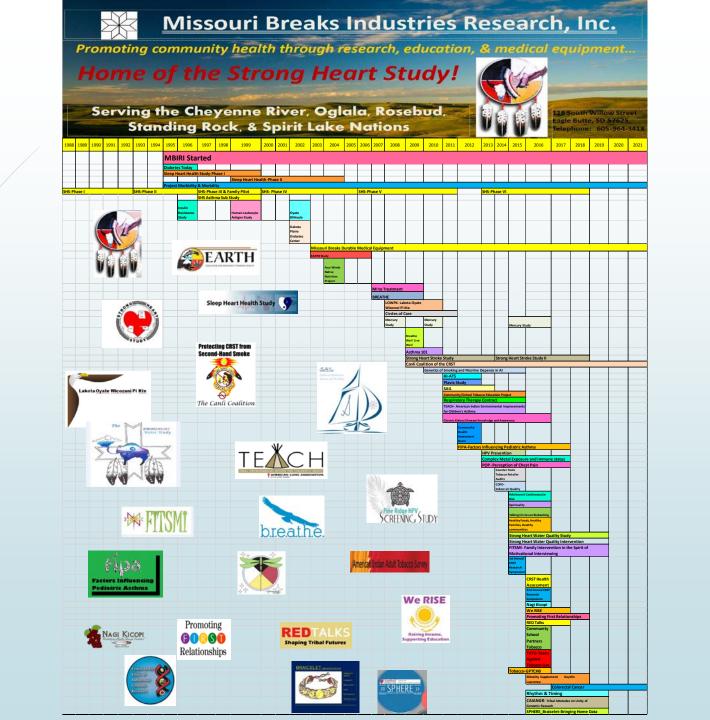
Sovereignty, Parity, Equity & Datasharing

Presented by Marcia O'Leary, RN & Joseph Yracheta, MS September 14, 2017

@ NIH - Tribal Advisory Committee





Missouri Breaks Industries Research, Inc.

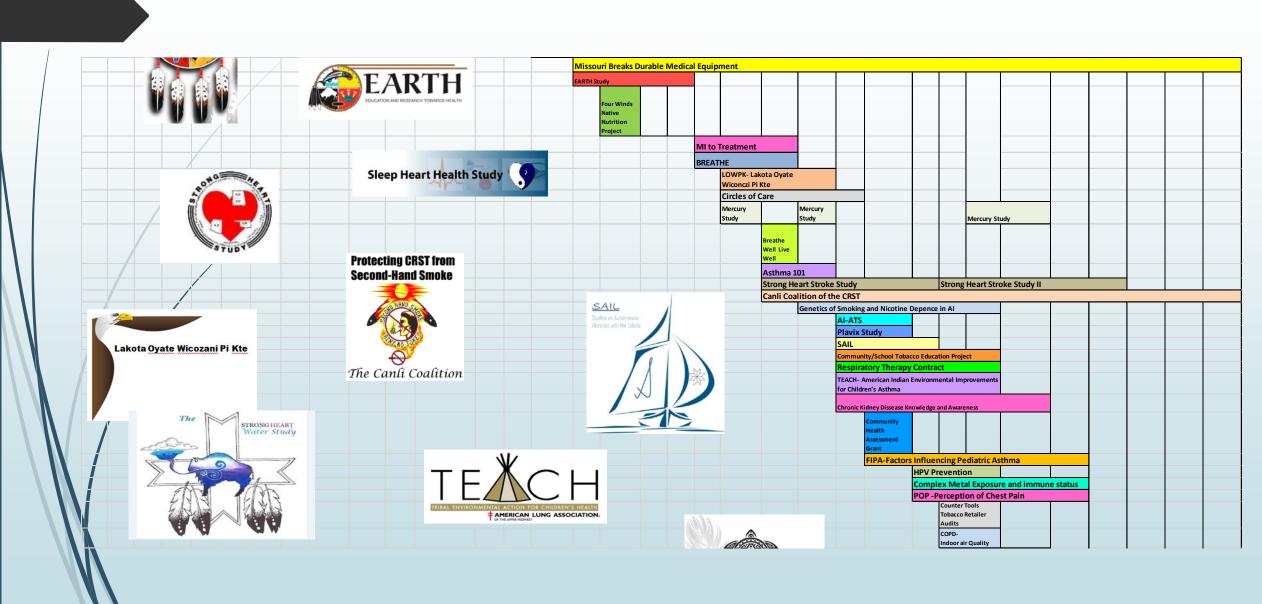
Promoting community health through research, education, & medical equipment...

