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REPORT OF THE INDIAN AFFAIRS COMMISSION

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Roy H. Larson, Director of Indian Education - The Section on the Education of Eligible Indian Pupils During the School Year 1958-59 and 1959-60.

Ove M. Wangensteen, Deputy Commissioner of Public Welfare - The Section on Contracts for Services to Indians.

Dr. Robert N. Barr, M. D., Secretary and Executive Officer, Minnesota Department of Health - The Section on Health Status of Minnesota Indians.

GENERAL ASSISTANCE CONTRACT FOR INDIANS

Since February of 1960 the United States Department of the Interior, Bureau of Indian Affairs, and the State Department of Public Welfare have been attempting to negotiate a contract for general assistance to indigent Indians in the State of Minnesota. The proposed contract provided for a maximum liability of the Bureau of Indian Affairs of \$280,000.00 which would include assistance grants to Indians for food, clothing, shelter, fuel, personal needs, household needs, utilities, transportation, other items considered to be special needs, and an amount for administrative costs not to exceed 5% of the funds expended for general assistance. The proposed contract provided for a quarterly advance of these Federal monies to the state and reimbursement by the state to the individual counties providing assistance to eligible Indians.

Eligible Indians were defined as "Indians who have relief settlement on tax exempt property held in trust for Indians by the Federal Government and those who have relief settlement on other tax exempt lands held for Indian use under the jurisdiction of the Federal Government. Included are Indians of the Red Lake Band of Chippewa Indians residing on tribal land on the Red Lake Reservation."

Many meetings were held between representatives of the Bureau of Indian Affairs, State Department of Public Welfare, and directors of county welfare departments having sizeable Indian populations. Some of the questionable provisions of the original contract were negotiated satisfactorily, but it was impossible to come to agreement on several items of major importance which included the provision for absolute cash grants of assistance, absolute standards of assistance, and a residence or "relief settlement" provision which was contrary to our state law. Negotiations continued through December, 1960 as it seemed that we might be able to compromise our differences. At that time, however, a decision of the Beltrami County District Court, which was interpreted

by the Beltrami County Welfare Department as a mandate that they could not furnish general assistance to Indian people residing on the Red Lake Reservation, additionally complicated further negotiations. The Department of Public Welfare discussed this situation with representatives of the Bureau of Indian Affairs requesting that that portion of the contract which states, "Included are Indians of the Red Lake Band of Chippewa Indians residing on tribal land on the Red Lake Reservation," be omitted. The Bureau of Indian Affairs was unwilling to go along with this deletion and further negotiation seemed to be of no avail.

The Legislative Interim Commission on Indian Affairs has been kept informed of all developments and are in agreement that the contract should not be negotiated as long as the objectionable features cannot be compromised.

MEDICAL CARE FOR INDIANS

The Minnesota Plan for medical care for indigent Indians in seven counties operated during the fiscal year 1959-60 at a very accelerated rate. In the fiscal year 1958-59, the total expenditure on this program was \$52,461.44, while in the fiscal year 1959-60, the total expenditure was \$99,681.61. At the outset of the 1959-60 fiscal year, the Minnesota Department of Public Welfare had been allocated \$75,000.00 for the purpose of administering this medical care plan for Indians. By March of 1960, it was apparent that our funds would not be adequate to carry through and it was necessary to obtain a supplement from the USPHS in order to reimburse the counties 100% for the care that they had given to these eligible Indians.

Briefly, this so called Minnesota Plan of furnishing medical care to indigent Indians was established July 1, 1956, and until June 30 of 1958 only the following three counties were included in the Plan: Goodhue, Redwood and Yellow Medicine.

On July 1, 1958, the Plan was expanded to include St. Louis, Mille Lacs, Koochiching and Cook Counties. The USPHS acknowledged that the cooperative

administration of this plan by the Department of Public Welfare and the county welfare departments had resulted in a considerable saving to the Federal Government as well as a considerable increase in the amount of services that were made available to the eligible Indians. With the exception of one area, the Indians have been very satisfied with this program because it offers free choice of vendor, prosthetic devices and a complete range of medical service not previously available to them.

For the fiscal year beginning July 1, 1960, Pine County was included in the Plan at the insistence of Representative Fred Marshall. Pine County Indians are a small tribe located in the eastern and northern part of the county. Up to this time we have not had any medical expenditures reported from Pine County, but the funds are available if the county welfare board makes an expenditure for the medical needs of eligible Indians.

Recently a request has been made that the Indians located in Aitkin County be included in the Minnesota Plan. The USPHS has indicated their willingness to include the Aitkin County Indians in the Plan, but because of the small number of eligible Indians in that county there will be a number of administrative difficulties that we have not had to contend with previously in the administration of the Minnesota Plan.

