

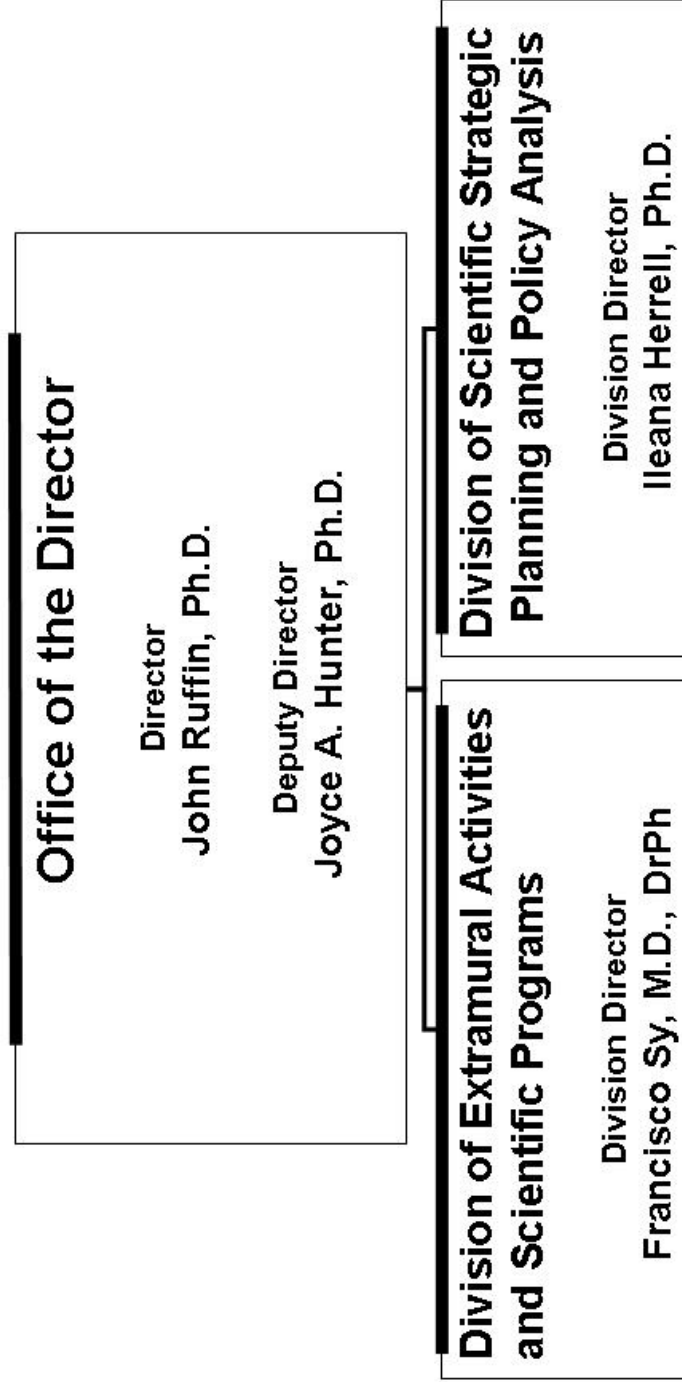
DEPARTMENT OF HEALTH AND HUMAN SERVICES

NATIONAL INSTITUTES OF HEALTH

National Center on Minority Health and Health Disparities

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NATIONAL INSTITUTES OF HEALTH
National Center on Minority Health and Health Disparities
Organizational Chart



NATIONAL INSTITUTES OF HEALTH

National Center on Minority Health and Health Disparities

For carrying out section 301 and title IV of the Public Health Services Act with respect to minority health and health disparities research [\$205,959,000] *\$208,844,000*
(Department of Health and Human Services Appropriation Act, 2009)

**National Institutes of Health
National Center on Minority Health and Health Disparities**

Amounts Available for Obligation 1/

| Source of Funding | FY 2008 Actual | FY 2009 Estimate | FY 2010 PB |
|--|-------------------|---------------------|---------------|
| Appropriation | \$203,117,000 | \$205,959,000 | \$208,844,000 |
| Rescission | -3,548,000 | 0 | 0 |
| Supplemental | 1,061,000 | 0 | 0 |
| Subtotal, adjusted appropriation | 200,630,000 | 205,959,000 | 208,844,000 |
| Real transfer under Director's one-percent transfer authority (GEI) | -337,000 | 0 | 0 |
| Comparative transfer under Director's one-percent transfer authority (GEI) | 337,000 | 0 | 0 |
| Subtotal, adjusted budget authority | 200,630,000 | 205,959,000 | 208,844,000 |
| Subtotal, adjusted budget authority | 200,630,000 | 205,959,000 | 208,844,000 |
| Unobligated balance lapsing | -40,000 | 0 | 0 |
| Total obligations | 200,590,000 | 205,959,000 | 208,844,000 |

1/ Excludes the following amounts for reimbursable activities carried out by this account:

FY 2008 - \$140,000 FY 2009 - \$0 FY 2010 - \$0

Excludes \$0 Actual in FY 2008; Estimate \$0 in FY 2009 and Estimate \$0 in FY 2010 for royalties.

NATIONAL INSTITUTES OF HEALTH
National Center on Minority Health and Health Disparities
(Dollars in Thousands)

