NPAIHB Weekly Update

June 24, 2025





Agenda

- Welcome & Introduction: Nancy Bennett
- NPAIHB Announcements, Events, & Resources
- Policy and Legislative Update Hilary Edwards
- IHS Updates Dr Tara Perti
- Tribal Partner Updates
- Questions & Comments

Please sign in, using the chat box, with your full name and tribe or organization



Upcoming Indian Country ECHO Telehealth Opportunities



- Care and Access for Pregnant People ECHO 4th Tuesday of every month at 11am PT
 - Tuesday, June 24th at 11am PT
 - Didactic Topic: *Diabetes Care in Pregnancy*
 - To join via Zoom: https://echo.zoom.us/j/87128078680?pwd=c2hMOEFnWU9QWVZMd2dpL0J00DNidz09
- Hepatitis C ECHO Wednesdays at 11am PT
 - Wednesday, June 25th at 11am PT
 - Didactic Topic: Syndemic Case Discussion
 - To join via Zoom: https://echo.zoom.us/j/537117924?pwd=OEExbERmK2pSUFFsMzV1SmVpb3g3dz09
- Early Relational Health (ERH) ECHO Formerly MCH ECHO 4th Wednesday of every month at 12pm PT
 - Wednesday, June 25th at 12pm PT
 - Didactic Topic: Healing Hearts, Building Trust: Trauma-Informed Care for Kids & Families
 - To join via Zoom: https://echo.zoom.us/j/86327376612?pwd=YVRiY0dxeXV1Ukl2ZE9objU2U2hrZz09
- Journey to Health ECHO 2nd & 4th Thursday of every month at 7am/12pm PT
 - Thursday, June 26th at 12pm PT
 - Didactic Topic: The Promotion of Indigenous Connectedness through Multi-gen Wellness Workshops
 - To join via Zoom: https://echo.zoom.us/j/93413601610?pwd=YVhMN1NUN||YWHZUZk1CUnF0TEY5QT09



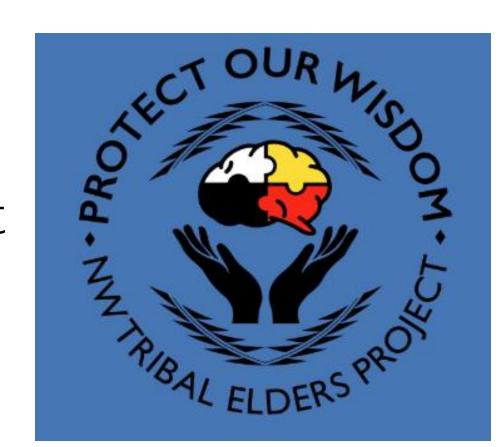


Save the Date!

Northwest Tribal Brain Health + Dementia Summit

August 12-14, 2025

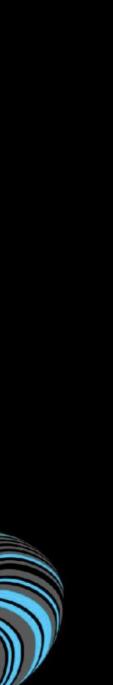
Clearwater Resort Casino, Suquamish, WA



More info to come! Please contact wminer@npaihb.org with questions or comments.

Public Health Equity Grant





Areas for Funding

- Environmental Public Health
- Lower Umatilla Basin Ground Water Management Area/Domestic Wells
- Preventing Environmental Exposures for Children's Health
- Commercial Tobacco Prevention
- Adolescent and School Health
- Overdose Prevention
- Community Resilience: Community Connection and Empowerment
- Community Resilience: Emergency Preparedness and Response
- Communicable Disease: Sexual Health and Prevention of Sexually Transmitted Infections
- Communicable Disease: Immunization

Info sessions:

07/02/25

2:00pm - 4:00pm PST

Registration link

07/09/25

1:00pm - 3:00pm PST

Registration link

07/08/25

11:00am - 1:00pm PST

Registration link

07/15/25

12:00pm - 2:00pm PST

Registration link

NPAIHB Weekly Update Schedule

July 1: Data Hub Update – Sunny Stone

July 8: NO Update, QBM Portland, OR

July 15: Marc Mason, Warm Springs (rescheduled from 6/17/25)



Legislative & Policy Update Veronica Smith





IHS Updates

Dr. Tara Perti



Partner Updates

Questions & Comments

LEGISLATIVE & POLICY UPDATE

June 24, 2025



NPAIHB MISSION

To eliminate health disparities and improve the quality of life of American Indians and Alaska Natives by supporting Northwest Tribes in their delivery of culturally appropriate, high-quality health programs and services



AGENDA

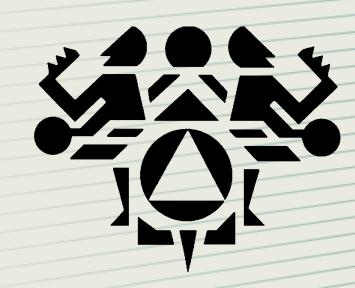
- Congressional Updates
- Federal Updates
- State Updates
- DTLL
- Consultations, Listening Sessions & Written
 Comments
- National & Regional Meetings
- NPAIHB Policy Resources



Congressional



FY 2025 BUDGET RECONCILIATION



Background:

- May 22, the House of Representatives voted and passed the reconciliation bill known as the "One Big Beautiful Bill Act," or H.R. I
- The Senate is reviewing the "One Big Beautiful Bill Act."
- The Senate only requires a simple majority for passage
- Byrd Rule: only allows items with a significant budgetary impact to go through reconciliation in the Senate

As of today:

- Senate committees, all 9 of them, are working on reviewing and proposing amendments to their components of budget reconciliation
- Senate Majority Leader Thune is rumored to stay in session over the July 4th holiday to ensure the bill makes its way back to the House

HHS SENIOR ADVISOR



- Last week, Mark Cruz, a citizen of Klamath Tribes, was sworn in as Senior Advisor to HHS Secretary Kennedy
- Cruz's appointment fulfills a promise Secretary Kennedy made to tribal leaders during his confirmation process to ensure Native voices have a seat at the highest levels of the department.
- Cruz brings extensive experience in tribal and federal policy. He previously served at the U.S. Department of the Interior during the Trump administration as Deputy Assistant Secretary—Indian Affairs for Policy and Economic Development (DAS-PED), a role he assumed on September 24, 2018, after being appointed by then-Assistant Secretary—Indian Affairs Tara Mac Lean Sweeney.
- Before his time at the Interior Department, Cruz held key roles on Capitol Hill. He served as chief of staff to Representative Todd Rokita (R-Indiana) from 2017 to 2018, after working on Rokita's legislative team from 2014 to 2017. From 2013 to 2014, he was a legislative fellow in the office of Representative Tom Cole (R-Oklahoma).

During his time in Congress, Cruz focused on education, labor, civil service reform, appropriations, and oversight.