With the passage of time and the experience gained, it has been possible to make administrative improvements and to overcome some of the objections and gripes of both Indians and vendors who participate in the plan. The Identification Card used in the administration of the Minnesota Plan has been redesigned and will be available for use in the Indian communities within a short time. It is hoped that this new Identification Card will solve the most difficult administrative problem that has confronted the Plan.

The Minnesota Plan of administering medical care for indigent Indians offers the best solution to providing adequate medical care to this underprivileged

group. Briefly stated the Minnesota Plan means the integration of the administration of medical care for indigent Indians into the ongoing public assistance medical care program carried on in every county in the state. It is hoped that before too long all counties with sizeable Indian population will be included in the Plan.

The following is a comparative illustration of the expenditures under the Minnesota Plan for the past two fiscal years.

	<u>Totals 1958-59</u>	<u>Totals 1959-60</u>
Cook	\$3,323.50	\$3,875.37
Goodhue	3,100.00	2,042.72
Koochiching	2,021.80	8,502.59
Mille Lacs	17,901.14	35,528.74
Redwood	5,621.98	9,996.23
St. Louis	17,570.82	36,932.36
Yellow Medicine	<u>2,921.40</u>	<u>2,803.60</u>
	\$52,461.44	\$99,681.61

INDIAN FOSTER CARE CONTRACT

The number of counties participating in the foster care costs for children of at least $\frac{1}{4}$ Indian blood, increased from five in 1958-59 to eight in 1959-60.

These eight counties are: Aitkin, Becker, Beltrami, Cass, Cook, Koochiching, Mahnomen and Mille Lacs. Eligible children covered by this contract are defined in part as follows:

- (a) Children in foster care as of June 30, 1959, who were eligible under the terms of the 1958-59 contract, and in addition two new amendments were included;
- (b) Indian children accepted for foster care on or after July 1, 1959, whose families on date of acceptance reside on tax exempt property held in trust for Indians by the Federal Government and whose families reside on other tax exempt lands for Indian use under jurisdiction of the Federal Government.

- (c) The Department of Public Welfare shall provide support from State funds for Indian children included under this agreement who are wards of the Commissioner of Public Welfare in the same manner and to the same extent as is provided for non-Indian wards of the Commissioner of Public Welfare.

The amount of Federal funds received under this contract in 1959-60 under these provisions was \$141,822.93. This was a loss of \$28,177.07 from the amount received the previous year under the terms of the contract of 1958-59. Cass County had the greatest amount of expenditure at \$100,522.58 representing 57.3% of the total expenditures. Correspondingly, Cass also had the largest caseload, numbering 161 children or 54.4% of the total. A total of 296 children received service under this contract.

In addition to the \$141,822.93 contributed for foster care expenditures, \$14,182.28 (10% of the amount spent) in Federal funds was contributed for administrative expenses. The 10% administrative costs were distributed 25% to State Agency and 75% to counties operating under the contract.

Under the contract presently in effect, 1960-61, the restrictive provisions of tax exempt land residence are again included. Maximum liability under the contract for the fiscal year beginning July 1, 1960 is \$242,000.00. During the first quarter of this year \$43,312.00 has been spent for 256 children. According to the comparison of last years figures, the current fiscal year will be approximately the same.

It is noted that although the numbers of children eligible for foster care is declining, the number of state wards in this group is increasing.

INDIAN CONTRACT FOR THE SANATORIUM CARE OF TUBERCULOUS INDIANS

General Contract Provisions

The contract provides for in-patient care for eligible land status Indians only. Such care may be arranged at Minnesota State Sanatorium or at county sanatoria. Transfer to another medical facility for special services

not available at the Sanatorium is also possible. The contract also provides for payment of out-patient services at Minnesota State Sanatorium. For eligible land status Indians, it is possible to provide out-patient services at county sanatoria, transportation to and from sanatoria, and burial expenses. Provision is made for payment for a social worker for Indians at the State Sanatorium, but a social worker has not been recruited.

Amounts of Money Set Aside in Contracts

1959-60

In-Patient Care, Land Status Eligible		\$200,000
Out-Patient Services	\$10,000	
Surgical and Related Special Services	10,000	
Social Worker	5,000	
Transportation	500	
Burial	<u>500</u>	
	\$26,000 but not to exceed	<u>35,000</u>
Total contract not to exceed		\$235,000

1960-61

In-Patient Care, Land Status Eligible		\$140,000
Out-Patient Services	\$10,000	
Surgical and Related Special Services	10,000	
Social Worker	5,000	
Transportation	500	
Burial	<u>500</u>	
	\$26,000 but not to exceed	<u>35,000</u>
		\$175,000

Contract Expenditures

1959-60

First half	\$45,984.70	Eligible land status patient days	2,904
Full year	91,769.20	Eligible land status patient days	6,126

1960-61

First half preliminary report

\$42,954.65 Eligible land status patient days 3,165

Special note: Although the cost was less for the first half of 1960-61 than the similar period in 1959-60, the number of patient days was greater. Costs were lower because a greater proportion of the care was at the State Sanatorium rather than at the county sanatoria where the rates are higher. Out-patient costs decreased because of a vacancy in the nursing position in the State Sanatorium out-patient department.

