NPAIHB Weekly Update

July 28, 2026

NORTHWEST PORTLAND AREA
INDIAN HEALTH BOARD
Indian Leadership for Indian Health

Agenda

- Welcome & Introduction: Bridget Canniff
- NPAIHB Announcements, Events, & Resources
- Oregon Tribal Social Determinants Measurement Project: Renee Boyd & Kathy Pickle, OHA
- Questions & Comments

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

Upcoming Indian Country ECHO Telehealth Opportunities

- **Care & Access for Pregnant People ECHO** – 4th Tuesday of every month at 11am PT
  - Tuesday, July 28th at 11am
  - Didactic Topic: *Strengthening Tribally - Informed Maternal Mortality Review Committees: Efforts & Lessons Learned*
  - To join via Zoom: https://echo.zoom.us/j/87128078680?pwd=c2hMOEFnWU9QWVZMd2dpL0J0ODNidz09

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

Tribal Community Health Provider Program

AI/AN leadership in healthcare for AI/AN communities

What is TCHPP?

The Tribal Community Health Provider Program (TCHPP) supports tribes in the Pacific Northwest so our communities can thrive in the way our ancestors intended.

TCHPP builds and sustains educational programs to train dental, behavioral, and community health aides. Working in partnership with tribes and tribal health, ourprograms promote tribal self-governance and sovereignty by removing barriers to health care services and health education.

By creating infrastructure to train more AI/AN healthcare providers, we improve the health of tribal communities and nurture the voice of the next generation of AI/AN leadership.

TCHPP is a project of the Northwest Portland Area Indian Health Board (NPAIHB).

Why TCHPP?

COMMUNITY HEALTH AIDE/PRACTITIONER PROGRAM

Northwest Portland Area Indian Health Board

WHAT IS A COMMUNITY HEALTH AIDE/PRACTITIONER (CHA/P)?

CHA/P's are certified primary and emergency care clinicians who have close cultural ties and connections to the communities they serve. In Oregon, Washington, and Idaho, they are community members of American Indian/Alaska Native communities who attend CHA/P educational programs approved by the Portland Area CHAP Certification Board and work within the tribal health and human systems.

WHAT HEALTHCARE SERVICES DO CHA/PS PROVIDE?

There are two CHA levels and the top level, Community Health Practitioner (CHP). The scope of practice for each provider advances from one level to the next. Depending on their level of certification, CHA/Ps can provide services such as:

- Emergency care
- History and patient examinations and follow up
- Carrying out physicians treatment recommendations
- Patient and family focused education and instruction
- Preventive health programs
- Infection and disease control
- Immunizations
- Select appropriate prescription medication

CHR TO CHA/P PATHWAY

- **CHR** Community Health Representative
- **CHA** Community Health Aide
- **CHP** Community Health Practitioner

WHY CHA/P'S FOR TRIBAL HEALTH ORGANIZATIONS & COMMUNITIES?

- Increased clinical services and wrap around care
- Homegrown, culturally knowledgeable providers
- Improving continuity of care
- Local professional wage job opportunities for local community members
- Provides a unique opportunity for Tribes to improve current health & education systems
- A solution to recruitment & retention in tribal health care systems

We'd love to hear from you!
Contact: Kate Denny, TCHPP Manager
Kdenny@npaihb.org

https://tchpp.npaihb.org/

TCHPP

NPAIHB

Behavioral Health Aide (BHA) Education Program

NOW RECRUITING

Your opportunity to pursue a holistic, culturally relevant, and relational higher education program.

Northwest Indian College (NWIC) offers a culturally-specific behavioral health pathway for Indigenous students.

- **NPAIHB funding will be prioritized to prospective students currently working in a tribal behavioral health clinic in OR, ID, and WA.**
- **Prioritization also given to students who currently have a Clinical Supervisor and are interested in receiving National Certification as a BHA.**

What is the Application Process?