Dear Tribal Leader Letters

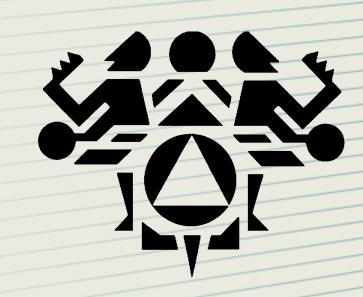


IHS DTLL

On June 13, IHS Acting Director Benjamin Smith sent a DTLL out requesting comments and recommendations regarding the proposed realignment of the Indian Health Service (IHS).

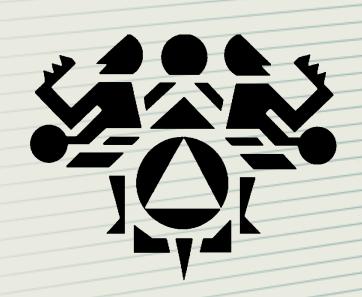
The IHS is committed to receiving Consultation and Confer feedback from Tribal Leaders and UIO Leaders, with particular focus on these three areas:

- I. Delivery of Direct Patient Care;
- 2. Enterprise/Operational Management; and
- 3. Supporting Tribal Self-Determination.



The IHS will convene four (4) in-person Tribal
Consultations and one (1) virtual Urban Confer to give
Tribal Leaders and UIO Leaders multiple opportunities to
provide feedback to the Agency. During these Tribal
Consultations and Urban Confer, we would also like to
discuss our current **Tribal Advisory Committees.**

NPAIHB TRIBAL CAUCUS



NPAIHB will be hosting a Tribal Caucus in preparation for the first in person tribal consultation, on Thursday, July 26 from 8:00-9:00 AM via Zoom.

Please email the Policy Team at

policyteam@npaihb.org or Hilary Edwards at hedwards@npaihb.org for the invitation details.

Consultations, Listening Sessions & Written Comments



IHS TRIBAL CONSULTATIONS

Tribal Consultation - Seattle, WA

Date: Tuesday, July 8, 2025

Time: 10:00 AM- 2:00 PM PDT

Registration Link:

https://www.surveymonkey.com/r/

WWX62MH

Address: Seattle Airport Marriott

3201 South 176th Street

Seattle, Washington 98188

Tribal Consultation -

Phoenix, AZ

Date: Thursday, July 10, 2025

Time: 10:00 AM – 2:00 PM MST

Registration Link:

https://www.surveymonkey.com/r/J8

TZHRR

Address: Marriott Phoenix

Chandler

1600 South Price Road

Chandler, Arizona 85286

Tribal Consultation -

Washington D.C.

Date: Wednesday, July 23, 2025

Time: 10:00 AM – 2:00 PM EST

Registration Link:

https://www.surveymonkey.com/r/J8

6FNWS

Address: Hubert H. Humphrey

Building – Hall of Tribal Nations 200

Independence Ave SW, Washington,

DC 20201

Urban Confer - Virtual

Date: Monday, July 28, 2025

Time: 1:00 PM - 3:00 PM EST

Registration Link: https://ihs-

gov.zoomgov.com/meeting/register/

q6joL7ncQgS1z5tf0xl9vw



National and Regional Meetings

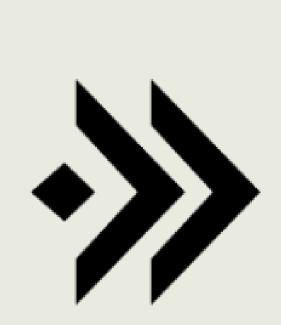


NPAIHB Policy Resources



NPAIHB July QBM

The NPAIHB July QBM will be hosted in Portland, Oregon



Health and Welness for the Seventh Generation



MEET THE TEAM



Hilary Edwards

Dir. of Legal &
Government Affairs

(Swinomish Indian TribalCommunity)E: hedwards@npaihb.org



Pakak Sophie Boerner

Data Hub & Policy
Intern

(Iñupiaq, Native Village of Kiana) E: psophieboerner@npaihb.org



Thank You

Portland Area IHS Communicable Diseases Update

TARA PERTI, MD, MPH

MEDICAL EPIDEMIOLOGIST

OFFICE, PORTLAND AREA IHS

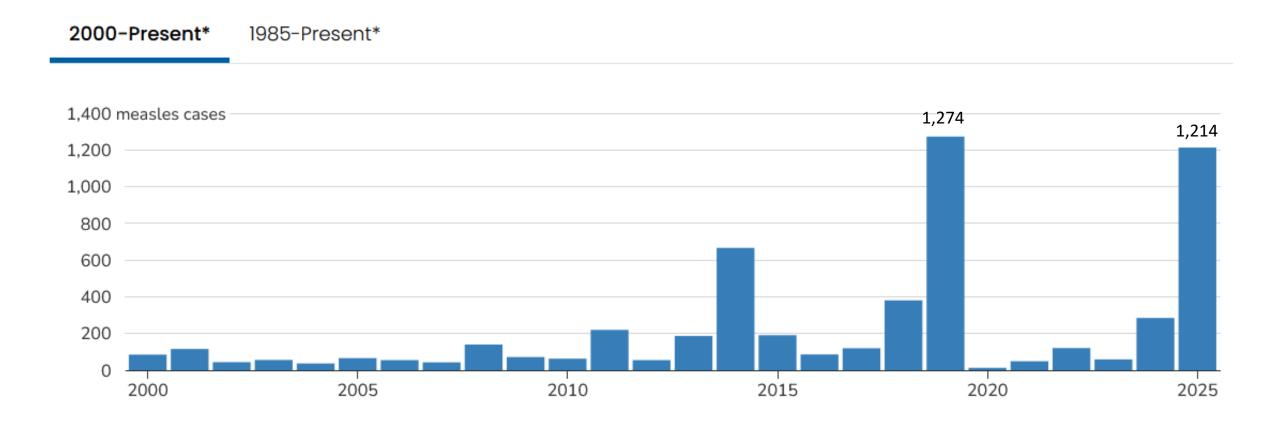
June 24, 2025



Outline

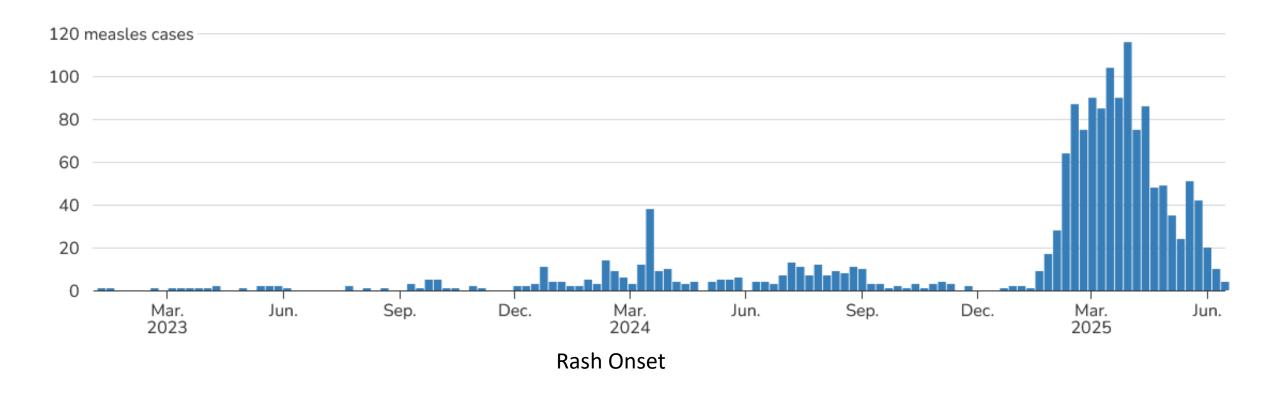
- Brief measles update
- Lenacapavir for HIV prevention given subcutaneously every 6 months now FDA approved

Yearly Measles Cases – United States, 2000-Present



Measles – United States, 2023-2025 (through 6/19)

2023–2025* (as of June 19, 2025)



Measles — United States, 2025

- Overall, in the U.S., there have been 1214 **confirmed** cases of measles in 35 states through 6/19. 89% of cases are from one of 23 outbreaks (≥3 related cases).
 - <5 years old: 29%, 5-19 years: 37%, ≥ 20 years: 33% (unknown: 1%).
 - 12% hospitalized overall (21% of those <5 years-old hospitalized); 3 deaths among unvaccinated individuals; 2 in healthy school-aged children.
 - 95% unvaccinated or with unknown vaccination status, 2% with one MMR dose, 3% with two MMR doses.

Southwest Outbreak:

• Texas: 750 confirmed cases; 2 deaths in a school-aged children (32 additional cases not associated with the W. Texas outbreak).

 New Mexico: 81 cases; 1 death Oklahoma: 17 cases

Some of Other States with Ongoing Outbreaks:

Kansas: 80 cases

(77 associated with an outbreak there)

Ohio: 36 cases

North Dakota: 34 cases

Montana: 23 cases

Colorado: 16 cases (outbreak: 10)

Illinois: 10 cases

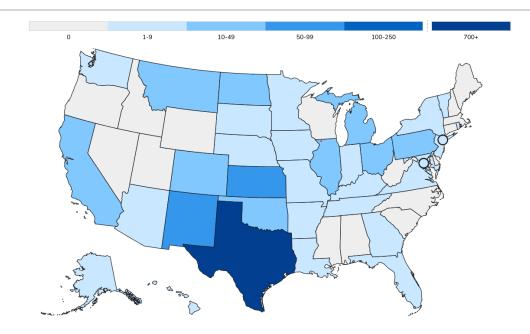
Michigan: 12 cases (outbreak: 4)

Arkansas: 8 cases

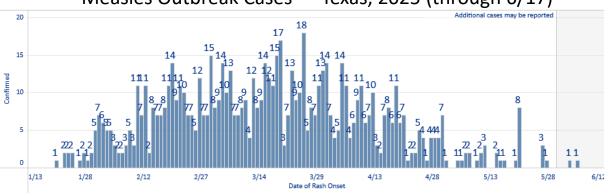
lowa: 6 cases

Arizona: 4 cases

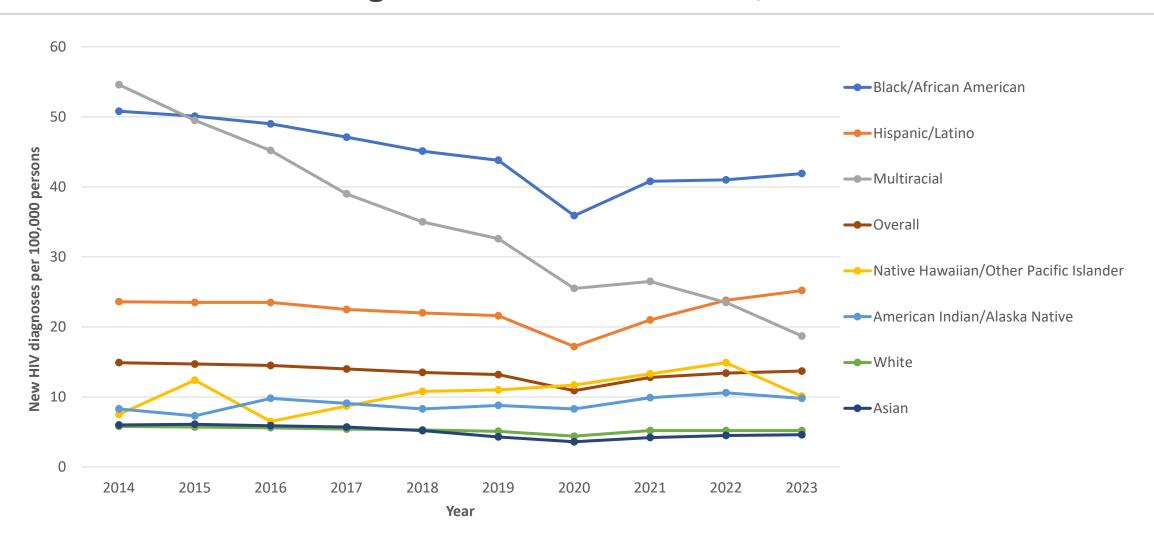
Prior: Pennsylvania:15 cases in April. Indiana: 8 cases in April. Tennessee: 6 cases in May. Georgia: 3 cases in Feb (3 new cases in May-June). New Jersey: 3 cases in February.