Home of the Strong Heart Study!

Serving the Cheyenne River, Oglala, Rosebud, Standing Rock, & Spirit Lake Nations



1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012		2015	2016	2017	2018	2019	2020	2021
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														Diabetes Center																		





GROWING OUR OWN: STEERING & DEVELOPMENT CAPACITY



Researching, Restoring & Rebuilding Our Oyate for a Longer Life

A Research Symposium for Cheyenne River











GENOMICS AND SOCIETY

Expanding The ELSI Universe - #ELSICON





Principal Investigators:



Dr. Paul Spicer Professor Department of Anthropology

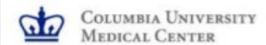


Dr. Amanda Cobb-Greetham Professor/Director Native American Studies



Dr. Cecil M. Lewis, Jr. Associate Professor Department of Anthropology



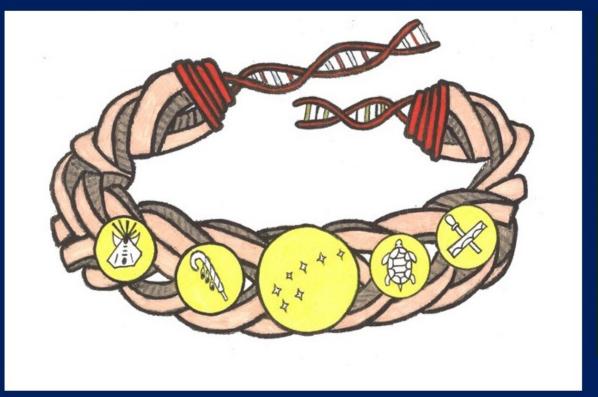




National Human Genome Research Institute

SPHERE & B.R.A.I.C.E.L.E.T

BRAICELET: BIOREPOSITORY FOR



AMERICAN INDIAN

CAPACITY

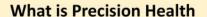
EDUCATION

LAW

ECONOMICS

TECHNOLOGY





Precision Health is a way dealing with disease prevention and treatment that takes into account people's individual differences in genes, environment and lifestyle.

(Adapted from the US Precision Medicine Initiative)

Stanford's Work on Precision Health

- 1. Advanced and extensive experience in genetic research and their relationship to both disease and treatment.
- 2. Research on social, economic, and biological impacts of health.
- 3. Outstanding analytic and high-performing computing capabilities.



SPHERE Goals

- 1. Expand our precision health research focusing on differences between ethnic and racial groups, known as health disparities.
- 2. Develop and expand relationships with our community partners to make sure they are included in our work.
- 3. Conduct three precision health research projects focusing on different population groups.
- 4. Learn how to use knowledge of genetic and biologic information to reduce ethnic and racial health disparities.

SPHERE: Stanford Precision Health for Ethnic and Racial Equity

BRAICELET (Snyder & Li-Pook-Than)

GOALS (Robinson)

Breast Cancer (Periyakoil)



Partnering with Lakota for precision medicine research.



Using data from previous research to determine genetic risk for obesity among Latino children.

