

There are several other issues to talk about.

#### TRIBAL COUNCIL MEMBERS -

the members of the Tribal Council are by no means uniform in their understanding or appraisal of the proposed health care system. Those demonstrating a genuinely active level of both interest and support are limited to:

Joe Byrd  
Mary Cooksey  
Paula Holder

James Garland Eagle  
Sam Ed Bush  
Harold DeMoss

"Jiggs" Phillips  
Barbara Mitchell  
Maudie Bazille

and perhaps... Bill Smoke

Troy Wayne Poteete

Don Crittenden

And even among this group, you should expect that probably not more than a half dozen have a reasonably good understanding of the system and its implications. Of the above names, only Maudie Bazille and Bill Smoke did not attend at least part of the roundtable discussions at the *Fin and Feather*, on July 1st and 2nd.

Each has their own perspective of the proposed system. For example, James Garland Eagle has been an active participant in our discussions and supports the proposal with fairly specific reservations: He would like to see a substantial element of traditional Cherokee healing practices incorporated into the clinical system,... would prefer to limit enrollment in the system to Native Americans,... would like special attention and service privileges granted to full-bloods,... and remains concerned about the adequacy of resources for truly good health care.

It has only been slowly, with considerable time and interaction, that many of the council members (including Garland Eagle) have begun to trust my input and to feel comfortable with expressing their honest feelings about the proposal. It may take some time to establish that trust and rapport with the new implementors, as well. But it would seem important that these council members play an active role in the informational "town meetings" to be held throughout the Nation. I would certainly encourage the council members being the prominent "up-front" presentors of the proposed system, but would not yet feel really comfortable with their ability to deal with detailed questions, and believe one of the knowledgeable implementation team should always back them up in public discussions until they gain a more complete understanding of the concepts involved.

The tribe has already taken on major responsibilities under Self-Governance and, even though this is a huge undertaking, I'm confident that the proposed responsibility is not too much. You simply need to assure that you hire really competent leadership to design and operate it.

Starting serious, well-organized lobbying efforts as quickly as possible may be vital. With the national debate about to start on the Clinton Administration's health care reform proposals, the importance of the Cherokee Nation's proposed system could easily become overshadowed and lost unless we can link it to the debate and make it an exciting and integral part of that debate. We know enough about the expected Clinton plans to understand the reforms will deal with (1) controlling expenditures and (2) expanding coverage to the uninsured. Even if it is a "howling success" it will not solve the age-old difficulties of delivering quality health care services in RURAL America.

That's where we can capture the spotlight!