

DEPARTMENT OF HEALTH AND HUMAN SERVICES
NATIONAL INSTITUTES OF HEALTH

Fiscal Year 2012 Budget Request

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

John Ruffin, Ph.D., Director
National Institute on Minority Health and Health Disparities

May 11, 2011

Mr. Chairman and Members of the Committee:

I am pleased to present the President's budget request for the National Institute on Minority Health and Health Disparities (NIMHD) of the National Institutes of Health (NIH). The Fiscal Year (FY) 2012 budget of \$214,608,000 includes an increase of \$5,073,000 over the FY 2011 comparable appropriation level of \$209,535,000.

This statement is submitted with the recognition of the Department's notification to the Congress of an NIH reorganization that would establish a new National Center for Advancing Translational Sciences and reallocate the remaining portions of the National Center for Research Resources to other parts of NIH, including NIMHD.

INTRODUCTION

Health disparity is an issue of immense proportions with health, economic, social and environmental impact for the nation. Disparities in the burden of illness and premature death experienced by racial and ethnic minorities, low-income, and rural populations, apply to a broad spectrum of disease types. Evidence-based research reveals that health disparities are the result of interacting factors that may be genetic, biological, environmental, social, economic, or psychological in nature. The causes of and solutions to health disparities are multidimensional and require multidimensional approaches to improve health and eliminate the disparities.

Health disparities have had a longstanding economic burden on the healthcare system. The Affordable Care Act (ACA) included several provisions aimed at mobilizing the nation around actions to confront health disparities in order to overcome the multiple barriers faced by underserved communities in obtaining quality healthcare. One provision in the ACA re-designated the National Center on Minority Health and Health Disparities (NCMHD) at the NIH to an Institute – named the National Institute on Minority Health and Health Disparities. The NIMHD was created to strengthen the base for the acceleration of scientific discovery already initiated by the predecessor

organization, the NCMHD, to understand health disparities and to identify and implement strategies to eradicate them across the nation. In accordance with the Affordable Care Act, NIMHD is charged to plan, review, coordinate, and evaluate minority health and health disparities research activities conducted by the NIH Institutes and Centers (ICs). As health disparities transcend many diverse areas of biomedical science and public health, this work must involve all of the NIH ICs, and numerous federal government and non-federal government partners.

BUILDING ON A DECADE OF PROGRESS

During the past decade, under the aegis of the NCMHD, the NIMHD launched its Congressional mandates, and established new programmatic initiatives and partnerships, allowing it to create the infrastructure required to be at the cutting edge of scientific discovery through its independent programs and support for collaborative research, research infrastructure development, and outreach projects with partners within the NIH, HHS, and beyond.

The foundation of the NIMHD's research portfolio is the NIMHD Exploratory and Comprehensive Centers of Excellence (COE) programs. Research in the COEs spans the wide array of diseases, health conditions, and complex non-biological factors contributing to health disparities. Translational research and the development of appropriate health interventions is a particular strength of the NIMHD COEs. The *NIMHD University of Puerto Rico-Cambridge Health Alliance Research Center of Excellence* has focused its research on Latino health and health care disparities, specifically mental disorders, substance abuse and asthma. This COE has generated and tested models aimed to improve health service delivery to eliminate these disparities. This includes multi-level interventions at the provider, individual/family and policy levels to reduce health services disparities and has provided invaluable data to understand the magnitude of substance abuse treatment disparities and the social and economic burden of these disparities.

In addition, NIMHD COEs have assisted in emergency response to disasters with health disparities implications such as Hurricane Katrina in 2005, and the Haiti earthquake in 2010. NIMHD COEs responded to the Haitian earthquake crisis with assistance to Haitian communities in south Florida and beyond the borders of the country. These efforts have improved the understanding of the global nature of health disparities.

To effectively conduct research, individuals, institutions and organizations must have the capacity and access to the resources that are necessary to conduct research. NIMHD is a leader in advancing the NIH efforts to increase the number of underserved populations represented in science and medicine. The NIMHD Health Disparities Research and the Clinical Research for Individuals from Disadvantaged Backgrounds Loan Repayment Programs (LRP) have supported more than 2,300 individuals representing multiple disciplines through loan repayment of educational loans. More than 60 percent of the LRP scholars represent racial/ethnic minority populations. The program has incentivized the pursuit of a scientific or health disparities research career and many former LRP recipients have been successful in competing for other NIH grants. Also, NIMHD offers the opportunity for LRP recipients to transition into becoming independent investigators through its Disparities Research and Education Advancing our Mission (DREAM) program in its Intramural Research Program (IRP). During their two-year appointment at the NIH conducting research on health disparities, the DREAM fellows work with mentors within the NIH Intramural Research Program across different NIH Institutes and Centers. After the two year period, the DREAM fellows have the option of returning to their originating academic institution or to a health disparity community to further hone their research skills and complete the final three years of the program.

In addition, programs such as the Research Centers in Minority Institutions and the new NIMHD Science Education Initiative which focuses on promoting science education and increasing the pool of individuals from health disparity populations in

the science field starting from kindergarten through the post-doctoral level, will play a key role in advancing the NIMHD's activities in this area.

