



**NORTHWEST  
PORTLAND  
AREA  
INDIAN  
HEALTH  
BOARD**

Burns-Paiute Tribe  
Chehalis Tribe  
Coeur d' Alene Tribe  
Confederated Tribes of Colville  
Confederated Tribes of Coos, Lower  
Umpqua, and Siuslaw Indians  
Confederated Tribes of Grand Ronde  
Confederated Tribes of Siletz Indians  
Confederated Tribes of Umatilla  
Confederated Tribes of Warm Springs  
Coquille Tribe  
Cow Creek Band of Umpqua  
Cowlitz Indian Tribe  
Hoh Tribe  
Jamestown S'Klallam Tribe  
Kalispel Tribe  
Klamath Tribe  
Kootenai Tribe  
Lower Elwha Klallam Tribe  
Lummi Nation  
Makah Tribe  
Muckleshoot Tribe  
Nez Perce Tribe  
Nisqually Tribe  
Nooksack Tribe  
NW Band of Shoshone Nation  
Port Gamble S'Klallam Tribe  
Puyallup Tribe  
Quileute Tribe  
Quinalt Indian Nation  
Samish Indian Nation  
Sauk-Suiattle Tribe  
Shoalwater Bay Tribe  
Shoshone-Bannock Tribes  
Skokomish Tribe  
Snoqualmie Tribe  
Spokane Tribe  
Squaxin Island Tribe  
Stillaguamish Tribe  
Suquamish Tribe  
Swinomish Tribe  
Tulalip Tribe  
Upper Skagit Tribe  
Yakama Indian Nation

2121 SW Broadway  
Suite 300  
Portland, OR 97201  
(503) 228-4185  
(503) 228-8182 FAX  
www.npaihb.org

**RESOLUTION #17-03-08**  
**Support for Reauthorization of the Special  
Diabetes Program for Indians**

**WHEREAS**, the Northwest Portland Area Indian Health Board {hereinafter "NPAIHB" or "Board" was established in 1972 to assist Tribal governments to improve the health status and quality of life of Indian people; and

**WHEREAS**, the NPAIHB is a "tribal organization" as defined by the Indian Self-Determination and Education Assistance Act {P.L. 93-638 seq. et al) that represents forty- three federally recognized tribes in the states of Idaho, Oregon, and Washington; and

**WHEREAS**, in accordance with the definitions of the Indian Self-Determination and Education Assistance Act at 25 USC §450b, a tribal organization is recognized as a governing body of any Indian tribe and includes any legally established organization of Indians which is controlled, sanctioned, or chartered by such governing body or which is democratically elected by the adult members of the Indian community to be served by such organization and which includes the maximum participation of Indians in all phases of its activities; and

**WHEREAS**, the NPAIHB is dedicated to assisting and promoting the health needs and concerns of Indian people; and

**WHEREAS**, the primary goal of the NPAIHB is to improve the health and quality of life of its member Tribes; and

**WHEREAS**, AI/AN adults are 2.3 times more likely to have diagnosed diabetes compared with non-Hispanic whites; and

**WHEREAS**, the death rate due to diabetes for AI/ANs is 1.6 times higher than the general U.S. population; and

**WHEREAS**, the Balanced Budget Act of 1997 established the Special Diabetes Program for Indians (SDPI) for "the prevention and treatment of diabetes in American Indians and Alaska Natives (AI/AN) for five years; and

**WHEREAS**, Congress reauthorized SDPI for one to three year periods from 2002 to 2015; and

**WHEREAS**, the current renewal of SDPI expires in September, 2017; and

**WHEREAS**, SDPI provides grants for diabetes treatment and prevention services to over 330 IHS, Tribal, and Urban Indian health programs in 35 states and funds Community Directed Grant Programs; and

**WHEREAS**, SDPI has had positive clinical and community outcomes, including: the average blood sugar level (A1c) decreased from 9.0% in 1996 to 8.1% in 2010; the average LDL (“bad” cholesterol) declined from 118 mg/dL in 1998 to 95 mg/dL in 2010; and more than 80% of SDPI grant programs now use recommended public health strategies to provide diabetes prevention activities and serves for AI/AN children and youth; and

**WHEREAS**, Tribes in the Northwest have successful SDPI programs with consistent positive clinical and community outcomes; and

**WHEREAS**, Northwest Tribes’ support permanent reauthorization of SDPI at \$200 million per year with medical inflation rate increases annually or, in the alternative, reauthorization of SDPI for 2018 to 2024 at \$150 million in 2018 with medical inflation rate increases annually thereafter.

**THEREFORE BE IT RESOLVED**, the Northwest Portland Area Indian Health Board supports permanent reauthorization of SDPI at \$200 million per year with medical inflation rate increases annually or, in the alternative, reauthorization of SDPI for 2018 to 2024 at \$150 million per year in 2018 with medical inflation rate increases annually thereafter.

CERTIFICATION

NO. 17-03-08

The foregoing resolution was duly adopted at the regular session of the Northwest Portland Area Indian Health Board. A quorum being established; 34 for, 0 against, 0 abstain on April 20, 2017.

*Andrew C. Joseph Jr.*

\_\_\_\_\_  
Chairman

April 20, 2017

Date

*Luz J. Abraham*  
\_\_\_\_\_  
Secretary