

Overview of Tribal Epidemiology Centers

Tribal Epidemiology Centers (TECs) work in partnership with local or area tribes to improve the health and well-being of tribal members by offering culturally competent approaches to eliminate health disparities faced by American Indian and Alaska Native (AI/AN) populations. In addition to partnering with tribes, TECs receive funding from and coordinate their activities with federal, state, and local agencies, and academic institutions throughout the country. TECs provide various types of support and services based on organizational structure, tribal populations served, and their mission and goals. This fact sheet provides a general overview of TECs and examples of each TEC's key programs and activities.

Legal Authorities

In 1992, amendments to the Indian Health Care Improvement Act (IHCIA) authorized the establishment of TECs to serve each Indian Health Service (IHS) region.¹ The amendments mandate that TECs perform a variety of functions “[i]n consultation with and on the request of Indian tribes, tribal organizations, and urban Indian organizations”¹ to elevate the health status of tribal and urban Indian communities, including

- Collecting and monitoring data on the health status objectives of the IHS, Indian tribes, tribal organizations, and urban Indian organizations
- Evaluating delivery and data systems that impact Indian health
- Assisting tribes, tribal organizations, and urban Indian organizations to determine health status objectives and services needed to meet those objectives
- Recommending services to assist Indian communities
- Making recommendations to improve Indian healthcare delivery systems
- Providing technical assistance to tribes, tribal organizations, and urban Indian organizations to develop local health priorities and disease incidence and prevalence rates
- Providing disease surveillance and promoting public health

In 2010, Congress enacted the Patient Protection and Affordable Care Act (ACA),² which permanently reauthorized the IHCIA.³ The IHCIA's 2010 reauthorization included a provision designating TECs as public health authorities and authorizing TEC access to data held by the US Department of Health and Human Services.⁴ The Centers for Disease Control and Prevention (CDC) Public Health Law Program issue brief [Tribal Epidemiology Centers Designated as Public Health Authorities](#) provides more information on TEC legal authorities.

