

AAIA's Muschenheim Worried Over Personnel Cut in DIH, PHS

Dr. Carl Muschenheim, chairman of the National Committee on Indian Health of the Association on American Indian Affairs, sent a letter last week to Sen. Carl Hayden, chairman of the Senate Committee on Appropriations, and Congressman Julia

B. Hanson, chairman of the House Committee on Appropriations, and expressing concern for the health and safety of the American Indian.

Muschenheim said the Indian health committee of the AAIA "wishes to call your attention to the serious consequences of the personnel reductions in the program of the Division of

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Muschenheim

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Indian Health, U. S. Public Health Service, in accordance with Section 201, Public Law 90-364."

Public Law 90-364 requires that federal agencies reduce their personnel to the level of operations of June, 1966.

Muschenheim said that at that time, the Division of Indian Health employed 5,370. He said that the application of the PL 90-364 would mean a reduction of approximately 20 per cent in DIH employees.

"Such reductions," Muschenheim declared, "endanger the health and safety of hundreds of thousands of American Indians. They threaten to impede basic programs in hospital care, field health services, public health nursing, prenatal clinics, trachoma controls, and environmental mental health at a time when these programs are desperately needed."

Muschenheim cited President Johnson's message to Congress on the Indian situation in which he said in part:

"The health level of the American Indian is the lowest of any major population group in the United States... The infant mortality rate among Indians is 34.5 per 1,000 births—12 points above the national average... The incidence of tuberculosis among Indians and Alaska natives is about five times the national average..."

"More than half of the Indians obtain water from contaminated or potentially dangerous sources, and use waste disposal facilities that are grossly inadequate... Viral infections, pneumonia, and malnutrition—all of which contribute to chronic ill health and mental retardation—are common among Indian children."

Muschenheim stated that programs designed specifically to attack these problems, to lengthen the Indian's life span from the present 44 years to the average American's 65, to reduce the misery of Indian adults and children from disease and pain, were being jeopardized.

"Indeed, when the present program is already woefully inadequate, it seems an auspiciously inappropriate time to reduce it even further."

"Accordingly, we respectfully request that the Division of Indian Health be exempted from Section 201, Public Law 90-364, so that, at the very least, the present level of operations can be maintained," Dr. Muschenheim concluded.