

DEPARTMENT OF HEALTH AND HUMAN SERVICES

NATIONAL INSTITUTES OF HEALTH

John E. Fogarty International Center (FIC)

<u>FY 2014 Budget</u>	<u>Page No.</u>
Organization Chart.....	2
Appropriation Language.....	3
Amounts Available for Obligation.....	4
Budget Mechanism Table.....	5
Major Changes in Budget Request.....	6
Summary of Changes.....	7
Budget Graphs.....	9
Budget Authority by Activity.....	10
Authorizing Legislation.....	11
Appropriations History.....	12
Justification of Budget Request.....	13
Budget Authority by Object Class.....	20
Salaries and Expenses.....	21
Detail of Full-Time Equivalent Employment (FTE).....	22
Detail of Positions.....	23

NATIONAL INSTITUTES OF HEALTH

John E. Fogarty International Center

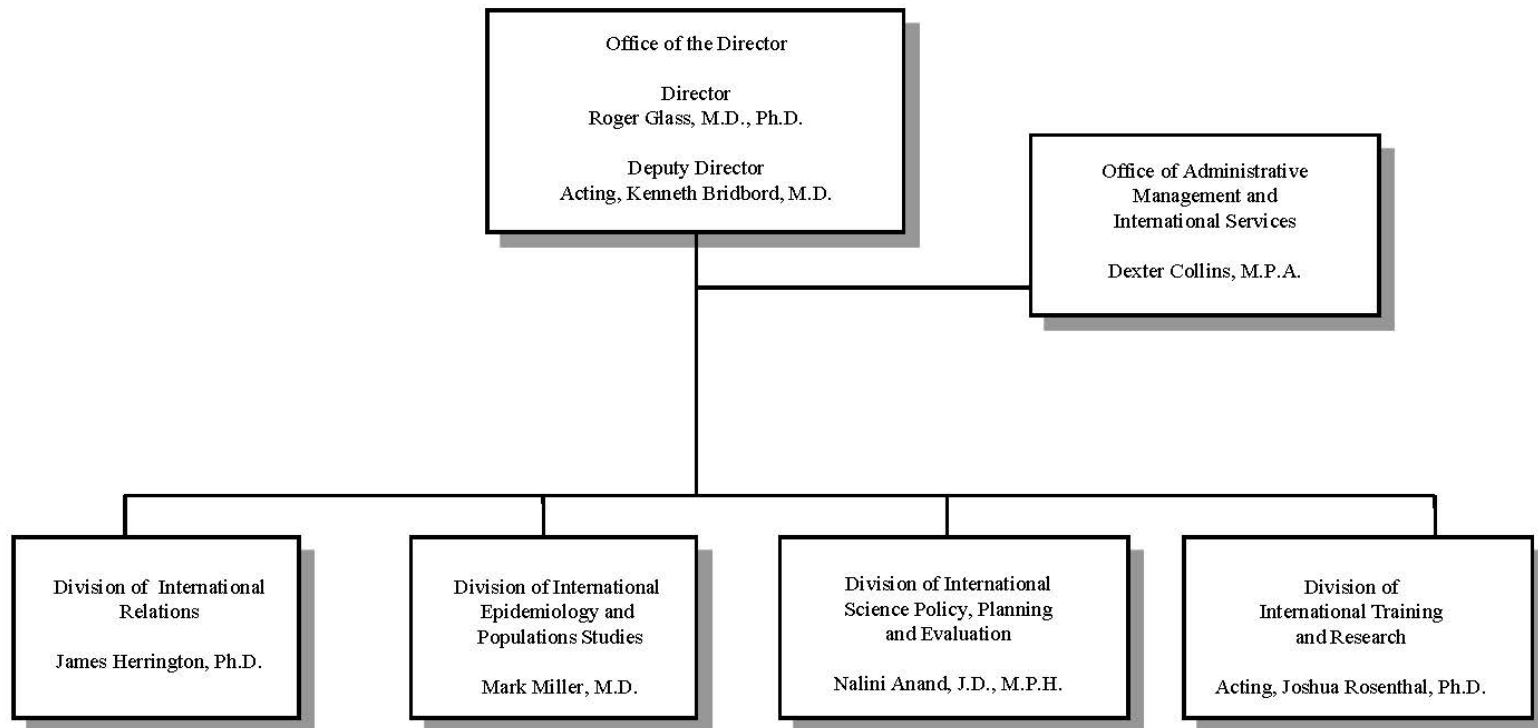


FIG - 2

NATIONAL INSTITUTES OF HEALTH

John E. Fogarty International Center

For carrying out the activities of the John E. Fogarty International Center (described in subpart 2 of part E of title IV of the PHS Act), \$72,864,000.

**NATIONAL INSTITUTES OF HEALTH
John E. Fogarty International Center**

Amounts Available for Obligation ¹
(Dollars in Thousands)

Source of Funding	FY 2012 Actual	FY 2013 CR	FY 2014 PB
Appropriation	69,754	70,048	72,864
Rescission	(131)	0	0
Subtotal, adjusted appropriation	69,623	70,048	72,864
Secretary's Transfer for Alzheimer's disease (AD)	(46)	0	0
Secretary's Transfer for AIDS authorized by PL 112-74, Section 206	(20)	0	0
Comparative Transfers to NLM for NCBI and Public Access	(64)	(82)	0
Subtotal, adjusted budget authority	69,493	69,966	72,864
Unobligated balance, start of year	0	0	0
Unobligated balance, end of year	0	0	0
Subtotal, adjusted budget authority	69,493	69,966	72,864
Unobligated balance lapsing	0	0	0
Total obligations	69,493	69,966	72,864

¹ Excludes the following amounts for reimbursable activities carried out by this account:
FY 2012 - \$5,325 FY 2013 - \$5,325 FY 2014 - \$5,431

