COVID-19 PANDEMIC IN INDIAN COUNTRY

National Indian Health Board

Jill Jim, PhD, MPH, MHA

Navajo Nation

National Indian Health Board

Public Health Infrastructure and Accreditation Programs Director

NIHB MISSION STATEMENT

- Established by the Tribes to advocate as the united voice of federally recognized American Indian and Alaska Native Tribes, NIHB seeks to reinforce Tribal sovereignty, strengthen Tribal health systems, secure resources, and build capacity to achieve the highest level of health and well-being for our People.

PHPP VISION STATEMENT

- Working together to empower sovereign Tribal nations to improve equity, policy, and public health systems that build thriving Native communities now and for the next seven generations.

How the Navajo Nation slowed one of the worst Covid-19 outbreaks in the US

"We had a fast increase in cases ... but wearing masks has flattened our numbers."

By Lois Parshley | Jul 28, 2020, 12:20pm EDT

SHARE

How COVID-19 is impacting indigenous peoples in the U.S.

Nation May 13, 2020 6:14 PM EDT

Pandemic Highlights Deep-Rooted Problems in Indian Health Service

Few hospital beds, lack of equipment, a shipment of body bags in response to a request for coronavirus tests: The agency providing health care to tribal communities struggled to meet the challenge.

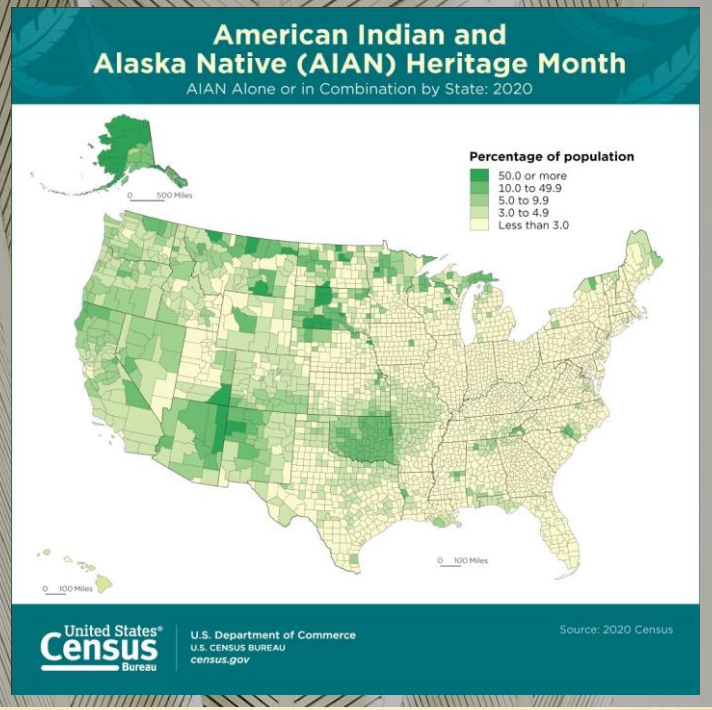
Native Americans use culture and community to gain tribes' trust in Covid vaccine

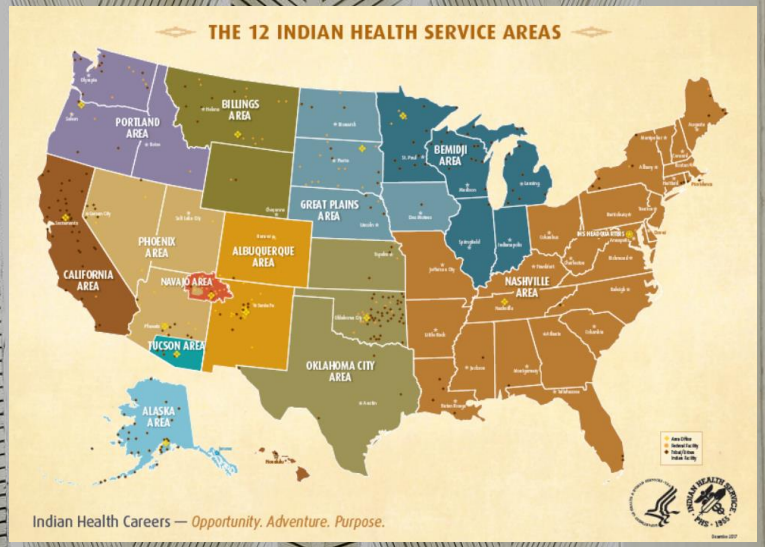
Cherokee Code Talkers are getting the first Covid-19 vaccine doses in their community because "our language is at risk."

