



# Prevention Perspectives: Substance Misuse and Overdose Among Urban Native Populations

## **Presenters:**

Sophie Chishty, MPH, Research Associate, NCUIH

Deidre Greyeyes, MPH, MBA/MDA (Navajo), Research & Data Manager, NCUIH

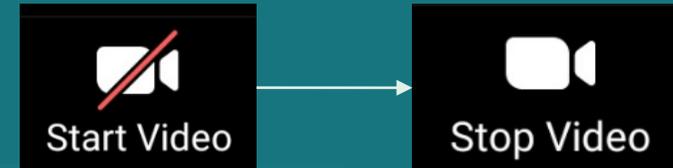
Nahla Holland (Eastern Pequot Tribal Nation), Research Associate, NCUIH



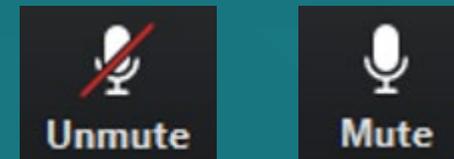
# Recording

Today's event will be recorded for educational and quality improvement purposes.

Please turn on your video to help us engage with you.



Please mute your microphone when you are not speaking.





# Welcome!

## *Thank you for joining us!*

We welcome you to please share your name, organization, and tribal affiliations (if any) in the chat.

Our agenda for today's session includes:

1. Overview
2. Background on Substance Misuse and Overdoses
3. Summary of Needs Assessment
4. Discussion
5. Open Floor
6. Closing



# Objectives

- 1.** Increase awareness of resources and services related to substance misuse and overdose prevention
- 2.** Enhance understanding of successes, challenges, and needs of UIOs providing services related to substance misuse and overdose prevention
- 3.** Foster connections between UIOs and facilitate conversations on insights and best practices



# Presenters



## **Sophie Chishty, MPH, Research Associate, NCUIH**

Sophie Chishty earned her Bachelor of Science in Health Sciences with Minors in Psychology and Sociology from DePaul University (Summa Cum Laude) and her Master of Public Health from George Washington University. She has gained extensive experience working to improve health equity across Chicago communities through her various roles with the Chicago Department of Public Health and local nonprofits. Sophie's work at NCUIH includes leading the management of the opioid needs assessment project, conducting qualitative data collection and analysis to support NCUIH research, supporting program evaluation efforts, and more.



## **Deidre Greyeyes (Navajo), Research & Data Manager, NCUIH**

Deidre Greyeyes (Navajo) has a Master's in Public Health from University of Arizona, with a concentration in Public Health Practice and a certificate in epidemiology. She also has her Master's in Business Administration from Colorado State University with a concentration in Marketing Data Analytics. Deidre has been working in the healthcare field for over fifteen years as a grant manager, data analyst, epidemiologist, and public health surveillance administrator.



## **Nahla Holland (Eastern Pequot Tribal Nation), Research Associate, NCUIH**

Nahla Holland is an enrolled member of the Eastern Pequot Tribal Nation. Her research background is in microbiology and cross-cultural presentations of mental health and illness. In addition to her work on NCUIH's opioid needs assessment, Nahla's work at NCUIH includes collecting and analyzing data Traditional Healing Integration into UIO Care, managing the NCUIH Knowledge Resource Center and its resources tailored to Urban AI/AN communities, and more.



# NCUIH

NATIONAL COUNCIL *of* URBAN INDIAN HEALTH

The National Council of Urban Indian Health (NCUIH) is the national non-profit organization devoted to the support and development of quality, accessible, and culturally-competent health and public health services for American Indians and Alaska Natives (AI/ANs) living in urban areas.

NCUIH is a national representative of the 41 Title V Urban Indian Organizations (UIOs) under the Indian Health Service (IHS) in the Indian Health Care Improvement Act (IHCA). NCUIH strives to improve the health of the over 70% of the AI/AN population that lives in urban areas, supported by quality health care centers.



