

CRITERIA

Two roundtables made up of 26 participants and CDC facilitators discussed Criteria.

What criteria would you use in your community when looking to prioritize CDC health Objectives?

- *Balance Data with Community Needs and Values:* Data, by itself, was not viewed as sufficient for establishing priorities. Tribal leaders desired inclusion of community-defined needs and values and suggested using established local consultation processes for doing this. Some participants suggested that the criterion related to disease burden was not needed.
- *Integrate traditions:* Criteria should recognize the value of traditional health activities, practices and customs. The Criteria should acknowledge and address tribal sovereignty and the importance of family in Native American and Alaskan Native communities.
- *Sustainable Systems:* Priorities should be sustainable at the local level; less emphasis should be placed on long-term community development.

Are there any major criteria missing and are the Criteria overall a balanced and reasonable set for choosing priorities?

- *Lacks meaning for many tribal leaders:* The most frequent comment was that Criteria A was least important or perhaps not even needed. Criteria would be more pertinent if realities each community faces were reflected.
- *Skeptical of research:* Using disease burden was not viewed as an acceptable approach because some felt the reporting was inaccurate. The participants pointed out the clash between Western and traditional approaches to health and how to make these about community health should be made.
- *Prevention key:* Tribal leaders stressed prevention saying, “CDC should be about prevention.”

Are CDC’s Criteria clear?

- *Not mutually exclusive:* As at the Partners’ Meeting, Tribal Leaders stated it was not appropriate to combine “research” and “interventions” in a single criterion.

Are there any (Criteria) that don’t belong?

- *Health Burden:* Criteria A does not belong
- *Native Americans “over studied”:* Some felt that their communities participate in research and receive little feedback or service improvements as a result. They expressed strong preference for applied research and interventions over basic or survey research.