



THE CASE FOR TRIBAL IV-E:

Investigation and Research
Into the Disappearance of
Lakota Children

LAW PROJECT

LAKOTA



PEOPLE'S

December 2014

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Preface

The nine Sioux tribes of South Dakota are in the process of moving to develop their own independent, tribally run Indian child and family service agencies, and to become authorized as well as funded directly by the U.S. Department of Health and Human Services (HHS) pursuant to Title IV-E of the Social Security Act¹. Three of the nine Sioux tribes in South Dakota (the Rosebud Sioux tribe in 2013 and the Oglala and Standing Rock Sioux Tribes in 2014) have received Title IV-E Planning Grants from HHS. However, six of the nine Sioux tribes of South Dakota remain in need of funding for the planning process. Those grants will help defray the administrative costs of training staff necessary for the implementation of tribally run Indian child and family services agencies.

Indian Child Welfare Act § 1902:
Congressional Declaration of Policy

“The Congress hereby declares that it is the policy of this Nation **to protect the best interests of Indian children** and to promote the stability and security of Indian tribes and families by the establishment of **minimum Federal standards** for the removal of Indian children from their families and the **placement of such children in foster or adoptive homes which will reflect the unique values of Indian culture, and by providing for assistance to Indian tribes in the operation of child and family service programs.**”

All nine of the Sioux tribes of South Dakota are requesting that each of the six remaining unfunded Sioux tribes of South Dakota receive expedited federal funds equivalent to a 2014 Title IV-E Planning Grant. All nine of the South Dakota Sioux tribes also request an accelerated processing and approval of each tribe’s upcoming 2016 Application for Permanent Direct Federal Funding of its independent, tribally run Indian child and family services agency. These nine agencies will replace the presently unlawful South Dakota State

Department of Social Services-administered Indian child and family service programs.²

The continued removal of Sioux children from South Dakota’s tribal communities at rates that are multiple times the national average constitutes a “State of Emergency,” which has already been declared by the Oglala Sioux Tribe³, and it constitutes an active impediment to the success of these individual Indian children as has been recognized by numerous performance

indicators and child welfare reports, including the 2014 Casey Foundation Race for Results Policy Report⁴. Moreover, this request on the part of the nine Sioux tribes of South Dakota is in direct conformity with several of the central recommendations that have been set forth in the official November 2014 U.S. Attorney General’s Advisory Committee Report⁵ on American Indian and Native Alaskan Children who are exposed to violence.

The 2014 Casey Foundation Report found that Sioux children in the State of South Dakota have the lowest score of any group of children in any other state in the U.S. in its “Race for Results Index.” The Casey index takes into consideration “all of the complex set of factors that influence a child’s success,” and that research was directly informed by the Social Genome Project of the Brookings Institute, which “shows that children do best in supportive families and communities.”

The report that follows is the culmination of 10 years of research, investigation and numerous direct testimonies on issues that directly pertain to the South Dakota State Department of Social Services’ persistent, involuntary removal of Sioux children from their Indian communities, and their insistence on placing these Indian children in non-Native foster care and adoptive settings.

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I: Issues With “Placement”: Persistent Violations of the Indian Child Welfare Act

1. History of the Indian Child Welfare Act

Beginning in the late 1880’s, South Dakota’s state agencies and a number of private religious organizations acted in conjunction with federal agents and under the authority of the U.S. government to involuntarily remove Sioux children from their families and tribe, and to forcibly place these Indian children in mandatory “Indian Boarding Schools” both on and off reservations in the state of South Dakota.⁶ This policy was executed as a direct implementation of Article VII of the 1868 Treaty of Fort Laramie, which provided that, “In order to insure the civilization of the Indians entering into this treaty, the necessity of education is admitted...and they, therefore, pledge themselves to *compel their children, male and female, between the ages of six and sixteen years, to attend.*”

These institutions soon proved, however, to be both hostile to and destructive to “the development of healthy Indian children.”⁷ These schools were found by an official U.S. government investigation to be, “understaffed, focused on writ memorization and resulting in the creation of individual Indian children unfit for employment in either their Native communities or in the wider Anglo-American society.”⁸ This history has been dramatically recounted in numerous works, only one of which was Dee Brown’s well-known book entitled *Bury My Heart at Wounded Knee*, the events of which took place on the Pine Ridge Sioux Reservation in South Dakota.

The principal purpose of ICWA was to mandate that if a Native American child is removed from his or her home, then “active efforts” must be exhausted to place the Indian child within his/her own family, tribe, or a tribe of similar culture before being placed in non-Native care.

After the federally-mandated closing of these harsh, racial, abusive and all-White-run Indian Boarding Schools by the mid-20th century, the American Indian Policy Review

Commission, created by Congress in 1975, determined that the same cultural devastation which had been inflicted upon Sioux children, their families and their tribes by these infamous Indian Boarding Schools was, once again, being inflicted by many western and mid-western states through the implementation of racially-biased, state-administered foster care and child adoption programs, such as those that are presently in operation in the state of South Dakota.⁹

Pursuant to the explicit recommendation that was made by the American Indian Policy Review Commission to Congress, Congress enacted the Indian Child Welfare Act (ICWA) in 1978. The principal purpose of this act was to bring this state-sanctioned abuse on the part of certain states of Indian children, their Indian parents, their extended Indian families and their tribes to an end.

The second purpose of ICWA is to mandate that the United States assist tribes in operating Indian child and family service programs.¹⁰

United States Senator James Abourezk of South Dakota, the Chairman of the 1975 American Indian Policy Review Commission, the Inaugural Chairman of the United States Senate Select Committee on Indian Affairs, and the Principal Author of ICWA the Indian Child Welfare Act is also the Chairman of the Board of Advisors for the Lakota People's Law Office in Rapid City, South Dakota. The following is Abourezk's testimony before Congress in support of the enactment of the Indian Child Welfare Act of 1978:

"Few are knowledgeable about the difficulties American Indians face in a matter of vital concern to them; namely the welfare of their children and their families. It appears that for decades Indian parents and their children have been at the mercy of arbitrary or abusive action of local, State, Federal, and private agency officials. Unwarranted removal of children from their homes is common in Indian communities. Whereas most non-Indian communities can expect to have children out of their natural homes in foster or adoptive homes at a rate of 1 per every 51 children, Indian communities know that their children will be removed at rates varying from 5 to 25 times higher than that."