Comments

Proposed Legislation:

There is a proposal that Glen Lake Sanatorium, now operated by Hennepin County, be taken over by the State of Minnesota and operated as the state sanatorium. At this time it is not known what the per diem rate would be; but if the Legislature makes this change, contract costs for 1961-62 will be affected.

Land Status Policy:

By adhering to the policy that reimbursement will be made for care of land status eligible Indians only, the federal government is paying for only about 50% of the cost of sanatorium care for persons in Minnesota who are at least one-fourth degree Indian.

In order to meet the special problems of tuberculosis among the Indians, the State of Minnesota has made it possible for persons one-fourth degree or more Indian to receive sanatorium care, regardless of whether they have eligible land status. Counties are not requested to authorize admission of non-eligible land status Indians to Minnesota State Sanatorium. It has been found in the past that many delays ensued while decisions were pending concerning the land status of the individual, and counties were not willing to authorize admission until the federal

government had considered each situation. In order to meet public health needs, Indians may be admitted to Minnesota State Sanatorium regardless of land status, the determination is made later concerning whether the federal government will reimburse for the care, and the counties are not charged. This special arrangement has been very successful in reducing tuberculosis among the Indians. For many years the Indian Contract expenditures followed an upward trend. Only in the past year or two has there been any decrease in total number of patient days of sanatorium care for all persons of one-fourth degree or more Indian blood. Thus a good public health program is being done, but the federal government is reimbursing for only about 50% of the total program.

Recommendation

It is recommended that the federal government revise its policy of providing for only those Indians who reside on reservation or tax-free land.

HEALTH STATUS OF MINNESOTA INDIANS

Much has been reported regarding the provision and lack of provision for the health, welfare, and education of the Indian residing in Minnesota. Too frequently these reports are made without the author having complete knowledge of the facts as to the problem or understanding of the cultural, social, educational, and economic facets as well as the historical background. Likewise, too few have a real understanding of just what should be the ultimate objective of all local, state, and Federal service for this minority group. The Indian too frequently feels that:

1. As a citizen of the State he is entitled to all the rights and privileges of every other citizen.
2. As an Indian he is also entitled to maximum services in these fields, - health, education, and welfare, - as well as all other special provisions which have been made by the Federal government from time to time.

Too often the local citizen in Indian areas feels and advocates that the Indian is solely a responsibility of the Federal government and, unfortunately, too frequently the State and the Federal government have expressed attitudes that the responsibility no longer falls on either the State or the Federal government. The result is that Indians, the local citizen, and the government - Federal, State, and local - have never developed a complete plan of the responsibility of each nor has a clear cut objective in all fields been developed and agreed upon by all parties concerned.

Education in Minnesota has developed a pattern as related to Indians that is being followed in principle for both health and welfare services. Namely, all Indian schools have been replaced by public schools and the local school district where numerous Indians reside and attend school receives, in addition to the usual school aid from State tax sources, additional aid from Federal sources.

The welfare categorical aid program, namely: OAA, Aid to Dependent Children, Aid to the Disabled, the Blind, and general relief, are provided for eligible Indian and white citizens alike. It has been estimated that approximately 90% of Indians receive some assistance under these programs.

These categorical aids in Minnesota include unlimited medical services, and such provide for eligible Indians except when the medical and hospital services are provided by the Federal government in Indian hospitals or through contract with community physicians and community hospitals.

Today the Indian hospitals at Pipestone, Fond du Lac, and White Earth have been closed and replaced with community hospital services and local medical services paid for either by a USPHS contract with the local practicing physician and the community hospital or by a USPHS contract with the State Department of Public Welfare which in turn reimburses the county welfare board for medical and hospital expenditures for eligible Indians. (The latter contract arrangement is known as the Minnesota Plan or the Southern Sioux Plan.)

The USPHS still maintains a hospital at Cass Lake, at Red Lake, and an out-patient clinic at White Earth, all staffed by employees of the USPHS.

In all Indian areas in Minnesota field health services have been greatly expanded by both the USPHS and the State Health Department in order to assure the Indians the use of medical and hospital services to improve the preventive health services and the sanitation of their environment. The lack of good environmental sanitation and of accident prevention is responsible for a large portion of the illness and deaths among Indians as well as a large number of the Indians requiring hospital and medical services.

