In an effort to honor individuals, Tribes, organizations, and programs that have enriched and improved American Indian and Alaska Native public health, the National Indian Health Board (NIHB) created the Public Health Innovation Award. This new award was created to recognize excellence, achievement, and innovations that are above and beyond the call of service. This is the first time that NIHB has ever dedicated an award to solely honor public health work, and reflects the role that public health plays in our health care delivery and service system, as well as the role that public health plays in helping to restore and sustain health and well-being to our communities.

2015 Public Health Innovation Award Recipient
DONALD K. WARNE

Donald K. Warne, MD, MPH, has made numerous contributions to improving the quality of life for American Indians. His most recent role is Director of the Master of Public Health (MPH) Program at North Dakota State University (NDSU). Dr. Warne accepted this position when he learned the Dean of the school which houses the MPH program supported his idea of establishing an American Indian Public Health track, stating, “It’s long overdue.” With Dean Charles Peterson’s support, the NDSU MPH program offers an American Indian Public Health Track, the first in the U.S. Thanks to Dr. Warne’s vision and Dean Charles Peterson’s support, cadres of students are graduating with MPH degrees with specific education in American Indian public health. These future students will help Tribal Nations achieve health equity for all their people.

Additionally, Dr. Warne secured funding from the Helmsley Charitable Trust to establish the American Indian Public Health Resource Center (AIPHRC) within the NDSU MPH program. The purpose of the AIPHRC is to provide assistance to Tribal Nations to improve the health of their people through Tribal public health policy, education, research and services.
April 7-9, 2015

Dear Tribal Leaders, Advocates, Colleagues, and Friends:

The National Indian Health Board (NIHB) is pleased to welcome you to its 6th Annual Tribal Public Health Summit! We are honored to be here in this beautiful location with our gracious hosts from the California Rural Indian Health Board and the Agua Caliente Band of Cahuilla Indians.

NIHB, in partnership with Tribes throughout Indian Country, has worked tirelessly over the past four decades to strengthen the systems, infrastructure, data, and collaborations that allow us to better care for the collective well-being of our people. This week represents the annual culmination of that work. The Summit’s theme “Strengthening the Circle: Building the Skills of the Tribal Public Health Workforce” focuses on developing the capacity of Indian Country to engage in public health efforts across our communities. The conference will feature sessions on public health law and policy; culturally appropriate best practices; advocacy; and presentations from our federal agency partners. We will hear from Tribal leaders, stakeholders, practitioners and health innovators on how we can all join together and restore healthy Native communities. This week will present key opportunities for networking and relationship-building so that you can return home feeling enriched and connected to others so that we can continue to share this journey together.

This is an especially timely conference because it is also “National Public Health Week.” Supporters from across the country observe this week as a time to recognize the contributions of public health and highlight issues that are important to improving our nation. Public health is not about helping people to choose the right or wrong path, but providing our communities the resources and skills to make sure that there is no such thing as a ‘wrong’ path to begin with. Public Health Week serves as a key opportunity to discuss these critical issues in Indian Country – from public health law and public health accreditation to program execution and best practices to outreach and advocacy – this conference will help provide you with the tools you need to become a national advocate on public health. You can learn more about how you can be involved at National Public Health Week at www.nphw.org.

Thank you for joining us in Palm Springs, California, and for sharing your time and expertise with us. Thank you to our sponsors, exhibitors, presenters and attendees for making this conference a reality. I look forward to hearing from all of you throughout the next few days.

Sincerely,

Lester Secatero
Chairperson, NIHB Board
National Indian Health Board

OUR MISSION

One Voice affirming and empowering American Indian and Alaska Native Peoples to protect and improve health and reduce health disparities.

WHAT IS THE NATIONAL INDIAN HEALTH BOARD?

The National Health Board (NIHB) is a 501(c) 3 not for profit, charitable organization serving all 566 federally recognized Tribal governments for the purpose of ensuring that the federal government upholds its trust responsibilities to provide health care to the Tribes. NIHB also works to elevate health care status, services and systems of the Tribes and our Peoples. NIHB provides policy analysis and advocacy on American Indian and Alaska Native (AI/AN) health and public health services, facilitates Tribal budget consultation, develops policy analysis, leads national tribal public health programs and policy, is the coalition lead for the NIHB National Tribal Health Information Technology Extension Center (HITEC), and delivers timely information and other services to all Tribal Governments. Whether Tribes operate their own health care delivery systems through contracting and compacting or receive health care directly from the Indian Health Services (IHS), NIHB is their national advocate. NIHB also conducts research; provides policy analysis; assists with Tribal capacity building in health program development, management and assessment; provides national and regional Tribal health events; and provides training and technical assistance in a variety of Tribal health areas. These services are provided to Tribes, Area Health Boards, Tribal organizations, Tribal Leaders and members as well as federal agencies and private foundations. The NIHB presents the Tribal perspective while monitoring, analyzing, reporting on and responding to federal legislation, policy, law and regulations. NIHB works collaboratively with the Tribes, through the Tribal health organizations, in the 12 IHS Service Areas, to do so. NIHB also serves as a conduit to open opportunities for the advancement of American Indian and Alaska Native health care with other national and international organizations, foundations, corporations, academic institutions and others in its quest to build support for, and advance, Indian health care issues.

RAISING AWARENESS

Elevating the visibility of Indian health care and public health issues has been a struggle shared by Tribal governments for hundreds of years. For more than 40 years, NIHB has played a central role in focusing national attention on Indian health care and public health needs. These efforts continue to gain results and momentum.

OUR BOARD OF DIRECTORS

Because the NIHB serves all federally-recognized Tribes, it is a vital that the work of the NIHB reflects the unity and diversity of Tribal values and opinions in an accurate, fair, and culturally-sensitive manner. This objective is accomplished through the efforts of the NIHB Board of Directors and through working with the regional health boards, Tribes and health organizations located in the 12 service areas of the Indian Health Service (IHS). The NIHB is governed by a Board of Directors consisting of representatives elected by the Tribes in each of the twelve IHS Areas, through their regional Tribal health Board or health-serving organization. Each Area Indian Health Board elects a representative and an alternate to sit on the NIHB Board of Directors. In Areas where there is no Area Health Board, Tribal governments choose a representative. The Board of Directors elects an Executive Committee comprised of Chairman, Vice-Chairman, Treasurer, and Secretary, who serve staggered, two-year terms and Member-at-Large who serves a one year term. The Board of Directors meets quarterly.

NIHB MEMBERSHIP

The membership of NIHB is comprised of all Federally Recognized Tribes through the 12 regional Tribal health organizations:

- Aberdeen Area: Great Plains Tribal Chairmen's Health Board
- Alaska Area: Alaska Native Health Board
- Albuquerque Area: Albuquerque Area Indian Health Board
- Billings Area: Montana/Wyoming Tribal Leaders Council
- Bemidji Area: Midwest Alliance of Sovereign Tribes
- California Area: California Rural Indian Health Board
- Nashville Area: United South and Eastern Tribes, Inc.
- Navajo Nation Area: Navajo Nation
- Oklahoma City Area: Oklahoma City Area Inter-Tribal Health Board
- Phoenix Area: Intertribal Council of Arizona
- Portland Area: Northwest Portland Area Indian Health Board
- Tucson Area: Tohono O'odham Nation & Pascua Yaqui Tribe

Responsibility between the Tribes and the federal government. It is intertwined with policy decisions at the federal level and changes in mainstream health care management. The NIHB provides Tribal governments with timely information in order to assist Tribes in effectively making sound health care policy decisions.
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EXPLORE THE VARIETY OF BREAKOUT SESSIONS

NIHB is trying out new formats for breakout sessions at this year’s Tribal Public Health Summit. There are four different formats for the sessions so that participants can mix and match not just the topic, but also experiment with different session formats:

**Institutes**
Institutes are day-long classes that will provide a more in-depth exploration of a topic, as well as more activities and skills building opportunities. Institutes will have appropriate breaks and a lunch break as planned by the facilitator. They may include multiple presenters.

**Seminars**
A seminar is shorter than an institute, but is still an in-depth, 3 hour session on a public health topic. Seminars are designed for more in-depth skills-building and practice than shorter workshops. There are a limited number of seminars available on the agenda.

**Workshops**
A workshop is a standard 90-minute presentation on a topic relevant to one or more of the conference tracks. Workshops are excellent opportunities to share best or promising practices, share recent research or program outcomes, provide an in-depth exploration of new or arising public health issues or policies, or explore strategies and practices.

**Roundtables**
A roundtable is a 45-minute informal participatory session. Participants will be encouraged by the presenters to share and discuss with them the topics presented. Roundtable facilitators may use the first 10-15 minutes of a roundtables to present the topic and issues, and the remaining time should be spent discussing the issue with participants.

The Sessions are also organized by different tracks that have grouped related content together. It is NIHB’s hope that by doing so, participants will be able to plan a Summit experience that is rich and meaningful for themselves. Participants will be able to identify which breakouts belong to which Summit track by reading the session descriptions in the program book, looking at the Agenda At-a-Glance in the program book, or by viewing the Agenda At-a-Glance poster located by registration.

**Accreditation and Quality Improvement**
Public health accreditation refers to the voluntary national accreditation program to advance the quality and performance of Tribal, state, local, and territorial public health departments through the pursuit and attainment of established standards and measures of performance. Quality improvement is the systematic and continuous actions that lead to measurable improvement in public health services, service delivery, and the health status of the community.

**Behavioral Health and Substance Use**
Behavioral health is an important component of holistic health. Behavioral health concerns oftentimes co-occur with substance use disorders (substance use can exacerbate mental health symptoms or behavioral health problems can lead to alcohol or drug use). Evidence shows that by treating one area, the other is directly impacted as well.

**Disease Prevention and Health Promotion**
A cornerstone of Tribal public health is the efforts undertaken to encourage individuals and communities to explore their own health status and assist them to make better choices that will improve and maintain health and healthy lifestyles. This leads to a culture of wellness rather than one of sickness. The best opportunities to create a culture of wellness exist within the realms of disease prevention and health promotion.

**Public Health Law and Policy**
Law is a tool for protecting and promoting the health of the public. As an integral public health intervention, laws and policies have the potential to impact large segments of the community and can shape community norms and behaviors for long periods of time. Public health law touches on all areas of public health, including immunizations, substance use, tobacco use, bullying, obesity, physical activity, and motor vehicle injuries.
NIHB BOARD OF DIRECTORS

Lester Secatero  
To'Hoijjilee Band of Navajos  
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Confederated Tribes of the Colville Reservation  
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• Northwest Portland Area Indian Health Board – Chairperson  
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• Tribal Commissioner of Health and Human Service

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• Fort Peck Tribal Executive Board – Council Member

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• California Area Representative  
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Patrick Marcellais  
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• Great Plains Area Representative  
• Turtle Mountain Band of Chippewa Indians – Council Representative

Tim Tall Chief  
Seminole Nation of Oklahoma  
• Oklahoma City Area Representative  
• Citizen Potawatomi Nation – Director of Health Services

Martin Harvier  
Salt River Pima–Maricopa Indian Community  
• Phoenix Area Representative  
• Salt River Pima–Maricopa Indian Community Tribal Council – Vice President

Sandra Ortega  
Tohono O’odham Nation  
• Tucson Area Representative  
• Tohono O’odham Nation Tribal Council Member – Councilwoman
TUESDAY, APRIL 7, 2015

Federal Partner Listening Sessions
Leadership from the Indian Health Service and the Centers for Disease Control and Prevention will be holding separate public listening sessions.

Opening Reception
6:00 pm - 7:30 pm, Grand Foyer
Please join our hosts and NIHB for an informal reception. As part of the reception, we will be featuring a poster session from project implementing the Special Diabetes Program for Indians.

WEDNESDAY, APRIL 8, 2015

Federal Partner Panel: Department of Health and Human Services (HHS); Indian Health Service (IHS); Office of Minority Health (OMH); Centers for Disease Control and Prevention (CDC); Substance Abuse and Mental Health Services Administration (SAMHSA)
These five agencies will be represented on an informative and engaging panel during the opening plenary.

1st Annual Public Health Innovation Award Presentation
8:00 am -10:30 am, The Show Room
Help us honor Dr. Donald Warne with this inaugural award presentation during the opening plenary.

Culture Night
The California Rural Indian Health Board would like to share with you a little bit of the rich culture of the Tribes of California.

THURSDAY, APRIL 9, 2015

Affordable Care Act Institute
This one day institute will cover some of the specifics of the American Indian and Alaska Native provisions and current updates related to the law, as well as speak about how Tribes can best benefit from the law.

Tobacco and Obesity Panels
The closing plenary features two exciting panels that will bring together subject matter experts from across Indian Country to talk about these two pressing public health issues.

FRIDAY, APRIL 10, 2015

Health Information Technology Post-Summit Institute
Explore best practices and success stories of how Tribes and clinics are using electronic health records and health information in a meaningful and impactful way.
In addition to the Summit events, we hope you will join us for special events, including those on the Pre- and Post-Summit days.

**TUESDAY, APRIL 7, 2015**

**IHS Listening Session**  
9:00 am - 12:00 pm, Cahuilla B room

**CDC Listening Session**  
2:00 pm - 5:00 pm, Cahuilla B room

**Mid-Level Dental Provider Symposium**  
12:30 pm - 4:00 pm, Star A/B room

**Pre-Summit Institutes:**

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<th>Event</th>
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<td>Best and Promising Practices in American Indian Public Health</td>
<td>8:30 am - 4:30 pm</td>
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<td>Methamphetamine and Suicide Prevention Initiative (MSPI) Institute</td>
<td>8:30 am - 4:30 pm</td>
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<td>Tips for Developing a Responsive Application - A Grant Writer and Project Director Resource</td>
<td>8:30 am - 4:30 pm</td>
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<td>Quality Improvement Institute - Part I: The Basics of Quality Improvement and Change Management &amp; Core Competencies for Indian Country</td>
<td>8:30 am - 11:30 am</td>
<td>Cahuilla E room</td>
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<tr>
<td>Quality Improvement Institute - Part II: Develop and Implement a Successful Work Force Development Plan</td>
<td>1:30 pm - 4:30 pm</td>
<td>Cahuilla E room</td>
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**Opening Reception & SDPI Poster Session**  
6:00 pm - 7:30 pm, Cahuilla B room

**WEDNESDAY, APRIL 8, 2015**

**Culture Night**  
6:00 pm - 8:00 pm, The Show Room

**THURSDAY, APRIL 9, 2015**

**Fitness Event**  
7:00 am - 8:00 am, Grand Foyer

**Affordable Care Act Institute**  
8:30 am - 4:30 pm, Cahuilla B room

**FRIDAY, APRIL 10, 2015**

**Taking Technology & Innovation Beyond “The Cloud”: A New Vision to Improve Tribal Health**  
9:00 am - 4:00 pm, Cahuilla B/C
2015 Tribal Public Health Summit
Strengthening the Circle: Building the Skills of the Tribal Public Health Workforce

April 7-9, 2015
Agua Caliente Casino - Resort - Spa
Rancho Mirage California

National Indian Health Board
A survey is being conducted by the National Indian Health Board to better understand the experiences of AI/AN communities with the Affordable Care Act (ACA) and the Health Insurance Marketplace.

The information gathered through this survey will be used to help improve communications to these communities, by the federal government and others, regarding the ACA and the process of and benefits to enrolling.

Completing the survey is voluntary and anonymous. A survey is included in the bag you received at registration. If you decide to participate, please bring your completed survey back to the registration table. In exchange for your completed survey you will receive a ticket for entry in an incentive drawing to win one of three Pendleton blankets. Must be present to win.

Miigwech (thank you) for your time and assistance in this task.

If you have questions about this survey you may direct them to NIHB staff member Muskadee Montano: mmontano@nihb.org.

National Indian Health Board
NIHB would like to thank the Tribes of the California Area for welcoming us to their territories and land for this year’s Tribal Public Health Summit

Agua Caliente Band of Cahuilla Indians of the Agua Caliente Indian Reservation
Alturas Indian Rancheria
Augustine Band of Cahuilla Indians
Barona Band of Mission Indians
Bear River Band of the Rohnerville Rancheria
Berry Creek Rancheria of Maidu Indians of California
Big Lagoon Rancheria
Big Pine Paiute Tribe of the Owens Valley
Big Sandy Rancheria of Western Mono Indians of California
Big Valley Band of Pomo Indians of the Big Valley Rancheria
Bishop Paiute Tribe
Blue Lake Rancheria
Bridgeport Indian Colony
Buena Vista Rancheria of Me-Wuk Indians of California
Cabazon Band of Mission Indians
Cachil DeHe Band of Wintun Indians of the Colusa Indian Community of the Colusa Rancheria
Cahto Tribe of the Laytonville Rancheria
Cahuilla Band of Mission Indians of the Cahuilla Reservation
California Valley Miwok Tribe
Campo Band of Diegueno Mission Indians of California
Cedarville Rancheria
Cher-Ae Heights Indian Community of the Trinidad Rancheria
Chicken Ranch Rancheria of Me-Wuk Indians of California
Cloverdale Rancheria of Pomo Indians of California
Cold Springs Rancheria of Mono Indians of California
Cortina Indian Rancheria of Wintun Indians of California
Coyote Valley band of Pomo Indians of California
Death Valley Timbi-sha Shoshone Tribe
Dry Creek Rancheria Band of Pomo Indians
Elem Indian Colony of Pomo Indians of the Sulphur Bank Rancheria
Elk Valley Rancheria
Enterprise Rancheria of Maidu Indians of California
Ewiaapaayp Band of Kumeyaay Indians
Federated Indians of Graton Rancheria
Fort Bidwell Indian Community of the Fort Bidwell Reservation of California
Fort Independence Indian Community of Paiute Indians of the Fort Independence Reservation
Greenville Rancheria
Grindstone Indian Rancheria of Wintun-Wailaki Indians of California
Guidiville Rancheria of California
Habematoel Pomo of Upper Lake
Hoop Valley Tribe
Hopland Band of Pomo Indians
Iipay Nation of Santa Ysabel
Inaja Band of Diegueno Mission Indians of the Inaja and Cosmit Reservation
Ione Band of Miwok Indians of California
Jackson Rancheria of Me-Wuk Indians of California
Jamul Indian Village of California
Karuk Tribe
Kashia Band of Pomo Indians of the Stewarts Point Rancheria
Koi Nation of Northern California
La Jolla Band of Luiseño Indians
La Posta Band of Diegueno Mission Indians of the La Posta Indian Reservation
Little River Band of Pomo Indians of the Redwood Valley Rancheria
Lone Pine Paiute-Shoshone Tribe
Los Coyotes Band of Cahuilla and Cupeño Indians
Lytton Rancheria of California
Manchester Band of Pomo Indians of the Manchester Rancheria
Manzanita Band of Diegueno Mission Indians of the Manzanita Reservation
Mechoopda Indian Tribe of Chico Rancheria
Mesa Grande Band of Diegueno Mission Indians of the Mesa Grande Reservation
Middletown Rancheria of Pomo Indians of California
Mooretown Rancheria of Maidu Indians of California
Morongo Band of Mission Indians
North Fork Rancheria of Mono Indians of California
Pala Band of Luiseño Mission Indians of the Pala Reservation
Paskenta Band of Nomlaki Indians of California
Pauma Band of Luiseño Mission Indians of the Pauma & Yuima Reservation
Pechanga Band of Luiseño Mission Indians of the Pechanga Reservation
Picayune Rancheria of Chukchansi Indians of California
Pinoleville Pomo Nation
Pit River Tribe
Potter Valley Tribe
Quartz Valley Indian Community of the Quartz Valley Reservation of California
Ramona Band of Cahuilla
Redding Rancheria
Resighini Rancheria
Rincon Band of Luiseño Mission Indians of the Rincon Reservation
Robinson Rancheria Band of Pomo Indians
Round Valley Indian Tribes of the Round Valley Reservation
San Manuel Band of Mission Indians
San Pasqual Band of Diegueno Mission Indians of California
Santa Rosa Band of Cahuilla Indians
Santa Rosa Indian Community of the Santa Rosa Rancheria
Santa Ynez Band of Chumash Mission Indians of the Santa Ynez Reservation
Scotts Valley Band of Pomo Indians of California
Sherwood Valley Rancheria of Pomo Indians of California
Shingle Springs Band of Miwok Indians
Smith River Rancheria
Soboba Band of Luiseño Indians
Susanville Indian Rancheria
Sycuan Band of Kumeyaay Nation
Table Mountain Rancheria of California
Tejon Indian Tribe
Torres Martinez Desert Cahuilla Indians
Tule River Indian Tribe of the Tule River Reservation
Tuolumne band of Me-Wuk Indians of the Tuolumne Rancheria of California
Twenty-Nine Palms Band of Mission Indians of California
United Auburn Indian Community of the Auburn Rancheria of California
Utu Utu Gwaitu Paiute Tribe of the Benton Paiute Reservation
Viejas Band of Mission Indians
Wilton Rancheria
Wiyot Tribe
Yocha Dehe Wintun Nation
Yurok Tribe of the Yurok Reservation
**Choctaw Nation of Oklahoma: Choctaw Nation Diabetes Wellness Center**
Since accreditation with the American Association of Diabetes Educators in 2010, Choctaw Nation Diabetes Wellness Center has used quality improvement initiatives to enhance and improve the quality of diabetes self-management training and client outcomes. Emphasis is placed not only on the treatment of diabetes and related illnesses, but also prevention through community education. Nutrition services, diabetes screenings, diabetes education and fitness education are all important components of the Diabetes Wellness Center.

