STATEMENT FOR THE RECORD LARRY ECHO HAWK ASSISTANT SECRETARY FOR INDIAN AFFAIRS U. S. DEPARTMENT OF THE INTERIOR FOR THE

COMMITTEE ON INDIAN AFFAIRS UNITED STATES SENATE OVERSIGHT FIELD HEARING ON HELPING OUR PEOPLE ENGAGE TO PROTECT OUR YOUTH

OCTOBER 22, 2011

My name is Larry Echo Hawk and I am the Assistant Secretary for Indian Affairs in the Department of the Interior. I am pleased to submit a statement for the record to provide the Department's statement on the topic of H.O.P.E, "Helping Our People Engage," which relates to American Indian and Alaska Native youth suicide prevention.

American Indian and Alaska Native youth suicide is a serious problem in Indian Country. Data and research have shown that social factors such as poverty, alcoholism, gangs, and violence contribute in the manifestation of suicide ideation, suicidal behavior and suicide attempts by American Indian youth in Indian Country. See *To Live To See the Great Day That Dawns: Preventing Suicide by American Indian and Alaska Native Youth and Young Adults*, 2010 Publication by Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health and Human Services.

According to the Centers for Disease Control (CDC) data on "Leading Causes of Death by Age Group, American Indian or Alaska Native Males-United States, 2006," suicide was the second leading cause of death for ages 10-34. The same 2006 data from the CDC for American Indian or Alaska Native females showed that suicide was the first leading cause of death for ages 10-14, the second leading cause of death for ages 15-24, and the third leading cause of death for ages 25-34. Additionally, SAMHSA in its 2010 publication, To Live To See the Great Day That Dawns: Preventing Suicide by American Indian and Alaska Native Youth and Young Adults, states that young people account for forty percent (40%) of all suicides in Indian Country.

As this Committee is aware, the Bureau of Indian Affairs (BIA) programs assist tribal communities in developing their natural and social-economic infrastructures (i.e., tribal governments, tribal courts, cultural vitalization, community capabilities, etc.) or provide services to fill infrastructure gaps (i.e., education, law enforcement, social services, housing improvement, transportation, etc.). For the BIA, suicidal events significantly impact law enforcement personnel since they are the most likely first responders to suicidal events. The Office of Justice Services (OJS) in the BIA has partnered with numerous health and social service programs to assist in educating and presenting at schools, seminars, workshops and community events to the youth and the community on suicide prevention. During these events BIA Law Enforcement participates by setting up an educational booth designed to interact with families and other service agencies and provide information on suicide prevention. The OJS will

continue to gather statistical data and identify youth suicide trends within Indian Country, as well as look for ways to expand suicide prevention training with other stakeholders in the future. More specifically the BIA-OJS's recent activity includes:

- Providing training sessions on "Public Safety's role in Suicide Prevention", and "Suicide in Jails" during the Action Summit held in Scottsdale AZ.
- Begin plans for a Suicide Prevention Training Initiative in 2012. The OJS has begun to
 collaborate with the Alaska State Police to provide a specific Alaska Native Village
 initiative to bring training out to police officers serving Alaska Native Villages and
 communities, and the OJS is seeking partnerships with BIA Social Services and
 SAHMSA in expanding the planned 2012 initiative across Indian Country. The training
 initiative will focus on prevention and first responders' response to suicide threats.

Indian Affairs' most direct action in youth suicide prevention is through the Bureau of Indian Education (BIE). The BIE is providing technical assistance and monitoring though BIE regional School Safety Specialists to ensure schools are compliant with intervention strategies and reporting protocols to further ensure student safety. BIE's partnering with other federal agencies, including SAMHSA and the Indian Health Service (IHS) and the Department of Education, has enabled BIE to address the unique needs of students within these schools in the areas of behavioral health and suicide prevention efforts.

