

RESOLUTION OF THE
NAABIK'ÍYÁTI' COMMITTEE OF THE
23RD NAVAJO NATION COUNCIL - Third Year, 2017

AN ACTION

RELATING TO HEALTH, EDUCATION AND HUMAN SERVICES AND NAABIK'ÍYÁTI'; SUPPORTING THE DINÉ COLLEGE IN SEEKING TO ESTABLISH THE NATIVE AMERICAN RESEARCH CENTERS FOR HEALTH (NARCH); AND SUPPORTING DINÉ COLLEGE'S PROPOSAL FOR RESEARCH IN THE AREAS OF NAVAJO STUDENT CAREER ENHANCEMENT, INCREASING ACCESS TO HEALTHY FOOD IN THE NAVAJO NATION AND UNDERSTANDING AND ADDRESSING THE GROWING BURDEN OF INVASIVE DISEASE CAUSED BY STAPHYLOCOCCUS ARUEUS AND GROUP "A" STREPTOCOCCUS AMONG AMERICAN INDIANS

Section One. Authority

- A. The Health, Education and Human Services Committee (HEHSC) is a standing committee of the Navajo Nation Council. The Committee is empowered to review and recommend resolutions regarding certain matters, including health, education and social services. 2 N.N.C. §§ 164 (A)(9), 400 (A), 401 (B)(6)(a) (2012); see also C0-45-12.
- B. The Naabik'iyáti' Committee is a standing committee of the Navajo Nation Council. Among other duties and responsibilities, it "coordinate[s] all federal, county and state programs with other standing committees and branches of the Navajo Nation government to provide the most efficient delivery of services to the Navajo Nation. 2 N.N.C. §701(A)(4)(7).

Section Two. Findings

- A. Diné College is a tribally controlled college within the Navajo Nation. It is seeking to establish a Native American Research Center for Health (NARCH) with funding from the National Institute of Health.
- B. Diné College seeks funding for research proposals in the areas of Navajo Student Career Enhancement; Increasing Access to Healthy Food on the Navajo Nation; and Understanding and Addressing the Growing Burden of Invasive Disease Caused by Staphylococcus Arueus and Group "A" Streptococcus Among American Indians. See Exhibit "A"
- C. The Navajo Nation proposed projects will be submitted to the Navajo Nation Human Research Review Board to ensure compliance with Navajo Nation ethical standards.

- D. The requirements for NARCH funding include the requirement of a Tribal Resolution approving of the respective application.
- E. The Navajo Nation provided endorsement of previous efforts by Diné College most recently on October 13, 2016. See Exhibit "B".
- F. The Navajo Nation finds it to be in the best interest of the Navajo Nation to support Diné College in seeking to establish Native American Research Centers for Health and to support Diné College's proposals for research in Navajo Student Career Enhancement, Increasing Access To Healthy Food in the Navajo Nation and Understanding and Addressing the Growing Burden of Invasive Disease Caused by Staphylococcus Arueus and Group "A" Streptococcus Among American Indians. See Exhibit "A".

Section Three. Approval

The Navajo Nation hereby supports Diné College in seeking to establish Native American Research Centers for Health and supports Diné College's proposals for research in Navajo Student Career Enhancement, Increasing Access To Healthy Food in the Navajo Nation and Understanding and Addressing the Growing Burden of Invasive Disease Caused by Staphylococcus Arueus and Group "A" Streptococcus Among American Indians. See Exhibit "A".

CERTIFICATION

I hereby certify that the foregoing resolution was duly considered by the Naabik'iyáti' Committee of the 23rd Navajo Nation Council at a duly called meeting in Window Rock, Navajo Nation (Arizona), at which a quorum was present and that the same was passed by a vote of 16 in Favor and 00 Opposed, this 12th day of October, 2017.

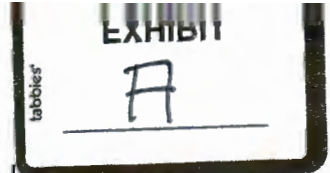


LoRenzo C. Bates, Chairperson
Naabik'iyáti' Committee

Motion: Honorable Dwight Witherspoon
Second: Honorable Jonathan Perry

Chairperson Bates not voting

OVERVIEW OF NARCH PROPOSAL FROM DINE' COLLEGE



American Indians have succeeded in face of adversity. By 2012, the number of American Indian and Alaska Native (AI/AN) students enrolled in higher education more than doubled over the past 30 years; more than 330 Tribal and Urban American Indian (AI) health programs have drawn upon their unique cultural assets to teach that behavior change can prevent and control diabetes; more than 53 AIAN researchers have received National Institute of Health (NIH) funded awards; and the average AI life span has extended from 60 years of age in 1950 to the current 71 years (Weedeman 2008; Shavers et al. 2005; Office of Minority Health 2012).