**Choctaw Nation of Oklahoma: Happy Heart Program**
The Choctaw Happy Heart Program’s main objective is cardiovascular disease (CVD) risk reduction in Choctaw citizens with type 2 diabetes. A key element to the program’s success is the frequent interactions providers are able to have with participants that allows them to remain focused on their health goals. The program provides many opportunities for Choctaw citizens to participate in community events and various activities. The benefits associated with participating in the Happy Heart Program include monthly case management and physician visits until stability is attained. Counseling on diet and nutrition are also provided along with educational classes and valuable literature on CVD prevention. The program tracks clinical data such as blood glucose readings, blood pressure, weight, waist-to-hip ratio and other lab values.

**Sault Ste. Marie Tribe of Chippewa Indians Diabetes Program**
The Sault Tribe’s Diabetes Program provides high quality patient-centered care that is responsive, courteous, and sensitive to individual, family, community and cultural needs with an emphasis on disease prevention and health promotion. The Sault Tribe Health Division has seven health clinics providing various levels of medical services throughout the seven-county service area. The Diabetes Program is both a Community Directed and Healthy Heart Initiative grantee and their motto is, “The More We Learn, the Better We Live.”

**The Southern Indian Health Council, Inc. Special Diabetes Program**
The Southern Indian Health Council’s Special Diabetes Program approaches diabetes care by utilizing a team of health professionals including a physician, nutritionist, registered nurse, public health nurse, and most importantly the client. Group education classes are held monthly and individual education sessions can be scheduled as well.

**The Toiyabe Indian Health Project: Community Directed Diabetes Prevention and Treatment Program**
The Toiyabe Indian Health Project’s Community Directed Diabetes Prevention and Treatment Program employs a full-time case manager who identifies individuals with diabetes who need help with blood sugar control, cholesterol level and blood pressure management, medication usage, and health education. Additionally the case manager, in conjunction with other members of the Preventive Medicine team, plans and initiates physical activity, nutrition, and cultural programs to increase fitness, healthy eating, and behavioral health designed to reduce diabetes incidence and complications.
The Toiyabe Indian Health Project: Healthy Heart Program
The Toiyabe Indian Health Project's Healthy Heart Program is designed to prevent cardiovascular disease complications in Indians already diagnosed with diabetes. This program uses a case management approach to help participants take responsibility for their health. Participants learn important concepts of diabetes management and cardiovascular health in order to make lifestyle adaptations that lead to increasing exercise and healthy dietary practices, and decreasing body weight, cholesterol, blood pressure, and other biological markers associated with the risk for heart attack, stroke, and peripheral vascular disease. Program participants agree to meet monthly with their case manager, undergo annual physical examinations and lab work, complete an annual questionnaire, and participate in a rigorous diabetes education curriculum.

The Turtle Mountain Band of Chippewa Indians Tribal Diabetes Prevention Program
The Turtle Mountain Band of Chippewa Indians Tribal Diabetes Prevention Program has committed considerable effort and resources toward the prevention and identification of diabetes among the members of the Turtle Mountain Band of Chippewa. Consistent with the Tribe's mission, the mission of the program is to "encourage Tribal members to know their risk level for diabetes and make the necessary lifestyle changes to prevent or delay the diagnosis. The program proposes to identify and reduce the number of pre-diabetics among the enrolled members of the Turtle Mountain Band of Chippewa."

Winnebago Tribe of Nebraska Special Diabetes Program
The Winnebago Tribe's Special Diabetes Program has adopted three best practices for 2015. The three best practices are Physical Activity, Nutrition, and Youth and Type 2 Diabetes. The SDPI program works strictly with youth in grades 3rd-6th within the two community schools, Winnebago Public School and St. Augustin School. Based on school screening data that has been collected over the years, this age range is a target group that shows the highest rates of overweight and obesity, thus putting them at high risk for future morbidities.

Yakama Indian Health Service SDPI Healthy Heart Program
The Yakama Indian Health Service Unit provides health care service to over 1,200 Native American type 2 diabetics. With less than one-third of those patients reaching target goals as described by the American Diabetes Association through traditional provider care, innovative intervention has been implemented. The Healthy Heart program utilizes pharmacists for clinical case management with cultural emphasis to reduce the risks of cardiovascular events by reaching target goals for diabetes, hypertension and lipids. By employing traditional cultural activities and clinical case management with medication management, pharmacists are able to increase the percentage of participants to reach the ADA and IHS Standards of Care guidelines over the physician group.
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<th>IHS Area</th>
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## COMMUNITY DIRECTED GRANTEES (BY STATE)

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## HEALTHY HEART GRANTEES

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<tr>
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<tr>
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<tr>
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</table>
The California Rural Indian Health Board is committed to the needs and interests that elevate and promote the health status and social conditions of the Indian People of California. We do this by providing advocacy, shared resources, training and technical assistance that enhances the delivery of quality comprehensive health related services.

Mathiesen Memorial Health Clinic
Chicken Ranch Rancheria
Pit River Tribal Health Program
Pit River Tribe
Sonoma County Indian Health Project
Cloverdale Rancheria
Dry Creek Rancheria
Graton Rancheria
Lytton Rancheria
Manchester-Point Arena Rancheria
Stewarts Point Rancheria
Tule River Indian Health Center
Tule River Tribe
United Indian Health Services
Rohnerville Rancheria
Big Lagoon Rancheria
Blue Lake Rancheria
Elk Valley Rancheria
Resighini Rancheria
Smith River Rancheria
Trinidad Rancheria
Yurok Tribe
Wiyot Tribe
Warner Mountain Indian Health Program
Fort Bidwell Reservation

Chapa-De Indian Health Program
United Auburn Indian Community
Greenville Rancheria Tribal Health Program
Greenville Rancheria
Karuk Tribal Health Program
Karuk Tribe
Redding Rancheria Tribal Health Clinic
Redding Rancheria
Toiyabe Indian Health Project
Benton Paiute Tribe
Big Pine Paiute Tribe
Bishop Paiute Tribe
Bridgeport Indian Colony
Timbisha Shoshone Tribe
Fort Independence Reservation
Lone Pine Paiute-Shoshone Tribe

California Rural Indian Health Board, Inc.
4400 Auburn Boulevard, 2nd Floor
Sacramento, CA 95841
Phone: 916-929-9761
www.crihb.org
## 2015 Tribal Public Health Summit

### Strengthening the Circle:
Building the Skills of the Tribal Public Health Workforce

### AGENDA AT A GLANCE

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>The Show Room</th>
<th>Cahuilla A/F</th>
<th>Cahuilla B</th>
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<td><strong>TUESDAY, APRIL 7</strong></td>
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<td>Pre-Summit Events</td>
<td>Morning</td>
<td>8:30 am - 12:00 pm</td>
<td>Best and Promising Practices in American Indian Public Health 8:30 am - 4:30 pm</td>
<td>IHS Listening Session 9:00 am - 12:00 pm</td>
<td>Methamphetamine and Suicide Prevention Initiative (MSPI) Institute 8:30 am - 4:30 pm</td>
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<td>Afternoon</td>
<td>2:00 pm - 5:00 pm</td>
<td>CDC Listening Session 2:00 pm - 5:00 pm</td>
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<td>6:00 pm - 7:30 pm</td>
<td>Opening Reception &amp; SDPI Poster Session 6:00 pm - 7:30 pm</td>
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<td>General Session</td>
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<td>8:00 am - 10:30 am</td>
<td>Opening Plenary 8:00 am - 10:30 am</td>
<td>Advocacy 101: The Essentials of Impacting Indian Public Health Policy 11:00 am - 12:30 pm</td>
<td>Shaping the Future of Indian Children: Child Welfare Law and Policy 11:00 am - 12:30 pm</td>
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<td>11:00 am - 12:30 pm</td>
<td>Food is Our Medicine 11:00 am - 12:30 pm</td>
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<td>Creating Tribal Laws and Policies to Promote Healthy Eating 1:30 pm - 4:30 pm</td>
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<td>Culture Night 6:00 pm - 8:00 pm</td>
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<td>Breakout Session</td>
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<td>8:30 am - 10:00 am</td>
<td>Taking a Public Health Approach to the Issue of “Murdered and Missing Indigenous Women” in the U.S. 8:30 am - 10:00 am</td>
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<td>10:30 am - 12:00 pm</td>
<td>A Roadmap for Building Capacity to Implement… School-based &amp; Community-based Services 10:30 am - 12:00 pm</td>
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<td>Protecting Our Future: From Research to Reality 1:00 pm - 2:30 pm</td>
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### Pre-Summit Events
- **Morning**
  - 8:30 am - 12:00 pm: Best and Promising Practices in American Indian Public Health
  - 2:00 pm - 5:00 pm: CDC Listening Session
- **Evening**
  - 6:00 pm - 7:30 pm: Opening Reception & SDPI Poster Session

### General Session
- 8:00 am - 10:30 am: Opening Plenary

### Breakout Sessions
- **Food is Our Medicine**
  - 11:00 am - 12:30 pm
- **Creating Tribal Laws and Policies to Promote Healthy Eating**
  - 1:30 pm - 4:30 pm
- **Mandan, Hidatsa and Arikara Health Care and the Bakken Oil Impact**
  - 3:30 pm - 5:00 pm

### Evening Events
- 6:00 pm - 7:30 pm: Culture Night

### Post-Summit Events
- **Morning**
  - 8:30 am - 12:00 pm: Taking Technology & Innovation Beyond “The Cloud”: A New Vision to Improve Tribal Health 9:00 am - 4:00 pm
## AT-A-GLANCE KEY

### Roundtable Session
- Public Health Accreditation: Answering the "So What?" Question
- Tribal Public Health Services and Systems Research: Leamings and Tools for Performance Improvement
- The Eastern Shoshone's Implementation of the Chronic Care Model: Our Evolution, Lessons Learned, and Our Future
- "Do I Really Have to Do This?": The Basic of Public Health Program Evaluation
- Health Equity Through Partnerships in American Indian Communities
- Sharing a Culture of Wellness: SDPI Discussion on Innovative Diabetes Treatment and Prevention
- Quality Improvement Institute: Part I
- Mid-Level Dental Provider Symposium

### Workshop Session
- Sharing Your Message with the Community through Collaboration & Creativity: Lessons Learned from Choctaw Nation MSPI
- Evaluation of the Tribal Health Profession Opportunity Grants (HPOG) Program
- Tribal Action Plan 101: Working Together for Change
- Quality Improvement Institute: Part II

### Plenary and Special Events
- American Indian Parenting: Assessing the Teachings
- Tribal Adaptations to Policy, Systems, and Environmental Change Assessments to Ensure Success
- Health Equity Through Partnerships in American Indian Communities
- Mid-Level Dental Provider Symposium

### Institute or Seminar Session
- The Integration of Health Protection and Health Promotion: Practical Interventions for the Workplace
- The Development of Culturally Appropriate HPV Vaccine Education Materials for American Indian Parents
- Tribal Smoke Free Policies and Culturally Relevant Cessation

### Institute or Seminar Session (continued)
- Navajo Nation Health Systems Assessment
- Sharing Resources Across Jurisdictions: A Roadmap to Success
- Building Infrastructure Around HIV, STDs and Sexual Health in Indian Country

### Institute or Seminar Session (continued)
- The Coming of the Blessing: A Successful Collaborative Effort and How Far We Have Come
- Evaluation of the Tribal Health Profession Opportunity Grants (HPOG) Program
- The Development of Culturally Appropriate HPV Vaccine Education Materials for American Indian Parents

### Institute or Seminar Session (continued)
- The Integration of Health Protection and Health Promotion: Practical Interventions for the Workplace
- The Coming of the Blessing: A Successful Collaborative Effort and How Far We Have Come
- The Development of Culturally Appropriate HPV Vaccine Education Materials for American Indian Parents
SESSION TYPES

INSTITUTES
SEMINARS
WORKSHOPS
ROUTABLES

SESSION TRACKS

Accreditation and Quality Improvement
Behavioral Health and Substance Abuse
Disease Prevention and Health Promotion
Public Health Law and Policy
TUESDAY, APRIL 7, 2015

7:00 AM - 10:30 AM Exhibitor & Vendor Set-up
Grand Foyer

7:00 AM - 8:00 PM Registration Open
Grand Foyer

10:30 AM - 5:00 PM Exhibit Hall Open
Grand Foyer

TRIBAL LISTENING SESSIONS

9:00 AM - 12:00 PM Indian Health Service Listening Session
Cahuilla B
The Indian Health Service (IHS) is the principal federal health care provider and health advocate for Indian people with a mission "...to raise the physical, mental, social, and spiritual health of American Indians and Alaska Natives to the highest level." IHS will host a listening session to seek Tribal Leaders' feedback on IHS programs, activities and services. During this session there will be ample opportunity for Tribal Leaders and representatives to provide input to IHS.

2:00 PM - 5:00 PM Centers for Disease Control and Prevention Listening Session
Cahuilla B
The Centers for Disease Control and Prevention (CDC) works 24/7 to protect America from health, safety and security threats, both foreign and in the U.S. Whether diseases start at home or abroad, are chronic or acute, curable or preventable, human error or deliberate attack, CDC fights disease and supports communities and citizens to do the same. CDC will host a listening session to gain feedback on its programs and services, and learn more about the public health needs seen in Tribal nations across Indian Country. CDC will also report on new and continuing initiatives making a positive impact in Indian Country.

PRE-SUMMIT INSTITUTES

Cahuilla E
Quality improvement (QI) in public health is the use of a deliberate and defined improvement process which is focused on activities that are responsive to community needs and improving population health. Part I of the quality improvement institute is designed to familiarize Tribal public health staff with QI processes and tools. It will help participants be better equipped to support QI processes within their Tribes. During this portion of the workshop, participants will learn more about the Plan-Do-Check-Act (PDCA) approach, how to develop an AIM statement, and document and change QI projects. An important part of documenting quality improvement is being able to describe it, so participants will learn how to apply basic QI tools including flow charts, cause and effect diagrams, force field analysis, and solution and effect diagrams. The institute will also focus on how to use the Core Competencies for Public Health Professionals as a quality improvement strategy. The Core Competencies are a consensus set of skills for the broad practice of public health. They reflect foundational skills desirable for professionals engaging in the practice, education, and research of public health. Participants will leave Part I of the institute more equipped to be a change leader in your Tribe and department.
PRESENTER: RON BIALEK, Public Health Foundation
PRESENTER: JOHN MORAN, Public Health Foundation
Tuesday, April 7, 2015

AGENDA

PRE-SUMMIT INSTITUTES

8:30 AM - 4:30 PM  
**Best and Promising Practices in American Indian Public Health**  
*Cahuilla A/F*

Public health in Indian Country is a burgeoning field - growing as both the need and the capacity of Tribes increases. Tribes are creating and implementing innovative programs to address disparities in substance use, obesity, diabetes, suicide, HIV, and other areas. However, what Indian Country is lacking are the success stories and effectiveness that can be used as a springboard for broader evaluation, replication, and dissemination. This institute will feature presenters to discuss how to frame best practices, showcase unique and innovative programs, discuss opportunities that Tribes have to strengthen their programs, explore capacity building needs, and talk about how these lessons learned can be shared.

**PRESENTER:** DONALD WARNE, North Dakota State University State University  
**PRESENTER:** OLIVIA ROANHORSE, Notah Begay III Foundation  
**PRESENTER:** RENEE GOLDTOOTH, Notah Begay III Foundation  
**PRESENTER:** ROBERT FOLEY, National Indian Health Board

8:30 AM - 4:30 PM  
**Tips for Developing a Responsive Application - A Grant Writer and Project Director Resource**  
*Cahuilla D*

The Health Resources and Services Administration (HRSA), an agency of the U.S. Department of Health and Human services, is the primary federal agency for improving access to health care by strengthening the health care workforce, building healthy communities and achieving health equity. HRSA awards over 6 billion dollars in federal funding on a yearly basis. HRSA staff will be present to share information on the mission of HRSA and how the nature of the work achieves its goals and objectives. Staff will also share information on the steps perspective applicants should take in applying for funding, the review process and the post awards process. Suggestions will be provided on how to strengthen applications, and how to avoid common mistakes in writing federal grants. Attendees will receive more information on becoming a HRSA Grant Reviewer.

**PRESENTER:** DARREN BUCKNER, Health Resources and Services Administration  
**PRESENTER:** TOM BROOKSHIRE, Health Resources and Services Administration

8:30 AM - 4:30 PM  
**Methamphetamine & Suicide Prevention Initiative (MSPI) Institute**  
*Cahuilla C*

The Methamphetamine and Suicide Prevention Initiative (MSPI) Institute provides attendees the ability to network with other MSPI programs nationwide, learn about and practice provider self-care activities, youth-centered programming, and the integration of cultural and wise practices into western-based prevention programming. Attendees will be able to hear from guest speakers, participate in skills building activities, and engage in valuable peer-to-peer learning and networking opportunities. The MSPI Institute is a unique opportunity for MSPI Tribal partners, and is designed to meet the programming needs of MSPI projects across the country.

**PRESENTER:** STEVEN WHITEHORN, Indian Health Service  
**PRESENTER:** JACKIE ENGBRETSON, National Indian Health Board  
**PRESENTER:** REX LEE JIM, Navajo Nation

12:30 PM - 4:00 PM  
**Mid-Level Dental Provider Symposium**  
*Star A/B*

There are some very severe dental provider shortages in Indian Country. In answer to these needs, the Tribes in Alaska determined to address the problem and set about creating the Dental Health Aide Therapy program (DHAT). With the program now more than 10 years old, this Tribally-driven solution has proven to be safe, cost effective, and culturally appropriate. In that course of time, many Tribes in the lower 48 have expressed interest in replicating the program. The DHATs have a limited scope of practice and excel at what they do. They practice under the supervision of a dentist, and actually extend the reach of those dentists. Most of the DHATs in Alaska are from the Tribes they serve. For this reason, they can be counted upon to stay in the community long-term, already have connections with their patients, and know the best ways to reach and serve their communities. In addition to the practical benefits of the DHAT program, the program also demonstrates the sovereign rights of Tribal Nations to determine their own health care priorities and solutions. This session will share important information about the model so that Tribes can determine if a DHAT program might answer their needs. It will also give Tribal and community leaders the tools they need to pursue the model in the current legal and policy framework.
1:30 PM - 4:30 PM  Quality Improvement Institute – Part II: Develop and Implement a Successful Work Force Development Plan

Cahuilla E

Part II of the institute will focus on workforce planning as a process of addressing current and future needs of a department to have the right number of people with the right skills, experiences, and competencies, in the right jobs, at the right time. Workforce planning is a key element of any strategic plan since it is the people within a department who drive successful implementation of a strategic plan and overall performance. Workforce planning also is a key domain of the Public Health Accreditation Board (PHAB) accreditation standards. During this portion of the workshop, participants will learn more about the importance of having a Workforce Development Plan, current realities facing Tribes and organizations that impact development of a Workforce Development Plan, the components of an effective workforce development plan, and review relevant tools to assist with planning.

PRESENTER: RON BIALEK, Public Health Foundation
PRESENTER: JOHN MORAN, Public Health Foundation

OPENING RECEPTION & SPECIAL DIABETES PROGRAM FOR INDIAN (SDPI) POSTER SESSION

6:00 PM - 7:30 PM  Cahuilla B

Please join us for an opening reception that features poster presentations by SDPI projects from across Indian Country. Light refreshments will be served.
AGENDA

WEDNESDAY, APRIL 8, 2015

7:00 AM - 5:00 PM  Registration Open
                  Grand Foyer

7:30 AM - 6:00 PM  Exhibit Hall Open
                  Grand Foyer

OPENING PLENARY  The Show Room

8:00 AM - 8:40 AM  Opening Ceremony & Presentation of the Colors

Local Welcome

Welcome and Opening Remarks
LESTER SECATERO, National Indian Health Board Chairman and Albuquerque Area Representative

Introduction of Federal Partner Panel
REX LEE JIM, National Indian Health Board Vice Chairman and Navajo Area Representative

8:40 AM - 9:40 AM  Federal Partner Presentations

Tribes have a government to government relationship with the federal government and as such, federal agencies must honor that unique relationship in their interactions with Tribes. This includes considerations for how work will be conducted in Indian Country, what efforts will be prioritized, and how funding reaches Tribes. This panel will bring together leaders from one federal department and four agencies within that department. Each guest will take time to highlight the work that their department or agency is advancing in Indian Country, and then each will participate in a facilitated group discussion that will focus on workforce development, interagency collaboration, and delve deeper into special public health initiatives. At the end of the discussion, the time remaining will be allotted for questions and answers with the audience.

