

Indian Health Service

Food Safety on Tribal Lands

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California Area Indian Health Service

Indian Health Service

- Principal Federal health care provider
- Public health advocate for American Indians and Alaska Natives
- Serves approximately:
 - 1.9 million American Indians and Alaska Natives
 - 562 federally recognized tribes
 - 35 states

Basis For Federal Health Benefits to Indians

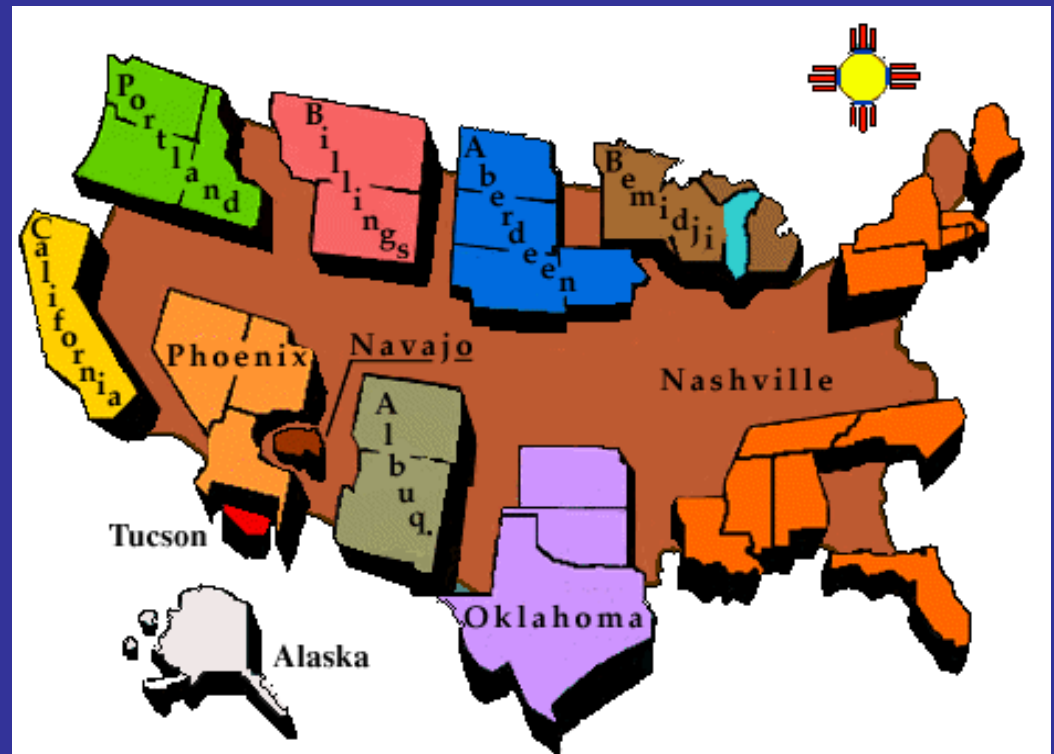
- Treaties exchanged aboriginal lands for federal trust responsibilities and benefits
- Snyder Act authorized health services for Indians (1921)
- Transfer Act placed Indian health programs in the PHS (1955)
- Indian Self-Determination and Education Assistance Act (1975)
- Indian Health Care Improvement Act and amendments (1976)

Geographically Organized



Aberdeen Area	●	Nashville Area
Alaska Area	●	Navajo Area
Albuquerque Area	●	Oklahoma Area
Bemidji Area	●	Phoenix Area
Billings Area	●	Portland Area
California Area	●	Tucson Area

- 12 Area Offices
- 163 Service Units
- 562 Tribes
- 35 States



Indian Health Service

Our Mission... to raise the the physical, mental, social, and spiritual health of American Indians and Alaska Natives to the highest level.

Our Goal... to assure that comprehensive, culturally acceptable personal and public health services are available and accessible to American Indian and Alaska Native people.

Our Foundation... to uphold the Federal Government's obligation to promote healthy American Indian and Alaska Native people, communities, and cultures and to honor and protect the inherent sovereign rights of Tribes.

Tribal Self Determination

The *Indian Self-Determination and Education Assistance Act* (Public Law 93-638, as amended) provides tribes the option of entering into a contract, receive direct funding, and assume the administration and operation of federal programs in their communities; or remain in the direct IHS system.

