

Community Needs Assessment of the Oglala Sioux Tribe on the Pine Ridge Reservation

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Abstract

The Oglala Sioux - A Forgotten Tribe

The United States, the “land of the free,” is still home to several Native American tribes who live with restricted health, liberty and pursuit of happiness. Freedom for these tribes has not been easily achieved as the history of colonization and genocide that Indigenous Tribes suffered are evident in current health disparities. The resounding impacts of generational hardships have created areas where the prevalence of nutrition-related diseases eclipses the national average by more than 800%.¹ The Oglala Sioux Tribe on the Pine Ridge Indian Reservation of South Dakota is just one of the many. This Community Needs Assessment (CNA) report will evaluate the health and nutrition status of the Oglala Sioux Tribe. By better understanding the afflictions that led to astronomically high rates of many diseases, the report hopes to set out a clear plan of action to make targeted improvements in this population’s health and overall quality of life.

Purpose of the Assessment

A Community Needs Assessment is the process of evaluating the health and nutrition status of a community.² The purpose of this CNA is to assess health and nutrition-related problems, indicate the felt or perceived needs, establish priorities, and identify resources that exist to deal with the problems that exist within the Oglala Sioux tribe of the Pine Ridge Indian Reservation in South Dakota. Provisions for key findings and future action plans will be discussed.

Community Background Information

The Oglala Sioux Tribe reside on the Pine Ridge Reservation located in South Dakota, bordering Nebraska. The reservation itself is 3,400 square miles and was established in 1889. It is home to

about 40,000 people, of whom 80% are unemployed.¹ The unemployment number is astounding regarding the fact that unemployment rate in South Dakota is 3.1% and the nation's is 4.3%.³ The average yearly adult income is between \$6,000 and \$8,000.¹

The reservation is geographically isolated from other major cities, thus there is little to no infrastructure for jobs on the reservation. A third of the homes are without electricity and running water; drinking water is carried from natural sources and is boiled to remove all impurities.⁴ With harsh winter and unpredictable weather, these challenging living conditions are reflected in the health of the Oglala Sioux.

The historical context of genocide and displacement have certainly had lasting impacts on these native peoples. In the Wounded Knee Massacre of 1890, hundreds of Lakota Sioux were slaughtered by white American forces penetrating the Native land. Even in 1973, the American Indian Movement occupied the same land in protest of the US government's blatant mistreatment of Native Americans.¹² This legacy of oppression plays into the psychological well being of the tribe's descendants.

Health and Nutrition Status

The Oglala Sioux have a life expectancy of 49.5 years – the lowest of the country and the second lowest of the Western hemisphere, only behind Haiti.¹ The disparity between the tribe and overall US life expectancies might leave you to believe they were different nations entirely. Yet, these afflictions are found in the heart of the geographical US. This population has 8 times the risk for diabetes and double suicide rates compared to US national averages.¹ Diabetes can be linked to a plethora of complications and related maladies such as heart problems, blindness, and medical amputation.

More than 41% of the tribe smokes and alcoholism affects about 80% of the tribes adolescents and adults. As a result, 1 in 4 infants is born with fetal alcohol syndrome, and infant mortality rates are staggeringly 300% higher than the national average.¹

Access to healthcare facilities is extremely limited for many of the reservation's inhabitants. Finding fresh, nutritious food year round is also a challenge in these food deserts. Access to health and nutrition education is limited, especially since much of this region may not have access to a computer or internet in their homes.

Existing Resources

There are several organizations and federal resources offering their aide and assistance to the tribe, but there is much more that can be done. Friends of Pine Ridge organizes frequent drives encouraging donations of clothing, books, hand-crafted items, goods, and craft supplies to help children's organizations and schools on the reservation.

The Creighton University Medical School provides opportunities for its students to visit the geographically isolated sections of the Pine Ridge Reservation as part of their rotations. While on the reservation, medical students and participants in Project CURA provide health screenings, host health and science fairs, and sponsor other projects in efforts to promote health education.⁵

The USDA developed the PRAE, or Pine Ridge Agriculture Economy, to enhance the economy of the reservation through job creation. The current scarcity of jobs attributes to the reservations' near 50% poverty rate.¹⁴ This initiative works to attract and recruit young and beginning farmers in efforts to utilize large acreage of farmland, which is mostly used to harvest corn, wheat, and beef cattle. PRAE concentrates on enhancing the economy by creating agriculture production and affiliated agribusiness opportunities on the Pine Ridge Reservation.⁶

In April 2016, a USDA Rural Development Water and Waste Disposal Grant was awarded to Oglala Sioux (Lakota) Housing in efforts of cleaning up the water and sewer system of some of the neighborhoods on the reservations. Access to clean water is key factor in improving the health of those living on the reservations. The Oglala Sioux have also been included as part of The Promise Zone initiative, with is one of USDA's community-based initiatives in action to have federal experts and community residents work side by side to create customized solutions to increase economic mobility.⁷

Due to the prevalence of alcohol-related health issues, the CDC has taken interest in this community as a high-priority candidate for intervention via the CHOICES program. CHOICES is a program for women who are not pregnant (but could become pregnant) and who are drinking alcohol at risky levels. The program's intention is to raise the awareness of the adverse medical effects alcohol intake could have on themselves, as well as their potential babies, and thus, motivate women to reduce or stop drinking, and/or use contraception effectively.⁸

Goals and Objectives

The goals of this community needs assessment of the Pine Ridge Tribe first include understanding the health and nutritional status of the population. To achieve this goal, demographic information specific to this community and articles related to the socioeconomic status of this tribe were reviewed to determine if these factors impacted the community's health and nutrition status. Surveys and studies regarding this community were gathered and analyzed.

