

NATIVE

The COVID REPORT

Wellness

CULTURE IS OUR CURE

LIFE

Summer Edition 2020

SOUND
of a
SINGLE
DRUM

OFFICE OF THE GOVERNOR
STATE OF MONTANA

STEVE BULLOCK
GOVERNOR



MIKE COONEY
LT. GOVERNOR

May 18, 2020

Dear Friends:

Because of the swift and aggressive actions of each Tribal Nation and the State of Montana, we have not seen the impacts as other communities throughout the country during this global pandemic. We're fortunate in Montana to have fewer COVID-19 cases, hospitalizations or deaths than other parts of the country. This virus recognizes no boundaries, but with our continued caution and vigilance we can continue to build on the progress we have made.

As Governor, it is of utmost importance to me that we work with tribal governments in respect to their sovereignty. During this crisis I support Tribes' autonomy to make the decisions that are best for their communities. I value the importance of protecting Montana's First People's culture, traditions, and elders and to taking the necessary steps to ensure the health and safety of tribal communities.

Time and time again, you have stepped up to the challenge and met it with courage and compassion for those around you. I have been working to provide supplies, personnel, and additional resources to ramp up testing capacity on reservations and to provide them with other assistance when they have requested it.

It's that type of caring and sharing that is going to help us get through these difficult and unprecedented times. Together, we will see our way through this pandemic and come out the other side better, stronger, and more mindful. Only through a united front can we prevent this virus from overwhelming us. We will move forward and survive this outbreak —together.

Sincerely,

A stylized blue ink signature of Steve Bullock, consisting of a large 'S' and 'B' followed by a horizontal line.

STEVE BULLOCK
Governor

Messages from your Tribal Leaders

The Fort Peck Indian Reservation remains at high risk for the transmission of COVID-19. Everyone living on the reservation has a civic duty to their neighbors to do everything possible for the safety and health of the community.



-Chairman Floyd Azure
Fort Peck Tribes
Fort Peck Tribes Facebook

We encourage our tribal members to remain calm and continue being patient as we work through this difficult situation. We implemented checkpoints at the borders of our reservation as a prevention measure in hopes of mitigating the spread of COVID-19.

This situation is very unpredictable and has the potential to create an incredible hardship on families. We understand that. We will get through this together - taking care of one another and helping one another.



-Chairman Harlan Gopher Baker
Chippewa Cree Tribe
Chippewa Cree Tribes Facebook

The council asks the federal government to immediately provide assistance to the tribe so that the Little Shell Tribe government is able to address the crises.

The Little Shell Tribe and its citizens are resilient and have always confronted and overcome difficult times and threats.



-Chairman Gerald Gray
Little Shell Tribe
Tribal Council

We must stay strong --of one mind, vigilant, and proactive. We, the Crow people, must continue precautionary social distancing measures as we weather the storm and show our resilience as indigenous people once again. When the virus is contained, I hope we're remembered by how the Apsaalooke Nation responded to COVID-19.



-Alvin Not Afraid Jr., Chairman
Crow Tribe
Crow Tribe Facebook

The safety of the Blackfeet people has always and continues to be our main priority. We are following the recommendations and guidelines put forth by the CDC and encourage everyone to follow these in order to prevent COVID-19.



-Chairman Timothy Davis
Blackfeet Nation

The Fort Belknap Indian Community is seriously concerned with the rapidly encroaching COVID-19 coronavirus pandemic and its potential devastation of the preservation of public health and safety.

It is necessary to immediately implement measures to ensure social distancing to prevent the spread of the disease. It is not the customary way we as Indian people respond to our people and families.



-President Andy Werk, Jr.
Fort Belknap Tribes

The battle to contain COVID-19 has reached a new stage and we need to buckle down harder to keep our families and loved ones safe through social distancing and shelter-in-place practices. The sacrifices we make NOW are crucial in limiting the spread of this highly contagious illness that has no known cure. We will hold strong. We will get through this. Thank you for keeping us safe.



-Confederated Salish and Kootenai Tribes
CSKT website

This disease is an ultimate threat to the Cheyenne way of life and the overall balance of society.

At this time, it is imperative for everyone to avoid social gatherings, take precautions for the elderly and have consistent hygiene. Preventing this disease from harming our people is priority and there is a plan in place.