The Indian Child Welfare Act expressly mandated that upon its' passage each state was required thereafter to undertake all reasonably available active efforts to reunify any Indian child with their Indian family, unless that state actively proved to an independent judicial magistrate that there was a good cause to refrain from doing so. Instead of improving reunification outcomes for Indian children, the state of South Dakota did the exact opposite.¹¹

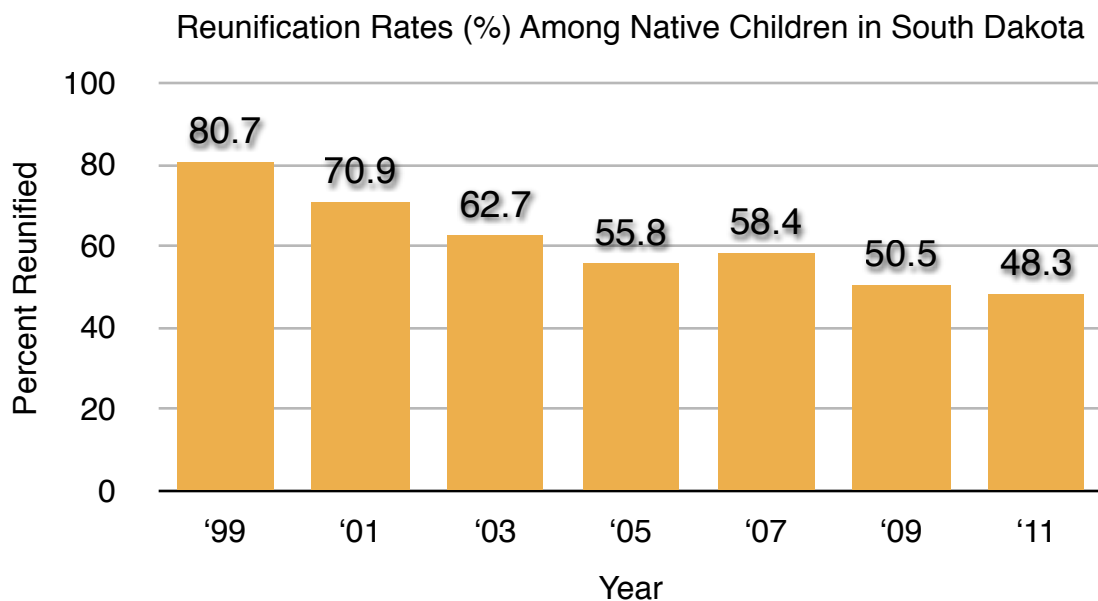
2. The Creation of Title IV Part E

In addition to enacting the Indian Child Welfare Act in 1978, Congress enacted an amendment to Title IV of the Social Security Act creating Part E in 1980, which was a federally-funded, open-ended entitlement program that provides federal funds to states for foster care and adoptive services. Between 1980 and 2008, Indian tribes were to be provided with child and family services (including child protection, foster care and adoptive services) only if they agreed to enter into a contractual agreement with their respective state. These contractual agreements between tribes and states, however, varied dramatically in their compliance with ICWA's mandates.¹² Specifically, in the state of South Dakota, despite Congress' intended remedial effect of ICWA, involuntary state removals of Sioux Indian children, and the overwhelming involuntary placement of these children in non-Native foster care or adoptive settings soared to alarmingly high rates, with hundreds of Sioux children being removed from their Indian parents, family and tribes and being placed in non-Native foster care or adoptive settings annually.¹³

Moreover, following Congress' passage of the Adoption and Safe Families Act (ASFA) in 1997, South Dakota's Department of Social Services began to officially and explicitly **ignore** the federal mandates of ICWA. South Dakota unlawfully asserting that by enacting ASFA, which provides federal funds to assist states in placing children defined as "abused or neglected" in their foster care system, Congress thereby authorized the South Dakota's Department of Social Services to utterly disregard both the "active effort" and the "preferential placement" requirements of ICWA when considering placements of Indian children.¹⁴

2a. Statistical Indications of ICWA Violations

There are clear statistical indications that the state of South Dakota is not abiding by the minimum standards for placement of Indian children. As of July 2011, 87 percent of Indian children who had been removed from their homes resided in non-native foster care.¹⁵ Meanwhile, 13-28 licensed Indian foster homes were empty.¹⁶ This is only one of many occurrences wherein South Dakota's social service agencies failed to preferentially place Indian children with family or tribe.



ICWA reads that each state is mandated to reunify Native American children with their families, unless it can prove that there is “good cause” to the contrary. Instead of improving outcomes, from 1999 to 2012, reunification rates for Native American children in South Dakota ***dropped*** from 80 percent to 48 percent.¹⁷

Shortly following the passage of the ASFA in 1998, from 1999 to 2001, neglect as a portion of child abuse statistics rose from approximately 65 percent ***to over 97 percent***. The ICWA Directors believed this was one of the major issues with South Dakota's culturally biased implementation of child welfare laws.¹⁸ For this reason, the Indian Child Welfare Act Directors

report to Congress in January of 2013 noted that state social workers were misconstruing the extreme poverty of the tribes as neglectful behavior on behalf of parents.¹⁹

On January 5th, 2005, the South Dakota State Supreme Court, in the case of *In re: J.S.B., Jr.*, South Dakota State Supreme Court Docket # 22907, expressly declared the by-then-seven-year policy of the South Dakota State Department of Social Services to be illegal, pursuant to which the D.S.S. and South Dakota State officials *including* the Governor, the Lieutenant Governor and the South Dakota State Attorney General had expressly refused to give any recognition whatsoever to the “active efforts” and “preferential placement” mandates of ICWA, unlawfully asserting that the federal Adoption & Safe Families Act supersedes the procedural requirements of ICWA.

Instead of ceasing and desisting from this unlawful policy and practice, the officials of the South Dakota State Department of Social Services *and State Attorney General*, **in the very next month of February of 2005**, drafted - and secured the enactment by the South Dakota State Legislature - of two state statutes that they unlawfully asserted continued to "authorize" state agencies to utterly disregard the perfectly clear federal mandates set forth in ICWA.

