



Southwest Hepatitis C Tribal Summit

March 2-3, 2016

Indian Pueblo Cultural Center
2401 12th St NW
Albuquerque, NM 87104

TECHNOLOGY OF PARTICIPATION REPORT

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SYNOPSIS

On March 2-3, 2016, over 100 participants joined together at the first Southwest Hepatitis C Tribal Summit to address hepatitis C demographics, surveillance, and social, economic, and healthcare disparities in American Indian, Alaskan Native, and Native Hawaiian communities. The summit was held at the Indian Pueblo Cultural Center in Albuquerque, New Mexico and was hosted by the Hughes Healthcare Disparities Group (HHDG), the National Native American AIDS Prevention Center (NNAAPC), with support from the Office of Minority Health Resources Center (OMHRC).

Mr. Lorenzo Jim (Diné), from First Nations Community HealthSource offered the blessing for the event followed by welcoming remarks from Theresa Hughes, Chief Executive Office, Hughes Healthcare Disparities Group (HHDG) and an overview from Todd Theringer, Board Chairperson, National Native American AIDS Prevention Center (NNAAPC).



Mariah E. Johnson, NASTAD

DAY ONE AGENDA

Morning Session One: HCV State Programming & Updates

- Mariah E. Johnson, Senior Manager, Viral Hepatitis/Policy & Legislative Affairs, National Alliance of State & Territorial AIDS Directors (NASTAD)
- Clarisse Tsang, MPH, Viral Hepatitis Prevention Coordinator/Senior Epidemiologist, Arizona Department of Health
- Laine Snow, New Mexico Department of Health



Laine Snow, New Mexico Department of Health

Morning Session Two: Hepatitis C in Indian Country: Overview, Focus, Need

- Kimberly Page, PhD, MPH, MS, Professor and Chief, Epidemiology, Biostatistics & Preventive Medicine, University of New Mexico Health Sciences Center
- Julie A. Erb-Alvarez, MPH, CPH, Indian Health Service, Oklahoma City Area Office

Morning Session Three Plenary: Hepatitis C: Update on Testing, Treatment and Barriers to Care

- Dr. Karla Thornton, MD, MPH, professor, Division of Infectious Diseases, Associate Director, Project ECHO



Dr. Camilla Graham, MD, Harvard University

Afternoon Session Four Keynote: Eliminating Hepatitis C: Treatment Must Be Affordable

- Dr. Camilla Suzanne Graham, M.D., Assistant Professor of Medicine, Harvard University

Session Five Breakouts:

- **HEP C 101:** Donald Chee, HIV Prevention Program, Diné College & Marco Arviso, Consultant, NCI
- **Tribal Needle Exchange and Methadone Programs:** Frances Cupis, HIV Prevention Program, Pascua Yaqui Tribal Health Department
- **Harm Reduction:** Dominick V. Zurlo, MA, NMDOH Hepatitis and Harm Reduction Program Manager
- **HCV and Substance Abuse:** Al Benalii, Behavioral Health, To'hajiilee Canoncito Band Navajo
- **The Full Circle of Hepatitis C – Living with HIV:** Jennifer Awa, MPH, Capacity Building Specialist for Health
- **Neonatal HCV Issues: Opiate Usage and Effects:** Theresa Hughes, President/Founder, HHDG

Closing Session Seven Keynote: Quality of Life Among Southwest American Indians and Alaska Natives Living with Hepatitis C Virus"

- Rydell Todicheeney, PhD, RN, PHN, ACNS-BD, Clinical Nurse Specialist/Advance Practice Nurse



Rydell Todicheeney, PhD, RN, PHN, ANCS-BC (Dine)

DAY TWO AGENDA



Representative Mike Honda, CA
House of Representatives, US Congress

The second day of the Summit started with a special video address from Representative Michael M. Honda, who thanked the organizers of the Tribal Hepatitis C Summit for inviting him to speak. Representative Honda is a Japanese/Asian American who recognizes the “disproportioned effects of Hepatitis on communities of color” and “the need for cultural competent literature to assist with awareness Hepatitis C and for making eradication programs a national priority within Congress”. Representative Honda spoke as the co-chair and founding member of the Congressional Hepatitis Caucus and he thanked all members who attended the Summit.