# We want to hear from you!

Scan the QR code or use the link in the chat to share your feedback on today's event & share further insights into your experiences with substance misuse and overdose prevention!

This link will also be shared via email following today's event.





# Background on Substance Misuse and Overdoses

**Presented by:**

Sophie Chishty, MPH



# Key Terms

- **American Indian and Alaska Native (AI/AN)** – Person(s) with origins connected to the original peoples of North, South, and/or Central America<sup>1</sup>
- **Medication-Assisted Treatment (MAT)** – Treatment for opioid use disorder which combines the use of medications (such as methadone or buprenorphine) with counseling and behavioral therapies<sup>2</sup>
- **Opioids** – A classification of drugs used to reduce pain, with examples including oxycontin, hydrocodone, fentanyl, and heroin<sup>2</sup>
- **Opioid Use Disorder (OUD)** – A problematic pattern of opioid use that causes significant impairment or distress<sup>2</sup>
- **Overdose** – A fatal or nonfatal injury to the body which occurs when a drug is taken in excessive amounts<sup>2</sup>
- **Substance Misuse** – The inappropriate use of substances such as drugs, alcohol, and tobacco<sup>3</sup>
- **Substance Use Disorder (SUD)** – A treatable chronic disease characterized by a problematic pattern of use of a substance which can lead to impairments in health, social function, and control<sup>2</sup>

<sup>1</sup> Office of Minority Health. (n.d.). American Indian/Alaska Native Health. *U.S. Department of Health & Human Services*. <https://minorityhealth.hhs.gov/american-indianalaska-native-health>.

<sup>2</sup> Centers for Disease Control and Prevention, National Center for Injury Prevention and Control. (2021, January 26). Commonly Used Terms. *U.S. Department of Health & Human Services*. [https://www.cdc.gov/overdose-prevention/glossary/?CDC\\_AAref\\_Val=https://www.cdc.gov/opioids/basics/terms.html](https://www.cdc.gov/overdose-prevention/glossary/?CDC_AAref_Val=https://www.cdc.gov/opioids/basics/terms.html).

<sup>3</sup> American Public Health Association. (2024). Substance Misuse. <https://www.apha.org/topics-and-issues/substance-misuse>.

# AI/AN Overdose Trends

Opioid overdoses among the AI/AN population have **increased** over the past two decades.<sup>1,2</sup>

