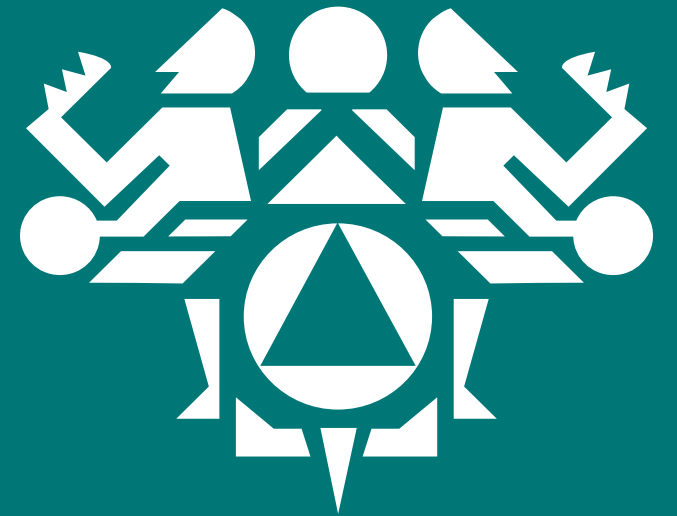


NPAIHB

Weekly Update

February 3, 2026





NORTHWEST PORTLAND AREA
INDIAN HEALTH BOARD
Indian Leadership for Indian Health

Agenda

- Welcome & Introduction: Bridget Canniff
- NPAIHB Announcements, Events, & Resources
- Communicable Diseases Updates: Dr. Tara Perti, PAIHS
- Partner Update: Washington State Department of Health
- Partner Update: Oregon Health Authority
- Discussion: Northwest Tribal Public Health Gathering
- Questions & Comments

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



Northwest Tribal Public Health Emergency Preparedness Conference & Training

Register: tinyurl.com/2026TPHEPReg

Submit a Presentation Proposal:
www.surveymonkey.com/r/2026Presenter
Due by March 9

More Info: www.npaihb.org/TPHEP2026

May 4 – 8, 2026
Quinault Beach Resort & Casino
Ocean Shores, WA

Questions? Contact the planning team @ NPAIHB at tphep@npaihb.org



ZEROSuicide Workshop

What is a Zero Suicide Workshop?

The Zero Suicide Workshop is your opportunity to learn from experts in Zero Suicide implementation.

During the workshop teams will learn best practices, strategies to overcome challenges, and strategic guidance.



NORTHWEST PORTLAND AREA
INDIAN HEALTH BOARD

SAVE THE DATE

The Northwest Portland Area Indian Health Board is hosting a 1-day Zero Suicide Workshop in Portland, Oregon.

May 6, 2026
8:30 a.m.-4:00 p.m.

Who Should Attend?

Tribal and Urban Indian Health organizations who currently implement Zero Suicide and care for people who may be at risk of suicide.

May 7, 2026 8:30 a.m.-12:30 p.m.

IHS Zero Suicide Initiative Grantee Meeting for 2022 IHS ZSI Tribal/ UIO Grantees only.

Please address questions to
Helena Darrow
hdarrow@npaihb.org

**Registration Opens
February 2, 2026**

Reserve your hotel stay by April 14th at
<https://www.marriott.com/event-reservations/reservation-link.mi?id=1757701801728&key=GRP&app=resvlink>





Summer Research TRAINING INSTITUTE

for American Indian and Alaska Native Health
Professionals and Students

Improve your research skills
with short courses in
Epidemiology, Community
Based Participatory Research,
Data Science, and more!



June 8-19, 2026



9AM-4:30PM



Portland, Oregon



GOAL

The goal of the NW NARCH is to improve tribal health by increasing the number of American Indian and Alaska Native (AI/AN) people who are engaged in biomedical and social science research and who can bring the benefits of academic research into their communities.

APPROACH

The SRTI curriculum is designed for AI/AN health professional and student research training needs. Each trainee may create a customized course schedule. Certificates of completion are awarded at the end of each course.

SPONSORS

National Institutes of Health
under Award Number
1S06GM141002

Northwest Portland Area Indian
Health Board

Native American Research
Center for Health

REGISTRATION COMING SOON

Questions? Email us at summerinstitute@npaihb.org





Northwest
Native American
Research Center
for Health

TRIBAL RESEARCHERS' CANCER CONTROL FELLOWSHIP PROGRAM

**APPLICATIONS DUE
MARCH 20, 2026**

FELLOWS WILL:

- Attend a 2-week in-person training June 8-19, 2026
- Receive distance learning, peer & career mentorship
- Connect with a network of experts in cancer control and prevention in Indian Country

FOR MORE INFO

- Ashley Thomas, MPH
Senior Program Manager
- athomas@npaih.org

2026



SPONSORED BY

National Institute of Medical Sciences of the Department of Health and Human Services
Native American Research Centers for Health | Epidemiology and Area Indian Health Board

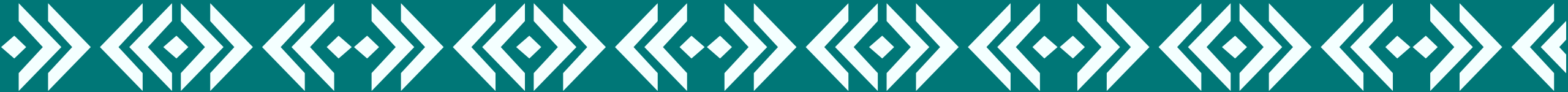
Upcoming Indian Country ECHO Telehealth Opportunities

- **Harm Reduction ECHO** - 1st Tuesday of every month at 12pm PT
 - Tuesday, February 3rd at 12pm PT
 - To Join via Zoom: <https://echo.zoom.us/j/99009428799?pwd=TFVRa1FPSDU5M2lvTTNwbGo3ZjdyZz09>
- **EMS ECHO** - 1st Tuesday & 3rd Thursday of every month at 5pm PT
 - Tuesday, February 3rd at 5pm PT
 - Didactic Topic: *Terminating Resuscitation – What To Do When There’s Nothing Else To Do*
 - To Join via Zoom: <https://echo.zoom.us/j/84832881641?pwd=SXlINlplJa0Vta1R1c28xcUh5V1dlUT09>
- **Hepatitis C ECHO** – 1st, 3rd & 4th Wednesday of every month at 11am PT
 - Wednesday, February 4th at 11am PT
 - Didactic Topic: *Methadone of Opioid Use Disorder – Updates & Ongoing Barriers to Care*
 - To join via Zoom: <https://echo.zoom.us/j/537117924?pwd=OEExbERmK2pSUFFsMzV1SmVpb3g3dz09>
- **Substance Use Disorder (SUD) ECHO** – 1st Thursday of every month at 11am PT
 - Thursday, February 5th at 11am PT
 - To join via Zoom: <https://echo.zoom.us/j/806554798?pwd=WVQyUFJnYkR3SXBjcUdlemRnNmZ6Zz09>

NPAIHB Weekly Update Schedule

- February 10: Tribal Community Health Provider Program (TCHPP)
- February 17: N CREW Research Topic: Writing Methods, including Data Collection & Strengthening Applications
- February 24: Legislative & Policy Updates





Partner Updates: Portland Area Indian Health Service

Portland Area IHS Communicable Diseases Update

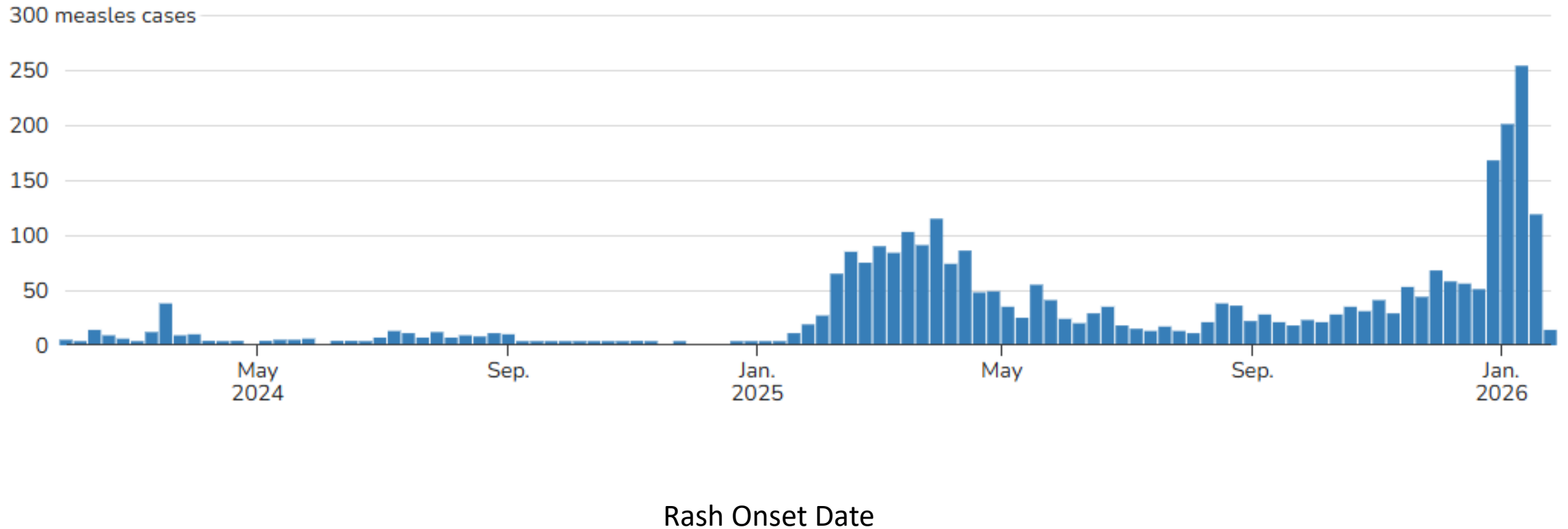
TARA PERTI, MD, MPH
MEDICAL EPIDEMIOLOGIST
IHS, PORTLAND AREA OFFICE
February 3, 2026



Outline

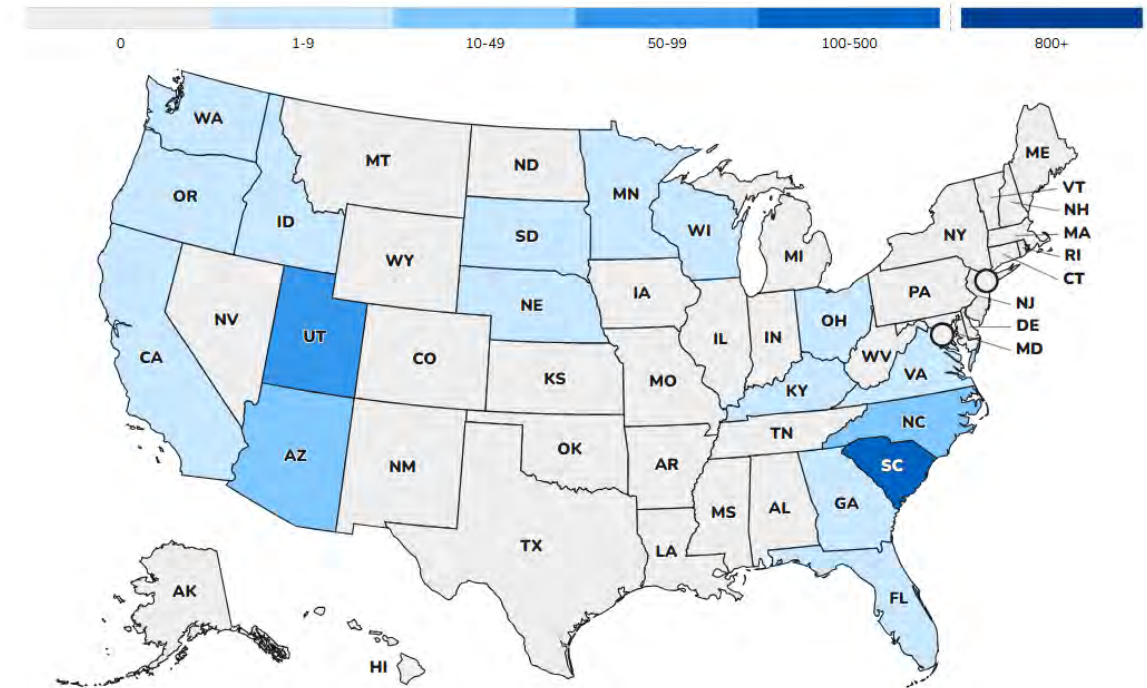
- Measles
- Influenza, RSV, and COVID-19

Measles – United States, 2024-2026 (through 1/29)



Measles — United States, 2026

- 588 confirmed cases among 17 states during 2026 as of 1/29 (2,267 cases during 2025).
- 94% of cases are outbreak-associated (≥ 3 related cases).
- Age: 27% < 5 years-old, 58% 5-19 years-old, 11% ≥ 20 years-old.
- 3% hospitalized overall (during 2025, 11% hospitalized, with 18% of those < 5 years-old hospitalized).
- 0 deaths (during 2025, 3 deaths among unvaccinated individuals, including 2 healthy school-aged children).
- 94% unvaccinated or with unknown vaccination status, 2% one MMR dose, 4% two MMR doses.



Measles — Recent Cases in the Portland Area (cont.)

Washington (N=9)

- Outbreak in Snohomish County with 6 unvaccinated children confirmed to have measles, linked to a family from South Carolina with 3 members diagnosed with measles after traveling in King and Snohomish Counties from 12/27-1/1. Possible public exposure locations with ongoing symptom monitoring period:
 - **Snohomish County, Washington**
 - 1/13 Swedish Mill Creek, Everett
 - Monitor for symptoms through 2/3/26
 - 1/18 Slavic Christian Church Awakening, Mukilteo
 - Monitor for symptoms through 2/8/26
- 1/15: **Kittitas County** reported a student at Central Washington University confirmed to have measles.
- 1/23: **Clark County** reported a confirmed case of measles in an adult who traveled to an area with an outbreak. Possible exposures at Ridgefield High School on 1/14-1/16. <https://clark.wa.gov/public-health/public-health-investigating-confirmed-measles-case-clark-county-1>
- 2/2: **Stevens County** is also reported to have a confirmed cases of measles (WADOH).

Additional Details:

<https://www.snohd.org/m/NewsFlash/Home/Detail/908>

<https://www.snohd.org/m/newsflash/Home/Detail/910>

Measles — Portland Area, 2026 (cont.)