The first contract for hospital service and medical care between the Federal government (BIA) and the State of Minnesota was developed in 1935 when the Indian Sanitorium was constructed as a unit of the State Sanitorium located at Walker, Minnesota (Ah-Gwah-Ching) and the State was reimbursed for the costs of treatment of Indians with tuberculosis. Tuberculosis deaths among Indians resident in Minnesota have in the period 1935 to date decreased from an average of 50 per year (64 in 1937) to an average of 2.6 per year (a total of 13) for the past five years (1956 -1; 1957 -2; 1958 -1; 1959 -8; and 1960 -1).

P.L. 85-151, which may be cited as the "Indian Hospital Aid Act of 1956," provided funds for the fiscal year ending June 30, 1958. This Act assisted in building beds in the following community hospitals:

<u>Name and Location</u>	<u>Size of Hospital</u>	<u>Indian Beds</u>	<u>Payment under P.L. 85-151</u>
Mahnomen Co. & Village Hospital	25	8	\$85,921.56
Cook Community Hospital	18	3	60,797.82
North Shore Community Hospital	12	2	29,114.00
TOTAL		13	

These hospitals as well as others located in and adjacent to Indian areas have also received aid under the Federal Hospital Construction Act (Hill-Burton program).

Congress in 1959 passed P.L. 86-121 to assist in developing improved sanitation of Indian villages and homes, and this year funds available under

this Act totaling \$90,000 have been earmarked for developing a community water supply, sewage and waste disposal at Red Lake, and \$4,000 and \$5,000, respectively, for hydrological surveys to provide water for Inger and Nett Lake, respectively. This Act requires the active participation of the Indian and assurance that the facilities will be maintained by the Indian community. Additional funds will be appropriated by Congress and allotted to Indian communities as needed and as rapidly as his acculturation and the acceptance of individual and community responsibility will permit.

The next fiscal year the Division of Indian Health of the USPHS plans to modernize the Cass Lake Indian Hospital and expand its out-patient facility, and to construct a modern fire-resistive hospital unit at Red Lake. This unit will be so designed as to be readily converted into a modern field health facility at a later date, when it is believe that both the Indians as well as others will prefer hospitalization in the community hospital at Bemidji.

Plans call for the gradual transfer of all field health services and hospital and medical care of Indians to the State, with the Federal government by contractual arrangement contributing its fair share of the costs; and the State of Minnesota wherever possible making similar transfer to local government and community organizations, with the State contributing its fair share of the costs.

Progressive change of this type has already resulted in great improvement of health, medical, and hospital services to Minnesota Indians and has resulted in reduced morbidity and mortality rates. The use of health services as well as the costs are as yet continuing to increase but as the Indian health and environment improve these health costs will again decrease. This phenomenon is well illustrated in the reduced cost of tuberculosis control, which has been remarkable in spite of the spiraling daily cost of hospitalization.

Congress has demonstrated its willingness to appropriate increasing amounts annually for Indian health. One problem has developed, in that the Indians' usage of such service in Minnesota has had greater acceleration than the available funds. For example: The fiscal year allotment of funds for Minnesota Indians by the Division of Indian Health for 1959 was \$875,299 for 1960 was \$1,105,913. and during the last quarter of fiscal 1960 services had to be restricted to acute and emergency treatment. The same may well be true for fiscal 1961. A thorough study and report of services provided, usage of services, costs at all levels is in order. Such cost study should include contribution by:

1. the individual Indian
2. the local community and county
3. the State of Minnesota
4. the Federal government

In addition, it is recommended:

1. That the State, the local governmental agencies and the Federal government reach as permanent an understanding and agreement as to what responsibilities each has in the field of health, welfare, and education.
2. That the State provide, through the State Department of Public Welfare, funds that can be used to fill in the gaps in health and welfare programs where either the Federal agency or the local government fail to meet their responsibility in the medical, hospital and welfare fields.

CONCLUSIONS OF INDIAN AFFAIRS COMMISSION IN RESPECT TO INDIAN HEALTH

The Indian Affairs Commission, after considerable study of all plans of medical care, issues the following report.

The discussion herein is relative to the direct billing of medical and hospital expenses for indigent Minnesota Indians.

At the present time there are at least three methods being used to repay hospitals for services rendered:

1. The Federal Government, Department of Health, Education and Welfare, through its Aberdeen, South Dakota, office pays the full amount of the bill submitted by the hospital (any hospital contracted for by Health, Education and Welfare to give service to indigent Indian people) for room, board, drugs, X-ray, depreciation, etc. (The Indian patient receives the same treatment, care and billing as any other patient in the hospital.)

2. The Federal Government contracts with a hospital to give medical care to indigent Indian patients on a per diem basis, i.e. \$25.00, \$26.00, per day or any other figure that might be determined in a joint meeting of the hospital administrator and Public Health Service personnel.

3. The State of Minnesota through the Department of Public Welfare contracts with the hospital on a per diem basis.

Method #1. Payment is made directly to the hospital by the Federal Government.

