



Grants to the Outer Pacific FY 2009

Federal Regional Council Outer Pacific Committee Region IX

March 2010
(Final)

www.frc9.us

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FEDERAL REGIONAL COUNCIL

Outer Pacific Committee 2009 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 eleventh 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 2009 are the **Border Committee**, the **Tribal Affairs Committee**, the **Faith-Based Committee**, the **Homelessness Committee (Region IX Interagency Council on Homelessness)**, the **Guam-CNMI Build-up Committee/Task Force** and the **Outer Pacific Committee**. The **Guam-CNMI Build-up Committee/Task Force** was established as a committee of the FRC 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 prepared for the buildup in terms of programs and technical assistance, where possible. At the end of 2009, the Guam-CNMI Build-up Committee/Task Force was combined with the Outer Pacific Committee. Executive Orders or Administration initiatives serve as the underlying authority to guide each committee's work in fulfilling Administration priorities.

The Outer Pacific Committee deals with issues related to the three U.S. Flag Territories of Guam, American Samoa, and the Commonwealth of the Northern Mariana Islands (CNMI); and the three Freely Associated States of the Federated States of Micronesia (FSM), Republic of the Marshall Islands (RMI), and the 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 obtained from select programs operating from central offices on the East coast. Although this report is meant to be a comprehensive account of federal support to the Pacific jurisdictions, it is not completely encompassing since entities with potentially supporting programs such as the Department of Defense, USAID and possibly others are not included. The report will be posted on the FRC's Webpage at www.frc9.us and will contain numerous links to Websites with additional information.

Committee Accomplishments

The Outer Pacific Committee (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 2009 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 2009 the committee convened on eleven occasions and is pleased to report accomplishments in the following areas:

- The OPC prepares an annual report on "Grants to the Outer Pacific" for use by Federal representatives but which is also widely requested by officials in the Pacific jurisdictions. The current report reflecting FY 2009 grants is the tenth year this document has been

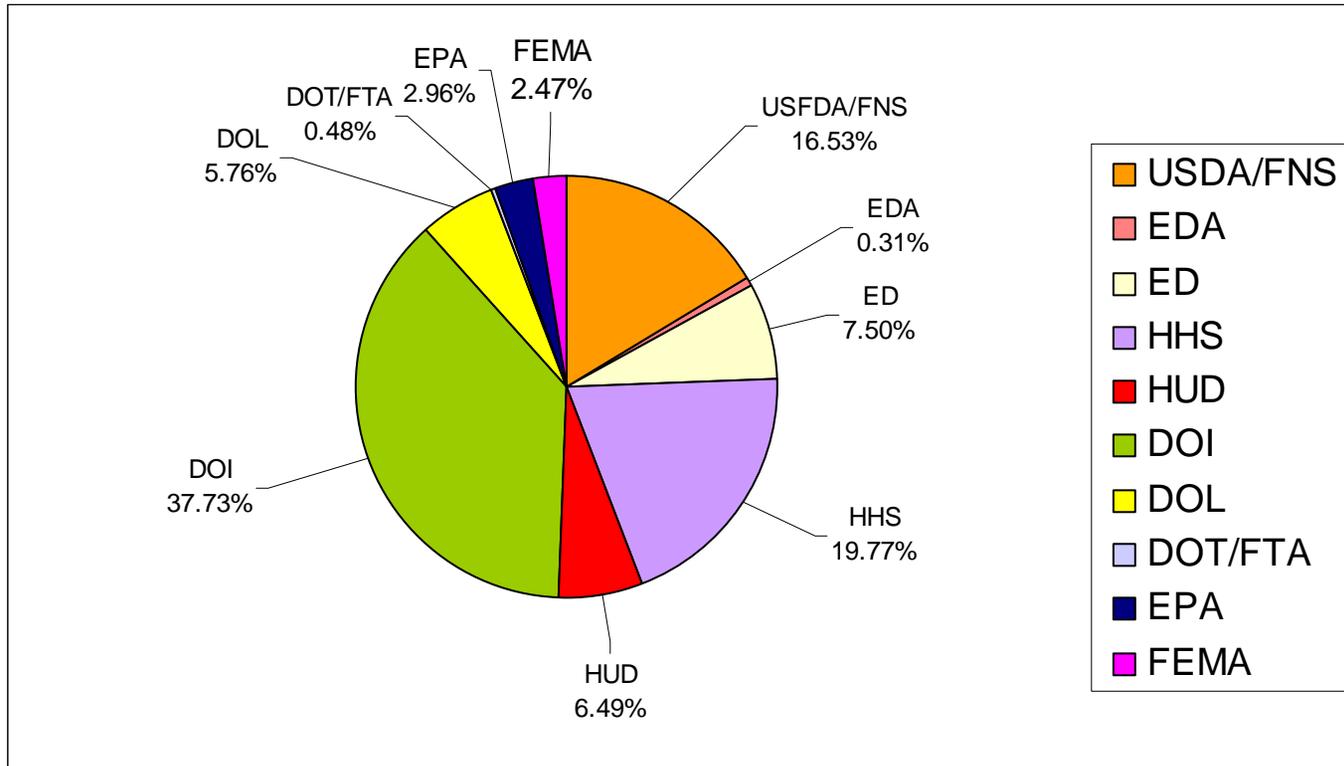
prepared. It outlines information primarily for agencies that are represented either on the Federal Regional Council's Outer Pacific Committee or have a Regional Office presence. Copies of the report will be distributed for the fourth year in a row at the Interagency Group on Insular Areas (IGIA) meeting 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 2009 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 accomplished in the Pacific last year 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 also participates at the Federal Regional Council (FRC) meetings when the Governor of Guam and his staff attend to share their concerns regarding the buildup. At the end of 2009, the Guam-CNMI Build-Up Committee/Task Force merged with the OPC and military buildup issues in the Western Pacific continue to have high priority at OPC monthly meetings.
- Following the tsunami in American Samoa in late SEP 2009, the committee conducted an important discussion on federal agency response to the disaster and how federal agencies in Region IX can work together more effectively in future emergency responses.
- 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 2009 and participated in our monthly meetings.

The Outer Pacific Committee 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.