Budget Mechanism - Total

| MECHANISM | FY 2008 Actual | | FY 2009 Estimate | | FY 2010 PB | | Change | |
|---|-------------------|----------------|---------------------|----------------|---------------|----------------|-------------|---------------|
| | No. | Amount | No. | Amount | No. | Amount | No. | Amount |
| Research Grants: | | | | | | | | |
| Research Projects: | | | | | | | | |
| Noncompeting | 0 | \$1,697 | 1 | \$411 | 11 | \$4,078 | 10 | \$3,667 |
| Administrative supplements | (1) | 132 | (0) | 0 | (0) | 0 | (0) | 0 |
| Competing: | | | | | | | | |
| Renewal | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| New | 0 | 257 | 10 | 4,000 | 10 | 4,080 | 0 | 80 |
| Supplements | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Subtotal, competing | 0 | 257 | 10 | 4,000 | 10 | 4,080 | 0 | 80 |
| Subtotal, RPGs | 0 | 2,086 | 11 | 4,411 | 21 | 8,158 | 10 | 3,747 |
| SBIR/STTR | 13 | 5,736 | 13 | 5,382 | 13 | 5,457 | 0 | 75 |
| Subtotal, RPGs | 13 | 7,822 | 24 | 9,793 | 34 | 13,615 | 10 | 3,822 |
| Research Centers: | | | | | | | | |
| Specialized/comprehensive | 72 | 75,167 | 79 | 86,058 | 79 | 92,374 | 0 | 6,316 |
| Clinical research | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Biotechnology | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Comparative medicine | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Research Centers in Minority Institutions | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Subtotal, Centers | 72 | 75,167 | 79 | 86,058 | 79 | 92,374 | 0 | 6,316 |
| Other Research: | | | | | | | | |
| Research careers | 1 | 85 | 1 | 90 | 1 | 90 | 0 | 0 |
| Cancer education | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Cooperative clinical research | 0 | 50 | 0 | 0 | 0 | 0 | 0 | 0 |
| Biomedical research support | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Minority biomedical research support | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Other | 107 | 59,255 | 87 | 58,415 | 86 | 57,846 | (1) | -569 |
| Subtotal, Other Research | 108 | 59,390 | 88 | 58,505 | 87 | 57,936 | (1) | -569 |
| Total Research Grants | 193 | 142,379 | 191 | 154,356 | 200 | 163,925 | 9 | 9,569 |
| Research Training: | | | | | | | | |
| Individual awards | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Institutional awards | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Total, Training | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Research & development contracts (SBIR/STTR) | 312 | 45,872 | 281 | 36,801 | 281 | 29,868 | 0 | -6,933 |
| | 0 | (11) | (0) | (11) | (0) | (11) | (0) | (0) |
| | <u>FTEs</u> | | <u>FTEs</u> | | <u>FTEs</u> | | <u>FTEs</u> | |
| Intramural research | 0 | 2,118 | 0 | 4,305 | 0 | 4,370 | 0 | 65 |
| Research management and support | 24 | 10,261 | 27 | 10,497 | 28 | 10,681 | 1 | 184 |
| Construction | | 0 | | 0 | | 0 | | 0 |
| Buildings and Facilities | | 0 | | 0 | | 0 | | 0 |
| Total, NCMHD | 24 | 200,630 | 27 | 205,959 | 28 | 208,844 | 1 | 2,885 |

Includes FTEs which are reimbursed from the NIH Roadmap for Medical Research

National Center on Minority Health and Health Disparities
BA by Program
(Dollars in thousands)

| | FY 2006 | | FY 2007 | | FY 2008 | | FY 2008 | | FY 2009 | | FY 2010 | | Change | |
|---|---------|----------|---------|-----------|---------|----------|---------|----------|---------|-----------|---------|-----------|--------|---------|
| | FTEs | Amount | FTEs | Amount | FTEs | Amount | FTEs | Amount | FTEs | Amount | FTEs | Amount | FTEs | Amount |
| Extramural Research | | | | | | | | | | | | | | |
| <u>Detail:</u> | | | | | | | | | | | | | | |
| Health Disparities Research | | \$96,279 | | \$100,846 | | \$94,765 | | \$94,934 | | \$101,296 | | \$107,914 | | \$6,618 |
| Research Capacity-Building & Infrastructure | | 75,210 | | 73,404 | | 69,352 | | 69,477 | | 64,988 | | 61,420 | | -3,568 |
| Outreach and Information Dissemination | | 12,259 | | 12,397 | | 23,797 | | 23,840 | | 24,873 | | 24,459 | | -414 |
| Subtotal, Extramural | | 183,748 | | 186,647 | | 187,914 | | 188,251 | | 191,157 | | 193,793 | | 2,636 |
| Intramural research | | 1,670 | | 2,295 | | 0 | | 2,118 | | 0 | | 4,370 | | 0 |
| Res. management & support | 25 | 9,853 | 22 | 10,141 | 24 | 10,221 | 24 | 10,261 | 27 | 10,497 | 28 | 10,681 | 1 | 184 |
| TOTAL | 25 | 195,271 | 22 | 199,083 | 24 | 200,253 | 24 | 200,630 | 27 | 205,959 | 28 | 208,944 | 1 | 2,885 |

Includes FTEs which are reimbursed from the NIH Roadmap for Medical Research

Major Changes in the FY 2010 Budget Request

Major changes by budget mechanism and/or budget activity detail are briefly described below. Note that there may be overlap between budget mechanism and activity detail and these highlights are not sum to the total change for the FY 2010 budget request for NCMHD, which is +\$2.885 million more than the FY 2009 estimate, for a total of \$208.844 million.

Research Project Grants (+\$3.822 million; total \$13.615 million): NCMHD plans to support a total of 34 Research Project Grant (RPG) awards in FY 2010, including investigator initiated health disparities research awards (R01). The NIH Budget policy for RPGs in FY 2010 is to provide a 2% inflationary increase in noncompeting awards and a 2% increase in average cost for competing RPGs.

Health Disparities Research Program area (+\$6.618 million; total \$107.914 million): While meeting its commitments in the areas of Research Capacity-Building & Infrastructure and Outreach and Information Dissemination, the NCMHD plans to realign funds from these areas to the Health Disparities Research Program area to continue to provide funding for investigator-initiated health disparities research awards (R01) and to provide additional funding for a Centers of Excellence competition. Additionally, the NCMHD Budget will support NCMHD/IC collaborations in FY 2010.

Research Capacity-Building & Infrastructure (-\$3.568 million; total \$61.420 million): As part of its planning process NCMHD is realigning funds from this program area to support activities in other program areas. Funding in this program area will continue to support Research Endowment grants, Research Infrastructure in Minority Institution grants, and the Loan Repayment Program.