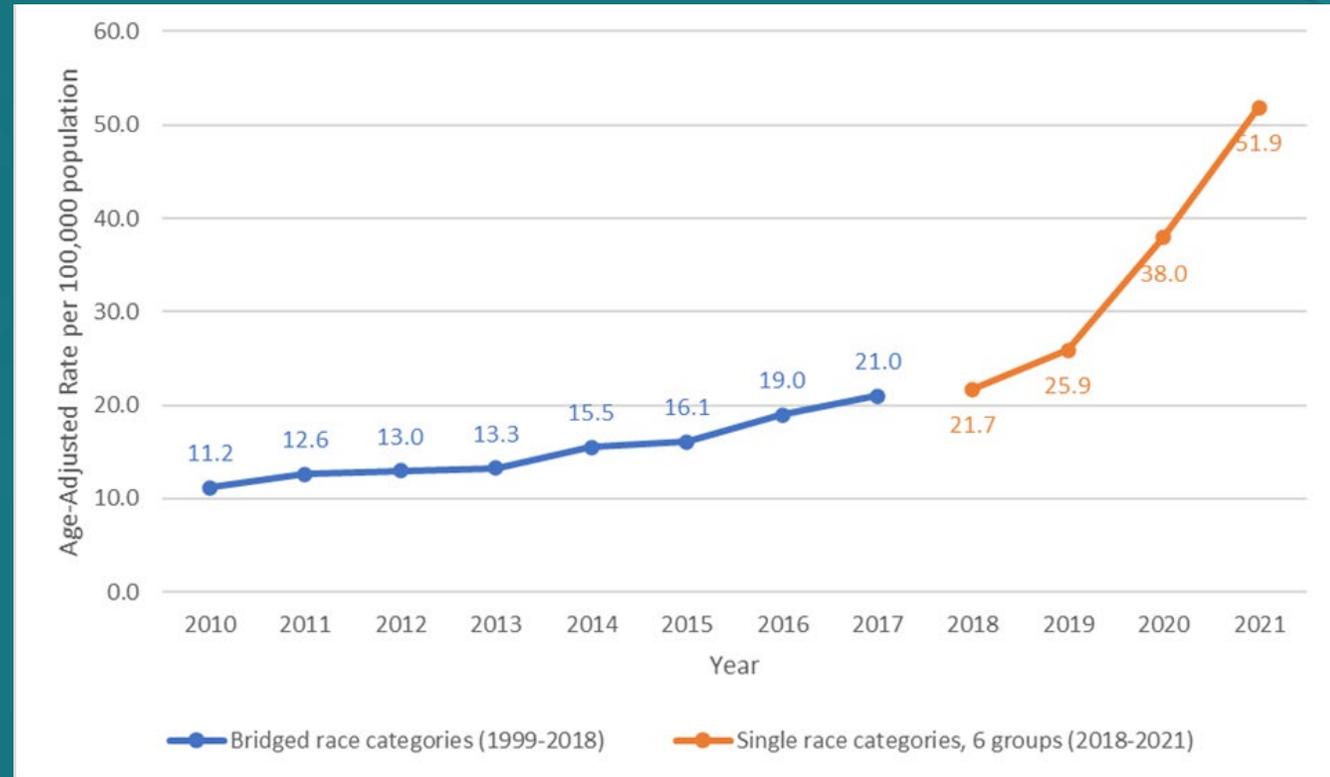
The COVID-19 pandemic has also been associated with a sharp rise in AI/AN opioid overdoses, with AI/AN overdose deaths **doubling** between 2019 to 2021.<sup>1</sup>

The AI/AN population also had the **highest rate** of fatal opioid overdoses of any other racial/ethnic group in the United States in 2021.<sup>1</sup>

<sup>1</sup> Centers for Disease Control and Prevention, Injury Prevention and Control. (2023, September 8). *Opioid Overdose Prevention in Tribal Communities | Budget | Injury | CDC*. [https://www.cdc.gov/injury/budget-funding/opioid-overdose-prevention-in-tribal-communities.html?CDC\\_AAref\\_Val=https://www.cdc.gov/injury/budget/opioidoverdosepolicy/TribalCommunities.html](https://www.cdc.gov/injury/budget-funding/opioid-overdose-prevention-in-tribal-communities.html?CDC_AAref_Val=https://www.cdc.gov/injury/budget/opioidoverdosepolicy/TribalCommunities.html).

<sup>2</sup> Mack, K. A., Jones, C. M., & Ballesteros, M. F. (2017). Illicit Drug Use, Illicit Drug Use Disorders, and Drug Overdose Deaths in Metropolitan and Nonmetropolitan Areas—United States. *Morbidity and Mortality Weekly Report. Surveillance Summaries (Washington, D.C.: 2002)*, 66(19), 1–12. <https://doi.org/10.15585/mmwr.ss6619a1>.

**Overdose Deaths Involving Opioids Among American Indian and Alaskan Natives, U.S. 2010-2021<sup>1</sup>**





# Urban vs Rural AI/AN Overdoses

Fatal overdose rates also vary between urban and rural populations.<sup>1,2</sup> In 2017, the urban AI/AN fatal overdose rate was higher than that of rural AI/AN populations and that of urban non-Hispanic White (NHW) populations.<sup>1</sup>

**Rates of Fatal Overdoses for Rural and Urban AI/AN and NHW Populations, 2017<sup>1</sup>**

Location	AI/AN Population	NHW Population
Urban population	22.1 per 100,000 people	21.4 per 100,000 people
Rural population	19.8 per 100,000 people	19.2 per 100,000 people

<sup>1</sup> Mack, K. A., Jones, C. M., & Ballesteros, M. F. (2017). Illicit Drug Use, Illicit Drug Use Disorders, and Drug Overdose Deaths in Metropolitan and Nonmetropolitan Areas—United States. *Morbidity and Mortality Weekly Report. Surveillance Summaries* (Washington, D.C.: 2002), 66(19), 1–12. <https://doi.org/10.15585/mmwr.ss6619a1>.

