



Native Male Health Coalition: The Journey to Wellness

by Leo Nolan

Despite the phenomenal growth of Indian gaming and the increasing wealth of many Indian tribes, there has not been a corresponding improvement in the health and wellness of American Indians and Alaska Natives (AI/AN). In particular, the health status of AI/AN men and boys continues to be among the poorest in the country, representing one of the most significant unrecognized and long standing public health problems in need of a national call to action. By most death rate indicators, AI/AN males are at the very bottom of this country's wellness spectrum. The Indian Health Service (IHS) has reported life expectancy for AI/AN males living in the Aberdeen Area is 63 years compared to 74 years for all U.S. men.

Three of the biggest killers of AI/ANs males – alcohol-related deaths, diabetes and heart disease – are 3 to 6 times greater than the U.S. all-races rate. Suicide rates for AI/AN overall is nearly twice that of the U.S. all-races rate and among age ranges 15-49 years, suicide rates among AI/AN males are three to five times higher than AI/AN females. Related findings from the CDC's *National Health Statistic Report (No. 20, March 2010)* suggest that AI/AN men have greater disparities in health status and general well-being than any group (white, African American, Asian and Hispanic and male and female) and AI/AN men reported the highest rates of "feeling hopeless and worthless" of any of the groups in the survey. The high rate of suicide among AI/AN men is fatal proof of the impact of these feelings of despair.

Despite these troubling statistics, there is reason for hope and optimism. There is a growing network of public and private individuals and organizations that believe these challenges can be addressed and eventually overcome. *The Native Male Health Coalition: The Journey to Wellness* was established as an ad hoc advisory group of the Men's Health Network (MHN). The MHN is a 20+ year old non-profit organization committed to improving the health and wellness of men, boys, and their families. Together, the Coalition and the MHN are exploring opportunities for collaborating with others to improve the health and wellbeing of AI/AN boys, men and their families.

The Coalition is focusing efforts at two major areas of needed investigation and intervention as identified in the report: *A Vision for Wellness and Health Equity for American Indian and Alaska Native Boys and Men*:

- Increasing access to and quality of critical primary health services for prevention and control of chronic diseases.
- Targeting recognized social determinants of health (positive and negative) and altering their health effects through efforts that address hope, healing, parenthood, and wellness for AI/AN males and their families.

To date the Coalition, with the assistance of IHS and other HHS agencies and MHN, have conducted two webinars, one highlighting overall male health disparities and one highlighting male youth health, and plan to hold four more during the fall of 2013 focusing on AI/AN veterans issues, offender re-entry, recovery from addictions, and male health as an important contributor to family and community health. The Coalition is also exploring the development of public service announcements and other campaigns to promote AI/AN male health that may include chronic disease prevention and management, suicide prevention, veterans' assistance, culturally tailored male oriented approaches to health screenings, and research to identify best practices. With the guidance and support from tribal and community leaders, male focused programs will be developed and shared over the next few years.

The permanent reauthorization of the Indian Health Care Improvement Act, as part of the Affordable Care Act, provides authority to establish an Office of Indian Men's Health in the Indian Health Service. This office could serve as the critical point of coordination and public health policy advisor promoting AI/AN male health. Unfortunately, this office has not yet been established. The Coalition and the MHN are continuing to bring the attention to leadership of HHS the need to establish this office. The wellbeing of AI/AN men is not just an issue for the individual, but is equally important for health at the family and community level. AI/AN males are important leaders and are key to family and community health. The statistics quoted above do not capture the profound loss families and communities feel when a husband, father, brother, or son is lost to what are largely preventable diseases and behaviors.

The process of developing awareness is well under way through the MHN publications and the webinar series, but it is critical that it be further developed. It is also essential to crystalize the emerging awareness into a commitment to action at the local level centered on priorities identified by tribal leaders, community leaders and the key stakeholders. It is time to pay greater attention to the health and wellbeing of AI/AN men and boys whose quality of life so desperately needs to be improved as means of realizing improved family and community health. ♣

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