



**Department of Health and Human Services
Centers for Disease Control and Prevention
Agency for Toxic Substances and Disease Registry**

**Tribal Advisory Committee Meeting and
14th Biannual Tribal Consultation Session**

**February 9–10, 2016
Atlanta, Georgia**

Sessions Summary

Tribal Advisory Committee (TAC) Meeting, February 9, 2016**Morning Session**

Senior Leadership Roundtable Discussion—Centers for Disease Control & Prevention (CDC) and the Agency on Toxic Substances and Disease Registry (ATSDR) senior leadership engaged in conversations on a variety of topics concerning tribes. This session provided an open format for Tribal Advisory Committee (TAC) members to discuss matters, as well as to make general inquiries of the agency. Discussions included how the agency is using tribal testimony to better inform its decision-making processes; suicide prevention strategies in use by Navajo Nation; and emergency response and preparedness, in light of the Zika virus and the funding impacts this emerging disease has created. TAC members had the opportunity to make direct requests of agency senior leaders, including requests for additional funding for cancer screening, an increased focus on climate change impacts, and more tools to address opioid addiction. Leaders shared concerns, as well as ideas for improving sustainable funding for the development of public health infrastructure in Indian Country. To conclude the session, each CDC/ATSDR senior leadership was invited by the TAC chairperson to share specifically on their Center, Institute & Office's (CIO) role, as it relates to Indian Country.

Adverse Childhood Experiences (ACE) Roundtable Discussion—Dr. Melissa Merrick, Lead Scientist for CDC-Kaiser Permanente Adverse Childhood Experiences (ACE) Study, provided an introduction to the history of the study. Dr. Larke N. Huang, Director, Office of Behavioral Health Equity, Substance Abuse and Mental Health Services Administration (SAMHSA), joined Dr. Merrick, focusing on the development of trauma-specific clinical care approaches and interventions. Ms. Carol Redding, Doctoral Candidate, discussed the original ACEs cohort and the lessons learned from this study. In addition, she discussed the assessment tool used for data collection and the assignment of an ACE score. Ms. Marilyn Zimmerman, Senior Tribal Policy Advisor, Office of Juvenile Justice and Delinquency Prevention, Department of Justice, joined the panelists to present on taking the ACE research into practice and then incorporating that practice into policy development. She discussed the concept of historical trauma in the context of ACE research. The session concluded with an opportunity for an informal question-and-answer discussion with the TAC members.

Afternoon Session

Electronic Nicotine Delivery Systems (ENDS)—Dr. Brian King, Deputy Director for Research and Translation in National Center for Chronic Disease Prevention and Health Promotion's Office on Smoking and Health, gave an overview of electronic nicotine delivery system (ENDS). He reviewed the impacts of the use of ENDS on youth, due to the lack of regulation on device advertising and marketing. The newest research on the negative health impacts and potential risks for long-term use was reviewed with emphasis on the unique vulnerabilities of young users. Dr. King provided suggestions—such as childproof packaging, prohibition of e-cigarettes to minors, and the monitoring of e-commerce around ENDS—for decreasing the effect of marketing to youth. He also recommended that clean air standards may need to include verbiage, such as “free of smoke” and “free of aerosol,” to protect the health of bystanders fully from exposure. Dr. King concluded his presentation by

summarizing key takeaway points, including that ENDS are nationally unregulated and are not an Food and Drug Administration approved quit aid, tribes have full authority to implement strategies that effectively reduce nicotine intake, overall ENDS use is increasing rapidly, limitations on marketing or sales to kids is critical to decreasing the likelihood of youth trying ENDS, and the importance of developing comprehensive smoke-free laws to protect everyone from the potential dangers of the ingredients from ENDS.

Tribal Support Unit Updates—The Tribal Support Unit’s public health advisors used this opportunity to introduce themselves to the TAC members with whom they have had frequent virtual contact. They presented on their individual roles within the unit.