Idaho (N=8)

- 1/6: Eastern Idaho Public Health reported a cases of measles in an unvaccinated child in **Madison County** who traveled out-of-state to an area with an outbreak. There have been 2 subsequent cases in the County.
- 1/23: Southwest District Health reported 3 cases of measles in **Canyon County**. There have now been 2 additional cases. One child traveled out of state.
 - Possible public exposure location with ongoing symptom monitoring period : Vallivue High School on 1/20/26.

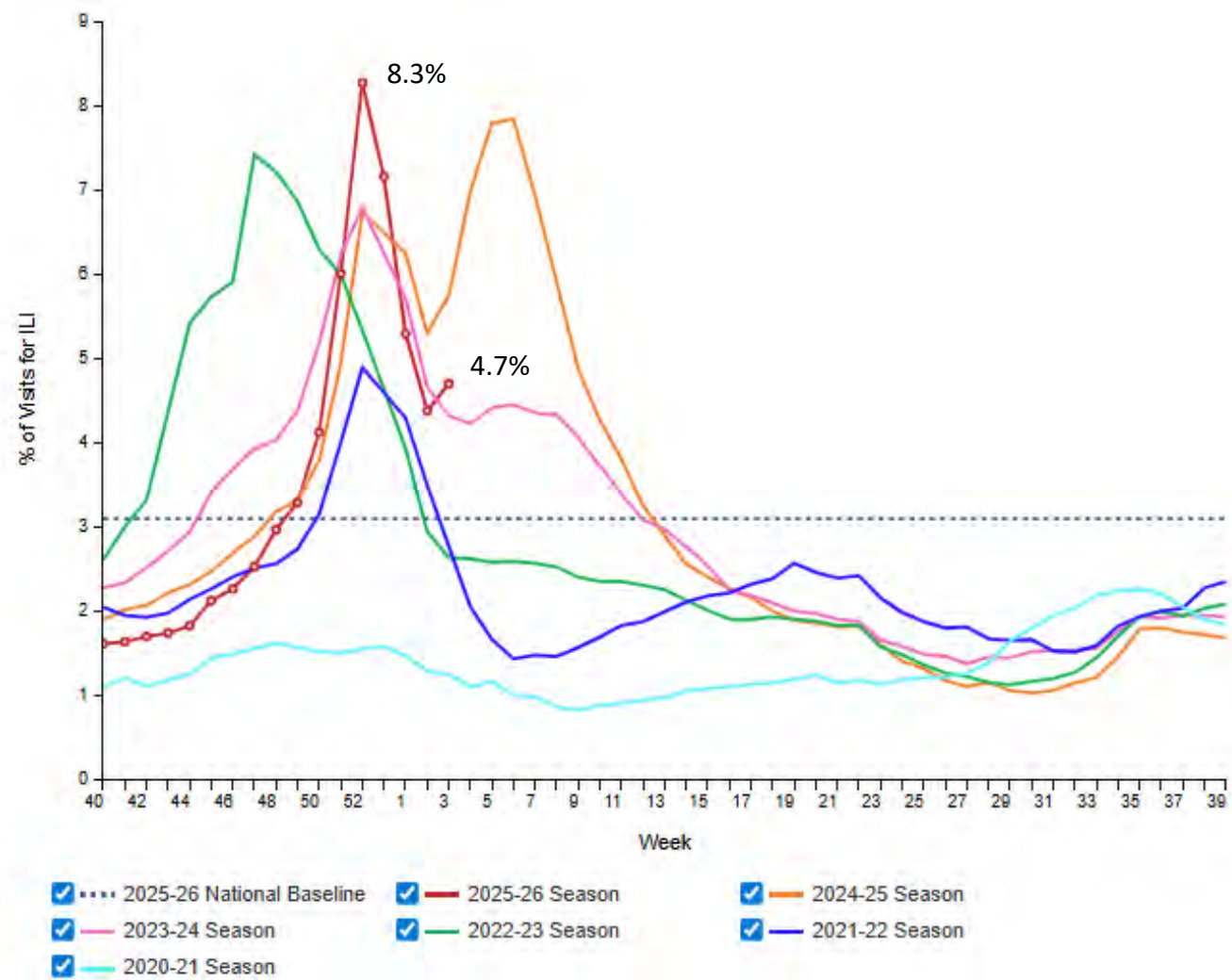
Oregon (N=4)

- 1/10: 2 cases of confirmed measles among unvaccinated individuals in **Linn County** with no travel outside Oregon.
- 1/16: **Clackamas County** reported 1 case of confirmed measles in an unvaccinated individual and on 1/28 reported a **second linked case**. Possible public exposure location: 1/26 11:28 AM-1:53 PM at Kaiser Sunnyside ER
 - Anyone who was at this location should check their immunization records to see if they are protected from measles and to ensure they get vaccinated if not immune.
 - Anyone at this location should monitor for symptoms until 2/16/26. If symptoms develop they should call the clinic or hospital ahead to notify them of the need for evaluation for measles.
- 1/21: **Benton County**: Measles virus detected wastewater in the Corvallis-Lewisburg Area.

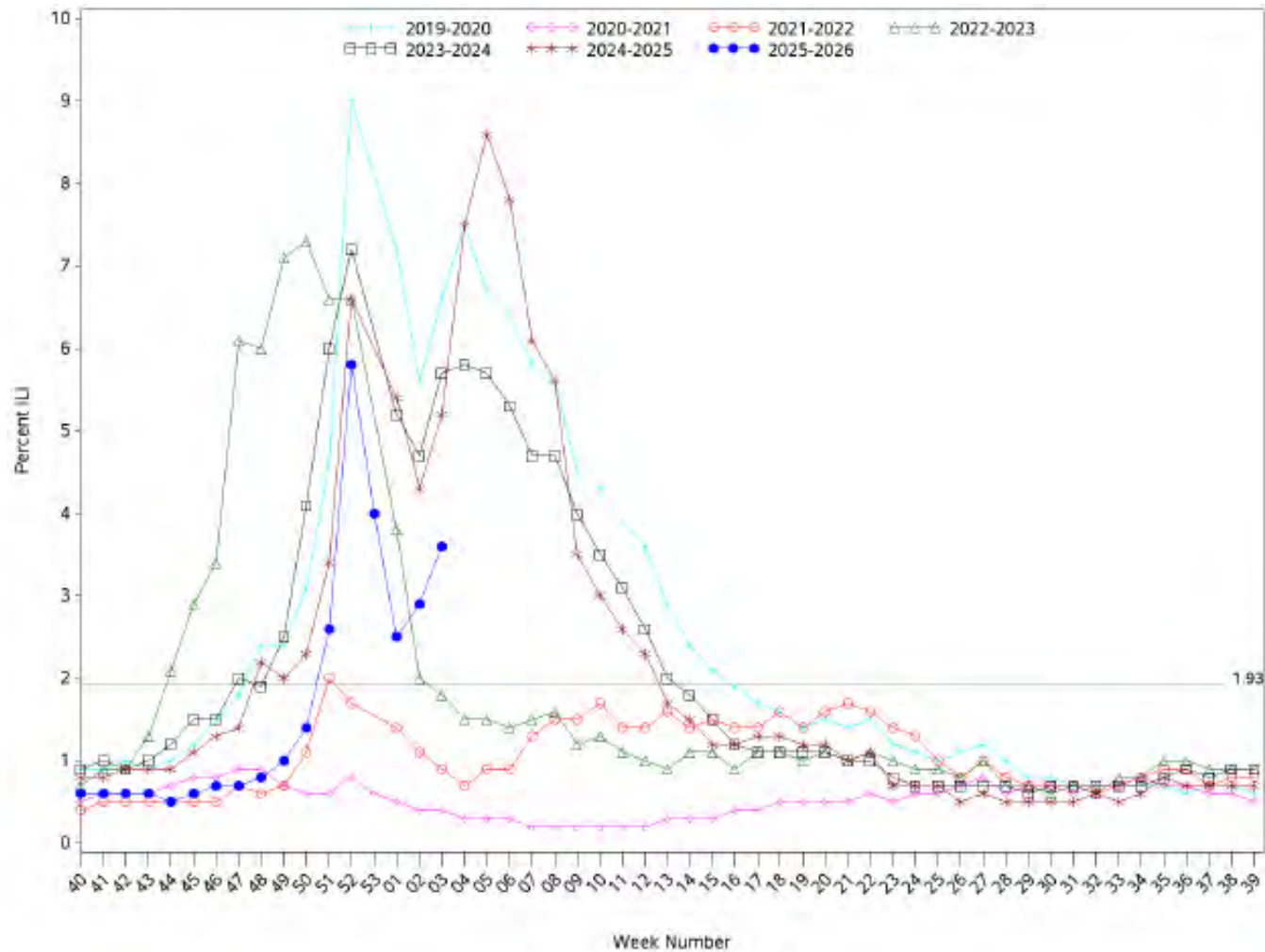
Measles — Portland Area, 2025-26

Location (State/County)	Number of Cases		Additional Cases (e.g. Among Travelers)
	2025 (N=26)	2026 (N=21)	
Idaho	Total: 13	Total: 8	2 additional cases among travelers to Idaho (Bonneville and Cassia Counties) in 2025.
Boundary (Panhandle Health District)	6		
Bonner (Panhandle Health District)	1		
Kootenai (Panhandle Health District)	1		
Bonneville (Eastern Idaho Public Health)	5		
Madison (Eastern Idaho Public Health)		3	
Canyon (Southwest District Health)		5	
Washington	Total: 12	Total: 9	9 additional cases among travelers to Washington (King and Snohomish Counties) in 2025.
King	7		
Snohomish	2	6	
Whatcom	2		
Spokane	1		
Kittitas		1	
Clark		1	
Stevens		1	
Oregon	Total: 1	Total: 4	Measles virus detected in wastewater from Marion and Josephine Counties in October 2025. No cases reported.
Multnomah	1		
Linn		2	
Clackamas		2	

Percentage of Outpatients Visits for Influenza-like Illness (ILI) — United States, 2025-26 (through 1/24/26)

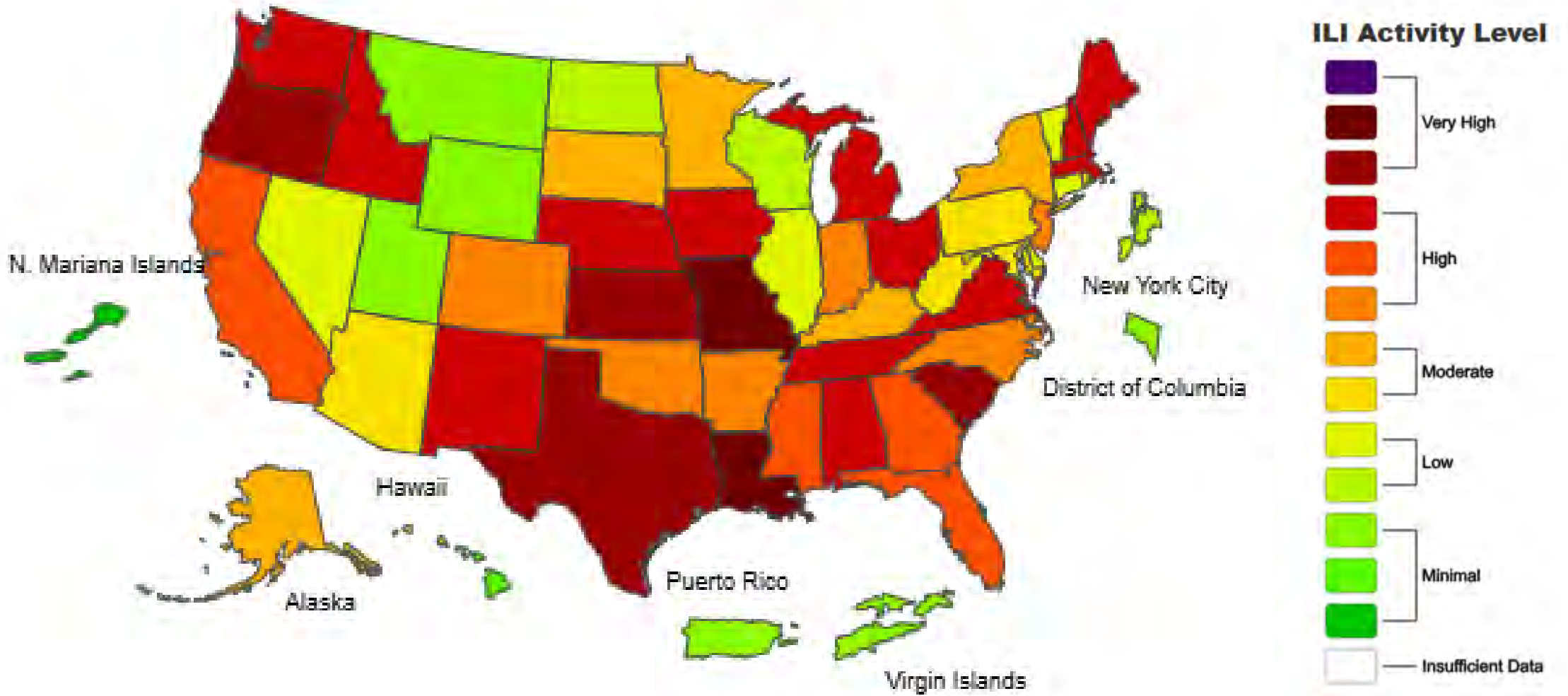


Percentage of Weekly Outpatient Visits for Influenza-Like Illness (ILI) — IHS, 2025-26 (through 1/24/26)