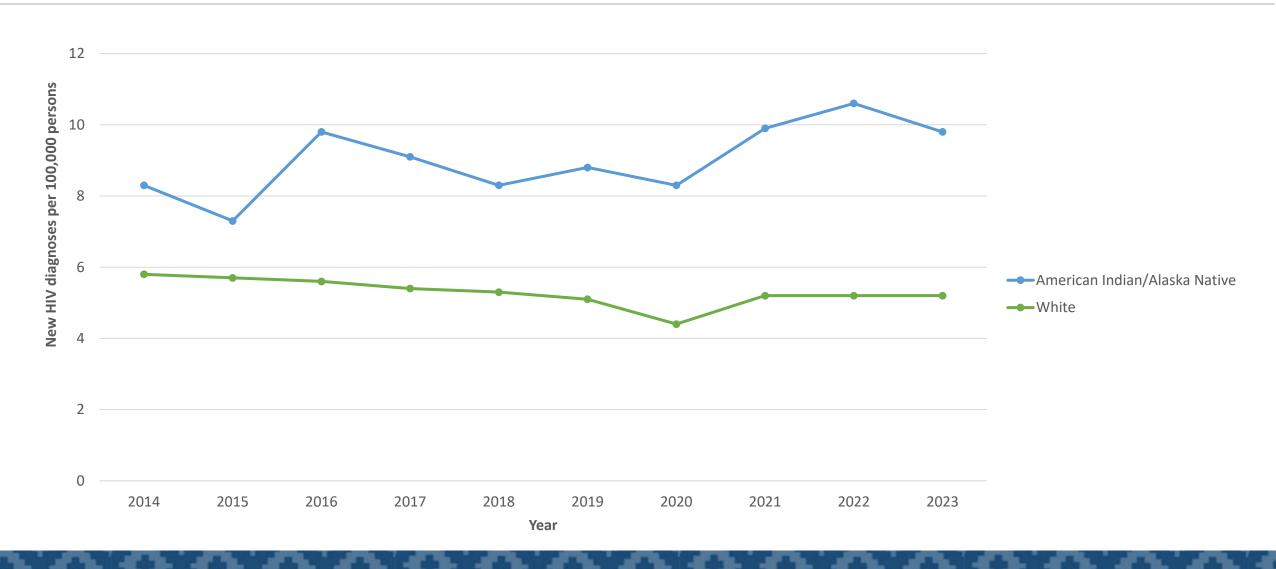
Measles Outbreak Cases — Texas, 2025 (through 6/17)



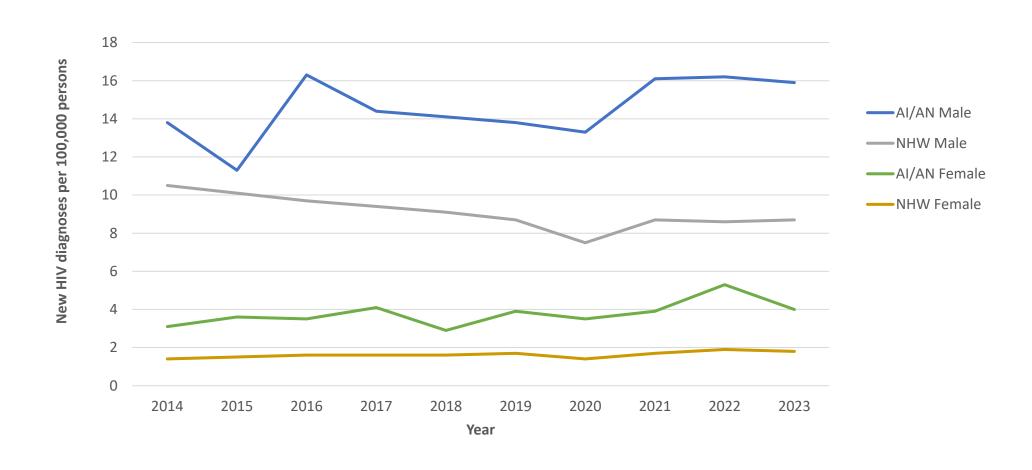
New HIV Diagnoses — United States, 2014-2023



New HIV Diagnoses, AI/AN vs. NHW — United States, 2014-2023



New HIV Diagnoses, AI/AN vs. NHW, by Sex — United States, 2014-2023



Lenacapavir (LEN) every 6 months vs. Daily F/TAF vs. Daily F/TDF for HIV Prevention in Females



ESTABLISHED IN 18

OCTOBER 3, 2024

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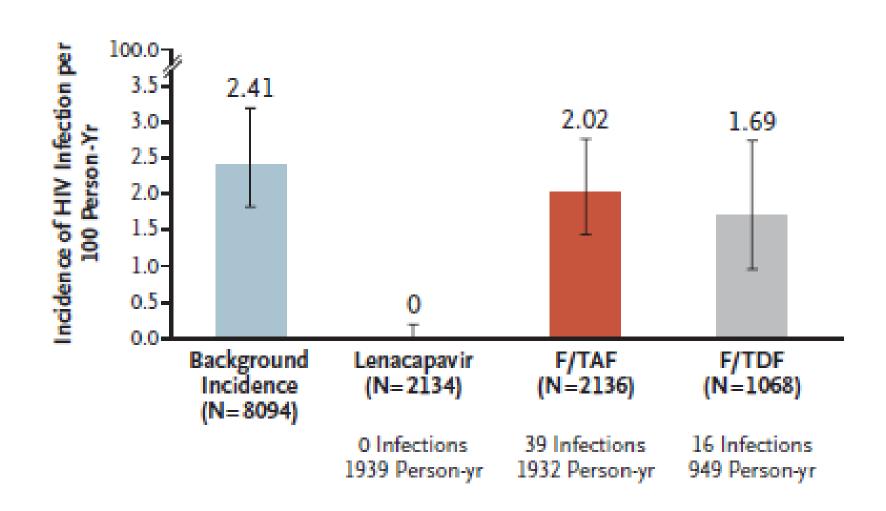
Twice-Yearly Lenacapavir or Daily F/TAF for HIV Prevention in Cisgender Women

L.-G. Bekker, M. Das, Q. Abdool Karim, K. Ahmed, J. Batting, W. Brumskine, K. Gill, I. Harkoo, M. Jaggernath, G. Kigozi, N. Kiwanuka, P. Kotze, L. Lebina, C.E. Louw, M. Malahleha, M. Manentsa, L.E. Mansoor, D. Moodley, V. Naicker, L. Naidoo, M. Naidoo, G. Nair, N. Ndlovu, T. Palanee-Phillips, R. Panchia, S. Pillay, D. Potloane, P. Selepe, N. Singh, Y. Singh, E. Spooner, A.M. Ward, Z. Zwane, R. Ebrahimi, Y. Zhao, A. Kintu, C. Deaton, C.C. Carter, J.M. Baeten, and F. Matovu Kiweewa, for the PURPOSE 1 Study Team*