<sup>2</sup> Hirschak, K. A., Nadeau, M., Vasquez, A., Hernandez-Vallant, A., Smith, K., Pham, C., Oliver, K. A., Baukol, P., Lizzy, K., Shaffer, R., Herron, J., Campbell, A. N. C., Venner, K. L., & CTN-0096 Collaborative Board. (2023). Centering culture in the treatment of opioid use disorder with American Indian and Alaska Native Communities: Contributions from a National Collaborative Board. *American Journal of Community Psychology*, 71(1–2), 174–183. <https://doi.org/10.1002/ajcp.12620>.



# Summary of Needs Assessment

Presented by:

Deidre Greyeyes, MPH, MBA/MDA (Navajo)

Nahla Holland (Eastern Pequot Tribal Nation)



# Project Overview

*This needs assessment was commissioned by the Centers for Disease Control and Prevention (CDC) through Cooperative Agreement OT18-1802. The views, opinions, and data analysis published in this report are those of the National Council of Urban Indian Health (NCUIH) and do not reflect the policies or positions of any other partner.*

## **Key Project Components:**

- Participation in National Tribal Opioid Summit
- Review of opioid literature and policies
- **Environmental scan** of UIO services and drug overdose mortalities
- **Key informant interviews** with UIO staff
- Today's event!



# Key Informant Interviews:

## Sample

NCUIH recruited five Urban Indian Organizations (UIOs) to participate in key informant interviews.

Key UIO staff were asked about the state of substance misuse, their services, harm reduction, policies, and more.

5

UIOs  
Interviewed

100%

Of UIO  
Program Types  
Represented

62.5%

Of NCUIH  
Regions  
Represented



# Key Informant Interviews : UIO Services

## Most common on-site services related to substance misuse mentioned by interviewed UIOs:

- Naloxone/Narcan
- Group Services (Support, Recovery, Therapy)
- Drug/syringe disposal services
- Forensic drug test strips
- Pharmaceutical services

## Most common on-site traditional healing services mentioned by interviewed UIOs:

- Drumming/drum making
- Talking/healing circles
- Plant medicine, medicine bundles, and/or herbal pharmacy
- Red Road to Wellbriety programming



# Key Informant Interviews: Barriers/Challenges

## Most common barriers/challenges mentioned by interviewed UIOs:

### Level 1: State/Federal Agencies, Policies, and/or Institutions

Availability of, and access to, urban AI/AN data related to behavioral health

Lack of legalized accessible needle exchanges, safe injection sites, and/or drug disposal sites

Continuous and/or confusing changes to legislation and policies

### Level 2: Communities and their Socioeconomic Norms/Trends

Lack of knowledge of issues and resources related to substance misuse, overdose prevention, and harm reduction

Stigmatization and misconceptions related to harm reduction and substance misuse

Transience of populations affected by substance misuse (e.g., due to homelessness or travel for care)

### Level 3: UIOs and Other Health Care Providers

Insufficient capacities for services such as sober living, inpatient care, and/or medical detoxification

Unsustainable and/or ineffective funding mechanisms for behavioral health services

Limited behavioral health workforce due to issues such as turnover, licensing, or training



# Key Informant Interviews: Successes, Benefits, and Protective Factors

## Measures of success mentioned by interviewed UIOs:

- Data evaluation and reporting procedures
- Quality improvement initiatives
- Tracking patient programs, referrals, and/or outcomes
- Successful collaborations

