

Native Health Board: Its History, Duties And Future Plans

By LILLIE MCGARVEY

(Editor's note: The writer is chairwoman of the Alaska Native Health Board.)

Because health is an issue that must be addressed by all Native regions and is an important issue for all Native people, all of us must become aware and familiar with the existence and actions of the Native people who work towards achieving the highest level of health for our Native people.

The Alaska Native Health Board was established in 1969 through the sponsorship and funding from the Indian Health Service. First, Service Unit Boards were formed in the seven areas of Alaska which are served by PHS service unit hospitals.

These hospitals are located at Barrow, Kotzebue, Bethel, Kanakanak, Tanana, Mt. Edge-

cumbe and Anchorage. The service unit is the area containing the villages which are served by particular hospital.

The membership of the service unit boards are determined by the board, and in the smaller units are comprised of a member from each village served. The largest service unit, Anchorage, has a board comprised of representatives from each sub-area within the service unit.

From its inception, the Alaska Native Health Board (ANHB) was comprised of the chairman from all of the service unit boards. After passage of the Land Claims Settlement Act and the formation of the twelve regions, it became apparent that the regions would need to address the health issues affecting their region.

ANHB moved to expand their membership to include five new members since the seven board membership already included members from seven regions.

Almost a year ago at their last November meeting, the board sent a resolution to AFN's board of directors stating the board's plan for expansion to include all twelve regions.

Also a request that the board become the health arm of AFN with the AFN Health Affairs Division to serve as staff to the board.

In their July meeting, AFN Inc. restructured their organization. The board will now address itself to the implementation of the Land Claims Settlement and issues pertaining to that act.

They set up a Human Re-

sources Committee made up of members from the non-profit corporations of the twelve regions.

This group will address health, education, social services and any other non-profit issues. Under this committee the ANHB will be the health arm of AFN Inc., with the Health Affairs Division of AFN serving as staff to the board.

Members of the ANHB are: Lillie McGarvey, chairman - Aleut Region; Herman Hess, vice chairman, NANA Region; Mary Jones, secretary, Sealaska Region; State Rep. Charles Deggan, treasurer, Bering Straits Region; Delores Padilla, Koniag Re-

gion; Sophie Chase, Cook Inlet Region; Agnes Nichols, Chugach Region; Olive Solomon, Tanana Chiefs Region; Stuart Nicholai, Ahtna Region; Morgan Solomon, Arctic Slope Region; Alex Nick, Calista Region plus Bristol Bay Region, (name to be submitted).

ANHB is made up of members of all regions and in order to ensure that the region has involvement in health planning, voicing their input regarding health policy requesting help for their particular health problems they must make sure that their representative or an alternate is in attendance at every ANHB meeting.

With the muscle of the Human Resources Committee backing up their actions and recom-

(Continued on page 7)

Native Health . . .

(Continued from Page 4)

mendations, the ANHB has a stronger voice with all providers of health services.

Working as a team this board and the providers, federal, state and private, will bring the level of the health of the Alaskan Native people to the highest level possible.