



Prevention & Recovery

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“Humankind has not woven the web of life. We are but one thread within it. Whatever we do to the web, we do to ourselves. All things are bound together. All things connect.” — Chief Seattle, 1854

A Quarterly Newsletter ■ A Multi-Agency Alcohol and Substance Abuse Prevention Collaboration

Celebrating Recovery



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Celebrating Recovery in American Indian/Alaska Native Communities

Now in its 25th year, Recovery Month promotes the societal benefits of prevention, treatment, and recovery for mental and substance use disorders. This year’s theme, “Join the Voices for Recovery: Speak Up, Reach Out,” encourages people to talk openly about mental and substance use disorders. It is important for people to discuss the reality of recovery, ways of recognizing behavioral health issues, and how to reach out for help.

To celebrate this special month and highlight voices for recovery in Indian Country, Prevention & Recovery spoke with Kateri Coyhis, Director of White Bison in Colorado Springs, CO (<http://www.whitebison.org>). White Bison is a nonprofit organization

that has offered sobriety, recovery, addiction prevention, and wellness learning resources since 1988. White Bison’s culturally based programs are available to the Native American community across the country, and many non-Native people also use its training resources and products. These programs—which are implemented in communities, schools, and prisons—have helped thousands of people in recovery. White Bison offers programs for youth (which include general life teachings) and resources that support healthy fatherhood, motherhood, and families.

“Wellbriety Is a Way of Life”

“All White Bison’s programs present a core set of culturally based principles, values, and

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Office of Tribal Affairs and Policy: Native America’s Link to the Substance Abuse and Mental Health Services Administration

“The creation of the Office of Tribal Affairs and Policy represents a change in how SAMHSA partners with, advocates for, and supports the behavioral health needs of American Indians/Alaska Natives,” says Mirtha Beadle, Office of Tribal Affairs and Policy (OTAP) Director. In August, Substance Abuse and Mental Health Services Administration (SAMHSA) Administrator Pamela Hyde announced the formation of OTAP, which is organizationally housed in the Office of Planning, Policy, and Innovation. OTAP’s overall goal is to improve the behavioral health of American Indians and Alaska Natives (AI/ANs) by leading and supporting SAMHSA-wide initiatives to deliver resources and services to tribal communities. OTAP serves as SAMHSA’s central resource for all tribal affairs, tribal policy, tribal consultation, tribal advisory, and Tribal Law and Order Act responsibilities.

Prevention & Recovery spoke with Ms. Beadle about OTAP’s priorities, staff, and vision. OTAP’s work includes consultation, outreach, education, and stakeholder engagement. The Office of Indian Alcohol and Substance Abuse (OIASA), which is now part of OTAP, will be involved in these efforts. “With the formation of OTAP, we have an unprecedented opportunity to connect behavioral health-related work—by SAMHSA, and because of OIASA, by other federal agencies—in a more cohesive and thoughtful way,” says Ms. Beadle. “People involved with OIASA have worked very hard. This is a good time to refresh the commitment to our current partners and engage with new collaborators. Now is a good time to look at our goals down the road and take a fresh perspective on how to get there,” she adds.

OTAP has already mapped out a set of initial steps for “getting there” by identifying high-priority activities for the coming months (see “OTAP’s ‘List of 10’ Priority Actions”). “These are certainly not our only priorities. We narrowed this list of 10 from a larger list of about 40,” Ms. Beadle explains. “We encourage OTAP stakeholders to see themselves as part of these priorities and to contact us to become involved in making them happen.” Anyone can reach the Office by email (otap@samhsa.hhs.gov). Look for more information on the AI/AN page when the new SAMHSA website (<http://www.samhsa.gov>) is launched soon.

OTAP’S “LIST OF 10” PRIORITY ACTIONS	
1. Initiate development of a SAMHSA Tribal Behavioral Health Policy Agenda that is developed in concert with tribal leaders, representatives of tribal organizations, SAMHSA Centers and Offices, and other partners.	6. Establish a SAMHSA AI/AN Communications Strategy to more effectively reach and engage tribal leaders on issues that may have an impact on their communities.
2. Actively promote and facilitate tribal, federal, state, and local collaborations and actions that address the behavioral health needs of Native youth. of data that could assist tribes in their application for federal grants and manage their SAMHSA grant projects.	7. Support the development of a tribal affairs landing page on the SAMHSA website to facilitate access to information that is pertinent to tribal leaders and tribal communities.
3. Work to increase the number of SAMHSA grants that are awarded to tribes.	8. Fulfill SAMHSA’s Tribal Law and Order Act responsibilities through OIASA, which seeks to improve federal agency coordination and achieve meaningful progress on the reduction of alcohol and substance abuse among the AI/AN population.
4. Support efforts to improve the availability	9. Engage with the SAMHSA Tribal Technical Advisory Committee to identify AI/AN behavioral health priorities and shape the agency’s policy agenda.
5. Oversee and effectively manage implementation of the updated SAMHSA Tribal Consultation Policy.	10. Ensure progress on the SAMHSA Tribal Behavioral Health Agenda through the SAMHSA American Indian Alaska Native Team.