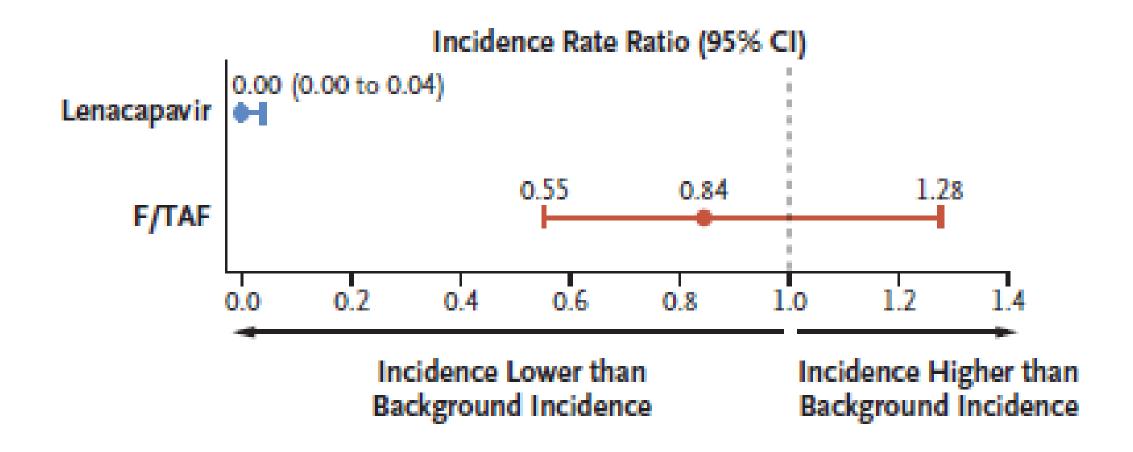
- Phase 3 double-blind RCT of lenacapavir (LEN) SC every 26 weeks vs. emtricitabine/tenofovir alafenamide (F/TAF) orally daily vs. emtricitabine/tenofovir disoproxil fumarate (F/TDF) orally daily in South Africa and Uganda (each arm also received alternative SC or oral placebo).
- Inclusion criteria: Sexually active females 16-25 years old, not using PrEP or had HIV testing in past 3 months.
- Exclusion criteria: Weight <35 kg, GFR <60 ml/min, pregnancy.
- After HIV testing, HIV negative females randomized 2:2:1. LEN: Two 1.5 mL SC injections q 6 months. Day 1 and 2: Oral loading doses of two 300 mg tablets also provided.
- Endpoint: Incident HIV infection.

Trial stopped prematurely after interim efficacy analysis reviewed by independent data monitoring committee finding that the pre-specified criteria for stopping due to efficacy had been met.

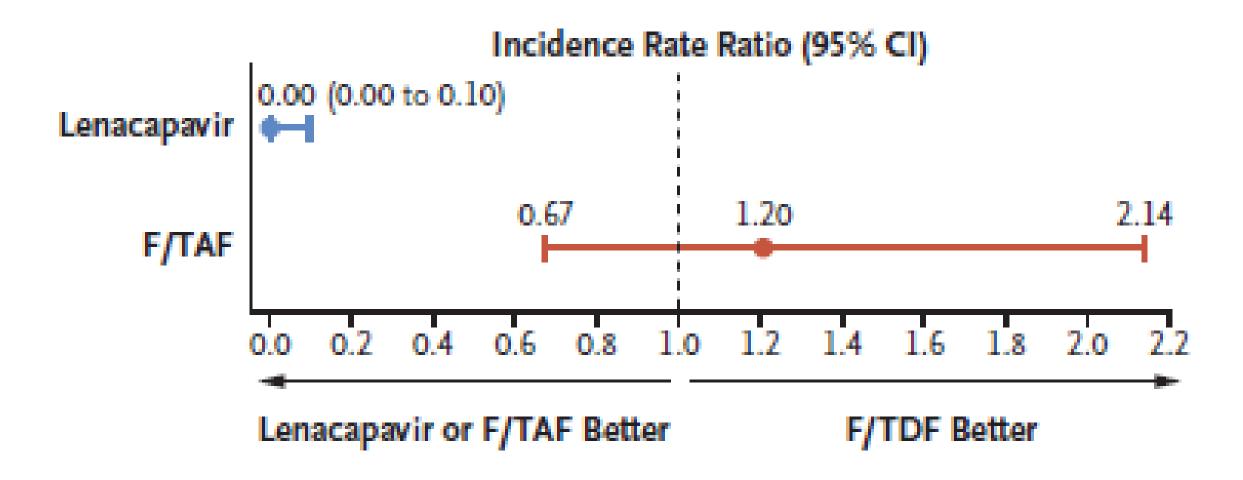
HIV Incidence in Each Arm and Background Incidence



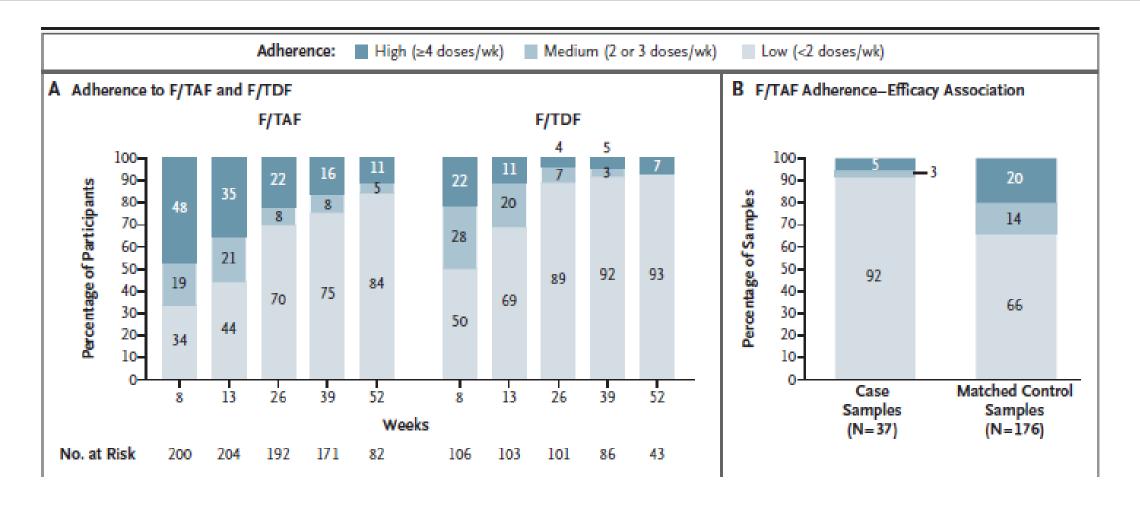
Incident Rate Ratio for LEN and F/TAF vs. Background Incidence



Incident Rate Ratio for LEN and F/TAF vs. F/TDF



Adherence to F/TAF and F/TDF



Adverse Events

- Injection site reactions: 68.8% in LEN arm vs. 34.9% in other arms (SC placebo). 4 participants (0.2)% discontinued LEN for this reason.
- No difference in laboratory abnormalities, and after excluding the injection site reactions, in overall adverse events or serious adverse events.
- Nausea and vomiting lower for LEN arm vs. F/TAF or F/TDF.

