





Top: Johns Hopkins' Family Spirit program is the first ever evidence-based, home-visiting program designed for and with American Indian families. It is used in over 100 tribal communities, as well as low-income urban environments in Chicago and St. Louis.

Bottom: NativeVision is a unique national youth enrichment and empowerment initiative for American Indian children, operated by the Johns Hopkins Center for American Indian Health. Launched in 1996 in partnership with the NFL Players Association and the Nick Lowery Youth Foundation, more than 40,000 Native American youths and tribal community members from dozens of tribes across the country have been reached.

History

National Native American Heritage Month, also referred to as National American Indian Heritage Month, began as Native American Awareness Week, authorized by Congress in 1976 after six decades of efforts to achieve official federal recognition of the contributions of Native Americans. Since 1995, the President has made an annual proclamation encouraging Americans to use November to learn more about Native American culture.

What's in a Name?

While the word "Indian" has a complicated and uncomfortable history, many Native people now embrace the term. Others prefer to describe themselves as "indigenous" or use the term "Native American." That said, people categorized by the U.S. Census as "American Indian/Alaska Native" make up an incredibly diverse group from hundreds of sovereign nations with varied cultures, traditions and beliefs. As always, it is best to ask the individual's preference in naming.

Lifting Up Native American Health and Culture

Native American culture is in the midst of an upswing of energy and activism. Increasingly, language revitalization programs are teaching Native American languages to new generations. Groups of indigenous people from several tribal nations have worked to reconstruct traditional dietary practices. And environmental activism across many tribal communities has galvanized indigenous groups around the issue of protecting their lands and the earth.

Johns Hopkins is home to programs that celebrate American Indian/Alaska Native culture and seek to improve tribal health outcomes. The Center for Indigenous Health American (previously known as the Center for American Indian Health) is an independent center within the Department of International Health of the Johns Hopkins Bloomberg School of Public Health with nearly 40 years of collaboration with Native American tribes and their programs now reach more than 140 tribal communities in 17 states. Native Circle, a group of Johns Hopkins Native American graduate students, staff, faculty and community members, works to advance the education, support and well-being of Native American people.



THE NATIVE AMERICAN POPULATION IS URBAN



American Indian/Alaska Native residents are roughly twice as likely to live in urban areas than in rural ones.

Visit the <u>Baltimore American Indian Center</u> to learn more.

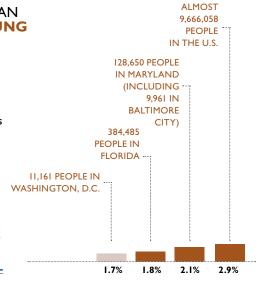
Learn more about the <u>health</u> of the Baltimore American Indian/Alaska Native community.

THE NATIVE AMERICAN POPULATION IS **YOUNG**

Although these percentages may appear very small,

remember that they represent individual people and that significant inequities and disparities may exist that would otherwise be overlooked if the small numbers or percentages were ignored — as is often the case.

Source: census.gov/library/ visualizations/interactive/ race-and-ethnicity-in-theunited-state-2010-and-2020census.html

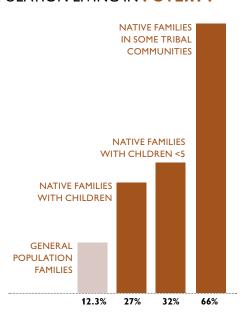


NATIVE AMERICAN POPULATION LIVING IN POVERTY

Over a quarter of all American Indians/Alaska Natives live in poverty,

double the national average, and the median income for American Indian/Alaska Native households trails that of most other groups by a wide margin.

Of American Indian/Alaska
Native families with children,
27 percent live in poverty,
while 32 percent of American
Indian/Alaska Native families
with children under 5 do—and
in some tribal communities,
that number rises to a
staggering 66 percent.





federally recognized tribes in the U.S.

Governance

There are 573 federally recognized Indian Nations (variously called tribes, nations, bands, pueblos, communities and native villages) in the United States (source www.ncai.org). In addition, there are hundreds of tribes that have been recognized by individual states, and many others that have received no official recognition at all.

Whose land are you on?

Do a land acknowledgement. Visit <u>native-land.ca/</u> to view boundaries of Indigenous nations around the world. Follow these tips for creating an Indigenous land acknowledgement statement:

- Start with self-reflection.
- Do your homework.
- Use appropriate language.
- Use past, present and future tense.

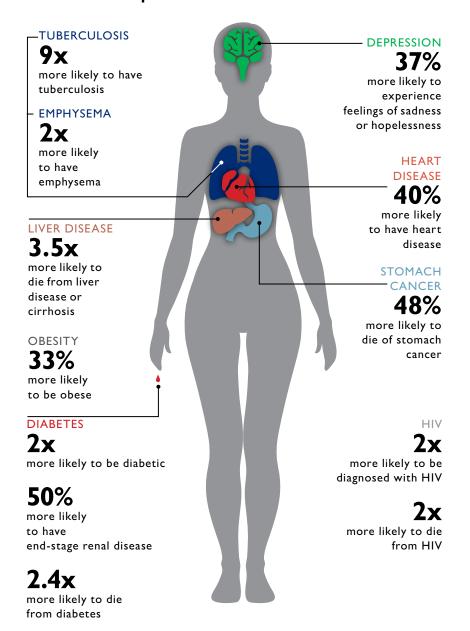
Learn more: nativegov.org/a-guide-to-indigenous-land-acknowledgment/

Maryland was once home to a number of prominent tribes, including the Algonquin, Iroquois and Nanticoke. There are now no federally recognized tribes in Maryland, though the state has recognized two branches of the Piscataway tribe, who once lived throughout the Chesapeake region.