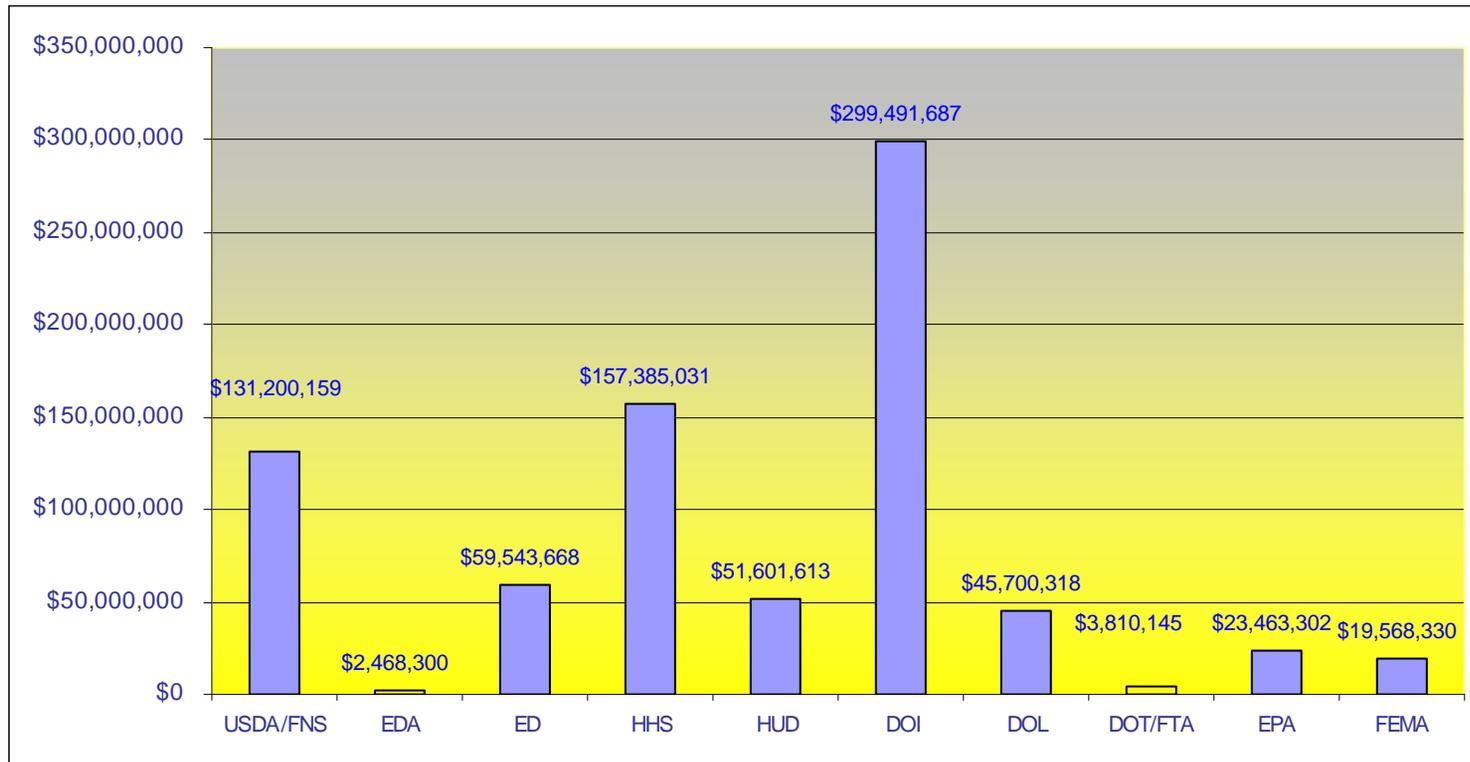
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% Total Pacific Funding per Department



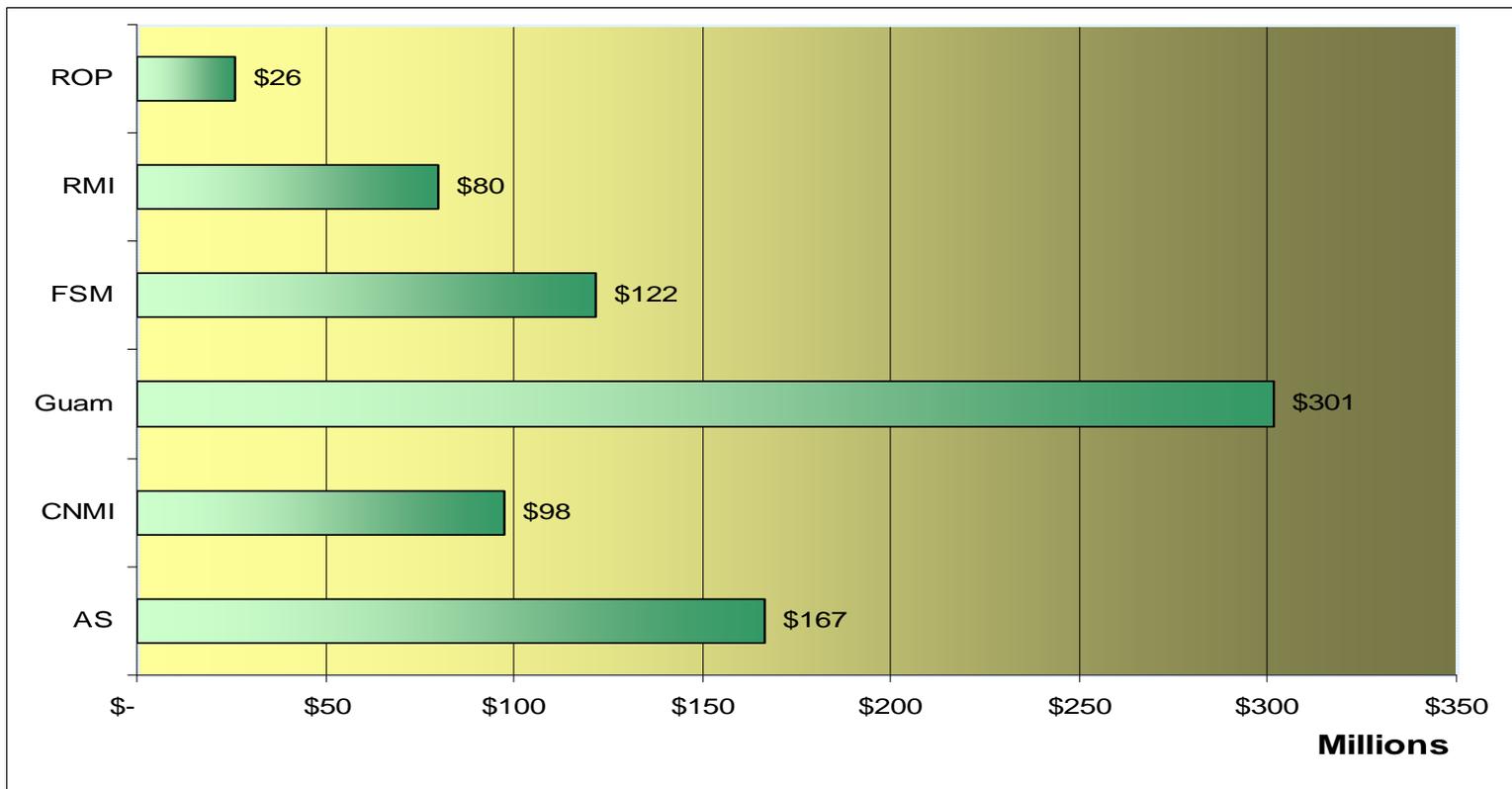
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Total Amount Pacific Funding per Department



FEDERAL REGIONAL COUNCIL Outer Pacific Committee 2009 Report

Total Amount Federal Funding per Jurisdiction (in millions)



FEDERAL REGIONAL COUNCIL

Outer Pacific Committee 2009 Report

Grants and Programs in the Outer Pacific

Department of Agriculture - Food and Nutrition Service

Supplemental Nutrition Assistance

Program (SNAP): The Food Stamp Program 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 allotments of 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 the national Food Stamp Program) provide cash and 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.*

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.*

Child Nutrition Programs:

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, more than 26 million children in 94,000 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*.

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.

Child and Adult Care Food Program: This program provides reimbursement for healthy meals served by participating family daycare providers, child care centers, after-school care programs, homeless shelters and adult daycare centers.

For more information on these programs, contact Zita Viernes at 415-705-1336 x320, or zita.viernes@fns.usda.gov.

Child Nutrition Programs Block Grants:

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 this program, contact Zita Viernes at 415-705-1336 x320, or zita.viernes@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. TEFAP received American Recovery and Reinvestment Act (ARRA) stimulus funds in FY 2009.