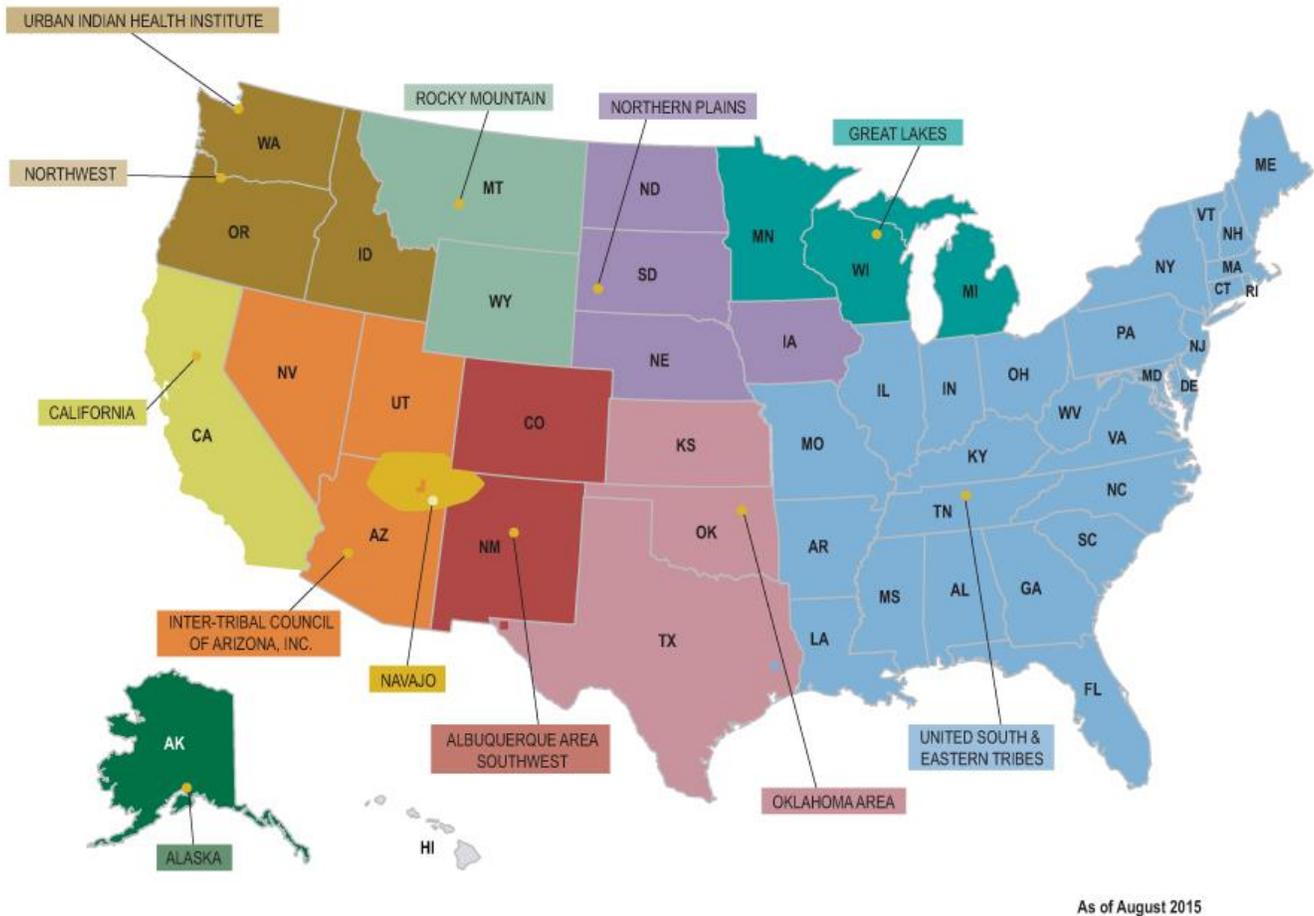
Who They Are

There are currently 12 TECs in the United States. Figure 1 shows the locations of the TECs and the regions they represent. TECs may serve multiple tribes in their regions.



Figure 1. Tribal Epidemiology Centers⁵

Tribal Epidemiology Centers and the Areas They Serve



Missions and Activities of the 12 TECs

Each TEC is unique in terms of the types and range of activities conducted and services offered. This section gives a brief overview of each TEC, with examples of major activities and programs. Because TEC activities and programs can change over time, be sure to visit the TEC websites for the most up-to-date information.

Alaska Native Tribal Epidemiology Center (ANTEC) (Anchorage, Alaska)

ANTEC’s mission is to contribute to the wellness of Alaska Native people by monitoring and reporting on health data, providing technical assistance, and supporting initiatives that promote health. ANTEC—which is in the Division of Community Health Services of the Alaska Native Tribal Health Consortium (ANTHC)—assists the national IHS epidemiology program in improving AI/AN health. ANTEC conducts activities in four core areas: data sharing, technical assistance, disease prevention, and surveillance.

ANTEC’s projects include the following:

- Compiling health data on a range of health indicators and providing overviews of the health status of the Alaska Native population

- Conducting the ANTHC Colorectal Cancer Control (CRC) Program for increasing CRC screening across the Alaska Tribal Health System, with a focus on people aged 50–64 years
- Maintaining the Alaska Native Tumor Registry to better understand cancer prevalence among Alaska Native people. Registry data are used to plan and implement programs for preventing and detecting cancer and to enhance clinical oncology services. The registry also provides the basis for a variety of research projects targeting cancer among Alaska Native people.
- Conducting initiatives that encourage healthy families by addressing violence and trauma, promoting wellness, and working to eliminate disparities in victimization and in maternal and child health affecting AI/AN people in Alaska.

Albuquerque Area Southwest Tribal Epidemiology Center (AASTEC) (Albuquerque, New Mexico)

AASTEC’s mission is to collaborate with the 27 southwestern American Indian tribes in the IHS Albuquerque Area to provide high quality health research, surveillance, and training to improve the quality of life of American Indians. The Albuquerque Area includes Colorado and parts of New Mexico and West Texas. According to the 2010 US census, approximately 104,000 AI/AN people live in the Albuquerque Area, including 20 Pueblos, two Apache nations, three Navajo bands (not included in the IHS Navajo Area), two Ute tribes, and the off-reservation tribal population. AASTEC’s parent organization is the [Albuquerque Area Indian Health Board](#), an Indian-owned and -operated nonprofit organization that offers diverse health promotion and prevention education programs as well as specialized public health services.

