

**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES (HHS)  
NATIONAL INSTITUTES OF HEALTH (NIH)  
NATIONAL CENTER ON MINORITY HEALTH  
AND HEALTH DISPARITIES (NCMHD)**

**NATIONAL ADVISORY COUNCIL ON MINORITY HEALTH  
AND HEALTH DISPARITIES (NACMHD)**

**Bethesda Marriott Suites  
6711 Democracy Blvd.  
Bethesda, Maryland**

**June 8, 2010  
8:30 a.m. – 5:00 p.m.**

**Meeting Minutes**

**Council Members Present**

John Ruffin, Ph.D., Director, NCMHD  
Faye A. Gary, Ed.D., R.N., FAAN; Chair NACMHD  
Paula A. Braveman, M.D., MPH  
Michael J. Fine, M.D., MsC  
Mona Fouad, MD, MPH  
Alvin E. Headen, Jr., Ph.D.  
Wayne J. Riley, M.D., M.P.H., MBA, MACP  
Brian D. Smedley, Ph.D.  
José Szapocznik, Ph.D.  
Jose R. Valdez, D.B.A.  
Luther S. Williams, Ph.D.  
Deborah Olster, Ph.D.

**Ad Hoc Members**

John F. Alderete, Ph.D.  
Otis Brawley, M.D.  
Patricia Nez Henderson, M.D.  
Warren A. Jones, M.D.  
Marjorie Mau, M.D., M.S.  
Eloy Rodriguez, Ph.D.  
Raj Shah

**Executive Secretary**

Ms. Donna Brooks

**CLOSED SESSION** *The first portion of the meeting was closed to the public in accordance with the provisions set forth in Section 552(b)(4) and 552(b)(6), Title 5 U.S.C. code, and Section 10(d) of the Federal Advisory Committee Act as amended, U.S.C. Appendix 2.*

Executive Secretary, Ms. Donna Brooks called the meeting to order and turned the proceedings over to Dr. John Ruffin, Director of the National Center on Minority Health and Health Disparities (NCMHD). Dr. Ruffin noted that this meeting was of particular significance because it marks the final meeting of the Advisory Council to the National Center on Minority Health and Health Disparities (NCMHD). This is because the Patient Protection and Affordable Care Act, or Public Law 111-148, redesignated the NCMHD to Institute status. Dr. Ruffin then made a few observations about the transition from Center to Institute and turned the meeting over to NACMHD Chair designee, Dr. Faye Gary.

### **REVIEW OF GRANT APPLICATIONS**

Before the review began, Dr. Braveman suggested that Council consider a change in procedures in the future, such that each Council member would review a few applications in depth, rather than accord a somewhat lesser degree of scrutiny to the entire group of applications. This suggested change will be more fully considered at a future date.

The Council considered 140 applications requesting an estimated \$39,312,579 in total costs. The Council considered applications for initiatives supported with funds from the American Recovery and Reinvestment Act including: Centers of Excellence for Comparative Effectiveness Research and NIH Community-Linked Infrastructure grant programs.

NCMHD programs with grant applications for second level review were:

- The Small Business Innovation Research Program (SBIR); and the Small Business Technology Transfer Program, (STTR)
- NCMHD-NIBIB “*Development and Translation of Medical Technologies that Reduce Health Disparities*” Initiative
- Scientific Conference Grant Programs
- Centers of Excellence (administrative supplements)

Questions raised for future discussion included: funding after ARRA dollars have been expended; future initiatives on social determinants of health; and encouraging commercialization of products from the CERs.

With a few minutes remaining during the closed session, Council members expressed the need for dialogue pertaining to strengthening of the Institute to ensure its ability to fulfill its mission consistent with the law. Comments included the need for additional studies on the social determinants of health and health equity; that the new Institute must continue to demonstrate leadership of health disparities research; that coordination of the disparities research agendas of other Institutes remains essential; and that study of population-based minority-focused interventions for obesity is a subject of major importance not now comprehensively addressed by any other Institute.

Ms. Brooks adjourned the closed session.

## OPEN SESSION

### CALL TO ORDER & WELCOME

Ms. Donna Brooks called the Open Session to order.

### OPENING REMARKS AND INTRODUCTIONS

Dr. Ruffin welcomed participants to the Open Session and informed them of the transition of the Center to the National *Institute* on Minority Health and Health Disparities. P.L. 111-148, which designated the new Institute, provides it with enhanced authority to plan, coordinate, review and evaluate minority health and health disparities research and activities at the NIH. The new law also expands the eligibility criteria for the research endowment program so that the NCMHD Centers of Excellence, as well as the §736 HRSA institutions, can apply for research endowment grants.

### CONSIDERATION OF MINUTES

Dr. Gary acknowledged a correction to the minutes by Dr. Riley regarding his participation in the previous meeting. Subsequently, a motion to approve the minutes of the February 2010 meeting was passed unanimously.

### FUTURE MEETING DATES

- Tuesday, September 14, 2010
- Tuesday, February 22, 2011
- Tuesday, June 14, 2011

### NCMHD DIRECTOR'S REPORT

#### Management Activities

Dr. Ruffin introduced new staff:

- Sherri Parks, Ethics Specialist and Program Analyst in the Office of the Director;
- Dr. Jill Mattia, Health Scientist Administrator in the Division of Scientific Strategic Planning and Policy Analysis;
- Dr. Maryline Laude-Sharp, a Scientific Review Officer in the Office of Review;
- Dr. Julia Hastings, a DREAM fellow in the NCMHD intramural program; and
- Dr. Richard Berzon, a Health Science Administrator in the Office of Innovation and Program Coordination.

