JULY 1, 2019 - JUNE 30, 2020

INTERIM REPORT

AMERICAN INDIAN PUBLIC HEALTH RESOURCE CENTER

EFFORTS and ACHIEVEMENTS

NDSU

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The American Indian Public Health Resource Center (AIPHRC) is committed to its mission to empower tribal nations to achieve public health equity through community-driven services, research, education, and policy, while also adjusting these initiatives during the COVID-19 pandemic.

The AIPHRC team has been working to improve public health systems, access to services, and health outcomes in tribal communities. Currently, there is minimal technical assistance opportunities available to the tribes for public health programming, policy development, and linkages to public health education. That is where our center can assist. The technical assistance we provide focuses on the following:

- **Public Health Services/Programming**: Services and Program priorities are determined by tribal nations. Staff work with tribes to assist in multiple program areas including: Community health needs assessments; public health strategic planning, grant writing and other areas as determined by tribal priorities.

- **Public Health Research**: The typical research paradigm includes research priorities that are determined by the research community. In a tribally-driven research paradigm, it is the tribe that sets its own research agenda. Staff work with tribes to assist in multiple research areas including: Indigenous Evaluation; technical assistance in research processes; study design and research based grant writing; and other research priorities as determined by the tribes.

- **Public Health Education**: A tremendous need exists to expand the American Indian (AI) public health workforce. A top priority of ours is to engage tribal colleges to develop public health training programs at the undergraduate level and to build bridge programs to the MPH and AI Public Health Graduate Certificate Program. Staff work with tribes to assist in public health education areas including: Developing an undergraduate public health curriculum in partnership with tribal colleges; developing public health education materials for community members, tribal leaders, and other key stakeholder groups; increasing the public health workforce, and providing education related technical assistance and grant writing priorities as determined by the tribes. Staff are working with the MPH Program to integrate AI content through guest lectures and panels.

- **Public Health Policy**: As sovereign nations, tribes are able to develop their own health policies to improve the health status and provision of health services in their communities. Staff from AIPHRC work with regional tribes to assist in multiple policy areas, including: 638 Feasibility Studies; tribal health promotion policies; tribal health and safety codes; coordination of policies and data sharing agreements with the state health departments, local public health agencies; and policy related technical assistance and grant writing priorities as determined by the tribes.
Public Health Technical Assistance & Capacity Building

The American Indian Public Health Resource Center provides technical assistance and capacity building services utilizing each Program Manager’s expertise in public health research, policy, education, and services. We work utilizing a team-based approach, where our program managers are involved in every technical assistance request. This allows for a unique and comprehensive insight to public health. Our approach allows us to continue on with projects seamlessly regardless of staff transitions.

Public Health Research Technical Assistance

This year, our research technical assistance included a variety of community health assessments and data sovereignty efforts. Research technical assistance highlights include:

- AIPHRC provided TA services to Chalsey Snyder, City of Fargo, Native American Commission Member, to create a collaboration to house and share data and statistics that will help build the infrastructure needed to develop a 501(c)(3) that will focus on Native Programming in the Fargo area.

- On March 20, 2020, AIPHRC began working with the North Dakota Indian Affairs Commission, to develop the North Dakota Tribal COVID-19 Needs Assessment. The purpose of this research is to assist North Dakota Tribal Nations in self identifying policies, plans and resources needed to prevent and respond to COVID-19/novel coronavirus. The goal is to identify solutions and tribal needs around pandemic responses so tribal governments can be more proactive in their responses to the public health crisis facing their communities. AIPHRC conducted key informant interviews of Tribal Leaders and point people in the COVID-19 pandemic with ND Tribes. Participants responded to a 15 question survey over the phone and/or online asking about communications and emergency response plans related to the COVID-19/Coronavirus pandemic. A report will be developed and will be shared with ND Tribal Nations and ND Indian Affairs Commission.

- Beginning on April 28, 2020, AIPHRC has been working with the Fort Berthold Housing Authority on their Employee COVID-19 Health Risk Assessment. The AIPHRC team met with Coby Rabbithead, Fort Berthold Housing Authority Administrator to develop the online survey for employees to get their thoughts and perceptions of returning to work during the COVID-19 pandemic. AIPHRC will analyze results once the link is closed. A report will be developed and give to the Housing Authority Staff.

Technical Assistance Timeline

- 7/12/2019, 7/19/2019, 8/23/2019
- 10/24-25/2019 – Mandan, Hidatsa, Arikara Nation Child Safety Center Strategic Planning and Workgroup Facilitation

- 7/29/2019 – Michael Splaine, and Alzheimer’s Association/CDC – AIPHRC host/sponsor webinar on the Healthy Brain Initiative Road Map for Indian Country

- 8/1/2019 – Jeannie Krull, North Dakota Assistive Technology, Expand services into tribal communities

- 8/1/2019 – Cody Severson, Share House, Cultural awareness and cultural programs for Native American clients (Talking circles, sweats for males and females, etc.)


- 9/10/2019 – Kim Russel, Arizona Advisory Council on Indian Health Care, Info on FMAP legislation and tribal care agreements

- 11/20-21/2019 – Tribal Maternal and Child Health Symposium hosted by the Standing Rock Sioux Tribe

- 11/26/2019 – Chalsey Snyder, City of Fargo Native American Commission, Assistance on how to create a collaboration to share data and statistics to help build infrastructure needed for Native Programming 501C3

- 12/3-4/2019 – Leech Lake Band of Ojibwe Tribal Opioid Response Strategic Planning

- 1/9/2020 – Mary Larson (On behalf of Atomic Coffee), Meet with Atomic Coffee manager and provide guidance regarding homeless Native Americans

- 2/3/2020 – Sandra Irwin, Hualipai Tribe Public Health Accreditation Assessment and Consultation funding to support work

- 2/9/2020 – Jacklyn Haak, NDSU Dept. of Nursing, Request for Gretchen Dobervich to guest lecture in Public Health Nursing Class on Public Health Advocacy
and Board, and Tribal Council to better inform their return to work plan.

