



**Grants to the Outer Pacific
FY 2010**

**Federal Regional Council
Outer Pacific Committee
Region IX**



**June 2011
(FINAL-Rev.)**



www.frc.9.us

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Federal Regional Council, Region IX
90 7th Street, Suite 5-100
San Francisco, CA 94103
PHONE: (415) 437-8500
FAX: (415) 437-8505
Website: www.frc9.us

FEDERAL REGIONAL COUNCIL

Outer Pacific Committee 2010 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. Our 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 twelfth anniversary, has a number of committees focused upon broad geographic areas and/or special populations in the vast expanse of Region IX. These five entities for 2010 are the **Border Committee**, the **Tribal Affairs Committee**, the **Faith-Based Committee**, the **Homelessness Committee (Region IX Interagency Council on Homelessness)**, and the **Outer Pacific Committee (OPC)**. The OPC 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 Commonwealth of the Northern Mariana Islands as they prepare for the buildup in terms of programs and technical assistance, where possible. Executive Orders or Administration initiatives serve as the underlying authority to guide each committee's work in fulfilling Administration priorities.

The OPC deals with issues related to the three U.S. Flag Territories: Guam, American Samoa, and the Commonwealth of the Northern Mariana Islands (CNMI); and the three Freely Associated States: Federated States of Micronesia (FSM), Republic of the Marshall Islands (RMI), and Republic of Palau (ROP).

This annual report captures funding information provided primarily by the Federal programs that are active in the Pacific jurisdictions and based in Region IX, although input has also been included from select programs operating from central offices on the East coast. However, 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.

Committee Accomplishments

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 2010 included the following objectives: 1) 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) Increasing committee membership.

In 2010 the committee convened on ten 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 and which is also widely requested by officials in the Pacific jurisdictions. The current report reflecting FY 2010 grants marks the eleventh 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 fifth year in a row at the Interagency Group on

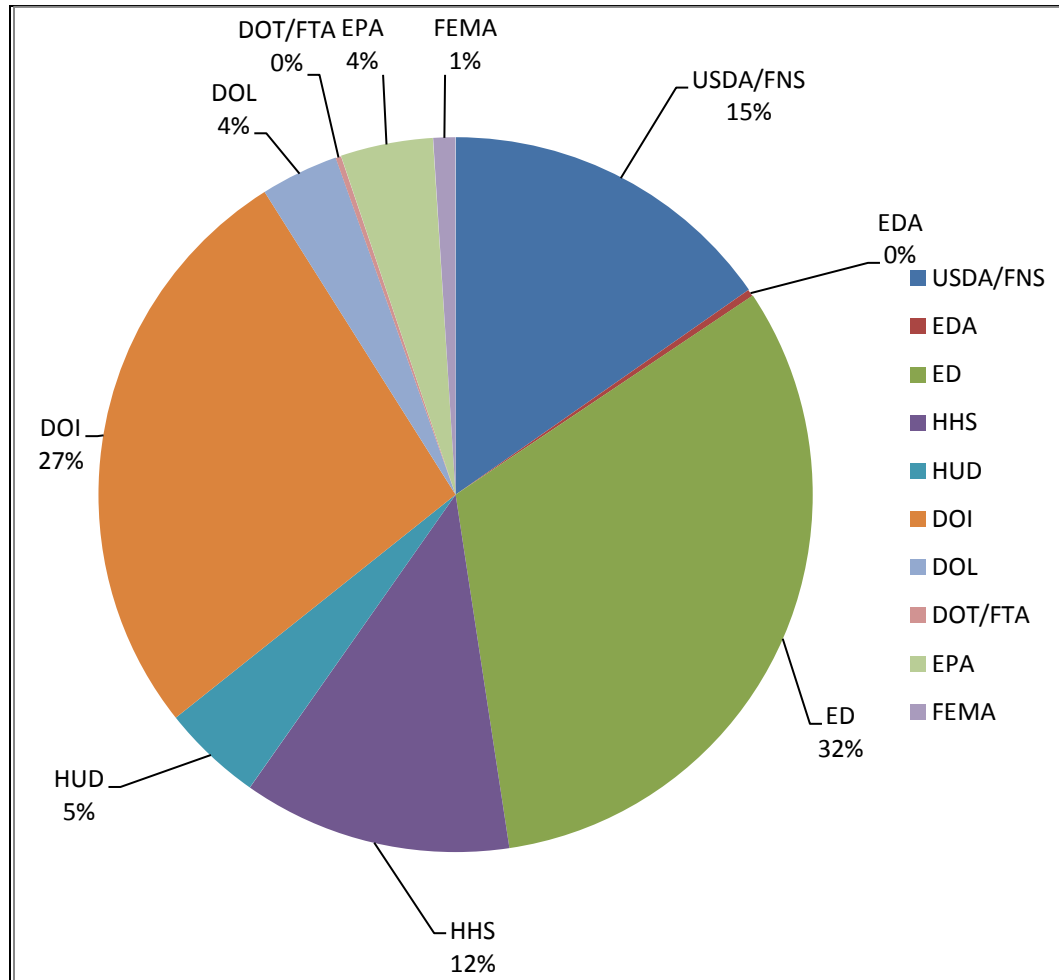
Insular Areas (IGIA) meeting that is held after the National Governors Association Winter meeting in Washington, DC.

- 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) and the Government Accountability Office (GAO) 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 2010 continued its communications with the 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 approximately 8,000 US Marines and their dependents, as well as other military personnel, in 2014 or thereafter. Committee members' issues and concerns regarding the military buildup have been shared via the committee with the Interagency Group on Insular Affairs. The OPC participates in the Federal Regional Council meetings which the Governor of Guam and his staff periodically 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 monthly meetings.
- The committee hosted speakers from numerous non-Federal organizations that are active in the Pacific jurisdictions in varying fields, which brought to the group a better understanding of the wealth and variety of assistance outside the Federal government that exists to support the Pacific, and how the Federal agencies in Region IX can interface with those efforts.
- In line with the committee's work plan, additional Federal agencies joined the group in 2010 and participated in our monthly meetings.

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 Outer Pacific Committee 2010 Report

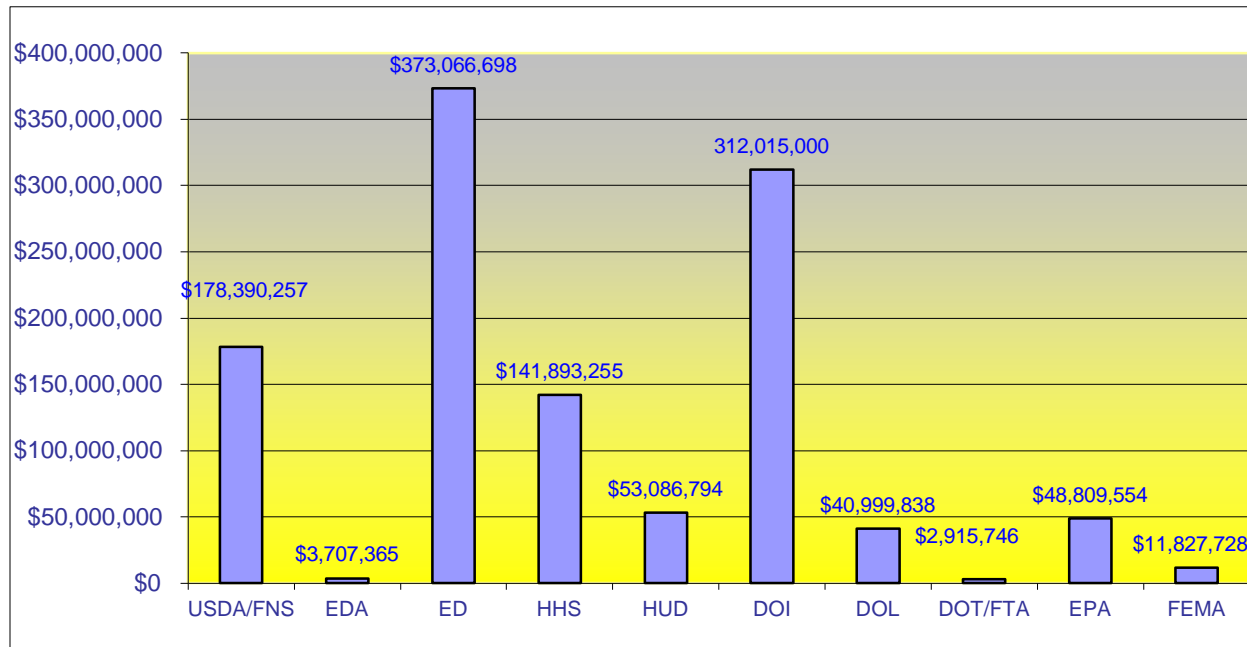
% Total Pacific Funding per Department



FEDERAL REGIONAL COUNCIL

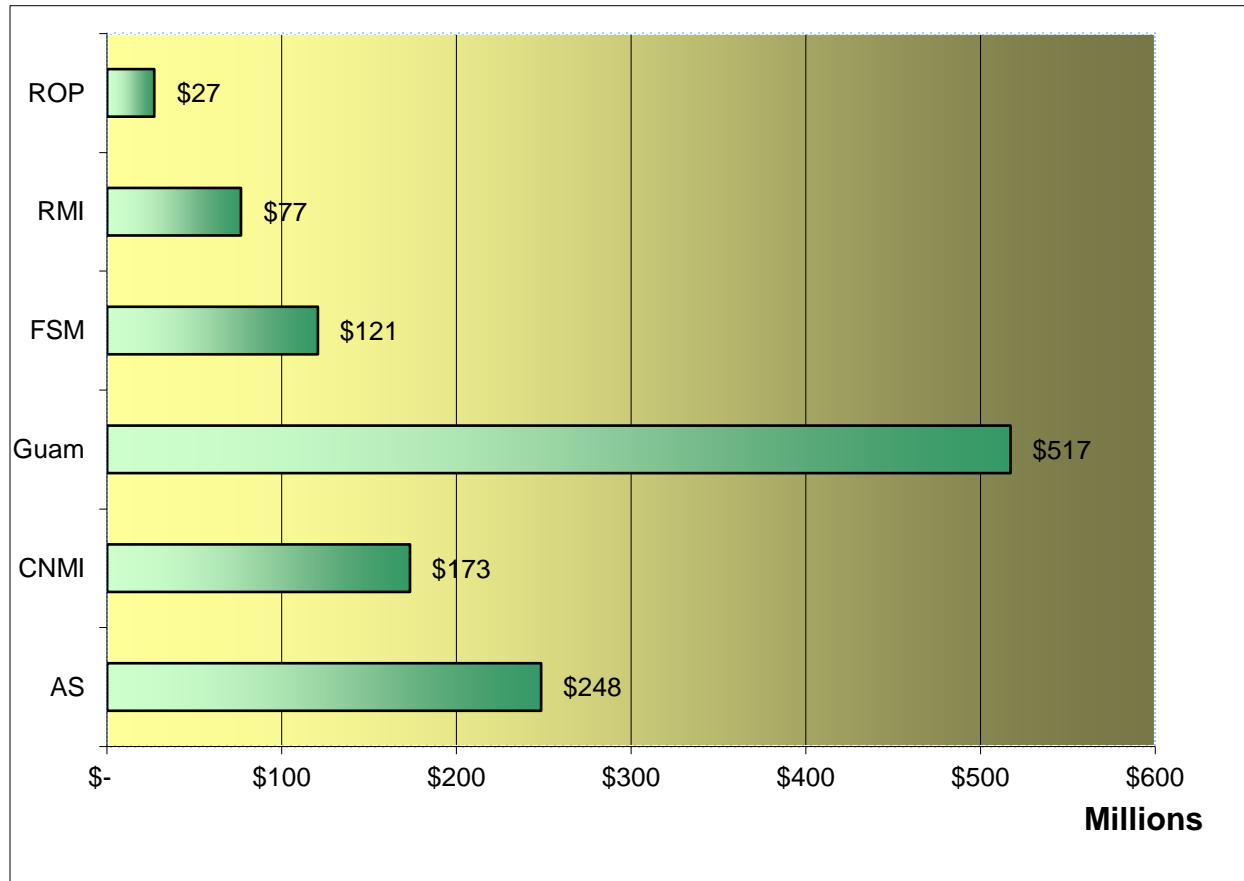
Outer Pacific Committee 2010 Report

Total Amount Pacific Funding per Department



FEDERAL REGIONAL COUNCIL Outer Pacific Committee 2010 Report

Total Amount Federal Funding per Jurisdiction (in millions)