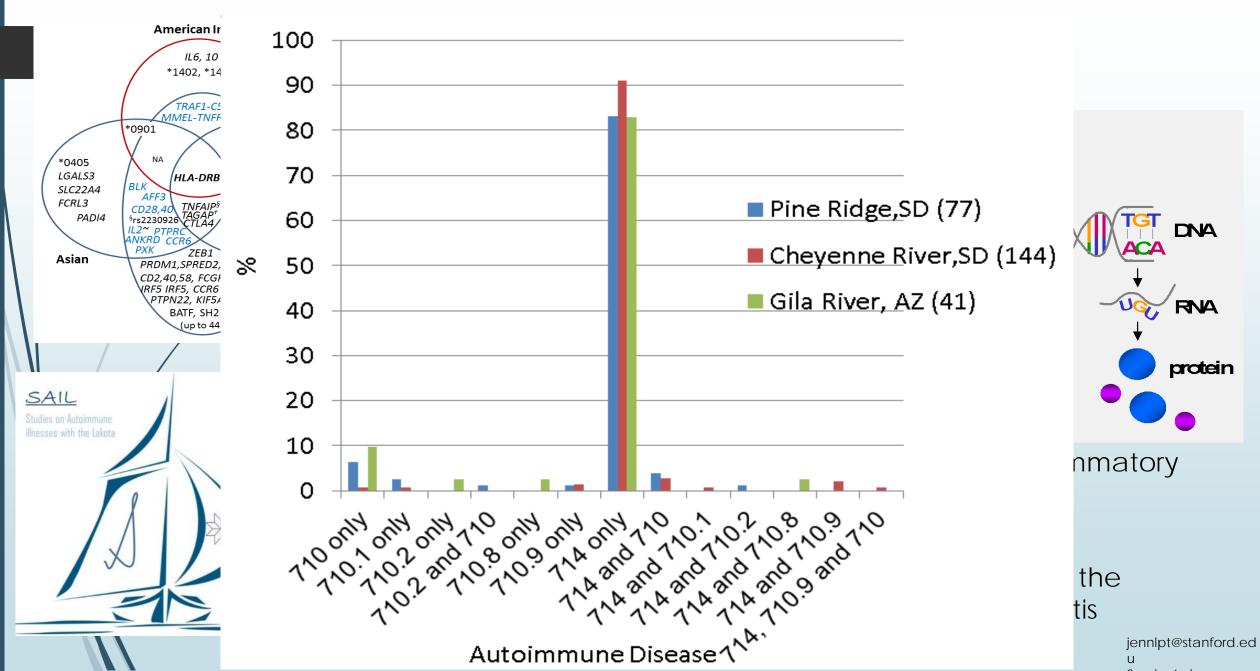


Stanford Team for the BRAICELET Project

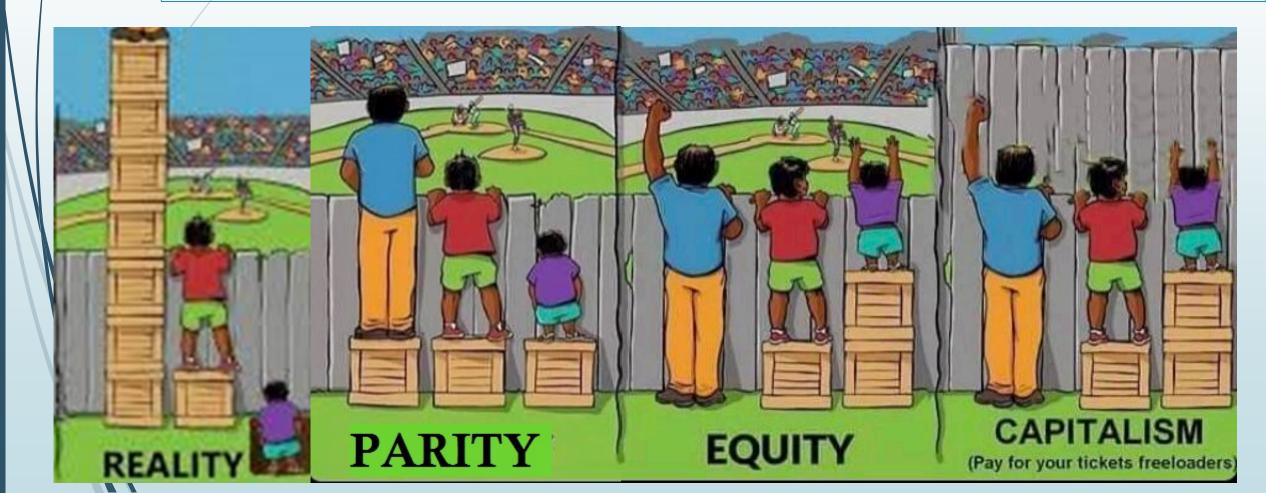
- Mark Cullen, Co-Principle Investigator for SPHERE
- Bonnie Maldonado, Co-Principle Investigator for SPHERE
- Mike Snyder, Project Lead, BRAICELET
- Jennifer Li-Pook-Than, Project Coordinator, BRAICELET
- Rhonda McClinton-Brown, Consortium Core Lead
- Lisa Goldman-Rosas, Implementation Core Lead
- Jill Evans, Program Director for SPHERE



