

Educating state, federal reps neverending job



CATHY ABRAMSON, DIRECTOR, UNIT I

2013! Here we are and where are we going? For several months now, I have been actively knocking on legislators’ doors to educate and remind them of their trust responsibilities to our tribal nations. Is this necessary? Haven’t we done that enough? Don’t they know us by now? The answer is that we will always have to meet with them. New people get elected. New staffers need to be updated. New contacts and communications need to be made. It’s part of our job as your tribal representative to meet with federal and state legislators on your behalf.

LEGISLATIVE UPDATE

Much has happened since the last time we have been together. One of the biggest and most important events that has occurred since then is the one-year extension of the Special Diabetes Program for Indians, which Congress passed and President Obama signed into law on Jan. 2. Achieving a one-year renewal of the Special Diabetes Program for Indians at the current funding level of \$150 million brings the SDPI forward to Sept. 30, 2014.

Many of the tribes reached out to the Michigan Congressional Delegation during this past year and during the holidays to contact House Ways and Means Committee Chairman Dave Camp and House Energy and Commerce Committee Chairman Fred Upton. Having congressional members who hold leadership positions, such as Representatives Camp and Upton, hear from the Michigan tribes played a critical role and made a difference!

Now that SDPI will continue through September 2014, tribes can continue to make a significant difference in the lives of people who must manage diabetes on a daily basis. However, our work is not done. Multi-year reauthorization efforts must continue and you will be hearing more about that in 2013. The NIHBS DPI online resource center is a wonderful resource for your SDPI programs, policy and advocacy. Please visit it at www.nihb.org

As we all know by now, the fiscal cliff — when sequestration would go into effect without congressional action to address deficit, taxation and spending issues plaguing the nation — was averted with the Jan. 2 passage of legislation providing a temporary fix. However, the “fix” will only take us through March 30, 2013. The Continuing Resolution allows spending for FY 2012 to move

forward only until March 30.

Sequestration still looms large and it could take place on March 30, 2013. If Congress does not act, the across-the-board cuts sequestration requires WILL happen April 1. This would mean an 8.2 percent cut across-the-board cut for all discretionary spending (with limited exception). The Indian Health Service is among those programs that would be subject to sequestration.

NIHB is writing a letter to the Office of Management and Budget this week through which we will make arguments that Congress did not intend the IHS to be part of the 8.2 percent cut and would rather be subject to the 2 percent cut required by law. Clearly — even 2 percent is too much! NIHB is fighting all across-the-board cuts in sequestration, since such a policy would cost American Indian and Alaska Native lives, livelihoods and homes!

We will ask you to be part of this outreach effort very soon.

It’s important to let you know that, because of these critical deadlines, it’s expected that President Obama’s budget will be late reaching the Congress. The President’s budget traditionally reaches Congress the first Monday in February. If Congress has not yet acted on the sequestration issue by this time and specifically acted on the Department of Defense spending, the President will likely wait to release his budget.

TRIBAL NATIONS CONFERENCE

The month of December was quite an exciting and busy time for me. I was honored to be able to join Chairperson Payment to the meeting with President Obama. The reason I was able to attend is that I am a primary member of Secretary Sebelius’ (Health and Human Services) Tribal Advisory Committee. All 12 primary representatives of this committee were invited.

While attending this meeting, I introduced our chairperson to as many “in the know” people as I could. It is my hope that he will follow up with these agency heads to share our issues and concerns. I have no doubt that he will do so. I remain committed to assist him in any way that I can. Developing good working relationships is important for our tribe.

I was honored to meet our three remaining Navajo Code Talkers and, yes, to actually meet our President of the United States. I will always remember my mom, Helen McCoy, and Francis Smith, tell us how proud they were when we went to President Clinton’s inauguration. They both cried to know that our people were represented. I know they and our other ancestors were right there with us.

Directors Massaway and McLeod both joined us in DC. While the chairperson and I were at the White House meeting, these directors met with many congressional offices to discuss our issues with health care, education, environment, sequestration, etc. Because there were

four of us there, we were able to meet with more people. It was great that we were able to cover so much ground and bring our issues to these legislators. I thoroughly enjoyed our meeting with Congressman John Dingell Jr. He is an honorable man and has been very supportive of our tribe. Another interesting meeting we attended was with BIA Budget Director Thomas Thompson. We need our tribal leadership involved in the tribal budget process at a national level. I have encouraged our Chairperson to be that representative. We need to give input at this level.

