

ALASKA AREA NATIVE HEALTH SERVICE INFORMATION

NOTE: This is the first of a series of articles relating to the Alaska Area Native Health Service and its system of services. It is hoped that by providing this information and explaining some of the major policies and programs, the native people in Alaska will be better informed of the programs which effect the delivery of health services to the people and thereby more fully participate and use the different available resources. This first article will provide a general overview of the health care program. Future articles will address themselves to such subjects as native boards of health, contract health services program, direct hospital and field health programs, the use of alternate resources of health care such as various kinds of health insurance and information on specific services within the system such as pediatrics, maternal and child health care, and environmental health.

Organized health services for Alaska Natives did not exist until 1914, when the Bureau of

Education of the U.S. Department of the Interior was given this charge. Prior to that time, what care was given was through missionaries, a few military garrisons, ships in Alaska, and most of the traders found in the larger Native communities.

The first structured system of medical care for Alaska Natives was established in 1931 when responsibility was shifted to the Bureau of Indian Affairs. During the period of time from 1931 to 1954, government hospitals were built at Barrow, Bethel, Kanakanak, Kotzebue, and Tanana. Medical centers were also established in Mt. Edgecumbe and Anchorage. Out of the total 959 hospital beds, 617 were classified as tuberculosis beds.

On July 1, 1955, the Congress charged the U.S. Public Health Service with the responsibility for conserving the health of the Indian and Alaska Native people. The Indian Health Service was re-organized for this task and the Alaska Area Native Health Service was structured

to carry out the mission in Alaska. In order to provide comprehensive health care to the 55,000 Alaska Natives, the Native Health Service has geographically organized the state into seven service unit areas. The service unit headquarters with hospitals are located at Mt. Edgecumbe, Anchorage, Kanakanak, Bethel, Kotzebue, Tanana, Barrow and a small hospital on St. Paul Island.

In addition to providing health services directly at these hospitals and in the field, the Native Health Service is engaged in contracts with the State of Alaska and private medical clinics and other health providers throughout other parts of Alaska where Native health facilities are not located.

In addition to providing health services to Native people, these services are also available to non-native residents located in those rural areas of Alaska where there are not private facilities or clinics.

The program is administered by the Director of the Alaska

Area, who with his staff of health professionals and administrative specialists headquartered in Anchorage, provide support to the seven service units engaged in rendering service to the people.

The hospitals serve as the service unit headquarters and hub from which services radiate to all of the Native communities within its geographic boundaries. The composition and size of the staff at each service unit varies according to the population served and its needs. Each service unit provides general medical health services, and preventive services, including environmental health services.

The Anchorage Service unit includes the 276-bed Alaska Native Medical Center which serves as the referral center for complicated cases from other Native Health Service hospitals. A full range of specialty services is provided and the staff travels regularly to the field hospitals to conduct specialty clinics.

As the health level of the
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people has improved, emphasis has shifted from the hospital setting to the village level. Health professionals regularly visit villages for the primary purpose of providing preventive services. Each of the 156 Native villages has at least one resident community health aide who is trained to provide basic health services under the remote supervision of the physician based at the service unit hospital.

As will be explained in more detail in a future article, the Native Health Service has also, during the last several years, begun to formally involve the Native people in the provision of health care services through the formation of seven service unit Native Boards of health and an Area board of health. These Boards meet with the administrative staff to help plan, design, implement and evaluate the system of services. Future articles will attempt to provide an explanation of the system of direct and field health services and also the contract health care program which also provides services to the Alaska Native people.