



CONSULTATION WITH AMERICAN INDIANS AND ALASKA NATIVES



*A Report on the Continuing Dialogue Between the Department of Health
and Human Services and American Indian and Alaska Native Leaders*

January 2001



THE SECRETARY OF HEALTH AND HUMAN SERVICES
WASHINGTON, D.C. 20201

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Dear Tribal Leader:

We are pleased to present you with the enclosed report: "The Continuing Dialogue Between the Department of Health and Human Services and American Indian and Alaska Native Leaders."

On November 6, 2000, President Clinton reaffirmed the Administration's commitment to tribal sovereignty, self-determination, and self-government by issuing a revised Executive Order on Consultation and Coordination with Indian Tribal Governments. This is the latest in a series of directives regarding tribal consultation issued by the President since April, 1994, requiring each federal department and agency to establish a consultation policy.

As you know, the Department of Health and Human Services (HHS) quickly implemented the President's Executive Order and became the first federal department to issue a tribal consultation policy. Through the issuance and implementation of this policy, HHS has worked hard to be more responsive to the needs of American Indians and Alaska Natives. Over the course of the past several years, HHS leadership has provided numerous opportunities for tribal leaders to raise issues with the Department, such as at our regional listening councils, budget consultations, and National Tribal Consultation Forum. Most importantly, we have attempted to address those issues and to establish a relationship that will continue to thrive.

This report offers a look at some of the key efforts the Department has taken in furtherance of our consultation obligations and includes information that we hope will assist tribal leaders in your ongoing work with the Department. In particular, you will note that the report includes the Department's consultation plan, as well as the HHS agency-specific consultation plans. Although these consultation plans are "final," it is important to recognize that these are living documents that may evolve based on comments or recommendations you may make in the future. The report also systematically identifies the issues you have expressed at our many meetings.

We hope that the report offers a concrete agenda for action by the Department and tribal governments. Together, we can tackle the challenges necessary to bring health and opportunity to every American Indian and Alaska Native.

Sincerely,

Donna E. Shalala

Kevin Thurm

Enclosure





Acknowledgements

This volume is more than a description of the many meetings and conferences that the Department of Health and Human Services has held with tribal leaders and organizations. And it is more than a recitation of the important issues that American Indian and Alaska Natives have raised in the course of our consultations. More than anything else, it represents the Department's commitment to respect tribal sovereignty, self-determination, and self-government and to work with the tribes to bring health and prosperity to Indian country. Of course, the commitment on the part of the Department's leadership would come to naught without the encouragement, creativity, and energy of a large number of colleagues from throughout HHS and from our tribal partners.

We must recognize the tribal leaders whose direct input is reflected in this effort. We are grateful for the knowledge and experience these individuals have shared with us. We are especially thankful to David Gipp, Julia Davis, Ruey Darrow, Wanda Stone, Tim Martin, H. Sally Smith, Susan Masten, Buford Rolin, Merle Boyd, Jerry Freddie, Joe Saulque, Everette Enno, Helen Bonnaha, W. Ron Allen, Alvin Windy Boy, Sr., Henry Cagey, Yvette Joseph-Fox and Jack Jackson.

We also wish to thank the national tribal organizations that contributed their staff and other resources to the consultation process and provided invaluable advice and assistance. In particular, we extend our appreciation to the National Congress of American Indians, the National Indian Health Board, and the Tribal Self-Governance Advisory Committee to the Indian Health Service.

It is well known that one of the first steps the Department took to ensure that the highest level of attention was given to tribal consultation was to place responsibility over the process in the Office of Intergovernmental Affairs (IGA) and to establish in IGA a new position, that of Senior Advisor for Tribal Affairs. In December 2000, we were excited to announce the selection of Eugenia Tyner-Dawson. Prior to Gena, however, two individuals filled the position on an interim basis. First, Bea Bowman, on detail from IHS, joined the team.

Bea was instrumental in establishing the Department's consultation policy and its early implementation. In addition, working closely with the Deputy Secretary, she orchestrated the series of listening councils in 1998-1999. Following Bea's detail, Carol Martin, from IHS' Office of Tribal Self-Governance, joined IGA. Carol did an outstanding job overseeing the Department's budget consultation meetings and the July 2000 National Tribal Consultation Forum. In addition, Carol spearheaded the drafting of the interim report that preceded this volume. Bea and Carol brought to the position a strong knowledge of and commitment to the issues and, perhaps more than anything else, raised the bar regarding the skills and judgment that the person permanently filling the position would need to possess. Watching Eugenia Tyner-Dawson manage the completion and publication of this report, we know she will surpass expectations and serve IGA ably by bringing tribal issues to the forefront of the Department.

We are also greatly indebted to IHS' Verna Miller, who helped coordinate the Department's efforts in compiling the report, and Mirtha Beadle from the Office of the Executive Secretariat who brought structure to the report and helped navigate the document through the Department's clearance process.

We also give special thanks to the dedicated and committed staff from throughout the Department for their contributions to this report, as well as strengthening and implementing the Department's consultation policy: John Callahan, Michel Lincoln, Rae Snyder, Leo Nolan, Jim Mason, Kelley O'Dell, Lis Hanson, Steve Sawmelle, Linda Brown, Yvonne Jackson, Nick Burbank, Sharon McCully, Molly Varney, and Katie Smeltz.

Finally, we express our appreciation for our contractors who helped to develop, design and publish the report. Fred Hill, President, The Hill Group, ably assisted by Nicole Rife, and to Jo Ann Kauffman, Nez Perce Tribe, President, Kauffman and Associates, Inc.

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