#### Programmatic Activities

Following the December 2008 NIH "*Science of Eliminating Health Disparities*" Summit, the NCMHD commissioned an American Journal of Public Health Special Supplement which was released in April 2010 and is now available.

NCMHD will launch a groundbreaking, two-week health disparities research course entitled, "*Integrating Principles on Science, Practice, and Policy in health disparities research*", scheduled for September 20<sup>th</sup> to October 1, 2010.

NCMHD launched two new initiatives were launched this year. The NCMHD “*Innovative Faith-based Approaches to Health Disparities Research*” Initiative seeks applications which are exploratory and novel: funding is for a two year period. The NCMHD also commenced an investigator-initiated research initiative entitled “*Advances in Health Disparities Research on Social Determinations of Health*”, utilizing the R01 mechanism.

### ***Loan Repayment Program***

Six hundred ninety-five Loan Repayment Program applications received for FY 2010 funding consideration.

### ***DREAM Program***

NCMHD received 12 applications for the FY 2011 cycle, and Council will conduct the second level of review for those applications in September.

### ***Summer Youth Initiative Program***

The NCMHD coordinates three annual summer Youth Initiative program visits to the NIH campus; one each for American Indian, African Americans, and Hispanic high school students. Each set of students participate in a two day career awareness and enrichment program at NIH, which includes a series of scientific lectures, tours, and laboratory visits. This year’s activities will begin on June 21<sup>st</sup>, and wrap up on July 13<sup>th</sup>. The summer Youth Initiative program is aimed at developing the next generation of biomedical researchers and scientists.

Dr. Ruffin then turned the meeting over to Dr. Gray for discussion of the 2009-2013 NIH Health Disparities Strategic Plan.

Dr. Gary then introduced Drs. Brian Smedley and Joyce Hunter who made a joint presentation regarding the development and status of the 2009 – 2013 NIH Health Disparities Strategic Plan.

## **NIH HEALTH DISPARITIES STRATEGIC PLAN**

### ***Background***

The development of the NIH-wide Health Disparities Strategic Plan and Budget is required by P.L. 106-525. The law states that:

- NCMHD is to coordinate the development of this plan with the other ICs
- The Health Disparities Strategic Plan and Budget is to be a collaborative effort of the NIH Director, the NCMHD Director, the other IC directors, in consultation with the NCMHD Advisory Council.

To develop the 2009-2013 Plan a trans-NIH Working Group was formed. Chaired by Dr. Smedley, it was composed of IC representatives and other extramural scientists from health disparity communities. A subcommittee of the Advisory Council was formed to assist in the effort.

### ***Activities of the Working Groups***

Dr. Smedley discussed the process used to establish a methodology for development of the plan; how that information was communicated to the ICOs; and how the subcommittee reviewed the submissions.

P.L. 106-525 requires that the plan:

- Establish scientific priorities with respect to health disparities research;
- Establish objectives;
- Establish a means for achieving the objectives;
- Establish a very clear timeline for achieving these objectives.

The Working Group considered ways to improve the guidance provided to the ICs regarding their respective submissions to the Strategic Plan and Budget. In doing so, the group took into account:

- the IOM report on the earlier 2002 – 2006 Strategic Plan and Budget
- the work of the NIH in terms of definition and budget methodology for minority health and health disparities
- the recommendations that came out of the December 2008 NIH Summit on Health Disparities, and,
- relevant guidance from the Office of the General Counsel to ensure that the ICs submission are not in conflict with *Adarand* decision and federal policies concerning the use of race and ethnicity in making program decisions.

In prior iterations of the plan, institutes and centers were asked to provide their priorities under three overarching goals: scientific research, research infrastructure or capacity building, and outreach. For the FY2009-2013 plan, the Working Group added a fourth overarching goal – the integration of research, research infrastructure, and outreach.

### ***Time line***

The Council subcommittee has finished its review of the IC submissions. Drs. Smedley and Hunter explained that the next steps towards preparing a draft trans-NIH document will be clearance of a draft document by Center staff and by Council, to be followed by clearance from the NIH Director, the HHS Secretary, and then a public comment period.

To summarize the preliminary review of the ICs submissions:

- 41 percent of the ICOs provided timelines associated with their objectives;
- 44 percent of the ICOs did not provide timelines;
- 24 percent of the ICOs did not provide a budget;
- 44 percent of the ICOs provided budget data that was linked to the objectives;
- 10 percent of the ICOs provided budget data that was linked to the area of emphasis;
- 17 percent of the ICOs did not provide an objective for the fourth category, which was not mandated; and one ICO provided an overall budget that was not linked to anything.

### ***Summary of discussion***

The Council discussed several items following the presentation including, the quality of the ICOs submissions and the process for revising, updating and clearing the plan.

Dr. Smedley thanked the Council for their guidance and input. Dr. Gary asked for further

comments, and hearing none, thanked Dr. Ruffin and staff for their efforts.

**Public Comments** – there were no public comments to record for this meeting.

**Recognition of Council Members**

Dr. Ruffin recognized and individually thanked Council members who were rotating off the Council for their service: Drs. Faye Gary, Juan Valdez, Brian Smedley, Alvin Headen, and Luther Williams.

At 5:03 p.m. the meeting was adjourned.

We hereby certify that, to the best of our knowledge, the foregoing minutes are accurate and complete.

**/John Ruffin/**

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John Ruffin, Ph.D., Chair, National Advisory Council on Minority Health and Health Disparities; Director, National Center on Minority Health and Health Disparities, NIH

**/Donna A. Brooks/**

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Donna A. Brooks, Executive Secretary, National Center on Minority Health and Health Disparities, NIH