Lenacapavir (LEN) every 6 months vs. Daily F/TDF for HIV Prevention

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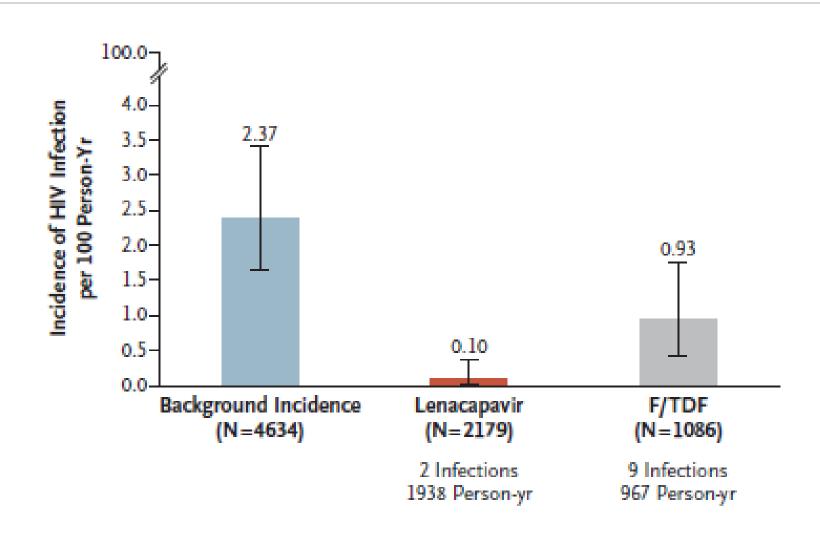
Twice-Yearly Lenacapavir for HIV Prevention in Men and Gender-Diverse Persons

C.F. Kelley, ^{1,2} M. Acevedo-Quiñones, ³ A.L. Agwu, ⁴ A. Avihingsanon, ⁵ P. Benson, ⁶ J. Blumenthal, ⁷ C. Brinson, ⁸ C. Brites, ⁹ P. Cahn, ¹⁰ V.D. Cantos, ¹¹ J. Clark, ¹² M. Clement, ¹³ C. Creticos, ¹⁴ G. Crofoot, ¹⁵ R.S. Diaz, ¹⁶ S. Doblecki-Lewis, ¹⁷ J.A. Gallardo-Cartagena, ¹⁸ A. Gaur, ¹⁹ B. Grinsztejn, ²⁰ S. Hassler, ²¹ J.C. Hinojosa, ²² T. Hodge, ²³ R. Kaplan, ²⁴ M. Lacerda, ²⁵ A. LaMarca, ²⁶ M.H. Losso, ²⁷ J. Valdez Madruga, ²⁸ K.H. Mayer, ²⁹ A. Mills, ³⁰ K. Mounzer, ¹¹ N. Ndlovu, ¹² R.M. Novak, ³³ A. Perez Rios, ³⁴ N. Phanuphak, ³⁵ M. Ramgopal, ³⁶ P.J. Ruane, ³⁷ J. Sánchez, ¹⁸ B. Santos, ³⁸ P. Schine, ³⁹ T. Schreibman, ⁴⁰ L.S.Y. Spencer, ⁴¹ O.T. Van Gerwen, ⁴² R. Vasconcelos, ⁴³ J.G. Vasquez, ⁴⁴ Z. Zwane, ⁴⁵ S. Cox, ⁴⁶ C. Deaton, ⁴⁷ R. Ebrahimi, ⁴⁶ P. Wong, ⁴⁶ R. Singh, ⁴⁶ L.B. Brown, ⁴⁶ C.C. Carter, ⁴⁶ M. Das, ⁴⁶ J.M. Baeten, ⁴⁸ and O. Ogbuagu, ⁴⁸ for the PURPOSE 2 Study Team*

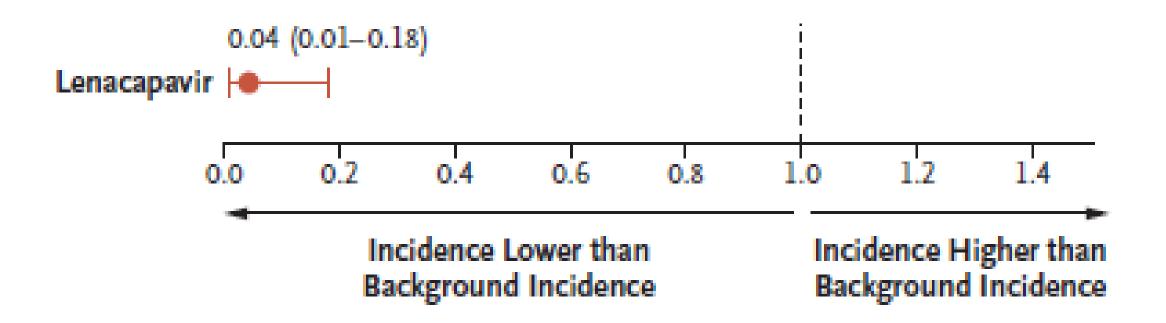
- Multinational phase 3 double-blind RCT of lenacapavir (LEN) SC every 26 weeks vs. F/TDF orally daily (each arm also received alternative SC or oral placebo)
- Endpoint: Incidence of HIV infection
- After HIV testing, HIV negative participants randomized 2:1. LEN: Two 1.5 mL SC injections q 6 months. Day 1 and 2: Oral loading doses of two 300 mg tablets also provided.

Trial stopped prematurely after interim efficacy analysis reviewed by independent data monitoring committee finding that the pre-specified criteria for stopping due to efficacy had been met.

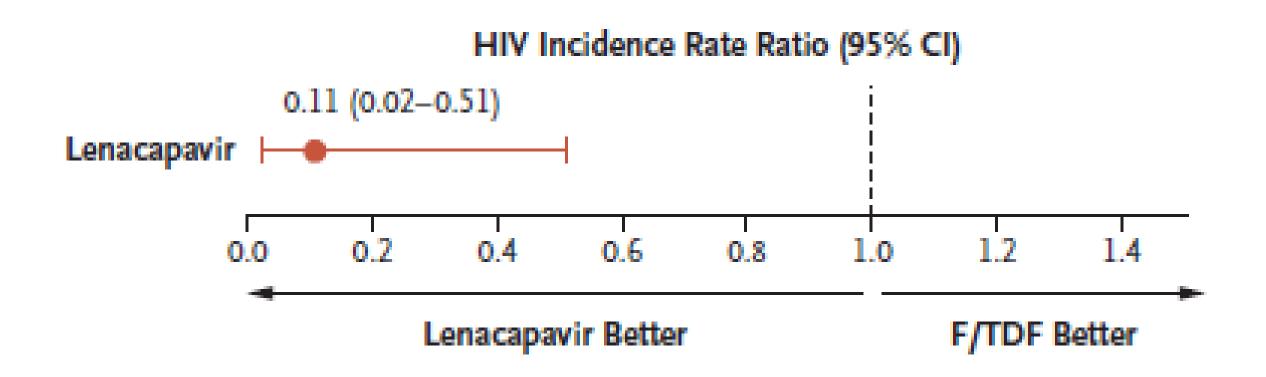
HIV Incidence in Each Arm and Background Incidence