- There is a 2-step application process.
  1. Complete the Northwest Portland Area Indian Health Board (NPAIHB) BHA Stipend Application.
     - You can find a fillable pdf application on our website at https://tchpp.npaihb.org/resources/students/
  2. Academic Institution Application & Enrollment
- Reference letter *(preferrably from a Clinical Supervisor or Behavioral Health Department)*
- Current Resume & Cover Letter

Contact:
The Tribal Community Health Provider Program (TCHPP) team at: **tchpp@npaihb.org**

Applications are open on a rolling basis. Term start dates include:
September
January
April
July

https://tchpp.npaihb.org/resources/students/

PORTLAND AREA BEHAVIORAL HEALTH AIDE ACADEMIC REVIEW COMMITTEE (PA BHARC)

JOIN TODAY

PA BHARC Members help ensure that Behavioral Health Aide (BHA) training is responsive to Tribal priorities and community needs, culturally rooted and practice-informed, and aligned with certification standards.

Who Should Participate?

- Behavioral health providers from Tribal Health Organizations (THOs)
- State agency staff in the Portland Area (ID, OR, WA)
- Indian Health Service (IHS) staff

NPAIHB Date:
Every 3 Wednesday of the month

Time: 12:00 PM PST

Host: Tribal Community Health Provider Program (TCHPP)

To request additional information, please contact:

KATE DENNY
Tribal Community Health Provider Program (TCHPP) Manager,
Northwest Portland Area Indian Health Board
kdenny@napihb.org

TCHPP
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BECOME A DENTAL PROFESSIONAL!

The NW Dental Health Aide Program

The Primary Dental Health Aide Program (PDHA I) is a 8-week part-time, hands-on and virtual dental training program

- Earn a certification
- Earn endorsement in a dental setting
- Earn college credits

TCHPP

NPAIHB

The NW Dental Health Aide Program is a project of the Tribal Community Health Provider Program (TCHPP) and the Northwest Portland Area Indian Health Board (NPAIHB)

What's a Primary Dental Health Aide I?

A Primary Dental Health Aide (PDHA I) is a primary oral health professional that provides care in Tribal communities. DHAs are trained to provide care that builds trust and empathy.

PDHA I Services include:

- Working in dental clinics
- Community outreach services
- Oral hygiene care and instruction
- Dental charting and clinical documentation
- Topical fluoride treatments
- Antimicrobial treatments
- Nutritional/diet education

- Students train in their own tribal community dental clinic and will complete a student internship (preceptorship)
- Students are mentored every step toward becoming part of the dental profession
- Learn new skills and advance your dental career!
- Provide culturally responsive care in your community
- Be a role model in your community
- Option to receive college credit and a dental assisting endorsement from Salish Kootenai College

Course Information

- Course completed in **8 weeks**
- Approximately **35 hours** of online coursework
- Approximately **25 hours** of clinical work
- **9 - 12** hours of Zoom classes

Things to know

- Course designed for students new to the dental field *and* existing dental staff
- No prerequisites required
- Program works in partnership with students' tribal health organization
- Educational supplies provided (ex. textbooks, materials)

in partnership with
SALISH KOOTENAI COLLEGE

After completion of PDHA I, students can enroll in additional DHA Courses including:

Primary Dental Health Aide II	Provides sealants, radiographs, dental assisting, simple dental cleanings
Expanded Function Dental Health Aide I and II	Provides the placement of fillings in an already prepared tooth

Learn More

Please don't hesitate to reach out with questions!

Pamela Ready
DHA Program Manager
pready@npaihb.org

NPAIHB Weekly Update Schedule

- August 4: State Partner Updates (WA DOH, OHA), Communicable Disease Updates (PAIHS)
- August 11: TBD
- August 18: N CREW Research Topic focus
- August 25: Legislative & Policy Updates

Oregon Tribal Social Determinants Measurement Project: A collaboration with Oregon Health Authority

