

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
NATIONAL INSTITUTES OF HEALTH

Fiscal Year 2006 Budget Request

Witness appearing before the  
House Subcommittee on Labor-HHS-Education Appropriations

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National Center on Minority Health and Health Disparities

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William Beldon, Deputy Assistant Secretary, Budget

Mr. Chairman and Members of the Committee:

I am pleased to present the Fiscal Year (FY) 2006 President's budget request for the National Center on Minority Health and Health Disparities (NCMHD). The FY 2006 budget includes \$197,379,000, an increase of \$1,220,000 over the FY 2005 enacted level of \$196,159,000 comparable for transfers proposed in the President's request.

The NCMHD has just entered its fourth year of operation. Much has been accomplished during this time. However, much remains to be done. Racial and ethnic minorities and other health disparity populations continue to suffer a disproportionate burden of illness, disability and premature death. Health disparities cover a broad spectrum of health conditions and diseases that include cancer, mental illness, infectious diseases, autoimmune diseases, endocrine diseases, vascular diseases, infant mortality, diabetes, HIV/AIDS, obesity and nutritional deficiencies. There are many factors that contribute to health disparities such as genes, biology, culture, race, environment, socioeconomics, and health behavior. Due to the interaction of these complex factors, the elimination of health disparities requires a multifaceted approach.

## **NIH HEALTH DISPARITIES STRATEGIC PLAN**

The Congress has charged the NCMHD to lead the Federal effort in health disparities research, research capacity building, and outreach. The NCMHD guides the NIH efforts in collaboration with NIH Director, the other NIH Institutes and Centers,

and the NCMHD's Advisory Council in revising the *NIH Health Disparities Strategic Plan* annually. The plan represents the trans-NIH health disparities vision and strategy to eliminate health disparities through research, research infrastructure, capacity building, and community outreach.

The NIH Institutes and Centers (ICs) are committed to educating minority patient populations on disease management and quality care. Several of the ICs plan to increase the number of culturally relevant health educational materials and to develop and expand linkages with minority organizations and professional societies to increase dissemination of research advances to minority-serving institutions, and racial and ethnic minority and health disparity communities. For example, the National Institute of Allergy and Infectious Diseases (NIAID) will produce a series of low-literacy fact sheets on sexually transmitted infections, HIV/AIDS, and tuberculosis. The NINDS expanded its health education program, *Know Stroke. Know the Signs. Act in Time.*, to populations at high risk for stroke—African Americans, Hispanics, and seniors—in communities that have the health care systems in place to treat them. The National Center for Complementary and Alternative Medicine (NCCAM) will employ multimedia technology, such as web chats, teleconferences, and minority-focused media to disseminate information about complementary and alternative medicine.

The National Cancer Institute (NCI) is achieving significant progress toward understanding and addressing the needs of the Hawaiian and Pacific Basin populations through a five-year cooperative agreement with Papa Ola Lokahi, a Native Hawaiian

owned-and-operated community-based health organization. Through this agreement, the NCI funds a variety of culturally competent cancer awareness, research, and training activities.

The National Heart, Lung and Blood Institute (NHLBI) is initiating a new program to address the substantial and growing burden of Cardiovascular Disease (CVD) in American Indians and Alaska natives. This initiative will develop and test culturally appropriate interventions to promote the adoption of lifestyles and behaviors that are known to reduce biological and CVD risk factors, such as high blood pressure and cholesterol levels, obesity, glucose intolerance, and diabetes.

### **NCMHD HEALTH DISPARITIES IMPACT**

In addition to developing the NIH Strategic Plan, the NCMHD has focused attention on the pressing need to establish its programs. The national reach of the NCMHD extends to more than 100 institutions and more than 500 individuals that have received awards to train for health professions careers, conduct health disparities research, build research capacity and advance outreach efforts.

The NCMHD Health Disparities Centers of Excellence (Project EXPORT) program currently funds seventy-one institutions in 29 states engaged in multidisciplinary research. Priority research focus areas include cancer, cardiovascular disease, stroke, diabetes and the health of mothers and their infants.

