



TESTIMONY OF

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SUBMITTED TO THE  
UNITED STATES SENATE INDIAN AFFAIRS COMMITTEE  
HEARING ON YOUTH SUICIDE PREVENTION

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Chairman McCain, Vice-Chairman Dorgan, and members of the Committee I want to thank you for holding these series of hearings on youth suicide prevention in Indian Country. I know our Native Communities in North Dakota appreciated the opportunity to speak with you last month, and we certainly appreciate the opportunity today. Senator Johnson, I would like to share our gratitude to you for your hard work in support of the Main and Teen Center project in Eagle Butte.

My name is Julie Garreau, Executive Director of the Cheyenne River Youth Project. We are a local, grassroots, non-governmental organization, which provides after school activities for young children on the Cheyenne River Reservation, and are in the process of building the only after-school center for teens.

We are heart broken that it may have taken an incident like the school shootings at the Red Lake Reservation in Minnesota to bring national attention to the crisis our children are facing in Indian Country, but are so relieved that someone is finally hearing our voices. Much criticism circulated after the shootings, focused on how people could have missed the "warning signs." We are here today begging that you too do not miss these "warning signs"... our children in Indian Country are in crisis.

## **THE NATIONAL SUICIDE PROBLEM**

### **Suicide Rate Two to Three Times Higher Than National Average**

You have already heard the national statistics; Native youth are 2-3 times more likely than other youths to commit suicide. And in our region of the Northern Plains they are often 5-7 times more likely.

Recent suicide clusters in Standing Rock, Crow Creek and unfortunately Cheyenne River clearly exemplify this trend. Statistics, however, can only tell so much, I would like to share the story of Cheyenne River to help you understand the depth of the heartache our community faces.

## **SUICIDES ON CHEYENNE RIVER**

### **Suicide Clusters and Pacts**

Cheyenne River has seen a heart-wrenching spate of suicides. With class sizes averaging approximately 70, we have lost seventeen teens to suicide. Some of these suicides were young men who had made a suicide pact with one another. They drew numbers, and decided to hang themselves in that order. One by one their families found these boys, often hanging in their homes, as their "number" came up.

In 2001-2002, Law enforcement reported 8 suicides, 48 suicide attempts, 28 suicide threats. In 2002-2003 there were 3 suicide completions, 152 suicide attempts, and 72 suicide threats. In 2003-2004 that trend continued.

### **Average of 3-7 Attempts Per Week.**

Every month, every week, we continue to struggle. It is not just the well-publicized suicide clusters we are struggling with; it is the three to seven suicide attempts we see every week. And it is not just youth under eighteen that we are losing. The numbers of young people

between eighteen and twenty-five, and other adults who suffer from suicide ideation, engage in suicide attempts, and complete, are alarming. Last year alone, not including drug overdoses, the Indian Health Service hospital treated twenty people for suicide attempts resulting in injury requiring emergency medical treatment. This is in a population of approximately 10,000 people.

The Cheyenne River Sioux Tribe Restoring the Balance Project, which was funded by the Department of Health and Human Services Substance Abuse and Mental Health Services Agency, carefully looked at this problem and the scope of mental health service needs for our youth ages birth to twenty-five years of age. The Project concluded after three years of looking at this problem in 1999. Between 1998 and 1999, of all the young people seen by Tribal mental health services, between nineteen (19%) and thirty-nine (39%) per cent were seen for suicide ideation, suicide gestures, or suicide attempts. This is an incredibly high percentage.

The Project also asked youth, adults and service providers what the causes of mental health problems were. Thirty-seven per cent (37%) of youth and twenty-six percent (26%) of adults felt the biggest problem was substance abuse; twenty-seven per cent (27%) of youth and twenty percent (20%) of adults felt that gang activity and violence was the biggest problem; fifteen percent (15%) of youth felt that lack of youth activities was the biggest problem; and fifteen per cent (15%) of youth and sixteen per cent (16%) of adults felt that negative youth behavior was the biggest problem.