-President Rynalea Whiteman Pena
Northern Cheyenne Nation
Northern Cheyenne Tribe Facebook

Coronavirus causes collateral damage to people

By NativeWellness.Life staff

The war against COVID-19 is causing collateral damage to people who may not even contract the virus. As the nation and world focus on reducing the virus' death count, the isolation response to the virus has caused chaos for many.



Mental health

Federal agencies warn that a historic wave of mental-health problems is either happening now or quickly approaching, including depression, substance abuse, post-traumatic stress disorder and suicide.

Just as the coronavirus caught hospitals off guard, the mental health system is experiencing a surge of appeals for help.

Calls made to the Montana Department of Health and Human Services warmline and suicide prevention lifeline doubled in March, according to Zoe Barnard, the department's addictive and mental disorder division administrator in a KTV Helena interview.

"It's normal to feel a broad range of emotions with the stress we've been under, and no one should be ashamed to

reach out and ask for help," Barnard said.

If you are in crisis and want help, call the Montana Suicide Prevention Lifeline, 24/7, at 1-800-273-TALK (1-800-273-8255). Or, text "MT" to 741 741.

If you are not in crisis, but need help, call the Montana Warm Line at 1-877-688-3377.

Spouse and child abuse on rise

Because people have had to stay home during the COVID-19 pandemic, communities have noticed an increase in spouse and child abuse.

The virus has caused major economic devastation, disconnected many from community resources and support systems, and created widespread uncertainty and panic, according to the Substance Abuse and Mental Health Services Administration. Such conditions may stimulate violence in families that didn't exist before and worsen situations in homes where mistreatment and violence have been a problem. Administration officials worry that victims of domestic violence, including intimate partner abuse and child abuse, are at great risk for injuries, including death.

To report child abuse and neglect, call the Montana Department of Health and Human Services 1-866-820-5437.

To report adult abuse, neglect, and exploitation, call DPHHS at 1-844-227-9300.

For help, call the National Domestic Violence Hotline at 1-800-787-7233 or 1-800-787-3224.

To contact the Montana Coalition Against Domestic and Sexual Violence, call 1-888-404-7794 in Helena, Mont.

Or, the Montana Native Women's Coalition in Billings, Mont., at 406-969-2552.



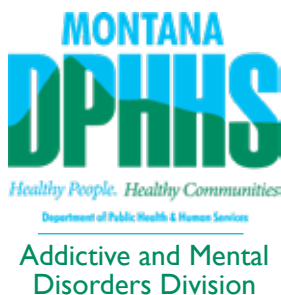
The Food Stamp Hotline helps with food, clothing and shelter needs.

Food Stamp Hotline

For many, COVID-19 has endangered their food security. To see if you qualify for help, call the Food Stamp Hotline for food, clothing, and shelter at 1-888-706-1535.



Thank you Native American partners



HEALTH PROMOTION
DISEASE PREVENTION
FORT PECK TRIBES



Precautionary guidelines to follow include the following:

- Stay home when possible.
- Wash your hands often.
- Strongly consider using non-medical face coverings while in public, especially in circumstances that do not readily allow for appropriate physical distancing (grocery/retail stores, pharmacies, public transportation, etc.). Wash with soap and water and soon as possible every time you touch a public object (grocery cart, public doorknob, public computer, etc.). If soap and water are not available, use hand sanitizer with 60% or more alcohol.
- Avoid touching your eyes, nose, and mouth.
- Clean and disinfect surfaces often. Regular household wipes and sprays will kill the virus.
- Maintain social distancing (6 feet).
- Sneeze or cough into a tissue or the inside of your elbow.
- Stay away from crowds.
- Avoid physical contact, like handshaking and hugging.
- Avoid people who are coughing or sneezing.
- Manage stress by getting plenty of sleep, eating healthy, and staying active.
- If you develop COVID-19 symptoms (high fever, dry cough, fatigue, and shortness of breath), call your doctor or the COVID-19 Hotline (844) 442-5224.

People who feel sick should stay home

- Do not go to work or school.
- Contact and follow the advice of your medical provider.
- Follow local health department guidance on isolation and quarantine.