Deon Peoples, Public Health Advisor, stated that he oversees TAC recruitment and is in charge of handling requests from TAC members and the US Department of Health and Human Services, such as quarterly and or yearly operative reports. Delight Satter, Senior Public Health Advisor, attends to the Health Research Advisory Committee and leverages programs within CDC to support American Indian/Alaska Native health priorities, including infrastructure projects, tribal capacity building, and program improvement ideas. Alleen Weathers, Public Health Advisor, extracts the issues and recommendations raised by TAC members from TAC meeting transcripts and tribal testimonies and works with the Office for State, Local, Tribal and Territorial Support (OSTLTS) Policy Unit to assign, track, and review responses from CDC and ATSDR programs about these issues. Dr. Nicolas Rankin, Public Health Advisor, works with internal and external partners to build relationships that could assist TSU in carrying out its mission. Priyanka Oza, Public Health Advisor, manages communications tasks, including the TSU email box, and facilitates communication with key partners in Indian Country to provide technical assistance on how to access CDC resources to assist with issues affecting their communities. Annabelle Allison, Deputy Associate Director for Tribal Support, reviewed the various cooperative agreements managed by the unit and answered questions about grant funding opportunities for Indian Country. Alia Hoss, a fellow with the Public Health Law Program (PHLP) in OSTLTS, introduced herself as the lead researcher on tribal law and Indian law. She explained that PHLP seeks to use law as a public health tool and has created a robust, sustainable program that can work, not only on federal Indian law issues, but also jurisdictional issues. CAPT Carmen Clelland, Associate Director for Tribal Support, closed the session with gratitude for the opportunity to work with agency and TAC members to address issues in Indian Country.

Partnering with CDC to Build the Next Generation of Public Health Professionals—J.T. Theofilos, Public Health Advisor with the Public Health Associate Program in OSTLTS, presented on two pilot projects. The main objectives of the projects are to identify American Indian and Alaska Native (AI/AN) candidates who apply to the program and identify host sites that will provide an opportunity for associates to work in subject areas related to AI/AN populations. The pilot projects are being implemented to increase public health workforce capacity serving tribal populations and to provide training opportunities to AI/AN college graduates who may return to serve tribal public health agencies. Mr. Theofilos concluded the session by encouraging tribal entities to determine if they have activities appropriate for an entry-level public health professional and, if so, to apply to be a host site.

Tribal Advisory Committee (TAC) Meeting, February 10, 2016**Morning Session**

Office of the Director Updates—Dr. Ursula Bauer, CDC/ATSDR Designated Federal Official and director of CDC’s National Center for Chronic Disease Prevention and Health Promotion, discussed the recruitment process for a new OSTLTS Director, inviting TAC members to express their desired attributes for the individual serving in this role. Leaders provided feedback about their preference for an American Indian or Alaska Native or an individual with extensive knowledge regarding tribal sovereignty, the fiscal challenges that Indian country faces, and the historical trauma that continues to affect AI/ANs health. In addition, they said that tribes would appreciate a director who is willing to visit Indian Country and witness the realities AI/ANs face. It was suggested that the appropriate candidate should have the capacity to really listen to TAC members. The session concluded with the assertion that a director with strong familiarity of the interrelationships between tribal, state, and federal governments would be ideal. TAC members would value someone who can advocate for tribal issues and connect tribes to support organizations to address health and funding disparities.

CDC Tribal Support Website Listening Session—Dagny Olivares, OSTLTS Associate Director for Program Planning and Communication Unit, introduced the session as an opportunity for TAC members to share their experiences with and needs for CDC’s State, Tribal Local and Territorial (STLT) Gateway and tribal support websites. TAC members provided robust insight into navigation issues and barriers—information which PPCU will use to improve the end-user experience. Work also is being done to explore ways to improve the feel of the pages, making them more engaging and relevant to tribes. Suggestions, such as adding TSU staff pictures and individual contact information in order to help build relationships, were made.

Updates from the Convening on Tribal Practices that Promote Health and Well-Being—Dr. Ursula Bauer provided a comprehensive overview of the two convenings held in Indian Country. The purpose of the convenings was to explore what the federal government is doing to understand the importance of tribal health practices. She reported that CDC heard from the attendees about the types of health and well-being activities that have not been recognized nor allowed as “evidence-based” public health interventions, even though tribes have seen health improvement through these activities. One output from the convenings was draft language to describe these activities and how the agency’s funding opportunity announcement (FOA) language could be modified to include tribal health practices. Dr. Bauer explained that the idea is to create future FOA language that will help tribes develop these tribal-specific, culturally sensitive interventions. The floor was opened for feedback from the TAC members on the seven identified themes, which included family and community activities that connect to culture; seasonal and cultural traditional practices; social and cultural activities, intertribal and nongovernmental organization collaborations; intergenerational learning opportunities, cultural teachings and practices about traditional health; and traditional and contemporary physical activities that strengthen well-being. Feedback was gathered for consideration from TAC Members.

