

RESOLUTION OF THE
NAVAJO NATION COUNCIL

22nd NAVAJO NATION COUNCIL -- First Year, 2011

AN ACTION

RELATING TO HEALTH, EDUCATION AND HUMAN SERVICES; NAA'BIKI'YATI'
ENACTING THE 2011 NAVAJO NATION HIV/AIDS ACT BY AMENDING 13 N.N.C.
§3201 *ET SEQ.*

BE IT ENACTED:

Section 1. Findings

1. The Navajo Nation finds that the 2009 Navajo Nation HIV/AIDS Policy Development Workgroup has recommended amendments to the "Navajo Nation HIV/AIDS Code", 13a N.N.C §3201 *et seq.*, CO-100-94, October 21, 1994.

2. The Navajo Nation finds that all individual within the jurisdiction of the Navajo Nation must continue receiving education and appropriate counseling with respect to the Human Immunodeficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS), and that those with HIV should receive compassionate treatment, care and needed services, and be protected from stigma, discrimination, and invasion of privacy due to presumed or actual HIV status.

3. The Navajo Nation finds that Navajo Nation programs and services should all conform to current policy goals to prevent HIV transmission, provide open discussion about HIV/AIDS and establish an environment that increases awareness and support for HIV/AIDS prevention, care, treatment services, and HIV testing.

4. The Navajo Nation finds a need to provide standardized and coordinated system of services along the HIV/AIDS continuum of care that integrates the most current recommendations and evidence-based practices. Further, in considering current epidemiology and specific health determinants of the Navajo population, efforts in addressing HIV/AIDS and related issued under this Act should be guided by Navajo culture and tradition, including Navajo concepts of respect K'e, Adil'idi, hozhíí', and adaa 'ati hat'í.

Section 2. Amendment to Title 13

The Navajo Nation Council hereby enacts the 2011 Navajo Nation HIV/AIDS Act by amending 13 N.N.C. §3201 et seq. as follows:

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The Navajo Nation Council hereby enacts the 2011 Navajo Nation HIV/AIDS Act by amending 13 N.N.C. §3201 et seq. as follows:

TITLE 13, HEALTH AND WELFARE
Chapter 23. NAVAJO NATION HIV/AIDS CODE

Section

- 3201. Policy
- 3202. ~~Education~~ Definitions
- 3203. ~~Confidentiality and testing~~ Stigma & Discrimination
- 3204. ~~Coordinate with Navajo Nation Division of Health~~
Prevention
- 3205. ~~Treatment~~ HIV Screening, Confidentiality and Contact
Investigation/ Partner Notification
- 3206. ~~Amendments~~ Treatment and Disease Management
- 3207. ~~Surveillance/Investigation~~
- 3208. ~~Amendments~~

§ 3201. ~~Purpose~~Policy

A. The 2009 Navajo Nation HIV/AIDS Policy Development ~~Work Group~~ Workgroup has revised the "Navajo Nation HIV/AIDS Policy" established in 1994, after an extensive study of the requirements of the Navajo Nation has developed a "Navajo Nation HIV/AIDS Policy" evaluation of the current Navajo Nation HIV/AIDS epidemiology and the needs for renewing the 1994 Policy to incorporate the most current and evidence-based practices and concepts in addressing HIV/AIDS. This Act is based on the revised "Navajo Nation HIV/AIDS Policy" developed in 2009. ~~that The Policy and that Policy~~ should be consulted to resolve any questions or ambiguities in this Act.

B. It is the policy of the Navajo Nation to ensure that all individuals within the jurisdiction of the Navajo Nation receive education and appropriate counseling with respect to the Human Immunodeficiency Virus (HIV), ~~a virus that~~ which can leads to Acquired Immune Deficiency Syndrome (AIDS), and other similar communicable disease. Further, it is the policy of the Navajo Nation that an individual infected living with the AIDS HIV virus should receive compassionate medical treatment, care and needed services, and be protected from stigma discrimination and invasion of privacy due to ~~their infection or suspected infection with the HIV/AIDS virus presumed or actual HIV status.~~

C. ~~Navajo Nation Programs services providers shall cooperate to prevent the spread of the HIV/AIDS virus. Activities coordinated under this Act shall emphasize Navajo concepts of harmony, culture, traditional practice and the role of the family, kinship and community. All Navajo Nation programs and services shall conform, t the policy goals to prevent HIV transmission. It is the policy of the Navajo Nation to ensure active and ongoing leadership from all levels in order to open discussion about HIV/AIDS and establish an environment that increases awareness and fully supports HIV/AIDS prevention, care, treatment services, and HIV testing. Relevant stakeholders shall collaborate to provide a standardized and coordinated system of services along the HIV/AIDS continuum of care that integrates the most current recommendations and evidence-based practices. In addition to considering current epidemiology and specific health determinants of the Navajo population, efforts in addressing HIV/AIDS and related issues under this Act shall also be guided by Navajo culture and tradition, including the Navajo concepts of respect, K'e, Adil'idli, hohjii', and adaa'ati hat'ii.~~