Source: Centers for Disease Control and Prevention



COVID-19 is like living with a

By Orville Desjarlais Jr.
NativeWellness.Life

Existing with COVID-19 is like living with a rattlesnake in your back yard. If there were no way to get rid of it you'd be forced to live with the unwelcome and highly dangerous reptile.

You'd most likely wear boots to protect yourself from snake bite. You'd also try to distance yourself from the reptile. In other words, you're not going to let a snake in your backyard stop you from living your life.

The same principles apply to COVID-19. Instead of boots, you wear a mask. And, social distancing



keeps you away from danger.

American Indians must learn how to live with this virus, which will be a part of everybody's life until mankind can create a vaccination.

"The coronavirus is not going to go away so we must learn to live with it," said David Nabarro, a World Health Organization special envoy for COVID-19.

So, what's your long-term plan for living with a potential killer?

A good start is to review what states and tribal councils have ordered and continue to follow those recommendations. Officials created these guidelines for the greater good of their communities. State and tribal officials are using a phased-in approach to try to get back to some sort of normalcy. However, they remain careful.

"Once we begin to re-open, we want to be able to stay open. Our personal responsibility to protect those around us—particularly those most vulnerable—



rattlesnake in your back yard

remains just as important as any time during this pandemic,” Governor Steve Bullock stated in his re-opening plan in April.

However, many tribal councils felt their vulnerable communities needed to extend restrictions well into May. They realize they must be more cautious because many American Indians suffer from high blood pressure, chronic lung disease, diabetes, obesity and asthma. They are also concerned about elders over age 65.

Like your leadership, you can utilize the same thought process to devise a plan for yourself. Do a self-assessment to determine your way ahead. If you're part of the most vulnerable people or care for someone susceptible to the disease, naturally, you want an aggressive plan. Perhaps you want to consider following Governor Bullock's advice:

All vulnerable people should continue to follow stay home guidance. Members of

households with vulnerable residents should be aware that by returning to work or other environments where distancing is not practical, they could carry the virus back home. Precautions should be taken to isolate from vulnerable residents. When in public, the most vulnerable of us should maximize physical distance from others, avoid gatherings, and minimize non-essential gatherings.

If you're younger and healthy with no underlying medical conditions, your plan can be less restrictive. However, you must still be mindful of the precautions that protect your community, like social distancing, wearing non-surgical masks and frequent hand washing.

Until the nation can remove the rattlesnake from its back yard, we would be wise to remain cautious and respectful of its killing power.

Prevention

Focus on this. There's no COVID-19 cure. To prevent infection, avoid exposure to the virus. Doing these things could save your life and the lives of others:

Don't have contact with sick people



Avoid contact with others—stay six or more feet away

Don't touch your eyes, nose or mouth



Stay home when you're sick

Cover your cough/sneeze with a tissue, then discard it



Disinfect anything you touch—often—with an antibacterial cleaning spray or wipe

Wash your hands with soap and water for at least 20 seconds.



Avoid nonessential travel by any means to any place; stay home

Source: Centers for Disease Control and Prevention

COVID-19 got you sheltered in place?

Things you can do while staying close to home

By NativeWellness.Life staff

The COVID-19 restrictions placed on the public, like shelter in place or social distancing, shouldn't stop you from exercising. Quite the opposite is true, according to many health experts.

Exercise lifts moods, which is important during challenging times, according to *lark.com*. The website says exercise lowers blood pressure, helps with weight management and disease prevention and improves mental health. During times of stress, like the coronavirus outbreak, exercise helps with sleep and to manage stress.

The big question on everybody's mind is what type of exercise they can do with all the restrictions. Here are a few ideas:

Outside

- Walking
- Bicycling
- Hiking
- Jogging

While exercising outside, watch out for passing runners because their huffing and puffing could spread droplets of the virus.



