National Advisory Council on Minority Health and Health Disparities

Director's Report

June 7, 2016

Eliseo J. Pérez-Stable, M.D.

Director, NIMHD

National Institute on Minority Health and Health Disparities

NIH News

NIH Staff Transitions

- **Colleen Barros,** NIH Deputy Director for Management and Chief Financial Officer, has been on detail at HHS as Acting Assistant Secretary for Administration since last August. Secretary Burwell has now asked Ms. Barros to stay on through the remainder of the administration.

- **Alfred C. Johnson, Ph.D.,** NIH Associate Director for Research Services and Director of the Office of Research Services, will assume the role of Acting Deputy Director for Management.

New NIH Appointments

- **Eric Dishman** has been chosen as Director of the Precision Medicine Initiative (PMI) Cohort Program. Mr. Dishman will lead NIH's effort to build the PMI landmark longitudinal research study of one million or more U.S. volunteers to expand our ability to improve health and treat disease through precision medicine.

- **Matthew W. Gillman, M.D.,** has been selected as Environmental Influences on Child Health Outcomes (ECHO) Program Director. ECHO is a seven-year NIH initiative to use large, existing study cohorts to conduct research on high-impact pediatric health outcomes. Dr. Gillman will begin his role with NIH in July 2016.

New NIH Appointments

- **Patricia Flatley Brennan, R.N., Ph.D.,** has been appointed director of the National Library of Medicine. The NLM is the world's largest biomedical library and the producer of digital information services used by scientists, health professionals, and members of the public worldwide. She is expected to begin her new role in August 2016.

- **Maureen M. Goodenow, Ph.D.,** has been appointed NIH Associate Director for AIDS Research and Director of the NIH Office of AIDS Research (OAR). She is expected to join NIH in July 2016 to lead OAR's efforts, working closely with the NIH Institutes and Centers, to pursue new tools for preventing HIV infection including a vaccine, improved treatments, and, ultimately, a cure.

Fair Labor Act Standards Update
NIH, DOL Response: $47,400

THE BLOG

Fair Pay for Postdocs: Why We Support New Federal Overtime Rules

Our nation should embrace the fact that increasing the salary threshold for postdocs represents an opportunity to encourage more of our brightest young minds to consider choosing careers in science. Biomedical science has never been more exciting or promising than now, and we need to do all we can to support the next generation of scientists.

—NIH Director Francis Collins, M.D., Ph.D., and U.S. Labor Secretary Thomas Perez, J.D.
Huffington Post Blog, May 18, 2016

Ref. U.S. Department of Labor Fair Labor Standards Act
Defining and Delimiting the Exemptions for Executive, Administrative, Professional, Outside Sales and Computer Employees.

THE PRECISION MEDICINE INITIATIVE

NIH Funds Biobank to Support PMI Cohort Program

- **Provides $142 million over 5 years to Mayo Clinic in Rochester, MN**
- **Establishes world's largest research-cohort biobank**
- **Supports collection, storage, and distribution of biospecimens**
- **Enables researchers to study individual differences in health and disease, when combined with volunteer data on lifestyle, medication history, EHR, physical exams, environmental exposures, and real-time physiology tracked through mobile technology**

The more we understand about individual differences, the better able we will be to tailor the prevention and treatment of illness.

—NIH Director Francis S. Collins, M.D., Ph.D.

Precision Medicine Initiative Updates

- **Awards for health provider organizations will be made soon**
- **Coordinating Center under discussion**
- **Federally Qualified Health Center sites identified –– need established EMR**
- **NIMHD continues involvement through staff**

“Red Team” Report on the NIH Clinical Center

- Major changes in leadership planned
- Sentinel event with IV infusion products led to external review
- Fortify culture of safety and quality
- Centralize Clinical Center authority in new CEO and COO separate from ICs
- External Hospital Board

Funding Gap for URM PI Applicants

- **Ginther paper follow-up: Gap persists for AA/B applicants even if better**
- **Proportion of grant applications by AA/B and L/H PIs is very low (5%)**
- **Proposed intervention to support re-submissions of grants that were scored and not funded by ESI/NI**
- **Opportunity for NIMHD**