FEDERAL REGIONAL COUNCIL
Outer Pacific Committee 2010 Report
Grants and Programs in the Outer Pacific

DEPARTMENT OF AGRICULTURE

Food and Nutrition Service

Child Nutrition Programs Block Grants (American Samoa and CNMI): FNS has separate memorandums 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 x420 Kacie.O'Brien@fns.usda.gov. Contact Ashley Ryckman at (415) 705-1336 x417 Ashley.Ryckman@fns.usda.gov for information on the America Samoa block grant program.*

Child Nutrition Programs (Guam):

Child and 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 x406, 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 x406, 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 x406, or Kathryn.Lee@fns.usda.gov.*

Special Food Assistance (SFA) Program: The SFA Program for the Republic of Marshall Islands was authorized under Public Law 99-239 and the Compact of Free Association. FNS provides a cash block grant for the needy peoples of Kili, Ejit, Enewetak, Ujelang, Rongelap, and Utrix (the Nuclear Affected Areas). *For more information on this program, contact Madeline Viens, Assistant Director of Field Operations at (415) 705-1355 x 532 or madeline.viens@fns.usda.gov.*

Special Supplemental Nutrition Program for Women, Infants and 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 x251, or rich.proulx@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 x301, or dennis.stewart@fns.usda.gov.*

The Emergency Food Assistance Program (TEFAP): TEFAP provides commodity foods to states for distribution to households, soup kitchens and food banks. First initiated in 1981, TEFAP was designed to reduce inventories and storage costs of surplus commodities through distribution to needy households. For CNMI, TEFAP is included in the cash block grant under the Child Nutrition MOU. *For more information on this program, contact Madeline Viens, Assistant Director of Field Operations at (415) 705-1355 x532 or madeline.viens@fns.usda.gov.*

Program	AS	CNMI	GUAM	FSM	RMI	ROP
Child Nut. (Block Grant/MOU)	\$18,938,661	\$8,437,511	\$0	\$0	\$0	\$0
Child Nut.(Block, CIL, SAE) **	\$0	\$0	\$9,647,165	\$0	\$0	\$0
SNAP * Formally known as Food Stamps	\$8,034,000	\$ 12,148,000	\$99,296,709	\$0	\$0	\$0
Special Food Assistance (Block Grant)	\$0	\$0	\$0	\$0	\$575,000	\$0
TEFAP **	\$0	\$0	\$321,287	\$0	\$0	\$0
TEFAP CIL	\$0	\$42,223	\$0	\$0	\$0	\$0
WIC*	\$7,376,097	\$8,847,436	\$4,726,168	\$0	\$0	\$0
TOTAL	\$34,348,758	\$29,475,170	\$113,991,329	\$0	\$575,000	\$0

TOTAL USDA FNS FUNDS AWARDED FY 2010: \$178,390,257

*combined benefits for food and administrative funds

**combined value of commodities and administrative funds

CIL=Cash in Lieu

DEPARTMENT OF COMMERCE

Economic Development Administration

- **FY 2010 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 the Department of Commerce, Economic Development Programs in the Outer Pacific, 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 the Department of Commerce, Economic Development Programs in the Outer Pacific, 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 the Department of Commerce, Economic Development Programs in the Outer Pacific, contact Gail Fujita at (808) 541-3391 or gfujita@eda.doc.gov.*

Program	AS	CNMI	GUAM	FSM	RMI	ROP
Public Works Infrastructure on Industrial Park	\$3,100,000	\$0	\$0	\$0	\$0	\$0
Technical Assistance for Comprehensive Econ Development	\$150,000	\$0	\$0	\$0	\$0	\$0
Technical Assistance for Pacific Basin Development	\$0	\$0	\$150,000	\$0	\$0	\$0
Technical Assistance for Pacific Business Development	\$29,455	\$29,455	\$29,455	\$0	\$0	\$0
Technical Assistance for Univ. of Guam	\$73,000	\$73,000	\$73,000	\$0	\$0	\$0
TOTAL	\$3,352,455	\$102,455	\$252,455	\$0	\$0	\$0

TOTAL DOC/EDA FUNDS AWARDED FY 2010: \$3,707,365

DEPARTMENT OF EDUCATION

Consolidated Grants to Insular Areas: 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 Valerie Rogers at (202) 260-2543 or valerie.rogers@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. Website: www.ed.gov/programs/TFasegp. *For more information on this program, contact Valerie Rogers at (202) 260-2543 or valerie.rogers@ed.gov.*

Education Job Fund: This program provides essential resources to assist local school districts in saving or creating education jobs during the 2010-2011 school year. Website: www2.ed.gov/programs/educationjobsfund. *For more information on this program, contact James Butler at (202) 260-9737 or james.butler@ed.gov.*

English Language Acquisition: 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. Website: www.ed.gov/programs/nfdp. *For more information on this program, contact Cynthia Ryan at (202) 401-1436 or cynthia.ryan@ed.gov.*

Federal Student Aid: Leveraging Educational Assistance Partnership and Special Leveraging Educational Assistance Partnership Programs. These programs assist states in providing grants, scholarships, and community service work-study assistance to eligible postsecondary education students who demonstrate financial need. Website: <http://www.ed.gov/programs/leap> and <http://www.ed.gov/programs/sleap>. *For more information on this program, contact Greg Gerran at (202) 369-9560 or greg.gerrans@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. Website: www.ed.gov/programs/elseccounseling. *For more information on this program, contact Loretta McDaniel at (202) 245-7870 or loretta.mcdaniel@ed.gov.*

Fund for the Improvement of Education (FIE)-Earmarks: These earmarks provide support for elementary and secondary education projects, including developing and implementing a language program and for program development. Website: www.ed.gov/programs/fie. *For more information on this program, contact Carol Lyons at (202) 205-4760 or carol.lyons@ed.gov.*

Fund for the Improvement of Education (FIE)-Teaching American History: This program seeks to raise student achievement by improving teachers' knowledge and understanding of and appreciation for traditional U.S. history. Grant awards will assist LEAs, in partnership with entities with content expertise, to develop, document, evaluate, and disseminate models of professional development. Website: www2.ed.gov/programs/teachinghistory. For more information on this program, contact Alex Stein at (202) 205-9085 or alex.stein@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, College Access Challenge Grant, and others. Website: www.ed.gov/about/offices/list/ope/hep.html. For more information on this program, contact Lauren Kennedy at (202) 502-7630 or lauren.kennedy@ed.gov.

Improving Literacy through School Libraries: This funding is targeted to communities with 20 percent or more family poverty and allows these communities to update collections and technology in public school library media centers. Through the collaboration of school library media specialists, teachers, and administrators, this program works to improve literacy skills and academic achievement. Website: www.ed.gov/programs/lsl. For more information on this program, contact Peter Eldridge at (202) 260-2514 or peter.eldridge@ed.gov.

Parental Information and Resource Centers: This program helps implement effective parental involvement policies, programs, and activities to improve student academic achievement and to strengthen partnerships among parents, teachers, principals, administrators, and other school personnel in meeting the education needs of children. Website: www.ed.gov/programs/pirc. For more information on this program, contact Anna Hinton at (202) 260-1816 or anna.hinton@ed.gov.

Rehabilitation Services and Disability Research: 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. Website: www.ed.gov/about/offices/list/osers/rsa. For more information on this program, contact Carol Dobak at (202) 245-7325 or carol.dobak@ed.gov.

Special Education: Special Education – Grants to States, 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. Website: www.ed.gov/about/offices/list/osers/osep. For more information on this program, contact Ruth Ryder at (202) 245-7629 or ruth.ryder@ed.gov, (State Formula Grants); Larry Wexler at (202) 245-7971 or larry.wexler@ed.gov (Discretionary Grants).

State Fiscal Stabilization Fund: This program is a one-time appropriation awarded to governors to help stabilize state and local budgets in order to minimize and avoid reductions in education and other essential services, in exchange for a state's commitment to advance

education reform in four areas. The two components are the Education Stabilization Fund and the Government Services Fund (CFDA No. 84.397). States must use the Education Stabilization Fund to restore state support for elementary and secondary education, public higher education, and, as applicable, early childhood education programs and services. States must use the Government Services Fund for public safety and other government services, which may include assistance for elementary and secondary education and public institutions of higher education (IHEs), and for modernization, renovation, or repair of public school facilities and IHE facilities.

Website: www2.ed.gov/programs/statestabilization/index.html. For more information on this program, contact James Butler at (202) 260-9737 or james.butler@ed.gov.

Vocational and Adult Education: 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. Website: www.ed.gov/about/offices/list/ovae. For more information on this program, contact CTE: Edward Smith at (202) 245-7602 or edward.smith@ed.gov; AE: Mike Dean at (202) 245-7828 or mike.dean@ed.gov.

Program	AS	CNMI	GUAM	FSM	RMI	ROP
Consolidated Grants to Insular Areas	\$27,854,338	\$12,773,668	\$36,189,510	\$0	\$0	\$0
Education Grant Program for the Territories and Freely Associated States	\$1,080,000	\$1,016,860	\$347,631	\$0	\$0	\$1,000,000
Education Job Funds	\$8,324,352	\$8,289,850	\$20,146,108	\$0	\$0	\$0
English Language Acquisition	\$0	\$0	\$300,000	\$0	\$0	\$0
FIE-Counseling Demonstration Program	\$207,409	\$0	\$0	\$0	\$0	\$0
FIE-Earmarks	\$500,000	\$350,000	\$0	\$0	\$0	\$0
FIE-Teaching American History	\$500,000	\$0	\$0	\$0	\$0	\$0
Federal Student Aid	\$0	\$0	\$24,437	\$0	\$0	\$0
Higher Education Programs	\$2,441,613	\$2,346,334	\$3,835,059	\$1,704,052	\$309,373	\$2,578,416
Improving Literacy Through School Libraries	\$24,295	\$8,825	\$29,959	\$0	\$0	\$0
Parental Information and Resource Centers	\$414,983	\$0	\$373,064	\$0	\$0	\$0

Program	AS	CNMI	GUAM	FSM	RMI	ROP
Rehabilitation Services and Disability Research	\$1,932,662	\$1,505,711	\$3,033,703	\$0	\$0	\$0
Special Education	\$6,985,638	\$5,228,548	\$15,702,555	\$3,883,311	\$1,681,024	\$1,110,613
State Stabilization Find-Education Grants	\$44,618,528	\$44,433,595	\$107,983,137	\$0	\$0	\$0
Vocational and Adult Education	\$239,179	\$499,844	\$1,071,408	\$0	\$0	\$187,106
TOTAL	\$95,122,997	\$76,453,235	\$189,036,571	\$5,587,363	\$1,990,397	\$4,876,135

TOTAL DOE FUNDS AWARDED IN FY 2010: \$373,066,698

DEPARTMENT OF HEALTH & HUMAN SERVICES

Administration for Children and Families

Administration on Developmental Disabilities Protection and Advocacy (ADDP&A): The Developmental Disabilities Assistance and Bill of Rights Act provides for each state or territory to establish a Protection & Advocacy System (P&As) to empower, protect, and advocate on behalf of persons with developmental disabilities. This system must be independent of service-providing agencies. The P&As are authorized to provide information and referral services and to exercise legal, administrative and other remedies to resolve problems for individuals and groups of clients. The P&As are also required to reach out to members of minority groups that historically have been underserved. In addition to the Protection and Advocacy of Developmental Disabilities (PADDD) program, the P&As also include components mandated by several other Federal programs to serve people with disabilities and mental illness. *For more information on this program, visit www.acf.hhs.gov/programs/add/states/pas.html.*