YVETTE ROUBIDEAUX, Department of Health and Human Services
ROBERT MCSWAIN, Indian Health Service
J. NADINE GRACIA, Office of Minority Health
JUDITH MONROE, Centers for Disease Control and Prevention
JON PEREZ, Substance Abuse and Mental Health Services Administration

9:40 AM - 10:10 AM  Panel Discussion & Audience Question and Answer

MODERATOR: CAROLYN ANGUS-HORNBUCKLE, National Indian Health Board

10:10 AM - 10:25 AM  Presentation of the Public Health Innovation Award

PRESENTER: TIM TALL CHIEF, National Indian Health Board Oklahoma City Area Representative

Public Health Innovation Award Recipient Remarks
RECIPIENT: DONALD WARNE, North Dakota State University

10:25 AM - 10:30 AM  Closing Remarks

PRESENTER: LISA ELGIN, National Indian Health Board California Area Representative
### SUMMIT SESSIONS

#### 11:00 AM - 11:45 AM

**American Indian Parenting: Assessing the Teachings**  
*Track: Behavioral Health and Substance Use*

_Cahuilla E_

This pilot study was designed to determine the effectiveness of an 8-week parenting curriculum for Native American parents. During the pretest we found that most parents perceived themselves to have an active parenting style which indicated that they had a family atmosphere of mutual respect, trust, and teamwork that enabled them to parent children without the hurt or resentment that characterize permissive and autocratic styles. At the conclusion of the curriculum, we found that parents self-reported the parental procedures they would implement more so than the actual lessons and provided feedback that indicated they had a high degree of confidence in their future parental practices.

PRESENTER: JENNIFER INCIARTE, White Eagle Health Center  
PRESENTER: CANDICE KEMBLE, White Eagle Health Center

#### 11:00 AM - 11:45 AM

**Tribal Adaptations to Policy, Systems, and Environmental Change Assessments to Ensure Success in Promoting Chronic Disease Prevention Activities**  
*Track: Disease Prevention and Health Promotion*

_Star B_

Policy, systems, and environment (PSE) influence the long-term health of a community. The “Advancing California Opportunities to Renew Native health Systems” (ACORNS) project made adaptations to the CDC Community Health Assessment and Group Evaluation (CHANGE) Tool that measures PSEs within a community focused on chronic disease prevention; the adaptations include an indigenous framework and culturally responsive evaluation techniques. A survey was administered to measure the understanding and experience of PSEs in Tribal communities. The purpose was to gauge the experience of those connected to the ACORNS project to develop and guide a training series on PSE interventions and to assist with the CHANGE Tool adaptations that are culturally relevant. Providing a policy, systems, and environmental training and assessment tool that has wording specific to the culture and values of Tribes and Tribal sovereignty is essential to ensure that the tool can be successfully utilized and implemented into future PSE projects.

PRESENTER: NANETTE YANDELL, California Rural Indian Health Board, Inc.  
PRESENTER: CHRIS COOPER, California Rural Indian Health Board, Inc.

#### 11:00 AM - 11:45 AM

**Sharing a Culture of Wellness: SDPI Discussion on Innovative Diabetes Treatment and Prevention**  
*Track: Behavioral Health and Substance Use*

_Palm A_

Congress established the Special Diabetes Program for Indians in 1997 to address the growing epidemic of diabetes in American Indian and Alaska Native communities. Together, the SDPI and the Special Diabetes Program for Type 1 Diabetes have become the most strategic, comprehensive and effective efforts to combat diabetes and its complications. The success of SDPI is due to the nature of the grant program that allows communities to design and implement diabetes interventions that address locally identified community priorities. SDPI currently provides grants for 404 programs in 35 states. This roundtable will provide a platform for stakeholders to join together and discuss diabetes data infrastructure, effective programming and the policy decisions that make SDPI grant programs possible. Participants will have the opportunity to interact with other Community-Directed, Healthy Heart, and Diabetes Prevention grantees, as well as members from the Tribal Leaders Diabetes Committee, SDPI policy advocates and federal partners.

PRESENTER: DOMINICA VALENCIA, Tribal Leaders Diabetes Committee  
PRESENTER: MONICA MAYER, Elbowoods Memorial Health Center  
PRESENTER: MICHELLE CASTAGNE, National Indian Health Board
AGENDA

WEDNESDAY, APRIL 8, 2015

ROUNDTABLES CONTINUED

11:00 AM - 11:45 AM  Tribal Public Health Department Accreditation: Answering the "So What?" Question
Track: Accreditation and Quality Improvement
Cahuilla D
The Public Health Accreditation Board (PHAB) accredited its first health departments in February 2013. Now there are more than 200 health departments voluntarily going through the process - of which there are only 2 Tribal health departments. This session addresses a gap in the current knowledge in Indian Country about the impact of public health department accreditation. As a learning organization, PHAB incorporated a multi-faceted evaluation plan as a means to improve its own services to health department applicants. This session will provide early findings and results from the initial internal and external evaluations, as well as some of the impact stories from accredited health departments, and supportive agencies. There will also be a detailing of NIHB's new Tribal Accreditation Support Initiative project. The session will seek out participation from attendees in a roundtable format to discuss concerns and perceptions of the pros, cons, barriers and facilitators to achieving public health accreditation.
PRESENTER: ROBERT FOLEY, National Indian Health Board
PRESENTER: RON CHAPMAN, Public Health Accreditation Board
PRESENTER: ANITA MUNETA, Navajo Nation

WORKSHOPS

11:00 AM - 12:30 PM  Food is Our Medicine
Track: Disease Prevention and Health Promotion
Cahuilla A/F
United South and Eastern Tribes (USET) Tribal Epidemiology Center (TEC), as a public health authority, partnered with the Seneca Nation of Indians to perform a program review of a healthy eating initiative as a promising best practice to reduce obesity and related chronic diseases that greatly affect Indian Country. Food is our Medicine (FIOM) is a multi-departmental program that incorporates traditional and local foods into workshops and events that focus on healthier diets, healthier families and a healthier community. USET TEC contracted outside consultants with expertise in nutrition, traditional foods and program evaluations to complete the program review, which included qualitative analysis of surveys, key informant interviews, and focus groups. The presentation will focus on the many aspects of FIOM: effectiveness, lessons learned, and opportunities for growth.
PRESENTER: KEN PARKER, United South and Eastern Tribes, Inc.

11:00 AM - 12:30 PM  Shaping the Future of Indian Children: Child Welfare Law and Policy
Track: Public Health Law and Policy
Cahuilla C
Lack of Indian Child Welfare in Tribal Nation communities is a central barrier for Indigenous children to lead full and happy lives. Despite passage of the Indian Child Welfare Act in 1978, protective and adoptive placement of American Indian Alaska Native children outside of Native homes remains high even when family and Tribal homes are able and available. Recent White House and U.S. Department of Justice actions and U.S. Supreme Court rulings have spurred renewed interest in Indian Child Welfare. Addressing consequences from Indian child removal, especially poor mental and emotional health, is urgently required and can lead to increased well-being of Tribal Nations and their children. Reactivation of public health efforts focused on Indian Child Welfare can further develop safe and healthy environments for Indian children and families. This presentation assesses emerging policy change, analyzes recommended policy solutions, and formulates health-generating strategies to enhance the lives of Indigenous children.
PRESENTER: JOAQUIN GALLEGOS, Casey Family Programs

11:00 AM - 12:30 PM  Advocacy 101: The Essentials of Impacting Indian Public Health Policy
Track: Public Health Law and Policy
Cahuilla B
Participants will learn important tips and techniques of advocating on behalf of Indian health issues with congress and the administration. These will include how to hone in on topics of interest to decision-makers, shaping communication so that it is meaningful and impactful, and creating effective "leave-behind" packets and materials, and how and when to follow-up. The session will utilize split methodologies to include both classroom - based learning as well as active roundtable discussions on key health policy concerns. Participants will leave the workshop with the knowledge and skills to formulate advocacy action plans.
PRESENTER: CAITRIN SHUY, National Indian Health Board
11:00 AM - 12:30 PM  
**Tribal Public Health Services and Systems Research: Learnings and Tools for Performance Improvement**  
*Track: Accreditation and Quality Improvement*  
*Star A*

As Tribal agencies work to strengthen their public health systems, those striving for public health accreditation may encounter challenges due to the unique context in which they operate. The 2010 National Indian Health Board Tribal Health Profile suggests Tribal agencies are interested in data-based decision making and partnering to provide public health services. However, little research exists on promising practices for Tribes in these areas. With a Robert Wood Johnson Foundation Public Health Services and Systems Research grant, Michigan Public Health Institute, Sault Ste. Marie Tribe of Chippewa Indians, and Inter-Tribal Council of Michigan are studying the infrastructure, organizational relationships, performance, and outcomes of Sault Tribe’s public health system aligned with the ten essential services. This session will present an overview of the study and preliminary results. Participants will engage in dialogue, applying their learnings to suggest tools and opportunities to improve Tribal public health systems and public health accreditation standards.

**PRESENTER:** JULIA HEANY, Michigan Public Health Institute  
**PRESENTER:** LISA MYERS, Sault Ste. Marie Tribe of Chippewa Indians
AGENDA

SEMINARS CONTINUED

1:30 PM - 4:30 PM

Healing Our People: A Lean Healthcare Approach
Track: Accreditation and Quality Improvement

Health care for American Indian/Alaska Native populations is complex, underfunded and plagued by quality issues. Over the last decade, healthcare organizations worldwide have adopted Lean Thinking to reduce cost and improve quality and efficiency in patient care. Yet Lean Thinking is not discussed in Indian Country as a possible solution for cost and quality issues. When well executed, Lean transforms how an organization works and creates an insatiable quest for improvement. This presentation will discuss Lean Healthcare as a system of improvement that leads to cost reduction and process improvements with increased quality of care. Examples will be drawn from actual experience within a Tribal compacted healthcare system. Additional examples will be presented from health organizations with a history implementing Lean Thinking. The benefits and challenges for implementing Lean Thinking in a Tribal health system will be discussed.

PRESENTER: PATRICK ANDERSON, Sealaska Heritage Institute

WORKSHOPS

1:30 PM - 3:00 PM

Oral Health and Workforce Solutions in Indian Country
Track: Public Health Law and Policy

Innovative models in health care delivery are key to successfully achieving community wellness and improved health in Tribal communities. This session will highlight the ten year success of the Alaska Native Dental Health Aide Therapist (DHAT) program, how it is addressing prevention and treatment of dental caries, remains sustainable, and serves to expand the workforce two-fold. Panelists will describe the training provided, services delivered and revenues generated by this model.

PRESENTER: YVETTE JOSEPH, Kauffman and Associates, Inc.
PRESENTER: DANE LENAKER, Yukon Kuskokwim Health Corporation
PRESENTER: SUSAN SERGIE, Yukon Kuskokwim Health Corporation
PRESENTER: BONNIE JOHNSON, Yukon Kuskokwim Health Corporation

The Coming of the Blessing: A Successful Collaborative Effort and How Far We Have Come
Track: Behavioral Health and Substance Use

The American Indian and Alaska Native Women’s Committee worked together with the March of Dimes, and The Coming of the Blessing® was born in 2007 from trust and mutual respect. The committee representing different ten different Nations came together based on a common need and purpose. They were empowered to grow and mentor community prenatal facilitators across the Western United State to teach prenatal health. The Coming of the Blessing® has now become a national initiative and reaches American Indian and Alaska Native (AI/AN) communities across the United States. Our presentation will explore how we accomplished creating the Coming of the Blessing® and the lessons we learned about working together successfully. Aspects of our successful collaboration will be presented from the AI/AN world view and the dominant society world view through the use of a talking circle. Our presentation relates to the competencies of communication, cultural competency, and developing others through teaching and mentoring.

PRESENTER: CAROL ARNOLD, March of Dimes
PRESENTER: DENISE ARAGON, Eastern Shoshone Tribe

The Development of Culturally Appropriate HPV Vaccine Educational Materials for American Indian Parents of Adolescents
Track: Disease Prevention and Health Promotion

American Indians face significant disparities for HPV-related cancer incidence and mortality. In 2014, the American Indian Cancer Foundation held seven focus groups with parents and guardians of American Indian adolescent children to gain insight into the community’s views about the Human papillomavirus (HPV) vaccine to help inform the development of culturally appropriate educational materials. This workshop will share findings from these focus groups, including knowledge and attitudes regarding the vaccine, influences and barriers to vaccination, questions participants had about the vaccine, and community input that will be used for the development and distribution of the educational materials. These materials will increase knowledge and awareness about, and access to the cancer-preventing HPV vaccine. The workshop will also share challenges and successes of working with the American Indian community throughout the research process. This will help workshop participants anticipate challenges and build skills for doing similar work in their own organizations.

PRESENTER: MEGGAN MCCANN, American Indian Cancer Foundation
1:30 PM - 3:00 PM Healthy Equity Through Partnerships in American Indian Communities

Track: Disease Prevention and Health Promotion

Diabetes health disparities continue to affect American Indian communities resulting in disproportionately high rates of diabetes-related morbidity and premature mortality. These differences in health among American Indians living with diabetes are linked to a combination of socially determined circumstances. Addressing health disparities in the management and control of type 2 diabetes requires strategies that not only address individual risk factors but the also the multifaceted social and economic systems that influence the daily lives of American Indians. Utilizing the community coalition action theory to guide the development of community coalitions can create change in communities by increasing collaborative relationships that benefit the community. By mobilizing partners to plan, develop, implement, and evaluate community-based interventions to reduce risk factors that influence disparities in the management of type 2 diabetes builds community capacity and strength.

PRESENTER: HEATHER LEVI, Association of American Indian Physicians

1:30 PM - 3:00 PM Addressing Young Worker Safety and Health Through Partnerships with Tribal Communities

Track: Disease Prevention and Health Promotion

American Indian/Alaska Natives (AI/AN) are an understudied population, especially when it comes to occupational safety and health (OSH). While existing and new industry on tribal lands can bring needed employment for tribal members, it is important to provide workers safe and healthy environments. In 2013, the National Institute for Occupational Safety and Health (NIOSH) launched an initiative to partner with AI/AN communities and stakeholders to identify needs, conduct outreach, and provide OSH support to tribal communities. Native youth under age 24 account for 42% of the total AI/AN population, are at increased risk for injury and death on the job, and often enter the workforce unprepared for potential hazards. NIOSH has developed a free, customized young worker curriculum, Youth@Work-Talking Safety, for all U.S. states and territories and teaches OSH skills relevant to any occupation. NIOSH is partnering with WeRNative – a website that provides health information – to promote native youth OSH skills. This partnership will be discussed and the Talking Safety curriculum will be presented with hands-on activities.

PRESENTER: ELIZABETH DALSEY, CDC/National Institute for Occupational Safety and Health
PRESENTER: REBECCA GUERIN, CDC/National Institute for Occupational Safety and Health

3:30 PM - 5:00 PM Mandan, Hidatsa, and Arikara Health Care and The Bakken Oil Impact

Track: Disease Prevention and Health Promotion

The Elbowoods Memorial Health Center located in New Town, North Dakota on the Fort Berthold Indian Reservation, home to the Mandan, Hidatsa, and Arikara (MHA) Nation is enduring and influenced by the Bakken oil boom. The MHA Nation is collaborating internally to address the oil boom impact on increased substance abuse, methamphetamine abuse, sexually transmitted diseases, hepatitis C and liver disease. Additional areas of oil impact include sex trafficking, human trafficking, drug trafficking, methamphetamine addicted infants, suicide rates, and motor vehicle accident deaths. The pre-existing health care disparities have been magnified by the increase of money to the area. The MHA Nation is addressing, planning, and implementing strategies and working together to reduce the disparity with treatments and prevention. This workshop will be facilitated as a panel in order to best present the information and field questions on how MHA Nation has united to combat these pressing public health issues.

PRESENTER: DEBORAH HALL-THOMPSON, Three Affiliated Tribes
PRESENTER: MONICA MAYER, Elbowoods Memorial Health Center
PRESENTER: BRUCE GILLETTE, Circle of Life
PRESENTER: MISSY SPOTTED BEAR, Elbowoods Memorial Health Center
AGENDA

Wednesday, April 8, 2015

3:30 PM - 5:00 PM Sharing Resources Across Jurisdictions: A Roadmap to Success
Track: Public Health Law and Policy

Cross-jurisdictional sharing (CJS) occurs when multiple governments collaborate to deliver services to their citizens. CJS allows for building economies of scale to operate more effectively and efficiently. Local and Tribal health departments trying to achieve public health accreditation or increase capacity are challenged to deliver more services at a higher quality, all while maintaining reduced budgets. This workshop will show how Tribal, state and county governments can use CJS to meet those goals. We will present the results of several CJS projects implemented in multiple states, as well as work in Wisconsin involving Tribal health departments. We will also present a case study involving a sharing agreement for communicable disease control between the Ho-Chunk Nation and some local health departments in Wisconsin. Workshop participants will have the opportunity to analyze the case study and discuss their own experience and challenges in sharing communicable disease control and other public health services.

PRESENTER: GIANFRANCO PEZZINO, Center for Sharing Public Health Services
PRESENTER: CAROL ROLLINS, Ho-Chunk Nation
PRESENTER: CHRISTINE HOVELL, Jackson County Public Health

3:30 PM - 5:00 PM Hepatitis C Breakthroughs: New Cures, Best Practice & Health Equity
Track: Disease Prevention and Health Promotion

In the United States, 2.7 million people are chronically infected with hepatitis C (HCV). Up to 85% of these individuals do not realize they are infected. American Indian and Alaska Native people experience a three-fold higher death rate from chronic liver disease, one of the multiple complications of chronic HCV infection. Previous treatments for HCV lasted several months, presented severe side effects and had high failure rates. Within the last year, HCV treatment has improved dramatically, with 76-99% cure rates. If HCV screening and treatment are ramped up, and Indian Health Service/Tribal/Urban sites are ready to address HCV, many patients will be diagnosed and receive the potentially life-saving treatment they need. If clinics treat only a small number of HCV patients at a time, many lives can be saved. This workshop will provide an update on current treatment regimens; review best practice for screening and risk counseling and provide recommendations for community and clinical action.

PRESENTER: JESSICA LESTON, Northwest Portland Area Indian Health Board

3:30 PM - 5:00 PM Evaluation of the Tribal Health Profession Opportunity Grants (HPOG) Program
Track: Public Health Law and Policy

Authorized by the Affordable Care Act, the Health Profession Opportunity Grants (HPOG) program provides education and training to low-income individuals for occupations in the healthcare field. In 2010, the Department of Health and Human Services’ Administration for Children and Families (ACF) awarded 32 HPOG grants, five of which were awarded to Tribal Organizations/Colleges. ACF contracted with NORC at the University of Chicago, Red Star Innovations, and the National Indian Health Board to conduct an evaluation of the Tribal HPOG grantees. ACF awarded North Dakota State University a research partnership grant to work with Cankdeska Cikana Community College, a Tribal grantee, to conduct research to inform program performance. The presentation will include an overview of the Tribal HPOG Evaluation, preliminary findings related to educational and employment outcomes, and student success stories. Presenters will facilitate group discussion on lessons learned and strategies that could be employed in other Native communities.

PRESENTER: MICHAEL MEIT, NORC at the University of Chicago
PRESENTER: LORETTA HEUER, North Dakota State University

3:30 PM - 5:00 PM Tribal Action Plan 101: Working Together for Change
Track: Behavioral Health and Substance Use

This training is designed to explain what the Tribal Action Plan is, and support the involvement of community members in development of these Tribal Action Plans to create change. Discussion of the Tribal Law and Order Act, introduction of substance abuse prevention science and theories of change, and the need of having collaborative community participation will be part of the discussion as well as local training and technical assistance toward development of Tribal Action Plans. Handouts and activities during this training are to enhance the participants understanding of community involvement to change the environment to reduce substance abuse issues.