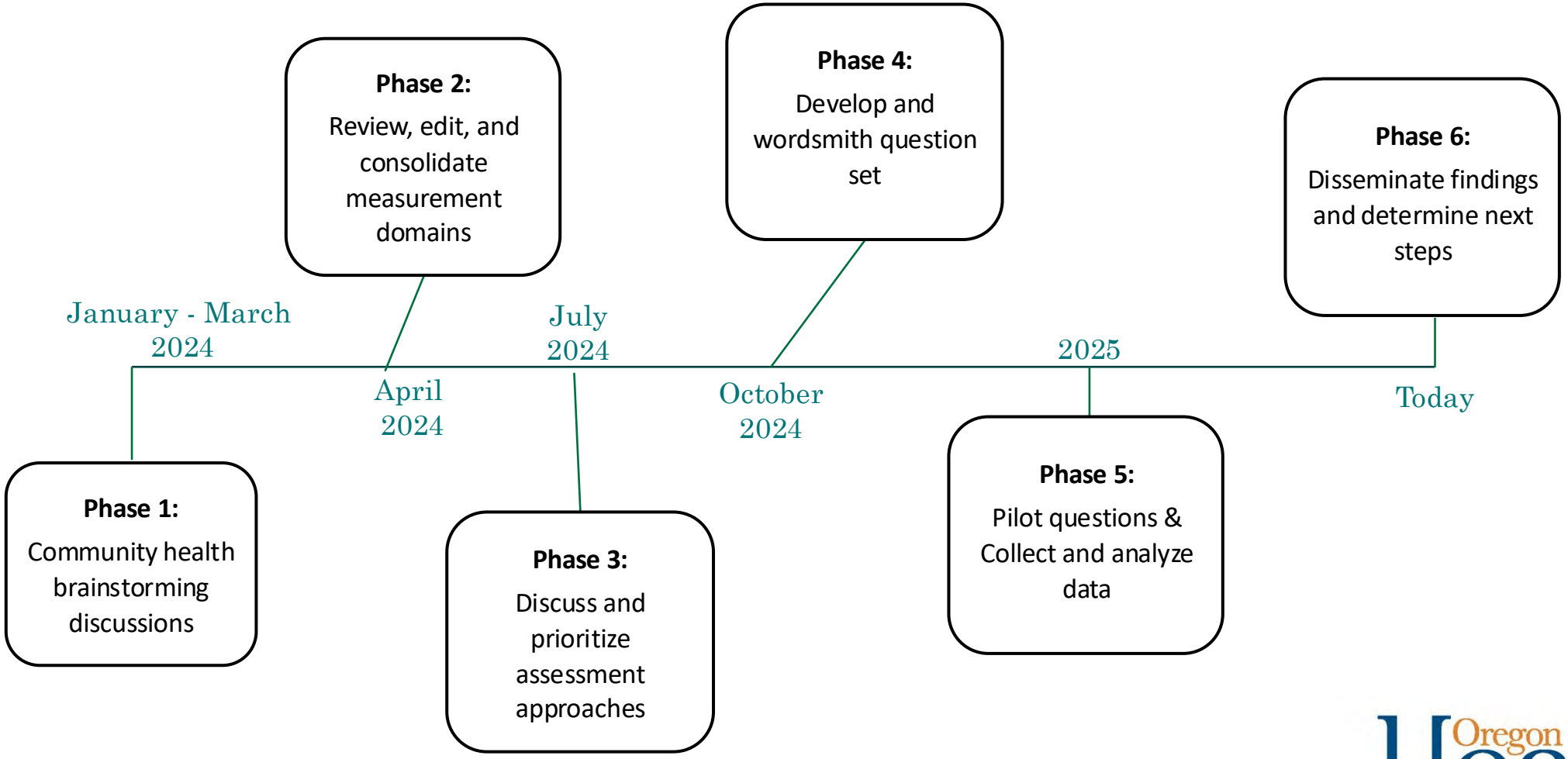
July 28, 2026

Purpose of the Project

To engage the tribal community
in the development of culturally
appropriate and actionable survey items
that provide relevant information
about community influences
on individual health

Oregon Health Authority

Project Timeline

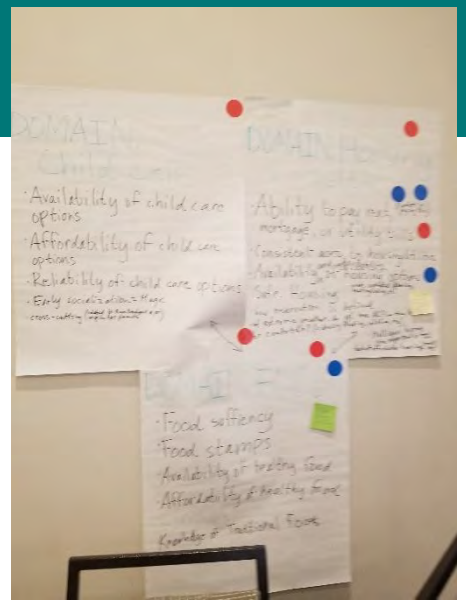


Phase 1: Community Brainstorming Discussions

Identify domains of social and community life that affect individual health and well-being