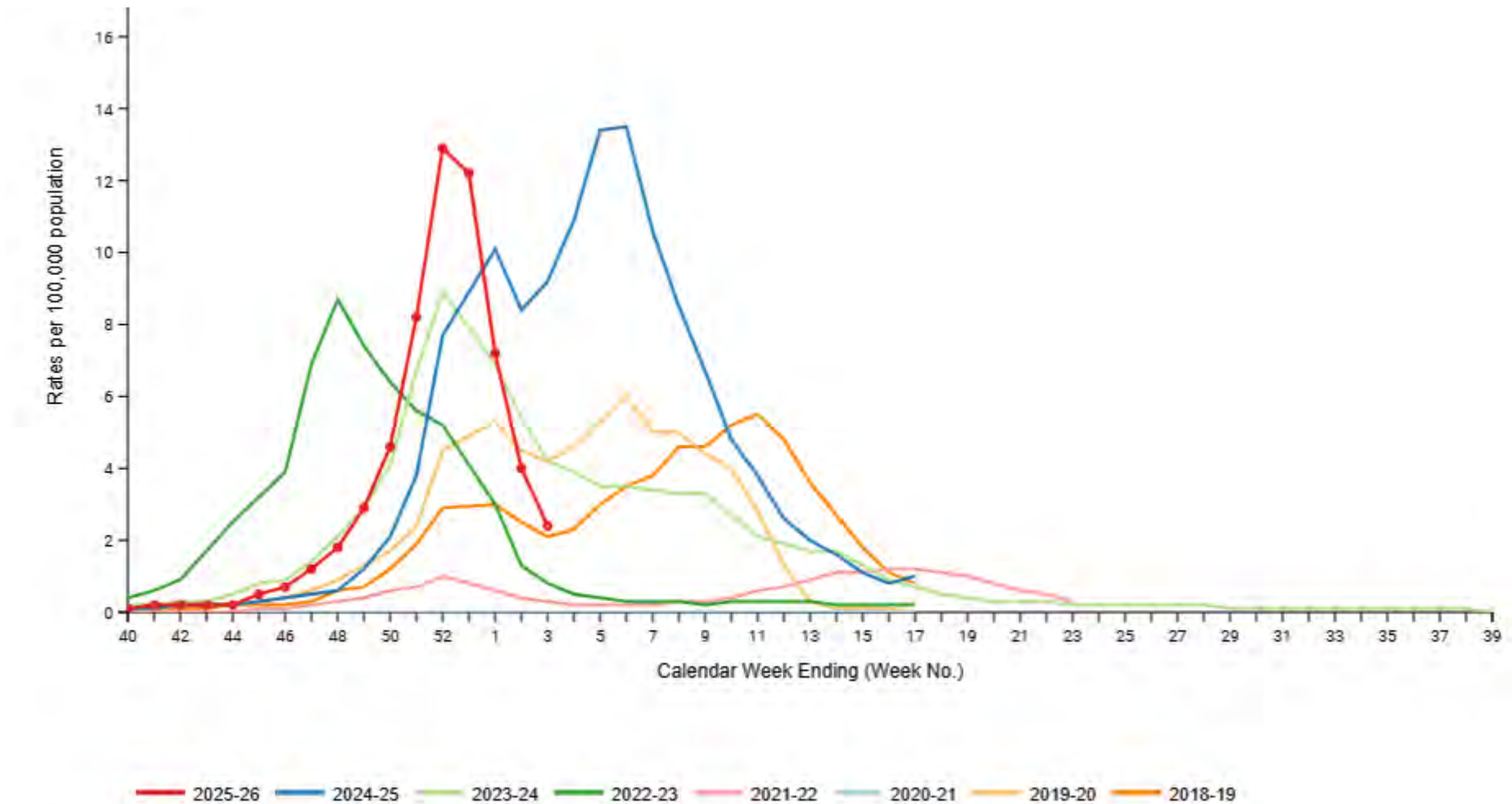


	% ILI Visits	
	Week ending 1/17/26	Week ending 1/24/26
Portland Area*	2.8	3.1
National	2.9	3.6
* Based on 9 reporting I/T/U facilities		

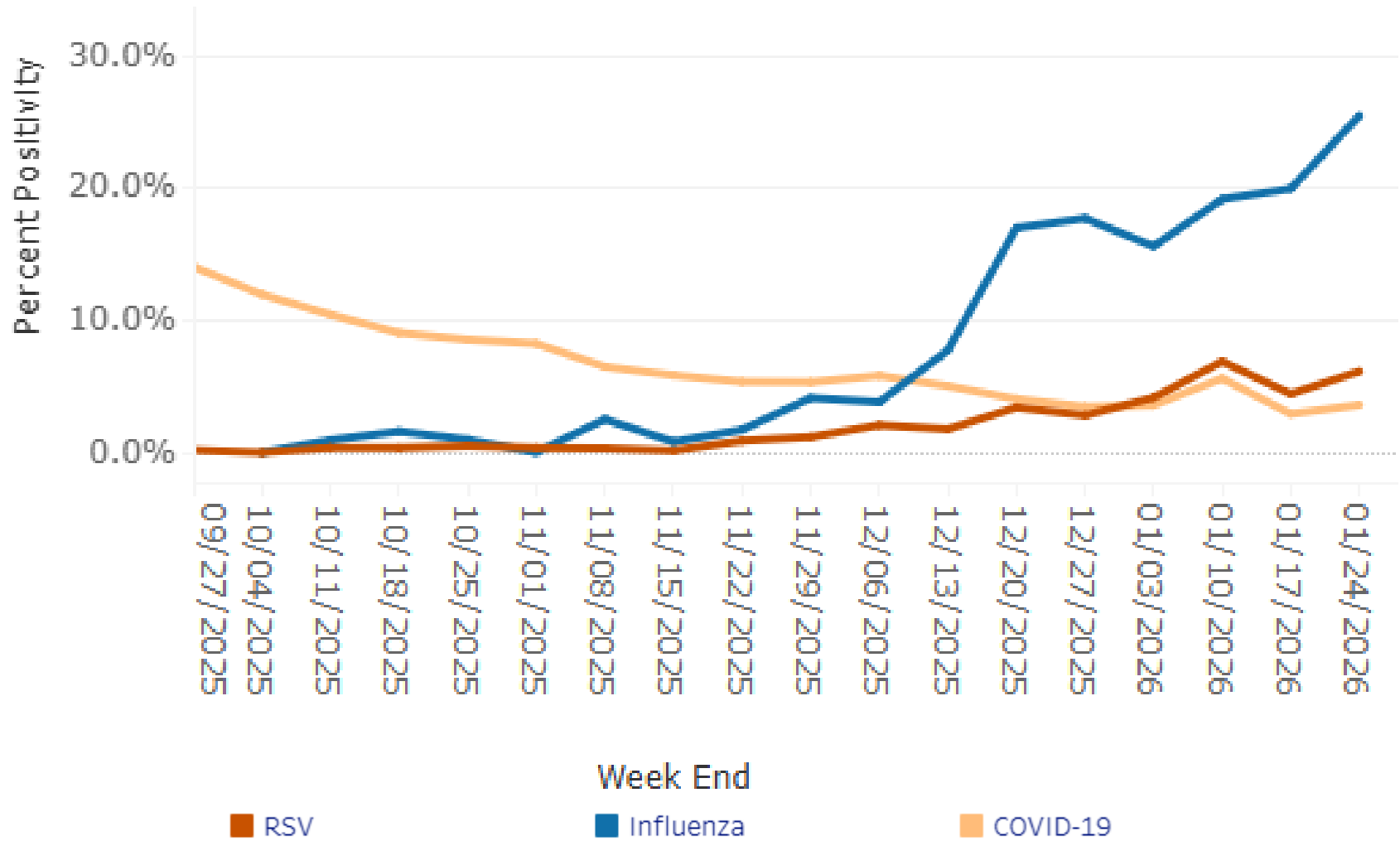
ILI Activity — United States, 2025-26 (week ending 1/24/26)



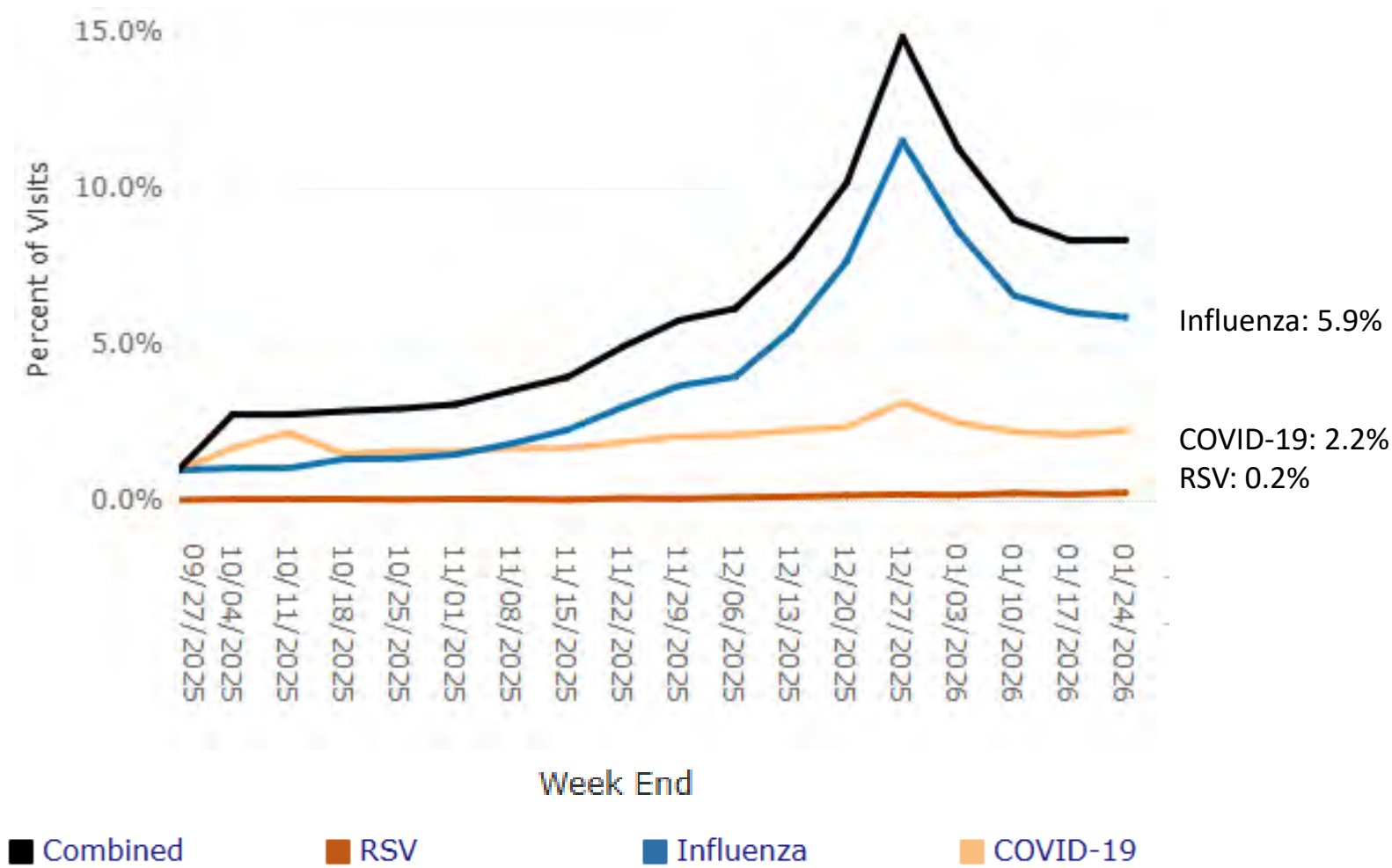
Weekly Influenza-Associated Hospitalization Rates — United States (FluSurv-Net), 2025-26 and Prior Six Seasons



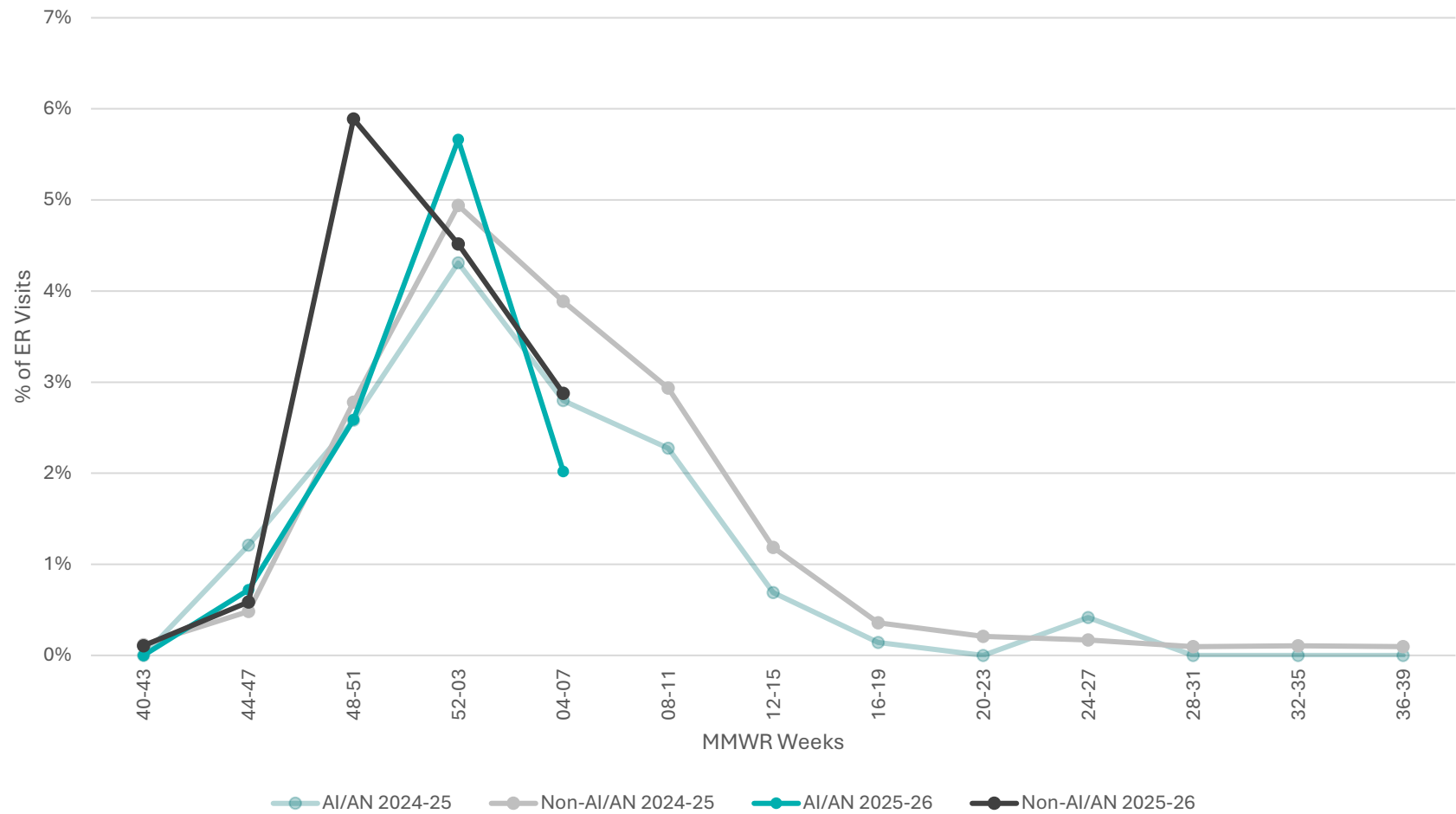
Percent of Tests Positive for Influenza, RSV, and COVID-19 — Idaho, 2025-26 (through 1/24/26)



