

TRIBAL PUBLIC HEALTH INFRASTRUCTURE INCREASED CONTINUING FUNDING

POSITION STATEMENT

The 21 Member Tribes of the Inter Tribal Association of Arizona (ITAA) strongly request for continued and increased Tribal public health infrastructure resources and funding continue to be made explicitly and directly available to Tribes, Tribal Organizations, and Tribal Epidemiology Centers.

KEY POINTS

 **Provide Tribes fair and direct funding for Public Health Infrastructure** via the Centers for Disease Control and Prevention (CDC). An estimated 1% - 1.5% of the FY2026 CDC's budget goes to dedicated Tribal-specific programs, including the *Tribal Epidemiology Centers Public Health Infrastructure* program.

 **Reduce the administrative burden on Tribal applicants** to receive public health infrastructure funding. Current CDC Cooperative Agreements are an administrative burden with complexities and requirements that keep eligible tribal applicants from applying.



BACKGROUND

American Indian and Alaska Natives experience health disparities at a greater rate than other Americans. Public health infrastructure provides communities the capacity to prevent disease, promote health, and prepare for and respond to acute emergency health threats and ongoing chronic health challenges. Public Health Infrastructure lays the foundation for planning, delivering, evaluating, and improving public health.

Local workforce development in public health aims to improve health outcomes by enhancing the training, skills, and performance of public health workers. Tribal Public Health Infrastructure gives Native American communities the foundation to provide essential public health services by bolstering local workforce development, data and information systems, and capacity to assess and respond to public health needs. Tribes must have the opportunity to enhance their public health infrastructure and access data critical to assessing the local health of their communities.

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Position Statement

The 21 Member Tribes of the Inter Tribal Association of Arizona (ITAA) strongly request for continued and increased Tribal public health infrastructure resources and funding continue to be made explicitly and directly available to Tribes, Tribal Organizations, and Tribal Epidemiology Centers. Tribes must have the opportunity to enhance public health infrastructure to effectively provide essential public health services by bolstering local workforce development, data/information systems, and organizational capacity.

Key Points

- Provide Tribes direct funding for public health infrastructure via the Centers for Disease Control and Prevention (CDC). Health equity is a CDC priority, which should reflect in the budget; an estimated 1% - 1.5% of the FY2026 CDC's budget goes to dedicated Tribal-specific programs, including the *Tribal Epidemiology Centers Public Health Infrastructure* program.
- Reduce the administrative burden on Tribal applicants to receive public health infrastructure funding. Current CDC Cooperative Agreements are an administrative burden with complexities and requirements that keep eligible tribal applicants from applying.

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American Indian and Alaska Natives experience health disparities at a greater rate than other Americans. Public health infrastructure provides communities the capacity to prevent disease, promote health, and prepare for and respond to acute emergency health threats and ongoing chronic health challenges. Public Health Infrastructure lays the foundation for planning, delivering, evaluating, and improving public health.

Local workforce development in public health aims to improve health outcomes by enhancing the training, skills, and performance of public health workers. Enhanced Tribal infrastructure for improved data and information systems results in stronger communities and improved public health systems and health outcomes. Data quality improvement is embraced in the field of public health as a means to achieve efficiencies and improve quality of services to improve overall community health. Tribal Public Health Infrastructure gives Native American communities the foundation to provide essential public health services by bolstering local workforce development, data and information systems, and capacity to assess and respond to public health needs. Tribes must have the opportunity to enhance their public health infrastructure and access data critical to assessing local health of their communities.