

NATIONAL INSTITUTES OF HEALTH FACT SHEET ON AIDS RESEARCH AND MINORITY POPULATIONS

The National Institutes of Health (NIH) supports a comprehensive portfolio of biomedical and behavioral research aimed at preventing, treating, and controlling HIV infection and its sequelae in minority communities. Half of the total NIH AIDS research budget is devoted to basic research that benefits HIV-infected adults and children of all racial and ethnic populations. The remaining portion of the budget is invested in more clinically oriented research. Of that portion, NIH invested an additional \$266 million in FY 1996 for research focusing specifically on AIDS in minority populations. In FY 1997 that sum increased to approximately \$278 million. In FY 1998, more than \$300 million was devoted to research targeting minorities; and in FY 1999, NIH plans to spend more than \$323 million.

NIH has for many years taken strong steps to assure minority participation in clinical trials, in natural history and epidemiologic studies, and in prevention studies and to assure that the overall research agenda is responsive to the needs of minority communities. NIH supports a broad array of behavioral intervention studies with specific focus on African-American populations. Research focusing on HIV and drug use includes mostly African-American participants. These studies are characterizing the disease process in drug users, factors influencing disease progression, consequences of multiple coinfections, effectiveness of therapeutic regimens, and impact of health care access and adherence to therapeutic regimens on disease outcomes. The development of topical microbicides is a high priority of NIH research, and recruitment for these studies is focusing on minority communities.

NIH has established programs and policies specifically designed to recruit individuals from underrepresented racial and ethnic groups into research careers and to build research infrastructure in minority institutions. These programs provide training and research opportunities across the continuum from high school students to independent investigators. NIH also supports a number of activities with the goal of disseminating research information to health care providers serving minority communities as well as to individuals at risk.

Specific information about these initiatives is provided below.

INCLUSION OF MINORITIES IN AIDS RESEARCH

The NIH has implemented a series of guidelines, policies, and programs to ensure that HIV-infected individuals from the most at-risk populations for HIV/AIDS are enrolled and accrued into federally sponsored AIDS clinical trials. In 1994, NIH implemented revised Guidelines on the Inclusion of Women and Minorities in Clinical Research, requiring applicants to address the appropriate inclusion of women and minorities in clinical research. Applications that fail to meet these requirements, as evaluated by peer review, are barred from funding. In such cases, the NIH staff work with the applicants to resolve problems, e.g., by changing the composition of the study populations or identifying projects in the Institutes' portfolios that address similar research objectives and that include women and minorities with which data can be compared.

The NIH's commitment to enrolling HIV-infected individuals from at-risk populations into AIDS clinical trials is underscored in the NIH FY 1998 Plan for HIV-Related Research, which states the following: "It is critical that the participation of specific populations in NIH-funded clinical trials reflect the changing demographics of HIV infection and AIDS, including women, children, adolescents, drug abusers, injection drug users (IDUs), minorities, the urban poor, and individuals residing in rural areas. Recruitment and enrollment of these underrepresented populations is a high priority in NIH-sponsored studies. Whenever possible, interagency collaboration should be fostered to enhance participation of these populations, including provision of ancillary services."

Several examples of NIH efforts include:

Women's Natural History Studies: Minorities represent more than 82 percent of the participants in two major natural history and epidemiology studies, the Women and Infant Transmission Study and the Women's Interagency HIV Study, which focus on mother-to-infant transmission of HIV and manifestations of HIV infection and its sequelae among women.

Clinical Trials: As of December 1997, 63 percent of the participants in NIH-sponsored AIDS clinical trials were minorities, including 40 percent African American and 22 percent Hispanic. Minorities represent 54 percent of AIDS cases in the United States. In addition, while women represent 15 percent of all AIDS cases in the United States, they represent 34 percent of the participants in NIH-sponsored AIDS clinical trials. The AIDS Clinical Trials Group (ACTG) continues to recruit participants to reflect the changing demographics of the epidemic. The research focus in the clinical trials is to determine the best therapeutic interventions to limit HIV replication and disease progression. Research also focuses on the rapid development of agents that prevent or delay the complications of HIV-related disorders that are of high incidence in both the majority and minority communities, such as cardiovascular disease, diabetes, lipid disorders, and neoplasias.