NATIONAL INSTITUTES OF HEALTH
National Center on Minority Health and Health Disparities
Summary of Changes

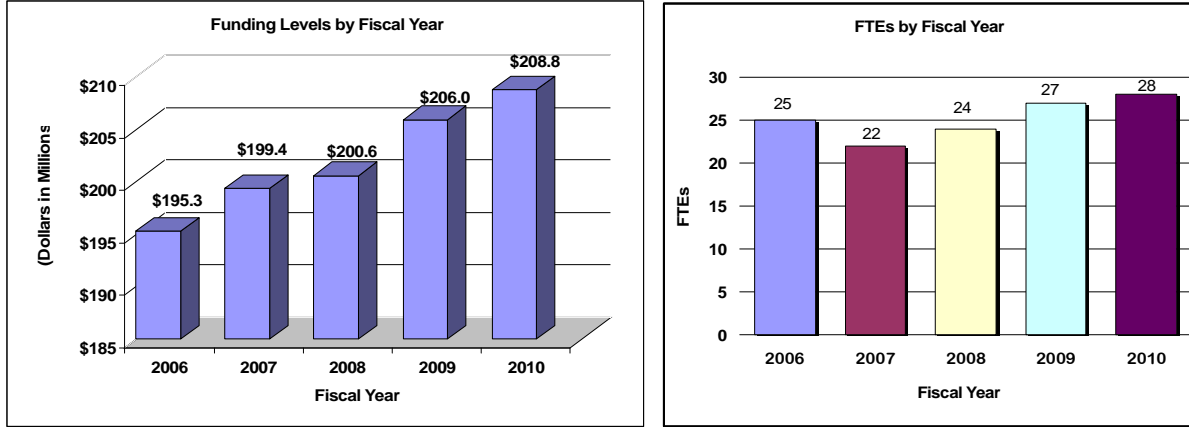
| | | | |
|--|-------------------------------|---------------------|-----------------------------|
| FY 2009 estimate | | \$205,959,000 | |
| FY 2010 estimated budget authority | | 208,844,000 | |
| Net change | | 2,885,000 | |
| CHANGES | 2009 Current Estimate Base | Change from Base | |
| | FTEs | Budget Authority | FTEs Budget Authority |
| A. Built-in: | | | |
| 1. Intramural research: | | | |
| a. Annualization of January | | | |
| 2009 pay increase | | \$0 | \$0 |
| b. January FY 2010 pay increase | | 0 | 0 |
| c. Zero less days of pay | | 0 | 0 |
| d. Payment for centrally furnished services | | 0 | 0 |
| e. Increased cost of laboratory supplies, materials, and other expenses | | 4,305,000 | 69,000 |
| Subtotal | | | 69,000 |
| 2. Research management and support: | | | |
| a. Annualization of January | | | |
| 2009 pay increase | | \$4,428,000 | \$53,000 |
| b. January FY 2010 pay increase | | 4,428,000 | 66,000 |
| c. Zero less days of pay | | 4,428,000 | 0 |
| d. Payment for centrally furnished services | | 685,000 | 14,000 |
| e. Increased cost of laboratory supplies, materials, and other expenses | | 5,384,000 | 88,000 |
| Subtotal | | | 221,000 |
| Subtotal, Built-in | | | 290,000 |

NATIONAL INSTITUTES OF HEALTH
National Center on Minority Health and Health Disparities
Summary of Changes--continued

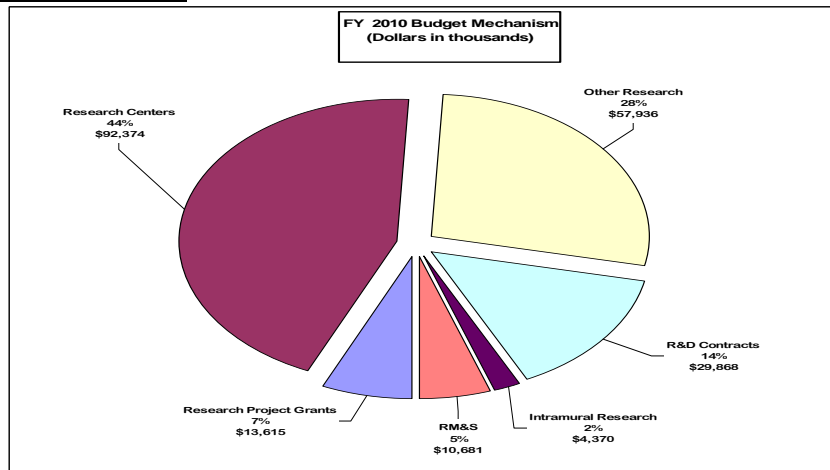
| CHANGES | 2009 Current Estimate Base | | Change from Base | |
|---------------------------------------|-------------------------------|-------------|------------------|-------------|
| | No. | Amount | No. | Amount |
| B. Program: | | | | |
| 1. Research project grants: | | | | |
| a. Noncompeting | 1 | \$411,000 | 10 | \$3,667,000 |
| b. Competing | 10 | 4,000,000 | 0 | 80,000 |
| c. SBIR/STTR | 13 | 5,382,000 | 0 | 75,000 |
| Total | 24 | 9,793,000 | 10 | 3,822,000 |
| 2. Research centers | 79 | 86,058,000 | 0 | 6,316,000 |
| 3. Other research | 88 | 58,505,000 | (1) | (569,000) |
| 4. Research training | 0 | 0 | 0 | 0 |
| 5. Research and development contracts | 281 | 36,801,000 | 0 | (6,933,000) |
| Subtotal, extramural | | | | 2,636,000 |
| 6. Intramural research | <u>FTEs</u> 0 | 4,305,000 | <u>FTEs</u> 0 | (4,000) |
| 7. Research management and support | 27 | 10,497,000 | 1 | (37,000) |
| 8. Construction | | 0 | | 0 |
| 9. Buildings and Facilities | | 0 | | 0 |
| Subtotal, program | | 205,959,000 | | 2,595,000 |
| Total changes | 27 | | 1 | 2,885,000 |