2b. State Law Designed to Circumvent ICWA: Bad Faith Toward Congress

In 2005, South Dakota passed State Senate Bill No. 55, which restricted the Indian persons who can appeal a recommendation made to a state court by the Department of Social Services regarding removal and placement of Lakota foster children to relatives of the child in question. Under the new law, to appeal a foster care placement recommendation, relatives had to have already **a)** sought formal adoptive custody of the foster child and been denied; **b)** have been sent a notification by the DSS by regular mail which alerts the relatives of their kin's placement by the Department of Social Services with a person other than a relative of the child; **c)** have received that letter at their last known address; **d)** and have responded to DSS demanding an appeal within 30 days of DSS' having sent the letter.

Senate Bill No. 55 also granted, for the first time, *discretion to the Department of Social Services to refuse to place a Native American foster child with a relative* because the DSS believes that it is not in the “best interest” of the child; the determination of the child’s “best interest” was previously the court’s decision (see Senate Bill No. 55 line 14) and a mandated requirement under ICWA to be one in the same with placement in tribe or family.

The standard of “reasonable efforts” here **contradicts** the more specific definition of “**active efforts**” required under ICWA.

In that same year of 2005, South Dakota House Bill 1226 changed the requirements of parental notification of proceedings reducing legal obligations of the state. It amended §26-7A-15, stating: **1)** The department shall make “reasonable efforts” to inform the Indian custodian and the Indian child’s tribe of court proceedings related to the removal and placement of a child; **2)** Failure to notify the child’s parents, guardian, or custodian, or the child’s tribe of the temporary custody hearing is not grounds for delay of the hearing if the child is represented by an attorney at the hearing; **3)** The temporary custody hearing will be held within 48 hours if it concerns any “apparent abused or neglected child” or within 24 hours if “it concerns any apparent child in need of supervision pursuant to §26-8B03.”²⁰

The attitude of South Dakota Social Services towards both parental and tribal notification of child custody proceedings can only be described as dismal. Marion White Mouse testified to the Lakota People’s Law Project that she had her son removed from her custody while at a school function, and was not notified by social service agents *until a full week later* regarding what had happened. During that week, Ms. White Mouse feared her son was lost or kidnapped - and in one sense she was correct.

The fact that South Dakota claims a failure by the state to notify a child’s relatives of a hearing **does not** constitute grounds for delaying expressly contradicts ICWA. Finally, the construction “a child in need of supervision” defined under §26-8B-3, is vague, allowing for

inappropriate expedition of the custody hearing process; the issue at the heart of the ACLU suit against South Dakota Judge Jeff Davis.

2c. 24-Hour Custody Hearings in *OST v. Van Hunnik*

The American Civil Liberties Union (ACLU), in an ongoing case, filed suit on behalf of three mothers and the Oglala Sioux Tribe (OST) in a class action lawsuit against Pennington County Judge Jeff Davis. The ACLU report issued in July 2014, *United States' Compliance with the International Convention on the Elimination of All Forms of Racial Discrimination*, includes a section dedicated to the *Lack of Due Process in American Indian Child Custody Proceedings in South Dakota*, wherein the ACLU reveals how both the Indian Child Welfare Act and the plaintiffs rights to due process were violated multiple times, and how these violations have constructed a barrier to the United States reaching full compliance international treaty obligations.²¹

This violation of due process was included by the ACLU in a report to the United Nations as one of the seven major issues along with racial profiling, sentencing disparities, discrimination in capital punishment, the right to vote, poor treatment of guest and undocumented workers and predatory lending/foreclosure crisis as a factor which prevents the United States from reaching full compliance with the UN human rights treaty.

The ACLU report cites multiple custody hearings that lasted less than five minutes, in which the parents were not allowed to see the petition for their child's seizure or what, if anything, they were being charged with. In many cases, judges ruled for the removal of the child without any evidence of abuse or neglect.

A case example from the ACLU's report is the removal of the Papan family's children, whose hearing lasted approximately 60 seconds. During their hearing, the parents were not allowed to see the petitions filed against them. Mr. Papan only had time to make introductory clarifying questions, without receiving an answer, before Judge Davis adjourned the hearing. Following the hearing, the two Papan children were taken with a court order which stated that

removal from their parents was, “the least restrictive alternative available,” despite the fact that no evidence had been presented during the hearing.

2d. Out-of-State Placements

South Dakota State Social Services have sent children to child placement agencies and residential psychiatric facilities as far away as Georgia on the east coast and Utah in the west. According to §475 of the Social Security Act,²² states are required to place children in "the least restrictive setting," one which is the most "family like" and "within close proximity to the parents' home." South Dakota has not provided the families, tribes, or the Lakota People's Law Project the reasons why out-of-state placements are in a given Indian child's "best interest." Periodic reviews of out-of-state placements are mandated by the Social Security Act to ensure the placement remains in the child's best interest.

A prominent example of questionable state contracting to send children out-of-state can be seen between the South Dakota Department of Social Services and Psychiatric Solutions Incorporated. Psychiatric Solutions Incorporated (PSI) does not own or operate any hospitals in the state of South Dakota, but over the last four years the DSS has contracted with almost a dozen of PSI's hospitals in more than three states.²³ In 2007 PSI averaged a 25 percent profit margin for their facilities in California, while other similar for-profit institutions averaged only 6 percent profit in that same year.²⁴ PSI has been noted by the State of Illinois to have a severe lapse in care as well as general mismanagement of their hospitals, and that those problems were not isolated to a single facility, but rather were a trend among the 90 hospitals in 32 states.

II: South Dakota States' Best Interests in Conflict with Native Children's "Best Interests"

1. Initial Reporting on Conflicts of Interest & ICWA Director Response

In October of 2011, National Public Radio (NPR) aired what was to become a Peabody Award winning investigative report entitled: "Native Foster Care: Lost Children, Shattered Families." This national NPR investigative report that reached 28 million Americans made serious charges concerning the clear conflict of interest on the part of the South Dakota Department of Social Services (DSS) and even on the part of individuals positioned in the highest levels of the South Dakota State Government, including in the Office of the Lieutenant Governor (who is now the Governor of South Dakota.) Following the airing of this NPR Investigative Report, several members of Congress, from both major political parties, demanded that then Assistant Secretary of the Interior for Indian Affairs, Larry Echo Hawk, undertake an immediate investigation to determine whether the claims made by NPR were true. However, Assistant Secretary Echo Hawk did not conduct any review whatsoever. Indeed, after waiting for a full year with no response from the Bureau of Indian Affairs, the ICWA directors who represent all nine of the federally recognized tribes in South Dakota responded to the inquiries from Congress.

