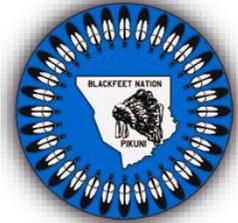


Policy Solutions to Address the Opioid Crisis within Blackfeet Nation

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Introduction

The public health crisis of opioid misuse and addiction within the Blackfeet Nation is rapidly evolving. In the late 1990s, pharmaceutical companies reassured the medical community that patients would not become addicted to opioid pain relievers and health care providers began to prescribe them at greater rates.¹ In August of 2018, the Blackfeet Nation filed a lawsuit against five prescription drug producers and three wholesale drug distributors in response to an epidemic of drug addiction on the reservation.²

On October 2018 the Blackfeet Tribal Business Council (BTBC) voted to declare a state of emergency for drugs and alcohol. According to the local newspaper (Glacier Reporter) the resolution states,

*“The Blackfeet Tribal Business Council has recognized and acknowledged that the Blackfeet Indian Reservation is severely affected by drug and alcohol abuse in the community that has caused severe addiction, birth defects, fatalities, broken families, children in foster care, increase in emergency health services, increase in criminal statistics resulting in an overburden on the Tribe and other jurisdictional resources to make effective response to those affected by this social problem and that due to ineffective response available to the damage caused by drug and alcohol abuse, the Blackfeet Tribal Business Council recognizes a need to declare a state of emergency against this problem and supports an organized effort to deliver appropriate response...”*³

The opioid crisis is an important issue that needs to be addressed on a tribal, state, and national level. Americans use 80% of the global supply of opioids and 99% of hydrocodone but make up only 4.6% of the world’s population.⁹

Statement of the Problem

According to the Centers for Disease Control and Prevention (CDC), an opioid is defined as natural or synthetic chemicals that interact with opioid receptors on nerve cells in the body and brain and reduce the intensity of pain signals and feelings of pain. This class of drugs include the illegal drug heroin, synthetic opioids such as fentanyl, and pain medications available legally by prescription, such as oxycodone, hydrocodone, codeine, morphine, and many others.⁴

The Blackfeet Tribal Health Department created a Community Health Assessment (CHA) in collaboration with local and state-based partners from October 2016 to February 2017. The CHA surveyed 479 participants within the Blackfeet Nation. In the Blackfeet CHA, substance abuse was

identified as the top community priority. There is a known substance abuse rate of at least 50% for women who have recently given birth at the Indian Health Service's Blackfeet Community Hospital (IHS BCH).⁵

Major causes of substance abuse include trauma, poverty/unemployment, mental health, lack of funding for prevention and treatment and homelessness. Many tribal communities are targeted by non-Indians as centers for distribution because of their geographic isolation and persistent poverty. Substance abuse also increases overall health care costs in tribal communities, where recovery treatment is largely unavailable and access to primary care is limited.¹⁰

Tribal leaders grapple with questions such as: is substance abuse a result of colonization and a loss of identity? Are pharmaceutical companies to blame? According to the National Congress of American Indians, inflated rates of substance abuse plague tribal communities; and unfortunately, it is something Native people and tribes have been battling for years. Many Native families are suffering from generational abuse, eroding traditional values and destabilizing families.⁶ Blackfeet Tribal Business Council Chairman Tim Davis said, "Our people have suffered enough. It is time to go on offense and force these drug companies to follow the law and pay for the damages that we have incurred as a result of their conduct."²

Current Policies and Programs

The Northern Winds Recovery Center (NWRC) is a Montana State Licensed Community Health Center serving the Blackfeet Nation and surrounding communities.¹¹ NWRC offers a variety of child, adolescent and adult services, such as mental health and addiction therapy, art therapy, after school and summer school programs, cultural education, prevention and intervention, medication management for medication treatment and more services. The NWRC main focus is recovery from mental illness, alcoholism, and drug addiction. This community health center has been beneficial to the Blackfeet Nation because it offers services that the Indian Health Services (IHS) does not offer.

Along with declaring a state of emergency for drugs and alcohol, the Blackfeet Tribal Business Council also amended Ordinance #95 to allow medical marijuana on the reservation. The resolution reads, "due to the current medical data, pain management and the effects of dangerous prescription pill addiction in treating medical ailments, the Blackfeet Tribal Business Council acknowledges and respects individual patient rights to choose lawful alternative medicine as prescribed by a medical board-certified physician of the State of Montana to address such ailments in the most effective, yet less harmful manner".³ Legalizing medical marijuana allows the community to have an alternative medicine option for chronic pain.

Alternative Solutions

As a result of the Community Health Assessment (CHA) Survey, the Blackfeet Tribal Health Department (BTHD) created the Community Health Improvement Plan (CHIP) in 2018. The CHIP was created to guide the collaborative priorities and work of the Blackfeet Tribal Health Department (BTHD) over five years (Aug 2018 – Aug 2023).⁷ The three health priorities of focus are substance use, mental health and breastfeeding. For each health priority the CHIP includes goals, objectives, action plans, monitoring and evaluation charts for outcome measures. There are two goals to address substance use. Goal One is to increase collaboration and partnerships among substance abuse prevention and treatment services. Goal Two is to increase access to SUD

treatment by first establishing a Medication Assisted Treatment (MAT) Clinic to serve people with Opioid Use Disorders.⁷ The strength of this alternative solution is having programs collaborating together, helping to avoid overlap and encouraging complementing programs to work together. The weakness of this alternative solution is a MAT Clinic will put more pharmaceuticals into the community, potentially increasing overdoses and forming new addictions.

