

## **Human Services Interim Committee**

**January 8, 2014**

### **Keith Johnson, Administrator, Custer Health**

Hello, Chairman Lee and members of the committee. I am Keith Johnson, the administrator of Custer Health, based in Mandan. We have part of the Standing Rock Reservation within our service area. I am representing other health units with reservations in their borders, as well – Rolette County Health with the Turtle Mountain, Lake Region with Spirit Lake, and the Upper Missouri, First, and Southwestern, each with part of the Three Affiliated Tribes-MHA Nation. Each of us has a tobacco prevention and cessation program which we carry out within our service areas. Since the reservations are sovereign areas, and have tobacco programs of their own, we collaborate and provide service when we are asked. We reach out to the local tobacco coordinators frequently, and when an opportunity presents itself, we work together. One health unit, Rolette County, has had more success working with the tribal tobacco coordinator than the rest of us. Other nursing environmental health programs have had a higher success rate across the state. One complication to the efficient delivery of local public health efforts, or any other efforts, for that matter, is that not all of the population are Native. For example, about twenty eight percent of the population on Fort Berthold is non-Native.

One area where all local coordinators have provided service on the reservations is in the schools. School policies and curricula are a staple of our preventive activities everywhere, and the reservations are no exception. I believe that this is also a focus of the tribal programs. As a result, a high proportion of schools on the reservations have tobacco free or no smoking policies in force. This has been an area of success. We have not been involved in smokefree public areas policies, since this requires local initiative, and would be what we view as an overstepping of our boundaries. Another area where we provide service is publicizing and educating on smoking cessation opportunities.

The previous testimony has shown the elevated rates of tobacco use in Native populations. We think ample opportunity exists for everyone in this room to do their best work in bringing those numbers down. We need to coordinate program objectives and methods. Since each reservation is sovereign, this can be a challenge. At this point, we don't really know what's happening in the Tribal tobacco programs. We will continue to cooperate when we can and when asked.