



2017

UNITED STATES DEPARTMENT OF VETERANS AFFAIRS

Executive Summary Report

Celebrating Our Heroes:
Progress, Priorities, and Partnerships

VA



U.S. Department of Veterans Affairs
Office of Tribal Government Relations



Office of
Tribal Government
Relations

Abbreviations, Terms, and Definitions

Abbreviations/ Terms	Definitions
HUD-VASH	Housing and Urban Development-VA Supportive Housing
IHS	Indian Health Service
MOU	Memorandum of Understanding
NADL	Native American Direct Loan program
OHE	Office of Health Equity
ORH	Office of Rural Health
OTGR	Office of Tribal Government Relations
PTSD	Post-traumatic stress disorder
RITT	Rural Interdisciplinary Team Training
THP	Tribal Health Program
TVR	Tribal Veteran Representative
TVSO	Tribal Veteran Service Officer
VA	Department of Veterans Affairs
VHA	Veterans Health Administration
VISN	Veterans Integrated Service Network

2017

UNITED STATES DEPARTMENT OF VETERANS AFFAIRS

Executive Summary Report

Celebrating Our Heroes:
Progress, Priorities, and Partnerships

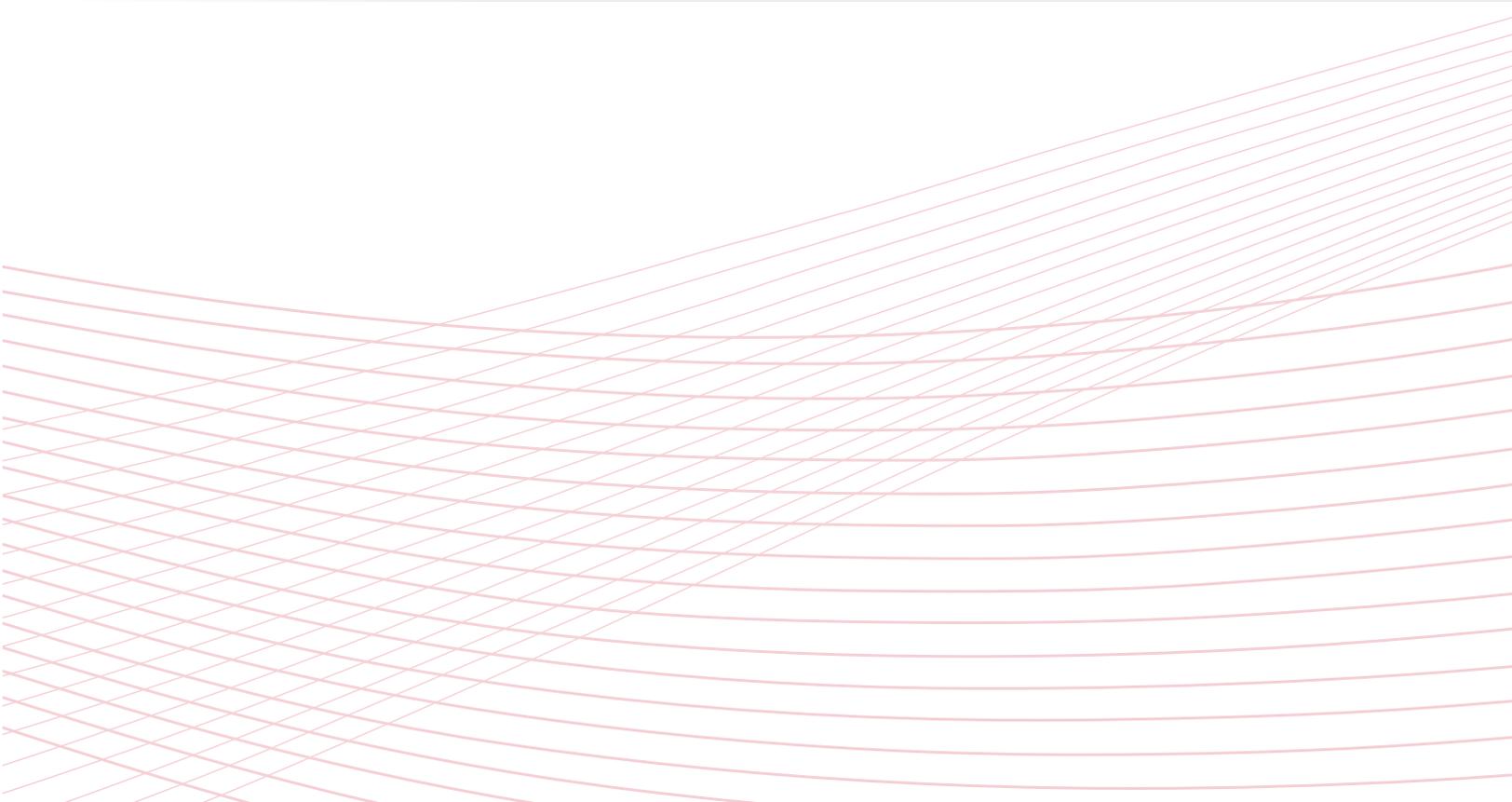


Table of Contents

Introduction	1
OTGR Update	2
Tribal Consultation Activities	2
OTGR Newsletter	3
Outreach Events	3
VA-IHS MOU	5
Advancing the Goals of the MOU	5
VA-IHS MOU Accomplishments	6
VA-IHS MOU Work Groups	7
VHA-IHS National Reimbursement Agreement	7
Tribal Health Program Reimbursement Agreements	8
VA-IHS MOU Outreach and Awareness	9
Tribe’s Top 5 Priorities for Serving Indian Country	10
Tribal Priority: Access to Medical Care	10
Collaborations under the VA-IHS MOU	11
Telehealth Technology	13
Cultural Sensitivity in Health Care	14
VA Senior Leadership Engagement with Tribes	21
Challenges to Accessing Medical Care	22
Tribal Priority: Addressing Housing and Homelessness	22
Native American Direct Loan Program	22
Tribal Housing and Urban Development-Veterans Affairs Supportive Housing	24
Veterans Stand Down Events	27
Challenges to Addressing Homelessness	28
Tribal Priority: Treatment for PTSD and Mental Health	28
Access to Mental Health Services	29
Cultural Awareness in Mental Health Services	30
Tribal Priority: Understanding Benefits	31
Tribal Veterans Service Organizations and Officers	31
Outreach Approaches	33
Memorial Services	36
Tribal Priority: Transportation	38
Highly Rural Transportation Grant	38
Local Transportation Strategies	38
Conclusion	39
Regional Contacts	40



Introduction

Passamquoddy Veterans with Chief William Nicolas, Passamaquoddy Indian Township.

The Department of Veterans Affairs (VA) is working to engage Indian Country, build strong relationships with tribal governments, and increase the number of American Indian and Alaska Native (AI/AN) Veterans who access VA programs, benefits and services — all to better serve the warriors of Indian Country who have given so much to our Nation.

American Indians and Alaska Natives serve in the U.S. military at the highest rate of all races. However, American Indian and Alaska Native Veterans are consistently underrepresented among Veterans who sign up for and use the services and benefits they have earned. VA is working to connect more AI/AN Veterans to VA programs, benefits and services. VA has developed programs specifically for Indian Country designed to increase access to benefits and services.

In recognition of and with respect for the unique government-to-government relationship between the United States and tribal nations, VA, with the support of the Office of Tribal Government Relations (OTGR), engages with tribes through tribal consultation and outreach.

This report chronicles how VA engaged with Indian Country in 2017 and focuses on activities that honor tribal sovereignty and address top priorities articulated by tribes.

“Gathering our Native Veterans, family and friends as one to know our VA.”

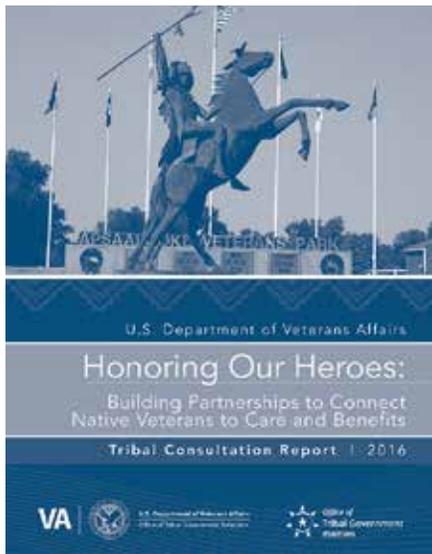
Tony Molina, Honor Guard Director and Tribal Veteran Representative



OTGR Update

Indian Health Service and Veterans Affairs representatives at Phoenix Indian Medical Center.

Recognition of tribal sovereignty is the foundation for VA’s partnership with American Indian and Alaska Native tribes. To honor the government-to-government relationship with tribal nations, OTGR supports VA by assisting with ongoing collaboration and communication with tribes, including formal tribal consultation, as well as outreach through intergovernmental site visits, newsletters, training events, and tribal gatherings.



2016 VA/OTGR Tribal Consultation Report

Tribal Consultation Activities

Tribal input has helped VA determine how to reach AI/AN Veterans and connect them with services. VA recognizes tribes’ capacity as sovereign nations to provide health care and other services to their Veterans and works to support tribes in these efforts.

- In the fall 2017, VA released the report *Honoring Our Heroes: Building Partnerships to Connect Native Veterans to Care and Benefits*, which summarizes VA’s 2016 tribal consultation activities. Tribal consultation held throughout 2016 created a framework for VA’s engagement with tribal governments during 2017 and informed decisions made by the agency.
- VA is pursuing a Notice of Availability and Request for Comment announcement in the *Federal Register* on the Programmatic Consideration of Historic Properties in Transfer of Property Rights of Vacant and Underutilized Buildings, Structures, and Land. The announcement pertains to an alternative process that VA might use to comply with the requirements of the National Historic Preservation Act. This alternative process is referred to as a Program Comment, and is authorized

by 36 CFR, Section 800.14(e) for sales, public benefit conveyances, demolition, deconstruction, lease, and exchange activities associated with VA's real property portfolio, to help reduce and repurpose, as applicable, unneeded real property assets. It meets compliance requirements of the National Historic Preservation Act, Section 106. Consultation with tribes and Native Hawaiian organizations will assist in identifying potential impacts to historic properties that may have religious and cultural significance within the proposed actions for vacant and underutilized real property.

- VA held a roundtable discussion with tribal health programs on July 12, 2017, to gather feedback on how VA and tribes can work together to update the reimbursements agreements prior to the expiration of the current agreements on June 30, 2019.

