

**DEPARTMENT OF HEALTH AND HUMAN SERVICES - PART II – TABLE A
AAPI PARTICIPATION IN MAJOR AGENCY PROGRAMS AND SERVICES BASED ON FY 2001**

Note – FY 2001 is the latest year in which there is reconciled data.

Major Agency Program/Services	Lead Entity	Total Population Eligible	Total AAPI Eligible			Total AAPIs Served			Enabling Activities to Broaden Service Delivery to AAPIs
			Asian	NHOPI	Total AAPI	Asian	NHOPI	Total AAPI	
Administration for Children and Families (ACF)									
Family Coping Initiative- This study will investigate family coping techniques in the face of economic distress and social change. The project will also identify positive family dynamics that contribute to the containment of social program costs. The project targets Native Hawaiians and other Pacific Islanders (NHOPIs) living in Hawaii.	ACF	420	140	140	280	0	0	0	Only interview eligibles. No services are provided.
State Refugee Social Services Formula Grants- All refugees are eligible to receive ORR services for their first five years in the U.S.	ACF	163,946	28,451	None	28,451	N/A	None	N/A	All Asian Americans refugees are eligible to receive ORR services for the first five years in U.S.
Refugee Program Discretionary Grants These are competitive grants. Refugees come to the U.S. from seven geographical areas of the world. ORR does not track participants by nationality. Discretionary grants do not have a time limitation.	ACF	N/A	N/A	None	N/A	N/A	None	N/A	These are competitive grants-Asian American CBOs are eligible to apply, and do, with increasing success.
Child Care and Development (CCD) Fund- Native Hawaiian Child Care Assistance Program. CCDBG (block grant) funds help States provide subsidies to working families and require States to spend a minimum of 4 percent of the funds to improve the quality and availability of healthy and safe child care for all families. Discretionary funds are also set aside for quality improvements and for school-age care.	ACF	Undetermined	Undetermined	Undetermined	Undetermined	Undetermined	441 Native Hawaiian children served	441 Children served	

DEPARTMENT OF HEALTH AND HUMAN SERVICES - PART II – TABLE A
AAPI PARTICIPATION IN MAJOR AGENCY PROGRAMS AND SERVICES BASED ON FY 2001

Major Agency Program/Services	Lead Entity	Total Population Eligible	Total AAPI Eligible			Total AAPIs Served			Enabling Activities to Broaden Service Delivery to AAPIs
			Asian	NHOPI	Total AAPI	Asian	NHOPI	Total AAPI	
<p>Head Start and Early Head Start (based on 1998 Head Start Data)</p> <p>Head Start and Early Head Start are comprehensive child development programs which serve children from birth to age 5, pregnant women, and their families. They are child-focused programs and have the overall goal of increasing the school readiness of young children in low-income families.</p>	ACF	NA	NA	Undetermined	NA	NA	NA	NA	The Head Start Bureau issues annual guidance to grantees regarding new competitive funds available for expanding the number of children served, in order to increase the participation of groups that may be under-served and under-represented in local Head Start programs (e.g., recent influxes of immigrants, children with limited English proficiency (LEP), and communities that have not been well-served in the past). Programs are encouraged to hire staff that reflect their communities' diversity and utilize community volunteers to translate recruitment and enrollment materials as well as act as interpreters, enabling all families to become full partners in the HS programs. See Table B for examples of regional projects.
Administration on Aging (AoA)									
AoA awards formula grants under the authority of the Older Americans Act (OAA) Title III, which provides funds for services and basic administrative support of the State, area agencies, and tribal organizations that comprise the Network on Aging.	AoA/ Office of Community-Based Services	45,797,200 2000 Census Data for 60+	1,136,553	28,475	1,165,028	N/A	N/A	182,719	Support AAPI National Resource Center at National Asian Pacific Center on Aging (NAPCA), National Association of State Units on Aging, National Association of Area Agencies on Aging, minority researchers and providers on effective strategies to broaden service delivery to AAPIs.
Native Hawaiian Program: (To enhance quality of life of elders, AoA maintains a program of aging services under the Title VI-B), under which it strives to meet the needs of Native Hawaiian elders. The leadership of the Native Hawaiian community has developed this program from its beginning.	AoA	NA	NA	12,234 (in Hawaii) Under OAA, Native Hawaiians 60 years and older can receive services.	NA	NA	NA	NA	NA

**DEPARTMENT OF HEALTH AND HUMAN SERVICES - PART II – TABLE A
AAPI PARTICIPATION IN MAJOR AGENCY PROGRAMS AND SERVICES BASED ON FY 2001**

Major Agency Program/Services	Lead Entity	Total Population Eligible	Total AAPI Eligible			Total AAPIs Served			Enabling Activities to Broaden Service Delivery to AAPIs
			Asian	NHOPI	Total AAPI	Asian	NHOPI	Total AAPI	
Agency for Healthcare Research and Quality (AHRQ)									
Health Costs, Quality, and Outcomes (HCQO) B funds research and development of tools to improve the functioning of the health care system and help answer the questions: What works? Under what circumstances? For which conditions? At what cost?	AHRQ	Total Populations	All	All	All	N/A	N/A Program announcements	N/A	Producing agency publications in numerous AAPI languages. Recent announcements [program announcements (PAs) and requests for applications (RFAs)] included funding set-asides to encourage health services research on issues regarding minority populations, e.g., AAPIs. Announcements were sent to organizations with research interests in minority health services research. The funding set-asides resulted in four grant awards addressing AAPI concerns. Also, in FY 2000 AHRQ issued an RFA for centers of excellence devoted to program project grants addressing the elimination of racial and ethnic health disparities. One goal of an RFA, “Primary Care Practice-Based Research Networks,@ issued in FY 2000, is the increase in network capacity to study health care of racial and ethnic minority and/or underserved populations. AAPIs is one of its target populations.
Medical Expenditure Panel Survey (MEPS) - MEPS provides public and private-sector decision makers with the ability to obtain timely national estimates of health care use and expenditures, private and public health insurance coverage, and the availability, costs, and scope of private health insurance benefits among the U.S. population. Using the information from MEPS, AHRQ provides analyses of changes in behavior as a result of market forces or policy changes on health care use, expenditures, and insurance coverage; develops cost/savings estimates of proposed changes in policy; and identifies the impact of subgroups of the population (i.e., who benefits and who pays more).	AHRQ	Total Population	N/A	N/A	N/A	N/A	N/A	N/A	Release of public use files from the MEPS Survey will permit estimates on selected health variables for AAPIs. Analyses for sub-populations were not possible.

NA = Not Available

DEPARTMENT OF HEALTH AND HUMAN SERVICES - PART II – TABLE A
AAPI PARTICIPATION IN MAJOR AGENCY PROGRAMS AND SERVICES BASED ON FY 2001

