

TESTIMONY OF THE HONORABLE DARRELL G. SEKI, SR.
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Hearing on Demanding Results to End Native Youth Suicides
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Mr. Chairman, I thank you and the other distinguished members of the Committee for this opportunity to provide testimony on behalf of the Red Lake Band of Chippewa Indians, and for your attention on the problem of native youth suicides. For statistical purposes I will focus my testimony on youth under 18, but I would also point out Red Lake suffers from high suicide rates in over 18 years as well.

On behalf of the Red Lake Nation, I want to extend my sympathies to my brother Mr. Yellow Bird Steele, and the people of Pine Ridge. The Red Lake Nation is also experiencing high numbers of youth suicides, attempted suicides, suicide ideations, and counselling referrals. We are happy you received a Department of Education SERV grant. Red Lake received a SERV grant and a SAMHSA grant 10 years ago after the Red Lake School Shooting. Two lessons we learned are that school counsellors can make a huge difference and programs like this only work if they can be financially sustained over time.

About Red Lake Band of Chippewa Indians

Red Lake is a fairly large tribe with 12,000 members. Our 840,000 acre reservation is held in trust for the tribe by the United States. While it has been diminished in size, our reservation has never been broken apart or allotted to individuals. Nor has it been subjected to the criminal or civil jurisdiction of the State of Minnesota. Thus, we have a large land area over which we exercise full governmental authority and control, in conjunction with the United States. At the same time, due in part to our remote location, we have few jobs available on our reservation. While the unemployment rate in Minnesota is 3.7%, ours remains at an outrageously high level of about 50%. The lack of infrastructure such as good roads, communications, technology and other necessary infrastructure continues to hold back economic development and job opportunities.

Red Lake Suicide Rates and Intervention Process

Health information laws constrain our ability to consolidate suicide data. The School district, law enforcement and our health services all collect data in different ways, which makes analysis of suicide-related data difficult. Focusing on just health services, the data shows that last year we had four youth suicides—two girls and two boys—and there were 63 cases of suicide ideation. Due to Wellness Counselor interventions, 34 students were placed under protective watch and sent to appropriate medical facilities for care. The counselors initiated dozens of

Safety Plans with students to get assistance when needed. This proves the counselors are doing their job, and they can and do save lives. But because of staffing reductions under sequestration, we are unable to reach all who need help. Anyone who thinks sequestration is not so bad is dead wrong. Sequestration is a nightmare for tribes who must rely on federal funding.

The current youth suicide intervention process ultimately ends with no lasting service. For example, when a student is having a problem in our school, the teacher will contact a wellness counselor. The wellness counselor will first talk with the child and then take the child to the school social worker. If the child meets all the signs of suicidal behavior the child is taken to the hospital emergency room. After a doctor evaluates the child the hospital mental health staff will further evaluate to determine whether the child should go to a special facility for further treatment and observation. In this example, the child visited four separately funded programs, the independent school district, Red Lake Comprehensive Health Services, Indian Health Services - Emergency and Indian Health Services - Behavioral Health and if they are forwarded to another facility, it represents yet another funding source. At Red Lake, because of staffing shortages, it is well documented that Indian Health Service follow up care is always backed up by several weeks and children must wait weeks in order to be seen for follow up.

The History of Our Suicide Problem

Last fall, my office conducted community meetings focusing on suicide, drugs and bullying. We visited all four of our tribal communities and had great attendance and participation from our members. From our community meetings our members identified several long-standing obstacles to solving our social ills including youth suicide. Some of those obstacles include: loss of our traditions in everyday life; lack of facilities nearby; no aftercare in our land; inability to have “difficult” conversations; and perhaps most importantly, parental drug use—which includes alcohol. Our community members felt that solving drug abuse and bullying are critical needs in bringing about an end to suicide. The solutions our community came up with can easily be summed up; restore our sense of community.

The trail to suicide isn't far from lack of job opportunities. A lack of employment opportunities results in poverty and disparity. Poverty and disparity can lead to drugs and addiction. Drug addiction leads to the tear down of our families, which often precipitates high suicide rates.

But drugs are not the only source of our high suicide rate. Just three months ago, we marked the 10th anniversary of the Red Lake School shooting. 10 people lost their lives that day, 5 were wounded, and many other lives were changed forever. Today, a lot of those people are still suffering from the horror they faced that day. The story gets even more tragic when we consider that President George W. Bush told Red Lake the Government would come to our aid, and we would not be forgotten. But that promise did not endure.