OTGR Newsletter

OTGR produces a bi-monthly newsletter, which shares news, upcoming events, and information on VA programs and services with Veterans and organizations that work with them. The newsletter can be viewed on OTGR's webpage at www.va.gov/tribal-government.

Outreach Events

OTGR also conducted outreach events, including benefits fairs and Veterans Training Summits, to connect meaningfully with Veterans and supply information on the services and benefits available from VA. At benefits fairs, guests can visit informational booths to inquire about VA services and benefits. Veterans Training Summits provide information on a variety of services to Veterans in a single location. In addition to hosting outreach events, OTGR coordinated presentations from VA experts about benefits and services for Veterans at major conferences in Indian Country, as well as local tribal and intertribal gatherings. OTGR also conducted intergovernmental site visits across Indian Country to interface with tribal leaders. Table 1 shows the number of outreach activities conducted in 2017.



OTGR Newsletter

Celebrating Our Heroes: Progress, Priorities, and Partnerships

Table 1. OTGR Outreach Events

Outreach Events	Total
Site visits	31
Veterans Training Summits and benefits fairs	26
Participation in intertribal organization meetings (e.g., NCAI, USET, and ATNI)	8

The Veterans Benefits Administration (VBA) also conducted targeted outreach to AI/AN Veterans to increase awareness of and improve access to benefits. In 2017, VBA held 137 outreach events for AI/AN Veterans.

In addition to conducting outreach to connect individual Veterans with programs and services, OTGR and other VA offices conducted outreach to tribes about opportunities for involvement in a variety of VA programs, including those available through a Memorandum of Understanding (MOU) between VA and Indian Health Service (IHS). Additional outreach activities are described, within the sections that correspond to the program or efforts those activities promote.



Suquamish Tribe Veteran Training Summit held on September 26-27, 2017. L to R: Steve Gill, WAVA; Terry Bentley, OTGR; Roosevelt Wiggins, Jr., VA Seattle; Alfie Alvarado-Ramos, WDVA.



VA-IHS MOU

VHA Office of Community Care and VA Intergovernmental Affairs/OTGR with Kewa Pueblo representatives and Rose Weahkee, IHS.

A 2010 MOU between VA and IHS strengthens medical care and helps expand access to services for AI/AN Veterans. The MOU provides a forum for collaborating to improve access to services and care for AI/AN Veterans. It also created a foundation for the Veterans Health Administration (VHA)-IHS national reimbursement agreement, under which VA reimburses IHS for direct health care services provided to AI/AN Veterans, and reimbursement agreements between the VHA and tribal health programs (THPs).

Advancing the Goals of the MOU

The 2010 VA-IHS MOU has 12 goals that aim to connect AI/AN Veterans with services. The goals of the MOU align closely with priorities articulated by tribes during tribal consultation. Advancing the goals of the MOU simultaneously addresses many tribal concerns. Table 2 shows how the MOU goals align with a few of the top tribal priorities.

Table 2. Tribal Priorities and Goals of the 2010 VA-IHS MOU

Tribal Priority	Related MOU Goal(s)
Access to Medical Care	<ul style="list-style-type: none"> • Improve Coordination of Care • Improve Care through Health Information Technology • Enhance Access through the Development and Implementation of New Models of Care Using Technology • Improve Efficiency and Effectiveness • Increase Availability of Services by Developing Payment Reimbursement Policies • Increase Capability and Improve Quality of Workforce Training • Increase Access to Care Through Staff Sharing, Recruitment, and Retention

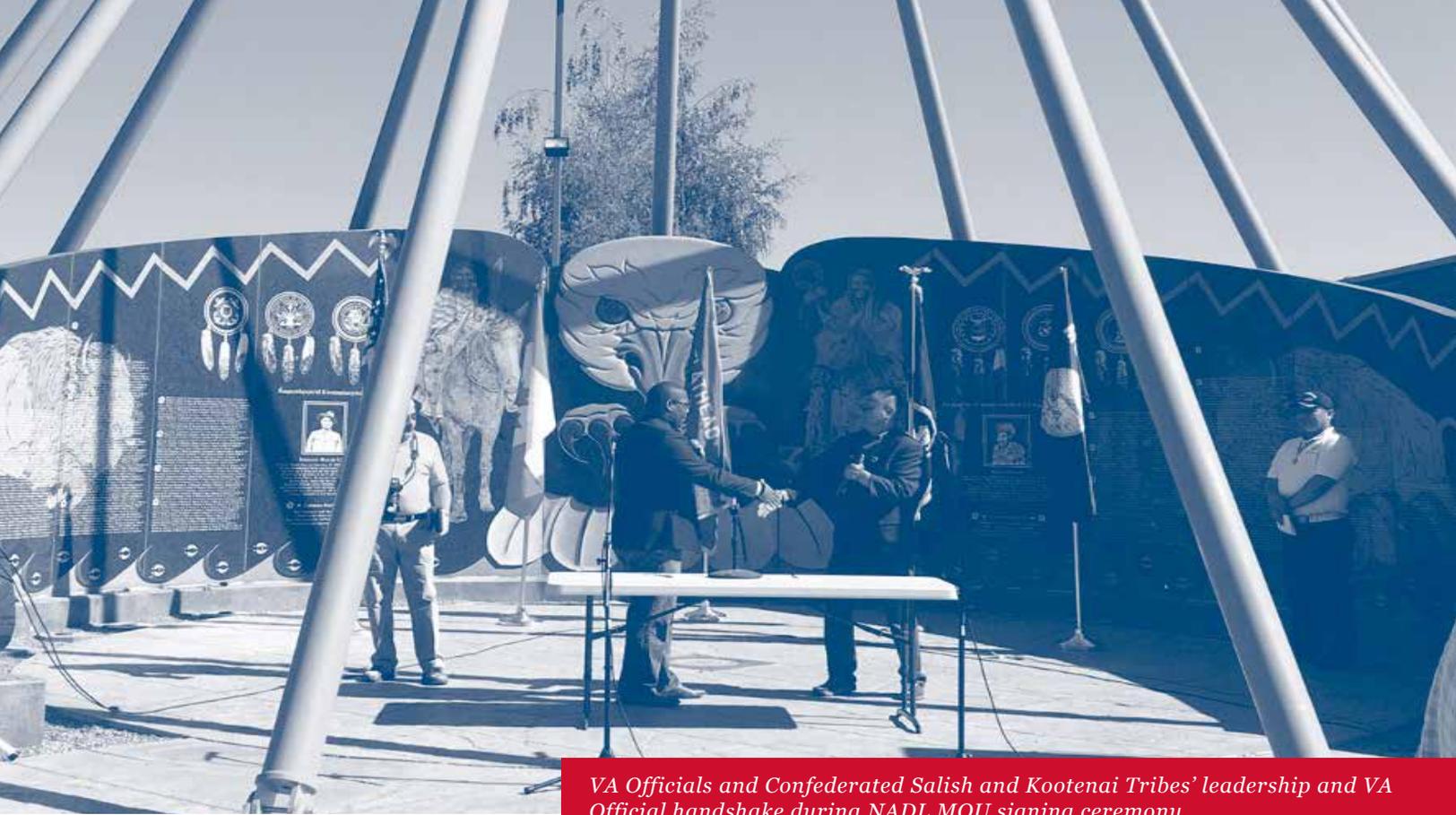
Celebrating Our Heroes:
Progress, Priorities, and Partnerships

Tribal Priority	Related MOU Goal(s)
Understanding Benefits	<ul style="list-style-type: none"> • Increase Access to Services and Benefits • Improve the Delivery of Care through Active Sharing of Care Process, Programs, and Services
Transportation	<ul style="list-style-type: none"> • Increase Access to Services and Benefits

VA-IHS MOU Accomplishments

In 2017, VA worked to advance access to care and benefits under the VA-IHS MOU. Highlights of these efforts include, but are not limited to, the following.

- The number of Veterans served through reimbursement agreements increased to 8,600.
- The total dollar amount reimbursed since the program was launched increased to \$64.1 million.
- The Consolidated Mail Outpatient Pharmacy (CMOP) program processed more than 700,000 prescriptions for IHS patients. Now, 46 IHS service units and 12 tribal facilities have access to CMOP.
- VA and IHS exchanged more than 200 virtual trainings and webinars on clinical competence and cultural sensitivity.
- VAMCs conducted direct outreach to approximately 5,000 AI/AN Veterans.
- The VA-IHS MOU leadership team met quarterly and held a strategic planning meeting in June 2017.
- Grantees of VA’s Grants for Transportation of Veterans in Highly Rural Areas program served 18 tribal communities and a total of 35,000 Veterans across the Nation.
- The Northern Arizona VAMC held a round table for Veteran Service Organizations related to VA and tribal partnerships.
- The Oscar G. Johnson VAMC in Iron Mountain, MI held a town hall at the Bay Mills Indian Community to supply information about services to Veterans.



VA Officials and Confederated Salish and Kootenai Tribes' leadership and VA Official handshake during NADL MOU signing ceremony.

VA-IHS MOU Work Groups

There are three work groups that help implement the VA-IHS MOU's goals. The three groups are:

- 1.** Payment, Reimbursement and Systems
- 2.** Clinical Services (Pharmacy)
- 3.** Training and Recruitment

Former work groups were subsumed under larger VA-IHS efforts to independently foster goals in telehealth technology, care coordination and Electronic Health Record interoperability. The former Cultural Competency work group fully developed and disseminated education material and trainings.

VHA-IHS National Reimbursement Agreement

Under the VHA-IHS national reimbursement agreement signed in 2012, VA reimburses IHS for direct health care services provided to eligible AI/AN Veterans. Local VA medical facilities work with IHS facilities to create implementation plans for the reimbursement process. VA has also entered into reimbursement agreements with THPs, under which VA reimburses THPs for direct health care services provided to eligible AI/AN Veterans.

Celebrating Our Heroes: Progress, Priorities, and Partnerships

This collaboration between VA, IHS, and THPs enables many AI/AN Veterans to access medical care locally, rather than having to travel to VA medical facilities. In January 2017, to continue to ensure accessible health care for AI/AN Veterans, VA and IHS extended the national reimbursement agreement through June 30, 2019.

Tribal Health Program Reimbursement Agreements

To date, VA has entered into a total of 103 reimbursement agreements with tribal health programs. The VHA-IHS national reimbursement agreement covers all IHS direct service locations.