Major Agency Program/Services	Lead Entity	Total Population Eligible	Total AAPI Eligible			Total AAPIs Served			Enabling Activities to Broaden Service Delivery to AAPIs
			Asian	NHOPI	Total AAPI	Asian	NHOPI	Total AAPI	
Centers for Disease Control and Prevention (CDC) [this covers both CDC and the Agency for Toxic Substances and Disease Registry (ATSDR)]									
National Breast and Cervical Cancer Early Detection Program: State-based comprehensive breast and cervical cancer control programs; surveillance and epidemiology; quality assurance of mammography and Pap Smear screening; and partnership development.	CDC/ National Center for Chronic Disease Prevention and Health Promotion (NCCDP HP)	761,822	N/A	N/A	66,067	N/A	N/A	66,067	Collaborates with 71 health agencies and 60 private public and Federal organizations to reduce mortality from breast and cervical cancers. Develops and implements a Community Action Plan (CAP) to ensure access to affordable, culturally competent, and linguistically appropriate Pap Smear screening services.
Adolescent and School Health Program: (1) prevent important health problems and improve educational outcomes; (2) build infrastructure for comprehensive school health programs including HIV prevention programs for school- and college-aged youth; (3) establish partnerships between State and local health and education agencies; (4) identify and disseminate prevention programs; (5) and support a youth risk behavior surveillance system.	CDC/ NCCDPHP	15,203,666	N/A	N/A	N/A	N/A	N/A	N/A	Supports education agencies in 48 States, the District of Columbia (DC), 7 Territories, and 8 large cities to establish and strengthen school health programs to prevent HIV infection and other serious problems.
Diabetes Prevention and Control: To reduce the burden of diabetes in the United States. Building capacity to conduct State-based diabetes prevention and control programs to improve access to affordable, high quality diabetes care and services.	CDC/ NCCDPHP	280,000,000	N/A	N/A	N/A	N/A	N/A	N/A	Supports State-based diabetes control programs (DCPs) in all 50 States, the DC, and 8 U.S. Territories. The funding supports core-capacity activities that develop State health department expertise to plan and design diabetes control activities to improve access to affordable, high quality diabetes care and services targeting high-risk and disproportionately burdened AAPI populations.
Diabetes Control and Prevention: Demonstration and training in community-based interventions. State-based DCPs to lead health systems and communities toward improved diabetes prevention and control.	CDC/ NCCDPHP	280,000,000	N/A	N/A	N/A	N/A	N/A	N/A	Increases public awareness about the seriousness of diabetes. The National Diabetes Education Program and the National Media Campaign are the multi-component partnership-based initiative sponsored by NIH and CDC to reduce the morbidity and premature mortality due to diabetes.
Oral Health Program: Support for State Oral Disease Prevention Programs cooperative agreements to build capacity and infrastructure for state/territory oral health programs focusing on population-based prevention.	CDC/ NCCDPHP	280,000,000	N/A	N/A	19,000	N/A	N/A	N/A	Support six states and one territory (Republic of Palau) to monitor disease trends, develop plans to improve oral health and implement oral disease prevention programs.

NA = Not Available

DEPARTMENT OF HEALTH AND HUMAN SERVICES - PART II – TABLE A
AAPI PARTICIPATION IN MAJOR AGENCY PROGRAMS AND SERVICES BASED ON FY 2001

Major Agency Program/Services	Lead Entity	Total Population Eligible	Total AAPI Eligible			Total AAPIs Served			Enabling Activities to Broaden Service Delivery to AAPIs
			Asian	NHOPI	Total AAPI	Asian	NHOPI	Total AAPI	
Tobacco Prevention and Control Program: (1) lead and coordinate strategic activities that prevent tobacco use; (2) assist in smoking cessation; (3) eliminate exposure to environmental tobacco smoke; and (4) identify and eliminate disparities in tobacco using among different population groups.	CDC/ NCCDPH P	10,242,998	N/A	N/A	N/A	N/A	N/A	N/A	The National Tobacco Prevention and Control Program provides funding to 50 States, 7 Territories, and the DC to support comprehensive programs. Funding is also provided to 9 national networks that represent eight priority populations to become integrated in a broad national strategy to prevent and reduce exposure to secondhand smoke. Thirteen states and 1 territory also receive supplemental grants for programs to address tobacco-related disparities.
Preventive Health and Health Services Block Grant: (1) intervention programs to reduce incidence of chronic diseases; (2) detection of hypertension and elevated cholesterol; (3) training of emergency medical service technicians.	CDC/ NCCDPH P	3.4 Million People	N/A	N/A	N/A	N/A	N/A	N/A	Reduces incidence of hypertension and cardiovascular disease using effective intervention programs that include risk reduction and education through exercise and diet.
Sexually Transmitted Disease (STD) Prevention and Elimination: Syphilis Elimination Project: (1) enhance surveillance and outbreak response; (2) strengthen community involvement and organizational partnerships; (3) improve biomedical and behavioral interventions; (4) provide national leadership through research, policy development, and support of effective services to eliminate syphilis in the U.S.	CDC/ National Center for HIV, STD and TB Prevention or NCHSTP	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Enhances, detects, monitors and investigates syphilis cases, and intensified out-breaks as they are identified; works with affected communities and organizations in the health and non-health sectors at the local, State and national levels to develop syphilis elimination campaigns, develops activities that promote preventive behavior among those at risk, and promotes access to quality care.
HIV/AIDS Prevention: (1) provide financial and technical assistance for HIV prevention activities to State, local, and territorial health departments; (2) national and regional minority organizations; (3) community-based and religious organizations, and training agencies.	CDC/ NCHSTP	Data is not available	N/A	N/A	N/A	N/A	N/A	N/A	Develops, reviews, and updates scientifically-based comprehensive plans for addressing priority community prevention needs. Conducts epidemiologic, surveillance, behavioral, and operations research; assists in the transfer of research findings to HIV prevention programs; continues to implement and evaluate interventions for populations at highest risk for infection.

DEPARTMENT OF HEALTH AND HUMAN SERVICES - PART II – TABLE A
AAPI PARTICIPATION IN MAJOR AGENCY PROGRAMS AND SERVICES BASED ON FY 2001

Major Agency Program/Services	Lead Entity	Total Population Eligible	Total AAPI Eligible			Total AAPIs Served			Enabling Activities to Broaden Service Delivery to AAPIs
			Asian	NHOPI	Total AAPI	Asian	NHOPI	Total AAPI	
<p>Asian Pacific Islander Summit on HIV/AIDS Research Conference will provide in-depth perspectives on the status and needs of HIV research, prevention, case management and services for AAPIs.</p> <p>First ever national forum for researchers, health care and service providers, and consumers to jointly examine these issues and the current state of research.</p>	CDC/ NCHSTP	Data is not available	N/A	N/A	N/A	N/A	N/A	N/A	Collaboration with National Institute of Health (NIH), Asian Pacific Islander Wellness Center (A&PIWC), and the Center for AIDS Prevention Studies.
<p>Tuberculosis (TB) Elimination: (1) Support State and local health department efforts in preventing and controlling TB by providing therapy to ensure treatment completion; (2) investigate and control outbreaks, and conduct surveillance to monitor TB trends.</p>	CDC/ NCHSTP	Data is not available	N/A	N/A	N/A	N/A	N/A	N/A	Investigates and control outbreaks including drug-resistant TB; strengthens laboratory activities; conducts active surveillance to monitor TB trends and analyzes characteristics of the problem; conducts TB screening and preventive therapy among persons at high risk; provides information and education to health care providers and general population; conducts research to improve TB diagnostic and treatment.
<p>National Immunization Program (NIPS): (1) improve the quality and quantity of vaccination services; (2) increase community participation, education and partnerships.</p>	CDC/ NIP	10,720,719	N/A	N/A	N/A	N/A	N/A	N/A	Supports immunization activities that affect children, adolescents, and adults in public and private sector.

