



Testimony of the Confederated Tribes of the Umatilla Indian Reservation  
House Committee on Healthcare, Oregon Legislative Assembly  
HB 2088 – Tribal Traditional Health Worker  
March 2, 2021

Good afternoon. My name is Sandra Sampson. I am the Treasurer of the Board of Trustees for the Confederated Tribes of the Umatilla Indian Reservation. I appreciate the opportunity to testify in support of HB 2088.

The bill adds a category and defines the role of Tribal Traditional Health Workers in Oregon and it creates a seat at the table for this sector on the Traditional Health Workers Commission. A number of our employees participated in early discussions with the state to advocate for the concept of Tribal Traditional Health Workers (TTHW) in the spirit of ‘growing our own’ and creating a program for tribes - by tribes.

This idea has had energy and support for years now because it is vital to have staff who look like the people they serve, who understand the determinants of health for tribal people and bring their own ‘lived experience’ to their work with patients. These providers acknowledge the historical trauma and unresolved grief that impacted our families generations ago and often manifests today in the form of addictions, anxiety, PTSD, autoimmune disorders and ADD/ADHD. They connect with patients at times when a clinician or provider might not be available and they are trusted and valued by our patients.

We are located in an area that has a shortage of health care professionals with limited housing options. We have difficulty recruiting for services we need. So, training community members to provide support as families navigate the healthcare system makes good sense.

A good example is Sierra Quaempts - she is a provider and a THW trainer at Yellowhawk. Sierra was one of the first providers hired as a Youth Mentor. Part of the grant sustainability plan was to formally train staff and be able to bill for their services.

In 2020, Sierra and our two other Traditional Health Workers provided 296 services to young people from grade school through college with complex mental health needs, almost all related to trauma. This augmented service was provided utilizing many methods including utilizing the family preservation curriculum, school based therapists and sometimes psychiatry. Keep in mind this was during the pandemic. Some services were face to face, physically distant, some through telehealth. And their work has had positive results.

The Family Preservation curriculum was developed in 2017 by the nine tribes of Oregon and the Urban Indian Health Program-NARA. It was the first culturally specific curriculum written for Family Support Specialists working in tribal communities. Recognizing our tribal culture and traditions, as well as the experience and knowledge to be able to create a curriculum to support our tribal families is what this is all about.

This collaboration with Oregon Health Authority Tribal Affairs and the Office of Equity and Inclusion, Oregon Family Support Network and the Northwest Portland Area Indian Health Board was the opportunity to start this work for Tribal Traditional Health Workers. Through these partnerships the program has shown to be effective. By developing the curriculum, training the trainers and implementing the program at the local level we have

seen the benefits of this work. Aaron Noisey and Sierra Quaempts were very instrumental in being two of the first trainers to train other Tribes.

Creating a separate category and developing a program for Tribal Traditional Health Workers (TTHW) is the next step in supporting tribes to do what is best for their communities. It is vital to our work here on the Umatilla Indian Reservation so we urge your support for HB 2088.

Thank you again for the opportunity to testify.