I talked about Red Lake's youth suicide problem at the House Interior Appropriations Committee last March. Since that time two more kids committed suicide, including a nine year old boy just three weeks ago. I pointed out during the March hearing that for three years now, sequestration took about \$1.5 million each year from Red Lake's BIA and IHS base programs, and additional amounts from formula-based programs. This has made it very difficult for us to provide any sustained assistance to combat youth suicide. Grants are very difficult to apply for and to manage, and they don't last. Sustained funding is our only hope to make a difference.

How Red Lake Can End Suicide on Our Reservation

a. Expanding our Wellness Counselor program

Our Tribal Health program funds the Red Lake Schools' Wellness Program, which provides counselors to help students when they have problems and are thinking of harming themselves. It began after the School shooting, with help from a SAMHSA grant. The grant ended two years later, so the Tribe has had to pick up the tab ever since. Because of sequestration we had to cut the number of wellness counselors from 8 to 5, which is not nearly enough to assist hundreds of students in four schools. Additionally, we have only two school social workers, they are the specialists who usually make the first diagnosis of a problem. The wellness counselors and social workers in our schools are the critical front-line components of our suicide prevention plan. We need to at least double their numbers this year: from 5 to 10 wellness counselors; and from 2 to 4 social workers.

b. Attacking our drug problem

Drugs are a major factor in our suicide rates and we have taken a hard line against offenders. Within the last few weeks federal agents and our tribal police force arrested 41 people involved in trafficking drugs. The traffickers moved drugs such as heroin, methamphetamine and prescription pills in to Red Lake. We continue to work with our law enforcement partners and the United States Attorney's Office to expand on the number of drug busts. And that isn't all, the Red Lake Band of Chippewa Indians has also permanently removed many non-member drug Dealers from our lands.

c. Large concentrated multi-prong push

The Band will take a multi-program rehabilitative approach to address suicide and the underlying causes we see in Red Lake. We are very fortunate to have just been selected as one of four tribes to participate in the BIA's Tiwahe Initiative. The purpose of the Tiwahe Initiative is to address the underlying causes of poverty, domestic violence, substance abuse, and suicide, by utilizing an integrated approach to service delivery, and redesign of the services offered. We are bringing all of our programs together, we are going to break down the silos, and we are going to find out what works and does not work, and we're going to find a way to implement what works. We recently formed a suicide prevention task force to better coordinate mental health and suicide prevention services.

d. Building infrastructure

Hope is often fostered by prosperity. Providing adequate funding for governmental functions allows us to spend what little of our own money we have on economic development. We have a plan to build our economy in Red Lake. We are focusing on things that never leave the reservation; our infrastructure like communications and roads, and improving local training programs in order to build our workforce.

How Congress Can Help Red Lake to Accomplish Our Plan

Congress can help tribes reduce suicide by ending sequestration and by finding a way to provide additional and sustained funding. Red Lake, like many government agencies, suffers from compartmentalization of many services, including for mental health and suicide prevention. This makes it difficult to coordinate an effective approach to combatting the problem. And it makes it difficult for community members to know what services are available and where to go for help. Compartmentalization is partly the result of the fact that most funding to address mental health comes in the form of grants. Silos are created because granting agencies have their own unique funding requirements, and they award funds to different types of grantees (e.g. Department of Education to schools; HHS to health centers; DOJ and SAMHSA to tribal governments).

I have already alluded to it, but one thing we know about Indian Country is that grants often do not work. Grants are short term and often non-strategic. Further, federal application and reporting requirements are cumbersome and require significant resources to complete. Our SAMHSA grant was helpful but it only lasted two years.

The problem with grants is an issue that national scholars have noted. Miriam Jorgensen, the editor of “Rebuilding Native Nations” noted that often, Indian Tribes are unable to set their own development agenda—they must pattern it to obtain grants. Further Ms. Jorgensen pointed out, “few dollars come to Native Nations via block grants, a mechanism that would place more decision-making power in Indians hands.”

Compounding the problems associated with grants, the only recurring funding we could count on, from BIA and IHS, has been hammered by sequestration and at least 14 different across the board rescissions. Congress could aid in reducing our suicide rate by ending sequestration in Indian Country, and returning our sequestered funds to us.

In summary, in order to end suicide in Red Lake we need to better understand what we are doing right, and what we are doing wrong. We are optimistic that Red Lake’s participation in the Tiwahe Initiative will serve as the springboard to make changes that will work. Poverty brings about hopelessness and despair. Drugs that follow poverty have destroyed our understanding of family. The horrors of the school shooting still linger, and there is also generational trauma. Our

community members feel we need to restore our sense of community. Sequestration has limited our ability to address our problems. Grants are not the answer—they set programs up for failure. Only sustained funding of effective programs will end youth suicides in Indian Country. Red Lake has a plan to do that, but we need sustained funding to do so.

Thank you for allowing me to provide testimony today on the important topic of ending Native Youth Suicides.