[INSERT DATE]

The Honorable [INSERT NAME OF REPRESENTATIVE]

[INSERT OFFICE ADDRESS]

Washington, DC 20515

**RE: Sign on Letter to Direct Zika Supplemental Funding to Tribal Communities**

Dear [insert REPRESENTATIVE]:

On behalf of [INSERT NAME OF TRIBE OR ORGANIZATION] I write today to request that you ***sign onto a letter (below) requesting that any supplemental funding for Zika virus include dedicated and sustained funding streams, in parity with states, for vector control in Tribal communities***. Additionally, Tribes should be made eligible for grants to establish locally managed vector control programs. The letter is being led by Representatives Grijlava and Kirkpatrick.

Tribal communities are frequently left out of state or local emergency preparedness plans, and it is critical that at least a portion of these dollars flow directly to Tribal communities in regions at-risk for Zika in order to ensure the virus is fully contained in Indian Country, and the United States as a whole. Tribal communities are among the most at-risk for tick- and mosquito-borne diseases. They are already disproportionately impacted by Rocky Mountain spotted fever and West Nile virus. The risk of new vector-borne diseases being introduced into Tribal communities on the U.S.-Mexico border is high. While Indian Health Services (IHS) has identified vector-borne disease control as one of its national priorities, it does not currently have the staffing or resources to undertake needed control operations. Currently, Tribes are eligible to apply for Epidemiology and Laboratory Capacity (ELC) grants from the Centers for Disease Control and Prevention’s (CDC) Division of Vector-Borne Diseases (DVBD), but they do not qualify for funding due to lack of required laboratory or epidemiology capability.

It is critical that Congress approve this funding request and that at least a portion of the dollars approved reach Tribes directly. Many Indian reservations reach across state boundaries and occupy land areas larger than many states. Few, however, receive any funding support for public health crisis response from state governments. The federal government has a special trust responsibility for health to Indian Country, and emergency response to epidemics is well within this category. As independent, sovereign nations, Tribal governments do not operate within the state regulatory structure and Tribes are regularly left out of statewide public health plans, funding decisions and funding opportunities that support public health programs – like emergency response to epidemics. Because Tribes do not have a local tax base and little (if any) outside funding, Tribal communities are often most at-risk for the spread of dangerous, infectious diseases like the Zika virus.

Without federally-supported infrastructure support for prevention and response to the Zika virus in Indian Country, the impacts on American Indians and Alaska Natives could be enormous. Furthermore, failure to fund Tribal communities and reservations could mean that large land areas of this country would be left out of mosquito mitigation, and therefore, impede the United States’ efforts to eradicate the disease within its borders.

In conclusion, we request that Congress appropriate the $1.9 billion requested in supplemental funding for Zika virus and, furthermore, that you sign onto the letter requesting dedicated and sustained funding to Tribal communities.

To sign the letter, please contact Kelsey Mishkin (Kelsey.Mishkin@mail.house.gov) with Congressman Grijlava’s office or Molly Brown (Molly.Brown@mail.house.gov) with Congresswoman Kirkpatrick’s office.

Sincerely,

[INSERT NAME AND TITLE]

***Text of the sign on letter:***

*May XX, 2016*

*Dear Speaker Ryan and Leader Pelosi:*

*We urge you to act to protect people in the United States, including American Indians, from the urgent threat of the emerging Zika virus. In recent days, the Zika virus has been detected in the*Aedes albopictus *mosquito, which has a large habitat range within the continental United States. This fact underscores the need for immediate action – further delay puts pregnant women and their unborn children at risk.*

*Tribal communities are among the most at-risk for tick- and mosquito-borne diseases. They are already disproportionately impacted by Rocky Mountain spotted fever and West Nile virus. The risk of new vector-borne diseases being introduced into tribal communities on the U.S.-Mexico border is high. While Indian Health Services (IHS) has identified vector-borne disease control as one of its national priorities, it does not currently have the staffing or resources to undertake needed control operations. Currently, tribes are eligible to apply for Epidemiology and Laboratory Capacity (ELC) grants from the Centers for Disease Control’s (CDC) Division of Vector-Borne Diseases (DVBD), but they do not qualify for funding due to lack of required laboratory or epidemiology capability.*

*An emergency funding supplemental to address this health crisis should be brought to a vote without further delay. This legislation should include dedicated and sustained funding streams, in parity with states, for vector control in tribal communities. Additionally, tribes should be made eligible for grants to establish locally managed vector control programs. Entities with a history of high incidences of vector-borne disease should be priority recipients. Mosquitos and other vectors do not respect political boundaries. If tribal communities cannot protect themselves from Zika and other vector-borne diseases, then the entire nation is at risk.*

*Refusal to protect our nation in the face of a public health emergency is not an option. Every moment of delay makes the United States, our territories already struggling with this dangerous virus, and our tribal communities even more susceptible.*

*Sincerely,*