

edited by RICHARD STONE

## NIH Redresses Gender-Based Pay Inequities

Troubled by reports that women scientists at the National Institutes of Health (NIH) have been systematically paid less than male counterparts, NIH administrators have begun awarding cash payments to compensate women identified as targets of gender-based discrimination.

Last May, an NIH task force issued a report that documented substantial pay and tenure inequities between women and men at NIH (*Science*, 14 May 1993, p. 888). In response, Lance Liotta, then deputy director for intramural research, formed the Committee of Women Scientists Advisors (WSA) to identify specific cases of gender-based discrepancies in each institute that NIH might be able to remedy.

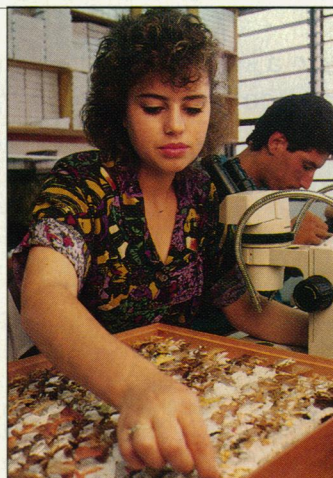
So far the committee has identified seven women who are receiving substantially lower pay than men with similar jobs and experience. NIH has paid these women a total of \$50,000 in the form of merit-based awards to compensate for discrepancies in this year's salaries. Michael Gottesman, Liotta's successor, acknowledges that NIH discriminated against the women; he predicts that merit-based bonuses

are the start of a long process of retribution. "We're just beginning to get the data back" on the extent of NIH pay inequities, he says. Toward a more permanent solution, Gottesman says, NIH plans to raise women's salaries and rapidly promote women to higher-ranking positions.

Susan Swedo, WSA chair and acting deputy scientific director of the National Institute of Mental Health, calls the bonuses a "good faith" effort, but says the one-time cash award "won't be a long-term solution to pay discrepancies." Swedo predicts that gender-based inequalities can be redressed without having to file a lawsuit or by calling in an arbiter such as the Equal Employment Opportunity Commission.

## Counting Creatures Great and Small

Tropical ecologist Dan Janzen wants to organize an unprecedented survey—an effort to inventory every last species of life, from lowly virus to stealthy jaguar, in a 110,000-hectare swath of Costa Rican forest. But that's the easy part: First the University of Pennsylvania scientist must raise about \$90 million to carry out the venture. Janzen began beating the bushes around Washington,



**Taking inventory.** INBio parataxonomist may play role in world's first all-taxa survey in Costa Rica.

D.C., last week for cash.

Last April, Janzen and Penn ecologist Winnie Hallwachs held a workshop in which top ecologists and systematists devised a framework for surveying every species in a given region (*Science*, 30 April 1993, p. 620). Now, says Janzen, it's time to turn the concept—an All Taxa Biodiversity Inventory (ATBI)—into reality.

Janzen has chosen Costa Rica's Guanacaste Conservation Area as the site for the world's first ATBI. Guanacaste is home to an estimated 300,000 species—65% of Costa Rica's biodiversity. (Costa Rica has about 4% of the world's biodiversity.) Janzen envisions a 2-year planning stage for the ATBI beginning next January, then a 5-year operations phase that would wrap up in 2001. The Costa Rican National Biodiversity Institute (INBio), which collects samples for pharmaceutical giant Merck, would run the survey.

Janzen's plan already has the support of the new Costa Rican government. In a memo last week to scientists, Costa Rica environment minister Rene Castro says he has presented the ATBI as a "top priority" to the World Bank, International Development Bank, and other organizations. Janzen, meanwhile, is approaching the U.S. Agency for International Development for a planning grant; he hopes to hear from the agency later this year.

## U.S. Medical Isotope Plan Spirals Downward

A plan to create a U.S. source of short-lived medical isotopes has unravelled in the last 2 weeks, leaving federal scientists scrambling to find a suitable research reactor to retool for isotope production.

Most short-lived medical isotopes in the United States come from foreign sources such as Canada, which is the main supplier of an isotope—molybdenum 99—used to produce tracers for medical imaging. But to reduce transit time for short-lived materials and maintain a reliable supply, U.S. companies and the Department of Energy (DOE) have been trying to establish a domestic isotope facility by refurbishing the Omega West reactor at Los Alamos National Laboratory. The project was supposed to finance itself through sales to companies, but instead DOE has kept it alive with a \$225,000 monthly stipend. Now that Omega West has also sprung plumbing leaks and generated bad publicity, Los Alamos wants to pull the plug on it; last week the lab began assigning new jobs to the reactor's staff.

In the meantime, DOE officials are considering a fall-back plan to retool the Annular Core Research Reactor at Sandia National Laboratory. But at the moment, says a DOE official, "we are still weighing our options"; he expects a decision by 30 April.

Industry executives aren't holding their breath. "There are people of good will and great talent" at DOE, says isotope company executive Bill Ehlig, vice president at Medi-Physics, Inc. Nevertheless, Ehlig says he doesn't expect the agency to come up with a commercially viable isotope source.

U.S. efforts, meanwhile, may quickly become overshadowed: St. Louis-based Mallinckrodt Medical, Inc., and Holland's energy agency are building a plant in the Netherlands designed to take raw material from European reactors and export isotopes to the United States and elsewhere.

## NIH Advisers Find Advice Isn't Wanted

Endocrinologist Sol Genuth chuckled when he read recently that the Clinton Administration wanted to save money by cutting out a federally funded advisory board of tea tasters. But Genuth, a professor of medicine at Case Western Reserve in Cleveland, stopped laughing when he learned from a reporter that a panel he chairs—the National Diabetes Advisory Board at the National Institutes of Health (NIH)—is also slated for the chopping block in keeping with a 1-year-old presidential order for agencies to trim the number of advisory boards by a third.

Genuth was not the only one caught off-guard by last week's announcement that the White House plans to ask Congress to eliminate 30-odd federal advisory panels. Officials at the diabetes institute—home to Genuth's group as well as two similar boards on digestive and kidney diseases—professed ignorance when told that all three panels were on the administration's hit list. And Genuth said the subject never came up when his panel met 2 weeks ago to draw up plans for an ambitious national diabetes education program, among other projects. Half a dozen other NIH institutes have such advisory boards, which differ from advisory councils in that they play no role in funding decisions. The White House has determined that 17 NIH panels perform functions that either duplicate or can be subsumed by other bodies.

The government expects to save \$17 million by wiping out 280 non-statutory committees. Two thirds have already been killed, with 80 more slated to disappear by the fall.