Percent of Healthcare Visits for Influenza, COVID-19 and RSV — Idaho, 2025-26 (through 1/24/26)

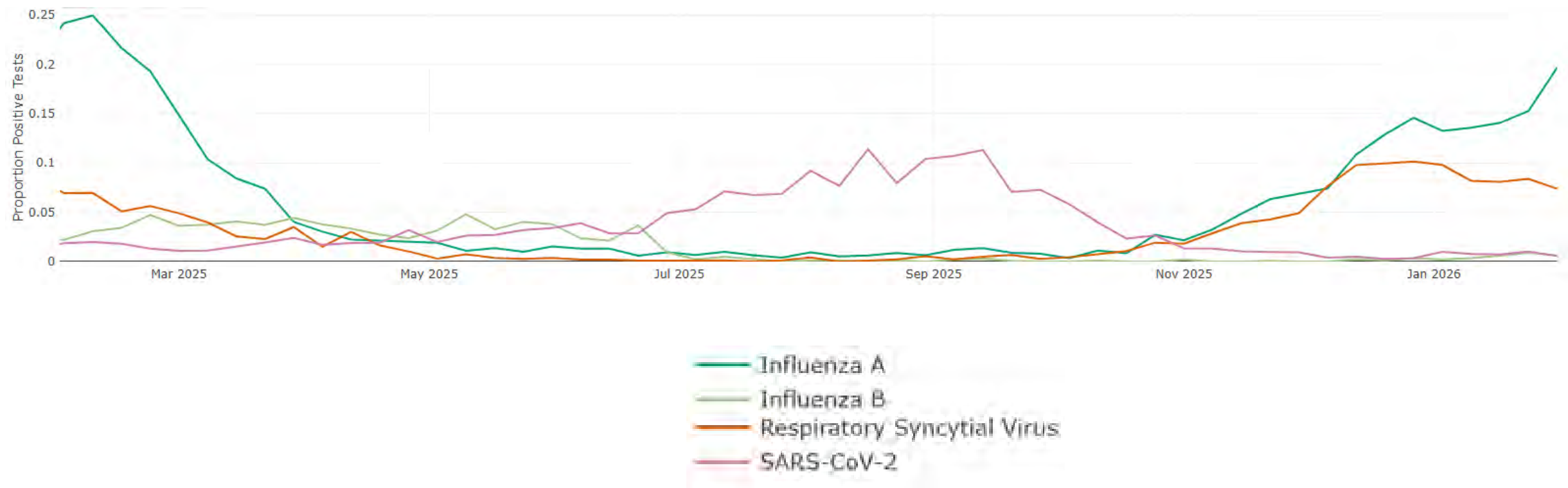


% ER Visits Associated with Influenza, AI/AN vs. non AI/AN — Idaho, 2025-26 vs. Prior Season (through 1/31)

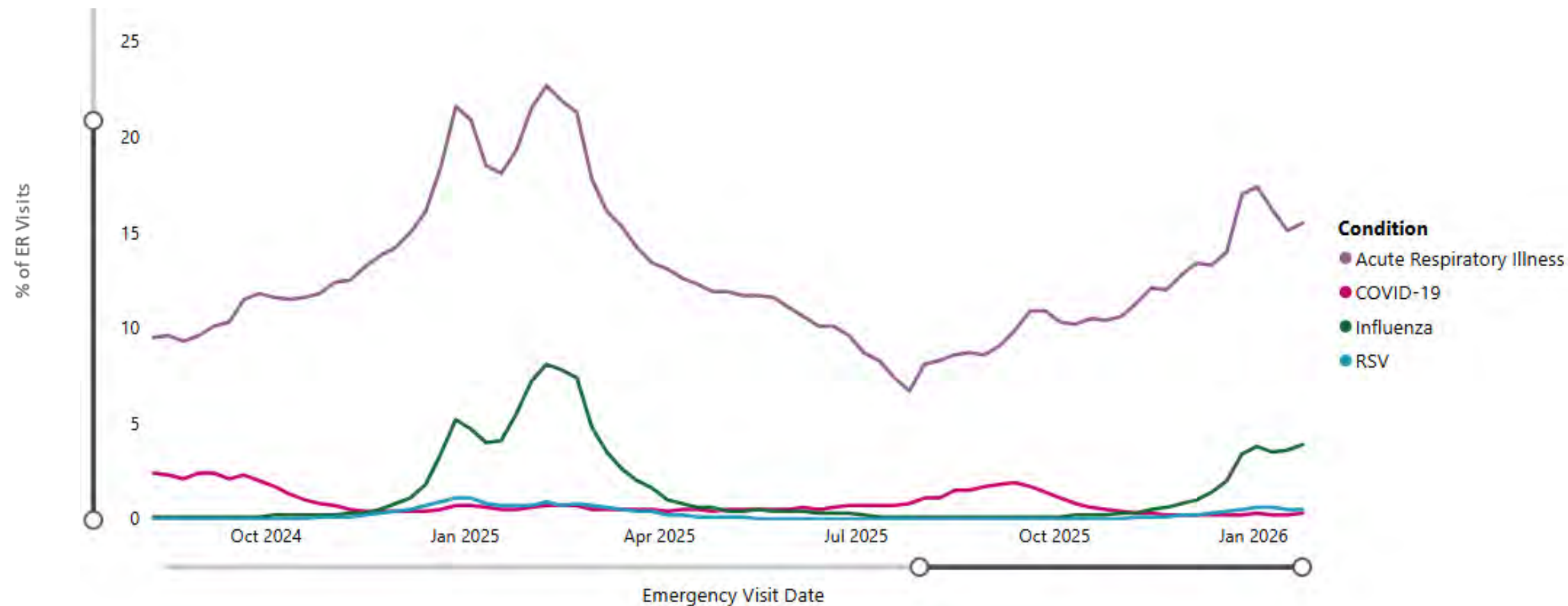


Data Source: ESSENCE.
Courtesy Kacey Little, MPH, NPAIHB.

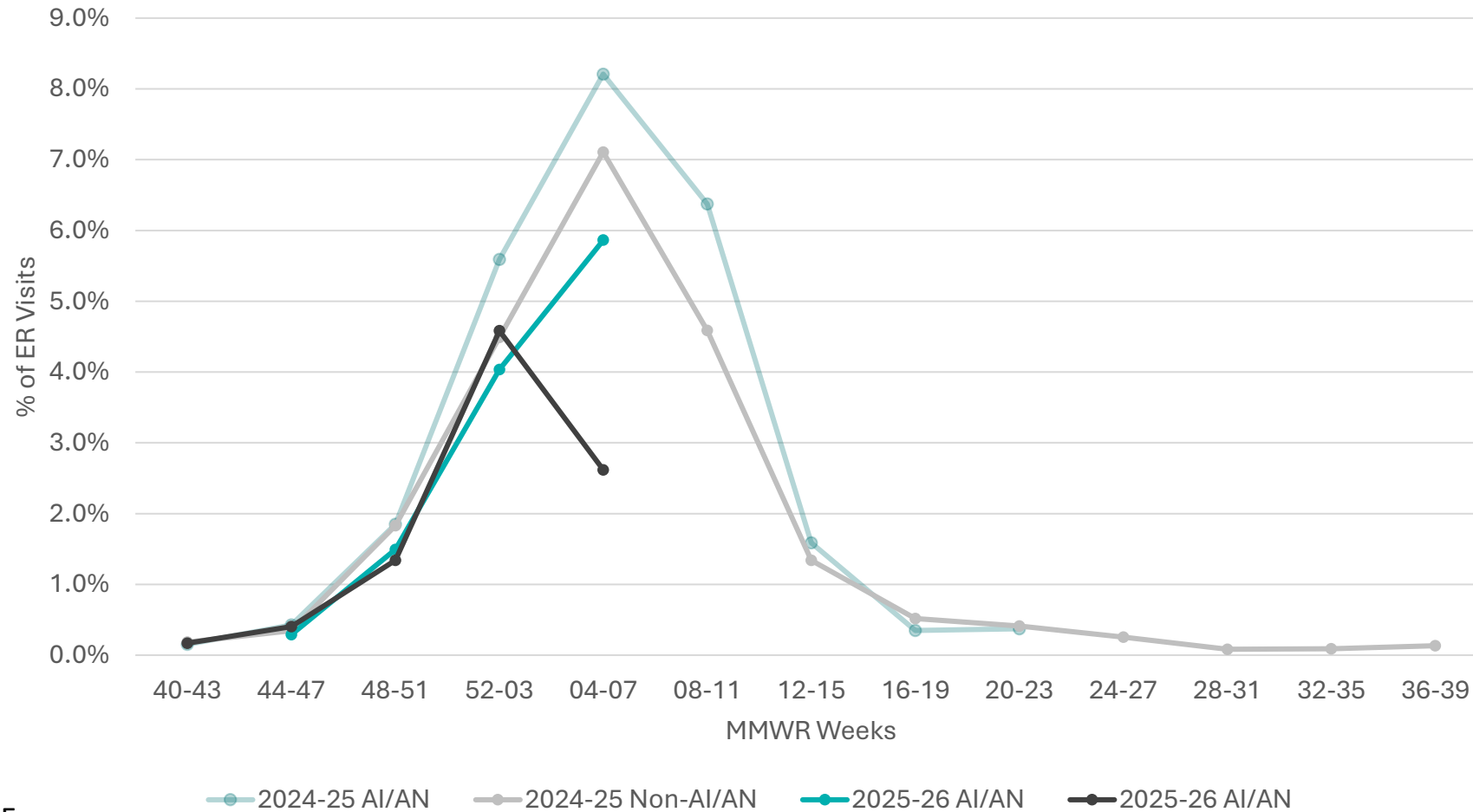
Proportion of Tests Positive for COVID-19, Influenza and RSV in the Northwest — University of Washington and Seattle Children’s Hospital, 2025-26 (through 1/31)



Percent of Emergency Room Visits for Acute Respiratory Illness, Influenza, RSV, and COVID-19 — Washington, 2024-26 (through 1/24/26)



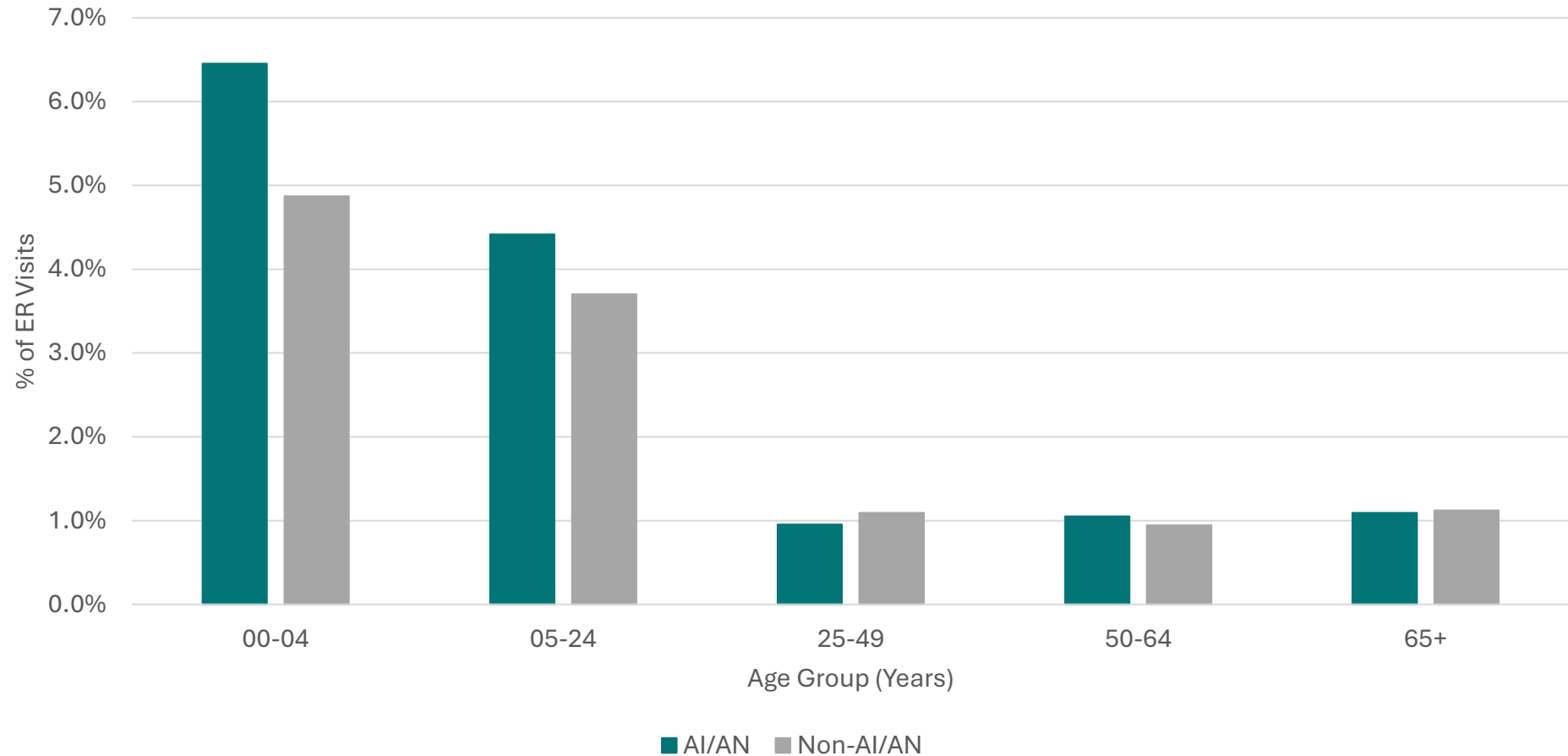
% ER Visits Associated with Influenza, AI/AN vs. non AI/AN — Washington, 2025-26 vs. Prior Season (through 1/31)



Data Source: ESSENCE.