§ 3202. Education Definitions

A. ~~Communicable diseases generally, All programs, services and businesses within the Navajo Nation shall adopt simple infection control procedures and protocols for their organizations. These procedures shall include appropriate education on communicable diseases. The Navajo Occupational Safety and Health Administration and the Navajo Division of Health shall assist in the planning, implementation, education, and monitoring of infection and communicable disease control procedures. As appropriate and available, the Navajo Are Indian Health Services shall participate in these activities.~~

~~B. Schools. Local school boards and parent advisory groups shall be educated to assist with HIV/AIDS prevention efforts in the schools. Lesson plans and curricula, similar to the "Navajo Beauty Way" shall be developed and implemented to allow for traditional Navajo values in HIV/AIDS education. Adil'idli and other Navajo traditional teachings shall be incorporated whenever relevant. Parents, family members, and community leaders are to be involved in this education process. The Navajo Division of Education and the Navajo Division of Health will assist in developing this education curriculum.~~

A. Adaa'ati hat'ii - Helping self toward healing (with ceremonies, herbs, etc.), seeking for assistance.

B. Adil'idli - Self respect, values, identity.

C. Acquired Immunodeficiency Syndrome (AIDS) - A disease defined by reduced effectiveness of the immune system and characterized by the development of opportunistic infections resulting from advanced immune system damage caused by the Human Immunodeficiency Virus (HIV).

D. Centers for Disease Control and Prevention (CDC) - A federal agency in the Department of Health and Human Services that serves as the national focus for developing and applying disease prevention and control as well as health promotion to improve the health of the people of the United States.

E. Co-infection - A general term referring to concurrent infection with two or more infectious agents. HIV co-infection refers to HIV and another infection such as syphilis.

F. Co-risk factor. A term referring to the simultaneous presence of two or more aspects of personal behavior or lifestyle, environmental exposures, social conditions, or inborn or inherited characteristics associated with an increase in a person's chance of having a disease or other health-related event or condition.

G. Diné - Of or pertaining to the Navajo people, culture, tradition, history or language.

H. Epidemic - A widespread occurrence of a disease in a community at a specific time; an increase in the number of a disease over baseline or over what is expected.

I. HIV-positive - Infected with HIV, but may or may not have AIDS.

J. Human Immunodeficiency Virus (HIV) - Either of the two human retroviruses that infect and destroy helper T cells of the immune system and causes AIDS.

K. Hózhóji - Blessing way.

L. Injection drug user (IDU) - An individual that injects illicit drugs intravenously.

M. K'e - Kinship, relatives, peace friendship.

N. Mother-to-child transmission (MTCT) - The transmission of an infectious organism from mother to child during pregnancy, delivery or breastfeeding. The HIV virus can be transmitted from mother to child.

O. Pandemic - A disease outbreak affecting or attacking the population of an extensive geographic region.

P. People living with HIV/AIDS (PLWH/A) - Anyone living with HIV infection or an AIDS-defining illness.

Q. Risky behavior - Any behavior, sexual or otherwise, that can transmit disease.

R. Sexually transmitted infection (STI; formerly STD, sexually transmitted disease) - An infection that can spread through sexual contact.

S. Stakeholder - Anyone or any agency with an interest in an issue or strategy but not necessarily closest to it or involved in its management or implementation.

T. Surveillance - The continuous tracking of all aspects of a disease, including occurrence and spread, pertinent to its effective control.

U. Transmission - The movement of a viral or other infection from person to person.

V. Universal precautions - Minimum standards of infection control used in the handling of blood and other bodily fluids at all

These include the handing and disposal of sharp objects; hand washing with soap and water before and after all procedures; use of protective barriers such as gloves, masks, etc. for direct contact with blood and other bodily fluids; safe disposal of waste contaminated with blood and bodily fluids; proper disinfection of instruments and contaminated equipment; and proper handling of soiled linens.

