



Grants to the Outer Pacific FY 2011

Federal Regional Council OUTER PACIFIC COMMITTEE

Region IX

(FINAL/Revised – Issued SEP 2012)

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REPORT NOTES

The Outer Pacific Committee (OPC) compiled this report from the grant program information provided by the reporting Federal agencies. The OPC has endeavored to capture information on the grant programs for which the Pacific jurisdictions were funded in FY 2011 through Federal agencies and offices based in Region IX as well as select Federal programs based outside of the Region. As such, the report is not completely encompassing since non-Region IX-based Federal entities with potentially supporting programs such as the Department of Defense, USAID and possibly others are not included. Each year we have identified additional Region IX-based agencies to include in the report and we will continue to add new agencies as we become aware of their funding and program information. The report will be posted on the FRC's Website at www.frc9.us and will contain numerous links to other Websites with additional information.

Please note:

- We have endeavored to record the information we received as accurately as possible.
- To the extent possible, we have used the text and formatting as received from the reporting Federal agencies.
- Grant programs may exist for which no Pacific jurisdiction received funding in FY 2011 – in most cases, such programs will not appear in this report.
- **Eligibility:** For the first time, this report includes eligibility information in the funding tables for each Federal grant program listed.
 - ❖ Where a jurisdiction was eligible to apply for a listed grant program but no funding was awarded in FY 2011, you will see the following notation in the funding tables: "\$0 but Eligible".
 - ❖ Where a jurisdiction was not eligible to apply for a listed grant program in FY 2011, you will see the following notation in the funding tables: "Not Eligible".

If you would like further information on the Federal grant programs in this report, please connect with the points of contact that have been provided.

If you have any comments on this report, please contact CAPT John Walmsley at john.walmsley@hhs.gov.

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FEDERAL REGIONAL COUNCIL

Grants to the Outer Pacific FY 2011 Report

Introduction

The Federal Regional Council (FRC) is a consortium of nineteen Federal Departments and Agencies representing nearly thirty program offices in Region IX working in partnership to better serve the public. Its goal is to work in a coordinated manner to make Federal programs more effective and efficient in Region IX. The FRC, which just celebrated its thirteenth anniversary, includes committees which focus on broad geographic areas and/or special populations in the vast expanse of Region IX. These entities for 2011 are the **Border Committee**, the **Tribal Affairs Committee**, the **Homelessness Committee (Region IX Interagency Council on Homelessness)**, and the **Outer Pacific Committee (OPC)**. Executive Orders or Administration Initiatives serve as the underlying authority to guide each committee's work in fulfilling Administration priorities.

Outer Pacific Committee Accomplishments

The OPC deals with issues related to the three U.S. Flag Territories: American Samoa (AS), the Commonwealth of the Northern Mariana Islands (CNMI), and Guam; and the three Freely Associated States: Federated States of Micronesia (FSM), Republic of the Marshall Islands (RMI), and Republic of Palau (ROP). It includes the Guam-CNMI Build-up Committee/Task Force that was established in 2009 to address issues relating to the relocation of military personnel from Okinawa, Japan to Guam and to coordinate Federal agency support to Guam and the CNMI as they prepare for the buildup in terms of programs and technical assistance, where possible.

The OPC has met regularly since 1998. By convening the participating Federal agencies, the committee believes it can achieve better outcomes for the people in the Pacific Jurisdictions. The committee's work plan for 2011 included the following objectives: 1) Dissemination of the Annual grants report; 2) Improved communications between Federal agencies on Pacific issues; 3) Program planning and coordination; 4) Improving grants and financial management in the jurisdictions; 5) Central Office/Regional Office collaboration; and 6) Increased committee membership.

In 2011 the committee convened on six (6) occasions and is pleased to report accomplishments in the following areas:

- The OPC prepares an annual report on "Grants to the Outer Pacific" for use by Federal representatives but which is also widely requested by officials in the Pacific jurisdictions. The current report reflecting FY 2011 grants marks the twelfth year this document has been prepared. It outlines information primarily for agencies that are represented either on the Federal Regional Council's Outer Pacific Committee or have a Region IX presence. Copies of the report will be distributed for the sixth year in a row at the annual Interagency Group on Insular Areas (IGIA) meeting that is held after the National Governors Association winter meeting in Washington, DC.
- The committee continued its past cooperative efforts with the HHS Office of Minority Health and the Asian Pacific Islander American Health Forum in addressing health disparities in the Pacific jurisdictions. We also continued working throughout the year with other governmental entities including the Department of the Interior's Office of Insular Affairs (DOI/OIA) to develop strategies to address inequities in health care access in the jurisdictions.
- Since the beginning days of the OPC, the issue of grants and financial management has always been a priority concern. The committee in 2011 continued its communications with DOI/OIA and the Graduate School (formerly the USDA Graduate School) on the development of strategies to provide training and mentorship in best practices for grants and financial management. The

committee continues to promote the groundbreaking fiscal training and mentoring work that has been accomplished in the Pacific by one of its member agencies, the HHS Administration for Children and Families, as a model for other Federal agencies to emulate in improving grants and financial management practices in the jurisdictions.

- The committee continued to keep its membership abreast of developments in the field of telecommunications in the Pacific. With the rapid development of technologies and linkages in the Pacific, there continue to be major developments and impending improvements in telecommunications capabilities that are regularly brought to the attention of the OPC.
- The committee continues to be involved in deliberations and strategy development with the Federal effort to assist Guam in preparing for the arrival of US Marines and their dependents, as well as other military personnel, at some point in the future. Committee members' issues and concerns regarding the military buildup have been shared via the committee with the Interagency Group on Insular Affairs. The OPC also participates at the Federal Regional Council (FRC) meetings when the Governor of Guam and his staff attend to share their concerns regarding the buildup. At the end of 2009, the Guam-CNMI Build-Up Committee/Task Force merged with the OPC and military buildup issues in the Western Pacific continue to have high priority at OPC meetings.
- In line with the committee's work plan, additional Federal agencies joined the group in 2011 and participated in our meetings.

The Outer Pacific Committee 2011 Report

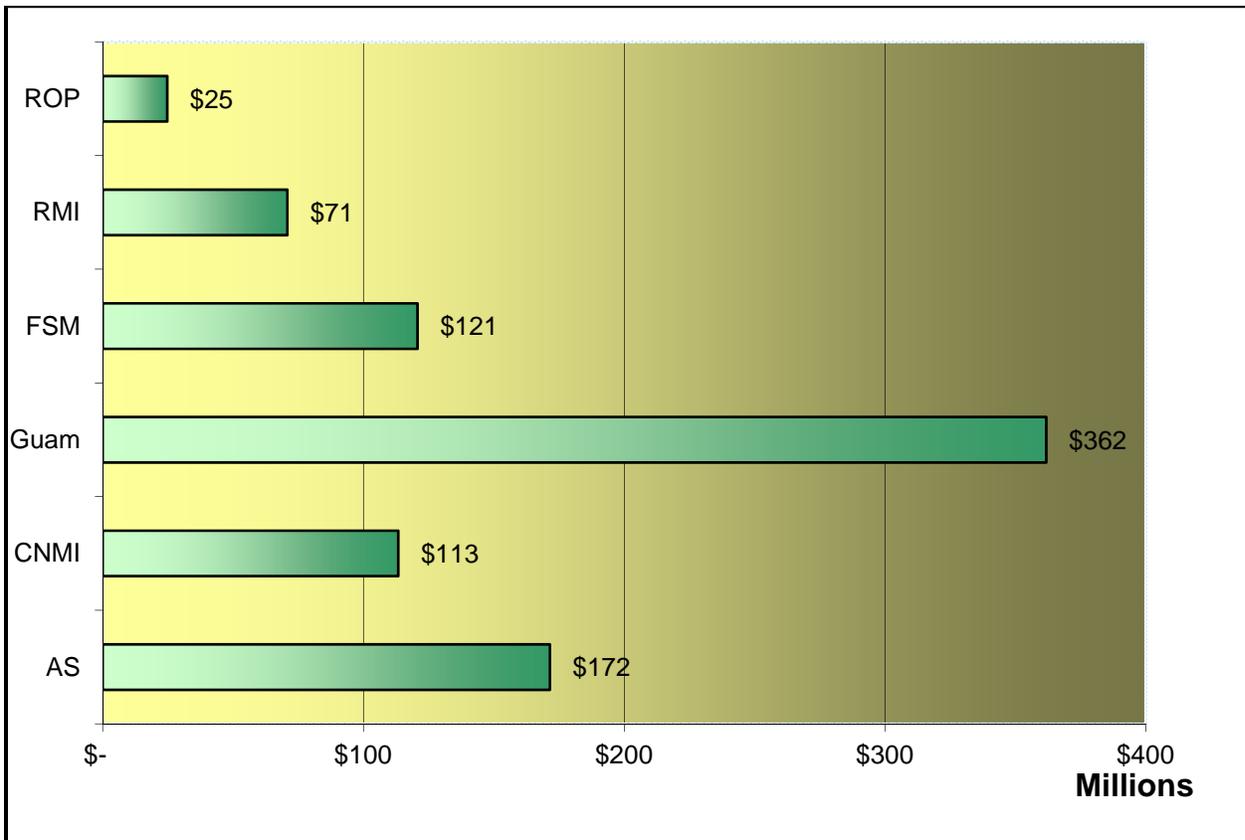
This annual OPC report captures funding information provided primarily by the Federal programs that are active in the Pacific jurisdictions and that are based in Region IX. In addition, input has been included from select programs operating from central offices on the East coast. The report is organized by Federal department and includes descriptions of programs, points of contact, and funding to Pacific jurisdictions. Several charts at the beginning of the report provide a summary of funding by jurisdiction and by department.

It is important to note that a comparison of funding awarded in FY 2010 and 2011 shows a general downward trend. In 2011, the Pacific jurisdictions received a total of \$217 million less in Federal funding than they did in 2010. The effect of this decrease was felt more in some jurisdictions than in others. For example, the Republic of Palau received Federal funding totaling \$26 million in 2010 and \$25 million in 2011 – a reduction of \$1 million. On the other hand, American Samoa received a total of \$240 million in Federal funding in 2010 and \$172 million in 2011 -- a reduction of \$68 million. The level of decrease for FY 2011 in the rest of the jurisdictions ranged from \$5 million in the Republic of the Marshall Islands to \$28 million in Guam. The reasons for these changes are probably numerous and are not addressed in this report.

The OPC is pleased to be an integral part of the Federal Regional Council, proving that Federal agencies working together result in improved working relationships, stronger partnerships, and better communications and outcomes.

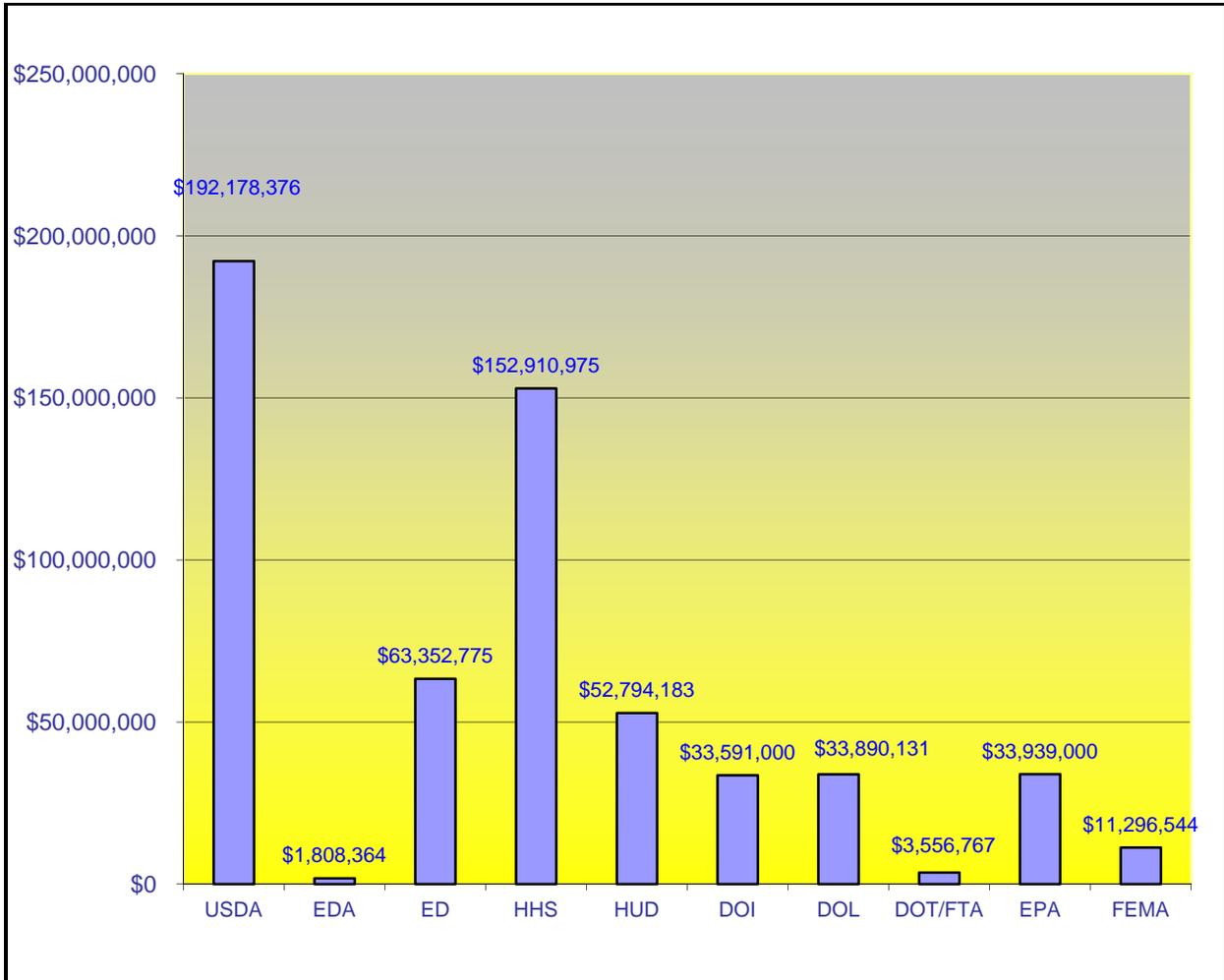
FEDERAL REGIONAL COUNCIL Grants to the Outer Pacific FY 2011 Report

Total FY 2011 Funding Awarded -- by Pacific Jurisdiction



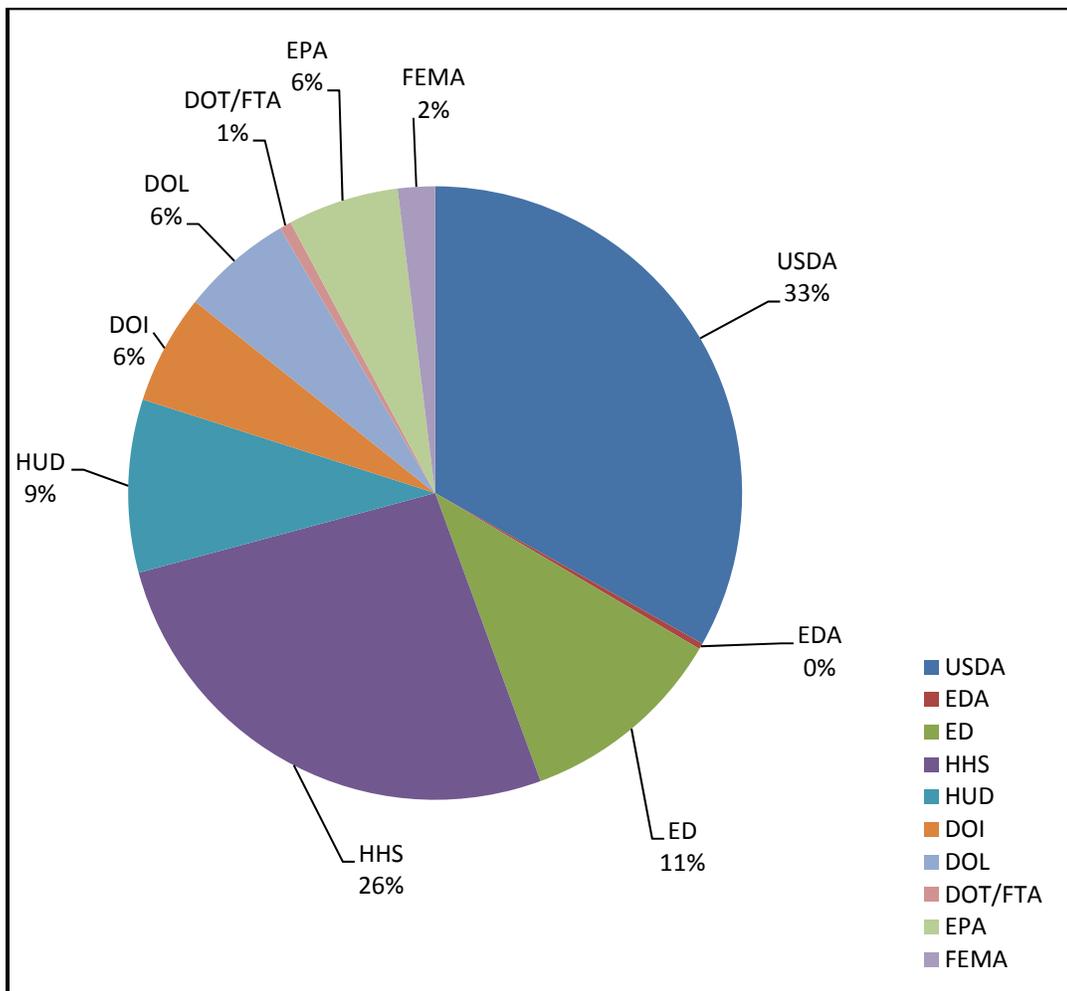
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Total FY 2011 Funding to Pacific Jurisdictions -- by Department



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Percent of Total FY2011 Funding to the Pacific -- by Department