Comparison of Racial and Ethnic Categories of Principal Investigators, NIMHD and NIH, FY 2015

	NIMHD, %	All NIH, %
African American or Black	19.6	2.2
AI, AN, NH, or OPI	2.8	0.3
Asian	9.5	17.7
White	50.8	68.6
Multi-Race	0.0	1.3
Unknown	9.3	5.1
Withheld	6.4	4.9
Latino or Hispanic	12.9	4.7

NIMHD Loan Repayment Program

Year	Applications	Funded, N (%)	% URM
2013			
Low SES	36	18 (50)	50
HD research	493	228 (46)	51
2014			
Low SES	42	17 (41)	55
HD research	505	194 (38)	59
2015			
Low SES	50	25 (50)	50
HD research	486	125 (26)	66

NIMHD News

Sharing NIMHD's Vision and Agenda

Recent Meetings of the NIMHD Director

- University of Puerto Rico RCMI and Other Programs, February 2016
- National Medical Association Colloquium, March 2016
- National Hispanic Medical Association Annual Meeting, April 2016
- University of Alabama Health Disparities Research Symposium, April 2016
- CDC Research Conference on Latino Health, April 2016
- Robert Wood Johnson Foundation Health and Society Scholars Annual Program Meeting, May 2016
- Dialogue on Diversity, 2016 Health Care Symposium, May 2016
- Society of General Internal Medicine 39th Annual Meeting, May 2016
- Advisory Councils at NIDCR, NHGRI, NIGMS, NINDS, NLM, ACD on Diversity

Special Presentations

Commencement Address
Eastern Virginia Medical School, Norfolk, May 21, 2016

Commencement Address
McGovern Medical School, University of Texas Health Science Center, Houston, May 27, 2016

Improving Community Conditions, Improving Health Outcomes

"Based on the strength of available evidence, there are policy initiatives that are feasible and sustainable for improving health in a community setting."

Addressing Health Disparities Is a Place-Based Issue

Collaborative place-based approaches to improving population health and addressing health disparities are gaining momentum. There is strong rationale for prioritizing the premise that addressing health disparities is a placed-based issue, where improving community conditions could make a difference in improving health outcomes.[1,2] An equitable approach to building healthy communities requires place-based approaches that involve the community and stakeholders. Place is characterized by structural resources such as schools, hospitals, recreational facilities, retail outlets, and housing. Healthier places have health-promoting environments such as parks, safe walking spaces,

Place-based interventions take time to become established, implemented, and sustained. Even though the research is still in a nascent stage, gaps in our knowledge demonstrate that it is currently impossible to provide a single model for powerful, feasible, and sustainable place-based initiatives that guarantees improved community health outcomes with any certainty. Part of the challenge is the varied planning and evaluation processes, and limited studies with long-term evaluation outcomes tied to improved health conditions. We can say that certain key elements play an important role in successful approaches. On the strength of the available evidence, we suggest that place-

community members, businesses, institutions, and other relevant stakeholders in a collaborative and participatory process. Multilevel intervention strategies are often employed to address issues that impact health, mitigating the health needs and poorer outcomes experienced by residents in that defined community. The geographic location of the intervention is not limited to a neighborhood and could be a school or workplace environment.

EARLY INTERVENTIONS

Strategies for implementing

tribal health committee was the primary decision-maker in this health improvement effort. This model involved careful documentation of the health problems in the community using demographic and epidemiological surveys, analyses of patient care utilization, and nutrition studies. Navajo community health workers assisted with providing interpretation of medical problems and care coordination.[6] Other early place-based interventions include a tuberculosis eradication project that evolved into a community-oriented primary care program in a rural Appalachian community in the 1960s, and a neighborhood health center established in East Harlem, New York, by the Tenants Council to improve housing and health needs for the community.[7]

NEW MODELS

Irene Dankwa-Mullan and Eliseo J. Pérez-Stable. Addressing Health Disparities Is a Place-Based Issue. *American Journal of Public Health*: April 2016, Vol. 106, No. 4, pp. 637-639. doi: 10.2105/AJPH.2016.303077