**DEPARTMENT OF HEALTH AND HUMAN SERVICES - PART II – TABLE A
AAPI PARTICIPATION IN MAJOR AGENCY PROGRAMS AND SERVICES BASED ON FY 2001**

Major Agency Program/Services	Lead Entity	Total Population Eligible	Total AAPI Eligible			Total AAPIs Served			Enabling Activities to Broaden Service Delivery to AAPIs
			Asian	NHOPI	Total AAPI	Asian	NHOPI	Total AAPI	
The Vaccines for Children Program (VFC) provides access to federally purchased vaccines for eligible children in the context of their medical home. It serves children that are Medicaid-eligible, uninsured, Native American or Alaska Native and underinsured children in Federally Qualified Health Centers or Rural Health Centers. Access to free vaccine has helped to practically eliminate racial disparities in immunization coverage for young children. The VFC Program, established in 1994, is an ongoing, long-term program.	CDC/ NIP	35,187,681	N/A	N/A	N/A	N/A	N/A	N/A	Develops a consolidated childhood immunization schedule; applies research into new vaccines that reduce the number of immunizations children must receive; improves monitoring of vaccine safety.
Women, Infants, and Children (WIC) Strategic Plan – conduct assessment and referral for immunizations for all WIC clients to improve immunization rates in an underserved population.	CDC/ NIP	121,139	N/A	N/A	N/A	N/A	N/A	N/A	Some activities are: Develops consensus about good practices; improve data about WIC and immunization coordination activities; improve mechanisms for communication to ensure coordination consistent with the missions of the respective agencies; obtain adequate funding for WIC-immunization activities; enroll at least 95 percent of WIC children in an immunization registry.
Violence Prevention: (1) research into the causes and consequences of risk and protective factors for suicide, homicide, youth violence, family and intimate partner violence, and sexual assault; (2) evaluation of programs to prevent violence, and firearm-related injuries.	CDC/ National Center for Injury Prevention and Control (NCIPC)	6,511,025	N/A	N/A	N/A	N/A	N/A	N/A	Supports programs that prevent rape, rape education prevention, and domestic violence victims. Develops inventory of Federal injury control research projects and injury prevention programs.
Provide national surveillance and state-level studies to monitor and describe Kawasaki syndrome (KS) occurrence. Provide research and epidemiologic activities to examine possible risk factors for KS.	CDC/ National Center for Infectious Diseases (NCID)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Conduct passive surveillance to identify disease prevalence and incidence of KS. Conduct focused research and investigations to examine possible risk factors and other issues related to KS.
National Occupational Research Agenda (NORA) Implementation: A plan to guide U.S. research on critical workplace safety and health issues. NORA highlights 21 priority areas where coordinated national research will produce optimum results for protecting the health and safety of workers and reducing the heavy economic costs imposed by job-related injuries and illnesses.	CDC/ National Institute for Occupational Safety and Health (NIOSH)	140,000,000	N/A	N/A	N/A	N/A	N/A	N/A	Conducts research on health and safety for kids in order to prevent injury and death among children who live or work on farms. Develops ventilation systems in cooperation with equipment manufacturers to prevent exposure to asphalt fumes, which can cause irritation and potential health hazards such as cancer.

NA = Not Available

**DEPARTMENT OF HEALTH AND HUMAN SERVICES - PART II – TABLE A
AAPI PARTICIPATION IN MAJOR AGENCY PROGRAMS AND SERVICES BASED ON FY 2001**

Major Agency Program/Services	Lead Entity	Total Population Eligible	Total AAPI Eligible			Total AAPIs Served			Enabling Activities to Broaden Service Delivery to AAPIs
			Asian	NHOPI	Total AAPI	Asian	NHOPI	Total AAPI	
Professional Training in Occupational Safety and Health: Serve as regional resources for professionals in industry, labor, government, and academia.	CDC/NIOSH	Data is not available from Center	N/A	N/A	N/A	N/A	N/A	N/A	Provides grant funds to universities that offer multi-disciplinary graduate and continued education programs in occupational medicine, occupational health nursing, occupational safety/ergonomics, and industrial hygiene.
Centers for Medicare & Medicaid Services (CMS)									
Medicare: Federal-funded health insurance to people age 65 and over and those who have permanent kidney failure and certain people with disabilities. It is the nation's largest health insurance program.	CMS/Center for Beneficiary Choices (CBC)	40,000,000	N/A	N/A	535K	N/A	N/A	535K	CMS publications translated into Chinese regarding Medicare benefits and rights, choosing a medicare plan, medigap, medicare fraud, etc. Conducted an outreach campaign in Fresno, CA to educate the Hmong community about Medicare, using Hmong language translated Medicare materials. Placed 30-second spots on TV in Korean to inform the elderly Korean community about Medicare Choices. Continued the Hepatitis B outreach campaign targeting the Chinese and Vietnamese populations in Boston's Chinatown and in the greater Boston area. Conducted an outreach project among Samoans and Hawaiians in Los Angeles County, CA to increase breast cancer awareness. Launched a project in Hawaii to reduce the incidence and mortality of cancer among Native Hawaiians and to educate Native Hawaiian women about early breast cancer detection.
Medicaid: Joint Federal- and State-funded health insurance program for certain low-income and needy people. It provides coverage for children, the aged, blind, and/or disabled, and people who are eligible to receive federally assisted income maintenance payments.	CMS/Center for Medicaid and State Operations (CMSO)	42,000,000	N/A	N/A	1.1M	N/A	N/A	N/A	Conducted a project in Kalihi Valley in Hawaii to provide health care education and improve access to preventive health care services for elderly AAPI Medicare and Medicaid beneficiaries. Maternal HIV postcards and posters translated into Chinese, Japanese, Korean, and Vietnamese.

DEPARTMENT OF HEALTH AND HUMAN SERVICES - PART II – TABLE A
AAPI PARTICIPATION IN MAJOR AGENCY PROGRAMS AND SERVICES BASED ON FY 2001

Major Agency Program/Services	Lead Entity	Total Population Eligible	Total AAPI Eligible			Total AAPIs Served			Enabling Activities to Broaden Service Delivery to AAPIs
			Asian	NHOPI	Total AAPI	Asian	NHOPI	Total AAPI	
State Children’s Health Insurance Program (SCHIP): Also known as Title XXI, as part of the Balanced Budget Act of 1997, it provides low-cost or free health insurance for children, 18 and under, of low-income families. Covered services include regular check-ups and immunizations, school and sports physicals, prescription drugs, dental care, vision and hearing testing, hospital visits, and more.	CMS/ CMSO	4,600,000	N/A	N/A	N/A	N/A	N/A	N/A	Used the information gathered from the earlier conducted focus groups with Asian communities in California to help decrease barriers to the utilization of State Children’s Health Insurance Program (SCHIP) programs.
Food and Drug Administration (FDA)									
“Take Time To Care...About Diabetes” – an educational campaign designed to promote awareness of this disease, especially among underserved women over the age of 45.	FDA/ Office of Women’s Health (OWH)	All	All	All	NA	NA	NA	NA	The OWH began preparing for this campaign in FY 2002, which will target 11 cities to provide background information about diabetes and risk information through partnerships with HHS Divisions, American Diabetes Association, and National Association of Chain Drugstores. Over 1 million brochures in several different languages will be distributed. FDA’s diabetes Web site has been linked to other diabetes information Web sites. OWH, the National Center for Toxicological Research (NCTR), and academia are studying nutrition and its role in developing birth defects. NCTR also studies genetic polymorphisms (mutations) as biomarkers of individual susceptibility to cancer--breast, prostate, lung--that disproportionately affect minority populations including AAPIs, and to drug treatments.
Guidance to industry in the collection of racial and ethnic data in clinical trials.	FDA Center for Drug Evaluation and Research (CDER)	All	All	All	NA	NA	NA	NA	Center for Drug Evaluation and Research (CDER) issued voluntary guidelines to encourage industry to capture ethnic and racial data in clinical trials.

