



Seattle Indian Health Board Advancing Public Health in Indian Country Through Tribal Epidemiology Centers

Understanding Tribal Epidemiology
Centers and their role as public health
authorities

Recommendations

Seattle Indian Health Board recommends that local, state, and federal government agencies:

Partner with Tribal Epidemiology Centers (TECs) to ensure public health data informs culturally attuned policies, planning, and programming.

Engage TECs in public health data, research, and evaluation efforts that impact Native people.

Invest at least \$24 million in federal funding to TECs.

What is a TEC?

Since their inception in 1996, [TECs](#) have been at the forefront of gathering, interpreting, and disseminating American Indian and Alaska Native data at the tribal, local, state, and federal level.¹ They work in partnership with tribes and urban Indian organizations (UIO) to perform essential public health functions and improve data driven decision making in American Indian and Alaska Native communities. Through culturally attuned data collection, analysis, evaluation, and research services, TECs strengthen the health and well-being of Native populations.²

Today, there are twelve Indian Health Service (IHS) designated TECs nationwide; eleven serve tribes regionally while the last serves UIOs nationally. Through regionally and locally tailored services, TECs work to improve the health status of Native people by identification and understanding of health risks and inequities, strengthening public health capacity, and assisting in disease prevention and control.²

What is the role of TECs as public health authorities?

In 2010, the permanent reauthorization of the Indian Health Care Improvement Act (IHCIA) in the Patient Protection and Affordable Care Act (ACA) formally acknowledged TECs as public health authorities so the Health Insurance Portability and Accountability Act (HIPAA) would extend authorization for TECs to access data held by the U.S Department of Health and Human Services (HHS).³

As public health authorities, a core function of TECs is to collect and analyze public health surveillance data from the local to national level. This ensures TECs can provide accurate and timely information to tribes, tribal organizations, and UIOs to inform public health interventions, programs, and policies that impact the lives of Native people. To fully operate as public health authorities alongside local, state, and federal entities, the roles and authorities of TECs must be upheld by Congress and public health partners from the local to national level.

Why are TECs needed?

TECs play a critical role in the public health infrastructure of IHS. TECs manage public health information systems, investigate diseases of concern, manage disease prevention and control programs, respond to public health emergencies, and coordinate these activities with other public health authorities.¹

TECs ensure public health funds reach and impact the 5.2 million Native people living in their service areas.⁴ In FY 2018, TECs responded to 3,210 requests for technical support and sponsored 216 trainings for tribal public health capacity building. These technical assistance and training services encompass culturally attuned public health strategies, resources, and information specific to tribal and urban Indian communities.

Culturally Attuned Public Health Response to COVID-19

As public health authorities, TECs monitor, evaluate, and respond to COVID-19 through contact tracing, primary collection and secondary analysis of epidemiological data, and development of culturally attuned public health resources. These resources ranging from public health guidance to treatment and vaccine information are disseminated to Indian health care providers, tribes, tribal organizations, and UIOs nationwide:

- To document and address the epidemiological impacts of COVID-19, TECs have co-authored two Morbidity and Mortality Weekly Reports (MMWR) documenting the disproportionate rates of infection, related hospitalization, and mortality rates among American Indians and Alaska Natives.
- To improve data-driven decision-making, TECs work with local and state health jurisdictions to address demographic data quality issues.
- To address gaps in data, TEC have led the collection of the only national data on perceptions of the COVID-19 vaccine among Native people. This data has been used to create culturally attuned vaccine campaigns using trusted messengers from the Native community.

Image: Urban Indian Health Institute. (2021). *VaccINATION* campaign.



Who do TECs support?

TECs work in a coordinated approach with tribes; UIOs; federal, state, and local government agencies; and/or academic institutions to improve the health and well-being of American Indian and Alaska Native people. TECs possess a unique ability to reach, engage, and provide culturally appropriate research, data, and evaluation for Native people by Native people.⁴

What are challenges of collecting data?

Most data on American Indian and Alaska Native people is maintained by non-Indigenous entities including city, county, state, and federal agencies. It is common for data collected by these entities to undercount, misclassify, and deprioritize the collection of race, ethnicity, and tribal affiliation data.⁵

Why is data access important to TECs?

Access to public health surveillance data and other social determinants of health data are essential to understanding and addressing health outcomes of Native people. With increased data access, TECs can identify gaps in data collected by local, state, and federal partners and provide recommendations and strategies for improving data accuracy and generate more accessible data for partners, providers, policy makers, and health advocates to better understand the health needs of Native people.

Do TECs receive IHS funding?

Yes. However, despite marked success and un-replicated services, TECs remain woefully underfunded. They receive an average of \$422,000 a year from IHS.⁶ Many must seek out additional funding from public and private funding sources to sustain core services. Increased core funding would allow TECs to conduct the culturally attuned research, data, and evaluation services needed to perform their core functions as defined in 25 USC § 1621m.⁷

References

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