

Wake of Violet Arrow's Death-

Native Ad Hoc Group's Head Asks Proof of Complaints

By MARGIE BAUMAN

ANCHORAGE — The chairman of the Native Ad Hoc Health Committee said Monday

that Alaska Natives should come forth with details if they have complaints about medical treatment.

"People complain, they say it's bad and I know it is bad, but they have got to back up those complaints," said Mike Harper.

Harper, executive director of the RurAL CAP office at Anchorage, has directed members of the Ad Hoc committee to advise him on any complaints from natives in villages around the state about treatment from Indian Health Service.

The directive from Harper was the latest action in the case of Violet Arrow, an Eskimo woman from Shageluk, who

died April 5 at the Alaska Native Medical Center.

A coroner's jury in Anchorage claims negligence in diagnosis and negligence in providing care, for her death which came after she was shuffled back and forth between the hospital and the Social Development Center, a detoxification facility, four times within a 24 hour period. The jury also found that Ms. Arrow died of pneumonia.

Pathologist, Dr. Robert Hank, testified that pneumonia complicated by a blood clot on the lungs and a broken hip contributed to her death.

Since the coroner's inquiry,

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further charges were rumored to be forthcoming against the Native Medical Center, specifically that intra-uterine birth control devices were inserted in several native women without their knowledge or permission.

Harper said he has not been able to track down the sources of those charges nor the charges that native patients at the hospital are being used for medical experimentation. Carl Jack, director of the Health Affairs office of the Alaska Federation of Natives, Inc., has requested a formal medical audit into the death of Ms. Arrow by a third party of impartial decision.

Harper, meanwhile, said each grievance against the Medical Center will be investigated and a decision made on possible further action.

"We are here to make constructive criticism," he said.

Harper added that his group would work with the Area Native Health Board shared by Lillie McGarbey. Dr. Robert Fortune, director of the Alaska Native Medical Center, said charges of insertions of IUDs took his staff completely by surprise as did those on medical experimentation.

"A lot of our staff feel they are being pre-judged in the papers before they have had a chance to testify at any civil action," he said.

Fortune added that he still felt there was no evidence to support charges of criminal activities connected with the death of Ms. Arrow. Fortune said Dr. Michael Emmick, who saw Ms. Arrow as an outpatient on the day of her death, did everything that was expected of him.

"Maybe it is for a court to decide whether his judgment was good, but I don't think his motives or integrity should be called into judgment at all," Fortune said.

Observers for the Ad Hoc group meanwhile have been monitoring services in the outpatient part of the Medical Center where Emmick is on the

staff, and occasionally in other wards of the hospital, according to spokesman for the Ad Hoc Committee.

Still nearer to the base of the Violet Arrow case, he charges from the Ad Hoc Health Committee on the attitude of hospital staff towards native patients.

"The only way attitudes will change is for people to voice their opinion . . . and with orientation to the native cultures," said Mark Small, a consultant to the National Institute of Alcohol Abuse and Alcoholism. Small has been working with the Health Committee in Anchorage.

"We must allow the natives to be natives again. You cannot build pride into people who are oppressed," Small said.

American Indians did not even get the right of citizenship in their own land until the late 1920's and the right to drink was not accorded American Indians until 1953.

Harper is optimistic about improvements, however. He knows that the Native Medical Center is willing to discuss grievances. Harper also noted complications resulting from a state law, which went into effect October 1, 1972, forbidding the jailing of persons who are drunk simply because they are drunk.

Harper and Fortune agreed that the number of persons in alcohol-related problems treated at the Medical Center had increased substantially since the law went into effect. In fact, Fortune said the average number of alcoholics treated as outpatients is up 120 per cent.

Between January 1 and April 15, 1973, 741 persons were treated in the emergency room of the Native Medical Center and of these more than 40 per cent were alcohol related medical problems, Fortune said.

Fortune said about 20 per cent, or 1 out of 5, of these persons was admitted to the hospital and nearly another 30 per cent were referred to the Social Development Center for detoxification.