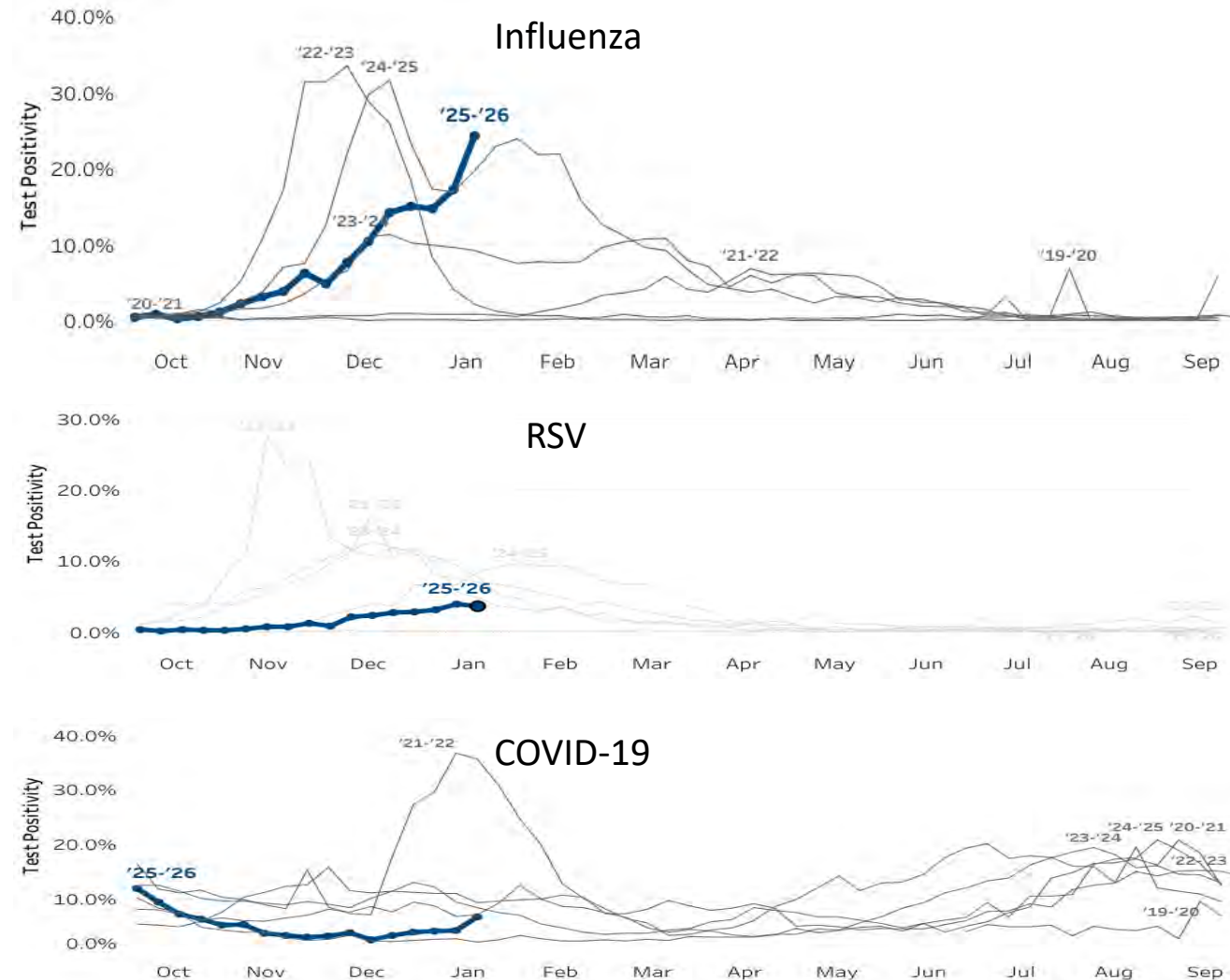
Courtesy Kacey Little, MPH, NPAIHB.

% ER Visits Associated with Influenza by Age Group, AI/AN vs. non-AI/AN — Washington, 2025-26 (through 1/31)

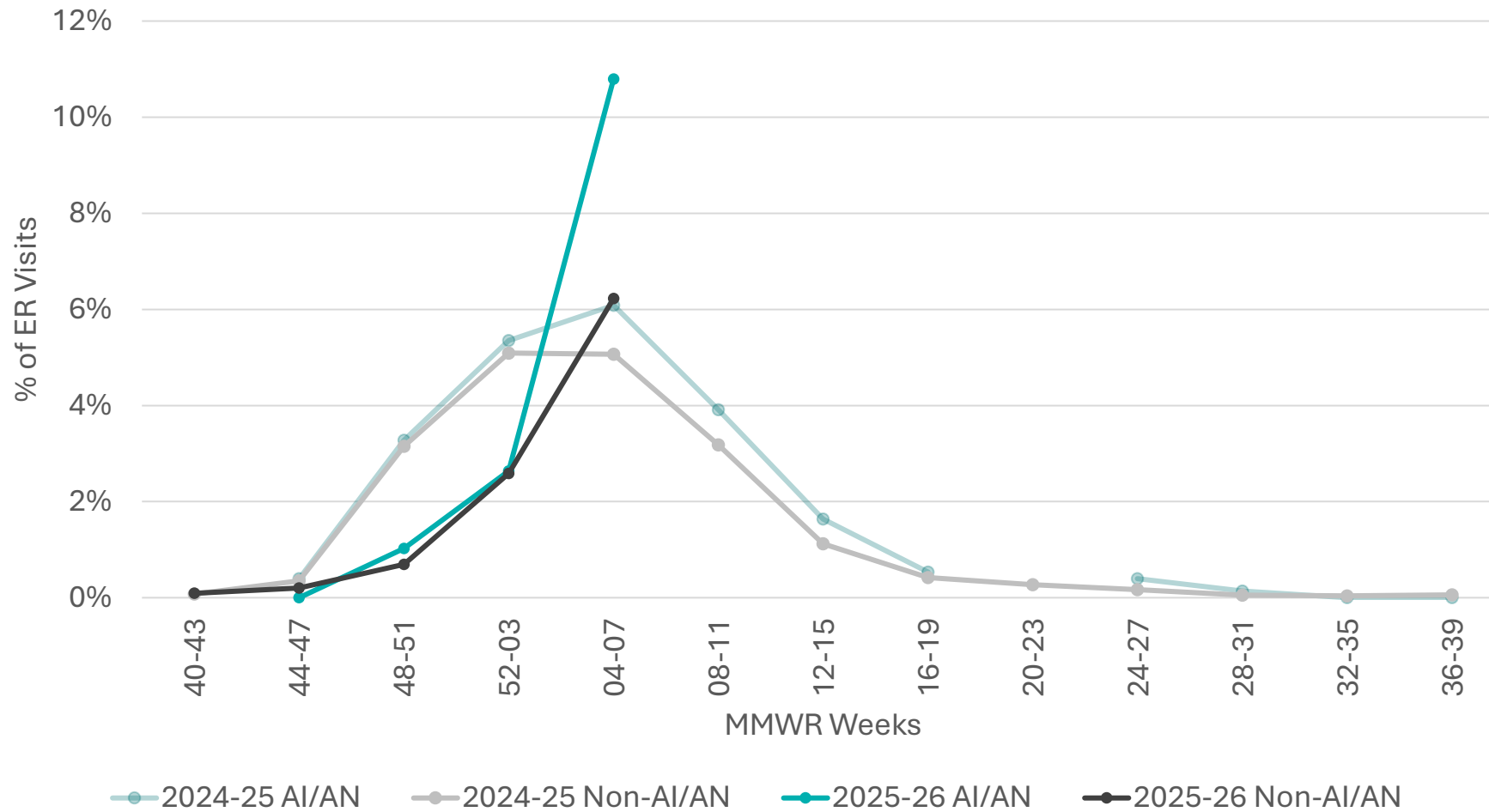


Data Source: ESSENCE.
Courtesy Kacey Little, MPH, NPAIHB.

Percent of Tests Positive for Influenza, RSV, and COVID-19 — Oregon, 2025-26 (through 1/24/26)



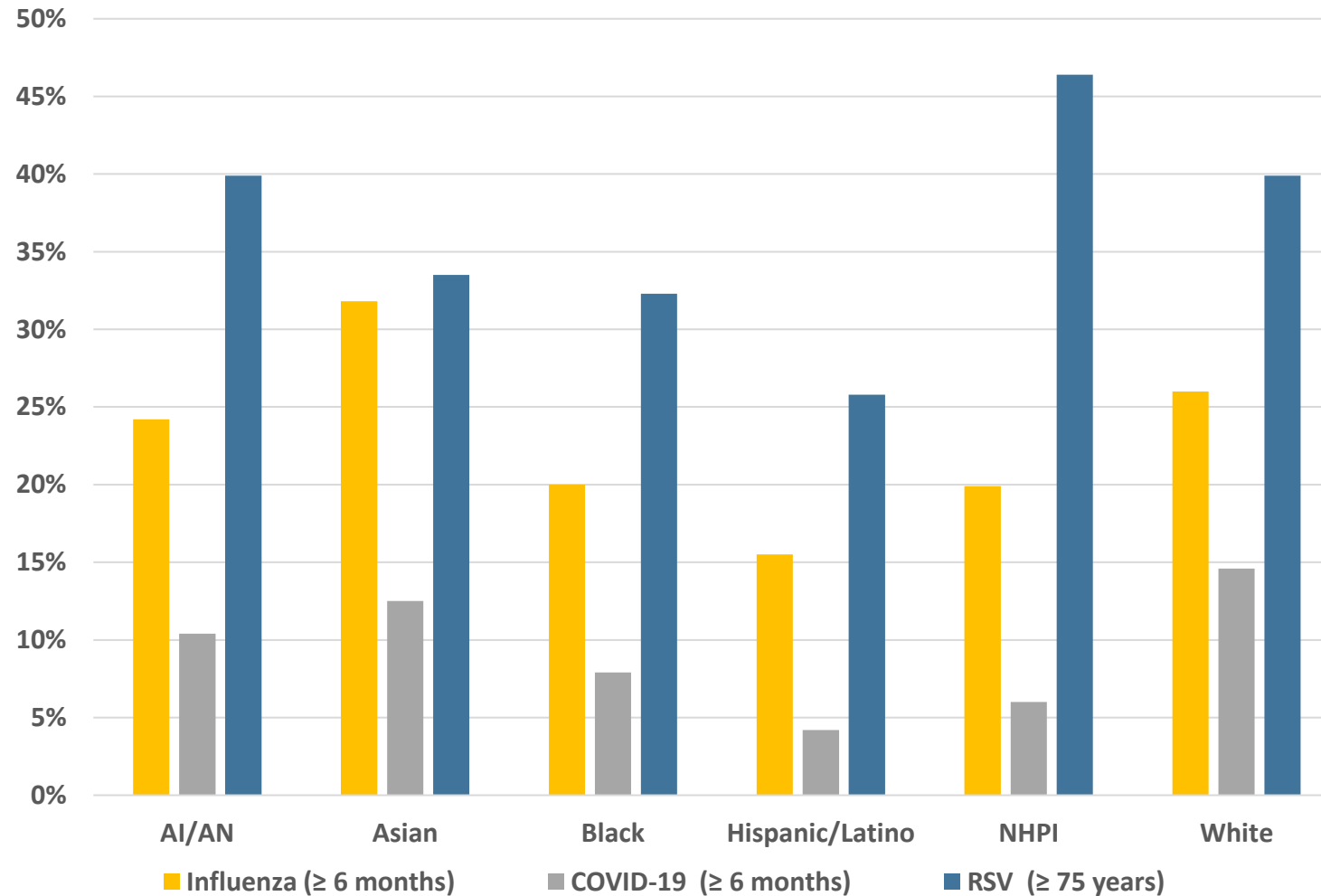
% ER Visits Associated with Influenza, AI/AN vs. non AI/AN — Oregon, 2025-26 vs. Prior Season (through 1/31)



Data Source: ESSENCE.

Courtesy Kacey Little, MPH, NPAIHB.

Percent of People Vaccinated for Influenza, COVID-19 and RSV by Race/Ethnicity — Washington State , 2025-26 (through 1/26/26)



Summary

- Measles: Portland Area, 2026
 - Washington (N=9): Outbreak in Snohomish County, now with 6 unvaccinated children confirmed to have measles, linked to a family from South Carolina diagnosed with measles after traveling in King and Snohomish Counties from 12/27-1/1. 1 case in Kittitas County (student at CWU) reported 1/15. 1 case in Clark County reported 1/23. 1 case in Stevens County.
 - Idaho (N=8): 3 cases have now been reported in Madison County and 5 cases have been reported in Canyon County.
 - Oregon (N=4): 2 cases in Linn County reported 1/10, 2 cases in Clackamas County, first case reported 1/16. Measles virus detected wastewater in the Corvallis-Lewisburg Area in Benton County.
- Influenza
 - Nationally, has been an increase again in outpatient visits for influenza-like illness (ILI).
 - Very high ILI activity in Oregon; high ILI activity in Idaho and Washington.
 - The % of tests positive for influenza is increasing in all three states; the % of influenza-associated ER visits has been increasing for AI/AN in Oregon and Washington.
 - There have been 52 children with influenza-related deaths in the U.S. this season.
- RSV: Remains above threshold for increased activity in WA, OR, ID.
- COVID-19: % of tests positive for COVID-19 increasing in Oregon.
- AI/AN have a higher risk of more severe disease due to influenza, COVID-19, and RSV, yet vaccination coverage is limited [for WA (as of 1/26): Influenza, 24.2%; COVID-19, 10.4%; RSV (age 75+), 39.9%].

Recommendations

- Keep vaccinating patients for influenza! Vaccination for influenza, COVID-19 and RSV is recommended as long as there is increased activity of these respiratory viruses.
- Ensure patients at your clinics and your families and communities are up to date on immunizations.
- Anyone traveling internationally (e.g. Mexico and Canada) or to a community with an outbreak without presumptive evidence of measles immunity are vaccinated at least 2 weeks prior to travel (those ≥ 12 months old: 2 doses at least 28 days apart, infants ≥ 6 months old: 1 dose (revaccinated with 2 dose series starting at 12 months)).
- Consider using multiple strategies to increase vaccination rates (e.g. reminder/recall, electronic prompts, standing orders, increasing patient access, provider audit and feedback with benchmarks, CME on provider communication techniques (e.g. boostoregon.org webinars including on motivational interviewing), vaccine clinics, mobile vaccine clinics, reviewing/addressing vaccination status with WIC beneficiaries, messaging utilizing trusted messengers).
- Wash hands regularly, clean high-touch areas frequently.
- What to do when you're sick:
 - Seek health care as soon as possible after developing symptoms (e.g. fevers, body aches, cough, fatigue) as treatment for influenza and COVID-19 are most effective when given early.
 - Stay home and away from other people you live with when you have symptoms of a cold. Wear a mask when you must be around others. You can resume your normal activities when you feel better and have not had a fever for at least 24 hours, but continue to distance from others and wear a mask when around others for the next 5 days.

