

Letters

Training Report Comments Disputed

John Kihlstrom's account of the National Research Council's study of research training in the biomedical and behavioral sciences (October 2000 *Observer*) did not fully portray the process and organization of the study. As the staff director of the project, I would like to provide a more complete picture of the study process and offer some suggestions for how the American Psychological Society and its members can play a stronger role in future studies of the behavioral science workforce.

First, it should be noted that Kihlstrom's role in the study was unavoidably limited. He was invited to join the committee halfway through the study process, after the committee chairman, Howard Hiatt, became concerned that the initial committee convened did not have sufficient representation from the behavioral sciences. To avoid this situation in future studies, I have recommended to the National Institutes of Health that the next committee to address this topic include at least two behavioral scientists from the start.

As a result of his late appointment, Kihlstrom missed a number of committee meetings, a factor that may have contributed to some of the misstatements in his commentary. For example, Kihlstrom wrote:

"The committee did not receive much input from outside, in terms of 'public comment.'"

In fact, the committee received written comments from a number of faculty members and professional societies in the behavioral and social sciences, most notably, the American Psychological Association (APA). Moreover, the committee made extensive use of data from the APA's surveys of academic hiring and the job market experiences of recent psychology PhDs, much of which was cited in the report (see Page 37).

"Within psychology, [the committee] sought to exclude clinical psychologists from consideration, on the grounds that clinical psychologists were engaged in the provision of mental health services, rather than in research."

Clinical psychologists were included in the initial analyses of the behavioral research workforce reviewed by the committee, but were dropped because the committee was concerned that the inclusion of this predominantly clinically-oriented group would bias the analysis of the *research* workforce in the behavioral sciences. Even if clinical psychologists had been included in the final analysis, however, it is unlikely that the outcome would have been any different, as the data reviewed by the committee indicated that the academic job market for clinical psychologists was no stronger than that for other fields of psychology. Like other fields of psychology, the annual number of PhDs awarded in clinical psychology far exceeds faculty positions available.

Still, the committee's report does make special note of the role played by clinical psychologists in *clinical* research and urges future studies to make efforts to better account for the role played by these and other PhDs in the clinical research workforce (see Page 44).

"... there are interdisciplinary fields, such as health services research, that were also pretty much excluded from consideration, in part, at least because these fields come under the auspices of the Agency for Healthcare Research and Quality and the Health Resources and Services Administration."

Not only were PhDs in health services research included in the committee's assessment of the research workforce (see page 43), but senior representatives from both the Agency for Healthcare Research and Quality and the Health Resources and Services Administration met with the committee and provided extensive comments on research training in the fields under their auspices.

It would be unfortunate if concerns over the committee process obscured one of the report's most important findings about the research workforce in the behavioral sciences: it is older, on average, than that in the biomedical sciences, and aging more rapidly. In 1997, the median age of the research workforce in the behavioral and social sciences was 49.8, notably higher than that of the biomedical workforce (45.7). By 2005, the median age of the biomedical workforce is expected to grow by less than a year, to 46.2, but that of the behavioral research workforce is expected to increase by another two-and-a-half years, to 52.4, suggesting a growing demand for replacements in the decades to follow.

This demographic trend is a powerful reason for all behavioral and social science organizations to play a more active role in the next study of the research workforce.

Efforts by the APS and its fellow organizations to improve the data on behavioral and social scientists involved in health-related research would be a valuable and welcome first step.

Jennifer Sutton

Program Analyst

National Institutes of Health

Editor's note: Sutton served as the study director for the National Research Council's most recent assessment of biomedical and behavioral research personnel needs. The NRC Report, Addressing the Nation's Changing Needs for Biomedical and Behavioral Scientists (2000) referred to in her letter, is available on the Web at

<http://www.nap.edu/books/0309069815/html/index.html>.

John F. Kihlstrom's response to this letter appears on the next page.

The APS *Observer* welcomes your letters.
Please e-mail to: apsobserver@aps.washington.dc.us or fax to: 202-783-2083.

We reserve the right to edit for length.



KIHLSTROM REPLIES:

It should be clear that my analysis of where "things went wrong" with the NRC's study was directed outward as well as inward. While I do not believe that the Committee gave sufficient consideration to the behavioral and social sciences, I also believe that our professional organizations largely dropped the ball. The APA did provide figures on the psychology job market, supplementing the data available from NIH itself. Among the relevant professional societies, however, to my knowledge only the American Psychological Society made a face-to-face presentation to the Committee, attempting to reinforce the conclusions of the 1994 report.

Although I was added to the roster at a relatively late date, I had full access to the documentary record of the committee's earlier meetings, and I attended two meetings, involving a subset of the committee's membership, devoted entirely to the behavioral and social sciences. None of this discussion found its way into the committee's report. So far as the behavioral and social sciences are concerned, the committee's treatment amounted to little more than a headcount. Because the number of new degrees in these fields exceeds the number of faculty positions available, the majority con-

cluded that there is no reason for NIH to step up its training efforts in these areas.

But this conclusion ignores the actual and potential contributions of the behavioral and social sciences to our understanding of health, health behavior, and healthcare. Viewed in this light, the behavioral and social sciences are actually *under* represented in the overall NIH training portfolio. While it may be true that the production of behavioral and social science PhDs should not be increased, new funds should be made available to divert more trainees toward research related to health and healthcare.

The most important problems in health and healthcare are problems of individual and interpersonal behavior, social organization, and culture. This point was understood by those who wrote the 1994 report, but it was lost on the present committee; we can hope that it will be accepted by the next one.

John F. Kihlstrom

*Professor, Department of Psychology
University of California, Berkeley
and Fellow, Institute for the Study of
Healthcare Organizations Transactions*

Decade of Behavior Initiative is Under Way

A new initiative is under way to increase the visibility of behavioral and social science research. The "Decade of Behavior" (DoB) is modeled after the Decade of the Brain initiative that was developed in the 1990s by the neuroscience community. This latest initiative is being organized and operated by the American Psychological Association, and more than 50 organizations, including APS, have endorsed it. Similar to the Decade of the Brain initiative, which APS also supported, this multidisciplinary effort seeks to publicize the progress achieved in behavioral and social science and to raise awareness of research in these areas with the hope that this awareness will translate into public understanding and support.

APS President Robert Bjork is representing the Society on the DoB advisory committee. Other APS members serving on the committee include: Fellow and Charter Member Aletha Huston of the University of Texas at Austin; Fellow and Charter Member Joe Martinez, University of Texas at San Antonio; Fellow and Charter Member Anne Petersen of the W. K. Kellogg Foundation; John Bruer, James S. McDonnell Foundation; and Stephen Manuck, University of Pittsburgh. The five themes of the initiative are: a healthier nation, a safer nation, a better educated nation, a more



prosperous nation and a more democratic nation. Behind them is an exhibit on "Stress in Pregnancy and Effects on the Offspring Throughout the Lifespan" based on the work of APS Fellow and Charter Member Dunkel-Schetter and APS Charter Member Marci Lobel of SUNY Stony Brook.

prosperous nation and a more democratic nation.

For more information on DoB, visit the Psychology Links section of the APS web site at www.psychologicalscience.org.