- On June 1, 2020 AIPHRC received a technical assistance request from Julie Casey, Leech Lake Band of Ojibwe, to serve as a third party evaluator for an Administration for Community Living Grant they were applying for that focused on educating on brain health and dementia on the Leech Lake Reservation. AIPHRC staff drafted evaluation language for the grant and provided a letter of commitment for the project.

Public Health Education Technical Assistance

Our public health education technical assistance this year involved working with Indigenous youth on the Standing Rock Sioux Tribe, guest lecturing, resource sharing, and fact sheet development. Education technical assistance highlights include:

- In August 2019, with 20 youth leaders from the Standing Rock Sioux Tribe we launched the Native STAND (Students Together Against Negative Decisions) Culture Camp. Native STAND is a sexual health education curriculum that is comprehensive, medically accurate, and culturally responsive for Native youth. We talked about real-life topics that Native youth face all while centering culture and tradition. Our community partners were from the Standing Rock Youth Council, Standing Rock Community Development Corporation’s Youth Development Program, Indigenized Youth, the Standing Rock Sioux Tribe Tribal Wellness Program, and the Partnership to Advance Tribal Health.

- AIPHRC researched and developed “Mourning in the Midst of COVID-19” Fact Sheet for Brad Hawk, North Dakota Indian Affairs Commission.

- In April 2020, AIPHRC linked Tasha Pelletter, Quality Health/Standing Rock Sioux Tribe and Stephanie Jay, Turtle Mountain Band of Chippewa Health Educator, to COVID-19 Contact Tracing Training resources.

Public Health Policy Technical Assistance

This year’s policy technical assistance efforts went towards policy advocacy and research and including working with diverse sectors across the country. Policy technical assistance highlights include:

- Beginning in July 2019, AIPHRC began working with Connie Azure, Special Projects Coordinator to the Chairman of the Mandan Hidatsa Arikara Nation to provide strategic planning and workgroup facilitation for their new Child Safety Center. The MHA Child Safety Center was developed by a multidiscipl
A comprehensive team to address the increased incidences of child abuse and neglect on the Fort Berthold Indian Reservation. This team includes representatives from tribal programs, including Children and Family Services, MHA Law Enforcement, Judicial Services, Substance Use Treatment Programs, and the MHA Tribal Chairmen’s Office. The tribe contacted us to develop a comprehensive strategic plan and scorecard. AIPHRC Policy Manager, Gretchen Dobervich also researched and provided accreditation standards for the Child Safety Center through the National Children’s Alliance.

- On July 29, 2019, AIPHRC received a TA request from Michael Splaine, and the Alzheimer’s Association for AIPHRC to host/sponsor a webinar on the Healthy Brain Initiative Road Map for Indian Country. AIPHRC hosted, promoted, and presented on the webinar which was held on November 6, 2019 and had over 53 attendees. *Important Note – AIPHRC staff Ryan Eagle and Gretchen Dobervich also reviewed and edited the Health Brain Initiative Road Map document.

- After AIPHRC’s August 2019 Community Health Assessment and ND Policy Update presentations at the 2019 Community Health Representative Summit in Arizona, we received a TA request from Kim Russel, Arizona Advisory Council on Indian Health Care to provide more information on ND’s FMAP legislation and tribal care agreements so they could be used as templates for their efforts in AZ.

- Sandra Irwin, Hualipai Tribe, has requested technical assistance to help with their Public Health Accreditation Assessment and to assist in obtaining funding to support work. AIPHRC is currently actively searching for funding opportunities to assist the Hualipai Tribe.

- Brad Hawk, ND Indian Affairs Commission, contacted AIPHRC in April 2020 regarding needing our services in researching guidelines for tribal elections during COVID-19. Gretchen Dobervich, Policy Project Manager was able to link the ND Indian Affairs Commission with the proper resources.
• In April 2020, Scott Davis, Executive Director of the ND Indian Affairs Commission contacted AIPHRC to assist in drafting the ND Tribal Pandemic Response Plan. The plan was adapted from NM Tribal Pandemic Response Plan and AIPHRC updated it to fit North Dakota specifically.

• In June 2020, Stephanie Jay, Turtle Mountain Band of Chippewa Tribal Health Educator and Petra One Hawk-Harmon, Standing Rock Sioux Tribe’s Elder Nutrition Program Director, collectively sought out technical assistance from AIPHRC regarding policy recommendations for the NDDHS and ND Tribal Nations Coordinated Care Agreement legislation as well as assistance on developing a FMAP strategy for 2021 ND Legislative Session.

Public Health Services Technical Assistance

This year’s services technical assistance included connecting partners and programs to the proper resources. Health services technical assistance highlights include:

• In August of 2019, AIPHRC Staff engaged with ShareHouse, an organization that provides personalized addiction recovery services for individuals, families and community in the region. They sought out our assistance to identify cultural resources including cultural program and awareness initiatives (i.e. talking circles, sweats, spiritual healers/speakers).

• The AIPHRC team consulted with Jeannie Krull, North Dakota Assistive Technology on how they can expand their services into tribal communities.

• In November 2019, AIPHRC planned and coordinated the 4th Annual Tribal Maternal and Child Health Symposium hosted by the Standing Rock Sioux Tribe at the Prairie Knights Casino. This year’s symposium focused on topics such Tribal best and promising practices, Neonatal Abstinence Syndrome, the newly
released Pregnancy Risk Assessment Monitoring System (PRAMS) data where ND tribal populations were oversampled, Lateral Oppression in Maternal and Child Health, ND Kids Count Update, and other great presentations like “Working to Improve the Health of All Children in North Dakota.” We had over 56 attendees from across the region and will be hosting the 2020 Tribal Maternal and Child Health Symposium virtually.