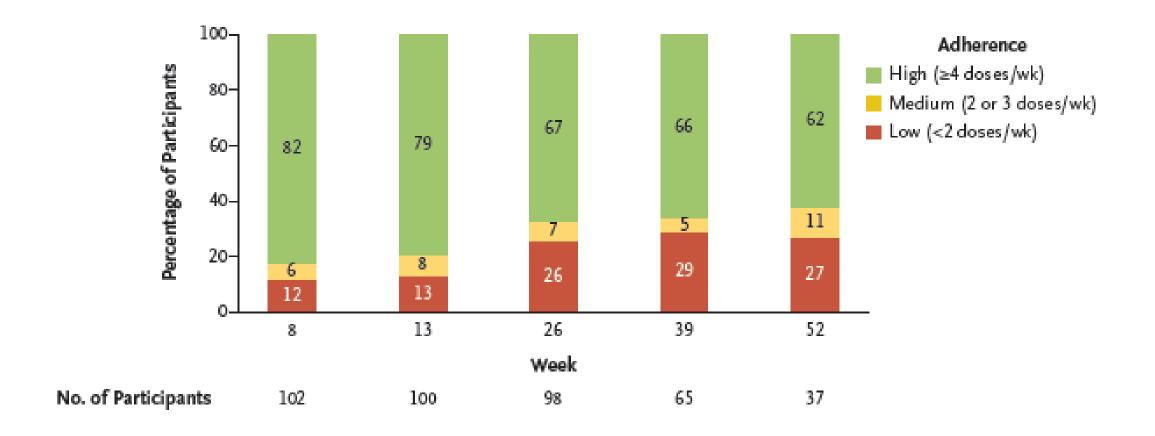
Incident Rate Ratio for Lenacapavir vs. Background Incidence



Incident Rate Ratio for Lenacapavir vs. F/TDF



Adherence to F/TDF



Summary

- Lenacapavir, given subcutaneously every 26 weeks (6 months) is more efficacious than F/TDF or F/TAF orally daily at preventing HIV infections. >99.9% of patients receiving LEN in clinical trials (PURPOSE 1 and 2) remained HIV negative.
- Excellent option, particularly for those who have concerns about privacy, don't want to take a pill every day, have difficulty with adherence, or have contraindications to TDF/FTC of TAF/FTC, and would prefer less frequent injections than the alternative (i.e. Cabotegravir q 2 months).
- Lenacapavir is now FDA approved for HIV prevention in adults and adolescents weighing at least 35 kg at risk for HIV infection.





WebEOC: Empowering Public Health Emergency Response with WebEOC

Real-Time Situational Awareness, Collaboration, and Decision Support Tailored for Public Health Responses



Key Features

- **Situation Reports (SitReps):** Create, share, and update incident-specific SitReps for leadership.
- Resource Tracking: Monitor medical assets, PPE, personnel, and vaccine inventory.
- Facility Health: Document facility capability: Water, Power, Open/Closed, etc.
- Public Health Dashboards: Custom dashboards for disease surveillance, testing, and vaccination efforts.
- Interagency Collaboration: Share data securely across agencies and jurisdictions.
- Mobile Access: Respond and report from anywhere, anytime.

Why Choose WebEOC for Public Health Response?

- Centralized Incident Management
- Streamlined
 Reporting &
 Communication
- Scalable for Local, Regional & State Events
- Mobile Applications
- Web-based



Contact for More Information: dohwebeocadmin@doh.wa.gov





WA DOH Office of Tribal Public Health & Relations









Tuesday June 24, 2025 **NPAIHB**



Agenda

OTPHR Updates

Contact Information



Dear Tribal Leader Letters

2025

| Date | Letter Subject | Meeting Information |
|---------|---|--|
| June 17 | Collaborative – environmental justice grants listening sessions (PDF) | Listening session 1: 8:30-10 a.m. August 14 - Zoom link Listening session 2: 10- 11:30 a.m. August 21 - Zoom link |
| June 17 | Informative – Tribal distribution list for monthly emergency medical services opioid surveillance reports (PDF) | 回数 25.79 第129年第 |
| June 16 | Informative – information on agency rulemaking for June 1-15, 2025 (PDF) | TATTALL HEALTH OF |
| June 9 | Informative – opportunity to participate in the Washington Syndemic Planning Group (PDF) | (全) (本) (本) (本) (本) (本) (本) (本) (本) (本) (本 |
| June 3 | Collaborative – environmental health disparities map listening sessions (PDF) | Listening session 1: 10- 11:30 a.m. June 20 - Zoom link Listening session 2: 2-4 p.m. July 15 - Zoom link |
| June 3 | Informative – information on agency rulemaking for May 16-31, 2025 (PDF) | |

| May 28 | Collaborative – listening session for revising the 2026 Behavioral Risk Factor Surveillance System (BRFSS) | Listening session: 10 a.m. June 6 |
|--------|--|--|
| May 21 | Collaborative – over-the-counter contraception access for teens and young adults (PDF) | Listening session 1: 5-6:30 p.m. June 17 - Registration link Listening session 2: 3-4:30 p.m. June 18 - Registration link |
| May 16 | Consultation – Tribal foundational public health services funding allocation for state biennium 2025-2027 (PDF) | Roundtable 1: 1:30-3 p.m. May 28 Roundtable 2: 3-4:30 p.m. June 4 Consultation: 3:30-5 p.m. June 11 |
| May 15 | Informative – information on agency rulemaking for May 1-15, 2025 (PDF) | |
| May 14 | Informative – updates to Tribal shellfish consent decree and attachments of minimum position requirements (PDF) | |
| May 13 | Collaborative – source water protection grant guidelines update (PDF) | Listening session: 3:30- p.m. June 16 - Zoom link |



| Date/Time | Meeting Title/Type | Meeting Platform | DTLL | |
|--|---|------------------|--|--|
| Tuesday, July 15th at 2-4:00pm | Collaborative –Environmental Health Disparities Map <u>Listening Session #2</u> | Zoom Meeting | Collaborative- Environmental Health Disparities Map | |
| Thursday August 14, 2025 at 8:30-10:00 am | Collaborative – Environmental Justice Grants Listening Session #1 | Zoom Meeting | Collaborative – Environmental Justice Grants Listening Sessions | |
| Thursday August 21, 2025 at 10-11:30 am | Collaborative – Environmental Justice Grants Listening Session #2 | Zoom Meeting | <u>Collaborative – Environmental</u> <u>Justice Grants Listening Sessions</u> | |
| Coming in August | Collaborative – Shellfish Consent Decree Listening Session | Coming soon | Informative DTLL | |





May 16, 2025

Engage with the Washington Syndemic Planning Group (WSPG)

What is the WSPG?

A community advisory body launched in July 2022 that advises the Washington State Department of Health's Office of Infectious Disease (OID) on strategies to combat HIV, viral hepatitis, and sexually transmitted infections (STIs) through an anti-racist, syndemic approach.

Why Engage?

- · Influence statewide prevention, care, treatment, and harm-reduction strategies.
- · Elevate health equity and racial justice in policy and funding decisions.
- · Collaborate on person-centered, evidence-based models of care.