Table 3. Number of tribal health programs and Veterans covered by reimbursement agreements

Reimbursement Agreement Accomplishments	Total
Reimbursement agreements with tribal health programs	103
Number of Veterans served	8,600

Table 4 shows the total amounts reimbursed to tribal health programs and IHS clinics since 2012, including VA reimbursements to tribal health programs in Alaska and the lower 48.

Table 4. Total reimbursement amounts to tribal health programs and IHS clinics

Reimbursements	Total
Reimbursements to tribal health programs	\$35.5 million
Reimbursements to IHS clinics	\$28.8 million
Total reimbursement amount	\$64.1 million

In 2017, VA's Office of Community Care (OCC) provided six training sessions on the reimbursement process for tribal health programs and IHS clinics. OCC held two sessions for IHS clinics, and four trainings for tribal health programs: two for Alaska tribes and two for tribes in the lower 48 states.

VA-IHS MOU Outreach and Awareness

VA works to continually conduct outreach to tribal communities regarding the programs and opportunities available to them under the VA-IHS MOU. Involving tribes in programs under the VA-IHS MOU is an essential component in VA's efforts to respond to tribal input and connect AI/AN Veterans to services. VA makes ongoing efforts to gather tribal input and address tribal priorities for serving AI/AN Veterans. The following section lists top tribal priorities recently identified through a 2016 tribal consultation and describes VA's efforts during 2017 to address those priorities.



Homana Pawiki, OTGR Tribal Specialist, arrives at the Taos Pueblo with the VA Interim Deputy Director via Black Hawk helicopter.



Tribe's Top 5 Priorities for Serving Indian Country

*Mary Culley, OTGR Tribal Specialist, meets with the Chickasaw Nation.
L-R: Governor Bill Annotubby, Phillip Billy, Lt. Governor Jefferson Keel, and
Wayne Scribner.*

In 2016, VA engaged in tribal consultation to identify tribal priorities for serving Veterans in Indian Country. VA asked tribes to identify their top three to five priorities. The five most highly ranked priorities are as follows.

1. Access to medical care
2. Addressing housing and homelessness
3. Treatment for post-traumatic stress disorder (PTSD) and mental health
4. Understanding benefits, including benefits for families
5. Transportation

These priorities framed VA's work in Indian Country during 2017 and will serve as a basis for working with tribes and AI/AN Veterans moving forward. The following sections focus on progress, successes and challenges in each of these five areas.

Tribal Priority: Access to Medical Care

Tribes consistently raised access to health care as a top concern, making it the highest ranked tribal priority. VA strives to increase access to quality health care services for Veterans. Through agreements between VHA and IHS clinics and tribal health programs, VA reimburses many IHS and tribal clinics for services provided to eligible AI/AN Veterans. The VA-IHS MOU serves as a framework for collaborative work between VA, IHS and THPs, including partnership clinics and joint training opportunities. VA also works to integrate telehealth technology, which allows Veterans to access some services virtually. In addition to promoting local opportunities for Veterans to receive medical care, VA works to ensure that health care provided to AI/AN Veterans is culturally appropriate.

“Getting the Veteran in the door is the most important thing. Lowering the barrier to care is the most important thing.”

Steve Gill, *Veteran Services Administrator and Tribal Liaison, Washington State Department of Veterans’ Affairs*

Collaborations under the VA-IHS MOU

The VA-IHS MOU provides a framework for collaboration among VA, IHS, and tribal programs to enhance the availability and quality of health care for AI/AN Veterans. For example, the Charles George VA Medical Center (VAMC) in Asheville, NC, coordinates care for Veterans receiving primary care at Cherokee Indian Hospital and specialty care at the Charles George VAMC to ensure they receive the most convenient, high-quality care possible.

Partnership clinics, where VA health care providers work together with IHS and tribal program staff, and joint training opportunities like the Rural Interdisciplinary Team Training (RITT) program have resulted from collaboration among VA, IHS, and tribal programs under the MOU.

Partnership Clinics

To serve AI/AN Veterans in northern Arizona, the Northern Arizona VA Health Care System (NAVAHCS) partnered with IHS, tribal health programs, and tribal governments to develop partnership clinics. Within these partnership clinics, VA health care providers work alongside IHS and tribal health program staff to deliver quality health care services at the local level. The partnership clinics are established through space and resource sharing agreements to integrate VA staff into IHS and tribal clinics.

NAVAHCS conducted a needs assessment to determine how to develop medical care programs that meet the needs of AI/AN Veterans in the area. NAVAHCS met with about 1,700 Veterans, mostly in one-on-one settings, to clarify their health care needs. NAVAHCS also gathered information through survey mailings, outreach at community gatherings, and discussions with local health care providers. Based on this input, NAVAHCS, IHS, tribal health programs, and tribal governments developed the partnership clinics as a joint effort. They structured the clinics according to specific



Spokane Mobile Medical Unit and VA Team at Nez Perce Tribe Veterans Summit.

needs identified through the needs assessment. For example, the Chinle VA Outreach Clinic employs PTSD counselors, since Veterans in the area identified PTSD counseling and mental health services as a priority need.

The number of Veterans seen through the partnership clinics in northern Arizona has grown. Currently: **3 IHS clinics and 1 tribal clinic have VA staff working onsite, and 900 Veterans receive care through these clinics.**

The partnership clinics have benefited Veterans and communities as a whole in the following ways.

- Increased the local health care options available to Veterans.
- Eliminated the need for Veterans to travel to a VA medical facility to receive a referral from VA health care providers.
- Created appointment availability for other IHS beneficiaries, since many Veterans can be seen by VA staff, rather than IHS staff.
- Identified and resolved duplicate prescriptions for medication for Veterans who received care at multiple clinics.

“One of the Veterans had 27 medications, and we took him down to 4.”

Rod Sepulveda, Rural Health Program Manager, Northern Arizona VA Health Care System

Rural Interdisciplinary Team Training Program

Collaborations under the VA-IHS MOU extend training opportunities, including the Office of Rural Health (ORH) RITT program, to IHS or tribal clinics.

The RITT program is designed to streamline and enhance care provided to elderly Veterans by interdisciplinary teams at rural clinics. The training focuses on strengthening collaboration within interdisciplinary health care teams to ensure high-quality care. The RITT program recently expanded to include IHS and tribal health programs that serve elderly Veterans, and 2017 marked the first year of IHS and tribal participation. During 2017, six IHS and tribal clinics participated in the RITT program:

- Chinle IHS Clinic internal medicine group,
- Chinle IHS Clinic family practice group,
- Oneida IHS Clinic,
- Gallup Indian Medical Center,
- Aleutian and Pribilof Islands Association in Anchorage, and
- Aleutian and Pribilof Islands Association in Unalaska.

In fiscal year 2017, more than 1,545 primary care providers and staff across the country received training under the RITT program.

Telehealth Technology

Many Veterans, particularly those who reside on rural reservations, live far from the nearest health care provider. Across Indian Country, tribal, urban, and IHS facilities have made advancements in telehealth technology, which helps mitigate transportation challenges for tribal Veterans. Through telehealth technology, Veterans can attend medical appointments or access other health services using video conferencing at a local satellite location, rather than traveling to a clinic. Often, tribal clinics, tribal Veterans offices, or intertribal health board offices serve as satellite locations for telehealth. Mobile care units may also provide the technology for telehealth. For example, the Chinle area has a mobile clinic equipped with video conferencing technology that connects Veterans to care providers at the Prescott VAMC .

Hopi Veterans Services Virtual Claims Sessions

In addition to increasing access to health care, video conferencing technology can connect Veterans to other services, such as benefits claims. Hopi Veterans Services has partnered with the Arizona Department of Veterans Services to host virtual sessions during which Veterans can apply for VA compensation and pension claims. They held the first virtual benefits claims session in July 2017. Through this initiative, Veterans can connect via webcam to certified Veterans benefits officers to receive claims assistance.

Cultural Sensitivity in Health Care

In addition to creating local opportunities for AI/AN Veterans to receive care through reimbursement agreements and telehealth technology, VA works to reduce barriers to care by incorporating cultural sensitivity into medical and mental health care. Cultivating relationships, honoring traditions, and engaging in cultural sensitivity training are key components of providing culturally appropriate care for AI/AN Veterans. Several VA offices, including the Office of Health Equity and Center for Minority Veterans, work to promote equal treatment and eliminate health disparities among all Veterans. Their work includes special focus on AI/AN Veterans.

“You can’t just sit and say, ‘fill out these forms’ and start asking questions. You really want to get to know a Native person first.”

Jon George, Tribal Council Secretary, Confederated Tribes of Grand Ronde

Establishing relationships and building trust with AI/AN Veterans is fundamental to providing culturally sensitive care. When health care providers spend time learning about Veterans on an individual basis and attempt to understand their needs, they begin to form a foundation of trust. Active listening to determine a Veteran’s needs is another crucial step in building trust. Receiving care from another Veteran can also help Veterans develop trust for their care provider.

To establish trust with AI/AN Veterans and promote cultural sensitivity in all aspects of care delivery, many VAMCs have committees or specific staff positions dedicated to

coordinating culturally appropriate care and services for AI/AN Veterans. Some VAMCs work with cultural experts to learn more about providing culturally appropriate services to AI/AN Veterans. For example, VAMCs in Seattle and Spokane, WA, work with OTGR, the Washington State Department of Veterans Affairs, and the Seattle VA Regional Office to organize events that provide services to AI/AN Veterans. Some VAMCs, such as the Oklahoma City VAMC, hold tribal consultations. Others employ staff specifically to work with, advocate for, or conduct outreach to AI/AN Veterans.

Instead of viewing cultural sensitivity as a broad concept, VA strives to understand the unique cultural aspects of individual tribal communities. Often, VA gains this insight through local partnerships between tribes and local VA offices. For example, some tribes may prefer that VA hire local care providers from within the tribal community. However, NAVAHCS learned that, because of the clan systems within Navajo Nation, the opposite was true for hiring local mental health care providers to work with Navajo Veterans. Navajo Veterans often hesitated to reveal personal details to those from within their own clan and preferred to speak with someone who was not related to them in any way. When NAVAHCS began hiring providers from outside a certain clan to work with Veterans from that clan, more Navajo Veterans started to use mental health services.



Larry Jackson, Vice-President, Yavapai Apache Nation and Henry Huntly, IGA.



Lucky Joe Boyd, Veterans Program Manager for Confederated Tribes of Colville Indian Reservation listens to fellow Veteran during the VA Round Table Discussion on Reimbursement Agreements, Phoenix, AZ.

