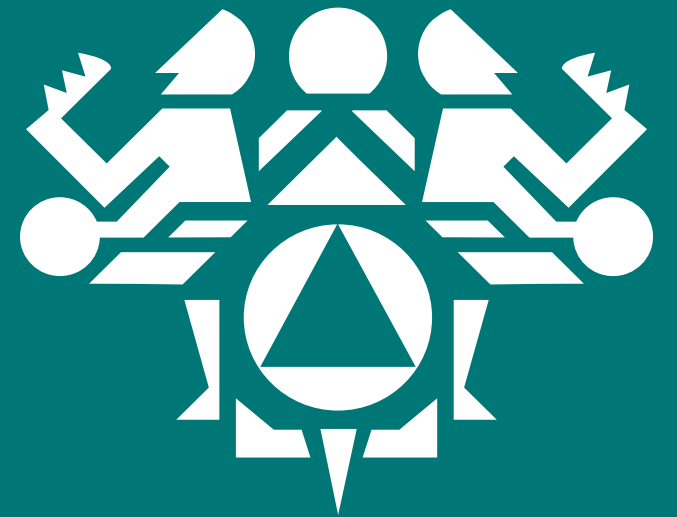


NPAIHB

Weekly Update

July 14, 2026





NORTHWEST PORTLAND AREA
INDIAN HEALTH BOARD
Indian Leadership for Indian Health

Agenda

- Welcome & Introduction: Bridget Canniff
- NPAIHB Announcements, Events, & Resources
- N CREW Research Topic – Grant Writing 101:
Dr. Victoria Warren-Mears & Hannah Throssell, NWTEC / NWRRC
- Communicable Disease Updates: Dr. Tara Perti, PAIHS
- Questions & Comments

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

Upcoming Indian Country ECHO Telehealth Opportunities

- **Hepatitis C ECHO** – 1st, 3rd & 4th Wednesday of every month at 11am PT
 - Wednesday, July 15th at 11am PT
 - Didactic Topic: *Hep C Elimination at 12 Clans Unity Hospital*
 - To join via Zoom: <https://echo.zoom.us/j/537117924?pwd=OEExbERmK2pSUFFsMzV1SmVpb3g3dz09>
- **Month in Virology ECHO** – 3rd Wednesday of every month at 12pm PT
 - Wednesday, July 15th at 12pm PT
 - Didactic Topic: *Month in Virology – Focusing on RSV, Measles & Other Emerging Topics*
 - To join via Zoom: <https://echo.zoom.us/j/807187455?pwd=cG1rcGhMVGtnTGdqSDhKMIhGVFI2QT09>
- **Infectious Disease ECHO** – 3rd Thursday of every month at 11am PT
 - Thursday, July 16th at 11am PT
 - Didactic Topic: *Test and Treat: HCV, HIV, Syphilis*
 - To join via Zoom: <https://echo.zoom.us/j/97240849538?pwd=TzJUMWo5M082K1kxMitOV2diY3BaQT09>
- **EMS ECHO** - 1st Tuesday & 3rd Thursday of every month at 5pm PT
 - Thursday, July 17th at 5pm PT
 - Didactic Topic: *Hazmat Exposure and EMS Considerations*
 - To Join via Zoom: <https://echo.zoom.us/j/84832881641?pwd=SXllNlplJa0Vta1R1c28xcUh5V1dlUT09>

Upcoming Indian Country ECHO Telehealth Opportunities

- **emRIC ECHO** – 3rd Monday of every month at 8:30am PT
 - Monday, July 20th at 8:30am PT
 - Didactic Topic: *Updates in the Prehospital Care of Pediatric and Adult Obstructive Lung Disease*
 - To join via Zoom: <https://echo.zoom.us/j/89810907975?pwd=d1gydTAvdFUxSU4wb1d2TINEUTIEQT09>
- **Cardiology ECHO** – 3rd Monday of every month at 11am PT
 - Monday, July 20th at 11am PT
 - Didactic Topic: *Supraventricular Tachycardia*
 - To join via Zoom: <https://echo.zoom.us/j/81476475100?pwd=ZnBsK2xmYnFYRW9tUVdxWDROeWtMQT09>
- **Community Health Representatives (CHR) ECHO** – 3rd Monday of every month at 12pm
 - Monday, July 20th at 12pm PT
 - Didactic Topic: *Trauma-Informed Care for CHRs*
 - To join via Zoom: <https://echo.zoom.us/j/85861655901?pwd=0em1G52lvvVpniHVPOoGwp1hDlPjpo.1>

