

Strengthening Native American Representation among Tribal Health Councils

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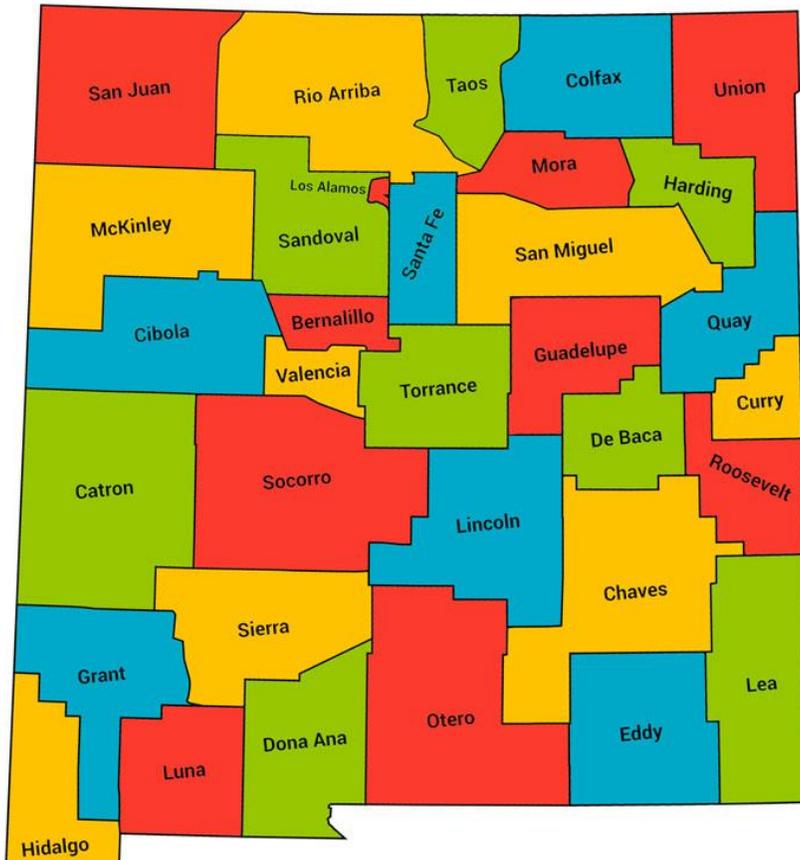


New Mexico Alliance of Health Councils

- The New Mexico Alliance of Health Councils exists to support and strengthen the state's county and tribal health councils.
- Created in 1991
- **Maternal and Child Health Act was created to encourage the development of comprehensive, community-based maternal and child health services to meet the needs of childbearing women and their families.**
 - Needs assessment identifying populations, major factors, gaps in maternal and child health services
 - Inventory of existing resources and services
 - Improve and fund maternal and child health services
 - Recommendations to eliminate duplications of services
 - Addressing other services: teen pregnancy, family planning, prenatal care, financing, expanding provider capacity, outreach, prenatal care, home visits, transportation, and projects that enhance well-child care
- Funding suspended in June 30, 2010 by NM Dep. Of Health



New Mexico Alliance of Health Councils



- Re-established after loss of funding in early 2011

Three Goals

- Establish a unified voice to strengthen and promote the value and services of community health councils, through state and local education and advocacy;
 - Assist the health councils in seeking and obtaining funding to support community health improvement;
 - Build the capacity of all health councils to continue and expand their work, through conferences, training workshops, a newsletter, and web-based information exchange.
- Today, there are 38 Health Councils
 - 6 tribal health councils (Acoma Pueblo, Cochiti Pueblo, San Ildefonso Pueblo, Santa Clara Pueblo, Tesuque Pueblo, To'hajiilee)

What do health councils do?

