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National Indian Health Board
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2013-2014 PHAP Associates by State

Legend
- Associates (Red numeral = number of associates)
- No Associates

Data is current as of 2/19/2015.

Class of 2013 = 117 associates
Class of 2014 = 140 associates
Tribal Assignments

Legend
- Associates (Red numeral = number of associates)
- No Associates

Of the 143 associates, 6 associates work with 5 different tribal-related assignments or organizations:
- Albuquerque, NM
  - Albuquerque Area Southwest Tribal Epidemiology Center
  - Albuquerque Area Indian Health Board
- Cherokee, NC
  - Health Agency of the Eastern Band Of Cherokee Indians
  - Zachary Roach – Health Agency of the Eastern Band Of Cherokee Indians
- Anchorage, AK
  - Alaska Native Tribal Health Consortium
CDC increased its grant funding directly to tribes by $6.1M

- FY 2013: $28.5M
- FY 2014: $34.6M
Tribal Accreditation Support Initiative

Tribal ASI awardees
- Eastern Band of Cherokee, North Carolina
- Forest Country Potawatomi, Wisconsin
- Keweenaw Bay Indian Community, Michigan
- Sault Ste. Marie Tribe of Chippewa Indians, Michigan
- Swinomish Indian Tribal Community, Washington
New Projects

Partnerships to Improve Community Health

A Comprehensive Approach to Good Health and Wellness in Indian Country

Published on Indian Country Today Media Network.com

CDC Awards Over $11M to Fight Chronic Diseases in Indian Country

10/5/14

The Centers for Disease Control and Prevention has announced 22 new grant awards in the amount of $11.3 million to reduce chronic diseases and promote health and wellness in Indian Country. These awards, financed by the Affordable Care Act, are part of a coordinated initiative in all 50 states and the District of Columbia to reduce chronic diseases, promote healthier lifestyles, reduce health disparities, and control health care spending.

The tribal health program, A Comprehensive Approach to Good Health and Wellness in Indian Country, aims to prevent heart disease, diabetes, stroke, and associated risk factors in American Indian tribes and Alaska Native villages through a holistic approach to population health and wellness. Award recipients will use evidence-based, culturally adapted public health interventions to...
Tribal Public Health

Tribal, state, and federal laws can all impact the health of American Indian and Alaska Native communities. The Public Health Law Program provides technical assistance, including producing documents related to the laws that impact tribal public health.

- **The Affordable Care Act & American Indian and Alaska Native Communities: Selected Readings and Resources** [PDF 229KB]
  A list of readings and resources that describe the Affordable Care Act and the Indian Health Care Improvement Act’s impact on American Indian and Alaska Native communities. The list includes summaries of the laws, scholarly articles, and resources on enrollment and exemptions.

- **American Indian and Alaska Native Hunting and Fishing Rights** [PDF 164KB]
  An overview about key legal doctrines courts have developed to explain off-reservation AI/AN hunting and fishing rights. These doctrines are significant in a public health context because many tribal communities rely on traditional foods for subsistence.

- **Infectious Disease Control Manual** [PDF 295KB]
  An inventory of select tribal laws related to infectious disease control and procedures. The guide provides attorneys about tribes’ use of law as a tool to address infectious diseases.

Disclaimer: Information available on this website that was not specifically designated to represent any CDC policy, position, or endorsement of that information is public information and you have questions about a specific law or its application you should contact the appropriate office or agency.
Chronic Liver Disease is a Major Health Disparity for American Indian / Alaska Natives

- Cause of 7% of all deaths
- 5th leading cause of death vs 11th for white Americans
- Mortality increased 24% for American Indians compared to 14% for Whites in 1999-2007
- 90% of mortality related to cirrhosis
- Attributable cause
  - Alcohol abuse – 52%
  - HCV – 11%
  - HBV – 1%
  - Combination of above – 32%


Source: National Notifiable Diseases Surveillance System (NNDSS)

Reported cases/100,000 population

Source: National Notifiable Diseases Surveillance System (NNDSS)
The Growing Burden of Hepatitis C in the United States

- Of 2.7 million HCV-infected persons in primary care
  - 1.47 million will develop decompensated cirrhosis (DCC)
  - 350,000 will develop hepatocellular carcinoma (HCC)
  - 897,000 will die from HCV-related complications

A 300% Increase in Hepatitis C-Related Hospitalizations for AI/AN – 1995-2007


Source: National Notifiable Diseases Surveillance System (NNDSS)
HCV Screening for American Indians

- **Clinic-based screening**
  - 243 patients in Omaha Nebraska; 30 tribes
  - 11.5% anti-HCV positive
  - Risks included use of cocaine and injected drugs

- **Screening of pregnant women**
  - 205 pregnant women in northern plains (median age 22 years)
  - 6% anti-HCV positive
  - Injection drug use only risk factor

- **Screening of persons born 1945-1965**
  - 31% of cohort screened by HIS; 267% increase in testing
  - HCV testing data pending

Extension for Community Health care Outcomes (ECHO)

- Expand Primary care capacity in HCV management
- Rural and underserved populations
- Use videoconferencing
- Share “best practices”
- Case based learning
- Similar cure rates to those in HCV clinics

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