

**TESTIMONY OF BRYCE KIRK, COUNCILMAN  
ASSINIBOINE AND SIOUX TRIBES OF THE FORT PECK RESERVATION  
BEFORE THE  
HOUSE NATURAL RESOURCES COMMITTEE  
SUBCOMMITTEE ON OVERSIGHT  
APRIL 10, 2024**

I am Bryce Kirk, Councilman for the Assiniboine and Sioux Tribes of the Fort Peck Reservation. I would like to thank the Subcommittee for the invitation to testify before you today.

The Fort Peck Reservation is in northeast Montana, forty miles west of the North Dakota border, and fifty miles south of the Canadian border, with the Missouri River defining its southern border. The Reservation encompasses over two million acres of land. We have approximately 12,000 enrolled tribal members, with approximately 7,000 tribal members living on the Reservation. We have a total Reservation population of approximately 11,000 people.

As I will discuss in greater detail, there is no greater crisis we must address on the Fort Peck Reservation than the trade and trafficking of drugs, in particular fentanyl, on the Reservation. I think the Fort Peck Tribes are as capable a Tribe as any in the country to combat this crisis, but we need the support of our federal partners. We stand ready to work with our partners from law enforcement, social service agencies and health care agencies to do this necessary work.

At Fort Peck, we have long believed that a strong tribal government is the way to best keep our community safe. So, we have taken action to maximize our authorities to protect everyone living within our boundaries. In this regard, the Fort Peck Tribes have provided law enforcement and correction services on our Reservation since 1996 under an Indian Self-Determination and Education Assistance Act contract. We were also one of the first Indian tribes in the nation to enter into a cross-deputization agreement with state, county and city law enforcement agencies. Under this agreement, first ratified more than twenty years ago, tribal officers are deputized to enforce state and local law on the Reservation and state and local officers are authorized to enforce tribal law.

For more than fifty years, the Fort Peck Tribes have had an independent judicial system, including an appellate court. It is through this system that we provide justice to our victims and our defendants. Currently, our judicial system includes law-trained judges, law-trained prosecutors, law-trained public defenders, probation officers, a published tribal code, and experienced court clerks and court reporters. Our court's opinions are published and available to the public. Notwithstanding a strong Tribal government and strong governmental institutions, we still are facing a crisis of fentanyl use in our community that threatens every aspect of our Reservation.

This drug has infested every corner of our community, from the young to the old and without regard to gender or any other demographic. What we as tribal leaders are the most worried about is our youth. We fear this drug is robbing us of an entire generation: our very future.

This crisis happened almost overnight. According to the Montana Attorney General's Office, since 2019, fentanyl seizures in the state have risen 11,000 percent. *See*, <https://www.kfyrtv.com/2023/02/24/ag-reports-skyrocketing-fentanyl-crisis-montana>. In 2022, the State Task Force agencies seized 206,955 dosage units of fentanyl, triple the amount recorded in 2021. *Id.* Throughout the entire state of Montana, the fentanyl-related overdose deaths increased by 167 percent from 2016 to 2020. *See*, [https://leg.mt.gov/content/publications/fiscal/2023-Interim/IBC-D/MT\\_Fentanyl\\_Trends\\_2021.pdf](https://leg.mt.gov/content/publications/fiscal/2023-Interim/IBC-D/MT_Fentanyl_Trends_2021.pdf). The largest percentage of these deaths is adults between the ages of 24 and 44. *Id.*

These are the people who should be the most productive in our communities. These people are our future leaders. Instead, they are dying. The Montana Department of Justice Division of Criminal Investigation reports that 10 percent of all high school students in Montana had taken a prescription drug without a prescription. *Id.* These children are not taking Lipitor. They are taking painkillers--opioids. Tragically for the Tribes in Montana, the opioid overdose death rate for Indian people is twice that of non-Indians. *See*, <https://www.npr.org/sections/health-shots/2022/06/01/1101799174/tribal-leaders-sound-the-alarm-after-fentanyl-overdoses-spike-at-blackfeet-nation>.

