



DEPARTMENT OF HEALTH AND HUMAN SERVICES  
SECRETARY'S TRIBAL ADVISORY COMMITTEE

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**Centers for Disease Control and Prevention (CDC)/  
Agency for Toxic Substances and Disease Registry (ATSDR)  
Biden Harris Administration Updates on CDC/ATSDR Tribal Activities  
March 2023 – September 2023**

**New Grants/Funding**

[Strengthening Public Health Systems and Services in Indian Country \(CDC-RFA-TO-23-0001\)](#): In April 2023, CDC announced a new five-year cooperative agreement for eligible American Indian and Alaska Native (AI/AN) federally recognized tribes and/or regional tribally designated organizations. The program's purpose is to strengthen the quality, performance, and infrastructure of tribal public health systems, including workforce, data and information systems, and programs and services. This program's intended outcome is to improve public health and address health inequities in Indian Country. Throughout the period of performance, recipients will work towards achieving at least one of the following outcomes: 1) Improved capacity to develop public health programs and services to address prioritized public health activities in AI/AN communities; 2) Improved capacity to implement public health programs and services to address prioritized public health activities in AI/AN communities; 3) Improved capacity to evaluate public health programs and services to address prioritized public health activities in AI/AN communities. The following is a summary of the funding timeline:

- April 5, 2023: NOFO published on [Grants.gov](#)
- April 11 and 13, 2023: Applicant informational calls
- May 5, 2023: Optional letters of Intent (LOI) due from applicants
- June 6, 2023: Applications due by 11:59 PM EDT.
- August 30, 2023: Anticipated notices of award issued for Strategy 1
- August 31, 2023: Anticipated budget period start date
- September 30, 2023: Anticipated notices of award issued for Strategy 2
- Budget period length: 12 months (August 31, 2023–August 30, 2024)
- Period of Performance: 5 years (August 31, 2023–August 30, 2028)
- Target Completion Date: August 30, 2028

On August 25th, CDC's Public Health Infrastructure Center/Division of Jurisdictional Support (DJS) awarded \$5.4 million in initial funding to 26 federally recognized American Indian and Alaska Native (AI/AN) Tribes and regional AI/AN tribally designated organizations through the new 5-year cooperative agreement. Each recipient received \$208,000. The following recipients will work to improve their capacity to develop, implement, and evaluate public health programs and services to address prioritized public health activities in AI/AN communities:

***Federally Recognized AI/AN Tribes:*** Cherokee Nation, Chickasaw Nation, Choctaw Nation of Oklahoma, Colusa Indian Community Council, Eastern Band of Cherokee Indians, Forest County

Potawatomi Community, Kickapoo Tribe of Oklahoma, Muscogee Creek Nation, Pueblo of Laguna, Rosebud Sioux Tribe, Shoshone-Bannock Tribes, Turtle Mountain Band of Chippewa Indians, Viejas Band of Kumeyaay Indians, and the White Earth Band of Chippewa Indians.

***Federally Recognized Regional AI/AN Tribally Designated Organizations*** : The Alaska Native Tribal Health Consortium, Albuquerque Area Indian Health Board Inc., California Rural Indian Health Board Inc., Great Lakes Inter-Tribal Council Inc., Indian Health Council Inc., Inter-Tribal Council of Arizona Inc., Northwest Portland Area Indian Health Board, Rocky Mountain Region Tribal Leadership Council, Southern Plains Tribal Health Board, United South and Eastern Tribes Inc., Wabanaki Health and Wellness NPC, and the Yukon-Kuskokwim Health Corporation.

*Chickasaw Nation's Strategy 3: 6|18 Project*: The Office of Policy, Performance and Evaluation (OPPE) [formerly the Office of the Associate Director of Policy] has provided Chickasaw Nation with two years of funding for their Strategy 3: 6|18 Project. Through support from the Division for Heart Disease and Stroke Prevention, OPPE provided Chickasaw Nation a third year of funding via the Center for State, Tribal, Local, and Territorial Support's 1803 funding mechanism from 2022-2023. This project supports the planning and piloting of a 6|18 intervention within a tribal healthcare system. CDC's 6|18 Initiative identified evidence-based interventions that have shown to improve health and control healthcare costs. In the third year of funding, the intervention will be piloted within their Chickasaw Nation pharmacy's hypertension clinic. OPPE and Division for Heart Disease and Stroke Prevention will provide technical assistance on Self-Measured Blood Pressure program planning, pilot implementation and evaluation of results for informing tribal decision-makers. These efforts will help build Chickasaw Nation's capacity to plan and deliver evidence-based intervention to reduce blood pressure while control healthcare costs.