American Indians have the highest Covid vaccination rate in the US

According to CDC data, Indigenous people are getting vaccinated quicker than any other group. Here are the successes—and challenges—of getting vaccines to urban Native American communities.

BY SUKEE BENNETT TUESDAY, JULY 6, 2021 NOVA NEXT





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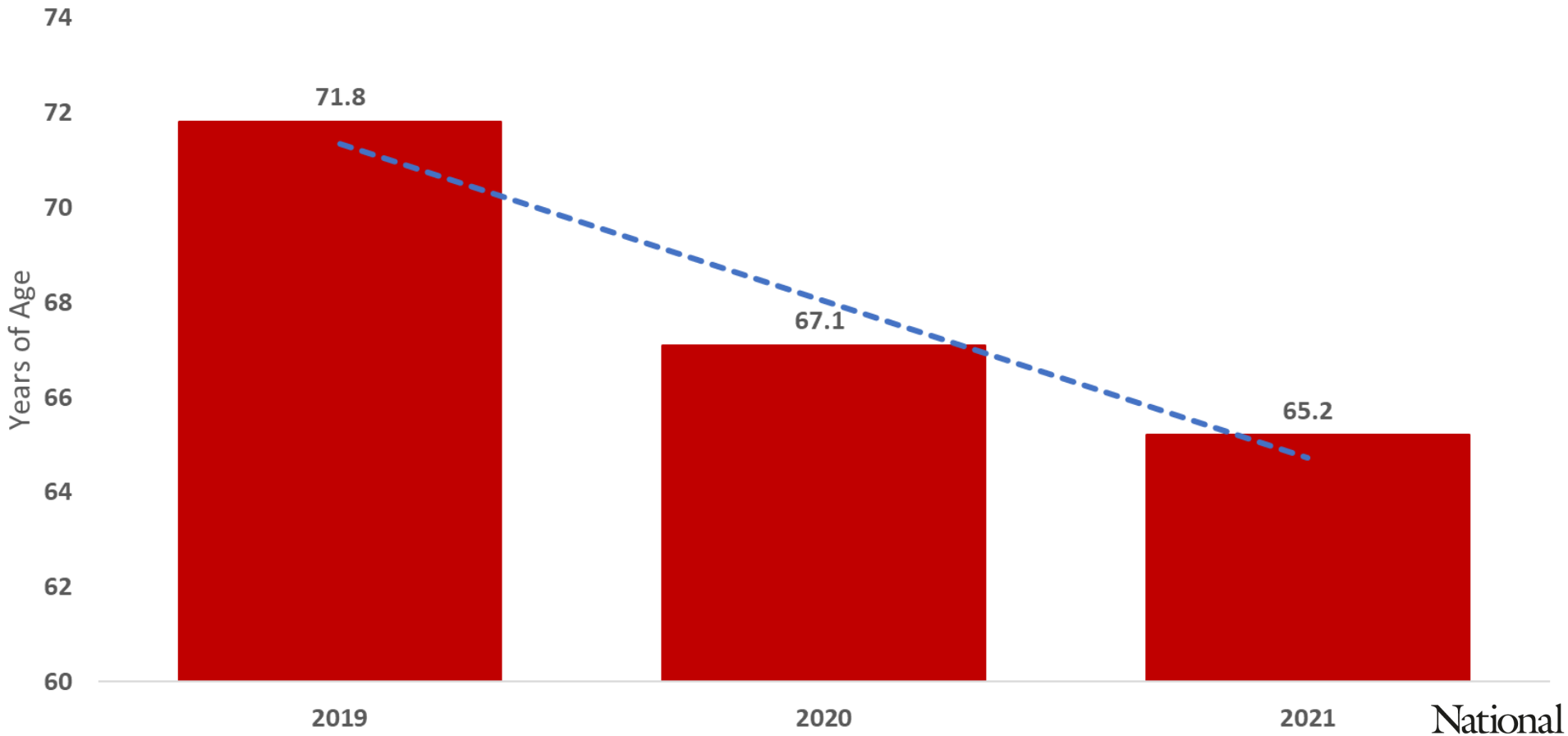
AMERICAN INDIAN / ALASKA NATIVE POPULATION