For more information on this program, contact Stephen Pichel, Director of Field Operations at 415-705-1365 x517 or Stephen.Pichel@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 Stephen Pichel at 415-705-1365 x517, or Stephen.Pichel@fns.usda.gov.*

Program	AS	CNMI	Guam	FSM	RMI	ROP
Food Stamps*	\$4,799,289	\$ 9,852,000	\$62,077,302			
WIC*	\$7,244,744	\$4,303,834	\$8,280,641			
Child Nut Prog Block, Cil, & SAE***			\$8,228,097			
TEFAP Admin Entitlement (TEFAP Food Value)		\$48,780	\$97,058 \$211,881*			
TEFAP ARRA		\$20,439	\$40,667			
Child Nutrition Programs Block Grants*	\$17,675,763	\$7,748,689				
Special Food Assistance					\$570,975	
TOTAL	\$29,719,796	\$21,973,742	\$78,935,646		\$570,975	

TOTAL USDA FNS FUNDS FY 2009: \$131,200,159

* includes the value of food benefits and administrative funds

***includes the value of administrative funds and commodities

NOTE: All amounts reflected above are funded amounts.

Department of Commerce - Economic Development Administration

Department of Commerce - Economic Development Administration

For more information on the Department of Commerce, Economic Development Programs in the Outer Pacific, contact Gail Fujita at 808-541-3391 or gfujiita@eda.doc.gov.

- FY 2009 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 .
- American Recovery Program pursuant to the American Recovery and Reinvestment Act of 2009, Pub. L. No. 111-5, 123 Stat. 115 (2009).
- 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) .

Program	AS	CNMI	Guam	FSM	RMI	ROP
Public Works Grant	\$	\$	\$ 2,000,000	\$	\$	\$
Small Business Assistance	\$ 220,000 (for each jurisdiction)					
Technical Assistance	\$50,000 (1 grant for TA for Guam) and \$ 66,225 (AS, CNMI, Guam) and \$110,000 (1 grant for TA for CNMI)					
TOTAL	\$ 58,741	\$168,741	\$2,108,742	\$36,667	\$36,667	\$36,667

TOTAL DOC EDA FUNDS FY 2009: \$2,446,225

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. Contact: Barbara Humes, (202) 260-7405, barbara.humes@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. Web site: www.ed.gov/programs/tfasegp. Contact: Donna Sabis-Burns, (202) 260-1425, Donna.Sabis-Burns@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 education 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. Web site: www.ed.gov/programs/nfdp. For more information on this program, contact Cynthia Ryan, (202) 401-1436, Cynthia.Ryan@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. Web Site: www.ed.gov/programs/fie. Contact: Holly Clark, (202) 401-4942, Holly.Clark@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. Web Site: www.ed.gov/programs/elseccounseling. Contact: Loretta McDaniel, (202) 245-7870, loretta.mcdaniel@ed.gov.

Fund for the Improvement of Education (FIE) - Partnerships in Character

Education: This program supports character education projects that are integrated into regular classroom instruction, are consistent with state academic content standards and with other educational reforms. Projects supported should help students develop good character by teaching character elements such as caring, civic virtue and citizenship, justice and fairness, respect, responsibility, trustworthiness, giving, or other elements of character. Projects must take into consideration the view of parents, students, students with disabilities, and other members of the community, including members of private and nonprofit organizations, in the design and implementation of the character education program(s). Web Site:

www.ed.gov/programs/charactered. Contact: Sharon Burton, (202) 245-7867; sharon.burton@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, Strengthening Minority-Serving Institutions, College Access Challenge Grant, and others. Web site: www.ed.gov/about/offices/list/ope/hep.html. Contact: Vicki Payne (202) 502-7764, vicki.payne@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. Web site: www.ed.gov/programs/lsl. Contact: Pilla Parker, (202) 260-3710, pilla.parker@ed.com.

Parent 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. Web site: www.ed.gov/programs/pirc. Contact: Anna Hinton, (202) 260-1816, anna.hinton@ed.gov.

Reading First: This program focuses on putting proven methods of early reading instruction in classrooms. Web site: www.ed.gov/programs/readingfirst. Contact: Carolyn Lampila, (202) 260-0722, carolyn.lampila@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, and others. Web site: www.ed.gov/about/offices/list/osers/rsa. Contact: David Esquith, (202) 245-7336, david.esquith@ed.gov.

Safe and Drug Free Schools and Communities Grants: The program provides support to states for a variety of drug and violence prevention activities focused primarily on school-age youths. Web site: www.ed.gov/about/offices/list/osdfs. Contact: Paul Kesner, (202) 245-7889, paul.kesner@ed.gov.

Special Education: Special Education: These programs provide 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. Includes 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, Technical Assistance, Personnel Development, and Parent Training and Information Centers. Web site: www.ed.gov/about/offices/list/osers/osep. Contact: Ruth Ryder, (202) 245-7629, ruth.ryder@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. Web site:

<http://www.ed.gov/programs/leap> and <http://www.ed.gov/programs/sleap>. Contact: Greg Gerrans, (202) 369-9560, greg.gerrans@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. Web site:

www.ed.gov/about/offices/list/ovae. Contact: Edward Smith, (202) 245-7602, edward.smith@ed.gov.

Program	AS	CNMI	Guam	FSM	RMI	ROP
Consolidated Grants to Insular Areas	\$443,600	\$34,904	\$115,789			
Education Grant Program for the Territories and Freely Associated States	\$1,080,000	\$1,016,277	\$303,467			\$1,000,000
English Language Acquisition			\$300,000			
FIE - Counseling Demonstration Program	\$322,125					
FIE - Earmarks	\$1,094,000					
FIE - Partnerships in Character Education			\$414,760			
Federal Student Aid			\$20,410			
Higher Education Programs	\$1,595,792	\$1,445,010	\$3,338,803	\$1,682,724	\$309,373	\$1,359,372
Improving Literacy Through School Libraries	\$24,470	\$8,888	\$29,486			
Parent Information and Resource Centers	\$424,622		\$374,290			
Reading First	\$623,668					
Rehabilitation Services and Disability Research	\$1,289,498	\$2,028,932	\$3,389,016			
Safe and Drug Free Schools	\$900,459		\$386,946			
Special Education	\$6,454,618	\$4,841,350	\$15,252,194	\$3,413,587	\$1,477,689	\$888,370
Vocational and Adult Education	\$229,267	\$390,097	\$1,049,571			\$190,244
TOTAL	\$14,482,119	\$9,765,458	\$24,974,732	\$5,096,311	\$1,787,062	\$3,437,986

TOTAL ED FUNDS AWARDED IN FY 2009: \$59,543,668

Department of Health and Human Services

Administration for Children and Families

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 415-8424 or tracy.donovan@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 Care Development Fund (CCDF):** CCDF has made available \$4.86 billion to states and territories in 2009. This program, authorized by the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (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.*

Low-Income Home Energy Assistance (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, contact Emily Hughes at 415-437-8412 or emily.hughes@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, contact Emily Hughes at 415-437-8412 or emily.hughes@acf.hhs.gov.*

Strengthening Communities Fund State, Local and Tribal Government Capacity Building (SCF) (ARRA): SCF provides one-time awards up to \$250,000 to State, city, county, and Indian/Native American Tribal government offices (e.g., offices responsible for outreach to faith-based and community organizations or those interested in initiating such an effort), or their designees, to build the capacity of nonprofit faith-based and community organizations to better serve those in need and to increase nonprofit organizations' involvement in the economic recovery. Grantees will use

program funds to provide free capacity building services to nonprofit organizations and to build their own capacity to provide such services to nonprofits. The grant period for this award is 24 months. *For more information on this program, visit www.acf.hhs.gov/programs/ocs/scf/.*

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 Sally Flanzer at 415-437-8425 sally.flanzer@acf.hhs.gov.*

Promoting Safe and Stable Families (CWS IVB-2): 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 Sally Flanzer at 415-437-8425 sally.flanzer@acf.hhs.gov.*