*CDC-RFA-CE23-2301 Domestic Violence Prevention Enhancement and Leadership Through Alliances (DELTA): Achieving Health Equity through Addressing Disparities (AHEAD)*: The National Center for Injury Prevention and Control's (NCIPC) Division of Violence Prevention (DVP) has announced 13 funding recipients from DELTA AHEAD. The DELTA AHEAD program funds state domestic violence coalitions to implement intimate partner violence prevention strategies and approaches, with a focus on health equity, while funding local communities to do the same via community-driven action plans. DELTA AHEAD recipients are encouraged to work with rural communities and indigenous populations. The overall budget for DELTA AHEAD is \$5,840,458. The DELTA AHEAD funding recipients are as follows:

- Alaska Network on Domestic Violence and Sexual Assault Inc.
- Arizona Coalition to End Sexual and Domestic Violence
- California Partnership to End Domestic Violence
- Connecticut Coalition Against Domestic Violence
- Delaware Coalition Against Domestic Violence
- Indiana Coalition Against Domestic Violence Inc.
- Michigan Coalition to End Domestic and Sexual Violence
- New Jersey Coalition to End Domestic Violence
- North Carolina Coalition Against Domestic Violence
- Ohio Domestic Violence Network
- Pennsylvania Coalition Against Domestic Violence
- Rhode Island Coalition Against Domestic Violence
- Tennessee Coalition to End Domestic and Sexual Violence

*CDC-RFA-CE23-0006 Rape Prevention and Education: Assessing Coalition Capacity to Advance Primary Prevention*: NCIPC's DVP is funding the Rape Prevention and Education: Assessing Coalition

Capacity to Advance Primary Prevention grant. The purpose of this Notice of Funding Opportunity (NOFO) is to build and enhance the primary prevention capacity of State, Territorial, and Tribal Sexual Assault Coalitions in preparation for a sexual violence prevention strategy implementation focused on health equity. This work will help build the foundation for coalitions to enhance, expand, and strengthen primary sexual violence prevention efforts and address health inequities, and will create meaningful involvement and engagement with state health departments, state sexual assault coalitions, culturally specific organizations, and underserved communities in the Rape Prevention and Education program. The total award budget is \$7,410,000 and has a 12-month reporting period. Tribal coalition recipients include American Samoa Alliance Against Domestic and Sex Violence & First Nations Women's Alliance Executive.

*Adverse Childhood Experiences (ACEs) surveillance and prevention cooperative agreements:* NCIPC's DVP is currently working to fund a new iteration of the ACEs surveillance and prevention cooperative agreements, which are currently ending in August 2023. These two cooperative agreements, which will be funded through CDC-RFA-TO-23-001, are titled “*Preventing Adverse Childhood Experiences through Building Data Capacity*” and “*Preventing Adverse Childhood Experiences through Data to Action*”. Each award will fund one recipient. The first award will focus on building ACEs surveillance capacity (\$200,000 annually); the second award will focus on continuing ACEs surveillance capacity, implementation of at least one primary prevention approach for ACEs, and use of these data to inform action (\$350,000 annually). Each award is expected to be for five-years (contingent upon renewal application and funding), with a project period between August 31, 2023 – August 30, 2028. DVP has released the call for applications with expected selection and funding of the selected recipients in Summer 2023.

*NOFOs for the Drug-Free Community Support Program:* Earlier this year, the Office of National Drug Control Policy (ONDCP) and CDC announced NOFOs for the Drug-Free Community Support Program for recipients that are applying for their first 5 years of funding and for recipients that are applying for years 6-10. Tribes and tribal organizations were eligible to apply. The announcement closed on April 11th, and we anticipate announcing the awardees of the NOFOs in September 2023. Currently, a total of 745 community coalitions in all 50 states receive over \$93 million in grant funding through the Drug-Free Community Support Program.