The National Institute of Health (NIH) Helping to End Addiction Long-Term (HEAL) Initiative proposes potential alternative solutions. First is improving prevention and treatment for opioid misuse and addiction including enhanced treatments for infants born with Neonatal Abstinence Syndrome (NAS)/Neonatal opioid withdrawal syndrome (NOWS). Second is enhancing pain management by understanding biological reasons for chronic pain and advancing new non-addictive pain treatments.⁸ The strength of this alternative solution is the encouragement for research to be conducted on a variety of different aspects of opioid use. The weakness of this alternative solution is the lack of explaining why these solutions will be successful.

Policy Recommendations and Implementation Strategies

- 1) ***Create a Blackfeet Nation Tribal Health Board.*** The Tribal Health Board would have nine board members from different health professional backgrounds to ensure a diverse board. In the CHIP, Goal One is to increase collaboration and partnerships among substance use prevention and treatment services through Blackfeet Connect.⁷ The Tribal Health Board would oversee and act as an umbrella for all health-related programs/services. This would help avoid overlap in efforts and encourage health programs to work together. Health programs will have monthly reports to share at monthly Tribal Health Board meetings which would be open to the public. The Tribal Health Board would meet twice a month, once for the public meeting where programs share updates and once with only the board members. Other tribes have established Tribal Health Boards which gives the Blackfeet Nation a framework to follow. This policy proposal will potentially increase program efficacy. This policy proposal will need approval by the Blackfeet Tribal Business Council to become effective.
- 2) ***Establish nutrition and culture education curriculum at Crystal Creek Lodge Treatment Center, Northern Winds Recovery Center, and Browning Public Schools.*** Nutrition education should be paired with cultural education to make the information relatable in tribal communities. Comparing the traditional nutrient dense diet of our ancestors to the modern diet will make it easier to share information about the importance of essential nutrient as well as traditional foods. Learning about how the Blackfeet food system drastically changed in the past 150 years also helps make connections to the prevalent health disparities in tribal communities such as diabetes. Cultural camps and youth camps can also be a component of the new nutrition programming. Partnering nutrition education with culture will give recovering addicts an alternative path to pursue in health. As people discover their identity through culture and gain knowledge about nutrition, they will have something to rely on and focus on. The goal is to relay information in a relatable way, so people can retain it and utilize it. The hope is for the Blackfeet community to reclaim the culture and the health simultaneously. Remembering the past while building the future is fundamental in tribal communities. For this policy proposal to be possible it will need approval from the Blackfeet Tribal Business Council and the Superintendent of Browning Public Schools.

Summary and Conclusion

The opioid crisis is a national problem that impacts millions of Americans every year. The prevalence of substance abuse and overdoses in Native communities is a battle for all tribes across the nation. Native Americans are a small fraction of the population in America but still lead in the statistics for substance abuse, overdoses and suicides. In tribal communities, there are generational traumas that stem from the acts of assimilation put upon us. Without healthy healing mechanisms, people are left with harmful solutions such as substance abuse. These policy proposals will help the Blackfeet Nation implement healing through culture and nutrition.

References

- 1) Public Affairs. (2018, September 19). What is the U.S. Opioid Epidemic? Retrieved January 2, 2019, from <https://www.hhs.gov/opioids/about-the-epidemic/index.html>
- 2) Franz, J. (2018, August 22). Blackfeet Nation Sues Opioid Manufacturers. Retrieved January 3, 2019, from <https://flatheadbeacon.com/2018/08/21/blackfeet-nation-sues-opioid-manufacturers/>
- 3) McGill, J. (2018, October 10). BTBC declares state of emergency for drugs and alcohol, resolves to allow medical marijuana. Retrieved January 9, 2019, from http://www.cutbankpioneerpress.com/glacier_reporter/news/article_9c082e96-cc12-11e8-a605-afb3b55596ec.html
- 4) Opioid Overdose. (2018, October 19). Retrieved January 9, 2019, from <https://www.cdc.gov/drugoverdose/index.html>
- 5) Blackfeet Reservation - mthcf.org. (2017). Retrieved January 9, 2019, from <https://mthcf.org/wp-content/uploads/2018/01/Blackfeet-Reservation-CHA.pdf>
- 6) National Congress of American Indians. Alcohol & Substance Abuse. Retrieved January 9, 2019, from <http://www.ncai.org/policy-issues/education-health-human-services/alcohol-substance-abuse>
- 7) Community Health Improvement Plan - mthcf.org. (2018). Retrieved January 9, 2019, from <https://mthcf.org/wp-content/uploads/2017/04/Blackfeet-CHIP-Final-with-Action-Plans.pdf>
- 8) HEAL Initiative Research Plan. (2018, December 10). Retrieved January 10, 2019, from <https://www.nih.gov/research-training/medical-research-initiatives/heal-initiative/heal-initiative-research-plan>
- 9) The Opioid Epidemic - ihs.gov. (n.d.). Retrieved January 10, 2019, from https://www.ihs.gov/newsroom/includes/themes/newihstheme/display_objects/documents/2017_Speeches/OpiateEpidemic-AllTribesCall-2017-05.pdf
- 10) National, I. (n.d.). Testimony of the National Indian Health Board to the ... Retrieved January 10, 2019, from https://www.indian.senate.gov/sites/default/files/3.14.18_Opioids_NIHB_Testimony.pdf
- 11) Nwrc | SERVICES. (n.d.). Retrieved January 10, 2019, from <http://nwrecoverycenter.wixsite.com/nwrc/services#!>