SAIL- Studies of AutoImmune Illnesses with the Lakota



Parity: Striking a reasonable balance between social strategies and social ideals (e.g. quotas)
 Equity: Attempt to make things fair often by applying mutually agreed upon rules and processes



History of "Parity" & "Equity"

► Treaty of Fort Laramie (1868) – Abrogated in 1877 for Gold in Black Hills – "Sell or Starve"

- 1.4 Billion but estimated at 340 billion owed (74 billion in Gold)
- Dawes Act 1887 Allotted communal land to individual Indians. 90 million acres lost (2/3rds) due to tax liability and sold to whites
- Cobell vs Salazar 3.4 billion, estimated 176 billion owed

OCAP-MAT-PIC Works for Both Sides

OCAP – Ownership, Control, Access, Possession, MAT – Mutually Agreed Terms
PIC – Prior Informed Consent,

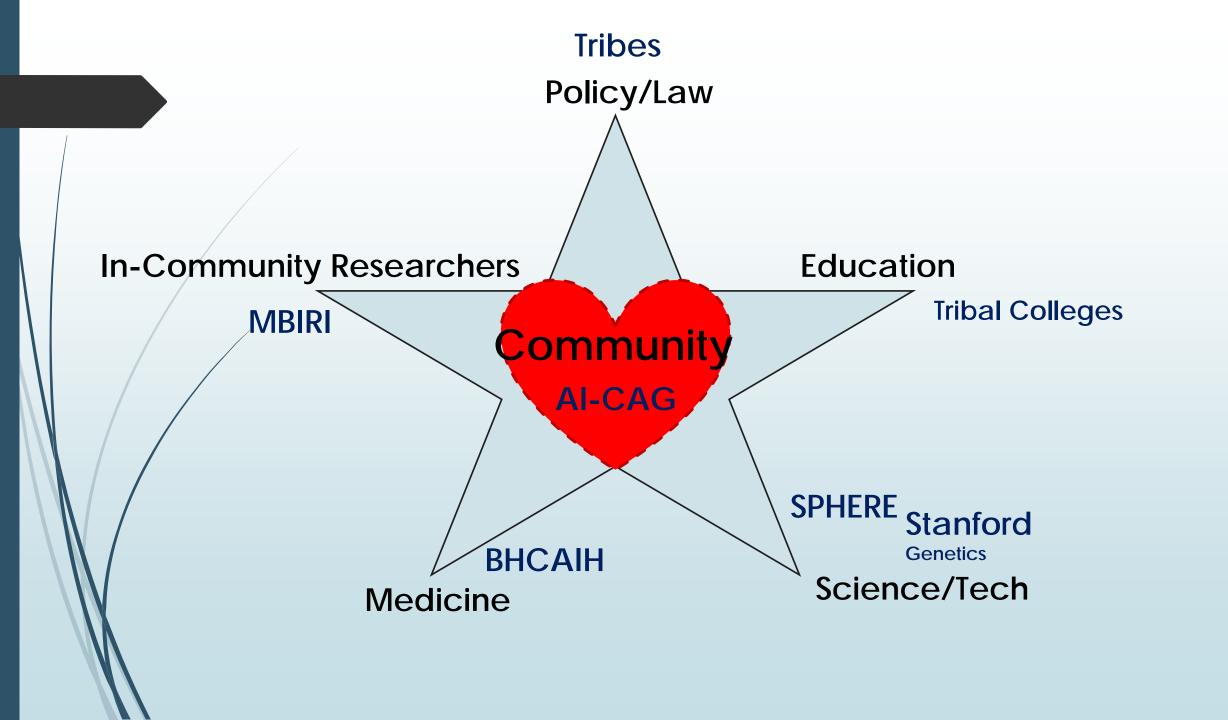
- Consistency Homogeneity of Data
 - Region, Climate, Lifestyle, Health Care access, cultural commonalities
- Predictability of Approval & Analytic processes
 - Intertribal agreements
 - Expedited Timelines that more closely match Federal Timelines
 - Increased Efficiency of Infrastructure
- Reliability of Partnerships
 - Set Criteria for Partnerships
 - Both sides trust process
 - Ability to Plan for Future projects
- Harmony of Data collection
 - Longitudinal, not Cross-sectional
 - Vetted and Adjudicated charting
 - Privacy and Anonymization standardize
- Built-In Moral & Ethical Value (socially remunerative justice)