Administration for Native Americans (ANA): The Administration for Native Americans (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. The Outer Pacific has the following ANA grants; Social and Economic Development; Improve the Well-Being of Children—Native American Healthy Marriage Initiative; and the Grant Languages Program. *For more information on this program, visit www.acf.hhs.gov/programs/ana/.*

Child Abuse and Neglect (CAN) Basic Grant Parts 1 and 2: Part 1 of the Basic Grant provides assistance for the developing, strengthening, and implementing of child abuse and neglect prevention and treatment programs. Part 2 of the Basic Grant helps states and territories respond to cases of medical neglect, including the withholding of medically-indicated treatment from disabled infants with life-threatening conditions. *For more information on this program, contact James Toscano at (415) 437-8425 or James.Toscano@acf.hhs.gov.*

Child Care Development Fund (CCDF): CCDF provided approximately \$5 billion to states and territories in 2010. This program, authorized by the PRWORA, 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.*

Children's Justice Act (CJA): CJA helps states and territories establish, develop, and operate programs designed to improve the investigation and prosecution of child abuse and neglect cases. *For more information on this program, contact James Toscano at (415) 437-8425 or james.toscano@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 JP Soden at (415) 437-8421 or jp.soden@acf.hhs.gov.*

Child Welfare Services (CWS IVB-1): The Child Welfare Services program helps state and territory public welfare agencies improve child welfare services with the goal of keeping families together. Services include preventive intervention, so if possible, children will not have to be removed from their homes; services to develop alternative placements like foster care or adoption if children cannot remain at home; and reunification so that children can return home if at all possible. *For more information on this program, contact James Toscano at (415)437-8425 or James.Toscano@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. *For more information on this program, visit <http://www.acf.hhs.gov/programs/ocs/csbg/>.*

Developmental Disabilities Councils (DDC): The Developmental Disabilities Council program provides financial assistance to each state and territory to support the activities of a Developmental Disabilities Council. Councils are uniquely composed of individuals with significant disabilities, parents and family members of people with developmental disabilities, and representatives of agencies that provide services to individuals with developmental disabilities. Together, this group of individuals develops and implements a statewide plan to address the Federally-mandated priority of employment, and optionally any of three other Federal priorities (case management, child development, and community living) as well as one optional priority. *For more information on this program, visit www.acf.hhs.gov/programs/add/states/ddcs.html.*

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. *For more information on this program, visit www.acf.hhs.gov/programs/fysb/content/programs/fv.htm.*

Help America Vote Act (HAVA): The Administration on Developmental Disabilities (ADD), oversees three disability-related grant programs authorized through HAVA to address the issues related to individuals with the full range of disabilities, including access to voting facilities; private and independent voting experiences; training of poll workers and election volunteers on promoting access and participation; and providing information and outreach on access to polling places. *For more information on this program, visit <http://www.acf.hhs.gov/programs/add/>.*

***Head Start:** Head Start and Early Head Start are comprehensive child development programs which serve children from birth to age 5, pregnant women, and their families. They are child-focused programs and have the overall goal of increasing the school readiness of young children in low-income families. The Head Start program is administered by the Head Start Bureau, the Administration on Children, Youth and Families (ACYF), Administration for Children and Families, DHHS. 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.*

Improving the Well Being of Children/Native American Healthy Marriage Initiative:

Improving the Well Being of Children is a project funded under the Administration for Native Americans (ANA). The funded projects plan for and implement approaches to improve child well-being by removing barriers associated with forming healthy marriages (including Traditional Native American marriages), sustaining healthy marriages and strengthening families (including absentee parent activities) in Native American communities. *For more information on this program, visit http://www.acf.hhs.gov/programs/ana/programs/program_information.html*

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. *For more information on this program, visit <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 a LIHEAP block grant. Congress established the formula for distributing funds to states based on each state's share of home energy expenditures by low-income households. *For more information on this program, visit <http://www.acf.hhs.gov/programs/ocs/liheap/>.*

Office on Child Abuse and Neglect: Under the Community-Based Grants for the Prevention of Child Abuse and Neglect program (formerly the Community-Based Family Resource and Support program and now administratively known as the Community-Based Child Abuse Prevention Grants - CBCAP), discretionary grants may be awarded to selected Indian tribes, tribal organizations, and migrant programs to develop linkages with the statewide CBCAP program and/or to provide services otherwise consistent with the purposes of the CBCAP. These funds must support more effective and comprehensive child abuse prevention activities and family support services, including an emphasis on strengthening marriages and reaching out to fathers, that will enhance the lives and ensure the safety and well-being of migrant and Native American children and their families. *For more information on this program, contact James Toscano at (415) 437-8425 or James.Toscano@acf.hhs.gov.*

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 by awarded states 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. *For more information on this program, visit <http://www.acf.hhs.gov/programs/fysb/content/programs/tpp.htm>.*

Projects of National Significance (PNS): The Administration on Developmental Disabilities (ADD), awards grants and contracts to promote and increase the independence, productivity, inclusion and integration into the community of persons with developmental disabilities; and support the development of national and state policy which enhances the independence, productivity, inclusion and integration of these individuals into the community. *For more information on this program, visit <http://www.acf.hhs.gov/programs/add/>.*

Promoting Safe and Stable Families (CWS IV-B2): The Title IV-B, subpart 2, Promoting Safe and Stable Families program provides funds to states and territories to provide family support, family preservation, time-limited family reunification services, and services to promote and

support adoptions. These services are primarily aimed at preventing the risk of abuse and promoting nurturing families, assisting families at risk of having a child removed from their home, promoting the timely return of a child to his/her home, and if returning home is not an option, placement of a child in a permanent setting with services to support the family. This program was formerly the Family Preservation and Family Support Services program. *For more information on this program, contact James Toscano at (415) 437-8425 or James.Toscano@acf.hhs.gov.*

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. *For more information on this program, visit <http://www.acf.hhs.gov/programs/ocs/liheap/>.*

Runaway and 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. The Outer Pacific has the following RHY grants; 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. *For more information on this program, visit <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. They ensure coordinated, best-practice solutions are implemented and sustained. Coalitions build on the strength of local community programs and identify and address statewide needs. *For more information on this program, visit <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.*

University Centers for Excellence in Developmental Disabilities Education, Research, and Service (UCEDD): The University Affiliate Program (UAP) is a program to create liaisons between academic expertise and institutions of higher learning and service delivery systems to positively affect the lives of individuals with developmental disabilities and their families by increasing their independence, productivity, and integration into their communities. *For more information on this program, visit www.acf.hhs.gov/programs/add/states/ucedds.html.*

*Stimulus funds connected to existing programs.

Program	AS	CNMI	GUAM	FSM	RMI	ROP
Basic Centers	\$0	\$45,000	\$100,000	\$0	\$0	\$0
Child Abuse and Neglect State Grant - Part 1	\$58,076	\$55,608	\$67,346	\$0	\$0	\$0

Program	AS	CNMI	GUAM	FSM	RMI	ROP
Child Care and Development Fund Mandatory & Matching	\$2,831,968	\$1,938,850	\$3,978,605	\$0	\$0	\$0
Child Support Enforcement-States	\$0	\$0	\$2,974,871	\$0	\$0	\$0
Child Welfare Social Services	\$177,850	\$148,852	\$305,357	\$0	\$0	\$0
Children's Justice Act	\$55,033	\$53,495	\$60,812	\$0	\$0	\$0
Community Services Block Grant	\$969,678	\$574,910	\$917,726	\$0	\$0	\$0
Community-Based Child Abuse Prevention	\$200,000	\$200,000	\$200,000	\$0	\$0	\$0
Developmental Disabilities Councils	\$249,344	\$249,344	\$249,344	\$0	\$0	\$0
Developmental Disabilities Projects Of National Significance	\$0	\$0	\$200,000	\$0	\$0	\$0
Developmental Disabilities Protection & Advocacy	\$205,808	\$205,808	\$205,808	\$0	\$0	\$0
Family Violence Prevention & Services State Grants	\$130,052	\$130,052	\$130,052	\$0	\$0	\$0
Grant Languages Program	\$0	\$0	\$762,404	\$0	\$0	\$0
Head Start Projects	\$2,951,625	\$1,824,672	\$2,685,255	\$0	\$0	\$1,421,953
Head Start Quality Improvement and COLA (ARRA)	\$618,633	\$205,290	\$228,858	\$0	\$0	\$216,953
Head Start State Advisory Council (ARRA)	\$664,277	\$0	\$664,277	\$0	\$0	\$0
Improving The Well Being of Children/Native American Healthy Marriage (ANA)	\$0	\$0	\$253,074	\$0	\$0	\$0
Leveraging Incentive Program (LIHEAP)	\$0	\$84,835	\$0	\$0	\$0	\$0
Low Income Home Energy Assistance	\$112,757	\$85,866	\$247,215	\$0	\$0	\$0

Program	AS	CNMI	GUAM	FSM	RMI	ROP
Non-Competitive Funding (ADD)	\$0	\$100,000	\$0	\$0	\$0	\$0
Personal Responsibility Education Program	\$0	\$0	\$0	\$250,000	\$0	\$0
Promoting Safe and Stable Families	\$218,587	\$178,909	\$395,070	\$0	\$0	\$0
PSSF Caseworker Visitation	\$8,920	\$6,538	\$19,514	\$0	\$0	\$0
Residential Energy Assistance Challenge Options Program	\$0	\$50,000	\$0	\$0	\$0	\$0
Social & Economic Development	\$626,413	\$245,385	\$562,559	\$0	\$0	\$0
Social Services Block Grant	\$48,518	\$58,621	\$293,103	\$0	\$0	\$0
State Access and Visitation	\$0	\$0	\$100,000	\$0	\$0	\$0
Statewide Domestic Violence Coalition	\$0	\$0	\$122,690	\$0	\$0	\$0
Street Outreach	\$0	\$0	\$100,000	\$0	\$0	\$0
Temporary Assistance for Needy Families	\$0	\$0	\$4,512,725	\$0	\$0	\$0
Transitional Living Program	\$0	\$0	\$200,000	\$0	\$0	\$0
University Affiliated Programs	\$0	\$0	\$542,000	\$0	\$0	\$0
Voting Access for Ind. with Disabilities	\$35,000	\$0	\$35,000	\$0	\$0	\$0
Voting Access for Ind. with Disabilities- State & Local Governments	\$100,000	\$0	\$0	\$0	\$0	\$0
TOTAL	\$10,262,539	\$6,442,035	\$21,113,665	\$250,000	\$0	\$1,638,906

TOTAL HHS/ACF FUNDS AWARDED IN FY 2010: \$39,707,145

Administration on Aging

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 spouses. Congregate nutrition, home delivered meals, nutrition education, and in American Samoa, food vouchers, are provided under Title IIIC of the Older Americans Act. 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 III-E provides assistance to families and caregivers of elderly persons. Services include information, assistance, caregiver training, counseling and support, respite care, and supplemental services. Guam and CNMI each 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.*

State Directors for AoA Grants:

American Samoa

Fa'afiti Pita Tauanu'u, Director
Territorial Administration on Aging
American Samoa Government
Pago Pago, AS 96799
Phone: (684) 633-1251
Fax: (684) 633-2533
Email: pt_tauanuu@americansamoa.gov

Commonwealth of the Northern Mariana Islands

Rose Mondala, Director
Office on Aging
P.O. Box 502178
Saipan, MP 96950
Phone: (670) 233-1321
Fax: (670) 233-1327
Email: scsepspn@pticom.com

Guam

Arthur San Agustin, Director
Division of Senior Citizens
Department of Public Health and Social Services
P.O. Box 2816
Hagatna, Gu 96932
Phone: (671) 735-7382

Program	AS	CNMI	GUAM	FSM	RMI	ROP
AOA Services	\$1,332,880	\$821,735	\$3,399,794	\$0	\$0	\$0
TOTAL	\$1,332,880	\$821,735	\$3,399,794	\$0	\$0	\$0

TOTAL HHS/AOA FUNDS AWARDED IN FY 2010: \$5,554,409

Office of the Assistant Secretary for Preparedness and Response

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 Ann Nguyen at (202) 245-0769 or ann.nguyen@hhs.gov.*