- 3.7 million American Indian and Alaska Native alone
  - *9.7 million alone & other race*
- 1.1% of the total population
  - *2.9% alone & other race*
- 574 federally recognized Indian Tribes
- Over 70% of AIAN live outside Tribal lands
- In 2020, IHS served 2.56 million in 37 states

AMERICAN INDIAN AND ALASKA NATIVE LIFE EXPECTANCY SIMILAR TO US 1944



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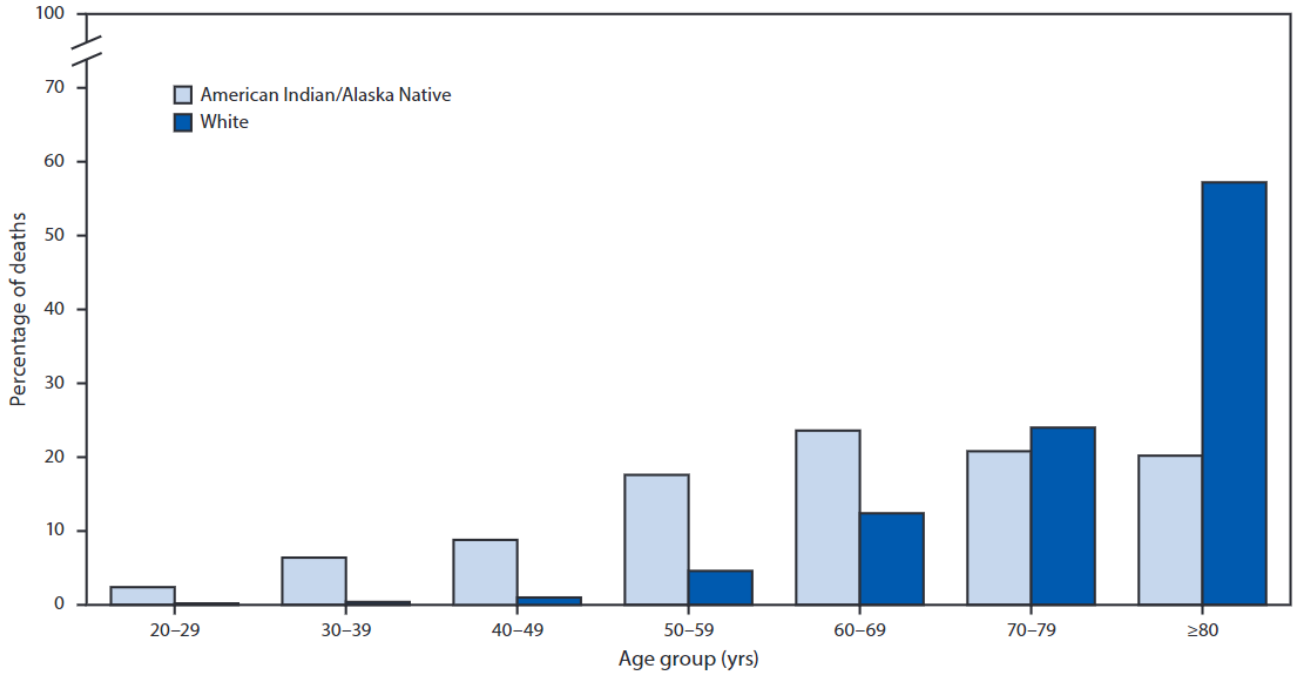
COVID-19 Mortality Among American Indian and Alaska Native Persons — 14 States, January–June 2020

