

Statement of Kevin Gover, Assistant Secretary for Indian Affairs,  
before the  
Senate Committee on Indian Affairs  
Hearing on  
S. 1507, the "Native American Alcohol  
and  
Substance Abuse Program Consolidation Act of 1999

October 13, 1999

Good morning, Mr. Chairman and Members of the Committee. I am here today to provide the Department of the Interior's position on S.1507, a bill to consolidate alcohol and substance programs and services provided by Indian tribal governments. The Department strongly supports the goals and intent of S.1507. The Administration believes that we need to provide you with a report that will be delivered to you early in the next session. The report will outline the most effective and efficient means to implement the concept outlined in this legislation. Further, the Administration believes that S.1507 should be amended to assign the lead agency coordination responsibility to the Department of Health and Human Services.

**BACKGROUND**

Understanding the scope and underlying causes of the alcohol and substance abuse problem, as found in varying degrees within Indian Country, is a difficult task. Yet, proven indicators of alcohol and substance abuse, both behavioral and economic, can be readily observed in many American Indian communities. Examples of co-occurrence indicators come from tribal and federal law enforcement records. Law enforcement records document increasing levels of child abuse, gang activity, youth violence, domestic violence, DWI violations, and drug-related arrests among youth and adult tribal members. Too often Indian tribal members, whether they happen to be perpetrators or non-perpetrators, live in harsh economic conditions - conditions that have shown over time to compound the numbers of alcohol/substance abuse related violence observed in tribal communities. The economic adversity facing a majority of the nation's tribal members was noted in the BIA's 1997 Labor Force Report: almost 50 percent of the adult labor force was unemployed, and, of those employed, 30 percent were still living below the poverty guidelines established by Health and Human Services.

The Indian Health Service (IHS) has published studies suggesting an association between alcohol and drug abuse and the American Indian and Alaska Native suicide rates, which are nearly twice the rates for all races in the United States. Also, according to IHS, 17 times as many Indians and Alaska Natives die from alcoholism than the U.S. white race rate from ages 15 to 24. The Department of

Justice Bureau of Justice Statistics has published data showing that Indian and Alaska Native offenders who were under the influence of alcohol and/or drugs committed 55 percent of the violent crimes against other American Indians or Alaska Natives.

## **THE VISION**

Shortly after I took office, I announced that one of my priorities for Indian Country was to help direct Bureau of Indian Affairs (BIA) resources to assist Tribes better in reducing alcohol and drug abuse in their communities. Toward that goal, the BIA has initiated interagency agreements and established other interagency liaisons. One promising interagency agreement with the Administration for Native Americans at HHS involves 48 small Tribes in a pilot study to employ a normed screening survey to assess the extent of alcohol problems among all adult members, household by household. After analyzing the assessment information, the Tribes will be designing abuse prevention programs.

As we embark on a new millennium, alcohol and substance abuse in Indian Country shows no sign of reversing itself on its own. The BIA is prepared to continue to use its available resources. I see the BIA continuing to exercise its role as stated in S. 1507 to improve the quality of life of tribal members by working with individual Tribes to reduce incidents of alcohol and substance abuse taking place in their respective communities.

## **CONCLUSION**

Currently, we are meeting with representatives of the Corporation for National Service's AmeriCorps program to share resources and strategies to involve our nation's Indian and Alaska Native youth and elders in alcohol and substance abuse community projects.

We view S.1507 as both a challenge and as an opportunity. S.1507 provides an opportunity for HHS and BIA to work constructively with each Tribe, to share federal resources, and to help draft or negotiate a quality plan that identifies the Tribes integrated approach to implementing alcohol and substance programs and services.

I firmly believe that the concept of S.1507 holds the promise to be as successful in reducing tribal administrative costs and reporting requirements for S.1507-eligible alcohol and substance abuse prevention programs, as is reflected within the Public Law 102-477 program.

Thank you, Mr. Chairman, for inviting me to address you and the Members of the Committee on this important legislation. I will be happy to answer any questions you may have.