
Tribal Affairs



Oregon
Health
Authority

Tribal Affairs

Tribal Affairs is housed in the OHA Director's Office. The Tribal Affairs Director and Tribal Health Policy Analyst works with staff across the agency to identify the programs and policies that impact tribes.

Tribal Affairs works closely with other designated OHA tribal liaisons. Although not all the positions are full time tribal liaisons, these subject matter experts are vital to completing work with the tribes in specific areas such as: Medicaid, Mental Health, Public Health, Office of Equity and Inclusion and Native American Services at the Oregon State Hospital.

Tribal Affairs and Tribal Liaisons works regularly with elected tribal officials, tribal health directors and representatives from tribes, Indian Health Services, the Urban Indian Health Program, the Northwest Portland Area Indian Health Board, as well as other agencies focusing on tribal health priorities.

Tribal Affairs needs you to help us do our best work with tribes!

Federally Recognized Tribes

Federally Recognized Tribes are individual Sovereign Nations. The United States Government has a unique legal relationship with American Indian tribal governments as set forth in the Constitution of the United States, numerous treaties, statutes, Federal court decisions and Executive Orders.

This relationship is derived from the political and legal relationship that Indian Tribes have with the federal government and is not based upon race.

Federally recognized tribes are those Native American tribes recognized by the United States Bureau of Indian Affairs for certain federal government purposes. There are currently 573 Federally Recognized Tribes.

Tribal Governments

Tribal governments are separate sovereign nations with powers to protect the **health, safety and welfare** of their members and to govern their lands.

This tribal sovereignty predates the existence of the U.S. government and the state of Oregon. The members residing in Oregon are citizens of their tribes, of Oregon and, since 1924, of the United States of America.

All Oregon tribal governments have reservation or trust lands created by treaties or federal acts. Each tribe determines their own citizenship (enrollment).

Tribal Sovereignty

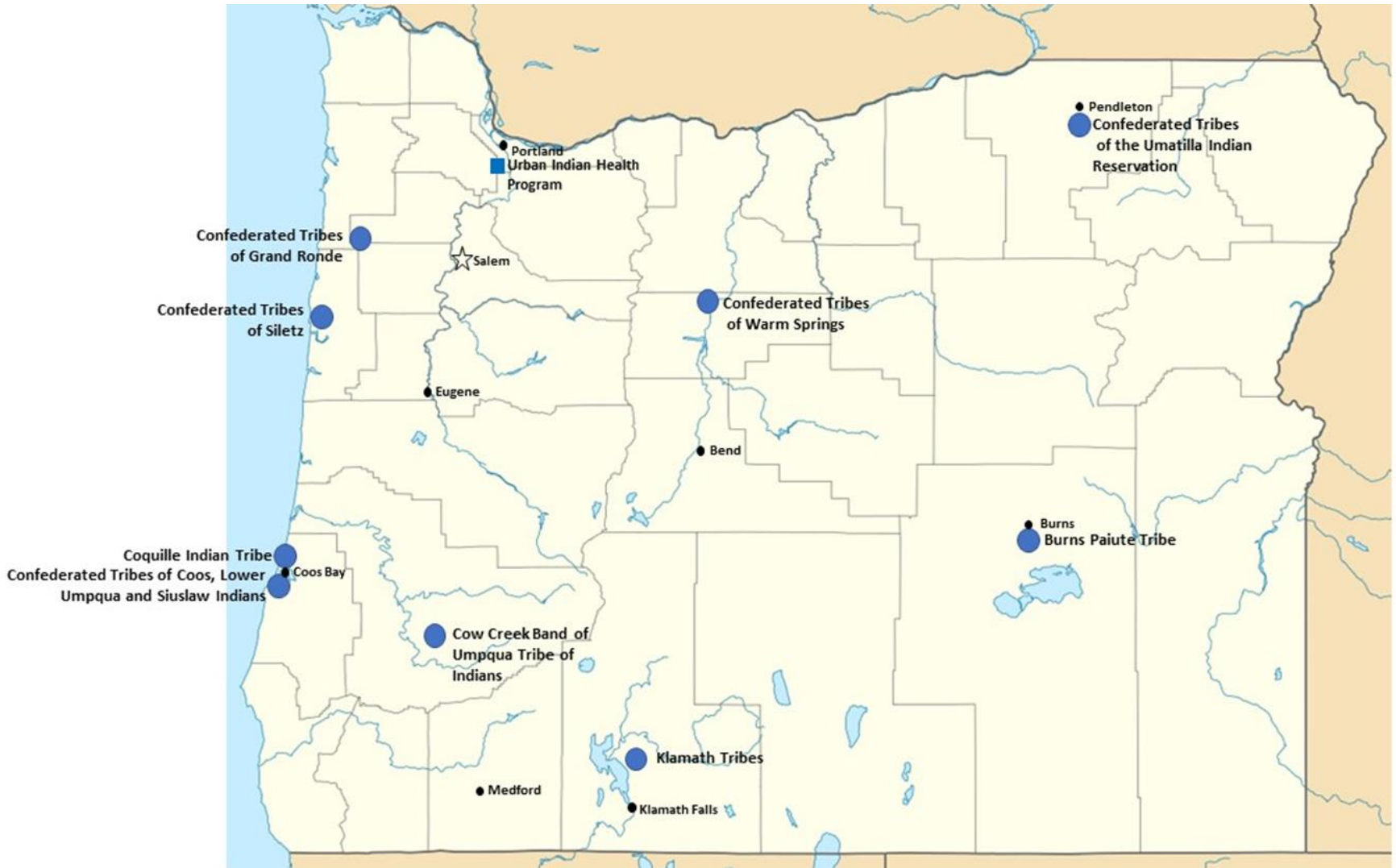
Tribal sovereignty in the United States is the inherent authority of indigenous tribes to govern themselves within the borders of the United States of America. The U.S. federal government recognizes tribal nations as "domestic dependent nations" and has established a number of laws attempting to clarify the relationship between the federal, state, and tribal governments.



