

**Oral Testimony of John Yellow Bird Steele
President of the Oglala Sioux Tribe
and Chairman of the Great Plains Tribal Chairman's Association**

**“American Indian and Alaska Native Public Witness Hearings on the Fiscal Year 2017”
House Appropriations Subcommittee on Interior, Environment, and Related Agencies**

March 18, 2016

Mr. Chairman and Members of the Subcommittee. My name is John Yellow Bird Steele, and I serve as President of the Oglala Sioux Tribe.

I thank the Subcommittee for holding these important hearings and am grateful for the opportunity to testify before you today. Our Tribe, thanks you for your dedicated work, we still, however, have serious concerns regarding the chronic underfunding of Indian Country and the detrimental effects it has on our communities' economic, social, and cultural well-being.

My remarks will focus on four key funding priorities that our Tribe has identified for FY 2017: (1) Indian health care; (2) law enforcement; (3) suicide prevention for Native youth; and (4) tribal road maintenance.

Indian Health Care in the Great Plains

Over the course of their lives, the average American can expect access to quality health care, reliable prescription services, and a life expectancy of almost 80 years. On the Pine Ridge Indian Reservation, however, the average American Indian faces a much different reality. The infant mortality rate is the highest in the country; obesity, diabetes, and heart disease occur in staggering proportions; and the average life expectancy is only 50 years – roughly equivalent with that of sub-Saharan Africa. Adding to the tragedy of this litany is the fact that this crisis is not new—the lack of adequate health care has been a pressing challenge for generations in Indian Country.

As you are aware, the Senate Committee on Indian Affairs' held a recent oversight hearing on the substandard quality of Indian health care in the Great Plains. We are thankful for the Committee's work in shining a light on the health care crisis facing our people. However, we are growing increasingly alarmed at the severity of this crisis as it continues to unfold.

Several Great Plains' IHS hospitals have lost, or are threatened with loss, of CMS certification due to substandard quality of care. On the Rosebud Reservation, in the six weeks since the Tribe's IHS hospital went on diversion status, five individuals have died and two babies have been born in ambulances in transit to the nearest hospitals, which are 44 and 55 miles away. Meanwhile, the non-Indian hospitals to which Rosebud residents are diverted are overwhelmed—the emergency room at one of these hospitals has reported a 67% spike in patients.

The crisis deepened last week, when CMS sent a Termination Notice to the Rosebud IHS informing it that its Medicare provider agreement – and therefore also its Medicaid agreement – would be terminated unless the deficiencies are addressed by April 29, 2016. The Notice was based on a February revisit survey that found ongoing non-compliance with seven different Medicare conditions of participation.

The Omaha-Winnebago IHS hospital has already had its Medicare provider agreement terminated, and our Tribe's Pine Ridge IHS hospital has been threatened with a similar fate. Our Tribe, along with the GPTCA, stands with those in the Great Plains in demanding that this crisis be resolved in a responsive and responsible manner as soon as possible.

We therefore request that Congress provide \$6.2 billion for the Indian Health Service in FY 2017. We thank you for past increases, however, this appropriation would address the funding disparities that currently exist between IHS and other federal health programs, and it would ensure that American Indians receive access to quality health care that is on par with that enjoyed by their fellow countrymen. Your action on this request will be the literal difference between life and death for countless Americans.

Law Enforcement and the Meth Epidemic in Indian Country

The severe underfunding of tribal public safety programs has been a chronic problem on the congressional radar since at least the 1980s. Decades later, in 2016, the Great Plains Region is experiencing unprecedented violent criminal activity and recent upsurges in both drug trafficking and human trafficking. The Region is also facing a crisis level drug epidemic, in particular relating to methamphetamine and heroin use, which has overtaken tribal lands and put a direct strain on tribal law enforcement. Methamphetamine, or “meth,” has been cited as one of the top threats to tribal communities because of its demonstrated link to dramatic increases in violent crime, suicide, and child neglect.

Unfortunately, Pine Ridge Indian Reservation does not have the security infrastructure to stem this steady rise in crime. Due to financial constraints, we are currently operating without even the bare minimum number of patrol officers that are needed to effectively serve our community. Officers can travel over 500 miles per each 8 hour shift; all officers travel alone and, if they must rely on backup in critical situations, it is not unusual for this backup to come from more than an hour away. Because of chronic understaffing – and unreliable tribal road maintenance – response time to urgent calls is deplorable. Our limited number of officers are simply unable to serve our Reservation's entire 2.8 million acres without additional support.

Our officers are exhausted and morale is at an all-time low. The inability to guarantee the safety of all our tribal members has created a situation in which inter-generational cycles of trauma are continued as children grow-up exposed to substance abuse, domestic violence, and physical and sexual abuse. The increasingly pervasive nature of crime on our tribal lands is causing destructive impacts on the very core of our social and cultural identities.