“I’d like to personally thank Rod Robinson, Director of OIASA for the past 2 years, for his commitment to improving the lives of tribal communities. Look for his article in this edition of the Prevention & Recovery newsletter,” says Ms. Beadle. The following OTAP staff members are also deserving of our thanks and recognition: Sharece Tyer, who serves as communications lead; Jean Plaschke, who leads efforts for Native youth; Sheila Cooper, who is the Senior Advisor for Tribal Affairs; and Michael Koscinski, who coordinates tribal action planning efforts. “OTAP staff will be working closely with the Indian Alcohol and Substance Abuse Coordinating Committee to promote Native American health and wellness. Of course, OTAP has a host of collaborators and partners—within SAMHSA and at other federal agencies—that do phenomenal work for Indian Country. Although we do not have enough space

to mention them by name, we are grateful for their efforts and look forward to working with them,” says Ms. Beadle.

When asked about her vision for OTAP in 5 years, Ms. Beadle replied: “I would love to see us speak with one voice about behavioral health issues in Native communities. SAMHSA’s programming should account for the uniqueness of tribal communities and meet their behavioral health needs. All too often, we view behavioral health programming through a general population lens and fit Native issues into that perspective. Sometimes that works, but it is often inappropriate. OTAP will have a different approach to addressing grants, working to meet the objectives of tribal leaders, and supporting improvements to state-tribal relationships so the agency can meet the unique behavioral health needs of Native communities.”

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New IHS Division Director of Behavioral Health



Dr. Beverly Cotton

The Indian Health Service (IHS), Office of Clinical and Preventive Services is pleased to announce the selection of Dr. Beverly Cotton

as the Director, IHS Division of Behavioral Health. Dr. Cotton is an enrolled member of the Mississippi Band of Choctaw Indians from the Pearl River community in Choctaw, Mississippi. She holds a Doctor of Nursing Practice degree from Vanderbilt University, Masters of Science in Nursing as a Primary Care Pediatric Nurse Practitioner from the University of Alabama at Birmingham, and a Bachelor of Science in Nursing from the University of Southern Mississippi.

Dr. Cotton's career began with the Indian Health Service in 2011 as a public health advisor in the Division of Behavioral Health where she launched the Tribal Forensic Healthcare Training Project and helped to revise the recently established Indian Health Manual, Chapter 29, Sexual Assault Policy. She has served as the Acting Director, Division of Behavioral Health since August 2013.

Prior to IHS, she served as adjunct faculty at Vanderbilt University School of Nursing and was employed at Our Kids Center, Inc. an integrated behavioral health and medical evaluation center for children and adolescent victims of sexual violence.

Her prior positions include various nursing and management positions in the private sector and with the Mississippi Choctaw Tribe. In her role as the Director, Division of Behavioral Health, Dr. Cotton will provide managerial leadership to continue the advancement of the agency's Alcohol and Substance Abuse Program, Mental Health Program, Domestic Violence Prevention Initiative, Tribal Forensic Healthcare Training Project, and the Metham-phetamine and Suicide Prevention Initiative.

Eugenia Tyner-Dawson: Connecting Passion with Purpose in Coming Full Circle



Eugenia Tyner-Dawson

At this juncture in her career, Eugenia Tyner-Dawson views her path which led to this point as the culmination of personal and professional experiences that were born out of a passion to help the American Indian and Alaska Native people of her childhood. She is a member of the Sac and Fox Nation and a descendent of the Absentee Shawnee Tribe of Oklahoma.

Tyner-Dawson currently serves as the Senior Advisor to the Assistant Attorney General for Tribal Affairs and the Executive Director of the Justice Programs Council on Native American Affairs in the Office of Justice Programs at the Department of Justice (DOJ). She works diligently each day to ensure that a mutual understanding exists between Tribes and the DOJ; that federally recognized Indian tribes understand the DOJ mission and how it impacts them and that federal officials understand how their policies affect tribes.

This is articulated through Tyner-Dawson's work to implement federal laws, executive orders, executive memorandum, departmental policies, and other efforts that comprise the intersection of public safety, justice, and wellness for American Indian and Alaska Native people through consultation, listening sessions, interagency workgroups, tribal advisory groups, and advising leadership on the unique aspects of tribal governments and their communities. Although she may not have mapped out her career in the direction it

has taken, she says life events navigated her toward this eventual direction.

Career Beginnings

Tyner-Dawson's career in law first began taking shape after completing basic training in law enforcement. She worked for the Lincoln County Sheriff Office in Oklahoma in the early 1980's where she obtained her Peace Officer Certification. From there, she worked as a security officer, a volunteer deputy court clerk, and later, a reserve policy officer when the tribe resurrected its judicial and law enforcement system. She began working in other capacities on the ground that allowed her to venture into areas that helped with the comprehensive needs of the tribe.

She wore a number of hats that included housing rehab, with the U.S. Department of Housing and Urban Development (HUD) and food distribution with the U.S. Department of Agriculture (USDA) and later as community service director, where she directed facility

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teachings,” Coyhis explains. “But they are flexible and customizable so each tribe can incorporate its own traditions and beliefs into programs that support healing from alcohol, substance abuse, co-occurring disorders, and intergenerational trauma.”

All White Bison programs are based on the Wellbriety Movement, which goes beyond helping people to attain sobriety to teaching them how to be well—spiritually, mentally, emotionally, and physically balanced. Wellbriety concentrates on the whole person, supporting personal awareness, growth and development, positive self-image and talk, and incorporate the teachings of Native culture into everyday life. “Wellbriety is a way of life and involves committing to a life of wellness and healing every day,” says Coyhis.