AASTEC’s activities include the following:

- Designing, adapting and implementing community health assessments to help tribes collect data to 1) identify health needs; 2) highlight strengths and assets; 3) pinpoint key areas for intervention; 4) advocate for additional funding, grants, and resources; and 5) monitor trends over time
- Helping tribal health programs develop customized databases that can be used to 1) monitor participant health status and outcomes; 2) track program activities; 3) evaluate program services; and 4) develop progress reports
- Assisting tribes with program evaluation activities that include 1) developing measurable objectives and evaluation plans; 2) designing program evaluation instruments; 3) developing customized databases to track program activities and outcomes; and 4) analyzing and reporting data
- Collaborating with Albuquerque Area tribes in administering a Behavioral Risk Factor Surveillance System (BRFSS) survey in their communities. BRFSS is a national adult health survey that collects information on health risk behaviors, preventive health practices, and health care access. Most tribal BRFSS surveys are conducted through in-person interviews, and AASTEC trains members to serve as BRFSS interviewers. AASTEC also works with each tribe to determine which modules to include in its tribal BRFSS survey.

California Tribal Epidemiology Center (CTEC) (Sacramento, California)

CTEC’s mission is to improve American Indian health in California to the highest level by engaging American Indian communities in collecting and interpreting health information. This information is used to establish health priorities, monitor health status, and develop effective public health services that respect the communities’ cultural values and traditions. CTEC has data-sharing agreements with 23 tribal health programs that serve 84 tribes throughout California.

CTEC's core objectives are the following:

- Maintaining communication with and obtaining input from the CTEC Advisory Council, the California Rural Indian Health Board's board of directors, the IHS California Area Office, the California Department of Public Health (CDPH), and AI/AN populations
- Obtaining access to data and assisting Indian Health Programs in public health activities needed to address AI/AN public health priorities
- Producing health profiles for AI/AN populations
- Conducting a tribal Behavioral Risk Factor Surveillance Survey
- Participating in data, research, epidemiology, and public health forums and committees
- Developing and maintaining outbreak response capacity, which is coordinated with response efforts from local health departments, CDPH, and IHS
- Aligning CTEC activities to reflect and support IHS priorities

Great Lakes Inter-Tribal Epidemiology Center (GLITEC) (Lac du Flambeau, Wisconsin)

GLITEC's mission is to support tribal communities in their efforts to improve health by assisting with data needs through partnership development, community-based research, education, and technical assistance. GLITEC serves 34 tribes, 3 service units, and 4 urban Indian health programs. Program advisement is provided through each state's Tribal Health Directors Association. GLITEC staff support tribal communities in their efforts to improve health by building capacity to collect and use data while encouraging improved data quality on the local, state, and national levels. GLITEC produces and disseminates an annual three-state AI/AN health profile report, aggregating data by each state individually and in combination. Tribe-specific profile reports are updated periodically and upon request.

GLITEC's projects and services include the following:

- Updating health information pertaining to American Indians. The purpose for maintaining this central repository of data is to give tribes access to health information for their communities in a meaningful and useful format.
- Fostering collaborations and partnerships with the tribes and federal, state, and local public health agencies. Working relationships include memorandums of agreement to share health data and collaborations on specific projects that benefit the tribes. GLITEC's partners include tribal, state, and local health departments; universities; IHS; CDC; and other public health agencies.
- Providing technical assistance and support, as well as training, for epidemiologic and public health-related activities of the tribes in the GLITEC area. Specific areas of support include health data collection, analysis, and interpretation; program planning and evaluation; data management; database design; survey design; and community health assessments.
- Producing annual Community Health Data Profiles, which provide health information concerning AI/NA populations living in the IHS Bemidji Area. Information is reported for the GLITEC area and for each state separately. The documents include indicators regarding demographics, mortality, diabetes, communicable diseases, and maternal/child health.
- Producing and distributing quarterly newsletters, which contain project updates and activities, current public health concerns, and announcements involving staff, trainings, and conferences.

Inter Tribal Council of Arizona, Inc. Tribal Epidemiology Center (ITCA TEC) (Phoenix, Arizona)

ITCA TEC's mission is to build tribally driven public health and epidemiologic capacity among tribes in the IHS Phoenix and Tucson areas by assisting tribes with health surveillance, research, prevention, and program evaluation for planning and policy decision making to improve health and wellness.