Office on Child Abuse and Neglect: Under Title II of the Child Abuse Prevention and Treatment Act, administratively known as the Community-Based Child Abuse Prevention (CBCAP) Program, activities

include establishment and maintenance of a statewide child abuse prevention network, public education and awareness, respite care, parent support, home visiting, and other locally based prevention services. Funds are awarded on a formula basis: a base of \$200,000, and additional amount based on the number of children in the state and an incentive bonus for leveraged claims, that is, non-Federal money that was spent on prevention in the previous year. Territories have the option to request these funds through the consolidated funding process rather than apply directly for the funds in this program. That has been the case since the program began. Each territory receives \$200,000. *For more information, contact Melissa Lim Brodowski at mbrodowski@acf.hhs.gov.*

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 in that state or territory. 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.*

Administration on Developmental Disabilities Protection and Advocacy (ADD P&A): The Developmental Disabilities Assistance and Bill of Rights Act provides for each state or territory to establish a P&A System 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 (PADD) program, the P&A also includes 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.htm.*

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, contact Emily Hughes at 415-437-8412 or emily.hughes@acf.hhs.gov.*

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.*

Office on Child Abuse and Neglect:

Under Title II of the Child Abuse Prevention and Treatment Act, administratively known as the Community-Based Child Abuse Prevention (CBCAP) Program, funds are

made available annually to states, DC, PR and the territories through an annual application process for the purposes set out in the legislation. Activities include establishment and maintenance of a statewide child abuse prevention network, public education and awareness, respite care, parent support, home visiting, and other locally based prevention services. Funds are awarded on a formula basis: a base of \$200,000 and additional amount based on the number of children in the state and an incentive bonus for leveraged claims, that is, non-Federal money that was spent on prevention in the previous year. Territories have the option to request these funds through the consolidated funding process rather than apply directly for the funds in this program. Each territory receives \$200,000. *For more information on this program, contact Melisa Lim Brodowski at mbrodowski@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 Sally Flanzer at 415-437-8425 or sally.flanzer@acf.hhs.gov.*

***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.*

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. *For more information on this program, contact Deborah Oppenheim at 415-437-8426 or deborah.oppenheim@acf.hhs.gov.*

*Stimulus funds connected to existing programs.

For additional info on programs not listed above, visit: www.acf.hhs.gov/index.html.

Centers for Medicare and Medicaid Services

****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 Brian Zolynas at 415-744-3568 or brian.zolynas@cms.hhs.gov.*

****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 are now offering coverage through CHIP, and it is jointly funded with federal and state monies. *For more information on this program, contact Brian.Zolynas at 415-744-3568 or brian.zolynas@cms.hhs.gov.*

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

Health Resources and Services Administration

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.

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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.

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
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HTC ID: 861
Region: Region IX
Phone: (671) 735-7168
Fax: (671) 735-7351

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 territories are funded to improve the quality of health care for children through training and the expeditious transport and transfer of children to a definitive care facility. Each of the territories conducted an initial assessment to evaluate the availability of: pediatric medical control 24/7; pediatric equipment on patient care units; and inter-facility transfer agreements and guidelines. They also evaluated the status of the Territory/State to determine whether pediatric recognition systems for medical emergencies and trauma were in place, pediatric continuing education was required prior to recertification of Basic Life Support and Advanced Life Support providers, and the EMSC Program had established permanence based on the criteria set by the Program. The EMSC Outer Pacific Regional grantees are also working to ensure that the data they are collecting is National EMS Information System compliant and organizing/evaluating prehospital and hospital personnel training programs. The contact information for the EMSC Project Managers is as follows:

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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 90% of all newborns today are screened for hearing loss before being discharged.

Children's Oral Healthcare Program: These grants, administered by the Maternal and Child Health Bureau, are part of 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 Pamela Vodicka at 301-443-2753 or pvodicka@hrsa.gov.

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

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ohnmar@u.washington.edu

State Early Childhood Comprehensive Systems (SECCS) Grants: The purpose of the State Early Childhood Comprehensive Systems (SECCS) 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:

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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 jurisdictions 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).

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Ryan White HIV/AIDS Treatment

Modernization Act of 2006: 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 AIDS Drug Assistance Program funding 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**

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Pacific AIDS Education and Training Center (PAETC):

The AETC 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 the six U.S.-affiliated Pacific jurisdictions. 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.

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808-945-1581

National Health Service Corps (NHSC): NHSC is committed to improving the health of the Nation's underserved. A unique group of dedicated and caring clinicians provide primary health care to adults and children in the communities of greatest need across the nation. Recruiting and retaining the right health professionals to deliver health care in underserved communities often involves developing and preparing sites and communities, and looking for innovative solutions. More than 28,000 health professionals have served with NHSC since 1972. Current field strength totals more than 3,800 clinicians/health care professionals whose careers are influencing the outcomes of underserved populations and communities. Many of these clinicians have remained in service after fulfilling their initial NHSC commitments.

Pacific Basin Area Health Education Center (AHEC): 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 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.

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Poison Control: The American Association of Poison Control Centers (AAPCC) is a nationwide organization of poison centers and interested individuals. The Association's objectives are to provide a forum for poison centers and interested individuals to promote the reduction of morbidity and mortality from poisonings through public and professional education and scientific research, and to set voluntary standards for poison center operations.

Guam funds are provided through Oregon Health and Sciences University Poison Center to provide services to Guam; funds are provided through Nebraska Regional Poison Center to establish poison control services in FSM and AS.

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.

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.

Regional Collaborative for the Pacific Basin: The Regional Collaborative for the Pacific Basin 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 is intended to provide 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.

Administration on Aging

Older Americans Act (OAA): OAA provides funding to the Pacific jurisdictions 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 can have access to clear and uniform information and counseling on all available long-term care services. *For more information on these programs, contact Anna Cwirko-Godycki at 415-437-8788 or anna.cwirko-godycki@aoa.hhs.gov.*

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Office of Public Health and Science

- 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.

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- OFFICE ON WOMEN'S HEALTH -

Advancing System Improvements to Support Targets for Healthy People 2010 (ASIST2010): A three-year cooperative agreement program funded by the DHHS Office on Women's Health from FY 2008 through FY 2010. ASIST2010 uses a public health systems approach to improve performance on two or more Healthy People 2010 (HP 2010) objectives that target women and/or men in the following Focus Areas:

- Cancer
- Diabetes
- Heart Disease and Stroke
- Access to Quality Health Services
- Educational and Community-Based Programs
- Nutrition and Overweight Physical Activity and Fitness

The goals of the ASIST2010 program are to:

1. Provide additional support to existing public health systems/collaborative partnerships to enable them to add a gender focus to HP 2010 objectives that track the health status of women and/or men, to help improve gender outcomes in the targeted population and/or geographic area;
2. Improve surveillance/information systems that allow tracking of program progress on HP 2010 objectives at the grantee level; and
3. Develop and implement a plan to sustain the program after OWH funding ends.

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.

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- OFFICE OF MINORITY HEALTH -

Since 2002, the Office of Minority Health Resource Center (OMHRC) Capacity Building Division has been working with local, regional and federal partners to implement a jurisdictional initiative aimed at increasing the organizational capacity of HIV prevention and treatment services including Sexually Transmitted Diseases/Tuberculosis (STDs/TB) co-infections within the U.S.-affiliated Pacific Island Jurisdictions (PIJ). The *OMH Pacific Island Jurisdiction Initiative of Great Need* was funded through the Minority AIDS Initiative, with two years of funding, to establish and support community based organizations and groups, establish a Pacific Resource and Training Center, introduce health information and social marketing campaign activities, develop and disseminate new health materials, strengthen collaboration and coordination of HIV/STDs/TB activities in the region, and sponsor a Pacific regional assessment. This initiative focuses on building the ability of organizations and community leaders to partner with their local and regional health departments to strategically address HIV/AIDS/STDs/TB throughout the Pacific.