PRESENTER: JACQUE GENCARELLE, Northern Arizona Regional Behavioral Health Authority

CULTURE NIGHT

6:00 PM - 8:00 PM Hosted by the California Rural Indian Health Board & California Tribes

Please join our host for Culture Night, featuring an exhibition of the unique and distinct cultures of the California Tribes in the region.
AGENDA

THURSDAY, APRIL 9, 2015

7:00 AM - 8:00 PM  **Fitness Activity**  
Grand Foyer / Outdoors  
FACILITATOR: NAOMI HARRIS, Eastern Shoshone Tribal Health

7:00 AM - 12:30 PM  **Registration Open**  
Grand Foyer

7:30 AM - 5:00 PM  **Exhibit Hall Open**  
Grand Foyer

SUMMIT SESSIONS

INSTITUTE

8:30 AM - 4:30 PM  **Affordable Care Act Institute**  
Track: Public Health Law and Policy  
Cahuilla B  
The National Indian Health Outreach and Education (NIHOE) National Partners - National Indian Health Board (NIHB), National Congress of American Indians, and National Council of Urban Indian Health - are hosting a one-day institute on the Affordable Care Act (ACA). The institute will provide an overview of the ACA as well as any pertinent updates to the law. Specifically, presenters will also discuss topics such as the role and importance of the exemption waiver and Tribal premium sponsorships, benefits and options through Purchased/Referred Care, and employer opportunities and requirements under the ACA. The presenters, as part of the national NIHOE efforts will discuss existing outreach and education efforts and opportunities. This institute will be relevant to all Tribal leaders and health administrators you are well-versed on the law, as well as those that are seeking to gain more information on the ACA and the American Indian and Alaska Native provisions under the law.  
PRESENTERS: KRISTEN BITSUIE, Tucson Area Indian Health Service  
PRESENTERS: LAURA BIRD, National Congress of American Indians  
PRESENTERS: DAWN COLEY, National Indian Health Board  
PRESENTERS: KIMBERLY FOWLER, National Council of Urban Indian Health  
PRESENTERS: APRIL HALE, National Indian Health Board  
PRESENTERS: MARIKATE HULBUTTA, National Congress of American Indians  
PRESENTERS: ELLIOTT MILHOLLIN, Hobbs, Straus, Dean & Walker, LLP  
PRESENTERS: GEOFFREY ROTH, Indian Health Service  
PRESENTERS: RUDY SOTO, National Council of Urban Indian Health

SEMINAR

8:30 AM - 11:30 AM  **The Eastern Shoshone's Implementation of the Chronic Care Model: Our Evolution, Lessons Learned, and Our Future**  
Track: Disease Prevention and Health Promotion  
Star B  
The Chronic Care Model provided the conceptual framework for a project started within the Tribal health programs over six years ago. Similar to the Indian Health Service Improved Patient Care model, the Tribal health programs design emphasized community-based leadership, having the primary role in developing and implementing culturally-tailored community self-management supports, improving linkages with the IHS clinicians, and developing a coalition of organizations with additional resources to create a more comprehensive system of chronic and substance abuse care for Tribal members with disease. The process has changed the health care delivery system for Wind River and is a key component in its success in obtaining foundation grants, projects with major universities that will provide resources to improve the quality of life for community members. Learn about the success the redesign of the Tribal health programs has done to improve outcomes in chronic disease and substance abuse.  
PRESENTERS: CATHERINE KEENE, Eastern Shoshone Tribal Health  
PRESENTERS: ELIZABETH SHIELD, Eastern Shoshone Tribal Health  
PRESENTERS: NAOMI HARRIS, Eastern Shoshone Tribal Health  
PRESENTERS: KELLIE WEBB, Eastern Shoshone Tribal Health
AGENDA

THURSDAY, APRIL 9, 2015

WORKSHOPS

8:30 AM - 10:00 AM  Taking a Public Health Approach to the Issue of “Murdered and Missing Indigenous Women” in the United States  
**Track: Public Health Law and Policy**  
_Cahuilla A/F_  
The issue of “Murdered and Missing Indigenous Women” gained momentum from activist groups in Canada, drawing attention to the deep-rooted effects of colonization, historical trauma, boarding schools, and their subsequent effects on gender norms and societal views of Aboriginal and First Nations people. A recent series of events and online social media campaign sought to support the efforts bringing light to this issue in Canada, as well as create spaces for dialogue about it in the U.S. The events were headquartered in the Fargo and Moorhead area, which allowed for symbolic and physical connection to Canada, as well as efforts to build on the work being done to address the rise in human trafficking as a result of the Bakken oil boom. This workshop will take a public health approach in examining the events and campaign, giving participants information on how online awareness can spur public health efforts, and skills and tools for how to join the efforts and address the issue in their own program and communities.  
**PRESENTER:** HANNAH BLUE, North Dakota State University  
**PRESENTER:** TANAYA WINDER, University of New Mexico

8:30 AM - 10:00 AM  Prescription Opiate Drug Abuse  
**Track: Behavioral Health and Substance Use**  
_Cahuilla C_  
According to the Substance Abuse and Mental Health Services Administration, prescription opiate abuse in this country disproportionately impacts the health and well-being of Native American families, Tribes, and communities. The United South and Eastern Tribes, Inc./Mohegan Indian Tribe’s Prescription Opiate Drug Abuse Project was designed to decrease the incidence of prescription opiate drug abuse by completing an audit of both internal and external systems. The audit team interviewed Tribal members dealing with chronic pain, addiction, or both. In addition, interviews were conducted with Tribal leaders and key individuals in the Tribal community. The analysis identified gaps in the areas of education, financial processes, coordination of care and the lack of culturally-appropriate healing methods. This study has led to refining and strengthening best practices and models of treatment.  
**PRESENTER:** IRENE MILLER, Mohegan Tribe  
**PRESENTER:** CHARLIE TWO BEARS STRICKLAND, Mohegan Tribe

8:30 AM - 10:00 AM  Navajo Nation Health Systems Assessment  
**Track: Accreditation and Quality Improvement**  
_Star A_  
The Navajo Nation Department of Health (NNDOH) completed a Navajo Nation wide Health Systems Assessment in partnership with the University of New Mexico Institute for Indigenous Knowledge & Development program and Navajo Nation Health Systems partners utilizing the Ten Essential Services of Public Health as the evaluation baseline and the MAPP (Mobilizing Action through Planning and Partnerships) community health assessment (CHA) tool. The last session resulted in action plans which were developed with appended teams, and are ripe for implementation. This NNHSA is one of the processes in the development of a CHA, an accreditation prerequisite, and the action planning that occurred will be integrated into the NNDOH performance improvement program.  
**PRESENTER:** ANITA MUNETA, Navajo Nation

8:30 AM - 10:00 AM  Native Voices: A (Steamy) Evidence-Based Sexual Health Video for American Indian Teens and Young Adults  
**Track: Disease Prevention and Health Promotion**  
_Cahuilla D_  
Native VOICES (Video Opportunities for Innovative Condom Education and Safer Sex) is an evidence-based sexual health video, designed to prevent HIV and other sexually transmitted infections among heterosexual and LGBTQ American Indian teens and young adults. The video covers important sexual health topics, including: waiting to have sex, talking to your partner, STI testing, protecting personal values, and healthy relationships. Native VOICES can be integrated into the flow of services provided by clinics, schools, and other community programs, and can be tailored to the constraints of your setting. A multi-site randomized controlled trial is near completion. Preliminary satisfaction surveys suggest promising results: After watching the video, 74% felt more likely to get tested for STIs/HIV, and 61% felt more likely to use condoms. Workshop attendees will receive a copy of the Native VOICES video (23 minutes), a selection of condoms and dental dams, and a user's guide.  
**PRESENTER:** THOMAS GHOST DOG, JR., Northwest Portland Area Indian Health Board  
**PRESENTER:** JESSICA LESTON, Northwest Portland Area Indian Health Board
The National Institute for Occupational Safety and Health (NIOSH) was created by the U.S. Congress in 1970 "...to assure so far as possible every man and woman in the Nation safe and healthful working conditions and to preserve our human resources..." Total Worker Health™ is a strategy integrating safety and health protection with health promotion to prevent worker injury and illness and to advance health and well-being. TWH recognizes that workers face risks on and off the job. Risks at work may even threaten a worker's family. Risks at home and in the personal life find their way into our work lives. The TWH program recognizes this and addresses these challenges to better meet the needs of workers. This session will focus on ways to address health protection and health promotion in the workplace.

PRESENTER: CONSTANCE FRANKLIN, Centers for Disease Control and Prevention

Evaluation helps us to make solid programmatic decisions and holds us accountable to ourselves, our funders and our communities. This introductory workshop will move through the different levels of process and outcome evaluation – clearly defining them and providing tips on how to conduct evaluations easily and successfully.

PRESENTER: ROBERT FOLEY, National Indian Health Board

Helping Everyday Youth (HEDY) implemented a tailored program for a reservation community by utilizing a set of principles and strategies they developed for both Tribal and urban communities. With Tribal members guiding the development of culturally-relevant services for youth and families, HEDY offered behavioral health and substance abuse prevention knowledge and organizational resources to empower program development. HEDY offers participants knowledge, resources and experiences in developing a strategic roadmap for building a well-trained, well-supported local workforce to implement effective youth and family programs in their own communities. This presentation will include a tour of HEDY Programs; a multimedia community report on positive outcomes; an outline of the management/administrative strategies used in the construction and implementation of programs; and an interactive activity to assist participants in developing a strategic roadmap in their community.

PRESENTER: ABEL CLASSAY, Helping EveryDay Youth
PRESENTER: TRENA BIZARDI, Helping EveryDay Youth
PRESENTER: KIRK MASSEY, Helping EveryDay Youth

Calricaraq, a Yup'ik Eskimo word meaning, "helping families heal", is a traditional healing program being implemented by the Yukon Kuskokwim Health Corporation, a Tribal health organization in Bethel, Alaska. After four decades of relying on Western clinical models, Calricaraq is teaching families how to live healthy lives in the traditional Yup'ik way, and Tribal leaders are embracing Calricaraq as an effective way to provide mental health treatment. YKHC's Behavioral Health department is utilizing Calricaraq for children's mental health services, including outreach to communities through community gatherings, creation of a Calricaraq Technical Assistance Center, and a Family Center providing both clinical services alongside traditional healing activities. Our recently completed Calricaraq Facilitator's Guide will allow local community members to provide Calricaraq activities in their communities. This presentation will provide a summary of how we plan and implement Calricaraq in communities, and how your community can create your own program.

PRESENTER: ROSE DOMNICK, Yukon Kuskokwim Health Corporation
PRESENTER: IDA CHARLIE, Yukon Kuskokwim Health Corporation
PRESENTER: MARK ANARUK, Yukon Kuskokwim Health Corporation
10:30 AM - 12:00 PM  
Eye Movement Desensitization and Reprocessing (EMDR): An Overview and Demonstration  
Track: Behavioral Health and Substance Use  
Star A  
Therapy is an evidence-based psychotherapeutic technique that can offer life-changing results to people who suffer the negative effects of trauma, including post-traumatic stress disorder, depression, anxiety, substance abuse and more. Repeated studies have shown that people can experience benefits with only a few sessions of EMDR that once took years with other forms of psychotherapy. The Oklahoma City Indian Clinic currently has four EMDR-trained therapists who have experienced a tremendous amount of success with this treatment. This workshop will offer an overview of EMDR therapy with live demonstrations of techniques. Presenters will present successful case examples, review the benefits of EMDR to both the therapist and the client, and outline EMDR training requirements and opportunities. EMDR offers an excellent tool for use in trauma-informed practice.  
PRESENTER: SUMMER WELCHER-DUKE, Muscogee Creek Nation  
PRESENTER: REBECCA BUNDY, Choctaw Nation of Nation

10:30 AM - 12:00 PM  
Supporting Tribal Community Health Assessment and Improvement Planning: Identifying Priorities Through Comprehensive Community-Based Strategies  
Track: Accreditation and Quality Improvement  
Cahuilla D  
Tribal agencies vary in their approaches to community health assessment and health improvement planning (CHA/CHIP), due to factors such as organizational and community assets, workforce capacity, resources, leadership, and agency goals for PHAB accreditation. This session will describe how collaboration and partnership supported successful CHA/CHIP in Tribal communities in Michigan. Building on strengths and assets, MPHI supported the efforts of seven Tribes and one Urban Indian Health Center to gain understanding of health issues in their communities, and to develop plans for implementing coordinated community action. Presenters will describe: 1) how projects were structured to increase Tribal capacity and foster ownership; 2) adaptations to models and tools for each unique context; 3) processes for identifying root causes of health disparities with assessment data and selecting priorities; and, 4) how priorities were linked to policy, systems, and environmental change strategies. Successes and lessons learned through these experiences will be shared.  
PRESENTER: SHANNON LAING, Michigan Public Health Institute  
PRESENTER: JULIA HEANY, Michigan Public Health Institute  
PRESENTER: LISA MYERS, Sault Ste. Marie Tribe of Chippewa Indians

10:30 AM - 12:00 PM  
Sharing Your Message with the Community Through Collaboration and Creativity: Lessons Learned From Choctaw Nation MSPI  
Track: Disease Prevention and Health Promotion  
Cahuilla E  
In this workshop the presenters will explore how to host a large scale community prevention event from beginning to end. They will discuss different types of events, publicity and social media, planning, budgeting, networking, and community involvement. Emphasis will be placed on how to convey your prevention message clearly at a large scale event. Survey methods and evaluation for grant data collection will also be considered. Examples (positive and negative) experienced by the Choctaw Nation MSPI will be shared. The attendees will also team up to create and plan their own large scale community event.  
PRESENTER: KRISTIE BROOKS, Choctaw Nation of Oklahoma  
PRESENTER: MELANIE JONES, Choctaw Nation of Oklahoma

10:30 AM - 12:00 PM  
From the Ground Up: Cultivating Community Gardens  
Track: Disease Prevention and Health Promotion  
Palm A  
Community gardens are a wonderful method to ensure access to quality produce, sustain traditional foods, battle back the tide of food deserts that are encroaching on Tribal lands, and combat obesity, diabetes and poverty. This workshop will explore different models of community gardens that includes: youth gardens, intergenerational gardens, elder gardens, shared garden space, and donation gardens. The facilitator will utilize strategies to promote an interactive learning and experience for attendees that will include sharing and hearing stories – with a focus on lessons learned, and tips and suggestions for launching and sustaining a community garden. The workshop will not concentrate on specific gardening methods, rather how to create a community-building and mobilization strategy to produce a truly community-owned and driven public health program.  
PRESENTER: KARRIE JOSEPH, National Indian Health Board
1:00 PM - 1:45 PM  Tribal Smoke Free Policies and Culturally Relevant Cessation  
Track: Public Health Law and Policy  

National surveillance data suggests American Indians and Alaska Natives (AI/AN) have among the highest rates of tobacco use in many Regions; this population also has among the highest rates of chronic diseases associated with tobacco use (cancer, heart disease, etc.). National Native Network agencies have worked with Tribes to conduct assessments and develop Tribe-specific smoking prevalence rates, documented as high as 79% compared with a national AI/AN aggregate rate of 38.5% (SGR50). Tribal policies and culturally appropriate commercial tobacco cessation services are needed to reduce health disparities among American Indians in Tribal communities. The Great Plains Tribal Chairmen's Health Board, Inter-Tribal Council of Michigan, and California Rural Indian Health Board will share experiences with Tribal community assessments and designing Tribal community-specific commercial tobacco prevention and control policies. Tribal Smoke Free Policy Toolkit and culturally relevant cessation resources will be discussed.

PRESENTER: RICK MOUSSEAU, Great Plains Tribal Chairmen's Health Board  
PRESENTER: CHRIS COOPER, California Rural Indian Health Board  
PRESENTER: ROBIN CLARK, Inter-Tribal Council of Michigan

1:00 PM - 2:30 PM  Protecting Our Future: From Research to Reality  
Track: Disease Prevention and Health Promotion  

Suicide has reached epidemic proportions in many Native communities, especially among the youth. Indian Health Service data found 17.9 suicides per 100,000 Native persons. Yet, despite these tragic statistics, none of the evidence-based suicide prevention interventions have been rigorously evaluated in American Indian communities. We believe these effective interventions can be culturally adapted and implemented to reduce this disparity. Only four evidence-based practices have been shown to prevent suicide in clinical trials that have manuals and can be readily adopted by communities. These interventions all focus on reducing suicidal thoughts or behavior but range tremendously in intensity, complexity, and duration. The differences in the appropriateness, acceptability, and feasibility of implementing these four evidence-based interventions for a specific Tribal community are expected to be both practical and cultural. Our discussion will focus on engaging participants in how these effective interventions could be adapted, implemented and evaluated in Tribal communities.

PRESENTER: ABIGAIL ECHO-HAWK, University of Washington

1:00 PM - 2:30 PM  Addressing Early Childhood Obesity Using Novel Family-Based Approaches  
Track: Disease Prevention and Health Promotion  

The Healthy Children Strong Families (HCSF) family-based lifestyle intervention trial was developed to improve family health and prevent obesity for American Indian children ages 2-5 and a primary caregiver. Families participate in one year of an intervention group and one year of a child-safety focused group. The intervention group targets increasing fruit and vegetable intake, reducing junk food, increasing physical activity, decreasing screen time, and two lesser-studied factors related to health, stress and sleep. Participating families receive monthly lessons with educational materials, books, games, and other health-promoting items. Families also receive social support through a Facebook group and regular text message coaching. This workshop will use an interactive presentation and small group format to address community-engaged study design, curriculum development, baseline findings, and lessons learned from the implementation of the HCSF project in five urban and rural communities nationwide.

PRESENTER: ALEXANDRA ADAMS, University of Wisconsin  
PRESENTER: JUDITH SHECHE, First Nations Community Healthsource  
PRESENTER: EMILY TOMAYKO, University of Wisconsin
WORKSHOPS CONTINUED

1:00 PM - 2:30 PM **Navajo Community Health Outreach (NCHO) Youth**  
*Track: Disease Prevention and Health Promotion*  
*Cahuilla C*

Rex Lee Jim, Director of REACH NCHO, will introduce Navajo high school students and provide an overview of the Navajo Community Health Outreach (NCHO) youth leadership initiative on the Navajo Nation. Through the Community Outreach Patient Empowerment (COPE), a Native American non-profit organization, youth leaders serve as public health champions for healthier Navajo families and communities. The session will make a case for involving youth in health promotion initiatives and present their work in food literacy. NCHO contributes to students' academic success and transition to college with the Bread Loaf School of English teachers who are part of a national network and serve as mentors and workshop leaders. NCHO youth leaders are transforming ideas of what constitutes community health outreach workers and have become active partners in a public health.

**PRESENTER:** REX LEE JIM, Navajo Nation  
**PRESENTER:** SONLATSA JIM - MARTIN, Navajo Nation

1:00 PM - 2:30 PM **Utilizing Systems Change to Address Commercial Tobacco Within Tribal and Indian Health Service (IHS) Clinics: A Feasibility Study**  
*Track: Behavioral Health and Substance Use*  
*Star A*

American Indians (AI) have the highest U.S. smoking prevalence and experience a disproportionate burden of smoking-related morbidity and mortality. Strategies to address this issue in AI clinics are limited. Systems for Tobacco Addiction Treatment is a feasibility study with three clinics to systematically integrate tobacco intervention into clinic visits based on the USPHS Clinical Guidelines’ 5 A’s Model. The study looked at provider training, and clinical system tools to encourage and support assessment of smoking status and treatment of tobacco addiction. Tools include prompts, reminders, education, provider feedback loops and referral systems. A situational analysis was conducted using system assessments, process mapping, surveys and staff interviews to identify current practice, available resources, and intervention opportunities.

**PRESENTER:** KRISTINE RHODES, American Indian Cancer Foundation

1:00 PM - 2:30 PM **What's Your Risk: What American Indian Adolescents Are Saying**  
*Track: Behavioral Health and Substance Use*  
*Cahuilla D*

In 2013 and 2014, 776 American Indian adolescents attending residential boarding school completed risk assessment interviews to identify factors that could impact their learning and/or well being. These included: mandatory enrollment in a residential boarding school; home risk factors; absence of a supportive adult; no financial support; academic history of suspension; experience with bullying; use of alcohol, tobacco or other drugs (ATOD); unprotected sex/unplanned pregnancy/parenthood; court involvement; imprisoned family members; recent deaths of loved ones; history and experience with suicide; history of physical or sexual abuse; and feelings about general health. Over half reported incarcerated family, problems at home, recent family deaths, and experience with ATOD. Results informed the development of a resilience-based curriculum, and have implications for referral protocols and the need for available resources.

**PRESENTER:** DEBORAH SCOTT, Sage Associates, Inc.

1:00 PM - 2:30 PM **Building Infrastructure Around HIV, STDs, and Sexual Health in Indian Country**  
*Track: Disease Prevention and Health Promotion*  
*Palm A*

In this session, participants will learn the importance of addressing HIV, STD and broader sexual health topics in Tribal communities, and how to use tools for assessing community readiness to implement HIV, STD and sexual health programs. The session will demonstrate how a policy change process might work in their community by reviewing sample policy and resolution templates. The presenter will also discuss case studies of effective models for change in Tribal communities. Participants will also review additional resources to strengthen community and clinical HIV, STD and sexual health programs including but not limited to social media outlets and national resources.