On the Fort Peck Reservation, what our law enforcement officers report is that an average opioid user's daily dosage is between 10-20 pills. In an urban area, the average cost per pill is \$1. On the Fort Peck Reservation, the average cost per pill is \$120. So how does a user support this habit? He deals. According to our law enforcement, the average user is selling at least 50 pills a day to pay for his 20-pill habit.

To put these numbers in context, a single illicit fentanyl pill can contain a potentially lethal dose. *See*, [Facts about Fentanyl \(dea.gov\)](#). In fact, DEA analysis of counterfeit pills found that 42% of pills tested for fentanyl contained a potentially lethal dose. *Id.* This means that many in our community—and especially many of our young people—are gambling their lives 10 or 20 times a day.

There is no doubt that the Mexican drug cartels are playing a major role in this crisis. They have found their way to the Fort Peck Indian Reservation and embedded themselves in our communities and our families. In February of this year, NBC News did an investigative story on the drug cartels in Montana and their targeting of the Reservations in Montana. I would ask that the printed story be included in the record of this hearing. In this story, America learned about Ricardo Ramos Medina, a former Mexican police officer who became a Sinaloa cartel associate.

Mr. Medina was stopped on the Fort Peck Reservation. In the story, we learn that Mr. Medina was a key part of expanding the cartel's presence in Montana as he had a valid U.S. visa and was former law enforcement. So, he could travel freely in the United States. After he was arrested, he said he traveled to the Fort Peck Reservation to expand the drug cartel's operations on the Reservation.

Between 2019 and 2022 the federal drug agencies have seized more than 2,000 fentanyl laced pills, 3 pounds of heroin, and 65 pounds of methamphetamine that these cartels had slated to go to Montana Indian Reservations. As the NBC story documents, the drug cartels know Montana is large and law enforcement is almost non-existent. They also know that the profit margin for the sale of these drugs is high. Thus, the reward is high and there is almost no risk for targeting and expanding their markets to the Reservations.

What we have learned is that the cartels will target people in treatment facilities, including one in Arizona where our tribal members have been targeted while seeking treatment. Too often, we have tribal members, in particular vulnerable women, who return to the Reservation after seeking treatment still addicted to drugs, and now engaged with cartel associate members. This is how these people become imbedded in our communities and begin to take hold of entire families.

The toll that this amount of drug trafficking is having on our community is devastating. I lost two men I considered my brothers this last year. Now their children will grow up without a father. We have children as young as middle school taking fentanyl. Suicide remains extremely high on our Reservation. Unfortunately, suicide remains a leading cause of death across all the Reservations in Montana. The crimes against our children—our babies—are unspeakable.

This drug affects all families from all walks of life on the Reservation, including fathers, mothers, grandmothers, and grandfathers. I battled with addiction myself. But for a man who mentored me and is still very much like a father to me, I would not be here today. My children would not have a dad. I never would have been elected to serve my people. I am thankful every day for my life that I have now.

In March 2023, we had to close our Tribal Court because someone chose to smoke fentanyl in one of the bathrooms. An officer was poisoned simply by entering the bathroom in question. The cleaning of the Court facility and its air systems took time and was costly.

Another indicator of the fentanyl crisis is the increased crime rate on the Reservation. In September, the Tribal Executive Board issued a state of emergency due to the severe increase in juvenile crime. The increase in crime is across all sectors of crime from property crimes to violent crimes, including sexual assaults, kidnapping and murders. Men, women and juveniles are the perpetrators. And virtually every crime can be attributed to fentanyl: Either a person was high when they perpetrated the crime, or they committed the crime to secure money to buy drugs, or they committed an act of violence in retaliation for something related to fentanyl use or distribution.

While this crisis is daunting, it is not hopeless, and we must continue to take action to combat it. This is why I appreciate the Subcommittee's attention to this issue. There is no single solution. We must look at this problem from every angle. It is a law enforcement problem, a mental health problem, a social services problem, an economic development problem and a community development problem. Thus, we must craft solutions in all these areas so that we are responding to the cause of the whole sickness and not just the individual symptoms.