- In December of 2019, AIPHRC staff provided strategic planning to the Leech Lake Band of Ojibwe’s Tribal Opioid Response Program. The Tribal Opioid Response Program’s goal is to assess opioid prevention activities in the community to ensure services aren’t duplicated and all opioid prevention efforts in Leech Lake are coordinated. AIPHRC has assisted in analyzing their Sober Squad Community Picnic Surveys, developed a strategic plan, and is currently conducting data analysis of their Leech Lake Tribal Workforce Opioid Knowledge Assessment.

**COVID-19 Response**

When the COVID-19 pandemic reached the US, the American Indian Public Health Resource Center reached out to ND Tribal Nations and offered assistance to aid in their prevention and intervention efforts. The AIPHRC and the North Dakota Indian Affairs Commission (NDIAC) meets multiple times each week to update and coordinate efforts. As a result of these meetings, the AIPHRC developed and is conducting a COVID-19 Tribal Needs Assessment to assist ND tribal nations and the North Dakota Indian Affairs Commission to identify needs and strategies for responding to the recent increase in cases in ND, as well as the predicted “second wave” in the Fall of 2020. NDResponse.gov, the state of North Dakota’s emergency information website, added a specific link to resources for Native Americans at [www.indianaaffairs.nd.gov/initiatives/healthcare/covid-19-tribal-information](http://www.indianaaffairs.nd.gov/initiatives/healthcare/covid-19-tribal-information).

The American Indian Public Health Resource Center worked with NDIAC and conducted a literature review, and provided resources for inclusion on the website. When wakes, funerals and feeds were identified as potential “hotspots” for transmission in tribal communities, the AIPHRC developed a fact sheet, “Mourning In the Midst of the COVID-19/Coronavirus Pandemic,” on the risks of attending wakes and funerals, and ways to reduce those risks. The NDIAC posted it on NDResponse.gov and disseminated it to tribal nations in ND ([www.indianaaffairs.nd.gov/sites/www/files/documents/Mourning%20In%20the%20Midst%20of%20COVID.pdf](http://www.indianaaffairs.nd.gov/sites/www/files/documents/Mourning%20In%20the%20Midst%20of%20COVID.pdf)).

The NDIAC reached out to the AIPHRC to adapt a tribal COVID-19 response plan from another state they wanted to utilize. The AIPHRC adapted the materials and designed a document which was disseminated to tribal nations in ND, and posted on NDResponse.gov ([www.indianaaffairs.nd.gov/sites/www/files/documents/NDIAC%20COVID%20Response%20Plan%202020%20docx.pdf](http://www.indianaaffairs.nd.gov/sites/www/files/documents/NDIAC%20COVID%20Response%20Plan%202020%20docx.pdf)).

All AIPHRC employees have been trained by the ND Department of Health to provide contact tracing and case surveillance for COVID-19. We recently met with the North Dakota Department of Health and the Standing Rock Sioux Tribe, at their request, to further develop the role that AIPHRC could play to support ND tribal nations in tracing, surveillance and other COVID-19 related technical assistance needs.

The Fort Berthold Housing Association in Mandan Hidatsa Arikara Nation requested technical assistance in assessing the thoughts and perceptions of employees returning to work during the COVID-19 pandemic. An assessment was created in partnership with housing stakeholders. AIPHRC developed an online Qualtrics survey link for housing employees to easily take. The link is live with 23 of 27 employees completing the survey. A report will be developed for the Housing Authority to allow them to make better informed decisions for their employees.

The North Dakota Native Non-Profit COVID-19 Assessment is currently in progress. The ND Native Nonprofit Network (NDNNN) was established to assist Native families in North Dakota with immediate needs resulting from the COVID-19 global pandemic. NDNNN approached AIPHRC to assist them in conducting a statewide assessment of Native families to determine their needs as they face COVID-19.
Collaborations

ACE Data to Action Grant Planning Mtgs.
Fargo Native American Commission Mtg.
Fargo Youth Works Meet and Greet
Health Resources in Action National Maternal Health PCOR Network (NMHPN) Potential MCH Collaboration
National Indian Health Board: Tribal Caucus COVID-19 Webinar
ND Assistive Technology Mtg.
ND Conference of Social Welfare
ND Health Equity Stakeholder Mtg.
ND Indian Affairs Government to Government Mtg.
ND Main Street Initiative Summit- Health in All Policies Panel Facilitation
ND Tribal Consultation Mtg.
ND Tribal Health Data Committee Mtg.
NDSU Grandmother’s Garden Relocation Mtg.
NDSU Indigenous Alliance Planning Mtg.
NDSU Multicultural Recruitment Mtg.
North Dakota Indian Affairs Commission COVID-19 Response Check-Ins
Northern Plains Conference on Aging and Disability

Collaborations/Engagement

At the heart of the work that we do is developing meaningful partnerships and collaborations with partners who have a vested interest in American Indian public health and health equity. The team works closely with multiple sectors throughout the state of North Dakota, the Northern Plains region, and nationally. Our staff are involved in a number of workgroups that are both AI-lead and guided. We often find ourselves the only Indigenous-represented voice in much of our collaboration work.

North Dakota State University Partners

Being housed within North Dakota State University has allowed for collaborations with multiple departments within the University. Our center is currently collaborating with NDSU on several initiatives focusing on inclusion and health equity.

- **Grandmother Earth’s Gift of Life Garden renovation.** The garden was designed on NDSU’s campus in 2009, in honor of American Indian culture and its purpose is to connect Indigenous people on campus to their cultural origins and to provide others on campus with a touchstone to the original occupants of the land and its utility. Due to renovations on NDSU’s campus, Grandmother Earth’s Gift of Life Garden must be relocated. The AIPHRC team is collaborating with Jaclynn Davis Walle, Director of Multicultural Programs and Dr. Robert Pieri, Professor in Engineering to relocate, identify, and apply for funding sources to expand the garden. It is the committee’s hopes that the garden will offer various NDSU programs and many others a living classroom to explore local Indigenous contributions to agriculture, botany, engineering and medicine and will allow NDSU an opportunity to educate school-aged children in the surrounding areas on the history of the land on which they reside.