HHS: All individuals are encouraged to consult with their health care providers to understand their options regarding vaccinations. Wash your hands afterwards.

CDC. Preventing Spread of Respiratory Viruses When You're Sick. Available at: <https://www.cdc.gov/respiratory-viruses/prevention/precautions-when-sick.html>

CDC. Preventing Respiratory Illnesses. Available at: <https://www.cdc.gov/respiratory-viruses/prevention/index.html>

Recommendations (cont.)

- Prepare for measles:
 - Ensure all health care workers have presumptive evidence of measles immunity and that N95 Respirator Fit Testing has been done in the past year.
 - If a measles case is identified in your community:
 - Develop signage and a protocol to screen patients for possible measles (e.g. fever and rash, with international travel, travel to a community with a measles outbreak, or known exposure to measles in the past 21 days).
 - Provide patients with possible measles a mask to wear and to immediately bring back to a designated room available (e.g. airborne infection isolation room if available).
 - Train staff, including front-desk to recognize, isolate, and evaluate patients with possible measles and in infection prevention (e.g. Project Firstline: Measles Infection Control Microlearn with discussion guide).
 - Ensure you have supplies for measles testing.
- Consider measles in anyone with a fever and generalized maculopapular rash with recent international travel or travel to an area with a measles outbreak, or exposure to a measles case. Recommend testing performed in collaboration with local health jurisdiction (throat or NP swab for measles PCR in viral transport media, possibly urine for measles PCR, blood for measles IgM and IgG).

Patient Education Resources for Respiratory Viruses/Immunizations

IHS Division of Epidemiology and Disease Prevention Educational Resources;

National IHS Public Health Council Public Health Messaging

Northwest Portland Area Indian Health Board (NPAIHB): [VacciNative](#); [Native Boost](#)

Johns Hopkins Center for Indigenous Health. [Knowledge Center: Resource Library](#)

American Academy of Family Physicians. [COVID-19 Vaccine: Fall 2025-26 Immunization Recommendations](#)

American Academy of Pediatrics: [Recommendations for COVID-19 Vaccines in Infants, Children, and Adolescents: Policy Statement](#). [Recommended Child and Adolescent Immunization Schedule](https://www.aap.org/immunization) <https://www.aap.org/immunization>; <https://www.healthychildren.org/immunizations> (e.g. [COVID-19 What Families Need to Know](#))

American College of Obstetricians and Gynecologists. [COVID-19 Vaccination Considerations for Obstetric–Gynecologic Care](#)

Children’s Hospital of Philadelphia: [Vaccine Education Center](#); [Vaccine and Vaccine Safety-Related Q&A Sheets](#) (e.g. [Q&A COVID-19 Vaccines What You Should Know](#); [Protecting Babies from RSV: What You should Know](#); [RSV & Adults: What You Should Know](#)); [Influenza: What You Should Know](#)).

[Boost Oregon: Videos and Resources](#)

Personal Testimonies: [Families Fighting Flu: Our Stories](#)

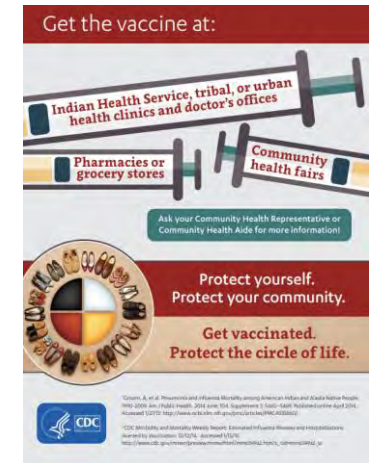
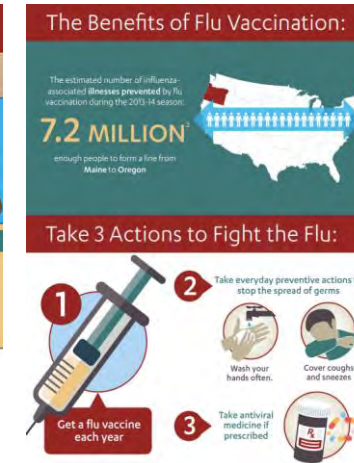
Washington State Department of Health: [Flu Overview](#); [Materials and Resources](#); [Influenza \(Flu\) Information for Public Health and Healthcare](#); [Measles Communications Toolkit for Washington State Partners](#)

[COVID-19](#); [DOH COVID-19 Vaccine Schedule](#); [Washington State Statewide Standing Order for COVID-19 Vaccine FAQs for the Public](#); [West Coast Health Alliance announces vaccine recommendations for COVID-19, flu, and RSV](#) | [Washington State Department of Health](#)

Oregon Health Authority: [Flu Prevention](#); [Immunization Resources](#); [Immunize.org: Influenza \(Flu\)](#)

Idaho Department of Health & Welfare: [Flu \(Seasonal and Pandemic\)](#); [Child and Adolescent Immunization](#) and [Adult Immunization](#); [COVID-19](#)

Centers for Disease Control and Prevention: [Preventing Seasonal Flu](#); [Flu Resources](#); [Preventing Spread of Respiratory Viruses When You're Sick](#) Indian Country ECHO/UNM Project ECHO: [Making a Strong Vaccine Recommendation: Vaccine Communication](#); [RSV](#)



Additional Resources for Measles

American Academy of Pediatrics. Measles. In: Kimberlin DW, Banerjee R, Barnett ED, Lynfield R, Sawyer MH, Long SS, eds. Red Book: 2024–2027 Report of the Committee on Infectious Diseases. 33rd Edition. Itasca, IL: American Academy of Pediatrics; 2024: 570-585.

American Academy of Pediatrics Project Firstline Poster. Available at: <https://downloads.aap.org/AAP/PDF/ThinkMeasles-final.pdf>

Centers for Disease Control and Prevention. Adult Immunization Schedule by Age. Available at: <https://www.cdc.gov/vaccines/hcp/imz-schedules/adult-age.html>.

Centers for Disease Control and Prevention. Be Ready for Measles Toolkit. Available at: <https://www.cdc.gov/measles/php/toolkit/index.html>

Centers for Disease Control and Prevention. Child and Adolescent Immunization Schedule by Age. Available at: <https://www.cdc.gov/vaccines/hcp/imz-schedules/child-adolescent-age.html>

Centers for Disease Control and Prevention. Guidelines for Environmental Infection Control in Health-Care Facilities. Available at: <https://www.cdc.gov/infection-control/media/pdfs/guideline-environmental-h.pdf>. 2003.

Centers for Disease Control and Prevention. Interim Infection Prevention and Control Recommendations for Measles in Healthcare Settings. Available at: <https://www.cdc.gov/infection-control/hcp/measles/index.html>

Centers for Disease Control and Prevention. Measles. In: Hall E., Wodi A.P., Hamborsky J., et al., eds. Epidemiology and Prevention of Vaccine-Preventable Diseases. 14th ed. Washington, D.C.: Public Health Foundation; 2021. Available at: <https://www.cdc.gov/pinkbook/hcp/table-of-contents/chapter-13-measles.html>

Centers for Disease Control and Prevention. Measles: For Public Health Professionals. Available at: <https://www.cdc.gov/measles/php/guidance/index.html/>

Centers for Disease Control and Prevention. Routine Measles, Mumps, and Rubella Vaccination. Available at: <https://www.cdc.gov/vaccines/vpd/mmr/hcp/recommendations.html#hcp>

Centers for Disease Control and Prevention. Questions About Measles. Available at: <https://www.cdc.gov/measles/about/questions.html>

Filardo TD, Mathis A, Raines K, et al. Measles. In: Roush SW, Baldy LM, Mulroy J, eds. Manual for the Surveillance of Vaccine Preventable Diseases. Atlanta, GA: Centers for Disease Control and Prevention. Paged last reviewed:05/13/2019. Available at: https://www.cdc.gov/surv-manual/php/table-of-contents/chapter-7-measles.html?CDC_AAref_Val=https://www.cdc.gov/vaccines/pubs/surv-manual/chpt07-measles.html

Idaho Bureau of Laboratories. Clinical Specimen Submission Guide. Available at: <https://publicdocuments.dhw.idaho.gov/WebLink/DocView.aspx?id=31429&dbid=0&repo=PUBLIC-DOCUMENTS>

Johns Hopkins Bloomberg School of Public Health: Center for Outbreak Response and Innovation. Empowering Outbreak Response: Optimizing Strategies for Measles Outbreaks. Available at: <https://cori.centerforhealthsecurity.org/resources/measles-outbreak-response>


Oregon Health Authority. Measles / Rubeola (vaccine-preventable). Available at: <https://www.oregon.gov/oha/ph/diseasesconditions/diseasesaz/pages/measles.aspx>

Oregon State Public Health Laboratory. Measles (Rubeola), Real-Time RT-PCR. Available at: <https://www.oregon.gov/oha/PH/LABORATORYSERVICES/Pages/zMeaslesPCR.aspx>

Washington State Department of Health. Measles. Available at: <https://doh.wa.gov/you-and-your-family/illness-and-disease-z/measles>; <https://doh.wa.gov/public-health-provider-resources/notifiable-conditions/measles>


Washington State Department of Health Public Health Laboratory. Measles, Mumps, & Rubella Specimen Testing Protocol. Available at: <https://doh.wa.gov/sites/default/files/2025-06/420-260-WA-PHL-MMRSpecimenTestingProtocol.pdf>; Measles Specimen Shipping Guide. Available at: <https://www.medialab.com/dv/dl.aspx?d=1932777&dh=3b5fa&u=69790&uh=0e2a1>

Examples of Patient Education Resources from the Northwest Portland Area Indian Health Board (NPAIHB)



Vaccination information for Natives by Natives

COVID-19 Vaccine



We have many ways to optimize our health and improve our lives. Vaccines are just one way we can protect ourselves from serious illnesses, like COVID-19 and the impacts of long COVID.

This handout is designed to help you understand COVID-19 and COVID-19 vaccines, so you can take care of yourself, your family, and your community.

“As a Crow-Tribal member, we did lose a lot of Elderly during the COVID pandemic, especially before vaccines... Now, we are social gathering, and we are lost without these Elders... When we get vaccinated, we are protecting our Elderly and our culture. We have to protect our people. And vaccines do help with that. Even if your body is strong and healthy, it's still important to get vaccinated.”

— Lana Schendelina, Elder and Crow Tribal Member

Common COVID-19 Symptoms

COVID-19 is a virus that attacks your whole body and causes some or all of these:

- Fever
- Cough
- Loss of taste and smell
- Headaches
- Shortness of breath
- Congestion
- Sore throat

COVID-19 can also result in hospitalization and death, especially for those more vulnerable, like people with certain medical conditions and Elders. It can also result in a range of ongoing health problems – including long COVID – that can last weeks, months, or even years.

How COVID-19 Spreads

COVID-19 spreads through droplets in the air when a person with the virus coughs, sneezes, speaks, sings, or breathes. It can also spread through objects someone with the virus touches, sneezes, or coughs on. The virus can enter your body when you touch these objects and then touch your mouth, nose, or eyes.



Vaccination information for Natives by Natives

Vaccines When You Are Pregnant or Breast/Chestfeeding



Pregnancy and parenthood are sacred times when we make plans to care for ourselves and our babies. Part of this preparation includes keeping up to date on our vaccines.

While getting vaccinated is always something to discuss with your health provider, there are some important things to consider if you are pregnant or breast/chestfeeding.

How to Protect Yourself

To be fully vaccinated against COVID-19, you need to complete the vaccine series and get boosted. For most people, the vaccine series consists of two shots. You get the first shot, then the second one about 25 days later. Five months after completing the vaccine series, you get boosted. We may also need additional boosters after that. Why? Booster shots contain the most up-to-date instructions for fighting against the latest versions of COVID-19.

How the Shots Work

Within our bodies, each of us has warrior cells that stand guard and attack diseases. When we get the COVID-19 shots, the ingredients tell our warrior cells how to recognize and fight COVID-19. That's why if you get the COVID-19 vaccine series and get boosted, you are less likely to get sick with COVID-19. It can also reduce the seriousness of illness if you happen to get sick.

Shot Side Effects

You may experience side effects from the COVID-19 shots. This does not mean you are getting sick with COVID-19. Most side effects are mild and go away within a few days. Mild side effects are a good sign that your warrior cells are preparing to recognize and fight COVID-19.

Common side effects of the COVID-19 shots include:

- Soreness, redness, or swelling where you got the shot
- Fatigue
- Muscle aches
- Headache
- Shortness of breath
- Sore throat

Shot Safety

Millions of Americans have safely received the COVID-19 shots. This includes American Indians and Alaska Natives. Like all vaccines in the U.S., the COVID-19 shots are monitored for safety.

“We work together, using modern and traditional medicines to help keep our tribe safe from COVID-19. I got vaccinated to protect my family, my kids, and I from COVID-19. COVID vaccines are safe, and the benefits of getting a COVID vaccine outweigh the risk of getting COVID-19 infection.”

— Dr. Frank Anishewski, M.D. (LTS), Endocrinologist, UPR Eastern Inpatient Unit Clinic, medical Director, Treaty Medicine Physician



Vaccination information for Natives by Natives

Vaccines When You Are Pregnant or Breast/Chestfeeding

Pregnancy and parenthood are sacred times when we make plans to care for ourselves and our babies. Part of this preparation includes keeping up to date on our vaccines.

While getting vaccinated is always something to discuss with your health provider, there are some important things to consider if you are pregnant or breast/chestfeeding.

How Vaccines Work

Within our bodies, each of us has warrior cells that stand guard and attack diseases. Vaccines help our warrior cells see and fight disease. For example, when we get the flu shot, the ingredients in the shot tell our warrior cells how to recognize and fight the flu. That's why if you get a flu shot, you are less likely to get sick with the flu. Getting vaccinated can also reduce the seriousness of illness if you happen to get sick.

Vaccines Protect You and Baby During Pregnancy

When you get vaccinated during pregnancy and your warrior cells learn to recognize and fight a particular illness, this information gets shared with your unborn baby. However, the protection offered to your baby starts to fade in the weeks and months after birth. That's why it's important to talk with your health provider about what vaccines both you and your newborn need to stay healthy.

