



Healing Lodge of the Seven Nations
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Testimony submitted to the House and Senate Appropriations Subcommittees on Interior,
Environment and Related Agencies

Regarding FY 2018 Funding for Indian Health Service Appropriations
May 16, 2017

The requests of The Healing Lodge of the Seven Nations (hereinafter “HL7N”) for the
FY 2018 Indian Health Service (IHS) budget are as follows:

- Support increased funding of **\$2,523,000** for the IHS facilities appropriation, as sufficient to help ensure HL7N can obtain and utilize IHS funding for the construction of a new behavioral health family and wellness center and a gymnasium expansion project, both of which are critically needed for the American Indian and Alaska Native youth.
- Safeguard the IHS from sequestration.
- Ensure full funding of contract support costs.

HL7N Is A Youth Regional Treatment Center

HL7N is one of the twelve Youth Regional Treatment Centers (YRTCs) within the Indian health care system, located in Spokane Valley, Washington. As a YRTC, HL7N is a self-determination contractor with the Indian Health Service (IHS) under the Indian Self-Determination and Education Assistance Act (ISDEAA). Our purpose is to provide residential substance use disorder services to American Indian and Alaska Native youth between the ages of thirteen and seventeen. HL7N was formed in 1988 by seven Indian Tribes in the Pacific Northwest (Confederated Tribes of the Colville Reservations, Coeur d’Alene Tribe, Kalispel Tribes of Indians, Kootenai Tribe of Idaho, Nez Perce Tribe, Spokane Tribe of Indians and Confederated Tribes of Umatilla Indian Reservation) to create a centrally located, safe and caring healing center for tribal adolescents and their families. The HL7N business complex is nestled in a quiet wooded area consisting of 38 acres owned by the IHS and thirteen acres owned by HL7N.

HL7N operates a 45-bed adolescent residential chemical dependency treatment center, with programs ranging between 90-120 days that are designed around individual youth’s needs and are grounded in Native American traditional, cultural and spiritual values and practices. Our addiction treatment programs use evidence-based treatment models to create a holistic approach towards healing. The success of this program is based on shared beliefs and daily practices that

provide structure and consistency; on values and practices that foster respect, honesty, generosity, strong cultural identification; and hope for positive life changes. The work done by HL7N not only treats addiction, but strengthens families, empowers communities and ultimately saves lives.

Increased Funding For IHS Facilities

HL7N currently provides treatment for addictive, substance-related conditions within the adolescent population, which suffers from severe cannabis use, opioid dependence, alcohol abuse and addiction, and benzodiazepine dependency. Additionally, more and more youth are presenting with *higher mental health disease*, which is a serious concern for the future health of the adolescents if not addressed promptly and appropriately. In a recent study conducted by Harvard University, the Cambridge Institute and HL7N involving youth residing on regional reservations of the HL7N Tribes, the study found that 29% of the youth received a diagnosis of at least one psychiatric disorder; 13% had multiple diagnoses; and 60% diagnosed with a depressive disorder also present with a substance use disorder. Typically, tribal youth have multiple limitations, which include substance use and addictive disorders, criminal activity, psychological problems, impaired functioning, and disaffiliation from mainstream values, coupled with historical and inter-generational trauma. These challenges for our youth support the need for the increased availability of culturally relevant mental health services.

HL7N does not currently have adequate facility space and funding to devote to such treatment services. The number of adolescents denied for admissions to HL7N—due to higher mental health issues—unfortunately grew from 25% to 31% in 2016, creating an increased concern by the regional Tribes over the lack of culturally appropriate inpatient substance abuse and mental health treatment access. With 29 years of successful experience in working with American Indian and Alaska Native adolescents, the HL7N proposes to establish an innovative adolescent program focused on outpatient and inpatient treatment designed to address their chronic, unmet behavioral healthcare needs.

HL7N is planning the construction of a new, “shovel ready” infrastructure project to add a 4,072 square foot Behavioral Health Family and Wellness Center, for the provision of mental health and chemical dependency clinical services, primarily serving American Indian/Alaska Native youth. The cost of this construction project is estimated at **\$1,655,000**. The facility will be built on IHS property permanently assigned to HL7N and consist of a single story office building, with office accommodations and family focused counseling rooms to include tele-medicine capability.

HL7N is also planning to construct an addition to its existing YRTC gymnasium in order to add showers, dressing rooms, fitness room and restrooms for the adolescents. This project is expected to cost **\$868,000**. This “shovel ready” infrastructure project will consist of the construction of a 2,366 square foot addition to the existing gymnasium for the purpose of improving youth’s mental and physical health through physical exercise. This expansion will help increase moderate intensity physical activity as an intervention in mental health and substance addiction treatment. The addition of a shower system will also help HL7N to identify any contraband (drugs) that may be brought back by youth who are returning from outings.

Gone undetected, such drugs could be used and/or distributed to other youth, which is extremely detrimental to their treatment process and recovery. Once constructed, the facility maintenance costs will be covered by the HL7N's existing ISDEAA annual funding agreement and other of HL7N's financial resources.

HL7N thus appeals to this Subcommittee to support increased funding for the IHS facilities appropriation, as adequate for the IHS to be able to fund HL7N's new behavioral health facility and its gymnasium expansion. Funding these facilities will help in fulfilling the federal government's commitment and obligations to improve the health of American Indian and Alaska Native adolescents. Equally important, the youth deserve a chance to achieve recovery and learn to better manage their mental health issues, while striving to become contributing members of society.

Fully Fund Contract Support Costs (CSC)

We wish to thank this Subcommittee for its leadership in making funding of IHS contract support costs for FY2016, and now FY 2017, an indefinite amount, and also for making it a separate account in the IHS budget. This shift makes an enormous difference in helping ensure that the ISDEAA is fully funded and implemented as Congress intended. It also significantly enhances the federal-tribal government-to-government relationship. For IHS, the FY 2017 estimate for contract support costs is \$800 million. We also wish to provide our thanks for listening to the tribes who explained why the proviso in the IHS FY 2016 enacted funding, which effectively denied the CSC carryover authority granted by the ISDEAA, was inappropriate. We very much appreciate that this proviso was absent from the Consolidated Appropriations Act for FY 2017 and recommend that it not be resurrected in FY 2018 or thereafter.

Our long-term goal, however, remains that the indefinite appropriation of CSC funding be mandatory and permanent. Full payment of CSC under the ISDEAA is mandatory, as affirmed by the United States Supreme Court. HL7N is committed to working together with the appropriate Congressional committees to determine how best to achieve this goal.

Protect IHS Funding From Sequestration

We request that you support an amendment to the Balanced Budget and Emergency Deficit Control Act to exempt the IHS from potential sequestration of funds, as Congress has rightfully done to fully exempt the Veterans Health Administration's programs from sequestration. We believe that Indian health should be afforded the same treatment as the VA, and most especially so in light of the federal government's trust responsibility to tribes. We are aware that a number of members of this Subcommittee and other members of Congress have publicly stated that it was an oversight IHS was not included in the exempt category when the Balanced Budget and Emergency Deficit Control act was enacted. We would like to correct that oversight.

We also express our concern that the current FY 2018 funding cap for non-defense discretionary spending is lower than the FY 2017 spending cap. When considered in light of the President's "skinny" FY 2018 budget outline proposal, which raises defense spending by \$54

billion and lowers non-defense discretionary spending by a similar amount, we fear a significant sequestration of funds in FY 2018. It is thus even more imperative that Indian health be made exempt from sequestration.

Thank you for your consideration of the concerns and requests of The Healing Lodge of the Seven Nations.