- **North Dakota State University Indigenous Alliance.** The Indigenous Alliance was developed in collaboration with the AIPHRC team and Heather Keeler, NDSU Admissions Assistant Director of Multicultural Student Recruitment to allow Indigenous students, staff, and faculty to come together to know that there are other Indigenous people and allies on campus. The Alliance allows students, staff, and faculty to come together to share a meal and meet to support Native-led initiatives on campus.

- **North Dakota State University Staff Senate.** Ryan Eagle, AIPHRC Research Project Manager is an elected senator on
the NDSU Staff Senate at North Dakota State University (NDSU) to represent NDSU staff interests, priorities and provide a voice to NDSU Administration from the staff perspective. Currently, Ryan is the only American Indian staff senator at NDSU.

- **Adverse Childhood Experiences (ACEs) Data to Action Grant.** The AIPHRRC team collaborated with Dr. Ramona Danielson, Public Health Research Assistant Professor on a grant application to the CDC that focuses on convening multi-sector stakeholders to assess current practices and improve data surveillance related to ACEs, utilizes data to guide and inform the alignment and implementation of evidence-based prevention strategies for priority populations, supports a public education campaign, and creates sustainable partnerships. Further, the project’s goals and objectives will build health equity and resiliency within the state through guidance from the ND Department of Health’s (NDDoH) State Health Improvement Plan (SHIP). If funded, this project will be for $500,000 per year for three years.

- **Civic Innovation Challenge: A Research and Action Competition in the Smart and Connected Communities Domain.** The NDSU Upper Great Plains Transportation Institute (UGPTI) has submitted a proposal for a National Science Foundation grant titled “Addressing the Spatial Mismatch between Affordable Housing and Jobs and Enhancing Access to Food and Health Care in American Indian Communities.” Dr. Denver Tolliver, UGPTI Director and Joy Annette, UGPTI Tribal Liaison are working with Dr. Pamela Jo Johnson, Chair, Department of Public Health and the AIPHRRC on a pilot project whose long-term goal is a partnership between tribal communities, federal and state agencies, and universities that facilitates the exchange of research ideas and civic priorities, identifies mobility options to address the spatial mismatch between housing affordability and jobs, and improves access to food and health care for tribal communities. The AIPHRRC team contributed to proposal development and if funded, will be a collaborator on the project. This planning grant (Stage 1) is for 4 months for $50,000. Full proposals (Stage 2) will be for an additional 12 months for up to $1,000,000.

- **New Beginnings for Tribal Students.** Dr. Canan Bilen-Green, Vice Provost, Faculty Affairs and Equity, is working with Jaclyn Wallette, Heather Keeler, and Dr. Ramona Danielson to apply for an USDA grant. If funded, the project is intended to improve recruitment, retention, and graduation for Indigenous students and give NDSU a structure for self-assessment about how to best partner/contribute to meeting the higher education needs of Indigenous people in North Dakota. The project being proposed is about getting input from Indigenous members of the NDSU community and other stakeholders, as well as to provide financial support for a students’ component. AIPHRRC will serve as advisory council members if the project is funded.

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**Committee Representation**

- American Public Health Association American Indian/Alaska Native/Native Hawaiian (APHA AI/AN/NH) Caucus Members
  - APHA AI/AN/NH Caucus Planning Committee Co-Chair
  - APHA Missing and Murdered Indigenous Women and People (MMIWP) Policy Workgroup
    - Indigenous Association
  - National Maternal Health Patient Centered Outreach Research (PCOR) Network
    - ND DoH Work As One Integration Committee
  - ND Public Health Association
  - ND Public Health Association American Indian Public Health Committee
  - ND Public Health Performance Improvement Task Force
  - ND Rural Health Association
  - ND Tribal Medicaid Advisory Committee
  - NDDoH Health Equity Committee
  - North Dakota State University Staff Senate
  - Northern Plains Conference on Aging Planning Committee
project is funded.

- **DaCCoTA Basic Scholars Program.** Dr. Ivan Lima, Associate Professor, NDSU Department of Electrical and Computer Engineering approached the AIPHRC to provide support on his grant proposal to the DaCCoTA Basic Scholars Program titled “Biosensor for the Follow-Up of Cancer Patients in Rural Underserved Communities.” The primary goal of this project is to develop a biosensor technology for use in the screening of cancer patients in the point-of-care of the rural communities of American Indians. AIPHRC drafted a letter of support and if funded, AIPHRC will assist during the implementation phase of the project as a tribal liaison.

- **CDC High Obesity Prevention (HOP) Project.** NDSU Extension Office in partnership with Department of Public Health professors Dr. Ramona Danielson and Dr. Mary Larson have received CDC funding to focus on obesity prevention in the ND Tribal Communities of Turtle Mountain and Standing Rock. AIPHRC Policy Project Manager, Gretchen Dobervich completed a policy matrix of all policies impacting American Indian obesity.

### Fargo-Moorhead Area Partners

Since the American Indian Public Health Resource Center is located in the Fargo-Moorhead area, it has allowed us the opportunity to form strong partnerships with Native-led organizations within the community.

- We have met with Brandon Baity at Youthworks in Fargo, ND to look at the potential to implement the Native STAND (Students Together Against Negative Decisions) curriculum with an afterschool program of Native students that he runs. AIPHRC has also presented at the Fargo Native American Commission Meeting and has gotten support to implement in Native STAND in the community.

- Our center has also been collaborating with Fargo’s Indigenous Association. The Indigenous Association was established to connect, strengthen and unite the Indigenous community of Fargo, ND/Moorhead, MN. Ryan Eagle, Research Project Manager serves as the Treasurer on the Indigenous Association Board of Directors, where they are currently working to establish a safe and inclusive space that is worthy of the diverse Indigenous community of Fargo/Moorhead by collaborating and building capacity through education, awareness, advocacy and respect to sustain Indigenous programs for future generations.

### State of North Dakota Partners

We value our longstanding partnerships we’ve developed throughout the state of North Dakota and have collaborated with the North Dakota Department of Health, the North Dakota Indian Affairs Commission and other North Dakota partners providing services to Indigenous populations.

