

TRIBAL PRINCIPLES

Culturally-relevant, Indigenous-centered guidance for tribal communities to consider when creating spending plans for use of the tribal opioid settlements



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A new kind of settlement.

New funds are now available to federally-recognized tribes, through the tribal opioid litigation settlements. These tribal settlement funds will provide opportunities to support ongoing opioid-related work led by tribal communities, including prevention, harm reduction, and treatment efforts.

OUR PRINCIPLES

Our goal is that the Tribal Principles and resources on tribalprinciples.cih.jhu.edu are useful to tribes and Indigenous-serving organizations across the US in the spending of tribal opioid litigation settlement funds.

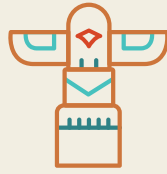
Our intention is for these Principles to include and reflect the needs of all American Indian and Alaska Native (AI/AN) Peoples who may benefit from these settlement funds, inclusive of diversity across different ages, sexes, gender identities, sexual orientations, religions, disabilities, geographic locations, socioeconomic circumstances, and health statuses.

For decades, tribes have been supporting community members who use opioids through efforts that are often underfunded, scarcely resourced and under-unacknowledged. New funds are now available through the tribal opioid litigation settlements. These tribal settlement funds will provide opportunities to support ongoing opioid-related work led by tribal communities, including prevention, harm reduction, and treatment efforts. The funds may also stimulate new programs, policies, services and research that will meet the needs of communities, families, and individuals affected by the opioid crisis.



“We are on a healing journey together: The path of the healing journey has been started and we are changing for the better.”

– Indigenous Advisory Committee Member



PRINCIPLE 1

Culture first: Support cultural and traditional healing in your community.

American Indian, Alaska Native, and other Indigenous communities throughout the United States have endured centuries of colonization and historical trauma resulting from governmental policies such as land theft, forced relocation, and the boarding school system (Gameon & Skewes, 2021; Grandbois & Sanders, 2009; Yamane & Helm, 2022; Gonzalez, et al., 2022; Walters, et al., 2011). These attacks on Indigenous cultural practices, values, spirituality, and ways of knowing have disrupted our ways of taking care of ourselves and our communities (Grandbois & Sanders, 2009). Many Indigenous communities are on paths of rebuilding these cultural connections, which include a variety of cultural practices unique to each tribe (Yamane & Helm, 2022; Rowan, et al., 2014). These practices may include participating in ceremonies, practicing cultural and traditional artwork, engaging in traditional food gathering, connecting with the lands and waters, and hosting drumming groups, among others. Cultural and traditional practices have supported Indigenous communities in maintaining health even amidst collectively experienced trauma and harmful events (Bourke, et al., 2018; Gonzalez, et al., 2022), and continue to support communities through the opioid overdose crisis (ICAD, 2019). The opioid and overdose crises affect tribal community members physically, emotionally and spiritually, and we encourage investment in cultural reclamation and revitalization, the passing of traditions and ceremonies to the next generations, and honoring, recognizing and upholding Indigenous cultural, traditional, and experiential knowledge.

Indigenous culture is medicine, treatment, and well-being (Bassett, et al., 2012). Yet, the legacy of colonization and resulting stigmas surrounding substance use mean that not all Indigenous peoples are able to engage with traditional and cultural ways. There is a need to ensure access to cultural practices, healing, and teachings among all Indigenous Peoples, including those who abstain from substance use, are using substances, or changing their patterns of substance use. We are all on a healing journey and deserve access to cultural teachings and traditional activities that will support wellbeing.