Legislative and Budget Updates

Engaging with Our Stakeholders

Courtesy Visits with Congressional Members and Staff

- **Rep. Xavier Becerra (D-CA)**
- **Rep. Ami Bera (D-CA), co-chair of the Congressional Asian Pacific American Caucus Healthcare Task Force**
- **Rep. Michelle Lujan Grisham (D-NM)**
- **Rep. Robin Kelly (D-IL), Chair of the Congressional Black Caucus Health Braintrust**
- **Rep. Barbara Lee (D-CA), co-chair of the Congressional Asian Pacific American Caucus Healthcare Task Force**
- **Rep. Lucille Roybal-Allard (D-CA)**
- **Majority and minority professional staff, House Energy & Commerce Committee**
- **Majority and minority clerks of the Senate Appropriations Subcommittee on Labor, HHS**

Rep. G.K. Butterfield (D-NC), Chair, CBC

Rep. Lucille Roybal-Allard (D-CA)

Primary Actions — Competitive Awards From February 2016 Council

RFA/PA Title	No. of Awards	Awarded YTD
MD-15-007: LIMITED COMPETITION: NIMHD ENDOWMENT PROGRAM FOR INCREASING RESEARCH AND INSTITUTIONAL RESOURCES CAPACITY (S21)	3	$5,900,000
MD-15-009: INNOVATIONS FOR HEALTHY LIVING - IMPROVING POPULATION HEALTH AND ELIMINATING HEALTH DISPARITIES (R43/R44)	2	$413,346
MD-15-010: ADVANCING HEALTH DISPARITIES INTERVENTIONS THROUGH COMMUNITY-BASED PARTICIPATORY RESEARCH (U01) - 6 pending awards	9	$4,556,049

Primary Actions — Competitive Awards From February 2016 Council, Cont'd.

RFA/PA Title	No. of Awards	Total Award $
MD-15-013: NIMHD TRANSDISCIPLINARY COLLABORATIVE FOR HEALTH DISPARITIES RESEARCH FOCUSED ON PRECISION MEDICINE (U54) - 3 pending awards and NCI co-fund	1	$2,309,824
EB-15-001: DEVELOPMENT AND TRANSLATION OF MEDICAL TECHNOLOGIES TO REDUCE HEALTH DISPARITIES (R43/R44) - 2 pending awards	1	$397,892

Building Transparency Through Communications

On April 27, 2016, NIMHD co-hosted its first National Minority Health Month Twitter chat geared toward #MinorityResearch.

Partners:
U.S. DHHS Office of Minority Health and the FDA Office of Minority Health

Themes:
Minority research is important because...

Barriers preventing minority participation in clinical research include...

Increasing recruitment and retention of minorities in clinical research will require...

Helpful resources for educating patients on clinical research...

Chat Traffic Volume:
47.9 million impressions
380 participants
1,554 tweets

NIMHD Staff News

Departing NIMHD Staff

- **Dr. Irene Dankwa-Mullan** departed NIMHD in April as Acting Deputy Director of the Division of Extramural Scientific Programs to work for IBM Watson Health as Deputy Health Officer — Data and Evidence, and Lead Scientific Officer responsible for global strategy in IBM Watson Health's population health, clinical trials, and health services research innovations for Watson acquisitions — including clinical trials matching, genomics, and personalized medicine.

Departing NIMHD Staff

- **Dr. Francisco Sy retired from NIMHD at the end of May after 12 years of service to NIH/NIMHD.**
- Dr. Sy served as a Program Director and AIDS Coordinator in the Division of Extramural Scientific Programs and has served in various leadership positions, including Director, Office of Community-Based Participatory Research & Collaboration; Director, Office of Extramural Research Administration; and Director, Division of Extramural Activities & Scientific Programs. He is the current President of the NIH Asian and Pacific Islander American Organization.
- Dr. Sy is moving to Las Vegas to be chair of a department in community health and prevention at UNLV.

New Appointments

- **Dr. Patrice Armstrong** has joined the Office of Science Policy, Strategic Planning, Analysis and Reporting, where she will assist with scientific reporting, planning, and policy. Dr. Armstrong has directed and served as a technical expert for collaborative research projects in the U.S., Europe, and Latin America between the government, academia, and industry.