Clearly grave health disparities still do exist. AI populations do not experience the same quality of life and health outcomes or benefit from the health infrastructure enjoyed by the general U.S. population. AIs have the lowest high school and college graduation rates in the nation and are the least well represented minority in the health and medical professions (Weedeman 2008). AIs suffer disproportionately from diabetes, substance abuse, unintentional injury/motor vehicle accidents, suicide and certain infectious diseases and are more likely to live in poverty than any other US minority (Adekoya 2015; CDC 2010; US Census 2010). Yet, success does occur and strides made. AI communities' assets and paths of accomplishment and resilience largely have been ignored by public health and health research communities.

The goal of the Navajo NARCH Partnership is to establish a multi-institutional education pathway and conduct culturally relevant, evidenced based research to build healthy communities to yield Navajo health professionals and researchers to support the Navajo Nation's right to exercise its sovereignty, role and responsibilities to achieve health equity. The proposed Navajo NARCH Partnership represents a partnership and collaboration between Dine College's Division of Science, Northern Arizona University's (NAU) Department of Health Sciences, Brigham and Women's Hospital (BWH), John Hopkins University's Center for American Indian Health and a Center Advisory Board composed of representatives from Navajo Department of Health, Indian Health Service and Tribal leadership to create public health training and research experiences for Navajo high school students, undergraduate, and graduate students. The proposed NARCH will consist of an administrative component to ensure the funding and coordination of all activities, a Student Enhancement Project and two full research projects.

Specific Aims of the Center are:

Aim 1: To develop AI/AN Scientists and Health Professionals through a variety of educational programs to attract additional students to biomedical and public health research, to enhance research skills and knowledge of undergraduate students, graduate students, and Navajo health employees, and to engage students of all levels in mentored high quality research efforts.

Aim 2: To foster the continued growth of the relationship between Diné College, Navajo Nation Department of Health, Northern Arizona University, Brigham and Women's Hospital, and Johns Hopkins University to engage these partners in meeting Navajo community health needs.

Aim 3: To document the assets and address the health disparities between health indicators in Navajo communities through support for original research, and for collaboration on use of research data and results to implement new programs, seek additional support, educate health researchers and professionals, and generate a truly Navajo research agenda.

Relevance: The Center will have a relevant impact on Navajo and AI/AN health by developing a cadre of AI/AN scientists and health professionals through educational programs and research projects designed to increase the numbers of and to improve the research skills of AI/AN investigators and reducing distrust of research by AI/AN communities.



DINÉ COLLEGE

THE HIGHER EDUCATION INSTITUTION OF THE NAVAJO

Board of Regents

DC-JUL-2256-17

RESOLUTION OF THE BOARD OF REGENTS DINÉ COLLEGE

Amending DC-OCT-2221-16, Supporting the Proposal for IHS/NIH Funding for a Native American Research Center for Health (NARCH) in Collaboration with Northern Arizona University, Brigham and Women's Hospital, Johns Hopkins University and the Navajo Nation Department of Health to Conduct Health Research and Develop High School, Bachelor's and Master's Level Programs in Public Health

WHEREAS:

1. The Diné College Board of Regents is empowered to exercise authority and control over Diné College and is responsible for the accomplishment of the Diné College purposes, 10 NNC & 2003 (2005) ed.); and
2. The Diné College is a non-profit post-secondary educational institution chartered by the Navajo Nation Council in 1968 for the purposes of providing educational opportunities to the Navajo people and others in areas important to the economic and social development of the Navajo Nation and other purposes, 10 NNC & 2002; and
3. The Diné College Board of Regents has approved Strategic Goals and Strategic Objectives for 2013-2017 including Strategic Goal #4; "Develop new certificate, associate's, and bachelor's programs and services that are responsive to the needs of the Diné Nation"; and
4. The Science and Physical Education Division, as part of its strategic objectives, has in congruence with the College Board of Regents Strategic Goals and Strategic Objectives, formed a partnership with Northern Arizona University (NAU), Brigham and Women's Hospital (BWH), Johns Hopkins University and the Navajo Nation Department of Health (NNDOH) to :
 - a. Develop American Indian scientists and health professionals through new academic programs;
 - b. Foster the relationship between Diné College, the NNDOH and regional universities to build the Navajo Nation capacity to meet the health needs of the Navajo people; and