In FY 2009, OMHRC provided funding via: Capacity Building Awards, Health Information Campaign Awards, and a Pacific Resource and Training Center Award.

**Office of the Assistant Secretary for
Preparedness and Response**

**FY09 ASPR, Hospital Preparedness
Program Summary**

Purpose: 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.

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**Substance Abuse and Mental Health
Services Administration**

**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. Contact: Fran Randolph, Director, Division of Service and Systems Improvement, SAMHSA Center for Mental Health Services Fran.Randolph@samhsa.hhs.gov.

CMHS Community Mental Health Services Block Grant (MHBG): This program provides funds to states and territories to support the provision of comprehensive community-based mental health services to adults with serious mental illness and children with serious emotional disturbances. It helps states develop and expand community-based systems of care. Contact: Joyce Berry, Director, Division of State and Community Systems Development, SAMHSA Center for Mental Health Services Joyce.berry@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. Contact: Joyce Berry, Director, Division of State and Community Systems Development, SAMHSA Center for Mental Health Services Joyce.berry@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. Contact: Joyce Berry, Director, Division of State and Community Systems Development, SAMHSA Center for

Mental Health Services
Joyce.berry@samhsa.hhs.gov.

CMHS Campus Suicide Prevention Grantee Program (CSPG): The CSPG program provides funding to support institutions of higher education to prevent suicide and suicide attempts. It also provides for the enhancement of services for students with mental health problems that put them at risk for school failure and suicidal behavior. Contact: Anne Mathews-Younes, Director, Division of Prevention, Traumatic Stress and Special Programs, SAMHSA Center for Mental Health Services Anne.mathews-younes@samhsa.hhs.gov.

CMHS State/Tribal Suicide Prevention Grants (SSPG): The purpose of this program is to build on the foundation of prior suicide prevention efforts in order to support States and tribes in developing and implementing statewide or tribal youth suicide prevention and early intervention strategies, grounded in public/private collaboration. Such efforts must involve public/private collaboration among youth-serving institutions and agencies and should include schools, educational institutions, juvenile justice systems, foster care systems, substance abuse and mental health programs, and other child and youth supporting organizations. Contact: Anne Mathews-Younes, Director, Division of Prevention, Traumatic Stress and Special Programs, SAMHSA Center for Mental Health Services Anne.mathews-younes@samhsa.hhs.gov.

CMHS Cooperative Agreements for Comprehensive Community Mental Health Services for Children and Their Families Program (CACCMHS SWFN): The purpose of this program is to support states, political subdivisions within states, the District of Columbia, territories, Native American Tribes and tribal organizations in developing integrated home and community-based services and supports for children and youth with serious emotional disturbances and their families by

encouraging the development and expansion of effective and enduring systems of care.

Contact: Gary Blau, Branch Chief, Child, Adolescent and Family Services Branch, SAMHSA Center for Mental Health Services
Gary.blau@samhsa.hhs.gov.

Substance Abuse Prevention and Treatment Block Grant (SAPT BG Treatment):

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. Contact: Anne Herron, Director, Division of State and Community Assistance, SAMHSA Center for Substance Abuse Treatment

Anne.herron@samhsa.hhs.gov.

Bettina Scott, Acting Director, Division of State Programs, SAMHSA Center for Substance Abuse Prevention

Bettina.scott@samhsa.hhs.gov.

Substance Abuse Technical Assistance Activities (SAPT BG Prevention):

Both CSAT and CSAP provide technical assistance to the Pacific jurisdictions. CSAT provides TA and training in substance abuse treatment evidence-based practices and licensure/certification through its Northwest Addiction Technology Transfer Center (NWATTC). CSAP provides technical assistance to the jurisdictions on issues including evidence-based prevention practices, Strategic Prevention Framework support and prevention workforce development through its Western Center for the Application of Prevention Technology (CAPT). Contact: Anne Herron, Director, Division of State and Community Assistance, SAMHSA Center for Substance Abuse Treatment

Anne.herron@samhsa.hhs.gov.

Bettina Scott, Acting Director, Division of State Programs, SAMHSA Center for Substance Abuse Prevention

Bettina.scott@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, reduce substance abuse-related programs in communities, and build prevention capacity and infrastructure at the jurisdiction and community levels. Contact: Bettina Scott, Acting Director, Division of State Programs, SAMHSA Center for Substance Abuse Prevention

Bettina.scott@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. Contact: Bettina Scott, Acting Director, Division of State Programs, SAMHSA Center for Substance Abuse Prevention

Bettina.scott@samhsa.hhs.gov.

Centers for Disease Control and Prevention

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 water borne diseases. Contact Audrey Williams at AKWilliams@cdc.gov.

The Sexual Violence Prevention and Education Grant 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. *Contact Sandra Cashman at Scashman@cdc.gov.*

The Epidemiology and Laboratory Capacity Program (ELC): Was formed in 1995 as a key component of CDC's national strategy to address emerging infectious disease threats. The program plays a critical role in strengthening national infectious disease infrastructure by providing funding to all 50 state health departments, 6 local health departments (Los Angeles County, Philadelphia, New York City, Chicago, Houston, and the District of Columbia), Puerto Rico, and the Republic of Palau to prevent, detect, and respond to new and emerging infectious diseases. *Contact Sandra Browning at Sbrowning@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. *Contact Bill Gallo at Bgallo@cdc.gov.*

The Diabetes Prevention and Control Programs (DPCPs) Grant Program: Provides funding for state-based DPCPs in all 50 states, the District of Columbia, and eight U.S.-affiliated jurisdictions. *Core capacity-building* activities emphasize developing state health department expertise to plan, design, and coordinate diabetes control activities. Sixteen DPCPs receive expanded funding to establish *comprehensive programs*, so they can implement statewide, multilevel public health approaches to reduce the burden of diabetes. The primary goal of the state-based DPCPs is to improve access to affordable, high-quality diabetes care and services, with priority on reaching high-risk and disproportionately affected populations.

Contact Bernice Moore at BMoore1@cdc.gov.

The Chronic Disease Prevention and Health Promotion Grant Program: Supports a variety of activities that improve the Nation's health by preventing chronic diseases and their risk factors. Program activities include one or more of our major functions: supporting states' implementation of public health programs; public health surveillance; translation research; and developing tools and resources for stakeholders at the national, state, and community levels. *Contact Sheryl Heard at Sheard@cdc.gov.*

The Diabetes Today--Phase II Grant Program: Builds on the foundation developed through the initial Pacific Diabetes Today training, focusing on implementing multiple community-based interventions in several Pacific communities, and evaluating the impact of diabetes prevention and control activities for the Pacific region. This includes assessment of community capacity and infrastructure development and the identification and cataloguing of effective interventions unique for the Pacific Region. *Contact Bernice Moore at BMoore1@cdc.gov.*

National Cancer Control and Prevention Program: Improves and promotes health among at-risk cancer populations and reduces cancer morbidity and mortality. *Contact Susan White at SWhite@cdc.gov.*

Improving 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. *Contact Carla White at Carlawhite@cdc.gov.*

Healthy Communities Grant Program:

Supports community efforts to improve the health and built environment of underserved populations is intended to build effective environmental health programs and enhance the delivery of environmental health services. Environmental health services may be defined as programs that ensure that communities have adequate air and water quality, access to safe food and shelter, effective vector control programs; and efficient or functional waste management systems, etc. *Contact Bill Gallo at Bgallo@cdc.gov.*

