

## PREPARED STATEMENT OF YVONNE T. MADDOX, PH.D.

Mr. Chairman and Members of the Committee: I am pleased to present the President's Budget for the National Institute on Minority Health and Health Disparities (NIMHD) of the National Institutes of Health (NIH). The fiscal year (FY) 2015 budget of \$267,953,000 is the same as the FY 2014 enacted level of \$267,953,000.

### INTRODUCTION

As the primary federal agency for leading, coordinating and facilitating research to improve minority health and eliminate health disparities, NIMHD impacts the lives of millions of Americans burdened by disparities in health status and health care delivery, including racial and ethnic minority groups as well as rural and low-income populations. A population is a health disparity population if it is determined that there is a significant disparity in the overall rate of disease incidence, prevalence, morbidity, mortality, or survival rates in the population as compared to the health status of the general population. The elimination of health disparities requires a multidisciplinary approach, with collaboration, coordination, and integration across NIH Institutes and Centers (ICs), other federal agencies and private-sector organizations to fully understand and solve the underlying biological and non-biological causes of health disparities.

### FUNDAMENTALS OF HEALTH DISPARITIES

In order to understand the social, behavioral, biological, and environmental factors influencing health disparities, NIMHD is studying the fundamental causes of diseases and conditions that disproportionately affect individuals from health disparity

backgrounds. For example, one project studies the higher incidence and mortality of breast cancer in African American women through research that examines the role genetic differences in the tumor suppressor protein, p53, plays in the disparity. Researchers hypothesize that some racial/ethnic groups have disproportionate p53 variants that may contribute to breast cancer health disparities in the age of onset, incidence, and lack of pregnancy protection in African American women. Another study takes knowledge about causal pathways learned at the bench and extends the findings to social, behavioral, health services and/or policy approaches to test ways to improve minority health and eliminate health disparities. This project examined unconscious stereotyping of Hispanic patients among medical and nursing students. The study found that students endorsed stereotypes that Hispanic patients would be non-compliant or likely to engage in high-risk health behaviors, even if the students reported trying consciously to avoid biased thinking. This unconscious bias of medical providers can be one factor in the disparity in health care delivery faced by minority patients.

## COLLABORATIVE RESEARCH FRAMEWORK

Comprehensively addressing health disparities requires a transdisciplinary framework that fosters an integrated approach involving biology, behavioral and social sciences, environmental science, public health, health care delivery, economics, public policy, and many other disciplines. It also requires strong collaborations between researchers and community organizations, service providers and systems, government agencies, and other stakeholders to ensure that contextually appropriate and relevant research is conducted, and that findings can translate into sustainable individual,

community, and systems level changes that improve the health of the U.S. population. The NIMHD supports two programs that focus on transdisciplinary and translational research: the Centers of Excellence (COE) and the Transdisciplinary Collaborative Centers for Health Disparities Research (TCC). The COEs, which were established as partnerships between academic institutions and community organizations, have been in place for over a decade and have reached more than 102 sites, across 31 states, the District of Columbia, Puerto Rico, and the U.S Virgin Islands. The COEs are addressing health disparities research along the translational spectrum from basic science to clinical research, with information dissemination a required component.

The TCC Program, established in FY 2012, supports research, implementation, and dissemination of activities that transcend customary discipline-specific approaches conducted at the local level. Transdisciplinary research collaboration at the regional level provides opportunities for academic institutions, community-based organizations, and other partners to conduct targeted research to respond to specific population-based, environmental, sociocultural, and political factors that influence health within a particular region.

The Collaborative Research Center for American Indian Health is bringing together tribal communities and health researchers from a variety of disciplines to work together to address the significant health disparities experienced by American Indians in South Dakota, North Dakota and Minnesota, particularly the social determinants of health and its application to programming public health interventions. The National Transdisciplinary Collaborative Center for African American Men's Health is

addressing unintentional and violence-related injuries as well as chronic diseases that affect African American men across the life course, as part of a national initiative.

## COMMUNITY ENGAGEMENT

Active community involvement in biomedical and behavioral research is essential to improving the health of the public. The NIMHD Community-Based Participatory Research (CBPR) Initiative supports the development, implementation, and evaluation of intervention research that utilizes the principles of community engagement as partners in the full spectrum of research. A number of CBPR planning phase and dissemination phase projects are under way. The Partnerships to Improve Lifestyle Interventions and Partners in Care programs tested the effectiveness of a culturally adapted diabetes self-management intervention among Native Hawaiians and Pacific Islanders. The study found improvements in weight loss, physical capacity, and diabetes self-management.

Another CBPR project focused on a culturally appropriate, church-based Hepatitis B screening and vaccination intervention program for Korean Americans which found increased screening and immunization rates in the intervention group compared with the control group. Academic-community partnerships were essential in balancing science and community needs in the design and conduct of the needs assessment, pilot and full-scale clinical trial.

## RESEARCH TRAINING AND INFRASTRUCTURE

In order to advance the science and speed translation of discoveries into better health outcomes for all Americans, it is critical to expand and diversify the nation's

workforce of well-trained scientists who are dedicated to improving minority health and eliminating health disparities. A diverse biomedical workforce will improve the quality of the educational and training environment, balance and broaden the perspective in setting research priorities, improve the ability to recruit subjects from diverse backgrounds into clinical research protocols, and improve the nation's capacity to address and eliminate health disparities. NIMHD-supported programs to train researchers to conduct minority health and health disparities research are focusing on providing educational, mentoring, and/or career development programs for individuals from health disparity populations that are underrepresented in the biomedical, clinical, behavioral, and social sciences. NIMHD continues to support research training and infrastructure through its Research Endowment Program, Building Research Infrastructure and Capacity Program, and Research Centers in Minority Institutions Program.

## CONCLUSION

NIMHD has a unique and critical role at the NIH as the focal point for conducting and coordinating research on minority health and health disparities, raising national awareness about the prevalence and impact of health disparities, and the dissemination of effective individual, community, and population-level interventions to reduce and ultimately eliminate health disparities. NIMHD is looking forward to identifying new opportunities to accelerate the pace of research and to advance its mission through strengthening partnerships and enhancing its role in the community.