- c. Develop culturally relevant approaches to reduce health disparities by supporting original research to inform the development of innovative health programs.
5. The Division has submitted a proposal to the Indian Health Service and National Institutes of health for funding in the amount of \$5,042,989 for a four-year project to implement the activities, led by Mark Bauer, Ph.D., Principal Investigator, (see Attachment A, Diné College Proposal Approval forms for the NARCH Proposal, and Attachment B, Navajo NARCH Partnership Proposal Information) with the following components:
- a. Student Enhancement Project: The Student Career Enhancement component to develop health career pathways from high school through graduate school, led by Dr. Mark Bauer of Diné College and Dr. Nicolette Teufel-Shone of Northern Arizona University;
 - i. Develop High School Outreach Activities in Public Health;
 - ii. Develop a Diné College BS Program in Public Health (with NAU), and
 - iii. Develop and offer a NAU MPH Degree in Indigenous Health at Diné College;
 - b. Research Project: Increasing Access to Healthy Food in Navajo Nation (with BWH, NNDOH WIC): Research on strategies to increase food security and improve the health of Navajo residents, led by Dr. Sonya Shin of Brigham and Women's Hospital and Valerie Tsosie of the Navajo Nation Department of Health (WIC);
 - c. Research Project: Understanding and addressing the growing burden of invasive disease caused by Staphylococcus aureus and Group A Streptococcus in American Indians (with JHU, NNDOH Epidemiology Center): Research to improve our understanding of the impact of these diseases and to develop health promotion and local capacity, led by Dr. Laura Hammitt of Johns Hopkins University and Delvin Yazzie of the Navajo Nation Department of Health.

NOW THEREFORE BE IT RESOLVED THAT:

1. The Diné College Board of Regents does hereby approve and support the Proposal for IHS/NIH Funding for a Native American Research Center for Health (NARCH) in Collaboration with Northern Arizona University, Brigham and Women's Hospital, Johns Hopkins University and the Navajo Nation Department of Health to Conduct Health Research and Develop High School, Bachelor's and Master's Level Programs in Public Health.

2. The Diné College Board of Regents hereby authorizes, empowers and directs the President to perform all actions deemed necessary and proper to effectuate the purpose of this resolution.

CERTIFICATION

I hereby certify that the foregoing resolution was duly considered by the Diné College Board of Regents at a duly called meeting held in Tsaile, Arizona at which a quorum was present and that same was passed by a vote of 5 in favor, 0 opposed and 0 abstained, this 21st day of July, 2017.

ATTACHMENT(S)