## Benefits from recent policy changes mentioned by interviewed UIOs:

- Expansion of MAT provision
- Increased access to harm reduction tools/trainings
- Increased funding for substance use services

## Key protective factors mentioned by interviewed UIOs:

- Connection to culture
- Diverse local community of Native organizations/groups

# Environmental Scan:

## UIO Services

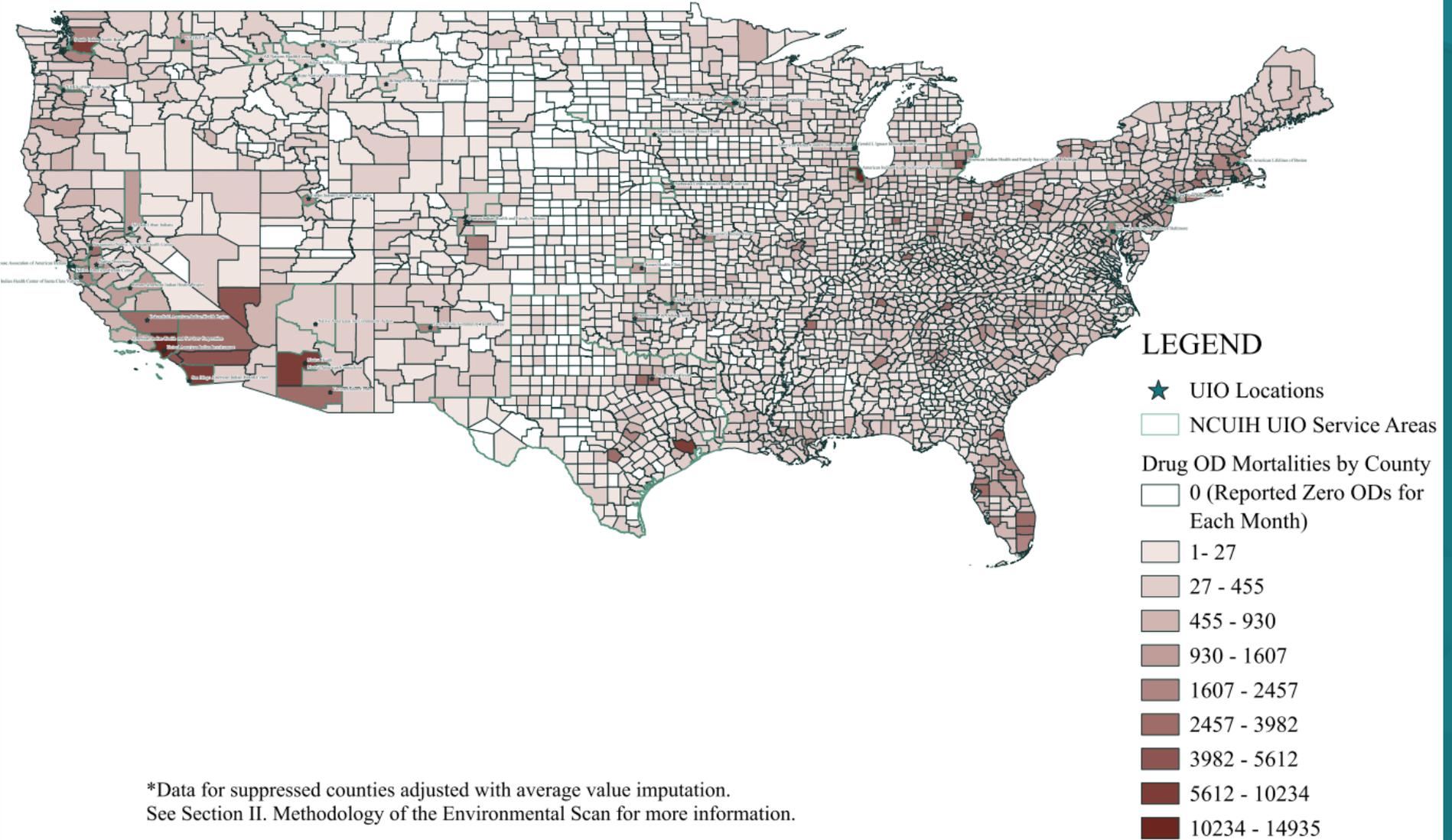
### Preliminary Summary of Services at UIOs [n (% of N)]

