



# American Indian/Alaska Native tribal health liaison annual report

State of Utah  
Office of American Indian/Alaska Native Health and Family Services  
November 12, 2024

To: Native American Legislative Liaison Committee  
From: Jeremy Taylor, tribal health liaison  
Subject: Statutorily required report: UCA 26B-1-233

## **Purpose**

As required by Utah Code 26B-1-233, the Utah Department of Health and Human Services (DHHS) Office of American Indian/Alaska Native Health and Family Services tribal health liaison reports their annual respective activities and accomplishments to the Native American Legislative Liaison Committee (NALLC) created in Section 36-22-1.

## **Executive summary**

The tribal health liaison is housed within the Office of American Indian/Alaska Native Health and Family Services. The liaison reports to the Office director. Our Office vision is that American Indian/Alaska Native communities across Utah, including children, families, and tribal governments, are happy, healthy, and prosperous and aligns with the DHHS vision that all Utahns will have fair and equitable opportunities to live safe and healthy lives.

Historically, Utahns who identify as American Indian/Alaska Native experience higher rates of health disparities, including chronic disease and poverty. Our mission includes the following outcomes:

- Improve overall health outcomes for people who identify as American Indian/Alaska Native living on and off reservations in Utah.
- Improve access to physical and behavioral health and public health resources for tribal governments and the Urban Indian Organization (UIO).
- Promote effective formal communication between federal, state, and tribal governments.

The tribal health liaison's primary goals include the following:

- Facilitate collaboration between DHHS, tribal governments, state and local partners, and American Indian/Alaska Native communities throughout Utah.
- Improve access to quality healthcare and resources both on and off the reservations.

There are four primary objectives for achieving these goals:

- Collaborate with the following organizations to improve health outcomes and access to care:
  - Tribal governments and leadership.
  - Tribal health agencies and officials.
  - State agencies and officials.
  - Local health departments.
  - Private-sector healthcare providers.
- Assess gaps in physical health, behavioral health, and public health for Utahns who identify as American Indian/Alaska Native.
- Provide education, training, and technical assistance about public health and medical assistance programs in Utah for the American Indian/Alaska Native population.
- Staff the Utah Indian Health Advisory Board. This board is the primary contact to coordinate public health policies and programs between tribes and agencies at the local, state, and federal levels.

### **Potential legislative action/follow-up**

- No current legislative action or on-going follow-up.

### **Accomplishments**

We accomplished the following activities during the reporting period:

- Met in-person with tribal leaders on a regular basis to update and share key information on health programs, services, and resources. The facilitation of these connections between key DHHS staff and tribal public health departments and tribally operated clinics augmented and created greater awareness of services delivered to rural and urban parts of Utah:
  - Supported and expanded access to telehealth services, particularly for behavioral health
  - Increased availability of culturally competent healthcare providers and community health workers;

- Supported family health initiatives tailored to specific tribal needs such as the Family Spirit program;
  - Improved integration between the state Medicaid program and tribal facilities.
- Provided Naloxone training to tribes during the 2024 reporting period. 250 doses of Naloxone were distributed to tribal partners and community members. Due to the high rate of use of Opioids among AI/AN populations, it is estimated a similar number will be distributed during the 2025 reporting period.
- Created culturally-appropriate opioid and tobacco prevention materials for tribes. We have the ability to provide material in every tribal community in the state. We currently have 4 community posters on Opioid prevention and 4 pamphlets on Opioid prevention. New Tobacco materials are in development for the 2025 reporting period.
- Assisted tribes to apply and receive funding for the home-visiting program that aims to improve maternal and child health outcomes. Home visiting professionals will provide visits and services to women and young families to support them in their parenting journey. Seventy five new families will be served.
- Supported tribal public health preparedness programs by offering emergency preparedness training. Activities included:
  - Discussed the importance of the creation of a local public health emergency plan including an evacuation plan and what to do if the family is not together.
  - Provided information of the importance of building a kit with food, water, medicines, and supplies to last a few days.
  - Identified response resources, trusted partners, and clarified each agency's role;
  - Assisted with the development of animal health and rescue.
  - Provided information on ways to improve collaboration between tribal governments and non tribal entities.
  - Invited community members to attend state of Utah training events that covered topics such as disaster response planning, communication strategies, and cultural competency. Six of the eight tribes participated in the 2024 DHHS Public Health Emergency Preparedness (PHEP) training program.
- Planned, coordinated, and facilitated monthly Utah Indian Health Advisory Board meetings. The Utah Indian Health Board is composed of representatives from all 8 tribes in Utah, Urban Indian Organization, and Indian Health Service partners. The board works to advise DHHS on public health priorities for AI/AN communities in the State of Utah. The boards top priorities this year included:
  - Mental/Behavioral Health with topics such suicide as the top issue.
  - Quality Health services with improvements to tribal clinics. Integration into Utah's public health data systems such as EPI Trax, the State's infectious disease database, was a priority throughout the reporting period.
  - Health Promotion, with a focus on Maternal and Early Childhood efforts such as the state's Home Visiting program.
  - Medicaid efforts such as the passage of SB 181 Native American Health Amendments in 2024 Legislative session
- Attended the 18th Annual Governor's Native American Summit and engaged with tribal

leaders to improve state-tribal relations.

## **Conclusion**

We plan to continue our work to improve Utah American Indian/Alaska Native community health and well-being. We do this through using the DHHS consultation and conferment policy to identify and address gaps in resources and to partner with tribal governments and the Indian health system (I/T/U).

# Location of Tribal lands in Utah



Utah Department of  
**Health & Human Services**  
 American Indian/Alaska Native Health & Family Services