State of Oregon

The state of Oregon also honors tribal sovereignty and recognizes the right of Indian tribes to self-determination and self-governance.





Oregon's Nine Federally Recognized Tribes

Oregon Tribal Governments

- Burns Paiute Tribe
- Confederated Tribes of Coos, Lower Umpqua and Siuslaw Indians
- Confederated Tribes of Grand Ronde
- Confederated Tribes of Siletz Indians
- Confederated Tribes of the Umatilla Indian Reservation
- Confederated Tribes of Warm Springs
- Coquille Indian Tribe
- Cow Creek Band of Umpqua Tribe of Indians
- Klamath Tribes



Historical Trauma

Historical trauma refers to cumulative emotional and psychological wounding, extending over an individual lifespan and across generations, caused by traumatic experiences.

- Loss of Land
- Loss of Culture
- Loss of Language
- Boarding Schools
- Relocation Act

How do these things continue to affect Native people and where they live, work and play?

Oregon Indian Population

129,579 AI/AN (alone or in combination, ACS 2015)

15,314 AI/AN in Portland (alone or in combination, ACS 2015)

Portland is 9th largest Native American population in USA

AI/AN Enrolled in OHP - Heritage Native American (HNA)

Fee for Service-Open Card	21,685
Managed Care	36,858
Total	58,543

(Dec. HNA 2021 Fast Facts)

Indian Health Delivery System

Indian Health Programs can be grouped into 3 categories:

- Indian Health Service (IHS) Directly Operated - Warm Springs, Western Oregon Service Unit - Chemawa Indian School
- Tribally Operated (P.L. 93-638 Indian Self-Determination Act)
8 Oregon Tribes
- Urban Program - NARA

Types of Health Services

- Public Health
- Ambulatory Primary Care (outpatient care)
- Inpatient care - Hospitals
- Medical specialties
- Traditional healing practices
- Dental and Vision Care
- Behavioral Health Services
- Specialty Care Services (CHS)



Government to Government

Oregon maintains a government-to-government relationship with the tribal governments:

1975 - Legislative Commission on Indian Services (LCIS)

1996 - Executive Order EO-96-30

2001 - SB 770

2009 - American Recovery and Reinvestment Act Section 5006

2010 - OHA Tribal Consultation Policy

2017 - Attachment I - 1115 Waiver - Tribal Engagement Protocol

2018 - OHA Tribal Consultation and Urban Indian Health Program Confer Policy

Tribes are NOT stakeholders!