- The North Dakota Department of Health *(ND DoH)* **Health Equity Committee** meets every third Monday of the month. AIPHRC has been involved with this committee since health equity became a focus of the ND Dept. of Health in 2018 and created at .5 FTE position to focus on Health Equity. At committee meetings state health equity updates are given and partners are able to share any updates they might have.

- The **North Dakota Department of Human Services** (DHS) hosts **quarterly Tribal Consultation Meetings** with tribal nations and their representatives in ND. This year, ND DoH has collaborated with DHS on the meeting. ND DoH was able to give updates on tribal-specific initiatives and tribes were able to ask questions and give updates. AIPHRC staff attended the last two meetings to identify topics of concern and priorities of ND tribal nations we can focus on.
NDOH, ND DHS, and ND Indian Affairs began meeting quarterly with ND Tribal Nations regarding Medicare reimbursement, service delivery and contracts. AIPHRC attends these meetings as an additional resource for Tribes.

AIPHRC attended the ND Conference on Social Welfare and vended to share information and promote collaborations.

The Health in All Policies Panel was facilitated by Gretchen Dobervich, Policy Project Manager at ND Governor’s ND Main Street Initiative Summit.

The North Dakota Indian Affairs Commission works closely with ND tribal nations on a variety of topics across Indian Country including health care. AIPHRC has been collaborating with Indian Affairs staff Scott Davis, Executive Director and Brad Hawk, Indian Health Systems Administrator on several COVID-19 initiatives.

Our center is working closely with Alisha Acker, HRSA Region 8 Deputy Regional Director on. We have collaborated on Maternal and Child Health initiatives as well as with tribal telehealth initiatives.

**National Partners**

The American Indian Public Health Resource Center values its national partners and appreciates the opportunities to be able to uplift the Indigenous voices in the Northern Plains. National collaborative projects this year focus on Maternal and Child Health, Missing and Murdered Indigenous Women, Health Equity, and Research.

AIPHRC has a newly formed collaboration with Health Resources in Action’s (HRiA) Maternal Health Patient Centered Outcomes Research (PCOR) Network. HRiA is a public health institute working to improve population health by catalyzing social change within and among individuals, institutions and communities. HRiA aims to increase the capacity and readiness of a national stakeholder group to address poor maternal health outcomes through patient-centered outcomes research (PCOR). To accomplish this, HRiA has convened the National Maternal Health PCOR Network (NMHPN) comprised of patients/patient representatives, researchers, clinicians, and other stakeholders to develop a PCOR national agenda to improve maternal health outcomes. AIPHRC is part of the NMHPN Steering Committee and participates in the PCOR working group as one of the only Indigenous representatives. Project aims include developing a shared understanding of patient-prioritized issues contributing to adverse maternal outcomes; and creating a patient-prioritized agenda that includes patient-centered research and related actions to reduce maternal morbidity.

**Trainings Attended**

- Accessing Healthy Foods in Tribal Communities During Covid-19
- Building & Measuring Community Power for Health Justice
- Care19 Case Worker/Case Manager Training
- Conflict Management Training
- Emotional Intelligence Training
- Is Teen Pregnancy Prevention Problematic? Webinar
- June 2020 Legislative Update and Establishing Legislative Tracking in the New Normal
- ND/ MN Community Forum - Rural Aging
- North Dakota Department of Health Contact Tracing Training
- Recognizing and Addressing Racial Injustice at NDSU was informed through the efforts of the NDSU Inclusion Committee. The Recognizing and Addressing Racial Injustice at NDSU is aimed at NDSU faculty and staff to prioritize diversity and inclusion and how to recognize and address racial injustice on the campus of NDSU.
- Rural Providers as allocated by the CARES Act
- Safe Zone Ally Training Level 1
- Safe Zone Ally Training Level 2
- Safe Zone Ally Training Level 3
Ryan Eagle, Research Project Manager sits on the NMHPN Steering Committee, and participates in the PCOR working group.

- AIPHRC team members have been caucus members of the American Public Health Association’s (APHA) American Indian/Alaska Native/Native Hawaiian (AIANNH) Caucus since 2014. The AIANNH Caucus works to promote equal opportunity and access for Indigenous peoples of North America and the Hawaiian Islands. The caucus also works with APHA to promote policy beneficial to Native health needs to assure quality care and equal access. As caucus members, we are provided mentorship opportunities, allowed to mentor Indigenous public health students, serve on committees addressing current public health issues and efforts, and obtain connections and potential collaborations on a national level and across the country.
  - The APHA AIANNH **Program Planning Committee** plans and implements the delivery of AIANNH Caucus sessions at APHA’s Annual Conference. This includes reviewing abstracts, endorsing sessions, grouping program themes, and identifying program sessions moderators. Vanessa Tibbitts, Program Leader currently serves as the Program Planning Committee Co-Chair.
  - The APHA AIANNH **Missing and Murdered Indigenous Women (MMIW) Policy Planning Committee** meets to develop an policy on MMIW that will be presented and supported by APHA. The committee is currently conducting an MMIW literature review and hosting a national webinar series focusing on tribal, urban, federal, and organizational initiatives. Lessons learned will be drafted into a comprehensive policy to present to the APHA Governing Council. Vanessa Tibbitts, Program Leader, currently sits on the MMIW Policy Planning Committee.

- Academy Health and the Robert Wood Johnson Foundation have convened a Learning Community of approximately 100 diverse, dynamic thought leaders and innovators from several fields to create the **Paradigm Project**, a new initiative to transform health services research (HSR). The Paradigm Project goal is to dramatically enhance the relevance, quality, timeliness, and impact of HSR. Because such disruption will require the participants to move beyond the traditional paradigm – to recognize and transcend the
assumptions and expectations that have hitherto governed the field’s experience, the Paradigm Project employs the mindset and tools referred to as “design thinking” or “human-centered design.” Ryan Eagle, Research Project Manager is an invited member of the Paradigm Project and serves as the only American Indian representative on the project.