Service	Offered On-Site	Referred Out Only	Not Confirmed or Not Offered
Community Education	26 (63.4%)	--	15 (36.6%)
Coordination with Primary Care Provider	24 (58.5%)	--	17 (41.5%)
Drug-Specific Care	6 (14.6%)	--	35 (85.4%)
Drug Testing	7 (17.1%)	--	34 (82.9%)
Harm Reduction	11 (26.8%)	--	30 (73.2%)
Housing Assistance	14 (34.1%)	--	27 (65.8%)
Inpatient Residential	7 (17.1%)	9 (21.9%)	25 (61.0%)
Legal Help	7 (17.1%)	1 (2.4%)	33 (80.5%)
Medical Detox	1 (2.4%)	2 (4.9%)	38 (92.7%)
Medication-Assisted Treatment (MAT)*	11 (26.8%)	2 (4.9%)	28 (68.3%)
Substance Misuse Counseling	41 (100.0%)	--	--
Traditional Healing-Based Substance Misuse Services	12 (29.3%)	--	29 (70.7%)
Transportation	14 (34.1%)	--	27 (65.8%)
			Total (N): 41



# Environmental Scan: Analysis of UIOs & Overdoses<sup>1</sup>

Map of Urban Indian Organizations and Provisional Overdose Mortalities by County\*  
(01/01/23-06/30/23)



\*Data for suppressed counties adjusted with average value imputation.  
See Section II. Methodology of the Environmental Scan for more information.

<sup>1</sup> Ahmad, F.B., Anderson, R.N., Cisewski, J.A., Rossen, L.M., Warner, M., Sutton, P. (2024). County-level provisional drug overdose death counts. *National Center for Health Statistics*. <https://www.cdc.gov/nchs/nvss/vsrr/prov-county-drug-overdose.htm>.



# Recommendations

Findings from these analyses indicate that while Urban Indian Organizations (UIOs) play a key role in addressing and preventing substance misuse and opioid overdoses among Urban Indian communities, further support is needed for these populations. Based on the data collected through NCUIH's environmental scan and needs assessment, three key strategies that can help better address and prevent substance misuse among Urban Indian communities include to:

1. Improve investment in integrated care infrastructures and in the behavioral health workforce, particularly for aspiring American Indian and Alaska Native (AI/AN) health professionals
2. Strengthen partnerships and collaborations between Urban Indian Organizations (UIOs), the Indian Health Service (IHS), tribal entities, and other stakeholders in overdose prevention
3. Increase sustainable state and federal funding opportunities for substance misuse treatment and prevention resources such as medication-assisted treatment (MAT), Narcan, and fentanyl test strips

Further research is necessary to better understand the many socioeconomic and cultural factors which affect substance misuse among Urban Indian populations, as well as to address the gaps in available data on AI/AN populations and health outcomes.



# Questions?

If you have a question, please share in the chat or unmute yourself and ask aloud!



# Discussion

Presented by:

Sophie Chishty, MPH

Deidre Greyeyes, MPH, MBA/MDA (Navajo)



# Instructions

For today's open discussion, we will be using the platform Poll Everywhere! All responses are anonymous. If for some reason Poll Everywhere prompts you to provide a screen name, you do not have to enter your name, as it will not be displayed with the responses.

You can respond to each question by texting in your response or joining online through any Internet browser. To participate via text, you can text "wiredsun334" to 22333. To participate online, visit [pollev.com/wiredsun334](https://pollev.com/wiredsun334). You can also scan the QR code shown here to participate!