WSPG Representation

- · People with Lived Experience
- · Peer navigators, CHWs, and advocates rooted in communities most affected by syndemics
- . Health care providers, HIV/STI/HCV clinicians, prescribers of PrEP/PEP, MOUD providers
- Community-Based Organizations
- Local Health Jurisdictions (LHJs)
- Systems-Level & Policy Experts

Opportunities to Engage

- Apply for Membership: Individuals with lived experience or professional expertise in HIV, viral hepatitis, STIs, or drug user health are encouraged to apply.
- Join Community Caucuses: Participate in targeted listening sessions (e.g., mental health, drug use, long-term survivors) to share community-specific recommendations.
- Serve on Committees: Contribute to Innovation Committees, Steering Committee, or special task forces
 focusing on syndemic frameworks and multisector solutions.
- Review and Comment on Materials: Provide feedback on the WSPG Charter & Bylaws, annual reports, and meeting minutes via the WSPG webpage.
- . Attend General Meetings: WSPG holds open general meetings every two months. These meetings are open to

the public, providing a space for observation, dialogue, and feedback on key syndemic priorities.

Learn More and Get Involved

- 1. Visit the WSPG Webpage
- 2. Download Key Documents:
 - a. 2025 Charter & Bylaws
 - Read more about the Syndemic Planning Group's work on the HIV Integrated Care and Prevention Plan 2022-2026
- Submit an Application: Complete the online form by contacting the WSPG coordinator directly (<u>starleen.maharajlewis@doh.wa.gov</u>).
- 4. Attend Public Meetings: Check the WSPG site for upcoming meeting dates, agendas, and virtual participation links.

Program contact info

Starleen Maharaj-Lewis
Syndemic Planning Coordinator
Office of Infectious Disease
Washington State Department of Health
Email: starleen.maharaj-lewis@doh.wa.gov



May 2025

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INSPIRE: Readiness - Communicating About Data and Surveillance During Infectious Disease Emergencies

Virtual Webinar Opportunity

Thursday, July 10, 2025 11:00AM - 12:00 PM PST

Effectively communicating about data is a core skill for public health professionals. Whether responding to an outbreak, presenting surveillance data, or countering misleading information, the ability to share complex information in clear, accurate, and relatable ways builds trust and drives informed action.

This virtual session will feature Dr. Amanda Simanek, an epidemiologist and co-founder of Those Nerdy Girls, a team of interdisciplinary scientists and clinicians behind the Dear Pandemic platform. Dr. Simanek brings deep expertise in infectious disease epidemiology, social determinants of health, and science communication.

By the end of this session, participants will:

- Identify tested communications frameworks to address uncertainty, emerging evidence, and misinformation.
- Understand practical strategies to communicate science to support public health response.
- Create a space for collaborative discussion around challenges, opportunities, and real-world applications relevant to their work.
- Featured Speaker: Amanda Simanek, PhD, MPH, Founding Member, Contributing Writer, Those Nerdy Girls; Researcher and Associate Professor, Rosalind Franklin University of Medicine and Science



ASSOCIATION OF STATE AND TERRITORIAL HEALTH OFFICIALS

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2025 WASHINGTON STATE PUBLIC HEALTH ASSOCIATION CONFERENCE

- Tuesday October 21, 2025 Thursday October 23, 2025
- Yakima, WA
- Registration and Rates
- Submit Proposal to Present



2025 ANNUAL CONFERENCE

Together for Health: Action, Compassion, and Collaboration

PROPOSAL SUBMISSIONS

WSPHA is now accepting submissions for the 2025 Annual Conference at the Yakima Convention Center from October 21-23, 2025.

Proposals related to the theme and public health issues are encouraged. Acceptance will be based on clarity, project description, relevance to the theme, and new concepts. Not all submissions will be selected; over 200 proposals were received last year.

SUBMIT VIA THE ONLINE FORM BY JUNE 12, 2025

Before submitting a presentation, presenters must agree to the following obligations:

- The primary presenter must attend and present at the conference.
- Presentations can have 3 presenters total. All presenters must purchase a conference registration and arrange their own lodging.
- Those unable to purchase a registration are encouraged to apply for a scholarship.
- Workshops MUST have an interactive group component.

Notifications of status (ACCEPTED, ALTERNATE, or DECLINED) will be sent by July 14th, 2025. Due to limited slots, not all submissions will be selected.

Suggested Topics Include:

- · Climate Change & Justice
- Community-Led Health Initiatives Health System Transformation
- Communicable Disease
- · Environmental Public Health
- Equity through Data
- Healing, Hope, and Building Trust Health
- · Health Across the Lifespan
- · Racism as a Public Health Crisis
- · Historical Roots of Public Health
- · Leadership & Workforce Development
- · Policy & Funding
- · Social & Political Determinants of
- Technology & Innovation

CDC Updates to COVID-19 Vaccine Schedules

The Centers for Disease Control and Prevention (CDC) posted updated versions of the <u>immunization schedules</u>.

Summary of the COVID-19 vaccine recommendation changes on the CDC immunization schedules:

- The <u>Child and Adolescent Immunization Schedule</u> now reflects shared clinical decision making for all children and adolescents aged 6 months to 17 years, including those who are moderately or severely immunocompromised.
 - <u>Vaccines For Children</u> (VFC)-eligible children can be vaccinated after a shared clinical decision with their healthcare provider.
 - More information about the Advisory Committee on Immunization Practices' (ACIP) shared clinical decision-making recommendations, guidance, and implementation considerations can be found online here.
 - The notes section has been updated accordingly. We encourage you to review the notes carefully.
- No changes were made to the recommendations for persons who are aged 18 years and older and not pregnant.
- For the <u>Child and Adolescent schedule</u> and the <u>Adult schedule</u>, pregnancy is now shaded gray to reflect no guidance/recommendation.

CDC Updates to COVID-19 Vaccine Schedules

Email from State Health Officer Dr. Tao Kwan-Gett 6/18/25. We'll have further updates from Tao and our Covid team at the 7/10 AIHC Bi-weekly.

The Washington State Department of Health continues to recommend that everyone 6 months and older, including pregnant people, receive the current COVID-19 vaccine to protect against severe illness.

This recommendation is informed by the <u>Washington State Vaccine Advisory Committee (VAC)</u>. The VAC serves as an advisory body to the Department on appropriate recommendations to control vaccine preventable diseases in Washington State.

We continue to monitor federal updates on COVID-19 vaccine recommendations and assess how any changes may impact the health and safety of Washington residents.

We are committed to science-based vaccine policy and to making sure vaccines stay accessible and equitable for everyone in Washington. We will promptly share any updates with the public and our partners.

Access the COVID-19 Vaccine Information for Health Care Providers webpage for more details.



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HEALTH

DTLL documents for the WSPG slide 5 information - https://doh.wa.gov/sites/default/files/2025-06/DTLL-SyndemicPlanningGroup.pdf



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