Perinatal Intervention Trials: Most of the women participating in the ACTG 076 trial, which demonstrated the effectiveness of AZT therapy in preventing HIV transmission from mother to infant, as well as in the ongoing followup studies to determine more effective and less complicated regimens to prevent perinatal transmission, are minorities.

Minority Institutions: The NIH ACTG includes three sites in minority institutions at Howard University, University of Puerto Rico, and the University of Hawaii. The ACTG will recompile in FY 2000, and the Request for Applications (RFA) has been designed to ensure optimal participation in clinical trials of all subpopulations in which the epidemic is now raging, including women, minorities, adolescents, children, and IDUs.

Prevention Trials for Drug Users: NIH supports several programs targeting minorities who are IDUs, including the Community-Based Outreach Risk Reduction Strategy to Prevent HIV Risk Behaviors in Out-of-Treatment Injection Drug Users program. Twenty-three sites have participated in the HIV Prevention Trial supported through this program. Participants have included 56.2 percent African American, 11.4 percent Puerto Rican, 9.0 percent Hispanic, 2.7 percent Native American, 0.3 percent Asian/Pacific Islander, 1.4 percent other Latino, and 17.2 percent Caucasians.

AIDS Malignancy Programs: NIH awarded funds to clinical trial sites that demonstrated the ability to recruit minorities into studies on AIDS-related malignancies.

TRAINING OF MINORITIES IN AIDS RESEARCH

The NIH recognizes the value of the contributions made by African-American health professionals to the conduct of research and research training. A number of NIH programs and policies are specifically designed to recruit individuals from underrepresented racial and ethnic groups into research careers. These programs provide training and research opportunities across the continuum from high school students to independent investigators, with the goal of increasing the diversity of the labor pool in all segments of health-related research.

For example, for individuals at the high school, college, graduate, postdoctoral, and investigator levels, the NIH offers Research Supplements for Underrepresented Minorities. Using this program, the principal investigator on a currently funded research project can request an administrative supplement to support the salary of an individual from an underrepresented group who wishes to participate in the ongoing research.

Specific programs in AIDS research include:

The AIDS Clinical Trials Infrastructures in Minority Institutions: The AIDS Clinical Trials Infrastructures in Minority Institutions are supported by NIH to enhance HIV clinical research performed at minority institutions. This program enhances the training and number of minority investigators involved in ACTG research and the number of minority participants in clinical studies. NIH funds the Research Centers in Minority Institutions (RCMI) to support the infrastructure to conduct biomedical research at minority institutions.

HBCUs: NIH outreach programs provide training to health professionals affiliated with Historically Black Colleges and Universities (HBCUs) in the use of electronic information resources so that this information is readily available for health professionals working closely with HIV-affected communities.

Overseas Training: NIH began a new initiative in FY 1997 designed to provide high-quality overseas research training experience for U.S. pre- and postdoctoral research investigators, with a special emphasis on the participation of minority scientists. This program should result in an increase in the number of minority investigators in all areas of basic and clinical research including AIDS-related studies.

Loan Repayment Program: The AIDS Loan Repayment Program assists investigators who come to conduct research in the intramural AIDS research program of NIH. It has cumulatively supported 23 percent minorities and 30 percent women.

Bench-to-Bedside Information Dissemination Program: The NIH Office of AIDS Research (OAR) supports regional programs to bring current research information to community health care professionals, particularly in minority communities.