NATIONAL INSTITUTES OF HEALTH
John E. Fogarty International Center
Budget Mechanism - Total ¹
(Dollars in Thousands)

MECHANISM	FY 2012 Actual		FY 2013 CR		FY 2014 PB		Change vs. FY 2012	
	No.	Amount	No.	Amount	No.	Amount	No.	Amount
Research Grants								
<u>Research Projects</u>								
Noncompeting	70	\$7,842	52	\$6,463	48	\$5,311	-22	-\$2,531
Administrative Supplements	(5)	91	(0)	0	(0)	0	(-5)	-91
Competing:								
Renewal	0	76	0	0	0	0	0	-76
New	23	2,642	26	3,029	8	3,975	-15	1,333
Supplements	0	0	0	0	0	0	0	0
Subtotal, Competing	23	\$2,718	26	\$3,029	8	\$3,975	-15	\$1,257
Subtotal, RPGs	93	\$10,651	78	\$9,492	56	\$9,286	-37	-\$1,365
SBIR/STTR	0	0	0	0	0	0	0	0
Research Project Grants	93	\$10,651	78	\$9,492	56	\$9,286	-37	-\$1,365
<u>Research Centers</u>								
Specialized/Comprehensive	0	0	0	0	0	0	0	0
Clinical Research	0	0	0	0	0	0	0	0
Biotechnology	0	0	0	0	0	0	0	0
Comparative Medicine	0	0	0	0	0	0	0	0
Research Centers in Minority Institutions	0	0	0	0	0	0	0	0
Research Centers	0	\$0	0	\$0	0	\$0	0	\$0
<u>Other Research</u>								
Research Careers	20	2,388	18	2,236	18	2,200	-2	-188
Cancer Education	0	0	0	0	0	0	0	0
Cooperative Clinical Research	0	0	0	0	0	0	0	0
Biomedical Research Support	0	0	0	0	0	0	0	0
Minority Biomedical Research Support	0	0	0	0	0	0	0	0
Other	158	37,986	173	39,203	186	42,162	28	4,177
Other Research	178	\$40,373	191	\$41,439	204	\$44,362	26	\$3,989
Total Research Grants	271	\$51,024	269	\$50,931	260	\$53,648	-11	\$2,624
<u>Ruth L. Kirschstein Training Awards</u>	<u>FTEs</u>		<u>FTEs</u>		<u>FTEs</u>		<u>FTEs</u>	
Individual	0	0	0	0	0	0	0	0
Institutional	0	0	0	0	0	0	0	0
Total Research Training	0	\$0	0	\$0	0	\$0	0	\$0
Research & Development Contracts	0	3,694	0	4,211	0	4,271	0	577
<i>SBIR/STTR (non-add)</i>	(0)	(0)	(0)	(0)	(0)	(0)	(0)	+(0)
Intramural Research	<u>FTEs</u>		<u>FTEs</u>		<u>FTEs</u>		<u>FTEs</u>	
Intramural Research	0	0	0	0	0	0	0	0
Research Management and Support	55	14,775	59	14,824	59	14,945	4	170
Construction		0		0		0		0
Buildings and Facilities		0		0		0		0
Total, FIC	55	\$69,493	59	\$69,966	59	\$72,864	4	\$3,371

¹ All items in italics and brackets are "non-adds "

Major Changes in the Fiscal Year 2014 President's Budget Request

Major changes by budget mechanism and/or budget activity detail are briefly described below. Note that there may be overlap between budget mechanisms and activity detail and these highlights will not sum to the total change for the FY 2014 President's Budget for FIC which is \$3.4 million more than the FY 2012 level, for a total of \$72.9 million.

Research Project Grants (-\$1.365 million; total \$9.286 million): FIC will support a total of 56 Research Project Grant (RPG) awards in FY 2014. Noncompeting RPGs will decrease by 22 awards and decrease by \$2.531 million. Competing RPGs will decrease by 15 awards and increase by \$1.333 million. With two programs sunsetting in FY 2014, funding will instead go to two of our larger existing programs. FIC will continue to support new investigators.

Research Capacity Strengthening (+\$1.135 million; total \$37.401 million): FIC is continuing research training in the Chronic, Non-Communicable Chronic Diseases and Disorders Across the Lifespan Research Training Program. This program will focus on the fields related to cancer, cerebrovascular disease including stroke, lung disease including chronic obstructive pulmonary disease (COPD), environmental factors including indoor air pollution, and obesity and lifestyle factors related to these conditions. Support continues for the Bioethics program. Increased funding will support FIC's HIV AIDS Research Training Program focusing on low- and middle-income countries (LMICs).

Development of Human Resources for Global Health Research (+\$1.663 million; total \$8.105 million): FIC will increase funding for this activity, building on the progress made with the Global Health Fellows and Scholars Program, which provides supportive mentorship, research opportunities and a collaborative research environment for early stage investigators from the U.S. and LMICs.

International Collaborative Research (+\$0.403 million; total \$12.413 million): FIC will continue emphasis on the Brain Disorders in the Developing World: Research Across the Lifespan Program, as well as on the Ecology and Evolution of Infectious Diseases Program.