*Funding supporting the National Diabetes Prevention Program:* Beginning in August 2023, CDC will fund a tribal organization through the TO-23-0001 *Strengthening Public Health Systems and Services in Indian Country* cooperative agreement to lead the development of a network of tribes and tribal organization partners delivering or supporting the National Diabetes Prevention Program (National DPP) across Indian Country. This network will focus on finalizing the Common Access Point, including a needs assessment with partners, technical requirements and a usability analysis, pilot and implementation, and evaluation. The recipient and partners may also work on the sustainability of umbrella hub arrangements and support other activities to increase access to the National DPP lifestyle change program.

## **New Initiatives**

*Public Health Associate Program (PHAP) Pilot Project:* CDC initiated a new two-year project to support PHAP associates who have been placed into organizations serving tribal communities to assist with and better understand strategies and opportunities to identify children with developmental delays and hearing

disabilities at an early age. The project has been initiated with three tribal nations starting in October 2021 through October 2023.

*Community Engagement to Strengthen Approaches to Decreasing Syphilis among American Indian/Alaska Native Populations:* In partnership with the National Association of County and City Health Officials (NACCHO), CDC's National Center for HIV, Viral Hepatitis, STD, and TB Prevention's (NCHHSTP) Division of STD Prevention (DSTDP) supports the *Community Engagement to Strengthen Approaches to Decreasing Syphilis among American Indian/Alaska Native Populations* project. This project funds local health departments to examine their local syphilis burden and implement a community engagement process that leads to the development of a plan to reduce syphilis burden in their jurisdictions. Funded jurisdictions must engage community members for input and feedback in developing or adapting a plan to reduce syphilis burden in their jurisdiction. Additionally, funded jurisdictions will participate in an evaluation of the project approach and plan development. Recipients include Whiteriver Service Unit, IHS, Fort Apache Indian Reservation, Arizona; Winslow Indian Health Care Center, Arizona; and Tuba City Regional Health Care Corporation, Arizona. This project was funded at \$450,000 for FY2022.

*Improving STI Clinic Services to American Indian/Alaska Native Populations through Partnerships with Tribal Colleges and Universities or Retail Health Clinics:* CDC's DSTDP supports the Improving STI Clinic Services to American Indian/Alaska Native Populations through Partnerships with Tribal Colleges and Universities (TCU) or Retail Health Clinics (RHC) demonstration project in partnership with the National Council of Urban Indian Health (NCUIH). The goal of this project is to assess current sexual health service provision within Urban Indian Organizations (UIOs) and expand/improve sexual health services in two pilot UIO sites. This project seeks to engage and train frontline personnel in and provide technical assistance for the expansion or integration of STI clinical services to AI/AN communities through UIOs. With this project, CDC expands its work to prevent STIs in AI/AN populations, directly addressing health disparities and inequities in communities that have been underserved and disproportionately affected. Lessons learned will be shared broadly with other AI/AN organizations, relevant health care clinics, and local programs throughout the US with a focus on IHS program areas. This project was funded at \$300,000 for FY2023.

## **Trips to Indian Country**

*Chugach Regional Resources Commission's Alutiiq Pride Marine Institute:* On June 3, 2023, CDC Director, Dr. Walensky, and CDC Deputy Director for Program and Science/Chief Medical Officer, Dr. Houry, toured the Chugach Regional Resources Commission's Alutiiq Pride Marine Institute in Seward, Alaska. The tour highlighted hydroponics cabinets procured using funds from the *Supporting Tribal Public Health Capacity in Coronavirus Preparedness and Response* (OT20-2004) cooperative agreement and installed in two tribal villages and at the Marine Institute during the pandemic. The cabinets were part of the recipient's COVID response efforts to increase food security and access to nutritious foods during quarantine, particularly, during the long and dark winter months. Vertical hydroponic cabinet systems are self-contained, fully controlled grow environments. Each cabinet features up to 115 plant spaces, ultra-high efficiency full spectrum LED grow lights, and has potential fresh produce yields of 20-30 pieces per week which can be used to provide tribes access to nutritious foods year-round.

*HHS Regional Tribal Consultations:* CDC/ATSDR staff travel to Indian Country to participated in the Regional Tribal Consultations that took place June through August 2023. Staff attended the follow tribal consultations in-person: Regions 6, 7, 8, 9, 10. Office of Tribal Affairs and Strategic Alliances (OTASA)

and CDC's Public Health Infrastructure Center (PHIC) leadership provided agency updates on behalf of CDC. ATSDR and NCEH staff also presented at several of the consultation on environmental concerns.