



**RESOLUTION # 19-04-11
NORTHWEST PORTLAND AREA
INDIAN HEALTH BOARD**



**RESOLUTION # 343-08-19
CALIFORNIA RURAL INDIAN
HEALTH BOARD**

JOINT RESOLUTION

**SUPPORT FOR LEGISLATION THAT ESTABLISHES A DEPARTMENT OF VETERANS AFFAIRS'
(VA) TRIBAL ADVISORY COMMITTEE (TAC)**

- WHEREAS,** the Northwest Portland Area Indian Health Board (NPAIHB) is a Tribal organization under P.L. 93-638 that represents 43 federally-recognized Indian Tribes in Oregon, Washington, and Idaho and is dedicated to assisting and promoting the health needs and concerns of American Indian/Alaska Native (AI/AN) people in the Northwest; **AND**
- WHEREAS,** the California Rural Indian Health Board, Inc. (CRIHB), founded in 1969 for the purpose of bringing back health services to Indians of California, is a Tribal organization under P.L. 93-638 that represents 52 federally-recognized Tribes through its membership of 16 Tribal Health Programs in California and is committed to the needs and interests that elevate and promote the health status and social conditions of the Indian People of California; **AND**
- WHEREAS,** the NPAIHB and CRIHB are dedicated to assisting and promoting the health needs and concerns of AI/AN people; **AND**
- WHEREAS,** the primary goal of the NPAIHB and CRIHB is to improve the health and quality of life of its member Tribes; **AND**
- WHEREAS,** the United States (U.S.) has a unique and special relationship with AI/ANs to provide health care as established through the U.S. Constitution, treaties, U.S. Supreme Court decisions and federal legislation; **AND**
- WHEREAS,** AI/AN Veterans have played a vital role in the U.S. military for over two hundred years in all of the U.S.' wars since the Revolutionary War and have served in several wars before they were even recognized as American citizens; **AND**
- WHEREAS,** AI/AN Veterans have distinctive cultural values that drive them to serve their country; **AND**
- WHEREAS,** AI/ANs serve in the U.S. Armed Forces at higher rates per capita, are younger as a cohort and have a higher concentration of female Service members compared to all other Service members, yet they are underrepresented among Veterans who access the services and benefits they have earned; **AND**

WHEREAS, in Fiscal Year (FY) 2016, the National Center for Veterans Analysis and Statistics estimated 1,766 AI/AN Veterans in Idaho, 2,979 in Oregon, and 6,315 in Washington; **AND**

WHEREAS, in FY 2016, the National Center for Veterans Analysis and Statistics estimated 13,518 AI/AN Veterans in California; **AND**

WHEREAS, the VA must take into consideration that AI/AN Veterans are more likely to lack health insurance and to have a disability, service-connected or otherwise, than Veterans of other races; **AND**

WHEREAS, in FY 2016, the National Center for Veterans Analysis and Statistics highlighted about 19 percent of AI/AN Veterans had a service-connected disability rating in 2010; **AND**

WHEREAS, the National Center for Veterans Analysis and Statistics also reported that AI/AN Veterans have lower incomes, lower educational attainment, and higher unemployment than Veterans of other races; **AND**

WHEREAS, for the VA to better serve AI/AN Veterans after their service to this country, the VA must create a Tribal Advisory Committee (TAC) to address inequities of AI/AN Veterans and to fulfill the federal trust responsibility; **AND**

WHEREAS, the creation of a VA TAC is critical to ensuring that the VA, in partnership with Tribes, provides improved comprehensive, culturally responsive care and benefits to better serve our AI/AN Veterans; **AND**

WHEREAS, a VA TAC would supplement meaningful Tribal consultation and provide deliberation on issues and proposals that pertain to the need of AI/AN Veterans and the complex and varying infrastructure of IHS and Tribal health care facilities for the 573 federally-recognized Tribes in the U.S.; **AND**

WHEREAS, a VA TAC is needed to ensure that pertinent issues are brought to the attention of Tribes in a timely manner for Tribal feedback to be obtained; **AND**

WHEREAS, a VA TAC is needed to develop effective collaboration and informed decision-making with Tribes prior to, during, and after the development of VA policy decisions and opportunities for our AI/AN Veterans; **AND**

WHEREAS, a VA TAC should be comprised of designated Tribal representatives from the IHS Areas to ensure ongoing communications with the leadership of the VA regarding policy decisions that significantly impact the health care and well-being of AI/AN Veterans.

THEREFORE BE IT RESOLVED that the NPAIHB and CRIHB supports legislation that establishes a VA TAC with these provisions:

- Tribes must be able to select their own representatives to participate on the VA TAC, and such representatives may or may not be elected Tribal leaders;
- Be comprised of 17 voting members;
- Include 12 representatives from the Indian Health Service (IHS) Areas;
- Incorporate five “National At Large Member (NALM)” positions and two “Alternate NALM” positions;
- Include Alternate Representatives and two Technical Advisors for each Area;

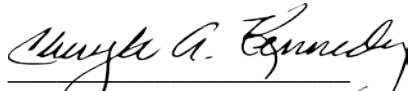
- No term limits on TAC membership except that a TAC member may be replaced if the TAC member is unable to attend two of four meetings per year;
- Membership must include non-voting representatives from the VA Office of Tribal Government Relations and IHS; and
- Quarterly meetings must be held, along with monthly calls, as necessary; and
- Submission of an annual report and recommendations to Tribes.

CERTIFICATION

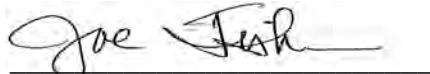
The foregoing joint resolution was adopted at a duly called regular joint meeting of the Board of Directors of NPAIHB and CRIHB (**NPAIHB** vote 26 For and 0 Against and 0 Abstain; **CRIHB** vote --- For and 0 Against and 2 Abstain) held this 18th day of July 2019, in Lincoln, CA and shall remain in full force and effect until rescinded.

**NORTHWEST PORTLAND AREA
INDIAN HEALTH BOARD**

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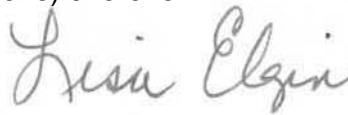
Chairperson of the Board



Attest

**CALIFORNIA RURAL
INDIAN HEALTH BOARD, INC.**

1020 Sundown Way
Roseville, CA 95661
(916) 929-9761



Chairperson of the Board



Attest