FEDERAL REGIONAL COUNCIL

Grants to the Outer Pacific FY 2011 Report

DEPARTMENT OF AGRICULTURE

MISSION: *The United States Department of Agriculture (USDA) works to support the American agricultural economy to strengthen rural communities; to protect and conserve our natural resources; and to provide a safe, sufficient, and nutritious food supply for the American people. The Department's wide range of programs and responsibilities touches the lives of every American every day.*

Food & Nutrition Service

MISSION: *The Food and Nutrition Service (FNS) administers the USDA nutrition assistance programs that provide children and low-income people access to food, a healthful diet, and nutrition education. Programs include the Supplemental Nutrition Assistance Program (SNAP, formerly called the Food Stamp Program), the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), School Lunch and Breakfast, among others.*

Child Nutrition Program Block Grants (American Samoa and CNMI): Food and Nutrition Service (FNS) has separate memoranda of understanding (MOUs) with American Samoa and CNMI under which FNS provides cash block grants for operation of nutrition assistance programs in lieu of the traditional Child Nutrition Programs. The block grants provide flexibility for the Territory and the Commonwealth to meet their nutrition needs within certain broad parameters established in the MOUs. *For more information on the CNMI block grant program, contact Kacie O'Brien at (415) 705-1336 extension 420 or Kacie.O'Brien@fns.usda.gov. For information on the America Samoa block grant program, contact Ashley Ryckman at (415) 705-1336 extension 417 or Ashley.Ryckman@fns.usda.gov.*

Child & Adult Care Food Program: This program provides reimbursement for healthy meals served by participating family daycare providers, child care centers, afterschool care programs, homeless shelters and adult daycare centers. In Guam, about 1,000 children participate each day; Guam has no participating adult care centers. *For more information on the Child Nutrition Programs in Guam, contact Kathryn Lee at (415) 705-1336 extension 406 or Kathryn.Lee@fns.usda.gov.*

National School Lunch Program: The National School Lunch Program provides cash reimbursements and commodity foods to help support non-profit food services in elementary and secondary schools, and in residential child care institutions. Every school day, approximately 17,000 children in Guam, and about 30 million children in over 101,000 schools across the country, eat a lunch provided through the National School Lunch Program. More than half of these children receive the meal free or at a reduced price. The National School Lunch Program also offers the *After School Snacks Program* and the *Fresh Fruit and Vegetable Program*. *For more information on the Child Nutrition Programs in Guam, contact Kathryn Lee at (415) 705-1336 extension 406 or Kathryn.Lee@fns.usda.gov.*

School Breakfast Program: As in the school lunch program, low-income children may qualify to receive school breakfast free or at a reduced price and states are reimbursed according to the number of meals served in each category. Meals must meet nutritional standards similar to those in the National School Lunch Program. In Guam, approximately 7,000 children participate in this program each day. *For more information on the Child Nutrition Programs in Guam, contact Kathryn Lee at (415) 705-1336 extension 406 or Kathryn.Lee@fns.usda.gov.*

Special Food Assistance (SFA) Program: The SFA Program for the Republic of the Marshall Islands was originally authorized under Public Law 99-239 and the Compact of Free Association of 1985. Under a

Memorandum of Understanding, FNS provides a cash block grant for the needy peoples of Bikini, Enewetak, Rongelap, and Utrix Atolls (the Nuclear Affected Areas). *For more information on this program, contact Melissa Baker at (415) 705-1355 extension 523 or melissa.baker@fns.usda.gov.*

Supplemental Nutrition Assistance Program (SNAP): The Supplemental Nutrition Assistance Program (SNAP) is the cornerstone of the USDA nutrition assistance programs. Initiated as a pilot program in 1961 and made permanent in 1964, the program issues monthly coupons that are redeemable at retail food stores, or provides benefits through electronic benefit transfer (EBT). Eligibility and allotments are based on household size, income, assets, and other factors. The Food Stamp Program in Puerto Rico was replaced in 1982 by a block grant program. American Samoa and the Northern Mariana Islands in the Pacific also provide benefits under block grants. These territories (Guam is considered a state under SNAP) provide coupons to participants rather than food stamps or food distribution. *For more information on this program, contact Dennis Stewart at (415) 705-2333 extension 301, or dennis.stewart@fns.usda.gov.*

The Emergency Food Assistance Program (TEFAP): TEFAP provides commodity foods to State Agencies for distribution to households, soup kitchens and food banks. First initiated in 1981, TEFAP was initially designed to reduce inventories and storage costs of surplus commodities through distribution to needy households. TEFAP for CNMI is included in the cash block grant under the Child Nutrition MOU. *For more information on this program, contact Melissa Baker at (415) 705-1355 extension 523 or melissa.baker@fns.usda.gov.*

Special Supplemental Nutrition Program for Women, Infants & Children (WIC): WIC's goal is to improve the health of low-income pregnant, breastfeeding and non-breastfeeding postpartum women, and infants and children up to 5 years old. WIC provides supplemental foods, nutrition education, and access to health services. Participants receive vouchers that can be redeemed at retail food stores for specific foods that are rich sources of the nutrients frequently lacking in the diet of low-income mothers and children. *For more information on this program, contact Rich Proulx at (415) 705-1313 extension 251 or rich.proulx@fns.usda.gov.*

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
Child Nutrition Block Grant/MOU	\$19,265,139	\$8,903,282	Not Eligible	Not Eligible	Not Eligible	Not Eligible
Child Nutrition Block Grant, Cash in Lieu (CIL)**	Not Eligible	Not Eligible	\$9,420,638	Not Eligible	Not Eligible	Not Eligible
Special Food Assistance (SFA) Block Grant	Not Eligible	Not Eligible	Not Eligible	Not Eligible	\$573,850	Not Eligible
Supplemental Nutrition Assistance Program (SNAP)*	\$7,599,379	\$12,148,000	\$107,618,363	Not Eligible	Not Eligible	Not Eligible
The Emergency Food Assistance (TEFAP)**	Not Eligible	Not Eligible	\$218,532	Not Eligible	Not Eligible	Not Eligible
The Emergency Food Assistance Program	Not Eligible	\$38,163	Not Eligible	Not Eligible	Not Eligible	Not Eligible
Women, Infants & Children (WIC)*	\$8,014,461	\$8,903,282	\$8,958,316	Not Eligible	Not Eligible	Not Eligible
TOTAL	\$34,878,979	\$29,992,727	\$126,215,849	\$0	\$573,850	\$0

TOTAL USDA FNS FUNDS AWARDED FY2011: \$191,661,405

*combined benefits for food and administrative funds

**combined value of commodities and administrative funds

Rural Development

MISSION: *USDA Rural Development (RD) is composed of Rural Business-Cooperative Programs, Rural Housing and Community Facilities Programs, and Rural Utilities Programs. RD offers rural communities a broad array of financial, technical, and educational resources in order to establish and grow rural businesses and cooperatives. RD provides financing for single family homes and multi-family housing developments, and essential community facilities. RD helps to finance the development of electric, telephone, telecommunication, and water and wastewater infrastructures to create affordable utilities.*

Community Connect Grant: The Community Connect program serves rural communities where broadband service is least likely to be available, but where it can make a tremendous difference in the quality of life for citizens. The projects funded by these grants will help rural residents tap into the enormous potential of the Internet. Funds may be used to build broadband infrastructure and establish a community center which offers free public access to broadband for two years. *For more information on this program, contact Wes Lannen at (907) 349-0104 or wes.lannen@wdc.usda.gov.*

Community Facilities (CF) and Economic Impact Initiative (EII) CF Grants: These programs provide essential community facilities for rural communities with populations of 20,000 or less. They are for public bodies, non-profit organizations, and Indian tribes to build facilities and purchase equipment for fire and rescue, telecommunications, schools, libraries, hospitals, etc. *For more information on this program, contact Alton M. Kimura at (808) 933-831 or alton.kimura@hi.usda.gov.*

Distance Learning and Telemedicine Program: This program is designed specifically to meet the educational and health care needs of rural areas. Through loans, grants and loan/grant combinations, advanced telecommunications technologies provide enhanced learning and health care opportunities for rural residents. *For more information on this program, contact Wes Lannen at (907) 349-0104 or wes.lannen@wdc.usda.gov.*

Housing Application Packaging Grants: This program provides funds to public agencies and private non-profit organizations to package applications for submission to Housing and Community Facilities Programs. Packagers assist very low- and low-income applicants with the application process by prescreening, making preliminary eligibility determinations, ensuring the application is complete, and helping the applicant to understand the program. *For more information on this program, contact Donald K. Étés at (808) 933-8305 or donald.etes@hi.usda.gov.*

Mutual Self-Help Technical Assistance Grant: This program assists lower income families in building their own homes when they are located in rural areas with populations of 20,000 or less. It provides funding to an entity which must give technical assistance to qualify and supervise small groups of families to build each other's homes. *For more information on this program, contact Donald K. Étés at (808) 933-8305 or donald.etes@hi.usda.gov.*

Rural Business Enterprise Grant (RBEG): RBEG finances and facilitates the development of small and emerging private business enterprises. It provides funding to public bodies, private non-profit corporations, and federally recognized Native American tribal groups to buy and develop land, establish a revolving loan fund, construct buildings, plants, equipment, access streets and roads, parking areas, utility and service extensions, and rural distance learning networks. RBEG operates in all areas except cities of more than 50,000 and their contiguous and adjacent urbanized areas. *For more information on this program, contact Chester M. Cabral (808) 933-8318 or chester.cabral@hi.usda.gov.*

Rural Business Opportunity Grants (RBOG): This program finances technical assistance for business development planning in rural areas. This includes all areas except cities of more than 50,000 and their contiguous and adjacent urbanized areas. RBOG provides funding to public bodies, non-profit corporations, Indian tribes on Federal or State reservations, and cooperatives with members that are primarily rural residents. It funds technical assistance, leadership training, establishment of business support centers, and economic development plans. *For more information on this program, contact Chester M. Cabral (808) 933-8318 or chester.cabral@hi.usda.gov.*

Rural Community Development Initiative (RCDI): The Rural Community Development Initiative (RCDI) program provides grants to qualified intermediary organizations that will provide financial and technical assistance to recipients to develop their capacity and ability to undertake projects related to housing, community facilities, or community and economic development. *For more information on this program, contact Alton M. Kimura at (808) 933-8317 or alton.kimura@hi.usda.gov.*

Rural Economic Development Grants (REDG): Grant funds are provided to local eligible utility (electric, telephone, etc.) organizations which will use the funding to establish revolving loan funds. Loans are made into the community from the revolving loan fund to projects that will create or retain rural jobs. *For more information on this program, contact Chester M. Cabral (808) 933-8318 or chester.cabral@hi.usda.gov.*

Rural Energy for America Program (REAP): Funding provides financial assistance (maximum 25% grant with various maximums) to agricultural producers and rural small businesses to purchase, install, and construct renewable energy systems; make energy efficiency improvements to non-residential buildings and facilities; use renewable technologies that reduce energy consumption; and participate in energy audits, renewable energy development assistance, and feasibility studies. *For more information on this program, please contact Timothy W. O'Connell at (808) 933-8313 or tim.oconnell@hi.usda.gov.*

Section 533 Housing Preservation Grant: Program goal is to repair and rehabilitate housing owned or occupied by very low and low-income rural families located in rural areas with populations of 20,000 or less. Funding is provided to an entity that will operate a program which finances repair and rehabilitation activities for single family and small rental properties. *For more information on this program, contact Donald K. Étés at (808) 933-8305 or donald.etes@hi.usda.gov.*

Single Family Section 504 Housing Repair & Rehabilitation Grant: Program goal is to help very low-income applicants remove health and safety hazards or repair their homes when they are located in rural areas with populations of 20,000 or less. Funding is used to repair or replace roof, winterizing, purchase or repair of heating system, structural repair, and water and sewage connect fees, and similar uses.. Grants are only available to very low-income applicants who are 62 years or older and cannot afford to pay 1 percent loan. *For more information on this program, contact Donald K. Étés at (808) 933-8305 or donald.etes@hi.usda.gov.*

Small, Socially Disadvantaged Producer Grant (SSDP): This program provides technical assistance to small, socially-disadvantaged agricultural producers through eligible cooperatives and associations of cooperatives. Grants are awarded on a competitive basis. The maximum award amount per grant is \$200,000. *For more information on this program, please contact Timothy W. O'Connell at (808) 933-8313 or tim.oconnell@hi.usda.gov.*

Value-Added Producer Grants (VAPG): Grants may be used for planning activities and for working capital to market value-added agricultural products and for farm-based renewable energy. Eligible applicants are independent producers, farmer and rancher cooperatives, agricultural producer groups, and majority-controlled producer-based business ventures. *For more information on this program, contact Chester M. Cabral (808) 933-8318 or chester.cabral@hi.usda.gov.*

Water and Waste Disposal Grants: Grants are used to develop water and waste disposal systems in rural areas and towns with a population not in excess of 10,000. The funds are available to public bodies, non-profit corporations and Indian tribes. To qualify, applicants must be unable to obtain the financing from other sources at rates and terms they can afford and/or their own resources. Funds can be used for construction, land acquisition, legal fees, engineering fees, capitalized interest, equipment, initial operation and maintenance costs, project contingencies, and any other cost that is determined by the Rural Development to be necessary for the completion of the project. Projects must be primarily for the benefit of rural users. Grant portion is only determined after a loan is considered. *For more information on this program, contact Alton M. Kimura at (808) 933-8317 or alton.kimura@hi.usda.gov.*

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
Community Connect Grant	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible but Eligible	\$0 but Eligible
CF Grant	\$71,305	\$0 but Eligible	\$0 but Eligible	\$92,281	\$0 but Eligible	\$8,622
CF EII Grant	\$39,050	\$0 but Eligible	Not eligible	\$33,495	\$0 but Eligible	\$0 but Eligible
Distance Learning and Telemedicine Grant	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
Mutual Self-Help Technical Assistance Grant	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
RBEG Grant	\$0 but Eligible	\$0 but Eligible	\$50,000	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
RBOG Grant	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
RCDI	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
REDG	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
REAP Grant	\$0 but Eligible	\$71,931	\$0 but Eligible	\$0 but Eligible	\$33,757	\$0 but Eligible
Section 533 Housing Preservation Grant	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
504 Grant	\$56,140	\$0 but Eligible	\$0 but Eligible	\$57,390	\$0 but Eligible	\$3,000
SSDP Grant	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
VAP Grants	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
Water and Waste Disposal Grant	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
TOTAL	\$166,495	\$71,931	\$50,000	\$183,166	\$33,757	\$11,622

TOTAL USDA RD FUNDS AWARDED FY2011: \$516,971

DEPARTMENT OF COMMERCE

MISSION: *The U.S. Department of Commerce promotes job creation, economic growth, sustainable development and improved standards of living for all Americans by working in partnership with businesses, universities, communities and our nation’s workers. The department touches the daily lives of the American people in many ways, with a wide range of responsibilities in the areas of trade, economic development, technology, entrepreneurship and business development, environmental stewardship, and statistical research and analysis.*

Economic Development Administration

MISSION: *Our mission is to help our partners across the nation (states, regions, and communities) create wealth and minimize poverty by promoting a favorable business environment to attract private capital investment and higher-skill, higher-wage jobs through world-class capacity building, planning, infrastructure, research grants, and strategic initiatives.*

FY 2011 Economic Development Assistance Programs: Availability of Funds under the Public Works and Economic Development Act of 1965, as amended, and the Trade Act of 1974, as amended. *For more information on this program, contact Gail Fujita at (808) 541-3391 or gfujita@eda.doc.gov.*

American Recovery Program: Pursuant to the American Recovery and Reinvestment Act of 2009 Pub. L. No111-5, 123 Stat. 115 (2009). *For more information on this program, contact Gail Fujita at (808) 541-3391 or gfujita@eda.doc.gov.*

University Center Economic Development Program: Pursuant to the Consolidated Security, Disaster Assistance and Continuing Appropriations Act 2009, Pub. L. No. 110-329 (September 30, 2008). *For more information on this program, contact Gail Fujita at (808) 541-3391 or gfujita@eda.doc.gov.*

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
Public Works	\$0 but Eligible	\$1,500,000	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
Technical Assistance	\$102,788	\$102,788	\$102,788	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
TOTAL	\$102,788	\$1,602,788	\$102,788	\$0	\$0	\$0

TOTAL DOC/EDA FUNDS AWARDED FY2011: \$1,808,364

DEPARTMENT OF EDUCATION

MISSION: *The Department of Education's mission is to promote student achievement and preparation for global competitiveness by fostering educational excellence and ensuring equal access.*

Asian American & Native American Pacific Islander-Serving Institutions Program: This program provides grants and related assistance to Asian American and Native American Pacific Islander-serving institutions to enable such institutions to improve and expand their capacity to serve Asian Americans and Native American Pacific Islanders and low-income individuals. *For more information on this program, contact Pearson Owens at 202-502-7804 or pearson.owens@ed.gov.*

College Access Challenge Grant Program: This program seeks to foster partnerships among federal, state, and local governments and philanthropic organizations through matching challenge grants that are aimed at increasing the number of low-income students who are prepared to enter and succeed in postsecondary education. *For more information on this program, contact Karmon Simms-Coates at (202) 502-7807 or karmon.simms-coates@ed.gov.*

Consolidated Grants to Insular Areas Program: Authorized under 48 U.S.C. 1469a (Title V, Public Law 95-134) and U.S. Department of Education regulations at 34 CFR 76.125-76.137, an Insular Area may be awarded a Consolidated Grant for any two or more authorized formula grant programs and the grant funds may be used for one or more of the programs included in the Consolidated Grant. Nineteen programs are eligible for consolidation under this program. Activities carried out by the Insular Areas include professional development for teachers and administrators to improve teaching and learning, activities to reduce class size, acquisition of supplemental instructional materials and technology for classrooms and libraries, after school programs for at-risk students, and parent outreach services to promote educational success. *For more information on this program, contact Jenelle Leonard at (202) 401-3641 or jenelle.leonard@ed.gov; or alternately contact Collette Fisher at (202) 260-2544 or collette.fisher@ed.gov.*

Early Intervention Program for Infants and Toddlers with Disabilities: This program assists in maintaining and implementing statewide systems of coordinated, comprehensive, multidisciplinary, interagency programs of early intervention services for infants and toddlers with disabilities and their families. *For more information on this program, contact Gregg Corr at (202) 245-7309 or gregg.corr@ed.gov.*