Vaccines to Get When You're Pregnant

Several vaccines are recommended for pregnant people. These include:

- Tdap (whooping cough) vaccine
- Flu vaccine
- COVID-19 vaccine

Depending on your history, you and your doctor may decide that you need additional vaccines.

“As a new parent, I know that I'm not only responsible for my health, but for my baby's health too. Making sure our whole family is up to date on our vaccines gives me peace of mind that we are all doing what we can to stay healthy. I also feel like I am honoring our ancestors who did not always have access to these medicines.”

— Tame Eagle Staff, Musqueam & Ogishla Lakota, Northern Anishewski, and Northern Cheyenne, Project Manager at the Northwest Portland Area Indian Health Board



Vaccination information for Natives by Natives

Vaccines When You Are Pregnant or Breast/Chestfeeding

Pregnancy and parenthood are sacred times when we make plans to care for ourselves and our babies. Part of this preparation includes keeping up to date on our vaccines.

While getting vaccinated is always something to discuss with your health provider, there are some important things to consider if you are pregnant or breast/chestfeeding.

Vaccines and Breast/Chestfeeding

Breast/chestfeeding is one of the best ways to nourish, comfort, and connect with your baby. When you are vaccinated, breast/chestfeeding can also help you pass on important instructions for recognizing and fighting serious illnesses, like COVID-19. Likewise, getting vaccinated as a new parent makes it less likely that you will get sick and make your baby sick.

Talk with your health provider to learn what specific vaccines are recommended for you while you are breast/chestfeeding.

One of the most common questions I get asked from many new parents and parents-to-be is whether it is safe to get vaccinated. The short answer is yes! You just need to check in with your health provider.”

— Dr. Lindsay Scott, M.D., Medical Director and Treaty Medicine Tribal Member

The Choice is Yours

As you think about getting vaccinated, read up and bring any questions or concerns you have to your health provider. They can talk with you and help explain why certain vaccines are safe and effective and which vaccines you may want to temporarily avoid. They will also share other tools to keep you and your family healthy.

Where to Get Vaccinated

To get vaccinated contact your local Tribal clinic, IHS facility, or visit a local pharmacy or clinic.

Vaccinative

This handout was developed by Vaccinative – a campaign dedicated to creating accurate vaccine information for Native people by Native people. We do this by gathering info from trusted Elders, Native health professionals, and other experts.

All of our materials are reviewed by the Vaccinative Alliance, a collaboration of staff from Tribal Epidemiology Centers across the nation.

Additional Information

For additional information, check out www.IndianCountryEcho.org/Vaccinative. For questions, contact us at Vaccinative@pehlab.org.



Protecting Your Kids from Respiratory Illnesses

Respiratory illnesses like whooping cough, pertussis, flu, RSV, and COVID-19 can be extremely dangerous for kids.

Who Should Get Vaccinated

Whooping Cough (pertussis)	Babies 2 mos., 4 mos., and 6 mos. AND kids 4 yrs. and 6 yrs. old
Pneumonia	Babies 2 mos., 4 mos., and 6 mos. AND kids 2 yrs. and 4 yrs. old
RSV	Babies less than 6 mos. old AND kids 6 yrs. and older
COVID & Flu	Everyone 6 mos. and older every year

Why Buggy Buddies?

COVID-19 and flu quickly change from their look. We need updated vaccines, so our bodies know how to fight these diseases.


Vaccines are Safe

Science and studies are clear. People are more likely to get sick by ignoring their health than by getting vaccinated to stay healthy.

Don't Have Regrets

The pros of vaccines far outweigh the cons. Missing vaccines puts your child in and others at risk for serious illnesses.

Learn more www.IndianCountryEcho.org/ProtectYourKids



<https://www.indiancountryecho.org/vaccinative/>
<https://www.indiancountryecho.org/native-boost/>

Flyer and Social Media Posts from IHS



Protect the Ones We Love.

The MMR vaccine can prevent measles, mumps and rubella. Nearly all people who get the MMR vaccine are protected for life.

The MMR Vaccine

What is Measles?
Measles causes high fever, cough, runny nose, and watery, red eyes, followed by a rash. Measles spreads easily and can cause hospitalization, pneumonia, and death.

What is Mumps?
Mumps causes fever, muscle aches, tiredness, and swelling of the saliva glands in the cheek and jaw. Mumps can cause arthritis, ovary or testicle swelling, deafness, brain swelling, and, rarely, death.

What is Rubella?
Rubella may cause mild fever, sore throat, headache, and a rash. Some people have no symptoms, and women may have joint pain. Rubella is very dangerous for unborn babies and can cause miscarriage or birth defects.

Who Can Get Vaccinated?
Children need two doses of the MMR vaccine:

- First dose: 12-15 months of age
- Second dose: 4-6 years of age

Most adults need 1 or 2 doses of MMR vaccine in a lifetime, depending on risk factors.





All individuals should consult with their health care providers to understand their options to get the MMR vaccine.

Scan code for more information.





Protect the Ones We Love.

The MMR vaccine can prevent measles, mumps and rubella. Nearly all people who get the MMR vaccine are protected for life.

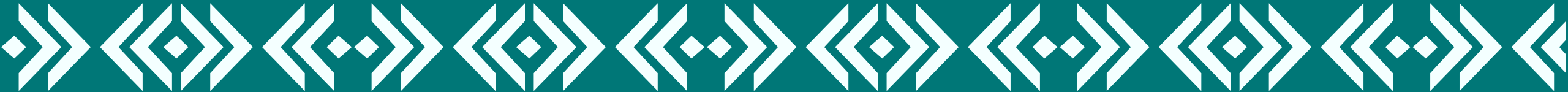


All individuals should consult with their health care providers to understand their options to get the MMR vaccine.

Scan code for more information.







Partner Updates: Washington State Department of Health



**WA DOH Office of Tribal
Public Health & Relations**

    @WaDeptHealth

**Tuesday February 03, 2026
NPAIHB Meeting**



Agenda

Immunization Updates

OTPHR Updates

Contact Info & Closing



Office of Immunization



DOH Office of Immunization Update
February 3, 2026

WCHA Endorses the 2026 AAP Child and Adolescent Immunization Schedule

The West Coast Health Alliance (WCHA) endorses the [2026 American Academy of Pediatrics \(AAP\) Recommended Child and Adolescent Immunization Schedule](#), as do professional medical and health organizations representing more than one million health care providers, reflecting a broad consensus on the safety and benefits of the recommended immunizations.

The AAP issued the annual update to its [Recommended Child and Adolescent Immunization Schedule for 2026](#), based on a thorough and deliberate review of medical evidence.

➤ [Read the WCHA news release](#)

“The AAP’s evidence-based immunization schedule reflects decades of research demonstrating that vaccines are safe, effective, and lifesaving,” said Dennis Worsham, Washington State Secretary of Health.

“In Washington, our commitment to protecting children’s health through public health practices grounded in the best available science remains unwavering. We strongly encourage families to keep their children up to date on all AAP recommended vaccinations and to talk with their trusted healthcare providers if they have questions.”



Interim Pediatric Measles Outbreak Vaccination Recommendations

For children who live in or visit counties with active measles outbreaks*

*Currently only Snohomish County. Refer to the [DOH Measles Cases](#) page for the latest outbreak information. This interim guidance may be updated in the future based on local epidemiology.

Age	Number of Previous Doses	Measles vaccine recommendation	Any change from routine recommendations ?
0–5 months	0	Measles-containing vaccine is NOT recommended	No
6–11 months	0	Measles-containing vaccine is not routinely recommended unless otherwise indicated due to planned international travel or to an area outside of Washington State where it is recommended by public health because of an active measles outbreak NOTE: At this time, Washington State Department of Health is NOT recommending MMR prior to 12 months of age despite an active measles outbreak in Snohomish County	No
1–17 years	0	Should receive first dose of MMR or MMRV immediately	No
	1	Should receive second dose of MMR or MMRV as soon as eligible: <ul style="list-style-type: none">• If first dose was MMR, receive second MMR or MMRV dose at least 28 days later• If first dose was MMRV, receive MMR at least 28 days later or MMRV at least 3 months later	Yes, emphasize receipt of second dose as soon as eligible (e.g., earlier than 4 years of age)
	2	No additional doses needed	No

Interim Pediatric Measles Outbreak Vaccination Recommendations

- For children who do not live in or visit regions with an active measles outbreak, a second dose of measles containing vaccine may be considered before 4–6 years of age.
 - If the first dose was MMR, the second dose should be given at least 28 days later.
 - If the first dose was MMRV, the second dose should be given at least 3 months later.
- Adults are advised to follow the Adult Vaccine Schedule for MMR.
- Bookmark:
 - [Routine measles vaccine recommendations, including for adults.](#)
 - [Interim pediatric measles outbreak vaccine recommendations](#)

Disclaimer: Health Officers have the authority to make vaccine recommendations for their jurisdictions. This guidance does not supersede vaccine recommendations or decisions made by Tribal governments or Local Health Jurisdiction Health Officers.

VAC Recruitment: Child Care Representative

The Vaccine Advisory Committee (VAC) is seeking a member with child care or early learning experience to bring real-world insight into how immunization policies impact child care and early learning entities.

This perspective is essential to advancing equitable vaccine strategies for young children.

The Department of Health strongly encourages applicants with experience serving rural or underserved communities, especially those east of the Cascades or from regions not currently represented.

These voices are critical to ensuring VAC recommendations reflect Washington's full geographic and community diversity.



Click for more details:

[VAC Childcare Recruitment 2026.](#)

Visit the [VAC web page.](#)

Recruitment open until Feb 18.

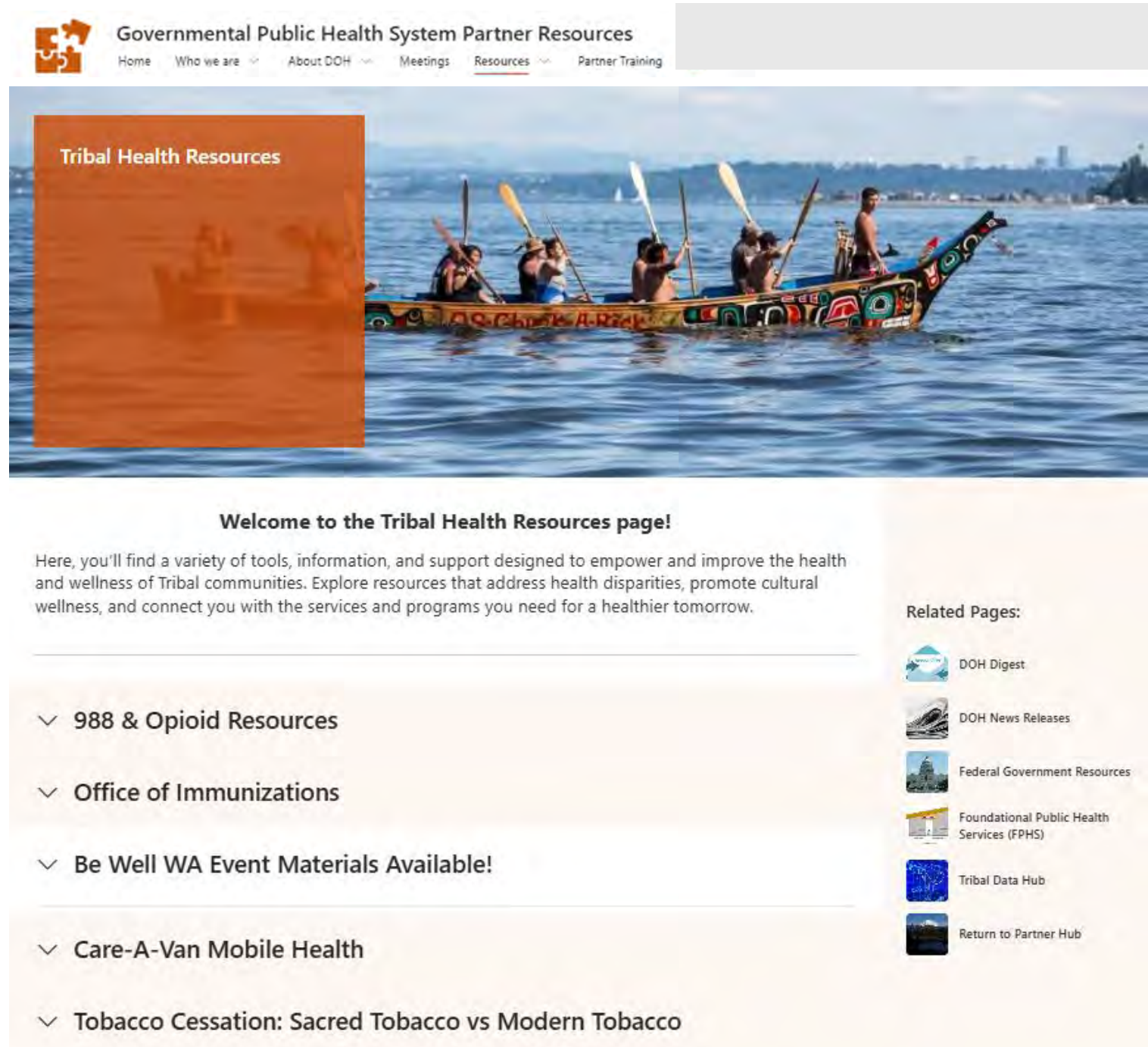
Measles Resources

Bookmark these resources:

- [Tribal Health Resources – PartnerHub](#)
- [“You & Your Family” measles webpage](#)
- [Measles Cases in Washington State | Washington State Department of Health](#)
- [Washington State Public Measles Exposure Location Tracker](#)
- [Measles | Washington State Department of Health](#)
- [Measles Communications Toolkit for WA State Partners](#)
- [Measles Immunization Response Guide](#)
- [MMR Vaccine FAQ | Washington State Department of Health](#)

For Office of Immunization Updates

- Please visit the [Tribal Resources PartnerHub](#) page for the latest Office of Immunization updates and newsletters.
- If you would like to be added to the OI Liaison email list and PartnerHub, please email jessica.haag@doh.wa.gov



The screenshot shows the 'Tribal Health Resources' page. At the top is a navigation bar with the title 'Governmental Public Health System Partner Resources' and links for Home, Who we are, About DOH, Meetings, Resources (underlined), and Partner Training. Below the navigation bar is a large banner image of a colorful canoe with several people paddling on a body of water. Overlaid on the left side of the banner is an orange rectangle with the text 'Tribal Health Resources'. Below the banner, the page has a heading 'Welcome to the Tribal Health Resources page!' followed by a paragraph: 'Here, you'll find a variety of tools, information, and support designed to empower and improve the health and wellness of Tribal communities. Explore resources that address health disparities, promote cultural wellness, and connect you with the services and programs you need for a healthier tomorrow.' Below this is a list of resources with expandable arrows: '988 & Opioid Resources', 'Office of Immunizations', 'Be Well WA Event Materials Available!', 'Care-A-Van Mobile Health', and 'Tobacco Cessation: Sacred Tobacco vs Modern Tobacco'. On the right side, there is a 'Related Pages:' section with links to 'DOH Digest', 'DOH News Releases', 'Federal Government Resources', 'Foundational Public Health Services (FPHS)', 'Tribal Data Hub', and 'Return to Partner Hub', each accompanied by a small icon.