Jessica Arrazola, DrPH[1]; Matthew M. Masiello[1]; Sujata Joshi, MSPH[2]; Adrian E. Dominguez, MS[3]; Amy Poel, MPH[3]; Crisandra M. Wilkie, MPH[3]; Jonathan M. Bressler, MPH[4]; Joseph McLaughlin, MD[4]; Jennifer Kraszewski, MS[5]; Kenneth K. Komatsu, MPH[6]; Xandy Peterson Pompa, MPH[6]; Megan Jespersen, MPH[7]; Gillian Richardson, MPH[7]; Nicholas Lehnertz, MD[8]; Pamela LeMaster, PhD[8]; Britney Rust, MPH[9]; Alison Keyser Metobo, MPH[10]; Brooke Doman, MPH[11]; David Casey, MA[12]; Jessica Kumar, DO[12]; Alyssa L. Rowell, MA[12]; Tracy K. Miller, PhD[13]; Mike Mannell, MPH[14]; Ozair Naqvi, MS[14]; Aaron M. Wendelboe, PhD[14]; Richard Leman, MD[15]; Joshua L. Clayton, PhD[16]; Bree Barbeau, MPH[17]; Samantha K. Rice, MPH[18]; Victoria Warren-Mears, PhD[2]; Abigail Echo-Hawk, MA[3]; Andria Apostolou, PhD[19]; Michael Landen, MD[1]

Morbidity and Mortality Weekly Report

FIGURE. Percentage distribution of COVID-19–associated deaths among American Indian/Alaska Native* and non-Hispanic White persons aged ≥20 years, by age group† — 14 states,§ January 1–June 30, 2020



Abbreviation: COVID-19 = coronavirus disease 2019.
* Includes Hispanic and non-Hispanic ethnicities.
† Percentages by age group are not age-adjusted.
§ Alaska, Arizona, Louisiana, Minnesota, Mississippi, Nebraska, New Mexico, New York, North Dakota, Oklahoma, Oregon, South Dakota, Utah, and Washington.

Summary

What is already known about this topic?

COVID-19 incidence is higher among American Indians/Alaska Natives (AI/ANs) than among non-Hispanic Whites. In 2009, AI/ANs experienced disproportionately high pandemic influenza A(H1N1)–associated mortality.

What is added by this report?

Based on data from 14 participating states, age-adjusted COVID-19–associated mortality among AI/ANs was 1.8 times that among non-Hispanic Whites. Among AI/ANs, mortality was higher among men than among women, and the disparity in mortality compared with non-Hispanic Whites was highest among persons aged 20–49 years.

What are the implications for public health practice?

AI/ANs have experienced disproportionate rates of infection and mortality during the COVID-19 pandemic. The excess risk, especially for AI/AN males and persons aged 20–49 years, should be considered when planning and implementing medical countermeasures and other prevention activities.