- Culture
- Social and emotional support
- Employment
- Food
- Housing and shelter
- Transportation
- Crime
- Economic development
- Built environment
- Childcare
- Relationships and family
- Language
- Life satisfaction
- Spirituality

Phase 2: Edit domains



Select the domains of community living that most completely represent the social determinants of health that Oregon tribes wish to capture

Domains were selected and organized into "concepts" with resonant examples

Domains	Concepts	Examples
Housing and Food	Housing and shelter	Ability to pay rent, mortgage, or utility bills Safe and adequate housing Consistent access to housing or utilities Availability of support services through housing
	Food	Availability of healthy food choices Ability to access food Cost of food Food sufficiency

Phase 2: Edit domains

Domains	Concepts	Examples
Social and Community	Community involvement	Connectedness to community Motivation to participate
	Social and emotional support	Loneliness Connectedness to others Getting the support you need
Domains	**Concepts**	**Examples**
Culture and Spirituality	Culture	Importance of cultural heritage Connectedness to culture Opportunities to participate in culture Sense of cultural belonging
	Spirituality	Sense of personal or spiritual fulfillment Feeling part of a spiritual community Connectedness to spirituality Engagement in spiritual activities

Phase 2: Edit domains

Domains	Concepts	Examples
Economy and Employment	Employment	Work satisfaction Stable employment Work in chosen field
	Economic development	Availability of jobs in the community Opportunity to earn a living wage in the community Thriving businesses in the community

Phase 3: Prioritize Assessment Approaches

Select assessment approaches to form the basis of the SDOH question set

- Ability to pay for housing
- Connectedness to community
- Importance of cultural heritage
- Availability of healthy food choices
- Loneliness
- Sense of personal or spiritual fulfillment
- Work satisfaction
- Availability of jobs in the community
- Safety in neighborhood at all hours
- Language as a common bond
- Ease of transportation for needs

Phase 4: Tribal Social Determinants of Health Pilot Questions

Project Recommended SDOH Items	Answer structure
During the last 12 months, was there a time when you were not able to pay your mortgage, rent, or utility bills?	Y/N/NS
In the last 12 months have you lost employment or had hours reduced?	Y/N/NS
How satisfied are you with your job?	4-point scale+NS
Do you have easy access to healthy food choices in your community?	Y/N/NS
How often are you able to afford the food you need?	5-point scale+NS
During the past 12 months has a lack of reliable transportation kept you from medical appointments, meetings, work, or from getting things needed for daily living?	Y/N/NS
How safe from crime do you consider your neighborhood to be?	4-point scale+NS
Are you able to connect with your cultural heritage as much as you would like?	Y/N/NS
Do you have as many opportunities as you would like to use language as a shared cultural identity?	Y/N/NS
Do you feel a sense of spiritual or personal purpose?	Y/N/NS
How often do you feel lonely?	5-point scale+NS
How often do you get the social and emotional support that you need?	5-point scale+NS

Phase 5: Pilot the Questions, Collect and Analyze Data

Piloting the Tribal Social Determinants of Health Module

in the 2025 Oregon Adult Health Study

Address-Based Sampling (ABS) Push to Web Survey

Survey Modernization

BRFSS Modernization Efforts

Limitations of BRFSS Random Digit Dial (RDD)

- Cost ($80+ per complete)
- Low response rate
- Representativeness
- Not reaching some types of respondents
  - Younger adults
  - People of color

Pilot alternative methodology

- Address-based Sampling (ABS) Push to Web
  - 2020: During height of pandemic; response rate = 32%
  - 2024 and 2025: Response rate ≈ 21%

