



# Harm Reduction Approach

Models of Tribal Promising Practices:  
**Tribal Opioid Overdose Prevention  
Care Coordination and Data Systems**



**SEVEN DIRECTIONS**  
A CENTER FOR INDIGENOUS PUBLIC HEALTH

# Harm Reduction Approach

## Indigenous Centered Praxis

- Include culturally-grounded care.
- Link to community-centered prevention groups.
- Build in cultural activities.
- Share meals or other culturally meaningful moments of connection.

## Relationships

- Ensure meaningful access to care.
- Build partnerships within and external to American Indian or Alaska Native community.
- Consider systems integration to ensure harm reduction is realized (e.g., courts, housing, etc.)
- Identify ways to reduce financial burdens to obtain treatment.
- Include administrative practices needed to maintain quality and scope of services needed.
- Implement training and community education efforts to reduce discriminatory practices and address stigma.

## Capacity Development

- Review assessment measures to ensure fit.
- Develop a patient tracking system that will allow practitioners to extract longitudinal data to see how individual patients do over time.
- Provide descriptions of how patient information will be protected and who has access.
- Include qualitative assessments of program participants to tell the story.



## Harm Reduction Overview

▶ **What it is.** The harm reduction approach, a public health approach developed in the 1980s, originated in the development of psychological treatments to address alcohol use disorder. The approach meets an individual “where they are at” (Marlatt & Witkiewitz, 2002, p. 867), while supporting client-led development of treatment strategies based on the client’s motivation, strengths and limitations (Stancliff, Medley, and Matthews, 2019; Witkiewitz, 2005).

In the context of OUD, harm reduction approaches include syringe exchange programs, supervised consumption sites, and naloxone distribution, as well as provider education toward maximizing harm reduction (e.g., naloxone co-prescribing in the context of pain treatment) (Lavalley et al., 2018; Mancher, Leshner, & National Academies of Sciences, Engineering, and Medicine, 2019).

▶ **Effectiveness.** This approach has often met resistance from individuals, practitioners, and communities who espouse abstinence as the only appropriate goal for substance users (Marlatt & Witkiewitz, 2002), though research demonstrates that harm reduction approaches are effective in reducing the risk of death and other harmful outcomes of opioid use (Bukten et al., 2012; Chimbar & Moleta, 2018; Ng, Sutherland, & Kolber, 2017).

▶ **Why it’s important.**

**Indigenizing Care for Opioid Use.** Within AI/AN communities, researchers have identified the need to ensure that AI/AN community health providers have “a commitment to Indigenizing harm reduction and addiction treatment policies, practices and supports by incorporating traditional Indigenous values... [and a recognition that] the impacts of colonialism and institutional racism [continue to affect AI/AN individuals and communities], while acknowledging the strengths, abilities, and inherent rights of Indigenous Peoples, [as well as developing an approach to address] the underlying conditions that drive high rates of overdose, such as those related to family, housing and access to health care” (Lavalley et al., 2018, p. E1466; Leston et al., 2020).

**Access to Care.** SUD morbidity and mortality rates remain major public health issues among tribal and urban Indian communities. Access to opioid treatment and harm reduction services represent major challenges to addressing opioid overdose prevention within AI/AN communities (National Congress of American Indians, 2018; Fisher, Cahill, Broyles, Rorke, & Robinson, 2017). Ensuring opioid treatment meets community-grounded approaches to care can support improved access to care and reduce opioid related harm. In addition, three main issues serve as barriers to opioid harm reduction approaches: (1) the limited access to and availability of opioid data; (2) the stigma associated with accessing opioid treatment and other services; and, (3) contextual issues such as access to care, financial burden of care, and other needs (Lavalley et al., 2018; Leston et al., 2020).

## ▶ Harm Reduction Approaches: Key Components in AI/AN Settings

**Data collection and access to data** remain critical limitations for fully implementing harm reduction approaches. In particular, AI/AN enrollment and identity inform, and necessarily limit, how data on Indigenous people are collected. In addition, some non-tribal treatment settings fail to collect data on AI/AN individuals. These limitations likely disguise the depth and breadth of the opioid overdose crisis among AI/AN individuals and communities. Addressing this issue within the framework of tribal self-governance and self-determination, means that the data on overdoses and related outcomes among AI/AN populations must be owned, controlled, and/or accessible by AI/AN communities and programs aimed at addressing the opioid epidemic (Lavalley et al., 2018; Leston et al., 2020).

**Stigma-free access to opioid treatment services** represents an essential component to harm reduction approaches within AI/AN communities (Leston et al., 2020). Providing education and training in tandem with harm reduction efforts supports the reduction of stigma among individuals, program staff, providers, and community members. Clarifying the specific harm reduction support offered helps individuals and providers make informed decisions about treatment regimes.

The use of health fairs, lifting bans on purchasing syringes with federal dollars, and removing punitive sanctions for people who use drugs while in treatment are some of the approaches that could be added to existing harm reduction

efforts. Tribally-specific services, educational supports, and Indigenous-centered strategies are important as every community is different and faces unique challenges.

**Meaningful solutions to contextual barriers**, such as delays in receiving care, limitations in accessing harm reduction services, limited education on harm reduction options by both providers and patients, financial burdens, and preventing unnecessary hospitalizations are important elements in ensuring successful harm reduction approaches in Indian Country (Leston, 2020). Some of these barriers may be related to discrimination clients face in accessing services. Identifying and eliminating discriminatory processes will institutionalize an equitable approach and address client challenges in access to care (Pro & Zaller, 2020). Moreover, ensuring clients have access to the full array of harm reduction approaches can ensure client success, as well as satisfaction and engagement in the overall treatment approach. This would include offering needle exchange programs, in addition to medically assisted treatment (MAT), or providing clients with information about local needle exchange opportunities or alternatives to ensure safe needle use. Diabetic needles often require prescriptions, and also serve as a deterrent to purchasing new needles. Further, clients find providing personal information a deterrent, as they are often unclear about whether or not law enforcement will be involved or if their information will be used to deny them access to other services.