ITCA TEC's projects and services include the following:

- Producing tribal Community Health Profiles
- Constructing epidemiologic study designs and surveys
- Collecting, analyzing, and presenting health data
- Planning and evaluating health programs
- Coordinating disease outbreak or disease cluster response
- Building model plans for disease epidemics
- Developing specialized or custom, culturally appropriate, public health materials (e.g., health bulletins, brochures, posters)
- Providing epidemiology trainings and events

Navajo Nation Tribal Epidemiology Center (NNTEC) (Window Rock, Arizona)

NNTEC's mission is to assist in developing the Navajo Nation's disease surveillance system and identifying the highest priority health status objectives based on epidemiologic data. NNTEC was established to manage the Navajo Nation's public health information systems, investigate diseases and injuries of concern, provide data and reports to help with program management, respond to public health emergencies, and coordinate these activities with other public health authorities. About 332,000 Navajos live in the United States, either on the reservation or elsewhere.

NNTECS projects include the following:

- Navajo Suicide Surveillance System, which aids in identifying factors contributing to suicidal behaviors on the Navajo Nation
- "Cancer Among the Navajo" project, a collaborative effort between federal, state, private, and tribal partners to establish Navajo-specific cancer surveillance and rates (incidence, mortality, screening, and stage)
- Navajo Special Diabetes Project, which aims to prevent diabetes and help clients manage diabetes by promoting physical activity, weight loss, and improved nutrition
- Navajo Population Profile, which aims to provide an accurate picture of the Navajo population throughout the United States and to identify target or at-risk subpopulations when assessing the health status of the Navajo people
- Navajo Nation Health Survey, designed to establish a behavioral risk factor surveillance system to monitor and evaluate health risk behaviors of residents on the Navajo Nation
- Navajo Nation Youth Risk Behavior Survey, a school-based public health survey directed at middle school and high school students within the Navajo Nation. The survey asks questions about unintentional injuries and violence, tobacco use, alcohol and other drugs, sexual behaviors, dietary behaviors, physical activity, and home life.
- Navajo Mortality Report, which highlights the leading causes of death and years of potential life lost among Navajos living within the boundaries and border towns of the Navajo Nation
- Navajo Health Education Program, which conducts HIV screening events through the year at various locations within the Navajo Nation
- Invasive Group A Streptococcus communicable disease investigative report, created by the Navajo Nation and CDC
- Navajo PRAMS (Pregnancy Risk Assessment Monitoring System) project, a partnership between the New Mexico PRAMS, New Mexico Department of Health, and CDC. The goal is to improve the health of Navajo mothers, infants, and families by providing population-based maternal and infant information to policy makers, programs, and the general public.

- Navajo WIC project, a collaboration with the Navajo Women, Infants and Children (WIC) program. It is intended to help stakeholders and the general public understand the lives and challenges of Navajo families who are eligible for the Special Supplemental Nutrition Program for WIC.
- Navajo Birth Defects project, a collaboration with the Arizona Birth Defect Monitoring Program's Birth Defects Registry concerning Navajo babies who have a recognizable birth defect prior to their first birthday

Northern Plains Tribal Epidemiology Center (NPTEC) (Rapid City, South Dakota)

NPTEC's mission is to provide leadership, technical assistance, support, and advocacy for the 18 tribal nations and communities served by the IHS Great Plains Area in South Dakota, North Dakota, Nebraska, and Iowa, to eliminate tribal health disparities.

NPTEC programs include the following:

- Northern Plains Native American Research Center for Health, which supports partnerships between tribes or tribal-based organizations and institutions that conduct intensive, academic-level biomedical, behavioral, and health services research
- Mapping Pathways into a Healthier Future/Geographic Information System Project, which promotes data-specific activities aimed at improving the health status of stakeholder tribal communities via curriculum development, academic workshops using Epi Info and Esri GIS software, and partnerships with tribal colleges and universities and state health departments
- Sexually Transmitted Infections/Teen Pregnancy Prevention Initiative Program, which promotes and supports community awareness of and education about prevention of sexually transmitted infections as well as reduction of teen pregnancy and associated risk behaviors

Northwest Portland Area Tribal Epidemiology Center (NTEC) (Portland, Oregon)

NTEC's mission is to collaborate with northwest American Indian tribes to provide health-related research, surveillance, training, and technical assistance to improve the quality of life of AI/AN people in the 43 federally recognized tribes in Idaho, Oregon, and Washington.

