Greetings to our partners! This is your latest update from the NCAI Policy Research Center, which shares recent studies, information on research forums, and PRC initiatives. An electronic copy is available to share on our website: www.ncai.org/PRC.

Reflecting on a Crisis
Curbing Opioid Abuse in Communities

Many tribal nations are facing extreme impacts of drug abuse on their citizens, maternal and family health, and the safety of their communities. The Policy Research Center has compiled some of the leading research on how opioid use and abuse are affecting Indian Country and ways in which health care providers and communities can respond.

What is the historical context of the opioid epidemic? Health care providers must walk a fine line in adequately treating chronic pain and simultaneously preventing the overuse or over-prescription of opioids. For more than 20 years, opioids were liberally prescribed for long-term pain management and marketed as non-addictive—despite the absence of long-term controlled studies of addiction rates among patients. With their demand increasing, opioids (Oxycontin, in particular) were readily trafficked alongside heroin—resulting in a 137 percent increase in drug overdose deaths and 200 percent increase in overdoses between 2000 and 2014.¹

Among American Indians and Alaska Natives (AI/ANs) the opioid epidemic has been destructive. Between 1999-2009, the incidence rate ratio for opioid-related deaths among AI/ANs between 15-64 years old was slightly higher (0.86) than Non-Hispanic Whites, 7.5 times higher than African Americans, and 13 times higher than Asian American/Pacific Islanders.² More recent data from the Centers for Disease Control and Prevention (CDC) reveal a similar trend:

Youth are the most likely to abuse prescription drugs. Over the course of 2014, more than 1 in 10 (12 percent) 18 to 25 years olds used prescription drugs for nonmedical reasons. According to NIDA, there has been a 4-fold increase in overdose deaths from prescription drugs (mainly opioid) between 1999 to 2014, equating to nearly 5

deaths per day among young adults ages 18-24. The CDC reported that about 1 in 10 AI/ANs age 12 or older used prescription painkillers for nonmedical reasons in 2012, as compared with 1 in 20 Non-Hispanic Whites and 1 in 30 African Americans.

There are significant maternal-child impacts. Across the US, the National Institute on Drug Abuse (NIDA) estimates that every 25 minutes a baby is born suffering from opioid withdrawal, or what is referred to as neonatal abstinence syndrome. This represents a 5-fold increase in the syndrome since 2000. There are a range of public health interventions being directed at pregnant mothers whose babies are born drug-affected.

The role of trauma in opioid abuse is evident. Opioid addiction rates have been found to be higher among veterans dealing with trauma and chronic pain. In many communities, opioid and prescription drug abuse is placed squarely within a larger historical legacy—but one that will be equally overcome.

“There is common agreement that our community's drug epidemic is rooted in historical and generational trauma. There is also common agreement that, as a tribe, we are strong and resilient and can create support...in order to heal the next generation.”

- Northern Plains tribal member

There are important connections between opioids and human trafficking. According to Dr. Hanni Stoklosa, an emergency physician at Brigham and Women’s Hospital in Boston, Massachusetts, over 50 percent of patients who are survivors of trafficking are struggling with opioid addiction. In most cases, opioids either “led them to being trafficked or kept them in this cycle of exploitation.”

Tribal nations are responding to the crisis through various means.

- White Earth Nation has not only successfully engaged law enforcement in decreasing the presence of drugs on the reservation, but they have trained over 100 tribal employees in how to treat overdoses, saving at least 16 lives in the past year. The Nation also has a Maternal Outreach and Mitigation Service, which has already helped 48 mothers, babies, and families with addiction and recovery.
- The Cook Inlet Tribal Council (CITC) Recovery Services department, one of only two detox centers in Alaska, provides treatment to about 850 individuals each year. Services include detox, residential inpatient and outpatient care, screening, assessment, and referral. CITC works with Southcentral Foundation and plans to partner with Knik and Chilkaloon tribal organizations and the Mat-Su Health Foundation.
- The Indian Health Council, Inc. in California has implemented a Pill Take Back Project, which is working to promote proper use and disposal of prescription opioids.
- The Mashpee Wampanoag Tribe declared a state of emergency in response to the rise in opioid drug abuse in July 2016 and dedicated its 95th annual powwow to breaking the cycle of addiction, offering fireball ceremonies to heal those struggling with illness.