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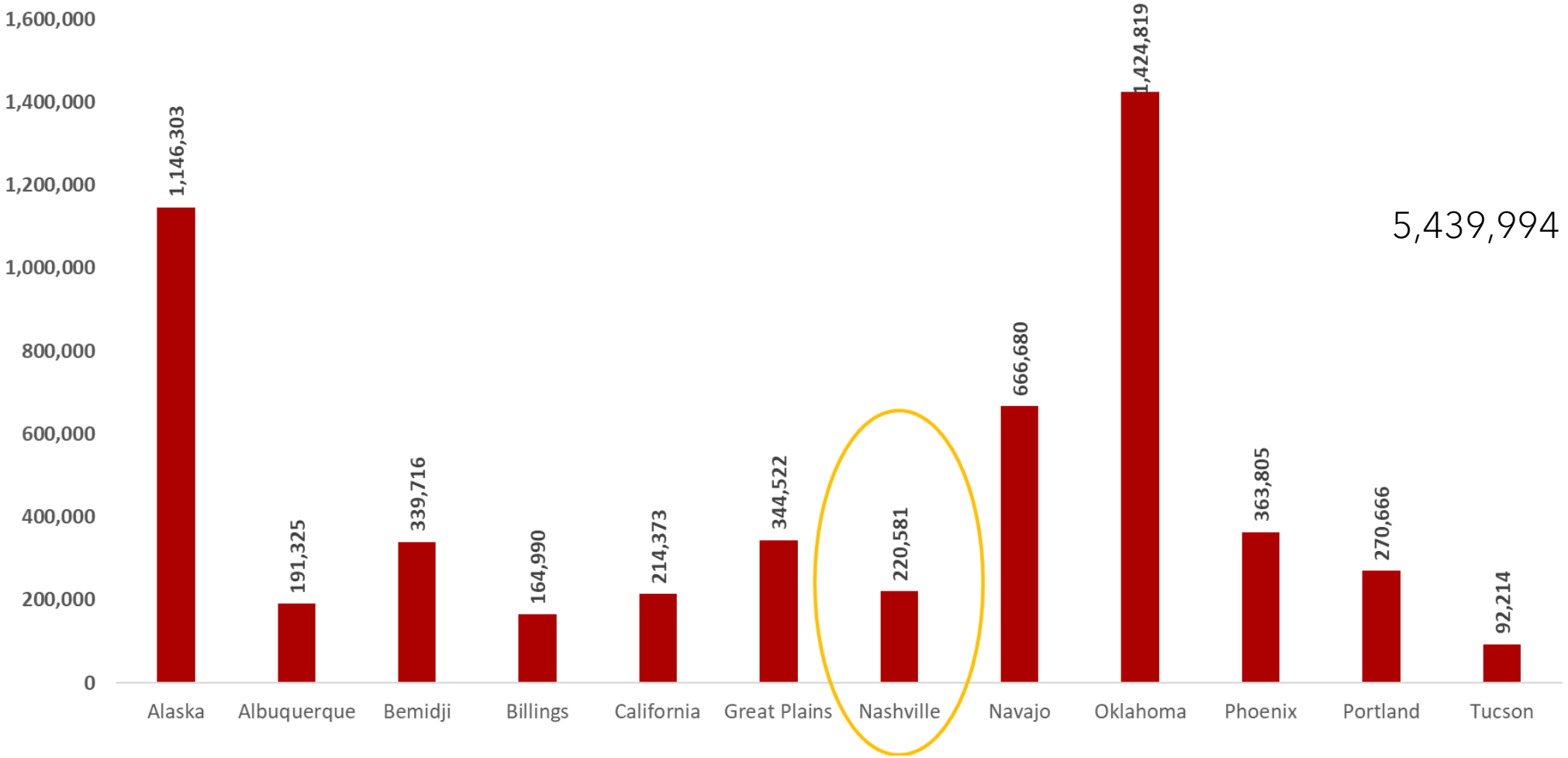
COVID TESTING



5,439,994 individuals tested

Note. Source at https://www.ihs.gov/coronavirus/. Data are reported from IHS, tribal, and urban Indian organization facilities, though reporting by tribal and urban programs is voluntary. Data reflect cases reported to the IHS through 11:59 pm on Sep 20, 2023.