Traditional Healing

There is a widespread need to honor culture, tradition, and spirituality within care for AI/AN Veterans. Some VA offices incorporate traditional healing into the services they offer. For example, the St. Cloud VAMC provides Veterans in residential programs the opportunity to participate in traditional sweat ceremonies. Spiritual needs and traditional practices vary across regions, communities and individual Veterans, so working with communities and individuals to assess these needs is crucial to providing culturally appropriate care.

“When we move a Veteran into a home, and we meet with the Veteran, we actually discuss whether or not they want their house smudged and what type of cultural aspects belong in that to make sure that it’s a cleansing process before they move into their home.”

Bill Fahrenbruck, Health Care for Homeless Veterans Coordinator, VA Black Hills Health Care System

The VA Black Hills Health Care System offers examples of the successful integration of culture into health care services for AI/AN Veterans.

VA Black Hills Health Care System

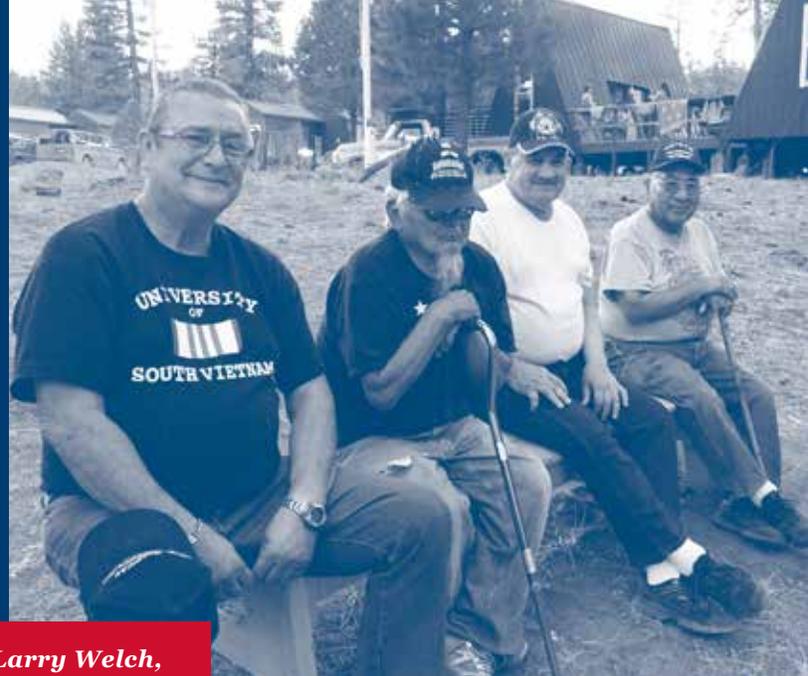
The VA Black Hills Health Care System successfully incorporated traditional healing approaches into mental health treatment, including the following:

- Equestrian therapy
- Sweat lodges
- Pipe ceremonies
- The Red Road to Wellbriety recovery program designed for Native Americans

Cultural Competency Training

To promote culturally sensitive care, clinical providers and other VA staff must engage in training and education to strengthen their knowledge about AI/AN cultures. VA works to create educational opportunities for VA staff through classroom-style and online trainings and events that familiarize VA staff with the cultures of the tribes they serve. OTGR presented a Working with Tribal Governments training for VA regional leadership and is adapting it for inclusion in VA's online training system so it will be widely available to VA staff.

Events that immerse VA staff in AI/AN cultures help familiarize them with important cultural considerations. These events can include cultural immersion training or outreach events that occur on tribal lands, such as Veterans Training Summits. These events, which are often hosted by tribes, provide information on a variety of services to AI/AN Veterans within the tribal community and also offer clinicians and other VA staff the opportunity to experience Native culture first-hand.



Veterans at Camp Chaparral. L-R: Jim Smith Tunnel, Larry Welch, and Jacob Mann.

Camp Chaparral

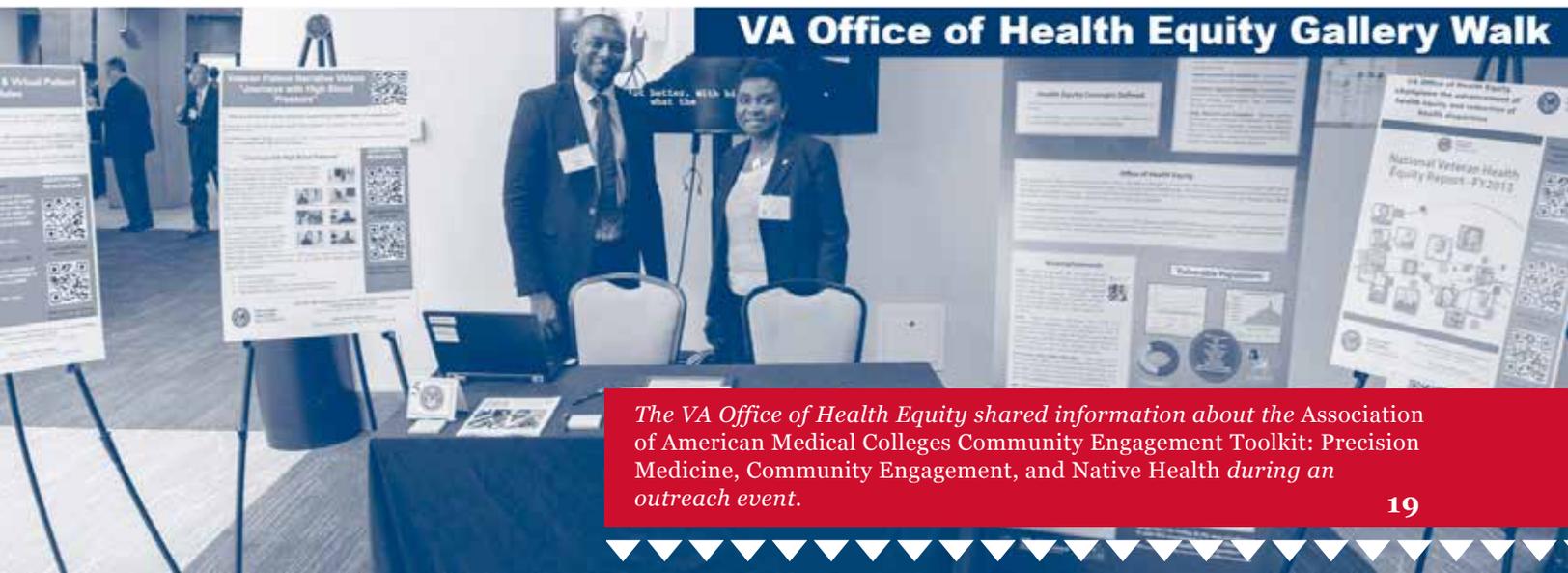
Held annually in Washington state, Camp Chaparral is a cultural immersion training attended by VA employees from across the Pacific Northwest and Veterans from numerous tribes. The week-long training takes place on sacred grounds of the Yakama Nation. Camp Chaparral orients VA service providers and other staff to tribal cultures and traditional healing approaches and promotes dialogue around cultural sensitivity. Participants learn how culture intersects with care needs, such as how to identify symptoms of PTSD among AI/AN Veterans. Camp Chaparral also provides a platform for Veterans to connect with one another and share their stories. All participants share information, learn from one another, and focus on enhancing services for AI/AN Veterans by infusing culture and tradition into care.

Office of Health Equity

VA's Office of Health Equity (OHE) works to advance equitable health care and health outcomes, with the goal of reducing health disparities among Veterans. In 2017, OHE accomplished the following toward health equity for AI/AN Veterans:

- OHE published the National Veterans Health Equity Report, which provides detailed data on disparities in health care and health outcomes among Veteran subgroups, including AI/AN Veterans. Some of the report findings on the AI/AN Veteran population are as follows:
 - ◇ AI/AN Veterans are among the racial/ethnic groups who use VA health care less frequently.
 - ◇ AI/AN Veterans are more likely to have a service-connected disability or to be diagnosed with a mental health or substance use disorder than other Veterans.

- ◇ AI/AN Veterans are more likely to have access to services through IHS than VA.
- ◇ Women Veterans are more well-represented among AI/AN patients than White patients.
- OHE offered virtual training for VA employees and the public, designed to help clinicians, Veterans and other stakeholders assess and increase their understanding of health equity issues for Veterans of all races and ethnicities, including issues specifically related to AI/AN Veterans.
- With assistance from a VA research team, OHE created a series of videos that showcase Veterans discussing their experiences with high blood pressure. The videos highlight tips for managing medication, communicating with health care providers, and taking other steps to handle high blood pressure, including approaches that are relevant to AI/AN Veterans. Many VAMCs plan to show these videos in their waiting rooms.
- OHE continued to leverage online outreach by launching a series of online seminars about health equity designed for Veterans, VHA leadership, clinicians, researchers, and other stakeholders. Archived sessions include topics pertinent to AI/AN Veterans.
- OHE magnified the dissemination of the *Association of American Medical Colleges Community Engagement Toolkit: Precision Medicine, Community Engagement, and Native Health*.
- OHE recommended a Presidential Medallion for a Native American Vietnam Veteran and tribal leader, Jim Northrup. At the 100 Million Healthier Lives event in Washington, DC, OHE worked with OTGR, National Cemetery Administration (NCA), and VA Public Affairs to directly request from the OHE Chief Officer a condolence message for Mr. Northrup’s family.



The VA Office of Health Equity shared information about the Association of American Medical Colleges Community Engagement Toolkit: Precision Medicine, Community Engagement, and Native Health during an outreach event.

