Support for National Behavioral Health Technical Assistance and Supportive Services

WHEREAS, the National Indian Health Board (NIHB), established in 1972, serves all Federally recognized American Indian/Alaska Native (AI/AN) Tribal governments by working to improve the state of health care, public health and behavioral health delivery to AI/ANs, as well as upholding the Federal government’s trust responsibility to AI/AN Tribal governments; and

WHEREAS, American Indian and Alaska Native people experience disproportionately higher rates of suicide, substance abuse, depression, associated health outcomes and high risk behaviors than the national average; and

WHEREAS, intergenerational trauma and historical grief compound other behavioral health challenges faced by American Indian and Alaska Native peoples; and

WHEREAS, NIHB recognizes the value and necessity of Tribes designing and implementing their own behavioral health strategies, and will continue to advocate for and support avenues to enable that process; and

WHEREAS, the National Indian Health Board has been previously directed by its Board of Directors and Tribes to focus staff time and resources advocating for and creating resources and networks to strengthen behavioral health services and programs in Indian Country; and

WHEREAS, NIHB has been collaborating with the Indian Health Service under the National Indian Outreach and Education (NIHOE) II: Behavioral Health cooperative agreement since September 2016 to promote behavioral health as central to the health and well-being of American Indian and Alaska Native communities; and

WHEREAS, under the NIHOE: Behavioral Health cooperative agreement, NIHB assists national entities and committees of American Indian and Alaska Native subject matter expertise, Tribal leaders and engaged stakeholders to meet, coordinate efforts, and develop plans to address relevant concerns; provide training and/or technical assistance services and resources to Tribes addressing behavioral health challenges; and host and facilitate a national conference on behavioral health for Tribally-based behavioral health providers and those stakeholders working in behavioral health in Indian Country; and

WHEREAS, through the conduct of a national, multi-day conference in 2017 and 2018 addressing American Indian and Alaska Native behavioral health concerns, NIHB facilitated a total of
172.5 hours of in-person technical and capacity building assistance, provided 59 individual hours of continuing education credit for over 500 Tribal or Indian Health Service employees, urban Indian health center staff, non-profit partners, and engaged community stakeholders; and

WHEREAS, the National American Indian and Alaska Native Behavioral Health Conference is one of the only conferences run by a Tribal organization for AI/AN-serving behavioral health providers; and

WHEREAS, discontinuing or repurposing NIHOE II funds would jeopardize the National American Indian and Alaska Native Behavioral Health Conference, and force Tribal-based and AI/AN-serving providers to seek educational and skills-building opportunities from non-AI/AN entities; and

WHEREAS, loss of this program would create permanent loss of capacity and ability to care for the unique set of behavioral health needs of Tribal members in their community; and

WHEREAS, the funding received by NIHB and the services provided by said funds are designed to complement the individualized and area-level technical assistance that each of the twelve Tribal Epidemiology Centers provide under a separate IHS funding stream; and

WHEREAS, 2017 and 2018 participants of the National American Indian and Alaska Native Behavioral Health Conference characterized the conference as useful and valuable to the fulfilment of their job responsibilities; and

THEREFORE BE IT RESOLVED, that the Board of Directors of the National Indian Health Board requests that the Indian Health Service provide support to the National Indian Health Board to assist national entities and committees of American Indian and Alaska Native subject matter expertise, Tribal leaders and engaged stakeholders to meet, coordinate efforts, and develop plans to address relevant concerns; provide training and/or technical assistance services and resources to Tribes addressing behavioral health challenges; and host and facilitate a national conference on behavioral health for Tribally-based behavioral health providers and those stakeholders working in behavioral health in Indian Country.

CERTIFICATION

The foregoing resolution was adopted by the Board, with quorum present, on the 15th day of August, 2018 by affirmative vote of 5 FOR and 1 AGAINST (Nashville Area).

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Chairperson, Vinton Hawley

ATTEST:

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Recording Secretary, Lisa Elgin