Guidelines for how the tribal opioid settlements can be spent have been created by the Tribal Settlement Trust Directors. These guidelines are called the Approved Uses, which strongly emphasize the need for funding American Indian and Alaska Native cultural teachings and traditional activities; pages 18-20 of the Approved Uses document include a section dedicated to 'Tribal Abatement Strategies' (Section D). The Approved Uses document, found on tribalopioidsettlement.com, cites support for "culturally appropriate activities, practices, teachings or ceremonies" and includes five main sections: traditional activities associated with cultural identity and healing; culturally competent integrated treatment models; culturally grounded community prevention; peacekeeping and

wellness courts; and community workforce development and training. Specific examples of these activities are provided within this Tribal Abatement Strategies document, and while it is not an exhaustive list, it provides a variety of examples of potential cultural and traditional activities that a tribe may consider supporting. These include working with traditional healers, spiritual healers, and practitioners in healing, participating in sweat lodges, and investing in cultural and linguistic immersion programs.

“Culture is the biggest tool on the path to loving yourself.”

– Indigenous Advisory Committee Member

How can tribes adopt this principle?

1. Use the Tribal Abatement Strategies to craft spending plans that include cultural and traditional activities for prevention, harm reduction and treatment services, programs and approaches for opioid use.

In the spirit of supporting cultural and traditional healing in tribal communities, funds can be allocated to activities such as: cultural practices that bring people families and communities together to learn about opioid prevention, harm reduction and treatment, to weave prevention, harm reduction and treatment messaging into cultural practices where appropriate, and to support individuals impacted by opioid use on their healing journeys. Specific examples drawn from existing literature, tribal programs and comments from listening sessions can be found here: tribalprinciples.cih.jhu.edu/programming-services-support

2. Allocate funds toward researching and documenting wise practices.

We know that many tribal communities lack access to high quality data. Some communities have high-impact, culturally-grounded, substance-use related programming available in their community, but do not have this work documented or evaluated so that they can share with other communities.

3. Utilize different types of evidence when creating opioid-spending plans (e.g. cultural, experiential, academic, etc.) and build evidence-base with data sovereignty principles.

Given the lack of access to data, it is important that we use the evidence that we have and invest in building out our evidence-base. We can do this through investing in tribal public health research and surveillance, including evaluating promising practices centered in Indigenous ways of knowing. This work must be conducted with principles of data sovereignty in mind as data play a role in “advancing Indigenous innovation and self-determination” as described by the CARE Principles for Indigenous Data Governance. In addition to academic research, we can also incorporate the cultural knowledge that tribal communities have, and the experiential knowledge we have gained through surviving throughout this opioid crisis.



PRINCIPLE 2

Invest in reciprocal learning and partnerships across tribes.

The 574 federally recognized tribes are receiving nearly \$1.5 billion over the next 15 years (amount and length of time varies between the different settlements). Ultimately, these dollars may not be enough to fund the breadth of work needed to address the ongoing opioid crisis in tribal communities. Yet, the settlements do offer a unique opportunity to begin planning, enhancing, or creating new services for community members who use opioids, across a variety of sectors and to learn across tribal contexts. We have heard the desire to learn from shared challenges addressing the opioid crisis and successful efforts to overcome them. There is flexibility in the Approved Uses, and there is a desire from tribes and tribal health organizations to work together.

“Collaboration, not competition.”

– Indigenous Advisory Committee Member

How can tribes adopt this principle?

1. Maximize funding opportunities.

Consider supplementing existing funding opportunities through combining settlement dollars with other funding initiatives (e.g. Tiwahe Initiative, Native Collective Research Effort to Enhance Wellness (N CREW) Program, Federal state and local granting agencies, philanthropies, etc.) and, where possible, partner with states to access opioid litigation funding that states have dedicated for tribes/AI/AN communities and organizations. The Approved Uses have much flexibility compared to other grant-funded sources (e.g. federal grants that might restrict purchasing of certain harm reduction supplies or innovative cultural supports), which means there are opportunities for communities to respond to their unique needs.

2. Create partnerships for shared work.

As tribes create plans to spend the opioid settlements, working with existing knowledge systems can support the planning process. Tribal epidemiology centers, for example, have access to current data which can support planning and programming across and within regions. Considering the lack of available inpatient treatment services in some tribal communities, several tribes have been discussing the potential of pooling funds to create shared services. This approach may also reduce issues surrounding confidentiality, where community members do not wish to access treatment services in their home community due to stigma but may feel more comfortable accessing services in a shared space between communities.