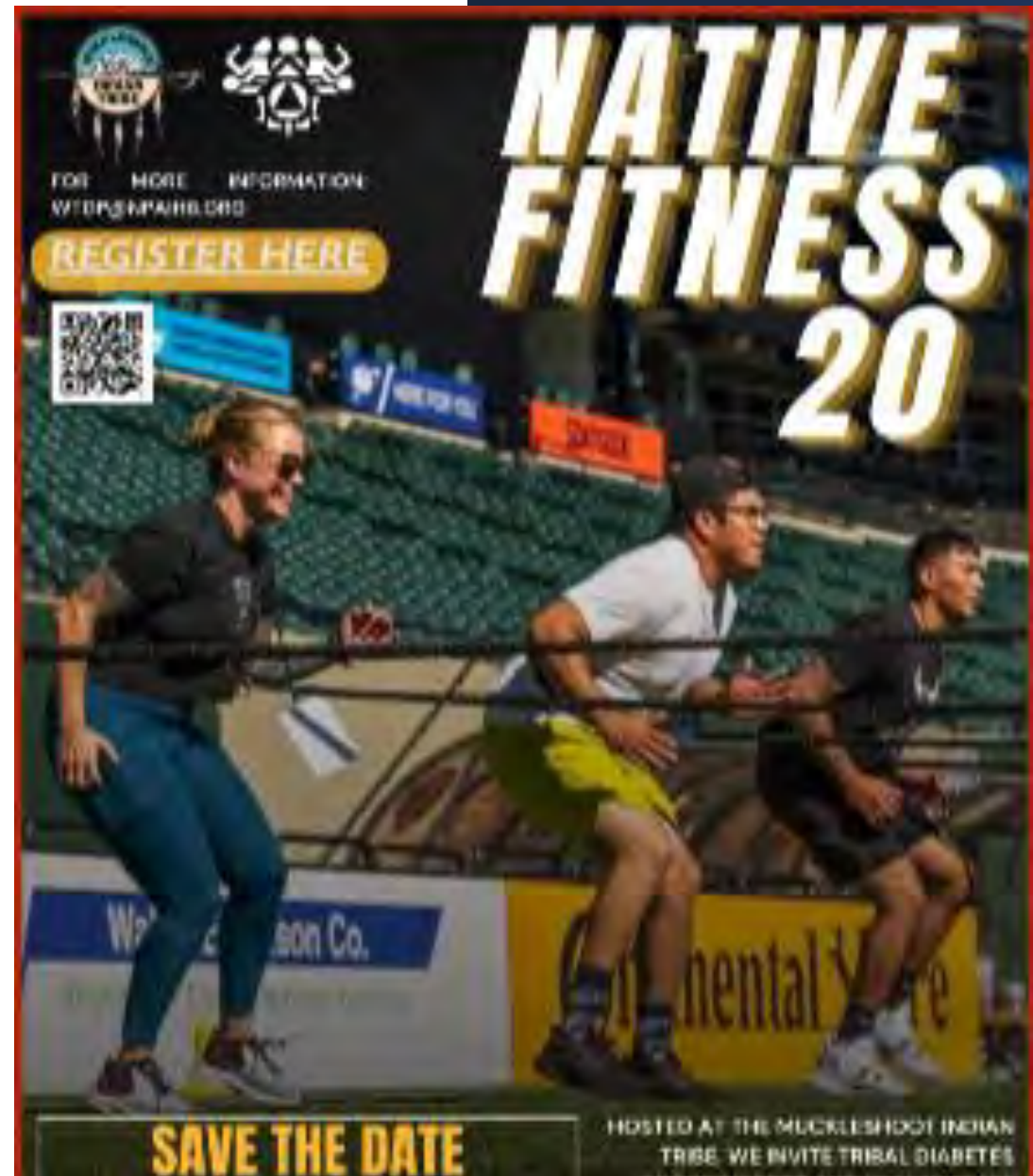
NATIVE FITNESS 20

August 4-5, 2026

Muckleshoot Indian Tribe
Auburn, WA

Registration:

www.surveymonkey.com/r/NativeFitness20



Indian Country Ending the Syndemic Training Registration (August 2026)

Staff serving Alaska Native & American Indian people are invited to participate in the Ending the Syndemic ECHO program. The program provides comprehensive information to effectively address the evolving HCV, SUD, HIV, and Syphilis syndemic. The program offers a free 2-day in-person training with both a Clinical Track, a Community Health Professionals Track & subsequent telehealth clinics.

Agenda: [To view the draft agenda, click here.](#)

The Indigenous Syndemic Pathway for **Clinicians** track will provide an overview and present implementation options, and where requested, assist with implementation. The training is not only informational—technical and other support needed to put policy and practice into place is available and encouraged. Continuing Education will be provided.

The Indigenous Syndemic Pathway for **Community Health Professionals** (CHPs) track is designed to equip CHPs with the knowledge, confidence, and tools to respond to syndemic topics that can be hard to talk about with relatives. These sessions will cover individual diseases and broader topics. Many of these presentations will include group discussion and interaction. This track is focused to provide training for Community Health Representatives, Health Aides, Peer Navigators, Social Workers, and Case Managers.



Dates: August 11th (8am-5pm PT) and August 12th (8am-4:30pm PT)

Where: Fordson Hotel, 900 W Main St, Oklahoma City, OK 73106 (Hosted by the Southern Plains Tribal Health Board) & Virtually via Zoom

How to Join: [Click here to register](#)



Canoe Journey in the Pacific Northwest is a hopeful, resilient time for youth, families, and communities. 🌊

The Healing of the Canoe is a culturally grounded curriculum for Native youth that builds connections to culture and community. 📖

Learn more about the curriculum that focuses on life skills on the Healthy Native Youth Website.



healthynativeyouth.npaihb.org

healingofthecanoe.org

NPAIHB Weekly Update Schedule

- July 21: NO UPDATE - NPAIHB QBM
- July 28: TBD
- August 4: State Partner Updates, Communicable Disease Updates
- August 11: TBD



Grant Writing 101

Victoria Warren-Mears, PhD, RDN, FAND
Director, Northwest Tribal Epidemiology Center
N CREW Principal Investigator (PI)

Hannah Throssell, MSW
Senior Research Manager



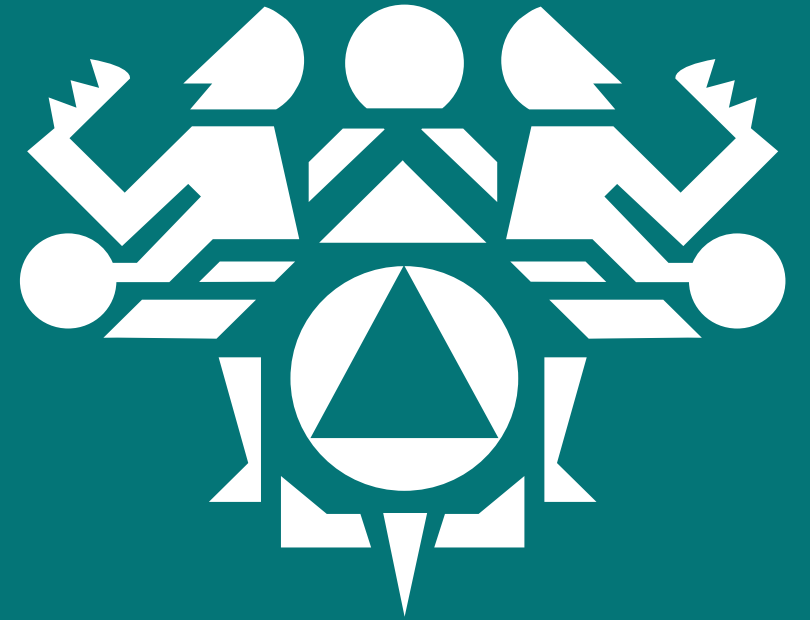


Agenda

- Grant Basics
- Grant Writing Approach
- Grant Management



Grant Writing Basics



Important Topics We Won't Cover Today

- What is Grants.gov?
- Navigating Institutional Review Boards (IRB)
 - The Different Types
 - How they may vary i.e., Tribal, IHS, Universities, etc.
- Negotiated Indirect Rates
 - These vary across institutions

What Are Grants?