Inside

- Treadmill
- Elliptical
- Stationary bike
- Aerobics
- Yoga and palates
- Resistant bands
- Weights
- Kettlebell
- Step platform
- Jump rope

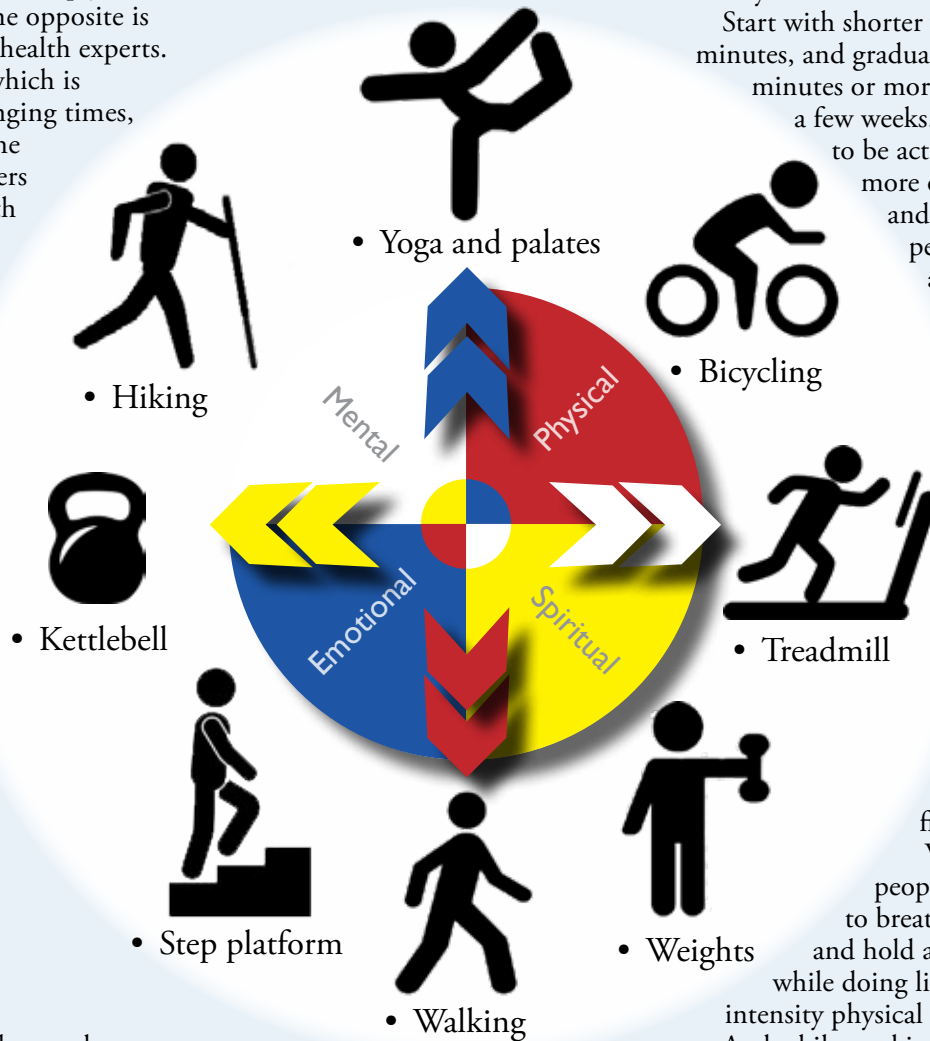


Before starting any exercise program, the World Health Organization (WHO) recommends that people start slowly with low-intensity activities, especially if they haven't exercised in a while.

Start with shorter workouts, like 5-10 minutes, and gradually build up to 30 minutes or more, continuously for a few weeks. It's better and safer to be active for short periods more often than to try and be active for long periods when you are not used to it, according to WHO.

The agency also suggests people choose the right activity to reduce the risk of injury and that they enjoy their fitness pursuit. People should choose the right intensity according to their health status and fitness level, they say.

