



**American Indian and Alaska Native
Health Research Advisory Council (HRAC)
Conference Call**

**Friday, March 11, 2016
2:00-3:00 p.m., ET
Meeting Summary**

Introductions and Roll Call—Rick Haverkate

HRAC Tribal Delegates and Alternates

Aaron Payment and Larry Jacques — Bemidji Area Delegate and Alternate
Daniel Calac, MD — California Area Delegate
Patrick Marcellais — Great Plains Area Delegate
Charlene Jones — Nashville Area Delegate
Simental Francisco and Philene Herrera — Navajo Area Delegate and Alternate
Malia Villegas, PhD — National At-Large Member Alternate
Rodney Haring, PhD, and Timothy Waterman — National At-Large Member Delegate and Alternate
Michael Peercy — National At-Large Member Delegate

HRAC Federal Partners

Amarilys Bernacet and Rick Haverkate — OMH
Sheila Cooper — SAMHSA
Asantewa Gyekye-Kusi, MD, Mose Herne, and Wilbur Woodis — IHS
Joyce Hunter, PhD — NIH
Sylvia Joice, DrPH — HRSA
Delight Satter — CDC
Adelle Simmons — ASPE
Kishena C. Wadhvani, PhD — AHRQ

Others

Tom Anderson and Nicholas Wahpepah — Southern Plains Tribal Health Board
Ramona Antone — Navajo Nation
Kendra King Bowes — Native American Management Services, Inc.
Vanessa Hiratsuka — Alaska Area (for Ileen Sylvester)
Dawnette Weaver — Chickasaw Nation

Main Discussion Points

- Mr. Haverkate and Chairperson Payment reported on the recent HHS Secretary's Tribal Advisory Committee (STAC) meeting and the HHS Tribal Budget and Policy Consultation Session.
- Mr. Haverkate provided updates on OMH activities, including new HRAC alternates and HRAC vacancies.
- Chairperson Payment and Mr. Haverkate reported on the HRAC priorities poll. Mr. Haverkate explained that there has already been work started on Priority 5, the web-based searchable American Indian and Alaska Native (AI/AN) health research and reference collection, and this could be finished by the end of the fiscal year. To accomplish the other priorities, Chairperson Payment suggested creating a poll for members to select the workgroup(s) they would like to join. Members began discussing items for consideration of Priority 1: HHS-wide umbrella policy for AI/AN research.
- The remaining 2016 HRAC schedule was reviewed, and volunteers for developing the in-person meeting agenda were requested.

Action Items

- HRAC members will be sent a form with their contact information and will be asked to review and make any updates.
- HRAC members will receive the web link, which contains the HRAC fact sheet and nomination form. HRAC members should send out information to contacts in the areas where there are vacancies.
- Ms. King Bowes will send out a poll to members requesting workgroup members to work on each priority. Members should volunteer to serve on one or more workgroups.
- A request for volunteers to serve on an agenda development workgroup will be sent out via email to assist with planning for the Annual HRAC Meeting in June. HRAC members interested in serving on the agenda development workgroup should respond to the email request.

Call to Order and Introductions

Chairperson Payment and Mr. Haverkate welcomed participants, and Mr. Haverkate conducted a roll call of tribal delegates and federal representatives. (A quorum was met.)

Welcome and HRAC Updates

Mr. Haverkate sent forward apologies from Dr. J. Nadine Gracia, the Deputy Assistant Secretary for Minority Health. Dr. Gracia was unable to be on the call and sent her regrets. She has been attending meetings with tribal leaders at the STAC and the Annual HHS Tribal Budget and Policy Consultation Session. She is also working closely with Chairperson Payment on the Flint, Michigan water crisis.

Chairperson Payment reported that he brought issues forward at the STAC and HHS Tribal Budget and Policy Consultation Session on behalf of the HRAC. He spent time with the HHS Secretary discussing the Flint, Michigan water crisis, and the ongoing issue with suicides, overdosing, and historical trauma. He explained that a comprehensive study is needed to get to the systemic reason on why AI/ANs are facing the worst statistics. Chairperson Payment asked the Secretary if she would bring these concerns to the White House Council, which reports to the President. He added that some permanency is needed before there is a change of the President.

Mr. Haverkate informed the HRAC of vacancies, and he requested assistance from current members to recruit for the following areas and positions: Albuquerque – delegate and alternate; Billings – delegate;

Southern Plains – delegate and alternate; Phoenix – delegate and alternate; and Tucson – delegate and alternate.

Mr. Haverkate added that the HRAC website has an HRAC fact sheet and a nomination form available for review and download. These can be helpful in explaining to others about the HRAC and how to submit a nomination. The documents can be found at: <http://minorityhealth.hhs.gov/hrac/>. Mr. Haverkate explained that the HRAC has a system to track member contact information. An electronic form will be sent out to current members with contact information as currently listed in the system. Members will be asked to update and/or complete any blank fields. One important piece of information is to confirm and/or provide when the member was elected to tribal office and when their tribal term of office ends. If the member is not an elected official, then the tribal term of office should be for the tribal leader who appointed the HRAC member. The form will be sent out in a few weeks and members should review and complete it as soon as possible.