Education Grant Program for the Territories and Freely Associated States: This program is funded from a 1 percent set-aside from the appropriation for Title I, Part A Grants to Local Education Agencies (LEAs). Up to 5 million dollars may be reserved annually for discretionary grants to American Samoa, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands and the Republic of Palau, for programs that assist all students with meeting challenging academic State standards. Authorized activities include programs for teacher training, curriculum development, instructional materials, or general school improvement and reform. *For more information on this program, contact Jenelle Leonard at (202) 401-3641 or jenelle.leonard@ed.gov; or alternately contact Collette Fisher at (202) 260-2544 or collette.fisher@ed.gov.*

English Language Acquisition Program: The National Professional Development program funds professional development activities intended to improve instruction for students with limited English proficiency (LEP) and assists educational personnel working with such children to meet high professional standards. Projects are designed to increase the pool of highly qualified teachers prepared to serve LEP students and increase the skills of teachers already serving them. *For more information on this program, contact Cynthia Ryan at (202) 401-1436 or cynthia.ryan@ed.gov.*

Fund for the Improvement of Education (FIE)-Counseling Demonstration Program: This program provides funding to LEAs to establish or expand elementary and secondary school counseling programs, with special consideration to demonstrate the greatest need for counseling services in the schools to be served; Propose the most innovative and promising approaches; and show the greatest potential for replication and dissemination. *For more information on this program, contact Lisa Harrison at (202) 245-7873 or lisa.harrison@ed.gov.*

Higher Education Programs: These programs increase access to postsecondary education for

disadvantaged students and strengthen the capacity of colleges and universities that serve a high percentage of disadvantaged students by providing grants to improve higher education preparation, participation, and retention; scholarships for academic excellence; institutional development; and support to improve teacher quality. Programs target specific aspects of the higher education mission: Trio Upward Bound/Talent Search/Student Support Services, Robert Byrd Scholarship, Gear-Up, Strengthening Institutions, and others. *For more information on this program, contact James Laws at (202) 502-7719 or james.laws@ed.gov.*

Rehabilitation Services & Disability Research Programs: These programs develop and implement, through research, training, and direct services, comprehensive and coordinated programs of vocational rehabilitation and independent living for individuals with disabilities. Programs include Vocational Rehabilitation Basic Support, Independent Living, Assistive Technology, Client Assistance, Protection and Advocacy, Supported Employment Services, and others. *For more information on this program, contact Carol Dobak at (202) 245-7325 or carol.dobak@ed.gov.*

Special Education Program: Special Education – Grants to States for Preschool Children with Disabilities and Special Education – Grants to States for Infants and Toddlers with Disabilities and their Families are state formula grants to assist in paying for and improving special education and related services, and early intervention services, for infants, toddlers, children and youth with disabilities and their families. Additionally, the Department funds a number of special education-specific Technical Assistance and Dissemination Centers, Personnel Development programs, and Parent Training and Information Centers through discretionary grant programs. *For more information on the State Formula Grants, contact Gregg Corr at (202) 245-7309 or gregg.corr@ed.gov. For more information on the Discretionary Grants contact Larry Wexler at (202) 245-7971 or larry.wexler@ed.gov.*

Striving Readers Comprehensive Literacy Program: The purpose of this program is to create a comprehensive literacy program to advance literacy skills including pre-literacy skills, reading and writing for students from birth through grade 12, including limited-English-proficient students and students with disabilities. *For more information on this program, contact Miriam Lund at (202) 401-2871 or miriam.lund@ed.gov.*

Transition to Teaching Program (Local): The Transition to Teaching program supports the recruitment and retention of highly qualified mid-career professionals, including qualified paraprofessionals, and recent college graduates who have not majored in education to teach in high-need schools and districts through the development of new or enhanced alternative routes to certification. *For more information on this program, contact Beatriz Ceja at (202) 205-5009 or beatriz.ceja@ed.gov.*

Vocational & Adult Education Program: Vocational education programs support state and local efforts to improve career and technical education programs, to help secondary and postsecondary students develop the academic, career and technical skills necessary for further education and careers. Adult education programs support state and local efforts to improve the quality and capacity of adult education programs so that adults can acquire the basic education and literacy skills needed to function in today's society. Includes Adult Education Grants to States and Vocational Education Basic Grants to States. *For more information on this program, contact Anthony Corio at (202) 245-6836 or anthony.corio@ed.gov; or alternately contact Edward Smith at (202) 245-7602 or edward.smith@ed.gov.*

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
Asian American & Native American Pacific Islander-Serving Institutions	\$400,000	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$290,377
College Access Challenge	\$1,500,000	\$1,500,000	\$1,500,000	Not Eligible	Not Eligible	\$1,500,000
Consolidated Grants to Insular Areas	\$9,013,364	\$5,453,287	\$11,886,363	Not Eligible	Not Eligible	Not Eligible

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
Early Intervention Program for Infants & Toddlers with Disabilities	\$582,117	\$446,581	\$1,424,395	Not Eligible	Not Eligible	Not Eligible
Education Grant Program for the Territories & Freely Associated States	\$1,080,000	\$1,023,096	\$348,732	Not Eligible	Not Eligible	\$1,000,000
English Language Acquisition	\$0 but Eligible	\$0 but Eligible	\$300,000	Not Eligible	Not Eligible	Not Eligible
Fund for Improvement of Education (FIE)- Counseling Demonstration Program	\$188,500	\$0 but Eligible	\$0 but Eligible	Not Eligible	Not Eligible	Not Eligible
Higher Education	\$1,202,325	\$472,246	\$1,941,370	\$1,800,486	\$299,782	\$801,110
Rehabilitation Services & Disability Research	\$1,660,194	\$1,339,977	\$3,396,936	Not Eligible	Not Eligible	Not Eligible
Special Education	\$1,636,309	\$1,167,447	\$3,731,457	\$948,054	\$410,398	\$346,726
Striving Readers Comprehensive Literacy	\$253,800	\$92,190	\$312,967	Not Eligible	Not Eligible	Not Eligible
Transition to Teaching (Local)	\$349,919	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
Vocational & Adult Education	\$245,248	\$424,150	\$1,057,452	Not Eligible	Not Eligible	\$25,420
TOTAL	\$18,111,776	\$11,918,974	\$25,899,672	\$2,748,540	\$710,180	\$3,963,633

TOTAL DOE FUNDS AWARDED IN FY2011: \$63,352,775

DEPARTMENT OF HEALTH & HUMAN SERVICES

MISSION: *The Department of Health and Human Services (HHS) is the United States government's principal agency for protecting the health of all Americans and providing essential human services, especially for those who are least able to help themselves.*

Administration for Children & Families

MISSION: *The Administration for Children and Families (ACF), within the Department of Health and Human Services (HHS) is responsible for federal programs that promote the economic and social well-being of families, children, individuals, and communities.*

Abstinence Education Grant Program (AEGP): The Title V State Abstinence Education Grant Program (AEGP) provides funding to States and Territories for abstinence education, and where appropriate, mentoring, counseling and adult supervision to promote abstinence from sexual activity. (<http://www.acf.hhs.gov/programs/fysb/content/programs/tpp.htm>)

Administration for Developmental Disabilities (ADD): ADD ensures that individuals with developmental disabilities and their families participate in the design of and have access to culturally-competent community services, individualized supports, and other forms of assistance that promote self-determination, independence, productivity, and integration and inclusion in all facets of life. The ADD grants include State Councils on Developmental Disabilities (SCDD), Protection and Advocacy Agencies (P&A), Projects of National Significance (PNS), University Centers for Excellence in Developmental Disabilities Education, Research, and Service (UCEDD), and Voting Access for Individuals with Disabilities. (<http://www.acf.hhs.gov/programs/add/>)

Administration for Native Americans (ANA): ANA promotes the goal of social and economic self-sufficiency of American Indians, Alaska Natives, Native Hawaiians, and other Native American Pacific Islanders, including Native Samoans. Self-sufficiency is that level of development at which a Native American community can control and internally generate resources to provide for the needs of its members and meet its own economic and social goals. Some of the ANA grants to the Outer Pacific have included; Social and Economic Development; Improve the Well-Being of Children-Native American Healthy Marriage Initiative; and the Grant Languages Program. (<http://www.acf.hhs.gov/programs/ana/>)

Children's Bureau (CB): The Children's Bureau works with State, Tribes, territories and local agencies to develop programs that focus on preventing the abuse of children in troubled families, protecting children from abuse, and finding permanent placements for those who cannot safely return to their homes. Some of the CB grants to the Outer Pacific include; Child Abuse and Neglect (CAN) Basic Grant, Parts 1 and 2, Children's Justice Act (CJA), Child Welfare Services (CWS IVB-1), Community-Based Child Abuse Prevention (CBCAP), and Promoting Safe and Stable Families (FPSS, CWS IVB-2). (http://www.acf.hhs.gov/programs/cb/programs_fund/index.htm#disc)

Child Care Development Fund (CCDF): CCDF assists low-income families, families receiving temporary public assistance, and those transitioning from public assistance in obtaining child care so they can work or attend training/education. The CCDF program has changed Federally-subsidized child care programs in states, allowing them to serve families through a single, integrated child care system. All child care funding is now combined under the Child Care and Development Block Grant (CCDBG) Act. *For more information on this program, contact Bob Garcia at (415) 437-8439 or robert.garcia@acf.hhs.gov.*

Child Support Enforcement (CSE): The goal of the CSE program, established in 1975 under Title IV-D of the Social Security Act, is to ensure that children are supported financially by both parents. Designed as a joint Federal, State, and local partnership, the program involves 54 separate State and territory systems, each with its own unique laws and procedures. The program is usually run by State and local human service agencies, often with the help of prosecuting attorneys and other law enforcement officials as well as officials of family or domestic relations courts. At the Federal level, the Department of Health and Human Services provides technical assistance and funding to states through the Office of Child Support Enforcement and also operates the Federal Parent Locator System, a computer matching system that

locates non-custodial parents who owe child support. *For more information on this program, contact John Kersey (415) 437-8415 or John.Kersey@acf.hhs.gov*

Community Services Block Grant (CSBG): CSBG provides states and territories with funds to provide a range of services to address the needs of low-income individuals to ameliorate the causes and conditions of poverty. CSBG is administered by the Office of Community Services, ACF. (<http://www.acf.hhs.gov/programs/ocs/csbq/>)

Family Violence Prevention Grant: The Family Violence Prevention program assists states and territories to support, establish, maintain, and expand programs and projects to prevent incidents of family violence and provide immediate shelter and related assistance to victims of family violence and their dependents. (<http://www.acf.hhs.gov/programs/fysb/content/programs/fv.htm>)

Head Start: Head Start and Early Head Start are comprehensive child development programs which serve children from birth to age five, 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. Grants are awarded by the ACF Regional Offices and the Head Start Bureau's American Indian and Migrant Program Branches directly to local public agencies, private organizations, Indian tribes and school systems for the purpose of operating Head Start programs at the community level. *For more information on this program, contact Richard Ybarra at (415) 437-7996 or richard.ybarra@acf.hhs.gov.*

Leveraging Incentive Program: The Leveraging Incentive Program is funded under the Low Income Home Energy Assistance Program (LIHEAP). The program provides supplemental LIHEAP funding for grantees that acquired non-federal leveraged resources for their LIHEAP Programs in the preceding fiscal year. (<http://www.acf.hhs.gov/programs/ocs/liheap/about/factsheet.html>)

Low-Income Home Energy Assistance Program (LIHEAP): States, territories, and Indian tribes and tribal organizations that wish to assist low-income households in meeting the costs of home energy may apply for LIHEAP. Congress established the formula for distributing funds to states based on each state's share of home energy expenditures by low-income households. (<http://www.acf.hhs.gov/programs/ocs/liheap/index.html>)

Personal Responsibility Education Program (PREP): The purpose of State PREP is to enable states to support personal responsibility education programs that replicate evidence-based effective program models or substantially incorporate elements of effective programs that have been proven on the basis of scientific research to change behavior, which means delaying sexual activity, increasing condom or contraceptive use for sexually active youth, and/or reducing pregnancy among youth. Funds must be utilized to educate adolescents on both abstinence and contraception to prevent pregnancy and sexually transmitted infections (STIs), including HIV/AIDS, and at least three adulthood preparation subjects. (<http://www.acf.hhs.gov/programs/fysb/content/programs/tpp.htm>)

Residential Energy Assistance Challenge Program (REACH): REACH is supplemental funding through Low-Income Home Energy Assistance Program (LIHEAP). The grantees receive competitive grants for implementation through local community-based agencies of innovative plans to help LIHEAP eligible households reduce their energy vulnerability. (<http://www.acf.hhs.gov/programs/ocs/liheap/>)

Runaway & Homeless Youth (RHY): Runaway and Homeless Youth (RHY) funds youth shelters that provide emergency shelter, food, clothing, outreach services, and crisis intervention for runaway and homeless youth. The shelters also help reunite youth with their families, whenever possible. RHY grants include; Transitional Living Program, Street Outreach and Basic Centers. *For more information on this program, contact Deborah Oppenheim at (415) 437-8426 or deborah.oppenheim@acf.hhs.gov.*

Social Services Block Grant (SSBG): SSBG funds States, territories, and insular areas for the provision of social services directed at achieving economic self-sufficiency, preventing or remedying neglect, abuse, or the exploitation of children and adults, preventing or reducing inappropriate institutionalization, and securing referrals for institutional care, where appropriate. (<http://www.acf.hhs.gov/programs/ocs/ssbg/>)

State Domestic Violence Coalitions: The Family Violence Prevention and Services Program provides formula grant funding for State Domestic Violence Coalitions. The coalitions improve domestic violence

intervention and prevention in their states. Coalitions build on the strength of local community programs and identify and address statewide needs. (<http://www.acf.hhs.gov/programs/fysb/content/programs/fv.htm>)

Temporary Assistance for Needy Families (TANF): TANF provides assistance and work opportunities to needy families by granting states the federal funds and wide flexibility to develop and implement their own welfare programs. *For more information on this program, contact Tracy Donovan at (415) 437-8424 or tracy.donovan@acf.hhs.gov.*

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
Abstinence Education Grant	\$0 but Eligible	\$0 but Eligible	\$51,213	\$47,492	\$0 but Eligible	\$0 but Eligible
ADD: State Councils on Developmental Disabilities	\$248,845	\$248,845	\$248,845	Not Eligible	Not Eligible	Not Eligible
ADD: Projects Of National Significance	\$0 but Eligible	\$0 but Eligible	\$200,000	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
ADD: Protection & Advocacy	\$205,808	\$205,808	\$205,808	Not Eligible	Not Eligible	Not Eligible
ADD: University Centers for Excellence in Developmental Disabilities Education, Research, & Service	\$0 but Eligible	\$0 but Eligible	\$535,000	Not Eligible	Not Eligible	Not Eligible
ADD: <i>Voting Access for Individuals. with Disabilities</i>	\$35,000	\$0 but Eligible	\$35,000	Not Eligible	Not Eligible	Not Eligible
ADD: <i>Voting Access for Individuals with Disabilities-State & Local Governments</i>	\$100,000	\$0 but Eligible	\$48,126	Not Eligible	Not Eligible	Not Eligible
ANA: Grant Languages Program	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	Not Eligible	Not Eligible	Not Eligible
ANA: Improving The Well Being of Children/Native American Healthy Marriage	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	Not Eligible	Not Eligible	Not Eligible
ANA: Social & Economic Development	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	Not Eligible	Not Eligible	Not Eligible
Children's Bureau: Child Abuse & Neglect State Grant - Part 1	\$57,996	\$55,552	\$67,174	Not Eligible	Not Eligible	Not Eligible
Children's Bureau: Child Welfare Social Services	\$176,260	\$147,885	\$302,471	Not Eligible	Not Eligible	Not Eligible
Children's Bureau: Children's Justice Act	\$54,794	\$53,329	\$60,298	Not Eligible	Not Eligible	Not Eligible

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
Children's Bureau: Community-Based Child Abuse Prevention	\$200,000	\$200,000	\$200,000	Not Eligible	Not Eligible	Not Eligible
Children's Bureau: Promoting Safe & Stable Families	\$216,742	\$177,557	\$391,034	Not Eligible	Not Eligible	Not Eligible
CCDF Mandatory & Matching	\$2,928,609	\$1,858,431	\$4,190,681	Not Eligible	Not Eligible	Not Eligible
Child Support Enforcement-States	\$0 but Eligible	\$0 but Eligible	\$3,464,485	Not Eligible	Not Eligible	Not Eligible
Community Services Block Grant	\$911,958	\$540,689	\$863,097	Not Eligible	Not Eligible	Not Eligible
Family Violence Prevention & Services State Grants	\$129,792	\$129,792	\$129,792	Not Eligible	Not Eligible	Not Eligible
Head Start Projects	\$2,142,850	\$1,845,109	\$2,257,880	\$0 but Eligible	\$0 but Eligible	\$1,442,333
Low Income Home Energy Assistance (LIHEAP)	\$104,588	\$79,643	\$229,302	Not Eligible	Not Eligible	Not Eligible
Leveraging Incentive Program	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	Not Eligible	Not Eligible	Not Eligible
Personal Responsibility Education Program	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$250,000	\$0 but Eligible	\$0 but Eligible
PSSF Caseworker Visitation	\$8,828	\$6,471	\$19,313	Not Eligible	Not Eligible	Not Eligible
Residential Energy Assistance Challenge Options Program	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	Not Eligible	Not Eligible	Not Eligible
Runaway & Homeless Youth: Basic Centers	\$0 but Eligible	\$0 but Eligible	\$70,000	Not Eligible	Not Eligible	Not Eligible
Runaway & Homeless Youth: Street Outreach	\$0 but Eligible	\$0 but Eligible	\$100,000	Not Eligible	Not Eligible	Not Eligible
Runaway & Homeless Youth: Transitional Living Program	\$0 but Eligible	\$0 but Eligible	\$200,000	Not Eligible	Not Eligible	Not Eligible
Social Services Block Grant	\$48,518	\$58,621	\$293,103	Not Eligible	Not Eligible	Not Eligible
State Access & Visitation	\$0 but Eligible	\$0 but Eligible	\$100,000	Not Eligible	Not Eligible	Not Eligible
Statewide Domestic Violence Coalition	\$0 but Eligible	\$231,771	\$231,771	Not Eligible	Not Eligible	Not Eligible
Temporary Assistance for Needy Families	\$0 but Eligible	\$0 but Eligible	\$4,686,000	Not Eligible	Not Eligible	Not Eligible
TOTAL	\$7,570,588	\$5,839,503	\$19,180,393	\$297,492	\$0	\$1,442,333

TOTAL HHS/ACF FUNDS AWARDED IN FY2011: \$34,330,309

Administration on Aging

MISSION: The mission of the Administration on Aging is to develop a comprehensive, coordinated and cost-effective system of home and community-based services that helps elderly individuals maintain their health and independence in their homes and communities.