Celebrating Our Heroes: Progress, Priorities, and Partnerships

Center for Minority Veterans

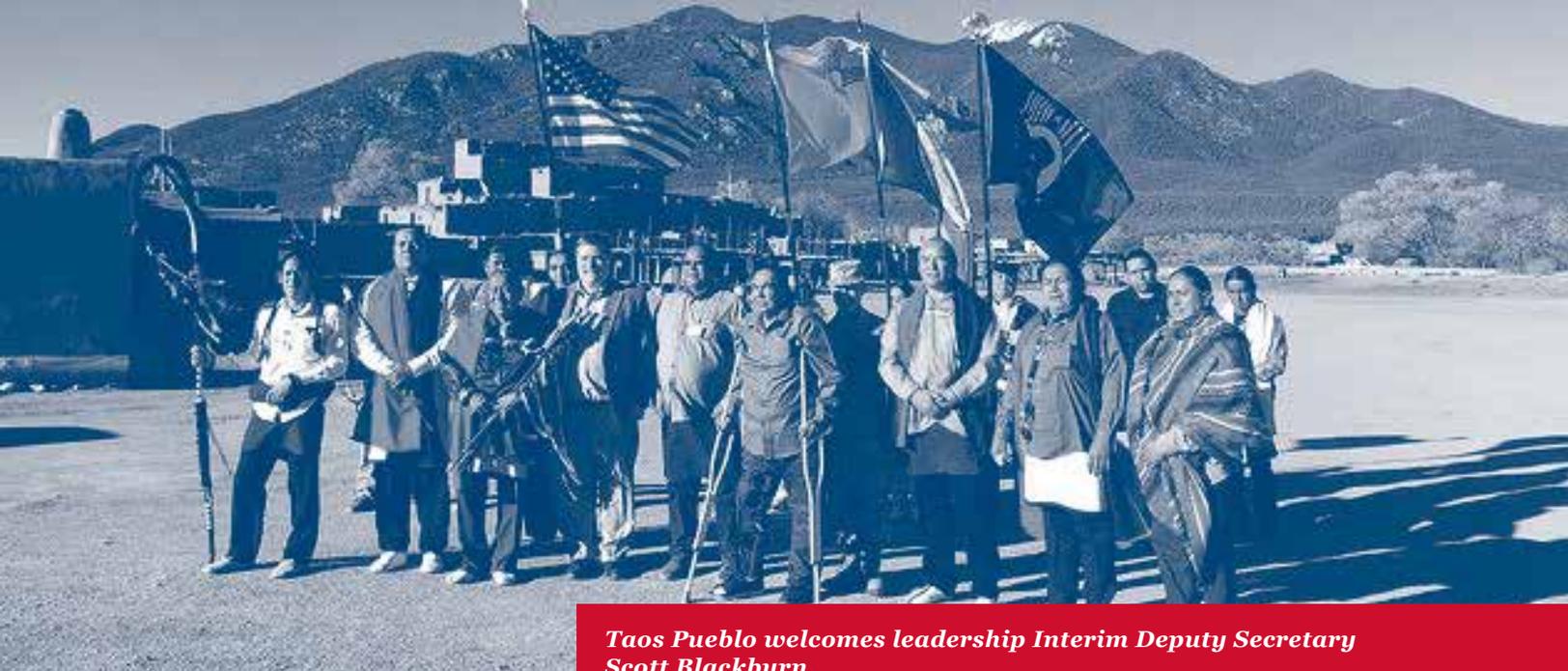
The Center for Minority Veterans (CMV) advocates for the needs of Veterans who are minorities to ensure dignity and quality of life for all Veterans, regardless of race, origin, religion, or gender. The CMV director serves as the principal advisor to the Secretary on policies and programs that affect Veterans who are minorities. A group of appointed members, the CMV's Advisory Committee on Minority Veterans (ACMV), makes recommendations to VA on establishing or improving programs to support equitable treatment for minority Veterans and promotes awareness of VA benefits and services among minority Veterans. CMV also employs a national network of minority Veteran program coordinators, stationed at regional offices, national cemeteries, and every VAMC across the country.

In 2017, CMV traveled to AI/AN events throughout the country, leading sessions and organizing and supporting Veteran-focused activities. The primary goal was to conduct outreach to Veterans who are citizens of Federally-recognized tribes. These efforts have recently expanded to include Veterans from some state-recognized tribes. Specific outreach efforts in 2017 included the following:

- Presented during the combined Veterans Day/Native American Heritage Month event at the Department of Health and Human Services Office of Community Services.
- Co-chaired VA's Native American Heritage Month event.
- Participated in the White House Council on Native American Affairs monthly staff meetings on the Interagency Working Group on Youth Programs.
- Assisted in planning and organizing the 2017 United South & Eastern Tribes' Sovereignty Protection Fund Impact Week Meeting.
- Participated in the grand opening of the new Iroquois Post 1587 Veterans Building at the Seneca Nation of Indians in New York.
- Participated in the third National Gathering of American Indian Veterans in Wheaton, IL, in which 143 Veterans participated.
 - ◊ The CEO of Trickster Art Gallery initiated a Veterans Affairs Committee to plan future National Gatherings that include CMV and OTGR.
- Participated in the Maryland Commission on Indian Affairs monthly meetings to network with the state-recognized tribes to expand outreach efforts to their Veterans.
- Conducted outreach during powwows hosted by two state-recognized tribes: the Nottoway Indian Tribe of Virginia and the Monacan Indian Nation.

The ACMV conducted the following outreach efforts in 2017.

- In April 2017, the ACMV conducted a site visit in Albuquerque, NM.
- In September 2017, the ACMV attended and provided program support to the Center for Women Veterans during a site visit in the Tulsa/Muskogee area in Oklahoma.



Taos Pueblo welcomes leadership Interim Deputy Secretary Scott Blackburn.

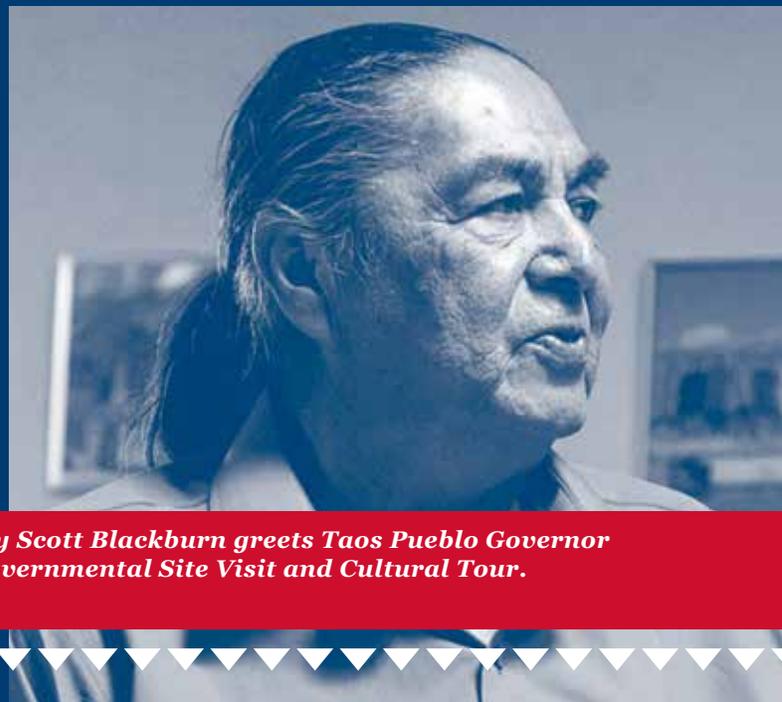
VA Senior Leadership Engagement with Tribes

VA senior leadership created opportunities to engage with Indian Country and gain understanding about the unique challenges faced by AI/AN Veterans and cultural considerations for involving them in VA services and programs.

In April 2017, VA Interim Deputy Secretary Scott Blackburn and other VA leadership visited Taos Pueblo to listen to local Veterans share their experiences accessing VA services. Engaging with local Veterans provided insight into cultural considerations for care, as well as challenges and success in serving tribal Veterans in the area. This visit helped VA build relationships with tribal Veterans and tribal leaders and gather information to help enhance services for Veterans.



Left: VA Interim Deputy Secretary Scott Blackburn greets Taos Pueblo Governor Ruben Romero during VA Intergovernmental Site Visit and Cultural Tour. Right: Veteran John Romero.



Challenges to Accessing Medical Care

While VA's partnerships with IHS and tribal health programs have increased access to medical care by establishing local medical care options, some challenges remain. AI/AN Veterans and those who work with them have identified several barriers to accessing medical care that AI/AN Veterans continue to face.

- **Referrals:** If a Veteran needs a referral to a different provider in the community, a VA medical facility—rather than an IHS or tribal clinic—must authorize the care under one of VA's community care authorities. This highlights the importance of care coordination between VA, IHS and tribal and VA health care providers.
- **Reimbursements:** With the exception of Alaska tribal health program agreements, VA only reimburses IHS and tribal health clinics for care provided to eligible AI/AN Veterans. Services provided to local Veterans who are not eligible AI/AN Veterans are not reimbursable under the IHS national reimbursement agreement and VA's reimbursement agreements with tribal health programs in the lower 48 states. To receive payment for health care services provided to non-AI/AN Veterans, tribal health programs may be eligible to become Veterans Choice Program providers. The Veterans Choice Program, designed to increase access to care, allows eligible Veterans, regardless of whether they are tribal citizens, to receive health care from a local provider who participates in the program.

Tribal Priority: Addressing Housing and Homelessness

Many tribal communities throughout Indian Country face a pressing need to connect homeless Veterans with housing and other services. Several VA programs specifically address homelessness among AI/AN Veterans. The Native American Direct Loan (NADL) and Tribal HUD-VASH programs help Veterans finance homes and access supportive housing. VA also works to ensure homeless Veterans can access services such as medical care through Veterans Stand Down events.

Native American Direct Loan Program

The Native American Direct Loan Program is a VA mortgage product available to eligible Veterans living on tribal lands. Through this loan, a Veteran can buy, construct, or improve a home with no down payment, a low interest rate, and minimal closing costs. A Veteran can also refinance an existing NADL loan. For a tribal Veteran to receive a loan under the NADL program, the tribe must have an MOU in place with VA.

During 2017, VA worked to reach more AI/AN Veterans with this loan opportunity. The number of NADL loans extended to Veterans during fiscal year 2017 was 85 percent



Chief Phylliss Anderson, Mississippi Band of Choctaw Indians, and Jeff London, VBA, signing a Memorandum of Understanding between the Mississippi Band of Choctaw Indians and VBA for the Native American Direct Loan Program.

higher than the total loans provided during the previous year. To make the NADL program widely available to Veterans across Indian Country, VA continues to enter into MOUs with tribes. VA signed four new MOUs with tribes in 2017, and more are in development. Table 5 shows the total number of NADL MOUs that were signed in 2017, are in development, and have been signed to date.

Table 5. Total NADL MOUs

Native American Direct Loan MOUs	Total
New MOUs signed in 2017	4
Total MOUs signed to date	101
MOUs currently in development	16

Although the NADL program has helped many Veterans finance their homes, some Veterans may be unaware of this opportunity. Continued outreach efforts are needed within tribal communities that have NADL MOUs to educate Veterans and their families about the NADL program and how to receive a direct loan through VA.

