



DiversityPreparedness.Org E-Newsletter

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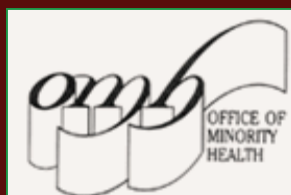
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Dear Colleagues,

This issue of the DiversityPreparedness.org E-Newsletter contains resources and translated materials pertaining to winter weather, information on upcoming events and recent publications, and features Preparing American Indians and Alaska Natives as the Topic of the Month—providing links to variety of resources and planning tools. Additionally, we spoke with Captain Darrell LaRoche and Ms. Amy V. Groom to learn more about federal efforts to meet the preparedness needs of AI/AN communities.

Topic of the Month:

Preparing American Indians & Alaska Natives

The indigenous peoples of North America have suffered horrific atrocities over the course of the continent's colonization. The legacy of disrespect for the human rights and culture of these communities has contributed to comparatively low levels of socioeconomic status and disproportionately high rates of chronic disease—factors which increase their disaster vulnerability. Despite federal efforts to redress these inequalities, public health emergency outcomes indicate that little has changed in the past 100 years. Evidence suggests that influenza mortality rates among American Indians/Alaska Natives (AI/AN) during the Great Pandemic of 1918 were four times higher than those of the general population—a rate which mirrors the disparity in influenza mortality for AI/AN during the H1N1 Pandemic of 2009. With a substantial proportion of the AI/AN population residing in urban settings, it is imperative that all public health and emergency management professionals be cognizant of their distinct needs. While there is significant diversity between tribal groups, the resources below provide general information on strategies to leverage community assets, provide culturally competent care, and engage AI/AN communities in preparedness.



Organizations & Initiatives:

- **National Congress of American Indians- Homeland Security & Emergency Preparedness:** This website provides a wide range of articles, policy documents, and others resources related to emergency

Organizations & Initiatives:

- **Native American Alliance for Emergency Preparedness:** This organization is focused on building capacity among health care providers across California's Indian Country to respond appropriately to bioterrorism threats and health emergencies.
- **Great Lakes Inter-tribal Council Emergency Preparedness Team:** This website describes the GLITC's preparedness efforts. While primarily focused on Michigan and Wisconsin, the mission of the organization is to promote the health and safety of AI/ANs through preparedness.
- **Indian County Child Trauma Center:** The ICCTC was established to develop trauma-related treatment protocols, outreach materials, and service delivery guidelines specifically designed for Native American children and their families.
- **National American Indian Heritage Month—November 2010:** This Office of Minority Health website provides information on National American Indian Heritage Month and health issues impacting the AI/AN community.

Publications:

- **Evaluation and Assessment of H1N1 Outreach for Urban American Indians and Alaska Natives:** This report summarizes key findings from community focus groups and key informant interviews conducted by the Urban Indian Health Institute on H1N1 and outlines a set of practical recommendations for improved communication to AI/AN around urgent health issues.
- **Disaster Preparedness Training for Tribal Leaders:** This article describes a project to provide preparedness and response training to tribal leaders in Arizona. It outlines how cultural competence, respect for tribal sovereignty, and tribal community networks are essential to the success of this program.
- **Ethnocultural Perspectives on Disaster and Trauma: Foundations, Issues, and Applications:** This book provides a range of perspectives and strategies for delivering mental health services to diverse populations after a disaster.



Each chapter discusses emotional, psychological, and social needs as well as communal strengths and coping skills that arise in disasters and are documented for major minority groups in the United States, including Native Americans.

- **Pandemic Influenza Preparedness and Vulnerable Populations in Tribal Communities:** This article outlines potential issues to consider in identifying and providing appropriate services for selected vulnerable populations within tribal communities. Pandemic influenza preparedness resources available are also highlighted.
- **Deaths Related to 2009 Pandemic Influenza A (H1N1) Among American Indian/Alaska Natives:** This *MMWR* article describes the disproportionate number of H1N1 related deaths among AI/ANs. According to an investigation which spanned 12 states, the rate of H1N1 related deaths in AI/AN was 4.0 times higher than death rates for all other racial/ethnic populations.
- **Community and Tribal Health Clinic Emergency Response Preparedness In Nevada-2004 Report:** This study established a baseline for emergency preparedness activities in federally qualified health centers (FQHCs) that serve 16 communities and 12 tribal populations in Nevada.
- **Utilization of the Native American Talking Circle to Teach Incident Command System to Tribal Community Health Representatives:** This paper reports on the use of the Native American Talking Circle format as a culturally appropriate method to teach the Incident Command System.

