

United States Senate

March 16, 2020

President Donald J. Trump
The White House
1600 Pennsylvania Avenue, N.W.
Washington, DC 20500

Mr. President:

Thank you for your decisive leadership in addressing this pandemic threat to the United States. As you so importantly stated, these wide-sweeping efforts are to protect the most vulnerable among us – such as our elderly and those with compromised immune systems. As the Federal government goes about this important work, I respectfully urge additional steps to specifically include one of our most vulnerable populations, Native Americans.

Tribal nations are distinct legal entities and do not receive relief distributed to or through State governments. They must be addressed and explicitly included in every aspect of our response and relief provided, or they will be left as unprotected pockets in this epidemic.

A result of centuries of poor federal policies, woefully inadequate resources, “disproportionate poverty, discrimination in the delivery of health services, and cultural differences,” Native Americans already face the influenza and pneumonia at nearly 2-times that of average Americans.¹ Further, American Indians and Alaska Natives continue to die at higher rates than other Americans in many categories, including diabetes mellitus, unintentional injuries, assault/homicide, and chronic lower respiratory diseases.²

In addition, due to crisis level housing shortages, social distancing is nearly impossible on Indian reservations. For example, on the Fort Belknap Indian Reservation in Montana small, two-bedroom homes typically have two and three generations, with 13-18 people on average, living altogether.

With large elderly populations, significant populations with compromised health, populations in tight living quarters, and underfunded federal health care, Tribal Nations comprise a very vulnerable population to COVID-19. As you can see from the attached preparedness plan/needs assessment I received from just one of my Tribal Nation constituents, the needs of Indian Country are staggering. It should be noted that many Tribes carry out the activities of the Secretary of Interior and HHS under the PL 93-638, the Indian Self-Determination and Education Assistance

¹ IHS Health Disparities Fact Sheet, <https://www.ihs.gov/newsroom/factsheets/disparities/> (viewed March 15, 2020).

² IHS Health Disparities Fact Sheet, <https://www.ihs.gov/newsroom/factsheets/disparities/> (viewed March 15, 2020).

Act. Every effort should be made to ensure that Tribes carrying federal activities have access to the same coordination, resources, and information as their counterparts within IHS and BIA.

FEMA – Presidential Stafford Act Declaration. Thank you for acknowledging in your Stafford Act declaration that our federal responses must be done “in close coordination with State, local, and tribal officials.”³ For all the reasons outlined above, I ask for your diligence in ensuring FEMA’s follow-through with Tribal Nations’ emergency declarations and COVID-19 needs. Further, I ask for assurances that tribal populations are not counted in state allocations, but instead counted and distributed directly to the tribal governments who serve their populations. This commitment to distribute directly to each Tribal Nation was unclear in FEMA’s recent COVID-19 Emergency Declaration.⁴ It is Tribal Nations, close to their citizens, who are in the best position to distribute resources, not often-distant and less informed state officials.

HHS – Indian Health Services. Tribal Nations do not receive their health care through state systems, private insurance, or the private marketplace. Due to our treaty obligations, they receive their health care through the federal Indian Health Services (IHS). As such, any decision about COVID-19 and health care institutions, such as distribution of tests and access to PPE, must always include IHS.

DOI – Bureaus of Indian Affairs & Indian Education – “Essential Employees.” Last week I spoke directly with DOI, and I want to thank them for their assurances that during the current quasi-shutdown/telework effort, all tribal government funds will continue to be paid out in a timely manner. Further I request that should there be a declaration regarding “essential” federal government employees, all personnel necessary for the delivery of tribal health and safety in Indian Country, and tribal government operations and finances, be deemed “essential.” Unlike other federal government functions, services to Indian Country are mandatory treaty obligations.

Future Needs for COVID-19 in Indian Country. Going forward, we must ensure that tribal governments are eligible for all the same support and relief we give to state governments, and that we take the extra time to tailor our responses to the unique issues we see in Indian Country. In particular, I will be pursuing solutions to the poor health care and inadequate housing that could lead to the perfect storm in Indian Country for infectious diseases like COVID-19.

Thank you for consideration of my request. I look forward to your response.

Sincerely,



STEVE DAINES
U.S. Senator

³ “Letter from President Donald J. Trump on Emergency Determination Under the Stafford Act,” <https://www.whitehouse.gov/briefings-statements/letter-president-donald-j-trump-emergency-determination-stafford-act/>, (March 13, 2020)

⁴ FEMA COVID-19 Emergency Declaration, <https://www.fema.gov/news-release/2020/03/13/covid-19-emergency-declaration> (Viewed March 15, 2020)

CC:

USDA, Secretary Sonny Perdue

DHS, Acting Secretary Chad Wolf

FEMA, Administrator Gaynor

HHS, Secretary Alex Azar

DOI, Secretary David Bernhardt