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

WHEREAS, AI/AN Tribes have largely been left out of the development of the U.S. public health infrastructure during the last century; and

WHEREAS, there exists a need for a blueprint for strengthening and modernizing public health capacity and infrastructure in Indian Country; and

WHEREAS, to be relevant and valuable, this blueprint for Tribal public health capacity building must reflect and accurately represent Tribal needs and priorities; and

WHEREAS, Tribes are experts in what their needs and priorities are; and

WHEREAS, to accurately capture and understand Tribal needs and priorities, a Tribally-driven process must be used to develop this blueprint for Tribal public health capacity building; and

WHEREAS, NIHB undertakes all actions in a manner that respects and honors Tribal sovereignty and self-determination; and

WHEREAS, NIHB ensures that its work is Tribally-driven by ongoing, continuous and meaningful engagement with the NIHB Board of Directors, Tribal leaders from across Indian Country, NIHB regional member organizations, and community leaders and citizens from Tribal Nations; and

WHEREAS, the Centers for Disease Control and Prevention (CDC) has provided funding to NIHB to develop a Tribal Public Health Agenda (TPHA); and

WHEREAS, a finalized TPHA will likely be used by stakeholders, including federal agencies and the CDC, to direct resources and focus activities which in turn will impact Tribes; and
WHEREAS, CDC’s Tribal Consultation Policy requires that all agency programs consult with Tribal governments when developing programs, policies, and activities that will affect Native populations; and

WHEREAS, NIHB seeks to facilitate engagement between Tribes and federal agency officials through formal Tribal consultation, listening sessions, Tribally-selected work groups and committees, and others means Tribes determine may be appropriate; so

NOW THEREFORE BE IT RESOLVED, that NIHB calls for a formal Tribal consultation so that: CDC can share how the agency intends to use a finalized TPHA, to ensure Tribes support continuation of the project, and to inform the design and implementation of a process to develop the TPHA; and

NOW BE IT FURTHER RESOLVED, that NIHB calls for a Tribally-selected steering committee or work group that will guide the project and ensure that Tribal input is included throughout the process of developing the TPHA, assuming Tribes are in support of project; and

NOW BE IT FURTHER RESOLVED, that NIHB calls for the use of additional multiple communication platforms determined appropriate by Tribes, throughout the TPHA development process, to garner meaningful input from Tribes across all of Indian Country; and

NOW THEREFORE BE IT FINALLY RESOLVED, that NIHB calls for a formal Tribal consultation at the conclusion of the project to allow Tribes an opportunity to review the TPHA and validate findings or provide corrections or additions before publishing a final TPHA.

CERTIFICATION

The foregoing resolution was adopted by the Board, with quorum present, on the 15 day of September, 2019.

VICTORIA KITCHEYAN
Chairperson, Victoria Kitcheyan

LISA ELGIN
Secretary, Lisa Elgin