The Indian Child Welfare Act Directors of the nine Sioux tribes of South Dakota delivered their report to Congress in January of 2013 which **confirmed NPR's assertions and highlighted the regularity with which the South Dakota systematically violates ICWA** when placing Indian children in its state foster care system. The NPR story revealed how the misplacement of these Indian children systematically proves to be financially lucrative for the state, and how South Dakota has been using Sioux children to attract federal funding.

Some \$100 million in federal funds funnels into South Dakota's economy every single year through its Social Services Department. The Department employs 1,000 workers, virtually all of whom are white. It supports almost 700 foster families (again, all but a small fraction of

which are white.) These white families receive from \$9,000 to \$12,000 a year for each Indian child who is placed with them, however, South Dakota can collect as much as \$79,000 from the federal government every year for each Indian child it seizes and places in white foster care because 100 percent of these Indian children seized are classified as "special needs." Moreover, 1,400 white families receive thousands of dollars a year in adoption subsidies; and dozens of independent group homes receive millions of dollars a year in contracts to house Indian children who are involuntarily taken from their families and tribes every year. When interviewed by NPR's investigative reporter Laura Sullivan who was inquiring as to the financial importance of the taking and housing of Indian children for South Dakota's economy, Governor William Janklow, in office throughout the 1990s, stated: "Its incredibly important! I mean look, we're a poor state...We're like North Dakota without oil. We're like Nebraska without Omaha and Lincoln. We don't have resources...We don't have high income jobs. We don't have factories opening here hiring people in high wage jobs."

There are specific financial incentives for the state of South Dakota to increase the number of adoptions of Sioux children. South Dakota receives a bonus of \$4,000 when each state foster child is adopted. However, it receives as much as \$12,000 if that child is defined as a "special needs," and South Dakota has defined all Sioux foster children to be "special needs" since 2001, simply on the grounds that they are Indians.²⁵ Thus, financial incentives reward South Dakota's Department of Social Services for placing Sioux children in its foster care system in violation of ICWA and for permanently adopting them out to non-native families. This contributes to the reason why Joe Brings Plenty has testified that during his time as a social service worker, many comments were aimed at "keeping the numbers up."

Pursuant to the mandates of ICWA, South Dakota's first legal responsibility is to place any Indian child taken from her or his parents with that child's "closest Indian family relative." In fact, ICWA expressly identifies such closest Indian family members as: an Indian child's Indian Grandmother and/or Indian Grandfather, adult Indian sibling, adult Indian Aunt and/or Uncle, adult fellow Indian tribal member, or adult member of some other Indian tribe. Only after every

available active effort has been undertaken to place such an Indian child with an Indian family member, fellow tribal member or other Indian tribal family with no success is it lawfully allowed to begin an effort to place the an Indian child with a non-Native foster family or in a state-contracted social care facility. However, various financial incentives identified by NPR and confirmed by the ICWA Directors of the nine Sioux tribes in South Dakota operate to directly disincentivize compliance with the inherent duty of the state to uphold ICWA and to preserve American-Indian families.

The director of South Dakota's Child Protective Services (CPS), Virgena Weiseler, has stated that, "although the DSS 'believes in ICWA' and does our best to follow it when placing an Indian foster child, there are simply not enough Indian foster homes to accommodate all the Indian children in care. This is why only 13 percent of Indian children are placed in Indian housing." This is, however, simply untrue. NPR interviewed several state-licensed Indian foster families who reported that they are yet to receive a single Indian child despite having been licensed as Indian foster care homes for years. The Lakota People's Law Project was sent an email from the DSS in 2012 listing the number of licensed Native American homes in South Dakota and it acknowledged that between 13 to 28 of licensed Indian foster care homes stood empty every year.²⁶ Placing American-Indian children in non-native foster care settings while there are placement facilities and resources available for those Indian children in Native homes is a clear violation of ICWA.

Finally, while it is true that some percentage of cases in South Dakota originate in a tribal court, tribal courts in South Dakota are radically underfunded, and therefore understaffed.²⁷ In a perfect world, tribal courts would be equipped to handle all of the legal problems of the reservation, including child protection cases and potential foster care placement of Indian children. However, this is not the reality and because of this, tribal courts are sometimes forced to turn to DSS officials to help the tribe find a placement for an Indian child. In such cases, when a tribal court seeks the assistance of the DSS in placing an Indian child, the DSS has uniformly and unlawfully asserted that this authorizes the DSS officials to totally disregard the "active

efforts” and “preferential placement” requirements of ICWA because under these circumstances, South Dakota’s DSS would be “standing in the moccasins of the Indian tribe” (i.e., functioning as an “agent of” the tribe, which is obviously not bound by the requirements of ICWA since these requirements only apply to state actions such as placing such Indian children). Legal scholars in South Dakota have roundly rejected this assertion, however, South Dakota persists in its right to defy Congress in these circumstances.

2. The Richard & Gwendolyn Mette Sexual Abuse Scandal and Trial²⁸

The Mette Indian Child Sexual Abuse Case serves as a stark example of South Dakota’s willingness to cover up DSS misconduct with regard to the physical and sexual abuse of Indian children, which were placed in non-Native foster care or adoptive settings. Between 2001 and 2013, South Dakota’s DSS officials covered up repeated criminal acts committed against five Indian children by their licensed white foster home, then adoptive, parents. The South Dakota State Attorney’s Office offered to dismiss all 11 felony charges of physical abuse and aiding and abetting sexual abuse against the adoptive mother, Gwendolyn Mette, in exchange for her agreeing to sign a statement against her husband Richard accusing him of nothing more than “one count of spanking.” State prosecutors then dropped 22 of the 23 felony counts against Richard Mette, which ranged from “aggravated incest with a child” to “rape of a child under ten,” dismissing more than a dozen felony counts each of which carries a potential life sentence in prison. The special prosecutor then took a plea from Richard Mette for only one felony count, after adamant opposition to the state’s attempted plea bargain, to “one count of spanking.” This state-initiated plea bargain will allow Richard Mette to serve only six years in prison for his repeated rape, forced oral sex, and his forced fondling of these Indian foster children for a decade.

State officials also systematically isolated the Indian children from their entire support system after they made repeated charges against this white man and woman, including isolating them from their older Indian siblings, from their special court-appointed child advocate, from the

attorney hired by their older Indian sister and from the only assistant state attorney who attempted to help them.