Then, there was a “Native Providers Panel: HCV Update” (in lieu of the Tribal Leaders Panel) where Mattee Jim (First Nations Community HealthSource), Frances Cupis (Pascua Yacqui Tribal Health Department) Ayn White (Albuquerque Area Indian Health Board), and Donald Chee (Diné College) who work directly with tribal populations throughout the Southwest discussed the barriers to care and the greatest successes of each organization. With the attendance of Navajo Nation Tribal Councilman Mr. Jonathan Hale, he additionally spoke at the end of the panel as a current tribal leader and stressed the importance of Hepatitis C awareness on Native lands.



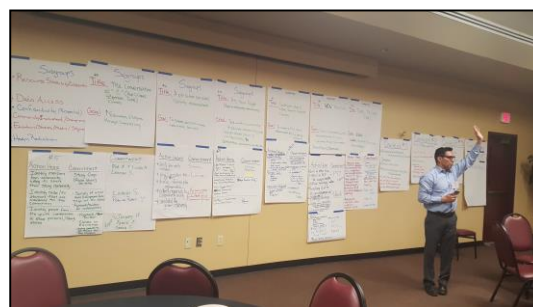
Jonathan Hale, Tribal Council Member
The Navajo Nation

TECHNOLOGY OF PARTICIPATION (TOP) ACTION PLANNING FACILITATION METHOD

After the panel discussion participants engaged in a 7-Step Action Planning Session, to identify hepatitis C priorities and create action planning steps which clarifies and delineates the tasks; aligns the creativity, capabilities, interests and resources of the group; decides the necessary actions, roles and responsibilities; builds group trust, support, enthusiasm, and consensus; creates an implementation timeline to accomplish the task; and coordinates actions and assignments.

The group was facilitated by Hannabah Blue (Diné) from North Dakota State University’s American Indian Public Health Resource Center (AIPHRC) and Patrick Roberts (Hopi) with the National Native American AIDS Prevention Center (NNAAPC) using the Technology of Participation (ToP) Action Planning Facilitation Method. The 7 parts of the planning session were:

- I. **Context:** Review the Givens
- II. **Victory:** Envision the Future
- III. **Commitment:** Ensure Commitment
- IV. **Key Actions:** Identify the Tasks
- V. **Subgroups:** Form Subgroups
- VI. **Coordination:** Finalize the Details
- VII. **Resolve:** Affirm and Celebrate



I. CONTEXT: Review the Givens

During this section, all the participants were asked to introduce themselves, their tribal affiliations, positions, agencies/organizations and favorite areas of health, which are listed below. This section is meant to allow everyone to see who is in the room and to encourage participants to speak in front of others and to network with each other.