- **Assessment of Public Health Workforce Bioterrorism and Emergency Preparedness Readiness among Tribes in Washington State- A Collaborative Approach:** This article examines the collaboration, methodology, results, and lessons learned stemming from the experience of a unique university, state, and tribal collaborative model for public health emergency preparedness assessment activities.
- **Invisible Tribes- Urban Indians and Their Health in a Changing World:** This report, produced by the Urban Indian Health Commission, reviews the prevalence of three diseases—depression, diabetes and cardiovascular disease—in the AI/AN population living in or near cities.

Training, Education & Toolkits:

- **Building Partnerships with Tribal Governments:** This interactive computer-based course is designed to provide participants with basic knowledge to build effective partnerships with tribal governments to protect native people and property against all types of hazards.
- **Northwest Tribal Emergency Management Council- Building Systems Through Partnerships:** This online, interactive session provides an introduction to the Northwest Tribal Emergency Management Council and emphasizes the need and importance of emergency management in tribal nations.
- **Disaster Preparedness Manual for the Aging Network- Native Americans:** This manual, produced by the U.S. Administration on Aging, discusses challenges to meeting the preparedness and response needs of older Native American adults and strategies to address them.
- **Barriers to and Facilitators of Effective Risk Communication among Hard-to-Reach Populations in the Event of a Bioterrorist Attack or Outbreak:** This report presents the findings of a needs assessment conducted for vulnerable and hard-to-reach populations, including Native Americans, in Texas, and identifies preferred methods of communication in the event of a bioterrorist attack or epidemic.

- **Disaster Assistance Resources for Native Americans:** This fact sheet provides general information for Native Americans on disaster assistance and services provided through DisasterAssistance.gov.

Below are links to current initiatives, upcoming events, as well as recently published reports and articles.

Initiatives, Events & Training:

FEMA Engages Diverse Communities in Leadership Efforts

On November 18, 2010 FEMA Administrator Craig Fugate **addressed the National Congress of American Indians** and discussed FEMA's efforts to coordinate and support tribal partners in preparedness. He also invited suggestions through Challenge.gov on how Government could better enhance community resilience. In September, FEMA hosted the first ever **Latino Leadership Summit** in Washington, DC. The summit brought together leaders from the Latino community—including community/faith-based organizations, the National Association of Latino Elected and Appointed Officials, the National Council of La Raza, and others—to discuss strategies for collaboration to better meet the needs of Latino communities across all phases of an emergency. A segment of the Summit is available through U-Tube. In May of 2010 FEMA hosted a similar event targeting African American communities at the **Black Leadership Summit**.

2011 Public Health Preparedness Summit

February 22-25, 2011
Atlanta, GA

The Summit is one of the largest meetings of public health, emergency management, and other professionals to share their best practice training models, tools, or other resources that advance the field of public health preparedness. For more information [CLICK HERE](#).



2011 Integrated Medical, Public Health, Preparedness and Response Training Summit

May 1-5

Grapevine, Texas

The 2011 Integrated Medical, Public Health, Preparedness and Response Training Summit aims to provide a forum for conducting training, discussing issues, sharing information, and networking amongst the constituent groups of various national-level organizations involved in preparing for and responding to public health and medical emergency events. Abstracts are being accepted until February 1, 2011. For more information [CLICK HERE](#).

World Conference on Disaster Management

July 19-22, 2011

Toronto, Canada

The theme of the 2011 World Conference on Disaster Management is targeted to practitioners from a wide range of sectors working in emergency management and response and focuses on a variety of topics, including risk communication and community resilience. For more information [CLICK HERE](#).

Recent Publications:

Cultural, Ethical, and Spiritual Competencies of Health Care Providers Responding to a Catastrophic Event

This article, recently appearing in the *Journal of Critical Care Nursing Clinics of North America*, discusses the importance of providing health care that is culturally, ethically, and spiritually appropriate in crisis situations and provides an overview of resources to enhance competence in each domain. To view the article [CLICK HERE](#).

Locating and Communicating With At-Risk Populations About Emergency Preparedness: The Vulnerable Populations Outreach Model

This article, appearing in *Disaster Medicine and Public Health Preparedness*, describes a model developed by the Philadelphia Department of Public Health and Office of Emergency Management to engage vulnerable populations in preparedness and planning activities through community-based organizations. Strategies for locating, engaging, and communicating with vulnerable populations are discussed. To access the article [CLICK HERE](#).