HRAC Priorities

Chairperson Payment and Mr. Haverkate reported that a poll was sent out asking members to rank the HRAC priorities. The results of the HRAC priorities poll are:

1. Development of an HHS-wide umbrella policy for conducting AI/AN research;
2. Recommend that HHS agencies include AI/AN culture-specific modes of intervention in funding proposal requests;
3. Encourage a stronger focus on social determinants of health among tribal and HHS policy makers and health practitioners and a stronger focus on social determinants in public health research;
4. Advance specific initiatives in Indian Country that are designed to build local capacity to use research data to inform public health practice;
5. Creation of a web-based searchable AI/AN health research and reference collection with links to university and government libraries that encourages voluntary submissions of scholarly articles and projects; and
6. Creation of an AI/AN-specific Institutional Review Board (IRB) Point of Contact list published annually in the Federal Register.

With the priorities now being ranked, Mr. Haverkate noted that the next step is to see what can be completed by September 30, 2016, the end of this fiscal year. He explained that there has already been work started on the web-based searchable AI/AN health research and reference collection. The OMH website has a searchable health research and reference collection, and they are looking at how to refine it for more specific AI/AN references. This is a priority that could be accomplished before the end of the fiscal year.

To accomplish the other priorities, Mr. Haverkate said that some HRAC workgroups may need to be developed. Chairperson Payment suggested creating a poll for members to select the workgroup(s) they would like to join. After workgroups are set up, members can develop an action plan, identify the tasks, and then work on a timeline. Creating a type of scorecard that can be used as a tool to report back to tribal entities and HHS can show a measure of success for each of the priorities.

Chairperson Payment stated that his tribe is currently working on identifying a strategic vision, objectives, and an action plan with next steps. Mr. Jacques has created a spreadsheet system that each workgroup could use and then share with OMH to help figure out what can be done. Chairperson Payment recommended that Mr. Haverkate attend the workgroup calls to give guidance.

Chairperson Payment asked for input on the first priority, development of an HHS-wide umbrella policy for conducting AI/AN research. Dr. Villegas stated that the National Institutes of Health Tribal Consultation Advisory Committee is working on developing guidance for tribal consultations that can help guide other agencies. This could be useful in addressing Priority 1.

Other suggestions for consideration of the HHS-wide umbrella policy for AI/AN research provided by committee members included:

- Ethics
- Cultural appropriateness of the question
- The need to oversample
- Ensure that when research opportunities are promoted or conducted, that comprehensive information is provided regarding the reason why AI/ANs are sometimes categorized as minorities and other times considered “other” in the race classification.
- Best practices
- Making the results translational
- Dissemination (local, state, and nationally)
- Sustainability
- Whom we are studying when talking about AI/ANs (federally recognized tribal members, descendants, etc.)
- Identify and work through mixed methodology and community-based participatory research in Indian Country
- Importance of informed consent and data ownership
- Specimen protocol and ownership
- Federal policy should recognize that there are tribes with research codes that must be followed

Mr. Haverkate thanked everyone and stated that the list provided is a great start. He noted that many of the priorities are rooted in tribal sovereignty, and it is very important that the messages come from the HRAC members.

Councilman Marcellais stated that his tribe has been working on its tribal IRB. He added that there have been tribal codes adopted for Native research and some researchers do not know the tribal codes. He asked if there is a model on how to establish tribal IRBs, including the rules and regulations. Chairperson Payment stated that there are individual tribes and tribal IRBs that have codes in addition to some regionals ones. He noted that some of the HRAC priorities focus on helping to share information about IRBs and models used.

Wrap Up and Next Steps

Mr. Haverkate reported that the HRAC has several new alternates: California Area – William J. Carrillo, Sr., Council Member of the Tule River Tribe; Nashville Area – Hope Schwom, Tribal Action Plan Coordinator, Mashpee Wampanoag Tribe; and Great Plains Area – Chairman Harold Frasier, Cheyenne River Sioux Tribe. They were unable to join the conference call but should be participating soon.

As the quarterly call was coming to a close, the 2016 meeting dates were reviewed; they are as follows:
June 9-10, 2016, in Washington, DC (face-to-face meeting)
August 26, 2016, at 2:00 p.m. ET (quarterly call)
December 16, 2016, at 2:00 p.m. ET (quarterly call)

To assist with planning the agenda for the June 9-10 meeting, volunteers were requested. Chairperson Payment suggested sending out an email, requesting volunteers. Dr. Calac offered to serve on the agenda workgroup.

The meeting adjourned at 3:00 p.m., ET.