**PRESENTER:** JESSICA LESTON, Northwest Portland Area Indian Health Board
3:00 PM - 3:10 PM  Opening Remarks
PRESENTER: NIHB Board Member

3:10 PM - 4:00 PM  The Role of Public Health Policy in Tobacco Prevention Panel Presentation
Despite an overall decrease in smoking by all populations in the past 10 years, the prevalence of smoking is still higher for American Indians and Alaska Natives than any other racial or ethnic group in the United States. Similarly, Native Americans suffer disproportionately from illnesses such as heart disease, lung cancer and complications from diabetes, resulting in smoking-related premature deaths and disability. Although the ceremonial use of tobacco and the historical context of regulating spiritual practices can make tobacco control efforts a difficult subject to breach, many Tribal communities tackle commercial tobacco use through the adoption of innovative policies and practices that elevate health and respect culture. A comprehensive tobacco strategy goes beyond smoking policies and may include other issues such as access to cessation, secondhand smoke exposure in vehicles, limits on advertising, local taxes on tobacco products, etc. The panel will discuss the details, challenges, and elements that contribute to a comprehensive tobacco prevention strategy, and the effect policy can have on reducing tobacco-related health disparities.
KRISTINE RHODES, American Indian Cancer Foundation
KYLA RETZER, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention
ISAIAH BROKENLEG, Great Lakes Inter-Tribal Epidemiology Center
MARK LEBEAU, California Indian Health Board
MODERATOR: SAM MOOSE, National Indian Health Board Bemidji Area Representative

4:00 PM - 4:50 PM  Diabetes and Obesity Prevention Panel Presentation
American Indians and Alaska Natives (AI/AN) experience diabetes and obesity at disparately higher rates than the general population. At a rate of 2.8 times the national average, AI/ANs have the highest prevalence of diabetes and have a 50% higher prevalence rate of obesity. The determinants of these diseases are complex, but the trend of increasing prevalence rates of overweight and obesity among AI/ANs, as well as the nation at large, is associated with environments that promote increased food intake and decreased activity. Intervention and prevention programs are urgently needed in AI/AN communities. Fortunately, there are several programs based on best practices and qualitative research that are working to reverse the epidemic levels of obesity and type II diabetes in Indian Country. This panel will highlight the work of the Toiyabe Indian Health Project, the Tribal Leaders Diabetes Committee and the Healthy Children Strong Families family-based lifestyle intervention trial. The panelists will be available for questions and answers after brief presentations on their successful programs in obesity and diabetes treatment and prevention work.
RICK FREY, Toiyabe Indian Health Project
CONNIE BARKER, Chickasaw Nation
EMILY TOMAYKO, University of Wisconsin
MODERATOR: PATRICK MARCELLAIS, National Indian Health Board Great Plains Area Representative

4:50 PM - 5:00 PM  Closing Remarks
PRESENTER: NIHB Board Member

Closing Prayer
PRESENTER: NIHB Board Member

Adjourn
POST-SUMMIT EVENTS AND MEETINGS

9:00 AM - 3:00 PM Taking Technology & Innovation Beyond “The Cloud”: A New Vision to Improve Tribal Health
Cahuilla Ballroom B/C

Where does the Digital Divide end and Quality Health Care begin? How can Tribes use Innovation and Technology to get there? What reforms in policies and resources MUST HAPPEN so that “No Tribe is Left Behind” in the explosion of health technological advances? How can health care teams channel the power of the connected patient to improve community health outcomes?

This free day-long conference for Tribal leaders, Health providers, and Technical staff is intended to disrupt the traditional digital mindset within our Tribal Health Delivery System. Tribal health organizations who “get it” will be steps ahead in their Self Determination journey to create healthy communities.

Not only will participants receive an overview of Health IT challenges and opportunities facing Tribes under healthcare reform, you will also have the unique opportunity to create a new vision for health care which embraces the latest technologies. Join like-minded peers in small-group learning and problem-solving “think tanks,” facilitated by national experts, to design our Tribal Health IT solution for the future.

April 10, 2015
9:00 am - 4:00 pm
Cahuilla Ballroom B/C

For more information, please visit www.nihb.org or call 202-507-4070.

National Indian Health Board
NIHB BOARD OF DIRECTORS

Cromwell, Cedric
Mashpee Wampanoag Tribe
Nashville Area Representative
Chairman, Mashpee Wampanoag.
Cedric Cromwell was elected Chairman of the Mashpee Wampanoag Tribe in February 2009, and re-elected in February, 2013. A member of the Tribal Council for eight years before his election as Chairman, Cromwell brings a wealth of experience in tribal governance as well as the private sector to his role as the leader of the Tribe’s government. Chairman Cromwell previously served as both Director of Project Management and as a Business Portfolio Director for Fidelity Investments in Boston, Massachusetts. He holds a degree in Management and Community Planning from the University of Massachusetts at Boston. Chairman Cromwell is focused on increasing economic development opportunities for his Tribe, including a planned destination resort casino in Tauntain, Massachusetts.

Elgin, Lisa
Manchester Band of Pomo Indians
California Area Representative
Tribal Administrator, Manchester Pt. Arena Band of Pomo Indians
No bio at time of printing.

Harvier, Martin
Salt River Pima-Maricopa Indian Community
Phoenix Area Representative
Vice President, Salt River Pima-Maricopa Indian Community Tribal Council
Martin Harvier took office as Vice President of the Salt River Pima-Maricopa Indian Community (SRP-MIC) in December 2006. Vice President Harvier supports improving education for community members and creating opportunities for cultural preservation and promotion. He notes that the Pima were a peaceful people and believes these feelings could come back into the hearts of families if people know who they are. As Vice President, he supports educational and health-based programming that furthers these goals. When Harvier was 19 years old, his father was diagnosed with cancer, and in 1979 lost his battle with the disease. Martin Harvier became the sole support for his mother, three sisters and two brothers. He worked as a chain man on a survey crew for the Gila River Indian Community, and then as a plant mechanic and welder for a company located on the Salt River Indian Community for 11 years. In 1996, the SRP-MIC hired Harvier as a civil tech soils tester. In 1998, he was promoted to plant manager of a water pump station, and until assuming the office of Vice President, served as the acting irrigation manager for the community. He is committed to treating people with respect and believes that you can tell a lot about someone by how he or she treats others. Harvier and his wife Toni are the proud parents of five children and one grandchild.

Headdress, Charles
Billings Area Representative
Chairman of the Health and Human Services Committee, Fort Peck Tribal Executive Board
Charles Headdress graduated in 1970 from the Business Department at Haskell Institute, Lawrence, KS. Shortly after graduation he was drafted and served 18 months behind the Iron Curtain in West Berlin with the 4th Battalion 18th US Infantry as a Squad Leader patrolling Spandau Prison. He graduated from the US Army Berlin Brigade Leadership School and was honorably discharged in November 1972. Upon his return to the states, he started a 32 year career with Indian Health as a Health Systems Specialist retiring in 2004. Mr. Headdress then started a small construction business with his best friend and re-retired in 2007. Not wanting to gather moss, he started work with the City of Poplar Police Department and graduated from the Montana Law Enforcement Academy as a Certified Department of Corrections Probation/Parole Officer. He also graduated from the Montana Reserve Officer Academy. Mr. Headdress then entered Tribal politics and was elected to the Tribal Council in 2009 and is serving his 3rd term. He received a Presidential Appointment to serve on the Montana Selective Service Board in 1998 and still serves in that capacity. Mr. Headdress also serves on the Direct Service Tribes Advisory Board (DSTAC), Facilities Appropriations Advisory Board, North East Montana Health Systems Board, Benefits Health Systems Advisory Board in Great Falls, Montana. He is the Chair of the Health and Human Services Committee for the Fort Peck Assiniboine/Sioux Tribes and has 4 grown children.

Jim, Rex Lee
Navajo Nation
NIHB Vice Chair and Navajo Area Representative
Vice President, Navajo Nation
After serving as a ranking member on the Judiciary Committee and Chairman of the Public Safety Committee within the 21st Navajo Nation Council, Delegate Rex Lee Jim was sworn into office as the Navajo Nation Vice President on January 11, 2011. Vice President Jim was born and raised in Rock Point, a small farming and ranching community in northern Arizona. He is of the Kin Lichii'nii clan, born for Tachi'nii. His maternal grandfather is Kin Yaa'aani and his paternal grandfather is Naakaii Dine'e. He has adopted five children: Noah, Ryan, Heather, Twila and Raylon. After graduating from Princeton University, Vice President Jim entered his education career at Rock Point Community School to teach Navajo to students K-12. He developed a curriculum for K Graduate programs that was culturally and pedagogically appropriate for Navajo students. He is a published author, Navajo language playwright author, and medicine man. Vice President Jim continues to make diplomatic trips abroad on behalf of the United Nations to improve relations between nations states and indigenous peoples. Vice President Jim played a key role in the drafting and final passage of the International Declaration on the Rights of Indigenous Peoples. As Treasurer for the National Indian Health Board, Vice President Jim also serves as a member of the executive committee. Vice President Jim now serves as the Director of the Navajo Community Health Outreach Program - allowing him to once again work to mobilize Native youth.

Joseph Jr., Andrew
Confederated Tribes of the Colville Reservation
NIHB Member-at-Large and Portland Area Representative
Chairman, Northwest Portland Area Indian Health Board
Tribal Council Member, Confederated Tribes of the Colville Reservation
Andrew Joseph, Jr. has served on the Colville Tribal Council for five terms. He is a Nespelem district representative, serving on the following Colville committees: Executive Committee, Veterans Committee as Chair, Health & Human Services Committee as 1st Vice, Tribal Government Committee as 1st Vice, and Culture Committee as 1st Vice. Andy is also a voting delegate of the Affiliated Tribes of Northwest Indians (ATNI) and the National Congress of American Indians (NCAI). In July 2007, he was elected Vice Chairman of the Indian Health Service (IHS) Direct Services Tribes Advisory Committee. On January 22, 2009 he was appointed the Chairman of Northwest Portland Area Indian Health Board (NPAAHB) and in April 2011 he was elected Chairman. In March 2013 he was elected the Member-At-Large for the National Indian Health Board.
BIographies

NIHB Board of Directors, continued

Marcellais, Patrick
Turtle Mountain Band of Chippewa Indians

Great Plains Area Representative
Council Representative, Turtle Mountain Band of Chippewa Indians

Patrick J. Marcellais, Sr. is currently the District 2 Representative for the Turtle Mountain Band of Chippewa Indians. He is married to Leslie Marcellais and together they have 4 children; Sydney, Maycie, Patrick Jr., and Maximus. Mr. Marcellais was born and raised in the Turtle Mountain area along with 3 sisters and 1 brother. He graduated from Turtle Mountain Community High School in 1997 and from Turtle Mountain Community College in 2012 with an associate of Art and Associate of Science degrees. He currently is a member of the North Dakota In-Med Board of Directors as well as a member of the 100-297 Grant School Board. Mr. Marcellais is currently a Level 1 Cross-fit trainer. He is a staunch advocate of exercise and proper nutrition. By focusing on healthy initiatives, Mr. Marcellais believes the community can realize benefits physically and financially by reducing the number of health-related illnesses plaguing our community today.

Moose, Sam
Mille Lacs Band of Ojibwe

Great Plains Area Representative

Moose currently serves as the Tribal Commissioner of Health and Human Service. He has a bachelor of applied science degree in community health with a minor in Indian Studies from the University of Minnesota, Duluth and a master’s degree in tribal administration and governance from the University of Minnesota, Duluth.

Ortega, Sandra
Tohono O’odham Nation

Tucson Area Representative

Sandra Ortega is a member of the Tohono O’odham Nation of Arizona and the Chairwoman of the Direct Service Tribes (DST) Advisory Committee. She has been involved with the DST Advisory Committee since 2007 and served as Chairwoman since 2011. Ms. Ortega currently serves as a Tohono O’odham Legislative Council Representative. Ms. Ortega is Chairwoman for the Health and Human Services Committee which provides oversight to the Tohono O’odham Tribe’s Health Programs and the Indian Health Service facilities. She is also Chairwoman for the Human Resources Development Committee which provides oversight to the education department and schools on the Tohono O’odham Nation.

Secatero, Lester
To’Hajilee Band of Navajos

NIHB Chairman and Albuquerque Area Indian Health Board

Lester Secatero is currently the Chairman of the Albuquerque Area Indian Health Board, Inc. and of the National Indian Health Board. He has been the pastor of the Jesus Church at To’Hajilee for the past thirty-four years. Mr. Secatero has served the To’Hajilee Chapter and the Albuquerque area in a number of different capacities. Mr. Secatero has served on the Albuquerque Area Indian Health Board for the past fourteen years and was elected Chairman in 2004. He has been married to his wife for over forty-four years and is a father and grandfather.

Smith, H. Sally
Yup’ik Eskimo

NIHB Secretary and Alaska Area Representative

H. Sally Smith served as the Chairperson for the National Indian Health Board’s (NIHB) Board of Directors from December 1999 until January 2009. Currently, Ms. Smith is the Alaska Area Representative to the NIHB Board and board Secretary. Ms. Smith serves on Health Research Advisory Committee, Centers for Disease Control and Prevention State Territorial Local and Tribal Committee, and the IHS National Tribal Budget Formulation Workgroup. Ms. Smith also serves on the Centers for Medicare & Medicaid Services Tribal Technical Advisory Group and chairs, NIHB’s Medicare, Medicaid and Health Reform Advisory Committee. Ms. Smith has served as the Chairperson for the Alaska Native Health Board since 1998. She presides as the Chair for the Alaska Native Medical Center Joint Operating Board, the Bristol Bay Area Health Corporation and serves as the Sergeant-at-Arms for the Alaska Native Tribal Health Consortium. Ms. Smith serves as 3rd Chief of the Native Village of Dillingham and was a Tribal Judge. In 1997, she was the recipient of the Alaska Federation of Natives Health Award and in 1998 she received the National Indian Health Board’s highest recognition, The Jake White Crow Award. She is Yup’ik Eskimo and the mother of four sons.

Tall Chief, Tim
Seminole Nation of Oklahoma

Oklahoma City Area Representative

Oklahoma City Area Inter-Tribal Health Board

Tim Tall Chief serves as Director of Health Services for the Citizen Potawatomi Nation in Shawnee, Oklahoma and maintains a faculty appointment in the College of Liberal Studies at the University of Oklahoma. He is the CEO of Outdoors Adventures Unlimited, Inc., an adventure and culturally-based program serving training needs of corporations, tribes, and non-profits throughout the U.S. He is the former Deputy Commissioner for Administration at the Oklahoma State Department of Health. Prior to that, he served as State Director of Indian Education for the Oklahoma State Department of Education. Tim serves as member and Chairman of the Oklahoma City Area Inter Tribal Health Board, Tim also serves on the Chickasaw Nation Medical Center and Health Services Governing Board and the Governing Board for the Citizen Potawatomi Health Services. He is also the Vice-Chair of the Osage LLC Board of Directors. Mr. Tall Chief was appointed to serve on the Governor’s Oklahoma Health Improvement Plan Committee. In his spare time, Tim serves with the Oklahoma State Athletic Commission as a boxing and Mixed Martial Arts (MMA) judge, referee, and inspector. He also serves as Master of Ceremonies for Native American cultural events and pow-wows throughout the United States.
NIHB STAFF

Bohlen, Stacy A.  
Sault Ste. Marie Tribe of Chippewa Indians  
Executive Director  
E-mail: sbohlen@nihb.org  
Phone: 202-507-4070

Stacy A. Bohlen is the Executive Director of the National Indian Health Board (NIHB). With the support of a strong, Tribally elected Board of Directors, Ms. Bohlen’s service to NIHB has contributed to the organization’s successful work to establish and elevate the Tribal presence for improving health care in the nation’s capital, promoted and strengthened the organization’s service to all federally recognized Tribes, significantly increased NIHB’s budget, staff and connectivity to the Tribes and increased NIHB’s effectiveness. Prior to joining NIHB, she was the Director of Federal Relations for the American Indian Higher Education Consortium, Deputy Director of the American Osteopathic Association’s Washington, DC Office, and served on the staff of former U.S. Congressman Bob Traxler. Ms. Bohlen received her Bachelor’s degree in Political Science from Oakland University in Rochester Hills, MI. She was born and raised in Michigan.

Angus-Hornbuckle, Carolyn – JD  
Mohawk  
Deputy Director of Policy, Programs and Advocacy  
Email: chornbuckle@nihb.org  
Phone: 202-507-4084

Carolyn Angus-Hornbuckle serves as a Deputy Director of Policy, Programs and Advocacy. Ms. Hornbuckle joined NIHB’s Public Health Programs Department after serving as a Law Fellow in NIHB’s Legislative Department. Ms. Hornbuckle graduated from the College of Law at Arizona State University and was awarded her J.D. in 2009. During law school, she completed internships at the United States Attorney’s Office for the District of Arizona and the Arizona Attorney General’s Office. After graduating, Ms. Hornbuckle worked as a law clerk for the Office of the General Counsel at the Salt River Pima-Maricopa Indian Community. Ms. Hornbuckle holds a law license in Arizona.

Briscoe, Valerie  
Deputy Director of Operations, Finance and Administration  
E-mail: vbriscoe@nihb.org  
Phone: 202-507-4089

Valerie Walker brings over 25 years of experience in non-profit finance, administration, human resource, and grants management in her role as Deputy Director of Operations, Finance and Administration at NIHB. Before joining NIHB, Valerie was the Director of Finance and Administration at Martha’s Table. As the organization’s first Internal Director of Finance, Valerie’s responsibilities included engaging with key funding stakeholders by assuring all financial and programmatic deliverables were complete and submitted on a timely basis thus helping to increase its capacity to serve some of Washington, D.C.’s most vulnerable populations. Other area nonprofit organizations in which Valerie has served as a key part of the management team include the Montgomery County Coalition for the Homeless, American Indian Higher Education Consortium, and the Center for Women's Policy Studies.

Castagne, Michelle  
Sault Ste. Marie Tribe of Chippewa Indians  
Public Health Project Coordinator  
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Michelle Castagne hails from Michigan’s Upper Peninsula where she developed a love for the outdoors and a strong desire to work toward a better culture of health – in American Indian Country in particular. Michelle joined the NIHB team in December 2014 as a project coordinator for the Tribal Leaders Diabetes Committee. She recently graduated with a B.S. in Public and Nonprofit Community Health Administration and brings with her seven years of experience as a leadership facilitator and two years as a marketing assistant for a corporate wellness program. She has also worked as a public policy assistant with the Grand Rapids Area Chamber of Commerce and completed several internships with her Tribe.

Coley, Dawn  
Penobscot  
Tribal Healthcare Reform Program Manager  
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Phone: 202-507-4078

Dawn M. Coley serves as the Tribal Healthcare Reform Program Manager for the National Indian Health Board. She is also a Licensed Producer in life, health and accident and long term care and Medicare supplement plans. She has over 25 years of experience of working in Indian Country with a concentration in health care administration. She is certified by the Centers for Medicare & Medicaid Services as a licensed agent to enroll individuals into the federally facilitated marketplace. Ms. Coley attended Dartmouth College with a concentration in Native American Studies and graduated from the Sawyer School of Business in New Haven, CT. Ms. Coley currently enjoys spending time with her grandchildren and golfing.

Davis, Flip  
Administrative Assistant  
E-mail: fdavis@nihb.org  
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Flip Davis has been the Administrative Assistant for NIHB for the past year. Due to his vast traveling background he has experienced many things and interacted with many people and cultures around the world. He attended Cambridge College for his certification and training in IT support. Now with the blossoming love and passion for physical health and wellness, he is on the path to pursuing a career in culinary science and nutrition to help spread the word of healthy eating and proper exercise that anyone will have the ability to do and understand.

Delrow, Devin – JD  
Navajo  
Program Manager for Medicare and Medicaid Policy  
E-mail: ddelrow@nihb.org  
Phone: 202-507-4072

Devin Delrow is the Program Manager for Medicare and Medicaid Policy. Devin received his B.A. in History from Dartmouth College and his J.D. from the University of New Mexico, School of Law. During law school, Devin worked in the Southwest Indian Law Clinic as a student attorney. He has completed internships with the Department of Justice (DOJ), Office of Tribal Justice, the DOJ Civil Rights Division and the DOJ Radiation Exposure Compensation Act Program. Prior to law school, Devin worked in the finance division of the Albuquerque Area Indian Health Service.

Edelen, Desiree  
Accounting Coordinator  
E-mail: dedelen@nihb.org  
Phone: 202-507-4082

Desiree Edelen serves as the Accounting Coordinator at NIHB providing specialized technical support to the Health Information Technology project and overall accounting support to all other grant projects. Desiree has worked at several non-profits and governmental agencies in varied accounting management positions including: Martha’s Table, The Children’s
Defense, Populations Services, International and Management Systems International. She brings over 20 years of experience in non-profit organizations.

**Engebretson, Jacquelynn**
*Ahtna Athabascan, Gulkana Village*
Public Health Program Coordinator
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Phone: 202-507-4074

Jackie Engebretson is the Public Health Program Coordinator for NIHB. She moved to DC after she graduated from the University of Alaska Anchorage with a BA in International Studies. She participated in American University’s Washington Internship for Native Students and was worked on federal contracts in the DC area for her Alaska Native Corporation, Ahtna, Inc. In 2012, Jackie joined NIHB as the Executive Assistant/Office Manager. Jackie serves as a crisis counselor at the DC Rape Crisis Center and volunteers at a program that provides a syringe exchange and safe sex supplies for drug users, sex workers, and their communities.