Grants are financial awards designed to achieve specific goals or purposes.



Who Provides Grant Funding?





The current grants environment

Moving Forward

- Once you've found a funding opportunity that matches with your goals and programmatic goals, its time to prepare your grant application.
- Crafting grant proposals can be challenging. There are a lot of moving pieces and usually multiple people who need to be involved.
- Getting organized, creating a plan, and drafting a realistic timeline are essential elements of the process.

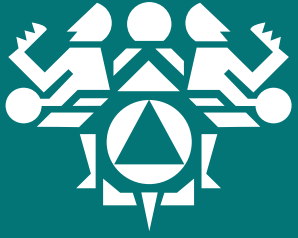


Start as Early as Possible

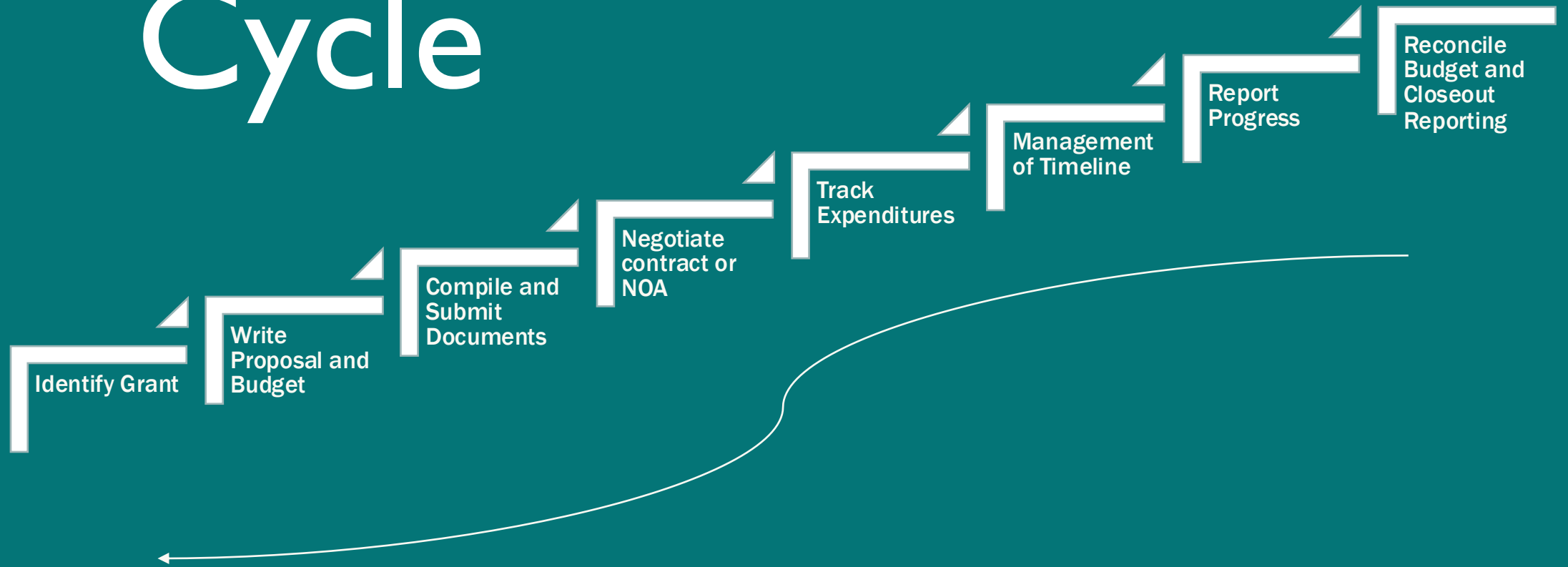
With the new guidance and 30-day proposed turn around, you may want to write ahead and have grants prepared around needs and strategic initiatives.

Gather your team:

- Subject Matter Experts
- Grant Writer
- Financial Team



Grant Management Cycle





Grant Writing Strategies





Budget Writing and Justification

- Create a spreadsheet to work in
- Salaries
- Fringe benefits
- Supplies (allowed and what isn't allowed)
- Equipment
- Travel
- Indirect cost rate (de minimis vs. negotiated)



Review Criteria

There will be a list in the grant that tells you how the grant will be scored

- Read this part carefully
- Write your grant to make sure you include the points reviewers are looking for

Significance – Is this an important problem or project? How will the research advance science or services?

Investigators – Expertise, training and accomplishments

Innovation – Challenges or advances current research or program practice

Approach – Strong strategy, methods, analysis, anticipate problems, and address risk

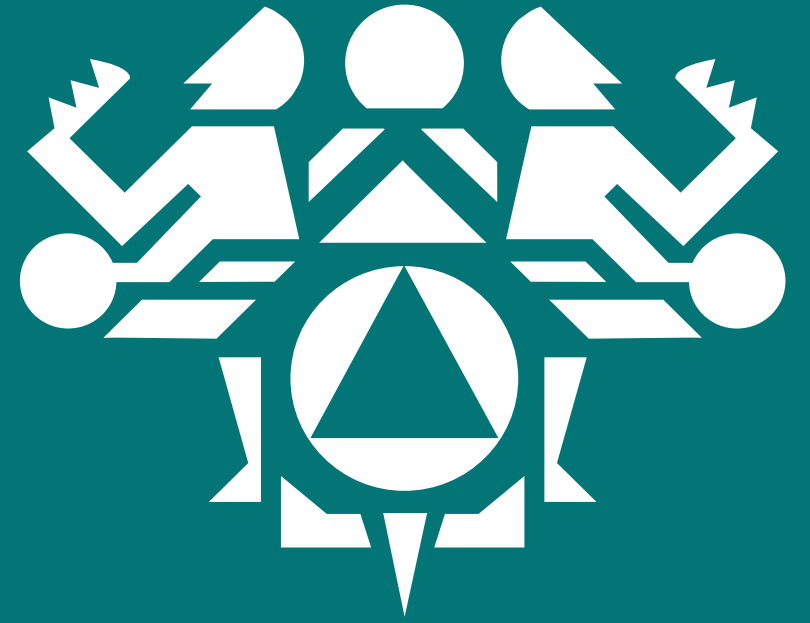


Abstract

- This will be the last thing to write
- Generally, has to be understood by lay people
- Using common language to describe your proposed project



Questions?