Fiscal Year 2010 Budget Graphs

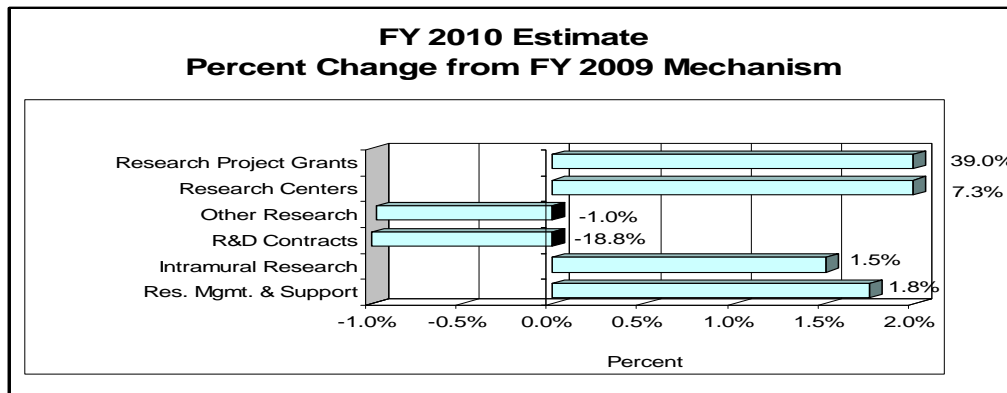
History of Budget Authority and FTEs:



Distribution by Mechanism:



Change by Selected Mechanisms:



Justification

National Center on Minority Health and Health Disparities

Authorizing Legislation: Section 301 and title IV of the Public Health Service Act, as amended.

| | FY 2008 <u>Appropriation</u> | FY 2009 <u>Omnibus</u> | FY 2009 Recovery <u>Act</u> | FY 2010 President's <u>Budget</u> | FY 2010 +/- 2009 <u>Omnibus</u> |
|-----|---------------------------------|---------------------------|-----------------------------------|---|---------------------------------------|
| BA | \$200,630,000 | \$205,959,000 | \$52,081,000 | \$208,844,000 | +\$2,885,000 |
| FTE | 24 | 27 | | 28 | +1 |

This document provides justification for the Fiscal Year (FY) 2010 activities of the National Center on Minority Health and Health Disparities (NCMHD), including HIV/AIDS activities. Details of the FY 2010 HIV/AIDS activities are in the "Office of AIDS Research (OAR)" Section of the Overview. Details on the Common Fund are located in the Overview, Volume One. Program funds are allocated as follows: Competitive Grants/Cooperative Agreements; Contracts; Direct Federal/Intramural and Other.

In FY 2009, a total of \$52,081,000 American Recovery and Reinvestment Act (ARRA) funds were transferred from the Office of the Director. These funds will be used to support scientific research opportunities that help support the goals of the ARRA. The ARRA allows NIH to execute these funds via any NIH funding mechanism. Funds are available until September 30, 2010. These funds are not included in the FY 2009 Omnibus amounts reflected in this document.

DIRECTOR'S OVERVIEW

Health disparities remain an urgent public health challenge for the Nation. While progress is being made in the overall improvement of the nation's health, racial and ethnic minority populations, rural populations, residents of medically underserved communities, and individuals of low socio-economic status, continue to endure an unequal burden of diseases and health conditions. From state to state, the statistics emerging from scientific research studies continue to show significant disparities for diseases and conditions such as obesity, HIV/AIDS, infant mortality, cancer, diabetes, and cardiovascular disease. Geographic disparities within and among states is a growing concern. The persistence of health disparities is influenced by several variables such as shifting demographics, social and economic determinants, biology, culture, environment, politics, and discrimination. The U.S. Census Bureau reports that by 2042, racial and ethnic minorities will be the majority population. Additionally, the

Census Bureau reported that in 2007, more than 55 percent of the 39 million Americans living in poverty were racial and ethnic minorities, and while the rate of Americans without insurance declined in 2007, 45.7 million Americans are still without health insurance. Eliminating health disparities will depend on the nation's ability to employ versatile and sustainable strategies that integrate various sectors, and the commitment of everyone to take urgent action.

The National Center on Minority Health and Health Disparities (NCMHD) was created to focus and direct the nation's biomedical research resources towards improving the health of populations that experience disparities in health outcomes with the goal of eliminating health disparities. The NCMHD provides leadership for the national health disparities research agenda throughout NIH while also administering its own programs and fostering diverse partnerships. It conducts and supports research, research training, capacity-building, outreach, and information dissemination activities. The NCMHD seeks to enhance understanding of the biological and non-biological determinants of health disparities through its emphasis on basic, behavioral, social sciences, and clinical research.

The NCMHD has established a national capacity to respond to the poor health outcomes of the nation's health disparity communities through grant awards to institutions of higher education, community-based organizations, and individuals, for the enhancement of research infrastructure and the effective utilization of human capital. NCMHD funding has spurred an increase in the number and types of research studies designed to understand the development and progression of diseases, health conditions, and disabilities that may lead to health disparities. The scientific endeavors of the NCMHD programs continue to shed light on the national and global problem of health disparities.

Programs such as the NCMHD Research Endowment program, which has supported the creation of an enhanced research infrastructure, and the NCMHD Centers of Excellence program, have created a formidable platform for multidisciplinary and interdisciplinary research into some of the most prevalent and debilitating diseases affecting health disparity populations. The Centers have introduced community-based participatory research into the biomedical research enterprise as a fundamental approach to health disparities. The Community-Based Participatory Research Program institutionalizes the community as equal partners in the research process. Targeted community-based intervention research projects such as telehealth/telemedicine are producing innovative approaches to the prevention, diagnosis, and treatment of conditions affecting health disparity populations, and are connecting the community to health information and health care practitioners. The investment in the development of future health disparity researchers includes support of K-12 science education programs; and more than 2000 Loan Repayment Program (LRP) recipients conducting research in extramural academic institutions. NCMHD will accelerate the pace of health disparities research with new funding for investigator-initiated research and the creation of its Intramural Research Program. The Disparities Research and Education Advancing our Mission (DREAM) program, the cornerstone of the NCMHD Intramural Research

Program, fuels the expansion of the Loan Repayment Program (LRP) and the retention of LRP graduates in health disparities research.