Older Americans Act (OAA): OAA provides funding to the Pacific territories to support the development and administration of comprehensive, coordinated programs that serve elderly persons and their caregivers. Congregate nutrition, home delivered meals, nutrition education, and in American Samoa, food vouchers, are provided under Title IIIC of the Older Americans Act. In 2012, American Samoa will transition from the nutrition voucher program to a congregate and home delivered meals program. Supportive services funded with Title IIIB and Title VII OAA funds include: transportation, information and assistance, legal, health promotion, socialization, in home services, pension counseling, adult day care, ombudsman, and elder abuse prevention. The National Family Caregiver Support Program under Title IIIE provides assistance to families and caregivers of elderly persons. Services include information, assistance, caregiver training, counseling and support, respite care, and supplemental services. Guam established an Aging and Disability Resource Center (ADRC), where older people and people with disabilities have access to clear and uniform information and counseling on all available long-term care services. For more information on this program, contact Anna Cwirko-Godycki at (415) 437-8788 or anna.cwirko-godycki@aoa.hhs.gov.

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
AOA Services	\$1,326,003	\$812,928	\$3,429,091	Not Eligible	Not Eligible	Not Eligible
TOTAL	\$1,326,003	\$812,928	\$3,429,091	\$0	\$0	\$0

TOTAL HHS/AOA FUNDS AWARDED IN FY2011: \$5,568,022

Centers for Disease Control & Prevention

MISSION: The Centers for Disease Control and Prevention focuses on collaborating to create the expertise, information, and tools that people and communities need to protect their health – through health promotion, prevention of disease, injury and disability, and preparedness for new health threats.

The Collaborative Performance Agreement for Diabetes, Tobacco & BRFSS: Supports a variety of activities that improve the Nation's health by addressing the prevention and control of chronic diseases and their primary risk factors. Program activities focus primarily on diabetes and tobacco prevention and control as well as the Behavior Risk Factor Surveillance System (BRFSS) and there is supplemental funding to address the primary risk factors of poor nutrition and physical inactivity. The funding supports capacity building, community-wide engagement in healthy lifestyle initiatives, policy and environmental changes that support healthy choices and positive health behaviors, healthcare systems changes and public health surveillance. For more information on this program, contact MaryBeth Welton at mwelton@cdc.gov; Gwen Hosey at ghosey@cdc.gov; Nancy Williams at nawilliams@cdc.gov; or Dawn Satterfield at dxs9@cdc.gov.

The Comprehensive STD Prevention Systems (CSPS) Grants: Supports the design, implementation, and evaluation of comprehensive interdisciplinary state and local STD prevention plans, and for integration of STD/HIV prevention activities. The comprehensive services are targeted to prevent STDs among at-risk populations. CSPS awards include supplemental funds for Infertility Prevention Programs (IPP) and for Syphilis Elimination efforts. IPP funds support expansion of chlamydia and gonorrhea screening and treatment efforts in traditional and nontraditional health care settings. For more information on this program, contact Thom Cylar at tcylar@cdc.gov.

The Early Hearing Detection & Intervention (EHDI) Program: Supports states and territories in developing and implementing EHDI tracking and surveillance systems. These systems help state EHDI programs make sure that babies get the hearing screening, follow-up, and early intervention services they need. For more information on this program, contact Deidra Green at dgreen@cdc.gov.

The Epidemiology and Laboratory Capacity (ELC) Program: The ELC program was initiated in 1995 as one of the first key activities under CDC's plan to address emerging infectious disease threats. The overall purpose of the ELC program is to assist state public health agencies improve surveillance for, and response to, infectious diseases and other public health threats by (1) strengthening epidemiologic capacity; (2) enhancing laboratory capacity; (3) improving information systems; (4) developing and implementing prevention and control strategies and (5) enhancing collaboration among epidemiology, laboratory, and information systems components of public health departments. Starting out as limited funding for a small number of states, the program has grown to become one of CDC's key nationwide programs for supporting state and local capacity including both 1) cross-cutting, flexible surveillance, epidemiology, and laboratory capacity for infectious diseases, as well as infectious disease-area specific activities (e.g., foodborne diseases, influenza, antimicrobial resistance, etc.). In addition, to support more effective, economical, and integrated public health efforts, ELC supports health information systems capacity for infectious diseases and non-infectious diseases. *For more information on this program, contact Alvin Schultz at (404) 639-7028 or fcu9@cdc.gov.*

The HIV Prevention Projects for the Pacific Islands: This program supports the delivery of evidence-based HIV prevention interventions, including preventing prenatal HIV transmission; increasing the proportion of HIV-infected persons who know they are infected by increasing the number of providers who routinely provide HIV screening in health care settings, increasing the proportion of HIV-infected people who are linked to appropriate prevention, care, and treatment services; and strengthening the capacity of health departments and community-based efforts to implement effective HIV prevention programs and evaluate them. *For more information on this program, contact Walter Chow at wchow@cdc.gov.*

HIV/AIDS Surveillance Program: Supports cooperative agreements with health departments and ministries to conduct HIV/AIDS surveillance, sero-surveillance, incidence, behavioral, and prevalence studies. These activities provide data that are critical to targeting the delivery of HIV prevention, care, and treatment. *For more information on this program, contact Darrin Brown at dbrown2@cdc.gov.*

Immunizations & Vaccines for Children (VFC): This program supports efforts to plan, develop, and maintain a public health infrastructure that helps assure high immunization coverage levels and low incidence of vaccine-preventable diseases. As a part of this effort, the purpose of the VFC program is to increase access to vaccines for eligible children by supplying Federal government-purchased pediatric vaccines to public and private health care providers registered with the program. Eligible children include newborns through 18 years of age who are Medicaid-eligible, not insured, American Indian/Alaska Natives, and children who are uninsured with respect to the vaccine and who are served by a Federally Qualified Health Center or a Rural Health Clinic. *For more information on this program, contact Mimi Larzelere at mlarzelere@cdc.gov.*

Improving Health & Educational Outcomes of Young People: The purpose of this program is to improve the health and well-being of youth and prepare them to be healthy adults with a strong emphasis on coordination of school health programs and activities in two out of five priority areas: Youth Risk Behavior Survey (YRBS) and HIV Prevention (Sex Risk Prevention). *For more information on this program, contact Terry Parker at JTParker@cdc.gov.*

National Cancer Prevention & Control Program: This cooperative agreement includes the National Comprehensive Cancer Control Program (NCCCCP), the National Breast and Cervical Cancer Early Detection Program (NBCCEDP) and the National Program of Cancer Registries (NPCR). The National Comprehensive Cancer Control Program (NCCCCP) addresses the "Healthy People 2010" focus area(s) of cancer. The NCCCCP component supports the planning and implementation of comprehensive cancer control activities. CDC defines comprehensive cancer control as a collaborative process through which a community pools resources to reduce the burden of cancer that results in risk reduction, early detection, better treatment and enhanced survivorship. The National Breast and Cervical Cancer Early Detection Program (NBCCEDP) supports systems to assure breast and cervical cancer screening, follow-up and support services for low-income women, with special emphasis on reaching identified populations defined as: uninsured or under-insured, geographically or culturally isolated, older, medically under-served, racial, ethnic, and/or cultural minorities. Program components of the NBCCEDP include program management; screening and diagnostic services to include case management for follow-up of abnormal results; data management; quality assurance/quality improvement; evaluation; partnerships; and professional development and recruitment. The National Program of Cancer Registries (NPCR) supports the establishment or enhancement of

statewide/territorial/jurisdictional/tribal population-based central cancer registries and promotes the use of registry data. This program addresses the "Healthy People 2010" focus area(s) of 3-14: Increase the number of states that have a statewide population-based cancer registry that capture case information on at least 95 percent of the expected number of reportable cancers. *For more information on this program, contact Susan White at sfw5@cdc.gov.*

The National Public Health Improvement Initiative: Provides health departments with needed resources to make fundamental changes in their organizations and practices, so that they can improve the delivery of public health services including:

- Building and implementing capacity within health departments for evaluating the effectiveness of their organizations, practices, partnerships, programs and use of resources through performance management.
- Expansion and training of public health staff and community leaders to conduct policy activities in key areas and to facilitate improvements in system efficiency.
- Maximizing the public health system to improve networking, coordination, and cross-jurisdictional cooperation for the delivery of public health services to address resource sharing and improve health indicators.
- Disseminating, implementing and evaluating public health's best and most promising practices.
- Building a national network of performance improvement managers that share best practices for improving the public health system.

(Component 1 funding was awarded directly to each of the six US Affiliated Pacific Island jurisdictions while Component 2 funding was awarded through the Pacific Island Health Officers Association (PIHOA), which serves as the bona fide agent for 5 of the USAPI jurisdictions funded under Component 2). *For more information on this program, contact Vicky Rayle at vrayle@cdc.gov.*

The Preventive Health & Health Services (PHHS) Block Grant: Recognizing the health needs of communities are diverse, complex, and constantly changing, the PHHS Block Grant allows grantees to address their own unique public health needs and challenges with innovative and community driven methods. With this flexibility, the US Pacific Islands use their PHHS Block Grant funding to develop and implement programs designed to prevent and control chronic disease such as diabetes, heart disease and stroke and their related risk factors, as well as unintentional injuries and rape prevention. *For more information on this program, contact Sakeena Smith at SSmith1@cdc.gov.*

Public Health Emergency Preparedness (PHEP) Grant: Intended to upgrade state and local public health jurisdictions' preparedness for and response to bioterrorism, other outbreaks of infectious disease, and other public health threats and emergencies. *For more information on this program, please contact Janice McMichael at jmcmichael@cdc.gov.*

The Sexual Violence Prevention & Education Program: Strengthens sexual violence prevention efforts by supporting increased awareness, education and training, and operation of hotlines. The purpose of this program is to award formula grants to states and territories to be used for rape prevention and education programs conducted by rape crisis centers, state sexual assault coalitions, and other public and private nonprofit entities. *For more information on this program, contact Linda Hannon-Hall at lhannonhall@cdc.gov.*

Tuberculosis (TB) Elimination Cooperative Agreement Program: Assists the current efforts of state and local TB programs to prevent, control, and eventually eliminate TB in the United States. Financial assistance is provided to TB programs to ensure that program needs for the core TB prevention and control activities are met. This program addresses the "Healthy People 2010" focus area of Immunization and Infectious Diseases in conjunction with the Government Performance and Results Act of 1993 (GPRA). Grant funding is intended to address the core TB prevention and control activities (i.e., completion of therapy, contact investigation, TB surveillance, TB public health laboratory, human resource development, and program evaluation). *For more information on this program, contact Andy Heetderks at Aheetderks@cdc.gov.*

Coordinated Chronic Disease Prevention & Health Promotion Program: This is a new capacity-building program to: 1) ensure that every state/territory has a strong foundation for chronic disease prevention and health promotion; 2) maximize the reach of categorical chronic disease programs in states/territories (such as tobacco, nutrition, physical activity, heart disease and stroke, diabetes, obesity, cancer, and arthritis) by leveraging shared basic services (such as data management, communication, health systems strategies,

policy and environmental change, and a state-wide plan); 3) provide leadership and expertise to work collaboratively across chronic disease conditions and risk factors to most effectively meet population health needs, especially for populations at greatest risk or with the greatest burden; 4) improve CDC's service to states/territories health departments in chronic disease prevention and health promotion (e.g., – states have long expressed a desire for CDC to develop common technical guidance across chronic disease programs, mechanisms to recognize the shared impact of underlying risk factors, and cross-program communication that supports a shared understanding of the common strategies to improve health and the state-specific context). *For more information on this program, contact Wayne Millington at WMillington@cdc.gov.*

Community Transformation Grant: Ulkerreuil A Klengar (UAK), a non-profit community organization dedicated to improving the health and wellbeing of all people living in Palau, is the recipient of the Community Transformation Grant (CTG) planning award to build capacity to support healthy lifestyles in the Republic of Palau. The first year of funding is dedicated to establishing a leadership team and coalition, conducting a needs assessment, creating a communication plan, and developing a Community Transformation Implementation Plan (CTIP). After a CTIP is approved by CDC, work will target tobacco-free living, active living and healthy eating, quality clinical and other preventive services, healthy and safe physical environments, and social and emotional wellness. *For more information on this program, contact Mike Waldmiller at JWaldmiller@cdc.gov.*

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
BRFSS Surveillance	\$119,633	\$0 but Eligible	\$191,853	\$75,114	\$0 but Eligible	\$168,416
Collaborative Performance Agreement Tobacco, Diabetes, & BRFSS	\$197,683	\$221,121	\$456,570	\$355,603	\$186,301	\$205,224
Comprehensive STD Prevention Systems (CSPS)	\$63,121	\$120,072	\$116,844	\$56,570	\$136,660	\$43,522
Community Transformation	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$147,106
Coordinated Chronic Disease Prevention & Health Promotion	\$204,846	\$203,745	\$213,280	\$207,868	\$204,836	\$199,599
Early Hearing Detection & Intervention (EHDI)	\$0 but Eligible	\$122,350	\$139,735	\$83,056	\$0 but Eligible	\$78,835
Epidemiology and Laboratory Capacity-	Not Eligible	Not Eligible	Not Eligible	Not Eligible	Not Eligible	\$69,283
Epidemiology and Laboratory Capacity Inf Disease	Not Eligible	Not Eligible	Not Eligible	Not Eligible	Not Eligible	\$49,909
HIV Prevention Projects for the Pacific Islands	\$174,435	\$292,058	\$510,922	\$223,566	\$122,518	\$232,630
HIV/AIDS Surveillance	\$9,000	\$22,712	\$25,000	\$5,903	\$18,042	\$21,017
Immunization & Vaccines for Children	\$552,812	\$958,096	\$1,267,534	\$1,315,987	\$1,101,766	\$211,474
Improving Health & Ed Outcomes of Young People	\$101,318	\$102,500	\$85,779	\$0 but Eligible	\$99,750	\$94,964
Cancer prevention & Control Program	\$392,915	\$370,205	\$642,840	\$505,265	\$180,000	\$661,030
National Public Health Improvement Initiative	\$250,000	\$249,993	\$250,000	\$250,000	\$250,000	\$250,000

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
Preventive Health Services Block Grant	\$40,157	\$30,746	\$165,052	\$49,036	\$20,229	\$15,901
Public Health Emergency Preparedness	\$374,003	\$358,054	\$501,200	\$421,144	\$372,756	\$323,450
Sexual Violence Prevention & Education	\$0 but Eligible	\$8,746	\$21,306	\$15,058	\$8,284	\$0 but Eligible
Tuberculosis Eliminations & Lab	\$85,525	\$181,337	\$414,651	\$171,542	\$135,734	\$127,397
TOTAL	\$2,565,448	\$3,241,735	\$5,002,566	\$3,735,712	\$2,836,876	\$2,899,757

TOTAL HHS/CDC FUNDS AWARDED FOR FY2011: \$20,282,094

Centers for Medicare & Medicaid Services

MISSION: *The Centers for Medicare and Medicaid Services' mission is to ensure effective, up-to-date health care coverage and to promote quality care for its beneficiaries.*

Children's Health Insurance Program (CHIP): Enacted by the U.S. Congress in August 1997, the Children's Health Insurance Program (CHIP) is designed primarily to help children in low income families with incomes too high to qualify for Medicaid but too low to afford private family coverage. All states and the Pacific territories are now offering coverage through CHIP, and it is jointly funded with Federal and state monies. *For more information on this program, contact Tom Schenck at (415) 744-3589 or tom.schenck@cms.hhs.gov.*

Enhanced Allotment Plan (EAP): As a result of the Medicare Modernization Act of 2003, Congress approved the allocation of additional funds to offset the costs of providing Medicare Part D to territory beneficiaries who are dual-eligible for both Medicaid and Medicare. These funds come in the form of block grants that must be matched by the respective territories. *For more information on this program, contact Tom Schenck at (415) 744-3589 or tom.schenck@cms.hhs.gov.*

Medicaid: Medicaid is a jointly funded, Federal-State health insurance program for certain low-income and needy people. It covers approximately 46 million people including low-income children, pregnant women, and aged, blind, and disabled individuals. *For more information on this program, please contact Tom Schenck at (415) 744-3589 or tom.schenck@cms.hhs.gov.*

Affordable Care Act (ACA) Medicaid Funding: The Affordable Care Act provides numerous funding opportunities for the Outer Pacific. Within these opportunities is a significant supplement in Medicaid funding provided to the three Pacific Territories. These additional funds first became available to the territories in the 4th quarter of FFY 2011, and will be available for the duration of ACA through 2019. *For more information on this program, contact Tom Schenck at (415) 744-3589 or tom.schenck@cms.hhs.gov.*

Health Information Technology (HITECH): The American Recovery and Reinvestment Act (ARRA) made available funds to States and Territories for the purpose of planning and implementation of Health Information Technology, including Electronic Health Records (EHR) for both Medicaid and Medicare providers. *For more information on this program, contact Tom Schenck at (415) 744-3589 or tom.schenck@cms.hhs.gov.*

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
Children's Health Insurance Program (CHIP)	\$939,393	\$861,110	\$4,177,637	Not Eligible	Not Eligible	Not Eligible

