

The INTER-TRIBAL COUNCIL of the FIVE CIVILIZED TRIBES

A Resolution in Support of Emergency Supplemental Funding for Zika Virus and to Ensure a Set-Aside for Federally-Recognized Tribes

Resolution No. 16-13



Bill John Baker
Principal Chief



Bill Anoatubby
Governor



Gary Batton
Chief



James R. Floyd
Principal Chief



Leonard M. Harjo
Principal Chief

WHEREAS, the Inter-Tribal Council of the Five Civilized Tribes (ITC) is an organization that unites the tribal governments of the Cherokee, Chickasaw, Choctaw, Muscogee (Creek), and Seminole Nations, representing over 500,000 Indian people throughout the United States; and

WHEREAS, the ITC recognizes that American Indian people suffer greater health disparities than others living in Oklahoma. The top leading causes of death among Indians in Oklahoma are heart disease, cancer, unintentional injuries and diabetes; and

WHEREAS, the historic allocations of resources appropriated to all Indian health systems have created a disparity and underfunding for the Oklahoma Area compared to all other Areas in the United States. The Oklahoma Area has been in the bottom 25% of all Indian Health Areas and consistently rates as one of the lowest funded Areas within the IHS system; and

WHEREAS, our Nations urge Congress to immediately provide emergency supplemental funding with a set-aside for Federally-Recognized Tribes to prepare for and respond to the Zika virus. We also urge Congress to provide new funding rather than repurpose money from other high priority programs at the Centers for Disease Control and Prevention (CDC) and other federal agencies that ensure our health security and public health preparedness; and

WHEREAS, the Zika virus has been linked to microcephaly, a serious birth defect of the brain, in babies of mothers who contracted the virus while pregnant. Thousands of devastating birth defects have been observed among infants born in South and Central American in recent months. Zika has already been diagnosed in travelers returning to the U.S. from these areas. As the summer months approach and we enter mosquito season, our Nations can expect to be exposed to mosquitos that can spread this virus. Over four million babies are born in our nation each year, and many of their mothers could be at risk for contracting Zika during pregnancy; and

WHEREAS, with emergency supplemental funding to respond to the Zika virus, state and local public health professionals would have access to increased virus readiness and response capacity focused on areas with ongoing Zika transmission; enhanced laboratory, epidemiology and surveillance

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capacity in at-risk areas to reduce the opportunities for Zika transmission and surge capacity through rapid response teams to limit potential clusters of Zika virus in the United States. Moreover, supplemental funding will assist the CDC and USAID in efforts to contain the Zika virus in Zika-endemic countries and ensure that there are resources for surveillance, vector control and services for affected pregnant women and children; and

WHEREAS, if we take immediate action, we may be able to dramatically slow the spread of Zika, giving scientists time to develop and test a vaccine. Without action, however, we fear the number of newborns born with debilitating birth defects will only continue to rise. In addition to the human toll on children and families, the CDC estimates that the average lifetime cost of caring for each child born with microcephaly will likely be millions of dollars per child. For hard-hit communities, an epidemic of severe birth defects could quickly overwhelm health care and social services systems, and put extreme pressure on educational and other institutions; and

WHEREAS, the United States has a Trust Responsibility to Tribal Governments and Tribal Governments have responsibilities equal to states to protect the public health of our citizens and therefore routinely coordinate emergency preparedness and response efforts with local, state and federal governments. Specifically, Tribal Governments will be tasked with surveillance, vector control, public communication, clinical interventions, and increased staffing for a coordinated response. Tribal Governments will need resources to meet the emergency needs of all citizens within our jurisdictions to decrease/eliminate the spread of the Zika virus and resulting health impacts for all people of the United States; and

WHEREAS, emergency funding has been requested from Congress to educate Americans about protecting themselves, reduce the mosquito population, and accelerate Zika vaccine research. Each of these steps is vital to reducing the likelihood that pregnant women will be exposed to the Zika virus; and

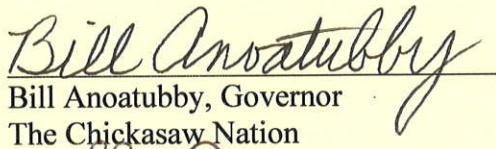
WHEREAS, the ITC supports the request for emergency supplemental funding with a set-aside for Federally-Recognized Tribes to slow the spread of the Zika virus and avert a wave of preventable birth defects and to provide emergency resources necessary to protect pregnant women, infants and children from this devastating infection.


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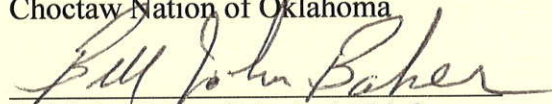
NOW THEREFORE BE IT RESOLVED THAT, the ITC is in support of the emergency supplemental funding with a set-aside for Federally-Recognized Tribes for the Zika virus.

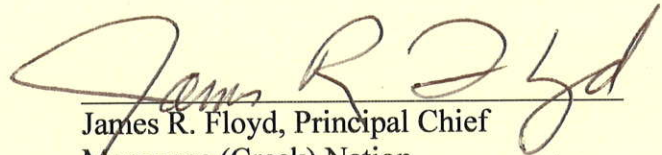
CERTIFICATION

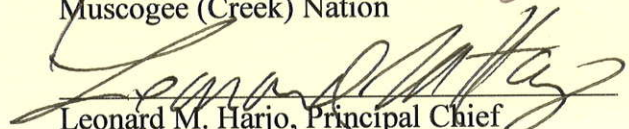
The foregoing resolution was adopted by the Inter-Tribal Council of the Five Civilized Tribes meeting in Catoosa, Oklahoma on this 8th day of April, 2016, by a vote of all for 0 against and 0 abstentions.


Bill Anoatubby, Governor
The Chickasaw Nation


Gary Batton, Chief
Choctaw Nation of Oklahoma


Bill John Baker, Principal Chief
Cherokee Nation


James R. Floyd, Principal Chief
Muscogee (Creek) Nation


Leonard M. Harjo, Principal Chief
Seminole Nation of Oklahoma