1. NARCH Partnership
2. Grant proposal


Greg H. Bigman, President
Diné College Board of Regents

MOTION: Regent Lee
SECOND: Regent BeGaye

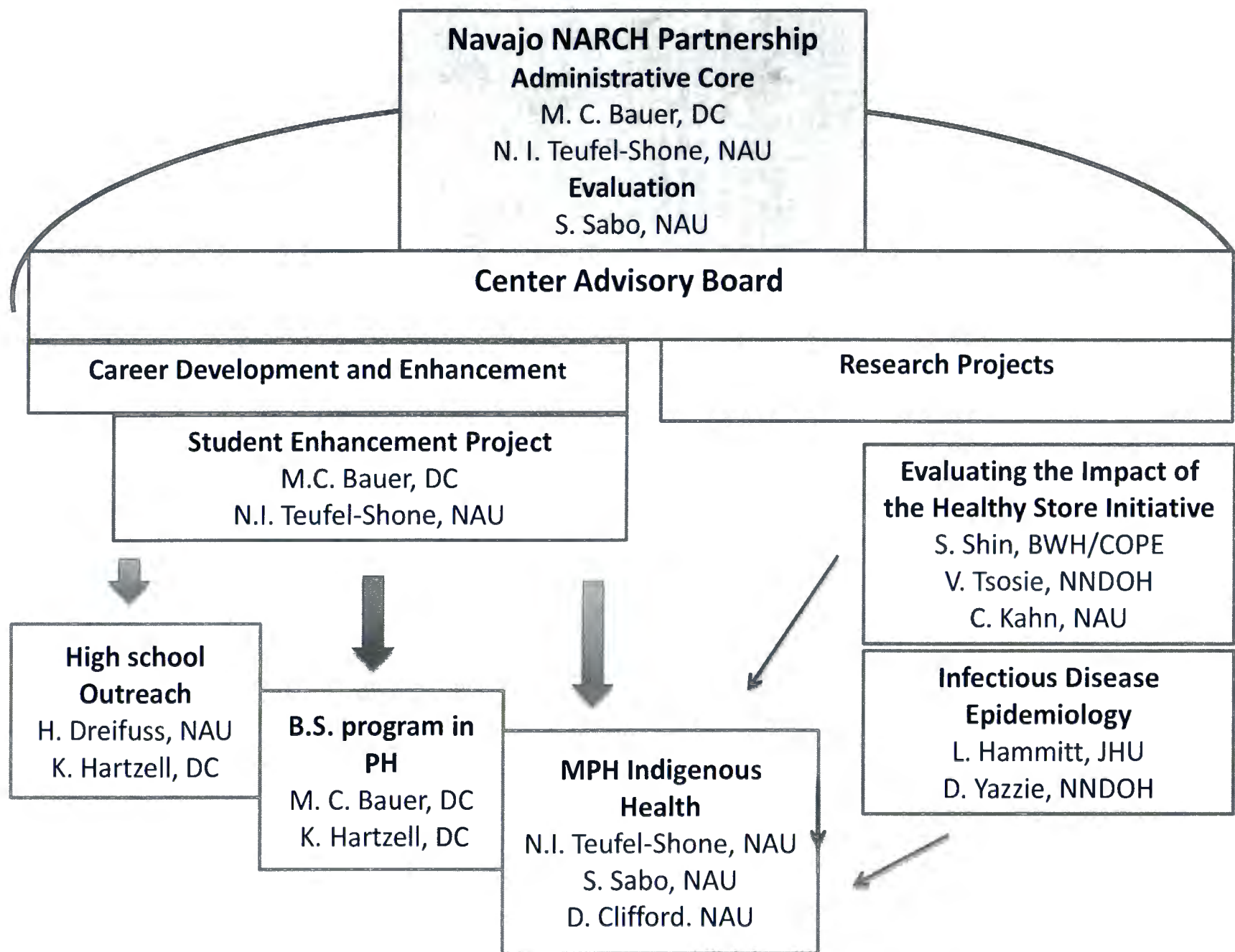


Figure 2 : Navajo NARCH Partnership Organizational Chart

Navajo NARCH Partnership Proposal 2018 – 2022

Component: STUDENT CAREER ENHANCEMENT PROJECT

M.C. Bauer, Diné College
N.I. Teufel-Shone, Northern Arizona University

Background

Significant disparities separate Native populations from the health and health infrastructure enjoyed by the general U.S. population. To develop culturally relevant approaches to building healthy communities, more Native health professionals and researchers are needed for Native Nations to exercise their sovereignty including roles and responsibilities to achieve health equity. Yet, for aspiring health professionals on rural reservations, education and training opportunities are limited.

The Navajo Native American Research Center for Health Partnership's (NNARCHP) Student Enhancement Project (SEP) will build and institutionalize the human infrastructure needed to conduct evidence-based health research relevant and essential public health services need to improve the well being of Navajo people. SEP builds on Diné College's demonstrated ability to collaborate with institutions of higher education to enhance the Navajo Nation's professional health research capacity by training Navajo students, practitioners, and researchers.

Specific Aims

Using a "educational pathway approach" to resources within the Navajo Nation, the specific aims of this project are to:

1. Increase the number of high school students familiar with health related professions;
2. Enhance the Diné College Bachelor of Science degree in Public Health (BSPH) by developing local research experiences, upgrading Diné College's 10-week Summer Research Enhancement Program (SREP) from a sophomore to a senior capstone, gaining accreditation with the Council of Public Health Education (CEPH) and strengthening alignment with graduate level programs;
3. Develop and offer a Northern Arizona University's (NAU) MPH degree with an Indigenous Health concentration tailored to the practice and research needs of the Navajo Department of Health, Indian Health Service (IHS) and Diné College;
4. Mentor AI post-graduate students.

Approaches

To achieve these aims, the SEP will leverage existing academic partnerships and coordinate with the NNARCHP's Administrative Core and Research Projects to provide educational opportunities:

- service learning program for high school students;
- practicum experiences for Diné College bachelor level students and
- field based service and research opportunities within a MPH degree program offered through on-line and face-to-face courses on the Diné College campus.