**Foley, Robert – M.Ed.**
Acting Director of the Public Health Programs and Policy Department
E-mail: rfoley@nihb.org
Phone: 202-355-5494

Robert Foley serves as the Acting Director of the Public Health Programs and Policy Department at NIHB where he is honored to work on HIV, methamphetamine, accreditation, and suicide prevention projects. Prior to joining NIHB, Mr. Foley served as the President/CEO of the National Native American AIDS Prevention Center where he managed programs delivering technical assistance and training to Native communities combating HIV. Mr. Foley has also worked as a training specialist with the National Network of Prevention Training Centers and as a research assistant with the Tri-Ethnic Center of Prevention Research at Colorado State University. He earned his BA and M.Ed. from the Colorado State University.

**Hale, April**
*Navaajo*
Tribal Health Care Reform Outreach and Education Communications Coordinator
E-mail: aahale@nihb.org
Phone: 202-507-4077

April Hale is the Tribal Health Care Reform Outreach and Education Communications Coordinator at the National Indian Health Board, where she works on the National Indian Health Outreach and Education initiative. Before joining the NIHB team, Ms. Hale did communications and legislative work for the National American Indian Housing Council and the National Congress of American Indians. Ms. Hale is a 2006 graduate from the University of New Mexico with a degree in Communications and Journalism, and a 2002 graduate of the Freedom Forum Diversity Institute’s American Indian Journalism Institute at the University of South Dakota. Ms. Hale is a citizen of the Navajo Nation from Iyanbito, New Mexico.

**Joseph, Karrie – MPH, CHES**
Public Health Programs Manager
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Karrie Joseph is the Public Health Programs Manager with the National Indian Health Board (NIHB) where she currently works with the Tribal Accreditation Initiative and the Tribal Leaders Diabetes Committee Project. Karrie joined NIHB in March 2015 and brings over 12 years of experience in Public Health. She received her BA in Anthropology and MPH in Health Promotion and Education, both from the University of South Carolina. Prior to joining NIHB, she had the honor and privilege of working with Native communities in North Dakota (Fort Berthold) and in Cherokee, North Carolina with Eastern Band of Cherokee Indians.

**Litsey, Richard – JD**
*Muscogee Creek*
Director of Policy and Advocacy
E-mail: rlitsey@nihb.org
Phone: 202-507-4076

Richard Litsey is an enrolled member of the Muscogee (Creek) Nation and retired from the United States Senate where he was Counsel & Senior Advisor for Indian Affairs on the Finance Committee handling Indian Health Care, Indian Tax issues, and social security matters. He holds a B.A. degree from Oklahoma State University, J.D. degree from Thurgood Marshall School of Law and an LL.M. in International Economic Law from the University of Houston Law Center. He is a member of the Mississippi State Bar, Texas State Bar, and the Capitol Hill Chapter of the Federal Bar Association.

**Montano, Muskadee – MSW**
*Red Cliff Band of Lake Superior Chippewa Tribe*
Research Project Manager
E-mail: mmontano@nihb.org
Phone: 202-507-4070

Muskadee Montano is the Research Project Manager for the Health Care Reform Marketplace project. Ms. Montano most recently served as Adjunct Faculty at the Social Work Program, University of Wisconsin-Superior and the Department of Social Work, University of Minnesota, Duluth. Prior to those positions, Muskadee served as Coordinator for American Indian Projects for the Center for Regional and Tribal Child Welfare Studies at the University of Minnesota, Duluth. Ms. Montano is finishing her dissertation for her Ph.D. in Social and Administrative Pharmacy, and holds a Master’s Degree in Social Work. In addition to her many professional accomplishments, she has an 8-year-old daughter named Maria.

**Roulain, Philip**
*Kiowa Tribe of Oklahoma*
Conference and Meeting Planner
E-mail: proulain@nihb.org
Phone: 202-507-4081

Philip Roulain is the Conference and Meeting planner at NIHB. Philip is an enrolled member of the Kiowa Tribe of Oklahoma originally from the city of Anadarko, Oklahoma. Philip began his career in Indian Country with the Association of American Indian Physicians doing health education and community coalition building. Philip has previously worked for NIHB in the capacities of Executive Assistant and Administrative Specialist and most recently with the National Council of Urban Indian Health as the Administrative Officer. Philip specializes in conference, meeting and event planning but also has extensive experience in graphic design, customer service and administrative management. Philip works with the Washington DC Native community by serving on the DC Native Community Round Dance Committee and he also enjoys cooking for large community events.
Shuy, Caitrin McCarron
Director of Congressional Relations
E-mail: cshuy@nihb.org
Phone: 202-507-4085

Caitrin Shuy is the Director of Congressional Relations at the National Indian Health Board. Caitrin spent three years as a Legislative Assistant to Congressman Tom Cole (R-OK) where she served as a political advisor and his lead staffer for Native American Issues for the Congressman’s work on the House Appropriations Subcommittee on Interior, Environment and Related Agencies. After earning her Master of Science Degree in Comparative Politics from the London School of Economics, Caitrin worked for the National Community Action Foundation as a Legislative Assistant. At NCAF Caitrin monitored and provided advice on legislative issues, spearheaded stakeholder outreach and participated in the planning and coordination of national conferences and congressional special events designed to showcase and elevate the organization’s legislative priorities.
SUMMIT PRESENTERS AND SPEAKERS

Adams, Alex - MD, PhD
Professor, University of Wisconsin
Alexandra Adams, MD, PhD, serves three main roles at the University of Wisconsin: Director of the Collaborative Center for Health Equity in the Institute for Clinical and Translational Research, Professor in the Department of Family Medicine, and practicing physician at the Pediatric Fitness Clinic in Madison, WI. Her special interests include pediatric nutritional problems, obesity, metabolic syndrome, and indigenous diets and health. Dr. Adams has been working in partnership with Tribal communities for the past 15 years to reduce the prevalence of pediatric obesity with the aim of reducing the risk of future cardiovascular disease and diabetes.

Anaruk, Mark
Evaluator, Yukon-Kuskokwim Health Corporation
Mark is Inupiaq and Yup'ik Eskimo, and was raised in Portland, Oregon. Mark has worked in the area of Alaska Native Tribal health evaluation and program management for over 20 years. He was the evaluator of the People Working Together SOC project from 2000-2006, and was employed by the National Indian Child Welfare Association, from 2009-2012, where he provided technical assistance to the Tribal SOC grantees. Recently, Mark has been working to provide evaluation services including development of data collection and tracking protocols for YKHC BH.

Anderson, Patrick
Senior Research Fellow, Sealaska Heritage Institute
Patrick M. Anderson is owner of Lean in Alaska and Senior Research Fellow at the Sealaska Heritage Institute, located in Juneau, Alaska. A 1975 graduate of Princeton University and a 1978 graduate of the University of Michigan Law School, Patrick has been an attorney in Alaska since 1978. He was elected to the Tribal Leaders Diabetes Committee since 1998 and has been an advocate for culturally appropriate prenatal education for AI/AN families. Carol was chair of the March of Dimes AI/AN Women’s Committee from 2006 until 2008. That committee developed The Coming of the Blessing®. She remains on the committee today as an advisor and helps implement culturally appropriate prenatal education on reservations across the country through the Coming of the Blessing.

Arnold, Carol - PhD
Advisor, March of Dimes
Carol teaches undergraduate and graduate nursing courses at Texas Woman’s University and is a volunteer for the March of Dimes. She has been working with American Indian/Alaska Native (AI/AN) families since 1998 and has been an advocate for culturally appropriate prenatal education for AI/AN families. Carol was chair of the March of Dimes AI/AN Women’s Committee from 2006 until 2008. That committee developed The Coming of the Blessing®. She remains on the committee today as an advisor and helps implement culturally appropriate prenatal education on reservations across the country through the Coming of the Blessing.

Barker, Connie
Tribal Legislator, Chickasaw Nation
Connie has served as a Chickasaw Nation Tribal Legislator since 2008 and in October of 2014, became the Legislative Chairperson. She has served on the Tribal Leaders Diabetes Committee since 2010, representing the Oklahoma Area, and serves on several of the workgroups. She was recently elected as the Tribal Leaders Diabetes Committee Co-chair and is proud to represent her Tribe along with all of Indian Country. Connie works in Healthcare administration and serves as Director of a busy medical practice in Oklahoma.

Beadle, Mirtha - MPA
Director, Office of Tribal Affairs and Policy, Substance Abuse and Mental Health Services Administration
Mirtha Beadle, MPA, is the Director of the Office of Tribal Affairs and Policy (OTAP), at the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services. In this capacity, Ms. Beadle provides leadership and coordination as SAMHSA’s primary point of contact for tribal governments, tribal organizations, federal agencies, and other governments and agencies on behavioral health issues facing AI/ANs and supports SAMHSA’s efforts to advance development and implementation of data-driven policies and innovative practices that promote improved AI/AN behavioral health.

Bialek, Ron - MPP
Executive Director, Public Health Foundation
Ron Bialek, MPP, COIA is President and CEO of the Public Health Foundation (PHF). Under his leadership over the past 18 years, PHF has focused its efforts on developing and implementing innovative strategies for improving performance of public health agencies. Initiatives include developing performance management and quality improvement tools and training for public health professionals; developing the Core Competencies for Public Health Professionals; creating a comprehensive public health learning management system – TRAIN; and developing consumer-oriented county health profiles — the Community Health Status Indicators initiative. Mr. Bialek also is one of the editors for the Public Health Quality Improvement Handbook.

Bird, Laura - JD
Legislative Associate, National Congress of American Indians
Laura Bird, J.D. (Navajo) is a Legislative Associate at the National Congress of American Indians (NCAI). Prior to joining NCAI, Ms. Bird was an Affordable Care Act (ACA) Trainer for the Tribal Education and Outreach Consortium (TEOC), and was a health policy analyst at ACA employer issues. Prior to Ms. Bird’s ACA work, she served as an attorney in the Government Relations Department of Laguna Development Corporation and served as Deputy Director of the National Native American AIDS Prevention Center. Ms. Bird earned a Juris Doctor Degree with a Certificate in Indian Law from the University of New Mexico.

Bitsue, Kristen
Patient Benefit Coordinator, Tucson Area Indian Health Board
Kristen Bitsue (Navajo) is a Patient Benefit Coordinator for Tucson Area Indian Health Service. Her work under Indian Health Service has spanned over 15 years and includes the Business Office, Contract Health and Health Promotion & Disease Prevention. As a Patient Benefit Coordinator, Kristen’s primary responsibility is to provide education and training to staff and patients about alternate resource programs and changes in the Indian health care system and advocate on their behalf. Her experience and knowledge of the alternate resource eligibility and enrollment process has contributed to the increasing revenue generated within the Tucson Area Revenue Enhancement Department.
Bizardi, Trena
STEM Technician, Helping EveryDay Youth
Trena Bizardi, enrolled member of the Navajo Tribe, is a Technician with Helping EveryDay Youth’s Native STEM program. Her focus is youth development and student leadership. Trena holds a B.S in Business Administration. She’s worked with the Center for American Indian Economic Development developing and implementing a youth outreach program focused on financial literacy for Native Communities in Northern Arizona. The mother of an extraordinary young girl, Trena is passionate about encouraging leadership and creating pathways for career readiness in Native youth.

Blue, Hannabah – MPH
Public Health Service Manager, North Dakota State University American Indian Public Health Resource Center
Hannabah Blue is Dine’ (Navajo), originally from New Mexico. Her clans are the Red Bottom Clan, born for Anglo, her maternal grandparents’ clan is the Tangle People Clan, and her paternal grandparents are also Anglo. Hannabah has a breadth of experience working on racial and social justice issues in health, particularly those affecting Queer People of Color, and Native and Indigenous communities. She worked as a Capacity Building Assistance Specialist at the National Native American AIDS Prevention Center. She recently earned a Master of Science degree from the Harvard School of Public Health. She currently is the Public Health Services Manager at the North Dakota State University American Indian Public Health Resource Center.

Brokenleg, Isaiah – MPH
Program Director and Epidemiologist, Great Lakes Inter-Tribal Epidemiology Center
Isaiah is a Program Director and Epidemiologist for the Great Lakes Inter-Tribal Council. Isaiah is an enrolled member of the Rosebud Sioux Tribe (Sicangu Nation) and grew up in South Dakota. From a cultural perspective, as a winkte, Isaiah believes that he is called to be a healer and move communities in the direction of positive change. From an academic perspective, Isaiah has a BA from the University of Minnesota with majors in multicultural studies and applied social justice/human rights. He has a Masters of Public Health from the University of Minnesota.

Brooks, Kristie – MS, LPC
Director of Behavioral Health, Choctaw Nation of Oklahoma
Kristie Brooks currently serves as the Director for the Behavioral Health Department of the Choctaw Nation of Oklahoma. She oversees the Behavioral Health Outpatient department as well as two residential substance abuse treatment facilities. In addition to her administrative duties, Kristie continues to provide marriage counseling and family counseling when in need. Kristie received her BA degree in 2003 and her MS degree in 2007. She received her licensure as a LPC (Licensed Professional Counselor) in 2009, and her LPC Supervisor certification in 2012.

Brookshire, Tom – MPH
Public Health Analyst, Health Resources and Services Administration Region Nine
Tom Brookshire has been with the HRSA San Francisco Region 9 office as a public health analyst and Tribal liaison since 2007. His work largely involves assisting health care provider organizations in the region, often by gaining support from HRSA programs. Prior to joining HRSA, he served as an administrator and manager of health care services, and as a primary care physician assistant for over 20 years, in Arizona, South Dakota, North Carolina, and Southeast Asia. He received a MPH from the University of North Carolina School Of Public Health, and completed graduate training as a PA at Yale.

Buckner, Darren
Senior Advisor to the Associate Administrator, Health Resources and Services Administration’s Office of Federal Assistance Management
Darren S. Buckner is the Senior Advisor to the Associate Administrator in the Health Resources and Services Administration’s (HRSA) Office of Federal Assistance Management (OFAM). OFAM provides leadership in the administration and assurance of the financial integrity of the HRSA’s assistance programs. OFAM collaborates with Bureau and Office programs to administer fair, consistent, transparent, and efficient grants management operations. Mr. Buckner has been with HRSA since 2000. He provides assistance in addressing issues affecting agency programs, makes recommendations for action to senior OFAM leadership; and aids in ensuring that the operational activities align with HRSA’s mission, goals and objectives.

Bundy, Rebecca – LCSW
Therapist, Choctaw Nation of Oklahoma
Rebecca Bundy, LCSW (Choctaw) is a therapist at the Oklahoma City Indian Clinic. She has been trained in EMOR on basic and advanced levels. She has worked in the area of Behavioral Health for 7 years, specializing in individual and group therapy.

Castagne, Michelle
Public Health Project Coordinator, National Indian Health Board
Michelle Castagne, member of the Sault Ste. Marie Tribe of Chippewa Indians, serves as the public health project coordinator for the Tribal Leaders Diabetes Committee at the National Indian Health Board. Ms. Castagne has worked in various roles for the Sault Tribe and recently graduated with a B.S. in Public and Nonprofit Community Health Administration. She brings with her seven years of experience as a leadership facilitator and two years as a marketing assistant for a corporate wellness program.

Chapman, Ron – MD, MPH
Board Member, Public Health Accreditation Board
In 2015 Dr. Chapman began a three year term on the Board of Directors for the Public Health Accreditation Board (PHAB). He has been trained as a site visitor and served on two site visits. From June 2011 through January 2015, Dr. Chapman served as director and state health officer of the California Department of Public Health and led the department to accreditation in December 2014. Previously Dr. Chapman has served as the chief medical officer of Partnership HealthPlan of California, the Solano County public health officer, and he worked at the California Department of Health Services as the founding chief of the Medicine and Public Health division.

Charlie, Ida
MSPI Program Coordinator, Yukon-Kuskokwim Health Corporation
Ida is Yup'ik Eskimo originally from the community of Kongiganak, a Bering Sea coastal village. She has worked in Alaska Tribal health for her entire career, and has been the MSPI Program Coordinator for the past five years. Ida facilitates, plans and organizes the Calricaraq community gatherings, and it is well known around our program that things do not run well if she is not involved. As the MSPI Coordinator she is responsible for many other activities including ASIST trainings, presentations and workshops for providers, at schools, and many other Tribal and regional events.

Clark, Robin – MS
Program Manager, Inter-Tribal Council of Michigan’s National Native Network
Robin Clark, MS, is a member of the Sault Ste. Marie Tribe of Chippewa Indians. Robin is the Program Manager for the National Native Network at the Inter-Tribal Council of Michigan.
which provides a forum for American Indian- and Alaska Native-serving organizations to obtain and disseminate evidence-based and culturally appropriate information, resources and technical assistance to reduce commercial tobacco relat ed illnesses and cancer disparities among American Indian and Alaska Native populations.

Cassay, Abel
Supervisor, Helping EveryDay Youth
Abel Cassay, enrolled member of the White Mountain Apache Tribe, is the Program Supervisor with Helping EveryDay Youth and the first employee hired by HEDY in his local community. Abel has extensive experience with youth in the White Mountain Apache community implementing school and community based behavioral health services over the past seven years. Abel has been a leader in charting the course to create effective Tribal programs. The father of two beautiful young children, Abel is passionate about creating programs that will prepare our youth to become future leaders in Native Country.

Coley, Dawn
Tribal Healthcare Reform Program Manager, National Indian Health Board
Dawn Coley serves as the Tribal Healthcare Reform Program Manager for the National Indian Health Board. She is also a Licensed Producer in life, health and accident and long term care and Medicare supplement plans. She has over 25 years of experience of working in Indian Country with a concentration in health care administration. She is certified by the Centers for Medicare & Medicaid Services as a licensed agent to enroll individuals into the federally facilitated marketplace. Ms. Coley attended Dartmouth College with a concentration in Native American Studies and graduated from the Sawyer School of Business in New Haven, CT. Ms. Coley currently enjoys spending time with her grandchildren and golfing.

Cooper, Chris – M.Ed.
Health Education Specialist, California Rural Indian Health Board
Chris Cooper, M.Ed., has 15 years of experience working with children, families, and communities. For the last 10 years, he has done PSE work to create tobacco cessation referral programs, develop community ordinances, and improve community health and safety. He is currently the tobacco and cancer coordinator for the California Rural Indian Health Board.

Dalsey, Elizabeth – MA
Health Communication Specialist, Centers for Disease Control and Prevention / NIOSH
Elizabeth Dalsey is a Health Communication Specialist with the National Institute for Occupational Safety and Health (NIOSH) in the Western States Office. She began work at NIOSH in 2006 after receiving her Masters in Communication from Michigan State University. She is responsible for communication activities and outreach for the office to promote NIOSH research and activities. Elizabeth also manages the NIOSH American Indian/Alaska Native initiative.

Domnick, Rose
Director of Behavioral Health / Prevention, Yukon-Kuskokwim Health Corporation
Rose is the BH Prevention Director and is Yup'ik Eskimo. She is originally from the village of St. Mary's, located on the lower Yukon River. Her organization’s focus on prevention is in large part due to Rose’s effort in the Y-K Delta region, where along with her other colleagues, has developed the Calricaraq traditional healing program utilizing the knowledge of Yup’ik elders to restore the strengths of Yup’ik culture in our people. Local elders and Tribal members now look at Calricaraq as a return to the teachings of elders in the past about how to live healthy lives.

Echo-Hawk, Abigail – MA
Associate Director, Partnerships for Native Health, University of Washington
Abigail Echo-Hawk, MA, is a member of the Pawnee Nation of Oklahoma and the Upper Ahtna Athabascan people of Mentasta Lake. She is the Associate Director for Partnerships for Native Health at the University of Washington. She works with American Indian and Alaska Native Tribes to engage them in health disparities research and with health researchers to ensure research is done in a manner that respects Tribal sovereignty. Specializing in facilitating cross cultural partnerships, Ms. Echo-Hawk has been an integral part of establishing health research projects and public health initiatives with rural and urban Tribal communities across the country.

Engebretson, Jacquelynn
Public Health Project Coordinator, National Indian Health Board
Jacquelynn Engebretson is Ahtna Athabascan - Gulkana Village from Alaska. She currently serves as a Public Health Program Coordinator for the National Indian Health Board. She graduated from the University of Alaska Anchorage with her BA in International Studies. She participated in American University's Washington Internship for Native Students (WINS) and has worked on federal contracts in the DC metropolitan area for her Alaska Native Corporation, Atlin, Inc. In 2012, Jackie joined NIH as the Executive Assistant/Office Manager. Jackie also serves as a crisis counselor at the DC Rape Crisis Center and volunteers at a program that provides a syringe exchange and safe sex supplies for drug users, sex workers, and their communities.