American Samoa
Jacqueline Solaita

Commonwealth of the Northern Mariana Islands
Pedro Untalan

Phone: (684) 699-6380
 Email: Jacqueline@doh.as

Phone: (670) 236-8761
 Email: puntalan1@gmail.com

Federated States of Micronesia
 Arthy Nena
 011 (691) 320-8300
 Email: anena@fsmhealth.fm

Guam
 William N. Kando
 (671) 647-2316/2221
 Email: William.kando@gmha.org

Republic of the Marshall Islands
 Francis Silk
 Phone: 011 (692) 625-3355/3399
 Email: mohbt@ntamar.net

Republic of Palau
 Dr. Selaima M. Lalabalavu
 Phone: 011(680) 488-2813
s_lalabalavu@palau-health.net

Program	AS	CNMI	GUAM	FSM	RMI	ROP
Hospital Preparedness	\$318,662	\$340,367	\$444,189	\$378,369	\$316,983	\$273,406
TOTAL	\$318,662	\$340,367	\$444,189	\$378,369	\$316,983	\$273,406

TOTAL HHS/ASPR FUNDS AWARDED IN FY 2010: \$2,017,976

Centers for Disease Control and Prevention

The Collaborative Performance Agreement for Diabetes, Tobacco and 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 or Gwen Hosey at ghosey@cdc.gov or 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 and 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 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 and 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 and Educational Outcomes of Young People: This grant program to improve the health and educational outcomes of youth through coordinated school health programs directly supports the capacity building efforts of schools and education agencies for positive youth development and health promotion. *For more information on this program, contact James Waldemiller at jwaldemiller@cdc.gov.*

National Cancer Prevention and Control Program: This cooperative agreement includes the National Comprehensive Cancer Control Program (NCCCP), the National Breast and Cervical Cancer Early Detection Program (NBCCEDP) and the National Program of Cancer Registries (NPCR). The National Comprehensive Cancer Control Program (NCCCP) addresses the “Healthy People 2010” focus area(s) of cancer. The NCCCP 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 and Health Services (PHHS) Block Grant: Gives grantees the flexibility to prioritize the use of funds to fill funding gaps in programs that deal with leading causes of death and disability, as well as the ability to respond rapidly to emerging health issues including outbreaks of food borne infections and waterborne diseases. *For more information on this program, contact Patricia Brindley at pbrindley@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, contact Janice McMichael at jmcmichael@cdc.gov.*

The Sexual Violence Prevention and 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.*

Program	AS	CNMI	GUAM	FSM	RMI	ROP
Collaborative Performance Agreement Tobacco, Diabetes, and BRFS	\$297,683	\$321,108	\$799,432	\$455,603	\$286,301	\$334,754

Program	AS	CNMI	GUAM	FSM	RMI	ROP
Comprehensive STD Prevention Systems (CSPS)	\$63,247	\$119,525	\$117,077	\$56,683	\$136,934	\$43,609
Early Hearing Detection and Intervention (EHDI) Program	\$138,820	\$141,918	\$150,782	\$148,786	\$0	\$150,000
HIV Prevention Projects for the Pacific Islands	\$174,435	\$201,666	\$499,622	\$212,856	\$122,518	\$235,697
HIV/AIDS Surveillance	\$19,797	\$10,552	\$50,000	\$13,598	\$0	\$16,568
Immunization & Vaccines for Children	\$703,635	\$978,132	\$1,282,580	\$1,493,536	\$1,069,752	\$320,143
Improving Health & Ed Outcomes of Young People	\$101,138	\$102,500	\$101,800	\$0	\$100,000	\$95,000
National Cancer Prev & Control Program	\$463,424	\$442,796	\$641,357	\$539,459	\$180,000	\$711,347
National Public Health Improvement Initiative	\$352,000	\$352,000	\$352,000	\$100,000	\$352,000	\$352,000
Preventive Health Services Block Grant	\$0	\$40,348	\$218,475	\$64,277	\$26,378	\$21,016
Public Health Emergency Preparedness	\$390,413	\$377,263	\$432,552	\$450,174	\$388,143	\$328,877
Sexual Violence Prev & Education	\$0	\$11,740	\$22,827	\$18,682	\$11,238	\$0
Tuberculosis Eliminations & Lab	\$96,675	\$257,216	\$483,125	\$184,054	\$150,442	\$131,835
TOTAL	\$2,801,267	\$3,356,764	\$5,151,629	\$3,737,708	\$2,823,706	\$2,740,846

TOTAL HHS/CDC FUNDS AWARDED FOR FY 2010: \$20,611,920

Centers for Medicare and Medicaid Services

****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, contact Tom Schenck at (415) 744-3589 or tom.schenck@cms.hhs.gov.*

******In the Pacific, only the 3 US territories are eligible for these programs.

Program	AS	CNMI	GUAM	FSM	RMI	ROP
CMS CHIP	\$1,332,152	\$1,221,139	\$5,177,242	\$0	\$0	\$0
CMS EAP	\$291,032	\$125,666	\$903,166	\$0	\$0	\$0
CMS Medicaid	\$11,726,000	\$6,474,000	\$17,355,000	\$0	\$0	\$0
TOTAL	\$13,349,184	\$7,820,805	\$23,435,408	\$0	\$0	\$0

TOTAL HHS/CMS FUNDS AWARDED IN FY 2010: \$44,605,397

Health Resources and Services Administration

Children’s Oral Healthcare Program: These grants, administered by the Maternal and Child Health Bureau, are part of the Targeted MCH Oral Health Service Systems (TOHSS) grant program. The program is part of a congressional earmark of one-year grants intended to promote the development and enhancement of statewide infrastructures that support oral health systems targeting children and families. *For more information on this program, contact [Pamella Vodicka](mailto:Pamella.Vodicka@hrsa.gov) at (301) 443-2753 or pvodicka@hrsa.gov.*

The contact information for the TOHSS Project Director is as follows:

Ohnmar Tut BDS, MPhil
 Director, TOHSS Project
 Republic of Marshall Islands
 PO Box 3278
 Majuro, MH 96960
 Phone: (692) 625-3355 ext 2391
 E-mail: ohnmar@u.washington.edu

Consolidated Health Centers 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.

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, migrant and seasonal farm workers, individuals and families experiencing homelessness, and those living in public housing. HRSA-supported clinics provide comprehensive, culturally competent, quality primary health care to a broadly diverse patient base that includes increasing numbers of veterans.

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, health centers must be governed by community boards with majority patient representation. *For more information on this program, please contact Angela R. Powell at (301) 594-4445 or apowell@hrsa.gov.*

Emergency Medical Services for Children (EMSC) Program: The EMSC program is designed to reduce child and youth mortality and morbidity resulting from severe illness or trauma. It aims to: 1) ensure that state-of-the-art emergency medical care for the ill or injured child and adolescent is available when needed; 2) ensure that pediatric services are well integrated into the existing state emergency medical services (EMS) system and backed by optional resources; and 3) ensure that the entire spectrum of emergency services, including primary prevention of illness and injury, acute care, and rehabilitation, is provided to children and adolescents at the same level as adults.

All three of the EMSC Pacific Basin grantees (Guam, American Samoa & Mariana Islands) are funded to improve the quality of pediatric emergency health care which involves pediatric training and the expeditious transport and transfer of children to a definitive pediatric care facility. Each of these jurisdictions is collecting data to reassess the availability of pediatric medical control 24/7, the availability of pediatric equipment in patient care units, and inter-facility transfer agreements and guidelines. They are continuing these efforts by collecting data to assure that pediatric recognition systems for medical and trauma emergencies are in place; pediatric continuing education is required prior to recertification of basic life support (BLS) and advanced life support (ALS) providers by organizing/evaluating their pre-hospital and hospital personnel training programs; and the EMSC grantee establishes permanence within their jurisdictions. All of which are performance measures based on the criteria set by the program. The grantees are working to ensure that the data collected is National EMS Information System (NEMSIS) compliant. *For more information on this program, please contact Tina Turgel, Senior Nurse Consultant, EMSC Program, at (301) 443-5599 cturgel@hrsa.gov.*

The contact information for the EMSC Project Managers is as follows:

Lata Allen, MBA
Department of Public Safety, Office of EMS
EMSC Program Coordinator
Emergency Medical Services
P.O. Box 3385
Pago Pago, AS 96799
Phone: (684) 633-1552/2166
Fax: (684) 633-5112
E-mail: Lata_Allen@yahoo.com

Marylou Loualhati, MPH
Dept. of Public Health and Social Services
Office of EMS
PO BOX 2816
Hagatna, GU 96932
E-mail: mmloualhati@dphss.govguam.net
Phone: (671) 735-7303
Fax: (671) 734-2066

Tom Manglona
Department of Public Safety, Office of EMS
PO BOX 500791
Civic Center
Susupe, Saipan MP 96950
E-mail: tmanglona@hotmail.com
Phone: (670) 664-9135
Fax: (670) 664-9015

Hawaii/Pacific Basin Area Health Education Center (AHEC) Program: The Pacific Basin AHEC aims to improve the health of the underserved of Hawaii and the Pacific Basin by providing sensitive, well-trained medical professionals to the areas of need across the region. The Pacific Basin AHEC Program supports eight Area Health Education Centers, (Ke Anuenue 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, Northern Mariana Islands, (Yap AHEC), located in Colonia, Federated States of Micronesia, (Waimanalo AHEC), located in Waimanalo and (American Samoa AHEC) located in Pago, Pago.

The Hawaii/Pacific Basin AHEC depends upon a region-wide network of AHEC training sites and community learning centers to accomplish activities in five areas (all of which are interrelated in the overall picture of health): recruiting underrepresented minority students to health science careers; training students in rural and underserved areas, often in interdisciplinary teams; recruiting providers to rural areas and providing activities to improve retention (particularly continuing education and teaching opportunities); providing and facilitating community-based health education; providing distance learning options across the region for health information and education. *For more information on this program, contact Norma J. Hatot at (301) 443-2681 or nhatot@hrsa.gov.*

University of Hawaii
Kelley Withy, MD, PHD
AHEC Program Director
Phone: (808) 692-1060
Email: withyk@hawaii.rr.com

Healthy Start Program: HRSA's Healthy Start (HS) Program addresses the factors associated with infant mortality and other adverse maternal and infant health outcomes, particularly among African-American and other minority groups. Specifically, the goals of HS are to reduce disparities in access to and utilization of health services; improve the quality of the local health care system; empower women and their families; and, increase consumer and community voices and participation in health care decisions. Through the implementation of innovative community-driven interventions, HS works with individual communities to build upon their resources (outreach, health education, case management, utilization of prenatal/postnatal care); and to improve the quality of and access to healthcare for women and infants at both service and system levels.

The Healthy Start Eliminating Disparities in Perinatal Health Border Health program funds a HS grant located in Hawai'i. The overall purpose of Hawai'i's HS project, called The Big Island Perinatal Health Disparities Project, is to improve birth outcomes and other measures of perinatal, post-partum, infant and interconception health status among targeted women residing in Hawai'i County. The target populations identified include Native Hawaiian, Other Pacific Islander, Hispanic and Filipino women as well as adolescents (through age 18) who are either currently pregnant or meet criteria for enrollment into Interconception Care (ICC) services. The majority of Other Pacific Islander ethnicities that have entered Hawai'i in recent years are from the Republic of the Marshall Islands and the Federated States of Micronesia, two of the three nations, along with the Republic of Palau, that constitute the Compact of Free Association (COFA) nations. These women and their families are being served by our Healthy Start Hawai'i project.

Annual grant award: \$933,814 (20% of these funds are target to Native/Pacific Islanders. A more specific breakout is not available).

