

State Efforts to Reach and Serve American Indians and Alaska Natives with Opioid and Stimulant Use Problems

2024 State Opioid Response (SOR) Grant Issue Brief

Background and Overview

The State Opioid Response (SOR) grant is administered by the Substance Abuse and Mental Health Services Administration (SAMHSA) to provide resources to states to address opioid misuse, opioid use disorder (OUD), and the opioid overdose crisis. States and territories can use SOR funds to increase access to Federal Drug Administration-approved medications for opioid use disorder (MOUD) and the continuum of care for stimulant misuse and use disorders (StUD).



This issue brief will describe common service models and evidence-based practices that states and territories have implemented with SOR funding to provide substance use disorder (SUD) services across the continuum of care for American Indians and Alaska Natives.

Most Common Initiatives for American Indians and Alaska Natives Implemented by States with SOR Funds

The National Association of State Alcohol and Drug Abuse Directors (NASADAD) conducted an analysis of 2023 SOR-funded initiatives that aim to provide culturally appropriate services across the continuum of care for American Indians and Alaska Natives. The analysis revealed six initiatives and services commonly implemented by the Single State Agencies (SSAs) for alcohol and drugs that administer the SOR Grants. The chart below summarizes these initiatives.

Initiative	Summary	Number of State/Territorial Initiatives
Recovery Support Services	Recovery support services are non-clinical services that support individuals in their efforts to reach and sustain recovery and includes peer support, care coordination, wraparound services, and recovery housing. States have implemented initiatives to provide culturally	17

	relevant recovery services that incorporate traditional healing practices for Tribal communities.	
Prevention Programs	Prevention initiatives included evidence-based primary prevention programs, media campaigns, arts programs, and parenting classes, which were designed or adapted to be congruent with Tribal values and culture. States fund prevention programs to address risk factors and build protective factors like resiliency, healthy decision-making, and Tribal identity and expression for youth, families, and communities.	12
Overdose Prevention and Reversal	Overdose prevention and reversal efforts involve educating communities about how to administer overdose reversal medications like naloxone and facilitating widespread distribution of the medications. States often work with Tribal communities to provide overdose reversal training and medications.	12
Treatment Services	Treatment for SUD is highly individualized, and states support different treatment forms, levels, and settings to serve their residents. States have supported Tribal health providers in implementing various SUD treatment services like intensive outpatient programs, residential programs, and contingency management, and provided funding to support the treatment costs for Tribal citizens who are uninsured or otherwise in need of SUD treatment services.	8
Training and Technical Assistance (T/TA)	Several states have used SOR funds to share SUD knowledge and best practices with Tribal and Urban Indian communities and health providers to support their implementation of SUD services and supports. States have also implemented T/TA for SUD treatment and recovery providers regarding providing culturally competent care for Tribal communities that they serve.	7
Medications for Opioid Use Disorder (MOUD)	MOUD is an evidence-based treatment that has been shown to improve the overall health and wellbeing of those with OUD by blocking cravings, reducing or eliminating withdrawal symptoms, increasing treatment and recovery retention, and decreasing risk of death from opioid overdose. Several states have partnered with Indian Health Programs and other community-based providers to improve MOUD access among American Indians and Alaska Natives.	5

Summary of Initiatives Serving American Indians and Alaska Natives

States have used SOR funding to implement a wide range of programs and services for American Indians and Alaska Natives, often implemented through partnerships with Tribal health providers, schools, and other Tribal community organizations. These initiatives combine and adapt evidence-based models and services to incorporate indigenous knowledge and values and traditional healing practices.

The most common initiative that states have implemented with SOR funding to reach and serve American Indians and Alaska Natives was **recovery support services** for individuals with SUD, their families, and their communities. Initiatives included the creation of a specialized Traditional Peer Support certification for Alaska Natives, American Indians, and indigenous peer support professionals; peer outreach services for Tribal communities; traditional healing and sweat lodge offerings; training for treatment providers on culture-based recovery; employment of recovery coaches that collaborate with Tribal emergency medical services and health centers; transportation services for individuals to access treatment services; and jail re-entry programs for American Indians and Alaska Natives to reduce barriers to recovery and to connect individuals with needed resources upon release, such as transportation, case management, housing, primary care, employment support, and 12-step meetings.

The next most common initiatives that states implemented to serve American Indians and Alaska Natives is **evidence-based prevention**, which provides culturally appropriate, trauma-informed programming to address risk factors, build protective factors, and embrace Tribal identity, expression, and knowledge. These programs include school-based programs for youth, parents, and families; arts programs focused on health, wellness, and substance use prevention; land-based education; sacred parenting classes; digital storytelling; SUD screening and brief intervention; and opioid awareness media campaigns.