3. Learn more about programs and services that other tribes have created to fund and share messaging.

Programs such as Didgwalic Wellness Center in the Swinomish Tribe offers a variety of substance-use related services, with innovative billing practices in which “funding comes directly from providing services for fees. Fees are billed to clients directly or to third party payers such as private health plans, Medicare, or Medicaid”. This integrated approach is currently being implemented in several tribes in the Pacific Northwest. The Indian Country ECHO: Substance Use Disorder Echo Program offers an online platform to learn more about what other tribes are doing with their substance use programs, and can serve as an opportunity to share more about the work that your tribe is leading.

State and local jurisdictions will also be receiving funds from the opioid settlements, and there may be opportunities for Tribal Communities to work in collaborative or in alignment with regional programs. For further information on investment of the opioid dollars outside of the context of Tribal communities, please see the programs funded with state and local dollars as well as the Principles for the States: opioidprinciples.jhsph.edu





PRINCIPLE 3

Healing support for families: Invest in parent, caregiver and Elder resources.

Parents and caregivers need tailored resources on opioid use prevention, harm reduction and treatment to support themselves and the young people in their lives. Indigenous families have experienced historic and ongoing disruption to family kinship systems, caregiving practices, and relationships through the imposition of harmful policies, such as dislocation from traditional territories, the boarding school system and racism within the child welfare system. In response to this disruption, there are widespread efforts within and across Indigenous communities to enhance traditional parenting practices, reconnect extended kinship networks, and learn about cultural child rearing practices. Such work must include support for family members that use opioids and their relatives, and should include information, tools and resources on healthy relationship building between relatives so that family members can both connect with and set boundaries with relatives that use opioids. Parenting and family support programs and initiatives, including parents, grandparents, and other relatives, are critical to healing intergenerational trauma, and the tribal opioid settlements can support the growth and creation of these programs.

Many Elders and grandparents hold deep knowledge of the Indigenous communities they are from, and community members may turn to them for support and guidance. Elders may also serve as caregivers for their grandchildren in circumstances where parents require support (Eakins, 2022), including parental substance use which Indigenous parents may be further impacted by due to limited resources and punitive drug policies (Meinhofer, et al., 2020). It is essential that Elders and grandparents are included and supported when creating resources, services and programs related to opioid use, although there is currently limited information on education and programming specifically crafted for Elders.

The Seven Directions 'Tailoring Opioid Overdose Prevention for Diverse Groups within Tribal and Urban Indian Settings: A Toolkit for Providers and Community Organizations Serving American Indian/Alaska Native Communities' (p.36-38) includes communications considerations, provider planning strategies to ensure inclusive services, and provider implementation strategies to take into consideration when creating services specifically for Elders.

How can tribes adopt this principle?

1. Direct funds toward parent, caregiver and Elder resources centered on opioid use prevention, harm reduction and treatment.

Resources may include education, workshops, print resources and training. For more examples, please visit: tribalprinciples.cih.jhu.edu/#resources

2. Support parenting and family support programs.

Given the impacts of intergenerational trauma and the impacts it has on opioid use amongst AI/AN people, Indigenous parents and caregivers need support to care for family members impacted by opioid use. To help alleviate these issues, we can support, invest in and create specific programming tailored toward supporting our future generations.

3. Create opioid-related education and training specifically for Elders.

As Elders may be sought out for information by community members, or may themselves be a caretaker for a family member, Elders need information about opioids to fulfill these roles. This may include bringing together Elders and youth, to co-learn together about life experiences, culture, language and technology.

“We are on a healing journey together: The path of the healing journey has been started and we are changing for the better.”

– Indigenous Advisory Committee Member



PRINCIPLE 4

Sustain and enhance substance use services for youth.