NATIONAL INSTITUTES OF HEALTH
John E. Fogarty International Center
Summary of Changes
(Dollars in Thousands)

FY 2012 Actual				\$69,493
FY 2014 President's Budget				\$72,864
Net change				\$3,371
CHANGES	2014 President's Budget		Change from FY 2012	
	FTEs	Budget Authority	FTEs	Budget Authority
A. Built-in:				
1. Intramural Research:				
a. Annualization of March 2013 pay increase & benefits		\$0		\$0
b. January FY 2014 pay increase & benefits		0		0
c. One more day of pay		0		0
d. Differences attributable to change in FTE		0		0
e. Payment for centrally furnished services		0		0
f. Increased cost of laboratory supplies, materials, other expenses, and non-recurring costs		0		0
Subtotal				\$0
2. Research Management and Support:				
a. Annualization of March 2013 pay increase & benefits		\$8,241		\$21
b. January FY 2014 pay increase & benefits		8,241		61
c. One more day of pay		8,241		31
d. Differences attributable to change in FTE		8,241		0
e. Payment for centrally furnished services		812		14
f. Increased cost of laboratory supplies, materials, other expenses, and non-recurring costs		5,892		1
Subtotal				\$128
Subtotal, Built-in				\$128

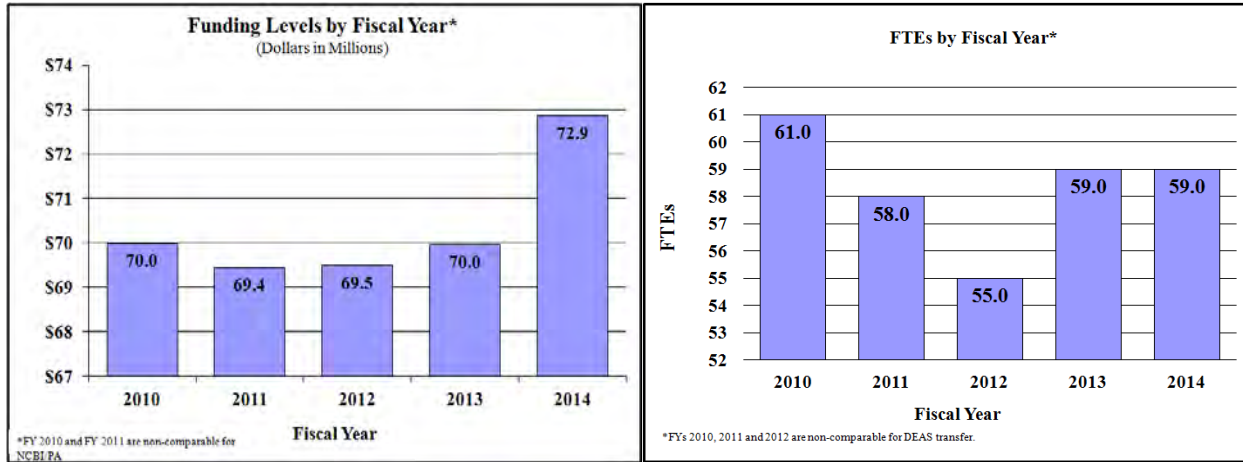
**NATIONAL INSTITUTES OF HEALTH
John E. Fogarty International Center**

Summary of Changes--continued

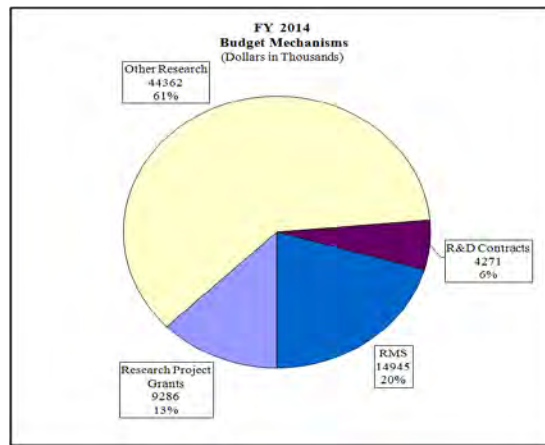
CHANGES	2014 President's Budget		Change from FY 2012	
	No.	Amount	No.	Amount
B. Program:				
1. Research Project Grants:				
a. Noncompeting	48	\$5,311	-22	-\$2,622
b. Competing	8	3,975	-15	1,257
c. SBIR/STTR	0	0	0	0
Total	56	\$9,286	-37	-\$1,365
2. Research Centers	0	\$0	0	\$0
3. Other Research	204	44,362	26	3,989
4. Research Training	0	0	0	0
5. Research and development contracts	0	4,271	0	577
Subtotal, Extramural		\$57,919		\$3,201
	<u>FTEs</u>		<u>FTEs</u>	
6. Intramural Research	0	\$0	0	\$0
7. Research Management and Support	59	14,945	4	42
8. Construction		0		0
9. Buildings and Facilities		0		0
Subtotal, program	59	\$72,864	4	\$3,243
Total changes				\$3,371

Fiscal Year 2014 Budget Graphs

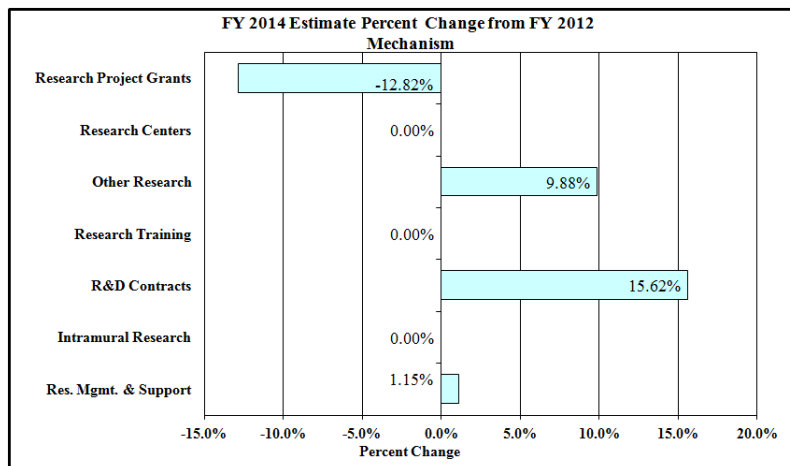
History of Budget Authority and FTEs:



Distribution by Mechanism:



Change by Selected Mechanism:



NATIONAL INSTITUTES OF HEALTH
John E. Fogarty International Center
Budget Authority by Activity^{1,2}
(Dollars in Thousands)

	FY 2012 Actual		FY 2013 CR		FY 2014 PB		Change vs. FY 2012	
	FTEs	Amount	FTEs	Amount	FTEs	Amount	FTEs	Amount
Extramural Research								
<u>Detail</u>								
Research Capacity Strengthening		\$36,266		\$38,156		\$37,401		\$1,135
Development of Human Resources for Global Health Research		6,442		6,268		8,105		\$1,663
International Collaborative Research		12,010		10,718		12,413		\$403
Subtotal, Extramural		\$54,718		\$55,142		\$57,919		\$3,201
Intramural Research	0	\$0	0	\$0	0	\$0	0	\$0
Research Management & Support	55	\$14,775	59	\$14,824	59	\$14,945	4	\$170
TOTAL	55	\$69,493	59	\$69,966	59	\$72,864	4	\$3,371

¹ Includes FTEs whose payroll obligations are supported by the NIH Common Fund.

² Includes Transfers and Comparable Adjustments as detailed in the "Amounts Available for Obligation" table.

**NATIONAL INSTITUTES OF HEALTH
John E. Fogarty International Center**

Authorizing Legislation

	PHS Act/ Other Citation	U.S. Code Citation	2013 Amount Authorized	FY 2013 CR	2014 Amount Authorized	FY 2014 PB
Research and Investigation	Section 301	42§241	Indefinite	\$69,966,000	Indefinite	\$72,864,000
International Cooperation	Section 307	42§242I	Indefinite		Indefinite	
John E. Fogarty International Center	Section 401(a)	42§281	Indefinite		Indefinite	
Total, Budget Authority				\$69,966,000		\$72,864,000

FIG - 11

**NATIONAL INSTITUTES OF HEALTH
John E. Fogarty International Center**

Appropriations History

Fiscal Year	Budget Estimate to Congress	House Allowance	Senate Allowance	Appropriation
2005	\$67,182,000	\$67,182,000	\$67,600,000	\$67,182,000
Rescission				(\$550,000)
2006	\$67,048,000	\$67,048,000	\$68,745,000	\$67,048,000
Rescission				(\$670,000)
2007	\$66,681,000	\$66,681,000	\$66,832,000	\$66,378,000
Rescission				-
2008	\$66,594,000	\$67,599,000	\$68,000,000	\$67,741,000
Rescission				(\$1,183,000)
Supplemental				\$354,000
2009	\$66,623,000	\$68,905,000	\$68,476,000	\$68,691,000
Rescission				-
2010	\$69,227,000	\$70,780,000	\$69,409,000	\$70,051,000
Rescission				-
2011	\$73,027,000	-	\$72,914,000	\$70,051,000
Rescission				(\$615,089)
2012	\$71,328,000	\$71,328,000	\$68,653,000	\$69,754,000
Rescission				(\$131,835)
2013	\$69,758,000	-	\$69,969,000	-
Rescission				-
2014	\$72,864,000	-	-	-

Justification of Budget Request

John E. Fogarty International Center for Advanced Study in the Health Sciences

Authorizing Legislation: Section 301 and title IV of the Public Health Service Act, as amended.

Budget Authority (BA):

	FY 2012 Actual	FY 2013 CR	FY 2014 President's Budget	FY 2014 +/- FY 2012
BA	\$69,493,000	\$69,966,000	\$72,864,000	+\$3,371,000
FTE	55	59	59	+4

Program funds are allocated as follows: Competitive Grants/Cooperative Agreements; Contracts; Direct Federal/Intramural and Other.

Director's Overview

From leading the call for an AIDS-free generation to developing vaccines and therapeutics for diseases that affect populations worldwide, the United States is a global leader in health research and scientific advances that improve the lives of Americans and people across the globe. These discoveries are often made by U.S. and foreign scientists working in close collaborations that enable the best and brightest minds to tackle complex health challenges together. The Fogarty International Center therefore supports innovative training and research programs for U.S. and low- and middle-income country (LMIC) scientists that strengthen the research capabilities and catalyze the international scientific partnerships that lead to research discovery and improved health. By investing in current and future leaders in global health research and strengthening the long-term capacity of research institutions to provide robust and sustainable platforms for cutting-edge science, Fogarty advances the goals and extends the leadership of the NIH and the U.S. government in science and research, while playing a vital role in building the capacity needed to successfully tackle critical health challenges.

Recruiting and Retaining Diverse Scientific Talent and Creativity: Fogarty programs have supported long-term research training for over 4,500 scientists worldwide, in collaboration with over 230 U.S. and LMIC research institutions. These investments provide unique training opportunities for early-career global health researchers, and aid in the retention of this diverse scientific talent in the research enterprise.

- Fogarty's *Framework Programs for Global Health Innovation* brings together teams of postdoctoral trainees from many disciplines to produce fresh insights into global health problems, and innovations for implementation in low-resource settings. For example, a medical, engineering, and architecture team from Boston, South Africa, and Peru is receiving the training needed to design and validate effective, affordable prototypes for

air disinfection that can help prevent airborne infections, such as tuberculosis and influenza from spreading in low-resource settings.

- Funded under the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) in partnership with 18 NIH Institutes and Centers, and co-administered by Fogarty and the Health Resources and Services Administration (HRSA), the *Medical Education Partnership Initiative (MEPI)* is transforming medical education and research training for medical students in 12 African countries. The 13 direct *MEPI* awardees and over 40 partner institutions use a broad range of state-of-the-art teaching and collaboration tools—including e-Learning and resource-sharing—to train the next generation of scientific leaders to solve their country's most pressing health problems—from HIV/AIDS to maternal and child health, and to non-communicable conditions, such as mental health and cardiovascular disease. *MEPI* is increasing the quality, quantity, and retention of medical faculty and physicians with research skills, and building relationships with the public sector partners that promote sustainable research capacity. For example, Zimbabwe's Ministry of Education is now co-funding the University of Zimbabwe's *MEPI* work.