Project Director:
Chiyome L Fukino

1250 Punchbowl Street
Honolulu, HI 96813
(808) 586-4410
Chiyome.funkino@doh.hawaii.gov

Hemophilia Treatment Program: 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. As an option, people with clotting disorders and their families may also be served. This program provides funds via a regional network to:

Guam Comprehensive Hemophilia Care Program
Department of Public Health & Social Services
123 Chalan Kareta
Mangilao, GU 96913-6304
Phone: (671) 735-7168
Fax: (671) 735-7351

Maternal and Child Health Service Block Grant Program (MCH): State Title V programs engage in a range of core MCH program functions including: needs assessment; program planning and development; service delivery, coordination, and financing; standard setting and monitoring; technical assistance; information and education; and reporting. State programs also develop community-based, culturally competent networks of preventive and primary care that coordinate and integrate public and private sector resources and programs for pregnant women, mothers, infants, children (includes children with special health care needs) and adolescents. *For more information on this program, please contact Cassie Lauver at (301) 443-2204, or clauver@hrsa.gov.*

Maternal and Child Health Program Directors:

American Samoa

Jacki Tupua-Tulafono, MCH Coordinator
Phone: (684) 633-4616
Email: jtulafono@gmail.com

Federated States of Micronesia

Dionis Saimon, MCH Coordinator
Phone: 011 (691) 320-2619
Email: desaimon@fsmhealth.fm

Republic of the Marshall Islands

Hellen Jetnil-David, Director
Phone: 011 (692) 625-6941
Email: davidh@ntamar.net

Republic of Palau

MCH and Adolescent Health Coordinator
Phone: 011 (680) 488-2171
Email: shermadraisau@gmail.com

Commonwealth of the Northern Mariana Islands

Margarita Torres-Aldan, MCH Coordinator
Phone: (670) 236-8714
Email: mtaldan@gmail.com

Guam

Margarita Gay Bureau of Family Health and Nursing Services Administrator
Phone: (671) 735-7111
Email: margarita.gay@dphss.guam.gov
Sherry Madraisau

National Health Service Corps (NHSC): A network of primary care professionals and sites committed to improving the health of underserved communities. To support their service, the NHSC provides clinicians with financial support in the form of loan repayment and scholarships to those committed to a career in primary care and service in health professional shortage areas

(HPSAs). More than 30,000 health professionals have served with NHSC since 1972. The FY 2010 field strength totals 7,530 and is among the largest in the program's history. NHSC plays a key role in expanding the availability of primary care, dental, and mental and behavioral health services, and enhances the safety net for persons who would otherwise lack access to healthcare. *For more information on this program, please contact Phil Budashewitz, at (301) 443-1372 or pbudashewitz@hrsa.gov.*

Pacific AIDS Education and Training Center (PAETC): The AETCs Program is a network of 11 regional centers (and more than 130 associated sites) that train 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 six U.S. jurisdictions in the Asian Pacific Region. The HAETC collaborates with the Ayuda Foundation of Guam in order to support the AIDS Education and Training Center sub-site in Chuuk, an island state in the Federated States of Micronesia. Trainings include: one-hour didactic presentations, biannual intensive training, satellite case conferences, and full-day seminars. The program goal is to increase the number of health care providers who are educated and motivated to counsel, diagnose, treat, and medically manage individuals with HIV infection and to help prevent high risk behaviors that lead to HIV transmission. *For more information about this program, please contact Lynn R. Wegman, Deputy Director, Division of Training and Technical Assistance, HIV/AIDS Bureau, HRSA (301) 443-5658, lwegman@hrsa.gov.*

Contact information for the HI Local Performance Site (LPS):

Cyril Goshima, MD
Director/PI
University of Hawai'i, Manoa
John A. Burns School of Medicine
3675 Kilauea Ave., Sinclair 200
Honolulu, HI 96816
Phone: (808) 945-1581

Poison Control: HRSA's Poison Control Program funds poison control centers to provide treatment advice, poisoning information and poison prevention education to the public and health care professionals 24 hours a day, 7 days a week, 365 days a year. These funds also support poison control centers' toxic and public health surveillance activities.

Guam funds are provided through Oregon Health and & Sciences University Poison Center to provide services to Guam; Federated States of Micronesia (FSM) funds are provided through Nebraska Regional Poison Center to establish poison control services in FSM and American Samoa (AS) funds are also provided through Nebraska Regional Poison Center to provide poison control services in AS. *For more information on this program, please contact Maxine Jones at (301) 443-6192 or mjones@hrsa.gov.*

Primary Care Associations (PCAs): To assist HRSA-funded health centers in increasing access to comprehensive, culturally competent, quality primary health care services, the HRSA Bureau of Primary Health Care has developed partnerships with state, regional, and national organizations to provide

- Training and technical assistance in fiscal and program management (program requirements)
- Operational and administrative support (performance improvement)

- Program development/analysis

State/Regional Primary Care Associations (PCAs) are private, non-profit organizations that provide training and technical assistance to health centers and other safety-net providers, support the development of health centers in their state, and enhance the operations and performance of health centers. *For more information on this program, please contact Angela R. Powell at (301) 594-4445 or apowell@hrsa.gov.*

Public Health Training Center Program: CALPACT, the California-Pacific Public Health Training Center, will address 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 partners: 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.

CALPACT activities address three goals, informed by rigorous ongoing assessment of needs:

- 1) Increase the knowledge and skills of our super-region's workforce through both conventional and innovative tactics focusing on the public health core competencies;
- 2) Identify and enlarge the scope of collaborative projects, disseminating "best practices" and innovations;
- 3) Increase the current field practice opportunities in underserved communities for more than 500 graduate students enrolled in our combined accredited public health programs.

For more information on this program please contact:

Jeffrey S. Oxendine, MBA, MPH
Principal Investigator
Director, The Regents of the University of California
Center for Public Health Practice
School of Public Health
140 University Hall
Berkeley, CA 94720-7360
Phone: (510) 642-2414
Fax: (510) 643-1200
E-mail: oxendine@berkeley.edu

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 RCPB will enable to: 1) establish the first Primary Care Office for the Pacific in year one; 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. *For more information on this program, please contact Maria Benke at (301) 443-2629 or mabenke@hrsa.gov, or alternately LaKeisha Jones at (301) 443-4371 or LJones@hrsa.gov.*

Rural Health Care Services Outreach Program: The Rural Health Care Services Outreach Program (“Outreach Program”) supports projects that demonstrate creative or effective models of outreach and service delivery in rural communities that are responsive to any unique cultural, social, religious, and linguistic needs of the target population. Applicants may propose projects to address the needs of a wide range of population groups including, but not limited to, underserved populations, the elderly, pregnant women, infants, adolescents, rural minority populations and rural populations with special health care needs. Programs funded have varied greatly and have brought care that would not otherwise have been available to at least two million rural citizens across the country. The emphasis of this grant program is on service delivery through collaboration, requiring the grantee to form a consortium with at least two additional partners. Another emphasis of this grant program is sustainability. Grant funds are meant to serve as seed money to these rural communities, encouraging grantees to be self-sufficient after the 3-year grant period. Through consortia of local providers and others, rural communities have managed to provide a variety of services such as hospice, dental care for children, and prenatal care in many remote areas. *For more information on this program, please contact Kathryn Umali at (301) 443-7444 or kumali@hrsa.gov.*

The Ryan White HIV/AIDS Treatment Extension Act of 2009: 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. *For more information on this program, please contact Karen Ingvoldstad at (301) 443-4603 or kingvoldstad@hrsa.gov.*

Project Coordinators for HIV/AIDS Part B grantees:

American Samoa

Fara Utu
HIV/AIDS Program Coordinator
Phone: (684) 633-2437
Email: Farautu@yahoo.com

Commonwealth of the Northern Mariana Islands

John Dax Moreno
HIV/AIDS Program Coordinator
Phone: (670) 664-4050
Email: johndax.moreno@gmail.com

Federated States of Micronesia

Johnny Hebel, HIV/AIDS Coordinator
Phone: 011 (691) 320-2619
Email: hiv@mail.fm

Guam

Arthur Sanagustine, Acting Director
Phone: (671) 735-7102
Email: Arthur.sanagustine@dphss.guam.gov

Republic of the Marshall Islands

Russell Edwards, HIV/STD Coordinator
Phone: 011 (692) 625-7251

Republic of Palau

Stevenson J. Kuartei, Project Director
Phone: 011 (680) 767-2555
Email: s_kuartei@palau-health.net

State Early Childhood Comprehensive Systems (SECCS) Grants: The purpose of the State Early Childhood Comprehensive Systems (ECCS) Grant Program is to assist States and Territories in their efforts to build and implement Statewide Early Childhood Comprehensive Systems that support families and communities in their development of children that are healthy and ready to learn at school entry. These systems must be multi-agency and comprised of the key public and private agencies that provide services and resources to support families and communities in providing for the healthy physical, social, and emotional development of all young children. *For more information on this program, please contact Dena Green at (301) 443-9768 or dgreen@hrsa.gov.* For information on a specific early childhood comprehensive systems program in a specific territory, please see the contact information below:

Commonwealth of the Northern Mariana Islands

Margarita Torres Aldan, MHP
MCH Program Director
Department of Public Health
P.O. Box 500409
Saipan, MP 96950
Phone: (670) 236-8714
Fax: (670) 236-8700
E-mail: mtaldan@vzpacifica.net
Alternate Email: mtaldan@gmail.com

Guam

Elaine Eclavea, Health, Wellness, and
Prevention Coordinator
University of Guam
Office of Academic Affairs
UOG Station
Mangilao, GU 96923
Phone: (671) 735-2466
Fax: (671) 7352448
E-mail: elaine.eclavea@guamcedders.org

Republic of Palau

Marjorie Kintol, ECCS Coordinator
Family Health Unit
Republic of Palau
Bureau of Public Health
PO Box 6027
Koror, Palau PW 96940
Tele: 011 (680) 488-4804 ext. 228
Fax: 011 (680) 488-5618
Email: m_kintol@palau-health.net
Alternate Email: tulichkintol@gmail.com

State System Development Initiative (SSDI): 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, please contact Scott Snyder at (301) 443-0345 or ssnyder@hrsa.gov.*

SSDI Program Directors:

American Samoa

Elizabeth I. Ponausua
Program Director
State Systems Development Initiative
Phone: (684) 633-5379
Email: eponausua.doh@gmail.com

Commonwealth of the Northern Mariana Islands

TaAnn Kabua, Program Director
State Systems Development Initiative
Phone: (670) 236-8715
Email: taannkabua@gmail.com

Federated States of Micronesia

Vita Akapito Skilling, Secretary
Dept. Health, Education, and Social Affairs
Program Director, State Systems
Development Initiative
Phone: 011 (691) 320-2619
Email: vskilling@fsmhealth.fm

Republic of Palau

Berry Moon Watson
Program Director
State Systems Development Initiative
Phone: 011 (680) 488-2172
Email: berry@palaunet.com

The Guam/Micronesia (G/M) AHEC Program: Established in 2009 to improve the health of the underserved in the region through collaborative regional training initiatives across the Pacific through training and recruitment partnerships that will improve diversity, distribution and quality of the health professions workforce. The G/M AHEC Program Office 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 model Yap AHEC serves the 4th state of FSM). The G/M AHEC emphasizes community-based, in-country (local) and interisland training for health professions of students and healthcare providers while enhancing health career education and recruitment from elementary to community college levels. *For more information on this program please contact:*

University of Guam
 Karen Cruz, AHEC Program Director
 Phone: (671) 735-2651
 Email: Kcruz@uguam.uog.edu

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 and their families. The TBI program funds grants that support State TBI needs assessments, the development of action plans based on those needs assessments, and innovations in the TBI service system. The program also provides funds to 57 states and territories for Protection and Advocacy services for individuals with TBI. *For more information on this program, please contact Donelle McKenna at (301) 480-1312 or Dmckenna@hrsa.gov.*

Universal Newborn Hearing Screening Program (UNHS): The UNHS program funds grants that support hospitals and birthing facilities in choosing screening equipment, training newborn hearing professionals, managing data, and educating physicians, parents and hospital staff. Newborn screening programs underscore the importance of early diagnosis and treatment by pediatric health professionals who urge that hearing diagnoses be made by the time an infant is 3 months of age. Although hundreds of hospitals operate hearing screening programs, nationally approximately 97% of all newborns today are screened for hearing loss before being discharged. *For more information on this program, please contact Irene Forsman at (301) 443-9023 or iforsman@hrsa.gov.*