Immunizations and Vaccines for

Children: 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. *Contact Mimi Larzelere at mlarzelere@cdc.gov.*

The HIV Prevention Projects for the

Pacific Islands: Focuses on delivering evidence-based HIV prevention interventions, including preventing prenatal HIV transmissions; 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. *Contact Walter Chow at wchow@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). *Contact Andy Heetderks at Aheetderks@cdc.gov.*

The Comprehensive STD Prevention Systems (CSPS) Grants:

Supports the design, implementation, and evaluation of high quality, 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, including AI/AN and other minorities. 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 at traditional and nontraditional health care settings for adolescent and young adult women 25 years old and younger. Chlamydia and gonorrhea are two leading causes of infertility among young women. Syphilis Elimination funds are provided to assure that the necessary infrastructure is in place to carry out the goals of syphilis elimination, including development of

individual state plans (including behavior change, screening, diagnosis, treatment and follow-up) that must be in place to assure the reduction of early and congenital syphilis. *Contact Thom Cylar at tcylar@cdc.gov.*

HIV/AIDS Surveillance: Funding supports cooperative agreements with health departments and ministries to conduct HIV/AIDS surveillance, serosurveillance, incidence, behavioral, and prevalence studies. These activities provide data that are critical to targeting the delivery of HIV prevention, care, and treatment. *Contact Adria Prosser at Aprosser@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. *Contact Janice McMichael at jmcmichael@cdc.gov.*

Public Health Emergency Response(PHER) Grant: Funding provided under this grant includes Vaccination, Antiviral Distribution/Dispensing and Administration, Community Mitigation Activities, Laboratory, Epidemiology, Surveillance Activities, Vaccine Delivery, Vaccine Administration, and Communications Planning and implementation of influenza Mass Vaccination Campaigns. *Contact Janice McMichael at jmcmichael@cdc.gov.*

Program	AS	CNMI	Guam	FSM	RMI	ROP
ACF						
Temp. Assist. for Needy Families			\$4,188,267			
Child Support Enforcement			\$2,061,737			
State Access & Visitation			\$100,000			
Child Care and Dev. Fund (CCDF)	\$2,831,968	\$1,938,850	\$3,978,605			
Low Income Home Energy Assistance	\$111,406	\$84,835	\$244,251			
Community Services Block Grant (CSBG)	\$969,678	\$574,910	\$917,726			
Community Services Block Grant Stimulus (COS2)	\$1,299,836	\$770,658	\$1,230,195			
PSSF Case Worker Visitation	\$4,473	\$3,278	\$9,785			
Child Welfare Services (CWSS)	\$187,191	\$155,897	\$326,385			
Community-Based Child Abuse Prev	\$200,000	\$200,000	\$200,000			
Admin. On Dev Disabilities (ADD) Councils	\$246,853	\$246,853	\$246,853			
ADD Protection and Advocacy	\$200,791	\$200,791	\$200,791			
University Affiliated Programs			\$528,000			
Dev. Disabilities Projects of National Significance			\$200,000			
Social Services Block Grant (SSBG)	\$48,518	\$58,621	\$293,103			

Program	AS	CNMI	Guam	FSM	RMI	ROP
Promoting Safe & Stable Families (FPSS)	\$219,016	\$179,224	\$396,009			
Fam Violence Prev & Serv St Grants	\$127,776	\$127,776	\$127,776			
Child Abuse and Neglect State Grant-Part 1	\$58,078	\$55,609	\$67,351			
Improve the Well Being of Children - Native Am Healthy Marriage Initiative			\$426,011			
Children's Justice Act CJA	\$55,037	\$53,498	\$60,819			
Head Start Projects (CH)	\$55,037	\$53,498	\$60,819			
Head Start Quality Improvement and COLA (ARRA)	\$618,633		\$228,859			\$216,953
Child Care & Dev Fund Stimulus	\$2,662,774	\$1,823,015	\$3,740,906			
Strengthening Comm. Fund St, Local & Tribal Gov't Capacity Building	\$250,000					
Social and Economic Development (ANA)	\$319,814	\$192,956	\$440,602			
Grant Languages Program (ANA)			\$286,817			
Transitional Living Program (Runaway and Homeless Youth)			\$200,000			
Street Outreach (Runaway and Homeless Youth)			\$100,000			
Basic Centers		\$45,000	\$200,000			
Voting Access - Individuals w/ Disab. State & Loc gov't (VOTE)			\$100,000			
Voting Access - Individuals w/ Disabilities (VOTEP)			\$35,000			
Leveraging		\$35,122				
CMS						
Medicaid	\$11,726,000	\$6,402,230	\$17,355,000			
CHIP	\$1,332,152	\$1,221,139	\$5,177,242			
HRSA						
MCH Block Grant	\$498,448	\$470,757	\$769,826	\$526,140	\$232,608	\$149,535
TBI Program	\$20,000	\$20,000	\$20,000			
EMSC	\$130,000	\$130,000	\$130,000			
Universal New Born Hearing	\$261,000	\$219,748	\$145,300	\$300,000	\$150,000	\$150,000
Targeted Oral Health Program (TOHSS)					\$160,000	

Program	AS	CNMI	Guam	FSM	RMI	ROP
SECCS Grants		\$105,000	\$140,000			\$105,000
SSDI	\$94,644	\$ 94,644		\$ 94,644		\$ 94,644
Ryan White Program Part B	\$34,083	\$45,287	\$238,109	\$38,950	\$24,970	\$43,567
PAETC	\$28,038	\$28,037	\$28,037	\$28,037	\$28,036	\$28,036
NHSC	\$50,000	\$135,500	\$75,000			
Pacific Basin AHEC		\$102,152		\$102,152		\$102,152
Poison Control (HSB)	\$ 15,000		\$30,000	\$ 12,466		
330 Health Centers	\$507,711		\$1,077,180	\$653,187	\$498,415	\$686,552
330 Health Centers ARRA Funds	\$2,548,180		\$1,029,379	\$668,820	\$960,885	\$869,625
Pacific Islands Primary Care PIPCA	\$65,597	\$65,597	\$65,597	\$65,596	\$65,596	\$65,596
Region Collaborative for the Pacific Basin	\$49,838	\$49,838	\$49,838	\$49,837	\$49,837	\$49,837
AOA						
AOA Services	\$1,400,881	\$862,202	\$3,559,658			
OFFICE OF PUBLIC HEALTH AND SCIENCE						
OPA: Family Planning Grant	\$268,795	\$201,282	\$480,140	\$410,743	\$159,092	\$161,565
OMH: Capacity Building Award			\$20,000	\$40,000		
OMH: Health Info Campaign Award		\$20,000		\$70,000		
OMH: Pacific Resource & Training Center Award			\$100,000			
OWH: ASIST2010		\$450,000				
OWH: HIV Prev for Fem Adol/Youth at Greater Risk For Juv Delinq			\$130,000			
ASPR						
Hospital Prep	\$313,248	\$333,241	\$428,879	\$368,660	\$311,702	\$271,559
SAMHSA						
CMHS PATH	\$50,000	\$50,000	\$50,000			
CMHS MHBG	\$78,196	\$94,480	\$211,293	\$146,055	\$69,391	\$50,000
CMHS PAIMI	\$227,600	\$227,600	\$ 227,600			
CMHS State DIG			\$ 71,000	\$ 71,100	\$50,000	\$ 71,100
CMHS CSPG			\$100,000			
CMHS SSPG			\$500,000			
CMHS SWFN			\$60,000			
CMHI			\$1,000,000			
SAPT BG Treatment	\$265,484	\$320,767	\$717,359	\$495,870	\$235,590	\$88,643
SAPT BG Prev	\$66,371	\$80,192	\$179,340	\$123,968	\$58,898	\$22,161
CSAP SPF SIG	\$1,313,095	\$974,674		\$1,276,606	\$946,134	
CSAP SEOW		\$37,500		\$37,500	\$37,500	
CSAP Other			\$30,000			