Evaluation

Evaluation of project impact will be tracked quantitatively, specifically through student enrollment, completed courses, degrees awarded, and qualitatively, through student voice documenting factors associated with academic success and application of learned skill sets.

The project is in the process of being submitted to the Navajo Nation Human Research Review Board, and of course will be carried out only in compliance with that Board's approval process.

Summary of Research Proposal:

“Evaluating the Impact of the Healthy Store Initiative”

Rates of food insecurity in Navajo Nation are among the highest in the United States, and the U.S. Department of Agriculture (USDA) has classified Navajo Nation as a food desert. The “Navajo Healthy Stores Initiative” works to increase the availability of healthy, affordable foods in Navajo communities and simultaneously promote healthy purchasing behavior among community members. Using a multiple baseline interrupted time series approach, we will evaluate the impact of the Healthy Store Initiative on the Navajo food environment and consumer behavior, to understand if the initiative increases availability of healthy foods and results in healthier purchasing behavior among local shoppers. Furthermore, we will use a mixed methods approach to identify multi-level factors associated with healthy purchasing and understand the impact of the initiative store outreach specialists and retailers.

This study will inform future policy and community-based efforts to reduce food security in Navajo Nation. Implementation resources and toolkits will be developed to allow replication in other rural and/or American Indian communities. Given the critical importance of food security on the growing burden of diet-related disease in the United States, system level efforts to change the food environment and research to evaluate impact are needed. This study will be led by a coalition of Navajo community members and will allow emerging Native researchers, research trainees, and community members to gain skills and understanding of community-based research in their own communities.

SPECIFIC AIMS

Rates of food insecurity in Navajo Nation are among the highest in the United States, and the U.S. Department of Agriculture (USDA) has classified Navajo Nation as a food desert. Unreliable access to sufficient healthy foods is driving up rates of obesity, diabetes, and cardiovascular disease. In fact, more than 75% of households in Navajo Nation experience food insecurity, lacking consistent access to healthy and affordable foods. Interventions that solely target individual behavior are simply not adequate to reduce diet-related health disparities in Navajo Nation and in other rural tribal communities.

In order to address health disparities in Navajo Nation, we propose to deliver and evaluate a multi-level intervention to address social and economic barriers to food security and good health in Navajo Nation. Since 2014, COPE has worked to develop the “Healthy Navajo Stores Initiative,” aimed at increasing the availability of healthy, affordable foods in Navajo communities and simultaneously promoting healthy purchasing behavior among community members. This intervention is comprised of store outreach and community promotion. Local community members are trained as “Store Outreach Specialists” and work closely with local store managers and owners to increase the availability and promotion of healthy, affordable foods. In addition, promotional campaigns targeting local community members are implemented to raise awareness of the Healthy Diné Nation Act (Navajo Nation’s junk food tax) and encourage local purchasing of traditional and healthy foods. This programmatic intervention mobilizes partnerships within Navajo communities, by engaging local retailers, growers, consumers, and food activists as collective partners.

We propose to carry out a prospective, observational study to evaluate the Healthy Navajo Stores Initiative. We will engage stores and document when each one agrees to participate in the “Healthy Stores Initiative” as the initiative start date. Non-participating stores will remain in the control group. We will use a multiple baseline interrupted time series design to evaluate the impact of stores on two outcomes: 1) availability of healthy foods; 2) purchasing of healthy foods. Furthermore, we will use a mixed methods approach to understand characteristics associated with healthy purchasing behavior, as well as the influence of cultural protective factors on the work of Store Outreach Specialists and their perceived self-efficacy. We will carry out the following specific aims:

- 1) Assess the impact of the Healthy Navajo Stores Initiative on availability of healthy foods. *We hypothesize that participating stores will have greater availability of healthy foods, compared with non-participating stores.*
- 2) Assess the impact of the Healthy Navajo Stores Initiative on purchasing of healthy foods. *We hypothesize that consumers shopping at participating stores will purchase more healthy foods, compared with those shopping at non-participating stores.*
- 3) Understand multi-level factors on healthy purchasing behavior. *At the community level, we hypothesize that healthy purchasing behavior is more common in communities that are further from market centers; at the consumer level, we hypothesize that individuals who acknowledge the importance of supporting local economy are more likely to purchase healthy foods at local stores.*
- 4) Understand the impact of the Initiative on store outreach specialists. *We hypothesize that store outreach specialists will identify cultural protective factors as critical to support their work and will report greater self-efficacy to improve health outcomes in their community as a result of their involvement.*

