

National Indian Health Board



National Indian Health Board Resolution 23– 03

Calling on Direct Access to Federal Block Grant Funding for Tribal Nations

WHEREAS, the National Indian Health Board (NIHB), established in 1972, serves all Federally recognized American Indian/Alaska Native (AI/AN) Tribal governments by advocating for the improvement of health care delivery to AI/ANs, as well as upholding the Federal government’s trust responsibility to AI/AN Tribal governments; and

WHEREAS, block grants have been a part of the American federal system since 1966 and provide funding to assist Tribal, state, and local governments in addressing broad purposes, such as community development, social services, public health, or law enforcement; and

WHEREAS, block grants generally provide them more control over the use of the funds than categorical grants; and

WHEREAS, block grants address broader purposes, are distributed by formula, allow greater flexibility in the use of the funds, and have fewer administration conditions than categorical grants; and

WHEREAS, block grants increase government efficiency and program effectiveness by redistributing authority from the federal government to governments with a closer connection to the people they serve; and

WHEREAS, Tribal nations often have a closer connection to the people they serve than any other form of government and provide culturally appropriate and informed services that produce better outcomes for AI/ANs than programs administered by outside governments; and

WHEREAS, some state and local governments receive block grant funding for the benefit of American Indians and Alaska Natives (AI/ANs) that Tribal nations are not eligible to receive but are not held accountable for those obligations after the funds are received; and

WHEREAS, some federal block grant programs are provided to state governments that then pass those resources or authority on to Tribal nations or Tribally-controlled entities, which defeats the efficiency purpose of block grant funding and wastes federal taxpayer resources.

THEREFORE BE IT RESOLVED, that there be established Tribal nation block grant programs to administer the same granted federal authority for every federal block grant provided to state or local governments.

BE IT FINALLY RESOLVED, that this resolution shall be the policy of the National Indian Health Board until it is withdrawn or modified by subsequent resolution.

CERTIFICATION

The foregoing resolution was adopted by the Board, with quorum present, on the 22nd day of June, 2023.



Chairperson, William Smith

ATTEST:



Vice Chairperson, Nickolaus Lewis