OPENING STATEMENT OF SENATOR BYRON L. DORGAN, VICE CHAIRMAN, COMMITTEE ON INDIAN AFFAIRS AT THE APRIL 13, 2005 OVERSIGHT HEARING ON INDIAN HEALTH

Mr. Chairman, thank you very much. We will hold many hearings in this committee; none, I think, more important that the issue of focusing on Indian health care. Most other things in life are not very satisfactory if you do not have access to good health care.

I want to mention that we held a meeting in the Oval Office one day some years ago with certain Tribal chairs. They came in and one of them stood up and said, 'I come from a third world country.' He read to the President the data and statistics about his reservation which are similar to the statistics nationally. Native American youth are twice as likely to commit suicide. In the Northern Great Plains, they are ten times more likely to commit suicide than other Americans, statistically. They are five time more likely to die from alcoholism. They are six times more likely to die from tuberculosis. The rate of death from diabetes is three or four times that of other Americans. They have twice the rate of accidental death. So, this is a very serious issue.

I held a meeting, Mr. Chairman, several weeks ago in North Dakota because there had been a rash of suicides of young people on an Indian reservation in North Dakota. I didn't invite the press. We just had a long, quiet meeting with people who were involved in these issues, and it's heartbreaking. You hear stories that are just devastating.

I will not go into great length today, but I have spoken about Avis Little Wind who took her life after spending 90 days in bed in the fetal position, missing 90 days of school. I went up to that reservation and talked to the people about it. Her sister committed suicide; her dad had committed suicide; her mother was dysfunctional; and this goes on, and on, and on.

I asked today to have some special testimony from some the Substance Abuse and Mental Health Services Administration. I am pleased that Ms. Katherine Power is with us today, and we have others who will testify today about these issues. But, as we try to work through these health issues, I want to see if we can spend some time on this issue of suicide, particularly teen suicide on Indian reservations.

I also want to make the point out the dramatic disparities that exist with American Indians. Medicare spends about \$6,000 per person on health care; the VA spends about \$5,200 per person; Medicaid about \$3,900 per person; and we spend about \$3,800 per prisoner, because we have federal responsibilities for the health care of federal prisoners. On the other hand, the Indian Health Service spend about \$1,600 per person for health care of American Indians and there we have a trust responsibility, as well.

We have a very big challenge. I look forward to working with you, Mr. Chairman, and other members of this committee to address these health care issues, which we talk about every year and in which very slight progress is made. And, so much is yet to be done. Mr. Chairman, thank you very much.