

SUBSTANCE USE DISORDER AND OVERDOSE IN AMERICAN INDIAN AND ALASKA NATIVE COMMUNITIES

THE CRISIS

Highest Overdose Death Rates:

70.4
per 100,000

In 2023, non-Hispanic American Indian and Alaska Native people had an overdose death rate of 70.4 per 100,000 - the highest of any racial/ethnic group (vs. U.S. overall: 33.5 per 100,000).¹

Urban American Indian and Alaska Native People Disproportionately Affected:

44.3
per 100,000

In 2020, American Indian and Alaska Native people had the highest drug overdose death rates in both urban (44.3 per 100,000) and rural (39.8 per 100,000) counties - outpacing all other groups.²

Substance Use Disorders:

27.6%
of American Indian and
Alaska Native People

In 2021, 27.6% of American Indian and Alaska Native people (12+) had a Substance Use Disorder (vs. 17.2% of Black, 17% of White, 15.7% of Hispanic, and 8% of Asian people).³

Treatment Gap:

5.3%
Receive Treatment

Among American Indian and Alaska Native people needing treatment in 2021, only 5.3% received any treatment and just 3.7% received specialty care - the largest gap of all racial/ethnic groups.⁴



UIOs are a Critical Resource for Substance Use Disorder/Opioid Care in American Indian and Alaska Native Communities

Urban Indian Organizations (UIOs) are an integral part of the Indian health system (comprised of the Indian Health Service, Tribes, and UIOs), and provide essential healthcare services, including primary care, behavioral health, and social and community services, to patients from over 500 Tribes in 38 urban areas across the United States.

Indian Health Service facilities, Tribes, and UIOs provide lifesaving substance use disorder and behavioral health care, culturally tailored services, support groups, and outreach.

UIO Barriers: Lack of access and availability of urban American Indian and Alaska Native data relating to behavioral health, stigma, limited inpatient/sober living resources, and unsustainable funding.

- Centers for Disease Control and Prevention (CDC). (2024, December 12). *State Unintentional Drug Overdose Reporting System (SUDORS) Dashboard: Fatal Drug Overdose Data - Final Data*. US Department of Health and Human Services. Retrieved August 15, 2025 from <https://www.cdc.gov/overdose-prevention/data-research/facts-stats/sudors-dashboard-fatal-overdose-data.html>.
- Spencer, M. R., Garnett, M. F., & Minino, A. M. (2022). Urban-Rural Differences in Drug Overdose Death Rates, 2020. U.S. Department of Health and Human Services, Centers for Disease Control and Prevention National Center for Health Statistics. Retrieved August 15, 2025 from <https://www.cdc.gov/nchs/data/databriefs/db440.pdf>.
- Substance Abuse and Mental Health Services Administration (SAMHSA). (2022). *Key substance use and mental health indicators in the United States: Results from the 2021 National Survey on Drug Use and Health* (HHS Publication No. PEP22-07-01-005, NSDUH Series H-57). Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration. Retrieved August 14, 2025 from <https://www.samhsa.gov/data/report/2021-nsduh-annual-national-report>.
- Id.*



**NATIONAL COUNCIL of
URBAN INDIAN HEALTH**



POLICY SOLUTIONS

Fund the Behavioral Health and Substance Use Disorder Resources for Native Americans Program

Congress authorized the Behavioral Health and Substance Use Disorder Resources for Native Americans (BHSUDRNA) Program in the Consolidated Appropriations Act, 2023, to provide services for the prevention of, treatment of, and recovery from mental health and substance use disorders among American Indians, Alaska Natives, and Native Hawaiians.

- ▶ **Authorized Funding:** \$80 million for each of Fiscal Years (FY) 2023-2027.
- ▶ **Problem:** No funds have been appropriated.
 - ▶ *The President's FY 2026 budget requested that \$80 million be appropriated for this program. The House and Senate did not include this program in their FY 2026 appropriations bills.*
- ▶ **Call to Action for Congress:** Fully fund the BHSUDRNA Program at the authorized \$80 million per year. This investment will save lives, reduce health disparities, and strengthen culturally grounded prevention and recovery in both tribal and urban American Indian and Alaska Native communities.

Continuing Support for Tribal Behavioral Health Grants (*Native Connections*)

Native Connections is a five-year grant program that helps American Indian and Alaska Native communities identify and address the behavioral health needs of Native youth. The Native Connections grant program supports grantees in:

- ▶ Reducing suicidal behavior and substance use among Native youth up to age 24.
- ▶ Easing the impacts of substance use, mental illness, and trauma in tribal communities.
- ▶ Supporting youth as they transition into adulthood.

The Tribal Behavioral Health Grants line item in the Labor, Health and Human Services, Education, and Related Agencies appropriations bill funds the Native Connections program. Currently there are 12 UIOs who are active recipients.

- ▶ **Appropriations Status:** Congress has maintained funding for this program in the proposed FY 2026 appropriations bills in each chamber. The Senate has proposed maintaining funding at the current level of \$23.67 million. The House has proposed increasing funding to \$30 million.
- ▶ **Call to Action for Congress:** Support the House FY 2026 proposed funding increase to \$30 million for the program.