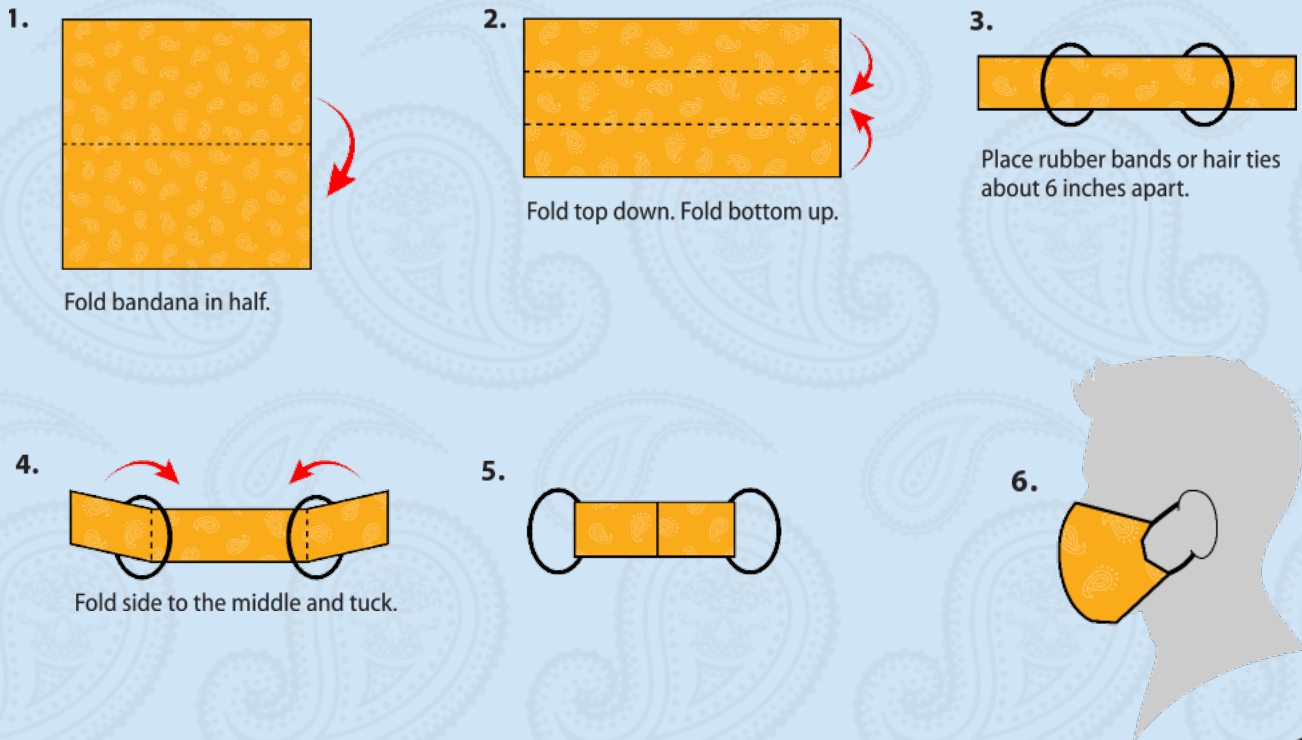
While exercising, people should be able to breathe comfortably and hold a conversation while doing light- and moderate-intensity physical activity. And while working out, stay safe. And remember to follow the coronavirus safety rules.



How to make a bandana face covering (no-sew method)

Materials

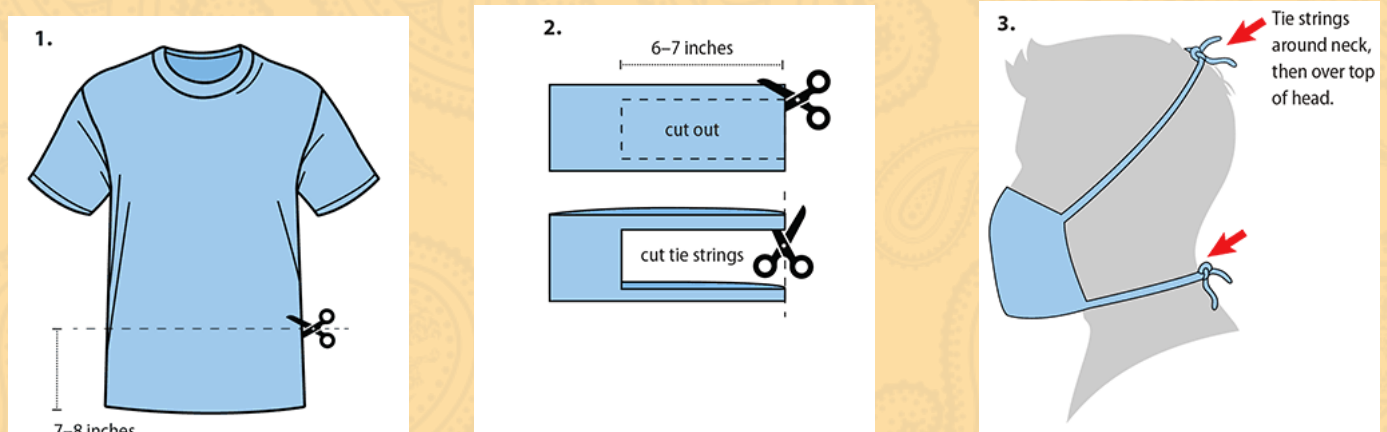
- Bandana (or square cloth approximately 20 inches by 20 inches)
- Rubber bands or hair ties - 2
- Scissors (only if you are cutting your own cloth)