Program	AS	CNMI	GUAM	FSM	RMI	ROP
Children's Oral Healthcare Program	\$0	\$0	\$0	\$0	\$160,000	\$0
Consolidated Health Centers Program (330 Health Centers)	\$584,523	\$0	\$1,128,071	Pohnpei \$215,771 Yap \$678,374	\$595,074	\$854,518
Emergency Medical Services for Children (EMSC) Program	\$130,000	\$130,000	\$130,000	\$0	\$0	\$0
Hawaii / Pacific Basin Area Health Education Center (AHEC) Program	\$69,702	\$69,702	\$0	\$69,702	\$0	\$69,702
AHEC Hawaii-ARRA Equipment to Enhance Training for Health Professions	\$28,860	\$28,860	\$106,280	\$83,534	\$0	\$22,100
Healthcare and Other Facilities	\$693,000	\$0	\$396,000	\$0	\$0	\$0
Hemophilia Treatment Program	\$0	\$0	\$4,500	\$0	\$0	\$0
Maternal and Child Health Block Grant Program	\$497,378	\$469,747	\$768,173	\$525,011	\$232,108	\$149,214

Program	AS	CNMI	GUAM	FSM	RMI	ROP
National Health Services Corps (NHSC) Scholarship and Loan Repayment Program[1]	\$176,012	\$324,022	\$44,741	\$0	\$0	\$0
Poison Control Program[2]	\$15,000	\$0	\$30,000	\$12,466	\$0	\$0
Rural Health Care Services Outreach	\$0	\$84,000	\$0	\$0	\$0	\$0
Ryan White HIV/AIDS Treatment Extension Act of 2006 Program Part B	\$52,663	\$57,276	\$286,530	\$58,186	\$52,820	\$50,000
State Early Childhood Comprehensive Systems (SECCS) Grant Program	\$0	\$105,000	\$105,000	\$0	\$0	\$105,000
State System Development Initiative (SSDI) Program	\$93,713	\$93,713	\$0	\$93,713	\$0	\$93,713
The Guam/Micronesia (G/M) Pacific Basin Area Health Education Center (AHEC) Program	\$0	\$0	\$306,613	\$359,866	\$267,738	\$0
Traumatic Brain Injury Program (TBI)	\$20,000	\$20,000	\$20,000	\$0	\$0	\$0
Universal Newborn Hearing Screening (UNHS) Program	\$261,000	\$149,948	\$250,000	\$300,000	\$150,000	\$150,000
TOTAL	\$2,621,851	\$1,532,268	\$3,575,908	\$2,396,623	\$1,457,740	\$1,494,247
TOTAL JURISDICTION SPECIFIC FUNDING						13,078,637

[1] NHSC assignees: 7 Scholars; 9 Loan Repayers; AS: 2 MD/DO, 3 Physician Assistants; CNMI: 4 MD/DO, 1 Certified Nurse-Midwife, 2 Licensed Professional Counselors, 2 Physician Assistants, 1 Nurse Practitioner; Guam: 1 MD/DO; FSM: 1 FPMD.

[2] Guam funds are provided through Oregon Health and Sciences University Poison Center to respond to calls from Guam; FSM and AS funds are provided through Nebraska Regional Poison Center to respond to calls from FSM and AS.

HRSA FUNDING PROVIDED REGIONALLY	
Primary Care Associations (PIPCA)	\$145,000
California-Pacific Public Health Training Center (CALPACT)	\$485,064
Regional Collaborative for the Pacific Basin	\$30,000

Pacific AIDS Education Training Center/ Hawaii (AETC)	\$408,579
TOTAL REGIONAL FUNDING	\$1,068,643

TOTAL HHS/HRSA FUNDS AWARDED IN FY2010: \$14,147,280 (amount includes jurisdiction specific & Regional Funding)

Office of the Assistant Secretary for Health

OFFICE OF MINORITY HEALTH

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. It is a competitive grant awarded for up to three years in a given funding cycle.

The Office of Minority Health awarded the State Partnership Program to Improve Minority Health Grant to the Guam Department of Public Health and Social Services in the amount of \$130,000 in FY 2010. *For more information on this program, contact Christina Perez at (415) 437-8124 or christina.perez@hhs.gov.*

In FY 2010, the OMH Resource Center provided funding via: Capacity Building Awards, Health Information Campaign Awards, and a Pacific Resource and Training Center Award. *For more information on funding for these awards please contact Henry Ocampo at (510) 797-7682 or hocampo@minorityhealth.hhs.gov.*

Program	AS	CNMI	GUAM	FSM	RMI	ROP
OMH: State Partnership Program	\$0	\$0	\$130,000	\$0	\$0	\$0
OMH: Capacity Building Award	\$0	\$20,000	\$40,000	\$0	\$0	\$0
OMH: Health Info Campaign Award	\$0	\$0	\$20,000	\$0	\$0	\$0
TOTAL	\$0	\$20,000	\$190,000	\$0	\$0	\$0

OFFICE OF POPULATION AFFAIRS

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, and extramarital abstinence education and counseling. The broad range of services does not include abortion as a method of family planning. *For more information on these programs, contact Rebecca Meece at 415-437-8403 or Rebecca.Meece@hhs.gov.*

Family Planning Grants Authorized Representatives:

American Samoa

Tali Peau
 FP Coordinator, Nurse Practitioner
 American Samoa Medical Center Authority
 P.O. Box LBJ
 Pago Pago, AS 96799
 Phone: (684) 644-7416
 Fax: (684) 633-4893
 Email: tlagipeau@lbj.as

Commonwealth of the Northern Mariana Islands

Arielle Buyum, BSN, MPH, CPH
 Family Planning Program Manager
 CNMI Department of Public Health
 P.O. Box 500409CK
 Saipan, MP 96950
 Phone: (670) 234-9850 ext. 2143
 Fax: (670) 236-8700
 Email: Arielle.buyum@dph.gov.mp

Federated States of Micronesia

Dionisio Saimon, Program Manager
 Family Health Unit
 FSM Department of Health & Social Affairs
 P.O. Box PS 70
 Palikir, Pohnpei FM 96941
 Phone: 011 (691) 320-2619/2643/2872
 Fax: 011 (691) 320-5263
 Cell: 011 (691) 921-7930
 Email: desaimon@fsmhealth.fm

Guam

Margarita Bautista Gay, RN,MN
 Bureau of Family Health & Nursing Administrator
 Department of Public Health & Social Services
 Guam Family Planning Program
 123 Chalan Kareta
 Mangilao, GU 96913
 Phone: (671) 735-7111/7128
 Fax: (671) 734-7097
 Email: margarita.gay@dphss.guam.gov

Republic of the Marshall Islands

Hellen Jetnil-David, Director of Title X
 Ministry of Health & Environment
 P.O. Box 16
 Majuro, Marshall Islands MH 96960
 Phone: 011 (692) 247-5411
 Fax: 011 (692) 625-3432
 Email: davidh@ntamar.net

Republic of Palau

Berrymoon (Berry) Watson
 MCH/FP Administrator Family Health
 Ministry of Health, Bureau of Public Health
 P.O. Box 6027
 Koror, Palau PW 96940
 Phone: 011 (680) 488/1757
 Fax: 011 (680) 488-8135
 Email: berry@palaunet.com

Program	AS	CNMI	GUAM	FSM	RMI	ROP
OPA: Family Planning Grant	\$273,795	\$240,182	\$470,140	\$415,743	\$164,092	\$166,565
TOTAL	\$273,795	\$240,182	\$470,140	\$415,743	\$164,092	\$166,565

OFFICE ON WOMEN'S HEALTH

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.*

Project Director

Kate G. Baltazar
 Project Director
 WestCare Pacific Islands
 PO Box 23873 GMF
 Barrigada, GU 96921
 Phone: (671) 472-0219
 Fax: (671) 472-0217
 Mobile: (671) 488-9001
 Email: kate.baltazar@westcare.com

Program	AS	CNMI	GUAM	FSM	RMI	ROP
OWH: HIV Prev for Fem Adol/Youth at Greater Risk For Juvenile Delinquency	\$0	\$0	\$130,000	\$0	\$0	\$0
TOTAL	\$0	\$0	\$130,000	\$0	\$0	\$0

TOTAL HHS/OASH FUNDS AWARDED IN FY2010: \$2,070,517

<i>Substance Abuse and Mental Health Services Administration</i>

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, please contact John Morrow at (240) 276-1783 or john.morrow@samhsa.hhs.gov.*

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 support for children and youth with serious emotional disturbances and their families by encouraging the development and expansion of effective and enduring systems of care. *For more information on this program, please contact Gary Blau at (240) 276-1921 or gary.blau@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. *For more information on this program, please contact Fran Randolph at (240) 276-1892 or 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 in this program, please contact John Morrow at (240) 276-1783 or 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. *For more information in this program, please contact John Morrow at (240) 276-1783 or john.morrow@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 purposes include to prevent the onset and reduce the progression of substance abuse, strengthen substance abuse-related programs in communities, and build prevention capacity and infrastructure at the jurisdiction and community levels. *For more information on this program, please 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 collect, analyze, report, and utilize the National Outcome Measures (NOMs) data in a manner aligned with the Strategic Prevention Framework (SPF), SAMHSA's guiding framework for prevention. *For more information on this program, please contact Virginia McKay at (240) 276-2400 or Virginia.mckay-smith@samhsa.hhs.gov.*

Substance Abuse Prevention and Treatment Block Grant (SAPTBG): This program targets at-risk individuals to prevent addiction problems in vulnerable populations. It is an integral part of the President's Drug Treatment initiative and a foundation of state substance abuse programs. *For more information on this program, please contact Anne Herron at (240) 276-2856 or anne.herron@samhsa.hhs.gov. You may also contact Richard Moore at (240) 276-2572 or Richard.moore@samhsa.hhs.gov.*

Substance Abuse Technical Assistance Activities: Both CSAT and CSAP provide technical assistance to the 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) and State Systems Technical Assistance Project. 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 Anne Herron at (240) 276-2856 or anne.herron@samhsa.hhs.gov, Secondary point of contact is Richard Moore at (240) 276-2572 or Richard.moore@samhsa.hhs.gov, Third point of contact is Virginia McKay at (240) 276-2400 or Virginia.mckay-smith@samhsa.hhs.gov.*

Program	AS	CNMI	GUAM	FSM	RMI	ROP
CMHS MHBG	\$84,418	\$112,792	\$229,028	\$140,202	\$82,265	\$50,000
CMHS CSPG	\$0	\$0	\$100,000	\$0	\$0	\$0
CMHS SSPG	\$0	\$0	\$500,000	\$0	\$0	\$0
CMHS Other	\$775,778	\$0	\$0	\$0	\$0	\$0
CMHS PATH	\$50,000	\$50,000	\$50,000	\$0	\$0	\$0
CMHS PAIMI	\$230,800	\$230,800	\$230,800	\$0	\$0	\$0
CMHS State DIG	\$60,000	\$60,000	\$0	\$60,000	\$60,000	\$60,000
CSAP SPF SIG	\$1,313,095	\$974,674	\$996,000	\$1,276,606	\$946,134	\$0
CMHI	\$0	\$0	\$1,500,000	\$0	\$0	\$0
CSAP SEOW	\$0	\$0	\$0	\$0	\$0	\$0

Program	AS	CNMI	GUAM	FSM	RMI	ROP
SAPT BG Prevention	\$72,441	\$96,789	\$196,534	\$120,310	\$70,594	\$23,570
SAPT BG Treatment	\$289,763	\$387,156	\$786,134	\$481,241	\$282,375	\$94,282
CSAP Other	\$0	\$0	\$0	\$0	\$0	\$0
CSAT Other	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL	\$2,876,295	\$1,912,211	\$4,588,496	\$2,078,359	\$1,441,368	\$227,852

TOTAL HHS/SAMHSA FUNDS AWARDED IN FY2010: \$13,124,581

TOTAL HHS FUNDS AWARDED IN FY2010

Program	AS	CNMI	GUAM	FSM	RMI	ROP
ACF	\$10,262,539	\$6,442,035	\$21,113,665	\$250,000	\$0	\$1,638,906
AOA	\$1,332,880	\$821,735	\$3,399,794	\$0	\$0	\$0
ASPR	\$318,662	\$340,367	\$444,189	\$378,369	\$316,983	\$273,406
CDC	\$2,801,267	\$3,356,764	5,151,629	\$3,737,708	\$2,823,706	\$2,740,846
CMS	\$13,349,184	\$7,820,805	\$23,435,408	\$0	\$0	\$0
HRSA	\$2,621,851	\$1,532,268	\$3,575,908	\$2,396,623	\$1,457,740	\$1,494,247
HRSA*	\$1,068,643					
OASH	\$273,795	\$260,182	\$790,140	\$415,743	\$164,092	\$166,565
SAMHSA	\$2,876,295	\$1,912,211	\$4,588,496	\$2,078,359	\$1,441,368	\$227,852
TOTAL	\$33,836,473	\$22,486,367	\$62,499,229	\$9,256,802	\$6,203,889	\$6,541,822

TOTAL HHS FUNDS AWARDED IN FY2010: \$141,893,225

***Funding provided is used throughout the Pacific Basin, it is not jurisdiction specific.**

Department of Housing and Urban Development

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 by email at 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 by email at 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 by email at 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 by email at 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 by email at 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 by email at 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 by email at michael.s.flores@hud.gov.*

Resident Opportunities and 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 by email at 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 by email at michael.s.flores@hud.gov.