Foley, Robert – M.Ed.
Acting Director of Public Health Programs and Policy, National Indian Health Board
Robert Foley serves as the Acting Director of Public Health Programs and Policy where he is honored to work on HIV, methamphetamine, and suicide prevention projects. Prior to joining NIH, Mr. Foley served as the President/CEO of the National Native American AIDS Prevention Center (NNAAPC) where he managed programs delivering technical assistance and training to Native communities combating HIV. Mr. Foley has also worked as a training specialist with the National Network of Prevention Training Centers and as a research assistant with the Tri-ethnic Center for Prevention Research at Colorado State University. He earned his BA and M.Ed. from the Colorado State University.

Fowler, Kimberly - PhD
Technical Assistance and Research Coordinator, National Council of Urban Indian Health
Kimberly received her PhD from Yale University in 2005 and completed a postdoctoral fellowship in 2009 from the University of Colorado-Denver, where she also received a Certificate in Public Health. Since completing her training, Dr. Fowler has supported a number of initiatives through the coordination and delivery of technical assistance in health systems and clinical operations. Her projects have included supporting insurance applications for non-profits, improving clinical workflow, Electronic Health Records/Electronic Patient Management systems, billing and coding strategies to increase reimbursements and revenue, third party billing implementation, and supporting projects focused on reducing health disparities for communities of color.

Franklin, Constance – MPA
Public Health Analyst, Centers for Disease Control and Prevention / NIOSH
Constance Franklin is a Public Health Analyst with the National Institute for Occupational Safety and Health (NIOSH), Centers for Disease
Frey, Rick – PhD
Director of Preventive Medicine, Toiyabe Indian Health Project
Rick is Director of the Preventive Medicine Department at Toiyabe Indian Health Project in eastern central California where he directs Community-Directed Diabetes and Healthy Heart Project grants within the Indian Health Service’s Special Diabetes Program for Indians. He also directs the Toiyabe Community Wellness Program, which is funded by two Community Health grants from the Centers for Disease Control and Prevention. A former instructor, professor, and chairperson at San Diego State University and the University of Alaska Anchorage, Rick holds a PhD degree from the University of Alberta in Human Motor Learning & Control.

Gallegos, Joaquin
Advocate, Jicarilla Apache Nation/Pueblo of Santa Ana and Casey Family Programs
Joaquin R. Gallegos is a young American Indian leader who advocates for Tribally-driven health care solutions. He most recently served as a policy fellow at the Center for Native American Youth – The Aspen Institute in Washington, DC. He continues engagement with the Centers for American Indian and Alaska Native Health - University of Colorado Anschutz Medical Campus, Fourth World Center for the Study of Indigenous Law and Politics - University of Colorado Denver and the National Institutes of Health. Securing the well-being of Indigenous children is a key priority for Joaquin.

Gencarelle, Jacque
Prevention Program Manager, Northern Arizona Regional Behavioral Health Authority
Jacque Gencarelle is currently working with the Northern Arizona Regional Behavioral Health Authority (NARBHA) as the Prevention Program Manager. Her vision for the program is to provide a network of comprehensive substance abuse services and community-based efforts in northern Arizona to address the unique needs of the communities. By working with youth, adults and communities, NARBHA prevention programs can make environmental changes by using current data, proven strategies, and best practices that raise the awareness of the issues of substance abuse from a community level. Ms. Gencarelle is Navajo (Dine)/Chiricahua Apache, a Flagstaff native and mother of four.

Ghost Dog Jr., Thomas - BS
Project Red Talon Assistant, Northwest Portland Area Indian Health Board
Thomas is a Project Assistant for Project Red Talon at the NPAIHB, in Portland, Oregon. He assists with several adolescent health promotion projects, including: Native VOICES, Native It’s Your Game (NiYG), and We R Native. He is the male facilitator for Native VOICES, and manages We R Native’s monthly contests, community service mini-grants, and gear requests for the website: www.WeRNative.org. He is a recent graduate from Oregon State University with a Bachelor of Science in Public Health.

Gillette, Bruce – BA, LAC
Director, Circle of Life
Bruce Gillette is an enrolled member of the Mandan, Hidatsa and Arikara Nation. He obtained a BA in Addiction Studies and completed the Addiction Counseling Trainee program at the North Dakota State Hospital. Bruce became a North Dakota State Licensed Addiction Counselor and for the past 20 years has been providing day treatment, low intensity outpatient care, CD evaluations, individual sessions and family therapy. Most of his time has been spent working with Native Americans, in addition to five years working at the Badland Human Service Center. Bruce serves clients of all ages, gender and has worked with all drugs of choice.

Goldtooth, Renee – MPH
Associate Director of Native Strong: Healthy Kids, Healthy Futures, Notah Begay III Foundation
Renee Goldtooth is Diné (Navajo) and from Whippoorwill, AZ. She was formerly the Manager for the Leadership and Management Programs at the Native Nations Institute assisting Tribes in realizing their own political, economic, and community development objectives. While there, she was a part of a research team, Improving Health Care Access in Native American Communities: What Can Tribes Do? and Beyond “Health Care”: Community, Governance, and Culture in the Health and Wellness of Native Nations which examined the effects of selected community, governance, and cultural factors on the health of Native communities. She is also honored to serve as a health board member of the Canyon de Chelly Comprehensive Health Services, Inc. She has a Bachelor’s Degree in Biology and a Master’s of Public Health in Policy and Management from the University of Arizona.

Gracia, J. Nadine – MD, MS
Director, Office of Minority Health
J. Nadine Gracia, MD, MSCE is the Deputy Assistant Secretary for Minority Health and the Director of the Office of Minority Health at the U.S. Department of Health and Human Services (HHS). In 2008-2009, Dr. Gracia was one of fourteen White House Fellows and was assigned to HHS, where she worked in Office of the Assistant Secretary for Health and the Office of the Secretary. She received a Master of Science in Clinical Epidemiology from the University of Pennsylvania and a medical degree from the University of Pittsburgh School of Medicine. A first-generation Haitian-American, Dr. Gracia earned a Bachelor of Arts with Honors in French at Stanford University.

Guerin, Rebecca – MA
Health Communication Specialist, Centers for Disease Control and Prevention / NIOSH
Ms. Guerin is a health communication specialist with the National Institute for Occupational Safety and Health (NIOSH), part of the U.S. Centers for Disease Control and Prevention (CDC). Ms. Guerin serves as the coordinator for the NIOSH Safe-Skilled-Ready Workforce Initiative (SSRWI). In this capacity, she is responsible for implementing and evaluating a program of research to integrate foundational workplace safety and health skills into curricula, training, and other work readiness programs for young workers and new hires. She has conducted young worker outreach/research efforts at NIOSH for the past seven years.

Hale, April
Tribal Health Care Reform Outreach and Education Communications Coordinator, National Indian Health Board
April Hale, Navajo, is the Tribal Health Care Reform Outreach and Education Communications Coordinator at the National Indian Health Board, where she works on the National Indian Health Outreach and Education initiative. Before joining the NIHB team, Ms. Hale did communications and legislative work for the National American Indian Housing Council and the National Congress of American Indians. Ms. Hale is a 2006 graduate from the University of New Mexico with a degree in Communications.
BIOGRAPHIES

SUMMIT PRESENTERS AND SPEAKERS, CONTINUED

and Journalism, and a 2002 graduate of the Freedom Forum Diversity Institute's American Indian Journalism Institute at the University of South Dakota. Ms. Hale is a citizen of the Navajo Nation from Yarnellio, New Mexico.

Hall-Thompson, Deborah - RN, BS, BSN, MBA
Health Director, MHA Nation Tribal Health
Deborah is an enrolled member of the Mandan, Hidatsa and Arikara Nation. She was raised near the West Segment of the Fort Berthold Indian Reservation - the heart of the Bakken Oilfields. Deborah received a BS in Secondary Education and Nursing from Dickinson State University and obtained her MBA from the University in Bismarck, ND. She has worked for 20 years as a clinical nurse in various departments and for the past 10 years as a healthcare administrator for her Tribe. Deborah also completed a one year internship with the National Library of Medicine on the National Institutes of Health campus.

Harris, Naomi
Chronic Disease Navigator, Eastern Shoshone
Naomi has been instrumental in the role as a community navigator providing motivational support for community members who enroll in our programs. She is certified as a nursing assistant and as a fitness specialist. Her work in diabetes and other chronic diseases have been instrumental in the outcome success in changing behavior patterns for many patients at Eastern Shoshone.

Heany, Julia - PhD
Director, Michigan Public Health Institute Center for Healthy Communities
Dr. Heany has served as principal investigator of many projects involving collaboration among diverse partners. Notably, she directed a project that involved community health assessment and evaluation in six Tribal communities. Her expertise lies in participatory evaluation and systems building initiatives. Dr. Heany is PI of a RWJF Public Health Services and Systems Research study of a Tribal public health system. She is co-author of Embracing Quality in Public Health: A Practitioner's Quality Improvement Guidebook, and a nationally recognized speaker/trainer in QI and performance management in public health. She received a Ph.D. in Community Psychology from University of Missouri-Kansas City.

Heuer, Loretta - PhD, RN, FAAN
Professor, North Dakota State University
Loretta Heuer is a professor at North Dakota State University Department of Nursing. Her doctoral degree is in Research Methodology from the University of North Dakota College of Teaching and Learning. As part of Heuer's program of research, she developed and implemented a Chronic Disease Program that focused on the health care needs of the Latino migrant and seasonal population with chronic disease. Currently, her research focuses on the development and implementation of specific strategies that will lead to the successful recruitment, education and employment of the American Indian nursing students in North Dakota.

Hovell, Christine - BSN
Public Health Manager, Jackson County Public Health
Christine Hovell is the Director, Public Health Manager and Health Officer for the Jackson County Health Department in rural Black River Falls, Wisconsin. Ms. Hovell graduated from Winona State University with a Bachelor of Science in Nursing. She has been in her current role for the past 8 years and was previously the Public Health Manager for the Trempealeau County Health Department for 7 years. She has worked in the arena of public health for a total of 25 years in nearly every facet. She finds that not a day goes by when there isn’t an opportunity for learning.

Hulbutta, Marikate
Legislative Fellow, National Congress of American Indians
Marikate Hulbutta (Chickasaw/Seminole/Muscogee Creek) is currently a Wilma Mankiller legislative fellow with the National Congress of American Indians. She is a recent graduate of Columbia University in New York, NY where she earned her bachelor’s degree in psychology with a concentration in political science. She plans to explore her interests and gain professional experience for a few years before applying to law school. She hopes to advocate for better quality and access to healthcare, education, and opportunities for economic development for all Native Americans in order to alleviate disparities in both urban and rural communities.

Inciarte, Jennifer
White Eagle Health Center
Jennifer Inciarte has been a counselor with the Behavioral Health Department of the White Eagle Health Center in Ponca City, Oklahoma, since 2013. She received her Master’s degree in counseling from Capella University and is currently pursuing LMFT licensing. Jennifer is an OEF Veteran, is married, and has two daughters.

Jim, Rex Lee
Vice President, Navajo Nation
A member of the Bread Loaf School of English (BLSE), Mr. Rex Lee is the Director of the REACH - Navajo Community Health Outreach (NCHO) youth initiative and provides mentorship to Navajo high school students. He was raised in Rock Point, Arizona and is a graduate of Princeton University. He is an educator, teaching Navajo students K-12 in his career. He is a published author, playwright, and medicine man. He was the Vice President of the Navajo Nation and lead tribal initiatives in health and education. He is the National Indian Health Board Vice Chair and Navajo Area Representative.

Jim-Martin, Sonlatsa
Navajo COPE Project - REACH Program Manager, Navajo Nation
Sonlatsa Jim-Martin (Navajo-Medoc) is a member of the Navajo Nation. She holds a bachelor's degree from the Colorado College, and is working on a masters of public administration or global health. She coordinated food and nutrition initiatives with the Navajo Nation and now serves as the REACH Program Manager with COPE - Partners in Health, Navajo Nation. Past experience includes: Indian Education, Social Services, Native American Youth Leadership, Navajo Nation Headstart and Dine' Education, and Department of Health Senior Management.

Johnson, Bonnie
Dental Health Aide Therapist, Yukon-Kuskokwim Health Corporation
Ms. Johnson is a dental health aide therapist with the Yukon-Kuskokwim Health Corporation in Bethel, Alaska. She attended the DENTEX project which is an Alaska-based program that educates dental health aide therapists to provide dental care to Alaska Native communities. She completed her didactic training in 2009 in Anchorage, and her clinical training in 2010 in Bethel.

Jones, Melanie
MSPI Project Manager, Choctaw Nation of Oklahoma
Melanie Jones provides suicide and drug prevention education throughout the Choctaw Nation of Oklahoma. She also oversees the budgeting and reporting for the Domestic Violence Prevention Initiatives. Previously, Melanie
work for the Oklahoma Department of Human services in child welfare, family support services, nursing home, and advantage programs. Melanie received her BA degree in Psychology in 1994 from Oklahoma State University and is currently pursuing her Master's degree in Prevention Science from the University of Oklahoma.

Joseph, Yvette – MSW
Project Manager, Kauffman & Associates, Inc.
Ms. Joseph, a Colville Confederated Tribes Member, has 35 years of Tribal and health care policy experience lending to her position as Project Manager for Kauffman & Associates, Inc. (KAI). At KAI, Ms. Joseph directs the W.K. Kellogg Foundation's Dental Therapist Project. Recognized for her extensive knowledge of Indian Country, Yvette provides strategic counsel and policy guidance on several other health and human services projects. Ms. Joseph received her Master of Social Work degree from the University of Denver and Bachelor of Science Degree in Psychology from Washington State University.

Keene, Catherine
Executive Director, Eastern Shoshone Tribe
Catherine has served in the administration of healthcare programs for American Indians for over twenty years. She is a member of the Eastern Shoshone Tribe and has many years of leadership experience with the Indian Health Service, operating a FQHC, providing services to Wyoming's Medicaid population, and overseeing the health programs for the Eastern Shoshone Tribe's long-term care nursing and dialysis facilities. She has been innovative in system redesign that benefit the healthcare challenges facing American Indians. She has been successful in collaborating with other organizations that bring in extra resources to improve healthcare services to many in need.

Kemble, Candice
Counselor, White Eagle Health Center
Candice Kemble has been a counselor with the Behavioral Health Department of the White Eagle Health Center in Ponca City, Oklahoma, since July 2013. She received her Master's degree in Counseling from Northwestern State University and is currently pursuing her LPC license under the supervision of Dr. Lahoma Schultz. Candice is affiliated with Otoe-Missouria Tribe, is married, and has five sons.

Laing, Shannon – MSW
Program Coordinator, Michigan Public Health Institute
As program coordinator at Michigan Public Health Institute, Ms. Laing has managed over 30 projects with Tribal communities in the past 10 years including community health assessment and improvement planning, strategic planning, and evaluation of culturally-tailored evidence-based interventions. She leads evaluation teams for Tribal agencies working on health and mental health grants. She coordinates a RWJF Public Health Services and Systems Research study exploring a Tribal public health system. Ms. Laing has a Master of Social Work in Organizational and Community Practice from Michigan State University, and training in Technology of Participation (ToP) facilitation Methods through Institute of Cultural Affairs.

Lebeau, Mark – PhD, MS
Executive Director, California Rural Indian Health Board
Dr. LeBeau is currently the Executive Director of the California Rural Indian Health Board. Dr. LeBeau is an enrolled member of the Pit River Nation and has worked at CRISHB since 1999. He has earned a Master of Science Degree in Community Development from UC Davis (UCD) and a Bachelor of Arts in Native Studies from Humboldt State University (HSU). Dr. LeBeau is also a graduate of the Indian Teacher and Educational Personnel Program at HSU and has earned a PhD in Native Studies at UCD. Dr. LeBeau has served on the Pit River Tribal Election Committee and currently serves on the Pit River Health Services Board of Directors.

Lenaker, Dane – DDS
Chair, Yukon-Kuskokwim Health Corporation
Dr. Lenaker currently serves as the Dental Director for the Yukon-Kuskokwim Health Corporation in Bethel, Alaska, where he is a licensed practicing dentist.

Leston, Jessica – MPH
Clinical Programs Manager, Northwest Portland Area Indian Health Board
Jessica Leston, MPH, (Tsimshian) has worked for Tribal health services for 10 years. Currently, she is employed by the Northwest Portland Area Indian Health Board as the HIV/STI/Hepatitis Clinical Programs Manager. Jessica contributes to mixed methods community-based participatory research activities at the regional and national level, and works on various projects around quality improvement and best practices on key HIV/STI/Hepatitis indicators as well as electronic health record deployment, data gamification and patient and provider engagement. She graduated from the University of Alaska with an MPH in Community Health Epidemiology.

Levi, Heather
Diabetes Program Director, Association of American Indian Physicians
For the past 13 years Heather Levi has served as a project director for the Association of American Indian Physicians (AAPI) on a variety of American Indian/Alaska Native Health Disparity Initiatives. She currently serves as the director of the AAPI Program to Eliminate Diabetes-Related Health Disparities in American Indian Communities. Her professional experience in partnership building with Tribes, Tribal governments and Native communities began in 2000 when she worked for the State of Oklahoma Indian Affairs Commission. Heather is an enrolled member of the Kiowa Tribe of Oklahoma and is also Southern Cheyenne.

Massey, Kirk
Life Coach, Helping Every Day Youth
Kirk Massey, enrolled member of the White Mountain Apache Tribe, is a Life Coach with Helping Every Day Youth’s School Based Life Skills program. Kirk has been married 20 years and is the father of four amazing children. Before joining the team at HE DY in 2013, he spent 3 years developing a local Fatherhood Program through John’s Hopkins University and has 15 years’ experience as a youth counselor through his ministry.

Mayer, Monica – MD
Acting Chief Medical Officer, Elbowoods Memorial Health Center
Dr. Mayer is the Chief Medical Officer for the Elbowoods Memorial Health Center and is an enrolled member of the Mandan, Hidatsa and Arikara Nation and was raised on the Fort Berthold reservation. She received a bachelor's in education from Northern Arizona University. She completed medical school at the University of North Dakota School of Medicine. She practiced medicine on the Fort Berthold reservation for 12 years, and served as the Chief Medical Officer for Belcourt Hospital for 3 years and the Acting Chief Medical Officer for the Great Plains Area.

Mayo, Kathy – RN
Assistant Health Administrator, Keweenaw Bay Indian Community
Ms. Mayo has been employed with the Keweenaw Bay Indian Community Department
SUMMIT PRESENTERS AND SPEAKERS, CONTINUED

Walsh Center for Rural Health Analysis, where he previously served as the founding director of the University of Pittsburgh Center for Rural Health Practice and as Deputy Executive Director of the National Association of County and City Health Officials.

Mihollin, Elliott – JD
Hobbs, Straus, Dean & Walker, LLP
Elliott Mihollin is Partner at Hobbs, Straus, Dean & Walker, LLP and a member of the firm’s health care and litigation practice groups. He represents and advises the firm’s Tribal clients on a variety of Indian health care issues, including Medicare, Medicaid, and Indian Self-Determination and Education Assistance Act. He is a technical advisor to the CMS’ Tribal Technical Advisory Group, which advises CMS on issues involving the implementation of the Affordable Care Act and the Indian Health Care Improvement Act.

Miller, Irene – APRN
Director of Family Services, Mohegan Tribe
Ms. Miller currently serves as the Director of Family Services for the Mohegan Tribe of Indians of Connecticut. She has previously served the Tribes as the Director of Behavioral Health Services.

Monroe, Judith – MD
Director, Office of State, Tribal, Local and Territorial Support, Centers for Disease Control and Prevention
Judith A. Monroe, MD, is a deputy director of the Centers for Disease Control and Prevention (CDC) and director of CDC’s Office for State, Tribal, Local and Territorial Support. Dr. Monroe oversees workforce development, performance management and quality improvement, and technical assistance. She also works closely with federally recognized tribal governments and Native-serving organizations. Before joining CDC, Dr. Monroe served as Indiana state health commissioner from 2005 to 2010 and served as president of the Association of State and Territorial Health Officials from 2008 to 2009. Dr. Monroe received her undergraduate degree from Eastern Kentucky University and her medical degree from the University of Maryland.

Moran, John – PhD
Senior Quality Advisor, Public Health Foundation
John W. Moran, Ph.D. is the Senior Quality Advisor to the Public Health Foundation and a Senior Fellow at the University of Minnesota, School of Public Health. He is President of the Advisory Board of Choose to Be Healthy Coalition of the Healthy Maine Partnership for York County, Maine; a member of the Public Health Accreditation Board’s Evaluation and Quality Improvement Committee; and is an Adjunct Professor at the Arizona State University College of Health Solutions’ School for the Science of Health. Dr. Moran is a retired Senior Vice President of Information Systems, Administrative and Diagnostic Services at New England Baptist Hospital.

