



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD

Burns-Paiute Tribe
Chehalis Tribe
Coeur d'Alene Tribe
Colville Tribe
Coot, Siuslaw &
Lower Umpqua Tribe
Coquille Tribe
Cov Creek Tribe
Cowlitz Tribe
Grand Ronde Tribe
Hoh Tribe
Jamestown S'Klallam Tribe
Kalispel Tribe
Klamath Tribe
Kootenai Tribe
Lower Elwha Tribe
Lummi Tribe
Makah Tribe
Muckleshoot Tribe
Nez Perce Tribe
Nisqually Tribe
Nooksack Tribe
NW Band of Shoshoni Tribe
Port Gamble S'Klallam Tribe
Puyallup Tribe
Quileute Tribe
Quinalt Tribe
Samish Indian Nation
Sauk-Suiattle Tribe
Shoalwater Bay Tribe
Shoshone-Bannock Tribe
Siletz Tribe
Skokomish Tribe
Snoqualmie Tribe
Spokane Tribe
Squaxin Island Tribe
Stillequamish Tribe
Suquamish Tribe
Swinomish Tribe
Tulalip Tribe
Umatilla Tribe
Upper Skagit Tribe
Warm Springs Tribe
Yakama Nation

2121 SW Broadway
Suite 300
Portland, OR 97201
Phone: (503) 228-4185
Fax: (503) 228-8182
www.npaihb.org

Dear Tribal Health Advocate:

Project Red Talon at the Northwest Portland Area Indian Health Board (NPAIHB) is working to compile a list of sites implementing **HIV prevention interventions in AI/AN communities**. This list will be made available to tribes and tribal organizations to learn from one another and help sites select effective prevention programs.

We need your help.

Please help us locate the good work that is being done in Indian Country!

If you are:

- implementing** an evidence based HIV prevention intervention in a AI/AN community
- adapting** an evidence based HIV prevention intervention to make it more culturally appropriate for AI/ANs
- evaluating** a HIV prevention intervention with an AI/AN target audience

Please fill out the information on the next page or pass it along to partners who are. We would also be happy to fill out the form with you over the phone, if you would like.

Please return the form to:

Stephanie Craig Rushing
Northwest Portland Area Indian Health Board
2121 SW Broadway, Suite 300
Portland, Oregon 97201
503-416-3290
scraig@npaihb.org

Thank you for your time and consideration!

Evidence Based Interventions for HIV Prevention in AI/AN Communities

Intervention Coordinator/Contact Person:	
Phone Number:	Email:
What is the name of the HIV prevention intervention that your Tribe or tribal organization is implementing, adapting, or evaluating?	
Is it recognized as an Evidence Based Intervention (EBI) by the CDC? Available on: www.effectiveinterventions.org	
<input type="checkbox"/> Yes	
<input type="checkbox"/> No	
<input type="checkbox"/> Don't Know	
Tribe or setting where the Intervention is used:	
What is the source of funding?	
Which are you doing (check one or more):	
<input type="checkbox"/> implementing an evidence based HIV prevention intervention in a AI/AN community	
<input type="checkbox"/> adapting an evidence based HIV prevention intervention to make it more culturally appropriate for AI/ANs	
<input type="checkbox"/> evaluating a HIV prevention intervention with an AI/AN target audience	
If you are implementing or plan to implement... Can you share a sentence or two about how that's going? Describing Who? What? When? Where? How?	
If you are adapting or plan to adapt... Can you share a sentence or two about how that's going? Describing Who? What? When? Where? How?	
If you are evaluating or plan to evaluate... Can you share a sentence or two about how that's going? Describing Who? What? When? Where? How?	
If you adapted the program, do you have a user's manual or any training materials that could be added to www.HealthyNativeYouth.org ?	
<input type="checkbox"/> Yes	
<input type="checkbox"/> No	