



Alaska Tribal Leader’s Roundtable Anchorage, Alaska

Welcoming Remarks by
Charles W. Grim, D.D.S., M.H.S.A.
Assistant Surgeon General
Director, Indian Health Service
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OS



ACF



AOA

CDC

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SAMHSA

Good morning. It is an honor to meet with you. The distances you have traveled and the time you have taken away from your community and family underscore the importance of this meeting.

I also want to express my great respect for the Tribal Leaders of Alaska for the health programs and health system you have developed. Throughout the nation, the Indian Health Service and tribal health programs operate in some of the most rural and isolated, and beautiful, areas of our country. These regions also endure harsh weather conditions, health staff shortages, environmental safety issues, and transportation challenges. In Alaska you have shown us ways to meet those challenges and we can learn much from you.

The health status of Alaska Natives, like all Indian communities, is lower than that of the rest of the nation. Health disparities exist in all the major causes of death in Alaska Natives. Accidental death, the leading cause of death among Alaska Natives, occurs at a rate more than 4 times that for the U.S. general population. Heart disease, cancer, and cerebrovascular disease, all leading causes of death among Alaska Natives, also occur at rates greater than the U.S. population.

And perhaps the most alarming statistic of all is the suicide rate in Alaska communities; it is the highest of all the Indian Health Service Areas, and almost 4 times that for the general population. This indicates a great need for increases in mental health services, as well fortifying the infrastructure of community services, employment opportunities, and cultural supports. In addition, research needs to be done on the causes of this high rate, in order to more effectively address a problem that has devastating effects that can reverberate throughout a community.

Another consideration in terms of planning for health services in the Alaska Area is the high birth rate; the second highest in the Indian Health Service and nearly twice that for the U.S. general population. This obviously indicates a significant growth in the service population in the Alaska Area, which must be considered in projecting future needs for services and resources to address the health needs of a burgeoning population.

The health disparities in Alaska, and all of Indian country, have not gone unnoticed; they have been recognized by the Administration, the Secretary, and the Congress.

The Indian Health Service is one program within the Department of Health and Human Services, one of more than 320, that is working with you to help eliminate health disparities between Alaska Natives and the rest of America by 2010. As Director of the Indian Health Service, I serve as the Vice-Chair for the Secretary’s Intradepartmental Council of Native American Affairs, which is working to increase the accessibility for Tribes to other HHS programs. The Council is helping to coordinate the resources and programs of the Department to ensure that American Indians and Alaska Natives benefit from all the programs of the Department.

As Secretary Thompson said to the Council: *“We must do more with our existing programs to make them work better for Native Americans and consult with our partners to improve our policies and services to their communities.”*

And the Secretary’s support of self-determination extends beyond increased accessibility and includes identifying Department programs and services that can be subject to tribal contracts and compacts. The Tribal Leaders of Alaska have already demonstrated their expertise at contracting and compacting IHS services and programs for the benefit of

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their people. I am sure you will be just as effective should you decide to assume even greater control over other Department programs that benefit your people.

As the Director of the Indian Health Service, I share the same concern as the Secretary and the Administration that to improve the health status of all Americans, we must do more health promotion and disease prevention.

Providing our people a higher quality of life for many years can only be accomplished by supporting programs that will help them make positive behavioral and lifestyle choices. We will continue our treatment programs, but our goal is to eventually reduce the demand for treatment because our people are healthier longer.

Delivering health care and treatment services is extremely costly in Alaska; average health care costs in Alaska are more than 1½ times higher than the average for all IHS Areas. Besides the humanitarian benefit, I am sure you can see the benefit of promoting health and reducing the number of patients with chronic diseases that have a basis in their behavioral choices. And almost all of the leading causes of death in Alaska Native communities are affected strongly by lifestyle choices, such as diet and exercise, and behavioral patterns, such as adverse coping mechanisms and self-destructive behaviors.

Sustaining a health promotion program cannot be done in isolation from other factors that influence health status. Factors such as education level, employment opportunities, community development, environmental health, and cultural support can drastically affect lifestyle choices and behavioral patterns, and consequently, health status. That is where it is important that we work together and we work with others to build the infrastructure of our communities so that all these interrelated factors come together in balance for mutual benefit.

Last week the President restated his dedication to making the infrastructure of American communities a factor in the health and vitality of the nation when he addressed the National Urban League. He said, "*We are dedicated to bringing economic hope to every neighborhood, a good education to every child, and comfort and compassion to the afflicted. And our nation has come a long way, and we have a long way to go. And we will not stop, we will not tire, until we have extended the great promise of America to every neighborhood in America.*"

This meeting, and the Tribal Listening Conference this coming Friday, are for sharing information on how we can contribute to achieving this goal for the tribal neighborhoods in Alaska.

Thank you again for this opportunity to meet with you and to listen and learn from you.