative technology (e.g. mobile technology, sensors) to better understand individual or multiple cancer risk factor reduction related health behaviors. Studies that examine new methodologies, development of new measures or testing of theories in investigating multi-level influences (e.g., built environmental, neighborhood, policy, workplace, schools, and social relationships) on individual level behavior change in adults and children are also of interest. New methodologies may include development of policy evaluations and metrics of key policies targeting cancer risk behaviors or mixed methods studies examining policy development and implementation processes.

Health Communication and Informatics Research

- Exploratory and intervention studies on communication campaigns, health communication messages and information dissemination. Topics may include but are not limited to: message design, framing and priming, effect on cancer prevention behaviors and cancer-related policy change;
- Mixed methods research to study the communication context and process in clinical encounters and public health communication, including descriptive content analyses to examine the communication and media environment for cancer control topics such as cancer prevention, screening, and survivorship, among others;
- Role of technologies and social media in communication about cancer prevention and control. Particular topics may include mechanisms of information dissemination, social networks and social support that influence cancer prevention behavior, cancer treatment processes, and survivorship;
- Risk communication studies focused on the understanding of cancer risks, decision-making, and the use of online risk tools or other technology-based communication channels;
- Studies that design and test interventions from multiple levels to facilitate and improve patient-centered communication in a variety of health care settings;
- Media effects on media coverage of cancer topics and public health campaigns at the individual level, and cancer-related public health or health care policies at the macrosocial level;
- Transdisciplinary studies led by non-traditional behavioral science and cancer control investigators, such as investigators from communication, computer science, informatics, linguistics, journalism, marketing, demography, and anthropology, among others.

Health Disparities

- Behavioral, societal and environmental determinants of cancer health disparities;
- Interventions focused on the reduction and elimination of cancer health disparities. Studies may use a variety of research approaches (e.g. community-based participatory research);
- Health literacy, the digital divide, knowledge gap hypothesis, and other communication-related variables that may contribute to the unequal burden of cancer across populations.

Processes of Cancer Care

Process of care research seeks to understand and promote behaviors that improve health through health care delivery. Research with people from diverse socioeconomic, cultural, racial, and ethnic backgrounds and intervention research in the clinical setting or the community setting where linkage to clinical care is part of the process are encouraged. Screening is emphasized as a critical process in cancer control that requires linkage to primary care, but interventions into processes relevant to improving the quality of cancer care may be examined anywhere along the cancer care continuum.

- Theory and methods development, effectiveness trials and related social, behavioral and health services research to promote the offering and appropriate uptake of effective cancer screening and detection tests, follow-up of abnormal findings and outreach to unscreened populations;
- Studies that evaluate how theory is used in screening promotion research and how to more actively test the value of theory in building interventions;
- Strategies for informed decision making regarding all cancer-screening technologies, diagnostic, and treatment options in clinical practice;
- Strategies that test approaches to actively incorporate people seeking care into the care process in non-traditional ways;
- Research to understand and influence how screening decisions are made throughout the lifespan, and especially in older adults (e.g. screening cessation in the context of clinical care, the roles of affect, values, preferences, multiple chronic medical conditions, social relationships, or contextual factors);
- Impact of personalized medicine on cancer screening, especially characteristics related to risk assessment (e.g., age, ethnicity, and genomics), uptake of screening or screening practice, adherence to guidelines, and screening outcomes;
- Studies that expand the foundational science necessary to test multilevel influences upon health care delivery,
- Multilevel intervention strategies in screening, diagnosis, treatment and long term survivorship that are efficacious in diverse settings & diverse populations;
- Interventions at multiple levels of a contextual model of individual behavior. *Examples include:*
 - interaction between individuals (patients) and their health care providers,
 - individuals (patients and providers) and the health care system,
 - individuals (patients, providers, health care administrators) and the community, and
 - incorporating applications associated with system science and social network.

Tobacco Control Research

- Tobacco use etiology, prevention, and cessation studies; may include, but are not limited to pilot studies, studies testing strategies for improving utilization of current technologies and studies that focus on high-risk individuals and populations;
- Policies on tobacco initiation and use.

Applications may be submitted on or after January 17, 2012. For more information and/or to apply, see: <http://grants.nih.gov/grants/guide/pa-files/PA-12-035.html>

Career Development Award

The National Cancer Institute also seeks applications for its Cancer Prevention, Control, Behavioral Sciences, and Population Sciences Career Development Award (KOR) (PAR-12-067) designed to support the career development of junior investigators with research or health professional doctoral degrees who want to become cancer-focused academic researchers in cancer prevention, cancer control, or the behavioral or population sciences. The objective of the award is to provide salary and research support for a sustained period of "protected time" (three-five years). Research, teaching, and leadership skills are to be learned during the tenure of the award. It is expected that through this sustained period of research career development and training under the guidance of an experienced mentor in the biomedical, behavioral, or clinical sciences, awardees will launch fully independent research careers.

Applications may be submitted on or after January 12, 2012. For more information on the K07 award, see: <http://grants.nih.gov/grants/guide/pa-files/PAR-12-067.html>

NSF, USDA, and DOE Seek Proposals for Climate Prediction Using Earth System Models

The National Science Foundation (NSF), the National Institute on Food and Agriculture of the U.S. Department of Agriculture (USDA), and the Office of Science at the Department of Energy (DOE), have issued a solicitation on Decadal and Regional Climate Prediction Using Earth System Models (EaSM).

According to the solicitation, EaSM "remains focused on the prediction of future climates and their consequences for human systems on time scales of several decades and shorter and global to regional and finer spatial scales." The agencies are seeking proposals that focus less on model building and more on: predictability studies; extreme events; prediction and attribution; upscaling/downscaling; interactions between natural and human systems; and research on metrics, methods, and tools for testing, evaluating, and validating climate and climate impact predictions and their uncertainty characterization. Unlike an earlier solicitation, this one will not consider proposals for incubator or pilot project activities.

The long-term goals of the program are to improve on and extend current Earth System modeling capabilities to:

1. Achieve comprehensive, reliable global and regional predictions of decadal climate variability and change through advanced understanding of the coupled interactive physical, chemical, biological, and human processes that drive the climate system.
2. Quantify the impacts of climate variability and change on natural and human systems, and identify and quantify feedback loops.
3. Maximize the utility of available observational and model data for impact, vulnerability/resilience, and risk assessments through up/downscaling activities and uncertainty characterization.
4. Effectively translate climate predictions and associated uncertainties into the scientific basis for policy and management decisions related to human interventions and adaptation to the projected impacts of climate change.

The agencies expect to make 7-12 awards depending on the mix and size of projects submitted. The anticipated funding is \$35 to \$39 million, based on the total for all funding sources (NSF, USDA, DOE) combined. Awards are expected to range from \$300,000 to \$1 million per year. **Proposals are due on May 11, 2012.**

For further information contact: David McGinnis, Directorate for Social, Behavioral and Economic

Sciences (SBE), (703) 292-7307 or easm2@nsf.gov or check the Program's Website at: <http://www.nsf.gov/crssprgm/climate/>.

University of Colorado Rejoins COSSA

After a hiatus, COSSA is delighted to welcome back the University of Colorado as its newest member. We look forward to working with the University to help support its social and behavioral scientists who benefit from COSSA's important work.

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The Consortium of Social Science Associations (COSSA) is an advocacy organization promoting attention to and federal support for the social and behavioral sciences.

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