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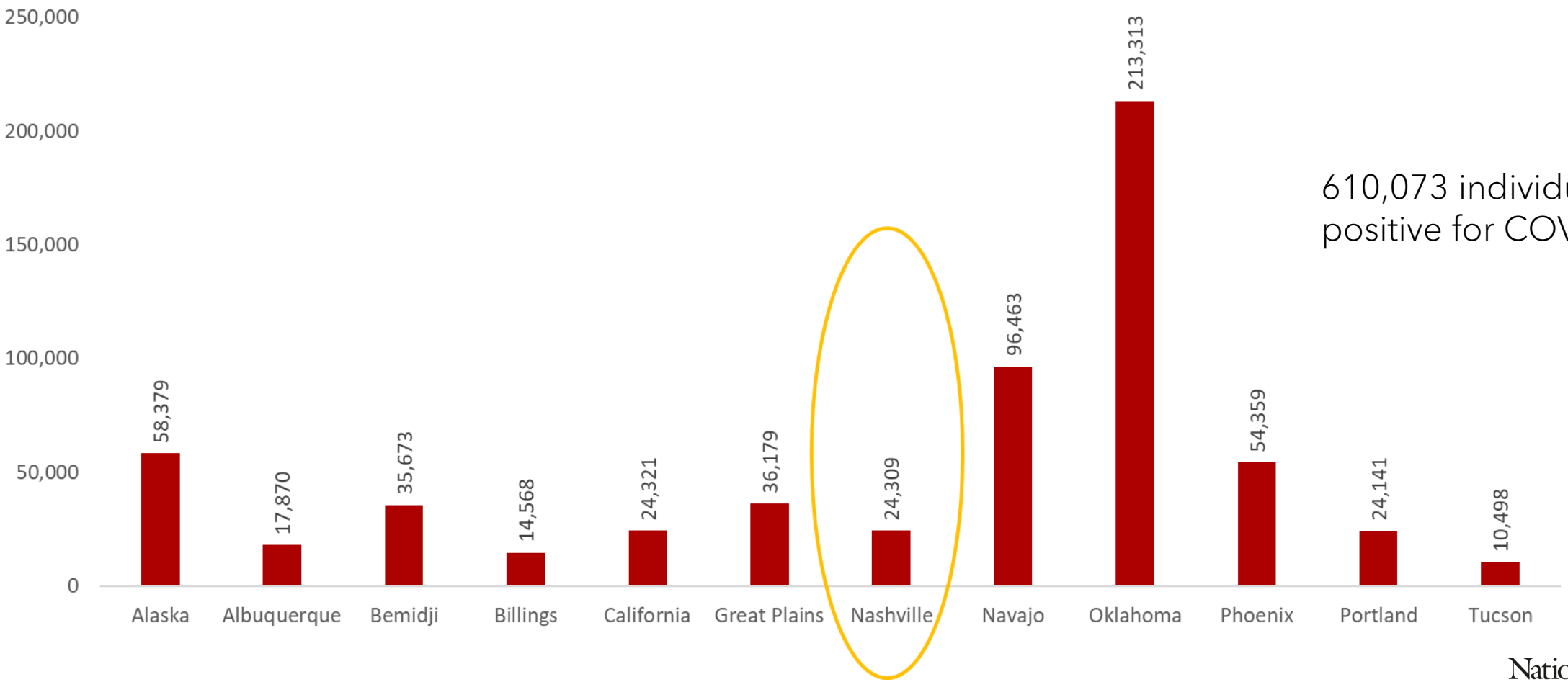
COVID POSITIVE CASES



610,073 individuals tested positive for COVID

Note. Source at https://www.ihs.gov/coronavirus/. Data are reported from IHS, tribal, and urban Indian organization facilities, though reporting by tribal and urban programs is voluntary. Data reflect cases reported to the IHS through 11:59 pm on Sep 20, 2023.