At the end of this project, we will have determined the holistic impact of a programmatic intervention when implemented at scale across Navajo Nation. Deliverables will include open-source toolkits and training materials to replicate the Store Initiative in other reservation-based settings. The study will serve as a platform to provide structured mentorship and research experience to Native research trainees at undergraduate, Masters, and post-doctoral levels. Trainees will be involved at all stages of research, including publication and dissemination. We will also involve Navajo community members in the design and implementation of the Healthy Navajo Stores Initiative as well as data collection, interpretation, and dissemination.

SUMMARY OF RESEARCH PROPOSAL:

“Understanding and addressing the growing burden of invasive disease caused by *Staphylococcus aureus* and Group A *Streptococcus* in American Indians

In the southwest United States, invasive diseases caused by *Staphylococcus aureus* (SA) and Group A *Streptococcus* (GAS) are a growing concern among American Indians. SA and GAS can colonize the healthy human host and commonly cause mild illnesses. Under some conditions, they can cause more invasive and severe infections, resulting in a high burden of infections, hospitalizations, healthcare costs and deaths each year. Over the past year, many cases of SA and GAS have been observed on the Navajo Nation and further evaluation of these infections have been determined to be a public health priority. There are currently few effective prevention strategies to reduce the burden of disease and a paucity of recent studies evaluating the primary drivers of disease among American Indian populations. This proposal builds on the long-standing and successful collaboration between the Navajo Nation, the Navajo Epidemiology Center, the Indian Health Service and the Johns Hopkins Center for American Indian Health to address this public health problem by furthering our understanding of the epidemiology of SA and GAS and developing of a culturally-grounded health promotion campaign to increase awareness of SA and GAS on the Navajo Nation. The goals of this proposal are to: 1) establish the burden of invasive disease caused by SA and GAS; 2) develop and deliver a culturally-grounded health promotion campaign to increase awareness of SA and GAS disease, prevention and management; 3) build capacity of American Indians to conduct research and surveillance on the Navajo Nation; and 4) assess molecular characteristics of invasive SA and GAS isolates. This research will systematically document the burden of invasive SA and GAS disease and update our understanding of the strains circulating in the community, which may be contributing to high rates of disease. Findings from this work will provide a foundation for developing and targeting interventions to reduce the growing burden of SA and GAS disease in the Navajo community.

OVERVIEW AND SPECIFIC AIMS

In the southwest United States (US), invasive diseases caused by *Staphylococcus aureus* (SA) and Group A *Streptococcus* (GAS) are a growing concern.¹⁻³ SA and GAS can colonize the nose and throat of healthy humans and are transmitted by aerosolized respiratory droplets or contaminated surfaces. They commonly cause mild illnesses, such as skin infections and pharyngitis (strep throat), but can cause more invasive and severe infections, such as meningitis, pneumonia, sepsis, and necrotizing fasciitis, sometimes resulting in amputation or death. Both bacteria are responsible for a high burden of infections, hospitalizations, healthcare costs, and deaths each year.^{4,5} They share similar risk factors for disease, including the presence of underlying comorbidities, such as obesity and diabetes.^{6,7} **The Navajo Nation, one of the largest American Indian tribes, in the southwest US has experienced several recent outbreaks of GAS^{1,8}, and hospitalizations due to methicillin-resistant *Staphylococcus aureus* (MRSA) have increased more than 10 times over the past few decades.³** The rate of invasive GAS for American Indians in Arizona from 2008-2013 was more than twice the rest of the population in the state.⁹ Risk factors among American Indians living on federally established tribal lands, including high rates of poverty, and comorbidities such as obesity and diabetes, household crowding and limited access to running water, may contribute to these high disease rates. The epidemiology of these diseases has also changed recently in the syndromes observed and the strains causing disease. Few effective prevention strategies and no vaccines are available to address this public health problem. To develop appropriate prevention strategies, studies are needed to establish the burden of disease and determine the primary drivers of this high burden of disease.

The scientific premise of this proposal is based on the paucity of recent studies exploring the epidemiology of SA and GAS among American Indians, including establishing the burden of disease and the genomic characteristics of strains causing disease in the community. This proposal builds on the long-standing and successful collaboration between the Navajo Nation, the Indian Health Service and the Johns Hopkins Center for American Indian Health to fill these gaps using innovative and rigorous methods to further our understanding of the epidemiology of SA and GAS and to develop a community-informed health promotion campaign to begin to address this public health problem.