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
CMS Enhanced Allotment Plan (EAP)	\$298,934	\$124,186	\$905,763	Not Eligible	Not Eligible	Not Eligible
CMS Medicaid	\$11,784,500	\$6,504,750	\$17,444,000	Not Eligible	Not Eligible	Not Eligible
CMS Affordable Care Act (ACA) Medicaid Funding (1)	\$3,722,000	\$8,121,000	\$928,000	Not Eligible	Not Eligible	Not Eligible
CMS HITECH (2)	\$0 but Eligible	\$0 but Eligible	\$419,023	Not Eligible	Not Eligible	Not Eligible
TOTAL	\$16,744,827	\$15,611,046	\$23,874,423	\$0	\$0	\$0

TOTAL HHS/CMS FUNDS AWARDED IN FY2011: \$56,230,296

Health Resources & Services Administration

MISSION: *The Health Resources and Services Administration (HRSA), an agency of the U.S. Department of Health and Human Services, is the primary Federal agency for improving access to health care services for people who are uninsured, isolated or medically vulnerable.*

Area Health Education Center Program University of Guam School of Nursing: The Guam/Micronesia (G/M) AHEC Program was established in 2009 and supports three Area Health Education Centers: Guåhan (Guam) AHEC, serving the island territory of Guam; Jitdam Kapeel AHEC, serving the U.S. affiliated Republic of the Marshall Islands; and Federated States of Micronesia (FSM) AHEC, serving three of the four states within the Federated States of Micronesia. The Yap AHEC serves the fourth state of FSM. The G/M AHEC emphasizes community-based, in-country (local) and interisland training for health professions students and healthcare providers while enhancing health career education and recruitment pipeline from high school to community college levels. The G/M AHEC Program has played a significant role in improving the public health capacity and infrastructure in the region, including the development of an innovative public health training pipeline program. This program provides a career ladder from a Certificate of Achievement to a Master of public health degree. The G/M AHEC has also established strong collaborations with the US CDC and Pacific Islands Health Officers Association (PIHOA) to support training in public health capacity building. *For more information on this program, contact Meseret Bezuneh at (301) 594-4149 or mbezuneh@hrsa.gov, or alternately CAPT Norma Hatot at (301) 443-2681 or nhatot@hrsa.gov.*

Area Health Education Center Program University of Hawaii, John Burns School of Medicine: The Pacific Basin AHEC Program was established in 1995 and supports nine Area Health Education Centers: Big Island AHEC located in Hilo; Na Lei Wili AHEC located in Lihue; Palau AHEC located in Koror; Huli Au Ola AHEC located in Kaunakakai; CNMI AHEC located in Saipan; Yap AHEC located in Kolonia, Federated States of Micronesia; Waimanalo AHEC located in Waimanalo; American Samoa AHEC located in Pago, Pago and Waianae AHEC, located in Waianae. The Pacific Basin AHEC Program focuses its programmatic activities to improve the diversity, distribution, supply and quality of the health professions workforce in the Pacific in five specific areas: 1) recruiting underrepresented minority students to health science careers; 2) training students in rural and underserved areas, often in interdisciplinary teams; 3) recruiting providers to rural areas and providing activities to improve retention; 4) providing and facilitating community-based health education; and 5) providing distance learning options across the region for health information and education. Partners in this effort include schools, healthcare and government organizations, workforce investment agencies, rural health associations, and community-based organizations in the region. *For more information on this program, contact Meseret Bezuneh at (301) 594-4149 or mbezuneh@hrsa.gov, or alternately CAPT Norma Hatot at (301) 443-2681 or nhatot@hrsa.gov.*

California Public Health Training Center Program: CALPACT, the California-Pacific Public Health Training Center, addresses the urgent and growing regional need for a well-trained and expanded public health workforce, responsive to the health needs of almost 9.5 million people in Northern California, Central

California, Hawai'i, and the U.S. Associated Pacific Islands. CALPACT defines a collaborative partnership among the following accredited institutions: the School of Public Health at UC Berkeley, the Office of Public Health Studies at University of Hawaii Manoa, the Department of Public Health Sciences at UC Davis, and the Central Valley Health Policy Institute at California State University, Fresno. The offerings focus on three themes that align with the core strengths of the partner schools and address the priority needs of public health professionals, organizations and communities in their region. These themes are to strengthen leadership and management competency and performance; expand the effective use of emerging new media and communication tools; and develop organizational capacity to more effectively address health issues of diverse and under-served populations. *For more information on this program, contact Magnus A. Azuine at (301) 443-6529 or mazuine@hrsa.gov.*

Community Integrated Services Systems (CISS); State Early Childhood Comprehensive System: Planning, development and implementation activities to build partnerships and collaborations among area early childhood partners for the development and implementation of a state wide early childhood comprehensive system and an early childhood comprehensive systems plan. *For more information on this program, contact Dena Green at (301) 443-9768 or dgreen@hrsa.gov.*

Community Health Center Program: The term health center refers to all the diverse public and non-profit organizations and programs that receive Federal funding under section 330 of the Public Health Service Act, as amended by the Health Centers Consolidated Act of 1996 (P.L. 104-299), the Safety Net Amendments of 2002, and the Health Care Safety Net Act of 2008, Public Law 111-148, the Affordable Care Act of 2010, Title V, Section 5601 and Title X, Section 10503, and Public Law 111-152, Health Care and Education Reconciliation Act of 2010, Section 2303. Health Centers are community-based and patient-directed organizations that serve people with limited access to health care. These include low-income patients, the uninsured, those with limited English proficiency, farm workers, individuals and families experiencing homelessness, and those living in public housing. HRSA-supported health centers advance the preventive and primary medical/healthcare home model of coordinated, comprehensive, and patient-centered care, coordinating a wide range of medical, dental, behavioral, and social services. Services include pharmacy, mental health, substance abuse and oral health treatment, as well as supportive services (education, translation, transportation, and case management) that promote access to health care and ensure patient well-being. Health centers are required to be located in or serve a high-need community (a "medically underserved" area or population) and to make their services available to all patients on a sliding scale, with fees based on ability to pay. By law, community health centers must be governed by community boards with majority patient representation. *For more information on this program, contact CAPT Angel Rodriguez-Espada at (214) 767-3719 or angel.rodriquez-espada@hrsa.hhs.gov; or alternately CDR Jialynn Wang at (301) 443-4294 or jwang@hrsa.gov.*

Emergency Medical Services for Children (EMSC) Program: American Samoa, CNMI, and Guam are funded to improve the quality of health care for children by assuring health professionals are trained and equipped to medically manage, treat, and transport pediatric patients; and assuring the expeditious transport and transfer of children to a definite care facility. Each of the jurisdictions are reassessing the availability of pediatric medical control 24/7, pediatric equipment on patient care units, and inter-facility transfer agreements and guidelines. They are also continuing efforts to assure that pediatric recognition systems for medical emergencies and trauma are in place; pediatric continuing education is required prior to recertification of Basic Life Support (BLS) and Advanced Life Support (ALS) providers; and the EMSC Program establishes permanence. Some project activities related to the objectives mentioned include building National EMS Information System (NEMSIS) compliant data systems, organizing/evaluating pre-hospital and hospital personnel training programs, sponsoring pediatric-focused training to improve EMS personnel pediatric competencies; partnering to support injury prevention programs, managing a Special Needs Alert Program to assure Children with Special Health Care Needs are known to local EMS providers and providers are trained to treat and transport should the need arise; The State of Hawaii co-hosted the Hawaii Emergency Medical Services Information System conference in conjunction with the Pacific Islands EMSC Regional (PEIR) meeting. The conference/meeting enabled networking and information sharing of resources between the Pacific Basin jurisdictions, central to improving the quality and enhancing the process of transferring pediatric patients to specialty health care facilities. *For more information on this program, contact Elizabeth Edgerton at (301) 443-8930 at EEEdgerton@hrsa.gov.*

Geriatric Academic Career Awards (GACA) Interdisciplinary Team Project: The purpose of the GACA program is to support the career development of physicians, nurses, social workers, psychologists, dentists, pharmacists, and allied health professionals in academic geriatrics who provide training in clinical geriatrics including the training of interdisciplinary teams of health professionals. The GACA

program also aims to increase the number of junior faculty in geriatrics at accredited schools of medicine and osteopathic medicine and to promote their careers as academic geriatricians. The project goal is to implement and teach interdisciplinary team care for nursing home patients with eating problems that is sensitive to the cultural values of patients, families and health professionals. The project is to develop a model of care for eating problems in the nursing home and a culturally competent interdisciplinary team training curriculum to provide the interdisciplinary training to health professionals. *For more information on this program, contact Young Song at (301) 443-3353 or ysong@hrsa.gov.*

Geriatric Education Center: The purpose of the Pacific Islands Geriatric Education Center (GEC) is to improve the health of the geriatric population of Hawaii and the Pacific Basin by maximizing resources to build the healthcare work force in the region and to integrate interdisciplinary team care into clinical practice. The Pacific Islands GEC is located at the John A. Burns School of Medicine at the University of Hawaii in Honolulu, HI. In order to deliver this education and training, the GEC has formed a consortium with the Kapiolani Community College located in Honolulu, HI and the Pacific Island Health Officers Association, also located in Honolulu, HI. The Pacific Islands GEC depends upon the region-wide network represented by the University of Hawaii and the Pacific Island Health Officers Association to accomplish activities in five areas: improving the training of health professionals in geriatrics, developing and disseminating curriculum relating to the treatment of the health problems of elderly individuals, supporting the training and retraining of faculty to provide instruction in geriatrics, supporting continuing education of health professionals who provide geriatric care, and providing students with clinical training in geriatrics in nursing homes, chronic and acute disease hospitals, ambulatory care centers, and senior centers. *For more information on this program, contact Cindy Arno at (301) 443-3594 or carno@hrsa.gov.*

Health Care & Other Facilities (HCOF) Program: For construction/renovation of health care facilities and purchase of equipment. Grant funds awarded through the "Health Care and Other Facilities" (HCOF) program are specifically designated by Congress in the annual Department of Health and Human Services Appropriation. These funds are limited to the entities listed and the purposes identified in the appropriation. The projects must be completed within 5 years and are monitored through completion. There were no HCOF grants awarded in 2011 and 2012. *For more information on this program, contact David Colwander at (301) 443-7858 or dcolwander@hrsa.gov.*

Maternal Infant & Early Childhood Home Visiting Program: Authorized by the Affordable Care Act, the creation of the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program responds to the diverse needs of children and families in communities at risk and provides an unprecedented opportunity for collaboration and partnership at the Federal, State, and community levels to improve health and development outcomes for at-risk children through evidence-based home visiting programs. Through the MIECHV Program, nurses, social workers, or other professionals meet with at-risk families in their homes, evaluate the families' circumstances, and connect families to the kinds of help that can make a real difference in a child's health, development, and ability to learn - such as health care, developmental services for children, early education, parenting skills, child abuse prevention, and nutrition education or assistance.

National Health Service Corps (NHSC): The NHSC assists Health Professional Shortage Areas (HPSAs) in every State, Territory, and Possession of the United States to meet their primary care, oral, and mental and behavioral health services needs. Since 1972, the NHSC has offered recruitment incentives in the form of scholarship and loan repayment support to more than 40,000 health professionals committed to service to the underserved. NHSC is a national program; Pacific Basin jurisdictions are included in all program recruitment, placement, and retention activities. *For more information on this program, contact M.K. Berry, at (301) 443-4154 or mberry@hrsa.gov.*

Pacific AIDS Education & Training Center (PAETC): The AETCs Program is a network of 11 regional centers and 5 national centers (with 130 local sites) that train, support, and build capacity of health care providers to treat persons with HIV/AIDS. The AETCs serve all 50 States, the District of Columbia, the Virgin Islands, Puerto Rico, and the six U.S. Pacific Jurisdictions. PAETC, an affiliate of the University of California, San Francisco, has 15 local sites in California, Arizona, Hawaii and Nevada that provide services in their local regions. The Hawaii AETC (HAETC) provides training and technical assistance in Hawaii and in the six U.S. Pacific Island Jurisdictions (PIJ). The HAETC-trained clinicians, who are based in their home PIJ, provide local training to increase HIV clinical knowledge and skills, including HIV testing, among local providers. HAETC collaborates with the Ayuda Foundation of Guam to support the

local clinical trainers as well as clinical training for Guam. Training activities include: one-hour didactic presentations, skill building workshops, clinical preceptorships for clinicians new to HIV care, quarterly satellite case conferences, and an annual train-the-trainer conference in Honolulu for the 34 PIJ-based trained providers. The program goal is to increase the number of local health care providers who are educated and motivated to provide culturally sensitive and appropriate HIV counseling, diagnosis, treatment, and medical management, and to help prevent high risk behaviors that lead to HIV transmission. *For more information about this program, contact Jaclyn Rubio at (301) 443-8045 or jrubio@hrsa.gov.*

Pacific Island Primary Care Association (PIPCA): Pacific Islands Primary Care Association (PIPCA) works with all six of the Pacific jurisdictions and is based in Honolulu, Hawaii. PIPCA provides training and technical assistance (TA) to consolidated community health centers (CHC) on a Statewide or regional basis. Training and TA encompasses seven core functions: maintaining and strengthening health centers, surveillance, health center growth assistance, workforce development, collaborating/partnering, clinical quality, and leveraging and enhancing revenue. *For more information on this program, contact Jialynn Wang at (301) 443-4294 or jwang@hrsa.gov.*

Poison Control Program (PCP): The purpose of these grants is to support poison centers' efforts to prevent, and provide treatment recommendations, for poisonings; and comply with operational requirements needed to sustain certification and or achieve certification. As the Pacific Basin entities do not have their own individual poison centers, they are serviced by poison centers with which they have contractual relationships. Poison center services are accessed through the toll-free Poison Help number (1-800-222-1222) in American Samoa and Guam and (288-888-222-4516) in the Federated States of Micronesia. *For more information on this program, contact Elisa Gladstone at (301)594-4394 or egladstone@hrsa.gov.*

Regional Collaborative for the Pacific Basin: The Regional Collaborative for the Pacific Basin (RCPB) serves as a regional health policy body for the six Pacific Basin jurisdictions. The Regional Collaborative is intended to serve as a formal mechanism to discuss common health interests, problems and concerns; to promote and enhance a regional approach for cost-effective sharing of resources, information, and human expertise to advance health care improvements in the Pacific Basin; and to provide technical assistance to the Pacific Basin jurisdictions. This project provides support to conduct activities to further the Institute of Medicine strategic goals, such as addressing the needs of health care providers who serve vulnerable populations, strengthening the primary care delivery systems in the jurisdictions, supporting the efforts in the jurisdictions to develop and enhance their telehealth and distance education capacities, convening regional and jurisdictional policy meetings to address the health care needs of the underserved and vulnerable populations in the Pacific Basin.

The Regional Collaborative for the Pacific Basin (RCPB) serves as a regional health policy body for the six Pacific Basin jurisdictions. The RCPB enables the grantee to: 1) establish the first Primary Care Office for the Pacific; 2) respond more effectively to the epidemic of non-communicable diseases in the region, 3) undertake an assessment of USAPI laboratory capacity and coordinate the development and implementation of a coherent regional strategy for lab strengthening; 4) continue to assist PIHOA member states with developing effective health systems of quality assurance by providing sustained assistance; 5) plan and seek resources for the USAPI EpiCenter for disease surveillance; 6) support the development of public health and primary care plans in each jurisdiction; and 7) continue to support the development of health professional education programs based on local planning outcomes.

The RCPB serve as a regional Primary Care Office (PCO) representing the six jurisdictions. The PCO fosters collaboration, and provides technical assistance to: organizations/communities wishing to expand access to primary care for underserved populations; support needs assessment/sharing of data; workforce development for the National Health Service Corps (NHSC) and safety net; and support the jurisdictions' Shortage Designation Applications and updates. The RCPB also develops and advances a dynamic strategic plan that addresses the primary care and public health needs of the jurisdictions; promotes partnerships across different regions, disciplines, funding sources, and sectors; assures a continuous process of community engagement; and provide technical and grant-writing assistance to the Pacific Basin jurisdictions. *For more information on this program, contact Maria Benke at (301) 443-2629 or mchenke@hrsa.gov; or alternately LaKeisha Jones at (301) 443-4371 or ljones@hrsa.gov.*

Rural Health Network Development Planning Grant /“Planning Program”: This program brings together key parts of a rural health care delivery system so they can work together to establish or improve local capacity and coordination of care, particularly those entities that may not have collaborated in the past. The major focus of the Network Planning Grant is to support rural entities in the development of health care networks. The grant program supports one year of planning to develop and assist health care networks in becoming operational. For purposes of the Network Planning grant program, a rural health network is defined as an organizational arrangement among at least three separately owned health care providers that come together to develop strategies for improving health services delivery systems in a community. For example a Critical Access Hospital (CAH), a Community Health Center (CHC) and a social services organization could come together around a shared purpose, such as coordination of care, in a collaborative activity that allows them to assess the health care needs within their community, share clinical or administrative resources or ensure that local patients have access to a full continuum of care locally. This program provides support for initiating collaborative partnerships with the goal of creating strong networks that will help strengthen the health care infrastructure in their community. Networks can include a wide range of community partners including social service agencies, faith-based organizations, mental health agencies, charitable organizations, educational institutions, employers, local government agencies or other entities with an interest in a community’s health care system. *For more information on this program, contact Kathryn Umali at (301) 443-7444 or kumali@hrsa.gov; or alternately Eileen Holloran at (301) 443-7529 or eholloran@hrsa.gov.*

Rural Health Network Planning Grant: The grant funds will be used to develop a network to investigate the adoption of Electronic Medical Records. *For more information on this program, please contact Kathryn Umali at (301) 443-7444 or kumali@hrsa.gov; Eileen Holloran at (301) 443-7529 or eholloran@hrsa.gov.*

Rural Health Information Technology Network Development Program: The purpose of the Rural Health Information Technology Network Development (RHITND) Program is to improve health care and support the adoption of Health Information Technology (HIT) in rural America by providing targeted HIT support to rural health networks. The intent of RHITND is to support the adoption and use of electronic health records (EHR) in coordination with the ongoing HHS activities related to the Health Information Technology for Economic and Clinical Health (HITECH) Act (Public Law 111-5). This legislation provides HHS with the authority to establish programs to improve health care quality, safety, and efficiency through the promotion of health information technology, including EHR. *For more information on this program, please contact Kathryn Umali at (301) 443-7444 or kumali@hrsa.gov; or alternately Marcia Green at (301) 443-3261 or mgreen@hrsa.gov.*

Ryan White Program Part B: The Ryan White HIV/AIDS Treatment Extension Act of 2009 is Federal legislation that addresses the unmet health needs of persons living with HIV disease (PLWH) by funding primary health care and support services that enhance access to and retention in care. First enacted by Congress in 1990, it was amended and reauthorized in 1996, 2000, 2006, and again in 2009. The Ryan White HIV/AIDS Program reaches over 529,000 individuals each year, making it the Federal government’s largest program specifically for people living with HIV disease. The Ryan White HIV/AIDS Program consists of four major funded programs, referred to as Parts (formerly referred to as Titles). Currently, the Ryan White program provides Part B funding to all six of the territories. As of FY2006, all Pacific Island Jurisdictions (PIJ) are providing anti-retroviral treatment to clients and treatment of opportunistic infections. Guam has been a Title II (Part B) Grantee since 1991, and is considered a minimum award state. The other PIJ received their first minimum base award in 2001. With the 2006 reauthorization, all PIJ that report AIDS cases receive ADAP, and are eligible to apply for any Part B Supplemental awards.