States also implemented initiatives to **increase access to treatment services** for American Indians and Alaska Natives. In partnership with Tribal health clinics and providers, states provided funding to support contingency management programs; treatment costs for uninsured Tribal citizens; outpatient treatment programs; residential treatment programs; and care coordinators to provide American Indians and Alaska Natives connection to SUD treatment. In addition, several states used SOR funding to support increased access to **MOUD services** for American Indians and Alaska Natives by ensuring the availability of MOUD expertise consultation at Tribal health clinics, expanding access to MOUD for incarcerated American Indians and Alaska Natives, and supporting the implementation of culturally appropriate MOUD services. States have also utilized SOR funding to support **overdose reversal medication distribution and training** for Tribal communities, providing public outreach to distribute drug deactivation bags, overdose reversal medications, and training on their appropriate use.

Several states have implemented **training and technical assistance initiatives** aimed at expanding access to SUD services for American Indians and Alaska Natives. These initiatives focus on sharing knowledge among Tribal communities, Tribal and Urban Indian Health Programs, and community-based partners on best practices for prevention, treatment, and recovery from OUD, StUD, and other co-occurring SUDs. These efforts often focus on providing

culturally responsive services that incorporate Tribal frameworks for healing and recovery. Training and technical assistance is also be provided for the SUD service provider workforce on providing culturally appropriate services for American Indians and Alaska Natives, utilizing culturally anchored frameworks for mitigating OUD, polysubstance use disorder, and other health disparities.

Selected Examples of State Initiatives to Reach and Serve American Indians and Alaska Natives

Implementing Prevention and Recovery Support Services for Alaska Natives

The Alaska Department of Health and Social Services Division of Behavioral Health partners with the Alaska Children’s Trust to support programming for Alaska Native youth, parents, and families. Their Positive Indian Parenting program aims to prevent opioid use through culturally based education around parenting skills, trauma prevention, and healing. Additionally, recognizing the importance of incorporating traditional Native healings and culture in peer support services, Alaska used SOR funding to develop a specialized Traditional Peer Support certification for Alaska Natives, American Indians, and indigenous peer support staff.

Providing Treatment Services for American Indians in Idaho

Through a partnership with a tribe, the Idaho Department of Health and Welfare Division of Behavioral Health used SOR funding to hire a recovery service coordinator and three full-time recovery coaches to collaborate with Tribal emergency medical services (EMS) and other local medical providers. Their goal is to develop and establish protocols for warm-handoff services for individuals who experience an opioid overdose. Another tribal partnership involves supporting a contingency management program for individuals attending their first follow-up MOUD appointment. At this appointment, individuals can select an incentive, such as a gas or Uber voucher, with a value of up to \$15.00. If individuals consistently engage in treatment, attending MOUD follow-up appointments regularly and on time, they can continue to receive incentives, totaling no more than \$75.00 per year of their treatment.

Culturally Anchored Training Initiatives in Hawaii

Culturally anchored training is critical for Hawaii’s workforce to provide the best care for its indigenous people, who make up nearly half of admissions to publicly funded treatment and recovery programs. The Hawaii Department of Health Alcohol and Drug Abuse Division has implemented trainings for social workers, healthcare providers, and community members on culturally anchored frameworks for OUD/StUD services, like the Kanilehua Framework, the Hanai Ahu Framework, and the Papa Ola Lokahi’s Ahupua’a system based on the White Bison Healing Forest Model. Attendees were equipped with learning tools to facilitate deeper connections to Hawai’i language, history, and cultural practices, which can be used in their personal and professional practices. The state also uses the Cook Inlet Tribe Indigenous Evidence-based Effective Practice Model for implementing indigenous knowledge and values with evidence-based modalities. The model facilitates development of practices and programs that are culturally congruent for Indigenous people, accepted and validated by the research community, and deemed supportable by private and governmental sponsors.



About the Opioid Response Network (ORN): ORN is a group of diverse individuals and organizations working collaboratively to address the opioid and stimulant crisis. Funded by SAMHSA’s SOR/Tribal Opioid Response (TOR) Technical Assistance (TA) grant, ORN works with states, health professionals, community organizations, the justice system, and individuals in all 50 states and nine territories to provide education and training. **Visit the ORN website [here](#) or request training or TA [here](#).**

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