- Health councils play a key role in working with partners to improve health outcomes in their individual counties and communities.
- The role of the health council is not necessarily to 'fix the problem'
- Roles
 - Attend and participate in meetings/ activities
 - Bring local knowledge to regional and statewide stakeholders
 - Bring vetted public health information to local community
 - Partner with community groups doing similar work to impact wellness
 - Serve on community actions teams

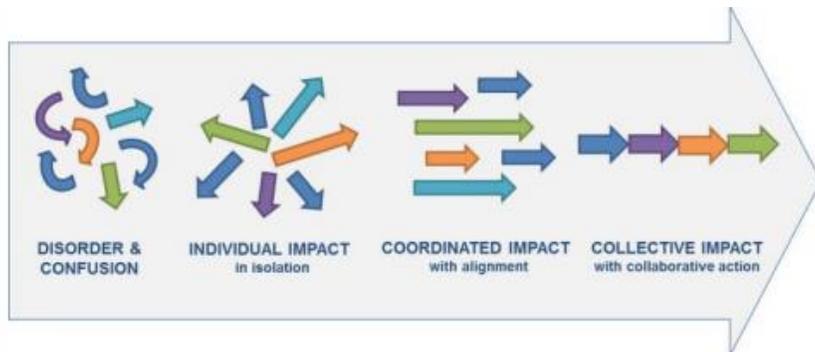
How do health councils organize and conceptualize the work?





Collective Impact Lens of Community/ Capacity Building

- EQUITY
- WORKING TOGETHER
- CONFLICT RESOLUTION
- OWNERSHIP
- PREVENTION
- DIVERSITY
- HEALTH PUBLIC POLICY





Community Building

What does capacity building look like?

- Bringing everyone to the table
- Adopting principles
- Building a Sharon vision
- Promoting collaboration
- Using local assets and resources
- Measuring and celebrating progress

Assess Means to Use Data



- Survey/ study individuals or conduct key informant interviews
- Collect and organize publicly available data to show local impact
- Share data back to community
- Health Promotion Specialists are available for health councils

Establishing Priorities

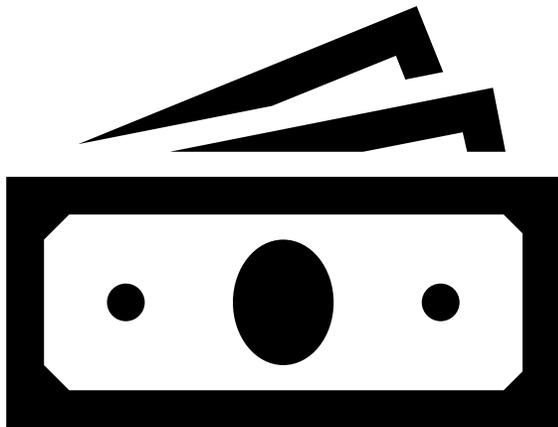
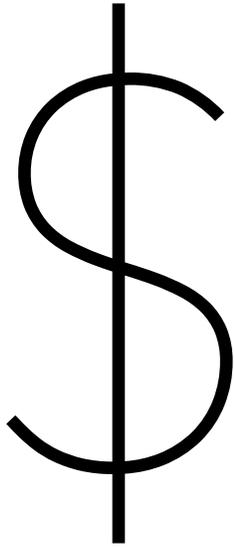


- Consider/ review community data and needs
- Do effective evidence-based solutions exist?
- Target audience?
- Timing?
- Political realities?
- Time and resources needed?
- Impact on other issues?
- What can we impact?
- Duplication?
- Mission fit?
- Energy? (Capacity of group)

Ready. Set. Action

- Evidence- based approach
- Choose motivated and capable partners
- Promote, campaign, and announce widely
- Remember to evaluate
- Celebrate success





Funding and Sustainability- Best Practices

- New Mexico State Department of Health
- Other funding strategies:
 - Identify a recognized and healthy fiscal agent or develop the organization as its own
 - Grant writing
 - Business Partnerships/ Coalition
 - Affordable Care Act funding through community hospitals/ clinics
 - County/ City Contributions

10 Essential Public Health Services- Health Councils as Backbone

- The strength of a public health system rests on its capacity to effectively deliver the 10 Essential Public Health Services:
 - 1) Monitor health status to identify community health problems
 - 2) Diagnose and investigate health problems and health hazards in the community
 - 3) Inform, educate and empower people about health issues
 - 4) Mobilize community partnerships to identify and solve health problems
 - 5) Develop policies and plans that support individual and community health efforts
 - 6) Enforce laws and regulations that protect health and ensure safety
 - 7) Link people to needed personal health services and assure the provision of health care when otherwise unavailable
 - 8) Assure a competent public health and personal health care workforce
 - 9) Evaluate effectiveness, accessibility and quality of personal and population-based health services
 - 10) Research for new insights and innovative solutions to health problem



Why is tribal engagement and representation important?