Medicine Wheel and 12 Steps

One of White Bison’s most popular programs is The Medicine Wheel and 12 Steps for Men and Women. The Medicine Wheel is an ancient Native American method for teaching important concepts about truth and life. When applied to everyday life, these teachings can influence significant positive change. White Bison developed The Medicine Wheel and 12 Steps for Men and Women as a culturally appropriate recovery program for Native Americans; however, both Natives and non-Natives now participate.

Initially a pilot program to support recovery for people in prison, The Medicine Wheel and 12 Steps for Men and Women now helps men, women, and youth (ages 13–21) in communities throughout the country. People in the program take the 12 Steps around The Medicine Wheel, with each step reflecting a particular value: Honesty, Hope, Faith, Courage, Integrity, Willingness, Humility, Forgiveness, Justice, Perseverance, Spiritual Awakening, and Service.

These core values guide all Medicine Wheel and 12-Step programs, but different communities may add experiences or traditions that are important in their cultures.

Mending Broken Hearts

Another popular White Bison program is Mending Broken Hearts, which focuses on healing from grief, loss, and intergenerational trauma. This program addresses a

critical issue: Traditional healthy cultures have been made “sick” by the anger, guilt, shame, and fear. This sense of shame and unresolved grief—passed on from generation to generation—negatively affect wellness and influence behavioral, emotional, physical, and spiritual issues. This powerful program helps people learn about grief and the masks people wear to cover up grief and to work on healing, forgiveness, and healthy grieving. For example, participants write letters to address unresolved relationships.

Wellbriety Movement

White Bison also supports a sustainable grassroots Wellbriety Movement by developing and providing culturally based training, tools, and resources. Three-day trainings in recovery programs teach people to facilitate and implement these programs in their own communities or organizations. People who meet a set of criteria and complete White Bison’s Firestarter Certification phases can facilitate The Medicine Wheel and 12-Step programs.

Firestarter Certification trains participants to lead small groups in the program’s curriculum and focuses on the processes for helping others work through The Medicine Wheel and 12 Steps with workbooks, videos, and mind mapping. Used in all White Bison programs, mind mapping brings out innate knowledge of the teachings so participants can apply it in everyday actions and decisions.

In the United States and Canada, an organization can become a certified Wellbriety Treatment Center by applying the culturally based principles, methods, and resources of this approach in its recovery program. By using teachings and principles from Native culture, these centers support recovery from alcohol and drugs and wellness of the whole person. These centers must meet a set of criteria for certification, and White Bison staff members visit annually to re-certify treatment organizations. White Bison lists certified Wellbriety Treatment Centers on its Web site.

A Message of Encouragement

For those in recovery, the lessons learned in programs—as well as the support of friends and family—are critical to achieving and maintaining Wellbriety. “My message to

people in recovery is one of encouragement,” Coyhis says. “Keep on attending meetings, working with a sponsor, calling with questions, and connecting with people in your community. If there is no recovery group in your community, then start one.”

“The motivation to work hard for recovery comes from different places depending on the person’s stage of life and reasons for starting the process.”

She adds that recovery happens every day, although it is not something that happens overnight. “The motivation to work hard for recovery comes from different places depending on the person’s stage of life and reasons for starting the process. Some have lost friends and family members and have experienced a great amount of grief and pain that they want to get rid of without hurting others. Many have hit rock bottom, and others do not want to jeopardize what they hold dear. When people in recovery see positive changes, their motivation is boosted further. Of course, the support of family and friends always helps,” she says.

Coyhis also emphasizes that recovery is something to celebrate. The more than 400 Recovery events around the country are indeed a nationwide celebration. Recovery Month events spread the positive messages: Behavioral health is essential to overall health, prevention works, and treatment is effective and people can and do recover. The Substance Abuse and Mental Health Services Administration (SAMHSA) Web site (<http://www.samhsa.gov>) provides resources and toolkits.

“Recovery Month honors recovery celebrations and raises awareness of the issues that people in recovery face (e.g., the need to address mental and physical health problems),” says Coyhis. “SAMHSA does good work to lift the stigma associated with recovery and send the message that people who have had substance abuse problems can change and are making positive contributions to society.”

Tribal Programs Gaining in Number and Strength



Dollars for families are more important than ever.

Tribal child support programs are growing by leaps and bounds. With the latest tribe—Red Cliff Band of Lake Superior Chippewa in Bayfield, WI—joining in July, the national child support program now boasts 56 fully comprehensive tribal programs and six more in the start-up phase.

Only 16 years ago, federal legislation created a path for tribal child support programs. Nine comprehensive programs (listed below) began their journey up that path, paving the way for the next 47 with more to come. These

original nine have collected more than \$160 million since 2001. Comprehensive tribal programs together collected over \$42 million in FY 2012 alone.

These dollars to families are more important than ever. The Pew Research Center reported in June that Native Americans have a higher poverty rate (26 percent) compared with the national average (15 percent). Unemployment rates for Native Americans also rank higher than the national average.

To help tribes enhance services to tribal families, we have published a new Office of Child Support Enforcement competitive grant funding opportunity for comprehensive tribal child support programs. The Tribal Innovation Grants will help eligible tribes strengthen their innovative, family-centered services, including through partnerships with other programs. Applications were due August 12.