Interactive Discussion with the TAC on Public Health Emergency Preparedness—Todd Talbert, Senior Advisor to the Director of the Division of State and Local Readiness in CDC’s Office of Public Health Preparedness and Response (OPHPR), shared that OPHPR is currently working on a new FOA that will

focus more on strategic planning with tribes. Mr. Talbert asked questions to solicit advice about how it should develop the FOA language:

- What is important to think about when developing a sustainable public health system?
- How does preparedness strengthen public health capacity?
- As tribes work with their states, what are the tribes' recommendations? What works? What are areas for opportunities to improve?
- What are priorities for tribes?
- What works for providing input into the overall state applications and or local applications?

The TAC responded with further inquiry and rich discussion. Clarification was presented as to why the current Public Health Emergency Preparedness program is unable to directly fund tribes. Suggestions were shared on how to work more meaningfully with states to ensure that tribal needs are addressed under PHEP. Barriers and concerns were explored by agency senior leaders and TAC members before the session was concluded.

CDC Tribal Budget Updates—Ms. Georgia Moore, OSTLTS Associate Director for Policy, and Dr. Ursula Bauer presented the FY 2017 proposed Presidential budget. TAC members encouraged each other to educate tribal serving organizations that can influence Congressional decision-making processes by effectively explaining the benefits to funding tribal public health. TAC members discussed funding concerns and special requests for funding considerations. They requested particular agency attention to funding for prescription drug overdose and cancer. Dr. Debra Lubar, director of CDC's Appropriation, Formulation, and Legislation Office, reviewed CDC's total proposed funding request, which included an overall increase of \$200 million in FY 2017. Dr. Lubar listed a few areas where a request for increase in funding has been made for FY 2017. These areas included antibiotic resistance, gun-violence-prevention research, laboratory safety, noise-induced hearing loss, polio eradication, and viral hepatitis. In addition, President Obama proposed expanding Good Health & Wellness in Indian Country, doubling the current budget, expanding programs and including Urban Indian centers. TAC was reminded that the agency had prioritized the Good Health & Wellness Program for inclusion at the advice of the TAC which was great news, but that Congress would ultimately decide whether to fund.

Afternoon Session

Tribal Testimonies—Six tribal testimonies were presented. TAC members raised recurrent themes for consideration by CDC and ATSDR, which included continued CDC and ATSDR funding to support tribal public health initiative, requests for CDC/ATSDR to collaborate with other agencies in providing resources to address high suicide rates in Indian Country, and special training for grant application reviewers on Native American traditional ways and practices. Other calls for action included conducting an ACE survey in Indian Country, assisting the Tribal Epidemiology Centers in accessing AI/AN-specific health data, and exploring methods to prevent adverse outcomes associated with the legalization of marijuana use and its potential impact in AI/AN communities. The reading of the six testimonies into the record concluded the 14th Biannual CDC/ATSDR Tribal Consultation Session.

Participants

Tribal Advisory Committee Members

- **Chester Antone** (*Tohono O’odham Nation*): Councilman, Tohono O’odham Nation; Chair, Tribal Advisory Committee (TAC); Tucson Area Delegate
- **Delia M. Carlyle** (*Akin Indian Community*): Vice Chairman, Ak-Chin Indian Community; Phoenix Area Delegate
- **Robert Flying Hawk** (*Yankton Sioux Tribe*): Chairman, Yankton Sioux Tribe; Great Plains Area Delegate
- **Adam Geisler** (*La Jolla Band of Luiseño Indians*): Secretary, La Jolla Band of Luiseño Indians; California Area Delegate
- **Jonathan Nez** (*Navajo Nation*): Vice President, Navajo Nation; Co-Chair, TAC; Navajo Area Delegate
- **Lisa Pivec, MS** (*Cherokee Nation*): Director, Community Health Promotion, Cherokee Nation; Oklahoma Area Authorized Representative
- **Alicia Reft** (*Native Village of Karluk*): President, Karluk IRA Tribal Council; Alaska Area Delegate
- **Kristine Rhodes** (*Bad River Band of Lake Superior Tribe of Chippewa Indians*): Executive Director, American Indian Cancer Foundation; Bemidji Area Authorized Representative