Special Projects of Regional and National Significance (SPRANS): The purpose of the Comprehensive Hemophilia Diagnostic and Treatment Centers Program is the provision of outpatient comprehensive care for people with hemophilia and their families through an integrated regional network of centers in the diagnosis and treatment of hemophilia and related bleeding disorders. An option for people with clotting disorders and their families may also be provided. This program funds via a regional network to the Guam Comprehensive Hemophilia Care Program. *For more information on this program, contact Kathryn McLaughlin at (301) 443-1080 or kmclaughlin@hrsa.gov.*

State Systems Development Initiative: The State Systems Development Initiative (SSDI) was launched in 1993 to facilitate the development of State level infrastructure which would, in turn, support the development of systems of care at the community level. The SSDI Program is designed to complement the Title V Maternal and Child Health Block Grant Program and to combine the efforts of State Maternal and Child Health (MCH) and Children with Special Health Care Needs (CSHCN) Agencies. SSDI projects must concentrate on the Title V Block Grant ongoing needs assessment, performance/outcome measures, and Health Status Indicators. These projects focus grant resources on the Title V Block Grant Health System Capacity Indicator #9(A) regarding Data Capacity. States will be expected to focus SSDI resources on establishing or improving the data linkages between birth records and: 1) Infant death certificates; 2) Medicaid eligibility or paid claims files; 3) WIC eligibility files; and 4) Newborn screening files. States should give first priority to the four data linkages and then focus on establishing or improving access to: 1) Hospital discharge surveys; 2) A birth defects surveillance system; 3) Survey of recent mothers at least every two years (like PRAMS); and 4) Survey of adolescent health and behaviors at least every two years (like YRBS). While States are expected to direct SSDI resources to addressing the Health System Capacity Indicator #9(A) with first priority on data linkages, they may continue to address ongoing needs assessment and improve the data for the performance/outcome measures. Any activity regarding needs assessment or performance/outcome measures should focus on deficiencies and specifics for improvement since SSDI project accountability will focus on Health System Capacity Indicator #9(A). *For more information on this program, contact Scott Snyder at (301) 443-0345 or ssnyder@hrsa.gov.*

Title V Maternal & Child Health (MCH) Services Block Grant Program: The Title V Maternal and Child Health Services Block Grant program has operated as a Federal-State partnership for over 75 years. Title V provides a broad mandate for the provision of quality health care for all mothers and children in the nation, including children with special health care needs. The purpose of this program is to provide and to assure mothers and children (in particular those with low income or with limited availability of health services) access to quality maternal and child health services; to reduce infant mortality and the incidence of preventable diseases and handicapping conditions among children; to reduce the need for inpatient and long-term care services; to increase the number of children (especially preschool children) appropriately immunized against disease and the number of low income children receiving health assessments and follow-up diagnostic and treatment services; to promote the health of mothers and infants by providing prenatal, delivery, and postpartum care for low income, at-risk pregnant women; to promote the health of children by providing preventive and primary care services for low income children; to provide rehabilitation services for blind and disabled individuals under the age of 16 receiving benefits under title XVI, to the extent medical assistance for such services is not provided under title XIX; and to provide and promote family-centered, community-based systems of services for such children and their families. *For more information on this program, contact Vanessa Lee at (301) 443-9992 or vlee1@hrsa.gov.*

Traumatic Brain Injury Program (TBI): The TBI program seeks to improve services for individuals with TBI. The purpose of the TBI program is to improve access, availability appropriateness and acceptability of health and other services for individuals with traumatic brain injury. Federal "TBI Program" is currently an umbrella for the two components – State Implementation Partnership Grants and Protection & Advocacy Grants. The State Implementation Partnership Grant Program funds the development and implementation of statewide systems that ensures access to comprehensive and coordinated TBI services in States and territories. The Protection and Advocacy Grant Program funds Governor-designated State Protection and Advocacy organizations in 57 States, territories, and Native American. The Consortium provides information and referral services, training in self-advocacy, advocacy, and litigation services to individuals with TBI and their families. All three locations currently funded in this region are focused on providing self-advocacy skills to individuals with Traumatic Brain Injury and their families, as well as information and referral and litigation support services. *For more information on this program, contact LCDR Donelle McKenna at (301) 443-9280 or dmckenna@hrsa.gov.*

Universal Newborn Hearing Screening Program (UNHS): Funding is for the development and implementation of jurisdiction-wide universal newborn hearing screening and intervention programs: screening before one month old, diagnosis before 3 months old, and enrollment in a program of early intervention before six months old. *For more information on this program, contact Irene Forsman at (301) 443-9023 or iforsman@hrsa.gov.*

Regional Genetics Services Collaborative: The Western States Regional Genetics Services Collaborative (WSGSC) is one of seven Regional Genetics and Newborn Screening Service Collaborative across the nation. The Collaborative develops and coordinates multi-state and territory activities to improve coordination, access, follow-up and quality assurance for newborn screening and genetic services. Participating states and territory in the WSGSC are: Alaska, California, Guam, Hawai'i, Idaho, Oregon, and Washington. Collaborative stakeholders include public health genetics and newborn screening leaders, primary care providers, family advocates, and genetics specialists. The Collaborative continues to recognize gaps in genetic and newborn screening services in Guam and provides technical assistance and approximately \$30,000 per year to assist Guam to enhance services. Genetic specialists from in Hawaii are funded by the Collaborative to provide genetics and metabolic services via in-person outreach clinic visits and telephone consults to Guam. This includes improved care coordination by community public health nurses and social workers for families with children with genetic disorders. The Collaborative continues to provide assistance to Guam in developing a territory-wide short term follow-up program for infants identified through newborn screening for confirmatory testing. Guam now reviews problematic newborn screening results for follow-up with other newborn screening labs, follow-up staff, and clinicians in the Western States region. Issues of laboratory and hospital payment and insurance coverage of newborn screening and testing also continue to be addressed by the Collaborative. Moreover, the Collaborative worked with Guam to develop a territorial genetics plan that includes a needs assessment. The plan was distributed in Guam and is posted on the Western States RC website. For more information on this program, contact Jill Shuger at (301) 443-1080 or jshuger@hrsa.gov; or alternately Sylvia Au at (808) 733-9063 or sylvia@hawaiigenetics.org.

HRSA Jurisdiction-Specific Funded Programs						
Program	U.S. Flag Territories			Freely Associated Sates		
	AS	CNMI	GUAM	FSM	RMI	ROP
Area Health Education Center Program University of Guam School of Nursing	\$0 but Eligible	\$0 but Eligible	\$300,199	\$328,363	\$297,487	\$0 but Eligible
Area Health Education Center (AHEC) Program, University of Hawaii	\$60,000	\$75,100	\$0 but Eligible	Yap \$75,100	\$0 but Eligible	\$75,100
Community Integrated Services Systems (CISS); State Early Childhood Comprehensive System	\$0 but Eligible	\$105,000	\$105,000	\$0 but Eligible	\$0 but Eligible	\$105,000
Community Health Center	\$1,471,936	\$0 but Eligible	\$1,283,663	Pohnpei \$269,371 Yap \$755,740	\$676,190	\$748,980
Emergency Medical Services for Children (EMSC)	\$130,000	\$130,000	\$130,000	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
Health Care & Other Facilities (HCOF)	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
Maternal, Infant, & Early Childhood, Home Visiting (MIECHV)	\$1,000,000	\$1,000,000	\$1,000,000	Not Eligible	Not Eligible	Not Eligible
National Health Service Corps (NHSC)	\$215,736	\$412,793	\$25,000	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
HRSA Jurisdiction-Specific Funded Programs						
	U.S. Flag Territories			Freely Associated Sates		

Program	AS	CNMI	GUAM	FSM	RMI	ROP
Poison Control Program (PCP)	\$15,000	\$0 but Eligible	\$30,000	\$12,466	\$0 but Eligible	\$0 but Eligible
Rural Health Network Development Planning Grant / ("Planning Program")	\$85,000	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
Rural Health Information Technology Network Development	\$0 but Eligible	300,000	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
Regional Genetics Services Collaborative	\$0 but Eligible	\$0 but Eligible	\$30,000	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
Ryan White Part B	\$ 46,947	\$ 52,179	\$ 286,530	\$ 52,849	\$ 25,479	\$ 49,852
Special Projects of Regional & National Significance (SPRANS): Hemophilia Treatment	\$0 but Eligible	\$0 but Eligible	\$20,000	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
State System Development Initiative (SSDI)	\$97,260	\$93,713	\$0 but Eligible	\$97,260	\$0 but Eligible	\$97,260
Title V Maternal & Child Health (MCH) Services Block Grant	\$492,112	\$464,773	\$760,041	\$519,453	\$229,651	\$147,634
Traumatic Brain Injury (TBI)	\$20,000	\$20,000	\$20,000	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
Universal Newborn Hearing Screening (UNHS)	\$ 261,000	\$149,948	\$250,000	\$300,000	\$150,000	\$150,000
					Total Jurisdiction Specific Funding	\$16,102,165

HRSA Regionally Funded Programs	
California-Pacific Public Health Training Center (CALPACT)	\$30,000
Geriatric Academic Career Awards (GACA)	\$74,991
Geriatric Education Centers (GEC)	\$427,920
Pacific AIDS Education Training Center/ Hawaii (PAETC)	\$145,000
Pacific Island Primary Care Associations (PIPCAs)	\$431,594
Regional Collaborative for the Pacific Basin (RCPB)	\$428,695
TOTAL REGIONAL FUNDING	\$1,538,200

**TOTAL HHS/HRSA FUNDS AWARDED IN FY2011: \$17,640,365
(Amount Includes Jurisdiction-Specific & Regional Funding)**

Office of the Assistant Secretary for Health

OFFICE OF MINORITY HEALTH

MISSION: The Office of Minority Health is dedicated to improving the health of racial and ethnic minority populations through the development of health policies and programs that will help eliminate health disparities.

State Partnership Program to Improve Minority Health: The purpose of the State Partnership Program to Improve Minority Health is to facilitate the improvement of minority health and elimination of health disparities through the development of partnerships with state offices of minority health. For more information on this program, contact Christina Perez at (415) 437-8124 or christina.perez@hhs.gov.

Pacific Areas of Greatest Need Capacity Building Program: This program focuses on addressing HIV/AIDS, STDs, and TB by increasing the capacity of community based organizations in the Outer Pacific to be responsive. Funding includes Capacity Building Awards, Health Information Campaign Awards, and a Pacific Resource and Training Center Award. For more information this program, contact Henry Ocampo at (510) 797-7682 or hocampo@minorityhealth.hhs.gov.

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
State Partnership Program	Not Eligible	Not Eligible	\$130,000	Not Eligible	Not Eligible	Not Eligible
Capacity Building	\$0 but Eligible	\$20,000	\$40,000	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
Health Information Campaign	\$0 but Eligible	\$0 but Eligible	\$40,000	\$20,000	\$0 but Eligible	\$0 but Eligible
Pacific Resource & Training Center	\$0 but Eligible	\$0 but Eligible	\$90,000	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
TOTAL	\$0	\$20,000	\$300,000	\$20,000	\$0	\$0

TOTAL HHS/OMH FUNDS AWARDED IN FY2011: \$340,000

OFFICE OF POPULATION AFFAIRS

MISSION: The Office of Population Affairs (OPA) serves as the focal point to advise the Secretary and the Assistant Secretary for Health on a wide range of reproductive health topics, including adolescent pregnancy, family planning, and sterilization, as well as other population issues. The mission of the Office of Family Planning is to assist individuals in determining the number and spacing of their children through the provision of education, counseling, and medical services.

Family Planning Grants: Funds are available to provide clinical services, technical assistance, and training. OPA priorities include an emphasis on providing a broad range of acceptable and effective family planning methods including natural family planning methods, services for adolescents, males, STD and cancer screening and prevention, HIV prevention counseling and testing. The broad range of services does not include abortion as a method of family planning. For more information on this program, contact Rebecca Meece at (415) 437-8403 or Rebecca.Meece@hhs.gov.

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
Family Planning Grants	\$200,000	\$191,182	\$350,000	\$345,000	\$134,000	\$145,000
TOTAL	\$200,000	\$191,182	\$350,000	\$345,000	\$134,000	\$145,000

TOTAL HHS/OPA FUNDS AWARDED IN FY2011: \$1,365,182

OFFICE ON WOMEN'S HEALTH

MISSION: *The Office on Women's Health's (OWH) mission is to provide leadership to promote health equity for women and girls through sex/gender-specific approaches. OWH achieves its mission and vision by developing innovative programs, educating health professionals, and motivating behavior change in consumers through the dissemination of health information.*

HIV Prevention for Female Adolescents/Youth at Greater Risk for Juvenile Delinquency: This initiative is a gender-specific prevention education project focused on HIV/AIDS/STDs and juvenile delinquency for at-risk female adolescents/youths aged 9-16. This project specifically focuses on the intersection between sexually risky and juvenile delinquent behavior among female adolescents/youths. This project is evaluation intensive and will focus on building capacity within communities to service the needs of female adolescents/youths that are at-risk for HIV/STDs and juvenile delinquency. This project focuses on identifying and addressing the social and economic threats which contribute to the participation of female adolescents/youths in sexually risky and delinquent behavior. It also focuses on building self-esteem and educating them on how to cope with adverse situations. *For more information on this program, contact Aleisha Langhorne at (202) 401-8325 or aleisha.langhorne@hhs.gov.*

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
HIV Prevention for Female Adolescents / Youth at Greater Risk For Juvenile Delinquency	\$0 but Eligible	\$0 but Eligible	\$130,000	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
TOTAL	\$0	\$0	\$130,000	\$0	\$0	\$0

TOTAL HHS/OWH FUNDS AWARDED IN FY2011: \$130,000

Office of the Assistant Secretary for Preparedness & Response

MISSION: *The U.S. Department of Health and Human Services (HHS) is the United States Government's principal agency for protecting the health of all Americans.*

Hospital Preparedness Program: Improve surge capacity, capability and enhance community and hospital preparedness for public health emergencies. The activities and funding provided through this program are for the purposes of exercising and improving preparedness plans for all hazards including pandemic influenza. *For more information on this program, contact Carol Simmons at (202) 245-0741 or carol.simmons@hhs.gov.*

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
Hospital Preparedness	\$319,393	\$634,641	\$446,256	\$432,518	\$0 but Eligible	\$273,565
TOTAL	\$319,393	\$634,641	\$446,256	\$432,518	\$0	\$273,565

TOTAL HHS/ASPR FUNDS AWARDED IN FY2011: \$2,106,293

Substance Abuse & Mental Health Services Administration

MISSION: *The Substance Abuse and Mental Health Services Administration's (SAMHSA) mission is to reduce the impact of substance abuse and mental illness on America's communities.*

Center for Mental Health Services (CMHS)-Focuses on the prevention and treatment of mental disorders

CMHS Cooperative Agreements for Comprehensive Community Mental Health Services for Children and Their Families Program: The purpose of this program is to support States, political subdivisions within States, the District of Columbia, Territories, Native American Tribes and tribal organizations, in developing integrated home and community-based services and supports for children and youth with serious emotional disturbances and their families by encouraging the development and expansion of effective and enduring systems of care. Guam received this funding plus an additional amount in FY2011 for a system of care expansion grant for these services. *For more information on this program, contact Gary Blau at gary.blau@samhsa.hhs.gov.*

CMHS Community Mental Health Services Block Grant (MHBG): This program provides funds to States and territories to support the provision of comprehensive community-based mental health services to adults with serious mental illness and children with serious emotional disturbances. It has helped States develop and expand community-based systems of care. *For more information on this program, contact John Morrow at john.morrow@samhsa.hhs.gov.*

CMHS Disaster Relief: In FY 2011, American Samoa received Disaster Relief funds administered by CMHS. *For more information on this program, contact Anne Mathews-Younes at anne.mathews-younes@samhsa.hhs.gov.*

CMHS Projects for Assistance in Transition from Homelessness (PATH): This program provides community support services to individuals with serious mental illnesses that are homeless or at risk of being homeless. Some of these services include outreach, screening and diagnostic treatment, community mental health services, alcohol and drug treatment, supervisory services in a residential setting, and referrals to other needed services. American Samoa, Guam and CNMI receive this formula grant funding. *For more information on this program, contact Fran Randolph at fran.randolph@samhsa.hhs.gov.*

CMHS Protection and Advocacy for Individuals with Mental Illness (PAIMI): The purpose of this program is to protect and advocate for the rights of individuals with mental illnesses in public and private facilities. It also investigates and monitors incidents of abuse and neglect, while pursuing administrative, legal, or other remedies to redress complaints. *For more information on this program, contact John Morrow at john.morrow@samhsa.hhs.gov.*

CMHS State Data Infrastructure Grant Program (DIG): The program's purpose is to implement and strengthen the annual collection of the Uniform Reporting System (URS) measures, which include the National Outcome Measures (NOMs), and fund State Mental Health authorities to improve State and local data infrastructure for reporting and planning. Guam, CNMI and Palau received funding in FY2011 under this discretionary program. *For more information on this program, contact John Morrow at john.morrow@samhsa.hhs.gov.*

Center for Substance Abuse Prevention (CSAP) - seeks to prevent and reduce the abuse of illegal drugs, alcohol and tobacco.