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• The Lummi Nation’s Healing Spirit Opioid Treatment Program offers medication assisted treatment, counseling, and accountability through drug testing when treating opioid dependence.

• The Leech Lake Band of Ojibwe operates an Opioid Treatment Program, with a mission “to provide community based, culturally focused substance addiction recovery services that will promote holistic health and a drug free lifestyle for our clients, their families, and our communities.”

**The Indian Health Service is partnering to dispense life-saving medication.** Operating from an agreement formalized in December 2015, the more than 90 IHS clinics began dispensing Naloxone, a medication that can reverse the effects of prescription opioid or heroin overdose, to as many as 500 BIA Office of Justice Service officers. In conjunction, training is offered to the officers as first responders providing emergency treatment. Also, in July 2016, IHS implemented a new policy for Prescription Drug Monitoring Programs (PDMP) that requires clinicians to cross-reference state PDMP databases prior to dispensing any opioid for more than seven days.

**Congress passed the Comprehensive Addiction and Recovery Act (CARA).** On July 13, Congress passed CARA with broad bipartisan support in both chambers. CARA authorizes federal grants to tribal, state, and local governments to test new approaches to preventing and treating opioid addiction. The bill authorizes $181 million in new spending, which Congress must provide by appropriation.

**The federal government has designated new funding to combat the opioid epidemic.** The US Department of Health and Human Services (HHS) announced $53 million in funding to 44 states, four tribes, and the District of Columbia to improve access to treatment for opioid use disorders, reduce opioid-related deaths, and strengthen drug misuse prevention efforts. There are three strategies for these funds—prevention, intervention, and rehabilitation. Of the $53 million, $31 million is directed to prevention and $11 million to treatment. President Obama has asked Congress for an additional $1.1 billion dollars to expand treatment services.

**States are responding to the crisis as well.** At the 2016 Winter Meeting of the National Governors Association (NGA), forty-six governors from across the nation signed the Compact to Fight Opioid Addiction. “This marks the first time in more than 10 years that governors have developed a compact through NGA to spur coordinated action on an urgent national issue.”

“It is important to recognize that we arrived at this place on a path paved with good intentions,” the US Surgeon General Dr. Vivek Murthy wrote in a letter to all physicians this August 2016, acknowledging that “the results have been devastating.” With the launch of [www.turnthetiderx.org](http://www.turnthetiderx.org), he hopes to build a movement among health care providers to end the opioid epidemic through a 3-pronged approach: safer prescribing practices, medication assisted treatment, and overdose prevention.

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New Resources Available
(Continue to Page 3 for the latest research reports from the PRC)


RED Talks. A Native spin on TED Talks, RED Talks are a way to share Native wisdom, tribal research, policy and community success stories to shape the future of tribal nations. The data and ideas shared in these short videos will empower tribes to use their sovereignty to implement programs and policies that work, build research capacity, and create sustainable opportunities for 7 generations of Native people. Check them out at: https://www.youtube.com/channel/UCGSdSFOXt5uVK43i67Nq-Vg.

The new issue of American Indian and Alaska Native Mental Health Research is now available! This issue features work on factors affecting suicide in different groups, sexual health protective factors, substance use in pregnancy, and elders’ lessons about resilience. To access the journal, please visit: http://www.ucdenver.edu/academics/colleges/PublicHealth/research/centers/CAIANH/journal/Documents/Volume%2023/23(4).pdf.

Intellectual Property Issues in Cultural Heritage (IPinCH) at Simon Fraser University in British Columbia has released a new series of reports, which may be accessed at http://www.sfu.ca/ipinch/outputs/reports/index.html:
- The Journey Home - Guiding Intangible Knowledge Production in the Analysis of Ancestral Remains
- Education, Protection and Management of ezhibiigaadek asin
- Yukon First Nations Heritage Values and Resource Management Perspectives from Four Yukon First Nations

The State of Childhood Obesity. The Robert Woods Johnson Foundation and the Trust for America’s Health have recently released new data displays and analyses—disaggregated to counties, as well as by race/ethnicity—on childhood obesity and food insecurity. To view the data, please visit: http://stateofobesity.org/childhood.