Translational Science: Fogarty programs support researchers who are generating critical scientific evidence and applying this research to specific interventions, policies, and programs. Infectious disease outbreaks from human and animal hosts pose significant potential health and economic threats to the U.S. and other countries.

- Fogarty's *Research and Policy in Infectious Disease Dynamics (RAPIDD)* program—co-funded by the Department of Homeland Security—brings together senior infectious disease modelers and postdoctoral fellows to conduct the research and develop infectious disease modeling approaches that can help the U.S. and other policymakers plan for and respond to potential infectious disease threats. *RAPIDD* models have contributed to a greater understanding of how Avian Influenza, as well as Hand, Foot, and Mouth disease, can develop into outbreaks from an initial case, and how these outbreaks can be controlled effectively.

Today's Basic Science for Tomorrow's Breakthroughs: Fogarty supports catalytic basic biomedical and behavioral research that can lead to tomorrow's breakthroughs.

- Fogarty's *Brain Disorders* program supports cutting-edge research in LMICs on nervous system development, function, and impairment throughout life—research that could lead to new diagnostics, prevention, and treatment strategies. In India, grantees are exploring why Alzheimer's affects Indian populations less than populations in developed countries, with the goal of discovering useful evidence to understand and mitigate Alzheimer's globally. In Uganda, Fogarty-supported research is creating a base of knowledge on dementia in those with long-term HIV infection, and to obtain the data on prevalence, risk factors, and possible differentiation by HIV sub-type that will be useful in understanding the course of the disease and developing potential interventions.

Future Challenges: The need for sustainability poses a significant challenge for investments in global health research and research training. Fogarty investments continue to evolve with increasing research capabilities in LMICs in order to build on successes and support the training of individual scientists and strengthen research institutions. In addition, Fogarty will increase support for institutional networks and hubs for data collection and sharing. When such sharing platforms are built around a core of trained individuals and strengthened institutions, they can effectively harness the different strengths of these institutions, and promote enhanced efficiencies and more robust, collaborative science.

- Fogarty envisions that its U.S.-LMIC *GEOHealth* hubs will become global leaders in the collection, management, synthesis, and interpretation of data on environmental and occupational health, serving the larger multi-national regions in which they reside, as well as supporting research of great relevance to both these LMIC regions and the U.S.
- In sub-Saharan Africa, universities supported by *MEPI* are emerging as regional training centers and upgrading the technology to enable distance learning and resource-sharing among institutions. This model is revolutionizing African medical education and research training by enabling partner institutions across Africa to pool their areas of expertise, share teaching tools, and ensure that all students receive the highest-quality instruction from the continent's best qualified faculty and researchers.

In an increasingly interconnected world, the U.S. is often called upon to play a leading role in addressing the world's most pressing challenges. Fogarty programs harness the capabilities of the U.S. as a leader of biomedical research, extend the frontiers of science, accelerate discovery, improve the health of Americans and people across the globe, and help the U.S. continue to compete and lead in science.

Overall Budget Policy: The FY 2014 request for FIC is \$72.864 million, an increase of \$3.371 million, or 4.8 percent over the FY 2012 Actual level. FIC distributes its resources among many programs and mechanisms and is committed to funding the largest number of meritorious projects possible, while allowing the flexibility needed to support selected program priorities and to respond to emerging scientific opportunities. Funding decisions are based on the number of high-quality applications, the overall number of applications, and the availability of funds. FIC funds a large number of initiatives with collaborating funding partners that include other NIH Institutes/Centers, other government agencies, and non-government organizations. Funding decisions take into account program relevance and overall portfolio consideration.

Funds are included in R&D contracts to support trans-NIH initiatives, such as the Basic Behavioral and Social Sciences Opportunity Network (OppNet).

Program Descriptions and Accomplishments

Research Capacity Strengthening: Identification of priority health challenges and development of effective health interventions to address those challenges require a critical mass of U.S. and low- and middle-income countries (LMIC) institutions that can conduct robust research and train the next generation of scientists to solve complex problems. Strong institutions that can conduct health research and train scientists in a wide range of disciplines are critical to finding solutions to global public health challenges, and to building the research workforce of the future. These institutions can stimulate innovative and multidisciplinary research on locally relevant problems, generate effective and implementable solutions, and build a nimble and networked research workforce. Fogarty investments are strengthening U.S. and LMIC research institutions by supporting the development of new research and research training models that will foster collaborative and sustainable research environments.

Budget Policy: The FY 2014 President's Budget estimate is \$37.401 million, an increase of \$1.135 million, or 3.1 percent above the FY 2012 Actual level. FIC's Strategic Plan provides the pathway toward developing sustainable global health research and training programs where they are needed most. The plan's first goal is to mobilize the scientific community to address the growing epidemic of chronic, non-communicable diseases related to increased longevity and changing lifestyles in the developing world. To accomplish this, FIC continues to invest in this area, while also investing in the critical infectious diseases agenda. With the merging of several FIC AIDS programs into one called the HIV AIDS Research Training Program, FIC plans to increase funding by \$1.0 million, supporting grants that focus on building or strengthening HIV-related capacity in a particular scientific or critical research infrastructure area at LMIC institutions.

