Tribal Perspectives on Health Equity

Rethinking How the US Approaches Health Equity for American Indians and Alaska Natives

Carrie Field, Policy Analyst, NIHB
AC Locklear, Federal Relations Direction, NIHB
U.S. life expectancy

Life expectancy is a calculation of how long a baby born in a given year is expected to live on average.

Source: NCHS, National Vital Statistics System, Mortality
The non-Hispanic American Indian and Alaska Native (AIAN) population experienced the largest decline in life expectancy between 2019 and 2021.
U.S. life expectancy

Life expectancy is a calculation of how long a baby born in a given year is expected to live on average.

Source: NCHS, National Vital Statistics System, Mortality
Health Equity is now a federal priority.
But dominant perspectives of Health Equity don’t tell the whole story.

CMS Definition of Health Equity

“Health equity means the attainment of the highest level of health for all people, where everyone has a fair and just opportunity to attain their optimal health regardless of race, ethnicity, disability, sexual orientation, gender identity, socioeconomic status, geography, preferred language, or other factors that affect access to care and health outcomes.”
Tribal reactions to federal Health Equity initiatives:

- Making health equity a priority is a huge step forward
- Many of the focus areas are important
- Federal plans don’t resonate
- Tribes feel excluded
- The elements most essential to achieving health equity in Indian Country are missing
- A mindset shift is required – a different way to think about health equity
NIHB’s Health Equity Project

How we are amplifying Native voices in national Health Equity discourse
Key Questions

Why are these inequities happening?

What is unique about working towards Health Equity in Indian Country?

What role can federal agencies play in advancing Health Equity for American Indians and Alaska Natives?
3 Tribal Health Equity Events in 2022

May: Inter-Tribal World Café on Health Equity
- Foundations of health equity in Indian Country
- Key Drivers of health inequities for AI/AN

August: National Tribal Health Equity Summit
- What does health equity mean from a Tribal perspective?
- How do we advance health equity in Indian Country?

September: CMS Listening Session
- Specific feedback on the CMS Framework for Health Equity
- Rethinking how CMS approaches health equity for AI/AN
What are the root causes of AI/AN health inequities?

Colonization

Disconnection from, culture community, and identity

Disruption, distrust, and disempowering of Tribes

Erasure

Systemic, self-perpetuating barriers

Inequities in health outcomes for American Indians and Alaska Natives:

AI/AN life expectancy is now 11 years less than for the general American population
Foundations of Health Equity in Indian Country

- Tribal sovereignty
- Resilience through culture
- Strong Tribal institutions
- Tribal empowerment in state & federal governance
- Federal trust responsibility
9 ESSENTIAL PRIORITIES

A Path to AI/AN Health Equity: Recommendations for Federal Agencies

- Honor Indigenous Knowledge
- Focus on Relationships and Connectedness
- Heal Backwards and forwards
- Disrupt Structures of Inequity and Shift the Balance of Power
- Support Tribal Institutions
- Recognize that Tribes Hold the Answers to Tribal Health Equity
- Increase Visibility of American Indians & Alaska Natives
- Center Tribal Sovereignty and the Nation-to-Nation Relationship
- Prioritize Fulfillment of the Federal Trust Responsibility
Next steps in defining Tribal Health Equity

Indigenous Models of Health Equity
• Special Workshop Sessions Thursday Morning

Indigenous Determinants of Health Panel

What does health equity mean to you? (Participant responses)