- **Dr. John Tillinghast** has joined the Office of Science Policy, Strategic Planning, Analysis and Reporting. Dr. Tillinghast will be producing the NIMHD 2015 Portfolio Analysis, conducting epidemiological data analysis to identify health disparity conditions, and providing statistical technical assistance to NIMHD.

New Appointments

- **Ms. Whitney Anderson** has joined the Office of Communications and Public Liaison as communications editor. Ms. Anderson holds a bachelor's degree in journalism from Howard University with a background in health education. She has recently worked as a photojournalist for Naval Support Activity Washington's Public Affairs Office and as a reporter for the *Calvert Recorder*, a community news source for Maryland's Calvert County.

- **Ms. Katherine Ramirez** has joined NIMHD under the Office of the Director as executive assistant to Dr. Eliseo J. Pérez-Stable. Ms. Ramirez previously served as a community outreach coordinator at the *Eunice Kennedy Shriver* National Institute of Child Health and Human Development. Ms. Ramirez holds a bachelor's degree in liberal arts from the Catholic University of America.

Noteworthy Among Grantees

NIMHD grantee **Dr. Jennifer Lorvick**, Associate Director, Utah Health Program at RTI International, received the ***Presidential Early Career Award for Scientists and Engineers*** for her research examining how criminal justice involvement contributes to health disparities among African American women who use illicit drugs.

"These early-career scientists are leading the way in our efforts to confront and understand challenges from climate change to our health and wellness." **President Barack Obama, February 18, 2016.**

Noteworthy Among NIMHD Staff

Dr. Dorothy Castille, NIMHD Health Science Administrator, has received a Research Associate appointment to the Smithsonian Institution, National Museum of Natural History, in Washington, DC.

Dr. Castille's appointment is part of a developing trans-Federal collaboration where she and colleagues will work with native public health researchers and community members to record narratives of illness, health, and well-being during their visits to museum collections to enhance understanding of American Indian/Alaska Native cultural perceptions of health and illness.

Noteworthy Among NIMHD Staff

JOURNAL OF WOMEN'S HEALTH
Volume 25, Number 3, 2016
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DOI: 10.1089/jwh.2015.5255

Association of Socioeconomic Status with Eye Health Among Women With and Without Diabetes

Keri L. Norris, MPH, PhD,[1] Gloria L. Beckles, MD, MSc,[1] Chiu-Fang Chou, PhD,[1]
Xinzhi Zhang, MD, PhD,[2] and Jinan Saaddine, MD, MPH[1]

J Womens Health (Larchmt). 2016 Mar, 25(3):321-6. PMID 26666895

Dr. Xinzhi Zhang, NIMHD Health Science Administrator, co-authored a paper linking socioeconomic status with eye health in the *Journal of Women's Health*. Results indicate a need for program interventions and health promotion efforts to increase awareness of the importance of regular eye exams and to eliminate barriers to the use and receipt of eye care among women.

NIMHD Presentations and Workshops

Dr. Joyce Hunter, NIMHD Director Deputy Director, Engaging with Stakeholders

- **The Howard University Research Centers in Minority Institutions Program 2016 Health Disparities Mentor Workshop, Washington, DC, March 2016**
- **The Hispanic Association of Colleges and Universities 21st Annual National Capitol Forum on Higher Education, Washington, DC, March 2016**
- **The Tribal Epidemiology Centers — Consortium Directors Meeting, Phoenix, AZ, March 2016**

Dr. Regina James, NIMHD Director of Clinical and Health Services Research, Engaging with Stakeholders

Advancing Health Equity through Precision Medicine and Health IT Innovation, the Healthcare Information and Management Systems Society Annual Meeting, Washington, DC, March 2016

First Annual NIH-National Hispanic Medical Association Career Development Program, hosted by NIDDK, Washington, DC, April 2016

Health Disparity Research in Diverse Asian American Populations: Present and Future

Presenter: **Dr. Grace Ma**, Associate Dean for Health Disparities, Founding Director, Center for Asian Health, Laura H. Carnell Professor of Public Health, Temple University

- Asian Americans include very diverse groups and face substantial challenges.
- More than 70% of Asian Americans are foreign-born, and many have limited English proficiency.
- Other challenges include differing cultural beliefs and behaviors and unfamiliarity with the U.S. health system.
- Asian Americans have the most difficulty understanding instructions in a doctor's office, are the least satisfied with cancer care coordination, and experience unique health disparities from other ethnic populations.