<p>Tribal Affiliations</p> <ul style="list-style-type: none"> • Acoma Pueblo • Kashia Pomo • Cherokee • Hopi • Jewish • Laguna Pueblo • Lakota • Muscogee • Native Hawaiian • Navajo • Ohkay Owingeh • Pascua Yaqui • Zia 	<p>Favorite Areas of Health</p> <ul style="list-style-type: none"> • Addiction/Substance Abuse • Behavioral Health • Emotional • Gay Men’s Health • Global Health Disparities • Harm Reduction • Health Promotion • HIV Awareness • Holistic Health • Infectious Disease • Maternal and Child Health • Mental Health • Native Health • Navajo Traditional Wellness • Nutrition • Psychiatry • Public Health • Rural Health • Sexual Health • Spiritual Health • Trans Health • Women’s Sexual Health 	<p>Agencies/Organizations</p> <ul style="list-style-type: none"> • Acoma Behavioral Health • Albuquerque Area Southwest Tribal Epidemiology Center • Boston • Center for Health • Caring Ambassadors Program • Diné College HIV Program • First Nations Community Healthsource • Indian Health Service- Oklahoma City • Kansas AIDS Education Training Center • Kayenta Public Health Nursing • Methadone Clinic • National Native American AIDS Prevention Center • National Alliance of State and Territorial AIDS Directors • Navajo Nation Department of Health • Navajo Nation Health Education • New Mexico AIDS Education Training Center • New Mexico Department of Health • NDSU American Indian Public Health Resource Center • NDUH • NMAS • Ohkay Owingeh Police Department • Pascua Yaqui Tribe • Project ECHO • Self-Employed • University of New Mexico • University of Rochester • Walgreens
<p>Positions</p> <ul style="list-style-type: none"> • Americorp • Capacity Building Assistance Specialist • Chicago Hepatitis C Program Director • HIV/HCV Community Health Representative • Community Health Worker Supervisor • Community Health Nursing Worker • Disc Jockey • Epidemiologist • Executive Director • Health Educator • Hepatitis C Project Director • Hepatitis C Surveillance Coordinator • HIV Health Educator • HIV/HCV/Harm Reduction Worker • HIV Prevention Manager • HIV Program Manager • HIV Service Provider Case Manager 	<ul style="list-style-type: none"> • HIV Specialist • Long-term Acute Care Worker • Medical Assistant • Manager of Native American Affairs • Peer Educator • Pharmacist • Physician • Police Officer • Post-Doc • Prevention/Program Specialist • Program Director • Public Health Community Liaison • Regional Minority Health • Senior Health Educator • Sexually Transmitted Infections • State Prevention Coordinator • Viral Coordinator • Viral Hepatitis Affairs Team 	

Facilitators then reviewed the agenda for the session and background information to set up the conversation for the day. Notes were taken during Providers' Panel, which were presented to the group. Additionally, participants were asked for input on what was relevant and important to include in the background information, to set the stage for the Summit discussion. The information from the Providers' Panel and background is compiled below:

Notes from Native Providers' Panel and Background	
<ul style="list-style-type: none"> Grant Writing- sustainability, funding and strong evaluation components Stigma Confidentiality (in small communities) Cultural Competency Programs Social Marketing Collaborations Linkage to Care/Referral System Hep C Silent Killer (late treatment) Harm Reduction Programs Support from Tribal, Community & Elderly 	<ul style="list-style-type: none"> Outreach to Youth Access to Rapid Test (HIV) (Hep C) How Do You Know Your Program is Successful? Program Visibility 638-funded Programs Developing and Expansion of Existing Programs Reliable Data Collection Support for Released/Formerly Incarceration Sharing Stories about how Hep C, HIV & Substance Abuse Affected People Policy Development

Participants were then asked to determine the top three priorities to focus on during the day. Participants worked in small groups amongst their tables to determine these priorities. Context considerations were posted to engage the conversation. The context considerations and top three priorities from each table are below:

Context Considerations	<ul style="list-style-type: none"> Tribal Level Policies 	<ul style="list-style-type: none"> Program Stigma 	<ul style="list-style-type: none"> Data Collection Testing
Context Priority #1	Context Priority #2	Context Priority #3	
<ul style="list-style-type: none"> Community/Tribal Leader Involvement- Awareness, Policies & Resources Data Collection Sharing Stories of How Hep C Affects People Access to Testing (rapid HIV, HCV) Harm Reduction (needle exchange) 	<ul style="list-style-type: none"> Resources & Education- Public Health Harm Reduction Looking at Reliable Data (how collected) Data Collection Education (reducing stigma and alternative options) 	<ul style="list-style-type: none"> Education-Public Health Collaborations on All Levels Support for Formerly Release Funding Data Collection Commitment to Follow-Up Stigma (address with tribal values) 	



II. VICTORY: Envision the Future

The second section of the facilitation methods requires participants to envision the future. They are asked to imagine what the ideal final outcome of the day’s work will be. Participants were again asked to discuss within their groups. Their discussions were guided by two questions:

- What Is/Are the Most Needed Action(s)?
- What Can We Accomplish Today and After The Summit?