Portland Area IHS

Communicable Diseases Update

TARA PERTI, MD, MPH
MEDICAL EPIDEMIOLOGIST
OFFICE, PORTLAND AREA IHS
July 14, 2026



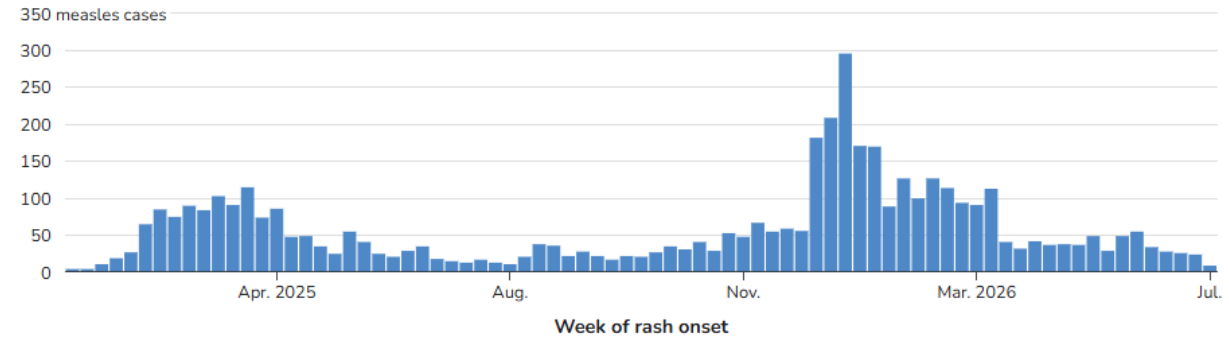
Outline

- Measles
- New World Screwworm
- Cyclosporiasis
- Resources for Heat Preparedness
- In the News: Bundibugyo Virus Disease Updates

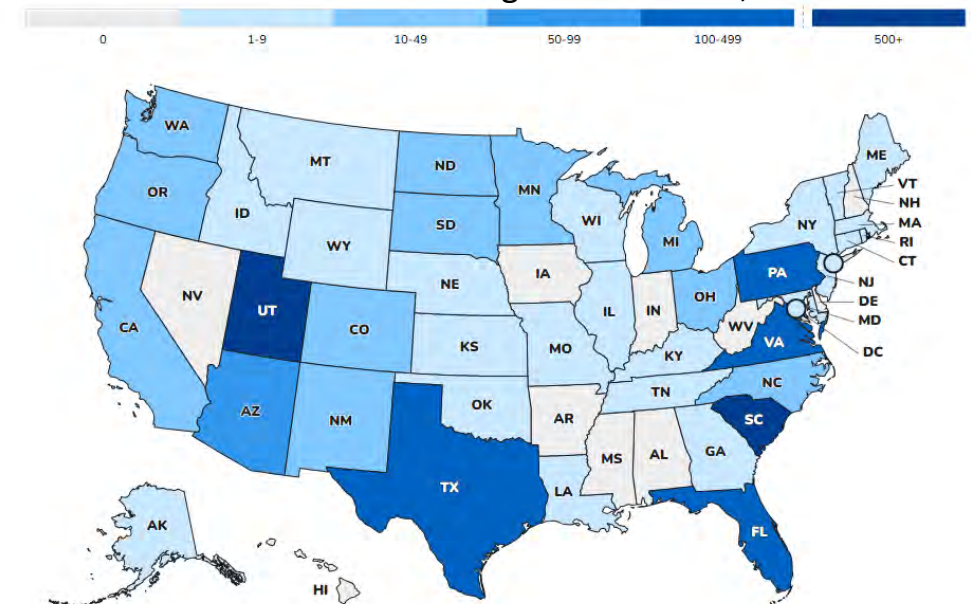
Measles — United States, 2026

- 2,231 confirmed cases among 42 jurisdictions (including NYC, NY state, and D.C.) during 2026 as of 7/9. 97% of 2,289 total cases for 2025.
- 93% of cases are outbreak-associated (≥ 3 related cases).
- Age: 20% <5 years-old, 50% 5-19 years-old, 29% ≥ 20 years-old.
- 6% 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).
- 93% unvaccinated or with unknown vaccination status, 4% one MMR dose, 4% two MMR doses.

Weekly Measles Cases — United States, 2025-26



Measles Cases Among U.S. Residents, 2026



Measles — Oregon, 2026 (N=27)

- Cases this year have occurred at least in Clackamas, Multnomah, Marion, and Linn Counties with an outbreak involving non-household contacts in Clackamas and Multnomah counties.
- There have now been 27 cases reported this year in Oregon.
- Recent possible public exposure locations in Multnomah and Clackamas Counties:
 - 7/9 (7:42-10:22 AM): Providence Immediate Care—Happy Valley
 - 7/10 (12:18-5:56 AM) and 7/11 (10:04 AM-2:57 PM): Providence Willamette Falls Medical Center Emergency Department in Oregon City
 - 7/11 (1:39-4:57 PM) and 7/12 (7:32-9:46 PM): Providence Portland Medical Center Emergency Department, 4805 NE Glisan St
- Anyone at one of these locations should monitor for symptoms through 8/2/26. For more information:
<https://www.oregon.gov/oha/ERD/Pages/Three-Providence-locations-become-latest-measles-exposure-sites-07.13.2026.aspx>
- Latest case with symptom onset during the week of 7/5/26.
- There has been Measles virus detected in wastewater during 6 week period from 5/24/26-7/4/26:
 - Douglas, Deschutes, Washington, Marion, Yamhill, Lane, Coos, Columbia, Umatilla, Linn, Lincoln, Clatsop, Multnomah, Clackamas, Jackson, Josephine, and Polk Counties.
- 96% of cases in Oregon unvaccinated or with unknown vaccination status.

