Bringing Effective Native American Substance Abuse and Co-Occurring Prevention and Treatment Programs Home

Charles H. Smith, PhD
Regional Administrator, SAMHSA Region VIII

Rod Robinson
Director, SAMHSA Office of Indian Alcohol & Substance Abuse

Anne Helene Skinstad, PhD
Director, National American Indian and Alaska Native ATTC

Tribal TANF Annual Conference
Denver, CO
August 13, 2013
Today’s Topics

- SAMHSA’s National and Regional Perspective
- Tribal Law and Order Act (TLOA)
- Prevention, Recovery, and Tribal Resources
- Principles of Substance Abuse and Co-Occurring Treatment
- Community & Program Examples
SAMHSA’s Vision

America is a nation that understands and acts on the knowledge that …

- Behavioral health is essential to health.
- Prevention works.
- Treatment is effective.
- People recover.
Examples of SAMHSA grants supporting Tribal programs

**CSAP**
- Strategic Prevention Framework (SPF-SIG)
- Drug Free Communities
- Sober Truth on Preventing Underage Drinking

**CMHS**
- Circles of Care (COC)*
- Garrett Lee Smith: State/Tribal Suicide Prevention Program
- Linking Actions for Unmet Needs in Children’s Mental Health (Project LAUNCH)

**CSAT**
- Access to Recovery
- Recovery Oriented Systems of Care
- Adult Treatment Courts
- Assertive Adolescent and Family Treatment
- Offender Reentry
- SBIRT
- Treatment Drug Courts

*SAMHSA’s only Tribal-specific grant offering*
National Registry of Evidence Based Programs & Practices (NREPP)

www.nrepp.samhsa.gov/

➢ Research Based Practice
  o  Project Venture – National Indian Youth Leadership Project
    www.nrepp.samhsa.gov/programfulldetails.asp?PROGRAM_ID=146
  o  American Indian Life Skills
    www.nrepp.samhsa.gov/programfulldetails.asp?PROGRAM_ID=118
  o  Canoe Journey
  o  Equine Therapy

➢ Practice Based Practice
  o  Native HOPE (Helping Our People Endure)
    www.ihs.gov/nonmedicalprograms/nspn/

➢ Culture Based Practice
  o  Gathering of Native Americans
    www.preventiontraining.samhsa.gov/CTI05/Cti05ttl.htm
  o  Sweat Lodge
  o  Talking Circle
SAMHSA Technical Assistance

- SAMHSA Office for Indian Alcohol and Substance Abuse (OIASA)
  www.samhsa.gov/tloa

- National American Indian Addiction Technology Transfer Center
  http://www.nattc.org/index.html

- Center for the Application of Prevention Technologies
  http://captus.samhsa.gov/about-us

- Native American Center for Excellence
  http://nace.samhsa.gov/

- National Child Traumatic Stress Network
  http://nctsn.org/

- Disaster Technical Assistance Center
  http://www.samhsa.gov/dtac/
The NAIAN-ATTC is the national subject expert on the adoption of culturally legitimate addiction treatment/recovery services to support professionals working with AI/AN clients with substance use and other behavioral health disorders.
Native America Center for Excellence

NACE is a national resource to address issues related to substance abuse prevention and behavioral health in Native American communities

- Information Resources
- Training and Technical Assistance
- Specialized Services for SAMHSA Programs & Tribal Grantees

http://nace.samhsa.gov
Additional Resources

- Indian Health Services (IHS)  
  [www.ihs.gov/](www.ihs.gov/)

- National Center on Substance Abuse and Child Welfare  
  [www.ncsacw.samhsa.gov/](www.ncsacw.samhsa.gov/)

- National Indian Child Welfare Association  
  [www.nicwa.org/](www.nicwa.org/)

- One Sky Center  
  [www.oneskycenter.org/](www.oneskycenter.org/)

- Western Interstate Commission on Higher Education  
  [www.wiche.edu/](www.wiche.edu/)
Tribal Law and Order Act of 2010 and SAMHSA: an Update from the Office of Indian Alcohol and Substance Abuse

Rod K. Robinson
Director, Office of Indian Alcohol and Substance Abuse
Substance Abuse and Mental Health Services Administration

ACF Tribal TANF Annual Meeting
August 13, 2013
Denver, Colorado
SAMHSA/OIASA leads collaboration to implement TLOA in Indian Country

- **Setting the context?** — the dramatic impact of substance abuse in Indian country
- **What is the approach?** — Congress’ solution and the federal response to concerns expressed by Tribes
- **How are we doing?** — progress to date implementing TLOA
- **What’s next?** — plans and works in progress
Through “Indian Eyes”...
American Indians and Alaska Natives in the United States

Legend:
- American Indian reservations and/or off-reservation trust land
- Oklahoma Indian Territory
- United States Indian Areas
- State Recognized American Indian Tribal Areas
- Alaska Native Regional Corporations
- Alaska Native Regional Council

US Census Bureau
American Indian and Alaska Native Population in the United States 2000

Primary source: U.S. Census Bureau, Census 2000

Pacific Ocean
Atlantic Ocean

American Indian and Alaska Native Population: 2000
Alone or in Combination

The Native Population By Race and Percent of Native Population:

- Hispanic/Latino
- Native American
- African American
- Asian
- White
- Other

The percentage of the Native population is shown by state.