There is growing interest in scientific research including health disparities research at academic institutions throughout the nation. However, many institutions have limited or no current capacity to conduct scientific research. Recognizing the variance in capacity among institutions of higher education, the NIMHD has invested considerable resources in the enhancement of research infrastructure and capacity of less research-intensive institutions through programs such as the NIMHD Building Research Infrastructure and Capacity (BRIC) program. Over time, the BRIC awards have been instrumental in transforming the abilities of some institutions to conduct health disparity research. For example, San Francisco State University (SFSU) through the development of shared research facilities has resulted in the publication of approximately 70 research articles on a variety of scientific topics, 76 SFSU students have entered highly competitive Ph.D. programs, and BRIC-supported faculty have received more than \$13 million in support to conduct health disparity research. Importantly, BRIC support has provided a strong base for institutions to expand their graduate level educational programs to include new doctorate opportunities to advance health disparities research, as well as the development of NIMHD Centers of Excellence.

A NEW ERA IN THE FIGHT AGAINST HEALTH DISPARITIES

The next decade will focus on bridging persistent gaps in health disparities, sustaining effective investments, and developing and adapting innovative approaches to health disparities. NIMHD will lead the development, implementation and evaluation of the agency's health disparities research agenda in collaboration with the other NIH Institutes and Centers. Research on minority health and health disparities, research capacity-building and outreach/information dissemination priorities across the NIH will emphasize areas such as: translational research, genetics and biological factors, global health, social determinants of health, behavioral and social sciences, innovative health

technologies, developing a diverse scientific workforce, health informatics capacity, public-private partnerships, social networking, and diverse participation in clinical trials.

NIMHD will advance this health disparities research agenda through translational research and dissemination of research findings for the benefit of clinical practice and health disparity communities. Community and population health intervention studies that map social, economic and environmental determinants will provide greater insight into the underlying causes of health disparities. In addition, primary care and prevention research to inform healthcare reform, improve healthcare quality, reduce costs and ultimately improve health outcomes for health disparity populations will be examined.

In today's culturally diverse and technologically advanced society, the construction of health messages that do not consider culture, history, environments, or literacy levels of certain health disparity communities can result in the inability of those communities to receive health information. NIMHD is committed to supporting and developing vehicles to translate and deliver research findings and health information to health disparity communities in a culturally and linguistically appropriate manner.

CONCLUSION

While many health disparities concerns of the past decade remain pervasive, the NIMHD sees opportunities to accelerate the pace of scientific discovery and translation. Within the context of the NIH and HHS priorities for eliminating health disparities, the NIMHD will intensify and diversify its research focus to elucidate the nation's understanding of health disparities. Research strategies must continue to be innovative and the results of this research must reach the community at a faster pace. The NIMHD is committed to strengthening its research efforts to realize these goals.

JOHN RUFFIN, Ph.D.

Dr. John Ruffin is the Director of the National Institute on Minority Health and Health Disparities (NIMHD). He is the Federal official responsible for minority health and health disparities research activities of the National Institutes of Health (NIH) which constitutes an annual budget of approximately \$2.8 billion. He is a well-respected leader and visionary in the field of minority health and health disparities, who has devoted his professional career to improving the health status of racial and ethnic minorities and other medically underserved populations. He has an impressive track record of developing and supporting programs to increase the cadre of minority scientists, physicians, and other health professionals, as well as attract a diverse group of researchers to the health disparities field.

His success has been due in large part to his ability to motivate others and gain the support of key individuals and organizations, as well as to his expertise in strategic planning, administration, and the development of numerous collaborative partnerships. Over his more than 20 year career at the NIH, he has led the transformation of the NIH minority health and health disparities research agenda from a programmatic concept to an institutional reality. Under his leadership the NIH Office of Minority Programs was established to address the health of minorities around the country before transitioning to the Office of Research on Minority Health, and later the National Center on Minority Health and Health Disparities in 2000, as a result of congressional legislation. In March 2010 the Patient Protection and Affordable Care Act re-designated the NCMHD to the National Institute on Minority Health and Health Disparities.

Dr. Ruffin has developed the largest biomedical research program in the nation to promote minority health and other health disparities research and training, through multi-faceted collaborations. In his quest to eliminate health disparities, the hallmark of his approach is to foster and expand strategic partnerships in alliance with the NIH Institutes and Centers, various Federal and state agencies, community organizations, academic institutions, private sector leaders, and international governments and non-governmental organizations. Under his leadership, the NIH convened the first national

summit on health disparities “The NIH Science of Eliminating Health Disparities Summit” in December 2008 with more than 4000 individuals from around the world representing various disciplines and sectors.

His life-long commitment to academic excellence, improving minority health and promoting training and health disparities research, has earned him distinguished national awards. Dr. Ruffin has received an honorary doctor of science degree from Spelman College, Tuskegee University, the University of Massachusetts in Boston, North Carolina State University, Morehouse School of Medicine, Meharry Medical College, Tulane University and Dillard University. He has been recognized by various professional, non-profit, and advocacy organizations including: the National Medical Association, the Society for the Advancement of Chicanos and Native Americans in Science; the Association of American Indian Physicians, the Hispanic Association of Colleges and Universities; the Society of Black Academic Surgeons; and the National Science Foundation. The John Ruffin Scholarship Program is an honor symbolic of his legacy for academic excellence bestowed by the Duke University Talent Identification Program. He has also received the Martin Luther King Jr., Legacy Award for National Service, the Yale University Edward A. Bouchet Leadership Award, and the Samuel L. Kountz Award for his significant contribution to increasing minority access to organ and tissue transplantation; the NIH Director’s Award; the National Hispanic Leadership Award; Beta Beta Beta Biological Honor Society Award; the Department of Health and Human Services’ Special Recognition Award; and the U.S. Presidential Merit Award.

Dr. Ruffin received a B.S. in Biology from Dillard University, a M.S. in Biology from Atlanta University, a Ph.D. in Systematic and Developmental Biology from Kansas State University, and completed post-doctoral studies in biology at Harvard University.