Hurricane Recovery: Federal Government Provided a Range of Assistance to Nonprofits following Hurricanes Katrina and Rita

At the request of Congress, the Government Accountability Office issued a report on how the federal government worked with non-profit organizations to facilitate recovery efforts following hurricanes Katrina and Rita, as well as steps being taken to address challenges and strengthen relationships between the federal government and key service providers to culturally diverse communities. Administrative challenges faced by non-profits in meeting requirements that accompany federal funding are discussed. To view the report, [CLICK HERE](#).

Emerging Issues & Updates:



Haiti Cholera Outbreak:

A cholera epidemic has recently broken out in Haiti—a disease that has not been identified in the country for over 20 years. Significant disruptions of sanitation and water infrastructure caused by the January 2010 earthquake are likely to be at least in part responsible for the outbreak, however questions remain as to how the disease re-entered the Haitian population. Cholera is transmitted through water and food that is contaminated with *Vibrio cholerae* organisms. Cholera causes severe diarrhea and vomiting which quickly leads to dehydration and death if untreated. Health officials are working to bolster hospital capacity to treat infected individuals and are promoting hygiene and preventive behaviors, such as hand washing. For more information on the situation from the CDC [CLICK HERE](#).



Winter Weather:

Heavy snow, ice, and extreme cold can severely disrupt critical infrastructure, such as electrical power and transportation. In addition to hypothermia, winter storms can increase risk for a range of health-related hazards, such as carbon monoxide poisoning. Below is a concise list of translated materials on winter weather.

- **Winter Storms and Extreme Cold:** This handout provides information on winter storms and extreme cold, such as how to prepare for winter storms, and what to do after one has evacuated their home during a storm and how to stay safe in their car during a storm. This resource is available in [English](#), [Somali](#), [Spanish](#), [Arabic](#), and [Bosnian](#).
- **Carbon Monoxide Poisoning Fact Sheet:** This fact sheet provides information on the symptoms of carbon monoxide poisoning and prevention. The resource is available in [Arabic](#), [Chinese](#), [German](#), [Spanish](#), [French](#), [Hmong](#), [Haitian Creole](#), [Portuguese](#), and [Vietnamese](#).
- **Prevent Poisoning from Carbon Monoxide-Printable Flyers:** This simplistic flyer provides pictures to convey carbon monoxide poisoning risk. The flyers are available in [English](#), [Amharic](#), [Arabic](#), [Bosnian](#), [Burmese](#), [Cambodian](#), [Chinese](#), [Farsi](#), [French](#), [Hmong](#), [Korean](#), [Laotian](#), [Nepali](#), [Oromo](#), [Portuguese](#), [Punjabi](#), [Romanian](#), [Russian](#), [Somali](#), [Spanish](#), [Swahili](#), [Tagalog](#), [Tigrina](#), [Ukrainian](#), and [Vietnamese](#).

Voices from the Field: Captain Darrell LaRoche & Amy V. Groom

American Indian and Alaska Native (AI/AN) people account for approximately 1.5% of the U.S. population. While there is substantial diversity among the 564 federally recognized tribes in the United States, AI/AN communities share a number of characteristics, such as poor pre-existing health status, geographic and/or cultural isolation, household crowding, distrust of government, and limited financial resources and access to health care, that may increase vulnerability in emergency situations.¹ The unique status of tribal reservations as “domestic dependant nations,” independent of counties and states, also presents a number of logistical and jurisdictional challenges to fully meeting their needs before, during, and after a public health emergency. These issues have repeatedly played out in public health emergencies, most recently during the H1N1 pandemic of 2009 when AI/AN suffered a case-specific mortality rate four times that of Whites.²

We spoke with Captain Darrell LaRoche, Director of Emergency Services for the Indian Health Service (IHS), and Ms. Amy V. Groom, Centers for Disease Control and Prevention Public Health Advisor and IHS Immunization Program Manager, to learn more about challenges to enhancing the disaster resilience of AI/AN communities, emerging issues and policy priorities, as well as promising strategies for meeting their needs.

As Captain LaRoche and Ms. Groom explained, issues pertaining to the health and well-being of AI/AN must be considered within the broader historical context of AI/AN communities. U.S. government attempts to take over tribal lands and relocation efforts to “integrate” AI/AN people into U.S. mainstream society resulted not only in the loss of tribal lands, but contributed to a loss of tribal identity, language and culture from which many tribes still struggle to recover. Distrust of government can be an issue, especially in times of emergency, and while the U.S. government entered into treaties with many tribes for the provision of no-cost healthcare in exchange for tribal lands, AI/AN people may have concerns about how those treaty obligations are fulfilled.