The map illustrates the distribution of American Indians and Alaska Natives across the United States.
“Our children are taking their lives, our families are being torn apart, our culture is disappearing because of substance abuse, suicide and violence, it is time to act by committing our time, ideas and resources to stop this destruction”,

“These words come straight out of my heart, my tears and my prayers”.
Health Disparities: A Snapshot

Indian Country Rates Nationally*  
- 72% higher suicide rate  
- 92% higher homicide rate  
- 149% higher unintentional injury rate  
  (includes motor vehicle crashes)  
- 195% higher diabetes rate  
- 500% higher tuberculosis rate  
- 519% higher alcoholism rate  

Urban Indian Rates Nationally*

- 38% higher accident mortality
- 54% higher diabetes mortality
- 126% higher chronic liver disease mortality
- 178% higher alcohol-related mortality
- Urban Indian youth are nearly 5 times more likely to attempt suicide requiring hospitalization than all other urban youth combined

Co-Occurring Psychiatric Problems

Any Co-Occurring Psychiatric Problem 69%
- Conduct Disorder 47%
- Mood Disorder NOS 44%
- Attention Deficit/Hyperactivity Disorder 41%
- Traumatic Stress Disorder 34%
- General Anxiety Disorder 19%

Ever Physical, Sexual or Emotional Abuse 73%
- High Severity Victimization (GVS>3) 58%
- Ever Homeless or Runaway 52%
- Any Homicidal/Suicidal Attempts/Thoughts PY 24%
- Any Self Mutilation 17%
- Prior Mental Health Treatment 51%

Count of Co-Occurring Psychiatric Diagnoses* 31%
- One 18%
- Two 16%
- Three 15%
- Four 12%
- Five 8%

* Count of Conduct Disorder, ADHD/ADD Major Depressive Disorder, Traumatic Stress Disorder, and Generalized Anxiety Disorder

Source: GAIN-I 2010 SuperData subset to Native American/Hawaiian/Alaskan (n=3,749)
Past Year Crime & Justice Involvement

- Any Violence or Illegal Activity: 76%
- Physical Violence: 66%
- Any Illegal Activity: 57%
- Any Property Crimes: 41%
- Other Drug Related Crimes*: 38%
- Any Interpersonal/ Violent Crime: 38%
- Lifetime Justice Involvement: 86%
- Current Justice involvement: 71%
- 1+/90 days In Controlled Substance Treatment: 50%

*Dealing, manufacturing, prostitution, gambling (does not include simple possession or use)

Source: GAIN-I 2010 SuperData subset to Native American/Hawaiian/Alaskan (n=3,768)
• **Setting the context?** — the dramatic impact of substance abuse in Indian country

• **What is the approach?** — Congress’ solution and the federal response to concerns expressed by Tribes

• **How are we doing?** — progress to date implementing TLOA

• **What’s next?** — plans and works in progress
Tribal Law and Order Act of 2010

- Signed into law July 29, 2010
- Reauthorizes and amends: Indian Alcohol and Substance Abuse Prevention and Treatment Act (IASA) of 1986
Who are the Players?

Shared roles for addressing the issue

- **Tribes** are encouraged to participate and lead
- **SAMHSA**: prevent substance abuse and promote behavioral health
- **IHS**: treatment and rehabilitation
- **BIA/BIE**: programs in education, social services, law enforcement
- **DOJ**: public safety and law enforcement issues critical to tribal communities
Tribal Law and Order Act of 2010

Key Features:

• **Three main goals**

  (1) Determine scope of the problems faced by Tribes

  (2) Identify relevant resources and programs of each partner agency

  (3) Coordinate existing agency programs with those established under the Act
Tribal Law and Order Act of 2010

Key Features:

• **Respect for Tribal sovereignty**
  - Unique historical, legal, moral responsibility
  - Tribal sovereignty to determine what’s best for their people

Together, these are the basis of:

- Government-to-government relationship
Tribal Law and Order Act of 2010

Key Features:

• **Encourage development of “TAPs”**

  ➢ **Tribal Action Plan →** coordinate resources and programs to combat substance abuse in the tribe

  ➢ **Federal cooperation →** at the tribe’s request, federal partner agencies help develop a TAP

  ➢ **Implementation →** federal area representatives enter into agreement with tribe to implement TAP
• **Setting the context?** — the dramatic impact of substance abuse in Indian country