Indigenous youth deserve access to high-quality, accurate information about substance use that is strengths-based rather than fear-based, and reflective of their lived experiences. Indigenous youth experience higher rates of substance use than their non-Indigenous peers (SAMHSA, 2018). This calls for spending settlement funds on enhanced education, services, treatment, harm reduction, prevention, and supports made specifically for and by Indigenous youth. Abstinence-only messaging has historically been the primary content of substance use education for youth, though it is shown to be less effective than education that meets the lived realities of youth (Slemon et al., 2019). To create effective resources, youth perspectives need to be included within the work, and it is vital to invite Indigenous youth to the table when revising, creating and launching Indigenous youth-specific resources on substance use.

How can tribes adopt this principle?

1. Support creation and funding of culture-based youth programming.

To support substance use services for youth, tribal communities can create, support and enhance youth-centered cultural and traditional activities, which can include activities such as coming of age ceremonies, culturally-based youth programming (hunting, fishing, having conversations, teaching traditional language, etc.) and hosting culture camps, where youth can participate in these cultural activities.

2. Provide education, workshops and resources on youth substance use created specifically for AI/AN youth.

Youth need services that meet them where they are at, that allow for conversations about and tools for opioid prevention, harm reduction and treatment. The following list of youth-centered prevention, education, and treatment programs are examples to consider for creating or supplementing youth-specific programming in your community:

tribalprinciples.cih.jhu.edu/programming-services-support

3. Offer youth-focused mental health services and programming.

Mental health, spiritual and emotional support for youth are a vital part of supporting Indigenous youth, especially for those who use substances. A great example of this work is the Two Feathers Native American Family Services: A.C.O.R.N program. This program provides opportunities for Native American youth to learn about “cultural values and how they apply physically, mentally, spiritually, and culturally throughout our everyday lives”.



PRINCIPLE 5

Create opportunities for holistic well-being.

Many Indigenous Peoples consider health and well-being in holistic terms, encompassing the mind, physical body, emotions, spirit, and connections among all living and non-living things (Bourke, 2018). Addressing opioid use issues in Indigenous communities must incorporate holistic health and healing. This can include efforts to address the Indigenous social determinants of health, such as access to cultural activities, physical activity, housing, nutritious and culturally-based food, and employment opportunities that support community healing and connections. This also involves taking into consideration the impacts of racism, discrimination, assimilation and historical trauma as a result of colonization on Indigenous people and communities' health (Gameon & Skewes, 2021; Gonzelez, et al., 2022; Walters, et al., 2011). We know that the opioid crisis has impacts beyond the individual, and requires health services, social services, housing services, cultural supports, legal services, and more, to ensure that community members who use opioids and their family members are provided with the support they need.

How can tribes adopt this principle?

1. When creating opioid use programming, education and resources, focus efforts across prevention, harm reduction and treatment.

Having multiple approaches to meet people where they are with their needs regarding their opioid use will offer many pathways for support along their healing journey. The following resources offer a range of services and provide models that tribes might choose to invest in. Under the Approved Uses, funding for transporting community members to treatment centers, investing in syringe service programs and education to prevent stigma are several activities in which a community may choose to invest in.

Some helpful examples can be found at tribalprinciples.cih.jhu.edu/references.

“Address the whole person’s needs, not just one part.”

– Indigenous Advisory Committee

FAQ

What are the tribal opioid settlements?

The Tribal opioid settlements are also known as 'opioid payouts', and are funds that tribes will be receiving from opioid manufacturers and distributors.

Why are tribes receiving their own settlements?

Rates of overdose amongst Native Americans in the United States have been increasing since 2000, and opioid overdoses within Native American/Alaska Native communities continue to be disproportionately high (AASTEC, n.d.; CDC, 2022). This has resulted in devastating impacts on families and communities in tribes across the US. In turn, tribes have spent already-stretched resources on addressing the opioid overdose crisis, including investments in health care, social services, child welfare, law enforcement, other government services, and more (Estus, 2022). Tribal legal teams have been successful in advocating for tribes to participate in the opioid settlements to seek funding to remedy some of these impacts. Tribes were excluded from the historic Big Tobacco settlements in the 1990s, despite the fact that tribal health data was used in the negotiations between the state and tobacco companies (Hoffman, 2022; Locke, 1999). Given this history and these unique challenges, supporting tribal autonomy in creating, investing in and supporting existing programming and services is pivotal to addressing this growing issue.