Method #2. Payment is made directly to the hospital by the Federal Government.

Method #3. Payment is made to the hospital by the county which in turn is reimbursed by the State, which in turn is reimbursed by the Federal Government. This method #3 is what is known as the Minnesota Plan which is patterned after the Southern Sioux Indian medical contract.

The Federal Government, Department of Health, Education and Welfare,

through its Public Health Service, not only sustains, at least to a certain extent, the three methods of paying for hospital and medical service for Indian people but also operate hospitals for Indian people similar to the Indian hospital at Cass Lake.

Those hospitals that bill the Federal Public Health Service directly for services rendered seem to be in a position to give better medical attention and care to indigent Indian patients because they are not curtailed in giving those services or medications for lack of funds. Those hospitals that are on the Minnesota plan appear to be shackled to a minimum of services to Indian patients due to a regimentation of funds. It also appears that Indian patients actually require more attention, X-ray, dietary food and drugs, due to inherent unsanitary health conditions surrounding his home life, plus varying degrees of malnutrition, then the average white patient.

Until such time as the Minnesota Medical Care Plan, now in operation in some parts of the State, is satisfactorily taking care of the medical needs of Minnesota's indigent Indian people, the Indian Affairs Commission is reluctant to recommend that any hospital adopt any medical plan for indigent Indian people other than having a direct contract with the Federal United States Public Health Service to give hospital services to the Indian patients on a direct billing of all hospital expenses so that the Indian patient is not caught in the cost-price squeeze of the afore mentioned methods two and three.

The following eleven hospitals and the plan they are using caring for Indian patients is included so that contact may be made with any hospital to find out how their program is working.

AREA HOSPITALS AND METHOD OF PAYMENT OF INDIAN CARE

1. Cook Community Hospital
Cook, Minnesota
Payment is made first from United States Public Health Service to State to County to Hospital. Paid a straight \$25.00 per diem rate.
2. St. Mary's Hospital
Detroit Lakes, Minnesota
USPH directly to hospital. \$21.00 per diem plus extra for drugs, laboratory and X-ray.
3. Clearwater County Memorial Hospital, Bagley, Minn.
USPH directly to hospital. The patient is billed for all charges incurred. Direct billing basis.
4. Mahnomen County Village Hospital, Mahnomen, Minnesota
USPH directly to hospital. \$23.00 per diem rate - however, this hospital does not offer O.B., does very little surgery and does a minimum of laboratory and X-ray.
5. St. Joseph's Hospital
Park Rapids, Minnesota
USPH directly to hospital. The patient is billed for all charges on direct billing basis.
6. Deer River Hospital
Deer River, Minnesota
USPH directly to hospital. The patient is billed on a direct billing basis - all charges.
7. Aitkin Community Hospital
Aitkin, Minnesota
USPH directly to hospital. The patient is billed on a direct billing basis - all charges.
8. Memorial Hospital
International Falls, Minnesota
USPH to State to County to hospital.
9. Cloquet Hospital
Cloquet, Minnesota
USPH to hospital. \$35.13 per day.
10. Miller Hospital
Duluth, Minnesota
All indigent Indian medical patients in this hospital are cared for and the hospital bills the State and County Welfare directly.
11. Bemidji Hospital
Bemidji, Minnesota
USPH directly to hospital. The patient is billed on a direct billing basis - all charges.

EDUCATION OF ELIGIBLE INDIAN PUPILS DURING THE SCHOOL YEARS 1958-59 AND 1959-60

SCHOOL YEAR 1958-59

Public Law 874 As Amended

During the closing days of the second session of the 85th Congress, Public Law 874 was amended to include Indians living and/or working on federal land, or Indian land held in trust by the federal government. This law has partially replaced the Johnson O'Malley Act of 1936. It classifies the pupils into two general categories, 3a and 3b pupils. Pupils are listed as 3a if the parent lives and works on federal land. Pupils are classified as 3b1 if the parents live on federal land but work on private land, and 3b2 if the situation is reversed; that is, works on federal property and lives on private land. The federal aid under this law for the past year was \$174.81 for each 3a pupil in a.d.a. and one-half of that amount or \$87.41 per 3b pupil in a.d.a. School districts eligible for maintenance aid under P. L. 874 are not eligible for maintenance aid under the Johnson O'Malley Act with the exception that if the school district did not receive as much federal aid under P. L. 874 as it did under the Johnson O'Malley Act for the year 1957-58 it would be eligible for supplementary aid from Johnson O'Malley funds.

Johnson O'Malley Act

The Johnson O'Malley contract for the year 1958-59 allotted \$105,000 to Minnesota. Of this amount \$84,696.35 was allotted to the various schools for the education of eligible Indian children for the year 1958-59 and \$26,498.18 for administration and supervision including salaries, office rent, supplies, travel, meals and lodging. The amount of Public Law 874 funds paid to date to schools with Indian pupils is \$220,013.00. This is approximately 85% of the estimated entitlements. The exact amount due will be determined after a field survey is made by the United States Office of Education.