**DEPARTMENT OF HEALTH AND HUMAN SERVICES - PART II – TABLE A
AAPI PARTICIPATION IN MAJOR AGENCY PROGRAMS AND SERVICES BASED ON FY 2001**

Major Agency Program/Services	Lead Entity	Total Population Eligible	Total AAPI Eligible			Total AAPIs Served			Enabling Activities to Broaden Service Delivery to AAPIs
			Asian	NHOPI	Total AAPI	Asian	NHOPI	Total AAPI	
<p>Internships – FDA offers internships, fellowships, mentoring programs and employment opportunities to students.</p> <p>Mansfield Fellowship – FDA offered one candidate the opportunity to live and work in Japan for one year.</p>	FDA	All	All	All	NA	NA	NA	NA	<p>The Joint Institute for Foods Safety and Applied Nutrition provided internship opportunities for 25 undergraduate and graduate students (including 13 Asian females), who worked as chemists, microbiologists, and biologists with scientists at the University of Maryland and FDA. CDER formed partnerships with Xavier University, Shenandoah University and Ortho McNeil Pharmaceutical Company to sponsor 16 Asian Americans in the “Pharmaceutical Drug Development Fellowship Program.”</p> <p>NCTR supported a group of graduate and post-graduate scientists to take part in collaborative research through a mentoring program with the Oak Ridge Institute for Scientific Education in 2001. Thirty-five were Asian males and 10 were Asian females.</p> <p>An FDA employee took part in the Mansfield Fellowship Program to improve cultural competency and to provide cultural sensitivity training.</p>
Database	FDA/ OWH	All	All	All	NA	NA	NA	NA	The OWH began developing a plan for a demographic database for clinical trial data. The database will provide opportunities to assess participation of minorities in clinical trials and to clarify any differences in clinical trial results among racial and ethnic groups. This database will be operational in 2002.
Recruitment Activities	FDA	NA	NA	NA	NA	NA	NA	NA	FDA recruited and trained 45 employees, including 6 Asian Americans, under the Senior Biomedical Research Scientist Program.

DEPARTMENT OF HEALTH AND HUMAN SERVICES - PART II – TABLE A
AAPI PARTICIPATION IN MAJOR AGENCY PROGRAMS AND SERVICES BASED ON FY 2001

Major Agency Program/Services	Lead Entity	Total Population Eligible	Total AAPI Eligible			Total AAPIs Served			Enabling Activities to Broaden Service Delivery to AAPIs
			Asian	NHOPI	Total AAPI	Asian	NHOPI	Total AAPI	
Demographic Data Collection	FDA/OWH	All	All	All	NA	NA	NA	NA	FDA amended regulations on new drug applications (NDAs) to clearly define the NDA format and content requirements for presenting effectiveness and safety data on demographic subgroups, specifically gender, age, and race. FDA also amended regulations on investigational new drug applications (INDs) to require sponsors to tabulate in their annual reports the numbers of subjects enrolled in clinical studies for drug and biological products according to age group, gender, and race. The rule refers only to data already collected.
Health Resources and Services Administration (HRSA)									
<u>Ryan White CARE Act Title I</u> Title I (Part A) provides emergency relief to metropolitan areas that are disproportionately affected by HIV/AIDS to provide outpatient and ambulatory health services support for disproportionately affected metropolitan areas.	HRSA/ HIV/ AIDS Bureau (HAB)	620,500- 693,500 (estimate that 75% of HIV/AIDS infected persons (estimate of 800K-900K) reside in the 51 Eligible Metropolitan Areas that receive Title I Ryan White CARE Act funds.	NA	NA	N/A	NA	NA	5,945 (duplicated count)	Title I's program of Minority AIDS Initiative (MAI) specifically addresses the needs of minority populations, including AAPI.
<u>Ryan White CARE Act Title II</u> States funded under Title II (Part B) utilize CARE Act funds for Home- and Community-Based Care, Health Insurance Coverage, State Direct Services, and HIV Care Consortia toward the development of a broader statewide response to the epidemic. A separate earmark under Part B provides funding for HIV/AIDS therapies through the AIDS Drug Assistance Program (ADAP), bringing the benefits of effective and costly antiretroviral therapies to h of persons with HIV unable to otherwise afford these therapies.	HRSA/ HAB	850,000- 950,000 (CDC estimate of persons living with HIV/AIDS in U.S., Feb. 2001)	NA	NA	N/A	NA	NA	2,719 (duplicated count)	Workshops planned for the All Titles Meeting (August 2002) include "Pacific Institution", "Innovative Outreach Programs" targeting special populations, "Needs Assessment Process", The Minority AIDS Initiative – What's Working, "Unmet Need Institute" – reaching out to people not in care. (Also applies to Title I)

DEPARTMENT OF HEALTH AND HUMAN SERVICES - PART II – TABLE A
AAPI PARTICIPATION IN MAJOR AGENCY PROGRAMS AND SERVICES BASED ON FY 2001

Major Agency Program/Services	Lead Entity	Total Population Eligible	Total AAPI Eligible			Total AAPIs Served			Enabling Activities to Broaden Service Delivery to AAPIs
			Asian	NHOPI	Total AAPI	Asian	NHOPI	Total AAPI	
<u>Ryan White CARE Act Title III</u> Title III (Part C) supports early intervention services and primary care for people with HIV/AIDS.	HRSA/ HAB	N/A	NA	NA	N/A	903	129	1,032	The Title III applicants are required to reflect the demographic composition of the HIV epidemic, including AAPIs, for each funded category. Increased numbers of AAPI organizations have applied for and received funding.
<u>Ryan White CARE Act Title IV</u> Title IV provides coordinated HIV services and access to research for women, infants, youth, and families, living with HIV/AIDS. Title IV programs focus on the development and operation of family-centered systems of primary health care and social services that benefit the populations in need. Title IV addresses specific population needs, such as those of reducing perinatal HIV transmission.	HRSA/ HAB	N/A	NA	NA	N/A	NA	NA	>1% or 399	Per Title IV data and annual reports review, HAB staffs have determined that analysis by racial/ethnic group is not feasible. A new data collection system implemented in 2001, will allow for data analysis by racial ethnic groups, including AAPIs beginning mid-2003.
<u>MCHB -Title V Block Grant</u> Title V authorizes appropriations to States to improve the health of all mothers and children, including children with special health care (CSHC) needs.	HRSA/ Maternal and Child Health Bureau (MCHB)	27,202,459 (Pregnant Women: 2,198,190; Infants less than 1 Year : 3,662,470; Children 1 to 22 Years: 18,163,820; (CSHCN): 970,044; and Other: 2,207,935)	N/A	N/A	N/A	N/A	N/A	318,560 (Total)* (AAPI infants served: 183,240; AAPI deliveries: 135,320)	Infrastructure Development, Systems Building, Enhanced Direct Services, and Population-Based Services.
<u>MCHB Discretionary Grants for AAPI Initiatives</u> These grant programs seek to achieve the following goals: 1) improve health and well being of AAPIs by increasing their access and utilization of health and human services; 2) Increase and improve collection, analyses, and dissemination of data about AAPI populations and subpopulations; 3) Improve the number of funded research projects and programs targeted towards AAPIs; and 4) Increase outreach to and participation of AAPIs in HHS or HHS sponsored training programs. See Table B for specific Discretionary Grant Programs and their respective funding levels.	HRSA/ MCHB	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Direct Health Care Services, Enabling Services, Population-Based Services, and Infrastructure Building Services.