Additional contact information for Section 8, Family Self-Sufficiency and Public Housing programs:

Commonwealth of the Northern Mariana Islands

Joshua T. Sasamoto*
 Corporate Director
 Northern Marianas Housing Corporation
 P.O. Box 500514
 Saipan, MP 96950
 Phone: 670-234-7670
 Fax: 670-234-9021
 Email: jtsasamoto@nmhc.gov.mp

* Point of contact for Section 8 only

Guam

Marcel Camacho, Executive Director
 Guam Housing and Urban Renewal Authority
 117 Bienvenida Avenue
 Sinajana, GU 96910
 Phone: 671- 472-3910
 Fax: 671- 472-7565
 Email: mcamacho@ghura.org

Additional contact information for CDBG, HOME, Homeless programs, and ESG:

American Samoa

Lelei Peau, Deputy Director
 Department of Commerce
 American Samoa government
 Pago Pago, AS 96799
 Phone: (684) 633-5155
 Fax: (684) 633-4195

Commonwealth of the Northern Mariana Islands

Joshua T. Sasamoto, Corporate Director
 Northern Marianas Housing Corporation
 P.O. Box 50014
 Saipan, MP 96950
 Phone: (670) 234-7689
 Fax: (670) 234-7144
 Email: jtsasamoto@nmhc.gov.mp

Guam

Micheal J. Duenas, Chief Planner
 Guam Housing and Urban Renewal Authority
 117 Bienvenida Avenue
 Sinajana, GU 96910
 Phone: (671) 475-1407
 Fax: (671) 477-5057
 Email: mjduenas@ghura.org

Program	AS	CNMI	GUAM	FSM	RMI	ROP
CDBG	\$1,121,951	\$880,151	\$3,050,372	\$0	\$0	\$0
HOME	\$340,627	\$647,474	\$1,405,903	\$0	\$0	\$0
Homeless Assistance	\$0	\$0	\$946,921	\$0	\$0	\$0
ESG	\$47,441	\$63,386	\$128,791	\$0	\$0	\$0
Family Self Sufficiency	\$0	\$0	\$0	\$0	\$0	\$0
Family Self Sufficiency-Section 8 Vouchers	\$0	\$3,584,200	\$33,740,115	\$0	\$0	\$0

Program	AS	CNMI	GUAM	FSM	RMI	ROP
Public Housing Capital Funds	\$0	\$0	\$1,536,500	\$0	\$0	\$0
Public Housing Operating Funds	\$0	\$0	\$3,339,300	\$0	\$0	\$0
Resident Opportunities for Self Sufficiency	\$0	\$0	\$0	\$0	\$0	\$0
Section 8 Project Based	\$0	\$1,349,726	\$903,936	\$0	\$0	\$0
TOTAL	\$1,510,019	\$6,524,937	\$45,051,838	\$0	\$0	\$0

TOTAL HUD FUNDS AWARDED IN FY2010: \$53,086,794

DEPARTMENT OF THE INTERIOR

Office of Insular Affairs

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, contact Mark Brown (American Samoa and U.S. Virgin Islands) at (202) 208-5992 or Faride Komisar (CNMI and Guam) at (202) 219-1335.*

Discretionary Technical Assistance

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, please 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, please 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, contact Mark Brown (American Samoa and U.S. Virgin Islands) at (202) 208-5992 or Faride Komisar (CNMI and Guam) at (202) 219-1335.*

Program	AS	CNMI	GUAM	FSM	RMI	ROP
Am. Samoa Ops	\$22,752,000	\$0	\$0	\$0	\$0	\$0
Brown Treesnake	\$0	\$355,000	\$230,000	\$0	\$0	\$0
CIP Grants	\$9,383,000	\$10,995,000	\$5,360,000	\$0	\$0	\$0
Compact-FSM	\$0	\$0	\$0	\$104,760,000	\$0	\$0
Compact-Palau	\$0	\$0	\$0	\$0	\$0	\$14,000,000
Compact-RMI	\$0	\$0	\$0	\$0	\$65,624,000	\$0
Compact Impact	\$14,000	\$1,930,000	\$16,827,000	\$0	\$0	\$0
Coral Reef Initiative	\$50,000	\$30,000	\$50,000	\$195,000	\$49,000	\$0
Enewetak Support	\$0	\$0	\$0	\$0	\$500,000	\$0
Guam Infrastructure	\$0	\$0	\$2,000	\$0	\$0	\$0
Maintenance Assistance	\$200,000	\$141,000	\$320,000	\$788,000	\$340,000	\$0
Office of Insular Affairs	\$146,000	\$346,000			\$95,000	
Payments to US Territories	\$0	\$0	\$46,357,000	\$0	\$0	\$0
Technical Assistance	\$2,094,000	\$1,673,000	\$1,548,000	\$10,000	\$1,228,000	\$895,000
Water & Waste Water	\$0	\$750,000	\$250,000	\$0	\$0	\$0
TOTAL	\$34,639,000	\$16,220,000	\$72,942,000	\$105,753,000	\$67,836,000	\$14,895,000

TOTAL DOI/OIA FUNDS AWARDED FY2010: \$312,015,000

DEPARTMENT OF LABOR

Employment and Training Administration

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 contact 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, please 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, please 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, please 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, please 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, please contact Mr. John Jacobs at (415) 625-7940 or Jacobs.john@dol.gov.*

Workforce Investment Act, National Emergency 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, supertyphoons 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, please contact Mr. John Jacobs at (415) 625-7940 or Jacobs.john@dol.gov.*

American Samoa

WIA/NEG Contact:

Makerita Enesi, Division Chief
Agency for Human Resources (AHR)
Phone: (684) 633-4485
Fax: (684) 633-5667
Email: wiaidir@samoatelco.com

SCSEP Contact:

Valasi Giaso, Administrator
Territory Administration on Aging (TAOA)
Phone: (684) 633-1251
Fax: (684) 633- 2533
Email: vgaiso@yahoo.com

Commonwealth of the Northern Mariana Islands

WIA Contact:

Edith Deleon Guerrero
WIA Signatory and Director
Phone: (670) 664-1700/58
Fax: (670) 322-7333
Email: edithdeleon.guerrero@gmail.com

SCSEP Contact:

Dept of Community and Cultural Affairs
Melvin L.O. Faisao, Acting Secretary
Phone: (670) 664 -2576
Fax: (670) 664-2576
Email: faisaom@pticom.com

Guam

WIA/SCSEP/DPN/LMI Contact:

Maria Connelley, Director
Guam, Department of Labor (GDOL)
One Stop Career Center (OSCC)
Email: connent@ite.net

Secondary Point of Contact for Guam:

Jolleen Santos, Administrator
Phone: (671) 475-7073
Fax: (671) 475-7045
Email: jcsantos@guamcell.net

Republic of Palau

WIA Contact:

Josephine Ulengchong, Executive Director
Palau WIA Office
Phone: 011 (680) 488-2513
Fax: 011 (680) 488-5699

Email: sepuleng@gmail.com

Program	AS	CNMI	GUAM	FSM	RMI	ROP
Discretionary (Earmark) Grants	\$0	\$0	\$383,187	\$0	\$0	\$0
Disability Program Navigator (DPN)	\$0	\$0	\$80,000	\$0	\$0	\$0
National Emergency Grants (NEG)	\$24,857,608	\$0	\$0	\$0	\$0	\$0
Senior Community Services Program	\$1,173,657	\$391,218	\$1,173,657	\$0	\$0	\$0
Wagner Peyser (WIA)	\$0	\$0	\$332,336	\$0	\$0	\$0
Workforce Information Grant (WIG)	\$0	\$0	\$92,899	\$0	\$0	\$0
Workforce Investment Act Recovery Act (ARRA)	\$462,000	\$1,402,709	\$4,002,645	\$0	\$0	\$379,279
Workforce Investment Act Title 1B (WIA)	\$454,470	\$1,368,911	\$3,699,262	\$0	\$0	\$277,000
TOTAL	\$26,947,735	\$3,162,838	\$9,763,986	\$0	\$0	\$656,279

TOTAL DOL/ETA FUNDS AWARDED FY2010: \$40,530,838

Occupational Safety and Health Administration

Region IX 21(D) Consultation Program: Each region within OSHA has free and confidential safety and health consultation programs for all employers. The program is known as the OSHA 21(d) Consultation program. 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 hazards.

- The Guam Consultation Program has a staff of three, and an annual 100% Federally funded grant of \$273,000.
- The CNMI Consultation Program has a staff of three, and an annual 100% Federally funded grant of \$196,000.
- In addition to the free consultation services, both of these programs provide free safety and/or health training for employers.

Additional Federal grant opportunities for both Guam and CNMI include Susan Harwood Training grants, and ARRA grants. *For more information on this program, please contact Christine Hirai at (510) 637-3839 or hirai.christine@dol.gov.*

Region IX Susan Harwood Training Grants: OSHA awards grants to nonprofit organizations on a competitive basis through its Susan Harwood Training Grant Program. Grants are awarded to provide training and education programs for employers and workers on the recognition,

avoidance, and prevention of safety and health hazards in their workplaces. OSHA selects the safety and health topics and holds a national competition to award grants. *For more information on this program, please contact Marilyn Luke at (510) 637-3827 or luke.marilyn@dol.gov.*

Grant Eligibility: Nonprofit organizations, including community and faith-based organizations, that are not an agency of state or local government, are eligible to apply. State and local government supported institutions of higher education are also eligible to apply. Harwood grants have been awarded to various nonprofit organizations including professional associations, colleges, universities, and labor unions. Below is a list of some of the Region IX Susan Harwood grantees:

- University of California Berkeley LOHP
Basic Safety Training for Young Workers and Safety and Health Management Systems for Small Business Employers
- Asian Immigrant Women Advocates
Ergonomics
- Port of San Diego Ship Repair Association
Shipyards hazards Safety and Health Training to San Diego Ship Repair Workers
- University of Las Vegas
Fall Protection (and Focus Four) Safety and Health Training
- State Building and Construction Trades Council of California
Focus Four in Construction S&H Training

To ensure that safety and health related issues are shared with the many workers and employers from Asian countries, particularly in the Pacific Islands, Region IX has translated the OSHA poster into Chinese, Tagalog, Korean, Japanese, Thai, and Bangladeshi. Region IX is fortunate to have employees who are bilingual and provide translations in Chinese, Tagalog, Korean, Japanese, Samoan, Malay, Tamil, and Spanish. *For more information on this program, please contact Marilyn Luke at (510) 637-3827 or luke.marilyn@dol.gov.*

Program	AS	CNMI	GUAM	FSM	RMI	ROP
Region IX 21(D) Consultation	\$0	\$196,000	\$273,000	\$0	\$0	\$0
Region IX Susan Harwood Training Grants*	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL	\$0	\$196,000	\$273,000	\$0	\$0	\$0

TOTAL DOL/OSHA FUNDS AWARDED FY2010: \$469,000

*As the Susan Harwood grants become available, OSHA will notify the six Pacific jurisdictions of their availability. These grants are in the amounts of \$250,000 or less.