NIH Seminar co-sponsored by the NIH Asian and Pacific Islander American Organization and NIMHD, February 23, 2016

NIMHD Science Vision Workshop
Methods and Measurement Science in Health Disparities

***Charge*: Evaluate methods used to assess health disparities research and to identify what new methods, approaches, tools, and models are needed**

***Workshop date*: April 22, 2016**

Key Gaps to Develop Visioning

- **Indicators: Need equivalence among diseases and conditions; need core variables and common data elements**
- **Methodologies: Need best practices for understanding HD etiology; how to deal with small samples; use of complex systems analysis; consider bi-directionality**
- **Evaluation: Policy interventions and natural experiments; when to generalize for action; determine impact**
- **Data: Utility of Big Data for HD research; how to combine different kinds of data to learn more; inclusion of core HD variables**

Vision results expected in August 2016.

NIMHD Science Vision Workshop
Etiology and Interventions for Health Disparities Research, May 19–20, 2016

Charge: Identify priority recommendations to elucidate the causes of health disparities and inform the design and implementation of interventions to reduce and eliminate health disparities.

Workshop Information and Next Steps

- **Focused on two pillars of the science vision: *Etiology* and *Interventions***
  - **<u>Etiology</u>: Social determinants, biological and environmental mechanisms, health services, lifecourse**
  - **<u>Interventions</u>: Guiding principles, approaches, evaluation, scalability**
- **Brought together a diverse group of 80 scientists**
- **Generated more than 200 recommendations**
  - **Initiated prioritization of recommendations**
- **Next steps**
  - **Identify priority recommendations to inform strategic planning**
  - **Publish manuscripts**

Extramural Research Activity

Recent Funding Opportunities and Notices

Funding Opportunities	Funding Number	Released
Clinical Sequencing Evidence-Generating Research (CSER2) - Clinical Sites with Enhanced Diversity (U01)	RFA-HG-16-011	05-06-16
Health Services Research on Minority Health and Health Disparities (R01 and R21)	**PAR-16-221-2**	05-04-16
The Health of Sexual and Gender Minority (SGM) Populations (R21)	PA-15-263	05-18-15
The Health of Sexual and Gender Minority (SGM) Populations (R03)	PA-15-262	05-18-15
The Health of Sexual and Gender Minority (SGM) Populations (R01)	PA-15-261	05-18-15
The Health of Sexual and Gender Minority (SGM) Populations (R15)	PA-15-260	05-18-15
Notice of Intent to Publish a Funding Opportunity Announcement for Research on Disparities in Surgical Care and Outcomes (R01 and R21)	**NOT-MD-16-006**	04-18-16
Notice of Participation in PA-16-288 Research Supplements to Promote Diversity in Health-Related Research (Admin Supp)	NOT-MD-16-008	05-31-16

NIMHD to Establish New Research Program in Surgical Disparities

NEWS RELEASES

Monday, April 18, 2016

NIH launches research program to reduce health disparities in surgical outcomes

The National Institute on Minority Health and Health Disparities (NIMHD), part of the National Institutes of Health, has launched an initiative to support research to better understand and address disparities in surgical care and outcomes for disadvantaged populations. The new surgical disparities research program will involve collaborations among several NIH institutes and centers, along with the Agency for Healthcare Research and Quality. Full funding levels will be determined by the number of meritorious grant applications received.

Health disparities are the differences in health status and outcomes that are most often observed across different racial and ethnic populations, as well as across differing socioeconomic status. These disparities can include higher rates of chronic disabling conditions, greater co-morbidity, and greater risk of premature death, as well as poorer quality of life, worse functioning and prolonged recovery from disease.