Program	AS	CNMI	Guam	FSM	RMI	ROP
CDC						
Preventive Health Services Block Grant	\$53,534	\$40,803	\$221,007	\$64,998	\$26,669	\$21,258
Sexual Violence Prev & Education		\$11,889	\$23,111	\$18,918	\$11,345	
EPI & Lab Capacity for Infectious Diseases						\$92,413
Early Hearing Detection & Intervention (EHDI)	\$150,000	\$142,735	\$150,782	\$179,585		\$150,000
Collab Performance Agreement Tobacco, Diabetes, & BRFSS	\$197,683	\$221,128	\$554,139	\$711,206	\$186,301	\$234,754
ARRA Immunization Grants	\$232,406	\$185,995	\$251,656	\$251,656	\$129,781	\$117,729
Public Health Emergency Preparedness	\$376,905	\$418,947	\$442,425	\$455,796	\$387,201	\$329,686
Nat'l Cancer Prev & Control Program	\$443,558	\$442,201	\$555,578	\$475,000	\$149,646	\$756,725
Improving Health & Ed Outcomes of Young People	\$100,998	\$102,500	\$101,800		\$100,000	\$95,000
Healthy People & HealthyCommunities						\$100,982
Immunization & Vaccines for Children	\$470,065	\$568,356	\$938,358	\$1,178,763	\$969,889	\$197,645
HIV Prevention Projects for the Pacific Islands	\$182,583	\$170,547	\$522,960	\$369,752	\$128,241	\$246,707
Tuberculosis Eliminations & Lab	\$70,005	\$177,353	\$413,273	\$345,310	\$87,988	\$127,542
Comprehensive STD Prevention Systems (CSPS)	\$63,247	\$119,789	\$117,077	\$113,366	\$136,934	\$43,609
HIV/AIDS Surveillance	\$10,000	\$22,712	\$25,000	\$18,130	\$18,042	\$22,090
Public Health Emergency Preparedness (PHEP)	\$376,905	\$418,947	\$442,425	\$455,796	\$387,201	\$329,686
Public Health Emergency Response (PHER)	\$1,220,673	\$1,314,849	\$1,652,993	\$1,412,387	\$1,230,818	\$1,078,576
TOTAL	\$ 38,079,000	\$ 25,554,630	\$ 65,057,454	\$ 11,536,250	\$ 7,988,710	\$9,168,987

TOTAL HHS FUNDS FOR FY 2009: \$157,385,031

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: Provides 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 awards 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.*

Section 8: Provides 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.*

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 Operating Funds: By formula, provides Public Housing Agencies administering the low-income public housing program with operating subsidy 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.*

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 the 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.*

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

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* Point of contact for Section 8 only

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

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Program	AS	CNMI	Guam	FSM	RMI	ROP
CDBG	\$ 1,037,768	\$ 1,386,572	\$ 2,817,312			
HOME	\$ 340,627	\$ 647,474	\$ 1,405,903			
Homeless Assistance			779,815			
ESG	\$ 44,047	\$ 62,844	\$ 130,338			
Section 8		\$ 2,656,084	\$ 31,124,591			
Project Section 8		\$ 1,223,376	\$ 389,256			
Family Self-Sufficiency			\$ 53,672			
Public Housing Operating Funds			\$ 3,978,749			
Public Housing Capital Funds			\$ 3,523,185			
TOTAL	\$ 1,422,442	\$ 5,976,350	\$ 44,202,821			

TOTAL HUD FUNDS FY 2009: \$51,601,613

U.S. Department of the Interior
Office of Insular Affairs
Office of Environmental Policy & Compliance

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

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.*

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.*

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.*

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.*

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 Koltjes at (202) 208-5345.*

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.*

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 \(Public Law 108-188\)](#) 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.

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.

Program	AS	CNMI	Guam	FSM	RMI	Palau
Compact - FSM				\$102,541,000		
Compact - RMI					\$67,009,000	
Compact - Federal Services				\$1,623,000	\$405,000	\$790,000
Compact - Palau						\$11,148,000
Enewetak Support					\$500,000	
Compact Impact	\$14,242	\$5,172,000	\$14,242,000			
Compact Judicial Training				\$221,100	\$108,900	
Technical Assistance	\$747,900	\$813,222	\$696,066	\$497,800	\$396,794	\$546,663
Judicial Program 9th Circuit	\$80,000	\$80,000	\$80,000			\$80,000
Prior Service Trust Fund		\$837,000				
Maintenance Assistance	\$319,000	\$98,000	\$325,000	\$1,448,342	\$250,000	\$279,500
Insular Management Controls	\$402,395	\$790,910	\$700,000			
Coral Reef Initiative						
Office of Insular Affairs	\$127,000	\$307,000		\$143,000	\$79,000	
Article II Compact Healthcare					\$984,000	
Brown Treesnake		\$323,500	\$325,000			
Am. Samoa Ops	\$22,752,000					
CIP Grants	\$9,380,000	\$11,330,000	\$4,840,000			
Water & Waste Water	\$571,052	\$380,000				
Payments to US Territories			\$39,000,000			
Total	\$33,420,142	\$18,960,722	\$59,508,066	\$105,025,900	\$69,732,694	\$12,844,163

TOTAL DOI FUNDS FY 2009: \$299,491,687

Department of Labor – Employment and Training Administration

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 email: Jacobs.john@dol.gov.

WAGNER PEYSER ACT (WP):

This service is offered through States and local One Stop Career Centers, which provides funding to assist in the coordination and development of a nationwide system of public labor exchange services, provide 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 email:

Jacobs.john@dol.gov.

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 email: 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- 625-7940, or email: Jacobs.john@dol.gov.

Workforce Investment Act, National Emergency Grants (NEG):

Discretionary grants awarded by the Secretary of Labor (the Secretary), 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.

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.

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.

American Samoa (AS)

WIA/NEG Contact:

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

SCSEP Contact:

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

Guam (GU)

WIA/SCSEP/DPN/LMI Contact:

Maria Connelley, Director
Guam, Department of Labor (GDOL)
One Stop Career Center (OSCC)
Jolleen Santos, Administrator
Phone: (671) 475-7073
Fax: (671) 475-7045
Email: jcsantos@guamcell.net
Email: connent@ite.net

Northern Mariana Islands (NMI)

WIA Contact:

Edith Deleon Guerrero
WIA Signatory and Director
Phone: 1-670-664-1700/58
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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

Republic of Palau (PW)

WIA Contact:

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Programs/Territories	AS	CNMI	Guam	Palau
Workforce Investment Act Title 1B (WIA)	\$ 454,470	\$ 1,368,911	\$3,699,262	\$277,000
(WIA) Wagner-Peyser			\$ 332,336	
Workforce Investment Act Recovery Act (ARRA)	\$ 462,000	\$ 1,402,709	\$4,002,645	\$379,279
National Emergency Grants (NEG)	\$ 24,857,608			
Disaster Unemployment Insurance (DUA)	\$ 5,169,480			
Discretionary (Earmark) Grants			\$ 383,187	
Labor Market Information Grant (LMI)			\$ 92,899	
Disability Program Navigator (DPN)			\$ 80,000	
Senior Community Services Program (SCSEP)	\$ 1,173,657	\$ 391,218	\$ 1,173,657	
TOTAL	\$ 32,117,215	\$ 3,162,838	\$ 9,763,986	\$ 656,279

TOTAL DOL/ETA FUNDS FY 2009: \$45,700,318

For more information on the Department of Labor Employment and Training Administration programs in the outer Pacific, please contact John Jacobs at (415) 625-7940 or jacobs.john@dol.gov.