Our Model Tribal System (MTS) participation is gaining strength, too. Five tribes now operate the system: Eastern Band of Cherokee Indians, Modoc, Forest County Potawatomi Community, Mille Lacs, and Lac Courte Oreilles. Three more tribes are installing the system: Winnebago, Suquamish, and White Earth. In OCSE we are fine-tuning performance, planning enhancements and modifi-

cations, and of course, continuing to roll out the MTS to tribes that request installation.

Our goal is to widen the path further for new tribal programs each year. More tribal child support will mean more parental support for Indian children who need it the most—more money for food, clothing, school supplies, and opportunities to thrive in many ways.

Nine tribal child support programs led the way:

- ▶ Chickasaw Nation of Oklahoma
- ▶ Forest County Potawatomi Community, Wisconsin
- ▶ Lac du Flambeau Band of Lake Superior Chippewa Indians, Wisconsin
- ▶ Lummi Nation, Washington
- ▶ Menominee Tribe, Wisconsin
- ▶ Navajo Nation, New Mexico
- ▶ Port Gamble S'Klallam Tribe, Washington
- ▶ Puyallup Tribe of Indians, Washington
- ▶ Sisseton-Wahpeton Oyate, South Dakota

Article retrieved at <http://www.acf.hhs.gov/programs/cse/blogs/voice/2014/07/31/tribal-programs-gaining-in-number-and-strength/>

Four-Day Run in Celebration of Sobriety and Health from One Rez to Another



Four-day run for sobriety.

“The number one killer of Indians is alcohol, but this is not just for Indians, this is for everyone. Many suffer, especially families. While you’re running, please say a prayer for those who suffer, for families, and for those that are healing,” said Red Lake Chairman

Floyd Jourdain, Jr. at the 2013 annual, four-day Anishinaabe Run for Sobriety and Health.

This year’s run began at Red Lake Chemical Health Programs on Wednesday, July 30, 2014, and finished at the Mash-ka-wisen pow-wow grounds at Fon du Lac on Saturday, August 2, 2014.

The runners came down Highway #89 starting about 10:30 AM, coming across Highway 2, through the City of Bemidji on Paul Bunyan Drive, and then went through the city heading east toward Leech Lake on the Old Cass Lake Highway (aka Roosevelt Road).

“Running sends a message. That’s our history as well as many other cultures,” said Tom Barrett, director of Red Lake Chemical Health

Programs, last year. “We used to send runners to deliver a message to other communities. This is the same—the message is sobriety. But it is more. It’s about health and healing. So many suffer from alcohol and diabetes.”

Children under 16 were accompanied by parents or adults and participants brought tents and sleeping bags. Meals were provided.

Article adapted from <http://indiancountrytodaymedianetwork.com/2014/08/01/four-day-run-celebration-sobriety-health-one-rez-another-156129>

Culturally Competent Recovery Services and the AI/AN Community

By Ken Winters, PhD, and Kate Winters, MA

National American Indian and Alaska Native Addiction Technology Transfer Center



Culturally relevant programs are important to recovery.

Numerous recovery programs and practices that serve American Indian and Alaskan Native (AI/AN) communities are informed by a variety of approaches based on Native culture and values. Such recovery services for the AI/AN community not only provide tribal communities with more culturally relevant and acceptable treatments and help to decrease overall substance abuse rates among Native Americans, they also add knowledge to the body of work on implementing research-community partnerships.

Below is a summary of exemplary efforts to develop and evaluate culture-based recovery services for AI and AN communities. All of them offer alternative, culturally appropriate treatments to address substance use disorders for Native individuals. The list is provided in alphabetical order.

Building Research Infrastructure for Dissemination, Goals, and Education (BRIDGE)

The BRIDGE is one of several NIH-funded programs as part of the Centers for American Indian and Alaskan Native Health at the University of Colorado (<http://www.ucdenver.edu/CAIANH>). BRIDGE involves a partnership between Center staff and a local tribe in order to empower the tribe to acquire important funding for prevention and other health-related program development and implementation. The partnership addresses four specific aims:

- ▶ To bring together Native community and academic partners to review the tribe's public health needs and priorities and develop a research agenda;
- ▶ To develop mechanisms for training a research workforce within the tribe in order to gain the skills necessary to pursue the research agenda;

- ▶ To cultivate effective dissemination methods for returning research findings to the local community, to provide the tribe, other researchers, service providers and policy makers with the best available information about health;
- ▶ To systematize procedures developed by the project in order to establish templates for building sustainable research infrastructure in Native and other communities.

Drum-Assisted Recovery Therapy for Native Americans (DARTNA)

The drum is a sacred instrument within American Indian culture. Drums are used in ceremonies, social dances, feasts, in preparation for hunting, and as a way of bringing people together. Drums are used in nearly every aspect of American Indian culture, from births to funerals. There is also a long tradition of the use of drums for therapeutic effects. Several studies have demonstrated physical and psychological effects associated with drumming (Winkelman, 2003). Rhythmic auditory stimuli, including drumming, singing, and chanting, may facilitate auditory drive, leading to increased alpha and theta wave production, and such wave changes can promote meditative states (Wright, 1991). DARTNA is a treatment program that relies heavily on drumming as part of the therapeutic effects (Dickerson et al., 2012).

Developed with assistance from a series of focus groups with AI & AN clients with a substance use disorder, treatment providers and a tribal community advisory board (Dickerson et al., 2012), the program also includes the concepts of the Medicine Wheel and the 12 Step Program developed by Don Coyhis and White Bison, Inc. (White Bison, Inc., 2007). A pilot study of the program revealed promising results, including improvement in the participants' depression, anxiety and fatigue, as well as enhanced spirituality (Dickerson, 2013 presentation).