DEPARTMENT OF HEALTH AND HUMAN SERVICES - PART II – TABLE A
AAPI PARTICIPATION IN MAJOR AGENCY PROGRAMS AND SERVICES BASED ON FY 2001

Major Agency Program/Services	Lead Entity	Total Population Eligible	Total AAPI Eligible			Total AAPIs Served			Enabling Activities to Broaden Service Delivery to AAPIs
			Asian	NHOPI	Total AAPI	Asian	NHOPI	Total AAPI	
Leadership, Education and Neuro-developmental Disabilities Program (LEND): The LEND Program's intent is to improve the health of children who have, or are at risk for, neuro-developmental or related disabilities by preparing trainees from several health disciplines. The Hawaii LEND program provides training with interdisciplinary leadership training, professional consultation and TA to the Title V and other community health agencies, continuing education activities for communities and families, research and program evaluation, development and dissemination of educational resources, and collaborative special projects.	HRSA/ MCHB	Residents of the State of Hawaii and the Pacific Basin.	NA	NA	NA	NA	NA	NA	Infrastructure Building Services, Training and Education, and Direct Health Services.
<u>MCHB-Abstinence Education Grant Program</u> The Section 510 Abstinence Education Grant Program enables States to provide abstinence education, and at the option of States, where appropriate, mentoring, counseling, and adult supervision to promote abstinence from sexual activity, with a focus on those groups most likely to bear children out of wedlock.	HRSA/ MCHB	AAPI population in Guam and Hawaii	NA	NA	NA	NA	NA	NA	Direct Services and Population-Based Services.
<u>Emergency Medical Services for Children (EMSC) Grant for State Development and Partnership</u> The EMSC program intends to support projects that assist States in expanding and improving State and local capability for reducing and ameliorating pediatric emergencies in the State, taking special care to include CSHC needs, culturally distinct populations and historically underrepresented groups.	HRSA/ MCHB	NA	NA	NA	NA	NA	NA	NA	Infrastructure Building Services
<u>MCHB: Health and Safety in Child Care Settings</u> Since the 1980s, MCHB supported the development of national health and safety standards in childcare and programs and community-based networks to improve and maintain the health of infants, children, and families, who use child care programs. Specific activities include: The Healthy Child Care America Campaign, a partnership between MCHB and ACF Child Care Bureau that creates links between providers and the child care community; the Health Systems Development in Child Care Grants Program to promote system development; and the Partnership to Develop and Implement a Child Care Health Consultant Program, which trains child care providers in health and safety.	HRSA/ MCHB	NA	NA	NA	NA	NA	NA	NA	Direct Services and Training

DEPARTMENT OF HEALTH AND HUMAN SERVICES - PART II – TABLE A
AAPI PARTICIPATION IN MAJOR AGENCY PROGRAMS AND SERVICES BASED ON FY 2001

Major Agency Program/Services	Lead Entity	Total Population Eligible	Total AAPI Eligible			Total AAPIs Served			Enabling Activities to Broaden Service Delivery to AAPIs
			Asian	NHOPI	Total AAPI	Asian	NHOPI	Total AAPI	
<u>Health Center Program:</u> Community Health Centers (CHCs) are funded to provide direct primary and preventive health services to underserved populations. Includes Public Housing, Migrant, and Homeless health centers.	HRSA/ Bureau of Primary Health Care (BPHC)	48,600,000	Undetermined	Undetermined	Undetermined	204,791 in calendar year (CY) 2000	100,975 in CY 2000	305,766 in CY 2000	Centers that serve AAPI pops provide culturally appropriate primary care, outreach, translation of health education materials, cultural competency training for staff, and recruit bilingual staff.
<u>Native Hawaiian Health Care Program:</u> The focus of this program is the provision of health promotion and disease prevention programs to Native Hawaiians residing in Hawaii.	HRSA/ BPHC	205,797	0	205,797	205,797	0	3677 program users in CY 2001 (based on encounters)	3677 program users in CY 2001 (last years number was based on encounters)	5 Native Hawaiian Health Systems provide outreach, population based screenings, translated health education materials, and recruit staff from the Native Hawaiian community.
<u>Native Hawaiian Scholarship Program:</u> This program provides financial support for Native Hawaiian students pursuing careers in health professions.	HRSA/ BPHC	Undetermined	Undetermined	Undetermined	Undetermined	Undetermined	Since the program began in 1992, 123 scholars have been funded.	123 scholarships awarded	Native Hawaiian scholars must serve in an underserved Native Hawaiian community during their service obligation.
<u>National Health Service Corps (NHSC):</u> Provides health care services for people in health professional shortage areas through site development, and the preparation, recruitment, and retention of culturally appropriate primary care providers.	HRSA/ BPHC	Undetermined	Undetermined	Undetermined	Undetermined	1,060 Asians served by NHSC sites (60% of sites reporting)	1,380 served by NHSC sites (60% of sites reporting)	2,440 total served (60% of sites reporting)	Recruitment and retention of culturally competent clinicians.
<u>The Pacific Basin Primary Care Program:</u> This program provides direct service delivery through health centers to AAPI populations that reside in the U.S. associated Pacific jurisdictions.	HRSA/ BPHC	500,000	0	500,000	500,000	0	59,552 in CY 2000	59,552 in CY 2000	Provision of translated materials, transportation, culturally competent outreach and health prevention programs. In addition two programs have developed a dispensary model to enhance access.
<u>Office of Rural Health Policy:</u> These grants are aimed at expanding access to, coordinating, restraining cost of, and improving the quality of essential health care in rural areas.	HRSA/ Office of Rural Health Policy (ORHP)	Undetermined	800	0	0	0	0	0	Rural Health Outreach Grant- An expanded telemedicine network consisting of 8 mental health care provider and consumer entities.
<u>On-line Provider's Guide to Quality and Culture:</u> This on-line tool provides information to help health care practitioners provide culturally sensitive care to more minority groups; and tool is available to all interested parties-health center staff, providers, patients, etc.	HRSA/ BPHC	NA	NA	NA	NA	NA	NA	NA	Cultural sensitivity training for staff.

DEPARTMENT OF HEALTH AND HUMAN SERVICES - PART II – TABLE A
AAPI PARTICIPATION IN MAJOR AGENCY PROGRAMS AND SERVICES BASED ON FY 2001

Major Agency Program/Services	Lead Entity	Total Population Eligible	Total AAPI Eligible			Total AAPIs Served			Enabling Activities to Broaden Service Delivery to AAPIs	
			Asian	NHOPI	Total AAPI	Asian	NHOPI	Total AAPI		
<u>Partnership with the American Academy of Family Physicians:</u> This partnership was established to develop training videos on cultural competence for providers. The video provides information on how the culture of the provider and the culture of the patient play into the doctor-patient relationship.	HRSA/ BPHC	NA	NA	NA	NA	NA	NA	NA	Cultural sensitivity training for staff. One of the videos features a Vietnamese woman and a white male physician.	
<u>Special Programs/ Division of Transplantation:</u> National Bone Marrow Registry Program operated under contract by the National Marrow Donor Program (NMDP)	HRSA/ BPHC	All patients diagnosed with hematological malignancies and disorders requiring unrelated allogeneic bone marrow transplant	NA	NA	All Asian and NHOPI patients diagnosed with hematological malignancies and disorders requiring unrelated allogeneic bone marrow transplant	NA	NA	62	NMDP conducts outreach activities and recruitment drives specifically targeting AAPIs.	
Program Support Center (PSC)										
The Parklawn Health library developed an extensive bibliography and purchased 7 books in FY 2001 pertaining to AAPI and maintains more than 40 major publications and subscribes to 1 journal addressing AAPI health issues.	PSC Parklawn Health Library	Undetermined	Undetermined	Undetermined	Undetermined	Undetermined	Undetermined	Undetermined	Undetermined	Continue additional efforts to obtain and lend publications that focus on AAPI health issues to other institutions and the general public.
PSC took the lead in planning, coordinating and conducting the program for National Asian/Pacific American Heritage Month at Parklawn for HHS health Divisions in the Rockville, MD area.	PSC/ Office of Equal Employment Opportunity	12,000	500	Undetermined	500	200	Undetermined	200	Partner with AAPI employee organizations.	
The PSC conducted outreach activity to the AAPI community regarding procurement opportunities.	PSC/ Division of Acquisition Management	Undetermined	Undetermined	Undetermined	Undetermined	Undetermined	Undetermined	Undetermined	Undetermined	Develop and implement additional strategies and activities to maximize outreach efforts

