What is the Tribal Consultation Policy?

The Tribal Consultation Policy is a document that provides guidance for working effectively with American Indian and Alaska Native (AI/AN) communities and organizations, as well as enhancing AI/AN access to CDC and ATSDR programs. The policy identifies when CDC programs should involve Tribal leaders and outlines specific responsibilities regarding program activities, including mutual participation in setting program and budget priorities.

Why did CDC/ATSDR* establish a Tribal Consultation Policy?

Several factors influenced the decision to establish this policy:

1. CDC is committed to achieving health equity for all Americans. AI/AN people face ongoing and significant health disparities that CDC can help to eliminate. CDC leadership also recognizes the agency’s special relationship with, and obligation to, AI/AN people and governments.

2. CDC strongly supports Department of Health and Human Services (HHS) initiatives to strengthen federal/tribal government-to-government relationships and to expand tribal access to HHS programs.

3. This policy was written in direct response to tribal leaders’ requests to have ongoing and meaningful input into CDC programs and policies that affect AI/AN communities. Through a series of meetings hosted by regional and national tribal health organizations, CDC went directly to tribal leaders and asked them how they would like to see CDC conduct consultation. This new policy derives from that input.

What is the significance of CDC and ATSDR issuing a combined policy?

The Agency for Toxic Substances and Disease Registry (ATSDR) is an operating division of HHS, and the CDC Director is also the ATSDR Administrator. By having a combined policy, CDC and ATSDR are better able to strengthen public health science, practice and managerial functions to address the on-going needs of tribal communities.
How will tribal partnerships be strengthened through this policy?

Tribal partnerships will be strengthened through increased opportunities for tribal input into CDC decision-making processes. The policy outlines several venues for tribal consultation and information exchange with CDC staff and leadership:

- Biannual CDC tribal consultation sessions that are open to all tribal leaders.
- Establishment of the CDC Tribal Consultation Advisory Committee (TCAC – pronounced “tee cack”).
- CDC participation in HHS-sponsored national/regional tribal consultation sessions.
- Meetings between the CDC Director (or designee) and elected tribal leaders (or their designees).
- Letters, e-mails and publications from the CDC Director (or designee) exchanged with elected tribal leaders or their designees.
- Partnerships will also be strengthened through the collaborative working relationships that are established whenever CDC awards a cooperative agreement to a state, university, tribal government or tribal organization. In a cooperative agreement relationship, CDC professional staff/subject matter experts have substantial involvement and work directly with awardees to accomplish the goals of the agreement.

What is the purpose of the TCAC?

The purpose of the TCAC is to provide an ongoing means for tribal representatives and CDC staff to exchange information about public health issues in Indian country, identify urgent public health needs in AI/AN communities and discuss collaborative approaches to addressing these issues and needs. The TCAC will assist CDC in planning and coordinating biannual tribal consultation sessions. In addition, it will provide an established, recurring venue where tribal leaders will advise CDC regarding the government-to-government consultation process. TCAC will help to ensure that CDC activities or policies that impact Indian country are brought to the attention of all tribal leaders.

As a result of this policy, how will tribes have more access to CDC programs?

A strong consultation policy is the foundation for effective government-to-government relationships. The procedural guidance that this policy provides for CDC staff will help ensure that more tribes and tribal organizations benefit from CDC expertise and resources by eliminating barriers and enhancing tribal access to CDC programs by:

- Assuring tribal eligibility for all CDC program announcements unless authorizing legislation and programmatic regulations restrict eligibility.
• Improving access to CDC programs by better outreach to tribal stakeholders through direct mailings, targeted e-mail distributions and web postings of information and opportunities.
• Monitoring tribal access to CDC and ATSDR programs by tracking the total resources allocated to serve AI/ANs annually and an inventory of new programs and policies affecting AI/AN communities to accelerate health impact, reduce health disparities, and protect people from current and imminent health threats.

How will this policy help ensure agency-wide consistency as to how CDC works with tribes?

In addition to specifying responsibilities and procedures for agency-wide and Director’s level tribal consultation activities, this policy provides procedural guidance to CDC program staff at all levels of the agency. Key components of effective consultation are included in this guidance:

1. Understanding when to consult.
2. Knowing with whom to consult and how to ensure appropriate and sufficient tribal representation.
3. Engaging tribal representatives as meeting co-chairs and following their guidance on venues, format and cultural protocol.
4. Involving, at tribal leaders’ discretion, state health department representatives whenever possible and appropriate.
5. Documenting meetings or other forms of consultation accurately and completely.
6. Providing timely feedback to tribal consultation participants and the communities they represent.

In addition, the guidance contains information about how to work effectively with tribal governments:

1. Identifying initial points of contacts within tribal communities
2. Providing timely feedback to tribal partners and community members
3. Ensuring access to CDC programs
Who are the points of contact for the Tribal Consultation Policy?

The Office of the Director, CDC, through the Office of Minority Health and Health Disparities (OMHD), Office of Strategy and Innovation, will be responsible for ensuring agency-wide adherence to CDC and HHS tribal consultation policies. Official CDC points of contact for tribal issues are:

- CAPT Pelagie ("Mike") Snesrud, RN, Senior Tribal Liaison for Policy and Evaluation, pws8@cdc.gov, 404-498-2343

- CAPT Ralph T. Bryan, MD, Senior Tribal Liaison for Science and Public Health, rrb2@cdc.gov, 505-248-4226

For ATSDR, the Director, NCEH/ATSDR and the ATSDR Office of Tribal Affairs will be the official points of contact. For further information, please contact:

- Mr. Tim Hack, Deputy Director & Senior Advisor, Strategic Engagements, Office of Policy, Planning & Evaluation, NCEH/ATSDR, THack@cdc.gov, 404-498-0497

*In this document, the term “CDC” refers to both ATSDR and CDC.*