MINORITY PARTICIPATION IN RESEARCH PLANNING AND PRIORITY SETTING

OAR includes minority representatives in all AIDS research advisory groups, and the OAR Advisory Council, which provides overall guidance on the scientific direction of the NIH AIDS research program, includes 7 minority members out of the total 18 members. In addition, the OAR research planning groups, which develop the annual AIDS research plan and set scientific priorities, also include minority representatives. These groups have been specifically charged with ensuring that the plan appropriately addresses the needs in minority communities.

NEW NIH AIDS RESEARCH PRIORITIES

Under its newly appointed Director, Neal Nathanson, OAR has adopted a new vision that is directly focused on the epicenters of the AIDS epidemic, including the multiple epidemics in minority communities. This vision, which we have termed “intervention research,” gives priority to research that will generate the products and methods required to control the epidemic.

Specific priorities include vaccine development, microbicides and other female-controlled interventions, behavioral intervention, interruption of perinatal transmission, immune reconstitution, and simpler and less expensive antiretroviral treatment regimens. This strategy focuses on the salient problems confronting African-American and other minority populations, as well as the medically indigent, homeless, and drug-using groups. The key priorities are prevention of transmission, prevention of disease progression, and prevention of mortality.

RESEARCH ON ISSUES OF CONCERN TO COMMUNITIES OF COLOR

Population-Specific Interventions

A number of NIH Institutes, including National Institute of Mental Health (NIMH), National Institute on Drug Abuse (NIDA), National Institute of Child Health and Human Development (NICHD), National Institute of Nursing Research (NINR), and National Institute of Allergy and Infectious Diseases (NIAID), currently fund a broad array of basic and intervention studies with specific focus on African-American populations. Additional studies are in the planning stages. For example, NIMH supports intervention studies involving African-American women in public housing units, mothers and sons, adolescent males, gay men, and families. NIDA supports ethnographic and intervention studies focused on African-American male and female drug users, including IDUs and crack-cocaine users. NIAID is currently planning an intervention trial focusing on HIV prevention among crack-using African-American women. These studies generally are supported through usual NIH grant mechanisms, and some have received special OAR HIV Prevention Science Initiative funds or other supplements. Some specific examples of behavioral research programs targeted to minority populations include:

- Community Based Risk Reduction for IDUs
- AIDS Prevention Among Minority Adolescents
- Washington, DC, AIDS Outreach/Intervention Research Program

- HIV Prevention in African-American Drug-Dependent Women
- Living with HIV—Racial Differences
- HIV Prevention in African-American Adolescent Women
- African Americans with AIDS—Caregiving Experience
- Reducing AIDS in Black Mothers

HIV Prevention Trial: NIH supports several programs targeting minorities who are IDUs, including the Community-Based Outreach Risk Reduction Strategy to Prevent HIV Risk Behaviors in Out-of-Treatment Injection Drug Users program. This trial has involved 23 sites, with 56.2 percent of the participants African American, 11.4 percent Puerto Rican, 9.0 percent Hispanic, 2.7 percent Native American, 0.3 percent Asian/Pacific Islanders, 1.4 percent other Latino, and 17.2 percent Caucasian.

Natural History and Epidemiology Research: NIH conducts studies to examine the transmission of HIV, the progression of HIV-related disease (including the occurrence of opportunistic infections [OIs]), the development of malignancies, the incidence of neurological and neurobehavioral dysfunction, the occurrence of oral manifestations, and the development of other sequelae. Ethnic and racially diverse cohorts of HIV-infected individuals and HIV-uninfected individuals at risk of infection are followed in clinical epidemiology studies at domestic and international sites. By maintaining this diversity, data obtained from such studies will have validity for all communities impacted by HIV infection. Examples of studies include:

- **The Women’s Interagency HIV Study:** WIHS is a major study cofunded by NICHD, NIAID, and NIDCR in collaboration with other Department of Health and Human Services (DHHS) agencies to investigate the nature and rate of disease progression in women to better characterize the clinical manifestations of HIV infection in women, and to determine the effects of therapeutic regimens. WIHS will also identify the sociocultural and health care access factors that affect disease outcomes in women. **Women of color comprise 82 percent of WIHS participants.** These studies will yield information pertinent to a wide range of vulnerable subpopulations.
- **Women and Infants Transmission Study:** WITS is a large epidemiologic study evaluating factors associated with risk of perinatal transmission, as well as factors associated with maternal and infant disease progression. This study includes extensive laboratory studies and supports a specimen repository. Participants from the United States and Puerto Rico reflect the diverse populations impacted by HIV in women and children.
- **HIV and Drug Use:** NIDA supports research on characterization of the disease process in drug users, including host and virologic factors influencing progression, clinical sequelae, consequences of multiple coinfections, effectiveness of therapeutic regimens, and the impact of health care access and adherence on disease outcomes. Two of these studies, ALIVE I and ALIVE II, are cohort studies of HIV-infected IDUs and high-risk IDUs. **More than 90 percent of the participants of these studies are African American.** Another project, HERO, is conducted

with IDUs in New York City. Sixty-five percent of the participants are Hispanic and 18 percent African American. The diverse populations represented in these three studies will provide an opportunity to further study the impact of HIV disease in several vulnerable subpopulations.

- HIV Epidemiology Study Among African Americans
- Cocaine Use and HIV in African-American Women
- HIV Infection and Drug Use in Adolescents
- AIDS Prevention for Low-Income African-American Women

Topical Microbicides: The development of topical microbicides, chemical and physical barriers that can be used intravaginally or intrarectally to inactivate HIV and other sexually transmitted diseases (STDs), has been and will remain one of the highest priorities of the NIH intervention research agenda. NIH is supporting Phase I, Phase II, and Phase III trials of various topical microbicides that fall generally into four categories: broad-spectrum microbicides, such as nonoxynol-9; buffer gel, and lactobacilli products; inhibitors of viral entry, such as sulfated polymers; inhibitors of HIV replication, such as nucleoside/nucleotide reverse transcriptase (RT) inhibitors, including 9-(2-phosphonylmethoxypropyl)-adenine (PMPA); and combination products. Increased funds are included in the FY 1999 budget for this purpose.

Clinical Trials: As of December 1997, 63 percent of the participants in NIH-sponsored AIDS clinical trials were minorities, including 40 percent African American and 22 percent Hispanic. Minorities represent 54 percent of AIDS cases in the United States. In addition, while women represent 15 percent of all AIDS cases in the United States, they represent 34 percent of the participants in NIH-sponsored AIDS clinical trials. The Community Programs for Clinical Research on AIDS (CPCRA), the Pediatric AIDS Clinical Trials Group (PACTG), and the ACTG continue to recruit participants to reflect the changing demographics of the epidemic. The research focus in the clinical trials is to determine the best therapeutic interventions to limit HIV replication and disease progression. Research also focuses on the rapid development of agents that prevent or delay the complications of HIV-related disorders that are of high incidence in both the majority and minority communities such as cardiovascular disease, diabetes, lipid disorders, and neoplasias. These networks will recompile for funding in FY 2000, and the RFA requires sites to demonstrate their ability to recruit and retain minority participants in studies.

AIDS Clinical Trials Infrastructures in Minority Institutions: The AIDS Clinical Trials Infrastructures in Minority Institutions are supported by NIH to enhance HIV clinical research performed at minority institutions. This program enhances the training and number of minority investigators involved in ACTG research and the number of minority participants in clinical studies. NIH funds the Research Centers in Minority Institutions (RCMI) to support the infrastructure to conduct biomedical research at minority institutions.

HBCUs: NIH outreach programs provide training to health professionals affiliated with Historically Black Colleges and Universities (HBCUs) in the use of electronic information resources so that this information is readily available for health professionals working closely with HIV-affected communities.