Tribal SDOH

Oregon Health Authority

BRFSS Standard vs. OAHS Methods

	BRFSS standard	OAHS Address-based sampling
Sampling	RDD phone (cell, landline), random selection within HH	Random sample of Oregon addresses, person in HH who celebrated the most recent birthday is asked to take the survey (random selection)
Recruitment/ mode	Mailed pre-notification letter if address available Multiple outbound phone calls	Progressive recruitment strategy: First invitation letter from State Health Officer with $1 bill 4 total attempts: 4 mailed (all large font, literacy-checked) Recruitment messages were progressive, guided by advisory group Modes available: **Online survey** –option at all steps **Print copy of survey mailed** –attempts 3 and 4 Post-incentive of $5 for completing the survey
Language	English/Spanish	English/Spanish (print survey in Spanish available online or sent by request)
Questions	Mostly CDC core or optional; some state-added	Many CDC core, more state-added, and piloting Tribal SDOH questions developed by the Northwest Portland Area Indian Health Board)

Results

Oregon Adult Health Study 2025 Overview of Response

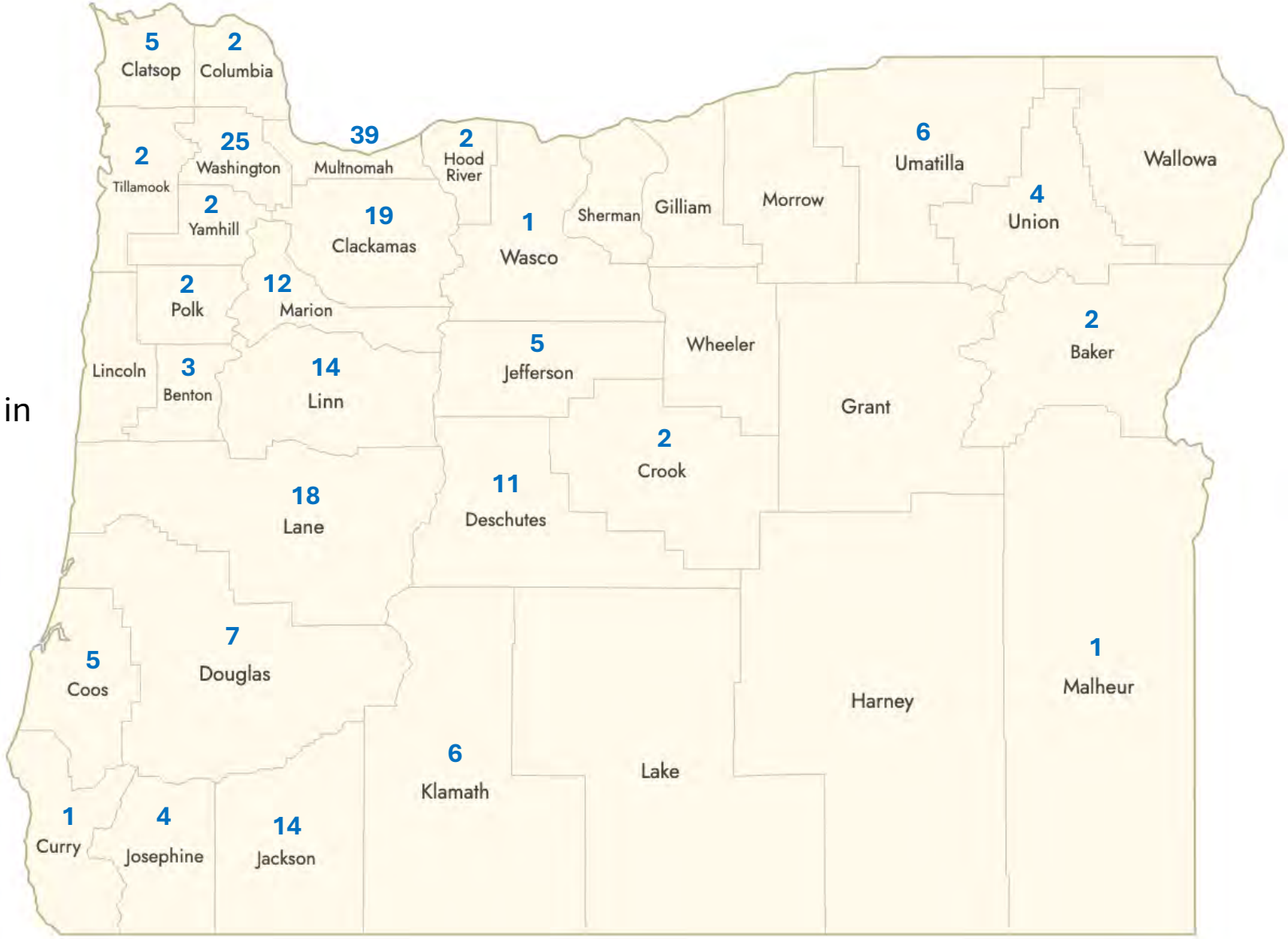
Sample and Completes

- Goal for completes = 3,500
- Sample 16,500 across 3 data collection waves
  - Sampling frame: Oregon residential addresses from the USPS Computerized Delivery Sequence file (CDSF)
- 15,499 eligible in sample (94%); 1,001 undeliverable addresses
- 3,513 surveys returned (included 243 mailed surveys that were too incomplete to use)
- 71% (2,311) surveys completed by Web (answered online)
- 29% (959) surveys completed by mail

Among known eligible: 3,270 completes (**21% response**)

Oregon Health Authority

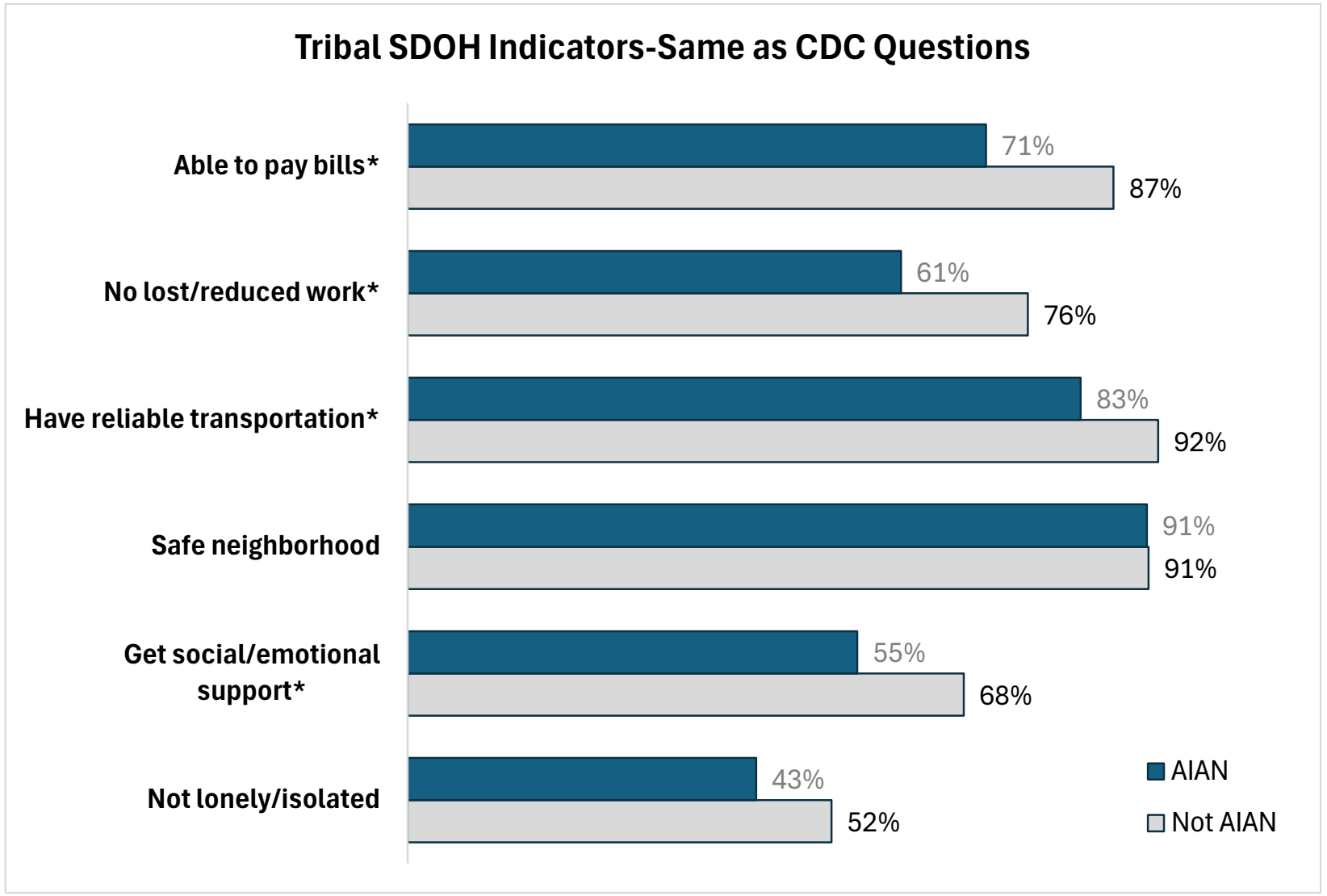
214 (6.5%) identified as AIAN (alone or in combination)



