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Portland, Oregon

Welcoming Remarks by

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Good morning. It is a pleasure to have been invited to Region X's tribal listening conference. The value of consultation cannot be underestimated for establishing a vision for Indian health and developing ways to make that vision a reality for American Indians and Alaska Natives.

The health of Indian Country is a priority for this Administration in the same way the health of the entire country is a priority. In matters of health – there is no double standard for what is acceptable in Indian Country and what is acceptable for the rest of the Nation. The Administration's commitment is to eliminate health disparities among all Americans, not just eliminate disparities for some and reduce disparities for others.

This conference is an opportunity to share your health priorities with those who can make a difference in deciding what programs to fund, which programs to expand, and which barriers to eliminate. The Secretary and the Deputy Secretary and many on their staff have seen firsthand the challenges faced in Indian Country – they need no convincing that improving the health status of American Indians and Alaska Natives is the right, legal, constitutional, and moral thing to do. And they need no convincing that investing in improving the health status of American Indians and Alaska Natives is a commitment that must be sustained and a goal that must be achieved.

What then remains is to present to the Department your priorities, recommendations, and solutions to the health issues confronting you. That is so critical and that is why I am here and why my Area Directors are here – to listen to you so that we will know the issues faced by Region-TEN Tribes, and to also gain a greater national appreciation on how the Region-TEN issues can fit within a national priority to improve health status across Indian Country through the combined programs and resources of the Department of Health and Human Services.

We no longer exist in an era where the Indian Health Service is viewed by the Department as the sole source and agent for improving the health of Indian people – that responsibility has expanded to include all programs of the Department. You have spoken and the Department has responded to your desire to meet with Department officials BEFORE budget requests are developed so that managers of programs that can make a difference in Indian Country are aware that there is a need in Indian Country. And the Department is providing this opportunity, and others, for tribes to learn more about the grant

programs throughout the Department – there are more than 315 of them: 125 of them are available to American Indian and Alaska Native Tribes and organizations. Yet only 85 of the 125 are being accessed. Without tribal participation and applications, the resources of the remaining 40 programs go to other programs. These meetings are a way to learn more about the Department and the scope of their programs. It is also an opportunity for you to convey what barriers are present that prevent you from accessing the other 40 programs – or any of the 315 programs of the Department. I assure you that your requests and recommendations will be taken seriously – the Department time after time listens and responds.

Last August, I enjoyed meeting with the Region X Tribes at the consultation meeting in Anchorage, Alaska. I mentioned then that to improve the health status of all Americans, we must do more health promotion and disease prevention. During this conference, I hope to hear your proposals for adapting promotion and prevention programs of the Department to meet help members of your communities make positive behavioral and lifestyle choices. I also want to hear your ideas on how to reduce or eliminate the risk of escalating chronic diseases that deplete the vitality of your communities, rob you of Indian leaders, and destroy the health and future of your children. As I said last year, we will continue our treatment programs, but our goal is to eventually reduce the demand for treatment because our people are living healthier longer.

As you finalize your prepared remarks on the importance of resources, partnerships, and improvements in technology to help us achieve our mission, I ask that you also consider another factor for promoting and improving the health of Indian people -that we need to have the health professional and support staff to deliver services or use the technology. There continues to be a growing national shortage of health professionals, particularly in rural America. Within Indian health, the need is growing as current staff members retire, as new facilities are constructed with larger staffing needs, and as our patient population increases because of better health status, newly recognized Tribes, and a birth rate higher than twice the rate for all other population groups. Again, the Secretary views the shortage of health professionals in Indian Country as being just as critical as the shortage of health providers in the rest of the country.

One way the President and the Secretary are addressing this shortage, and improving the Nation's ability to protect and preserve the health of all Americans, is to expand the Public Health Service Commissioned Corps by 1000 new officers. And the Secretary has designated that at least 275 of the new Commissioned Corps members would be assigned to the Indian Health Service before the end of September of this year. The Department and the IHS are doing everything they can in the recruitment process. In addition to supporting the goal of expanding the Commissioned Corps, we expect that some qualified recruits will select the Commission Corps and others will select the Civil Service or Direct Hire personnel system, with the result that there will be growth in all categories. We have almost 800 health professional vacancies – 425 in the nursing field alone – and I ask for your assistance to become part of the recruitment, and retention, process – our vacancy rates are too critical for me not to have taken this opportunity to ask for your help. I also think it is important that when we talk about health promotion, disease prevention, and facilities construction programs, that we also make the point that without people to carry out those programs, there is not much that can be done to raise the health status of Indian people much above what it is today.

I will close my remarks with the same words that I used last August when speaking with you about the importance of these consultation meetings: "We can learn from each other if we listen with an open mind and a caring heart."

Thank you for this opportunity to be here today to listen and learn from you.