• **What is the approach?** — Congress’ solution and the federal response to concerns expressed by Tribes

• **How are we doing?** — progress to date implementing TLOA

• **What’s next?** — plans and works in progress
IASA Inter-departmental Coordinating Committee

Executive Steering Committee
Chair: SAMHSA/OIASA
Co-Chairs: IHS  OJP  OTJ  BIA  BIE  DoEd

TAP Workgroup
Chair: IHS

Minimum Program Standards Workgroup
Chair: SAMHSA

Inventory/Resources Workgroup
Chair: SAMHSA

Communications Workgroup
Chair: BIA

Native Youth Educational Services Workgroup
Chair: BIE
SAMSHA Charged to Lead the TLOA Effort(s)

**Empowered**

**Feedback/Recommendations**

**Workgroups**

- Tribal Action Plan (TAP)
- Minimum Program Standards
- Native Youth Educational Services
- Inventory/Resources
- Communication/Newsletter/Website
- Complete Detail Work Specific to Directives

**Interdepartmental Coordinating Committee**

- OIASA

**OIASA**

- Align, Leverage, Facilitate & Coordinate
- Pool of Resources & Response Protocol for Ideas & Input
- Engage with Tribes & Provide Linkage to OIASA
- Lead the Community & Federal Partners to Address Substance Abuse
- Local Partnerships that create Plans & Resources in the Community
- Tribe Specific Action Planning

**IASA Membership**

- Regions/Areas

**Regions/Areas**

- Tribes

**Tribes**

- TCC's

**TCC's**

- TAPs

**TAPs**
What is different with this TAP

• It is a Strategic Public Health and Safety planning process.

• It focuses on Substance Abuse, as the number one contributing factor to poor health, suicide, violence and hopelessness within Native Nations.
Value of Tribal Action Planning?

• Draws the community together for a specific purpose i.e. “impacts of substance abuse”
• Allows for a process to determine need and current capacity to meet the need
• Builds or strengthens service infrastructure
• Helps the tribe to be well positioned for opportunity or to contend with unplanned changes in the funding environments
Tribal Action Planning Guidelines

• Submission of a tribal resolution
• Request for technical assistance to conduct a strategic planning consultation
• OIASA will research the TA resources available and apprise the tribes.

• Tribes will submit their Tribal Action/Strategic Plan
• OIASA will begin tracking the plan to ensure that action is taken and/or funding opportunities are accessible to tribes in a timely manner
• **Setting the context?** — the dramatic impact of substance abuse in Indian country

• **What is the approach?** — Congress’ solution and the federal response to concerns expressed by Tribes

• **How are we doing?** — progress to date implementing TLOA

• **What’s next?** — plans and works in progress
What’s Next for TLOA, IASA and OIASA

• Continued federal collaboration to;
  ➢ Identify and create easier access to resources, help guide formal needs assess and evaluation, make T/TA available in a more coordinated fashion.
  ➢ TAP guidance: Webinars, tool-kits, TA outreach
  ➢ Improve communicate links/conduits with Tribes
  ➢ Conduct a Tribal Policy Academy – SAMHSA/CMHS
  ➢ Creation of the National AI/AN Addiction Technology Transfer Center – SAMHSA/CSAT
SAMHSA’s Priorities

- Prevention and Health Promotion (SI 1)
- Trauma and Criminal Justice (SI 2)
- Health Care Reform (SI 4)
  - Enrollment Preparation
  - Parity in Medicaid and Essential Benefits
  - Provider Capacity Development and Workforce
  - Primary Behavioral Healthcare Integration
  - Uniform Block Grant Application FY 2014 & 2015
  - Services, Payment Reform, Quality/Measures
Prevention and Health Promotion

- Substance Use and Mental Illness; Build emotional and behavioral health
- Suicide Prevention
- Prevent Underage Drinking
- Prescription Drug Abuse/Misuse
Recovery

• Working common definition of recovery from mental disorders and/or substance use disorders

• A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential

• Incorporating into grants

• Exploring differences between recovery from MH conditions and from addictions
Recovery

**HOME**
Permanent Housing

**COMMUNITY**
Peer/Family/Recovery Network Supports

**HEALTH**
Recovery

**PURPOSE**
Employment/Education

**Individuals and Families**

---

[Image of Recovery diagram]

---

[Website logo: SAMHSA]
Thoughts, Comments, & Questions...

Thank You!

Charles H. Smith, PhD
Regional Administrator, SAMHSA Region VIII
Substance Abuse and Mental Health Services Administration

Rod Robinson
Director, SAMHSA Office of Indian Alcohol & Substance Abuse
Substance Abuse and Mental Health Services Administration

Anne Helene Skinstad, PhD
Director, National American Indian and Alaska Native ATTC