Measles — Portland Area, 2025-26

Location (State/County)	Number of Cases		Additional Cases (e.g. Among Travelers)
	2025 (N=26)	2026 (N=82)	
Washington	Total: 12	Total: 45	9 additional cases among travelers to Washington (King and Snohomish Counties) in 2025. 2 travelers in 2026 (King).
Snohomish	2	14	
Clark		8	
Kittitas		7	
Walla Walla		7	
Stevens		3	
King	7	3	
Grant		2	
Spokane	1	1	
Whatcom	2		
Oregon	Total: 1	Total: 27	2 additional cases among travelers to Idaho (Bonneville and Cassia Counties) in 2025. 1 case in a traveler in 2026.
Idaho	Total: 13	Total: 10	
Canyon (Southwest District Health		6	
Madison (Eastern Idaho Public Health)		3	
Kootenai (Panhandle Health District)	1	1	
Boundary (Panhandle Health District)	6		
Bonneville (Eastern Idaho Public Health)	5		
Bonner (Panhandle Health District)	1		

Summary: Measles

- 2,231 confirmed cases among 42 jurisdictions during 2026 as of 7/9, 97% of cases during 2025. 93% of cases unvaccinated or with unknown vaccination status.
- Portland Area: Washington: 45 cases (stable); Oregon: 27 cases (increasing), Idaho: 10 cases (stable).
- $\geq 95\%$ vaccine coverage is needed to prevent measles outbreaks in communities.
- In 2024-25, MMR coverage among kindergartners continued to decline. Washington: 90.9% (90.6% for 2025-26) , Oregon: 90.5% (89.6% for 2025-26), and Idaho: 78.5%. Idaho and Oregon have the highest and 2nd highest exemption rates in the country.

Recommendations

- Ensure your patients, families, and community are up to date on their measles immunizations (goal $\geq 95\%$ up to date).
- Ensure all health care workers have presumptive evidence of measles immunity and that Respirator Fit Testing has been done in the past year.
- Consider measles in anyone with a fever and generalized maculopapular rash with recent international travel or travel to an area with a measles outbreak, exposure to a measles case, or who meets clinical criteria and is unvaccinated. Recommend testing performed in collaboration with local health jurisdiction.
- Train staff (e.g. Project Firstline: Measles Infection Control Microlearn with discussion guide), including front-desk to recognize possible measles, immediately mask and bring back to a designated room (e.g. airborne infection isolation room if available).
- If a measles case is identified in your community, recommend 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).
- Immediately report suspected cases to local or Tribal public health and recommend testing performed in collaboration (nasopharyngeal or throat swab for measles PCR, urine for PCR particularly if ≥ 72 hrs after rash onset, sent to state PHL if possible; blood for measles IgM and IgG sent to a commercial laboratory).
- Advise patients with suspected measles to isolate at home, away from others through 4 days after rash onset (for severely immunocompromised persons, the infectious period is through the illness duration) or measles has been ruled out.

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](#)

National Council of Urban Indian Health

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

Indian Country ECHO/UNM Project ECHO: [Making a Strong Vaccine Recommendation: Vaccine Communication](#), [MMR Vaccine Outreach Strategies](#), [Current Measles Response](#) and [Clinical and Prevention Best Practices](#)

American Academy of Pediatrics: [Recommended Child and Adolescent Immunization Schedule](#), <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. [Maternal Immunization Schedule](#)

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](#)); [Vaccines and Infectious Diseases in the News](#)

Immunize.org: [Clinical Resources A-Z](#); [Influenza \(Flu\)](#)

Boost Oregon: [Videos and Resources](#)

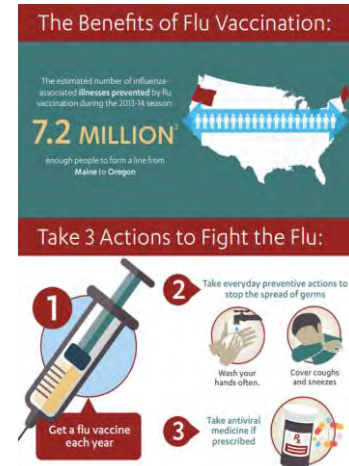
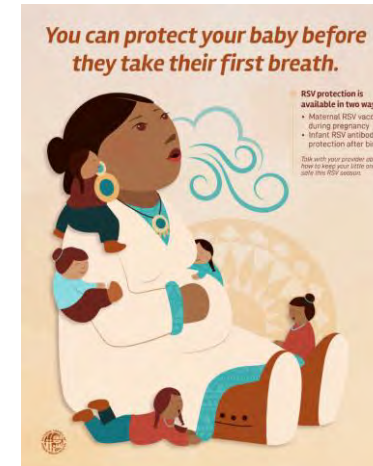
Personal Testimonies: [Families Fighting Flu: Our Stories](#)

Washington State Department of Health: [Immunizations and Vaccines](#) | [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](#); [Measles](#) | [Washington State Department of Health](#); [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](#); [Respiratory Illness Data Dashboard](#).

Oregon Health Authority: [Immunization Resources](#); [Flu Prevention](#); [Measles / Rubeola \(vaccine-preventable\)](#) : [Diseases A to Z](#) : [State of Oregon](#); [Oregon's Respiratory Virus Data](#).

Idaho Department of Health & Welfare: [Child and Adolescent Immunization](#) and [Adult Immunization](#); [Flu \(Seasonal and Pandemic\)](#); [COVID-19](#); [Measles](#) | [Idaho Department of Health and Welfare](#); [Idaho Weekly Statewide Viral Respiratory Disease Indicators](#).

Centers for Disease Control and Prevention: [Preventing Seasonal Flu](#); [Flu Resources](#); [Preventing Spread of Respiratory Viruses When You're Sick](#); [RSV](#); [About Measles](#) | [Measles \(Rubeola\)](#) | [CDC](#); [Measles Resources](#) | [Measles \(Rubeola\)](#) | [CDC](#); [Measles Videos](#) | [Measles \(Rubeola\)](#) | [CDC](#)



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 Elders 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 Elders 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 Schandeline, 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.

Who Should Get Vaccinated

Generally, anyone 6 months and older should get vaccinated against COVID-19, including pregnant people. For more information, talk to your provider.

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 project 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, including info on long COVID, check out www.IndianCountryEcho.org/Vaccinative. For questions, contact us at Vaccinative@npaihb.org.

