IHS Awards $8.3 Million in Grants to Support Urban Indian Health Programs

Today, the Indian Health Service Office of Urban Indian Health Programs awarded grants totaling approximately $8.3 million to 32 urban Indian organizations through the 4-in-1 grant program. These grants will make health care services more accessible for American Indians and Alaska Natives residing in urban areas and support operations at urban health care facilities.

“The 4-in-1 grant program provides funding to urban Indian organizations to ensure comprehensive, culturally appropriate health care services are available and accessible for the urban Indian population,” said IHS Acting Director Elizabeth Fowler. “Together, we continue our work to improve the health and well-being of our urban Indian communities.”

Funding provided through the 4-in-1 grant program will be used to support four health program areas:

- Health promotion and disease prevention services
- Immunization services
- Substance use disorder related services
- Mental health services

These programs are integral components of the IHS health care delivery system and the grant funding will benefit thousands of urban Indian patients.

The following urban Indian organizations received funding:

**Arizona**
- Native Americans for Community Action, Flagstaff, AZ - $177,127
- Native American Connections, Phoenix, AZ - $200,000
- Native Health, Phoenix, AZ - $483,136
- Tucson Indian Center, Tucson, AZ - $229,416

**California**
- Bakersfield American Indian Health Project, Bakersfield, CA - $168,469
- Fresno American Indian Health Project, Fresno, CA - $167,407
- United American Indian Involvement, Los Angeles, CA - $472,513
- Native American Health Center, Oakland, CA - $322,992
- Sacramento Native American Health Center, Sacramento, CA - $230,089
- San Diego American Indian Health Center, San Diego, CA - $213,417
- Indian Health Center of Santa Clara Valley, San Jose, CA - $221,668
- American Indian Health & Services, Santa Barbara, CA - $183,892

**Colorado**
- Denver Indian Health and Family Services, Denver, CO - $199,591

**Illinois**
- American Indian Health Service of Chicago, Chicago, IL - $231,195

**Kansas**
- Hunter Health, Wichita, KS - $186,057

**Michigan**
- American Indian Health & Family Services of SE Michigan, Detroit, MI - $225,756

**Minnesota**
- Indian Health Board of Minneapolis, Minneapolis, MN - $578,561

**Montana**
- Billings Urban Indian Health & Wellness Center, Billings, MT - $200,000
- Butte Native Wellness Center, Butte, MT - $199,517
- Indian Family Health Clinic, Great Falls, MT - $202,550
- Helena Indian Alliance, Helena, MT - $164,373
- All Nations Health Center, Missoula, MT - $179,731

**Nebraska**
- Nebraska Urban Indian Health Coalition, Omaha, NE - $213,034

**New Mexico**
- First Nations Community HealthSource, Albuquerque, NM - $257,932

**Nevada**
- Nevada Urban Indians, Reno, NV - $211,492

**New York**
- New York Indian Council, Long Island City, NY - $200,000

**Oregon**
- Native American Rehabilitation Association of the Northwest, Portland, OR - $295,112
Texas
- Urban Inter-Tribal Center of Texas, Dallas, TX - $255,908

Utah
- Urban Indian Center of Salt Lake, Salt Lake City, UT - $229,455

Washington
- Seattle Indian Health Board, Seattle, WA - $645,595
- The NATIVE Project, Spokane, WA - $306,668

Wisconsin
- Gerald L. Ignace Indian Health Center, Milwaukee, WI - $205,845

The IHS Office of Urban Indian Health Programs was established in 1976 to make health care services more accessible to urban Indians. IHS enters into limited, competing contracts and grants with 41 urban Indian nonprofit organizations to provide health care and referral services for urban Indians throughout the United States. Urban Indian organizations define their services based upon the service population, health status, and documented unmet needs of the urban Indian communities they serve. Urban Indian organizations provide health care services for urban Indians who do not have access to the resources offered through IHS or tribally operated health care facilities because they do not live on or near a reservation.

Recent studies on the urban American Indian and Alaska Native population documented poor health and revealed that the lack of adequate health care was a serious problem for most families. Since 1972, the IHS has gradually increased its support for health-related activities in off-reservation settings to assist American Indians and Alaska Native in gaining access to available health services and develop direct health services when necessary.

The Biden administration continues to support UIOs. For fiscal year 2023, the budget proposes $113 million to expand the Urban Indian Health Program, which is $39 million above FY 2022 enacted. The FY 2022 omnibus bill also includes a $10 million funding increase for urban Indian health to $73 million. These funds would provide additional culturally competent direct health care services for American Indians and Alaska Natives living in urban areas.

The IHS, an agency in the U.S. Department of Health and Human Services, provides a comprehensive health service delivery system for approximately 2.7 million American Indians and Alaska Natives who belong to 574 federally recognized tribes in 37 states. Follow the agency via social media on Facebook, Twitter, and LinkedIn.

# # #