Communities nationwide in states such as Alabama, New York, Pittsburgh, Montana and Hawaii are being encouraged and equipped for participation in clinical studies and for partnering in the conduct of evidence-based disease prevention and intervention activities. The Clemson University-Voorhees College Project EXPORT partnership has three studies focused on obesity. Using a network of community-based partners, each study examines diet and/or physical activity levels of rural residents or students. The objectives of the studies are to identify the socio-cultural factors influencing choices and determine how environmental effects and knowledge of nutrition and physical activity impact choices about diet and exercise.

Culturally competent health care is an essential component in defeating health disparities and requires a distinct sense of urgency. In a recent study on cultural competence among physicians treating Mexican Americans who have diabetes, supported by a NCMHD-Center of Excellence, scientists determined that physicians can increase cultural competence and effective care by becoming self-aware of their knowledge, views, and attitudes about cultures and ethnic groups, and by engaging in culture-focused educational activities. Recognizing that culturally appropriate actions can be predicted, based on a provider's awareness that culture is relevant to medical care and that negative preconceptions can hinder the effectiveness of health care delivery, is an important finding for improving cultural competence and reducing health disparities.

The NCMHD Research Endowment Program, unique within the NIH, is best described as inclusive and diverse. Fourteen institutions receive NCMHD endowment funds to enhance research capacity and infrastructure for research and training. The activities of the institutions involve strengthening teaching programs in the biomedical and behavioral sciences; establishing endowed chairs and programs; obtaining state-of-the-art equipment for instruction and research; and enhancing the recruitment and retention of student and faculty from health disparity populations. A NCMHD Endowment Program award to the University of Kansas has enabled the university to develop a K-12 pipeline to recruit students through summer programs; retain and graduate 95 percent of underrepresented minority medical students; increase underrepresented minority faculty members from 24 to 39; and provide opportunities for 48 underrepresented minority students to participate in health disparity research over the summer.

The NCMHD supports two loan repayment programs -- the Health Disparities Research Loan Repayment Program (HDR) and the Extramural Clinical Research Loan Repayment Program for Individuals from Disadvantaged Backgrounds (ECR), to promote a diverse and strong scientific workforce by alleviating the financial barriers that often discourage many talented health professionals from health disparity, medically underserved and disadvantaged communities from pursuing a research career.

The NCMHD funds are supporting the deployment of 466 emergent researchers to 42 states and the District of Columbia to conduct health disparities research. These programs are the foundation for developing a lasting relationship with talented and committed health disparities scholars. Fifty-six percent of the awardees in the HDR program are members of a health disparity population. The loan repayment programs exemplify the multidisciplinary approach needed to address health disparities. For example, epidemiology, pharmacology, linguistics, etiology, ethnography, health policy, and behavioral science are among the program's research disciplines. Research includes: identifying barriers to health care access; race and long-term diabetes self management in an HMO; a comparison of androgen receptor for polymorphism in African American and Caucasian women with breast cancer; and reducing HIV/STI risk in young adult minority populations.

The number of participating institutions in the Research Infrastructure in Minority Institutions (RIMI) Program has tripled since 2001. Program accomplishments include faculty seminar series on health disparities research; research on the health and developmental impact of methamphetamine production in New Mexico children, and the establishment of a Natural Toxins Research Center. The NCMHD will continue to build upon the RIMI program by exploring partnerships among tribal colleges, community/junior colleges, and non-research intensive four-year institutions with major research-intensive colleges and universities.

The Minority Health and Health Disparities International Research Training Program (MHIRT) positions the NCMHD in collaboration with the NIH Fogarty International Center, to extend its health disparities research and training capacity across borders. The MHIRT program enables students and faculty from health disparity populations to participate in international research training opportunities in countries such as South Africa, Sweden, Italy, Mexico, Bulgaria, Thailand, Trinidad, China, Australia, Brazil, and Senegal. Research efforts include cancer epidemiology, reproductive biology, parasitology, malaria, ethnopharmacology and neurobiology.