NTEC's projects include the following:

- Injury Prevention Program, which develops and implements effective injury prevention and education strategies across the 43 northwest tribes, with an emphasis on motor vehicle safety and elder falls prevention
- Resource Patient Management System (RPMS) Support & Training Project, which provides RPMS technical assistance and training for all northwest tribes. Training for other tribes is also available.
- Improving Data & Enhancing Access—Northwest/Northwest Tribal Registry Project, which aims to improve the quality of race data for AI/AN people by linking records with a variety of health-related data systems in Idaho, Oregon, and Washington. The project then analyzes and disseminates health status data in ways that are locally meaningful for tribal health planning.
- Western Tribal Diabetes Project, which helps designated Indian healthcare programs in the Northwest and California areas build infrastructure and conduct accurate assessments of data related to diabetes and associated complications

Oklahoma Area Tribal Epidemiology Center (OATEC) (Oklahoma City, Oklahoma)

OATEC's mission is to improve the health of AI/AN people in Kansas, Oklahoma, and Texas by providing public health services in epidemiology, data management and analysis, training, health promotion, disease prevention, and research through outreach and creative partnerships.

OATEC's projects and services include the following:

- Epidemiology
- Training/technical assistance
- Needs assessment
- Data analysis
- Curriculum development
- Cultural awareness training
- Tribal health survey development
- Health assessment development
- Geographic Information System
- Office of Minority Health AI/AN Health Disparities Program
- Tribal Community Health Profiles project
- Tribal emergency preparedness planning
- Strategic Prevention Framework State Incentive Grant

Rocky Mountain Tribal Epidemiology Center (RMTEC) (Billings, Montana)

RMTEC's mission is to empower American Indian tribes in Montana and Wyoming in the development of public health services and systems and epidemiologic data so tribes can have resources and express their authority in response to public health concerns.

RMTEC's projects and goals include the following:

- Implementing the Behavioral Risk Factor Surveillance System (BRFSS) survey, increasing response rates for the American Indian population in Montana and Wyoming and following the CDC BRFSS survey protocol with data comparable to state and national BRFSS data
- Increasing cancer outreach to American Indians by educating, encouraging early cancer screening and diagnosis, and offering survivorship coaching for Montana and Wyoming American Indians in collaboration with Montana/Wyoming cancer stakeholders
- Improving public health practices in communities through sustainable chronic disease prevention and establishing a chronic disease surveillance system (database) that will help with tracking chronic diseases in Montana and Wyoming tribes
- Developing Community Health Profiles, supporting and improving data collection and reporting, such as through the Behavioral Health Data Improvement Project and Chemical Dependency Resource Assessments
- Providing participating Montana and Wyoming tribes with technical support for tribal emergency preparedness capacity building
- Implementing the Environmental Health Initiative, the goal of which is to provide a systematic assessment of environmental risks, provide a framework for long-term surveillance of environmental health indicators, develop environmental health policies and remediation plans, and build tribal environmental health capacity
- Improving public health practices in communities through sustainable infectious disease prevention and establishing an infectious disease surveillance system (database) that will help with tracking notifiable diseases and outbreaks of other diseases among Montana and Wyoming tribes

- Collecting, analyzing, and reporting intentional and unintentional injury data so tribal communities can understand the injury status of their community and developing a comprehensive strategic plan in collaboration with all Montana and Wyoming injury stakeholders. The plan is to be implemented in the IHS Billings Area to reduce the adverse effect of injury among Montana and Wyoming reservations.
- Helping inform participating tribes about health measures that can be used to reduce the risks for childhood obesity, diabetes, and heart disease among participating tribes' children and screening children in kindergarten through high school using the following measurements or diagnoses: body mass index, blood pressure, Acanthosis presence, and asthma
- Implementing a tribal ethics project, building tribal capacity to develop, modify, and implement public health codes to improve public health practice in tribal communities in response to community health, emergency preparedness and research concerns

United South and Eastern Tribes Tribal Epidemiology Center (USET TEC) (Nashville, Tennessee)

USET TEC monitors and reports on the health status of member tribes to reduce disease and improve wellness. USET TEC strives to improve quality of life by evaluating tribal health data, monitoring health trends, providing technical assistance for data collection, analyzing population health data, and supporting initiatives that promote health.