“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 tribe, 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 Anishewich, M.D. (LTS), Endocrinologist, UPR Eastern Inpatient Unit Clinic, medical Director, Treaty Medicine Physician

Common Side Effects of the COVID-19 Shots Include:

- Soreness, redness, or swelling where you got the shot
- Fatigue
- Muscle aches
- Headaches
- 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.



Vaccination information for Natives by Natives

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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, Muscogee & Ojibwa Lakota, Northern Arapaho, and Northern Cheyenne, Project Manager at the Northwest Portland Area Indian Health Board



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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.

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.

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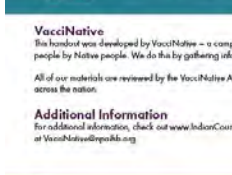
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Protecting Your Kids from Respiratory Illnesses

Respiratory illnesses
Respiratory illnesses are contagious cough, pneumonia, flu, RSV, and COVID-19 can be extremely dangerous for kids.

Who Should Get Vaccinated

Whooping Cough (Diphtheria)	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 and flu are quickly changing their tricks. 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 plans than by getting vaccinated to stay healthy.

Don't Have Regrets

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

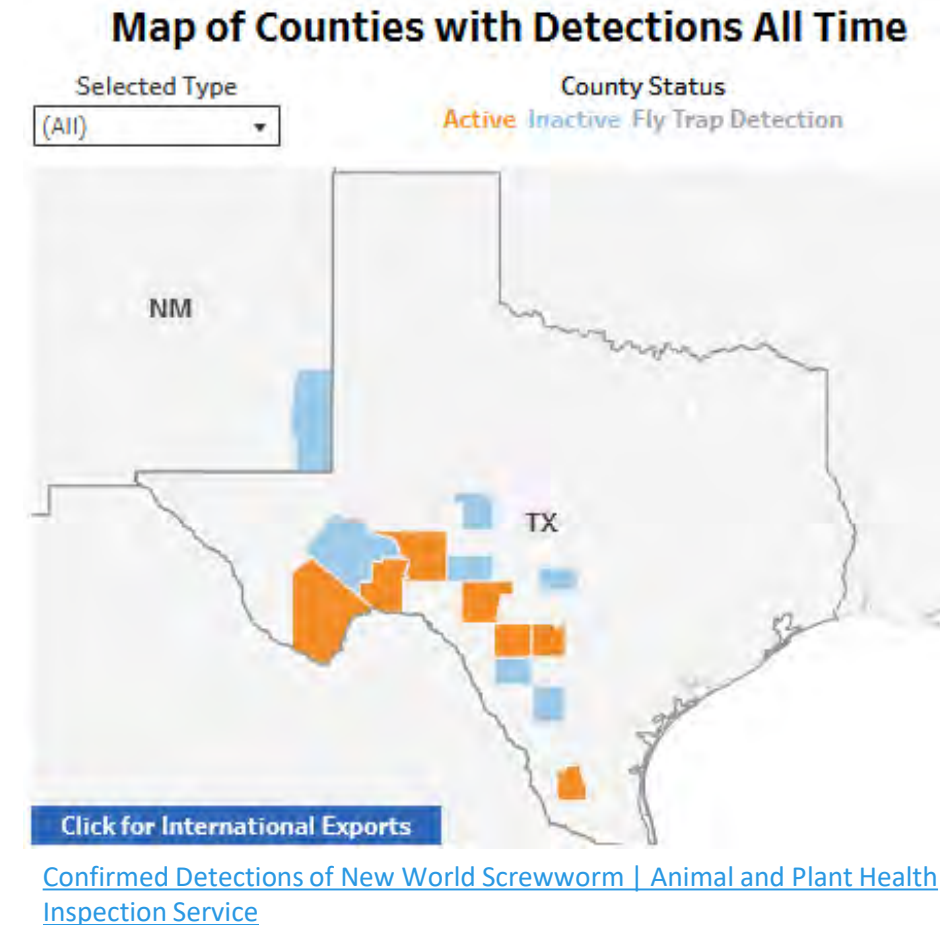
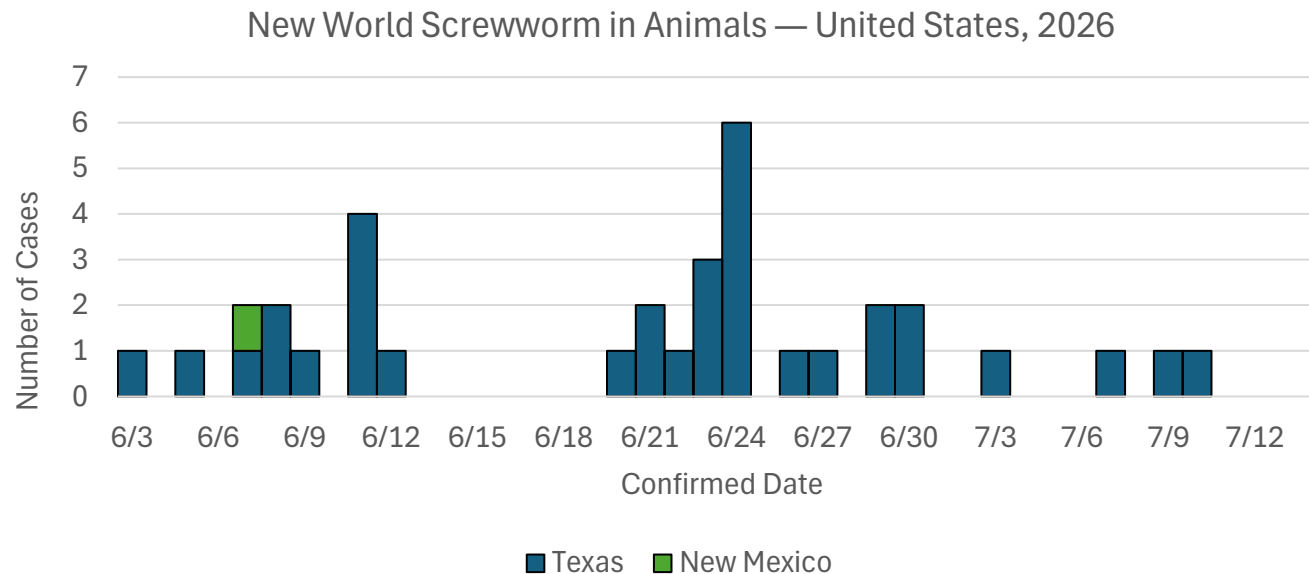
Learn more
www.IndianCountryEcho.org/ProtectYourKids