DEPARTMENT OF HEALTH AND HUMAN SERVICES - PART II – TABLE A
AAPI PARTICIPATION IN MAJOR AGENCY PROGRAMS AND SERVICES BASED ON FY 2001

Major Agency Program/Services	Lead Entity	Total Population Eligible	Total AAPI Eligible			Total AAPIs Served			Enabling Activities to Broaden Service Delivery to AAPIs
			Asian	NHOPI	Total AAPI	Asian	NHOPI	Total AAPI	
Substance Abuse and Mental Health Services Administration (SAMHSA)									
The Substance Abuse Prevention and Treatment (SAPT) Block Grant Program provides Federal support to substance abuse prevention services, and empowers States to design local solutions to their specific substance abuse problems.	SAMHSA / Center for Substance Abuse Treatment (CSAT)	Indigenous persons, and Native Hawaiian persons, organizations, and health centers.	NA	NA	NA	NA	NA	NA	1% of the SAPT Block Grant Set-aside
Targeted Capacity Expansion Program creates or expands a community's ability to provide a comprehensive, integrated, creative community-based response to a specific, well-documented substance abuse capacity problem.	SAMHSA / CSAT	Local government entities.	NA	NA	NA	NA	NA	NA	Awards ranged from \$100,000 to \$500,000, and were specifically provided to address substance abuse and HIV/AIDS in African Americans, Hispanics, Latinos and other racial/ethnic minority youth and women.
Comprehensive Community Treatment Program for the Development of New and Useful Knowledge supports the development or modification of treatment approaches for special populations and/or service settings and supports rigorous study of their effectiveness. The program generates new knowledge about three aspects of substance abuse treatment.	SAMHSA / CSAT	State and local governments, community-based organizations and State or private universities, colleges, and hospitals.	NA	NA	NA	NA	NA	NA	Awards ranged for total cost (direct and indirect): Full Studies B up to \$500,000; Exploratory/Pilot Studies B up to \$250,000.
Treatment Improvement Protocol series provides state-of-the art, consensus-based treatment protocols in community-based care on a defined topic in substance abuse treatment.	SAMHSA / CSAT	All races and ethnicities	NA	NA	NA	NA	NA	NA	Non-specific
Community Action Grants for Service Systems Change program promotes adoption by communities of exemplary practices in the delivery of substance abuse services.	SAMHSA / CSAT	State and local government agencies and federally designated Indian tribes and tribal organizations.	NA	NA	NA	NA	NA	NA	Awards ranged from \$50,000 to \$150,000.

**DEPARTMENT OF HEALTH AND HUMAN SERVICES - PART II – TABLE A
AAPI PARTICIPATION IN MAJOR AGENCY PROGRAMS AND SERVICES BASED ON FY 2001**

Major Agency Program/Services	Lead Entity	Total Population Eligible	Total AAPI Eligible			Total AAPIs Served			Enabling Activities to Broaden Service Delivery to AAPIs
			Asian	NHOPI	Total AAPI	Asian	NHOPI	Total AAPI	
Hawaii State Incentive Grant (SIG) mobilizes and leverages the State's efforts to prevent substance abuse.	SAMHSA / Center for Substance Abuse Prevention (CSAP)	Native Hawaiian and other Ethnic groups	36%	19%	55%	36%	19%	55%	Sub recipient grant awards made available to implement evidence based substance abuse prevention programs.
The National Registry of Effective Prevention Programs (NREPP): compilation of model substance abuse prevention programs.	SAMHSA / CSAP	All United States citizens	NA	NA	NA	NA	NA	NA	Pilot test and evaluate model NREPP substance abuse prevention programs in AAPI communities.
Targeted Capacity Expansion Program for Substance Abuse Treatment and HIV/AIDS Services Program enhances substance abuse treatment and HIV/AIDS services in African American, Hispanic/Latino, and/or other racial/ethnic minority communities highly affected by the twin epidemics of substance abuse and HIV/AIDS.	SAMHSA / CSAP	Public and domestic private non-profit entities	NA	NA	Undetermined	NA	NA	NA	Non-specific
Adaptation of Families and Schools Together (FAST) Program will record the adaptations of this program and evaluate the utility of FAST for Hmong families.	SAMHSA / Center for Mental Health Services (CMHS)	AAPI	100% Hmong	NA	NA	NA	NA	100% Hmong	Cultural and linguistic services
AAPI Youth Violence Prevention Resource Directory will establish a clearinghouse for AAPI mental health and youth violence prevention information and list existing resources and services for AAPIs nationally.	SAMHSA / CMHS	General public	NA	NA	Undetermined	1	NA	Undetermined	Cultural specific resource information
Office of the Secretary (OS)									
Investigate Complaints of Discrimination, Conduct Compliance Reviews of Recipients' Programs, Provide Outreach and Technical Assistance to Beneficiaries and Recipients.	OS/ Office for Civil Rights (OCR) 10 Regional Offices and Headquarters	NA	NA	NA	NA	NA	NA	14 Complaints of Discrimination received	Provide outreach and training to AAPI advocacy organizations, informing them of the civil rights laws.

DEPARTMENT OF HEALTH AND HUMAN SERVICES - PART II – TABLE A
AAPI PARTICIPATION IN MAJOR AGENCY PROGRAMS AND SERVICES BASED ON FY 2001

Major Agency Program/Services	Lead Entity	Total Population Eligible	Total AAPI Eligible			Total AAPIs Served			Enabling Activities to Broaden Service Delivery to AAPIs
			Asian	NHOPI	Total AAPI	Asian	NHOPI	Total AAPI	
OS - Office of Public Health and Science (OPHS)									
Healthy People 2010	OPHS/ ODPHP	US population	NA	NA	NA	NA	NA	NA	Enlist AAPI organizations to join the Consortium
Office of Minority Health Resource Center (OMHRC)- The OMHRC seeks to make scientifically accurate and culturally competent health information available to all populations.	OPHS/ OMH	US population	NA	NA	NA	NA	NA	NA	<p>In FY 01/02, OMHRC web pages with AAPI health information received 49,000 hits and 4,500 unique visitors. Implementation plans for the HHS/AAPI initiative were downloaded 800 times. OMHRC posts an AAPI Heritage Month web site each May.</p> <p>OMHRC added 123 new AAPI organizations, programs, and publications to its database and 213 articles on AAPI health to its articles database, and distributed 400 publications on AAPI health issues. Its newsletters Closing the Gap and HIV Impact (circulation 40,000 each plus web visits) regularly cover AAPI health issues. OMHRC's resource persons network includes 10 AAPI resource people, and nearly 80 persons who have experience in working with AAPI populations.</p> <p>Reprinted and distributed interim report of the Commissioners for the WHIAAPI to AAPI Community leaders, members, and others.</p> <p>OMHRC's HIV services team will begin to offer technical assistance to more AAPI community organizations in 2002.</p>

DEPARTMENT OF HEALTH AND HUMAN SERVICES - PART II – TABLE A
AAPI PARTICIPATION IN MAJOR AGENCY PROGRAMS AND SERVICES BASED ON FY 2001