Enrollments and Attendance

The elementary Indian enrollment was 1798 with an a.d.a. of 1479.2 and a percent of attendance of 90.2%. There were 912 high school Indian pupils enrolled for an a.d.a. of 662 and a percent of attendance of 86.5%. The total Indian enrollment in grades 1-12 was 2710. There were 67 high school graduates and 184 eighth grade graduates reported by present and former schools under the Johnson O'Malley program. There were a number of additional Indian graduates from other public high schools not under the Johnson O'Malley program. When these are included the total will be approximately 75 graduates. Comparing these figures with the same schools as last year we find an increase of 87 pupils; 48 elementary and 39 high school. The percent of attendance of the elementary pupils improved the past year over the previous year by .4 of a percent. The attendance of the pupils in grades 7-12 dropped. There was an increase of 39 pupils enrolled in high school over the previous year. This increase is mostly in the junior high school.

Guidance Consultant Added to Staff

Due to a supplemental appropriation by the Bureau of Indian Affairs it was possible for the State Board of Education to create a new position entitled Guidance Consultant in the field of Indian education. This enabled the State Department of Education to extend counseling service to public schools with Indian enrollments. The consultant would counsel with the parents and high school pupils in an effort to reduce the number of "drop-outs" after the pupil reached the age of 16 years. The counselor would acquaint the Indian high school pupils with the various scholarships available to them if they completed high school with a good record.

SCHOOL YEAR 1959-60

Public Law 874 as Amended

This is the second year that Public Law 874 as amended in 1958 has been

in effect. Some of the problems which were encountered the first year as a result of its late announcement have been resolved. However, many school officials still complain of the great amount of work entailed in its administration.

To be eligible for federal aid under this act a school district must have at least three percent of its pupil population eligible with a numerical minimum of ten pupils. The aid for 1959-60 was set at \$189.33 per eligible pupil in average daily attendance providing the parent lived and worked on federal property. Only half this figure (or \$94.66) was paid for each pupil in average daily attendance if the parent lived on federal land, but worked on private property or vice versa. Public Law 874 is inflexible as it does not take into consideration the question of a low tax base. High valuation districts receive the same aid per eligible pupil as low valuation districts. To remedy this Johnson O'Malley funds have been provided by the Department of the Interior to supplement Public Law 874 payments. The total amount of Public Law 874 payments received by the schools during 1959-60 including 1958-59 final payments and adjustments amounted to \$256,496.00. The estimated entitlement was \$274,112.53. During the previous fiscal year a total of \$220,013.00 was paid to Minnesota school districts. The schools actually earned \$29,425.00 more for a total of \$249,438.00. The \$29,425.00 represents the final and adjustment figure for 1958-59, but was paid during 1959-60.

A portion of the Public Law 874 payments to non-high school districts will be paid to the county tuition fund and the county transportation fund as the entire cost of educating the high school pupils from these districts is borne by the state and county. Since only the home district can claim federal aid for the eligible high school pupils attending a secondary school in an adjacent district it was deemed just and equitable for the home district to help defray the county's share of the tuition from Public Law 874 receipts or as much of these receipts as

was earned by these pupils. This was also true for the county's share of the transportation aid for these same pupils.

Johnson O'Malley Act

There are several schools who cannot qualify for federal aid under Public Law 874 due to the three percent limitation and some due to the ten pupils in average daily attendance minimum. To assist these schools and others whose needs are not met under Public Law 874 alone, the Bureau of Indian Affairs in the Department of the Interior allotted \$176,000.00 to Minnesota for the 1959-60 school year to meet these needs and to provide funds for administration and supervision of Indian education. Of this amount \$150,049.84 was allotted to schools with Indian enrollments. The remainder was for administration and supervision including salaries, office rent, equipment, travel, meals, lodging, printing and communication.

Enrollment and Attendance Data For Eligible Indian Pupils

The elementary Indian enrollment for the year 1959-60 was 1,533 pupils with an average daily attendance of 1,257.5. The percent of attendance was 91.04%. The total secondary school enrollment was 808 for an average daily attendance of 610.16 and a percent of attendance of 87.7%. The total enrollment for grades 1 thru 12 was 2,341 with an average daily attendance of 1,867.66. The percent of attendance for all pupils (grades 1 thru 12) was 89.9%. The number of eligible Indian eighth grade graduates was 192 and the number of eligible Indian high school graduates was 81.

An eligible Indian pupil is one who lives on federal land and is one-fourth degree Indian blood or more.