The NCMHD remains committed to directing a world class research program that underscores the importance of collaboration, diverse partnerships, and the integration of disciplines. In keeping with its mandate, building on its program accomplishments, its partnerships, and the success of the 2008 NIH Science of Eliminating Health Disparities Summit, the NCMHD will continue to lead national efforts to strengthen the health disparities research agenda. The agenda will include a focus on: 1) redefining the health disparities research paradigm by exploring new frameworks in understanding and eliminating health disparities such as the integration of science, practice, policy, and the community; 2) stimulating trans-disciplinary, transformational, and translational research on health disparities in updating the NIH Health Disparities Strategic Plan, and enhancing efforts to evaluate and report on progress; 3) developing a data repository on health disparities in racial and ethnic minority and other health disparity populations; 4) examining how disparities in health outcomes occur by studying underlying biological and non-biological variables; 5) enhancing health professionals understanding of health disparities and how different populations are affected through innovative research approaches; 6) expanding community-based and faith-based behavioral and social intervention research opportunities; and 7) increasing the diversity of the biomedical research and health professions workforce.

FY 2010 JUSTIFICATION BY ACTIVITY DETAIL

Program Descriptions and Accomplishments

Overall Budget Policy: The highest priorities for NCMHD include continued funding and expansion of its research and career development efforts through its core extramural research programs, including the Centers of Excellence, Loan Repayment Programs, and Research Endowment program; and support of new investigators involved in intramural research and investigator-initiated health disparities research projects, including continued development and implementation of the Disparities Research and Education Advancing Our Mission (DREAM) program. NCMHD will continue to maintain an adequate number of competing RPGs. Additionally, the NCMHD will continue co-funding investigator-initiated research projects with other Institutes and Centers, and minority health and health disparities collaborations with DHHS OPDIVS and other federal agencies. In FY 2010, the NCMHD will continue its support of cancer research projects across its programs by increasing funding for these projects by \$1.167 million or 4.4 percent above the FY 2009 estimate.

Health Disparities Research: The program is designed to enhance the scientific knowledge on the determinants of health disparities and develop interventions to address some of the most prevalent and destructive diseases and health conditions affecting populations experiencing disparities in health status.

In FY 2008, fifty NCMHD Centers of Excellence (COE) conducted health disparities research to develop novel evidence-based research methodologies and strategies that are essential in improving prevention, diagnosis and treatment methods. Additionally, NCMHD released two Funding Opportunity Announcements for the program, and as a result plans to fund 9 additional COE in FY 2009. To support its efforts in developing a portfolio of innovative clinical and scientific research initiatives plus enhance its coordination and integration of collaborative research, the NCMHD established the Office of Innovation and Program Coordination (OIPC) in FY 2008. Collaborations with the NIH Institutes and Centers (ICs) and other Federal agencies were strengthened through continued support of initiatives such as: NHLBI's Jackson Heart Study on African Americans; NIEHS's Sister Study on Breast Cancer; NICHD's National Longitudinal Study of Adolescent Health; NIA's Healthy Aging in Neighborhoods of Diversity Across the Life Span (HANDLS) study; NIAAA's Risk factors for Alcoholism in Native Americans; and NIDA's Barriers to Substance Abuse Treatment among Asian Americans.

Budget Policy: The FY 2010 budget estimate for Health Disparities Research is \$107.914 million, an increase of \$6.618 million or 6.5% over the FY 2009 estimate. In FY 2010, NCMHD plans to continue funding for investigator-initiated health disparities research awards and provide additional funding for a Centers of Excellence competition.

Centers of Excellence Program: Comprehensive and Exploratory Research Centers of Excellence

| | |
|----------------|-----------------------|
| FY 2009 Level: | \$68.5 million |
| FY 2010 Level: | <u>\$78.1 million</u> |
| Change | +\$9.6 million |

The COE program helps build the nation's research capacity of academic institutions and increase the pool of investigators from health disparity populations through research training and faculty development. The COE program disseminates health information, including strategies to increase the participation of health disparity populations in clinical trials. It also promotes the establishment of partnerships by its grantees which may collaborate with different types of research institutions, health care facilities, community or faith-based organizations, and other entities interested in minority health and health disparities.

Since 2002, NCMHD has established 88 COE sites in 31 states, the District of Columbia, Puerto Rico, and the U.S. Virgin Islands. The types of institutions are broad and include a vast array of research institutions of higher education including Historically Black Colleges and Universities, Hispanic Serving Institutions, Tribal Colleges and Universities, Alaskan Native and Native Hawaiian Serving Institutions. The COE conduct multi-disciplinary research on priority diseases and conditions such as cardiovascular disease, stroke, cancer, diabetes, HIV/AIDS, infant mortality, mental health, and obesity.

In FY 2010, NCMHD plans to expand the program with an additional 5 COE sites.

Research Capacity-Building & Infrastructure: The purpose of this program is to build a comprehensive and diverse biomedical research enterprise of institutions and individuals dedicated to minority health and the elimination of health disparities. The strategy is three-fold: (1) build the scientific infrastructure and research environment in institutions with little or no research activities; (2) enhance the research capacity in

minority health and health disparities research in those academic institutions that have some research activities, but may or may not be in health disparities research; (3) and focus on research training for individuals from health disparity populations.

To support its efforts in this area, in FY 2008 NCMHD funded 10 Research Endowment grants, 620 health professional recipients under the Loan Repayment Program (LRP), 24 grantees under the Research Infrastructure in Minority Institutions (RIMI) Program and 25 grantees in the Minority Health and Health Disparities International Research Training (MHIRT) Program. In addition, the NCMHD released a Funding Opportunity Announcement for the RIMI and MHIRT programs, for which additional grants are planned in FY 2009.

Budget Policy: The FY 2010 budget estimate for Research Capacity-Building & Infrastructure is \$61.420 million, a decrease of \$3.568 million or 5.8% compared to the FY 2009 estimate. In FY 2010, funds are being realigned from this program area to support on-going activities and new activities in the Health Disparities Research program area as outlined previously. Funding in this program area will continue to support Endowment Research, Research Infrastructure in Minority Institutions, and the Loan Repayment Programs.