Moreover, to further attempt to cover-up the department's reckless disregard for the health and safety of these Indian children, the DSS forced the firing of both CASA worker Shirley Schwab and Brown County Attorney Brandon Taliaferro who attempted to protect the children. South Dakota's Attorney General then falsely criminally prosecuted these two state employees for allegedly "tampering with a witness"²⁹ because they were trying to assist the children in bringing their charges against the two two predators. Trial Court Judge Gene Kean summarily dismissed these utterly false criminal charges against these state employees after two days of embarrassingly contrived testimony by state officials due to the absence of any credible evidence to support those charges.

Interviews conducted of Assistant State Attorney Taliaferro and State Court-Appointed Child Advocate Shirley Schwab by the Lakota People's Law Office have developed evidence that makes it clear that these utterly false criminal charges were brought against them by state authorities to coerce and intimidate them into remaining silent. The ensuing trial was in retaliation against their attempt to stop a racially-motivated, class-based, invidiously discriminatory, unconstitutional conspiracy to deprive Indian people in the State of South Dakota of their equal access to federally guaranteed Constitutional rights and to their federal statutory rights.

III: Over-drugging Foster Children

1. Reports Surface on the Over-drugging of Foster Kids

Reports by both government agencies and NGO's have shown the widespread, medically-unjustified drugging of foster children in various states. This is extremely alarming for the tribes in South Dakota when one considers that, in any given year between 2001 and 2011, between 53 and 68 percent of all foster children in South Dakota are Sioux.³⁰ Testimony collected by the Lakota People's Law Project from Indian children and families, coupled with information secured through lawsuits filed against pharmaceutical manufacturers, prove that the prescription of psychotropic pharmaceutical drugs to children in state foster care is rampant. This issue has become a source of grave concern on the part of all Sioux tribes in South Dakota who are in the process of developing Title IV-E child and family service agencies for their tribal children and families.

The ICWA Directors from the South Dakota Sioux tribes submitted a "Supplemental Report" to Congress in 2013 that investigated the allegations of Native children receiving excessive amounts of prescription drugs while in foster care, especially psychotropic medications for behavior modification.³¹

The U.S. Government Accountability Office (GAO) published multiple reports in recent years detailing the over-drugging of children in state foster care settings.³² To conduct their analysis, GAO considered five states—Florida, Massachusetts, Michigan, Oregon, and Texas—and, based on Medicaid claims data, analyzed prescriptions of psychotropic drugs to children in foster care. A trend was found that, in fact, Medicaid paid claims for foster children's psychotropic drugs at rates 2.7 to 4.5 higher than for non-foster children of the same ages. Although it is conceivable that mental health issues may be a bit more common in the foster child population due to their potential previous exposure to traumatic experiences—including the fact that they have been torn from their families and, in the case of Sioux children, from their

entire Native American culture—the GAO found that hundreds of foster children had a drug regimen consisting of five or more concurrent psychotropic drugs, a flagrant indicator that these drugs are being used to treat behavioral issues rather than actual mental illness.

Child mental health experts have stated that traumatic stress symptoms often related to removal from family are often the same as symptoms that can indicate mental health conditions, leading to misdiagnosis and inappropriate treatments.

Because South Dakota was not one of the states selected for study by the GAO, the information available concerning South Dakota is not as extensive as that from the GAO studies on Florida, Massachusetts, Michigan, Oregon, and Texas. However, based on **all available data**, including testimony from Indian families and children, many Indian children are prescribed multiple psychotropics at doses far above—and even entirely outside of—the FDA recommended guidelines, indicating a serious and persistent problem within South Dakota’s Department of Social Services and with its oversight mechanisms.

2. Administration of Psychotropics to Treat Behavioral Issues, Not Actual Mental Illness

When a child is diagnosed with a mental health condition, he or she should be evaluated to assess possible benefits from psychosocial therapy or counseling. However, the GAO found that most children who took psychotropic medication did not receive any psychosocial therapy or counseling of any kind within that same year; nor did they have a medication-management follow-up visit, which pediatric providers organizations recommend.

In order to develop a more regulated system, the GAO stated, “we recommend that HHS consider issuing guidance to state Medicaid and child welfare agencies on best practices for monitoring psychotropic medication prescriptions for foster children.”

As stated above, when there is no federal regulation, state agencies give foster children excessive doses of medications which they may not even need. The reckless administration of many of these pharmaceuticals can also have severe, adverse side effects ranging from the infliction of grave psychiatric depression, to the incitement to violence and even suicide. In interviews, many children have complained that they cannot stay awake or focus in school due to the drugs, and relatives report that their children “look like zombies” during visitation.

3. The Lack of Adequate Safety Standards in the Prescribing of Psychotropic Drugs for Foster Children

According to the GAO, “no evidence supports the concomitant use of five or more psychotropic drugs in adults or children” and, “increasing the number of drugs used concurrently increases the likelihood of adverse reactions and long-term side effects, limits the ability to assess which of multiple drugs are related to a particular treatment goal, and does not typically increase the efficacy of the drugs to an significant extent.”³³ Even adults on psychotropic drugs can experience serious side effects such as irreversible movement disorders, seizures or an increased risk of diabetes over the long term; the risk of experiencing these side effects is much higher in children. However, the GAO study found that prescriptions for these drugs for state foster care children often exceed FDA-approved dosages and age appropriate guidelines, administering psychotropic medications to children even under 1 year old.³⁴ Each of the state programs analyzed fell short of providing comprehensive oversight, and in 2008, 34 of 48 states had not implemented a system to identify prescriptions with dosages exceeding maximum recommendations.³⁵ States are granted the ability to set their own oversight guidelines, meaning that protocols for monitoring psychotropic drugs prescribed to foster children vary from state to state. Implementing oversight guidelines has only recently been required as a condition states must meet in order to receive federal welfare grants.

The GAO explored possible justifications as to why foster children receive psychotropic medication at a higher rate than children in the general population in a separate 2012 study.³⁶ It

found that children on Medicaid mostly include children in state foster care settings and in low-income settings—groups who may be at higher risk of mental health disorders. Although early detection and treatment of childhood mental health conditions can improve a child’s symptoms and reduce their chances of experiencing difficulty forging relationships, dropping out of school or entering the juvenile justice system, child mental health advocates have expressed grave concern about prescribing psychotropic medications to children. This is because of the limited studies on short- and long-term safety of such drugs—especially when multiple psychotropic agents are combined, and the lack of any responsible testing on children. The GAO’s report in 2012 stated, “Because children are a small part of the overall population and physicians can prescribe medications off-label to children even if the medications have been tested only in adults, manufacturers may lack economic incentives to conduct trials with children.” These dangers combined with the practice of prescribing antipsychotic medications for off-label purposes, results in a potentially dangerous pharmaceutical protocol for many Native American children within South Dakota’s foster care.