PARTICIPATION OF PEOPLE OF COLOR IN NIH-SPONSORED RESEARCH

Minority Participation in Research Planning and Priority Setting

The OAR includes minority representatives in all AIDS research advisory groups, and the OAR Advisory Council, which provides overall guidance on the scientific direction of the NIH AIDS research program, includes 7 minority members out of the total 18 members. In addition, the OAR research planning groups, which develop the annual AIDS research plan and set scientific priorities, also include minority representatives. These groups have been specifically charged with ensuring that the plan appropriately addresses the needs in minority communities.

Inclusion of Minorities in AIDS Research

Research Guidelines: The NIH has implemented a series of guidelines, policies, and programs to ensure that HIV-infected individuals from the most at-risk populations for HIV/AIDS are enrolled and accrued into federally sponsored AIDS clinical trials. In 1994, NIH implemented revised Guidelines on the Inclusion of Women and Minorities in Clinical Research, requiring applicants to address the appropriate inclusion of women and minorities in clinical research. Applications that fail to meet these requirements, as evaluated by peer review, are barred from funding. In such cases, the NIH staff work with the applicants to resolve problems, e.g., by changing the composition of the study populations or identifying projects in the Institutes' portfolios that address similar research objectives and that include women and minorities with which data can be compared.

Annual AIDS Research Plan: The NIH's commitment and priority of enrolling HIV-infected individuals from at-risk populations into AIDS clinical trials is underscored in the NIH Plan for HIV-Related Research, which states the following: "It is critical that the participation of specific populations in NIH-funded clinical trials reflect the changing demographics of HIV infection and AIDS, including women, children, adolescents, drug abusers, injection drug users (IDUs), minorities, the urban poor, and individuals residing in rural areas. Recruitment and enrollment of these underrepresented populations is a high priority in NIH-sponsored studies. Whenever possible, interagency collaboration should be fostered to enhance participation of these populations, including provision of ancillary services."

Examples of NIH efforts include:

Women's Natural History Studies: Minorities represent more than 82 percent of the participants in two major natural history and epidemiology studies, the Women and Infant Transmission Study and the Women's Interagency HIV Study, which focus on mother-to-infant transmission of HIV and manifestations of HIV infection and its sequelae among women.

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determine the best therapeutic interventions to limit HIV replication and disease progression. Research also focuses on the rapid development of agents that prevent or delay the complications of HIV-related disorders that are of high incidence in both the majority and minority communities, such as cardiovascular disease, diabetes, lipid disorders and neoplasias.

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Minority Institutions: The NIH AIDS ACTG includes three sites in minority institutions at Howard University, University of Puerto Rico, and the University of Hawaii. The ACTG will re compete in FY 2000, and the RFA has been designed to ensure optimal participation in clinical trials of all subpopulations in which the epidemic is now raging, including women, minorities, adolescents, children, and IDUs.

AIDS Malignancy Programs: NIH awarded funds to its clinical trial sites that demonstrated the ability to recruit minorities into studies on AIDS-related malignancies.

ADHERENCE/COMPLIANCE RESEARCH

NIH supports a significant portfolio of research on adherence/compliance with AIDS therapeutic regimens, including:

- A group of therapeutic studies within the Adult AIDS Clinical Trials Group using electronic compliance monitoring devices as a research tool for monitoring adherence to therapeutic regimens.
- A study addressing the relationship between HIV treatment adherence, risk behaviors, and HIV transmission. At 3-, 6-, and 9-month followup, this cohort will be assessed on adherence measures (behavioral, pharmacological, medical records, virological) to determine patterns and extent of adherence, predictors of adherence, and changes in sexual or drug risk behavior, serostatus disclosure, and perceived infectivity.
- A study to measure two aspects of adherence that can influence HIV transmission: adherence to effective drug treatment and adherence with recommended changes in risk-associated behaviors, combining biologic and behavioral data. The study will assess the validity of self-report data and assess changes over time in objective and subjective measures of well-being and their impact on changes in patterns of treatment adherence and sexual risk taking.