NCMHD Loan Repayment Programs

| | |
|----------------|-----------------|
| FY 2009 Level: | \$ 11.2 million |
| FY 2010 Level: | \$ 11.2 million |
| Change | \$ 0.0 million |

NCMHD currently supports two extramural Loan Repayment Programs (LRPs) : *Health Disparities Research (HDR) Loan Repayment Program* and the *Extramural Clinical Research for Individuals with Disadvantaged Backgrounds (ECR) Loan Repayment Program*. The LRPs seek to recruit and retain highly qualified health professionals with doctorate degrees in research careers related to the elimination of health disparities. The programs provide an incentive for successful applicants to engage in basic, clinical, and behavioral research relevant to health disparities, by repaying a portion of their educational loans. NCMHD provides support to an average 300 applicants each year for both programs. Since its inception in 2001, NCMHD has supported more than 1,700 health professionals across 49 states. More than 60% of the program participants are from racial and ethnic minority populations.

In FY 2009, the NCMHD will expand the LRP by launching the Disparities Research and Education Advancing our Mission (DREAM) program to promote the retention of LRP recipients in health disparities research. NCMHD will also begin funding investigator-initiated health disparities research awards. These opportunities will allow the NCMHD to continue to expand the LRP program in FY 2010 to help former NCMHD LRP recipients in their transition to become independent research investigators.

Outreach and Information Dissemination: The purpose of this activity is to facilitate the translation and dissemination of scientific information in enhancing clinical practice and improving the health of health disparity populations. The principle activity is to develop a data management center to augment its outreach and information dissemination activities, including expansion of its Community-Based Participatory Research (CBPR) program. The CBPR is designed to actively engage the community

in all phases of research including design, implementation, and dissemination of the research results.

In FY 2008, there were 40 current CBPR research intervention grantees that initiated 5-year health disparities intervention research studies on major diseases/conditions, such as obesity, diabetes, cancer, mental health, and HIV/AIDS, affecting racial and ethnic minority populations, as well as other health disparity populations.

Budget Policy: The FY 2010 budget estimate for Outreach and Information Dissemination is \$24.459 million, a decrease of \$414 thousand or 1.6% compared to the FY 2009 estimate. With the FY 2010 budget, the NCMHD will continue to support its CBPR program, described in the program portrait below.

Community-Based Participatory Research Program

| | |
|----------------|------------------------|
| FY 2009 Level: | \$ 21.7 million |
| FY 2010 Level: | <u>\$ 21.7 million</u> |
| Change | <u>\$ 0.0 million</u> |

The CBPR program has three phases: a three-year research planning grant; a competitive five-year intervention research grant; and a competitive three-year dissemination phase. The participatory, personalized and preemptive features are embedded in all three phases of the CBPR program with its emphasis on active participation of the affected communities and the focus on intervention research for disease prevention and health promotion.

In FY 2008 the intervention research grant study phase was initiated. This phase is focused on one or more diseases/conditions which disproportionately affect racial and ethnic minorities and other health disparity populations such as obesity, diabetes, cancer, cardiovascular diseases, substance abuse, mental health, and HIV/AIDS. Continuation funding in FY 2009 will support the implementation of the CBPR intervention research.

In FY 2010, NCMHD plans to continue funding for the CBPR five-year intervention studies.

Intramural Research: The NCMHD has advanced its Intramural Research mission through collaborations that leverage the scientific strengths and enhances the intramural health disparities research efforts of the other ICs. It will continue to advance its intramural activities through collaborations and by building on the strengths of its extramural research programs. NCMHD intramural research activities aim to enhance understanding of the biological and non-biological determinants of health disparities, and increase the number of researchers from under-represented populations involved in health disparities research. These intramural activities provide a uniquely interactive, interdisciplinary environment for basic laboratory and long-term epidemiologic, behavioral and social science research studies and their rapid translation to intervention development and implementation.

In FY 2008, NCMHD funded eight intramural research projects with seven ICs. Projects included the Clinical Center's Bench to Bedside Program, NHLBI's Hispanic Community

Health Study/Study of Latinos, and research on helicobacter pylori with NIDDK, and auto-inflammatory and auto-immune disease with NIAID. In addition, NCMHD initiated planning for its own intramural research activities targeting new investigators to begin in FY 2009.

Budget Policy: The FY 2010 budget estimate for Intramural Research is \$4.370 million, an increase of \$65 thousand or 1.5% over the FY 2009 estimate. The Intramural Research Program plans for FY 2010 includes continued funding of the NCMHD Intramural Program by supporting intramural investigators conducting minority health or health disparities research.

Research Management and Support: Research Management and Support (RMS) activities provide administrative, budgetary, logistical, and scientific support in the review, award, and monitoring of research grants, training awards and research and development contracts. The functions of RMS also encompass strategic planning, coordination, and evaluation of the Center's programs and liaison with other Federal agencies, Congress, and the public.

Budget Policy: The FY 2010 budget estimate for RMS is \$10.681 million, an increase of \$184 thousand or 1.75% over the FY 2009 estimate. This funding level will support 28 FTEs.