Program Portrait: Global Environmental and Occupational Health (GEOHealth) Hub Program

FY 2012 Level: \$0.528 million

FY 2014 Level: \$0.628 million

Change: +\$0.100 million

An untold number of illnesses and deaths around the world come from environmental and occupational hazards, such as contaminated air, water, soil, and food. In low- and middle-income countries (LMICs), exposures to indoor air pollution from cooking fires, outdoor pollution, radiation, contaminated water, and extreme weather events contribute to nearly a quarter of all deaths and illnesses. Despite the severity of these exposures, many low-resource countries lack the expertise to study the linkages between environmental and occupational risk factors and disease. U.S. researchers find it difficult to study these questions given that environmental and occupational exposures in the U.S. are generally not at high enough concentrations for sustained enough periods to allow for scientific study. To help fill this gap, Fogarty's *Global Environmental and Occupational Health (GEOHealth) Hub Program* was recently launched in partnership with the National Institute of Environmental Health Sciences (NIEHS) and the CDC's National Institute for Occupational Safety and Health (NIOSH).

GEOHealth will develop a network of collaborative research training hubs in LMICs that will, in close partnership with U.S. academic institutions, focus on collaborative research, data management, training, curriculum development and policy support regarding high-priority environmental and occupational health research in their regions. The hubs will build a critical mass of well-trained scientists in LMICs with support and recognition from national governments, and provide world-class platforms for collaborative population-based environmental health research of global relevance. In FY 2012 and FY 2013, FIC provided planning grants for 16 regional hubs, each managed by both a U.S. and a host country institution. In FY 2014, the most successful of these projects will be supported with comprehensive research and training awards, with each hub focusing on up to three critical environmental and occupational hazards. For example, a hub in Bangladesh will focus on water contamination, indoor air pollution caused by cooking and heating fuels, and urban smog, while a consortium in Ethiopia will target indoor and outdoor air quality, climate change and occupational health with an emphasis on agriculture. Using the core sciences of environmental monitoring, exposure science, epidemiology, genetics, biostatistics, information and communications technology, and data management, the *GEOHealth* hubs will become 21st century knowledge synthesis networks in the developing world.

Sustainable Development of Human Resources for Global Health Research: Breakthrough scientific advances in global health are built upon a foundation of well-trained researchers, over 5,000 to date, from both high-income countries and LMICs who collaborate to solve major global health problems. Investing in the best and brightest minds, and catalyzing research and training partnerships between talented U.S. and LMIC scientists continues to be a FIC high priority. Well-trained LMIC researchers bring an understanding of the unique biological, epidemiological, social, and cultural contexts of their communities, thereby contributing this knowledge to research on locally relevant challenges that often have broader, global implications. A further investment is in FIC's Global Health Research and Research Training eCapacity Initiative Program which will support innovative research education programs to teach researchers at LMIC institutions the knowledge and skills necessary to incorporate Information and Communication Technology (ICT) into global health research and research training.

Budget Policy: The FY 2014 President's Budget estimate is \$8.105 million, an increase of \$1.663 million, or 25.8 percent above the FY 2012 Actual level. FIC's impact has historically been most significant in developing the pipeline of U.S. and foreign research talent. FIC intends to expand the number of overseas research experiences available for young U.S. scientists in order to encourage them to adopt careers in global health. FIC will also continue its research training partnerships between U.S. and foreign institutions and strive to enhance research

opportunities for foreign scientists when they return home. In further support, FIC will fund eCapacity training, focusing on the capacity building activities at LMIC institutions.

Program Portrait: Fogarty Global Health Program for Fellows and Scholars

FY 2012 Level: \$3.397 million

FY 2014 Level: \$4.397 million

Change: +\$1.000 million

Over the last decade, American university campuses have seen a soaring interest in global health among students and faculty from diverse fields. Since 2004, Fogarty has met this interest by providing individual support to more than 500 fellows (postdoctoral students and MDs) and scholars (current PhD and MD students) for hands-on, clinical research training experiences in low- and middle-income countries (LMICs). To build on this success and continue fostering the next generation of global health scientists, Fogarty and 17 NIH Institutes and Centers partners are building a new network of 20 U.S. and international academic institutions arranged into five consortia that will provide early-career physicians, nurses, veterinarians, dentists and scientists with a significant mentored research experience in a developing country. Over the next five years, the *Fogarty Global Health Program for Fellows and Scholars* will support more than 400 early-career health scientists with focused mentoring and nearly year-long global health clinical research experiences at approximately 80 established research sites in 27 LMICs. The program will enhance the career trajectory of participants, strengthen global health research programs at U.S. and foreign institutions, and bolster networking among fellows, scholars, and senior mentors.

Earlier versions of this program have seen great returns. Participants have published more than 750 articles in peer-reviewed journals, presented research findings at numerous scientific meetings, and used their research training to make practical improvements and advancements in treating disease. In South Africa, Dr. Kogieleum Naidoo attributes the Fogarty scholars program with teaching her the research skills, and providing the mentoring needed enabling her to contribute to significant scientific advances that improve outcomes for people co-infected with HIV and TB. Fogarty fellow Dr. Gerald Bloomfield used his expertise in cardiovascular research and training in Kenya and other countries when he identified an epidemic of diabetes, heart failure and high blood pressure; he put together an educational series of lectures for medical students, residents and technicians on the topics in collaboration with his mentors in Kenya and the U.S. Fellows and scholars will be engaged in research training related to a wide range of diseases and conditions, including HIV/AIDS, tuberculosis, cancer cardiovascular disease, mental health, and diabetes.

International Collaborative Research: Fogarty-supported research collaborations between U.S. and LMIC scientists make U.S. academic institutions more globally competitive, extend their reach, and enable U.S. scientists to lead and participate in international research teams that address key global health priorities. For example, the burden of chronic, non-communicable diseases is climbing at a rapid rate in many LMICs due to dramatic gains in life expectancy, urbanization, and global economic development. This has led to a shared research agenda between high-income countries and LMICs, as well as opportunities to share knowledge and lessons learned. These partnerships also lead to more robust solutions to global health problems, as the respective strengths and expertise of local and U.S. scientists are brought to bear on complex challenges. Whether the focus is international collaborative research on tobacco control or the prediction and containment of emerging infectious diseases, discoveries and evidence generated by these projects have implications for U.S. populations.

