of the scientists most worried about possible misuse of risk quantification are fearful of a bias that will result in underregulation.

"Risk quantification is very attractive to regulators," says Highland, "because it can be used to define some problems as nonexistent and to minimize the degree of control necessary for others."

From the standpoint of both those afraid of underregulation and those fearful of overregulation, there seems much to be said for having NTP serve as an arbiter of risk assessment practices. The NTP executive committee is broadly representative of both the scientific and the regulatory agencies and is a step removed from the political pressures and hurly-burly of the regulatory process.

Harris, of EDF, likes the idea of put-

ting NTP in charge of assessing cancer risks. To avoid any appearance of bias, he would prefer that assessments not be done by the regulatory agencies at all, even on a delegated basis.

The OSTP report was not meant as a White House edict that everyone would have to follow. According to David R. Calkins, an OSTP staffer and member of the White House domestic policy group, the report was intended more as a "catalyst" and stimulus to help shape the thinking of the scientific and regulatory agencies and interested congressional committees.

Neither Kennedy nor any of the other officials on the NTP have had time to come to grips yet with the OSTP proposal. How the proposal is ultimately received may depend a lot on the attitude

More Help for the Mentally Ill

President Carter has submitted to Congress a Mental Health Systems Act designed to overhaul the Community Mental Health Centers program. Based on recommendations of the mental health commission headed by Rosalynn Carter, the new measure is supposed to make the programs more flexible, promote closer ties with the regular health care system, cause more resources to go to serve the neediest communities, help chronic mental patients, and promote preventive care. The mental health centers program now absorbs about \$300 million a year in federal funds; additional activities would add about \$100 million to the total tab.

Carter, his wife, and Health, Education, and Welfare secretary Joseph Califano all showed up at a 15 May press conference at the White House to emphasize the need for further expansion of the federal mental health effort. "Fundamentally," said Califano, "the legislation is designed to make mental health part of the whole health system and part of the whole social services system." The new measure would drop the requirement that mental health centers supply an elaborately specified range of services and instead would pressure them to supply the kind of help most needed in their communities.

The measure also attacks the problem of deinstitutionalized mental patients, which has become a scandal in many cities, through various incentives such as supplying money for mental health advocacy services, and encouraging changes in zoning laws and housing standards so that deinstitutionalized people will have a decent place to live.

The bill attempts to put mental health services on an equal footing with medical services by giving them equal status under Medicaid reimbursement schemes. The bill would also "promote cooperative working arrangements" between medical and mental health services—a development long overdue in view of the fact that the majority of mentally ill people are getting such care as they do get from the general health system.

In the prevention category, the new measure would award grants for programs to help teachers, police, and parents to deal with the chronically ill and with mentally ill children.

Califano said it was all a "modest beginning" but he expected a "heavy payoff" from the proposed changes. Rosalynn Carter, who was about to fly off to Chicago to meet with people at the American Psychiatric Association, vowed to put all her energies into getting the measure passed this year. Congress may balk, but the recommendations of the commission at least have had some effect on the Administration, which has already requested a \$27 million increase in funds for mental health research.—C.H.

of David P. Rall, who is director of the NTP as well as head of the National Institute of Environmental Health Sciences.

Individuals such as Roy Albert, professor of environmental medicine at New York University and chairman of the EPA carcinogen assessment group, are not likely to look kindly on any suggestion to have the NTP either absorb their programs or assume authority over them. Albert already has indicated as much. But if Rall and most of the other officials on the NTP committee embrace this concept, the chances of its acceptance might be excellent, especially inasmuch as it seems evident that the present interagency confusion and disagreement over risk assessment cannot long be tolerated. At present, it is not even clear how far the disagreement goes. For while Upton has warned of possible catastrophes, he has not flatly rejected use of risk quantification even for establishing exposure standards. He can perhaps be reassured if certain policies are to be universally observed, as for instance with respect to how conservative one should be in the choice of extrapolation models and "confidence limits.'

(Kennedy, who feels that risk quantification should have at least a limited role in the setting of exposure limits, says his attitude differs from Upton's only in degree. "I believe Arthur would concede that it allows one to distinguish between compounds that show large differences in potency," he observes.)

In an interview with *Science*, Rall said the OSTP suggestion that authority over risk assessment be centralized in the NTP was intriguing but that before speaking to its merits he would have to think more about it. He expressed a leeriness of "monolithic solutions and structures" and observed that "one of the strengths of science is its diversity."

At a minimum, however, Rall wants NTP to take the lead in research on risk assessment and, over the next year or so, to adopt some principles on both the qualitative and quantitative aspects of making assessments which everybody would be encouraged to follow.

Although it is not one of unconcern, Rall's attitude is clearly more relaxed than Upton's. But the problem of achieving a solid consensus view of risk assessment will no doubt take on greater urgency in everybody's eyes if such assessments become, as has already happened in the case of OSHA's proposed benzene standard, a major point of controversy in regulatory decisions.