4. The Cost of Second-Generation Anti-Psychotics to South Dakota

The South Dakota Department of Social Services retains Health Information Designs Incorporated (HIDINC) to manage documents associated with the pharmaceutical and therapeutics committee. Based on HIDINC reporting, South Dakota has consistently spent more than 50 percent of its annual foster care budget on anti-psychotics, as a category of drugs, for the last 6 years.³⁷ By looking at the information in the GAO’s 2008 report, we see that children on Medicaid are more likely to be prescribed antipsychotics drugs than children not on Medicaid, and of the children on Medicaid, those in foster care are more likely to be prescribed antipsychotic drugs than those who are not.

The Bay Area News Group, consisting of almost 40 different news-gathering organizations in California, published a feature in August 2014 investigating the unwarranted administration of psychotropic medications to children of the state, noting that California is not

the only state where this is happening, and that unnecessary drugging is a struggle that U.S. foster children face in their daily lives. Despite how widespread the problem is, gaining simple access to documents on state foster care systems has proven to be a suspiciously lengthy process. The Bay Area News Group and its lawyers spent nine months negotiating with the Department of Health Care Services in California to obtain records on prescribing patterns in foster homes—information that is supposed to be public under state and federal law.³⁸

5. Consequences of Administering Psychotropics Without Parental Consent

Patrick Red Feather was 14 years old when South Dakota's DSS took him from his home following an argument with his mother over his curfew. Patrick's mother, Sheris Red Feather, kept all paperwork to document the 15 months that her son was a ward of the state. After being moved to a psychiatric facility in Spearfish, Patrick ran away 20 times in the first six months that he was there. At a hearing in January of 2008, at the demand of the State DSS, a South Dakota State Judge ordered Patrick Red Feather to be involuntarily administered powerful psychiatric drugs to correct his behavioral problem, "Within a couple days after he went on the drugs," Sheris said, "they told me, 'Patrick is all fixed now. He's all better because he's on these psychiatric drugs,' but he was like a zombie."³⁹

Sheris Red Feather, whose Oglala husband and Patrick's father had committed suicide after being prescribed very similar psychotropic pharmaceutical drugs, pleaded with DSS officials to not place Patrick on these dangerous drugs for fear that they would cause him to become suicidal, "just like that had his father."

However, her warnings and her pleas went unnoticed and the DSS continued to force him to take an ever-increasing number of these drugs, in more and more powerful doses. Six months after Patrick was first ordered to take antipsychotics, he was put on suicide watch, and on October 14, 2008, after being prescribed five antipsychotic drugs, Patrick committed suicide.

Patrick Red Feather's case is only one of many such cases in South Dakota.

IV: Concerns Regarding Human Trafficking

1. Child Sex-Trafficking is a Real Issue in the Foster Care Community; Rep. Karen Bass & H.R. 5081: Strengthening Child Welfare Response to Trafficking Act of 2014⁴⁰

Alarming testimony from U.S. Congresswoman Karen Bass, a Congresswoman from Los Angeles, has provided critical insight into some root causes of human and sexual trafficking. Congresswoman Bass' testimony before the Ways and Means Committee of the House of Representatives on October 23, 2013 set forth concerns that children who are involved with the child welfare system and state foster care systems are “especially susceptible” to becoming victims of child sex trafficking.

For the year 2010, the Los Angeles Probation Department identified 61 percent of minor sex trafficking victims as foster youth, and the LA County Succeeding Through Achievement and Resilience (STAR) Court found that four out of every five girls who were victims of sex trafficking were products of a state foster care system.

In 2013, the Chief of Detectives of the State of Minnesota who were assigned to investigate “child sexual trafficking” informed the Lakota People's Law Office:

*“There are, at the present time, over **100,000 children below the age of 15 who are victims of child sexual trafficking.** Of the children that we have identified in this system, **approximately 63 percent of these children are children who have been involuntarily taken into a state's foster care system and 40 percent of these children are INDIAN children.** Because no one is looking for them.”*

The statistics on victims of human trafficking that are available point to an ugly reality in which Native American women who spent time as a ward of the state in state foster care are dramatically over-represented among victims of sexual trafficking than other groups.

2. What Data is Available on Victims of Trafficking?

A report delivered to the Minnesota State Legislature in 2010 articulated factors that contribute to the circumstances which increase the likelihood of a person becoming the victim of sex trafficking. Typically, victims are women who are impoverished and uneducated, which is the case for far too many Native women in the United States today.

On August 28th, 2014, Montana Senator Jon Tester held local hearings on sex trafficking in Indian country, prompted by efforts to combat human trafficking started by the Homeland Security and Governmental Affairs hearings of September 2013. Since the Bakken Oil and energy boom in the region, there has been a corresponding rise in crime and sexual trafficking in Montana, Minnesota, North Dakota and South Dakota.

Senator Tester's attempt to collect data from tribal leadership as well as local law enforcement is admirable, though his efforts are clearly in need of the support from the federal government if his important work is to ultimately prove fruitful.

Currently, there is no comprehensive accounting or monitoring of child victims of sex trafficking, which makes drawing conclusions exponentially more difficult. For this reason, we support the request of Congresswoman Bass and other members of Congress who are requesting that there needs to be an official accounting procedure to determine the figures for children who have been **a)** victims of sex trafficking, and **b)** victims of labor trafficking.

3. Avenues Available for Action

In response to these concerns, our U.S. House of Representatives unanimously passed the "Strengthening Child Welfare Response to Trafficking Act of 2014" on July 25th. Executive Branch policy makers should act now to secure the safe and bright future for Native children by funding independent tribally-operated child and family service programs.

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By funding the development of tribal family service programs for all South Dakota tribes, federal agencies can empower The Great Sioux Nation to stop Indian child sex trafficking of Sioux children. By strengthening family ties and keeping children out of group homes where they become targets for traffickers, the administration can alter the circumstances that allow human trafficking to occur so frequently among Indian children.