USET TEC's projects include the following:

- Implementing NarxCheck, a pilot project among tribes in Connecticut, Mississippi, Louisiana, South Carolina, and New York that will allow prescribing providers to access and use the state prescription drug registry from within electronic health records
- Partnering (through the NIH-supported Native American Research Center for Health) with external partners and universities on research projects to improve the health status of member tribes. Currently, USET is working with Vanderbilt University, Western Carolina University, and the Eastern Band of Cherokee Indians to study the relationship between diabetes and depression in the elderly.
- Implementing a population health data portal to help member tribes better monitor the health status of tribal citizens. USET TEC and others use the tool to address issues with the quality of the data recorded, identify gaps in knowledge about the best practices for health improvement, evaluate the percentage of health indicators meeting benchmarks suggested by IHS and *Healthy People 2020*, and encourage data-driven decision making. The portal allows health directors to generate customized reports specific to their tribal service populations, as well as standardized community highlight reports to better understand and plan for their tribal community needs.
- Producing a number of tribe-specific and aggregate health reports. USET TEC also conducts special projects for individual tribes, tribes in a geographic region, or for all USET member tribes. Areas of focus for specific projects include maternal and child health, immunization, tobacco use, hypertension, prescription drug abuse, domestic violence, quality assurance reviews, and community health profiles.

Urban Indian Health Institute (UIHI) (Seattle, Washington)

UIHI's mission is to support the health and well-being of urban Indian communities through information, scientific inquiry, and technology. UIHI was established as a division of the Seattle Indian Health Board—a community health center for urban AI/AN people.

UIHI has access to resources, information, and data that can be used to better understand the health status of the urban AI/AN population, identify health problems and disparities, and provide information to support program planning, research, reports, grant writing, and advocacy.

UIHI assists Urban Indian Health Organizations (UIHOs), which are private, nonprofit corporations that serve AI/AN people in select cities with a range of health and social services, from outreach and referral to full ambulatory care. UIHOs make up a network of 33 independent health agencies that are funded in part under Subtitle IV of the Indian Health Care Improvement Act and which receive limited grants and contracts from IHS. UIHOs are located in 19 states, supporting individuals in approximately 100 US counties, in which more than 1.2 million AI/AN people reside, according to the 2010 US Census. UIHOs provide traditional health care services, cultural activities, and a culturally appropriate place for urban AI/AN residents to receive health care. UIHI staff work on multiple, ongoing research projects to benefit urban AI/AN people.

UIHI services and assistance include the following:

- Providing health indicator data from multiple national databases, including surveys and data collection systems that provide information on the AI/AN population
- Providing recommendations on accessible and culturally appropriate resources (e.g., materials designed or tested for AI/AN people), including community assessment tools, training, and program planning and sustainability opportunities; and producing and disseminating health-related reports, fact sheets, briefs, survey instruments, and other materials
- Providing resources, grant announcements, training, and other relevant public health information; maintaining a contact list of people and organizations doing work in urban AI/AN health care; and possibly providing connections to facilitate collaborations, partnerships, or discussion
- Assisting in consultations on urban AI/AN health topics, conducting literature reviews, developing specialized materials (e.g., surveys, fact sheets), interpreting data, and helping with presentations

Additional Resources

[Tribal Epidemiology Centers Designated as Public Health Authorities](#)

[The IHS Tribal Epidemiology Centers Webpage](#)

The [National Indian Health Board Tribal Epidemiology Centers page](#)

References

¹ Pub. L. No. 102-573, 106 Stat. 4526 § 214(a)(1).

² The Patient Protection and Affordable Care Act, Pub. L. No. 111-148 (2010).

³ 25 U.S.C. §§ 1601-1683.

⁴ 25 U.S.C.A § 1621m(e)(1).

⁵ IHS Map of Tribal Epidemiology Centers, available at www.ihs.gov/epi/index.cfm?module=epi_tec_tecs.