Governmental Public Health System Partner Resources

Home Who we are About DOH Meetings Resources Partner Training

Tribal Health Resources

Welcome to the Tribal Health Resources page!

Here, you'll find a variety of tools, information, and support designed to empower and improve the health and wellness of Tribal communities. Explore resources that address health disparities, promote cultural wellness, and connect you with the services and programs you need for a healthier tomorrow.

988 & Opioid Resources

Office of Immunizations

Be Well WA Event Materials Available!

Care-A-Van Mobile Health

Tobacco Cessation: Sacred Tobacco vs Modern Tobacco

Related Pages:

DOH Digest

DOH News Releases

Federal Government Resources

Foundational Public Health Services (FPHS)

Tribal Data Hub

Return to Partner Hub

Jessica Haag, MPH, CHES

Immunization Liaison and Vaccine Equity Coordinator

Office of Immunization

Washington State Department of Health

jessica.haag@doh.wa.gov

(564) 233-9027



OTPHR Updates

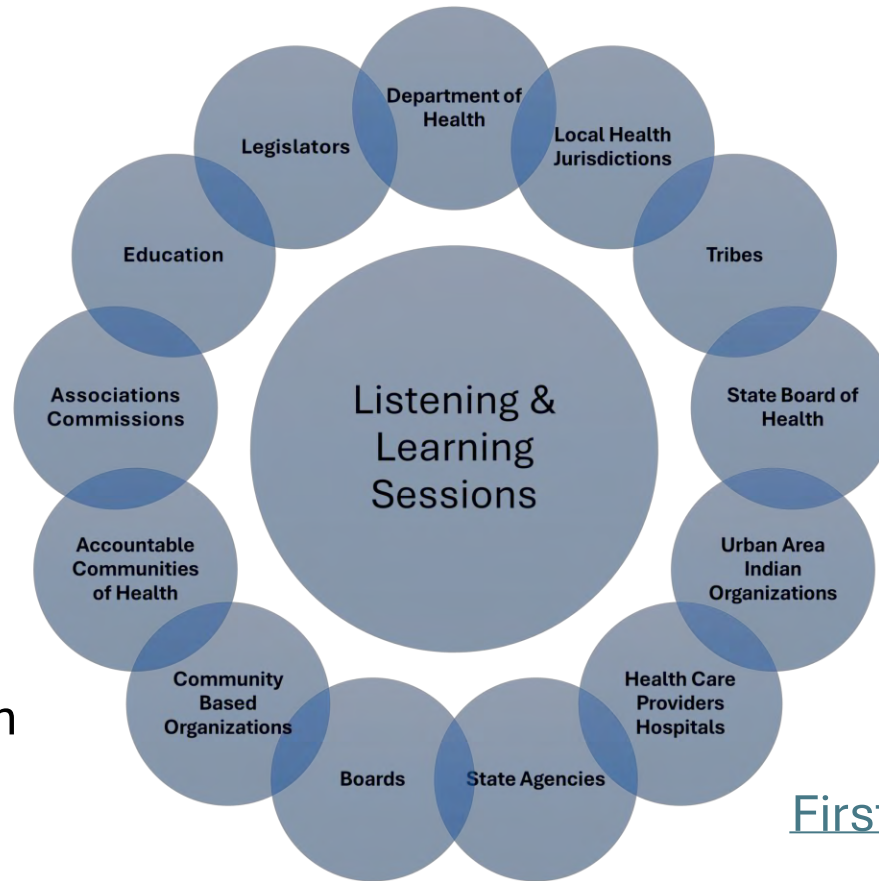


Upcoming DOH Monthly Tribal Meeting



Key Topics:

- Healthcare
- Public Health System
- Workforce/Capacity
- System Planning
- Health Justice
- Data Sharing



Secretary Dennis Worsham's
First 100-Day Listening and Learning Tour
– Key Themes & Next Steps

Wednesday, February 11, 10:30am-12pm

Dear Tribal Leader

Date	Letter Subject	Meeting Information
January 20	Collaborative – considering rulemaking on private detention facilities for juveniles (PDF)	Listening session: 2:30-4:30 p.m. February 12 - Zoom link
January 20	Informative – information on agency rulemaking for January 1-15, 2026 (PDF)	
January 8	Informative – corrected code reviser filing for December 16-31, 2025 (PDF)	
January 5	Informative – information on agency rulemaking for December 16-31, 2025 (PDF)	
December 26	Informative – 988 contact hub designation (PDF)	
December 18	Informative – information on agency rulemaking for December 1-15, 2025 (PDF)	
December 11	Collaborative – DOH and Executive Order 25-20, A New Foundation for Washington State’s Governmental Relations With Sovereign Tribal Nations (PDF)	<ul style="list-style-type: none"> • Listening session 1: 10-11:30 a.m. January 22 - Zoom link • Listening session 2: 9-10:30 a.m. February 3 - Zoom link



HEAL Tribal Capacity grant

Purpose: The Healthy Environment for All (HEAL) Tribal Capacity grant is a non-competitive grant program to provide funds to Tribes that may support activities including but not limited to building capacity to provide guidance and input to agencies' implementation of HEAL Act work, the [Environmental Justice Council](#), and/or the [Environmental Health Disparities map](#).

Funding per Grantee: \$45,454 per Tribe; non-competitive funding distribution

Eligible Applicants: Federally Recognized Tribes with impacts to rights and interests to their tribal lands that are within Washington State boundaries (RCW [70A.65.305](#))

Application Materials and Resources: The application to apply can be found on our website: [Environmental Justice and Climate Change Grants for Tribes | Washington State Department of Health](#)

Number of Tribes applied so far: 4

Dear Tribal Leader Letter: [Environment Justice Grants Listening Sessions Follow Up](#)

Activity	Date
Application release	October 3, 2025
Application deadline	June 30, 2026
Funding Period	Date of execution – June 30, 2027

Contact: Rachele Hurt (Spokane)
Tribal Relations Strategist
rachele.hurt@doh.wa.gov
(564) 233- 5170

Workplace Safety for Workers Affected by Climate Change grant

Purpose: The Workplace Safety for Workers Affected by Climate Change grant program is intended to benefit outdoor workers affected by changes to our climate, including but not limited to extreme heat and cold, wildfire smoke, drought, and flooding. Funding may be used to 1) support workplace health and safety for workers who are burdened by the intersection of their work and climate impacts, and/or 2) procure supplies that benefit outdoor workers who are affected by climate impacts in the work and cover distribution costs of supplies/resources.

Funding per Grantee: \$15,151

Eligible Applicants: Federally Recognized Tribes with impacts to rights and interests to their tribal lands that are within Washington State boundaries (RCW [70A.65.305](#))

Application Materials and Resources: The application to apply can be found on our website: [Environmental Justice and Climate Change Grants for Tribes | Washington State Department of Health](#)

Number of Tribes applied so far: 7

Dear Tribal Leader Letter: [Environment Justice Grants Listening Sessions Follow Up](#)

Activity	Date
Application release	October 3, 2025
Application deadline	June 30, 2026
Funding Period	Date of execution - June 30, 2027

Contact: Rachele Hurt (Spokane)
Tribal Relations Strategist
rachele.hurt@doh.wa.gov
(564) 233- 5170



Rosalinda Fivekiller, MPA

hCWY, Citizen of Cherokee Nation

Tribal Engagement Director

Office of Tribal Public Health & Relations (OTPHR)

Executive Office of Government and Community
Affairs (OGCA)

Washington State Department of Health

Rosalinda.Fivekiller@doh.wa.gov

(564) 669-9498 | www.doh.wa.gov

[Book time to meet with me](#)



OTPHR



Washington State Department of
HEALTH

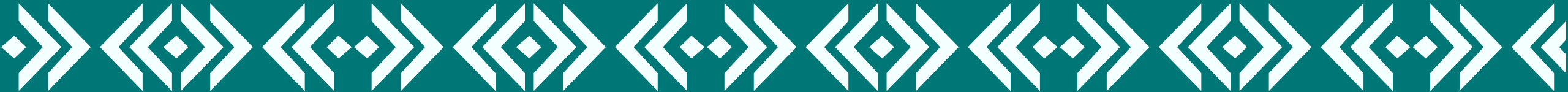
Office of Tribal Public Health & Relations

OTPHR@doh.wa.gov

Candice Wilson Quatz'tenaut – Lummi	Jill Edgin	Amber Arndt Nisqually	Rosalinda Fivekiller-Turk Cherokee	Susan Glenn	Lois Scott
Executive Director candice.wilson@doh.wa.gov 360.819.7626	Deputy Director jill.edgin@doh.wa.gov	Tribal Policy Director amber.arndt@doh.wa.gov	Tribal Engagement Director rosalinda.fivekiller@doh.wa.gov ov	Tribal Public Health Systems Specialist susan.glenn@doh.wa.gov	Administrative Assistant 5 lois.scott@doh.wa.gov



To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email civil.rights@doh.wa.gov.



Partner Updates: Oregon Health Authority

The Oregon Office of Rural Health (ORH) has funding available to support a limited number of Community Health Worker (CHW) scholarships for Northeast Oregon Network's ([NEON's](#)) *Essential Skills of Supervision* program.

If you're interested in receiving a scholarship, you may [apply](#) for any of the modules listed below. Modules may be taken individually - you do not need to complete earlier modules to enroll in later ones. All modules are completely virtual.

Module 1 – Supervision Models 101 (Waitlist)

Module 2 – Trauma-Informed and Culturally Responsive Supervision (Waitlist)

Module 3: Recruitment, Hiring, and Orientation

Module 4: Performance Management and Feedback

Module 5: Boundaries and Ethics in the Field

Module 6: Supervisory Self-Care and Navigating Challenging Systems

See [next page](#) for scholarship eligibility and more details.

Full list of session dates and times (February – April 2026) can be found on the application site at:

ohsu.ca1.qualtrics.com/jfe/form/SV_6QfDBehC39UapTg

Email Stepha Dragoon for more info: dragoon@ohsu.edu

Oregon Office of Rural Health (ORH) Community Health Worker (CHW) Scholarships for NEON's *Essential Skills of Supervision* program

This training is offered **free of charge** (a \$200–\$400 value per seat), scholarships provided by the Oregon Office of Rural Health through funding received from the Oregon Health Authority.

Scholarships are available on a **first-come, first-served** basis. After you apply, ORH will notify you if you secured a scholarship.

Scholarship Eligibility:

- You must be able to attend all sessions that you enroll in.
- You must be located in rural Oregon, as defined by the Federal Office of Rural Health Policy (you can confirm eligibility using the [Am I Rural? Tool](#)).
- You must be a certified Community Health Worker, a supervisor to a CHW, or a soon-to-be CHW supervisor
- These eligibility requirements apply to the scholarship only – the program itself is open to anyone who meets the general eligibility

Apply at: ohsu.ca1.qualtrics.com/jfe/form/SV_6QfDBehC39UapTg

Email Stepha Dragoon for more info: dragoon@ohsu.edu

Other Updates and Resources Shared by Oregon Health Authority

Oregon Community Health Workers Association (ORCHWA) Training
www.orchwa.org/training-and-services

ORCHWA CHW Spotlight Nomination Form
docs.google.com/forms/d/e/1FAIpQLSfEr1Zcf6kzZR3yE3yzH8S7CSDcHPTvVINUXRitYPV8Ksw1LQ/viewform

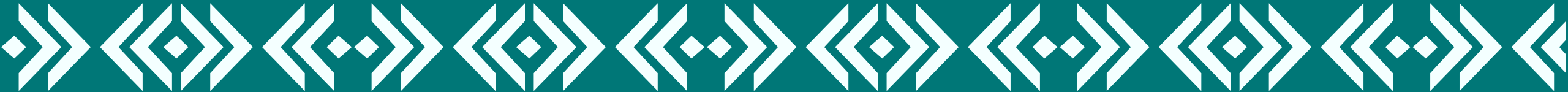
Multco CHW Training (60 hours) - Mondays and Wednesdays, March 23 through April 15
forms.cloud.microsoft/pages/responsepage.aspx?id=LN5KKupnx064Dvtgr5mPbBwfh1aCzGFDhLMGK8NxENxUQUkwTkQxUjFUNFJaMjBLUU5HSUYwRIY1Ty4u&route=shorturl

For Traditional Health Workers registered in the OHA portal

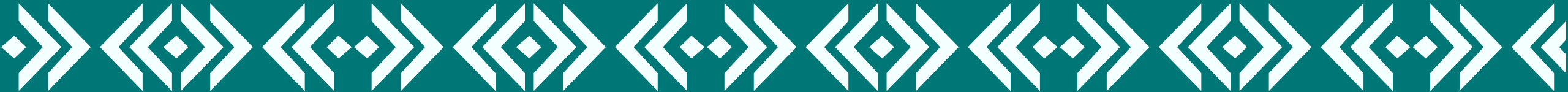
Multco Youth Committee - Applications open through February 8
www.oregonmetro.gov/opportunities/join-future-vision-youth-committee

Youth with unique lived experiences, who come from various cultural backgrounds, whether born in Oregon or moved here with family, who live with a disability, or who navigate intersecting identities are encouraged to apply.

For more information, contact Kendi Oldshield at kendi.oldshield@oha.oregon.gov



Discussion, Questions & Comments



Northwest Tribal Public Health Gathering Proposed for Fall 2026

*Growing & Strengthening Tribal Public Health
Systems*

What would be most helpful to Northwest Tribes?

Send us your ideas and suggestions: