



CDC TCAC November 2008 Recommendations



❖ **Recommendation:**

TCAC strongly recommend that the HHS leadership put in place by the new administration, as part of its transition process, establish the American Indian / Alaska Native (AI/AN) organizational unit as a specific office within the Office of the Director at CDC. NACI should also include this effort in its transition communication to authorities. Furthermore, in order to assure institutionalization of the CDC Office of AI/AN Tribal Affairs and staff positions at CDC, a plan to assure a smooth transition of staffing needs to be developed to assure continuation of activities is maintained. Senior AI/AN public health professionals need to be identified who can step into these positions prior to them being vacated by retirements. It was also suggested that an internship program be developed to allow adequate time and mentoring for this effort. The motion was carried unanimously.

❖ **Recommendation:**

CDC should consider developing a tribal training center and utilize a clearinghouse approach so that the “best practices that are being developed in CDC collaborative work with tribes” can be mimicked in other new program areas of tribal importance.

CDC should share these “best practices” at upcoming AI/AN conferences to help inform and train tribal leaders and tribal health staff. CDC needs to provide more technical assistance in the public health arena so that tribes are able to implement these programs at the local level.

❖ **Recommendation:**

Strongly recommend that NIH hold a “CDC Day” at their annual conference, or highlight CDC in the morning and another agency in the afternoon. Simply having the Public Health Summit does not create the visibility needed for tribes to understand CDC and what it has to offer AI/AN tribes.

❖ **Recommendation:**

Include a AI/AN youth on the upcoming expert panel on suicide prevention.

❖ **Recommendation:**

TCAC has only scratched the surface of creating a relationship between CDC and Indian Country. TCAC strongly urges the new administration to encourage additional development and full support of the relationship to impact the public health issues negatively affecting AI/ANs.

❖ **Recommendation:**

CDC should increase funding and technical assistance as needed to improve local, regional, and national epidemiologic comprehensive data and knowledge regarding AI/AN tribes and people.

❖ **Recommendation:**

CDC should work directly with TECs and their constituent tribes to gain access to multiple disease surveillance systems that potentially have data about AI/AN populations.

❖ **Recommendation:**

CDC should systematically assist the TECs in pulling information from multiple data sources into a more reliable, valid, and succinct description of community health status that tribal leaders can use for improved public health planning.

❖ **Recommendation:**

Tribal infrastructure to address public health needs is limited. There needs to be increased funding to support capacity and infrastructure development in this area, including direct funding to assist in building and supporting a AI/AN public health workforce.