In the area of law enforcement, we need the Department of Justice and Drug Enforcement Agency to remain strong partners in the investigation and prosecution of drug crimes on the Reservation. I want to commend our U.S. Attorney's Office for the hard work they do. One area where we would like more attention is the level at which a U.S. Attorney is prosecuting a drug trafficking case. It is our understanding that a person must be in possession of more than fifty pills to be prosecuted for possession with the intent to distribute. As I stated above, many people are possessing 50 to 100 pills simply to fund their own drug habit—and this is true especially of the young people. We must stop these transactions before these people become much larger dealers.

In this regard, we need our federal partners to be true partners. In one instance, the DEA knew there was a known high level drug dealer traveling through Fort Belknap, Rocky Boys and Fort Peck and at no time did DEA share this information with the Tribal law enforcement agencies. It seems like to us there is a turf battle related to who is going to bust who, and no one cares about the ultimate victims of these crimes. They just care about who is going to get the major bust.

One area of concern that I have recently become familiar with is the lack of accurate data collection and reporting by the relevant federal agencies. We know on our Reservation there is a rise in crime. We know it from the reports of our law enforcement agencies, and we know it by what our tribal members tell us they are experiencing. But if you ask the Bureau of Indian Affairs, they will report that crime rates are down across Indian country. This may be true if you take all of the numbers in the aggregate on a national level, but it is not true at Fort Peck and I am certain it not true across Montana and Wyoming. This impacts the ability of federal agencies to justify providing the resources that we need to combat this crisis. I would ask this Committee to request from GAO a study on the crime rates on Reservations in Montana and Wyoming.

In this regard, our law enforcement officers need greater support. Like every law enforcement agency in the country, we are having difficulty recruiting and retaining officers. There are several reasons this problem is exacerbated in Indian country. These jobs are dangerous. They frequently involve dealing with the heaviest—even traumatic—situations and events, which would be difficult to witness for anyone but may be especially so for officers who are from our community. Yet, these officers do not have access to adequate benefits and resources to manage the stress of the job. They must, at the very least, receive the same benefits—in particular pensions—as other federal officers. Thus, we would ask that Congress take up the Tribal Law Enforcement Parity Act, H.R. 4524, which would ensure that Tribal Officers operating pursuant to a Self-Determination Act contract, like ours at Fort Peck, would have access to the federal pension program as they would if they were BIA officers.

We also support expanding the recognition for Tribal law enforcement agencies to arrest and prosecute non-Indians who choose to come on to our Reservation with the intention of selling and distributing these illegal drugs. This way the drug dealers will begin to understand that it is not a free pass when you enter a Reservation. We will arrest and prosecute these offenders.

Another area of greater support is the need for additional K-9 Units in Indian country. We had one K-9 unit from Northern Cheyenne for a week and it shut down drug trafficking on the

Reservation for that week. We need greater support for the technology that can assist in this work, whether it is additional cameras and monitoring equipment or drones. We have too few officers and they cannot be everywhere they need to be. These tools will help our officers see what is happening on the Reservation.

In the area of mental health: We need more mental health and substance abuse treatment services. We remain thankful that Montana adopted Medicaid expansion as this has allowed for greater access to mental health services. We are thankful for the Veterans Administration and its work to provide mental health and treatment services to Native Veterans. As I said, when people go off the Reservation and seek treatment they are targeted by the cartels. We need treatment on our Reservation. Right now, we only have an outpatient treatment facility on our Reservation. While I acknowledge this is more than many Reservations have, it is not enough—we do not have the capacity to provide services to all who need it, and many people on our Reservation need inpatient treatment. Thus, we need additional facilities to provide inpatient treatment to people within our communities.

In the area of economic development: We need jobs and job training for our people. A job gives a person the means to support their family; it also gives them a sense of purpose and fulfillment, which helps their mental health, as well as the physical and mental health of those in their household. My wife operates a coffee shop on the Reservation. She has made it her mission to provide hope through employment for our youth and now adults are coming to her asking for the opportunity to work. She is making a difference for our people and is an important asset in battling this crisis on the Reservation. Thus, supporting more job training and workforce development programs and entrepreneurs like my wife is critical to this effort. The Department of Labor's Indian Employment and Training Program must be better funded and streamlined to provide better services throughout Indian country.

Thank you for the opportunity to testify on the vitally important issue of addressing this crisis that is facing our communities. I would be pleased to answer any questions and to provide any additional information that may assist the Committee.