Quick cut T-shirt face coverings (no-sew method)

Materials

- T-shirt
- Scissors



Source: Centers for Disease Control and Prevention (CDC)

3 killer viruses devastated native peoples

By Louis A. Arana Jr.
NativeWellness.Life

Viruses started killing Native Americans as soon as Europeans came to settle on native lands in the early 1600s. The settlers brought their way of life and diseases.

Native people had no natural immunities—virgin-soil for epidemics—for the unwelcomed settlers' diseases: smallpox, measles, influenza, typhus and cholera and a host of other ailments.

The results were horrific. Historians and scholars note that by 1900—less than 300 years after the first settlers built the Jamestown and Plymouth colonies—disease had killed some 90% of native populations. A drop from 5 million to some 240,000 people. It was worse in Mesoamerica. Historians say viruses may have killed more than 40 million native people there.

The loss of so many natives is “the greatest genocide in the history of man,” David Brion Davis, a former Sterling Professor of History at Yale University, said in a 1991 Newsweek report. “... it’s increasingly clear most of the carnage had nothing to do with European barbarism. The worst of the suffering was caused not by swords or guns but by germs.”

Today, COVID-19 is the killer. It’s a monster that spares no one. Those in Indian Country, like their ancestors, are at much higher risk for infection. And for elders and those with other ailments, the virus is even deadlier.

The top killers

The coronavirus joins the long list of diseases that devastated native populations. Here is the *NativeWellness.Life* list of the deadliest diseases:

Smallpox. By far the biggest killer with a 30% mortality rate. Historians believe about 90% of the native population of the Americas has died from smallpox since Europeans arrived. From 1616 to 1636, “nearly 90% of the Massachusett, Wampanoag and



The Lakota marked the passage of time by drawing pictures of memorable events on calendars called winter counts. This picture, titled, *The eruption and pains in the stomach and bowels; smallpox used them up winter*, is by Battiste Good, a Brulé Dakota living at the Rosebud Agency in South Dakota.

other” New England tribes died from smallpox and other diseases, Harvard professor David Jones wrote in his 2004 book, *Rationalizing Epidemics, Meanings and Uses of American Indian Mortality Since 1600*. The Great Plains Smallpox Epidemic of 1837 claimed more than 17,000 lives. On the upper Missouri River alone, the virus killed about “90% of all Mandans, one-half of the Arikaras (“Rees”) and Hidatsas (“Gros Ventres”), the North Dakota official state website states.

Influenza. The 1918 “Spanish Influenza” pandemic claimed 50-100 million lives, according to the National Institutes of Health. By 1920, it infected 28% of Americans and 500,000 to 850,000 died. Thousands of native peoples across the nation and in Hawaii and Alaska died, the Bureau of Indian Affairs reports. From Oct. 1, 1918 to March 31, 1919, there were 73,651 reported cases of influenza and 6,270 deaths out of a total Indian population of 304,854. Some native communities lost all their residents. The Alaska Office of Vital Statistics reported nearly 3,000 deaths between 1918 and 1919 in the territory. Per capita, more native people died in Alaska—82% of the deaths—of the flu than anywhere else in the world, other than Samoa, according to the Alaskan Division of Public Health.

No one will ever know the actual number of natives the virus killed because the “U.S. government didn’t record the effects viruses had upon tribes,” according to the Idaho Department of Health and Welfare. Unfortunately, today the government still only counts native people as “others” when reporting deaths from viruses.

Measles. This “childhood disease” killed many natives since first reported in 1765, according to the American Medical Association (AMA). And before development of a vaccine in 1963, it killed some 6,000 people yearly nationwide. With no immunity, outbreaks in native communities took thousands of lives. Measles caused 44% of post neonatal death in southwestern Alaska native lands from 1960 to 1962. After the vaccine, the AMA reports, deaths dropped from 56 deaths per 1,000 live births in 1960-1962 to 5.1 deaths per 1,000 live births in 1980-1981. But measles persists. There were Indian Country outbreaks from the 1970s to the 1990s. And though eliminated in the United States in 2000, the World Health Organization estimated that in 2013 there were 145,700 measles deaths globally.