While there, I attended the Indian Health Service listening session with IHS Director Dr. Yvette Roubideaux. I was able to tell her our Sault Tribe story in regards to the Special Diabetes Program for Indians. SPECIAL DIABETES PROGRAM FOR INDIANS

We have been a recipient of this grant since June 1, 1998, and of the Health Heart grant since Sept. 30, 2004. With this funding, we have been able to hire quality staff to educate patients regarding prevention and management of diabetes. We’ve purchased laboratory and optical equipment, educational materials and medications for the control of blood sugars, blood pressures and cholesterol levels to supplement our formulary. Patients have also been able to have podiatry assessments, therapeutic shoes and inserts to prevent foot complications.

We have been successful in improving the health of our people. In 1997, 39 percent of patients with diabetes had A1C levels less than 7.6. In 2012, 63 percent have A1C levels less than 7. In 1997, 42 percent had total cholesterol levels less than 200 mg/dl, and in 2012 that figure was up to 70 percent. Blood pressure control also improved with 53 percent with blood pressures of less than 130/80 in 2012.

Although we received the recent good news, we must not stop letting our legislators know this must continue! SDPI is making a tremendous difference in the health of our Native peoples, who are disproportionately burdened with Type 2 diabetes at a rate of 2.8 times the national average. The program currently supports over 450 IHS, tribal and urban programs in 35 states. The SDPI is currently set to expire in September 2013. If this valuable program is not reauthorized, all the progress that we have made with our peoples health will be irreparably harmed. Our people will continue to die with this horrible disease.

Diabetes is a human and financial burden, affecting over 26 million Americans with a cost to the U.S. economy of approximately \$174 billion. In Michigan, according to 2008 Centers for Disease Control and Prevention reports, 8.6 percent of the state’s population are diagnosed with diabetes, many of them suffering from serious diabetes complications or conditions. The direct and indirect cost of diabetes in Michigan is \$5.4 billion.

The following week I returned to Washington, D.C., to strictly focus on the reauthorization of the Special Diabetes Program for Indians. I attended the Special Diabetes Program for Indians symposium. I was honored to introduce former Senator Byron Dorgan, who was a champion for the Special Diabetes Program for Indians. Senator Dorgan fought for continued support of SDPI and has remained a champion of SDPI and improved health care quality for American Indians and Alaska Natives.

Congress created SDPI in 1997 to address the growing epidemic of type 2 diabetes in tribal communities. The program has grown and is our nation’s most strategic and effective federal effort to combat diabetes in our tribal communities. As chairperson of the National Indian Health Board, I with the National Indian Health Board met with many legislators and chairs of committees to give them data that shows that the SDPI is a successful program.

Because of all the hard work done by legislators, tribal leaders, staff and community members, we were able to prove that this is one government program that actually works and is saving lives.

Please contact your representatives and thank them and let them know that it must continue to get funded.

HERE AT HOME

On a local level, I attended our Joseph K. Lumsden Fiduciary Committee meeting. Unit I board members are working closely with our JKL Bahweting Anishinabe School to make improvements for our youth’s educational endeavors. At this time, we are looking at a location change to expand our school.

This is not concrete and much research and development must continue to be done. Our school’s

superintendent is doing a great job on improving our school and she is very understanding and cooperative of our desire to meet the special and unique needs of our tribal children.

We met with representatives from the City of Sault Ste. Marie to discuss bringing city water to our housing site at Odenaang. This was a very encouraging meeting and the working relationship that we have with our city has been one of cooperation.

I attended our New Year’s Eve Powwow at the LSSU Norris Center this year. We all had an excellent time! Jackie Minton and Linda Grossett did a great job planning and working it! Many people I talked to really liked it at the Norris Center. I know many want to have it back at our Big Bear Recreation Center and we will have that discussion. IDLE NO MORE!

My daughter and I attended a ceremony in Sault, Ontario, at the Indian Friendship Center on New Year’s Day. There were many pipes there and many prayers were said for Chief Theresa Spence who (at the time of this report) was on a hunger strike until the prime minister agrees to meet with her and the other First Nations chiefs. A bill passed Dec. 5 drastically changes Canadian law regarding sovereignty and environmental protections. At the same time, a movement called Idle No More has flashed across Canada, the U.S., and the world in support of First Nation sovereignty, including events here and across the river. Let’s hope it continues!

If you have any questions or concerns, please contact me on my cell phone (906) 322-3823 or home phone 635-3054. My e-mail address is cabramson@saulttribe.net. I look forward to hearing from you.