WHEREAS, the National Council of Urban Indian Health (NCUIH), founded in 1998, is a 501(c) (3) organization created to support the development of quality, accessible, and culturally sensitive health care programs for AI/ANs living in urban communities; and

WHEREAS, NCUIH strives to improve the health of the over 70 percent of the AI/AN population living in urban settings, supported by quality, accessible health care centers; and

WHEREAS, the National Council of Urban Indian Health (NCUIH), is the premier national representative of Urban Indian Health Programs receiving grants under Title V of the Indian Health Care Improvement Act (IHCIA) and the AI/ANs they serve; and

WHEREAS, AI/ANs face some of the starkest disparities in behavioral health outcomes of any population in the country, despite representing only roughly 2.0% of the total U.S. population; and

WHEREAS, health indicators continue to underscore significant behavioral health disparities among AI/ANs residing in urban areas; and

WHEREAS, suicide is the second leading cause of death for urban Indian youth between the ages of 10 and 24; and

WHEREAS, NCUIH is currently making strong efforts to help reduce the incidents of suicide among urban Indian youth adhering to the belief that suicide can be preventable through greater access to information and resources; and

WHEREAS, NCUIH provides a wide range of education, technical support, and training to UIHPs to address these stark behavioral health disparities and achieve Healthy People 2020 goals; and

WHEREAS, one of NCUIH's primary objectives is to address and help ameliorate the morbidity and mortality profiles and disproportionate rate of behavioral health issues AI/ANs living in urban areas face through representation as well as training and resource development; and

WHEREAS, NCUIH is the only national organization tackling these issues in this way – with an aim to reduce behavioral health disparities face by AI/ANs living in urban settings; and

WHEREAS, NCUIH provides representation on national workgroups such as the Action Alliance to Reduce Suicide’s AI/AN taskforce, to elevate the concerns and needs of urban AI/AN communities and the impacts of suicide and substance misuse disorders, to aid in development of prevention initiatives,

WHEREAS, the Indian Health Service (IHS) conducts numerous critical operations in fulfillment of the trust obligation; and
WHEREAS, IHS Division of Behavioral Health (DBH) serves as the primary source of national advocacy, policy development, management, and administration of behavioral health, alcohol and substance abuse, and family violence prevention programs for AI/AN people; and

WHEREAS, DBH facilitates numerous vital programs aimed at addressing and reducing behavioral health disparities among AI/AN people; and

WHEREAS, without a national behavioral health technical assistance program in place, UIHPs would likely see decreased efficiency in behavioral health program acquisition and service delivery; and

WHEREAS, without national behavioral health funding from DBH, innovative models – including novel reimbursement methods for traditional medicine practice – would not be discussed or implemented, resulting in increased health care costs for urban AI/ANs; and

WHEREAS, the absence of national funding would directly impact urban AI/AN behavioral health care; and

THEREFORE BE IT RESOLVED, that the National Council of Urban Indian Health supports the continued funding by the Indian Health Service of national behavioral health grants that support the National Council of Urban Indian Health in assisting Urban Indian Health Programs to reduce behavioral health disparities urban AI/ANs face through culturally competent, high quality programming, including the development of resource toolkits, participation in critical suicide prevention efforts, provision of research updates and statistics, preparation of fact sheets, and development and provision of critical education and training resources.

CERTIFICATION

The foregoing resolution was adopted by NCUIH on June 5th, 2019 with a quorum present.

Maureen Rosette , President

Linda Son-Stone, Secretary