



Julia Davis-Wheeler (Nez Perce) was a member of the National Indian Health Board when Congress appropriated money through the Balanced Budget Act of 1997 for diabetes treatment and prevention in American Indian and Alaska Native populations. The amount of money was unprecedented: \$150 million for five years (\$30 million each year).

At the 1997 NIHB Consumer Conference held in Spokane, Washington, a special meeting was hosted for tribal leaders to discuss and recommend the first steps in determining the distribution of these special funds...

Meet

Portland Area Alternate Tribal Leaders Diabetes Committee

Julia Davis-Wheeler

Remembering Early Days of the TLDC

Julia remembers that meeting in Spokane, and the subsequent discussions like they happened yesterday. Not only was the amount of money huge, the need for the money was huge. “It was so emotional. It was like getting a great big Christmas present,” she says.

According to the legislation, the special diabetes money was to go through Indian Health Service and be distributed through a grants process. In November of 1997, the IHS Director convened a small diabetes workgroup to review and recommend options identified from the Area consultations. This workgroup became the Tribal Leaders Diabetes Committee

(TLDC) and continues to make recommendations and provide advice on policy and legislative issues related to diabetes.

Julia was a member of the TLDC during their initial meetings. “I remember the IHS staff coming to the TLDC meetings and giving reports on amputations, dialysis, blindness, and death rates. These meetings were intense. There were a lot of tears,” says Julia.

Members of the TLDC were not just reacting to the numbers. Like Julia, all members had experienced diabetes first hand. “I have diabetes on both

sides of my family. We’ve lost several family members from complications,” she says.

Fueled by an intense determination to help her people and all Native people, Julia traveled to the TLDC quarterly meetings and listened to the reports of IHS, other diabetes-related agencies, and tribal leaders. The TLDC continued discussions on how to distribute the diabetes funding and how tribes would access the funding.

Each meeting started with prayer. Each meeting saw TLDC members give

...They recommended that tribal governments, IHS and urban Indian health programs provide their views through Area consultation.

After 11 weeks of consultation, 12 IHS Areas, 542 tribal governments and 34 urban Indian health programs submitted their views to the IHS Director.



testimony on how diabetes was devastating families and communities. Even though the ideas on how best to spend the money may have been different, the desire to stop the diabetes epidemic was the same.



That was ten years ago. Since then, Julia has worked to help build two clinics at the Nez Perce Tribe. She has witnessed walking programs, nutrition programs, and wellness centers flourish at the Nez Perce and other tribes. “It feels really good to see the fruits of our labor.”

Julia has experienced personal change as well. For two years, she was not voted onto the tribal council, so did not serve on the TLDC. She held a variety of jobs at the Nez Perce Tribe. She was a My Care Team Assistant, implementing an Internet program to

improve patient/provider communication. She also transported patients to a dialysis center.

“These two years were eye opening for me. I witnessed the everyday struggle. I realized that many people are living day-to-day. They worry about what they will eat for their next meal, how they will pay their electric bills, how they will afford to drive to see a specialist. I started to understand and live the people’s hardships.”

Julia says these jobs and being in touch with people were very satisfying. But, she was being repeatedly asked to run for the tribal council. In May of 2006, she ran and was elected for a three-year term. She is a strong advocate for diabetes health education and prevention. Diabetes prevention is high on her list.



Julia is again a part of the TLDC, this time as an Alternate for the IHS Portland Area Health Board Member Linda Holt (Suquamish). She says her two years working for the Nez Perce Clinic changed her. “I’m much more people oriented. I want to make things better for every patient.”

And how do we do that? “We as tribal leaders need to push the budget process to keep the SDPI funding intact. We need to go back to the basics, traditional foods, traditional beliefs. We need to know who we are, and express ourselves, through singing, dancing, artwork, beadwork. Let’s not get so busy that we forget the things that are most important: our heritage, our culture.”