“There were quite a few tribes that already had MOUs that were over 10 years old, and people within the tribes didn’t realize that they had an MOU, that we could do direct loans with them.”

Richard Givot, Loan Guaranty Service Program Analyst, Department of Veterans Affairs

NADL Program Outreach

To increase awareness of the direct loan opportunity for Veterans within eligible communities, VA conducts NADL program outreach to Veterans. The VA Loan Guaranty Regional Loan Centers contact Federally-recognized tribes annually through letters, phone calls, emails, and personal visits. Additionally, Regional Loan Center staff attend at least three events per year, such as powwows, conferences, and Veterans Training Summits, to promote awareness of the NADL program. VA recently developed new promotional materials to boost awareness of the NADL program, including post cards, brochures, and posters.

Annual contacts and outreach events are tracked, and the information is compiled into monthly reports. An internal database retains data about each tribal community, items that require follow-up, and information about points of contact. VA updates this information continually to help ensure that the annual inquiries reach the correct points of contact. Regional Loan Center staff can update and send letters directly from the database, which streamlines the process and archives the letters sent.

Tribal Housing and Urban Development-Veterans Affairs Supportive Housing

HUD-VASH, a collaborative effort by VA and the U.S. Department of Housing and Urban Development, combines housing assistance for homeless Veterans with case management and clinical services. The Tribal HUD-VASH demonstration program offers such rental assistance and supportive services specifically to Native American Veterans who are homeless or at risk of homelessness, living on or near a reservation or other Indian areas. Many AI/AN Veterans received assistance under Tribal HUD-VASH during 2017, as shown in Table 6. 2017 was the first year during which tribes/tribally designated housing entities received Tribal HUD-VASH grants, following the launch of Tribal HUD-VASH.



**STANDING ROCK
HOUSING AUTHORITY**



**HOUSING AUTHORITY
OF THE CHEROKEE NATION**

**THE
HOPI TRIBE**

Keys to a brighter future



**Osage Nation Tribal Works
Housing Program**



**OGLALA SIOUX LAKOTA
HOUSING**



**Tlingit-Haida
Regional
Housing
Authority**



NAVAJO HOUSING AUTHORITY



**Spokane Indian
Housing Authority**



**WARM SPRINGS
HOUSING AUTHORITY**



**Leach Lake
Housing Authority**

building for the future



Housing
White Earth Reservation Housing Authority



**CHEYENNE & ARAPAHO
TRIBES**



**Cook Inlet
Housing Authority**

Celebrating Our Heroes: Progress, Priorities, and Partnerships

Table 6. Total Tribal HUD-VASH Grant Funding in 2017

2017 Tribal HUD-VASH Assistance	Total
Number of AI/AN Veterans who received housing assistance through Tribal HUD-VASH	500
Number of tribes/tribally designated housing entities to receive Tribal HUD-VASH grants	26

The Tribal HUD-VASH demonstration program is available to Native American Veterans and those who are experiencing or at risk of experiencing homelessness, such as Veterans who reside on or near a reservation or other Indian areas. Additionally, Tribal HUD-VASH connects Veterans with VA case managers who can assist Veterans in addressing the causes of housing instability. Case managers are licensed clinicians who can help connect Veterans with employment or benefits to increase their income, resources to educate them about money management skills, and health care to address mental health or substance use disorders.



Clothing Room at the Otoe-Missouria InterTribal Homeless Veterans Stand Down.

Raising awareness about the Tribal HUD-VASH demonstration program is key to encouraging Veterans to seek assistance through Tribal HUD-VASH. VA and its partners conduct outreach about this program as part of their efforts to connect homeless Veterans with housing solutions. For example, the VA Black Hills Health Care System conducts outreach about the program by attending events, such as powwows; holding Veterans Stand Down events; and participating in interviews on the local radio station. They also work with tribes/tribally designated housing entities, health care agencies, and other service agencies to identify Veterans who need housing.

Veterans Stand Down Events

Veterans Stand Down events offer an array of services and supplies for homeless Veterans, such as food, shelter, medical and dental services, and health screenings. Care providers are onsite to provide services that range from haircuts to mental health screenings to dental services. Veterans and their families can also sign up for benefits and receive referrals to other services. VA and tribal governments or tribal Veterans organizations typically partner to coordinate Veterans Stand Down events.

To maximize attendance at Veterans Stand Down events, the VA Black Hills Health Care System hosts multiple events in smaller areas, rather than holding one large event. For example, the Standing Rock Reservation has 11 districts, and VA Black Hills visits each district. VA Black Hills purchased tablets and the technology to provide onsite Wi-Fi at each Veterans Stand Down location so that Veterans and their families can sign up for benefits at the event.

In addition to providing services onsite, Veteran Stand Down events offer an opportunity to gather data to clarify Veterans' needs, such as by identifying the number of homeless Veterans or those who lack reliable transportation. For example, the VA Black Hills Health Care System uses Veteran Stand Down events as forums for identifying Veterans who need housing assistance.



Victoria Segura, Tribal Enrollment Clerk, volunteers at the Otoe-Missouria Tribe of Indians Stand Down Event.

Challenges to Addressing Homelessness

Although the NADL and Tribal HUD-VASH programs have helped provide housing options for many Veterans, several challenges remain to addressing homelessness among Veterans in Indian Country. Many tribes face a shortage of available housing units. Land use issues, lack of funding, or lack of bonded contractors to build the homes may delay new construction. Sometimes, housing structures exist, but may not be in livable condition.

“When you’re talking about serving the Veterans, it’s not just a Native American issue. It’s a national issue, and I think collaborations between governments is a better model.”

Denise Harvey, Tribal Council Member, Confederated Tribes of Grand Ronde

Tribal Priority: Treatment for PTSD and Mental Health

In many cases, a lack of visible symptoms can make it difficult to identify Veterans who need mental health services. To encourage AI/AN Veterans to seek PTSD counseling or other mental health services, VA and its partners strive to minimize barriers to mental health care for AI/AN Veterans, which includes providing services that are culturally sensitive.

“I think it’s a very good initiative to help Veterans understand benefits, because we’re having so many coming out with PTSD and other types of things that are not as visible as a physical deformity.”

J.D. Arch, Tribal Veterans Service Officer, Eastern Band of Cherokee Indians

Access to Mental Health Services

VA works with its partners to integrate mental health care providers at the local level to ensure AI/AN Veterans have convenient access to mental health services. For example, by leveraging its wide network of service providers, VA offers mental health services on the Colville Reservation, including individual and group counseling opportunities for people with PTSD. For areas where local providers are scarce, telehealth offers another way for Veterans to access care without facing significant travel time.

Telemental health services are mental health services provided through telehealth technology. In 2017, VA supported strategic planning for American Indian telemental health clinics within Veterans Integrated Service Network (VISN) 19. VA also consulted with tribes in the area regarding American Indian telemental health clinics and developed an approach to select an appropriate model for offering telemental health services for AI/AN Veterans. VA published a manuscript that describes the clinical model for American Indian telemental health services, titled “Rural American Indian and Alaska Native Veterans’ telemental health: A model of culturally centered care.”¹

Conducting outreach is important to ensure that Veterans are aware of local and virtual opportunities to receive mental health care. An example of successful outreach about mental health services is the Southern Plains Tribal Health Board’s annual health conference, where VA presents information about mental health treatments.

¹ Goss, C. W., Richardson, W. J. B., Dailey, N., Bair, B., Nagamoto, H., Manson, S. M., & Shore, J. H. (2017). Rural American Indian and Alaska Native veterans’ telemental health: A model of culturally centered care. *Psychological Services, 14*(3), 270-278. doi: 10.1037/ser0000149

Cultural Awareness in Mental Health Services

To reduce barriers and engage AI/AN Veterans with mental health care and other VA benefits, cultural considerations and traditional healing approaches must shape the delivery of mental health services. For example, Veterans suffering from PTSD must be formally diagnosed to be service-connected for PTSD. However, the typical processes for diagnosing PTSD often conflict with cultural values. It is important that clinicians approach PTSD diagnosis in a way that is culturally appropriate, yet allows them to extract the information needed for a diagnosis. For example, instead of meeting with a Veteran in a clinical setting to diagnose PTSD, alternative therapy settings, such as going for a walk outdoors with the Veteran, may be more culturally appropriate. Further, building a foundational relationship with the Veteran before asking sensitive questions may help reduce anxiety.

To provide culturally aware mental health care for AI/AN Veterans, providers should seek to understand unique challenges that American Indians and Alaska Natives may face during or after their military service. For example, some AI/AN Veterans have described experiencing unique pressures related to racial stereotypes of American Indians and Alaska Natives. In some cases, other service members may expect AI/AN service members to anticipate events before they happen, and failure to meet these unrealistic expectations can compound mental distress related to their military service.

“It was hard for them as Indians. People assumed, because they were Indians, that they would have this mystical ability to know there was something going to be attacking them, and they were called upon continuously because of this.”

Jenifer LittleSun, Executive Director, Southern Plains Tribal Health Board



Mary Culley, OTGR Regional Specialist, speaks as one of four panelists at the 2017 Women Veterans Leadership and Diversity Conference.

Tribal Priority: Understanding Benefits

To encourage Veterans and their families to enroll in benefits and use the services for which they are eligible, VA conducts outreach to increase awareness about these benefits and services. Approaches to sharing this information with AI/AN Veterans include outreach events, partnerships, communication through tribal Veterans service officers (TVSOs) and tribal Veterans representatives (TVRs), and use of an online platform called eBenefits to help Veterans easily apply for services and locate resources. In addition to the health care and housing benefits previously discussed, VA also works to promote tribal grants for developing Veterans cemeteries on tribal lands.

Tribal Veterans Service Organizations and Officers

For some AI/AN Veterans, geographic remoteness or cultural barriers complicate the process of finding an organization to represent a benefits claim. In January 2017, VA amended regulations for recognizing organizations to represent Veterans in benefits claims. In acknowledgement of tribes' capabilities to successfully provide culturally sensitive services to Veterans, the final rule extends recognition to tribal organizations for this purpose. Additionally, under this rule, TVSOs who collaborate with the State Department of Veterans Affairs can become accredited to help connect Veterans with benefits and services and guide them through the transition to civilian life. During 2016, VA gathered tribal input on this issue and received extensive feedback from tribal delegates and Veterans advocates. The final rule took effect on March 21, 2017.

