



Tribal Partners Common and Shared Practices Brief

Two of the most pressing public health concerns in American Indian and Alaska Native communities are substance use and behavioral health. Tribes, Tribal organizations, Federally-Operated, and Urban Indian health programs are working to provide prevent and treat opioid use disorder and substance user disorders and/or behavioral health concerns, like depression and suicide. The National Indian Health Board (NIHB) serves as a technical assistance provider to all of the Tribal partners providing training, resource brokering, networking opportunities, and open information exchange on both evidence and practice-based activities.

Most Tribes and Tribal partners have the ability to create a line of programming that best aligns with local cultural and community mores, resources, and staffing. NIHB worked with a small sample of partners to create a profile of some common or shared elements that appear across multiple partners; this brief seeks to highlight those practices and activities. This is not a comprehensive review of all of the activities amongst all Tribal programs or treatment centers partners, and cannot be generalized to all Tribes, nor should this be seen as a presentation of best practices. This is simply a presentation of programmatic components that appear across a small sample of Tribal partners. NIHB hopes that Tribes and Tribal programs can utilize this information to inform their own local programmatic development, enhance what they are currently implementing, or present options for overcoming barriers that may have been encountered.

The brief is organized into four parts that thematically explore areas of value to Tribal partners: Primary Programmatic Activities, Program Outcomes, Successful Components, and Strengthening Future Programs.

Primary Programmatic Activities

Tribal communities are generally permitted to create a cadre of programs and activities that reflect the resources and culture of the community. Because of this, activities varied, and included the implementation of standardized curricula, cultural activities, social events, and educational forums. Tribal partners enjoy the autonomy to work with project officers and behavioral health advisors to tailor programming that will be potentially more effective for their local population. Common program elements did surface though, and the following list contains some of the more popular, general activities:

- Organized support groups and clinical services for behavioral health
- Structured trainings and educational programs for staff on topics of health and wellness
- Scheduled community educations and social events for both youth and adults
- Community and school outreach
- Focused collaboration with key community partners (including schools, businesses, leadership, and other health and wellness programs)
- Media utilization and development to build awareness and increase awareness
- Integration and teaching of cultural activities into more structured prevention programming
- Seasonal camps focused on youth character development and health education

While there are many Tribal partners that are using the same or similar structured curricula, there are not enough programs using a single curricula to note in this brief. It is noteworthy to mention that programs have not shied away from creating their own (or adapting an existing) curriculum to meet their own needs. Several Tribal partners have utilized the communication and networking between partners to learn from the experiences of Tribal partners and borrowed elements of another's programming. This only speaks to the value that creating these sharing venues for Tribal partners.

Program Outcomes

The goal of all participating Tribal partners is to reduce drug abuse and behavioral health risk amongst Tribal communities. When queried what specific outcomes Tribal Partners were seeking to achieve with the programming, responses varied according to the focus of the programmatic elements. However, four themes arose that focused on proposed out-comes: 1.) Increase the knowledge and engagement within the community; 2.) Increase collaboration between Tribal members, school, and local health entities; 3.) Increase access to clinical and behavioral health services in Tribal areas; and 4.) Increase the sophistication and relevancy of programming.

Community-based programming almost always carries an element of education and awareness building. A common proposed outcome of participating Tribal partners was to seek to increase the knowledge of community members about suicide risk (especially to youth), impact of suicide, methamphetamine as an illicit drug, and the impact of meth-amphetamine use. Building knowledge is seen as the first step before a community can personalize the information and conceptualize its local impact. It is only after knowledge is raised and internalized that a community can truly be engaged and mobilized.



By increasing the collaboration between schools, local health clinics/ programs, and Tribal members, programs seek to maximize resources, avoid duplication, navigate programmatic overlap, and create a seamless web of services for Tribal members that seeks to eliminate loopholes and increase reach of the treatment and preventative services. This is accomplished by sharing staff, creating community coalitions or planning groups that are made up members of multiple programs, including community input into planning and implementation processes, and creating effective communication strategies that uses varied media, multiple channels, and cross-pollinating program-specific community channels.

Tribal partners acknowledge that the best programs can exist, however, if people do not participate in the programs or do not have access to services, then the programs will ultimately fall short of achieving their goals. So a common outcome among the participating Tribal Partners was to increase access to the available clinical and behavioral health services – whether they be new programs created by funds or existing programs. So exerting time and effort to arrange for transportation for community members, creating programs with flexible schedules, and creating outreach services that can move into the community were all common activities to achieve this outcome.

In order to increase the level of programming, Tribal partners are instituting skills-building and training opportunities for their staff on topical matters such as MAT, counseling, facilitation, overdose prevention and treatment modalities. Partners are also ensuring that programs are culturally relevant and responsive by training staff on local cultural practices, and adapting (or creating) programs that are more relevant to Native youth.

Successful Components

When asked what specific elements of their individual programs allowed them to be successful, responses among respondents were wide-ranging. Respondents interpreted the word successful differently, and understandably so given the variance in local activities. However, the following are some common elements that apparently played a significant role in shaping successful and effective programs.