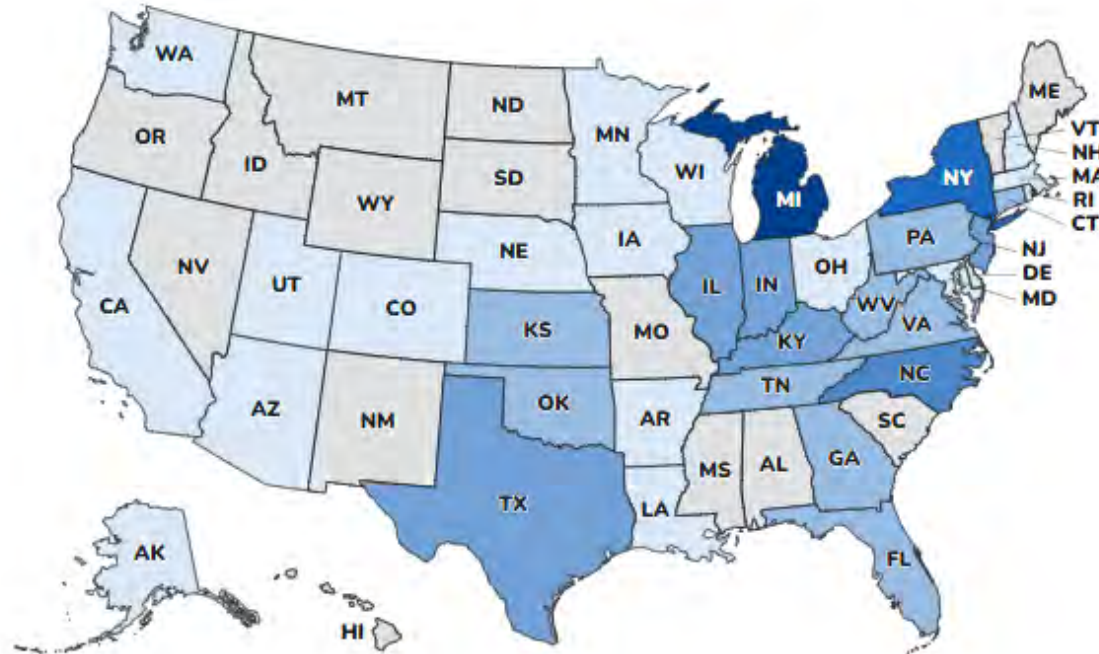
<https://www.indiancountryecho.org/vaccinative/>
<https://www.indiancountryecho.org/native-boost/>

New World Screwworm

- 6/3/26: First case confirmed in U.S., calf identified in Zavala County, Texas.
- Animal cases to date in US (through 7/13/26: 35 (33 in Texas, 1 in New Mexico); Cattle (19), Sheep (10), Goats (4), Dogs (2).
- No human cases identified in the U.S. to date.



Domestically-Acquired Cyclosporiasis Cases — United States (May 1- July 13, 2026)



Number of Cases

1 to 10

31 to 80

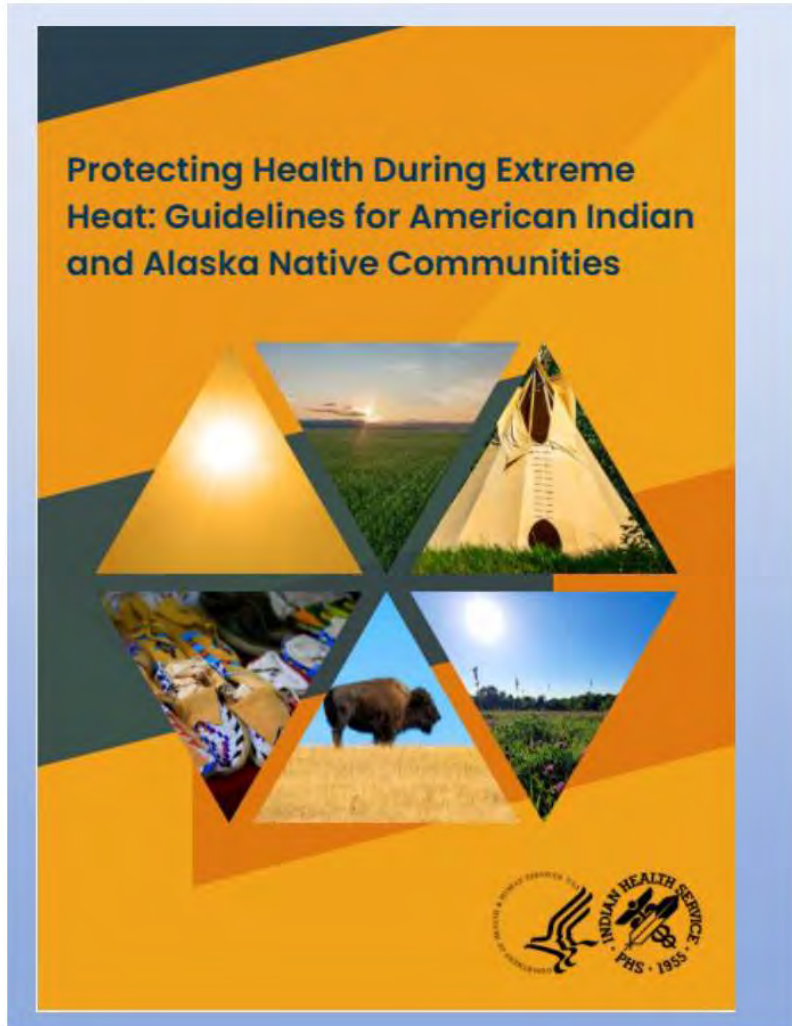
161 to 300

11 to 30

81 to 160

501 to 900

Resources for Heat Preparedness



Signs of Heat Stroke and Heat Exhaustion

**Heat Exhaustion**

- Passing out
- Tiredness/weakness
- Dizziness
- Nausea
- Vomiting
- Headache



- Move to a cooler or shaded area and lie down
- Remove outer layers of clothing
- Give cold water to drink
- Fan
- Get medical help if symptoms do not improve after 15 minutes or worsen