Major Agency Program/Services	Lead Entity	Total Population Eligible	Total AAPI Eligible			Total AAPIs Served			Enabling Activities to Broaden Service Delivery to AAPIs
			Asian	NHOPI	Total AAPI	Asian	NHOPI	Total AAPI	
The National Leadership Summit on Eliminating Racial and Ethnic Disparities in Health - The Summit seeks to draw national attention to the existence of health disparities and to innovative approaches being implemented in communities and at the local, State, National, Federal and Tribal levels which address these disparities. The mission of the Summit is to stimulate action at all levels to enhance program outcomes which can lead to the elimination of health disparities. The Summit is relevant to AAPI and all other US minority populations.	OPHS/OMH	2,000 conference attendees; 40,000 readers of conference summary in Closing the Gap; size of audience for web-based toolkit and supplementary materials is potentially all US population.	NA	NA	NA	NA	NA	NA	Information about the Summit was provided to the OMHRC mailing list which includes AAPI and other minority CBOs and individuals, as well as AAPI serving agencies and organizations; to AAPI ListServes; and disseminated at AAPI conferences.
Bilingual/Bicultural Service Demonstration Program: Supports community-based projects to improve access to health care services for minorities with limited-English-speaking ability.	OPHS/OMH	NA	NA	NA	NA	NA	NA	NA	Grantees include 2 AAPI CBOs: Wisconsin: 1; and Illinois: 1. Projects improve and expand the linguistic and cultural competence of health care professionals and para-professionals working on LEP issues in AAPI communities, and improve the communities' access to and utilization of health care services.
Community Programs to Improve Minority Health: Improve the health status of targeted minority populations through health promotion and disease risk reduction intervention programs.	OPHS/OMH	NA	NA	NA	NA	NA	NA	NA	Grantees include 1 AAPI CBOs: Hawaii. Projects demonstrate the effectiveness of community-based coalitions in: coordinating integrated community -based educational screening and outreach services, and including linkages for access and treatment to minorities in high-risk, low-income communities; and addressing sociocultural and linguistic barriers to health care.

**DEPARTMENT OF HEALTH AND HUMAN SERVICES - PART II – TABLE A
AAPI PARTICIPATION IN MAJOR AGENCY PROGRAMS AND SERVICES BASED ON FY 2001**

Major Agency Program/Services	Lead Entity	Total Population Eligible	Total AAPI Eligible			Total AAPIs Served			Enabling Activities to Broaden Service Delivery to AAPIs
			Asian	NHOPI	Total AAPI	Asian	NHOPI	Total AAPI	
Minority Community Health Coalition Demonstration Program, HIV/AIDS: Improve the health status, relative to HIV/AIDS, of targeted minority populations through health promotion and education activities.	OPHS/OMH	NA	NA	NA	NA	NA	NA	NA	Grantees include 4 AAPI CBOs: California: 1; Georgia: 1; Massachusetts: 1; and New York: 1. Projects develop the effectiveness of community-based coalitions involving non-traditional partners in mounting a community-based response to the HIV/AIDS crisis through community dialogue and interactions; address sociocultural, linguistic and other barriers to HIV/AIDS treatment to increase the number of individuals seeking and accepting services; and develop/conduct HIV/AIDS education and outreach efforts for hardly reached populations.
Health Disparities Grants in Minority Health: Reduce health disparities among racial and ethnic populations through local pilot and small-scale projects which address a demonstrated health problem or health related issue.	OPHS/OMH	NA	NA	NA	NA	NA	NA	NA	Grantees include 3 AAPI CBOs: California: 2; and Illinois: 1. Projects demonstrate the merit of using local organizations to conduct pilot or small scale community-based studies that address a wide range of health problems and issues related to health disparities in local minority communities.
The Institute of Medicine (IOM) is conducting a study entitled "Understanding and Eliminating Racial and Ethnic Disparities in Health Care," which was mandated by the Congress. The final report from this study-- orchestrated through a study committee, liaison panels, public workshops and commissioned papers--was issued in 2002, and OMH with other partner organizations will help to disseminate this information widely.	OPHS/OMH	NA	NA	NA	NA	NA	NA	NA	OMH's funding was critical to the support of public comment periods on the issues by API advocacy groups and others.
OMH continues to use controlled correspondence channels to review proposed budgets, regulations, guidance, draft reports, etc. to ensure issues of importance for racial and ethnic minority populations are appropriately addressed.	OPHS/OMH	NA	NA	NA	NA	NA	NA	NA	For example, OMH provided comments on the interim final rule for SCHIP and notice of proposed rule making for Medicaid managed care to ensure that racial and ethnic data are collected and reported to improve health care quality.
OMH provided funds to AHRQ to conduct a study on the impact of race and ethnicity in the access, use and outcomes of health care in an integrated delivery system setting.	AHRQ	NA	NA	NA	NA	NA	NA	NA	

DEPARTMENT OF HEALTH AND HUMAN SERVICES - PART II – TABLE A
AAPI PARTICIPATION IN MAJOR AGENCY PROGRAMS AND SERVICES BASED ON FY 2001

Major Agency Program/Services	Lead Entity	Total Population Eligible	Total AAPI Eligible			Total AAPIs Served			Enabling Activities to Broaden Service Delivery to AAPIs
			Asian	NHOPI	Total AAPI	Asian	NHOPI	Total AAPI	
OMH provided funds to help support a Congressionally mandated review by the National Academy of Sciences of the Department's collection of race/ethnicity and socioeconomic status data within the health care sector.	HHS (ASPE manages project)	NA	NA	NA	NA	NA	NA	NA	
OMH provides TA to internal and external advisory groups, CBOs, advocacy groups, Congress, academia, etc. on r/e data issues and other health policy issues.	OPHS/OMH	NA	NA	NA	NA	NA	NA	NA	For example, OMH staff provided a review of state laws and regulations on the collection of racial and ethnic data to the National Center of Vital Health Statistics (NCVHS) to update the panel and attendees of new efforts directed towards strengthening the collection of racial and ethnic data to improve health care quality.
OMH cochairs the Data Council's Working Group on R/E Data, which coordinates the development of r/e data policy.	OPHS/OMH	NA	NA	NA	NA	NA	NA	NA	
During FY 2001, the OMH continued to develop and pilot test a uniform information/data set (UDS) for evaluating and assessing the impacts of OMH-funded activities to make progress towards eliminating racial and ethnic disparities. Methodology to assess the available technical resources and knowledge to implement UDS are in development. The final report will include TA guidelines on how to use and train participants in the UDS, and recommendations on the technical feasibility of implementation. This project is anticipated to be completed in FY 2002.	OPHS/OMH	NA	NA	NA	NA	NA	NA	NA	Technical Assistance
In FY 2000, the National Health Law Program (NheLP) began a review of state laws, regulations and rules to determine the extent to which health insurers and MCOs are permitted to collect and report racial and ethnic information. The project's recommendations would support HHS's Initiative to Eliminate Racial and Ethnic Disparities in Health and Healthy People 2010 (HP2010).	OPHS/OMH	NA	NA	NA	NA	NA	NA	NA	Research, Development, and Evaluation
Title X Family Planning grant program: Title X Family Planning Program provides funding for comprehensive family planning medical and counseling services, including basic gynecologic care, screening for breast cancer, cervical cancer and sexually transmitted diseases—including HIV, infertility services, and reproductive health education and referrals.	OPHS/Office of Population Affairs	N/A	N/A	N/A	N/A	N/A	N/A	N/A	---

**DEPARTMENT OF HEALTH AND HUMAN SERVICES - PART II – TABLE A
AAPI PARTICIPATION IN MAJOR AGENCY PROGRAMS AND SERVICES BASED ON FY 2001**

Major Agency Program/Services	Lead Entity	Total Population Eligible	Total AAPI Eligible			Total AAPIs Served			Enabling Activities to Broaden Service Delivery to AAPIs
			Asian	NHOPI	Total AAPI	Asian	NHOPI	Total AAPI	
Centers of Excellence programs: National Centers of Excellence (CoEs) address women’s health from a coordinated, interdisciplinary perspective, uniting mental and physical health, and emphasizing public health education, prevention and outreach. The Community CoEs embrace the goals of the CoE program and require community involvement.	OPHS/ Office for Women’s Health (OWH)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Enhances local networks of community-based activities that promote and coordinate minority (including AAPI) women’s health services, training, education, career development, and community-based research.
National Women’s Health Information Center (NWHIC) (http://www.4woman.gov) provides comprehensive women’s health related information from public and private sectors to a variety of audiences. Materials can be accessed or downloaded from the Web site and more specialized information may be obtained by calling the toll free telephone service (1-800-994-WOMAN; TDD: 1-800-220-5446	OPHS/ OWH	N/A	N/A	N/A	N/A	N/A	N/A	N/A	NWHIC created and maintains a web page for Asian and Pacific Islander women to highlight and to help educate this population about health risks of special concern.
Continuing Education: Work with the six jurisdictions, clinical associations, regional NGOs, and other HHS OPDIVS to develop and implement germane continuing clinical health education programs for clinicians in the Jurisdictions.	OPHS/ Office of Pacific Health and Human Services (OPHHS)	NA	NA	NA	NA	NA	NA	NA	NA
Impact of the Compact: Continue to provide technical support to HHS, Department of Interior, and the Department of State regarding responsibilities that pertain to on-going negotiations with the Compacts of Free Assoc.	OPHS/ OPHHS	NA	NA	NA	NA	NA	NA	NA	NA
Emergency Preparedness/Mitigation: Continue working on a specific project that will develop a disaster mitigation instrument for each of the six Jurisdictions. Along those lines, identify and secure funding to implement an education and training component that will commence after all instruments are completed.	OPHS/ OPHHS	NA	NA	NA	NA	NA	NA	NA	NA
Coordination of the Federal Regional Outer Pacific Workgroup: Continue in support activities related to the Federal Regional Council as it applies to the Outer Pacific. The Federal Regional Council is a group composed of senior representatives from each of the major federal entities located in the R. IX area, and doing business in the Outer Pacific.	OPHS/ OPHHS	NA	NA	NA	NA	NA	NA	NA	NA
Telecommunications: Continue to work on enhancing the capabilities of Jurisdictions to implement telehealth, telemedicine, and teleconferencing activities.	OPHS/ OPHHS	NA	NA	NA	NA	NA	NA	NA	NA

NA = Not Available

DEPARTMENT OF HEALTH AND HUMAN SERVICES - PART II – TABLE A
AAPI PARTICIPATION IN MAJOR AGENCY PROGRAMS AND SERVICES BASED ON FY 2001

Major Agency Program/Services	Lead Entity	Total Population Eligible	Total AAPI Eligible			Total AAPIs Served			Enabling Activities to Broaden Service Delivery to AAPIs
			Asian	NHOPI	Total AAPI	Asian	NHOPI	Total AAPI	
National Institutes of Health (NIH)									
Specialized Center Cooperative Agreements. Designed to cooperatively engage minority medical and graduate schools in developing state-of-the-art basic and critical neuroscience research projects and programs.	NIH Institutes and Centers (ICs)	All races and ethnicities						Undetermined	Research Funding
Research supplements and other training mechanisms to attract talented students and fellows from minority communities to engage in research focused on the diagnosis, prevention, and treatment of diseases and disorders of the brain, spinal cord and peripheral nervous system through various funding mechanisms.	NIH ICs								
The General Clinical Research Centers (GCRC) are a national network of 80 centers that provide optimal settings for medical investigators to conduct safe, controlled, state-of-the-art, in-patient and out-patient studies of both children and adults.	NIH ICs								Develop Comprehensive Centers for Studies on Health Disparities, including AAPIs, through collaborations among GCRCs and Research Centers in Minority Institutions (RCMIs).
The Research Centers in Minority Institutions (RCMI) enhances the research capacity and infrastructure at minority colleges and universities that offer doctorates in health sciences.	NIH ICs	Undetermined							Develop Comprehensive Centers for Studies on Health Disparities, including AAPIs, through collaborations among RCMIs and GCRCs.
Encourage use of high quality information by health professionals and the public.	NIH/ National Library of Medicine (NLM)	NLM's databases and electronic resources are freely available to all world wide over the Internet.	All	All	All	Undetermined	Undetermined	Undetermined	Improve Internet access Digitization of Foreign Language Consumer Health Information Pilot Project Access to Electronic Health Information for the Public Exhibits and Conferences
Minority Biomedical Research Support (MBRS) Program: Strives to increase the number of minority biomedical scientists by awarding grants to enable faculty and students at minority institutions to participate in biomedical research.	NIH/ National Institute of General Medical Sciences (NIGMS); All ICs participate	All US institutions with significant minority enrollments	NA	NA	All US institutions with significant enrollments of AAPIs who are underrepresented in biomedical research.	NA	NA	113 academic institutions, many serving AAPIs	1) Internet and intranet communications; 2) Interactive learning modules for writing grant proposals

DEPARTMENT OF HEALTH AND HUMAN SERVICES - PART II – TABLE A
AAPI PARTICIPATION IN MAJOR AGENCY PROGRAMS AND SERVICES BASED ON FY 2001

Major Agency Program/Services	Lead Entity	Total Population Eligible	Total AAPI Eligible			Total AAPIs Served			Enabling Activities to Broaden Service Delivery to AAPIs
			Asian	NHOPI	Total AAPI	Asian	NHOPI	Total AAPI	
Bridges Program: Partnerships between 2-year and baccalaureate-granting institutions, and between institutions that offer a terminal master's degree and doctoral programs. Designed to encourage students to make the transition to, and graduate from, the program with the advanced degree.	NIH/ NIGMS; All ICs participate	All US institutions with significant minority enrollments	NA	NA	All US institutions with significant enrollments of AAPIs who are under-represented in biomedical research.	NA	NA	110 academic institutions, many serving AAPIs	Interactive learning modules for writing grant proposals
Institutional National Research Service Awards: Provide predoctoral and postdoctoral research training. All competing applications must include a specific plan to recruit and retain individuals from racial or ethnic groups underrepresented in the biomedical and behavioral sciences, including Pacific Islanders.	NIH/ NIGMS; All ICs participate	All US institutions with significant minority enrollments	NA	NA	All US institutions with significant enrollments of AAPIs who are under-represented in biomedical research.	14* percent of trainees	1* percent of trainees	15* percent of trainees	Minority student recruitment plans
Special Population Networks FY2001-Funding of 18 grants (four heavily focused on Asian Americans and Pacific Islanders) These grants are designed to promote cancer control information dissemination and community based research. (Budget -\$14.7 Mil)	NIH/ National Cancer Institute (NCI)	Minority and Underserved Populations	All	All	All	Asians in CA; HI; NYC; Seattle, WA	HI, CA and other Pacific Islanders	AAPI in CA; Seattle, WA; NYC; HI	Implement cancer awareness activities; establish private & public projects; translate public information materials in AAPI languages; enhance minority participation in clinical trials; provide training opportunities for minority scientists.
Research to Reduce and/or Eliminate Health Disparities (Clinical Studies): -Epidemiology of Alzheimer's Disease and Normal Cognitive Aging -Menopause	NIH/ National Institute on Aging (NIA)	35 million individuals 65+ 58% Women 42% Men (estimate)	undetermined	undetermined	undetermined	undetermined	undetermined	undetermined	The major service delivery from the NIA to AAPIs is in research addressing diseases and conditions of aging. The following list of initiatives is focused on AAPIs: Epidemiology of Alzheimer's Disease, Study of Women's Health Across the Nation, Sleep Disorders in Aging, Honolulu-Asia Aging Study, and Medically Under-served Asian American Elders.
Human Genome Project (HGP): An international research effort to characterize the genomes of human and model organisms through complete mapping and sequencing of their DNA. HGP goals include the analysis of the ethical, legal, and social implications of genetic knowledge, and the development of policy options for public consideration.	NIH/ National Human Genome Research Institute (NHGRI)	Undetermined							HGP efforts are anticipated to have a universal impact on health care in the 21 st century for persons of all populations, including AAPI.

NA = Not Available