Evidence-Based Practices and Substance Abuse Treatment for Native Americans

The emergence of evidence-based treatments is populated by Euro-American approaches

to substance abuse treatment, and these approaches may conflict with both American Indian and Alaska Native and 12-step healing traditions. In an effort to address this issue, the Centers for American Indian and Alaskan Native Health at the University of Colorado initiated the Evidence-Based Practices and Substance Abuse Treatment for Native Americans program. This project has three aims:

- ▶ To describe the use of specific evidence-based treatments in substance abuse treatment programs serving American Indian and Alaska Native communities;
- ▶ To describe the factors associated with the implementation of evidence-based treatments in these programs; and
- ▶ To identify methods for more effective dissemination of evidence-based treatments to substance abuse treatment programs serving American Indian and Alaska Native communities.

The project's Advisory Board reflects its high priority for diversity and inclusiveness; board members include clinicians and administrators from substance abuse treatment programs serving American Indian and Alaska Native communities, program evaluators, and researchers.

Immersion Camp

This novel alternative drug treatment approach involves a seasonal cultural immersion camp designed to approximate the day-to-day experiences of pre-reservation ancestors (Gone and Calf Looking, 2011). Designed for use in conjunction with adult clients referred for residential treatment on the Blackfeet Indian reservation, this program is inspired by the survival camps of the Red Power movement. The program is implemented during the summer months in multiple four-week cycles. Clients and staff reside in gender-segregated tepees pitched well away from settled areas of the reservation for the duration of the treatment cycle. Camp life involves "living off the land" while participating in a variety of associated Blackfeet traditional activities (e.g., hunting or fishing for food; making an individual pipe for personal prayer).

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Red Road Approach

The Red Road approach is a holistic healing journey based on Lakota/Nakota/Dakota world views. Several tribal treatment programs in the Upper Midwest have based their programming on these values. The Red Road approach is in the process of being manualized by Gene Thin Elk, who together with Wayne Evans and Rick Thomson developed this approach. Tribal members gather annually to celebrate the Red Road, which is based upon the “wopila” ceremony. The wopila ceremony involves giving (something) back for (something) that was received. What is given and received depends on the participants of the ceremony.

Thanksgiving ceremonies are integral parts of lifeway teachings of Indigenous people. People come from many parts of the world to participate in the Wase Wakpa community gathering to network, share resources, and participate in recovery experiences for holistic healing opportunities. It is a time for healing and renewal, and an opportunity to gain the energy and insight to stay physically, mentally, emotionally, and spiritually healthy.

This spiritual gathering is a self-initiated individual healing experience enhanced through powerful group interactions, utilizing the talents, expertise, and resources of the participants. The Gathering evolved from the Red Road Approach Enterprises of Medicine Wheel Inc., a partnership of the Student Counseling Center, University of South Dakota, and members of the Wase Wakpa community. The 25th Red Road Gathering will be held in Vermillion, South Dakota, at the National Guard Armory September 18 & 19, 2014. This year’s theme is “Forgiveness is Medicine for the Human and Natural for our Soul”.

Medicine Wheel and 12 Steps This culturally adapted 12-Step program for Native clients was developed by Don Coyhis and White Bison, Inc. (White Bison, Inc., 2007). Key components include teachings of the Medicine Wheel, the Cycle of Life, and the Four Laws of Change. The program consists of a series of modules, which include watching a video that explains Medicine Wheel teachings, and the sharing of insights in talking circles regarding how to apply these principles to

daily life. The Medicine Wheel is an ancient method for teaching important concepts about truth and life. Many Native American communities use a Medicine Wheel, although the colors and the symbols differ depending upon the culture. The 12 Steps of the program center on personal character and values (e.g., Step 1: Honesty; Step 2: Hope; Step 3: Faith).

One Sky Center

The One Sky Center is a national initiative to bring culturally relevant EBP/EBTs to Native communities (www.oneskycenter.org). The Center, which is located at Oregon Health & Science University in Portland, Oregon, is the first American Indian/Alaska Native National Resource Center for Substance Abuse and Mental Health Services. The overarching aim of the Center is to advance the development of culture-based interventions by applying existing scientific knowledge to the treatment for suicide, violence, and substance abuse.

The Center’s many projects and resources include the following:

- ▶ A research review on practices proven to work in Indian Country;
- ▶ The development of a framework for describing culture-based practices;
- ▶ Initiatives to facilitate communication between scientifically oriented professional organizations and government agencies in order to foster research and service collaborative projects; and
- ▶ The hosting of conferences that combine science, practice, and culture-based knowledge.

▶ Southcentral Foundation

The Southcentral Foundation, based in Anchorage, Alaska, is a health provider for approximately 55,000 indigenous people. The foundation’s health care model is organized around a Nuka Model of Care (Nuka is an Alaska Native word used for strong, giant structures and living things). The core principles of this model are the following:

- ▶ SCF’s focus is the needs, goals, and values of its customers. In this light, the customer is given a great deal of personal responsibility for his or her health decisions.