- A behavioral intervention designed to improve adherence to therapy for HIV infection among African-American and Latino men and women in South Central Los Angeles, including an 8-week psychoeducational group program emphasizing problem-solving skills building around adherence and reducing substance use, mental illness, high-risk behaviors, and other life stressors. Clinical and behavioral assessments will be used.
- A study of attitudes of an understudied population (late middle aged and older HIV-infected adults) toward compliance with combination therapies.
- A study of the effects of HIV treatment advances on the attitudes, beliefs, and sexual risk behavior and determinant of medical treatment adherence among men and women in HIV serodiscordant relationships.
- The NIH OAR Prevention Science Working Group identified adherence as one of the highest priorities for funding through the OAR Prevention Science funds. The OAR has provided supplemental funds to the NIH Institutes for peer-reviewed research in this area, including those mentioned above.
- NIH also supports a significant portfolio of research grants and projects supported with AIDS research funds focusing on adherence with tuberculosis (TB), drug abuse, AIDS-related malignancies, and other therapies.

TRAINING AND INFRASTRUCTURE

A number of NIH programs and policies are specifically designed to recruit individuals from underrepresented racial and ethnic groups into research careers. These programs provide training and research opportunities across the continuum from high school students to independent investigators, with the goal of increasing the diversity of the labor pool in all segments of health-related research.

For example, for individuals at the high school, college, graduate, postdoctoral, and investigator levels, the NIH offers Research Supplements for Underrepresented Minorities. Using this program, the principal investigator on a currently funded research project can request an administrative supplement to support the salary of an individual from an underrepresented group who wishes to participate in the ongoing research.

Specific programs in AIDS research include:

AIDS Clinical Trials Infrastructures in Minority Institutions. The AIDS Clinical Trials Infrastructures in Minority Institutions are supported by NIH to enhance HIV clinical research performed at minority institutions. This program enhances the training and number of minority investigators involved in ACTG research and the number of minority participants in clinical studies. NIH funds the RCMI to support the infrastructure to conduct biomedical research at minority institutions.

HBCUs. NIH outreach programs provide training to health professionals affiliated with HBCUs in the use of electronic information resources so that this information is readily available for health professionals working closely with HIV-affected communities.

AIDS Loan Repayment Program. The AIDS Loan Repayment Program assists investigators who come to conduct research in the intramural AIDS research program of NIH. It has cumulatively supported 23 percent minorities and 30 percent women.

Behavioral Research Training. NIMH supports a program at the Center for AIDS Prevention Studies (CAPS), University of California, San Francisco, titled “Collaborative HIV Prevention in Ethnic Minority Communities.” As part of that program, CAPS supports about eight minority scholars in behavioral and social research to spend two summers there to work with mentors and to further develop research, publication, and grant-writing skills. In 1998, four of the eight scholars were African American and focused on issues of HIV prevention and service delivery among African-American communities (including the development of Africentric models).

International Training. NIH began a new initiative in FY 1997 designed to provide high-quality overseas research training experience for U.S. pre- and postdoctoral research investigators with a special emphasis on the participation of minority scientists. This program should result in an increase in the number of minority investigators in all areas of basic and clinical research including AIDS-related studies.

Many NIH Institutes have additional training programs. One Institute, for example, NIDA, has implemented a number of programs to encourage African-American and other ethnic minority students and scholars to pursue careers in drug abuse research. The following initiatives have been established to increase the participation of African Americans and other ethnic minorities in NIDA’s research program. None of these initiatives are specifically focused on AIDS research; however, individuals interested in AIDS research may seek support through these programs.

Research Supplements for Underrepresented Minorities Program. This program has been utilized to train ethnic minorities to conduct drug abuse research. A number of grants have been supplemented to support training for African-American scholars, many of whom have been involved in NIDA’s AIDS research grant program. Funds awarded through this program may be used to support salaries, tuition, travel, and supplies for recipients.