**Heat Stroke**

- Body temperature above 104°F or warm to touch AND one of the following:
 - Abnormal behavior
 - Confusion
 - Seizures
 - Slurred speech



- Call 911!
- Move to a cooler or shaded area and lie down
- Remove outer layers of clothing
- Ice or cold water bath as soon as possible (if not possible, pour cold water over body and apply ice packs to palms and soles, cheeks, groin, and armpits)
- Fan

For more information scan the QR code:



Prevention:



Heat-Related Illnesses:



[Flyer on Signs of Heat Stroke and Heat Exhaustion](#)

National IHS Public Health Council – Other Materials:

[Heat Preparedness Flyer](#)

[National Heat Awareness Month Flyer](#) (July)

[National Heat Awareness FB Post](#) (July)

Additional Resources:

[Heat Exhaustion vs. Heat Stroke Infographic](#)

[National Weather Service: Heat Safety for You and Your Family](#)

[OSHA: Prevent Heat Illness at Work](#)

California Area IHS: [Extreme Heat Toolkit for Tribes](#)

[Extreme Heat | Washington State](#)

[Department of Health](#)

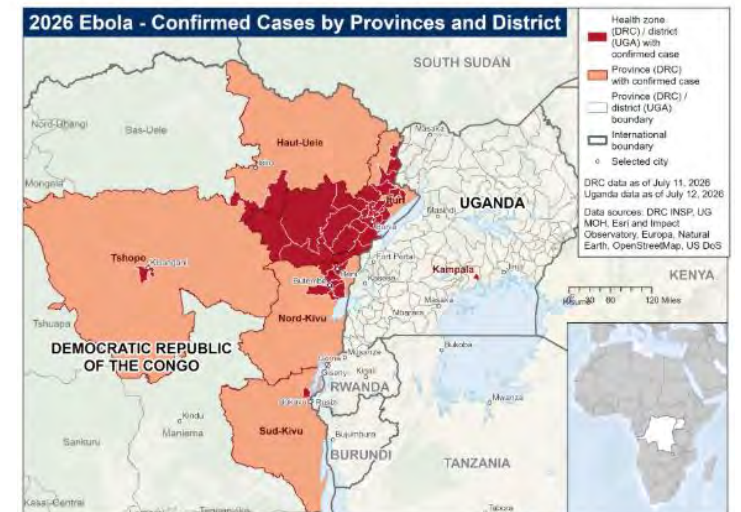
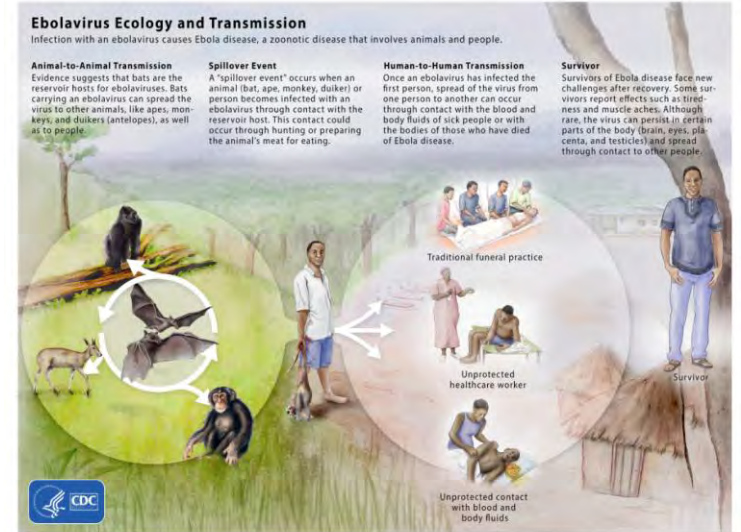
[Oregon Health Authority : Extreme Heat : Get Prepared : State of Oregon](#)

[Warmer, drier conditions raise risk of summer health hazards | Idaho Department of Health and Welfare](#)

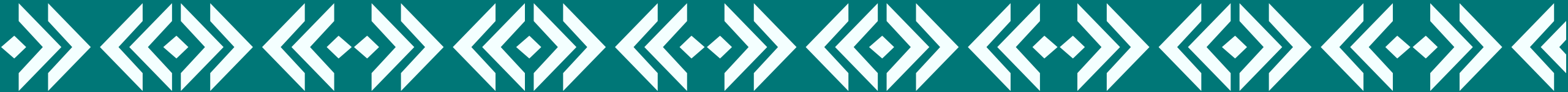
In the News

Bundibugyo Virus Disease (BVD)

- Ongoing outbreak of Bundibugyo virus, a species of orthobolaviruses which cause Ebola disease, in the Democratic Republic of the Congo (DRC) and Uganda.
 - As of 7/11, the DRC has reported 1926 confirmed cases and 702 confirmed deaths (36% case fatality).
 - As of 7/12, Uganda has reported 20 confirmed cases, 1 probable case, 2 confirmed deaths and 1 probable death (14% case fatality).
 - On 6/24, France reported a case of Ebola in a physician who had worked in the DRC with the Alliance for International Medical Action; this person has now recovered and been discharged.
 - One American is currently being treated for Ebola in Germany. This individual worked in the DRC with Samaritan's Purse in logistics.
 - One American was previously flown from the DRC to Germany where they were treated and released. High-risk contacts were being monitored during the 21 day incubation period in Germany and the Czech Republic and have been released.
- Impact on Portland Area IHS: USPHS has been deploying officers to Kenya with plan to monitor Americans exposed to Ebola and to provide treatment as needed. 5/28: Court injunction stopping construction of facility in Kenya; next hearing July 23.
 - <https://www.nytimes.com/2026/05/26/us/politics/trump-ebola-kenya.html>;
<https://www.nytimes.com/2026/06/02/world/africa/kenya-ebola-us-quarantine-unit-court.html>.
- Incubation period: 2-21 days.
- Those returning from Ebola-affected areas should monitor for symptoms for 21 days after leaving the outbreak area. Infected persons cannot transmit ebolaviruses before they are symptomatic.
- Symptoms: Fever, severe fatigue, weakness, headache, myalgias/arthritis, sore throat followed by decreased appetite, nausea/vomiting, diarrhea, abdominal pain, unexplained bleeding.







Questions & Comments