SB 770 (ORS 182.162 to 182.168)

Oregon 1st state to adopt formal legal government-to-government relations through legislation

Directs state agencies in government-to-government relationships with Oregon tribes

- State agencies to develop and implement policy on relationship with tribes; cooperation with tribes.
- Training of state agency managers and employees who communicate with tribes; annual meetings of representative of agencies and tribes; annual reports by state agencies.

What is Tribal Consultation?

To establish and maintain a positive government-to-government relationship, communication and consultation must occur on an ongoing basis so that Tribes have an opportunity to provide *meaningful* and *timely* input on issues that may have a *substantial direct effect* on them.

In the beginning of the thought process of any change or update to programs, funding, requirements, etc. We need to ask ourselves how will this affect the tribes?



Tribal Consultation and Urban Indian Health Program Confer Policy

Examples of Critical Events:

- Policy development
- Program activities
- A State Plan Amendment, demonstration proposal or renewal, waiver proposal or renewal, or state Medicaid regulations changes with a compliance cost or impact to Tribes.
- Results of monitoring, site visits, or audit findings
- Data collection and reporting activities
- Funding or budget developments
- Rulemaking impacting Tribes
- Any other event impacting Tribes

Meeting or Consultation?

Tribal Consultation refers to a formal meeting with elected Tribal government officials or designees and our agency director. Decision makers present.

Tribal meetings are less formal and happen frequently. Updates, program reports, etc. Decision makers may or may not be present.

Examples: OHA Tribal Monthly Meeting, SB770 Health and Human Services Cluster meeting, Workgroups

Tribal Service Areas

Each tribe's area of interest may extend far beyond its tribal governmental center or reservation location. The federal government acknowledges that many tribal members do not live on tribal lands and, therefore, allows for tribes to provide governmental programs in specified service areas.

Sometimes referred to as Contract Health Service Delivery Areas (CHSDAs) or Purchase and Referred Care Delivery Areas (PRCDAs)

For example, the Confederated Tribes of Siletz service area includes 11 Oregon counties: Benton, Clackamas, Lane, Lincoln, Linn, Marion, Multnomah, Polk, Tillamook, Washington and Yamhill.

Local Relationships

These relationships are unique and need to be understood to build partnerships at the local level to improve health.

Key components to know include:

- What local tribes are in the area?
- What is the history?
- What is the current environment?

Regional and Cultural Differences

- Great diversity across and within tribes
- Within region similarities based on ecology, climate, language, and sharing of information for years
- Forced co-existence
- Historic rivalries, family or clan conflicts, and “Tribal politics”
- Ever evolving culture
- Adaptation to influence of other cultures
- Urban Indian Communities

Customs and Practices

- Specific cultural customs among AI/AN groups may vary significantly, even within a single community
- “The way we do things”
- Cultural customs are often seen explicitly through material culture
- Outward cultural customs are a reflection
- “Walking in two worlds” (bi-cultural)



Health & Wellness

Concepts of health and wellness are broad.

- All in all, striving for harmonious balance-mind, body, spirit

Statistically high rates of:

- Diabetes, heart disease, mental health disorders, alcoholism, and suicide

Strength based care

Tribal based practices

- Talking circle, sweat lodge, powwow, canoe journey etc.

Strength's in Tribal Community

- Extended family and kinship ties
- Long-term natural support systems;
- Shared sense of collective community responsibility;
- Physical resources
- Indigenous generational knowledge/wisdom
- Historical perspective and strong connection to the past
- Survival skills and resiliency in the face of multiple challenges
- Cultural revival, ceremonies, language
- Ability to “walk in two worlds”
- Community pride



Self Awareness

Examine your own belief system about AI/AN people related to health and social issues.

Avoid assumptions, biased views, stereotypes; trust does not come easy

Respect of personal space

- Sacred items

Be open to the natural order of things

Be accepting of customs and practices

- Praying, Smudging, Other Ceremonies, Funerals

Caution when sharing your AI/AN genealogy

Resources

- Legislative Commission on Indian Services-Government to Government annual reports, links of interest, approach to state tribal relations, tribal government websites and more.
- <https://www.oregonlegislature.gov/cis>
- Broken Treaties, An Oregon Experience
- <http://www.opb.org/television/programs/oregonexperience/segment/broken-treaties-oregon-native-americans/>





Create a good day!

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