#### **SOLUTIONS ON CHEYENNE RIVER**

Unfortunately there is no one magic answer to fix what decades of neglect and hopelessness have caused. But our community is strong and resilient, and we are working hard to address these issues together.

The Restoring the Balance Project asked youth and adults what was needed to solve the problems with youth mental health. Youth felt that increased adult involvement with youth (23% of youth), additional counselors and counseling services (16% of youth), employment (12% of youth) and increased access to recreational activities (12% of youth), were needed to improve youth mental health. Thirty-two percent (32%) of adults felt a recreation center was the most important need to address youth problems, twenty-five percent (25%) felt additional counseling services were most important, and twenty per cent (20%) felt that improved substance abuse counseling and awareness was the most important need to address youth problems.

Many of our solutions on Cheyenne River have not been governmental in nature, but homegrown grass-roots efforts. Our communities know many of the actions that need to be taken, but often do not have the resources to maintain the programs.

Service providers, youth and adults all see a need for basic program funding for mental health services, increased recreational and employment opportunities, and programs that increase adult interaction with youth as key to stopping this continuing crisis. With only one full time licensed counselor for the entire population, the Detention Center unfortunately functions as the gateway to mental health services. Any efforts at intervention with youth at risk must include and work with youth who have had contact with the Detention Center. Even more critical is prevention. Prevention starts with improved positive outlets for youth including recreational opportunities and opportunities for youth to interact with positive adult role models. It is much more difficult to handle depression and suicide ideation after the fact. If we can create a positive outlook for our youth, and programs that have daily contact with our young people, we will be much better prepared to stop this cycle of loss.

The funding that Congress has provided to our local programs in supporting our self-determination, including our new Teen Center, have been invaluable and for that we offer our sincere gratitude. I strongly encourage continued congressional support for access to youth program funds for Tribes, including Youth build funds from HUD and Department of Justice funding for youth programs, and improved basic funding for mental health programming through the Department of Health and Human Services and Indian Health Service.

### **The Teen Center**

In response to our last spate of suicides we went to the students in our community, we asked them what could be done. The students asked us for a Teen Center. With no mall, no movie theatre, no bowling alley, few jobs and very long winters, there are very few healthy outlets for our teens.

The students asked for a place where they could study, have access to the internet (a rare luxury in our community), take Lakota language and arts classes, and receive counseling. The new Teen Center will have basketball courts, a library, an internet café, and counseling offices.

By getting our teenagers “in the door” with attractions like the basketball court and internet café, we then have them as an audience for other health and wellness activities. We plan to work with other tribal resources to offer help in all wellness areas like the juvenile diabetes program, STD awareness, immunizations, counseling, and to reinstate our suicide hotline.

Together as a community we have been working hard to raise the funds to provide this safe haven for our teens. I am proud to say that we have finally broken ground on the Teen Center and hope to see it operational by Spring 2006.

A Teen Center is not the only answer, nor is it the solution for every community. There are so many other needs, drug & alcohol counseling, better foster care and juvenile justice systems, and more mental health counselors. Nevertheless, our teenagers are excited about this new center; we have seen it in their faces, and heard it in their voices. Even before it is built, it is giving them what they really need most: hope.

## **APPENDIX TO ORAL TESTIMONY**

### **BACKGROUND: HISTORY OF “THE MAIN”**

Daily life on the reservation can be hard on our youth. We see it in families so ravaged by alcoholism that what money is available is “drunk up” rather than spent on food. We know young children whose “dirty necks” are really symptoms of acanthosis nigricans (an indicator of insulin resistance and type II diabetes). We witness older youth taking over the parenting of their younger siblings. As you know, opportunities are often limited in rural communities, and no one feels it more than teenagers. On the Cheyenne River Sioux Indian Reservation, geographic isolation, a lack of infrastructure and grinding poverty are taking such a toll on our youth that too many have seen suicide as the only option.