- 48 Native American Tribes total in New Mexico
- Only 5 tribal health councils part of the organization
 - County tribal health councils do not represent the general broad base of Native representation
- Under representation of Native communities, specific needs, community partnerships, and insights

Examples in NMAHC

5 tribal health councils

No tribal representation
in NMAHC Boards and
Committees

Attendance of tribal
councils in monthly
meetings

Lack of tribal input and
feedback

COVID-19 Long Term Recovery Planning Relief Survey

- Majority of health councils considered themselves part of a project of local government
- Tribal health councils are funded mostly by State Government and Foundations, Grants, or Donations. Few listed Local Government as a funder.
- Many tribal councils are staffed at 1/2 time equivalency or less.
- 2 tribes reported an estimate of \$0-\$5,000 spent annually on projects. 3 tribal health councils reported \$5,001-\$25,000.
- Many tribal health councils are addressing: COVID-19 Screening and Testing, COVID-19 vaccination, housing and food assistance, mental health or addiction recovery services, healthcare accessibility, and spiritual and faith-based services
- Outreach: Social Media, Radio or TV announcements, Phone Calls, Texts
- Tribal health councils hardly meeting on a monthly basis
- Reported needing assistance with Policy, Processes, Advocacy, Partnerships, and Funding

Underrepresentation of NA Tribes: Issue in Healthy Equity



- The following racial and ethnic groups have been shown by the National Science Foundation to be underrepresented in health-related sciences on a national basis: Blacks or African Americans, Hispanics or Latinos, American Indians or Alaska Natives, Native Hawaiians and other Pacific Islanders (2019).
- Those from underrepresented racial and ethnic groups were less likely to receive federal grants or contracts than their white counterparts (National Science Foundation, 2019).

**National Science Foundation. (2019). Women, Minorities, and Person with Disabilities in Science and Engineering.
<https://nces.nsf.gov/pubs/nsf19304/>

Strategic Planning

VISION	Our vision is to be a leader in transforming the health of communities in New Mexico through a strong network of health councils working toward health equity.
MISSION	The mission of the New Mexico Alliance of Health Councils is to improve the health of all people living in New Mexico by supporting and strengthening county and tribal health councils, advocating for health equity, and by providing a strong voice for community and public health.
VALUES	<p>Collaboration: We commit to collaboration among health councils and key public health stakeholders.</p> <p>Equity and Inclusion: We value equity and inclusion within our organization and in our work to better the health of New Mexicans, recognizing that diversity, equity and inclusion makes us stronger.</p> <p>Respect: We practice a culture of respect and cultural humility, acknowledging all perspectives and recognizing that words and actions matter.</p> <p>Collective Voice: We are committed to cultivating a collective voice on issues that benefit all health councils.</p>

Focus Area: Equity and Inclusion

Capacity Building and Operational Infrastructure for Building the Alliance

First Set of Goals	Goal #1: Strengthen relationships with tribal health councils and encourage participation in the Alliance.
Strategies	<ol style="list-style-type: none">1. Strengthen connections and convene with tribal leadership, gain perspective and insight for shared strategies.2. Work with tribal health councils and tribal leadership to identify opportunities for the Alliance to participate in tribal health meetings and events. (ongoing)3. Proactively reach out to tribal health councils via personal contact to encourage engagement in Alliance activities.4. Actively encourage and support tribal health councils to participate in Alliance governance.5. Work and co-create with tribal communities and continuing partnerships to adopt racial equity principles, resources and training for Alliance staff, board and partners.6. Review Alliance membership requirements with a focus on racial equity and actively respond to expressions of interest in establishing additional tribal health councils, working in conjunction with the Department of Health Office of Health and Equity and Native American liaison office.7. Actively resource, encourage and hire tribal liaison staff person and internship(s) for the Alliance (starting with internship position).

