



## Congressional Activities

Last week, the Congress passed the [Full-Year Continuing Appropriations Act](#) (CR) for fiscal year (FY) 2011 which contains nearly \$38 billion in cuts from last year's funding levels, representing the largest annual spending cut in U.S. history. While many programs across the federal government were slashed, reckless cuts as originally proposed by Republicans to domestic HIV/AIDS programs were blocked by Democrats and President Obama. Some highlights of the funding bill include:

- \$5.6 billion in funding for the Centers for Disease Control and Prevention (CDC), which is a cut of \$730 million from FY2010. CDC has 30 days to allocate these cuts across the entire agency and submit a spending plan to Congress. HIV/AIDS advocates are encouraged to weigh-in with CDC to ensure that HIV/AIDS funding critical for Black gay men is preserved;
- The funding bill **does not** contain language limiting the use of federal or District of Columbia funds to support Syringe Services Programs but does limit DC from using local funds for abortion services;
- The funding law maintains Title X family planning programs and funding for Planned Parenthood Federation of America, Inc. and its clinics but cuts global resources targeted to reproductive health;
- The funding bill maintains critical Patient Protection and Affordable Care Act resources to continue with implementation.

NBGMAC is concerned about a key provision of the funding bill that erodes efforts under the [Patient Protection and Affordable Care Act](#), which establishes offices of minority health in the six federal agencies in the Department of Health and Human Services (HHS) focused on strategies to reduce and ultimately eliminate health disparities.

The funding bill removes the requirement for the Secretary of Health and Human Services to provide resources to newly established OMH offices. HIV/AIDS community advocates and [Congressional Black Caucus](#) (CBC) members are becoming doubtful that that these new offices will receive adequate resources in the absence of this requirement. If this were to occur, successful achievement of goals related to health disparity elimination in the [National HIV/AIDS Strategy](#), LGBT goals included in Healthy People 2020, the Affordable Care Act and HHS's Action Plan to Reduce Racial and Ethnic Health Disparities would be threatened. NBGMAC will join CBC members

and other allies in strongly urging the Secretary to ensure that all of the OMHs are provided with adequate resources.

## Young Men's of Color Funding Opportunity

The [Centers for Disease Control and Prevention's](#) (CDC), Division of HIV/AIDS Prevention (DHAP) recently announced a [funding opportunity announcement](#) (FOA) for HIV/AIDS prevention services focused on young MSM and transgender persons of color. This FOA is consistent with CDC's overall shift in emphasis on identifying HIV positive individuals and targeting interventions to HIV positive persons. The funding opportunity builds on the National HIV/AIDS Strategy's call to employ high-impact, game-changing interventions to reduce new infections among Black gay men.

The FOA sets an aggressive 4% prevalence rate target. Community representatives and NBGMAC members have expressed concern about this target and whether it is realistic for Black gay community-based agencies to obtain. In a recent meeting with CDC leadership, NBGMAC Executive Committee members asked about the science used to justify this target. CDC leadership indicated that the National HIV Behavioral Study (NHBS) reveals an 8% rate of undiagnosed HIV infection among MSM. CDC did note that the testing sites in NHBS are not all community based settings, so the number may be a high target for CBO's. However, CDC expects that the CBO's will exceed the 4% target and indicated technical assistance would be provided to CBOs to reach the target. NBGMAC has been alerted to concerns from the Black gay community that the NHBS figures do not disaggregate the test results from individuals who already knew their status, and that resources must be balanced to ensure access to HIV prevention services for both HIV negative and positive individuals. NBGMAC is in dialogue with the CDC and continues to monitor these issues.

## Action Plan to Reduce Racial and Ethnic Disparities

The U.S. Department of Health and Human Services' [Action Plan to Reduce Racial and Ethnic Disparities](#) has been widely applauded since its release on April 8, 2011. The vision for the plan is "a nation free of disparities in health and health care." The Plan proposes a set of priorities, pragmatic strategies, and high-impact action to achieve Secretary Sebelius's strategic goals for the Department. The five goals that provide the framework for the plan for Fiscal Years 2010-2015 are:

- Transform health care;
- Strengthen the nation's Health and Human Services infrastructure and workforce;
- Advance the health, safety, and well-being of the American people;
- Advance scientific knowledge and innovation; and
- Increase the efficiency, transparency, and accountability of HHS programs.

Of particular note is the second goal of the Action Plan which provides an important opportunity for NBGMAC to further partner with HHS about protecting and building infrastructure and capacity to respond to the health needs of Black gay men in organizations that are embedded in our community and led by Black gay men. More detailed information about the Action Plan can be found at [minorityhealth.hhs.gov](http://minorityhealth.hhs.gov).