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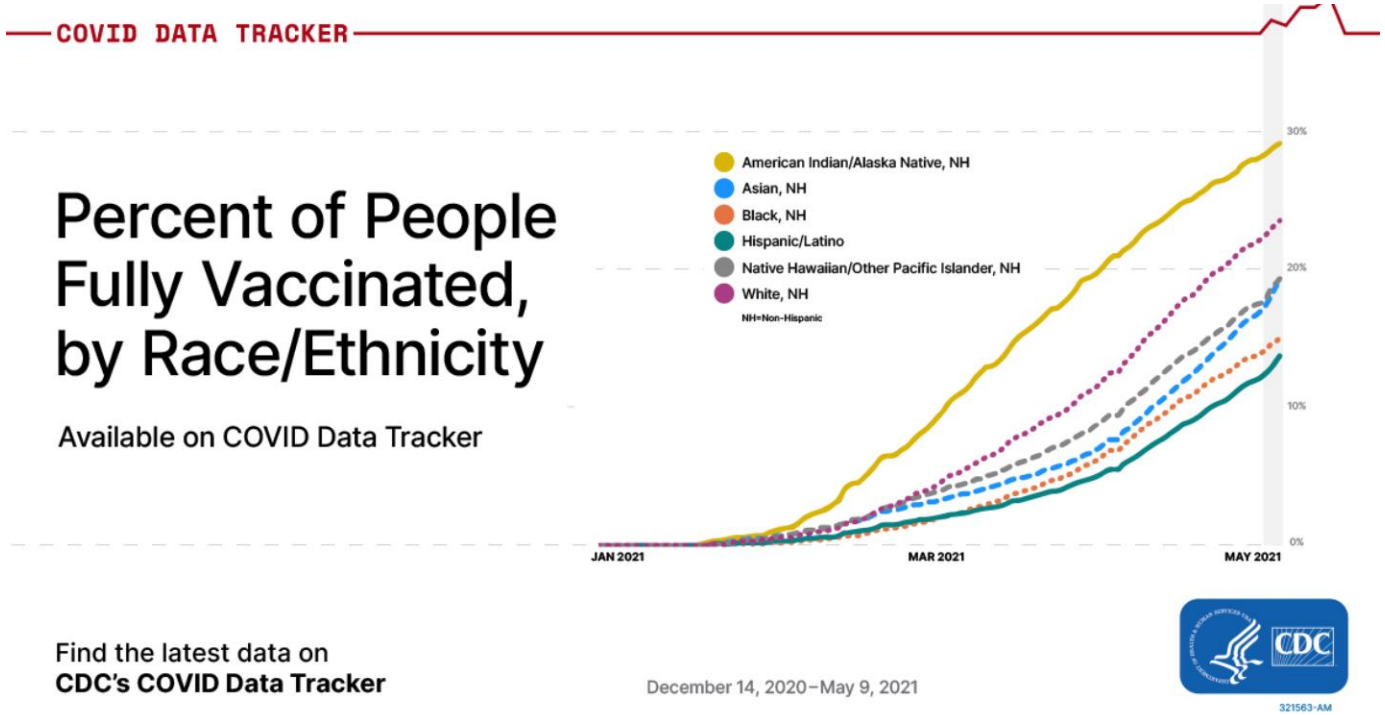
COVID VACCINATION

Distribution of COVID Vaccine

- Indian Health Service
- State Jurisdiction

4,419,525 Doses Distributed
2,406,179 Does Administered



*Distributed Data Source: IHS National Supply Service Center, includes total doses ordered and delivered by August 25, 2023 to facilities that chose the IHS jurisdiction for vaccine distribution. **Administered Data Source: Data is reported from the Vaccine Administration Management System (VAMS) and IHS Central Aggregator Service (CAS). Data may be different than data on the CDC COVID-19 Vaccine Tracker due to lags and ongoing quality review of data, including resolving data errors. Note:The COVID-19 Vaccine Distribution and Administration by IHS Area data is only reflective of facilities that chose the IHS jurisdiction for vaccine distribution. Alaska Area data is not reported as all tribes chose to receive COVID-19 vaccine from the State of Alaska. The Tucson Area data only includes one tribe that chose the IHS jurisdiction for vaccine distribution.