- **Community Research for Health Equity (CRHE)** is a new grant-making program of the Robert Wood Johnson Foundation that seeks to meaningfully involve community members in research about local health and health care issues and elevate their voices in local health care system transformation efforts. The goal of CRHE is to support community-engaged research projects that inform policies in local health care systems with the aim of making these systems more responsive to the priorities, values, and needs of the people they serve. Ryan Eagle, Research Project Manager has been selected to serve as a CRHE planning group member.

**We’ve Expanded Our Knowledge**
The American Indian Public Health Resource Center team are always looking at ways to improve our services. This year, we attended some great trainings and have expanded our knowledge especially around COVID-19 pandemic and health equity & social justice initiatives. Some highlights include:

- **ND DoH’s COVID-19 Case and Contact Investigation Training.** In May 2020, all AIPHRC team members completed North Dakota Department of Health’s COVID-19 Case and Contact Investigation Training. The online training contained 10 modules that were an hour long and ranged from topics like: *Conducting a Case Investigation, Monitoring a Case of COVID-19 and their Close Contacts, Monitoring Close Contacts, HIPAA Awareness*, among others.

- **Safe Zone Ally Training.** AIPHRC team members Gretchen Dobervich and Ryan Eagle have completed Safe Zone Ally Training. Safe Zone is designed to educate people about sexual orientation and gender identity/expression issues; create a visible network of Allies to provide support to the NDSU lesbian, gay, bisexual, transgender, queer, and questioning (LGBTQ) community; and provide accurate information about sexual orientation and gender identity/expression diversity, issues, and resources within the community.

- **Recognizing and Addressing Racial Injustice at NDSU Training.** On June 11, 2020, AIPHRC attended this event which was informed through the efforts of the NDSU Inclusion Committee, the training is aimed at NDSU faculty and staff to prioritize diversity and inclusion and how to recognize and address racial injustice on the campus of NDSU.

- **Building and Measuring Community Power for Health Justice.** On June 24, 2020, Gretchen Dobervich attended the webinar hosted by the Praxis Project. This webinar discussed: What is community power? How do grassroots organizations build power within their communities? & Considerations for evaluating power from a public health approach.
We’ve Shared Our Knowledge with Others
The American Indian Public Health Resource Center enjoys presenting on our initiatives and highlighting our partner’s efforts. We present on a local, regional and national level. Some of our presentation highlights include:

- “Native STAND (Students Together Against Negative Decisions) Culture Camp” was held at the Wité Building, in Fort Yates, ND. We talked about real-life topics that Native youth face all while centering culture and tradition. AIPHRC partnered with the Standing Rock Youth Council, Standing Rock Community Development Corporation’s Youth Development Program, Indigenized Youth, the Standing Rock Sioux Tribe Tribal Wellness Program, and the Partnership to Advance Tribal Health to hold this day camp before school started on 8/11-17/2019.

- “Conducting Community Health Assessments in Tribal Communities” Concurrent Breakout Session at Community Health Representatives Summit V: “CHRs into the Future, Still Going Strong” in Tucson, AZ. On 8/21/2019 AIPHRC led an interactive breakout session that went through the process of conducting community health assessments (CHA) with Tribes. We covered topics like developing a CHA budget to identifying and building stakeholders. On 8/22/2019 Gretchen Dobervich gave a presentation titled “Policies to Make CHR Services Medicaid Billable.”

- “Health Equity and Social Justice: Bridging the Gap in a Rural Frontier State” Poster Session and “Indigenous Driven Evaluation: Strengthening Tribal/State Collaborations through Tribally Led Initiatives” Oral Session. AIPHRC Team presented our poster based on findings from ND’s first Health Equity & Social Justice Symposium that was hosted, facilitated, and evaluated by our center. We also partnered with the Minnesota Department of Health to present on Indigenous Evaluation and the importance of Tribal/State collaborations at the American Public Health Association’s 2019 Annual Meeting and Expo on 11/2-6/2019 in Philadelphia, PA.

- “Facing Alzheimer’s in American Indian/Alaska Native Communities: A Public Health Approach” webinar was hosted and facilitated by AIPHRC. Gretchen Dobervich presented on and facilitated discussion on “What Do We Mean by a Public Health Approach” on 11/7/2019.

- “An Indigenous Driven Evaluation Framework: Strengthening Tribal/State Collaborative Evaluation of Tribal Led Initiatives” presentation at the American Evaluation Association Conference in Minneapolis, MN on 11/15/2019. The AIPHRC Team partnered with the Minnesota Department of Health’s Office of Statewide Health Improvement to present on groundbreaking collaborative work in evaluation state-funded activities in tribal communities.


Working toward the Future
For the 2020-2021 fiscal year, AIPHRC is hoping to continue to work towards becoming a sustainable resource for Indigenous-serving institutions. We are continuing to build upon partnerships and collaborations with the National Network of Public Health Institutes (NNPHI), within NDSU, with tribal nations, and with our surrounding states.

National Network of Public Health Institutes Collaborations
Being a member of NNPHI has offered AIPHRC unique opportunities. We are hoping to further build on our NNPHI partnerships and receive more contracts that can connect tribal communities to more resources. This year, we are collaborating on the following:

- **MyMobility Tool Evaluation.** AIPHRC received an $84,000 contract to evaluate CDC’s MyMobility Tool with Elders and Elder-serving programs in Tribal Nations. The National Network of Public Health Institutes (NNPHI) received an award from the Centers for Disease Control and Prevention (CDC) entitled, “Designing a Qualitative Assessment that Considers the Effectiveness of the CDC Mobility Tool, MyMobility Plan - A Plan to Stay Independent - STEADI Mobility Tool Assessment”. The NNPHI Evidence to Action (E2A) team will lead the design and provide technical assistance to the NDSU American Indian Public Health Resource Center (AIPHRC) to conduct an assessment that considers the clarity and reliability of the CDC mobility tool core components including self, home, and neighborhood in Native American communities. The primary objective is not to produce statistical data that can be generalized to an entire population. Rather, the objective is to provide an in-depth exploration of particular concepts, processes and patterns of interpretation. Primary goals are to determine whether the MyMobility Plan is being interpreted as intended. That is, if they are capturing aspects of the selected functional domains; and determine whether questions are interpreted consistently across countries and among subpopulations. The goal of this research is to conduct an evaluation of the effectiveness of the MyMobility Plan CDC mobility tool and assess the mobility challenges of older adults in Native American communities. The AIPHRC will interview and assess service staff from organizations that serve Native American elders. In phase 2 of the project we will be interviewing elders.