Budget Policy: The FY 2014 President's Budget estimate is \$12.413 million, an increase of \$0.403 million, or 3.4 percent above the FY 2012 Actual level. This area encourages implementation science to address the "know-do" gap, and would expand research training

opportunities for U.S. and foreign scientists, foster a sustainable research environment in LMICs, and build strategic partnerships to further global health.

Program Portrait: International Cooperative Biodiversity Groups (ICBG)

FY 2012 Level: \$2.500 million

FY 2014 Level: \$3.200 million

Change: +\$0.700 million

The *International Cooperative Biodiversity Groups (ICBG) Program* is a unique effort by five U.S. government agency partners—the NIH, the National Science Foundation, the United States Department of Agriculture, the National Oceanic and Atmospheric Administration and the Department of Energy—to concretely link scientific discovery to better health, by supporting the translation of biomedical discoveries into new therapies and other products that support human well-being, such as new bio-fuels, crop protection agents, and drugs for animal health. The *ICBG* supports collaborative, multidisciplinary teams of U.S. and international scientists to conduct discovery research on the health applications of molecules from plants, animals, and microorganisms, while initiating partnerships with companies interested in developing these molecules for potential new drugs or diagnostics. The program also works to ensure that the socioeconomic benefits of discoveries reach the communities where discoveries are made, and that the biodiversity that makes continued scientific discovery possible is protected. The *ICBG* has supported discovery research for cancer, malaria, tuberculosis (TB), HIV/AIDS, and immune and central nervous system disorders, and has achieved numerous scientific breakthroughs, including three active patents in cancer and malaria, over 600 published scientific papers, and over 4,000 trained U.S. and international scientists.

In Fiji, an *ICBG* team led by ecologists studying the interaction of fish, algae, and coral observed that the algae were able to protect themselves from infectious agents, such as marine fungi. Using this knowledge, the *ICBG* team successfully tested the malaria parasite with extracts from these algae and discovered and patented a potential new anti-malarial agent. Given the recent rise of drug-resistant malaria, this could be a significant discovery in the fight against this wide-spread disease. In Fiji and other places, such as the Philippines and Panama, the *ICBG* teams are identifying different agents that can be used to develop new therapeutics from plants, animals, and microorganisms around the world, while working together with local governments and communities to protect natural bioresources for environmental and economic sustainability and future biodiscovery.

Research Management and Support (RMS): FIC’s RMS provides administrative, budgetary, logistical, and scientific support to review, award, and monitor research grants, training awards, and contracts. It encompasses strategic planning, coordination, and evaluation of the Center’s programs; regulatory compliance; international coordination; international science policy; and liaisons with other Federal agencies, Congress, and the public. Specific functions include an in-house epidemiology section performing mathematical modeling of infectious diseases; international program officers developing partnerships between U.S. scientists and institutions and their counterparts abroad to advance scientific research and training; identification of collaborative opportunities with foreign science funding agencies; support for all NIH international travel by issuing and tracking official government passports and international visas; review and approval of Notice of Foreign Travel requests; and the creation and coordination of official travel cables to U.S. Embassies.

Budget Policy: The FY 2014 President’s Budget estimate is \$14.945 million, an increase of \$0.170 million, or 1.2 percent above the FY 2012 Actual level.

**NATIONAL INSTITUTES OF HEALTH
John E. Fogarty International Center**

**Budget Authority by Object Class
(Dollars in Thousands)**

	FY 2012 Actual	FY 2014 PB	Increase or Decrease
Total compensable workyears:			
Full-time employment	55	59	4
Full-time equivalent of overtime and holiday hours	0	0	0
Average ES salary (in whole dollars)	\$179,700	\$0	(\$179,700)
Average GM/GS grade	12.1	12.1	0.0
Average GM/GS salary (in whole dollars)	\$101,326	\$101,326	\$0
Average salary, grade established by act of July 1, 1944 (42 U.S.C. 207) (in whole dollars)	\$0	\$0	\$0
Average salary of ungraded positions (in whole dollars)	\$0	\$0	\$0
OBJECT CLASSES	FY 2012 Actual	FY 2014 PB	Increase or Decrease
Personnel Compensation:			
11.1 Full-time permanent	\$4,478	\$4,900	\$422
11.3 Other than full-time permanent	1,118	1,224	106
11.5 Other personnel compensation	149	163	14
11.7 Military personnel	130	142	12
11.8 Special personnel services payments	0	0	0
Total, Personnel Compensation	\$5,875	\$6,429	\$554
12.0 Personnel benefits	\$1,602	\$1,754	\$152
12.2 Military personnel benefits	53	58	5
13.0 Benefits for former personnel	0	0	0
Subtotal, Pay Costs	\$7,530	\$8,241	\$711
21.0 Travel and transportation of persons	\$348	\$300	(\$48)
22.0 Transportation of things	18	18	(0)
23.1 Rental payments to GSA	0	0	0
23.2 Rental payments to others	1	1	0
23.3 Communications, utilities and miscellaneous charges	135	135	0
24.0 Printing and reproduction	1	1	(0)
25.1 Consulting services	(0)	0	0
25.2 Other services	2,745	2,753	8
25.3 Purchase of goods and services from government accounts	7,055	6,799	(256)
25.4 Operation and maintenance of facilities	3	3	0
25.5 Research and development contracts	425	781	356
25.6 Medical care	0	0	0
25.7 Operation and maintenance of equipment	29	29	0
25.8 Subsistence and support of persons	0	0	0
25.0 Subtotal, Other Contractual Services	\$10,255	\$10,365	\$110
26.0 Supplies and materials	\$72	\$65	(\$7)
31.0 Equipment	109	90	(19)
32.0 Land and structures	0	0	0
33.0 Investments and loans	0	0	0
41.0 Grants, subsidies and contributions	51,024	53,648	2,624
42.0 Insurance claims and indemnities	0	0	0
43.0 Interest and dividends	0	0	(0)
44.0 Refunds	0	0	0
Subtotal, Non-Pay Costs	\$61,963	\$64,623	\$2,660
Total Budget Authority by Object Class	\$69,493	\$72,864	\$3,371

Includes FTEs whose payroll obligations are supported by the NIH Common Fund.