V. Attorney General's Advisory Committee on Native Children Exposed to Violence⁴¹

1. Development and support of Tribal Title IV-E is in Concert With Advisory Committee Recommendations

Following Department of Justice hearings in 2013, the *Attorney General's Advisory Committee on American Indian / Alaska Native Children Exposed to Violence* issued recommendations to the Department of Interior, Health and Human Services, the Justice Department, executive branch leadership, as well as Congress in order to address many issues faced by Indian children across the country. The guiding philosophy of their recommendations follow ***three core principles*** namely that the government should:

- 1- empower tribes
- 2- remove barriers, and
- 3- provide resources,

We agree with this sentiment in its entirety, as well as many specific policy recommendations in concert with the advisory committee, urging the federal government to:

- Provide training for Indian Nations and for the federal agencies serving those communities on the needs of children exposed to violence. Federal employees assigned to work on issues pertaining to Native communities ***should be required to obtain training on tribal sovereignty, working with tribal governments, and the impact of historical trauma and colonization on tribal Nations***

- instruct the BIA to issue regulations and ***create an oversight board to review ICWA implementation and designate consequences of noncompliance*** and/or incentives for compliance with ICWA to ensure an effective implementation of ICWA.

- Direct the **Secretaries of the DOI and HHS to compel the BIA and ACF to work together collaboratively to collect data regarding compliance with ICWA in state court systems.**

- Ensure that the BIA, tribal social services agencies, and state social services agencies have policies that permit removal of children from victims of domestic violence for “failure to protect” only as a last resort as long as the child is safe.

“Ensure Indian Child Welfare Act compliance and encourage tribal-state ICWA collaborations [specifically that]:

1- the Administration for Children and Families, the Bureau of Indian Affairs, and tribes should ***develop a modernized unified data-collection system designed to collect Adoption and Foster Care Analysis and Reporting System data on all Indian children who are placed into foster care by their agency and share that data quarterly with tribes;***

2- That under the direction and oversight of the White House Native American Affairs Office, provide **adequate funding for and assistance with Indian country research and data collection;**”

3- That the Department of Justice restores the **inherent authority of American Indian and Alaska Native tribes to assert full criminal jurisdiction over all persons who commit crimes against Native children** in Indian country;

4- That HHS should fully utilize its current 638 self-determination authority **to the greatest extent** feasible for flexible funding programs in HHS, beyond IHS, and seek additional legislative authority where needed;

5- that the Secretary of HHS should increase and support access to **culturally appropriate behavioral health and substance abuse prevention and treatment services** in all AI/AN communities, especially the use of traditional healers and helpers identified by tribal communities,”

and also for, “Congress [to] amend the Indian Child Welfare Act to provide that when a state court initiates any delinquency proceeding involving an Indian child for acts that took place on the reservation, all of the notice, intervention, and transfer provisions of **ICWA will apply.**”

VI. Conclusions

The Lakota People's Law Project, in collaboration with the nine federally recognized Indian tribes of South Dakota and their chairmen, request from the United States government the cooperation and acceleration of plans to study, fund, and implement tribally operated child and family service programs through the statutory rights of the Social Security Act, Title IV-E, under the legislative decree of the Fostering Connections to Success and Increasing Adoptions Act of 2008.

Research combining federal, state, and private agency data, along with testimony, interviews, and investigations have found that the State of South Dakota Department of Social Services violates the **Indian Child Welfare Act** by: **1.** The failure to keep Native American children within their own communities when removed from their homes; **2.** Out of State placements that violate the “least restrictive environment” clause; **3.** 24-Hour custody hearings are being unnecessarily fast-tracked, violating the families right to due process; and,

Furthermore, the South Dakota Department of Social Services has been found: **4.** Covering up cases of abuse and neglect within the state care system; **5.** Prescribing a dangerously high level of pharmaceuticals, including powerful psychotropics, to the children in state care; and **6.** Being placed in dangerous environments, where they are susceptible to traffickers, abusers, and sexual exploitation.

The solution to these issues is to fund independent, tribally operated child and family service programs that the nine tribes of the state of South Dakota are currently filling for with the federal government . Three planning grants have been issued; six more will be filed and necessitate acceptance. This is the beginning of the road in ending these injustices by giving individual tribes their right to sovereign determination in the care of their children and communities.

Endnotes

- 1 - Social Security Act, Title IV Part E, Available from http://www.ssa.gov/OP_Home/ssact/title04/0400.htm
- 2 - Brief for the United States as Amicus Curiae Supporting Affirmance, *Adoptive Couple v. Baby Girl*, 570 U.S. ____ (2013), Supreme Court of the United States, Available from http://sct.narf.org/documents/adoptivecouplevbabygirl/us_amicus_brief.pdf
- 3 - *Declaration of State of Emergency on Pine Ridge Reservation*, 25th January 2013, Available from http://www.docs.lakotalaw.org/Rebuttal_Supplementary_Material/15%20oglala%20state%20of%20emergency.pdf
- 4 - *Race for Results: Building a Path to Opportunity for All Children*, The Anne E. Casey Foundation 2014, Available from <http://www.aecf.org/m/resourcedoc/AECF-RaceforResults-2014.pdf>
- 5 - *Attorney General's Advisory Committee on American Indian / Alaska Native Children Exposed to Violence*, November 2014, Available from <http://www.justice.gov/sites/default/files/defendingchildhood/pages/attachments/2014/11/18/finalaianreport.pdf>
- 6 - The Second Treaty of Fort Laramie, 1868, Available from <http://www.ourdocuments.gov/doc.php?flash=true&doc=42>
- 7 - *The Problem of Indian Administration*, 1928, Available from <http://files.eric.ed.gov/fulltext/ED087573.pdf>
- 8 - ibid
- 9 - *American Indian Policy Review Commission*, Final Report, 17th May 1977, Available from <https://archive.org/details/finalreport01unit>
- 10 - 25 U.S.C 21, *The Indian Child Welfare Act*, Available from http://www.nicwa.org/indian_child_welfare_act/
- 11 - Figures derived from *Child Welfare Outcome Reports*, 1999, 2000, 2001, 2002, 2003, 2004-2007, 2007-2010, 2009-2012, Administration for Children and Families, Available from <http://www.acf.hhs.gov/programs/cb/research-data-technology/statistics-research/cwo>
- 12 - note: extending domestic assistance programs (as well as training and administrative costs) to tribal governments, the same as for states, was a top recommendation of the American Indian Policy Review Commission. Despite that recommendation being made in 1977, and Part E of Title IV being created in 1980, it took until 2008 when the *Fostering Connections to Success and Increasing Adoptions Act* for that program to be offered directly to federally recognized Indian tribes
- 13 - *Adoption and Foster Care Statistics*, Children's Bureau, Available from <http://www.acf.hhs.gov/programs/cb/research-data-technology/statistics-research/afcars>
- 14 - *The PEOPLE of the State of South Dakota in the Interest of J.S.B., Jr., Minor Child and Concerning J.S.B., Sr. and O.L.J Respondents*, 691 N.W. 2d 611, Supreme Court of South Dakota, 5th January 2005, Available from <http://www.narf.org/icwa/state/southdakota/case/jsb.html>
- 15 - Figures derived from *Child Welfare Outcome Reports*, 1999, 2000, 2001, 2002, 2003, 2004-2007, 2007-2010, 2009-2012, Administration for Children and Families, Available from <http://www.acf.hhs.gov/programs/cb/research-data-technology/statistics-research/cwo>
- 16 - Email from South Dakota Department of Social Services (name redacted), Available from <https://www.imgur.com/IK8ZJ0s>
- 17 - Figures derived from *Child Welfare Outcome Reports*, 1999, 2000, 2001, 2002, 2003, 2004-2007, 2007-2010, 2009-2012, Administration for Children and Families, Available from <http://www.acf.hhs.gov/programs/cb/research-data-technology/statistics-research/cwo>
- 18 - *The Indian Child Welfare Act Directors of South Dakota Tribes, Reviewing the Facts*, January 2013 Available from http://www.docs.lakotalaw.org/ICWA-Coalition_Report-to-Congress.pdf
- 19 - ibid