Empowerment Via Data Types Collected

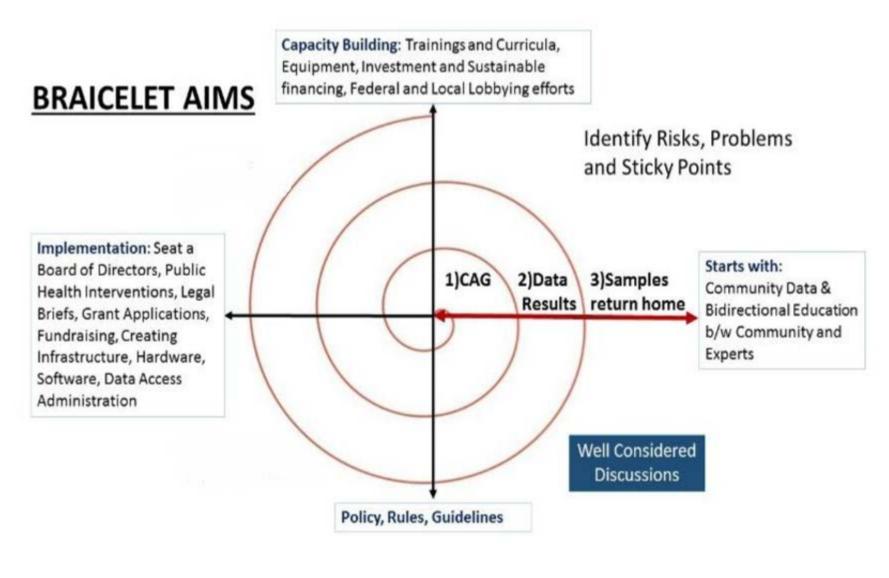
- Human Omics and Health Disparity Samples & Data
- Repatriated Samples & Data from 30 years of studies
- Repatriated Ancient Hominid Samples & Data (may inform current Health)
- Repatriated Samples from Museums
- Non-human genomes from w/in tribal borders
- Non-human microbiome from w/in tribal borders (e.g. extremophile research)
- Non-Genomic Environmental samples & data
- Demographic Data (Social Determinants of Health)
- CRISPR Edited Cell Lines and Other Lines used in Model Systems w/ Data