DEPARTMENT OF TRANSPORTATION

Federal Transit Administration

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, please 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, please 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, please 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, please 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, please contact Paul Page at (415) 744-2734 or paul.page@dot.gov.*

FTA points of contact in the Pacific:

American Samoa

Faleosina Voight, GM
Civil Highway Division
Department of Public Works
Phone: (684) 633-4141
Email: faleosina@yahoo.com

Commonwealth of the Northern Mariana Islands

Tim Thornburgh
Federal Programs Coordinator
CNMI Public School System
Phone: (670) 237-3010
Email: thornburght@gmail.com

Guam

Rally Pilipina, Planner
Guam Mass Transit Authority
Phone: (671) 475-4620
Email: Rally.Pilipina@doa.guam.gov

Program	AS	CNMI	GUAM	FSM	RMI	ROP
TOTAL	\$394,538	\$1,108,543	\$1,412,665	\$0	\$0	\$0

TOTAL DOT/FTA FUNDS AWARDED FY 2010: \$2,915,746

ENVIRONMENTAL PROTECTION AGENCY

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 contributions from local governments. *For more information on this program, please contact John McCarroll at (415) 972-3774 or mccarroll.john@epa.gov.*

Drinking Water and 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 \$37 million in 2010. *For more information on this program, please contact John McCarroll at (415) 972-3774 or mccarroll.john@epa.gov.*

John McCarroll, Manager
 Pacific Islands Office (CED-6)
 Communities & Ecosystems Division
 75 Hawthorne St.
 San Francisco, CA 94105
 Phone: (415) 972-3774
 Fax: (415) 947-3560
 Email: mccarroll.john@epa.gov

For more information on these EPA programs contact:

American Samoa

Michael Wolfram, Program Manager
 Pacific Islands Office (CED-6)
 Communities & Ecosystems Division
 75 Hawthorne St.
 San Francisco, CA 94105
 Phone: (415) 972-3027
 Fax: (415) 947-3560
 Email: wolfram.michael@epa.gov

Commonwealth of the Northern Mariana Islands

Carl Goldstein, Program Manager
 Pacific Islands Office (CED-6)
 Communities & Ecosystems Division
 75 Hawthorne St.
 Phone: (415) 972-3767
 Fax: (415) 947-3560
 Email: goldstein.carl@epa.gov

Guam

Michael Mann, Program Manager
 Pacific Islands Office (CED-6)
 Communities & Ecosystems Division
 75 Hawthorne St.
 San Francisco, CA 94105
 Phone: (415) 972-3505
 Fax: (415) 947-3560
 Email: mann.michael@epa.gov

Program	AS	CNMI	GUAM	FSM	RMI	ROP
Consolidated Environmental Protection Grants	\$2,400,000	\$3,546,095	\$3,478,459	\$0	\$0	\$0

Program	AS	CNMI	GUAM	FSM	RMI	ROP
Water Construction Funding	\$2,057,000	\$6,148,000	\$5,138,000	\$0	\$0	\$0
Wastewater Construction Funding	\$11,018,000	\$5,072,000	\$7,952,000	\$0	\$0	\$0
TOTAL	\$15,475,000	\$14,766,095	\$16,568,459	\$0	\$0	\$0

TOTAL EPA FUNDS AWARDED FY2010: \$48,809,554

FEDERAL EMERGENCY MANAGEMENT AGENCY

Buffer Zone Protection Program: To increase the preparedness capabilities of jurisdictions responsible for the safety and security of communities surrounding high-priority pre-designated Tier 1 and Tier 2 critical infrastructure and key resource (CIKR) assets, including chemical facilities, financial institutions, nuclear and electric power plants, dams, stadiums, and other high-risk/high-consequence facilities, through allowable planning and equipment acquisition. *For more information on the FEMA program, please contact Kevin Clark at (510) 672-7100 or kevin.clark@dhs.gov.*

Drivers License: To fund projects for integrating hardware, software, and information management systems to implement the REAL ID Act. *For more information on the FEMA program, please contact Kevin Clark at (510) 672-7100 or kevin.clark@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, and 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 the FEMA program, please contact Kevin Clark at (510) 672-7100 or kevin.clark@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 five separate grant programs (State Homeland Security Program; Urban Areas Security Initiative; Metropolitan Medical Response System; Operation Stone garden; and Citizen Corps Program). *For more information on the FEMA program, please contact Kevin Clark at (510) 672-7100 or kevin.clark@dhs.gov.*

Interoperable Emergency Communications Grant Program: To assist public safety agencies in planning, acquisition, deployment, and training for the use of interoperable communications systems that can utilize or enable interoperability with communications systems that utilize reallocated public safety spectrum for radio communications. *For more information on the FEMA program, please contact Kevin Clark at (510) 672-7100 or kevin.clark@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 Transportation Worker Identification Credential (TWIC) implementation. The Port Security Grant Program also provides funding to eligible ferry systems within eight specific priorities. *For more information on the FEMA program, please contact Kevin Clark at (510) 672-7100 or kevin.clark@dhs.gov.*

Program	AS	CNMI	GUAM	FSM	RMI	ROP
FY 2010 Buffer Zone Protection Program	\$0	\$0	\$200,000	\$0	\$0	\$0

Program	AS	CNMI	GUAM	FSM	RMI	ROP
FY 2010 Drivers License Security Grant Program	\$651,877	\$651,877	\$651,877	\$0	\$0	\$0
FY 2010 Emergency Management Performance Grant	\$866,585	\$857,515	\$938,922	\$50,000	\$0*	\$0
FY 2010 Homeland Security Grant Program	\$1,502,393	\$1,502,050	\$1,505,132	\$0	\$0	\$0
FY 2010 Interoperable Emergency Communications Grant Program	\$52,500	\$54,000	\$85,500	\$0	\$0	\$0
FY 2010 Port Security Grant Program	\$0	\$0	\$2,257,500	\$0	\$0	\$0
TOTAL	\$3,073,355	\$3,065,442	\$5,638,931	\$50,000	\$0	\$0

TOTAL FEMA PREPAREDNESS GRANTS AWARDED IN FY 2010: \$11,827,728

*Region made multiple attempts to reach out to grantee; however, grantee did not apply for grant award.

Outer Pacific Committee

Last Name	First Name	Department/Agency	Phone/Email	Fax
Araki	Lynnette	Department of Health and Human Services Health Resources and Services Administration	(301) 443-6204 laraki@hrsa.gov	(301) 443-2286
Asmundson	Rod	Food and Drug Administration Pacific Region Office	(510) 287-2715 Rod.asmundson@fda.hhs.gov	(510) 287-2739
Benke	Maria	Department of Health and Human Services Health Resources and Services Administration (Washington, DC)	(301) 443-2629 MBenke@hrsa.gov	(301) 443-2870
Blazej	Nova	Environmental Protection Agency Pacific Islands Office	(415) 972-3846 blazej.nova@epa.gov	(415) 947-8026
Blew	Robert	Federal Emergency Management Agency	(210) 295-5285 robert.blew@us.army.mil	(510) 627-7216
Cassens	Barbara	Food and Drug Administration San Francisco District	(510) 337-6783 barbara.cassens@fda.hhs.gov	(510) 337-6859
Clark	Kevin	Department of Homeland Security Federal Emergency Management Agency	(510) 627-7100 kevin.clark@dhs.gov	(510) 627-7112
Cwirko-Godycki	Anna	Department of Health and Human Services Administration on Aging	(415) 437-8788 anna.cwirko-godycki@aoa.hhs.gov	(415) 437-8782
Flores	Michael	Department of Housing and Urban Development Honolulu Field Office	(808) 522-8175 michael.s.flores@hud.gov	(808) 522-8194
Fujita	Gail	Department of Commerce Economic Development Administration (Honolulu)	(808) 541-3391 gfujita@eda.doc.gov	(808) 541-3138
Gallo	Bill	Department of Health & Human Services Centers for Disease Control & Prevention (Honolulu)	(808) 692-1604 bgallo@cdc.gov	(808) 692-1979
Jackson	Christine	Department of Education (Washington, D.C.)	(202) 260-2516 christine.jackson@ed.gov	(202) 260-4406
Jacobs	John	Department of Labor Employment & Training Administration	(415) 625-7940 jacobs.john@dol.gov	(415) 625-7923

Last Name	First Name	Department/Agency	Phone/Email	Fax
Jones	LaKeisha	Department of Health and Human Services Health Resources and Service Administration	(301) 443-4371 LJones@hrsa.gov	(301)443-2870
Knowles	Robert	Agency for Toxic Substances & Disease Registry	(415) 947-4317 knowles.robert@epa.gov	(415) 947-4323
Lim	Jeanette	Department of Education Risk Management Service (Washington, D.C.)	(202) 205-2788 jeanette.lim@ed.gov	(202) 260-7216
McCarroll	John	Environmental Protection Agency Pacific Islands Office	(415) 972-3774 mccarroll.john@epa.gov	(415) 947-3560
Nebenzahl	Deborah	Food and Drug Administration San Francisco District Office	(510) 337-6771 Deborah.nebenzahl@fda.hhs.gov	(510) 337-6701
Nessler	Kerry	Department of Health and Human Services Health Resources and Service Administration (Washington, D.C.)	(301) 443-2741 KNessler@hrsa.gov	(301) 443-2870
Ocampo	Henry	Department of Health and Human Services Office of Minority Health Resource Center	(510) 797-7682 hocampo@omhrc.gov	(510) 797-7682
Otter	Tina	Department of Education Office of the Secretary (Washington, D.C.)	(202) 401-0462 tina.otter@ed.gov	(202) 260-4406
Perez	Christina	Department of Health and Human Services Office of Minority Health/OASH	(415) 437-8124 Christina.Perez@hhs.gov	(415) 437-8004
Ocampo	Henry	Department of Health and Human Services Office of Minority Health Resource Center	(510) 797-7682 hocampo@omhrc.gov	(510) 797-7682
Port	Patricia	U.S. Department of the Interior Office of Environmental Policy and Compliance	(510) 817-1477 oepcsfn@aol.com	(510) 419-0177
Rydell	Mary	Department of Health and Human Services Centers for Medicare and Medicaid Services (Honolulu)	(808) 541-2732 mary.rydell@cms.hhs.gov	(808) 541-3887
Schenck	Tom	Department of Health and Human Services Centers for Medicare and Medicaid Services	(415) 744-3589 tom.schenck@cms.hhs.gov	(415) 744-2933
Simons	Nadine	Department of Health and Human Services Office of the Assistant Secretary of Health	(415) 437-8102 nadine.simons@hhs.gov	(415) 437-8004

Last Name	First Name	Department/Agency	Phone/Email	Fax
Sukys	Ray	Department of Transportation Federal Transit Authority	(415) 744-2737 raymond.sukys@dot.gov	(415) 744-2726
Tinitali	Marina	Department of the Interior Office of Insular Affairs (Washington, D.C.)	(202) 208-5920 marina_tinitali@ios.doi.gov	(202) 219-1989
Viens	Madeline	Department of Agriculture Food & Nutrition Services	(415) 705-1351 madeline.viens@fns.usda.gov	(415) 705-1364
Wada	Roylinne	Department of the Interior Office of Insular Affairs, Honolulu Field Office	(808) 525-5088 roylinne_wada@ios.doi.gov	(808) 525-5399
*Walmsley	John	Department of Health and Human Services OASH Office of Pacific Health	(415) 437-8114 john.walmsley@hhs.gov	(415) 437-8004
**Wasem	Cathy	Department of Health and Human Services OASH Office of Pacific Health (Honolulu)	(808) 541-2015 cathy.wasem@hhs.gov	(808) 541-3457
Wulff	James	Department of Labor Occupational Safety & Health Administration	(415) 625-2530 Wulff.James@dol.gov	(415) 625-2534
Yokota	Tessy	Social Security Administration (Honolulu)	(808) 541-1060 x3073 tessy.yokota@ssa.gov	(808) 541-3534
Zink	Steve	Department of Labor OSHA	(415) 625-2523 zink.steve@dol.gov	(415) 625-2534

*Committee Chair

**Committee Coordinator