As Ms. Groom and Captain LaRoche both explained, elements of past and current government policies, while well intentioned, have produced a number of unintended consequences that present challenges

to fully meeting the preparedness and response needs of AI/AN communities.

The independence granted to federally recognized tribal reservations as “domestic dependant nations” often complicate regional preparedness efforts. As public health emergencies unfold freely across jurisdictional boundaries, regional coordination is key to effective planning and response. Because tribal lands are independent of the states and counties which surround them, issues pertaining to funding and accountability often make coordination efforts difficult. Both Captain LaRoche and Ms. Groom expressed that the degree of preparedness coordination and planning with local health and emergency management officials varies considerably between tribes. Many robust partnerships exist and Memorandums of Understanding (MOUs) are frequently used to solidify plans and formalize relationships.

Issues related to the portability of health care that AN/AN are entitled to through the IHS also presents a challenge—especially among AI/AN living in urban areas. Initially drawn by economic incentives attached to federal relocation programs in the 1950s, AI/AN have gradually migrated to urban settings. In fact, the majority of the AI/AN population (approximately 60%) lives in urban areas.³ A major challenge lies in the fact that AI/AN right to no-cost health care is only available through IHS providers. As Ms. Groom explained, funding is allocated to IHS clinics based on the size of the tribal population they serve. As AI/AN populations in urban settings are an amalgam of individuals from different tribes, it is difficult to allocate funds and delegate responsibility as to who will plan for and serve urban AI/AN in a public health emergency. An accompanying concern is that urban AI/AN may return home to reservations in a public health emergency to receive care through the IHS—a situation which would likely overwhelm the capacity of IHS clinics.

Despite these challenges, a number of promising strategies and initiatives exist. Captain LaRoche emphasized the importance of building partnerships on a case-by-case basis at the local level to enhance preparedness and develop plans that are inclusive of distinct circumstances of individual tribal communities. Ms. Groom described the power of community health representatives, lay health workers and public health nurses who provide health and preparedness education in tribal communities. Such strategies are particularly important in geographically isolated and frontier communities where health care often takes place beyond the walls of clinics.

At the federal level, the USDHHS Secretary's Tribal Advisory Committee and [Tribal Consultation Blueprint](#) represents promise for more fully integrating AI/AN into federal health and preparedness initiatives. Health care reform and provisions in the *Affordable Care Act* (ACA) also represent promise for enhancing AI/AN community resilience. For example, the ACA removes all health care cost-sharing requirements for AI/AN at or below 300 percent of the federal poverty line, a provision that will expand access to care beyond IHS services for approximately 1.1 million AI/AN.⁴ It also establishes the [Indian Health Care Improvement Reauthorization and Extension Act of 2009](#) as law—legislation that includes numerous provisions targeting the health needs of urban AI/AN and provides support for AI/AN community health representatives.

As public health preparedness and emergency management plans place increasing emphasis on community resilience and inter-sectoral collaboration the unique circumstances of AI/AN communities must not be forgotten. Their inclusion is not just a matter of public health, but an imperative of social justice.

* Darrell LaRoche, PE is a Captain in the U.S. Public Health Service Commissioned Corps and Director of Emergency Services for the Indian Health Service.

*Amy V. Groom, MPH is a Centers for Disease Control and Prevention Public Health Advisor and Indian Health Service Immunization Program Manager within the Division of Epidemiology and Disease Prevention.

1. Groom, AV. Et al. [Pandemic Influenza Preparedness and Vulnerable Populations in Tribal Communities](#). *American Journal Public Health*, 99(S2), S271-S278.
2. [Deaths Related to 2009 Pandemic Influenza A \(H1N1\) Among American Indian/Alaska Natives](#). *MMWR*.
3. [Invisible tribes: Urban Indians and Their Health in a Changing World](#).
4. Andrulis, DP., Siddiqui, NJ., Purtle, J., Duchon, L. (2010). [Patient Protection and Affordable Care Act of 2010: Advancing Health Equity for Racially and Ethnically Diverse Populations](#). Joint Center for Political & Economic Studies.

We encourage you to share the [National Resource Center](#) with your peers and colleagues and welcome you to link to the website. Please also feel free to e-mail your comments and any feedback to our team. We look forward to working with you to making this site a resourceful and useful tool in advancing the preparedness of our nation's diverse communities.

Sincerely,

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