Acknowledgement That DataSharing Comes with Trade-offs

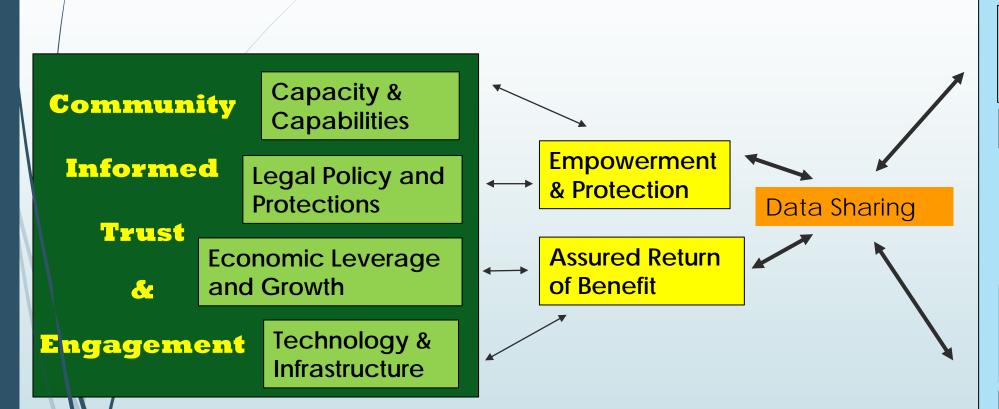
- Must work towards Equity rather than Parity: Datasharing can Help
- Data shared for Infrastructure & Capacity/Capabilities Building (IT and Analysis)
- Publicly Accessible Bio & Data Repository but under Local Control
- Datasharing increases robustness of findings or refined articulations of comparison
- Datasharing as a hedge against "bad actors"
- Datasharing as an "Olive Branch" and Sustainability tool for Research Efforts
- Datasharing as means for non-federal partnerships
- Datasharing for Implementation or Intervention efforts



Community Advisory Group (CAG) essential to trust, advocacy and control



Tribes



NIH & External Partners

Egalitarianism & Altruism

Generalizability

Statistical Rigor

Reproducibility and Replicability

Increased Omic Knowledge & Expertise

Rapid Discovery

Economic Benefit

CENTER FOR ALASKA NATIVE HEALTH RESEARCH









STRONG HEART STUDY















Native Research Network
Denver Sept. 18-19
Collaboration
Conference NNHRT





USA 2011

New Zealand 2015

Australia 2016

Canada 2018

Mexico?

Summer Intership for INdigenous Peoples in Genomics

"Who You Gonna Call?"-Indigenomics Crew



Shaawano Chad Uran, *PhD Anthropology White Earth Anishinaabe*



Kate McGlone West, PhD 3rd year student Public Health Genetics American



Joseph M. Yracheta, MS Pharmaceutics Purepecha & Raramuri (Mexican Natives: Tarascan & Tarahumara)



Keolu Fox, PhD 4th year student Genome Science Kanaka Maoli, Kingdom of Hawaii



Katrina Claw, *PhD Genome Science Dine'*



Krystal Tsosie, *PhD Genome* Science and Ethics Dine'



Nanibaa' Garrison, *PhD Genome* Science and Ethics Dine'

Legal

Ron Whitener, Squaxin

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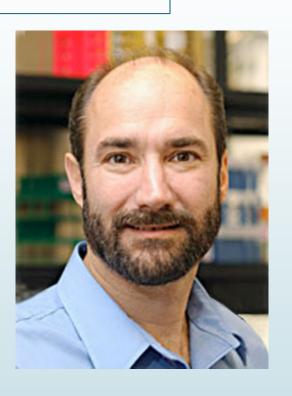
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Jennifer Li Pook-Than in Mike Snyder's Lab (Snyderome)







Mark Cullen and Bonney Maldonado





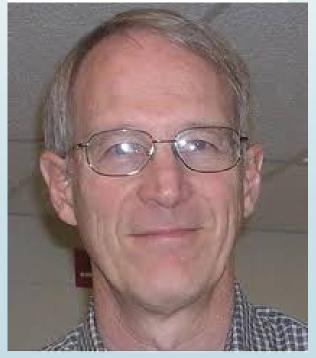
Health disparities research center launched with \$11.5 million grant
The Stanford Precision Health for Ethnic and Racial Equity Center will
be one of the first national centers focused on using precisionmedicine tools to improve the health of underserved ethnic and
racial groups.

Dr. Jeff Henderson and Dr. Lyle Best









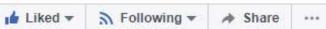


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Missouri Breaks Staff

Guthrie Ducheneaux Rhonda McClinton

Alli Moran Lisa Goldman-Rosas

Dakota Center

Lyle Best

Black Hills Center for Am Ind Health

Jeffrey Henderson

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Stanford Partners

Yvonne Maldonado

Jill Evans

Mark Cullen

National Institutes of Health: 1U54MD010724-01