- ▶ Given the rural nature of Alaska, the healthcare team is integrated and built on a home model, rather than the traditional clinic-based setting.
- ▶ The medical teams promote customer compliance by offering same-day access and addressing medical issues over the phone whenever possible.
- ▶ Regular feedback is given to the medical teams in the form of process and outcome data. Employees’ salaries are based on the team’s overall performance.
- ▶ All new employees receive a multi-day orientation to the Nuka Model of Care, with a heavy emphasis on the culture of Alaska Native people.

With respect to addiction recovery services, the SCF principles are key ingredients to the diverse services provided, which include an outpatient program, a family wellness program (grassroots effort to bring wellness to the Alaska Native community by strengthening the family), and a program that introduces clients to activities that support lifelong recovery from drug addiction. These programs typically employ Native traditions (e.g., sweat lodge and talking circle).

Article retrieved at <http://www.attcnetwork.org/userfiles/file/NFA-AIAN/N%20AI%20%26%20AN%20ATTC%20Newsletter%20Vol%201%20Issue%202.pdf>



The Medicine Wheel is an ancient method for teaching Native American concepts about truth and life.

President Obama Engages Native Youth at My Brother's Keeper Town Hall

By Raina Thiele, Associate Director, White House Office of Intergovernmental Affairs

President Obama hosted a town hall session where he gave remarks to announce new commitments in support of the My Brother's Keeper (MBK) initiative and engaged in dialogue with young boys and men of color. Youth from the Center for Native American Youth's Champions for Change program, Native American Political Leadership Institute's INSPIRE Initiative, and Navajo Nation attended the town hall and asked the President about the Administration's work to support Native American language and cultural preservation. The President reaffirmed his commitment to

Native American youth and the importance of honoring one's roots. Recalling his trip to the Standing Rock Sioux Indian Reservation in June, he applauded the tribe's work on Lakota language revitalization and the powerful stories he heard from the tribe's young people.

In his remarks, President Obama thanked the National Congress of American Indians (NCAI) and their partners for committing to establish an MBK task force for Native American boys and men. NCAI will form the task force in partnership with the Center for Native American Youth, Native American Boys and Girls Clubs of America, National Indian Child Welfare Association, National Indian Education Association, and UNITY Inc. NCAI stated in a press release that the task force will "coordinate and serve as the central point for sharing important work, opportunities, and resources for our youth."

The President also announced that Earvin "Magic" Johnson and Deloitte CEO Joe

Echevarria will launch the National Convening Council (NCC), an independent private-sector initiative bringing together leaders from business, philanthropy and faith, and youth and nonprofit communities to combine their efforts to have a positive impact on boys and young men of color.

"My Brother's Keeper isn't some new, big government program. It's actually a team effort," said President Obama. "It's all about a whole bunch of folks -- educators, business leaders, faith leaders, foundations, government -- all working together to give boys and young men of color the tools that they need to succeed and make sure that every young person can reach their potential."

Article retrieved at <http://www.whitehouse.gov/blog/2014/07/21/president-obama-engages-native-youth-my-brother-s-keeper-town-hall>

The President and First Lady's Historic Visit to Indian Country

by Raina Thiele

On Friday, June 13, President Obama made a historic trip to Indian Country when he traveled to the Standing Rock Sioux Tribal Nation in Cannonball, North Dakota. This trip marked his first visit to Indian Country since taking office, and one of the few trips to an Indian reservation by a sitting President. Accompanied by the First Lady, the President met with Native American youth, tribal leaders, and attended the tribe's annual Flag Day celebration where he spoke to Indian Country.

Since taking office, President Obama and his Administration have worked closely with tribal leaders and last year he created the White House Council on Native American Affairs to ensure cross-agency coordination and engagement with Indian Country. The President has also hosted five annual White House Tribal Nations Conferences, an event where he invites leaders from all federally recognized tribes to engage in direct talks with high-level Administration officials.

As the President said in North Dakota, "Today, honoring the nation-to-nation relationship

with Indian Country isn't the exception; it's the rule. And we have a lot to show for it." During his remarks at the powwow, the President discussed his Administration's nation-to-nation relationship with tribes and promised to work with tribal leaders to expand economic and educational opportunity for Native Americans.

"My Administration is determined to partner with tribes, and it's not something that just happens once in a while," the President said. "It takes place every day, on just about every issue that touches your lives. And that's what real nation-to-nation partnerships look like."

The President focused on his efforts to improve education in Indian Country. In conjunction with his trip, the White House released a fact sheet on economic development and education, including a blueprint for reforming the Bureau of Indian Education. He also discussed his plans to invest in job training, tribal colleges, roads, high-speed Internet, and energy projects.

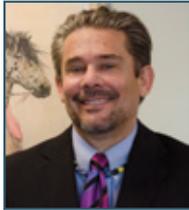
"We can follow the lead of Standing Rock's most famous resident, Chief Sitting Bull," the President remarked. "He said, 'Let's put our minds together to see what we can build for our children.' So let's put our minds together to build more economic opportunity in Indian Country -- because every American, including every Native American, deserves the chance to work hard and get ahead."

Article retrieved at <http://www.whitehouse.gov/blog/2014/06/19/president-and-first-lady-historic-visit-indian-country>



President Obama makes historic visit to Indian Country.

Reflections



Rod Robinson
Northern Cheyenne
Former Director, Office
of Indian Alcohol and
Substance Abuse,
SAMHSA

Greetings to all my relatives,

Celebrating Recovery in American Indian and Alaska Native Communities is the theme for this edition of the Prevention and Recovery Newsletter and there is much to celebrate as you have seen in articles submitted for this edition.