“**Harm reduction services intervention and policies must be designed to fit individual and community needs by listening, respecting, and meeting [clients] where they are at, instead of leaving them where they are at**” (Leston et al., 2020, p. 78).



## The White Earth Nation Health Model



This section describes the Indigenous harm reduction approaches of White Earth Nation of Minnesota. The White Earth Nation relies on a combination of traditional tribal approaches with EBPs from Western medicine.

### Why was it developed?

Twenty years ago, an elder from the White Earth Nation stood up at a community forum and asked how the Nation was going to address HIV and injection drugs. This was the beginning of the movement to develop an approach aimed at reducing overdose deaths. Over the course of the program, compassion within the community for those dealing with OUD has increased. With American Indians in Minnesota experiencing an overdose rate six times higher than the national average, data-driven strategies and community engagement have provided essential support to inform White Earth Nation's approach. They are assessing social determinants of health, with the intent to address them through other avenues of individual and community support systems.

### How was it developed?

The White Earth Nation's collaboration and coalition-based approach focuses on how to ensure an integrated approach to harm reduction, allowing for comprehensive treatment of multiple substances as needed. They have taken harm reduction to the

systems level, developing essential partnerships with law enforcement, emergency medical services (EMS), local counties adjacent to tribal lands, the state of Minnesota, and federal partners to ensure the continued sustainability and effectiveness of the harm reduction program. Program staff partner with cultural groups to enhance the client experience, support community and cultural connectedness through cultural activities, build an active recovery community, and provide key follow-up to those clients new to care to ensure engagement and ongoing success. At the point of Naloxone refill, recipients are asked to complete a survey assessing demographics, their current drug use, the effectiveness of Naloxone administration, and the quality of law enforcement and EMS response. These data are analyzed over time to inform program strategies with community partners. Clinton Alexander, the Interim Director of White Earth Nation Behavioral Health, routinely reviews fatality, overdose, and drug use data to determine next steps in prevention efforts. These efforts continue to deepen the White Earth Nation's comprehensive systemic harm reduction approach through ongoing capacity building for program staff and partners.

## Indigenous Centered Praxis



The White Earth Nation's innovative approach includes incorporating traditional healing methods (i.e., use of traditional medicines such as tobacco and sweetgrass) and values with a harm reduction approach that evolved through Western science. The success of harm reduction also heavily relies on the program's integration of the community's cultural values.

## Relationships



Accountability represents a core component, which informs both data collection and the strategic network of partners. Key community partnerships among behavioral health, law enforcement, and EMS ensure access to these data in real time. These essential program elements have combined to form a "systemic harm reduction" approach, which has successfully reduced the number of fatal overdoses among participants.

## Capacity Development



White Earth has a comprehensive sustainability plan, which allows for third party billing, includes 638 supplemental income, and ensures cost recovery for appropriate services at Federal encounter rates.



*So when I think of harm reduction for White Earth Nation, the mandate came from the community. It came from elders almost 20 years ago demanding that we do something, and that there was an acknowledgement that the services and systems are in place to keep people alive. **The driving force behind harm reduction comes from the community, the permission from the community to move in that direction.** That mandate to the work around overdose came from our community individuals who were tired of seeing others in their community die of overdose, knowing that they're preventable. So I think it really is rooted in the community. The work was initiated through the community and tribal programs saw and understood their responsibility to support these efforts."*

- Clinton Alexander, Interim Director of White Earth Nation Behavioral Health

# COMPONENTS OF THE White Earth Nation's Health Model

<b>Cultural Fit</b>	Cultural values integrated Provide access to traditional medicines, herbs, tobacco, sage, and sweet grass Sobriety feasts	<b>Innovative Practice</b>	MAT program for pregnant women with a focus on the whole family	<b>Knowledge Sharing</b>	Harm Reduction Coalition
<b>Cross Sector Collaboration</b>	Federal, State, County partners EMS and law enforcement Cultural groups University of Minnesota School of Medicine	<b>Meeting Community Needs</b>	Integrated care across systems Community outreach and education to reduce stigma	<b>Community Investment</b>	Peer recovery support Pre-arrest Diversion Framework Elder Support
<b>Leadership</b>	Elected officials value this work Elders help to remind community of the values and guide the work Cultural authorities are supportive	<b>Professional &amp; Cultural Development</b>	Use of multidisciplinary teams Quality improvement	<b>Sustainability</b>	Cultural authorities are supportive Comprehensive sustainability plan
<b>Data Infrastructure</b>	Taking bold steps and using data to identify intersections within a person's life Established comprehensive data sharing agreements	<p>The White Earth Nation harm reduction approach combines culture, community, and context with Western medicine, meeting with patients and partners where they are at, and relying on data to inform a systemic harm reduction approach that integrates health, behavioral health, and social services.</p>			

## Summary

In summary, tribal harm reduction approaches reflect best practices evidenced in the literature. Integrating an Indigenous approach, developing solutions to address contextual challenges, working to reduce discriminatory practices, improving the collection, management and use of data in decision making, and actively dismantling stigma of opioid treatment represent approaches evidenced in the White Earth Nation Harm Reduction model. Addressing these pressing issues has led to the engagement of those tribal members with an OUD. As a result, those able to effectively engage with the program have seen successes, including reintegration in the community, a system of support available in case of relapse, and cultural supports that reaffirm community connectedness. These elements are possible through the exercise of tribal sovereignty, along with the commitment to community wellness and the power of community support.