You can also respond to each question by unmuting yourself and sharing out loud or sharing in the Zoom chat. If you do not feel comfortable identifying yourself in the Zoom chat, you can also send a message directly to Myca Grant Hunthrop & she can share your response on your behalf. These instructions will all be placed in the Zoom chat for your reference.





When poll is active respond at [PollEv.com/wiredsun334](https://PollEv.com/wiredsun334) Send [wiredsun334](#) and your message to [22333](#)

What state are you joining us from today? (Use abbreviation if more than 1 word!)

0

Nobody has responded yet.  
Hang tight! Responses are coming in.



When poll is active respond at [Pollev.com/wiredsun334](https://Pollev.com/wiredsun334) Send **wiredsun334** to **22333**



Do you work for one of the 41 Urban Indian Organizations (UIOs) served by NCUIH?

Yes



0%

No

SEE MORE



When poll is active respond at [PollEv.com/wiredsun334](https://PollEv.com/wiredsun334) Send [wiredsun334](https://wiredsun334) and your message to 22333



Did any of the findings shared in today's presentation resonate with you or surprise you? If so, please describe them.

Nobody has responded yet.

Hang tight! Responses are coming in.



When poll is active respond at [PollEv.com/wiredsun334](https://PollEv.com/wiredsun334) Send [wiredsun334](https://wiredsun334) and your message to [22333](https://22333)



How has substance misuse affected your community or the communities you serve?

Nobody has responded yet.

Hang tight! Responses are coming in.



When poll is active respond at [PollEv.com/wiredsun334](https://PollEv.com/wiredsun334) Send [wiredsun334](https://wiredsun334) and your message to [22333](https://22333)



Through your professional role, have you experienced any challenges in addressing substance misuse issues among your patients/clients? If so, please describe them.

Nobody has responded yet.

Hang tight! Responses are coming in.



When poll is active respond at [PollEv.com/wiredsun334](https://PollEv.com/wiredsun334) Send [wiredsun334](https://wiredsun334) and your message to [22333](https://22333)



Please describe your organization's experience with funding for substance misuse services. (E.g., Are there any funding mechanisms that have successfully supported you? Are there any gaps in funding opportunities that need to be addressed?)

Nobody has responded yet.

Hang tight! Responses are coming in.



When poll is active respond at [PollEv.com/wiredsun334](https://PollEv.com/wiredsun334) Send [wiredsun334](https://wiredsun334) and your message to [22333](https://22333)



Are there are any programs/strategies at your organization that are working well to address substance misuse? If so, please describe them.

Nobody has responded yet.

Hang tight! Responses are coming in.



When poll is active respond at [PollEv.com/wiredsun334](https://PollEv.com/wiredsun334) Send [wiredsun334](https://wiredsun334) and your message to [22333](https://22333)



Are there any specific resources/tools that would help to support your organization in better addressing substance misuse? If so, please describe them.

Nobody has responded yet.

Hang tight! Responses are coming in.



Join by Web [PollEv.com/wiredsun334](https://PollEv.com/wiredsun334) Join by Text Send [wiredsun334](https://wiredsun334) and your message to [22333](https://22333)



What do you believe is the highest priority for improving the state of substance misuse in your community or the communities you serve?

Nobody has responded yet.

Hang tight! Responses are coming in.



# Open Floor

If you have a question, please share in the chat  
or unmute yourself and ask aloud!