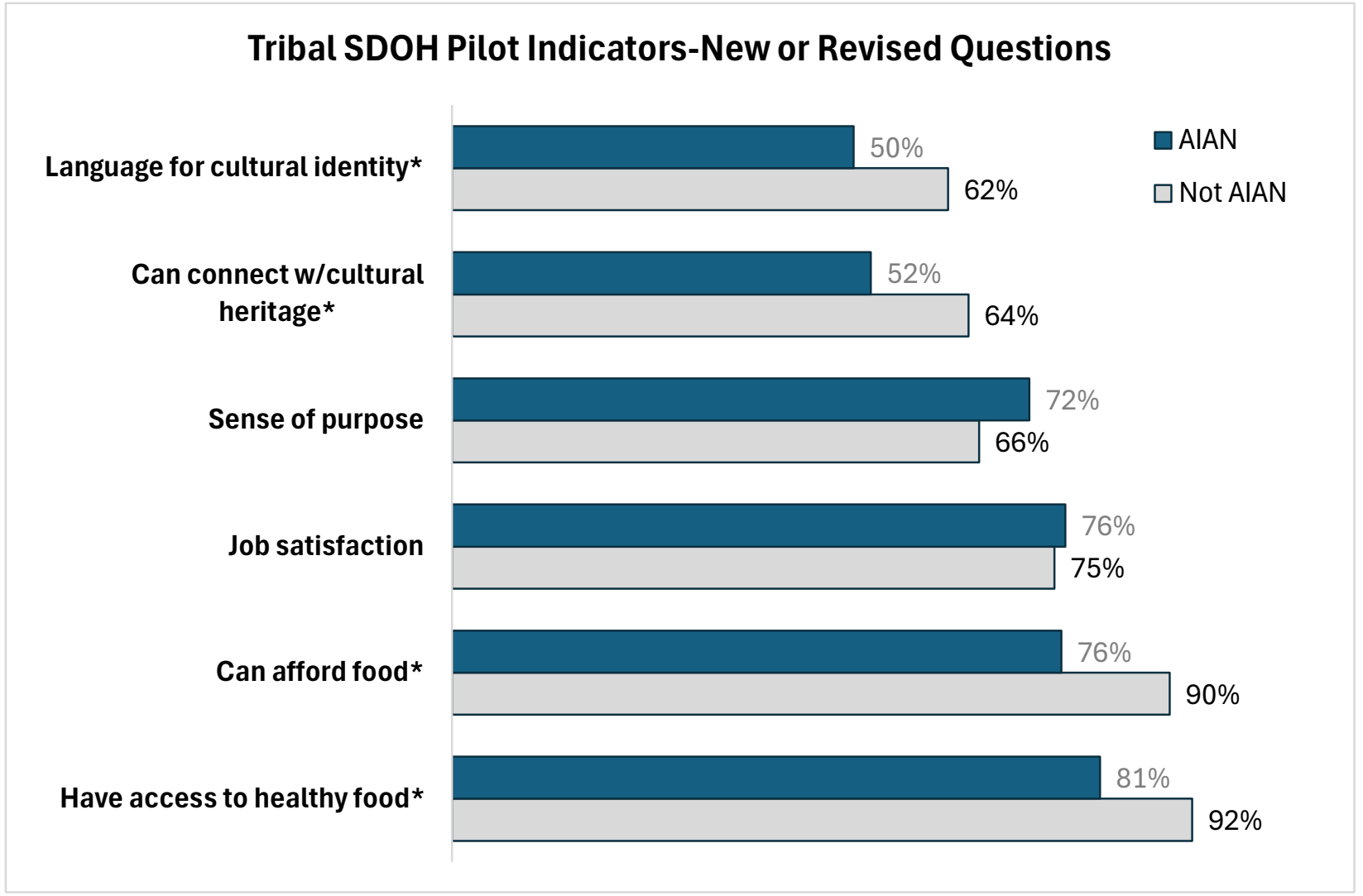
Counties with no respondents identifying as AIAN are blank.