- **Paradigm Project.** Due to being a member of NNPHI, Ryan Eagle, Public Health Research Project Manager was noticed and asked to be a part of thought leaders changing research. Ryan is the only Indigenous Researcher in the project.

- **Maternal Health PCOR Network.** The PCOR network collaboration was also made possible through NNPHI. AIPHRC has a newly formed collaboration with Health Resources in Action’s Maternal Health PCOR Network. Health Resources in Action (HRiA) is a public health institute working to improve population health by catalyzing social change within and among individuals, institutions and communities. AIPHRC and HRiA are looking at ways to further collaborate on MCH/COVID-19 initiatives. We provided a LOS for a proposal they submitted to be part of a diverse COVID-19 work group.

Promoting and presenting on AIPHRC’s 638 Toolkit
The American Indian Public Health Resource Center is also in the process of finalizing edits to the 638 Toolkit. Edits will go through a review process and the toolkit release will begin with a webinar. Hard copies of the toolkit will be printed and shared with interested parties. Tribes will have the opportunity to contract with our center to go into further detail on the 638 process with trainings and assessments.

FMAP Work
Under new law in 2017, the Centers for Medicare and Medicaid (CMS) guidelines began paying 100% of the Federal Medical Assistance Percentage (FMAP) for all American Indian and Alaskan Native enrolled members of federally recognized tribes. Each state has an FMAP that they are responsible for paying towards Medicaid cov-
average, in North Dakota this is 50%. Under the new ruling, this 50% of state responsibility now paid by the federal government could be utilized through formal tribal-state agreement for investments in tribal nation’s health systems and infrastructure.

In the 2019 North Dakota Legislative Session a bill was introduced which would provide a 70:30 split of the ND Tribal FMAP dollars between the North Dakota Tribal Nations and the state of North Dakota. In the end, the bill was passed and signed into law with a 60:40 split and the spending restrictions.

To capture these funds, tribal nations need to sign care coordination agreements with the State of North Dakota. To date, the two tribes who self-manage their health care have not participated. Two of the three tribes who receive health services from Indian Health Services had care consultation agreements signed by Indian Health Services without proper tribal consultation, making the agreements invalid. The American Indian Public Health Resource Center has been contacted by two of the tribal nations in North Dakota and asked to provide technical support regarding amending the existing FMAP law in the North Dakota 2021 Legislative Session. We are excited the American Indian Public Health Resource Center is available to provide policy technical assistance to tribal nations as they exert their sovereignty and improve the health outcomes in their communities. Thank you to funding from the Helmsley Foundation the American Indian Public Health Resource Center has been available to assist tribal communities in forwarding their public health policy work.

**Partnering with Programs and Tribes**

A key to success for any program or initiative in Indian Country is collaboration with and among other tribal nations, programs, or organizations to leverage resources and to build relationships, capacity, and perspective for success. The AIPHRC recognizes the vital importance of collaborating with other programs and Tribes to accomplish our deliverables, and we will continue to leverage our partnerships to advance American Indian public health and address health equity for tribal nations.

The American Indian Public Health Resource Center continues to expand its connections and grow relationships with other programs and tribes. The MyMobility Tool Evaluation contract we secured has allowed us to connect with tribal nations in the Pacific Northwest and Southwest, and provide them information about who we are and what we do. The Tribal Maternal, Infant and Child Health Symposium was not only attended by representatives from North Dakota, but other states in the Great Plains Region. The symposium has become a forum for tribes to share their innovative programs and best practices with each other. The work of the American Indian Public Health Resource Center has not only been to increase our collaborations, but to foster collaborations across Indian Country. Future Tribal Initiatives include:

**Mandan Hidatsa Arikara Nation**

- AIPHRC has been working with the Fort Berthold Diabetes Program who has the support of the Tribe to conduct a comprehensive community health assessment for the Mandan Hidatsa Arikara (MHA) Nation. MHA has not had a community health assessment since 2007. We are actively seeking for funding to conduct the assessment.
- We are currently evaluating a Robert Wood Johnson project titled “Building Resiliency Building Health” in MHA Nation with Elbowoods Memorial Health Center. This project focuses on youth suicide on the Fort Berthold Reservation.
- MHA Nation has agreed to host the 2021 Tribal Maternal and Child Symposium. The 2020 Tribal Maternal and Child Health Symposium will be held virtually and a planning committee is currently being developed.

**Standing Rock Sioux Tribe**

- AIPHRC has been in conversations with the Standing Rock Sioux Tribe’s COVID-19 Contact Tracing Manager to provide assistance.
We are facilitating conversations with multiple sectors across the Standing Rock Sioux Tribe to conduct a comprehensive community health assessment. AIPHRC is currently looking for funding for the assessment which has recently been put on hold due to COVID-19.

We are collaborating with Standing Rock Sioux Tribe’s Elder Nutrition Director on FMAP Legislature and have partnered with her on the MyMobility project.

### Turtle Mountain Band of Chippewa Indians

- We are working with Stephanie Jay, Turtle Mountain Health Educator and Councilman Nathan Davis on FMAP Legislature.

### Applying for grants and contracts

AIPHRC constantly reviews grant funding opportunity announcements not only for our center but also for our partners seeking resources. We are also actively seeking contractual work and currently hold open contracts with the following:

- **MHA Building Resilience, Building Health Evaluation Project.** Dates: October 2018 – September 30, 2020. Amount: $5,000.00. The Building Resilience, Building Health intervention seeks to implement primary, secondary, and tertiary prevention regarding conversations about suicide in Native American communities. AIPHRC will monitor program through pre and post-test measurements; analyze and evaluate pre and post-tests; monitor quarterly suicide rates of adolescents in community; and measure suicide rates and social supports at end of project.