Upcoming Research Conferences
The American Public Health Association Annual Meeting & Expo will be in Denver, CO from October 29-November 2, 2016. The theme is “Creating the Healthiest Nation: Ensuring the Right to Health”: http://www.apha.org/events-and-meetings/annual/schedule.

The Call for Proposals is now open for the 9th Annual Native American and Indigenous Studies Association Meeting, to be held in Vancouver, BC from June 22-24, 2017. The deadline for proposals is November 1, 2016: https://www.naisa.org/call-for-papers-2017.html.

On November 10, 2016, the Stephenson Cancer Center at the University of Oklahoma will host a National Meeting on Precision Medicine & Cancer in American Indian & Alaska Native Communities in Oklahoma City,
OK. Guest speakers include Dr. Douglas Lowy (National Cancer Institute) and Congressman Tom Cole (R-OK). For more information, please visit: http://www.precisionmedicineandcancernationalmeeting.com/.

The 115th Annual American Anthropological Association Meeting is taking place November 16-20, 2016 in Minneapolis, MN. The theme is “Evidence, Accident, Discovery,” and features executive sessions such as “Beyond Ontology: Indigenous (Im)materiality and Relatedness”: http://www.americananthro.org/AttendEvents/.

NCAI Policy Research Center
PROJECTS & RESOURCES

Call in for our inaugural Tribal Research Teleconference! On Tuesday, November 15th from 3:00-4:00pm (EST), the PRC will host the first Quarterly Tribal Research Teleconference Call. Save the date & join us at 1-888-244-8150, code: 1017767. For further information, contact Deana Around Him at daroundhim@ncai.org.

Participate in our Tribal Data Survey! NCAI’s tribal data practices survey will officially launch at the 73rd Annual Convention in Phoenix! The survey is part of a National Science Foundation funded project that examines the current tribal data landscape and how to improve access, development, and analysis of critical information for tribes and communities. Surveyors will be available throughout the Convention to collect responses on tablets; it should only take 20 minutes. You may also complete the survey online or in paper format. Please participate in the survey so we can improve tribal data in Indian Country! If you have questions or would like information, please email research@ncai.org.

NEW! One-Page Data Reports on Native Child Health & Wellness. As a part of the PRC’s partnership with the National Indian Child Welfare Association and the Annie E. Casey Foundation to produce a report titled, Strength in Numbers: Using Data to Advance a Deeper Understanding of Native Youth and Families, a series of one-pagers reporting data from Alaska, Montana, New Mexico, and Oklahoma will be released over the coming months. Our first set of one-pagers, featured information on system involvement, are available at: http://www.ncai.org/policy-research-center/research-data/data-resources.

Alaska: Child Health & Wellness

Montana: Child Health & Wellness

New Mexico: Child Health & Wellness

Oklahoma: Child Health & Wellness

Supporting our Veterans: Check out our newly published brief on tribal veterans! In an effort to synthesize information relating to the status of our Native veterans, the Policy Research Center has compiled various reports, highlighted tribal initiatives, and shared policy recommendations. In the interest of honoring those who have served, please share further resources with us and improve this working document. It can be online online at: www.ncai.org/policy-research-center/research-data/prc-publications/VeteransBrief.pdf.

NEW! Policy Brief on Trafficking in Indian Country. In a newly released brief titled, Human Trafficking: Trends and Responses across Indian Country, the PRC paints a portrait of human trafficking in AI/AN communities—from its root causes and historical context to the current statistics—in order to emphasize the systemic policy and program levers that are essential in combating this crime. Our goal is to support tribal nations in promoting health and justice for their citizens by raising awareness of, and engagement with, this critical issue. To access the full brief, please visit: www.ncai.org/policy-research-center/research-data/prc-publications/TraffickingBrief.pdf.