Pilot Social Determinants	AIAN	Not AIAN	Total	Different?
Able to pay bills	71%	87%	86%	**p<0.001**
No lost/reduced work	61%	76%	75%	**p=0.01**
Job satisfaction	76%	75%	75%	not sig
Have access to healthy food	81%	92%	92%	**p=0.001**
Can afford food	76%	90%	89%	**p<0.001**
Have reliable transportation	83%	92%	92%	**p=0.003**
Safe neighborhood	91%	91%	91%	not sig
Can connect with cultural heritage	52%	64%	64%	**p=0.029**
Language for cultural identity	50%	62%	61%	**p=0.039**
Sense of purpose	72%	66%	66%	not sig
Not lonely/isolated	43%	52%	52%	not sig
Get social/emotional support	55%	68%	68%	**p=0.021**

Tribal Social Determinants of Health Pilot

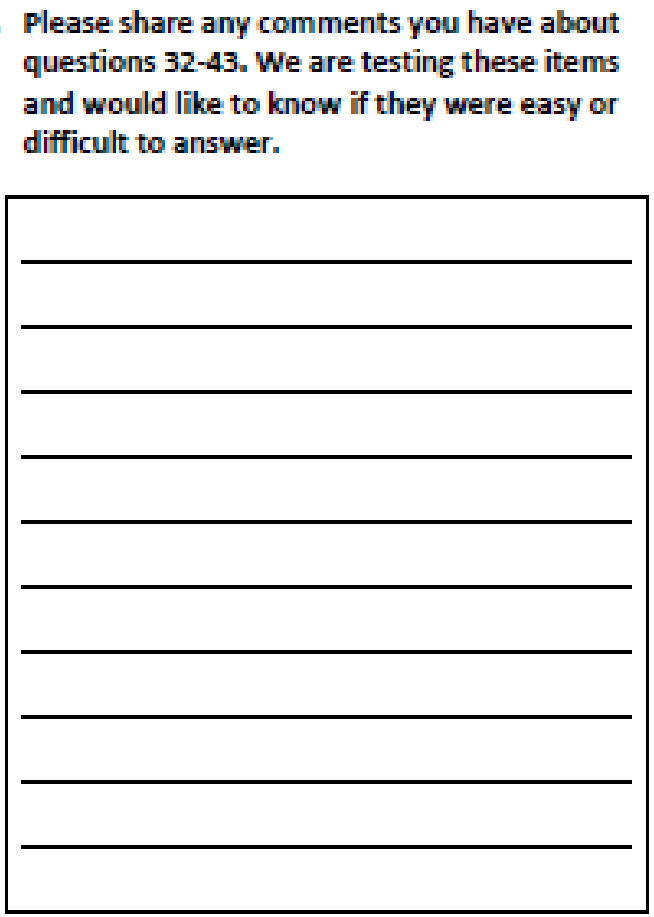


Tribal Social Determinants of Health Pilot



Preliminary Review of Open-end Question (Qualitative Data)

- 2,029 people (62%) wrote something
- About 1 in 10 of those wrote that they didn't have any comment
- Most who wrote had something more to say
- Many indicated that the questions were easy to answer
- Some people mentioned some difficulties in answering some questions



Preliminary Review of Qualitative Data

Comments about specific TSDOH questions or topics

- Employment-related questions
  - Answer category for not applicable (retired and/or not employed)
- Cultural heritage and language as cultural connection
- Social and emotional support and loneliness

Themes (so far)

- Hardship, overcoming hardship, stress
- Reflections on gratitude or feeling fortunate
- Noting support (from people or organizations)
- Reflections on community
- Mental health

Thank you

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OREGON HEALTH AUTHORITY

Questions
&
Comments