The large drop in the total Indian enrollment for the year 1959-60 over the previous years was due to two main factors. One was the result of the change of land status making many Indians ineligible. The other was due to the fact that Indian families were forced to leave the area in search of employment or better economic opportunities.

Continued Increase in Higher Education

A continued upsurge in interest in higher education on the part of Indian high school graduates is evidenced by the great increase in applications for scholarship grants. When the program was first inaugurated no one had to be refused aid due to lack of funds. Now the demands exceeds the available scholarship funds.

A large number of 1960 eligible Indian high school graduates made plans to continue their education in private and state colleges, schools of nursing, vocational schools, Haskell Institute and commercial schools. This is a result of the state, federal and other scholarship programs. About 66% of the eligible Indian graduates made such plans. The trip to the Twin Cities thru the efforts of the labor union had a beneficial influence in this respect.

Integration Continues

Now that the new Central Elementary School in Bemidji has been completed plans have been made by the Beltrami County Board of Education to close the Buck Lake school and transport the pupils to Bemidji. This completes the integration of Indian pupils in small schools in Beltrami County into larger school units. Mission pupils have attended Cass Lake for many years. Redlake remains a partially segregated school, but its size and location prevents its integration with any other district. There now remains only four one teacher schools with Indian pupils enrolled that have not joined larger adjacent schools. They are in Mahnomen, Redwood and Becker Counties. Vineland, School District #478 although not a one room school is, however, 100 percent Indian. This school district should be annexed to Onamia. Since 1940 about 21 schools with mostly Indians enrolled have been closed and the pupils transported to nearby larger schools. The most recent schools to be closed are Buck Lake, Beltrami County, with the pupils transported to Bemidji and Inger, Itasca County, with the elementary

pupils transported to the Northern Elementary School in Independent School District #317, Deer River, Itasca County.

Building Construction

Vineland, School District #478

The addition of a multi-purpose room, a kitchen, and some remodeling of the old structure was completed at Vineland during the past school year at a cost of \$68,000. The funds for this project were provided by Public Law 815, Title IV.

Red Lake, School District #38

This district was allotted \$241,300 under Public Law 815, Title IV, for the construction of an addition to the high school building consisting of two new science rooms, a business education room, an art room and three regular classrooms. The present high school building will be remodeled to provide a larger library. The present science room will be remodeled into additional office space for the administration and supervisory staff. Two four-bedroom apartments will be added to the present apartment building. A 22' x 66' garage and repair shop will also be built.

Deer River, School District #317

The Deer River School District #317 was granted \$62,320 under Public Law 815, Title IV, for an addition to the Cyprus King Elementary School. This will help to better serve the Indians in that district.

TABLE 1

Federal Funds Allotted for School Building
Construction Under Public Law 815

County	Dist. No.	School	Period 1945-50	Period 1950-55	Period 1955-60	Approved 1959-60
Becker	25	Pine Point			\$ 75,000.00	
Beltrami	38	Redlake		\$666,940.69	95,703.61	\$241,300.00
Cass	115	Cass Lake	\$ 92,000.00		336,000.00	
Cass	119	Walker			101,000.00	
Itasca	317	Deer River			140,000.00	62,300.00
Mahnomen	432	Mahnomen-Beaulieu			120,000.00	
Mahnomen	433	Naytahwaush	212,500.00		56,000.00	
Mahnomen	434	Waubun			130,000.00	
Mille Lacs	478	Vineland			68,000.00	
Mille Lacs	480	Onamia		42,000.00		
St. Louis	707	Nett Lake			196,699.40	
St. Louis	U.T.	Orr			110,000.00	
TOTALS			\$304,500.00	\$708,940.69	\$1,428,403.01	\$303,600.00

NOTE: In addition to the federal funds for school buildings provided under Public Law 815, \$333,500.00 was secured from Public Law 804, 76th Congress, October 8, 1940 and Public Law 231, 80th Congress, 1947, \$180,000 Public Law 709, 1950 and \$881,975.00 from the Construction Division, Bureau of Indian Affairs or a total of \$1,395,475.00. The grand total with funds from Public Law 815 is \$4,140,918.00.

TABLE 2

Statistical Data

Data	1958-59	1959-60
<u>A. Financial Data</u>		
1. Amount of Contract Under Johnson O'Malley Act	105,000.00	176,000.00
2. Amount of Federal Funds (JOM) Allotted to Schools	84,696.35	150,049.84
3. Amount of P. L. 874 Receipts Allotted to Schools	96,435.00	256,496.00*
4. Amount Spent for Administration and Supervision	26,498.18**	29,637.74**
<u>B. Pupil and School Data</u>		
1. Number of Schools	42***	41****
2. Number of Indians Enrolled	2,710---	2,341----
3. Percent of Attendance for Indian Pupils	89.0	89.9
4. Average Daily Attendance for Indian Pupils	2,141.2	1,867.66

* Of this amount \$41,296.47 is to be paid for County Tuition and Transportation for 1958-59 and 1959-60.