IHS Programs are as Diverse as the Locations and Communities Served



Environmental Health Services

- Public health advisor to Tribal governments
- Broad range of Environmental Health Services for governments, communities, individuals



Environmental Health Services Program Role

- Provide direct services, technical assistance
- Provide data for action at community level
- Identify, prevent risk factors from affecting community
- Evaluate EH projects
- Fund local interventions
- Advocate for EH at federal, regional levels
- Build capacity



Program Areas

- **General Environmental Health**

- Food, water, vector, disease, emergency resp., hazardous materials, casinos, healthy housing

- **Injury Prevention**

- Intentional/unintentional injuries and deaths (MV occupant protection, road hazard reduction, smoke detector, falls, drownings)

- **Institutional Environmental Health**

- Occupational health & Safety, industrial hygiene, healthcare accreditation, environmental compliance



Environmental Health Services

- Indian Health Service/Tribal/Urban System
- 293 IHS/tribal staff
 - 220 General EH
 - 52 Injury Prevention
 - 21 Institutional EH
- 15% Administrative
- 85% Field-based



2006 DEHS Annual Report data.

Food Service Facilities from Casinos to Head Starts



Facilities Monitored (01/2008)

- Hospital - 51
- Health Center – 332
- Health/Dental Station – 372
- Dialysis Unit – 24
- Nursing Care – 17
- X-ray Unit – 1926
- Residential Care – 232
- Subst Abuse Center – 123
- Foster Care Homes – 1436
- Summer Youth Camp – 97
- Jail – 187
- School/Dormitory – 679
- Barber/Beauty Shop - 73
- Head Start - 732
- Day-care Center – 437
- Water/Waste/O&M – 4022
- Motel/Trailer Park – 502
- Industrial – 305
- Bakery/Cannery - 60
- Slaughter House – 61
- Senior Citizen Ctr – 450
- **Food Service - 5433**
- Gaming – 422
- Community Bldg – 968
- Recreational – 993
- Celebrations – 893

Total – 20,000+

Mortality Rate Disparities Continue

American Indians and Alaska Natives in the IHS Service Area 2001-2003

(Age-adjusted mortality rates per 100,000 population)

	AI/AN Rate 2001- 2003	U.S. All Races Rate 2002	Ratio: AI/AN to U.S. All Races
ALL CAUSES	1042.2	845.3	1.2
Tuberculosis	1.8	0.3	6.0
Alcoholism	43.6	6.7	6.5
Diabetes	75.2	25.4	3.0
Motor vehicle crashes	51.1	15.7	3.3
Unintentional Injuries	93.8	36.9	2.5
Homicide	12.7	6.1	2.1
Suicide	17.1	10.9	1.6
Cervical cancer	4.4	2.6	1.7
Infant deaths ^{1/}	9.8	7.0	1.4
Cerebrovascular diseases	54.7	56.2	1.0

^{1/} **Infant deaths per 1,000 live births**

NOTE: American Indian and Alaska Native (AI/AN) rates were adjusted to compensate for misreporting of AI/AN race on state death certificates. AI/AN rates are based on 2000 census with bridged-race categories developed by the Census Bureau and the National Center for Health Statistics.

Tribal Food Safety Issues by the Numbers

- 562 federally recognized tribes
- 35 states with federally recognized tribes
- Approximately 5000 tribal food service establishments
- 343 Tribes with food service establishments
- 53 Tribes have adopted some type of Food Code
- 38 Tribes have adopted an FDA Model Food Code
- 13 Tribes have adopted the 2005 Model FDA Food Code

Tribal Facilities Serve more than Indians

- 428 Casinos and Bingo facilities
- Multiple food facilities/casino
- Tribes near urban centers experiencing dramatic growth in retail shopping centers and franchise establishments

Current IHS and Tribal Food Safety Services

- Provide consultative food service surveys to over 5000 tribal facilities
- Food handler training
- Itinerant and celebration food safety services
- Outbreak investigations
- Design review
- Standardization in some locations (currently 12 Standards in IHS)
- Interagency Agreement for Head Start Model EH Code

Current Collaborations with FDA

- Use Model FDA Food Code
- Collaboration with FDA Regional Food Specialists
- Federal Food Safety Coalition
- Development of Web-based “e-Survey” based on CFP survey form (allows tracking of trends, survey data)

Food Safety Issues with IHS and Tribes

- Food is one of many environmental health issues for IHS staff
- IHS is a consultative public health agency to tribal governments, with no regulatory authority
- Tribes are sovereign nations and as such, state food safety laws, services do not have jurisdiction in tribal facilities
- Some tribes have chosen to regulate food safety through the passage of food codes

Food Safety Issues with IHS and Tribes

- Tribes and the federal government have a direct government to government relationship
- Federal initiatives funded to states do not have an established mechanism to reach tribes
- FDA is the lead federal agency on food safety
- FDA administers food safety initiatives and services to states
- FDA initiatives do not have an established mechanism to reach tribes

Food Safety Issues with IHS and Tribes

- IHS EH program is funded at 40% of need and does not receive specific funding to address food safety issues with tribes
- IHS has established interagency agreements with numerous other federal agencies to extend federal health initiatives to tribes
- An interagency collaboration between IHS and FDA could effectively target food safety issues among tribes

Focus on Food Safety for American Indians and Alaska Natives

Partnership to Establish a Food Safety Specialist

- Targeted Tribal food code passage
- Development of food code advocacy campaign materials
- Food safety training
- Technical assistance on food safety

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