Background

CDC’s Center for State, Tribal, Local, and Territorial Support (CSTLTS) developed a five-year notice of funding opportunity (NOFO) for a regional, nonprofit organization to strengthen the quality, performance, and sustainability of US-Affiliated Pacific Islands (USAPI) governmental and nongovernmental components of the public health system through capacity-building assistance (CBA). The goal with this NOFO is to optimize quality public health business services, workforce, data and information systems, practice and services, partnerships, laws and policies, and resources.

Strategies and Activities

The strategies below originate from national recommendations for CBA and are based on CDC and CSTLTS priorities, program experience, and evidence-based recommendations from the scientific literature and national reports published by federal councils and national public health organizations, such as the Department of Health and Human Services, *Healthy People 2020* and *2030*, the National Prevention Strategy, and the World Health Organization. The recipient will address these seven CBA strategies and activities:

1. **Public health workforce**: Activities to enable improvement of competencies and resources to strengthen leadership and workforce development
2. **Public health system and infrastructure**: Activities to strengthen system and agency needs and determine steps to improve operational capacity
   a. **Sub-strategies**: Accountability performance management, quality improvement; business process improvement; communications; financial management; information technology systems
3. **Public health laws and policies**: Activities to improve the ability to interpret and inform laws, including statutes and regulations, and health policies
4. **Translation and implementation of evidence-based public health practices and services for USAPI population**: Activities to strengthen the delivery of essential public health services
5. **Public health monitoring and surveillance systems**: Activities to increase the capacity to support collection, integration, maintenance, dissemination, and interpretation of data across the public health system
6. **Communications**: Activities to improve the use of communications to affect health decisions and actions
7. **Partnerships**: Activities to improve the establishment and maintenance of results-driven partnerships

Outcomes

This CBA initiative will demonstrate measurable progress of the USAPI public health system toward the following outcomes:

1. **Public health workforce**
   - Increased knowledge, skills, resource, support, and structure to enhance competencies among public health leadership and workforce
   - Strengthened workforce qualifications, performance, service delivery, and increase leadership capacity around policy formulation and program implementation
   - Improved multi-sectoral leadership action to strategically address population health needs and build workforce capacity and retention
2. **Public health system and infrastructure**
   - Increased implementation of processes and services that build operational efficiency and effectiveness
   - Increased use of performance management systems to monitor and evaluate operational processes
   - Improved operational efficiency and effectiveness

3. **Public health laws and policies**
   - Increased awareness of how laws and policies affect the public’s health among public health practitioners, government and non-governmental agencies, and political leaders
   - Increased practical, legal-and policy-centered tools and resources for public health practitioners, government and non-governmental agencies, and political leaders
   - Increased implementation of evidence-based public health laws and policies by public health practitioners, government and non-governmental agencies, and political leaders

4. **Translation and implementation of evidence-based public health practices and services for USAPI population**
   - Increased capacity to assess evidence-based public health practices and services for cultural relevance
   - Enhanced capacity to integrate and coordinate culturally relevant practices and services across multiple settings
   - Increased ability to translate and widely implement evidence-based practices and services across multiple settings

5. **Public health monitoring and surveillance systems**
   - Increased knowledge and capacity to develop national health data systems and registries
   - Improved collection, maintenance, interpretation, and dissemination of population health data
   - Improved capacity to identify population health needs through data driven decision-making

6. **Communications**
   - Improve communication capacity to inform the public effectively and efficiently
   - Strengthened capability to use communication to affect health decisions and actions
   - Increased communication capacity through public health practitioners, government and non-governmental agencies, and political leaders

7. **Partnerships**
   - Improved capacity to establish and maintain partnerships within and across sectors to create a shared public health vision
   - Strengthened capability to respond to public health priorities collaboratively and strategically
   - Improved capacity to address public health priorities through collaboration and partnerships

### Funding

This cooperative agreement has a period of performance length of five years. All funded activities must adhere to the following period of performance and budget period:

- **Period of Performance Length:** 5 Years (August 1, 2021–July 31, 2026)
- **Budget Period Length:** 12 months, each year, (August 1–July 31)

### For More Information

Contact [USAPIPartnerCoAg@cdc.gov](mailto:USAPIPartnerCoAg@cdc.gov) for more information.