

National Indian Health Board



The Red Feather Of Hope And Healing

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For Immediate Release

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Tribes Not Included in Applying for \$350 Million in H1N1 Grants

Washington, DC – The National Indian Health Board (NIHB) has learned that \$350 million in new grant funding has not been specifically committed for tribes. Department of Health and Human Services Secretary Kathleen Sebelius announced yesterday that, “grants will be made available to state and local governments to facilitate planning and preparedness efforts to combat the ongoing H1N1 flu outbreak, and the fall flu season.”

Approximately \$260 million will be available to state health departments and \$90 million will be available to hospitals, but funds are not set aside specifically for tribes. Janet Napolitano, Secretary of Homeland Security said, “for states whose jurisdictions incorporate tribal governments, we highly encourage inclusion of those entities in the plans submitted by the states.” The Department of Homeland Security is the lead organization for the H1N1 national response effort. The application deadline for the grant is set for July 24th and the Department of Health and Human Services plans to release grant awards on July 31st.

“Tribal leaders need to immediately contact their state health departments to ensure that they are included in their state’s grant application for funds. With the short time frame set for the application deadline, many of the states are likely to put together a plan without any tribal consultation,” said Stacy Bohlen, Executive Director of the NIHB.

The news of funding was shared with delegations from 54 states, tribes and territories who met today at the H1N1 Influenza Preparedness Summit which included the White House Homeland Security Advisor - John Brennan, Secretary of Health and Human Services - Kathleen Sebelius and Secretary of Homeland Security - Janet Napolitano, and Secretary of Education - Arne Duncan.

“We are deeply concerned that tribes were not specifically designated to receive funds during a pandemic outbreak like H1N1. The federal government has a trust responsibility to protect the health and safety of American Indian/Alaska Natives and this should be reflected in any grant funds made available by the Department of Health and Human Services to address public health issues,” said Bohlen.

On June 11, 2009 the World Health Organization (WHO) raised the worldwide pandemic alert level to Phase 6 in response to the ongoing global spread of the novel influenza (H1N1) virus. A phase 6 designation indicates a global pandemic is underway. There are 562 federally recognized tribes with a service population of about 1.9 million American Indian and Alaska Natives.



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“The lack of Tribal specific funding creates significant problems as Tribal populations will be vulnerable in a pandemic event. The populations identified by DHHS, children, young adults and those with chronic disease issues would be at greatest risk in an outbreak. This mirrors our prominent health concerns in Indian Country,” expressed Jessica Burger, RN, Bemidji Area Representative to the NIHB who attended the H1N1 Influenza Preparedness Summit.

“Once again we suffer the affliction of anonymity when significant national health threats are addressed, and funding is made available in our country,” said Bohlen, “This remains an inadequately addressed issue, but Secretary Napolitano’s acknowledgment that states will be held accountable to the tribes is encouraging. It represents an acknowledgment by the Obama administration of the necessity for states to work with tribal governments in funding distribution.”

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The National Indian Health Board advocates on behalf of all Tribal Governments and American Indians/Alaska Natives in their efforts to provide quality health care. Visit www.nihb.org for more information.



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