Once the background information on the community's health and nutrition status was analyzed, the next goal was to compare the incidence of preventable nutrition-related chronic disease in the Pine Ridge Tribe to the national US incidence of such diseases. To do so, diseases associated with hazardous nutritional status were identified and compared the prevalence of these diseases in the

tribe versus the national average. Diseases preventable through nutrition intervention were identified.

The final goal was to identify the nutrition programs in place, or lack thereof, and make recommendations for new programs. To achieve this goal, existing programs and key performance metrics were reviewed. Any deficits in programs were identified, and reasons for this lack of provisioning were analyzed - whether it be a lack of accessibility or a lack of attention. After determining the existence of programs, recommendations for easy to implement and impactful nutritional interventions have been made.

Key Findings

After research, planning, and understanding the nutritional status of the Pine Ridge Tribe, three key findings have been identified. First, that geographic isolation impacts the availability of jobs and adequate medical care. The Pine Ridge Tribe is extremely remote, with an evident lack of access to major cities and infrastructure. This contributes to the 80% rate of unemployment and the lack of accessible medical care.¹ In order to obtain adequate medical care, the tribe would have to travel miles and miles into Rapid City, South Dakota, requiring time, travel resources, and money that are scarce.⁹

Secondly, extreme poverty, food insecurity, and lack of medical care contribute to the high prevalence of disease. The unbelievable and heartbreaking health status of this community is not achieved solely by geographical isolation. An average annual adult income of \$7,000, high unemployment, and lack of basic infrastructure including electricity and running water all contribute to the low health status of the community.¹⁰ Without basic needs met, the community cannot focus on their health needs as much as necessary to change the status quo. The Pine Ridge Tribe requires attention to their life expectancy rate, which is the second lowest in the Western

Hemisphere, and their extremely high risk for diabetes, which is eight times the national risk.¹

These health risks cannot be tended to while the community instead is focusing on meeting needs such as pure water and warmth during the winters.

Finally, additional resources and interventions are essential to meet the needs of this remote population. It is clear that the existing resources and programs cannot change the health status of this population on their own. National, local, and private groups need to focus their attention on the health disparities in this community and work to implement ways to change this reality. Although the existing resources, such as CHOICES and Friends of Pine Ridge are making valiant efforts, more is needed. Health and nutrition programs that are tailored to diabetes, smoking, and alcoholism are needed to introduce more knowledge and understanding of these health issues. Other programs that open up jobs, result in higher rates of electricity, and contribute to the economy of the Pine Ridge Tribe would be extremely beneficial in relieving stress from poverty and unemployment, so people in the community can refocus their attention to their health.

Community Feedback

Generally, the community feedback received for the CNA poster was very positive from both classmates and instructor. The only exceptions to this were the following recommendations: adding more visual aids such as graphs and charts and explaining more historical context related to the Sioux's background. Charts or graphs have been added to the presentation comparing the Sioux's health status to that of other American populations. Historical background, including the Wounded Knee Massacre, was not discussed in detail on the poster because of the lack of space. This is discussed in more detail in the background section of this report.

Priorities and Recommended Plan of Action

Given the geographical isolation and lack of electricity (and internet) of the Oglala tribe, the

priorities must be addressable with mobile clinics or delivered in-person. The key findings show that poverty is a significant contributing factor to prevalence of diseases. This may be mitigated at a federal level through grants or provisions that provide financial assistance for affected and at-risk individuals. Provisions should include mobile clinics with screening, education, medicine if needed and even food.

The first priority to address is **empowering the residents to have access to basic sanitation and electricity**. This will improve both quality of life and reduction of disease. The report proposes federal funding to create a modern infrastructure for homes that agree to the provision.

Infrastructure development will also provide job access for area residents in the short-term with potential longer-term positions available. While the USDA Rural Development initiatives do provide grant money to this region, it is primarily allocated to public buildings, police organizations, or schools.¹³ The findings of this report reveal the need to provide assistance at a more targeted level so that residents can have access to sanitation, water and electricity in their homes, especially since travel to a main city or public building is often not feasible due to distance or weather.

The second priority to address is the **prevalence of diabetes in this population**. Diabetes compounded with excessive smoking and drinking leads to more complex medical problems. More than 50% of inhabitants over 50 of the Pine Ridge Reservation have diabetes; 37% of the population overall is afflicted.¹ The Strong Heart Study reported by the National Institute of Health, suggests that diabetes is a key risk factor in heart disease and disproportionately affects Native Americans.¹⁰ Blindness, loss of limbs and renal failure complications are also widespread. While the history of cultural oppression which has undoubtedly lead to an increase in drinking, violence and drug use cannot be erased, hope can be given to future generations to have a higher quality of life by preventing diseases with their relentless physiological and psychological impacts.

While there are many aspects of nutrition warranting improvements, this report proposes a targeted approach to the largest issues that could have the most profound long-term impact: basic sanitation and sewage to improve quality of life and diabetes prevention as diabetes increases the risk of many other maladies. The proposed plan of action is to focus on diabetes prevention through community education, infrastructure empowerment, healthful food access, and alcoholism treatment and prevention programs. A program must include measurable objectives to be reviewed at key intervals as well as systems for community feedback. The program must fit within the resident's cultural lifestyle and not be intrusive or dismissive of cultural practices.

Conclusion

The health disparities seen in the Oglala Sioux Tribe are stark and clearly need attention. This CNA seeks to drive awareness to the issues involving health, economic, and accessibility to basic needs of those living on the Pine Ridge Reservation. The focus on nutrition related chronic diseases identifies programs and interventions that will mitigate the risk of diabetes and alcoholism prevalent in this community.

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