CSAP Drug Free Communities (DFC): DFC is a collaborative initiative, sponsored by ONDCP, in partnership with SAMHSA, which works to establish and strengthen collaboration among communities, public and private non-profit agencies, and Federal, State, local, and tribal governments to support the efforts of community coalitions working to prevent and reduce substance use among youth. For the purposes of this RFA, "youth" is defined as individuals 18 years of age and younger. In FY 2011,

American Samoa, Yap State in FSM, and Palau received funding through this program. *For more information on this program, contact O'Neal Walker at oneal.walker@samhsa.hhs.gov.*

CSAP Strategic Prevention Framework State Incentive Grants (SPF SIG): The SPF SIG program provides funding to the Jurisdictions to implement SAMHSA's Strategic Prevention Framework (SPF). Its purpose is to prevent the onset and reduce the progression of substance abuse, reduce substance abuse-related programs in communities, and build prevention capacity and infrastructure at the Jurisdiction and community levels. In FY2011, FSM, the Marshall Islands, and CNMI received funding for the SPF SIG, and American Samoa, Guam, the Marshall Islands, CNMI, and Palau received SPF Enhancement grants. *For more information on this program, contact Richard Moore at (240) 276-2572 or Richard.moore@samhsa.hhs.gov.*

CSAP State Epidemiological Outcome Workgroups (SEOW): The purpose of SEOW is to support States, Territories, Jurisdictions, and Tribes that have received sub-recipient awards to collect and analyze epidemiological and other data to inform state-wide substance abuse prevention planning and implementation. The Work Groups' analyses are aligned with implementing SAMHSA's Strategic Initiative #1 using the Strategic Prevention Framework (SPF), which is SAMHSA's guiding framework for prevention. *For more information on this program, contact Virginia McKay at (240) 276-2400 or Virginia.mckay-smith@samhsa.hhs.gov.*

SAMHSA Center for Substance Abuse Treatment (CSAT) - supports the provision of effective substance abuse treatment and recovery services.

CSAT Offender Re-Entry Program: The purpose of this program is to help juvenile offenders return to their families and communities. Guam received funding under this program to develop a Guam Youth Offender Reentry Program. *For more information on this program, contact Andrea Kopstein at andrea.kopstein@samhsa.hhs.gov.*

CSAT Screening, Brief Intervention and Referral to Treatment Program (SBIRT): The purpose of this program is to implement screening, brief intervention and referral to treatment services for adults in primary care and community health settings, for substance misuse and substance use disorders (SUD). American Samoa received funding in FY2011 to establish SBIRT in 13 primary care, public and community- based health settings throughout American Samoa. *For more information on this program, please contact Reed Forman at reed.forman@samhsa.hhs.gov.*

SAMHSA CSAP and CSAT

Substance Abuse Technical Assistance Activities: Both CSAT and CSAP provide technical assistance to the Pacific Jurisdictions. CSAT provides TA and training in substance abuse treatment evidence-based practices and licensure/certification to the Jurisdictions through its Northwest Addiction Technology Transfer Center (NWATTC). CSAP provides technical assistance to the Jurisdictions on issues including evidence-based prevention practices, Strategic Prevention Framework support and prevention workforce development through its Center for the Application of Prevention Technology (CAPT). *For more information on this program, please contact Robert Atanda, at Robert.Atanda@samhsa.hhs.gov or alternately Andrea Kopstein at andrea.kopstein@samhsa.hhs.gov.*

Substance Abuse Prevention & Treatment Block Grant (SAPTBG): The program provides approximately \$1.79 billion to States (\$1.70B) and Jurisdictions (\$2.35M) in FY 2012 to support community- and faith-based organizations which provide prevention, early intervention, treatment, and recovery support services to individuals, families, and communities impacted by substance abuse and substance use disorders. It is an integral component of demand reduction in the National Drug Control Strategy (<http://www.whitehouse.gov/ondcp/national-drug-control-strategy>). The program is authorized by Title XIX, Part B, Subpart II and Subpart III of the Public Health Service Act (42 U.S.C. § 300x-21-66). *For more information on this program, contact Robert Atanda at Robert.Atanda@samhsa.hhs.gov. You may also contact Richard Moore at Richard.moore@samhsa.hhs.gov.*

SAMHSA-wide

SAMHSA's Master Trainer Development Program (MTDP): SAMHSA's Centers are supporting SAMHSA's Master Trainer Development Program (MTDP), which will be launched in March 2012 to provide ongoing behavioral health training and mentoring to eighteen MTDP training candidates nominated by the leadership of the US-affiliated Pacific Jurisdictions. *For more information on this program, please contact Anne Herron at anne.herron@samhsa.hhs.gov.*

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
Children's Mental Health Initiative(CMHI)	\$0 but Eligible	\$0 but Eligible	\$2,150,000	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
CMHS MHBG	\$85,505	\$62,916	\$235,515	\$139,531	\$85,759	\$50,000
CMHS Disaster Relief	\$65,489	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
CMHS PATH	\$50,000	\$50,000	\$50,000	Not Eligible	Not Eligible	Not Eligible
CMHS PAIMI	\$230,300	\$230,300	\$230,300	Not Eligible	Not Eligible	Not Eligible
CMHS State DIG	\$60,000	\$60,000	\$60,000	\$0 but Eligible	\$0 but Eligible	\$60,000
CSAP DFC	\$125,000	\$0 but Eligible	\$0 but Eligible	\$125,000	Eligible	\$125,000
CSAP SPF SIG	\$150,064	\$1,449,342	\$600,000	\$1,481,606	\$1,389,103	\$179,597
CSAP SEOW	\$0 but Eligible	\$0 but Eligible	\$50,000	\$0 but Eligible	\$0 but Eligible	\$50,000
CSAT Ex-Offender Re-Entry	\$0 but Eligible	\$0 but Eligible	\$396,933	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
CSAT SBIRT	\$1,640,000	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
SAPT BG Treatment	\$294,902	\$214,486	\$802,886	\$475,673	\$292,358	\$92,685
SAPT BG Prevention	\$73,725	\$53,622	\$200,722	\$118,918	\$73,089	\$23,171
TOTAL	\$2,714,985	\$2,120,666	\$4,776,356	\$2,340,728	\$1,840,309	\$580,453

TOTAL HHS/SAMHSA FUNDS AWARDED IN FY2011: \$14,373,497

TOTAL HHS FUNDS AWARDED IN FY2011

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
ACF	\$7,570,588	\$5,839,503	\$19,180,393	\$297,492	\$0 but Eligible	\$1,442,333
AOA	\$1,326,003	\$812,928	\$3,429,091	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
CDC	\$2,565,448	\$3,241,735	\$5,002,566	\$3,735,712	\$2,836,876	\$2,899,757
CMS	\$16,744,827	\$15,611,046	\$23,874,423	Not Eligible	Not Eligible	Not Eligible
HRSA	\$3,894,991	\$2,803,506	\$4,540,632	\$2,357,753	\$1,676,294	\$1,373,826
HRSA – All Pacific	\$1,538,200					
OAS for Health	\$200,000	\$211,182	\$780,000	\$365,000	\$134,000	\$145,000
OAS for Preparedness	\$319,393	\$634,641	\$446,256	\$432,518	\$0 but Eligible	\$273,565
SAMHSA	\$2,714,985	\$2,120,666	\$4,776,356	\$2,340,728	\$1,840,309	\$580,453
TOTAL	\$35,336,235	\$31,275,207	\$62,029,717	\$9,529,203	\$6,487,479	\$6,714,934

TOTAL HHS FUNDS AWARDED IN FY2011: \$152,910,975

DEPARTMENT OF HOUSING & URBAN DEVELOPMENT

MISSION: HUD's mission is to create strong, sustainable, inclusive communities and quality affordable homes for all. HUD is working to strengthen the housing market to bolster the economy and protect consumers; meet the need for quality affordable rental homes; utilize housing as a platform for improving quality of life; build inclusive and sustainable communities free from discrimination; and transform the way HUD does business.

Community Development Block Grants (CDBG): CDBG provides eligible metropolitan cities and urban counties (called "entitlement communities") with annual direct grants that they can use to revitalize neighborhoods, expand affordable housing and economic opportunities, and/or improve community facilities and services, principally to benefit low- and moderate-income persons. *For more information on this program, contact Mark Chandler at (808) 522-8180, extension 264 or mark.a.chandler@hud.gov.*

Home Investment Partnership Program (HOME): HOME provides formula grants to states and localities that communities use, often in partnership with local nonprofit groups, to fund a wide range of activities that build, buy, and/or rehabilitate affordable housing for rent or homeownership or provide direct rental assistance to low-income people. *For more information on this program, contact Mark Chandler at (808) 522-8180, extension 264 or mark.a.chandler@hud.gov.*

Homeless Assistance: To provide applicants, potential applicants, grantees, and project sponsors for McKinney Act funded Emergency Shelter Grants, Supportive Housing Program, Section 8 Moderate Rehabilitation Single Room Occupancy and Shelter Plus Care projects with technical assistance to promote the development of housing and supportive services as part of the Continuum of Care approach, including innovative approaches to assist homeless persons in the transition from homelessness, and to enable them to live as independently as possible. *For more information, contact Mark Chandler at (808) 522-8180, extension 264 or mark.a.chandler@hud.gov.*

Emergency Shelter Grants (ESG): ESG provides grants for the rehabilitation or conversion of buildings into homeless shelters. It also funds certain related social services, operating expenses, homeless prevention activities, and administrative costs. *For more information on this program, contact Mark Chandler at (808) 522-8180, extension 264 or mark.a.chandler@hud.gov.*

Family Self-Sufficiency: Provides funds to Public Housing Agencies to hire staff and to provide services to assist low-income families living in public housing or receiving Section 8 vouchers to become self-sufficient. *For more information on this program, contact Michael Flores at (808) 522-8175, extension 226 or michael.s.flores@hud.gov.*

Public Housing Capital Funds: Provides Public Housing Agencies administering the low-income public housing program with funds to help cover the annual cost of upgrading their public housing developments. *For more information on this program, contact Michael Flores at (808) 522-8175, extension 226 or michael.s.flores@hud.gov.*

Public Housing Operating Funds: By formula, provides Public Housing Agencies administering the low-income public housing program with operating subsidies to cover the difference between an allowable expenses level and total operating income. *For more information on this program, contact Michael Flores at (808) 522-8175, extension 226 or michael.s.flores@hud.gov.*

Resident Opportunities & Self-Sufficiency (ROSS): Help public housing residents become economically self-sufficient by funding Public Housing Agencies, resident management corporations, resident councils, resident organizations, Intermediary Resident Organizations, City-Wide Resident organizations, and nonprofit entities supported by residents to provide supportive services and resident empowerment activities to residents. *For more information on this program, contact Michael Flores at (808) 522-8175, extension 226 or michael.s.flores@hud.gov.*

Section 8: Provide Housing Assistance Subsidies to Low Income Eligible Population to rent housing units in the private marketplace. *For more information on this program, contact Michael Flores at (808) 522-8175, extension 226 or michael.s.flores@hud.gov.*

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
CDBG	\$1,133,433	\$824,363	\$3,085,838	Not Eligible	Not Eligible	Not Eligible
HOME	\$299,897	\$570,054	\$1,237,796	Not Eligible	Not Eligible	Not Eligible
Homeless Assistance	\$0 but Eligible	\$0 but Eligible	\$879,384	Not Eligible	Not Eligible	Not Eligible
ESG	\$51,807	\$40,642	\$140,854	Not Eligible	Not Eligible	Not Eligible
Section 8	\$0 but Eligible	\$3,652,434	\$32,564,054	Not Eligible	Not Eligible	Not Eligible
Family Self Sufficiency	\$0 but Eligible	\$0 but Eligible	\$56,718	Not Eligible	Not Eligible	Not Eligible
Project Section 8	Not Eligible	\$1,496,972	\$1,135,366	Not Eligible	Not Eligible	Not Eligible
Public Housing Operating Funds	Not Eligible	Not Eligible	\$4,150,395	Not Eligible	Not Eligible	Not Eligible
Public Housing Capital Funds	Not Eligible	Not Eligible	\$1,317,717	Not Eligible	Not Eligible	Not Eligible
Resident Opportunities for Self-Sufficiency	Not Eligible	Not Eligible	\$156,456	Not Eligible	Not Eligible	Not Eligible
TOTAL	\$1,485,137	\$ 6,584,465	\$ 44,724,581	\$0	\$0	\$0

TOTAL HUD FUNDS AWARDED IN FY2011: \$52,794,183

DEPARTMENT OF THE INTERIOR

MISSION: *The U.S. Department of the Interior protects America's natural resources and heritage, honors our cultures and tribal communities, and supplies the energy to power our future.*

Office of Insular Affairs

Mission: *The Secretary of the Interior has administrative responsibility for coordinating federal policy in the territories of American Samoa, Guam, the U.S. Virgin Islands, and the Commonwealth of the Northern Mariana Islands, and the responsibility to administer and oversee U.S. federal assistance provided to the Freely Associated States of the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau under the Compacts of Free Association. The Office of Insular Affairs executes these responsibilities on behalf of the Secretary.*

Capital Improvement Grants: The U.S. territories for which OIA has responsibilities may request capital improvement grants through the annual budget process. OIA budget justifications will spell out the intended recipients and the projects to be funded. Once the appropriation bill is enacted, the purposes of these funds can be changed only through the reprogramming process. A unique feature of these grants is that they may be used to meet the local matching requirement for capital improvement grants of other Federal agencies, subject to OIA's approval. *For more information on this program in American Samoa, contact Mark Brown at (202) 208-5992. For more information on this program in CNMI & Guam, contact Faride Komisar at (202) 219-1335.*

Brown Tree Snake Control: This fund is used to control ecological and economic damage caused by the brown tree snake on Guam and prevent dispersal of the snake to other areas. *For more information on this program, contact Faride Komisar at (202) 219-1335.*

Compacts of Free Association with the FSM and RMI: In 2003, the U.S. signed with the FSM and with the RMI a second Compact or what is called the Compact of Free Association Amendments Act of 2003 (Public Law 108-188) that is in effect for the next 20 years until 2023. Although the basic relationships as enshrined in the first Compact were unchanged, there were significant changes in the financial provisions of the amended Compact. The Amended Compact included creation of a Trust Fund to serve as an ongoing source of revenue after Fiscal Year 2023 and to contribute to the long-term budgetary self-reliance of the FSM and RMI. It also provided for sector specific grant assistance in six primary sectors: Education; Health Care; Public Infrastructure; Environment; Public Sector Capacity Building; Environment; and Private Sector Development. The Department of the Interior continues to be responsible for oversight and coordination of U.S. funding assistance under the Amended Compact of Free Association. *For more information on this program, contact Thomas Bussanich at (202) 208-6971 or tom_bussanich@ios.doi.gov.*

Compact of Free Association with Palau: Article I of Title Two of the Compact of Free Association describes the financial assistance committed to the Republic of Palau by the United States. Backed by the full faith and credit of the United States, the financial assistance established in Article I is the most significant part of the economic relationship with Palau. Compact funding was appropriated on a permanent and indefinite basis in 1986 (Public Law 99-349). However, because of delays in the ratification process by the Republic of Palau, its Compact was not implemented until 1995, eight years after implementation for the other two freely associated states. The Department of the Interior is responsible for oversight and coordination of U.S. funding assistance under the Compact of Free Association. The Palau Compact was set to expire on September 30, 2009 but was extended by Congress for one year by P.L. 111-88. *For more information on this program, contact Thomas Bussanich at (202) 208-6971 or tom_bussanich@ios.doi.gov.*

Coral Reef Initiative: This fund is used to promote sound management and conservation of coral reefs in the insular areas. *For more information on this program, contact Karen Koltes at (202) 208-5345.*

General Technical Assistance: This fund is not designated for any specific purpose and grant projects are determined through an application process. These grants are for short-term, non-capital projects, and

are not intended to supplant local funding of regular and customary operating expenses of an insular government. *For more information on this program, contact Charlene Leizear at (202) 208-3239.*

Insular Management Control Initiative: This fund is used to promote and develop insular area institutions and capabilities that improve financial management and accountability. Projects are identified through the Financial Management Improvement Program. *For more information on this program, contact Charlene Leizear at (202) 208-3239.*

Maintenance Assistance: This fund is used in promoting and developing insular institutions and capabilities that improve the operation and maintenance of island infrastructure. This is the only OIA program that has specific legislative authority to require a financial contribution from the insular government. *For more information on this program, contact Cheryl Jodoin at (202) 208-7718.*

Water and Wastewater Projects: Are attachments to the Discretionary Technical Assistance Grants and are used to improve water and wastewater systems in the U.S. territories. *For more information on this program in American Samoa, contact Mark Brown at (202) 208-5992. For more information on this program in CNMI & Guam, contact Faride Komisar at (202) 219-1335.*

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
Am. Samoa Ops	\$22,707,000	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
Brown Treesnake	\$0 but Eligible	\$306,000	\$285,000	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
CIP Grants	\$10,500,000	\$10,000,000	\$5,026,000	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
Compact-FSM	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$107,056,000	\$0 but Eligible	\$0 but Eligible
Compact-Palau	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$13,147,000
Compact-RMI	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$65,970,000	\$0 but Eligible
Compact Impact	\$14,000	\$1,930,000	\$16,827,000	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
Coral Reef Initiative	\$87,000	\$83,000	\$83,000	\$305,000	\$50,000	\$0 but Eligible
Enewetak Support	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$499,000	\$0 but Eligible
Guam Infrastructure	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
Maintenance Assistance	\$283,000	\$159,000	\$60,000	\$505,000	\$381,000	\$0 but Eligible
Payments to US Territories	\$0 but Eligible	\$0 but Eligible	\$53,126,000	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
Technical Assistance	\$1,566,000	\$3,519,000	\$2,863,000	\$357,000	\$1,902,000	\$669,000
Water & Waste Water	\$0 but Eligible	\$266,000	\$525,000	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
TOTAL	\$35,157,000	\$16,623,000	\$78,795,000	\$108,223,000	\$68,802,000	\$13,816,000