Celebrating Our Heroes:
Progress, Priorities, and Partnerships

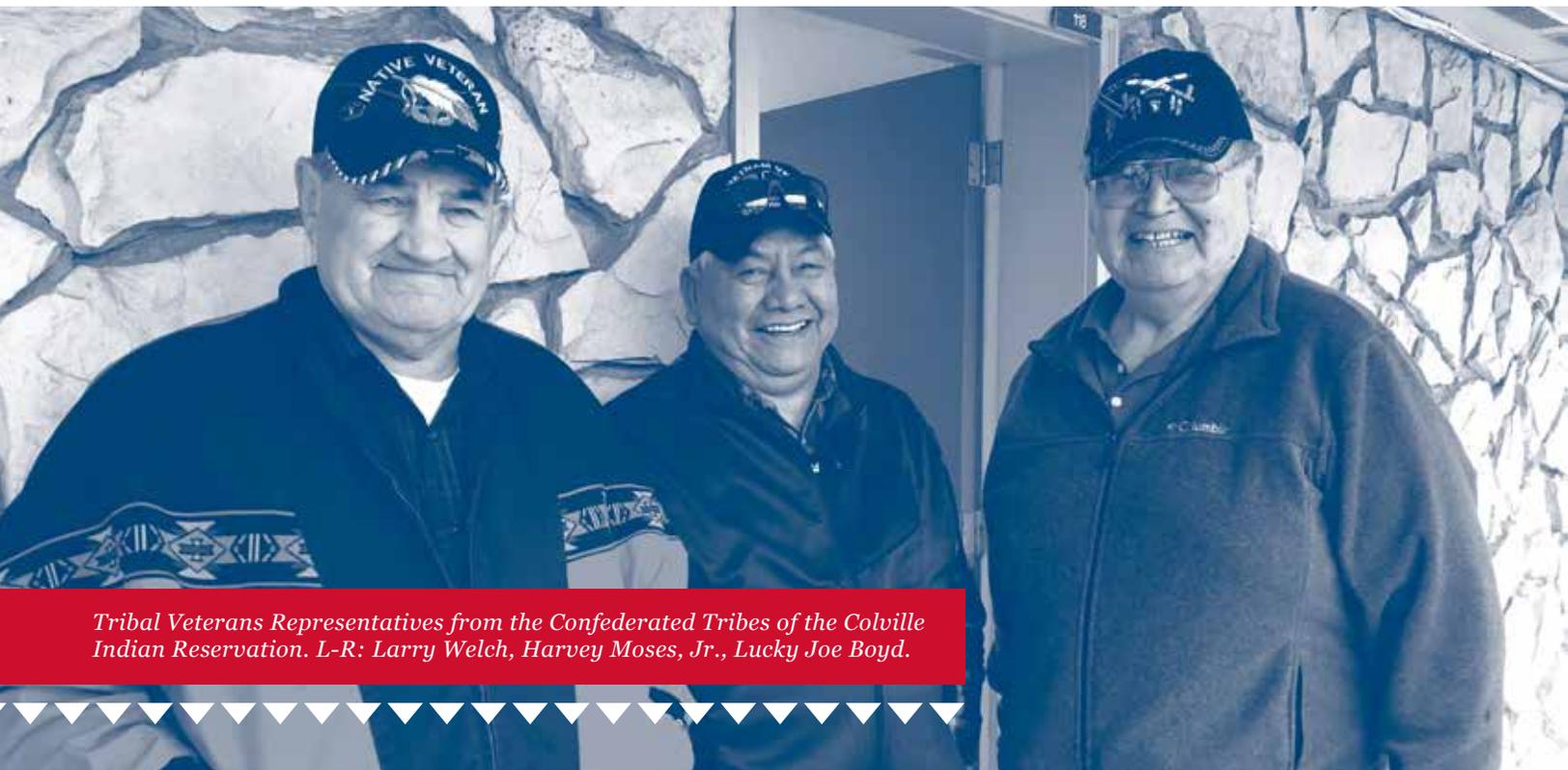
“[Tribal Veterans Service Officers] bridge that gap between federal, state programs, and tribal leaders in their communities.”

Steve Gill, Veteran Services Administrator and Tribal Liaison, Washington State Department of Veterans' Affairs

TVSOs and TVRs are available at the local level to provide culturally appropriate support to AI/AN Veterans as they navigate VA benefits and services. TVSOs and TVRs also work with tribal leaders to advocate for MOUs that establish health care reimbursements for tribal clinics and NADL opportunities for Veterans.

TVSOs receive formal accreditation through recognized state organizations. Eight tribes have MOUs in place with their states that extend state accreditation to TVSOs:

- Cheyenne and Arapaho Tribes
- Chickasaw Nation
- Choctaw Nation
- Eastern Band of Cherokee Indians
- Kiowa Tribe
- Muscogee Creek Nation
- Navajo Nation
- Suquamish Tribe



Tribal Veterans Representatives from the Confederated Tribes of the Colville Indian Reservation. L-R: Larry Welch, Harvey Moses, Jr., Lucky Joe Boyd.

Ongoing training for TVSOs and tribal participation in state and county Veterans service association trainings help TVSOs maintain current knowledge about VA benefits and programs.

Outreach Approaches

In addition to TVSOs, VA involves other partners to promote understanding of benefits among AI/AN Veterans. VA regional benefit offices employ outreach coordinators. They share information about benefits with tribal communities by attending powwows or other community events, providing briefings to tribes, and attending intertribal conferences. In some rural areas, the coordinators partner with mobile health care vans to conduct outreach about benefits to those who receive care from the mobile units.

VA also conducts outreach about benefits by partnering with other organizations and sharing information through events. VA partners with:

- Veteran service organizations,
- tribal Veterans programs,
- tribal governments,
- state and local Veterans agencies, and
- community leaders.

Events VA frequently attends to conduct outreach include:

- State, local or tribal meetings;
- community events, such as powwows; and
- Veterans service organization conventions and conferences.

VA also shares information about benefits as an integral part of events coordinated by OTGR, such as:

- Veterans Stand Down events and
- Veterans Training Summits.



Harvey Moses, TVR for Confederated Tribes of the Colville Indian Reservation, posing question to panelists during discussion at the VA Round Table Discussion on Reimbursement Agreements, Phoenix, AZ.

Veterans Training Summits

OTGR partners with tribes to host Native Veterans summits, which offer health care service information and benefits outreach for Veterans who live in tribal communities. These events incorporate cultural activities, information on health and dental care services, benefits coordination, employment information, and more. Veterans Training Summits also serve as opportunities for VA service providers to engage in intergovernmental interactions, since the events are typically hosted by tribal communities. Table 7 lists Veterans Training Summits held in 2017.

Table 7. 2017 Veterans Training Summits

Veterans Training Summit	Date	Location
Veterans Training Summit hosted by Oglala Lakota Tribe	December 14-15, 2016	Rapid City, SD
Navajo Nation Veterans Administration Veterans Training Summit	April 18, 2017	Gallup, NM
Veterans Training Summit hosted by Ohkay Owingeh Pueblo Veterans Group	May 23, 2017	Ohkay Owingeh, NM
Idaho Veterans Training Summit hosted by Nez Perce Tribe	June 14-16, 2017	Lapwai, ID
Nevada Veterans Training Summit hosted by Reno Sparks Indian Colony	June 23-24, 2017	Reno, NV

Veterans Training Summit	Date	Location
Veterans Training Summit hosted by Utah Navajo Health System and Navajo Nation	June 29, 2017	Monument Valley, UT
Veterans Training Summit hosted by Omaha Tribe of Nebraska	August 9, 2017	Walthill, NE
Veterans Training Summit hosted by White Mountain Apache Tribe	September 13-14, 2017	Pinetop, AZ
Veterans Training Summit hosted by Eastern Band of Cherokee Indians	October 12, 2017	Cherokee, NC
Veterans Training Summit hosted by Confederated Tribes of Warm Springs and Oregon Department of Veterans Affairs	November 3, 2017	Warm Springs, OR
Veterans Training Summit hosted by Winslow Indian Health Care Center	November 30-December 1, 2017	Winslow, AZ



Nez Perce Tribe Color Guard posting colors at the Nez Perce Tribe Veterans Training Summit held on June 14-16, 2017.

Celebrating Our Heroes:
Progress, Priorities, and Partnerships

Memorial Services

VA’s NCA maintains cemeteries for Veterans. Under the Veterans Cemetery Grants Program, tribes can receive grants to develop, expand, or improve Veterans cemeteries on tribal trust lands. Tribal cemetery grants provide the option for tribal Veterans to be buried on the lands they and their ancestors called home.

Table 8. Tribal Veterans Cemeteries

Tribal Veterans Cemetery Grant Activity	Total
Fully operational tribal Veterans cemeteries	11
Tribal Veterans cemeteries in development	2
Pre-applications for tribal Veterans cemetery grants	10

Accomplishments in 2017 related to tribal Veterans cemetery grants include the following:

- Two tribes received funds to begin construction on their own cemeteries.
- The Leech Lake Band of Ojibwe received \$3.2 million to establish a tribal Veterans cemetery.
- The Standing Rock Sioux Tribe received \$4.8 million to develop a tribal Veterans cemetery.
- The Houlton Band of Maliseet Indians established a tribal Veterans cemetery, which was the first of these cemeteries located in the eastern United States.



L: Honor Wall Plaza at the Seminole Nation Veterans Cemetery, R: Member of the Seminole Nation of Oklahoma Honor Color Guard



Figure 4. Tribal Veterans cemeteries currently funded under the Veterans Cemetery Grants Program

Fully operational tribal Veterans cemeteries currently funded under the Veterans Cemetery Grants Program include the following.