There is a significant impact on students, teachers, administrators and other school staff when handling suicide ideation, gestures, attempts and completions within the BIE school system. The BIE has developed a Suicide Prevention, Early Intervention and Postvention Policy to promote suicide prevention in BIE schools. The policy mandates specific actions in all schools, dormitories and the two post-secondary institutions; and encourages tribally-operated schools to develop similar policies. These actions create a safety net for students who are at risk of suicide, and promotes proactive involvement of school personnel and communities in intervention, prevention and postvention activities.

The BIA's Law Enforcement and Tribal Services programs, along with the BIE, continually seek ways to collaborate and to support activities directed at suicide prevention and services coordination. The BIE utilizes the Youth Risk Behavior Survey, Native American Student Information System (NASIS), local BIA Law Enforcement and IHS data to develop interventions and track trends for program implementation and is committed to seeking out and enacting prevention strategies while ensuring a safe and secure environment for our students.

Additionally, BIE schools and dormitories use NASIS to track and identify specific behavior trends to develop interventions to address school specific behavior issues. BIE has developed two technical assistance training sessions that include both a basic and coaching level course. The basic course covers initial program development, policy development, best practices, and implementation, and the coaching level course focuses on adult wellness issues and youth development. The framework of the session is based on Native resiliency and cultural practices that support a positive school climate. More specifically, the BIE has completed several projects to address youth suicide:

- The BIE has developed two 16-hour courses on anti-bullying and suicide prevention for use within the BIE school system. The BIE has trained approximately 500 staff on these basic courses and approximately 200 staff on the coaching level.
- The BIE provides 13 online programs that provide BIE staff training on suicide prevention and anti-bullying. The BIE currently has all 13 online sessions on DVD along with training guides for the sessions. BIE's Education Line Officers (ELOs) and Principals may use these sessions during orientation or professional development days.

There are also ongoing efforts to address these issues through partnerships with behavioral health and social services organizations at both the tribal and national level with SAMSHA and the IHS. Almost a year ago, on November 12, 2010, myself, along with Yvette Roubideaux, Director of the Indian Health Service, and Pamela Hyde, Administrator for SAMHSA, announced to Tribal Leaders that BIA, IHS and SAMHSA would sponsor listening sessions to hear the needs and concerns regarding youth suicide in Indian Country. The purpose of the listening sessions were to gather Tribal input on how we can best support the goals and programs of tribes for preventing suicide in Tribal communities. We held ten listening sessions and the listening session held in Alaska was the largest attended listening session with approximately 500 attendees.

The BIA, IHS and SAMHSA met with several Tribes from all of the BIA Regions during these listening sessions. We held these listening sessions in Indian Country to gain first-hand knowledge from the American Indian and Alaska Native communities to see how best we can all, as partners, prevent youth suicide; and to identify specific needs expressed by tribal community leaders, clinicians, practitioners, and youth.

The information gathered from these listening sessions was used at the Action Summit for Suicide Prevention held in Scottsdale, Arizona on August 1-4, 2011. The Action Summit was jointly sponsored and attended by BIA, BIA's OJS, BIE, IHS and SAMHSA to discuss what we heard during our joint listening sessions with Tribes, their members, and especially the tribal youth. One of the goals of the Action Summit on Youth Suicide was to develop policy and future action items to address youth suicide and prevent youth suicide in Tribal communities.

We are also jointly sponsoring, again with BIE, IHS and SAMHSA an Action Summit for Suicide Prevention in Alaska on October 25-27, 2011. We plan to continue discussing with Tribes, their members, and the tribal youth our goals, develop policy and future action items to address and prevent youth suicide, with particular attention to our Alaska Native population.

In summary, the BIA, BIE, IHS, SAMHSA, other Federal agencies, and Indian tribes have and must continue to work together to address all aspects of suicide prevention and response. I want to thank the Committee for its continued concern for the wellbeing of Indian children, teens and young adults, especially on the subject of suicide prevention.

And I want to thank Senator Murkowski for her continued leadership on this issue, especially for the Alaska Natives in the State of Alaska. I am happy to respond to questions.