Primary Aim 1. Quantify the rate of invasive disease due to SA and GAS in the Navajo population using an active laboratory-based surveillance system. *We hypothesize that the incidence rate of invasive SA and GAS on Navajo Nation will be greater than the US general population.* Quantifying the rate of invasive SA and GAS disease will provide foundational data to advocate for resources and policies to reduce disease.

Primary Aim 2. Develop and deliver a community-informed health promotion campaign to raise awareness of SA and GAS disease and prevention strategies. Given the frequency of invasive SA and GAS infections, there is an urgent need to improve awareness of these conditions. *We hypothesize that awareness of SA and GAS is poor and that a health promotion campaign, informed by the community through in-depth interviews and focus groups and delivered by Navajo research staff, will improve community and healthcare provider awareness of SA and GAS disease and prevention.*

Primary Aim 3. Build capacity of Navajo tribal members to conduct epidemiologic research. Through these collaborative research studies and training opportunities for researchers at the Navajo Epidemiology Center and students in health-related fields, we will build capacity of current and future generations of Navajo health professionals to monitor, investigate and address public health problems of importance on the Navajo Nation.

Secondary Aim. Assess the genomic characteristics of invasive SA and GAS isolates using whole-genome sequencing. *We hypothesize that invasive SA and GAS disease is associated with specific lineages. For SA, we hypothesize that there is a higher prevalence of genotypes associated with community-acquired infections and that a higher proportion is methicillin-resistant compared to the US general population.*

Given the high burden of SA and GAS invasive disease observed in the community, **the Navajo Nation, Navajo Epidemiology Center and Indian Health Service, have determined further evaluation of SA and GAS infections to be a public health priority for the NARCH X grant.** The proposed studies will be among the first to document the burden of SA and GAS disease in the Navajo community and will update our understanding of the strains circulating in the community and the drivers of disease. Findings from these studies will provide a foundation for developing and targeting future interventions to reduce the burden of SA and GAS disease in the Navajo community.

RESOLUTION OF THE
NAABIK'ÍYÁTI' COMMITTEE OF THE
NAVAJO NATION COUNCIL

23rd NAVAJO NATION COUNCIL -- Second Year, 2016

AN ACTION

RELATING TO HEALTH, EDUCATION AND HUMAN SERVICES AND NAABIK'ÍYÁTI';
SUPPORTING DINÉ COLLEGE IN SEEKING TO ESTABLISH NATIVE AMERICAN
RESEARCH CENTERS FOR HEALTH; AND SUPPORTING DINÉ COLLEGE'S PROPOSALS
FOR RESEARCH IN THE AREAS OF NAVAJO CULTURAL RESILIENCE, HEALTHY FOOD,
CANCER CARE AND HEALTH TRAINING PROGRAMS

WHEREAS:

- A. The Health, Education and Human Services Committee (HEHSC) is a standing committee of the Navajo Nation Council. It has the authority to review and recommend resolutions regarding certain matters, including health, education and social services. 2 N.N.C. §§ 164 (A) (9), 400 (A), 401 (B) (6) (a) (2012); see also CO-45-12.
- B. The Naabik'íyáti' Committee is a standing committee of the Navajo Nation Council. It has the authority to "review and continually monitor the programs and activities of federal and state departments and to assist development of such programs designed to serve the Navajo People and the Navajo Nation through intergovernmental relationships between the Navajo Nation and such departments." 2 N.N.C. §701(A) (7).
- C. Diné College is a tribally controlled college within the Navajo Nation. It is seeking to establish a Native American Research Center for Health with funding from the National Institute of Health. Diné College seeks funding for research proposals in the areas of (a) Navajo cultural resilience using community based participatory research to identify Navajo cultural resiliency factors that can be assessed and integrated into health promotion efforts thereby helping to reduce health disparities for American Indian and Alaska Native communities, (b) access to healthy food within the Navajo Nation by evaluating a multi-level intervention to address social and economic barriers to food security and good health in the Navajo Nation, (c) improving cancer care on the Navajo Nation by building a collaborative network of cancer providers, cancer survivors, and tribal program leaders to better understand the needs and assets to improve cancer care in the Navajo Nation, and (d) expanding existing public health education and research training programs through building an educational enhancement program to develop the human infrastructure needed to conduct evidence-based health research relevant and essential to improving the well-being of the Navajo People using an educational pipeline approach aimed at high school and undergraduate students and public

health and health educators, administrators and practitioners. See Exhibit "A."