§ 3203. Confidentiality and Testing Stigma and Discrimination

~~A. Testing. All HIV antibody testing shall be voluntary. No person shall be required to undergo an HIV antibody test, against his or her free will, to recient any benefits, employment opportunity, or for any other reason. Except as provided in this act, and subject to the provisions of the Privacy Act, 5 U.S.C. § 552a, all test results, counseling and treatment of individuals who may be infected with the HIV/AIDS is confidential. Otherwise, confidential information may be obtained by a court order of the Navajo Nation District courts, provided appropriate safeguards are taken to ensure individual privacy.~~

~~B. Notification of persons "at risk." If based, on an investigation, it appears that an uninfected individual, who is unaware, may have been infected with HIV, a public Health investigator shall inform that individual. All information relating to the notification shall otherwise be kept in strict confidence.~~

~~C. Equal access to services. No person shall be denied services nor offered substandard services because of real or suspected HIV/AIDS infection. Nor shall any program or business within the Navajo Nation refuse services or employment opportunities to anyone based on real or suspected HIV/AIDS infection.~~

A. The social stigma associated with HIV infection and the resulting profound negative effects shall be recognized and addressed. The Navajo Nation shall support efforts to eliminate stigma and create a social environment that allows people living with HIV to fully live their lives without the additional burden of stigma. The Navajo Nation finds the discrimination of a person based on his or her HIV status unjustifiable. In accordance with applicable Navajo Nation and federal laws and regulations including Section III of the Navajo Nation Personnel Policies Manual, the Navajo Nation shall ensure people living with HIV and those at risk are protected from discrimination.

B. No person shall be denied services or offered substandard services because of actual or suspected HIV status, risky behaviors, or lifestyle choices. No Program, business or organization within the Navajo Nation shall refuse services for or refuse to employ a person based on actual or suspected HIV infection.

§ 3204. Coordination with Navajo Division of Health Prevention

~~A. Reporting requirements. Consistent with this Act, all HIV positive test results and HIV/AIDS case shall be reported to the Navajo Nation AIDS Office.~~

~~B. Maintenance of records. All reports and records of HIV positive tests and cases of HIV/AIDS shall be confidentially maintained consistent with the Privacy Act, 5 U.S.C. § 552a. No unauthorized person shall be allowed access to these records. The Navajo Nation AIDS office shall use these records to monitor the incidence of HIV/AIDS cases and assist HIV positive patients and their families in receiving appropriate medical care and services.~~

~~C. Coordination of services. The Navajo Nation AIDS Office shall assist in the development of a comprehensive and coordinated system of care for HIV positive patients and their families, and identification of alternative resources and treatment programs. Local HIV/AIDS related resources listings shall be developed and made available to assist patients and non-medical providers in accessing direct care services.~~

~~D. The Navajo Nation AIDS Office shall assist in researching traditional Navajo teachings and re-initiating the traditional ways of dealing with HIV/AIDS and other sexually transmitted disease.~~

A. Education. The Navajo Nation Health Education and HIV Prevention Program shall be the lead entity to identify/adopt an evidence-based comprehensive HIV/AIDS prevention education curriculum. Prevention education shall be available to all citizens on or near the Navajo Nation and shall also address behavior change, key contributing co-risk factors and personal fears and/or concerns about HIV/AIDS. Culturally appropriate HIV/AIDS education campaigns shall be planned and carried out on a regular basis by the Navajo Division of Health and other organizations in various Navajo communities utilizing available media venues. As Appropriate, the Navajo Area Indian Health Service (NAIHS) shall participate in these activities. Program activities and interventions of the Navajo Health Education and HIV Prevention Program shall be reported for monitoring and evaluation.

B. Infection Control/Universal Precautions. All programs, schools and worksites within the Navajo Nation shall implement universal precautions to prevent blood-borne infections. All organizations must have accessible infection control procedures, equipments and training. The Navajo Occupational Safety and Health Administration and the Navajo Division of Health shall assist in the planning, implementation, maintenance, and monitoring of infection control procedures. As appropriate and available, the Navajo Area Indian Health Service (NAIHS) shall participate in these activities.

C. Community's Role in HIV/AIDS Prevention People at all levels of the Navajo Nation including all Navajo Nation employees, Council Delegates, Chapter Officers, and other elected officials shall be educated on HIV/AIDS prevention to promote awareness and reduce stigma as role models. There shall be Navajo Nation-wide networking with all HIV/AIDS providers and resources.