# Closing

Presented by:  
Sophie Chishty, MPH



# CDC Resources

The CDC has many Resources on Overdose Prevention, including the following:

- 2022 CDC Clinical Practice Guideline for Prescribing Opioids for Pain – Includes recommendations for clinicians providing pain care
- Trainings for Health Care Professionals – Includes clinician training modules, toolkits on addiction medicine and Naloxone, interactive patient cases, and more
- Resources for Public Health Professionals – Includes resources on prescription drug monitoring, overdose data, and more
- Overdose Prevention Education and Learning Hub – Includes resources, educational campaigns, data dashboards, and more
- CDC Overdose Resource Exchange (ORE) – Includes communication materials and educational resources, including AI/AN-specific overdose resources

Interactive Patient Case Menu Resources Glossary

**Leon's Visit** Turn Off Auto-Play of Media

It's going well. I know that it is something that I will need to work on for my whole life. I really want to stay clean, but I know that many people relapse.

What should Dr. Harris say to Leon's last response? Select Dr. Harris's best response.

I'm really glad to hear your treatment is going well and that you are motivated to stay clean and recognize that given your history, you could go back to your old habits.

I'm really glad to hear your treatment is going well and that you are motivated to get better.

Select Dr. Harris's best response.

8 of 21

**There is hope. Recovery is possible.**

Visit [cdc.gov/RxAwareness](https://cdc.gov/RxAwareness) to hear real stories about recovery from prescription opioids, or contact your local health provider.





# AI/AN Resources

- [SAMHSA Opioid Misuse in Indian Country Fact Sheet](#)
- [SAMHSA Tribal Training and Technical Assistance Center Resources on Substance Use Disorders](#)
- [SAMHSA Recovery Resources for American Indian and Alaska Natives](#)
- [NPAIHB Opioid Use Disorder Resources](#)
- [IHS Opioids Data](#)
- [We R Native Substance Misuse Resources](#)
- [National Harm Reduction Coalition, Native Harm Reduction Toolkit](#)
- [NIHB Tribal Opioid Response Resource Toolkit](#)
- [National Council of Mental Health "Providing Harm Reduction Services in Native Communities" Guide](#)
- [Indian Country ECHO SUD Resource Hub](#)
- [Indian Country ECHO – Harm Reduction](#)
- [TACUNA Project](#)



### Culture Helps Us Heal

#### Substance Use

Substances - like alcohol and drugs - change the way our brain works. One of the first changes that happens is that substances take over the part of our brain that controls our cravings. Soon people find themselves taking substances more often and in larger amounts.

When someone's substance use causes them to have health issues or problems at work, school, or home, they may have a substance use disorder.

Fortunately, pregnant people - like anyone else - can and do recover from substance use disorder. They can also have a happy, healthy baby.

#### The Power of Cultural Traditions

Recovering from substance use can be a long journey, with many ups and downs. Luckily, our cultural teachings are very powerful. They have helped many of us understand how to live well for generations.

Although everyone's relationship to their traditions is different, for many of us participating in our cultural practices is healing.

Here are some ideas:

- **Relieve stress** by doing activities that calm your body, mind, and spirit. Activities like meditating, praying, singing, spending time in nature, dancing, or cooking can help you feel relaxed and grounded.
- **Work on a traditional craft**, like weaving, carving, or basketmaking. Doing so teaches many lessons, including patience and practice keeping a good mindset. Also, working with traditional materials connects us to our roots and can help us turn inward to be able to "hear" our own thoughts.
- **Take care of your body** by gathering and eating natural foods from the earth that will support you in feeling good.

Plans of Safe CARE

NPAIHB



# Upcoming Events

- 6/13/24: Vax Chat 2024: Lessons Learned in Vaccine Equity
- 6/26/24: Missing and Murdered Indigenous People Prevention: Intersections of Medical Forensic Health Care
- 6/27/24: Clinic to Community: Utilizing the 340B Program to Improve HIV Care for Urban Indian Populations
- 7/11/24: Navigating Crisis the Role of 988

To learn more, visit [ncuih.org/events](https://ncuih.org/events).



# Thank you for joining us today!

Don't forget to share your feedback by scanning the QR code or using the link in the chat. This link will also be shared via email following today's event. We appreciate your input!

If you have any questions following today's event, please email [schishty@ncuih.org](mailto:schishty@ncuih.org).





# NCUIH

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