Research has demonstrated that the benefits of surgical procedures are not equal across the population. For example, a study of surgical disparities in the United States showed an increase in surgical mortality rates among patients with lower socioeconomic status independent of race, age, access to care, hospital facility or insurance status.

"Disparities in surgical care can result in poorer functional outcomes, prolonged rehabilitation, recovery and lower quality of life..."

—**Eliseo J. Pérez-Stable, M.D.** Director, NIMHD

Institute/Center

National Institute on Minority Health and Health Disparities (NIMHD)

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Key Components

- Provides R01 and R21 opportunities to understand and address disparities in surgical care and outcomes
- Builds on the concerted efforts of the American College of Surgeons and its affiliates in improving access, quality, and safe surgical care for all population groups

New Research in Environmental Health Disparities with NIEHS and EPA

NEWS RELEASES

Wednesday, May 25, 2016

New NIH-EPA research centers to study environmental health disparities

The National Institutes of Health has partnered with the U.S. Environmental Protection Agency (EPA) to fund five new research centers to improve health in communities overburdened by pollution and other environmental factors that contribute to health disparities. Within each center, scientists will partner with community organizations to study these concerns and develop culturally appropriate ways to reduce exposure to harmful environmental conditions.

The Centers of Excellence on Environmental Health Disparities Research are jointly funded by the National Institute of Environmental Health Sciences (NIEHS), the National Institute on Minority Health and Health Disparities (NIMHD), and the National Center for Environmental Research at EPA. The new centers, funded by five-year grants, are an expansion of a successful pilot program originally started by NIMHD and EPA.

The centers will examine a range of stressors on health, including air, water, and ground pollution as well as environmental conditions such as sub-standard housing, poor diet, and adverse social dynamics.

"It is important to understand modifiable influences on health...so that we can improve health and well-being."

—**Linda Birnbaum, Ph.D.,** Director, NIEHS

Institute/Center

National Institute of Environmental Health Sciences (NIEHS)

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Funded Institutions

- Harvard and Boston Universities, Boston
- **Johns Hopkins University, Baltimore**
- University of Arizona, Tucson
- University of New Mexico, Albuquerque
- University of Southern California, Los Angeles

NIMHD-Funded Science Advances

Researchers Identify Genetic Links to Kidney Disease in African Americans

Olabisi OA, et al. APOL1 kidney disease risk variants cause cytotoxicity by depleting cellular potassium and inducing stress-activated protein kinases. *Proc Natl Acad Sci USA.* 2016 Jan 26;113(4):830-7. **R01MD007898**, Molecular Mechanism of APOL1-Associated Kidney Disease (PI: Pollack, B.)

Two APOL1 gene variants account for disproportionately high kidney failure rates in African Americans, but the underlying mechanisms are poorly understood.

- **Using a human embryonic kidney cell culture system, investigators tested the hypothesis that APOL1-induced nephrotoxicity reflects dysregulation of intracellular signaling pathways key to cell survival.**
- **Results indicate that expression of APOL1 risk variants increases cell death via net loss of intracellular potassium and induction of stress-activated protein kinase pathways.**

Genetic Determinants of Renal Transplant Survival in African Americans

Freedman BI, et al. APOL1 genotype and kidney transplantation outcomes from deceased african american donors. *Transplantation.* 2016 Jan;100(1):194-202. **R01MD009055**, Genetic determinants of renal transplant survival from African American donors (PI: Divers, J.)

Kidneys from deceased African American donors with certain APOL1 nephropathy risk variants reproducibly associate with higher risk for allograft failure after transplantation.

- **Investigators observed shorter renal allograft survival after transplantation from donors with two APOL1 risk variants.**
- **Younger recipient age and older donor age had independent adverse effects on allograft survival.**
- **Findings indicate that rapid genotyping of deceased African American kidney donors for APOL1 risk variants at organ recovery may improve transplantation outcomes.**

Trauma and Suicidal Ideation Among Ethnically Diverse Adults

Beristianos MH, Maguen S, Neylan TC, **Byers AL**. Trauma exposure and risk of suicidal ideation among ethnically diverse adults. *Depress Anxiety*. 2016 Mar 17. doi: 10.1002/da.22485. [Epub ahead of print]. **R01MD007019**, Epidemiology of Suicidal Behavior in Racially/Ethnically Diverse Older Americans (PI: Byers, A.)