§ 3205. Treatment HIV Screening, Confidentiality and Contact Investigation/Partner Notification HIV Screening

~~A. Services provider requirements. Treatment of HIV positive persons shall be comprehensive, competent and compassionate. All service provider shall make special efforts to keep clinical services up to date with recent developments in HIV/AIDS related care. Direct services shall include, but not be limited to, HIV antibody testing, counseling, HIV/AIDS education and prevention, current pharmacological treatment for HIV/AIDS infection, mental health and counseling services for HIV positive patients and their families. Service providers shall select an existing program or develop an appropriate program that is culturally relevant or Navajo specific, respectful of the Navajo culture, and reflects current knowledge and clinical guidelines about medical care and treatment is appropriate, respectful, and reflects current knowledge and clinical guidelines about HIV/AIDS related illness. Patients and their families shall have input into these processes.~~

~~B. Use of traditional Navajo treatment. Traditional Navajo healing methods may evolve as a primary means of treatment for persons already suffering from HIV/AIDS. As appropriate, the Navajo Division of Health shall include and assist such organizations as the Dine Spiritual and Cultural Society, Inc., in their efforts to develop treatment methodologies.~~

A. All HIV screening that shall be voluntary. No person shall be required to undergo an HIV test, against his or her free will, to receive any benefit, employment opportunity, or for any other reason. Prior to performing an HIV screening test, verbal consent shall be obtained from the individual being tested. Those testing positive for HIV shall receive post-test counseling. Universal HIV testing based on the Centers for Disease Control and Prevention (CDC) guidelines shall be the standard of care in all facilities. All screening results shall be reported to the Navajo Social Hygiene STD Program, which shall compile these results.

B. Mother-to-Child Transmission. Prenatal care providers shall counsel each woman on the benefits of knowing here HIV status./ HIV screening shall be included in routine prenatal screening for all pregnant women in Indian Health Service (IHS) and 638 facilities.

C. Confidentiality. The act of being tested, and all test results, counseling and treatment of individuals who may be living with HIV are confidential. Confidentiality must be practiced at all levels. Violation of any portion of the policies and procedures related to confidentiality of patient records or any violation of applicable Tribal, state and federal laws governing the patients' right to privacy shall result in disciplinary action.

D. Contact Investigator/Partner Notification. The Navajo Social Hygiene STD Program shall be responsible for contact investigation and partner services for Navajo people and residents of the Navajo Nation who have tested positive for HIV. The Navajo Social Hygiene STD Program shall collaborate with the HIS and the county or state health department for off-reservation jurisdictions an non-citizen status for residents of the Navajo Nation.

§ 3206. ~~Amendments~~ Treatment and Disease Management

~~Upon the recommendation of the Health and Social Services Committee of the Navajo Nation Council, the Navajo Nation Council may amend the Navajo Nation HIV/AIDS Code by majority vote of the members present.~~

A. Treatment, care, and services to people with HIV/AIDS shall be comprehensive, competent, compassionate, and adhere to current evidence-based practice and standards of care set forth by the U.S. Department of Health and Human Services. Health care providers shall link patients of traditional Dinè healing methods and spiritual practices in parallel with Western medicine for the

holistic and comprehensive care of people living with HIV. The quality of care provided to people living with HIV shall be monitored.

B. Navajo HIV prevention program shall ensure that the HIV/AIDS disease management and control plans/agreement in coordination with other service providers on the Navajo Nation are developed, monitored and implemented to sustain prevention efforts and ensure continuity of quality care for all those living with HIV or AIDS.

§ 3207. Surveillance/Investigation

A. All public and private agencies and service providers that provide HIV/AIDS services on the Navajo Nation shall report data on HIV/AIDS to the Navajo Health Education and HIV Prevention Program within an established timeframe. The Navajo Health Education and HIV Prevention Program shall be responsible for de-indentifying data into aggregate reports to ensure confidentiality and compliance with applicable Navajo Nation and federal privacy protection laws and regulations including following the Health Insurance Portability and Accountability Act (HIPPA). The Navajo Health Education and HIV Prevention Program and data stakeholders shall collaborate in the analysis, interpretation, and evaluation of data for future planning of intervention efforts.

§ 3208. Amendments

Upon the recommendation of the Health, Education and Human Services Committee, the Navajo Nation Council may amend the Navajo Nation HIV/AIDS Code.

Section 3. Effective Date

The amendments entered herein shall be effective pursuant to 2 N.N.C. §221(B).

Section 4 Codification

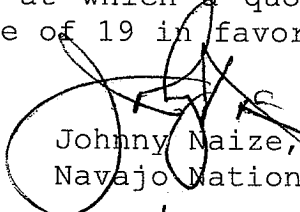
The provisions of the Act which amend or adopt new sections of the Navajo Nation Code shall be codified by the Office of Legislative Counsel. The office of Legislative Counsel shall incorporate such provisions in the next codification of the Navajo Nation Code.