Since then, measles cases and outbreaks have gone up. The unvaccinated are hardest hit.

Rocky Mt Tribal Leaders Council to surveil virus

Rocky Mountain Tribal Leaders Council (RMTLC) experts will track COVID-19 activity this summer to see how it affects native Montanans.

"Surveillance is a continuous collection of data, analysis and report writing for the purpose of disease control or prevention," said Helen Tesfai, Tribal Epidemiology Center (TEC) director.

Led by the Tribal Leaders Council, the tribal nonprofit organization represents all Montana tribes.

Surveillance will begin after the center hires five more staff members. The data it gathers will give TEC an eagle's-eye view of what the virus is doing. The organization is collecting data from the Indian Health Service (IHS) and the state's Department of Health. It plans to get tribe-specific raw data from IHS in October, according to Tesfai.

In a perfect world, the center would then feed the information into a national database so tribes can track the virus and see how it's affecting American Indians nationwide. However, no such database exists.

"That is one of the data limitations we face," Tesfai noted. "When data for American Indians is lumped with 'others' then we are not able to analyze the data specifically by tribes."

The goal of a national surveillance system is to watch the spread and intensity of COVID-19, according to the Centers for Disease Control and Prevention (CDC). Without tribal

input, areas around the United States stay unreported, like the dark areas of an eclipse.

Surveillance data also helps with understanding the severity of the illness, risk factors, transmission trends, and to understand how the virus impacts the capacity of the U.S. healthcare system, according to the CDC.

Public health surveillance data for American Indians is inconsistent at best, according to a "Best Practices in American Indian & Alaska Native Public Health" report from the Tribal Epidemiology Centers. The report underscores the need for public health networks, like the CDC, to accept TEC data into their systems.

In addition to watching the virus, RMTLC also focuses on public health issues. It promotes healthy tribal communities, protects children and families, and conducts epidemiological research to support health policies. The council follows industry standards for public health, which involves three fundamental purposes: assessment, policy development and assurance.



Systems Management Graph

CARES Act funds virus care

The Coronavirus Aid, Relief, and Economic Security (CARES) Act granted the final \$367 million of the \$1 billion provided to Indian Health Services to prevent, prepare for and respond to the coronavirus pandemic. In May, money went to tribes, Indian health programs, urban Indian health programs, Tribal Epidemiology Centers and more to support sanitation and potable water needs.

COVID-19 testing

The Indian Health Service offers rapid point-of-care virus testing in Wolf Point, Crow Agency, Lame Deer and Harlem, Mont., according to the IHS website. This test allows for medical diagnostic testing at the time and place of patient care, provides COVID-19 results in under 13 minutes and expands the capacity for coronavirus testing for individuals exhibiting symptoms as well as for healthcare professionals and the first responder community, according to the website.

Priorities for COVID-19 testing

High Priority

- Hospitalized patients with symptoms
- Healthcare facility workers, workers in congregate living settings, and first responders with symptoms
- Residents in long-term care facilities or other congregate living settings, including prisons and shelters, with symptoms

Priority

- Persons with symptoms of potential COVID-19 infection, including fever, cough, shortness of breath, chills, muscle pain, new loss of taste or smell, vomiting or diarrhea, and/or sore throat
- Persons without symptoms ranked by health departments or clinicians, for any reason, including but not limited to: public health monitoring, sentinel surveillance, or screening of other asymptomatic individuals according to state and local plans

Source: Centers for Disease Control and Prevention

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descendants from Fort Peck and
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BE A GOOD ANCESTOR



BE A GOOD ANCESTOR. Many of our ancestors fought to give us a voice in our Native communities. Do your part and participate in the 2020 Census. This census will determine federal funding for the next 10 years. Census workers will be dropping off valuable information soon in your area.

Group Portrait of Indian Congress Participants. Assiniboine Delegates. Back Row: Cloud Man, Kills-Spotted-Horse, Bear Cub, Afraid-Of-His-Track; Front Row: Shows-His-Day, Dan. Martin, Four Bulls

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