- **“Designing a qualitative assessment that considers the effectiveness of the CDC mobility tool, MyMobility Plan – A Plan to Stay Independent - STEADI Mobility Tool Assessment” Project.** Dates: December 1, 2019 to December 31, 2020. Funding: $84,000.00. AIPHRC will utilize interviews and/or focus groups
to determine any gaps or opportunities to strengthen the mobility tool as it undergoes testing and development. Instruments should also capture mobility-related aging experiences among elders in Native American communities. Participants must include 25-30 mobility tool recipients plus online survey participants.

- **Native American Social Emotional and Cultural Competency Project.** February 1, 2018 to December 31, 2020. Funding: $7,000.00. AIPHRC will provide assistance in the development of research questions; review and transcribe interview findings; analyze data; and develop final report.
- We are also working with the City of Fargo to develop and budget and scope of work for the Sweat Lodge Assessment which will help with ways to improve the city-owned sweat lodge.

AIPHRC has applied for the following grants that are pending:

- **Gates Grand Challenges** for $100,000.00 to develop and implement culturally-tailored COVID-19/Coronavirus rapid response campaigns to build robust tribal public health awareness and to lay the groundwork for future tribal health campaigns.
- **Adverse Childhood Experiences Data to Action** for $500,000 for 3 years. If funded, this project will focus on convening multi-sector stakeholders to assess current practices and improve data surveillance related to ACEs, utilizes data to guide and inform the alignment and implementation of evidence-based prevention strategies for priority populations, supports a public education campaign, and creates sustainable partnerships. Further, the project’s goals and objectives will build health equity and resiliency within the state through guidance from the ND Department of Health’s (NDDoH) State Health Improvement Plan (SHIP).

**Working with Helmsley Charitable Trust in the future**

Helmsley provided the financial foundation on which the AIPHRC was created, and on which it has grown over the past six years. The impact and reach of the partnership created between Helmsley and NDSU through the AIPHRC on the health and well-being of tribal nations across the United States is profound. Much has been accomplished over the past six years, but much also remains to be done to continue advancing American Indian public health. The AIPHRC wants to continue and build upon our partnership with Helmsley Charitable Trust into the future so we can carry on the work and impact of the Center for our tribal nations.

The American Indian Public Health Resource Center has been actively pursuing funding to carry on our work which could not have been possible without generous investment by the Helmsley Charitable Trust. The vast connections, relationships developed in tribal nations across the US, incredible volume of direct public health technical assistance work completed, the American Indian Public health Resource Center has accomplished with the Helmsley Charitable trust’s financial support and partnership has established the American Indian Public Health Resource Center as a leading in American Indian Public Health education, research, services and policy technical assistance. As our organization’s relationship shifts away from direct financial support, the American Indian Public Health Resource Center is hopeful that the Helmsley Foundation will continue to promote them with in the philanthropy community as a good investment in health disparity reduction, as well as provide assistance in identifying funding opportunities related to the health equity work in tribal communities the American Indian Public Health Resource Center has become known for.

**Working with NDSU into the Future**

From our inception, the AIPHRC has worked to build support within the Department of Public Health and within North Dakota State University. As one of the only American Indian specific programs on the NDSU campus, we have strived to build relationships and support with administration, faculty and staff across NDSU. The work of the AIPHRC is truly unique to NDSU, so the fact that we have not received more institutional support than what we currently have is an area of concern to our team, and an area that we intend to focus greater attention on in the coming year.
AIPHRC Staff Profiles

AIPHRC utilizes a four pronged team-based approach highlighting staff expertise to public health by providing technical assistance to tribal communities focused on public health research, education, services and policy. AIPHRC values collaboration and has often collaborated with tribes, states, regional, and national stakeholders.

Vanessa Tibbits is an enrolled member of the Oglala Sioux Tribe and serves as the Program Leader for the American Indian Public Health Resource Center. Vanessa has worked in public health for the last 15 years with tribal nations focusing on various topics including commercial tobacco prevention, maternal and child health, and utilizing culture as prevention. She has experience in conducting focus groups and facilitating conversations, and action planning with diverse stakeholders in tribal nations.

Gretchen Dobervich serves as the Public Health Policy Manager for the American Indian Public Health Resource Center. She works with Tribal Nations and other diverse populations on policy appropriations and analysis. Gretchen was appointed to the North Dakota House of Representative in 2016 and served on the House Transportation Committee during the 2017 Session. She currently serves on the Agriculture and Human Services committees and is the Minority Caucus Leader for the ND House of Representative in the ND State Legislature.

Ryan Eagle is an enrolled member of the MHA Nation and is the Public Health Research Project Manager. Ryan provides technical assistance to tribes regarding research processes, benefits, and barriers as well as assisting with all stages of program evaluation design and implementation. Ryan previously served as the former Executive Director of the Boys & Girls Club of the Three Affiliated Tribes. Ryan was raised in New Town, ND on grew up on the Fort Berthold Indian reservation. Ryan has established relationships with tribal leadership and tribal programs, and brings a wealth of institutional knowledge and lived experience regarding his work with MHA Nation.

Racheal Holiday is a member of the Navajo Nation and is the Public Health Coordinator at the AIPHRC. She has a background in community health and is currently pursuing her master’s degree in American Indian Public Health at NDSU. Racheal has experience in program planning, committee work in addressing transportation issues related to substance use within the Utah state, and is assessing the current impacts of COVID-19 within North Dakota Tribal Nations, including within the MHA Nation.
AMERICAN INDIAN PUBLIC HEALTH RESOURCE CENTER

BY THE NUMBERS
2019-2020

23 Technical Assistance Requests Approved

17 Presentations Conducted

15 Trainings Attended

5 Tribal Nations Served

15 Boards/Committee Representation