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TRIBAL SOVEREIGNTY

THE RIGHT AND POWER TO SELF-GOVERN

- **Tribes are sovereign nations**, with the power and duty to safeguard their citizens' health
- **Tribal nations predate the formation of the United States** – they retain their sovereignty
- **Tribal sovereignty has been repeatedly recognized and affirmed** by the U.S. Supreme Court, the U.S. Constitution, and hundreds of Indian treaties and federal statutes
- Tribal nations hold a **unique relationship with the United States**
- "**American Indian/Alaska Native**" is first and foremost a **political status**

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HEALTH CARE FOR TRIBAL NATIONS

- Federal Indian health laws and policies
    - Treaties with the federal government
    - Federal trust responsibility
    - Tribal sovereignty
    - Government-to-government relationships

PUBLIC HEALTH AUTHORITY

- A Public Health Authority is defined by federal law (45 CFR 164.501) as:
  - "an agency or authority of the United States, a State, a territory, a political subdivision of a State or territory, or an Indian tribe, or a person or entity acting under a grant of authority from or contract with such public agency, including the employees or agents of such public agency or its contractors or persons or entities to whom it has granted authority, that is responsible for public health matters as part of its official mandate."

WHY IS PUBLIC HEALTH CAPACITY SO STRAINED IN INDIAN COUNTRY?

- As US public health infrastructure was developed over the past century, Tribes were excluded from these systems & structures
- The main sources of funding that support State and Local health departments are not available to Tribes
- The Indian Health Care Improvement Act includes authorization for the Indian Health Service to conduct public health activities, but Congress has left this section of the Act unfunded
- Current IHS funding covers less than 20% of the actual cost to provide health care and public health services to all of Indian Country

WAYS TO ENGAGE TRIBAL COMMUNITIES

- Understand the government structure
  - *Elected leaders*
  - *Public health administrators*
- Learn about the public health system
  - *Health delivery system*
  - *Tribal epidemiology centers*
  - *Public health authorities*

Next Steps

- Director–to – Director meeting
- Governor–to–President/Chairman meeting
- Regular monthly/quarterly meetings
- Orientations

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WAYS TO ENGAGE TRIBAL COMMUNITIES

- Establish and maintain the relationship
  - Collaborate
  - Coordinate
  - Strategize
  - Support
  - Technical assistance
  - Build capacity

Next Steps

- Understand needs and gaps from the Tribal perspective
- Listen and learn
- Come to the table with ideas of what you can offer to support Tribes, but allow Tribes to take the lead
- Be sensitive to a possible history of strained relationships between governments
- Come to an agreement on possible solutions

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WAYS TO ENGAGE TRIBAL COMMUNITIES

- Empower and strengthen Tribal sovereignty
- Be an advocate for Tribal self-determination
- *"Nothing about us, without us"*
- Build and enhancing capacity and capacities to combat diseases

Next Steps

- Conduct meaningful Tribal consultation
  - Create a Tribal Consultation Policy through consultation with Tribes
  - The Policy sets a framework for communication and diplomacy between governments
  - Ensure consistent adherence to the Policy
- Ownership
  - Inspire and empower ideas to fruition
  - Data systems

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UNDERSTANDING CULTURE, UNDERSTANDING DISPARITIES

- Distance to receive health services
- Holistic care
- Food access
- Basic needs (water, shelter)
- Perceptions about disease, wellness, etc.
- Ways of life
- Cultural taboos

FINAL THOUGHTS

- Working with Tribes must have a foundation of respect for Tribal sovereignty
- Improve quality data
- Cultural integration at the forefront
- Strengthening partnerships
- Health system awareness
- Lessons learned into action

THANK YOU!

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- https://www.census.gov/newsroom/facts-for-features/2022/aian-month.html