The Minority Institutions’ Drug Abuse Research Development Program (MIDARP). This grant program replaced the Minority Institutions’ Research Development Program (MIRDP) and is designed to assist minority institutions to build a research infrastructure and provide support for individual research projects to be conducted by faculty with assistance from students. The announcement for this program was issued at the beginning of FY 1998. Minority institutions and HBCUs, in particular, are encouraged to apply for support through this program. Participation in this grant program continues to increase.

The Historically Black Colleges and Universities Research Scholars Award Program. This RFA was designed to assist HBCUs to develop a research infrastructure and program involving faculty and students. This grant program, funded at the end of FY 1998, allows HBCUs to recruit an experienced research scientist to carry out a drug abuse research program and to train faculty and students. Funds are available through this program to conduct research and enhance the research capacity of the university.

Technical Assistance to Historically Black Colleges and Universities Program. A contract was awarded to Howard University to provide technical assistance to faculty and staff at HBCUs to increase their research readiness and to encourage their pursuit of careers in drug abuse research. A number of drug abuse research applications have been developed under this program.

HBCU Drug Abuse Research Infrastructure Building Program. A contract was awarded to Howard University to strengthen its drug abuse research infrastructure and train faculty and students for careers in drug abuse research. AIDS research was one of several subject areas emphasized by the University. Several drug abuse research applications have been developed by Howard University faculty members under this program.

African-American Researchers and Scholars Work Group. NIDA has established an African-American Researcher and Scholars Work Group to advise the Special Populations Office on issues relating to NIDA's research programs and strategies for increasing the involvement of African Americans in drug abuse research.

The Intramural Minority Research Training Program. NIDA has established a summer training program for minority college students and university faculty members. This program is hosted by NIDA's Intramural Research Program located in Baltimore, Maryland, and provides training for individuals interested in drug abuse research. Participants in the program are mentored by NIDA intramural research staff and encouraged to establish a publication record based on their experience in the program.

Summer Intern Program for High School and Undergraduate Students. NIDA sponsors a summer program for ethnic minority high school and undergraduate students. Students are placed in NIDA-supported research projects across the country and are provided a structured research experience consistent with their background and training.

Special Events and Training Seminars for Ethnic Minorities. NIDA sponsors special events and workshops to encourage minority students and scholars to pursue drug abuse research careers. Poster sessions and workshops targeted at ethnic minorities have been sponsored as a part of national scientific meetings. Special efforts have been made to attract minority high school and college students to attend these sessions. Training seminars, lasting approximately 1 week, have been supported by NIDA to encourage students and minority faculty from universities to pursue drug abuse research careers.

DISSEMINATION OF RESEARCH INFORMATION TO MINORITY COMMUNITIES

The NIH Office of AIDS Research supports a number of activities with the goal of disseminating research information to health care providers serving minority communities as well as to individuals at risk. These programs are sponsored in collaboration with national and local community-based organizations serving minority communities:

Regional Meetings: OAR sponsors a series of regional information dissemination programs to bring current research information to community health care professionals, particularly in minority

communities and to communities with the least access to information. Meetings have been targeted to Hispanic, Native American, and African-American communities. Other conferences have focused on issues relating to women.

Community Forums: OAR sponsors a community forum program designed to bring research information to the public and communities at risk. A series of scientific meetings, featuring nationally recognized researchers, have been held around the country in collaboration with national and local HIV/AIDS community organizations.

Collaborations: OAR sponsors collaborative projects with national community organizations. For example, through an ongoing collaboration with the National Minority AIDS Council (NMAC), OAR is conducting an AIDS Research Institute at the U.S. Conference on AIDS, the largest meeting of minority health care providers and the AIDS-affected community. OAR also is planning to work with the National Medical Association to develop regional outreach activities in association with the Office of Research on Minority Health and the Office of Research on Women's Health.

National Minority AIDS Council: In collaboration with NMAC, OAR is collaborating on information dissemination projects that include Internet access to AIDS conferences and presentations, AIDS treatment publications targeted to minority communities, and exhibiting of NIH AIDS research information at local and national minority AIDS meetings and conferences.