

**TESTIMONY OF DANA BUCKLES, COUNCILMAN  
ASSINIBOINE AND SIOUX TRIBES OF THE FORT PECK RESERVATION TO  
THE HOUSE APPROPRIATIONS COMMITTEE, SUBCOMMITTEE ON INTERIOR  
AND RELATED AGENCIES ON THE IHS, BIA and EPA FY 2025 BUDGET**

May 7, 2024

I am Dana Buckles, Councilman of the Assiniboine and Sioux Tribes of the Fort Peck Reservation. I would like to thank the House Interior Appropriations Subcommittee for the opportunity to present testimony concerning FY 2025 appropriations for the Indian Health Service (IHS) and Bureau of Indian Affairs (BIA).

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 13,000 enrolled tribal members, with approximately 7,600 tribal members living on the Reservation. We have a total Reservation population of approximately 12,000 people.

Congress has long recognized that the foundation for economic development and prosperity in Indian country lies in community stability, which begins with quality healthcare and infrastructure, such as safe drinking water, roads, public safety and a clean environment.

**A. INDIAN HEALTH SERVICE FUNDING**

Last year, former Chairman Floyd Azure testified before you about the mental health and addiction crisis facing Indian country and which the people of Fort Peck, in particular, are experiencing at devastating levels. Over the last year, this crisis has only magnified. It is critical, therefore, that the Indian Health Service be fully funded and tribes economically empowered to face this crisis head on.

The COVID-19 pandemic showed the nation the chronic health care deficiencies in Indian country. Native people acquired and died of this disease at some of the highest rates in the nation. This is because we suffer from comorbidities at higher rates, and because Indian country lacks access to adequate healthcare and basic community infrastructure. These same health inequities facing Native people are also exacerbating the current mental health and addiction crisis.

For the current year, Congress funded the IHS Services Clinical Services account at \$4.46 billion, an increase of \$27.7 million over the FY 2023 enacted level—in other words, an increase of 6/10 of one percent. For FY 2025, the Administration proposes \$5.12 billion, a proposed increase of \$664 million, or what would be nearly a 15% increase over the FY 2024 level.

Within the FY 2024 funding amount of \$130 million for IHS Mental Health needs across Indian country, the Fort Peck Tribes receive \$132,205 (about 1/10 of one percent). Within the FY 2024 funding amount of \$267 million for the IHS Alcohol and Substance Abuse Program across Indian country, the Fort Peck Tribes receive \$1.77 million (6/10 of one percent). It is not enough, and we urge the Subcommittee to appropriate funds commensurate with the documented needs.

I do not know how to describe the level of our needs other than to say that modest budget increases cannot begin to address the shortage of health professionals and the shortage of long-term and in-patient substance use disorder (SUD) programs our Tribe requires to address the mental health and substance use needs of our Tribal citizens.

The addiction crisis at Fort Peck is fueled by opioids, specifically fentanyl, the availability on the Reservation of which has skyrocketed over the last several years. This is true across Indian country in Montana, where the opioid death rate for Indian people is twice that of non-Indians.<sup>1</sup>

At Fort Peck, we have the Spotted Bull Recovery Resource Center (SBRRC) that serves as the Tribal SUD program. We provide best practices, evidence-based and culturally appropriate prevention, intervention and treatment services primarily related to substance misuse, complemented by mental health services to patients who present with SUD needs. We provide services according to the American Society of Addiction Medication (ASAM) levels of care. Our program offers four levels of care: Level 0.5 (Prevention and Education); Level 1.0 (Outpatient); Level 2.1 (Intensive Outpatient); and Level 3.1 (Day Treatment). We make referrals to higher levels of care involving primary residential inpatient treatment programs that we do not offer on the Fort Peck Reservation. I wish it were otherwise.

At SBRRC, we offer the following services:

- 10 hours of individual/group therapy per week;
- 2 hours of Level 0.5 Early Intervention per week;
- 2 hours of Anger Management related to SUD;
- 2 hours of Recovery Support per week;
- 2 hours of Family Programming per week;
- 4 hours of Clinical Staffing per week;
- 2 hours of Community Education/Outreach bi-weekly; and
- 4 hours of Prime for Life programming.

We urge the Subcommittee to devote additional appropriations to IHS mental health and substance misuse programs so that outpatient and inpatient treatment services can be greatly expanded and made widely available on our Reservation and across Indian country.

Furthermore, the Tribes contracted the IHS Dental and Public Health Nursing Program last fall. We are still working to establish Tribal servers and a Dentrax System independent of the IHS. We work daily to provide quality dental and PHN services with the few dentists, hygienists and PHN professionals we are able to employ. We urge the Subcommittee to consider more than a 1.7% increase (\$4.4 million) in FY 2025 for the IHS Dental Health Program budget of \$248 million and more than a 1% increase (\$1.2 million) in FY 2025 for the IHS Public Health Nursing Program.

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<sup>1</sup> See *Tribal Leaders Sound the Alarm*, NPR (June 1, 2022), <https://www.npr.org/sections/health-shots/2022/06/01/1101799174/tribal-leaders-sound-the-alarm-after-fentanyl-overdoses-spike-at-blackfeet-nation>.