### **COMMUNITY-BASED PARTICIPATORY RESEARCH AND OUTREACH**

The NCMHD recently established an Office of Community-Based Participatory Research and Outreach, and launched a new program that will support collaborative partnerships between academic institutions and community-based organizations for research studies looking at the interface of physical and psychological environments and their health impacts on communities of color and the medically underserved; methodology research looking at effective methods of measuring racism and community level outcomes; evaluation of outcomes; and impact of the research. This program will build on the NCMHD existing community-based research and outreach initiatives through its Project EXPORT program.

## **FEDERAL RESEARCH COLLABORATIONS**

In addition to its core programs, the NCMHD has continued to fund a broad range of collaborations with the other NIH Institutes and Centers, the Department of Health and Human Services, and other Federal agencies. Recently, the NCMHD launched a new initiative to support research relevant to the Mississippi Delta Region and its medically underserved populations. This endeavor involved the collaboration of eight NIH Institutes and Centers with the NCMHD supporting approximately \$8 million in research projects.

## **CONCLUSION**

Working with our many research partners, the top priority of the NCMHD is to build a solid and diverse national biomedical research enterprise of individuals, institutions, and communities dedicated to eliminating health disparities. The NCMHD will sustain and expand its primary strategies. Research capacity building will extend beyond academia to involve community and faith-based organizations, individuals, and business at local and grassroots levels. Training and the diversification of the health, scientific, and technological workforce will remain key areas of focus in developing innovative projects. Prevention, treatment, cultural competency, and health care delivery for urban and rural communities will be approached more aggressively. We will continue to strive for an America in which all populations will have an equal opportunity to live long, healthy, and productive lives.

## **BIOGRAPHY**

**John Ruffin, Ph.D.**

**Director**

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

Dr. John Ruffin has devoted his professional life to improving the health status of minority populations in the United States and to developing and supporting educational programs for minority researchers and health care practitioners. As the NIH federal official for minority health disparities research, he has planned and brought to fruition the largest program in the nation to promote minority health and other health disparities research and biomedical research training. He has spearheaded the development of the first comprehensive Health Disparities Strategic Plan at NIH. His efforts have impacted local, regional, national and even international communities and have resulted in a growing portfolio of more than:

- 100 collaborative research studies
- 30 research training programs
- 466 loan repayment recipients and
- 71 promising Centers of Excellence for health disparities research

Dr. Ruffin has been committed to the development of innovative research, research capacity and training programs that create new learning opportunities and exposure for minority and health disparity students and faculty. He is dedicated to expanding partnerships with the NIH Institute and Center directors, various Federal, state, community and private sector leaders to be successful in eliminating health disparities.

Dr. Ruffin is the former director of the NIH Office of Research on Minority Health, the predecessor to the NCMHD. Before joining the NIH, he was Dean of the College of Arts and Sciences at North Carolina Central University. A native of New Orleans, Louisiana, Dr. Ruffin received his baccalaureate degree from Dillard University and a master's degree from Atlanta University. He earned a Ph.D. at Kansas State University in systematic and developmental biology and then pursued postdoctoral studies at Harvard University.

Dr. Ruffin's life-long commitment to academic excellence and to the promotion of numerous partnerships with government, private industry, and academic institutions to support minority health research and research training has earned him national recognition. He has received: the Samuel L. Kountz Award for his significant contribution to increasing minority access to organ and tissue transplantation; the NIH Director's Award; National Hispanic Leadership Award; Beta Beta Beta Biological Honor Society Award; the National Medical Association Award of Appreciation; the DHHS Special Recognition Award; and most recently the Presidential Merit Award.

Department of Health and Human Services  
Office of Budget

William R. Beldon

Mr. Beldon is currently serving as Deputy Assistant Secretary, Budget in the Department of Health and Human Services. He has been a Division Director in the Budget Office for sixteen years, most recently as Director of the Division of Discretionary Programs. Mr. Beldon started in federal service as an auditor in the Health, Education and Welfare Financial Management Intern program. Over the course of more than 30 years in the Budget Office, Mr. Beldon has held Program Analyst, Branch Chief and Division Director positions. Mr. Beldon received a Bachelor's Degree in History and Political Science from Marshall University and attended the University of Pittsburgh where he studied Public Administration. He resides in Fort Washington, Maryland.