



**NORTHWEST  
PORTLAND  
AREA  
INDIAN  
HEALTH  
BOARD**

- Burns-Paiute Tribe
- Chehalis Tribe
- Coeur d' Alene Tribe
- Confederated Tribes of Colville
- Confederated Tribes of Coos, Lower Umpqua, and Siuslaw Indians
- Confederated Tribes of Grand Ronde
- Confederated Tribes of Siletz
- Confederated Tribes of Umatilla
- Confederated Tribes of Warm Springs
- Coquille Tribe
- Cow Creek Tribe
- Cowlitz Tribe
- Hoh Tribe
- Jamestown S'Klallam Tribe
- Kalispel Tribe
- Klamath Tribe
- Kootenai Tribe
- Lower Elwha Klallam Tribe
- Lummi Tribe
- Makah Tribe
- Muckleshoot Tribe
- Nez Perce Tribe
- Nisqually Tribe
- Nooksack Tribe
- NW Band of Shoshone Tribe
- Port Gamble S'Klallam Tribe
- Puyallup Tribe
- Quileute Tribe
- Quinault Tribe
- Samish Indian Nation
- Sauk-Suiattle Tribe
- Shoalwater Bay Tribe
- Shoshone-Bannock Tribe
- Skokomish Tribe
- Snoqualmie Tribe
- Spokane Tribe
- Squaxin Island Tribe
- Stillaguamish Tribe
- Suquamish Tribe
- Swinomish Tribe
- Tulalip Tribe
- Upper Skagit Tribe
- Yakama Nation

2121 SW Broadway  
Suite 300  
Portland, OR 97201  
(503) 228-4185  
(503) 228-8182 FAX  
www.npaihb.org

**RESOLUTION # 19-03-02**

**FORD FAMILY FOUNDATION CHILDREN, YOUTH, AND FAMILIES  
GRANT OPPORTUNITIES TO EXPAND DENTAL HEALTH TEAMS IN  
OREGON**

**WHEREAS**, the Northwest Portland Area Indian Health Board (hereinafter “NPAIHB” or the “Board”) was established in 1972 to assist Tribal governments to improve the health status and quality of life of Indian people; and

**WHEREAS**, the Northwest Portland Area Indian Health Board is a “tribal organization” as defined by the Indian Self-Determination and Education Assistance Act (ISDEAA) (P.L. 93-638 seq. et al) that advocates and provides support to the forty-three federally recognized tribes in the states of Idaho, Oregon, and Washington (member tribes) on specific health issues; and

**WHEREAS**, in accordance with the definitions of the ISDEAA at 25 USCS § 450b, a tribal organization is recognized as a governing body of any Indian tribe and includes any legally established organization of Indians which is controlled, sanctioned, or chartered by such governing body or which is democratically elected by the adult members of the Indian community to be served by such organization and which includes the maximum participation of Indians in all phases of its activities; and

**WHEREAS**, the NPAIHB is dedicated to assisting and promoting the health needs and concerns of American Indian/Alaska Native (AI/AN) people; and

**WHEREAS**, the primary goal of the NPAIHB is to improve the health and quality of life of its member tribes; and

**WHEREAS**, the Ford Family Foundation Children, Youth, and Families Grants support innovative projects that contribute to success in the early years of a child’s life including rural dental initiatives; and

**WHEREAS**, the NPAIHB has partnered with tribes in Oregon to pilot the expansion of the dental team to include dental health aide therapists as part of the Oregon Dental Pilot Project Program; and

**WHEREAS**, the goal of the Oregon Dental Pilot Project Program is to encourage the development of innovative practices in oral health care delivery systems with a focus on providing care to populations that evidence-based studies show have the highest disease rates and the least access to dental care; and

**WHEREAS**, Native communities are struggling under the weight of devastating oral health disparities:

- Prevalence of tooth decay in AI/AN children ages 2-5 is nearly three times the U.S. average;
- More than 70% of AI/AN children ages 2-5 years have a history of tooth decay experience compared to 23% of white children;
- AI/AN adult dental patients suffer disproportionately from untreated decay, with twice the prevalence of untreated caries as the general U.S. population and more than any other racial/ethnic group; and
- AI/AN adult dental patients are also more likely to have severe periodontal disease, more missing teeth, and are more likely to report poor oral health than the general U.S. population; and

**WHEREAS**, to address these disparities, the NPAIHB has worked closely with tribes in Oregon, Washington, and Idaho to expand the dental team to include dental health aide therapists; and

**WHEREAS**, expanded dental teams with dental therapists have proven effective in tribal and other underserved communities in increasing access to care, allowing dentists and other providers to work at the top of their scope, and improving population oral health; and

**WHEREAS**, a 2017 study done by Dr. Donald Chi from the University of Washington Dental School of Dentistry looked at 10 years of data from Alaska comparing villages with and without dental therapists and determined that communities with dental therapists showed:

- A 60% increase in access to preventive care for children;
- A 44% decrease in the need to put children under general anesthesia for full mouth rehabilitations; and
- An over 75% decrease in extractions of the first four front teeth of children under 3; and

**WHEREAS**, tribes in Washington, Oregon, and Idaho have lead the movement to break down barriers to oral health equity.

**NOW, THEREFORE, BE IT RESOLVED**, that the Northwest Portland Area Indian Health Board (NPAIHB) endorses and supports efforts by NPAIHB staff, under the guidance of the Executive Director, to apply for the open Children, Youth and Families grants opportunities through the Ford Family Foundation to expand dental health teams in Oregon.

**CERTIFICATION**

**NO: 19-03-02**

The foregoing resolution was duly adopted at the regular session of the Northwest Portland Area Indian Health Board. A quorum being established; 33 for, 0 against, 0 abstain on April 18, 2019.

*Andrew C. Joseph Jr.*

Chairman

April 18, 2019

DATE

*Luz J. Abraham*

Secretary