- 20 - Note: see Senate Bill No. 55, Eightieth Session of the Legislative Assembly, 2005, amending Chapter 26-7A-19, page 2 line 18 to page 3 line 1
- 21 - Pevar, Stephen, *Why Are These Indian Children Being Torn Away From Their Homes?*, Blog of Rights, 23rd July 2014, Available from <https://www.aclu.org/blog/racial-justice/why-are-these-indian-children-being-torn-away-their-homes>
- 22 - Social Security Act Section 475, Available from http://www.ssa.gov/OP_Home/ssact/title04/0475.htm
- 23 - Note: Psychiatric Solutions Incorporated was purchased by Universal Health Services in 2010 for \$3.1 billion, Notice available from <http://ir.uhsinc.com/phoenix.zhtml?c=105817&p=irol-newsArticle&ID=1427399> ; for state contracts, see <http://www.open.sd.gov>
- 24 - Note: This percent increase came as a part of the investigative findings of ProPublica: Map: The Growth of PSI, available from <http://www.propublica.org/special/psi>
- 25 - North American Council on Adoptable Children; *AFCARS Adoption Data Research Brief #4, Special Needs and Disabilities*, Available from <http://www.nacac.org/adoptionssubsidy/AFCARSSpecialneeds.pdf>; Administration for Children and Families; Children's Bureau; "Child is Identified as Special Needs Adoption"; 2009 & 2010: http://www.acf.hhs.gov/sites/default/files/cb/special_needs_2009.pdf
- 26 - Email from South Dakota Department of Social Services (name redacted), Available from <https://www.imgur.com/1K8ZJ0s>
- 27 - *Indian Child Welfare Act Commission Report*, State of South Dakota Office of the Governor, Volume I and II, 2004-2005, Available from <http://www.sdtribalrelations.com/icwa/icwa04report.pdf>
- 28 - Lakota People's Law Project, *Abandoned and Forgotten*, 2013, Available from <http://docs.lakotalaw.org/Abandoned-and-Forgotten.pdf>
- 29 - Transcript, *State of South Dakota v. Shirley Schwab and Brandon Taliaferro*: pg. 11
- 30 - Administration for Children and Families, *Child Welfare Outcome Reports 2009-2012*, pg. 310 Available from https://www.acf.hhs.gov/sites/default/files/cb/cwo09_12.pdf
- 31 - The Indian Child Welfare Act Directors of South Dakota Tribes, *Native American Children and Prescription Drug Use in the South Dakota Foster Care System*, January 2013 Available from <http://www.docs.lakotalaw.org/Prescription%20Drug%20Use%20in%20Foster%20Care.pdf>
- 32 - December 2011, *HHS Guidance Could Help States Improve Oversight of Psychotropic Medications*, Available from <http://www.gao.gov/assets/590/586570.pdf> ; December 2012 *Concerns Remain about Appropriate Services for Children in Medicaid and Foster Care*, Available from <http://www.gao.gov/assets/660/650716.pdf> ; April 2014 *Additional Federal Guidance Could Help States Better Plan for Oversight of Psychotropic Medications*, Available from <http://www.gao.gov/assets/670/662777.pdf>
- 33 - December 2012 *Concerns Remain about Appropriate Services for Children in Medicaid and Foster Care*, Available from <http://www.gao.gov/assets/660/650716.pdf>
- 34 - December 2011, *HHS Guidance Could Help States Improve Oversight of Psychotropic Medications*, Available from <http://www.gao.gov/assets/590/586570.pdf>
- 35 - December 2012 *Concerns Remain about Appropriate Services for Children in Medicaid and Foster Care*, Available from <http://www.gao.gov/assets/660/650716.pdf>
- 36 - ibid
- 37 - Compiled from handouts available from HIDINC Meeting Archive, 2009, 2010, 2011, 2012, 2013, 2014, Prepared by Health Information Designs INC, Available from <http://www.hidinc.com/sdmedicaid/pinfo.html>
- 38 - De Sa, Karen, *Drugging our Kids*, The Bay Area News Group 2014, Available from <http://webspecial.mercurynews.com/druggedkids/?page=pt1>
- 39 - note: Court documents and statements by Sheris are recorded in video interviews conducted by the Lakota People's Law Project
- 40 - H.R. 5081, 2014, Available from <https://www.govtrack.us/congress/bills/113/hr5081>
- 41 - *Attorney General's Advisory Committee on American Indian / Alaska Native Children Exposed to Violence*, November 2014, Available from <http://www.justice.gov/sites/default/files/defendingchildhood/pages/attachments/2014/11/18/finalaianreport.pdf>