Here is what participants identified as their Visions for the Future:

- Networking/Collaboration (task forces)
- Concrete Resource Directory
- Identifying and Recruiting Champions (people living with Hep C)
- Policy on Data Sharing/Access (with states AZ, NM & CO)
- Access to Media
- Education (identify type to target population priorities and resources)
- Health Education (break stigma, list of strategies)
- Standard of Care (preventative medicine)
- Sustainability of programs- revisit collaborations/ongoing support/sharing of knowledge
- Getting access to care in tribal communities
- Resources and examples
- Case Identification (Share Knowledge)
- Rapid Test Access
- Cohesive Education in Harm Reduction
- Education/Advocacy Tools
- Policies with Consistent Language

III. COMMITMENT: Ensure Commitment, IV. KEY ACTIONS: Identify the Tasks, & V. SUBGROUPS: Form Subgroups

The next three steps (Commitment, Key Actions and Subgroups) were facilitated together, where participants were asked to start planning for key actions they would commit to, as part of the action planning stage of the day. Facilitators consolidated the Vision for the Future items into groups, and then asked the participants for input. The result was the creation of six subgroups to focus on for future action planning. Participants were asked to break themselves into tables to focus on one of these subgroups and to determine an appropriate name and purpose of each group. The six subgroup names and purposes are below:

Resource Sharing	Data Access	Respecting Confidentiality	Community Involvement	The Conversation of “C” (Hep C, Cancer, Cirrhosis, Cure)	Harm Reduction
<u>Purpose:</u> Create a SW Hep C repository /directory	<u>Purpose:</u> Have inclusive & accurate data collection	<u>Purpose:</u> Talk and educate communities about health related issue & confidentiality to de-stigmatize around health issues	<u>Purpose:</u> Social cohesiveness within the community & social integration through participation	<u>Purpose:</u> Increase education, decrease stigma through storytelling	<u>Purpose:</u> Create access to harm reduction services

Participants in each group were then asked to identify the top priorities for each subgroup in order to reach their purposes. This section is meant to identify tasks required to accomplish the commitment and vision, and excite individuals about their involvement. Further, participants were asked to make commitments for these actions. This section was conducted in order to build ownership and enthusiasm for the activity. The prioritized action steps and commitments are listed below:

Resource Sharing	Data Access	Respecting Confidentiality	Community Involvement	The Conversation of "C"	Harm Reduction
<p><u>Action Items:</u></p> <ul style="list-style-type: none"> • Develop and send/ disseminate Survey Monkey with name, organization, position, area served, description of formal and informal services with involvement. 	<p><u>Action Items:</u></p> <ul style="list-style-type: none"> • Streamline data collection approach by educating why D.C. is important. • Work with tribal leaders/Congress to increase funding for research/analyses reporting. • Advocate for electronic data collection for complete data. 	<p><u>Action Items:</u></p> <ul style="list-style-type: none"> • Use media to educate (radio, newspaper, T.V., flyers, social media). • Create low cost PSAs, as an educational forum. • Post flyers about confidentiality in chapter houses, clinics, and public places. 	<p><u>Action Items:</u></p> <ul style="list-style-type: none"> • Work with other task forces in HCV. Reach out to outside resources such as NNAAPC. • Work with Community/ Shiprock Task Force and Baa Hozho Taskforce. 	<p><u>Action Items:</u></p> <ul style="list-style-type: none"> • Identify members of the community to share personal stories about HCV nationally. • Identify radio/TV stations that are valuable to the communities. • Identify people from the youth communities to share personal/family stories. 	<p><u>Action Items:</u></p> <ul style="list-style-type: none"> • Identify other needle exchange programs. • Create policy & procedure MOU • Collect resources to collaboratively work, and identify grant research.
<p><u>Commitments:</u></p> <ul style="list-style-type: none"> • Savannah Gene with Albuquerque Indian Health Board and Patrick Roberts with NNAAPC will work together to create a survey that will incorporate information above. Once information is collected from the survey, Patrick will disseminate. • Information as a "resource directory. 	<p><u>Commitments:</u></p> <ul style="list-style-type: none"> • Elton Naswood will work with Savannah Gene and Sheldon Benally to assist with building bridges between the CDC and UNM Epi Center. • Veronica Bruce and Mattee Jim will work with Pascua Yaqui Tribal leaders. • Patrick Roberts will provide a template letter for HCV awareness to Tribal Leaders. • Mattee Jim will work with Tribal Leaders with template letters provided. • Everyone write letters 	<p><u>Commitments:</u></p> <ul style="list-style-type: none"> • Community volunteers • Anton Maye will work with local radio station to help assist with PSA about confidentiality. • Patrick Roberts will create flyers and post cards that address the need for confidentiality in the healthcare setting and in the community. 	<p><u>Commitments:</u></p> <ul style="list-style-type: none"> • Pascua Yaqui Tribe Taskforce • Ruth White, Kevin Valentine, and Donald Chee will work with task forces and will utilize NNAAPC (Patrick) with outreach. 	<p><u>Commitments:</u></p> <ul style="list-style-type: none"> • Maeuneka Wero, Freida Naegle, and Lorren Sandt with Caring Ambassadors will assist with filming personal stories in the Caring Ambassadors home office. • Patrick Roberts will create a Survey Monkey to aggregate all Native community based radio, newspaper and TV stations. • Kevin Valentine, Jeremy W, Fannie J. Frances C., and Gerry C will find youth to share stories for filming by Caring Ambassadors. 	<p><u>Commitments:</u></p> <ul style="list-style-type: none"> • Savannah Gene and Laine Snow will work with the Resource Sharing and Community Involvement subgroups.

VI. COORDINATION: Finalize the Details & VII. RESOLVE: Affirm and Celebrate

The day ended with reviewing all of the information collected and work conducted. Future steps were planned, including writing up a report to distribute to all participants. Recognition was given to all participants, speakers and participants.



SUMMIT PARTICIPANTS

The attendees of the Technology of Participation (ToP) Action Planning Facilitation Method consisted of members from tribes across the Southwest, tribal clinic providers and support staff, nurses, behavioral health, outreach and other agencies that serve American Indian/Alaskan Natives, as well as Departments of Health, Departments of Human Services, Indian Education, and other state and federal agencies:

Name	Job Title	Organization
Amy Armistad	Program Specialist	Project ECHO
Marco Arviso	Consultant	Na'Nizhohzi Center, Inc.
Janelle Atcity	Manager of Native American Affairs	Presbyterian Health Plan
Jenn Awa	Capacity Building Specialist	Capacity for Health
Vivian Bahe	Health Educator	Navajo Health Education Program
Lonnie Barraza	Consultant Health Angel	Self Employed
Kurt Begaye	Capacity Building Specialist	Begaye Consulting
AJ Ben	Prevention Specialist	New Mexico AIDS Services
Al Benalli	Substance Abuse Counselor	Tohajiilee Behavioral Health System
Sheldon Benally	Research Tech II	NM AIDS Education and Training Center - Project ECHO
Philana Bidtah	HIV Peer Educator	Diné College HIV Program
Jay Blackwell	Consultant	
Hannabah Blue	Public Health Services Project Manager	American Indian Public Health Resource Center, NDSU
Veronica Bruce		
Mary Carmody	HIV Education and Prevention Specialist	First Nations Community HealthSource
Monique Chavez	Intern	Drug Policy Alliance
Donald Chee	Public Health Comm. Liaison II	Diné College
Ashley Chory	Research Coordinator	South West Care Center
Theresa Clay	Health Promotion Disease Prevention	Indian Health Service
Cheryl Cook	HIV Health Educator	Tuba City Health Education Program
Frances Cupis	HIV/AIDS Prevention Coordinator	Pascua Yaqui Tribe Health Department