This reminds me of a time almost 30 years ago when I was fairly new to my own recovery journey. Several of us in the Indian recovery community were encountering very negative stereotyping that was being cast onto Indian Country. This included statements like, "There really are not very many Indians in active recovery and those that are often go back to drinking because it is just too hard for them to remain clean and sober."

Well, you can imagine that statements like that tend to bring out strong emotions. However, we chose to take a proactive rather than reactive position and decided

to do what we could to change that perspective. We chose to create the first ever, in that region of the country, *Intertribal Celebration of Recovery Campout*. Little did we know that this celebration would spark an annual event that lasted for over 28 years and would reach out to a new reservation or Native community each year throughout the United States and Canada.

We banded together for an entire year to raise funds for this event. It was a year of working together to put on fry bread and chili sales, garage sales, arts and craft events at community Pow Wow celebrations and searched for donations in very creative ways that included a donated buffalo for the feast to come.

Little did we know that we were forming a grassroots effort that would be emulated for years to come. This year-long preparation did so much more than raise funds; it raised HOPE in our communities. It showed many within our communities that recovery is real and resulted in many new faces attending recovery meetings and many wanting to become a part of this important movement to demonstrate the deep richness that exists in Indian Country.

All of this effort to work together to strengthen one another and show that lasting recovery is real in our communities culminated in a 3-day campout where over 400 individuals and families came together to

share stories about how we rose above our struggles to help each other to find a life of recovery. We celebrated recovery long into the night around campfires and early in the morning around the coffee pot. We danced to the strong beating of the drum. We shared laughter and tears, participated in races and traditional games. When the dust finally settled, we were all left with a powerful feeling.

We had strengthened our own recovery and together had decided that we would never again bow our heads in shame. We would no longer listen to the negative comments about how we were perceived by others. We knew to the core of our being that as Indian people we have a message to carry and that is a message of hope.

This message continues today as so many of us have taken on this sacred responsibility as a life mission to reach out to all people who still suffer from this illness with encouragement to believe that they too can reach for and begin to celebrate their own recovery journey. *Good people that come together with a common mission will do great things.*

For more information on how you can be a part of a community of recovery, please visit or contact the Office of Indian Alcohol and Substance Abuse at www.samhsa.gov/tlaa or (240) 276-0549.

Eugenia Tyner-Dawson: Connecting Passion with Purpose in Coming Full Circle (continued from page 3)

construction, grant writing, and education programs, and served as the tribe's planner, working with numerous federal agencies. She led the first tribal self-governance regional juvenile detention center construction project with the tribe's Department of Interior Tribal Self-Governance Compact.

It was here that law intersected with behavioral health for the first time. As a program administrator for the tribe, she was often tapped to review program grants that may have been problematic. Her goal was to keep the programs in operation by creating solutions that rectified program issues. One grant was with the Office of Substance Abuse Programs at the Department of Health and Human Services (HHS). This 5-year grant required an evaluation. When Tyner-Dawson stepped in to direct that, she also became responsible for the tribe's mental behavioral program that was designed to assist at-risk youth and adult populations.

"I had a great interest in Indian Children and the behavioral health issues that create problems for Indian families" Tyner-Dawson said but added that it was frustrating because the federal government often dictated how programs would run. "We would see that grants for programs were not creating the effect in as quick a fashion as we wanted it to."

A Desire for Change

A desire for quicker, effective change and her sister's death from co-occurring disorders led Tyner-Dawson to pursue jobs in Washington that would allow her to make changes in areas that empowered tribes to have greater self-governance.

"I worked hard at home to chase funding and find grants to improve services for tribes", she said. "Seemed like no matter what I did, it did not work. I could not save my sister and I miss her terribly. I'm in a far better position today to effect the changes I wanted to make at home."

Tyner-Dawson began her federal service career with the Indian Health Service where she continued her work in the Office of Tribal Self-Governance, which empowers tribes to look over their health programs, functions, and activities to make more of their own decisions rather than the federal government. Her tribe, Sac and Fox, was the first one to enter into an IHS self-governance compact. She helped set up required mandated negotiated rule-making procedures for IHS, designed to work with tribes on developing federal regulations to transition from a demonstration to a new self-government permanent program.

She also served as senior adviser for tribal affairs under HHS Secretaries Donna E. Shalala, Tommy G. Thompson, and Michael O. Leavitt, where she helped reactivate a long dormant intradepartmental Council on Native American Affairs. She also served under a detail as the Acting IHS Deputy Director to implement several new senior executive

(continued on page 11)

Announcements

Commemorating the 25th Anniversary of National Alcohol and Drug Addiction Recovery Month

Support for persons in recovery from substance use disorders is a major component of the Obama Administration's National Drug Control Strategy. On September 17, the Office of National Drug Control Policy marked the 25th anniversary of National Alcohol and Drug Addiction Recovery Month with a special White House event that spotlighted stories of recovery and triumph, offered a message of hope to people in recovery, and helped lift the stigma of addiction and recovery. The event is available for viewing at <http://www.whitehouse.gov/live>.

November is Native American Indian Heritage Month

On August 3, 1990 President of the United States George H. W. Bush declared the month of November as National American Indian Heritage Month, thereafter commonly referred to as Native American Heritage Month. This commemorative month aims to provide a platform for native people in the United States of America to share their culture, traditions, music, crafts, dance, and ways and concepts of life.