The Cheyenne River Youth Project was created to improve the quality of life for Cheyenne River children by offering a safe, alcohol- and drug-free environment. We want our children to be healthy in mind, body and spirit. This philosophy is incorporated in all of our programs, from teaching children how to grow and eat healthy vegetables through our organic gardening program to offering them ample fitness opportunities through our basketball and dance camps, mid-night basketball and outdoor recreation activities. A variety of local resources come in to the Main to teach our kids, whether it is the South Dakota Extension Office’s summer classes on safety, good nutrition and hygiene or local elders demonstrating how to harvest and prepare traditional foods.

#### **The Cheyenne River Youth Project: A Record of Success**

The Cheyenne River Youth Project began in January 1988 in Eagle Butte, SD after a group of local residents and the Cheyenne River Sioux Tribe decided to turn one of Eagle Butte’s most notorious bars into a safe, alcohol- and drug-free environment for our community’s children. Open seven days a week and run by a completely volunteer staff, the youth center, called “the Main,” thrived and quickly became an essential part of the Cheyenne River community.

Unfortunately, that retrofitted bar soon showed its weaknesses after the blizzard of 1996. Severe cold and water damage buckled cement floors, caused electrical shortages and rendered several doors and windows non-functional. The following year, the Cheyenne River Youth Project and the national nonprofit organization Running Strong for American Indian Youth® partnered to build a new youth center.

The brand new “Main” opened in May 1999, following a successful capital campaign and contributions from several local, state and national foundations. The Main’s 4,224 sq. ft. facility includes a recreation room, family room, library, kitchen, staff offices and volunteer quarters. Kids who go to the Main receive healthy meals and snacks; participate in “Main University,” which encourages them to think about college by teaching topics like biology, writing, history and culture; have homework help; go camping and participate in other recreational activities; and learn how to grow (and eat!) fresh fruit and vegetables from the center’s two acre children’s garden. An average of 280-310 different children, ages 5-12, now pass through its doors each month.

## **Cheyenne River Teenagers: Underserved, and Slipping Through the Cracks**

Despite these accomplishments, for some time we have been thinking about Cheyenne River's teenagers – many of who are alumni of our children's services – and how to keep them involved after they outgrew our programs. The connection is still there for many of our alumni but our resources for teenagers are limited.

We have made two forays into helping teenagers already, with great success. Our midnight basketball program, runs for twelve weeks each summer for youth ages 13-18, and has an average of 119 youth participating. Our Chief of Police wrote a letter of support stating officers on the night shift noticed a decline in juvenile delinquency since the program was implemented. Last year, we began hosting a "Passion for Fashion" sleepover for over 20 young women, ages 15 and over, where we provided makeup, hair tips, shoes and dresses for the Prom.

But these programs, it is clear, barely scratch the surface of the need for structure and opportunities for Cheyenne River teens. There is no teen youth center, or for that matter, movie theater or bowling alley, on the reservation. Our teenagers need somewhere to go now more than ever, as has been made clear in recent months.

### **Cheyenne River: New Teen Center**

With the completion of our new youth center for teenagers, these programs will be able to grow and expand, building on the foundation of healthy behaviors taught to our younger children. By getting our teenagers "in the door" with attractions like the basketball court and internet café, we have them as an audience for other health and wellness activities, all in a space where Cheyenne River teens feel comfortable. We plan to work with other tribal resources like the juvenile diabetes program, offering our space for their educational efforts. The nonprofit Volunteers of America already has a STD Awareness Educator working out of our current building; we plan to coordinate similar services once we have the space. The possibilities are endless from our offering immunizations to offering counseling by a local licensed clinical social worker.

And finally, building on that community trust, we plan to reinstitute a suicide prevention hotline. The Cheyenne River community had hosted a suicide prevention hotline for seven years until 2000, when the availability of volunteers, funding and phone lines dwindled. The shock of last year's spate of teen suicides is an unmistakable reminder of our community's need to offer this service.