



**American Indian/Alaska Native
Health Research Advisory Council (HRAC)
Quarterly Conference Call
Thursday, December 18, 2014**

HRAC Tribal Delegates and Alternates

L. Michelle Gomez — Albuquerque Area Delegate
Aaron Payment — Bemidji Area Delegate
Stephen Kutz — Portland Area Delegate
Chester Antone — Tucson Area Delegate
Michael Peercy — National At-Large Member Delegate
Malia Villegas, PhD — National At-Large Member Alternate

HRAC Federal Partners

Kishena C. Wadhvani, PhD — AHRQ
Adelle Simmons — ASPE
Michael Weaver, Gwenivere Rose — HRSA
Mose Herne — IHS
J. Nadine Gracia, MD, Rick Haverkate, Carol Jimenez, Alexis Bakos — OMH
Sheila K. Cooper — SAMHSA

Other Attendees

Bobby Saunkeah — Chickasaw Nation
Kendra King Bowes — Native American Management Services, Inc. (NAMS)
Faye Williams — Office of Minority Health Resource Center
Roland Zebina — Office of Minority Health Resource Center

Roll Call and Introductions

Aaron Payment, HRAC Co-Chair

*Rick Haverkate, Public Health Advisor/American Indian & Alaska Native Health Policy Lead,
Office of Minority Health (OMH)*

- Chairperson Payment and Mr. Haverkate opened the call and welcomed participants. Mr. Haverkate conducted a roll call of tribal delegates and federal representatives.
- Decisions on action items were deferred to the next meeting due to the lack of a quorum.

Welcome and OMH Updates

J. Nadine Gracia, MD, MSCE, Deputy Assistant Secretary for Minority Health, U.S. Department of Health and Human Services

- Dr. Gracia opened by thanking Chairperson Payment and Councilman Stephen Kutz for their leadership of the HRAC and their help in moving the priorities of the HRAC forward. In addition, she extended her gratitude to the HRAC delegates, alternates and those participating as proxies for their time and dedication to the valuable service provided to the Department of Health and Human Services.
- Dr. Gracia introduced the new HRAC Albuquerque Area Delegate, Michelle Gomez, Director of the Jicarilla Apache Health & Fitness Center. She also announced two new additions to the OMH leadership team: Carol Jimenez, Deputy Director and Alexis Bakos, Senior Advisor to the Deputy Assistant Secretary.
- It was noted that the HRAC still has three vacancies: Nashville Area, Phoenix Area, and one National-At-Large position. She asked the HRAC members to please share with their contacts that nominations are currently being accepted. Interested individuals should submit a resume or CV, and a nomination letter to Rick Haverkate at Rick.Haverkate@hhs.gov.
- Dr. Gracia has been meeting regularly with Rick Haverkate and he has provided a comprehensive list of the HRAC priorities. Her intention is to assist the HRAC in its efforts to see these priorities met.
- Dr. Gracia noted that she understands that the HRAC charter is important and her office is working hard to ensure that the HRAC charter reflects the primary and current functions of the HRAC. She looks forward to working with the charter workgroup and the entire HRAC in completing this important and necessary task. She said that this process is a priority and that her office is committed to this work.
- The Office of Minority Health has been reviewing action steps to assist in the realization of one of HRAC's foremost priorities — an American Indian and Alaska Native Research Database/Clearinghouse. Rick will be working closely with the HRAC on the advancement of this objective.

HRAC Annual Meeting and September Call Minutes Approval

Aaron Payment, HRAC Co-Chair

- The minutes were not approved, as there was no quorum.

HRAC Updates

Rick Haverkate, Public Health Advisor/American Indian & Alaska Native Health Policy Lead, Office of Minority Health (OMH)

Faye Williams, Knowledge Center Manager, Office of Minority Health Resource Center

- Mr. Haverkate informed the HRAC that OMH is still working on the HRAC priorities from the in-person meeting in June. A communications plan and fact sheets are ongoing efforts to publicize what HRAC is doing and committed to working on.
- Mr. Haverkate noted they are working on a communications plan and sent out a communications survey to HRAC delegates to gather feedback. Delegates who have not filled out the summary should do so by December 19. OMH is also working on a fact sheet, which will give the history of the HRAC and explain the role of the HRAC. OMH is working on reports for the HRAC including an HRAC Annual Report and Annual Research

Report. These are going through final edits and will be posted on the website and shared with the HRAC.

- Mr. Haverkate noted that one of the HRAC requests has been a Native research database/clearinghouse and that the OMH Resource Center (OMHRC) has an extensive library/database that could be a good starting point with the ability to increase content. He asked Faye Williams, Knowledge Center Manager, to give a presentation on the AI/AN Health Research Portal/Clearinghouse.
- Ms. Williams mentioned the OMHRC Knowledge Center contains a collection of 50,000 documents, books, journal articles, and media related to the health status of racial and ethnic minority populations. The library collection also includes sources of consumer health material in more than 35 languages. They have three librarians on staff and an information specialist who staffs a toll free number to respond to requests from the public.
- Ms. Williams noted to conduct a search, you have to access the Office of Minority Health home page, select Resource Center, next select Knowledge Center, and then an option to Search Library Catalog is available. The link is:
<http://minorityhealth.hhs.gov/omh/content.aspx?ID=10153&lvl=2&lvlID=15>
- From this link, users can also see a list of new acquisitions, and all the most recent documents.
- To search the library catalog, there are options for a simple search using search terms or an advanced search that has more options to be more specific. The results provide website links when available and if they are not available, then OMHRC has a hard copy on file. OMHRC has an ongoing project to digitize old hard copies. Those with copyrights are being scanned and saved on the server so they are available electronically to librarians or can be viewed in-person.
- The library includes most IHS Provider Care Newsletters, access to PubMed (which has abstracts), and access to the National Library of Medicine, which links to free full text documents.
- When doing a catalog search, if you include an asterisk (*) it will search for any variation of the word being searched which is helpful when searching for American Indian.
- Chairman Payment asked when doing a subject search if a specific subject term such as “statistical logistical regression” can be used. Ms. Williams said that the system is not that specific on subject terms.
- Chairman Payment suggested a webinar could be beneficial to the members to spend 30 minutes to 1 hour understanding how to search by subject and topic. Other interested tribal representatives could also be invited. An example could be provided during the webinar searching for historical trauma since that is an HRAC priority. This would allow OMHRC to show a practical application to use the tool and also see the information that is available right now.
- Dr. Villegas thought the webinar would be a great idea and added that it would be helpful to look at other databases available at NIH and HHS to understand how the search tools might differ.

HRAC Website Updates

*Rick Haverkate, Public Health Advisor/American Indian & Alaska Native Health Policy Lead,
Office of Minority Health (OMH)*

Roland Zebina, IT Manager, Office of Minority Health Resource Center

- Roland Zebina, IT Manager, Office of Minority Health Resource Center, gave a demonstration of the updated HRAC website that will go live soon. It has a new look and feel to match the updated OMH website. The new format will allow the HRAC to present more information. The navigation banner is now at the top of the site to make it more simplified. The information is all still there, but it has just been reorganized and updated. The website links will all remain the same.
- Mr. Zebina demonstrated pages such as About HRAC (includes HRAC charter and membership information), Reports (includes meeting minutes and HRAC reports), Calendars (includes meetings both nationally and locally) and Resources (includes Health Profiles). For the calendar function, HRAC members can send Rick any events they would like listed now, but soon a function will be available that will allow users to post their own events.
- Mr. Zebina mentioned that if HRAC members have comments/feedback regarding the site or documents to be put on the site, they can go through Rick. This is a living document that can be changed.

HRAC Tribal Advisory Updates

Aaron Payment, HRAC Co-Chair

Rick Haverkate, Public Health Advisor/American Indian & Alaska Native Health Policy Lead, Office of Minority Health (OMH)

- Chairperson Payment has sent Rick the STAC priorities spreadsheet and summary that was used with the Secretary earlier this month so they have a copy of the issues. The STAC discussed the HHS budget, which received a \$208 million increase for IHS. In terms of research related discussions, the STAC invited Head Start to present. Tribal Head Start is working on a study with the Tribal Head Start Directors to make sure they do it in a culturally sensitive way. It is a quantitative study, but they are taking a qualitative approach. When the STAC spoke with the Secretary, one of the key issues mentioned was youth suicide and how this relates to historical trauma, which was discussed at the White House Conference. This has been a topic discussed by the HRAC, so this was carried to the STAC.
- Councilman Antone noticed that environmental issues, as it relates to mining in Indian Country, has begun to surface (specifically in Montana, Idaho, New Mexico and Arizona). One of the issues would be to request health studies in those locations. The other issue is a behavioral health/mental health agenda. He suggested that SAMHSA, IHS, CDC, and HRSA meet to develop a long-term plan to address the mental health issue, as some form of research is needed to bolster the agenda.
- Councilman Antone noted he serves as chair of the CDC tribal advisory committee. One of the main issues is the Native specimens protocol including collection, protection, and disposal/disposition of the Native specimens. Tribes need to address the cultural sensitivity issue to ensure that cultural and traditional practices are protected since all tribes are different.
- Chairman Payment asked for a written update from the CMS tribal advisory committee since no members were present serving on that committee. It was noted that there is a comment period on Medicare-like rates for IHS. At the STAC there was mention about concerns regarding a lack of consultation. He will ask that Stacey send the information to Rick.
- Dr. Villegas also said that there was a request for comments on the draft NIH Policy on the use of a single institutional review board for multi-site research. She will send the information to Rick. Mr. Kutz asked if the request is for all the different groups to comment.

Dr. Villegas said that NCAI is compiling comments, but she can also help if the HRAC wants to do more. Councilman Antone noted tribes should be included. The NIH Tribal Advisory Committee will be meeting in March 2015 and this will be addressed.

- Ms. Cooper reported that SAMHSA hosted a Native American Youth Conference. They were impressed with the youth who shared their experiences. There was a mental/behavior health substance abuse session at the White House Conference that was well attended. She also mentioned that Phoenix, Billings and at-large Areas have open positions for the Tribal Advisory Committee at SAMHSA. Letters of nomination should be sent to her at sheila.cooper@samhsa.hhs.gov. The next meeting will be held in April 2015.

Wrap Up

- Mr. Haverkate said that OMH would be working with the co-chairs to develop a calendar for the year including the next three quarterly meetings. He asked that HRAC members hold June 4-5, 2015 for the in-person HRAC meeting.
- Chairperson Payment noted he really appreciated the web conference approach and thinks the HRAC should make it a practice.

The meeting was adjourned.