How can my tribe be involved in this process?

Tribes and tribal legal teams may apply for the opioid settlements by submitting a Tribal Participation Form, found under the 'Settlements' tab on tribalopioidsettlements.com (the website that hosts information on the legal process and distribution of funding); each settlement has a separate Tribal Participation Form (e.g. Teva/Allergan, Walmart, etc). Law firms and unrepresented tribes may submit Tribal Participation Forms using the secure online portal, which is also located on the top bar of the Tribal Opioid Settlement page. If you are not sure if your tribe has submitted a Participation Form, please check in with your tribe's leadership team. All federally recognized tribes are eligible to participate in the Tribal Opioid Settlements, regardless of whether a Tribe filed an opioid lawsuit.

Who created the Tribal Principles?

The creation of the Tribal Principles was guided by the Indigenous Advisory Committee (IAC), comprised of diverse Indigenous experts from across the US who work with Indigenous people who use substances. Each IAC member has extensive personal, professional and experiential knowledge in the areas of substance use, addiction, and harm reduction, and brought their experiences, wisdom and knowledge to co-creating and guiding the creation of the Tribal Principles. Additionally, information and feedback on the Principles was gathered through a series of listening sessions with Indigenous and allied researchers, tribal leaders, service providers, and tribal community members throughout the United States, and from scholarship and practice experiences of our core Tribal Principle Project Team of Indigenous researchers.

Do tribes have any limitations on how they can spend their funding?

Yes. While the 'authorized activities' that tribes can partake in under the settlements are broad and respective of the needs of the unique 574 Federally recognized tribal communities, the money received "must be spent for tribal programs, services and activities to address the opioid crisis in that tribe's community" (5). The Tribal Opioid Settlement website features a list of activities that tribes can enact under Approved Uses, Schedule B and D. Schedule B includes three main sections: treatment, recovery and other strategies. Examples of these actions include treatment of opioid use, supporting people in treatment and recovery, connections to care, support for appropriate prescription of opioids/prevention of over-prescribing, prevent overdose deaths and other harms (harm reduction), training and research.

Schedule D of the Approved Uses document provides tribes with additional actions, and include traditional activities associated with cultural identity and healing, culturally competent integrated treatment models, culturally grounded community prevention, peacekeeping and wellness courts, and community workforce development and training.

When will tribes receive the funding?

The funds are beginning to be distributed for tribes that have submitted their Tribal Participation forms and payment instructions: this announcement regarding the distribution of funds was made on March 22, 2023. The settlements total well over \$1 billion and will be distributed over the next 15 years. The Directors of the Tribal Abatement Fund Trust ("TAFT") are working on distributing the funds to each participating tribe. There will likely be an additional payment before the end of 2023, and it is anticipated that future payments will be made on an annual basis.

The majority of the payments will be distributed according to the Tribal Allocation Matrix. For more information, please see the Tribal Allocation Order No. 1 and Tribal Abatement Fund Trust Notice to Tribes found on the Tribal Opioid Settlement website. Directors of Tribal Abatement Fund Trust will ask tribes to certify that they have used the funds in alignment with the Approved Uses, so that they can provide assurance to the court that the settlements are functioning as intended.

How can I provide feedback on these Tribal Principles?

The Tribal Principles and associated list of examples of activities are evergreen, which means that they can be adapted over time to meet the changing needs of communities. We appreciate and welcome feedback from tribal community members, leaders, and service providers. The Tribal Principles serve as considerations for tribes when making decisions around funding, and we intend for them to support tribal community health planning. Feedback, questions and comments can be sent to: tribalprinciples@jh.edu

Tribes and tribal legal teams can begin the process of applying for the opioid settlements by using the QR code or by visiting tribalopioidsettlements.com



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