Mousseau, Richard – MS
Program Manager, Great Plains Tribal Chairman’s Health Board
Richard Mousseau, MS, is an enrolled member of the Oglala Sioux Tribe. Richard currently is the Program Manager for the Northern Plains Comprehensive Cancer Control Program (NPCCCP) at the Great Plains Tribal Chairman’s Health Board. NPCCCP provides cancer education in treatment, palliative and end-of-life care, and survivorship, advocates for and promotes screening and prevention initiatives, and collaborates with Tribal, state, and national initiatives. Richard has been committed to promoting healthy behaviors and policy with American Indians for 10 years.

Muneta, Anita – MPH
Performance Improvement Manager, Navajo Nation
Anita is the Performance Improvement Manager for the Navajo Nation Department of Health CDC Public Health Infrastructure Initiative grant, Window Rock, AZ. Prior to this, she retired from federal service in 2009 after 20 plus years of service as the Chief Executive Officer for the Navajo Area Community Health Service Unit, Crownpoint, NM. Anita holds a Bachelor of Science degree from BYU and a Master of Public Health (M.P.H.) from the University of California. Prior to her federal service she worked as the Director for various Tribal and urban Indian health and social services organizations.

Myers, Lisa
Health and Wellness Manager, Sault Ste. Marie Tribe of Chippewa Indians
Lisa Myers is the Health and Wellness Manager for Sault Ste. Marie Tribe of Chippewa Indians Community Health. In this role she oversees multiple community health prevention and health promotion programs focused mostly on diabetes, nutrition, obesity, and tobacco. She served as project coordinator for the Tribe’s Strategic Alliance for Health project funded by CDC and now manages the UP-HEALTH initiative funded by CDC Community Transformation Grant and Partnerships for Improving Community Health grants, in addition to other programs.
Parker, Ken
Project Manager, United South & Eastern Tribes
Ken Parker is the Native Plant Consultant/Project Director of the Haudenosaunee Community Food Is Our Medicine Project. As a Seneca native, he is committed to preserving Native North American culture by promoting the use of Native plants from a pure perspective. Ken has proactively participated in various environmental projects, including conservation, restoration, corporate landscaping, education, marketing and consulting throughout the United States and Canada over the past twenty plus years, and has presented for Tribal organizations nationwide. His vision is to have all Native communities experience the gift of health through cultivating plants.

Perez, Jon – PhD
Region IX Administrator, Substance Abuse and Mental Health Services Administration
Captain Jon T. Perez, Ph.D. is a clinical psychologist with over 20 years of federal service ranging from direct care to policy and program management in the United States and abroad. His previous federal positions include directing small to large direct service programs, as well as providing national program and policy leadership as the Director of Behavioral Health for the Indian Health Service. He now serves as the Region IX Administrator for the Substance Abuse and Mental Health Services Administration.

Pezzino, Gianfranco – MD, MPH
Co-Director, Center for Sharing Public Health Services
Gianfranco Pezzino, MD, MPH, is a Co-director of the Center for Sharing Public Health Services at the Kansas Health Institute (KHI). The Center, which is funded by the Robert Wood Johnson Foundation, focuses on cross-jurisdictional sharing as a strategy to create efficiencies in public health. Dr. Pezzino is Senior Fellow and Strategy Team Leader at KHI, where he oversees the institute’s work on public health services and systems. Dr. Pezzino works to develop and disseminate best practices for public health service organizations, financing and delivery, including support for local public health departments as they prepare for national accreditation.

Plucinski, Melanie – MPH
American Indian Cancer Foundation
Melanie Plucinski, MPH, is a member of the Bad River Band of Wisconsin and is currently the Policy Projects Coordinator at American Indian Cancer Foundation in Minneapolis, Minnesota. She previously served as the Legislative and Grants Director for the Indian Affairs Council with the State of Minnesota. She has also worked at the Minnesota Department of Human Services and at the University of Minnesota. She graduated with her MPH degree from the University of Minnesota School of Public Health, Public Health Administration and Policy Program.

Ralston-Aoki, Julie – JD
Staff Attorney, Public Health Law Center
Julie Ralston Aoki, JD, is a Staff Attorney at the Public Health Law Center in St. Paul, Minnesota. She has worked with researchers, advocates, and communities in the Midwest and around the country on legal strategies and policies to reduce health disparities and promote healthy eating and commercial tobacco control. Currently, much of her work focuses on strategies for reducing sugary drink consumption and improving the nutritional quality of foods available in public places. She is the past president and current member of the Minnesota Community Health Worker Alliance Board.

Retzer, Kyla – MPH
National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention
Mrs. Kyla Retzer has been working as an epidemiologist at the National Institute for Occupational Safety and Health (NIOSH) for the past 5 years. She coordinates an industry/government workgroup that develops products about motor vehicle safety for the oil and gas industry. She has a Master’s in Public Health from the University of North Texas. Prior to NIOSH, Mrs. Retzer worked in injury prevention within the Alaska Tribal Health System for six years. She has two young daughters. She is a native Texan but is currently based in Denver, Colorado.

Rhodes, Kristine – MPH
Executive Director, American Indian Cancer Foundation
Kris Rhodes is an enrolled member Bad River Band of Lake Superior Chippewa. She earned her MPH in Public Health Administration & Policy at the University of Minnesota. She has focused on the health of American Indian communities in the development of community-based programs, resources, evaluation and research. Her work has spanned public health issues such as breastfeeding, teen pregnancy, obesity, media, and most notably, tobacco and tobacco-related chronic disease. She is the Executive Director of the American Indian Cancer Foundation, a national Native organization dedicated to eliminating cancer burdens for American Indians.

Roanhorse, Olivia – MPH
Director, Native Strong: Healthy Kids, Healthy Futures, Notah Begay III Foundation
Olivia Roanhorse is Dine (Navajo) and from Window Rock, AZ. Before returning to the southwest in summer 2012, Olivia held several health program and policy positions in Chicago, IL. She was a Policy Associate for at the Ounce of Prevention Fund, a Project Coordinator for RWJF National Project: Finding Answers Program: Disparities Research for Change and a Clinic Manager for Community Health. As a public health student, Olivia received the competitive Chicago-based Albert Schweitzer Fellowship and the Morris K Udall Congressional Internship in Washington, DC. Olivia received her MPH in Health Policy and Administration from the University of Illinois in Chicago and her undergraduate degree in Environmental Science from Colorado College.

Rollins, Carol - RS
Environmental Health Director, Ho-Chunk Nation
Carol Rollins, RS, is Environmental Health Director at the Ho-Chunk Nation Health Department. Mrs. Rollins graduated from the University of Eau Claire in 1986 with a Bachelor of Science Degree in Environmental and Public Health. She has been employed by the Ho-Chunk Nation since 1987 where she directs the Environmental Health Program, which addresses both public health and environmental issues. She also oversees the Public Health Accreditation Program. Mrs. Rollins was selected as Sanitarian of the Year by Indian Health Service in 1994 and recently received a Distinguished Service Award from the Wisconsin Public Health Association.

Roth, Geoffrey
Senior Advisory to the Director, Indian Health Service
Mr. Roth is the Senior Advisor to the Director of the Indian Health Service (IHS). Mr. Roth’s responsibilities include providing counsel to the Director on complex issues and administering special assignments that reflect the priorities, policies, interests, and initiatives of the Agency. From 2006 to 2010, Mr. Roth served as Executive Director of the National Council of Urban Indian Health (NCUIH). Mr. Roth served as the urban Indian health representative on the national steering committee for the reauthorization of the HCIA. He also represented urban Indians on the IHS Tribal Leaders Diabetes Committee. Prior to his work at NCUIH, Mr. Roth was a team leader in the Office of Indian Education at the U.S. Department of Education.
SUMMIT PRESENTERS AND SPEAKERS, CONTINUED

**Roubideaux, Yvette – MD, MPH**

Special Advisor, Department of Health and Human Services

Yvette Roubideaux, MD, MPH (Rosebud Sioux Tribe) is the Senior Advisor to the Secretary for American Indians and Alaska Natives. Dr. Roubideaux was confirmed by the U.S. Senate as IHS Director on May 6, 2009. On April 23, 2013, President Obama re-nominated Dr. Roubideaux to serve a second four-year term. Dr. Roubideaux previously worked for IHS for three years as a medical officer and clinical director on the San Carlos Apache Indian reservation in Arizona. Dr. Roubideaux received her medical degree from Harvard Medical School in 1989 and her Master of Public Health degree at the Harvard School of Public Health in 1997.

**Scott, Deborah – MPH**

Principal, Sage Associates, Inc.

Ms. Scott is the principal of Sage Associates, Inc., founded in 1992 and incorporated in 2000. Sage was founded on a premise of community engagement for community betterment. In 2000, Ms. Scott worked with other community members to found the Native American Health Coalition of Southeast Texas, an information and resource inventory for health services for American Indians. In 2011, Ms. Scott organized Believing in Native Generations, a non-profit focusing on services for American Indian communities. She has worked extensively in the residential boarding school setting in the delivery of an HIV-prevention program targeting adolescent American Indian girls.

**Sergei, Susan – DDS**

Dentist, Yukon Kuskokwim Health Corporation

Ms. Sergei is a dentist with the Yukon Kuskokwim Health Corporation in Bethel, Alaska. She is full Yup'ik, originally from Alakanuk, Alaska. Ms. Sergei received her training as a dental assistant at Salish Kootenai College in Pablo, Montana. After spending years working in the villages of Alaska, she decided to become a dentist, and moved to Anchorage in 2003 to pursue her studies. During school, she worked with Southcentral Foundation as a dental assistant/oral surgery assistant, then attended Midwestern University College of Dental Medicine, graduating in 2013.

**Sheche, Judith – MS**

Site Coordinator, First Nations Community Healthsource

Judith Sheche, MS, is Zuni Pueblo and is currently the coordinator for the Healthy Children Strong Families study in Albuquerque, NM. Her research interests include health promotion, health behaviors, and social determinants of health. Ms. Sheche's focus is on reducing health disparities in American Indian families and communities.

**Shield, Elizabeth – RN**

Supervisory RN/Care Manager, Eastern Shoshone Tribal Health

Liz has been an RN for over 30 years and is currently working on her master's degree in population health. She has many years of experience providing nursing services to the Wind River Indian Reservation population and provides nursing leadership to the Tribal health programs which support case and disease management. As the RN, she oversees the clinical supervision of the CHR/certified nursing assistants and other program staff in the coordination of services to community members.

**Shuy, Caitrin – MSc**

Director of Congressional Relations, National Indian Health Board

Caitrin Shuy is the Director of Congressional Relations at the National Indian Health Board. Caitrin spent three years as a Legislative Assistant to Congressman Tom Cole (R-OK) where she served as a political advisor and his lead staffer for Native American issues for the Congressman’s work on the House Appropriations Subcommittee on Interior, Environment and Related Agencies – the sub-committee through which Indian Health Service Funding originates. After earning her Masters in Comparative Politics from the London School of Economics, Caitrin worked for the National Community Action Foundation, as a Legislative Assistant. At NCAF Caitrin monitored and provided advice on legislative issues, spearheaded stakeholder outreach and participated in the planning and coordination of national conferences and congressional special events designed to showcase and elevate the organization’s legislative priorities.

**Soto, Rudy**

Policy Analyst, National Council of Urban Indian Health

Rudy Soto (Shoshone-Bannock) is a Policy Analyst for the National Council of Urban Indian Health. Previously, Mr. Soto served as a Hatfield Fellow with the Office of Congressman Schrader. As a youth engagement specialist with the National Indian Child Welfare Association, he worked with urban Indian and reservation-based communities. As a project assistant for a suicide prevention grant at the Native American Rehabilitation Association in Portland, he helped facilitate community meetings and engaged in dialogue and leadership development with community youth. In Washington DC, as part of the Native American Political Leadership Program, Rudy received training in community organizing and technology.

**Spotted Bear, Melissa – MSW**

Managed Care Director, Elbowoods Memorial Health Center

Melissa is an enrolled member (Hidatsa) of the Mandan, Hidatsa and Arikara Nation and is currently the Managed Care Director at the Elbowoods Memorial Health Center. She received her BSW from the University of Mary and MSW from Walla Walla College. Melissa’s diverse career in Social Work includes years of experience in working for a nonprofit health-care organization with direct coverage in the Emergency Department, ICU, NICU, Telemetry and the Palliative Care Team. She and her husband are the proud parents of two daughters, age 7 and 10 years.

**Strickland, Charlie “Two Bears”**

Council of Elders, Mohegan Tribe

Charlie Strickland began his service on the Council of Elders in 2012, and was appointed as Vice Chairman in 2014. Prior to serving on the Council of Elders, he worked in the Behavioral Health Department as the Sober House Coordinator. He also started the Work Supported Program, helping those tribal members who are in recovery. He also has served as a mediator in area court systems, and holds Tribal sweats and healing circles, Outside of the Tribe, he has been a part of many outreaches on the topic of Mohegan history and culture to community schools and scouts, and he has helped Boy Scouts to achieve their Indian Lore badges.

**Tomayko, Emily – PhD, RD**

Researcher, University of Wisconsin

Emily Tomayko, PhD, RD is a postdoctoral fellow in the Molecular and Applied Nutrition Training Program at the University of Wisconsin. Her primary areas of research include the prevention of childhood obesity and understanding the factors contributing to obesity risk, particularly in American Indian communities. The goal of Dr. Tomayko’s work is to promote a focus on disease prevention through lifestyle approaches supported by changes in families, neighborhoods, schools, communities, states, and beyond.
Walaszek, Anne – MPH
Data Manager, American Indian Cancer Foundation
Anne Walaszek, M.P.H. (Anishinabek) is a data manager at the American Indian Cancer Foundation. She coordinates an initiative addressing clinical systems improvement by partnering with Indian Health Service, Tribal and Urban clinics across the Northern Plains to improve cancer screening. She also supports Healthy Native Foods efforts promoting cancer prevention within Minnesota American Indian communities. Her research experiences are primarily in research development, coordination and data analyses in areas of child development, diabetes and cancer prevention. Walaszek earned a Master of Public Health in Maternal and Child Health and a Bachelor of Science in Child Psychology from the University of Minnesota.

Warne, Donald – MD, MPH
Director, Master of Public Health Program, North Dakota State University
Donald Warne, MD, MPH is the Director of the Master of Public Health Program at North Dakota State University, and he serves as the Senior Policy Advisor to the Great Plains Tribal Chairmen's Health Board. Dr. Warne is a member of the Oglala Lakota tribe from Pine Ridge, SD and comes from a long line of medicine men. His professional activities have included serving on the American Cancer Society's National Board of Directors, and as a Senior Fellow for American Indian Health Policy at the Center for Health Policy at the University of New Mexico. He received his MD from Stanford University and his MPH from Harvard School of Public Health.

Webb, Kellie
Clinical Director, Eastern Shoshone Recovery Program
Kellie Webb is the Clinical Director for the Eastern Shoshone Recovery Program providing outpatient substance and alcohol abuse recovery services. She uses innovative cultural approaches developed by her team to provide a unique service to their clients. Kellie currently works with the Rocky Mountain Epidemiology Center and the University of Washington exploring research-based programming to improve outcomes for the Wind River population who struggle with substance issues.

Welcher-Duke, Summer – LCSW
Director of Behavioral Health, Oklahoma City Indian Clinic
Summer Welcher-Duke, LCSW is a therapist and the Director of Behavioral Health at the Oklahoma City Indian Clinic. She has been trained in EMDR on both the basic and advanced levels. She has worked in the area of Behavioral Health for 9 years, having served the homeless population, persons with severe mental illnesses, veterans and currently Indian people. She graduated from the University of Oklahoma with a Bachelor of Arts in Psychology and a Master of Social Work. Summer has been with the Oklahoma City Indian Clinic for 5 years. She is a member of the Muscogee (Creek) Nation.

Whitehorn, Steven – MSW, LCSW, LCASA
Public Health Advisor, Indian Health Service
Steven Whitehorn currently works within the Division of Behavioral Health at Indian Health Service headquarters as a Public Health Advisor working on the Methamphetamine and Suicide Prevention Initiative. Mr. Whitehorn is Ponca, Otoe Missouri, and an enrolled member of the Muscogee Creek Nation. He earned a Masters of Social Work from Western Carolina University and is a board certified Licensed Clinical Social Worker and Licensed Clinical Addiction Associate (LCASA). In addition to his licensures, he holds certifications in Trauma Focused Cognitive Behavioral Therapy (TF-CBT) and Parent Child Interaction Therapy (PCIT). Mr. Whitehorn has worked in American Indian and Alaskan Native (AI/AN) communities with a primary focus on substance abuse, suicide, and children's trauma.

Winder, Tanaya – MFA
Adjunct Professor, University of New Mexico
Tanaya Winder, MFA, is a writer and educator from the Southern Ute, Duckwater Shoshone, and Pyramid Lake Paiute Nations. She earned a BA in English from Stanford University and an MFA in creative writing from the University of New Mexico. She is the editor-in-chief of, As/Us: A Space for Women of the World. A winner of the 2010 A Room Of Her Own Foundation's Orlando prize in poetry, her poems from her manuscript "Love in a Time of Blood Quantum" were produced by the Poetic Theater Productions Presents. She is an adjunct professor at the University of New Mexico and serves as the Director of the University of Colorado at Boulder Upward Bound Program.

Winkelman, Dan
CEO/President, Yukon-Kuskokwim Health Corporation
Mr. Winkelman is currently the Chief Executive Officer and President of the Yukon-Kuskokwim Health Corporation in Bethel, Alaska.
REGISTRATION DESK
The registration desk is located in the Grand Foyer of the Agua Caliente Casino, Resort and Spa, and will be continuously staffed by NIHB staff. The registration desk hours are:

- Tuesday, April 7, 2015 7:00 am to 5:00 pm
- Wednesday, April 8, 2015 7:00 am to 5:00 pm
- Thursday, April 9, 2015 7:00 am to 12:30 pm

EXHIBIT HALL & MARKETPLACE
The exhibit hall is placed throughout the main conference area to allow for increased visibility and convenient and easy access for our Summit attendees. There is a mix of exhibitors and vendors that will be displaying. The hours for the exhibit hall and marketplace are:

- Exhibitor and Vendor Set-up
  - Tuesday, April 7, 2015 7:00 am to 10:30 am
- Exhibitors and Vendors Open
  - Tuesday, April 7, 2015 10:30 am to 5:00 pm
  - Wednesday, April 8, 2015 7:30 am to 6:00 pm
  - Thursday, April 9, 2015 7:30 am to 5:00 pm
- Exhibitor and Vendor Breakdown
  - Thursday, April 9, 2015 5:00 pm to 7:00 pm

LOST AND FOUND
The Lost and Found for the Summit will be housed at the Registration Desk in the Grand Foyer. All unclaimed items in the Lost and Found still remaining at the end of the Summit will be donated.

AGENDA CHANGES
Should any last minute changes occur in the agenda, NIHB will do our best to notify participants as soon as possible. Changes to the Summit agenda will be posted daily by the registration desk located in the Grand Foyer of the hotel. Announcements regarding changes in the agenda may be made during the plenary sessions, when possible.

SUMMIT BADGES
Official National Indian Health Board 6th Annual Tribal Public Health Summit name badges will be issued to each participant upon registration. Please be sure to wear your conference name badge at all times as it is your passport to enter all conference activities, plenary sessions, workshops and scheduled events. NIHB staff will be spot-checking for badges throughout the Summit and may ask to view your name badge if it is not readily visible. Replacement badges can be requested at the Registration Desk located in the Grand Foyer.

CODE OF CONDUCT
The National Indian Health Board is dedicated to providing a positive and healthy environment for our conference attendees. The National Indian Health Board Tribal Public Health Summit maintains a policy of being drug and alcohol free during all Summit related events, meetings, plenary sessions and breakout sessions. The Board of Directors of the National Indian Health Board and staff respectfully request that all participants, exhibitors, vendors, guests, friends and family members please conduct themselves in a respectful, courteous and appropriate manner at all times to make the Summit experience enjoyable for everyone.
ARTS AND CRAFTS

Elsie Yazzie, Flagstaff, AZ
Native Built, Missoula, MT
Martinez Indian Arts, Kayenta, AZ
Native Dream Lodge, Desert Hot Springs, CA
Native Hands, Tempe, AZ
Shortman Native Arts, Tuba City, AZ

GENERAL EXHIBITORS

Albuquerque Area Southwest Tribal Epidemiology Center, Albuquerque, NM
California Rural Indian Health Board, Sacramento, CA
Centers for Medicare & Medicaid Services, Baltimore, MD
DataRay Inc., Oklahoma City, OK
Fresh Baby, Petoskey, MI
Grand Canyon University, Phoenix, AZ
Indian Health Service Methamphetamine and Suicide Prevention Initiative, Rockville, MD
National Indian Health Board - Dental Health Aide Therapist Program, Washington, DC
National Indian Health Board - Health Care Reform, Washington, DC
North Dakota State University American Indian Public Health Resource Center, Fargo, ND
Office of Justice Programs, Washington, DC
Public Health Accreditation Board, Alexandria, VA
University of North Dakota, Grand Forks, ND

The California Rural Indian Health Board

The Centene Corporation
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