Tribal nations are sovereign in their interactions with the United States, usually managing their own health care systems, law enforcement and basic infrastructure. (A federal agency, the Indian Health Service, does provide health care for many Native Americans.) At the same time, Native Americans living on tribal lands pay federal taxes and vote in national and state elections.



Health Disparities



Violence, Suicide, and Alcohol

Violence disproportionately affects American Indians/Alaska Natives, especially Native girls and women, with 84 percent experiencing some degree of violence during their lives. Native youths also have the highest rate of suicide of any ethnic group—suicide is the second leading cause of death for American Indians/Alaska Natives between ages 15 and 24. The alcohol-use disorder rate among American Indians/Alaska Natives is equally stark, more than seven times as high as the national average. Interestingly, research also shows that some tribal communities have higher rates of abstinence from alcohol compared to the U.S. general population.

Resources

Johns Hopkins Center for Indigenous Health

https://cih.jhu.edu/

Native Circle

http://caih.jhu.edu/training/scholars/category/native-circle

Indian Health Service

https://www.ihs.gov/

Baltimore American Indian Center & Heritage Museum:

http://baltimoreamericanindiancenter.org/

Caring for Native Americans:

https://journalofethics.ama-assn.org/issue/caring-native-americans

Urban Indian Health Institute:

http://www.uihi.org/resources/community-health-profile-baltimore-service-area-baltimore-maryland-november-2018/

National Museum of the American Indian

https://americanindian.si.edu/



Disproportionate Impact of COVID-19 on the American Indian/Alaska Native P(AI/AN) Population

While many may be aware of the disproportionate impact of COVID-19 on the Black/African American and Latinx communities, many may be not aware of the disproportionate impact on the American Indian/Alaska Native(AI/AN) communities. Early in the COVID-19 pandemic, COVID-19 data was not being reported by race and ethnicity. Even when the data finally began to be reported, states still had a large percentage of missing data. In a study of the 31 states that reported data according to the Census Bureau categories, individuals from American Indian/Alaska Native communities:

- Were 5.3 times more likely to be hospitalized than any other group.
- Had a higher rate of cases than white communities in 23 states, with four times the rate of cases in five states —
 New Mexico, Montana, Mississippi, Oregon and Arizona.
 New Mexico has been the hardest hit, where the rate of cases is 15 times higher than white communities and experienced largely by the Navajo Nation.
- Experienced a death rate higher than other communities in 15 states.
 - Source: usnews.com/news/healthiest-communities/articles/2020-10-07/a-state-by-state-analysis-of-the-impact-of-covid-19-on-native-americans

THESE COMMUNITIES FACE NUMEROUS CHALLENGES, SUCH AS:

- Living in crowded, multigenerational households
- Substandard housing (for example, 35% to 40% of homes in Navajo Nation have no running water)
- 58 out of every 1,000 Native American households lack plumbing
- Food insecurity
- Lack of access to basic health care
- Lack of access to critical health care (such as intensive care unit (ICU) beds and ventilators).

 Although the Indian Health Service runs 24 hospitals, there are only 71 or fewer ventilators and 33 ICU beds. Source: healthaffairs.org/do/10.1377/hblog20200331.659944

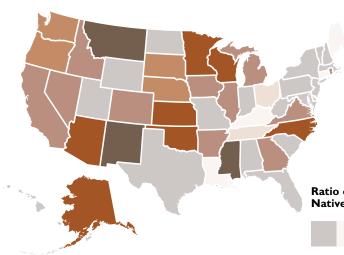
View more data about the COVID-19 pandemic in the AI/AN community and share resources that the Johns Hopkins Center for American Indian Health developed for the AI/AN community.

We may never know the true toll of COVID-19 on the AI/AN community due to a lack of data. Because the number of AI/AN individuals may be small, they are often lumped in with other groups, such as with Native Hawaiian and Other Pacific Islander into an "Other" category. This often masks significant disparities, which will continue to remain unaddressed.

To learn more about how to better collect data on AI/AN communities, visit: uihi.org/resources/best-practices-for-american-indian-and-alaska-native-data-collection/.

DISPARITIES IN COVID-19 DEATH RATES AMONG AMERICAN INDIANS AND ALASKA NATIVES

Rates per 100,000 people, compared with those of whites; COVID-19 data through Sept. 27, 2020.



Rate ratios compared to White, Non-Hispanic persons	American Indian or Alaska Native, Non- Hispanic persons	Asian, Non- Hispanic persons	Black or African American, Non- Hispanic persons	Hispanic or Latino persons
Cases	1.7x	0.7x	1.1x	1.9x
Hospitalizations	3.5x	1.0x	2.8x	2.8x
Death	2.4x	1.0x	2.0x	2.3x

Ratio of American Indian/Alaska Native Deaths to White Deaths