Kay Dendy	National Accounts Manager	OraSure Technologies
James Dickens	Regional Minority Health Consultant	HHS
Kevin English		
Julie Erb-Alvarez	Area Epidemiologist	Oklahoma City Area Indian Health Service
Judith Espinoza	Epidemiologist	AASTECC
Marina Estrada	Ombudsman	Presbyterian Health Plan
Samantha Fernando		
Bryce Gabaldon	Police Officer	Ohkay Owingeh Public Safety
Andrea Gallegos	Disease Prevention Program Manager	NM DOH
Andrew Gans	HIV, STD and Hepatitis Section Manager	New Mexico Department of Health
Jessica Gelay	Policy Coordinator	Drug Policy Alliance
Savannah Gene	Program Administrative Coordinator	Albuquerque Area Indian Health Board
Camilla Graham	Co-Director, Viral Hepatitis Center	Beth Israel Deaconess Medical Center
Jonathan Hale	Council Delegate	Navajo Nation
Theresa Hughes	CEO	Hughes Healthcare Disparities Group
Darlene V Hunt	HIV Outreach Coordinator	Diné College HIV Program
Danielle Jackson		
Mattee Jim	Supervisor HIV Prevention Programs	First Nations Community HealthSource
Lorenzo Jim		First Nations Community HealthSource
Jason Johnson		
Mariah Johnson	Senior Manager, Viral Hepatitis/Policy & Leg.	National Alliance of State & Territorial AIDS Directors
Tracy Jungwirth	Program Manger	New Mexico AETC
Anna Kistin		AIDSUnited
Wendell Lavergne	Senior Account Manager	OraSure Technologies, Inc.
Connie Lewis		
Yuridia Leyva		
Jessica Matus	Medical Assistant	Pascua Yaqui Tribe
Juliette McCoy	Manager, Community Benefits	PHP
Sara Mirza	Pharmacist	Walgreens
Marlene Montano	Hepatitis C Surveillance	DOH
Carolyn Montoya	School Social Worker	APS
Kimberlee Moss	Medical Case Manager	First Nations Community Healthsource
Elton Naswood	Senior Program Analyst	Office of Minority Health Resource Center
Bob Nicol	Architect & Wine Grape Grower	Robert Nicol, F.A.I.A., Vineyards
Lorenzo Olivas	Regional Minority Health Consultants	Office of Minority Health, HHS
Kimberly Page	Professor	University of New Mexico Health Sciences Center
Christopher Paisano	Consultant	
Brandon Pasquale		
Dornell Pete		Albuquerque Area Indian Health Board
Keioshiah Peter	Research Program Assistant	Johns Hopkins Center for American Indian Health
Ana Portillo	Program Coordinator	Project ECHO