We need adequate funding and staff to deter drug trafficking and to process cases and sentence criminals. This has to include funding for an effective court systems comprised of court personnel, public defenders, and parole and probation services. Our Kyle Justice Center has been at the top of BIA's construction priority for over 15 years. This short-term holding facility, court, and 911 call center is desperately needed but remains only 80% completed. Like so much of Indian Country programming, additional resources are needed to close the funding gap and ensure that our communities receive adequate law enforcement protection.

We, therefore, request that Congress provide an additional \$200 million in appropriations for BIA law enforcement, including an increase in funds for officer training, tribal court personnel, and the construction and maintenance of tribal detention facilities. We also request an additional \$85.3 million for IHS alcohol and substance abuse treatment programs. Together, these two funding priorities will empower our Tribe in our efforts to protect our communities and address the myriad problems that accompany drug trafficking and other criminal behavior.

Suicide Prevention Programs for Native Youth

Suicide is the second leading cause of death for Native youth aged 15-24 years old. Native youth attempt suicide at rates 3-10 times that of the national average, depending on the reservation. As shocking as these statistics are, the numbers may be even worse. According to a CDC study, suicide rates for American Indian and Alaska Native youth may be underreported by as much as 30%. Poverty, unemployment, inadequate health care, and substance abuse are just the first layer of factors affecting the mental and emotional well-being of our youth. Underlying psychological and spiritual issues of social despair, cultural loss, and historical trauma affect our communities as a whole.

No corner of Indian Country is unscathed: from the Navajo Nation in the Southwest to the Ojibwe Tribes of the Great Lakes, the loss of our youth has left a deep chasm in the hearts of our communities. Our Tribe recently saw nine young people take their own lives and more than 100 others attempt suicide in the span of just 2 ½ months. Ten more young people took their lives over the eight months that followed. A single suicide has the power to tear a family and a community apart. Our Tribe's unprecedented crisis will affect us for generations.

To save our current generation, we need to address this issue from all sides. We need to provide our youth with the support they need to live full and meaningful lives. This means that adequate funding must be provided to support on-reservation mental and behavioral health services, substance abuse intervention, and PSAs to confront social forces like bullying and abuse. Moreover, long-term epidemiological studies need to be funded to analyze the underlying psychological and historical trauma that have lead our communities to this point of crisis.

We therefore request an additional \$70.4 million in appropriations for IHS and tribal programs focused on the provision of mental health services. This increase will help ensure that on-reservation mental health services receive the funding they need to support culturally

appropriate and responsive suicide prevention programs for Native youth. Furthermore, on the Pine Ridge Reservation we need adequate funding for programs that will spur job creation and economic development. We need to provide our youth with opportunities and hope for their futures. Their lives, and the continued longevity of our Tribe, depend on it.

Construction and Maintenance of Adequate Roads

The Pine Ridge Indian Reservation, home to the Oglala Sioux Tribe, covers nearly 2.8 million acres of rugged landscape and rolling hills. It is an area roughly the size of Connecticut. Our Tribe has a population of over 45,000 people – or 9 people per square mile. Adequate and well-maintained roads are, therefore, critical to connecting our rural population with essential programs and services in Pidge Ridge and nearby urban centers. However, where Connecticut has a transportation network of over 20,998 miles of road, our Reservation has only 1900. Needless to say, that number is woefully inadequate to meet the needs of our tribal members.

Current funding for the BIA Road Maintenance program has been level-funded at around \$26 million for several fiscal year cycles, despite the accumulation of over \$289 million in backlogged needs. Moreover, snow and ice control can consume an entire annual budget during a single, severe winter storm – a crushing reality that our Tribe must face almost every year. Across Indian Country, inadequate levels of funding are pushing tribes to the financial brink, particularly in the Great Plains Region, which encompasses 16 tribes but receives only \$3.5 million to cover the costs of maintaining 2,103 miles of BIA roads and 81 bridges. Funding is so tight that routine bridge maintenance is not being performed until it reaches a state of emergency. Unfortunately for Indian Country, we reached that state decades ago.

Inadequate road maintenance detrimentally affects the health and welfare of our Tribe. Our children miss school due to impassable bus routes; our elders pass away due to delayed transportation to medical centers; and calls for help go unanswered due to the inaccessibility of our roads for law enforcement, ambulances, and fire trucks. Roads are not just a means of getting from Point A to Point B – they connect our people to safety; our children to their future; and our Tribe to its community.

At the current level of funding, it would take more than a decade just to clear the backlog of road maintenance requests for our Tribe. We therefore request that the United States fully fund road maintenance and not rely on tribes' road construction funds to perform this essential service. Funding for the BIA Road Maintenance program needs to be increased by at least \$40 million for fiscal year 2017 in order to begin to address the most pressing road maintenance needs in Indian Country.

Conclusion

Thank you for the opportunity to testify. The Oglala Sioux Tribe looks forward to working with you on addressing the needs of the Pine Ridge Indian Reservation and the Great Plains Region.