**NATIONAL INSTITUTES OF HEALTH
National Center on Minority Health and Health Disparities**

Budget Authority by Object

| | FY 2009 Estimate | FY 2010 PB | Increase or Decrease | Percent Change |
|---|---------------------|---------------------|-------------------------|-------------------|
| Total compensable workyears: | | | | |
| Full-time employment | 27 | 28 | 1 | 3.7 |
| Full-time equivalent of overtime and holiday hours | 0 | 0 | 0 | 0.0 |
| Average ES salary | \$0 | \$0 | \$0 | 0.0 |
| Average GM/GS grade | 14.3 | 14.4 | 0.1 | 0.7 |
| Average GM/GS salary | \$108,696 | \$111,632 | \$2,936 | 2.7 |
| Average salary, grade established by act of July 1, 1944 (42 U.S.C. 207) | \$106,341 | \$108,468 | \$2,127 | 2.0 |
| Average salary of ungraded positions | \$163,575 | \$166,847 | \$3,272 | 2.0 |
| OBJECT CLASSES | | | | |
| | FY 2009 Estimate | FY 2010 Estimate | Increase or Decrease | Percent Change |
| Personnel Compensation: | | | | |
| 11.1 Full-time permanent | \$2,152,000 | \$2,289,000 | \$137,000 | 6.4 |
| 11.3 Other than full-time permanent | 1,181,000 | 1,256,000 | 75,000 | 6.4 |
| 11.5 Other personnel compensation | 110,000 | 117,000 | 7,000 | 6.4 |
| 11.7 Military personnel | 118,000 | 126,000 | 8,000 | 6.8 |
| 11.8 Special personnel services payments | 0 | 0 | 0 | 0.0 |
| Total, Personnel Compensation | 3,561,000 | 3,788,000 | 227,000 | 6.4 |
| 12.0 Personnel benefits | 823,000 | 876,000 | 53,000 | 6.4 |
| 12.2 Military personnel benefits | 44,000 | 47,000 | 3,000 | 6.8 |
| 13.0 Benefits for former personnel | 0 | 0 | 0 | 0.0 |
| Subtotal, Pay Costs | 4,428,000 | 4,711,000 | 283,000 | 6.4 |
| 21.0 Travel and transportation of persons | 76,000 | 76,000 | 0 | 0.0 |
| 22.0 Transportation of things | 5,000 | 5,000 | 0 | 0.0 |
| 23.1 Rental payments to GSA | 0 | 0 | 0 | 0.0 |
| 23.2 Rental payments to others | 0 | 0 | 0 | 0.0 |
| 23.3 Communications, utilities and miscellaneous charges | 41,000 | 41,000 | 0 | 0.0 |
| 24.0 Printing and reproduction | 86,000 | 86,000 | 0 | 0.0 |
| 25.1 Consulting services | 80,000 | 80,000 | 0 | 0.0 |
| 25.2 Other services | 1,480,000 | 1,480,000 | 0 | 0.0 |
| 25.3 Purchase of goods and services from government accounts | 29,067,000 | 20,570,000 | (8,497,000) | -29.2 |
| 25.4 Operation and maintenance of facilities | 14,000 | 14,000 | 0 | 0.0 |
| 25.5 Research and development contracts | 16,147,000 | 17,677,000 | 1,530,000 | 9.5 |
| 25.6 Medical care | 0 | 0 | 0 | 0.0 |
| 25.7 Operation and maintenance of equipment | 4,000 | 4,000 | 0 | 0.0 |
| 25.8 Subsistence and support of persons | 0 | 0 | 0 | 0.0 |
| 25.0 Subtotal, Other Contractual Services | 46,792,000 | 39,825,000 | (6,967,000) | -14.9 |
| 26.0 Supplies and materials | 122,000 | 122,000 | 0 | 0.0 |
| 31.0 Equipment | 53,000 | 53,000 | 0 | 0.0 |
| 32.0 Land and structures | 0 | 0 | 0 | 0.0 |
| 33.0 Investments and loans | 0 | 0 | 0 | 0.0 |
| 41.0 Grants, subsidies and contributions | 154,356,000 | 163,925,000 | 9,569,000 | 6.2 |
| 42.0 Insurance claims and indemnities | 0 | 0 | 0 | 0.0 |
| 43.0 Interest and dividends | 0 | 0 | 0 | 0.0 |
| 44.0 Refunds | 0 | 0 | 0 | 0.0 |
| Subtotal, Non-Pay Costs | 201,531,000 | 204,133,000 | 2,602,000 | 1.3 |
| Total Budget Authority by Object | 205,959,000 | 208,844,000 | 2,885,000 | 1.4 |

Includes FTEs which are reimbursed from the NIH Roadmap for Medical Research

NATIONAL INSTITUTES OF HEALTH
National Center on Minority Health and Health Disparities

Salaries and Expenses

| OBJECT CLASSES | FY 2009 Estimate | FY 2010 PB | Increase or Decrease | Percent Change |
|---|---------------------|-------------------|-------------------------|-------------------|
| Personnel Compensation: | | | | |
| Full-time permanent (11.1) | \$2,152,000 | \$2,289,000 | \$137,000 | 6.4 |
| Other than full-time permanent (11.3) | 1,181,000 | 1,256,000 | 75,000 | 6.4 |
| Other personnel compensation (11.5) | 110,000 | 117,000 | 7,000 | 6.4 |
| Military personnel (11.7) | 118,000 | 126,000 | 8,000 | 6.8 |
| Special personnel services payments (11.8) | 0 | 0 | 0 | 0.0 |
| Total Personnel Compensation (11.9) | 3,561,000 | 3,788,000 | 227,000 | 6.4 |
| Civilian personnel benefits (12.1) | 823,000 | 876,000 | 53,000 | 6.4 |
| Military personnel benefits (12.2) | 44,000 | 47,000 | 3,000 | 6.8 |
| Benefits to former personnel (13.0) | 0 | 0 | 0 | 0.0 |
| Subtotal, Pay Costs | 4,428,000 | 4,711,000 | 283,000 | 6.4 |
| Travel (21.0) | 76,000 | 76,000 | 0 | 0.0 |
| Transportation of things (22.0) | 5,000 | 5,000 | 0 | 0.0 |
| Rental payments to others (23.2) | 0 | 0 | 0 | 0.0 |
| Communications, utilities and miscellaneous charges (23.3) | 41,000 | 41,000 | 0 | 0.0 |
| Printing and reproduction (24.0) | 86,000 | 86,000 | 0 | 0.0 |
| Other Contractual Services: | | | | |
| Advisory and assistance services (25.1) | 80,000 | 80,000 | 0 | 0.0 |
| Other services (25.2) | 1,480,000 | 1,480,000 | 0 | 0.0 |
| Purchases from government accounts (25.3) | 9,185,000 | 9,001,000 | (184,000) | -2.0 |
| Operation and maintenance of facilities (25.4) | 14,000 | 14,000 | 0 | 0.0 |
| Operation and maintenance of equipment (25.7) | 4,000 | 4,000 | 0 | 0.0 |
| Subsistence and support of persons (25.8) | 0 | 0 | 0 | 0.0 |
| Subtotal Other Contractual Services | 10,763,000 | 10,579,000 | (184,000) | -1.7 |
| Supplies and materials (26.0) | 122,000 | 122,000 | 0 | 0.0 |
| Subtotal, Non-Pay Costs | 11,093,000 | 10,909,000 | (184,000) | -1.7 |
| Total, Administrative Costs | 15,521,000 | 15,620,000 | 99,000 | 0.6 |