Federal Agencies are encouraged to provide educational programs for their employees regarding Native American history, rights, culture and contemporary issues, to better assist them in their jobs and for overall awareness.

Resources

Grantmaking Program



First Nations Development Institute is an American Indian institute that helps strengthen and revitalize the economies of Native American, Alaska Native, and Native Hawaiian communities. Our grantmaking program provides both financial and technical resources to tribes and Native nonprofit organizations to support asset-based development efforts.

First Nations offers grant support through the Eagle Staff Fund, as well as other donor-advised and donor-designated funds. For more information, visit <http://www.firstnations.org/grantmaking>

The Gates Millennium Scholars

The Gates Millennium Scholars (GMS) Program selects 1,000 talented students each year to receive a good-through-graduation scholarship to use at any college or university of their choice.

The 2015 GMS Online Application is open until the Wednesday, January 14, 2015 11:59 pm EST deadline. For more information, visit <https://scholarships.uncf.org/Program/Details/2bfd8f53-40aa-4705-9f8b-d92d972e59df>

Events



2014 Native Youth Conference

November 17 - 19, 2014

Gaylord National Resort & Convention Center National Harbor, MD

The 2014 Native Youth Conference will be held on November 17-19 at the Gaylord National Resort & Convention Center in National Harbor, MD. The Conference will bring together for the first time, Native youth, tribal Elders, representatives of SAMHSA-funded projects, government officials, and SAMHSA staff who are vested in the future of AI/AN youth. The goals include:

- ▶ Increasing awareness about behavioral health and building the skills of Native youth
- ▶ Providing opportunity and value to the youth voice and a platform from which to speak
- ▶ Engaging Native youth in a continuing national dialogue about behavioral health
- ▶ Developing communication products created by Native youth for Native youth focused on suicide and substance abuse prevention, mental health promotion, and recovery
- ▶ Promoting best and promising practices developed by SAMHSA tribal grantees

Conference Highlights

- ▶ Cultural Opening
- ▶ Youth-Focused Empowerment Workshops
- ▶ Cultural Pow Wow
- ▶ Lessons Learned from SAMHSA Grants
- ▶ Special Native Guests
- ▶ Federal Listening Session
- ▶ Opportunities to Share with Others in the Field
- ▶ Final Day Special Evening Event

<https://www.marriott.com/hotels/travel/wasgn-gaylord-national-resort-and-convention-center/>

For program-related questions, contact Sheila Cooper at Sheila.Cooper@samhsa.hhs.gov.

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“Recovering from addiction to alcohol and other drugs takes strength, faith, and commitment. Men and women in recovery showcase the power each of us holds to transform ourselves, our families, and our communities. As people share their stories and celebrate the transformative power of recovery, they also help dispel myths and stigmas surrounding substance abuse and offer hope for lifestyles free from alcohol and other drugs.”

— President Barack Obama on Recovery

positions at IHS headquarters and worked on the Indian health care improvement act reauthorization, and later assisted the HHS Secretary to revise the secretarial department-wide tribal consultation policy. She also worked with HHS Office of Planning and Evaluation to bring federal officials and tribes together to complete a Tribal Self-Governance Feasibility Study for HHS grants, and to help HHS complete a study to improve tribal access to HHS grants.

From there, she transitioned to the Office of Justice Programs with the DOJ, where she began elevating and prioritizing tribal work through a Justice Programs Council on Native American Affairs. In this capacity, she demonstrated that tribes and the federal government could work together and come up with more flexible programs, and better coordinated tribal efforts across several OJP programs. This expanded into an interdepartmental effort between three federal departments, two independent agencies and their programs to jointly provide training, technical assistance and consultation to tribes.

Tyner-Dawson has also worked on the violence against women act reauthorization, the first-ever tribal justice advisory group for Justice and the Tribal Law and Order Act (TLOA), which spawned the more recent interagency steering group on alcohol and substance abuse operated under a Memorandum of Agreement with Justice, Interior, and Health and Human Services.

Her agency is responsible by statute through the Tribal Law and Order Act to provide technical assistance to tribes to implement local alcohol and substance abuse plans. They assist BIA, SAMHSA, IHS and other agencies with determining what their action plans are comprised of, much of what she did when she worked for her tribe in Oklahoma.

Tyner-Dawson says that she is excited that she is able to impact law enforcement in tribal communities. "Mental health issues are not typically a part of what one thinks of relating to the Justice mission, but with so many crimes occurring, not because of criminal intent but for crimes that involve alcohol and substance abuse," she said.

She holds an Associate's Degree in Business Administration and is in school again completing her Bachelor's Degree in Administration.

Tyner-Dawson has finally come full circle in her career and she credits others for helping her.

She says that although it is too late to help her sister, it is never too late to help her people. "I do not work and cannot work alone," Tyner-Dawson said. "I'm known for my collaboration with federal and tribal entities, wherein, I rely on so many smart, professional, and interesting colleagues and friends every day.

"I've stood on the shoulders of others who walked before me, and I continue to sit at the knee of others to learn more each day. I have been very blessed by wonderful people, many of whom have walked on, but they remain in my memory and my heart. I have a beautiful family that supports and loves me. I am very, very fortunate."

Ah-ho.

Feel free to copy and distribute

Contributing Agencies



Newsletter Contact Information

If you have any questions, concerns, or would like to contribute to this newsletter, please contact:

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