** Includes the salary and expenses of an Indian Education Guidance Consultant who was employed for the first time during the school year 1958-59.

*** 27 of these schools received JOM funds.

****28 of these schools received JOM funds.

Achievements Since 1940:

1. All the Indian children of compulsory school age (7-16) are now attending school regularly. Indian pupils may attend a classified high school if they so desire and must attend school until they are 16. Bus service in modern approved vehicles is provided all Indian children, who live beyond walking distance to school.

2. The schools, with the exception of four one-room schools, are provided with visual education equipment and materials.

3. Adequate instructional materials such as texts and reference books are provided free.

4. An excellent noon lunch is provided free to eligible Indian pupils, with resulting improvement in the general health of the pupils.

5. The school buildings are well maintained, both inside and outside.

6. High school enrollment and attendance has improved considerably.

7. More Indians are completing high school each year.

8. Since 1940 about twenty schools with mostly Indians enrolled have been closed and the pupils transported to nearby larger schools. As of September 1, 1960 Buck Lake will be closed and the pupils transported to Bemidji.

9. All schools are in session nine months and the school day is six hours long, except in grades one and two.

10. Each teacher holds a valid teacher's certificate issued by the State Department of Education.

11. A full-time Guidance Counselor was added to the State Department of Education administrative staff in 1958 for the purpose of working with the Indian high school pupils in an effort to improve attendance and to reduce the number of "drop-outs".

12. One school added a kindergarten in the fall of 1959.

13. All of the school buildings with the exception of the four rural schools are modern and have excellent equipment and facilities.

14. Much has been done during recent years to provide adequate space for libraries, to improve the library services and to provide the needed library books and periodicals.

15. Results of standardized achievement tests indicate satisfactory progress.

Needed Improvements:

1. Better high school attendance by Indian pupils with fewer drop-outs grades 9-12.

2. Increased number of Indian high school graduates.

3. Increased opportunities for the Indian high school graduates to secure higher education or vocational training.

4. Planned and supervised recreational opportunities for Indian youth and adults.

5. Improve home and school relations and responsibilities.

6. More can be done to improve the desire and need for adult education.

7. More needs to be done to prepare Indian youth for the obligations and responsibilities of adulthood.

8. The school officials need to work closer with all individuals, organizations and institutions interested in the social and economic welfare of our Indian population.

9. A follow-up study of all Indian youth who have dropped out of high school or who have completed the high school course should be made and kept up-to-date.

10. Work opportunities for Indian youth on the reservation and off the reservation should be thoroughly studied.

STATE INDIAN SCHOLARSHIP PROGRAM

The members of the Indian Affairs Commission strongly feel that the long-range solution to the problems the Indians face is to be found in education. Continued efforts must be made by the State to insure that the Indian population of the state has the opportunity and the financial resources to pursue levels of education commensurate with the interests and capabilities of the students. Young Indians must be properly educated in order that they eventually may leave the Indian reservation or community, find satisfactory employment, and take their proper place in society.

Considerable progress has been made in recent years in educating the Indian population. Indian students attend elementary schools and, in increasing numbers, they are going on to high school. Consequently, each year the number of capable Indian students who might profit from going on to institutions of higher learning is increasing. To make it possible for these students to secure training beyond high school, the state scholarship program for Indians should be continued and expanded.

Scholarship aid is especially important to Indian students because they generally come from families with very little income. Also experience has shown that it is difficult for Indian students to find satisfactory employment while attending college. They need to devote full time to their college studies. Outside financial support, such as through state scholarships, plays a crucial role in providing educational opportunities for the Indians.

The state scholarship program for Indians was initiated by the 1955 Session of the Legislature (Chapter 613). That session approved a program of scholarships for Indians to attend accredited or approved schools or business, technical or vocational schools. The scholarships are limited to Indian pupils who have one-fourth degree or more Indian blood and who have

the capabilities to profit from appropriate courses in approved schools. A scholarship may not exceed eight hundred dollars to any student during one year and a student may not receive aid for more than four years.

In the first year of the scholarship program \$5,000 was appropriated. Since then \$7,500 has been available for each school year except for the school year 1958-59 when \$10,000 was available. The Governor's budget request to the 1961 Session of the Legislature is to maintain the level of aid at \$10,000 per year. On the average about 25 Indian youths are aided each year at an average of about \$280 for the year.

A new development in the field of educational opportunities for Indians resulted when the Board of Regents of the University of Minnesota, by resolution, adopted a policy whereby Indian students will be admitted to the University of Minnesota, Morris, free of charge for tuition. The site of the Morris branch was originally an Indian school, and the state, in accepting it from the Federal Government in 1909, agreed to give free tuition to Indian students. This policy will be continued at the Morris branch.