Focus Area: Equity and Inclusion

Capacity Building and Operational Infrastructure for Building the Alliance

Second Set of Goals	Goal #2: Improve equity and inclusion in the NM Alliance of Health Councils.
Strategies	<ol style="list-style-type: none">1. Conduct assessment of NMAHC with respect to equity and inclusion and develop improvement plan.2. Assist health councils with developing strategies for effective outreach and engagement with populations experiencing systemic barriers including bigotry, racism and colonization.3. Explore and engage with groups who face bigotry and exclusion from power.
Third Set of Goals	Goal #3: Review and develop Alliance infrastructure with an equity and inclusion lens.
Strategies	Create a diverse design group to conduct review of Alliance systems and processes including bylaws, practices, procedures, policies, communications and other critical foundational blocks of the Alliance. Make appropriate changes with consultation of Alliance to existing tools and develop new policies and procedures as deemed necessary.

Working with Tribal Councils

1. How do we work together with other entities to strengthen existing or new resources?
 2. How do we look at our usefulness to our tribal councils?
 3. Is it not worth the collaborative because tribes may not want to risk their sovereignty?
- **Authorization #1**
 - Need correspondence/ permission
 - Stay up to date with policy work, advocacy, leadership position changes, and challenges in the community
 - Permission from leadership → Community Health Representatives
 - **Benefits of the Alliance for Health Council**
 - Providing the tools to help Tribal Health Councils be Successful
 - Strategic Planning, Processes, and Development
 - Awareness/ Education
 - Resources
 - Training

Laws and Regulations

The ISDEAA, also known as P.L. 93-638, authorizes Indian Tribes and Tribal Organizations to contract for the administration and operation of certain Federal programs which provide services to Indian Tribes and their members.

Under the ISDEAA, Tribes and Tribal Organizations have the option to either:

- Administer programs and services the IHS would otherwise provide (referred to as Title I Self-Determination Contracting)

Or

- Assume control over health care programs and services that the IHS would otherwise provide (referred to as Title V Self-Governance Compacting or the TSGP)

**<https://www.ihs.gov/odsct/title1/>

Native American Challenges in Establishing Outside Partnerships

Self-govern their communities in partnership with Indian Health Services

Lack of cooperation

Tribal council fear they will have less autonomy in tribal wellness committees

Tribes are weary of community members making community decisions

Tribal health councils are under direct oversight from government

If tribes do not have the acknowledgement from their governments, most likely will not want to establish councils or partner with New Mexico Alliance of Health Councils.

Tribal government structures and processes

Tribal leadership varies

Funding from local tribal governments, Indian Health Services

Sovereignty and sovereign with tribal ways

Limited Capabilities

1. How do we work together with other entities to strengthen those resources?
2. How do we look at our usefulness to our tribal councils?
3. Is it not worth the collaborative because tribes may not want to risk their sovereignty?

Developing a Position for Tribal Liaison

Public health task force for inter-agencies is looking at how to work together in strengthening the public health system.

- Should this individual come from the communities they serve?
- What would be the best type of individual to be the liaison?
 - OUTREACH
 - Meeting the needs of the community whenever necessary
 - Being familiar with the community and agencies
 - Being able to dive deep into history
 - Following- up with commitments and inquiries
 - Understanding relations are important
 - Identifying local and community resources
 - Trust is key!
 - Attending meetings with tribal entities
 - Dedicated, flexible, weekend availability

Developing a Position for Tribal Liaison

Key Points of Position

1. Communication (On-Site)
 2. Meetings with leadership
 3. Education and knowledge in policy
 4. Exposed to tribal government
 5. Identifying internal and external challenges
 6. Addressing divide among tribal health councils
 7. Technical advisory
 1. Authority
 2. Complete deliverables
 3. Trainees
- College education
 - Knowledgeable about traditions, chapters
 - Understand how authority works
 - Know differences in infrastructures
 - Advocate
 - Educator
 - Assist in decision making with tribes

Future

- Developing draft of job description
 - Job Title
 - Job Summary
 - Responsibilities and Duties
 - Qualifications
 - Skills
 - Salary and Benefits
- Establish tribal health council committees
- Establish rapport and relations with tribes across the state



Contact Information

THANK YOU!

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