Staffing Collaboration

Collaboration was key to success. Staff that openly communicated and offered up collaborative opportunities for planning and activity implementation to other clinical services, departments, agencies, and local schools were more successful in recruiting participants and garnered broader community support. The collaboration also increased programmatic opportunities by involving the expertise and experience of other professional staff in the community. In the long-run, such collaboration helps to eliminate ‘turf battles’, and increases prospects for future funding. Staff also noted that they greatly enjoyed working with staff from other programs and departments, and that it helped to increase their sense of efficacy.

Community Engagement

A recurring theme across multiple realms of inquiry was the need for community engagement. A program cannot succeed if the community is not actively involved in the planning, implementation and evaluation of any and all activities. This includes involving community members, but also approaching local social groups, event planning bodies, and businesses to explore opportunities for support, donations, mutual benefit, or just to make sure that they are aware of the program. Some partners noted the success they found by meeting with Tribal council members to make sure that they are aware of programming and what it was trying to achieve. Respondents also noted that some of their most well-attended activities were those that involved not just those that were active participants in structured activities, but invited all Tribal members to participate in some community-centric event (e.g., sporting tournament, feast).

Culturally Relevant Activities

The inherent value of incorporating traditional and cultural activities into local community-based prevention programming has long been documented.¹ The impact of such activities on suicide and substance use is not direct, rather it is indirect.² They strengthen self-esteem, community connectivity, family bonds, and cultural pride, which work in combination with direct prevention activities (like education, awareness of peer influence, and skills-building) to create a more comprehensive prevention strategy. The cultural activities, varied from community to community, but include dancing, drumming, preparation of traditional food, Indigenous sports and games, traditional camps, and certain ceremonial practices. The inclusion of elders into programming was also seen as an important culturally specific activity. Input also reflected that these cultural activities were the most valued by participants and the activities that staff enjoyed conducting the most.



Consistent Presence

It bears mentioning that that respondents noted that increased value in holding activities consistently and regularly. This helped to increase community visibility, and conveyed a sense of value to the services that were being provided. It also helped to strengthen participation, recruitment and retention.

Community Feedback Loops

Community-based participatory frameworks have become a hallmark of successful programming in Native American communities.³ A cornerstone of this approach is the ability to regularly receive and incorporate feedback from the community to first create relevant and informed programming, and then continuously evaluate and tailor to improve and strengthen programming. Partners sought to create opportunities for verbal and written sharing of feedback during scheduled events and meetings. This also fostered a sense of ownership among program participants.

Use of Media

Several programs found the use of media as a very helpful tool in both promoting their program and activities and as a general education and awareness building tool. Some used airtime on subscription services (i.e., Good Health TV) while other Tribal partners created their own video or radio announcements. Some also tapped into the power of social media to reach a broader audience, and appeal to younger Tribal members.

Strengthening Future Programs

When asked what could be done in the future to strengthen programming locally, responses all revolved around infrastructure issues with an emphasis on sustainability and increased funding. Increased funding would expand programmatic opportunities and potentially increase the impact of funding and partnerships.

Sustainability

All respondents spoke to the need to know that long-term, stable funding would be available. Such information would ease staff anxiety, ease programmatic stress, and allow for long-term planning. Accessing long-term funding would also allow Tribal partners to expand their programs, and hire additional staff.

Staffing

Staffing was another recurring theme. Tribal partners understood the value of a strong and dedicated staff, and repeatedly confront staffing challenges. Respondents believe that additional resources to secure dedicated staff and provide them with adequate support and training could only strengthen local programming.

Increased Collaboration

Tribal partners want the ability to collaborate with a larger network and reach out to other programs and departments on the reservations and in the area. The value of collaboration was a recurring theme among respondents, and the value cannot be underestimated. Partners believe that even more collaboration would enhance programming and compound the impact that they already have.

For More Information or to Request Technical Assistance

For more information on the opioid funding, or if you would like to request technical assistance or learn about the services that the National Indian Health Board can provide for your Tribal program, please contact NIHB directly at (202) 507-4070, or by visiting: www.nihb.org. You can also contact SAMHSA at <https://www.samhsa.gov/tribal-affairs>

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¹ Sanchez-Way, R., & Johnson, S. (2000). Cultural practices in American Indian prevention programs. *Juvenile Justice*, 7(2), 20-30.

² Zickler, P. (1999). Ethnic identification and cultural ties may help prevent drug use. *NIDA Notes*, 14, 3.

³ Davis, J.D., Erickson, J.S., Johnson, S.R., Marshall, C.A., Running Wolf, P., & Santiago, R. L. (Eds.). (2002). *Work Group on American Indian Research and Program Evaluation Methodology (AIRPEM), Symposium on Research and Evaluation Methodology: Lifespan Issues Related to American Indians/Alaska Natives with Disabilities*. Flagstaff: Northern Arizona University, Institute for Human Development, Arizona University Center on Disabilities, American Indian Rehabilitation Research and Training Center.

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