Department of Transportation – Federal Transit Administration

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.

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.

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.

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.

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.

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

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

Commonwealth of the Northern Mariana Islands
Tim Thornburgh
Federal Programs Coordinator
CNMI Public School System
Phone: (670) 237-3010
Email: thornburght@gmail.com

Program	AS	CNMI	Guam	FSM	RMI	ROP
5310, 5311	\$369,907	\$ 122,303	\$940,568			
ARRA (Urban)	\$341,099	\$1,061,782	\$921,976			
ARRA (Non-Urban)		\$52,510				
TOTAL	\$711,006	\$1,236,595	\$1,862,544			

TOTAL DOT FTA FUNDS FY 2009: \$3,810,145

Environmental Protection Agency

Consolidated Environmental Program

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 media programs including hazardous waste, non-point source water pollution, air, and pesticides. Local environmental agencies also receive contributions from local governments.

Pacific Islands Office (CED-6)
Communities & Ecosystems Division, US
EPA Region 9
Phone: 415-972-3505
Fax: 415-947-3560
Email: mann.michael@epa.gov

Guam
Michael Wolfram
Program Manager
Pacific Islands Office
75 Hawthorne St.
San Francisco, CA 94105
Phone: 415-972-3027
Fax: 415-947-3560
Email: wolfram.michael@epa.gov

Wastewater Construction Grants:

This program is more than a decade old. Grants awarded under this program are for the design and construction of wastewater collection, treatment and disposal facilities, as well as drinking water treatment and distribution systems.

American Samoa
Carl Goldstein
Program Manager
Pacific Islands Office
75 Hawthorne St.
San Francisco, CA 94105
Phone: 415-972-3767
Fax: 415-947-3560
Email: goldstein.carl@epa.gov

LUST Grants: The Underground Storage Tank (UST) and Leaking Underground Storage Tank (LUST) cooperative agreements provide support to the Pacific Island territories for the prevention, detection, and correction of releases from UST systems containing petroleum or hazardous substances regulated under the Resource Conservation and Recovery Act (RCRA) Subtitle I.

John McCarroll
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San Francisco, CA 94105
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For more information on these EPA programs contact

Commonwealth of the Northern Mariana Islands and the Republic of Palau
Michael Mann
CNMI Program Manager

Program	AS	CNMI	Guam
Brownfields	\$350,000		
Grants to Local Environmental Agencies (LUST, Consolidated Grants)	\$2,348,607	\$2,180,662	\$3,650,000
Water Construction Funding	\$180,000	\$1,012,833	\$887,000
Wastewater Construction Funding			\$446,000
ARRA Water Construction Funding	\$483,000	\$1,829,000	\$2,124,000
ARRA Wastewater Construction Funding	\$3,354,000	\$1,451,700	\$2,371,500
ARRA Funding to Local EPAs	\$200,000	\$257,000	\$338,000
TOTAL	\$6,915,607	\$6,731,195	\$9,816,500

TOTAL EPA FUNDS FY 2009: \$23,463,302

Federal Emergency Management Agency

EMERGENCY MANAGEMENT PERFORMANCE GRANT (EMPG)

Objectives: To provide resources to assist state and local governments to sustain and enhance all-hazards emergency management capabilities. An 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.

PORT SECURITY GRANT PROGRAM

(PSGP) Objectives: 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 Workers Identification Credentials implementation. The Port Security Grant Program also provides funding to eligible ferry systems within eight specific priorities.

HOMELAND SECURITY GRANT

PROGRAM (HSGP) Objectives: To enhance the ability of state, local and tribal governments to prepare, prevent, respond to, and recover from terrorist attacks and other disasters. The Homeland Security Grant Program is the primary funding

mechanism for building and sustaining national preparedness capabilities. HSGP is comprised of four separate grant programs: State Homeland Security Program; Urban Areas Security Initiative; Metropolitan Medical Response System; and Citizen Corps Program.

DRIVER'S LICENSE/REAL ID Objectives:

To provide funding for projects on integrating hardware, software, and information management systems to implement the REAL ID Act.

PRE-DISASTER MITIGATION

COMPETITIVE (PDMC) Objectives:

To provide funding support to states, tribes, territories, communities, and public colleges and universities for pre-disaster mitigation planning and projects primarily addressing natural hazards. This program promotes implementation of activities designed to reduce injuries, loss of life, and damage and destruction to property from natural hazards.

INTEROPERABLE EMERGENCY COMMUNICATIONS GRANT PROGRAM

(IECGP) Objectives: To assist public safety agencies in the acquisition of, deployment of, or training for the use of interoperable communications systems that can utilize or enable interoperability with communications systems that can utilize reallocated public safety spectrums for radio communications.

DISASTER FUNDS AWARDED TO

AMERICAN SAMOA: American Samoa received a disaster declaration on September 29, 2009 as a result of the earthquake, tsunami and flooding that occurred on the island.

Program	AS	CNMI	Guam	FSM	RMI	ROP
Emerg. Mgmt Perf. Grant	\$803,934	\$817,001	\$870,532	\$50,000	\$50,000	
Interoperable Emergency Communications Grant Program	\$47,524	\$49,045	\$77,846			
Port Security Grant Program	\$370,000	\$946,000	\$1,223,644			
Homeland Security Grant Program	\$1,468,284	\$1,468,906	\$1,471,457			
Disaster 1859	\$6,960,183					
Driver's License Security Grant Program		\$661,690	\$661,690			
ARRA Port Security Grant Program			\$910,594			
PDMC		\$660,000				
TOTAL	\$9,649,925	\$4,602,642	\$5,215,763	\$50,000	\$50,000	

TOTAL FEMA FUNDS FY 2009: \$19,568,330

For more information on these FEMA programs, please contact Kevin Clark at (510) 672-7100 or kevin.clark@dhs.gov.

Outer Pacific Committee

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Araki	Lynnette	Department of Health and Human Services Health Resources and Services Administration	(301) 443-6204 laraki@hrsa.gov	(301) 443-2286
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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
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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	(202) 401-0462 tina.otter@ed.gov	(202) 260-4406
Port	Patricia	U.S. Department of the Interior Office of Environmental Policy and Compliance	(510) 817-1477 oepcsfn@aol.com	(510) 419-0177
Pichel	Stephen	Department of Agriculture Food and Nutrition Services	(415) 705-1365 stephen.pichel@fns.usda.gov	(415) 705-1364
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
Simons	Nadine	Department of Health and Human Services Office of Public Health and Science	(415) 437-8102 nadine.simons@hhs.gov	(415) 437-8004
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Tinitali	Marina	Department of the Interior Office of Insular Affairs	(202) 208-5920 marina_tinitali@ios.doi.gov	(202) 219-1989
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Wada	Roylinne	Department of the Interior Office of Insular Affairs, Honolulu Field Office	(808) 525-5088 roylinne_wada@ios.doi.gov	(808) 525-5399

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Zolynas	Brian	Department of Health and Human Services Centers for Medicare and Medicaid Services	(415) 744-3601 brian.zolynas@cms.hhs.gov	(415) 744-2933

**Committee Chair*

***Committee Coordinator*

Committee meets 2nd Wednesday of every month