## Udall Leads Indian Affairs Hearing on Opioid Crisis in Indian Country

**WASHINGTON** — Today, U.S. Senator Tom Udall, vice chairman of the Senate Committee on Indian Affairs, led a committee oversight hearing entitled "Opioids in Indian Country: Beyond the Crisis to Healing the Community" to explore the need for Congress to support wrap-around community services to fully address the opioid and substance use crisis in Indian Country. According to the Centers for Disease Control and Prevention, the drug overdose death rate for American Indians and Alaska Natives rose by more than 500 percent between 1999 and 2015 – the largest percentage increase in the number of deaths over time of any group.

"The substance abuse crisis has sent ripple effects through Native communities – straining already overtaxed Tribal systems. Tribal schools, housing departments, social services, law enforcement, and courts are all being asked to address the broader community disruptions caused by this public health emergency," Udall said during the hearing. "Any successful response to the opioid and substance abuse crisis in Indian Country must be driven by Tribes. And Congress must support Tribal efforts by holding federal agencies accountable and providing sufficient resources.... As members of the Indian Affairs Committee, we're obligated to educate our Senate colleagues about what's happening on this committee, so that Indian

Country's priorities -- and the voices of Tribal leaders -- are heard beyond these four walls."

The committee heard from several witnesses, including John C. Anderson, U.S. attorney for the District of New Mexico. Udall questioned Anderson about what specific actions the Department of Justice has taken to help address the opioid epidemic in Native communities in New Mexico and around the country since President Trump declared the epidemic a public health emergency.

In addition to the oversight hearing, today, Udall joined five other senators in introducing the Native Behavioral Health Access Improvement Act. The bill would create a Special Behavioral Health Program for Indians in order to help Tribes access the resources they need to address the mental health needs and substance use disorders in their communities. Modeled after the Special Diabetes Program for Indians, the program would allow Tribes to develop solutions that incorporate local, traditional and cultural practices into evidence-based prevention, treatment, and recovery programs.

Last week, Udall joined nine other Democratic senators in a letter to Senate Appropriations Committee leadership requesting a Tribal set-aside within the \$6 billion in opioid funding included in the recent budget cap deal.

Udall also joined a group of 15 senators last month to introduce S. 2437, the Opioid Response Enhancement Act. This bill, which also reauthorizes a federal opioid grant program for states, would make Tribes eligible for the program first authorized by the 21st Century Cures Act in 2016.

The full text of Udall's opening remarks at the oversight hearing can be found below.

Thank you, Chairman Hoeven, for calling this oversight hearing and continuing this committee's work to address the opioid crisis in Indian Country.

Before I begin my formal remarks, I'd like to welcome New Mexico's newest U.S. Attorney, John Anderson. Thank you, John, for your testimony and hard work on behalf of DOJ and New Mexicans.

Last November, we held a roundtable on this very same issue. Tribal leaders and Native organizations joined us to engage in a dialogue with agency officials from the Indian Health Service, Department of the Interior, Department of Justice, and White House. These participants brought with them a lot of good information on the need for more treatment and prevention resources – especially culturally based services.

And, we were reminded that Congress must build in flexibility when making these resources available – Native communities require and deserve the right to design behavioral health programs that suit local needs.

Any successful response to the opioid and substance abuse crisis in Indian Country must be driven by Tribes.

And Congress must support Tribal efforts by holding federal agencies accountable and providing sufficient resources.

We're also working with our colleagues over at the Health, Education, Labor and Pensions Committee.

Just last week, at a HELP hearing on state responses to the opioid crisis, three senators – Ranking Member Murray, Senator Warren, and Senator Smith – spoke about Tribal opioid challenges and the need for better state-Tribal coordination.

As Members of the Indian Affairs Committee, we're obligated to educate our Senate colleagues about what's happening on this committee, so that Indian Country's priorities -- and the voices of Tribal leaders -- are heard beyond these four walls.

When members work across committees to amplify Tribal needs, good things happen.

The ideas we heard on addressing Native substance abuse disorders at the roundtable resulted in introduction of S. 2437, the Opioid Response Enhancement Act, a bill led by Senator Baldwin and joined by 15 Senate colleagues, including myself and three other Indian Affairs Committee members.

The legislation refines the 21st Century Cures grant program to make Tribes eligible to receive funds, provides Tribes with programmatic flexibility, and includes a 10 percent Tribal set-aside to further ensure these funds actually make it out to Indian Country.

And last week, I joined a group of 10 senators, led by Senator Heitkamp, on a letter to Appropriations Committee leadership outlining the dire need for Tribal-specific funding streams within the \$6 billion in opioid funding put in place as part of the recent budget cap agreement.

Finally, just this morning, I joined Senator Smith and four other colleagues to introduce the Native Behavioral Health Access Improvement Act.

Modeled after the Special Diabetes Program for Indians, this legislation would create the "Special Behavioral Health Program for Indians" -- a mandatory program funded at \$150 million annually.

I am heartened by this robust response to Indian Country's call to action.

But, as we will learn from our witnesses today, there is much left to do.

The substance abuse crisis has sent ripple effects through Native communities – straining already overtaxed Tribal systems.

Tribal schools, housing departments, social services, law enforcement, and courts are all being asked to address the broader community disruptions caused by this public health emergency.

I look forward to hearing from all of our witnesses today about how Congress can work to address the full impact of the opioid crisis in Indian Country.

And I look forward to continuing those efforts at next week's oversight hearing on the President's F-Y 2019 budget proposal.

Thank you again, Mr. Chairman, for calling us here today.