**NATIONAL INSTITUTES OF HEALTH
National Center on Minority Health and Health Disparities**

| | | Authorizing Legislation | | | | FY 2010 PB |
|--|-----------------------|---------------------------|---------------------|---------------------------|--------------------|---------------|
| PHS Act/ Other Citation | U.S. Code Citation | 2009 Amount Authorized | FY 2009 Estimate | 2010 Amount Authorized | | |
| Research and Investigation | Section 301 | 42§241 | Indefinite | Indefinite | } \$208,844,000 | Indefinite |
| National Center on Minority Health and Health Disparities | Section 402(a) | 42§281 | \$205,959,000 | Indefinite | | |
| Total, Budget Authority | | | 205,959,000 | | 208,844,000 | |

**NATIONAL INSTITUTES OF HEALTH
National Center on Minority Health and Health Disparities**

Appropriations History

| Fiscal Year | Budget Estimate to Congress | House Allowance | Senate Allowance | Appropriation |
|--------------|-----------------------------|-----------------|------------------|---------------|
| 2001 | 0 <u>2/</u> | 0 | 0 | 130,200,000 |
| Rescission | | | | (77,000) |
| 2002 | 158,425,000 | 157,204,000 | 158,421,000 | 157,812,000 |
| Rescission | | | | (70,000) |
| 2003 | 186,929,000 | 186,929,000 | 186,292,000 | 186,929,000 |
| Rescission | | | | (1,215,000) |
| 2004 | 192,724,000 | 192,724,000 | 192,824,000 | 192,724,000 |
| Rescission | | | | (1,253,000) |
| 2005 | 196,780,000 | 196,780,000 | 197,900,000 | 197,780,000 |
| Rescission | | | | (1,621,000) |
| 2006 | 197,379,000 | 197,379,000 | 203,367,000 | 197,379,000 |
| Rescission | | | | (1,974,000) |
| 2007 | 194,299,000 | 194,299,000 | 196,771,000 | 199,444,000 |
| Rescission | | | | 0 |
| 2008 | 194,495,000 | 202,691,000 | 203,895,000 | 203,117,000 |
| Rescission | | | | (3,548,000) |
| Supplemental | | | | 1,061,000 |
| 2009 | 199,762,000 | 206,632,000 | 205,322,000 | 205,959,000 |
| Rescission | | | | 0 |
| 2010 | 208,844,000 | | | |

1/ Reflects enacted supplementals, rescissions, and reappropriations.

2/ Excludes funds for HIV/AIDS research activities consolidated in the NIH Office of AIDS Research.

**NATIONAL INSTITUTES OF HEALTH
National Center on Minority Health and Health Disparities**

Details of Full-Time Equivalent Employment (FTEs)

| OFFICE/DIVISION | FY 2008 Actual | FY 2009 Estimate | FY 2010 PB |
|--|---------------------|---------------------|---------------|
| Office of the Director | 9 | 10 | 11 |
| Division of Extramural Activities and Scientific Programs | 11 | 13 | 13 |
| Division of Scientific Strategic Planning and Policy Analysis | 4 | 4 | 4 |
| Total | 24 | 27 | 28 |
| Includes FTEs which are reimbursed from the NIH Roadmap for Medical Research | | | |
| FTEs supported by funds from Cooperative Research and Development Agreements | (0) | (0) | (0) |
| FISCAL YEAR | Average GM/GS Grade | | |
| 2006 | 13.5 | | |
| 2007 | 14.3 | | |
| 2008 | 14.2 | | |
| 2009 | 14.3 | | |
| 2010 | 14.4 | | |

NATIONAL INSTITUTES OF HEALTH
National Center on Minority Health and Health Disparities

Detail of Positions

| GRADE | FY 2008 Actual | FY 2009 Estimate | FY 2010 PB |
|--|-------------------|---------------------|---------------|
| Total, ES Positions | 0 | 0 | 0 |
| Total, ES Salary | 0 | 0 | 0 |
| GM/GS-15 | 5 | 5 | 5 |
| GM/GS-14 | 7 | 8 | 8 |
| GM/GS-13 | 1 | 2 | 2 |
| GS-12 | 2 | 2 | 2 |
| GS-11 | 1 | 2 | 2 |
| GS-10 | 0 | 0 | 0 |
| GS-9 | 1 | 2 | 2 |
| GS-8 | 1 | 1 | 1 |
| GS-7 | 1 | 1 | 1 |
| GS-6 | | | |
| GS-5 | | | |
| GS-4 | | | |
| GS-3 | | | |
| GS-2 | 1 | 0 | 0 |
| GS-1 | | | |
| Subtotal | 20 | 23 | 23 |
| Grades established by Act of July 1, 1944 (42 U.S.C. 207): | | | |
| Assistant Surgeon General | | | |
| Director Grade | 1 | 1 | 1 |
| Senior Grade | | | |
| Full Grade | | | |
| Senior Assistant Grade | | | |
| Assistant Grade | | | |
| Subtotal | 1 | 1 | 1 |
| Ungraded | 15 | 16 | 17 |
| Total permanent positions | 20 | 23 | 23 |
| Total positions, end of year | 36 | 40 | 41 |
| Total full-time equivalent (FTE) employment, end of year | 24 | 27 | 28 |
| Average ES salary | 0 | 0 | 0 |
| Average GM/GS grade | 14.2 | 14.3 | 14.4 |
| Average GM/GS salary | 103,069 | 108,696 | 111,632 |

Includes FTEs which are reimbursed from the NIH Roadmap for Medical Research.

**NATIONAL INSTITUTES OF HEALTH
National Center on Minority Health and Health Disparities**

New Positions Requested

| | FY 2010 | | |
|--|----------|----------|---------------|
| | Grade | Number | Annual Salary |
| Intramural Program Scientific Director | Ungraded | 1 | 180,000 |
| Total Requested | | 1 | |