NATIONAL INSTITUTES OF HEALTH
John E. Fogarty International Center

Salaries and Expenses
(Dollars in Thousands)

OBJECT CLASSES	FY 2012 Actual	FY 2014 PB	Increase or Decrease
Personnel Compensation:			
Full-time permanent (11.1)	\$4,478	\$4,900	\$422
Other than full-time permanent (11.3)	1,118	1,224	106
Other personnel compensation (11.5)	149	163	14
Military personnel (11.7)	130	142	12
Special personnel services payments (11.8)	0	0	0
Total Personnel Compensation (11.9)	\$5,875	\$6,429	\$554
Civilian personnel benefits (12.1)	\$1,602	\$1,754	\$152
Military personnel benefits (12.2)	53	58	5
Benefits to former personnel (13.0)	0	0	0
Subtotal, Pay Costs	\$7,530	\$8,241	\$711
Travel (21.0)	\$348	\$300	(\$48)
Transportation of things (22.0)	18	18	0
Rental payments to others (23.2)	1	1	0
Communications, utilities and miscellaneous charges (23.3)	135	135	0
Printing and reproduction (24.0)	1	1	0
Other Contractual Services:			
Advisory and assistance services (25.1)	0	0	0
Other services (25.2)	2,745	2,753	8
Purchases from government accounts (25.3)	5,195	4,865	(330)
Operation and maintenance of facilities (25.4)	3	3	0
Operation and maintenance of equipment (25.7)	29	29	0
Subsistence and support of persons (25.8)	0	0	0
Subtotal Other Contractual Services	\$7,972	\$7,650	(\$322)
Supplies and materials (26.0)	\$72	\$65	(\$7)
Subtotal, Non-Pay Costs	\$8,547	\$8,170	(\$377)
Total, Administrative Costs	\$16,077	\$16,411	\$334

**NATIONAL INSTITUTES OF HEALTH
John E. Fogarty International Center**

Details of Full-Time Equivalent Employment (FTEs)

OFFICE/DIVISION	FY 2012 Actual			FY 2013 CR			FY 2014 PB		
	Civilian	Military	Total	Civilian	Military	Total	Civilian	Military	Total
Office of the Director									
Direct:	14	-	14	14	-	14	14	-	14
Reimbursable:	-	-	-	-	-	-	-	-	-
Total:	14	-	14	14	-	14	14	-	14
Office of Administrative Management									
Direct:	11	-	11	14	-	14	14	-	14
Reimbursable:	-	-	-	-	-	-	-	-	-
Total:	11	-	11	14	-	14	14	-	14
Division of International Relations									
Direct:	11	-	11	11	-	11	11	-	11
Reimbursable:	-	-	-	-	-	-	-	-	-
Total:	11	-	11	11	-	11	11	-	11
Division of International Training and Research									
Direct:	11	-	11	12	-	12	12	-	12
Reimbursable:	-	-	-	-	-	-	-	-	-
Total:	11	-	11	12	-	12	12	-	12
Division of International Science Policy, Planning & Evaluation									
Direct:	5	-	5	5	-	5	5	-	5
Reimbursable:	-	-	-	-	-	-	-	-	-
Total:	5	-	5	5	-	5	5	-	5
Division of International Epidemiology & Population Studies									
Direct:	2	1	3	2	1	3	2	1	3
Reimbursable:	-	-	-	-	-	-	-	-	-
Total:	2	1	3	2	1	3	2	1	3
Total	54	1	55	58	1	59	58	1	59
Includes FTEs whose payroll obligations are supported by the NIH Common Fund FTEs supported by funds from Cooperative Research and Development Agreements									
FISCAL YEAR	Average GS Grade								
2010	11 9								
2011	11 9								
2012	12 1								
2013	12 1								
2014	12 1								

**NATIONAL INSTITUTES OF HEALTH
John E. Fogarty International Center**

Detail of Positions

GRADE	FY 2012 Actual	FY 2013 CR	FY 2014 PB
Total, ES Positions	1	0	0
Total, ES Salary	\$179,700	\$0	\$0
GM/GS-15	8	8	8
GM/GS-14	15	15	15
GM/GS-13	7	7	7
GS-12	4	6	6
GS-11	6	6	6
GS-10	0	0	0
GS-9	4	4	4
GS-8	1	2	2
GS-7	2	5	5
GS-6	0	1	1
GS-5	1	1	1
GS-4	1	0	0
GS-3	0	0	0
GS-2	1	1	1
GS-1	0	0	0
Subtotal	50	56	56
Grades established by Act of July 1, 1944 (42 U.S.C. 207):			
Assistant Surgeon General	0	0	0
Director Grade	1	1	1
Senior Grade	0	0	0
Full Grade	0	0	0
Senior Assistant Grade	0	0	0
Assistant Grade	0	0	0
Subtotal	1	1	1
Ungraded	12	12	12
Total permanent positions	51	51	51
Total positions, end of year	64	69	69
Total full-time equiv (FTE) at YE	55	59	59
Average ES salary	\$179,700	\$0	\$0
Average GM/GS grade	12.1	12.1	12.1
Average GM/GS salary	\$101,326	\$101,326	\$101,326

Includes FTEs whose payroll obligations are supported by the NIH Common Fund.