TOTAL DOI/OIA FUNDS AWARDED FY2011: \$33,591,000

DEPARTMENT OF LABOR

MISSION: *The mission of the Department of Labor is to foster, promote, and develop the welfare of the wage earners, job seekers, and retirees of the United States; improve working conditions; advance opportunities for profitable employment; and assure work-related benefits and rights.*

Employment & Training Administration

MISSION: *The Employment and Training Administration (ETA) administers federal government job training and worker dislocation programs, federal grants to states for public employment service programs, and unemployment insurance benefits. These services are primarily provided through state and local workforce development systems.*

Disability Program Navigator (DPN) Grants: The Disability Program Navigator Initiative was initially funded in 2003 to One Stop Career Center systems to serve customers with disabilities by providing accessible, seamless, and integrated services. There are now over 400 Navigators in 42 states, DC, Puerto Rico and Guam. In addition to creating systemic change, the Navigators act as facilitators to bring together multiple partners in the One-Stop Career Centers to develop an integrated resource team approach with the purpose of blending and braiding resources around an individual customer's employment needs. *For more information on this program, please Mr. John Jacobs at (415) 625-7940 or Jacobs.john@dol.gov.*

Disability Program Navigator Grants (DPN): The DPN initiative was launched and funded in 2002 jointly by the Department of Labor, Employment and Training Administrator (DOL/ETA) and the Social Security Administration (SSA). The program's primary objective is to increase employment and self-sufficiency for individuals with disabilities by enhancing the linkage between employers and state workforce investment boards (SWIBs) through One-Stop Career Centers which are administered by ETA. *For more information on this program, contact Mr. John Jacobs at (415) 625-7940 or Jacobs.john@dol.gov.*

Senior Community Services Employment Program (SCSEP): The Senior Community Service Employment Program is a community service and work based training program for older workers. It was authorized by Congress in Title V of the Older Americans Act of 1965 to provide subsidized, part-time, community service work based training for low-income persons age 55 or older who have poor employment prospects. Through this program, older workers have access to the SCSEP services as well as other employment assistance available through the [One-Stop Career Centers](#) of the workforce investment system. The goal of this program is to provide community services and part time work based training to place participants into unsubsidized jobs. It is intended that these community service experiences serve as a bridge to other employment positions that are not supported with Federal funds. *For more information on this program, contact Mr. John Jacobs at (415) 625-794 or Jacobs.john@dol.gov.*

Wagner Peyser Act (WP): This service is offered through states and local One Stop Career Centers, and provides funding to assist in the coordination and development of a nation-wide system of public labor exchange services, provided as part of the one-stop customer service system, and ensure individuals otherwise eligible to receive unemployment compensation, the provision of reemployment services and other activities in which the individuals are required to participate to receive the compensation. Guam is the only jurisdiction in the outer Pacific that receives Wagner-Peyser funds. *For more information on this program, contact Mr. John Jacobs at (415) 625-7940 or Jacobs.john@dol.gov.*

Workforce Information Grant (WIG): The purpose of the Workforce Information Grant to states and territories through their State Workforce Investment Agencies and Labor Market Information entities is to support immediate economic recovery while also planning for long term economic growth and stability. *For more information on this program, contact Mr. John Jacobs at (415) 625-7940 or Jacobs.john@dol.gov.*

Workforce Investment Act (WIA): On August 7, 1998, President Clinton signed the Workforce Investment Act of 1998 (WIA), comprehensive reform legislation into law that supersedes the Job Training Partnership Act (JTPA) and amends the Wagner-Peyser Act. WIA also contains the Adult Education and Family Literacy Act (Title II) and the Rehabilitation Act Amendments of 1998 (Title IV). WIA creates a new, comprehensive workforce investment system, which is intended to be customer-focused, to help Americans access the tools needed to manage their careers through information and high quality services and to help U.S. companies find skilled workers. The One Stop Career system is the infrastructure that empowers individuals to receive the professional advice, guidance, and support to become gainfully employed. The ultimate goal of the Act is to increase employment, retention, and earnings of participants, and in doing so, improve the quality of the workforce to sustain economic growth, enhance productivity and competitiveness, and reduce welfare dependency. *For more information on this program, contact Mr. John Jacobs at (415) 625-7940 or Jacobs.john@dol.gov.*

Workforce Investment Act, National Emergency Disaster Grants (NEG): Discretionary grants awarded by the Secretary of Labor are to provide employment-related services for dislocated workers as authorized under WIA Section 173 and 20 CFR part 671. The purpose of the NEG grant program is to respond to significant dislocation events that arise as a result of economic globalization, business fluctuations and unexpected events (e.g., tsunami, earthquakes, super typhoons and tornados). Since workers will be eligible for services when an application is submitted, all projects are expected to enroll/register all potential participants within six months of a grant award. *For more information on this program, contact Mr. John Jacobs at (415) 625-7940 or Jacobs.john@dol.gov.*

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
Discretionary (Earmark) Grants	\$0 but Eligible	\$0 but Eligible	\$383,187	Not Eligible	Not Eligible	\$0 but Eligible
Alien Labor Certification (ALC)	Not Eligible	Not Eligible	28,209	Not Eligible	Not Eligible	Not Eligible
National Emergency Grants (NEG)	\$24,857,608	\$0 but Eligible	\$0 but Eligible	Not Eligible	Not Eligible	\$0 but Eligible
Senior Community Services Program	\$1,350,956	\$336,825	\$1,010,475	Not Eligible	Not Eligible	\$0 but Eligible
Wagner Peyser (WIA)	Not Eligible	Not Eligible	\$328,561	Not Eligible	Not Eligible	Not Eligible
Labor Market Information Grants (LMI)	Not Eligible	Not Eligible	\$92,813	Not Eligible	Not Eligible	Not Eligible
Workforce Opportunity Tax Credit (WOTC)	Not Eligible	Not Eligible	\$0 but Eligible	Not Eligible	Not Eligible	Not Eligible
Workforce Investment Act Title 1B (WIA)	\$394,138	\$1,187,187	\$3,208,175	Not Eligible	Not Eligible	\$243,997
TOTAL	\$26,602,702	\$1,524,012	\$5,051,420	\$0	\$0	\$243,997

TOTAL DOL/ETA FUNDS AWARDED FY2011: \$33,421,131

Occupational Safety & Health Administration

MISSION: *The mission of the Occupational Safety and Health Administration is to assure safe and healthful working conditions for working men and women by setting and enforcing standards and by providing training, outreach, education and assistance.*

OSHA 21(d) Consultation Program: Each region within OSHA has free and confidential safety and health consultation programs for all employers. Employers who request this free service are provided with a Safety and/or Health consultation visit, followed up with a formal written report of identified safety and health hazards. Additional Federal grant opportunities for both Guam and CNMI include Susan Harwood Training grants and American Recovery & Reinvestment Act (ARRA) grants. *For more information on this program, contact Christine Hirai at (415) 625-2523 or hirai.christine@dol.gov.*

Region IX Susan Harwood Training Grants: The Susan Harwood Training Grant Program awards grants to nonprofit organizations on a competitive basis. Awards are issued annually based on Congressional appropriation. The focus of the program is to provide training and education for workers and employers on the recognition, avoidance, and prevention of safety and health hazards in their workplaces, and to inform workers of their rights and employers of their responsibilities under the OSH Act. Target audiences include underserved, low-literacy, and workers in high-hazard industries. Since 1978, over 1.8 million workers have been trained through this program. Information on how to locate and apply for a grant; includes the electronic submittal system, hints for writing grant proposals, and the current grant announcement at <http://www.grants.gov>. *For more information on this program, contact Christine Hirai at (415) 625-2523 or hirai.christine@dol.gov or alternately Peter Wilsey at (415) 625-2540 or wilsey.peter@dol.gov.*

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
OSHA 21(D) Consultation	\$0 but Eligible	\$196,000	\$273,000	Not Eligible	Not Eligible	Not Eligible
Susan Harwood Training Grants***	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible	Not Eligible	Not Eligible	Not Eligible
TOTAL	\$0	\$196,000	\$273,000	\$0	\$0	\$0

TOTAL DOL/OSHA FUNDS AWARDED FY2011: \$469,000

DEPARTMENT OF TRANSPORTATION

MISSION: *The mission of the Department of Transportation is to serve the United States by ensuring a fast, safe, efficient, accessible and convenient transportation system that meets our vital national interests and enhances the quality of life of the American people, today and into the future.*

Federal Transit Administration

MISSION: *The mission of the Federal Transit Administration is to enhance citizens' mobility, accessibility, and economic well-being through the development and management of public transport services that are comprehensive, affordable, efficient, reliable, safe, and environmentally sound. We build sustainable partnerships through community planning support, technical assistance, grant provision, and project monitoring. In accordance with federal regulations and policies, we seek to achieve maximum productivity, exemplary professionalism, and exceptionally-responsive customer service.*

Rural Transit Assistance Program (RTAP): The Rural Transit Assistance Program establishes a rural transportation assistance program in non-urbanized areas implemented by grants and contracts for transportation research, technical assistance, training, and related support services in non-urbanized areas. The goals of RTAP are to provide training and technical assistance for rural public transportation operators, improve professionalism and safety of rural public transit services, and promote efficiency and effectiveness of rural transit services and support coordination with human service transportation. For more information on this program, contact Paul Page at (415) 744-2734 or paul.page@dot.gov.

Section 5310: Transportation for Elderly Persons and Persons with Disabilities Program: Section 5310 makes funds available to meet the special transportation needs of elderly persons and persons with disabilities. These funds are apportioned to the states and territories annually by a formula that is based on the number of elderly persons and persons with disabilities in each state. The program is administered through the states/territories and it is at that level that funding decisions are made. Funds for this program are consolidated with the Section 5311 grant. For more information on this program, contact Paul Page at (415) 744-2734 or paul.page@dot.gov.

Section 5311: Rural and Small Urban Areas Program: The Section 5311 program provides funding for public transportation in non-urbanized areas. FTA apportions funds for non-urbanized areas to the states according to a statutory formula based on each state's population in rural and small urban areas. The funds are available to the state for obligation for the year of apportionment plus two additional years. The states administer the program in accordance with State Management Plans. Eligible recipients include public bodies and private non-profit organizations. Participation by private for-profit enterprises under contract to an eligible recipient is encouraged. Funds for this program are consolidated with the Section 5310 grant. For more information on this program, contact Paul Page at (415) 744-2734 or paul.page@dot.gov.

Section 5316: Job Access and Reverse Commute Program: The Job Access and Reverse Commute (JARC) program was established to address the unique transportation challenges faced by welfare recipients and low-income persons seeking to obtain and maintain employment. Many new entry-level jobs are located in suburban areas, and low-income individuals have difficulty accessing these jobs from their inner city, urban, or rural neighborhoods. The JARC program funds transportation projects designed to help low-income individuals achieve access to employment and related activities where existing transit is unavailable, inappropriate or insufficient. The JARC program also funds reverse commute transit services available to the general public. For more information on this program, contact Paul Page at (415) 744-2734 or paul.page@dot.gov.

Section 5317: New Freedom Program: The New Freedom formula grant program aims to provide additional tools to overcome existing barriers facing Americans with disabilities seeking integration into the work force and full participation in society. The New Freedom formula grant program seeks to reduce barriers to transportation services and expand the transportation mobility options available to people with

disabilities beyond the requirements of the Americans with Disabilities Act (ADA) of 1990. For more information on this program, contact Paul Page at (415) 744-2734 or paul.page@dot.gov.

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
Rural Transit Assistance Program (RTAP)	\$12,957	\$10,388	\$17,989	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
Section 5310 Program	\$65,214	\$66,585	\$173,601	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
Section 5311 Program	\$227,497	\$805,461	\$614,915	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
Section 5316 Program	\$105,156	\$161,159	\$105,298	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
Section 5317 Program	\$9,600	\$32,116	\$28,010	\$0 but Eligible	\$0 but Eligible	\$0 but Eligible
TOTAL	\$420,424	\$1,110,731	\$1,412,665	\$0	\$0	\$0

TOTAL DOT/FTA FUNDS AWARDED FY 2011: \$3,556,767

ENVIRONMENTAL PROTECTION AGENCY

MISSION: *The mission of EPA is to protect human health and the environment.*

Consolidated Environmental Protection Grants: EPA supports local environmental agencies in American Samoa, CNMI, and Guam through annual consolidated grants that combine individual allocations from a broad range of environmental programs including hazardous waste, non-point source water pollution, air quality, and pesticides. Local environmental agencies also receive support from local governments through fees and other funds. *For more information on this program, contact John McCarroll at (415) 972-3774 or mccarroll.john@epa.gov.*

Drinking Water & Wastewater Construction Grants: EPA supports local water and wastewater utilities through grants for the design and construction of wastewater collection, treatment, and disposal facilities, as well as drinking water treatment and distribution systems. In FY10 EPA Region 9 worked to secure an historic increase in infrastructure construction funding to the three Pacific Island territories from a combined amount of \$3 million annually to over \$60 million since 2010. *For more information on this program, contact John McCarroll at (415) 972-3774 or mccarroll.john@epa.gov.*

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
Consolidated Environmental Protection Grants	\$2,905,000	\$2,570,000	\$4,300,000	Not Eligible	Not Eligible	Not Eligible
Water Construction Grants	\$1,404,000	\$4,251,000	\$1,920,000	Not Eligible	Not Eligible	Not Eligible
Wastewater Construction Grants	\$7,365,000	\$3,574,000	\$5,650,000	Not Eligible	Not Eligible	Not Eligible
TOTAL	\$11,674,000	\$10,395,000	\$11,870,000	\$0	\$0	\$0

TOTAL EPA FUNDS AWARDED FY2011: \$33,939,000

FEDERAL EMERGENCY MANAGEMENT AGENCY

MISSION: The mission of the Federal Emergency Management Agency is to support our citizens and first responders to ensure that as a nation we work together to build, sustain, and improve our capability to prepare for, protect against, respond to, recover from, and mitigate all hazards.

Drivers License: To fund projects for integrating hardware, software, and information management systems to implement the REAL ID Act. *For more information on this program, contact Jack Brannan at (510) 627-7028 or jack.brannan@fema.dhs.gov.*

Emergency Management Performance Grant: To provide resources to assist State and local governments to sustain and enhance all-hazards emergency management capabilities. All hazards approach to emergency response, including the development of a comprehensive program, planning, training, exercises, sets the stage for an effective and consistent response to any threatened or actual disaster or emergency, regardless of the cause. States have the opportunity to use EMPG funds to further strengthen their ability to support emergency management activities while simultaneously addressing issues of national concern as identified in the National Priorities of National Preparedness Guidelines. *For more information on this program, contact Jack Brannan at (510) 627-7028 or jack.brannan@fema.dhs.gov.*

Emergency Operations Center Grant Program: The Emergency Operations Center (EOC) Grant Program is intended to improve emergency management and preparedness capabilities by supporting flexible, sustainable, secure and interoperable EOC's with a focus on addressing identified deficiencies and needs. Funding is intended for construction or renovation of a primary EOC. *For more information on this program, contact Jack Brannan at (510) 627-7028 or jack.brannan@fema.dhs.gov.*

Homeland Security Grant Program: To enhance the ability of the State, local and tribal governments to prepare, prevent, respond to, and recover from terrorist attacks and other disasters. The Homeland Security Grant Program is the primary funding mechanism for building and sustaining national preparedness capabilities. HSGP is comprised of four separate grant programs (State Homeland Security Program; Urban Areas Security Initiative; metropolitan Medical Response System; and Citizen Corps Program). *For more information on this program, contact Jack Brannan at (510) 627-7028 or jack.brannan@fema.dhs.gov.*

Port Security Grant Program: To provide funds to port areas for the protection of critical port infrastructure from terrorism. To assist ports enhancing maritime domain awareness, improving risk management capabilities to prevent, detect, respond to and recover from attacks involving improvised explosive devices (IEDs) and other non-conventional weapons, as well as training and exercises and TWIC implementation. The Port Security Grant Program also provides funding to eligible ferry systems within eight specific priorities. *For more information on this program, contact Jack Brannan at (510) 627-7028 or jack.brannan@fema.dhs.gov.*

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
Drivers License Security Grant Program	\$684,804	\$684,804	\$684,804	Not Eligible	Not Eligible	Not Eligible
Emergency Management Performance Grant	\$864,711	\$853,295	\$936,818	\$50,000	\$50,000	Not Eligible
EOC Grant Program	\$0 but Eligible	\$0 but Eligible	\$250,000	Not Eligible	Not Eligible	Not Eligible
Homeland Security Grant Program	\$1,183,900	\$1,183,557	\$1,186,087	Not Eligible	Not Eligible	Not Eligible

Program	U.S. Flag Territories			Freely Associated States		
	AS	CNMI	GUAM	FSM	RMI	ROP
Port Security Grant Program	\$0 but Eligible	\$290,823	\$2,392,941	Not Eligible	Not Eligible	Not Eligible
TOTAL	\$2,733,415	\$3,012,479	\$5,450,650	\$50,000	\$50,000	\$0

TOTAL FEMA PREPAREDNESS GRANTS AWARDED IN FY2011: \$11,296,544

Outer Pacific Committee Directory 2011 - 2012

NAME	DEPARTMENT/AGENCY	PHONE	FAX	EMAIL
Akrop, Martha	Veterans Affairs Sierra Pacific Network	(775) 326-5723	(775) 326-5719	Martha.akrop@va.gov
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Asmundson, Rod	Food & Drug Administration Pacific Region Office	(510) 287-2715	(510) 287-2739	Rod.asmundson@fda.hhs.gov
Benke, Maria	Department of Health & Human Services Health Resources & Services Administration (Washington D.C.)	(310) 443-2629	(301) 443-2870	mbenke@hrsa.gov
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