CDC and ATSDR Senior Leaders

- **John Auerbach, MBA**: CDC Associate Director for Policy and Acting Director, OSTLTS, CDC
- **Ursula Bauer, PhD, MPH**: Director, National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), CDC; CDC/ATSDR Designated Federal Official
- **Patrick Breyse, PhD, CIH**: Director, National Center for Environmental Health and Agency for Toxic Substances and Disease Registry, CDC
- **Stephanie Dulin, MBA**: Deputy Director, National Center on Birth Defects and Developmental Disabilities, CDC
- **RADM Robin Ikeda, MD, MPH**: CDC Deputy Director for Noncommunicable Diseases, Injury, and Environmental Health
- **RADM Jonathan Mermin**: Director, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, CDC
- **Brad Myers, MPH**: Director, Division of Communication Services, Office of the Associate Director for Communication, CDC (proxy for Katherine Lyon Daniel, Associate Director for Communication, CDC)
- **RADM Stephen Redd**: Director, Office of Public Health Preparedness and Response (OPHPR), CDC
- **Brooke Tripp, MPA**: Management Officer, Center for Surveillance, Epidemiology, and Laboratory Services (CSELS), CDC (proxy for CAPT Michael Iademarco, Director, CSELS, CDC)

Presenters/Discussants

- **Annabelle Allison** (*Navajo Nation*): Deputy Associate Director for Tribal Support, OSTLTS, CDC
- **CAPT Carmen Clelland, PharmD, MPA** (*Cheyenne and Arapaho Tribes*): Associate Director for Tribal Support, OSTLTS, CDC
- **CAPT Thomas Hennessy, MD, MPH**: Director, Arctic Investigations Program, National Center for Emerging, Zoonotic, and Infectious Diseases, CDC

- **Larke Huang, PhD:** Senior Advisor, Children, Youth and Families Lead, Trauma and Justice Strategic Initiative, Administrator’s Office of Policy Planning and Innovation, Office of Behavioral Health Equity, Substance Abuse and Mental Health Services Administration
- **Brian King, PhD, MPH:** Deputy Director for Research Translation, Office on Smoking and Health, NCCDPHP, CDC
- **Debra Lubar, PhD:** Senior Advisor to the Appropriations, Legislation, and Formulation Office, Office of the Chief Operating Officer, CDC
- **Melissa Merrick, PhD:** Behavioral Health Scientist, National Center for Injury Prevention and Control (NCIPC), CDC
- **Georgia Moore, MS:** Associate Director for Policy, OSTLTS, CDC
- **Dagny Olivares, MPA:** Associate Director for Program Planning and Communication, OSTLTS, CDC
- **Katie Ports, PhD:** Behavioral Scientist, DVP, NCIPC, CDC
- **Carol Redding:** ACE Study Consultant, Sparrow Consulting, LLC
- **Gregory Smith, MPA:** Tribal Liaison Officer, Program Services Branch, Division of State and Local Resources (DSLRL), OPHPR, CDC
- **Todd P. Talbert, MA:** Senior Advisor to the Director, DSLR, OPHPR, CDC
- **J.T Theofilos, MPT, MBA:** Partnerships Stakeholder Engagement Team Lead, Public Health Associate Program, OSTLTS, CDC
- **Marilyn Zimmerman, MSW:** Tribal Senior Policy Advisor, Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice

Acronyms

ACE	Adverse Childhood Experiences
ATSDR	Agency for Toxic Substances and Disease Registry
AI/AN	American Indian/Alaska Native
CAPT	Captain, US Public Health Service
CDC	Centers for Disease Control and Prevention
ENDS	Electronic Nicotine Delivery System
FDA	Food and Drug Administration
FOA	Funding Opportunity Announcement
OPHPR	Office of Public Health Preparedness and Response
OSH	Office on Smoking and Health
OSTLTS	Office for State, Tribal, Local and Territorial support
PHLP	Public Health Law Program
PPCU	Program Planning and Communications Unit
PHEP	Public Health Emergency Preparedness cooperative agreement
PPCU	Program Planning and Communications Unit
SAMHSA	Substance Abuse and Mental Health Services Administration
STLT	State, Tribal, Local and Territorial
TAC	Tribal Advisory Committee