- | | |
|---|--|
| <ol style="list-style-type: none"> 1. Apsaalooke Veterans Park (Crow Nation) 2. Big Sandy Rancheria Band of Western Mono Indians Veterans Cemetery 3. Houlton Band of Maliseet Indians Veterans Cemetery 4. Oglala Sioux Tribe Veterans Cemetery 5. Pascua Yaqui Tribe Veterans Cemetery | <ol style="list-style-type: none"> 6. Ponca Tribe Veterans Cemetery 7. Rosebud Sioux Tribe Veterans Cemetery 8. San Carlos Apache Tribe Veterans Cemetery 9. Seminole Nation Veterans Cemetery 10. Sisseton-Wahpeton Oyate Veterans Cemetery 11. Yurok Tribe Veterans Cemetery |
|---|--|

In 2017, NCA conducted site visits to several tribes to provide technical assistance for existing tribal cemetery grantees and outreach to tribes who expressed interest in the grant. Site visits were conducted with:

- | | |
|---|--|
| <ul style="list-style-type: none"> • Rosebud Sioux Tribe • Oglala Sioux Tribe • Houlton Band of Maliseet Indians • Pascua Yaqui Tribe | <ul style="list-style-type: none"> • Standing Rock Sioux Tribe • Leech Lake Band of Ojibwe |
|---|--|

Tribal Priority: Transportation

For rural Veterans especially, transportation to medical appointments or other services can present a challenge, as facilities are often many miles away. Tribes and local and state Veterans offices have developed and applied successful transportation solutions for AI/AN Veterans. VA's Highly Rural Transportation Grant may also help resolve transportation challenges.

Highly Rural Transportation Grant

VA's Grants for Transportation of Veterans in Highly Rural Areas program competitively awards grants to Veterans Service Organizations and state Veterans service agencies to help transport Veterans who live in highly rural areas to health care facilities. In 2017, grantees' programs served 18 tribal communities and a total of 35,000 AI/AN Veteran tribal members across the Nation.

The term "highly rural area" is defined as an area consisting of a county or counties having a population of fewer than seven people per square mile. For tribal lands that span more than one county, services provided to tribal members by the program's grantees may cover only some portions of the reservation. For example, the Colville Reservation in Washington State extends into two counties. One of those counties is considered to be "highly rural" under the grant program, but the other is not, meaning part of the reservation's Veteran population cannot benefit from grantees' transportation services. Other local transportation solutions must be developed to increase transportation options for Veterans in Indian Country who cannot be served under this particular program.

Local Transportation Strategies

Transportation to medical appointments remains a challenge for many rural Veterans. However, local partnerships have helped to fill gaps in many areas. These efforts include the following:

- Transportation services through local community health representatives.
- Non-emergency medical transportation, which is a transportation service that may be available under Medicaid for eligible individuals.

Other resources that may be available to Veterans for the purpose of providing assistance with travel to medical appointments include the VA beneficiary travel, under 38 U.S.C. 111, under which VA provides for reimbursement or payment of certain transportation expenses for eligible beneficiaries. Additionally, under the Veterans Transportation Service, under 38 U.S.C. 111A, authorizes VA to transport eligible persons to or from a VA or VA-authorized facility for the purpose of examination, treatment or care.

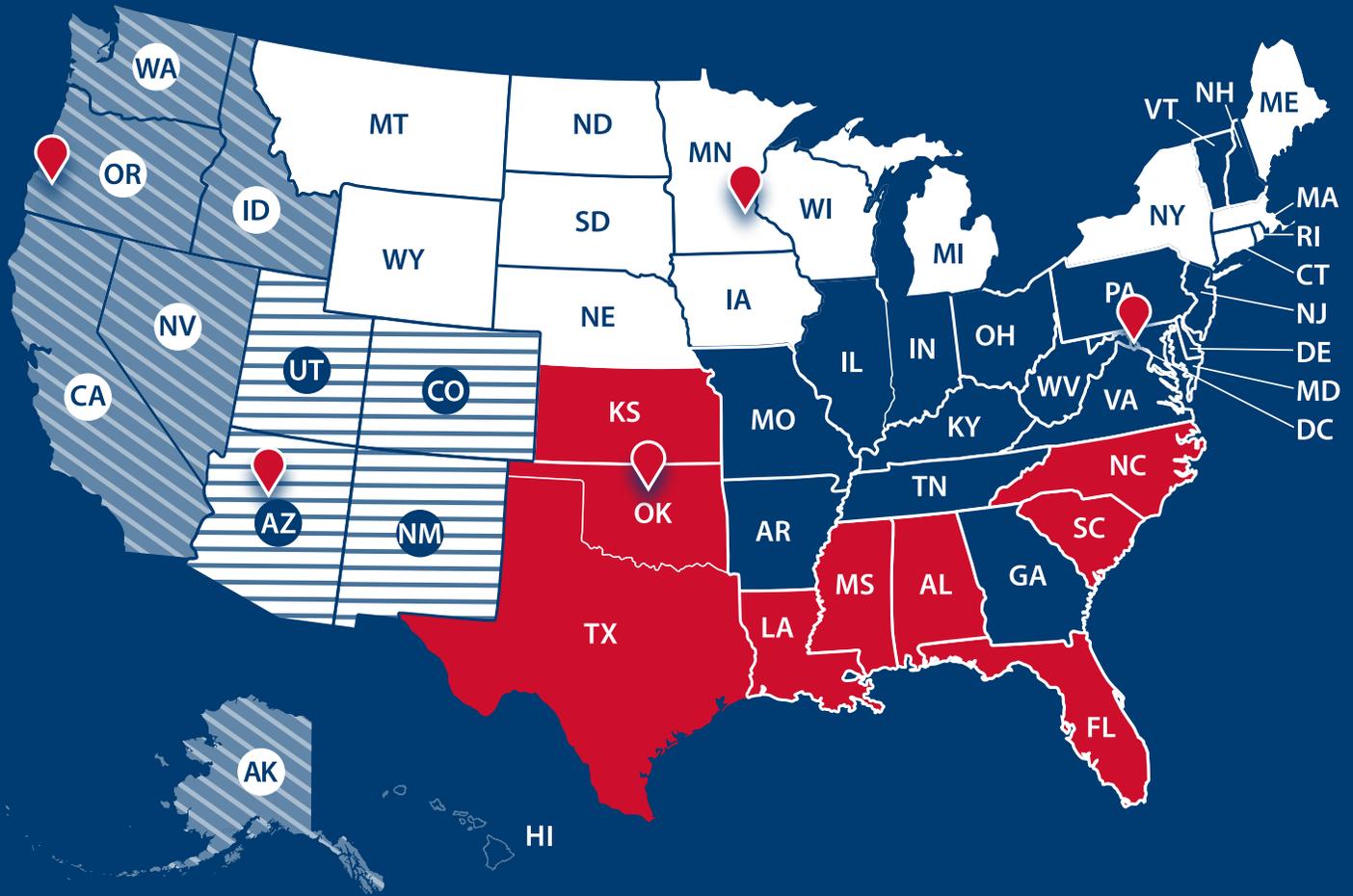


Conclusion

Office of Tribal Government Relations met with the Tohono O'odham Ki:Ki Association on the Tribal HUD VASH program Care System.

During 2017, VA and its partners, in collaboration with tribal leaders and Veterans advocates across Indian Country, made significant progress in addressing the top five tribal priorities. VA extended its agreements to reimburse IHS and tribal health programs for direct health care services and entered into agreements to provide direct housing loans for Veterans on tribal lands. Cultural competency trainings promoted culturally appropriate care. Other accomplishments toward connecting AI/AN Veterans with benefits and services include recognition of tribal organizations to represent VA claimants, setting the groundwork to accredit TVSOs, and implementation of the Tribal HUD-VASH demonstration program, under which 26 tribes/tribally designated housing entities received housing grants to serve approximately 500 Veterans in 2017. VA worked to reduce barriers to culturally appropriate mental health services. VA and its partners conducted outreach and held events to provide services to Veterans and increase their awareness of available benefits. In addition to conducting outreach to individual Veterans, VA also encouraged tribes to partner with VA through reimbursement agreements and become involved in programs such as tribal Veterans cemetery grants. During 2017, VA awarded two new tribal Veterans cemetery grants. Telehealth expansions and transportation solutions including the Highly Rural Transportation Grant and local partnerships helped enhance Veterans' access to health care services.

Moving forward, VA will continue to collaborate with tribal, state and VSO partners; IHS; and other Federal partners to build on these successes and address challenges. Future tribal consultation will provide the opportunity for VA to discuss progress and challenges with tribes and further define strategies for honoring AI/AN Veterans and ensuring they seek the benefits and services they have earned that can help improve their lives and their families' lives and enhance the overall quality of life for their communities.



Regional Contacts:



Stephanie Birdwell and Clay Ward: Arkansas, Delaware, Georgia, Illinois, Indiana, Kentucky, Maryland, Missouri, New Jersey, Ohio, Pennsylvania, Tennessee, Virginia, West Virginia, Washington, DC



Terry Bentley: Alaska, California, Idaho, Nevada, Oregon, Washington



Mary Culley: Alabama, Florida, Kansas, Louisiana, Mississippi, North Carolina, Oklahoma, South Carolina, Texas



Homana Pawiki: Arizona, Colorado, New Mexico, Utah



Peter Vicaire: Connecticut, Iowa, Maine, Massachusetts, Michigan, Minnesota, Montana, Nebraska, New York, North Dakota, Rhode Island, South Dakota, Wisconsin, Wyoming

Contacting VA's Office of Tribal Government Relations



Stephanie Birdwell

Director, Office of Tribal Government Relations

@ StephanieElaine.Birdwell@va.gov

📞 202-461-7400

📍 Washington, DC



Clay Ward

Program Analyst, Office of Tribal Government Relations

@ David.Ward@va.gov

📞 202-461-7445

📍 Washington, DC



Terry Bentley

Regional Specialist
Pacific Region

@ Terry.Bentley@va.gov

📞 541-440-1271

📍 Roseburg, OR



Mary Culley

Regional Specialist
Continental, Midwest, and Southeast Regions

@ Mary.Culley@va.gov

📞 405-456-3876

📍 Oklahoma City, OK



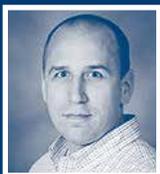
Homana Pawiki

Regional Specialist
Pacific and Continental Regions

@ LoRae.Pawiki@va.gov

📞 928-445-4860 x5306

📍 Prescott, AZ



Peter Vicaire

Regional Specialist
Continental, Midwest, North Atlantic and
Southeast Regions

@ Peter.Vicaire@va.gov

📞 651-405-5676

📍 Minneapolis, MN





Pictured on previous page (clockwise from left):

- 1.** Veterans present at the site visit with the Interim VA Deputy Secretary at the Taos Pueblo.
- 2.** Gila River Indian Community Ira B. Hayes Color Guard. **3.** Thomas Begay, Navajo Code Talker.
- 4.** Two generations of Passamaquoddy veterans. **5.** Honorary procession through the plaza at Taos Pueblo.



VA

U.S. Department of Veterans Affairs
Office of Tribal Government Relations

www.va.gov