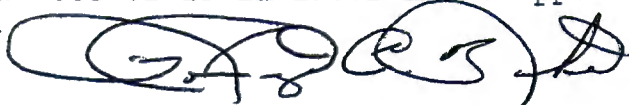
- D. The projects will be submitted to the Navajo Nation Human Research Review Board to ensure compliance with Navajo Nation ethical standards.

NOW THEREFORE BE IT RESOLVED THAT:

The Navajo Nation hereby supports Diné College in seeking to establish Native American Research Centers for Health. The Navajo Nation further supports Diné College's proposals for research in the areas of Navajo cultural resilience, access to healthy food, improving cancer care and expanding health training programs. See Exhibits "A."

CERTIFICATION

I hereby certify that the foregoing resolution was duly considered by the Naabik'íyáti' Committee of the 23rd Navajo Nation Council at a duly called meeting in Window Rock, Navajo Nation (Arizona), at which a quorum was present and that the same was passed by a vote of 13 in favor and 0 opposed, this 13th day of October 2016.

A handwritten signature in dark ink, appearing to read "LoRenzo C. Bates", written over a horizontal line.

LoRenzo C. Bates, Chairperson
Naabik'íyáti' Committee

Motion: Honorable Leonard Pete
Second: Honorable Davis Filfred

NAVAJO NATION

RCS# 576

Naa'bik'iyati Committee

10/13/2016

05:10:18 PM

Amd# to Amd#

Legislation No. 0356-16

PASSED

MOT Pete
SEC Filfred

Supporting Dine College in
Seeking to Establish Native
American Research Centers....

Yea : 13

Nay : 0

Not Voting : 9

Yea : 13

Begay, K
Begay, NM
Brown
Crotty

Damon
Daniels
Filfred

Jack
Pete
Phelps

Smith
Tsosie
Yazzie, P

Nay : 0

Not Voting : 9

Bates
BeGaye, N
Bennett

Chee
Hale
Perry

Shepherd
Slim
Tso

Witherspoon
Yazzie

#12

23rd Navajo Nation Council Naabik'iyati' Committee

Date: October 12, 2017

Legislation No. 0382-17Motion: Dwight WitherspoonSecond: Jonathan Perry

ALL DELEGATES:

	Yea	Nay
BATES, LoRenzo		
BEGAY, Kee Allen Jr.	✓	
BEGAY, Norman M.	✓	
BEGAY, Steven	✓	
BEGAYE, Nelson	✓	
BENNETT, Benjamin L.		
BROWN, Nathaniel	✓	
CHEE, Tom T.		
CROTTY, Amber K.		
DAMON, Seth	✓	
DANIELS, Herman	✓	
FILFRED, Davis		
HALE, Jonathan L.	✓	
JACK, Lee Sr.		
PERRY, Jonathan	✓	
PETE, Leonard H.	✓	
PHELPS, Walter	✓	
SHEPHERD, Alton Joe		
SLIM, Tuchoney Jr.	✓	
SMITH, Raymond Jr.	✓	
TSO, Otto		
TSOSIE, Leonard	✓	
WITHERSPOON, Dwight	✓	
YAZZIE, Edmund	✓	

GRAND TOTAL

16 0

CERTIFICATION:



Honorable LoRenzo C. Bates
Speaker

BY COMMITTEE:

	Yea	Nay	TOTAL
BFC:			
CHEE, Tom T.			
DAMON, Seth			
JACK, Lee Sr.			
SLIM, Tuchoney Jr.			
WITHERSPOON, Dwight			
TSOSIE, Leonard			
HEHSC:			
BEGAY, Norman M.			
BEGAY, Steven			
BEGAYE, Nelson			
BROWN, Nathaniel			
CROTTY, Amber K.			
HALE, Jonathan L.			
LOC:			
BEGAY, Kee Allen Jr.			
DANIELS, Herman			
SMITH, Raymond Jr.			
TSO, Otto			
YAZZIE, Edmund			
RDC:			
BENNETT, Benjamin L.			
FILFRED, Davis			
PERRY, Jonathan			
PETE, Leonard H.			
PHELPS, Walter			
SHEPHERD, Alton Joe			
SPEAKER:			
BATES, LoRenzo			
(Votes only in a tie)			

GRAND TOTAL

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