Section 5. Saving Clause

Should any provision of this Act be determined invalid by the Navajo Nation Supreme Court, or the District Courts of the Navajo nation without appeal to the Navajo Nation Supreme Court, those provisions of the Act which are not determined invalid shall remain the law of the Navajo Nation.

CERTIFICATION

I hereby certify that the foregoing resolution was duly considered by the Navajo Nation Council at a duly called meeting in Window Rock, Navajo Nation (Arizona) at which a quorum was present and that the same was passed by a vote of 19 in favor and 0 opposed, this 19th day of October 2011.

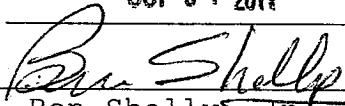

Johnny Naize, Speaker
Navajo Nation Council

Oct. 26, 11
Date

Motion: Alton Joe Shepherd
Second: Katherine Benally

ACTION BY THE NAVAJO NATION PRESIDENT:

1. I hereby sign into law the foregoing legislation, pursuant to 2 N.N.C. §1005 (C) (10), on this _____ day of OCT 31 2011 2011.



Ben Shelly, Jr., President
Navajo Nation

2. I hereby veto the foregoing Legislation, pursuant to 2 N.N.C. §1005 (C) (11), this _____ day of _____ 2011 for the reason(s) expressed in the attached letter to the Speaker.

Ben Shelly, President
Navajo Nation

**LAW AND ORDER COMMITTEE
22nd NAVAJO NATION COUNCIL**

FIRST YEAR 2011

COMMITTEE REPORT

Mr. Speaker,

The **LAW AND ORDER COMMITTEE** to whom has been assigned:

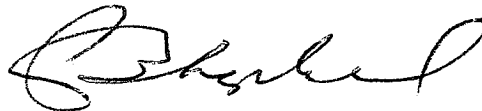
NAVAJO LEGISLATIVE NO. 0283-11

AN ACT RELATING TO HEALTH, EDUCATION AND HUMAN SERVICES;
NAA'BIK'IYATI'; ENACTING THE 2011 NAVAJO NATION HIV/AIDS ACT BY
AMENDING 13 N.N.C. §3201 ET SEQ. *(Sponsored by Josh Butler)*

Has had it under consideration and report the same with a recommendation that it **DO
PASS** with no amendments

and therefore referred to **HEALTH, EDUCATION AND HUMAN SERVICES
COMMITTEE.**

Respectfully submitted,



Alton Shepherd
Presiding Vice-Chairperson

Date: July 27th, 2011

The vote was 3 in favor and 0 opposed

Motion: Elmer Begay

Second: Russell Begaye



22nd NAVAJO NATION COUNCIL – FIRST YEAR 2011

The **HEALTH, EDUCATION AND HUMAN SERVICES COMMITTEE OF THE NAVAJO NATION COUNCIL** to whom has been assigned:

LEGISLATION NO. 0283-11

Has had it under consideration and report the same with the recommendation that it **DO PASS** with no amendments.

And therefore referred the same to the **NABIK'ÍYÁTI COMMITTEE OF THE NAVAJO NATION COUNCIL.**

A handwritten signature in black ink, appearing to read "Jonathan Hale", written over a horizontal line.

Jonathan Hale, Chairperson
Health, Education and Human Services Committee

Dated: August 10, 2011

Motioned by: Honorable Charles Damon

Seconded by: Honorable Kenneth Maryboy

Vote: 5 in Favor, 0 Opposed and 0 Abstain

NAABIK'YATI' COMMITTEE REPORT
22ND NAVAJO NATION COUNCIL – First Year 2011

Mr. Speaker:

The NAABIK'YATI' COMMITTEE, to whom has been assigned:

LEGISLATION NO. 0283-11
Introduced by Hon. Joshua L. Butler

Relating to Health, Education and Human Services, Naa'Bik'iyati; Enacting the
2011 Navajo Nation HIV/AIDS by Amending 12 NNC §3201 et seq.

has had it under consideration and reports the same with a **DO PASS** with NO AMENDMENTS;
and thence referred to the **Navajo Nation Council**.

CERTIFICATION

I, hereby certify that the foregoing legislation was duly considered by the Naabik'iyati' Committee of the Navajo Nation Council at a duly called meeting at Window Rock, Navajo Nation (Arizona), at which a quorum was present and that the same was passed with a vote of **15 in favor and 0 opposed** this 16th day of August 2011.



Mr. Johnny Naize, Chairperson
Naabik'iyati' Committee

MOTION: LoRenzo Bates
SECOND: Russell Begaye