Trudy Redshirt	Director of Public Health Nursing	Crownpoint Healthcare Facility
Travis Renville		
Patrick Roberts	Health Policy Fellow	National Native American AIDS Prevention Center
Irasema Rodriguez	CHR	Pascua Yaqui
Lorren Sandt	Executive Director	Caring Ambassadors
Ann Schwartz	Capacity Building Assistance Coordinator	Center for Health & Behavioral Training
Zena Smith		Social Hygiene Program
Laine M. Snow	VHPC	NMDOH
Apryl Swainston		
Josh Swatek	Overdose Prevention Coordinator	New Mexico Department of Health
Todd Theringer	Board President	National Native American AIDS Prevention Center
Octavia Thompson		
Karla Thornton	Physician	UNMHSC
Rydell Todicheeny	Clinical Nurse Specialist	Kindred Hospital Westminster
Roger Trujillo	Police Officer	Ohkay Owingeh Public Safety
Clarisse Tsang	Viral Hepatitis Prevention Coordinator	Arizona Department of Health Services
Susan Tusher	Program Director	KS AETC
Ashley Twitty	Student Intern	PHP
Kevin Valentine	Health Education Tech.	Navajo Health Education Program
Leandro Viana	Hepatitis C Surveillance	DOH
Katherine Wagner	Project Director, Hepatitis C Treatment and Int.	University of New Mexico
Regina Waits	HIV/AIDS Regional Resource Consultant	U.S. Department of Health & Human Services
Anton Wero		
Maeuneka Wero	Senior Health Educator	Navajo Health Education Program
Ruth White	Community Health Nurse	Kayenta Public Health Nursing
Alexander White Tail Feather	Executive Director	National Native American AIDS Prevention Center
Ayn Whyte	Program Manager	Albuquerque Area Indian Health Board, Inc.
Sherri Willeto	HIV Prevention Specialist	First Nations Community Health Source (INSPIRE HIV Prev.)
Scott Willie		
Terry Windchester	Community Health Nurse	Alamo Health Center
Jill Wolf	Hepatitis C Program Director	Caring Ambassadors
Venita Wolfe	Community Research Specialist	Univ of New Mexico
Sarah Yazzie	TB Coordinator	CHR/Outreach Program
Dominick Zurlo	Hepatitis and Harm Reduction Program Mgr.	New Mexico Department of Health

PLANNING COMMITTEE

- Kurt Begaye
- Elton Naswood
- Ayn Whyte
- Hannabah Blue
- Patrick Roberts
- Theresa Hughes
- Todd Theringer

COLLABORATING AGENCIES

- Albuquerque Area Indian Health Board
- Begaye Consulting
- Diné College Integrated HIV/HCV/Substance Abuse Prevention Program
- First Nations Community HealthSource, Inc.
- NDSU American Indian Public Health Resource Center
- Pascua Yaqui HIV Prevention Center

ACKNOWLEDGEMENTS

On behalf of the Hughes Healthcare Disparities Group (HHDG), the National Native American AIDS Prevention Center (NNAAPC), and the Office of Minority Health Resources Center (OMHRC), Thank You to all the individuals and organizations who helped to make this event happening, including but not limited to Summit Sponsors and Partners, Plenary and Keynote Speakers, Presenters, Funders, Planning Committee Members, Volunteers, and Supporters. We hope to make this summit a tradition and foster the wonderful relationship we have built.

Organizations/Agencies:

- AbbVie
- Albuquerque Indian Area Indian Health Board
- American Liver Foundation
- Begaye Consulting
- Diné College
- Eventbrite
- First Nations Community HealthSource
- Hughes Healthcare Disparities Group
- Indian Pueblo Cultural Center
- National Native American AIDS Prevention Center
- Native American Community Academy
- New Mexico AIDS Education and Training Center
- Office of Minority Health Resource Center
- South Central AIDS Education & Training Center
- Sweet Nations
- University of New Mexico, School of Medicine

Individuals:

- Al Benalli
- Alexander Whitetail Feather
- Ann Schwartz
- Ayn Whyte
- Camilla S. Graham
- Candice Ben
- Clarisse Tsang
- Dominick V. Zurlo
- Donald Chee
- Elton Naswood
- Frances Cupis
- Hannabah Blue
- Jennifer Awa
- Julie Erb-Alvarez
- Karla Thorton
- Kimberly Page
- Kurt Begaye
- Laine M. Snow
- Lorenzo Jim
- Marco Arviso
- Mariah E. Johnson
- Mattee Jim
- Michaela Grey
- Octavia Thompson
- Patrick Roberts
- Philana Bitdah
- Representative Michael M. Honda
- Rydell Todicheeny
- Savannah Gene
- Scott Willie
- Sheldon Benally
- Theresa Hughes
- Todd Theringer