Examined the relationship between trauma exposure and lifetime suicidal ideation (SI) in non-Hispanic white, African American, Latino, and Asian American adults from the Collaborative Psychiatric Epidemiology Surveys.

- **Interpersonal violence and child maltreatment was associated with higher odds of SI for all groups. Asian Americans had the highest odds of SI after these types of trauma exposures.**
- **Warzone trauma was associated with lower odds of SI for NHWs and Latinos.**
- **Experiencing trauma of a loved one was associated with lower odds of SI in African Americans, Latinos, and NHWs.**

Genetic Architecture of Lupus

Sun, C, et al. High-density genotyping of immune-related loci identifies new SLE risk variants in individuals with Asian ancestry. *Nat Genet.* 2016 Mar;48(3):323-30.
R01MD007909, Health disparities and genetic architecture of lupus in African Americans (PI: Nath, S.)

Systemic lupus erythematosus (SLE) has a strong but incompletely understood genetic architecture.

- **In a genotyping study with 4,478 cases and 12,656 controls from six East Asian cohorts, investigators identified 10 new genetic loci associated with SLE disease risk.**
- **Functional variants at each locus were found by analyzing epigenetic marks and gene expression data; these novel variants are predicted to alter gene expression in various immune cell types, particularly B cells.**
- **To assess their potential effects in African Americans, these new loci will be included in deep re-sequencing genotyping studies with African American SLE patients.**

Sociodemographic Differences in Organ Donation Willingness

Sehgal N K R, et al. The relationship between verified organ donor designation and patient demographic and medical characteristics. *Am J Transplant.* 2016 Apr:16(4), 1294-7. **P60MD002265**, Dissemination of Evidence-Based Health Disparity Interventions (PI: Sehgal, N.)

Many studies on organ donation use self-reported willingness to donate, which may be subject to social desirability bias. This study used driver's license and EHR data to identify correlates of donor willingness in 2,070 primary care patients in a safety net medical system.

- **Driver's license donor designation (46%) was lower than in studies of self-reported willingness (66%).**
- **Individuals who were female, non-Hispanic white, English- or Spanish-speaking, employed, and privately insured were more likely to be designated as donors.**

NIMHD Going Forward

NIMHD Division of Extramural Scientific Programs: Functional Branches

- **Clinical and Health Services Research, led by Regina James, M.D.**
- **Integrative Biological and Behavioral Sciences, led by Michael Sayre, Ph.D.**
- **Community Health and Population Sciences (searching)**

New Research Areas for FY 2017

- **R01 grants on Youth and Young Adults from Health Disparity Populations in the HIV Treatment Cascade**
- **Health Disparities Among Immigrant Populations: Etiologies and Interventions**
- **Disparities in Surgical Care and Outcomes**
- **Social Epigenomics for Minority Health and Health Disparities**

NIMHD Scientific Workshops

- **Use of IT Technologies in Minority Health and Health Disparities (NSF partner)**
- **Self-Identified Race and Ethnicity in Genomic and Biomedical Research (NHGRI partner) with October**
- **Structural Racism and Cultural Competence: Impact on Minority Health and Health Disparities (OMH partner)**

2016 NIMHD Health Disparities Research Institute

Supports the development of new scientists in the disciplines supported by science on minority health and health disparities.

- **August 15–19, 2016**
- **NIH Bethesda Campus**
- **>300 applications for up to 50 spots**
- **Support air travel**
- **Engage in selected topics and facilitate network**

National Institute on Minority Health and Health Disparities

NIMHD Intramural Program

- Population science emphasis, with possible clinical component
- Recruit scientific director and senior scientist: epidemiology, clinician, social/behavioral; ad is out
- Possible new cohort study on immigrants or other disparity groups
- Network with other IRP scientists with similar interests: new investigators

Council Discussion and Questions