

Making our needs known on a national level



**JENNIFER MCLEOD, DIRECTOR,
UNIT I**

Aanii Anishnaabeg,

I wish to say miigwech (thank you) to those of you who phoned, emailed or visited with me last month. Without exception, your

words to me have been, “follow your heart.” Thank you all for your wisdom, and please know that I have followed your advice.

At a recent elders’ meeting, I saw clearly that my heart lies in tribal sovereignty, healthcare, education, our children and our elders. I will always participate in the expected board duties (budgets, legislation, etc), but I have discovered (with your help) that I can be more effective if I do indeed follow my heart.

In the areas of tribal sovereignty and healthcare, I traveled (at my own expense) to Green Bay, Wisc., for a meeting of the Midwest Alliance of Sovereign Tribes (MAST). I witnessed an historic event, the creation of the Midwest Regional Health Board! The Indian Health Service region

known as “Bemidji,” covers Michigan, Wisconsin, Minnesota and Iowa. This Bemidji Region is the only area that did not have a regional health board, but it does NOW! The Bemidji area has the lowest funding per person and the highest health care disparities. It is hoped that, with this new regional health board, we will have a stronger voice as we advocate for our people’s health care needs.

This was my first MAST meeting, and as those who know me would expect, I was not shy. I spoke for the need to include our traditional medicines and practitioners in the fight against prescription drug abuse in Indian Country. When it was suggested that the federal government was “looking at the science” (of tra-

ditional medicines), I politely pointed out that as a sovereign nation, we were not so much asking for their approval of our traditional ways; we understand what works for our people, and while I appreciate their point of view, we reserve the right to serve our people in the manner that we choose. I simply wanted their assistance with the insurance companies to allow for “third-party” billing. It was received well by the members of MAST, and respectfully by the federal government representative. I understand that there are “alternative” treatments approved by insurance companies, and I wanted OUR ways to be acceptable as well (a simple concept... but probably not a simple solution).

Kevin Washburn, the newly

appointed assistant secretary of the Interior was also a presenter at MAST. Our group discussion covered issues such as putting land into trust, bringing back Native languages, substance abuse, and the importance of funding the Special Diabetes Program for Indians. We expressed concern over sequestration (across the board budget cuts to all federal programs). I also addressed Mr. Washburn not only as an elected official of our tribe, but as an Anishnaabekwe (Anishnaabe woman) and my responsibility to speak for the water. I spoke for our Great Lakes, and how our prophecies said that one day, water would become more precious than anything. I told him how

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