

Tribal Wellbeing & Veteran Health Testbed

Since the Indian Removal Act of 1830 that precipitated the Trail of Tears, Oklahoma and other tribal communities have been disproportionately generationally impoverished, underserved, resource poor, closed social communities. Working within this closed, generational framework will provide an excellent testbed that can, hopefully, be replicated to other closed, resource poor and underserved communities, such as those in rural West Virginia and other Appalachian areas, impoverished communities of color in inner cities and resource poor indigenous communities in other areas of North and South America, Africa and elsewhere.

Of note is the critical participation of the tribes since this project is assuming that “wellbeing” is a “return to normal” for tribal people prior to the advent of European colonialism’s forceful imposition and dedicated destruction of tribal populations and cultures. As such, the nexus of coordination for this testbed is tribal engagement and historical teachings, practices and narratives. Additional multi-disciplinary participation will include supportive stakeholders and experts from private industry, academia, U.S. Public Health Service, Indian Health Service, military health, veteran health and others.

Military health and veteran health are key components because tribal peoples are disproportionate joiners of the military due to their legacy warrior ethic. It is commonplace for American Indian and Alaska Native (AIAN) tribes to have 10-70 percent of their 18-year-old and over members as military veterans, compared to less than 1 percent of non-Native joiners. In addition, according to a 2015 Department of Veterans Affairs (VA) Community Survey, AIAN Veterans have lower personal incomes, are less likely to have an advanced degree and more likely to have a disability, service-connected or otherwise, than Veterans of other races. AIAN Veterans are also more likely to lack health insurance,

with approximately 12 percent having no coverage whatsoever. Oklahoma is uniquely positioned to be the centerpiece of the Tribal Wellbeing testbed because it has one of the highest AIAN Veteran populations by state, 9.8 percent, and is home to 38 federally recognized tribes.

The U.S. Department of Defense is fully aware that American Indians and Alaska Natives serve in the U.S. military at higher rates than any other race. It also knows that AIAN Veterans are underrepresented in accessing the services and benefits they have earned. As a result, the VA is “working to engage Indian Country, build strong relationships with tribal governments and increase the number of American Indian and Alaska Native Veterans who access VA programs, benefits and services—all to better serve the warriors of Indian Country who have given so much to our Nation.”

In accordance with the above, a 2010 memorandum of understanding (MOU) was signed between VA and Indian Health Service (IHS) to facilitate collaborative efforts and activities, to increase access and to improve health care services to this underserved population. Accomplishments since 2015 include: (1) 1,200,000 prescriptions mailed to Veterans at their homes, (2) 337 shared Continuing Medical Education credits offered, (3) cultural competency and post-traumatic stress disorder trainings produced and (4) electronic health information exchange capabilities tested between VA and IHS for care coordination.

As impressive as these results are, clearly more can and should be done within a multi-disciplinary framework to address the social determinants of health and root challenges of this unique population. Health21 Tribal Wellbeing testbed participants and experts will work together to define historical and present day wellbeing,

along with scientifically validated physical, cultural, religious, economic and other social metrics that can be used to determine achievement or lack thereof.

Defining wellbeing, particularly from a tribal perspective that has arguably historically encapsulated this state of being, would be a breakthrough not only for AIAN Veterans and their families but also for global health. A new vision of wellness and health care must incorporate a better understanding of wellbeing – that peaceful balance people tend to lose in varying degrees throughout the course of their lives, especially in seemingly “developed” nations with high levels of stress like the United States. As such, this project will include a deep commitment to identifying what could be determined as original, or indigenous, social determinants of health that may be part of all human populations and cultures worldwide.

More Information

For more information on program participation, sponsorships and partnerships, please contact Rosemarie Calvert, managing director, at rcalvert@centerforabetterlife.com or (304) 892-3811, or Mike Ryan, deputy director, at mike.ryan@livebetterpublishing.com or (781) 455-9838.

HEALTH21
Wellness & Health Care for the 21st Century

Communicate. Educate. Collaborate.

HEALTH21INITIATIVE.ORG

An **AMSUS** Project

Livebetter Publishing, LLC, and Health21
2402 Independence Rd., Independence, WV 26374