## **B. BUREAU OF INDIAN AFFAIRS FUNDING**

1. **Law Enforcement** - One of the main symptoms of the fentanyl crisis on the Fort Peck Reservation has been a corresponding rise in crime on the Reservation. We have seen an increase in crime across the board, but especially in property crime and violent crime—including sexual and other violent assaults, kidnapping and homicide. Crimes at Fort Peck are being committed by and against every demographic within our community. Just last September, the Tribal Executive Board issued a state of emergency due to the severe increase in juvenile crime. Our Police Chief estimates that at least 80% of criminal conduct on the Reservation relates back somehow to drugs. For example, a perpetrator may have been high when they committed the crime, they may have committed the crime to secure money to purchase drugs, or they may have committed the crime in retaliation for something related to drug use or distribution.

The Fort Peck Tribes have provided law enforcement and correctional services on our Reservation since 1996 under an Indian Self-Determination and Education Assistance Act contract.

BIA law enforcement must be fully funded so that tribes like ours can attract, hire and retain more law enforcement personnel to live and work in our community. For FY 2024, Congress appropriated \$274 million for the BIA's Public Safety and Justice Program's Criminal Investigations and Police Services Account, the same funding level as FY 2023. We are losing tribal police due to burnout and the higher salaries and better benefits that surrounding state and county law enforcement programs can offer.

We urge this Congress to pass this session the “Parity for Tribal Law Enforcement Act” to provide increased salaries and fringe benefits to tribal law enforcement similar to other federal law enforcement officers. Crime doesn't stop at our Reservation boundaries. We are not insulated and neither are surrounding areas. We must do better by our first responders. I ask this Subcommittee to include tribal public safety needs in the FY 2025 budget.

2. **Tribal Court Funding** - Similarly, BIA must increase funding for tribal justice systems. As Congress has known for years based on thorough, bipartisan study, the most effective law enforcement is locally determined and administered, and thus reflective of local values—in Indian country this means tribally determined and administered and reflective of tribal values.<sup>2</sup> At Fort Peck, we have always known that strong tribal government is the best way to keep our community safe.

It is for that reason that, for more than fifty years now, the Fort Peck Tribes have had an independent judicial system, including an appellate court. Our tribal court system includes law-trained judges, law-trained prosecutors and public defenders, probation officers and experienced

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<sup>2</sup> See generally *A Roadmap for Making Native America Safer: Report to the President & Congress of the United States*, Indian Law & Order Commission (Nov. 2013), available at [https://www.aisc.ucla.edu/iloc/report/files/A\\_Roadmap\\_For\\_Making\\_Native\\_America\\_Safer-Full.pdf](https://www.aisc.ucla.edu/iloc/report/files/A_Roadmap_For_Making_Native_America_Safer-Full.pdf).

court clerks and court reporters. Our tribal code is published and publicly available. We are also one of a small number of tribal court systems exercising expanded jurisdiction and enhanced sentencing under VAWA and the Tribal Law and Order Act.

This kind of work requires additional resources to attract, hire and retain skilled professionals and provide high-level services to all the individuals and families in the system. That is why I ask Congress to significantly increase funding for tribal courts in the FY 2025 budget.

3. **Housing** - It is important that sufficient BIA funding be dedicated to addressing the social conditions on the Reservation that are interrelated with many of the problems we see with the mental health and drug crisis, the Reservation crime rate and health disparities within our community—and one such area for this is housing. We have a significant shortage of housing at Fort Peck. In many cases, we have multiple families living in a single home. There is overcrowding. This means that exposure to illness and unhealthy behaviors is unavoidable for many people, especially children. We must have greater funding to increase housing on the Reservation for families, to increase housing for people in recovery so that they do not go homeless during such a critical time (or return to homes where they may endanger others if they experience a relapse or other crisis), and to enable Tribes to better be able to recruit professionals to live and work in our community—especially teachers, law enforcement and healthcare professionals. Importantly, housing funding must include the resources so that new developments are built with access to basic infrastructure like water, sewer, electricity and broadband.

Additionally, the BIA Housing Improvement Program (HIP) is insufficiently funded to address housing needs on the Reservation for the least well off. FY 2024 funding was \$12 million. We understand, however, that the Tiwahe Initiative Program provides greater flexibility regarding Tiwahe HIP funding than the BIA HIP Program. We urge the Subcommittee to increase the Tiwahe Initiative Program to benefit more Tribes and trust Tribes to wisely use Tiwahe Initiative funds to address unmet housing and interim housing needs of our members.

4. **Social Services & ICWA Funding** - Our Tribal Social Services program has needed increased funding for some time, as our former chairman testified about last year. For FY 2024, Congress cut BIA Social Services about 2% below the FY 2023 level of \$167 million. Our needs have only grown over the last year, particularly in light of the mental health and substance misuse issues I have highlighted. These issues have hit young adults, many of whom are parents, particularly hard and are thus exacerbating the stress put on our already thinly stretched social services providers and programs. Our families need additional wraparound and preventive social services support so that their children do not enter the foster care system. And for those children who do enter the system, we must have greater funding to recruit and retain licensed foster care homes on the Reservation.

Thank you for the opportunity to testify.