



# Indian Health Service Press Release

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## **Harvard University and the Indian Health Service Forge Partnership to Improve American Indian Health and Wellness**

Cambridge, MA – Provost Steve E. Hyman of Harvard University and Dr. Charles W. Grim, Assistant Surgeon General and Director of the Indian Health Service, signed a Memorandum of Understanding (MOU) to identify areas of collaboration to improve the health and wellness of American Indian and Alaska Native people and communities. The signing took place on Tuesday, February 21 in the historic building of Massachusetts Hall located near the site of the Harvard Indian College, which was built in 1655.

The MOU is the first of its kind to focus on American Indian health issues between the academic institution of Harvard University and the Indian Health Service, an agency in the Department of Health and Human Services. Provost Hyman signed the MOU on behalf of the Harvard University Native American Program (HUNAP), one of fourteen university-wide interfaculty initiatives of the Office of the Provost. "Improving our understanding of health disparities between Native American and non-Native communities in the US is one of the terribly pressing needs in the fields of health care and health policy. Harvard and the IHS together have the capacity to study this problem and to effect positive change. I'm very pleased that the IHS and the Harvard Native American Program have entered into this partnership," said Hyman.

"It is clear that health disparities experienced by American Indians and Alaska Natives cannot be addressed solely through the provision of health care services," said Dr. Grim. "Chronic disease has replaced acute disease as the dominant health problem in our nation and in Indian Country, and is now considered by many to be the principal cause of disability and use of health services. The future success of Indian health care requires coordinated intervention of health care services, educational systems, and economic development programs."

Reflecting on the significance of the MOU, Dennis Norman, Faculty Chair of the Native Health Program at HUNAP, states, “this is a great opportunity for synergy between Harvard’s educational mission and IHS’ mission to assist and collaborate in raising the physical, mental, social and spiritual health of American Indian and Alaska Native people. Organizing this project through HUNAP ensures that the values and perspectives of American Indian and Alaska Native communities and students will remain as a guiding influence in our joint efforts to address the health and wellness of American Indian people. I believe this collaboration will enrich American Indian communities, Harvard students, fellows, and faculty, and IHS personnel and officers.”

“We have high expectations that combining the talents and resources of our two organizations will produce even greater educational and training opportunities for our health care professionals and will mean increased capacity of the tribal nations to better manage their health programs and facilities,” stated Dr. Grim. “We should also expect that this agreement will produce creative, culturally appropriate, and innovative programs that can address the growing health disparities of our Indian communities.”

A comparison of the general health status between Indian people and the rest of the U.S. population shows that approximately 40 percent greater need exists in Indian country than the IHS funding level. Complicating the situation are the types of health problems confronting American Indian and Alaska Native communities today. Death rates for tuberculosis, alcoholism, diabetes, accidents, suicide, and homicide, among others, are significantly higher for Indians compared to the U.S. general population. The mortality rates from tuberculosis and alcoholism are more than six times the all U.S. all races rate. Mortality rates from diabetes are three times as high as in the rest of the U.S. population. American Indian and Alaska Native death rates for unintentional injuries and motor vehicle crashes are 2½ to 3 times higher than the national rates. And suicide and homicide rates are nearly twice as high in the Indian population.

“Although the statistics are disheartening, we can learn a lot from those tribal nations and communities who have implemented innovative and effective solutions to health care service and education,” said Norman. “The Native Health Program will engage undergraduate and graduate students in teaching, research, and outreach to promote understanding and interest in these important communities. We also hope to contribute to the pipe-line effort and train more Native American as well as non-Native students to become practitioners, researchers, and leaders in American Indian health.”

The mission of HUNAP is to bring together Native American students and interested individuals from the Harvard community for the purpose of advancing the well-being of indigenous peoples through self-determination, academic achievement, and community service. Through its Native Health Program, HUNAP supports research, outreach, leadership education, and teaching and curriculum development in health care and health policy directed toward improving American Indian and Alaska Native health.

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