Narrative for Purpose Area #3

1. Identify one or more of the crime and public safety problems described in the Tribal Community and Justice Profile that the tribe plans to address through the proposed grant funding and describe the problem(s) with as much additional detail, including data, as necessary to clearly describe the nature and extent of the problem(s).

Alcohol and substance abuse in Alaska Native communities are complex problems extending far beyond the acts of drinking or drug use. These issues represent some of the tangible effects of the loss of culture experienced by Alaska’s First Peoples since colonization of the territory began more than two centuries ago. The effects of historical trauma are compounded as Alaska Native people face the challenges of attempting to reconcile their ancestral traditions and values with the demands of the modern age and the dominant culture. ("Alaska Natives Combating Substance Abuse and Related Violence through Self-Healing: A Report for the People" University of Alaska, Anchorage, June, 1999)

The small Southeast Alaska Native community of Kake experiences a range of problems associated with high rates of alcohol and substance abuse. These include crimes and misdemeanors such as assault, bootlegging, domestic violence, resisting arrest, criminal trespass, DUI, under-age consumption, juvenile delinquency, and disorderly conduct.

Specific data for Alaska’s small far-flung communities is difficult to obtain. This is true for the community of Kake, as well, due to its small population, isolation, and lack of consistent law enforcement. Turnover of both State Troopers and Village Public Safety Officers is high, and the city often goes weeks at a time without law enforcement. These factors contribute to unreliable local statistics regarding rates of alcohol and
substance abuse related problems and crimes. However, statewide, regional and urban 
and suburban community statistics show that all of Alaska’s communities are seriously 
impacted by alcohol and substance abuse.

In 2006, SEARHC’s Community Report for Kake indicated that alcohol-related 
crimes made up 43% of all Kake’s criminal cases. However, it can be assumed that other 
criminal charges are also alcohol-related, in cases involving assault, domestic violence, 
and disorderly conduct.

Kake’s Criminal Cases, 1998 to 2014

<table>
<thead>
<tr>
<th>Crime</th>
<th>Cases</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public Intoxication</td>
<td>10</td>
<td>2.2%</td>
</tr>
<tr>
<td>Contributing Alcohol to a Minor</td>
<td>10</td>
<td>2.2%</td>
</tr>
<tr>
<td>Assault</td>
<td>62</td>
<td>14%</td>
</tr>
<tr>
<td>Assault, Domestic Violence</td>
<td>43</td>
<td>9.7%</td>
</tr>
<tr>
<td>DUI</td>
<td>91</td>
<td>20.5%</td>
</tr>
<tr>
<td>DWLCSR</td>
<td>54</td>
<td>12.2%</td>
</tr>
<tr>
<td>Minor Consuming</td>
<td>81</td>
<td>18.3%</td>
</tr>
<tr>
<td>Disorderly Conduct</td>
<td>92</td>
<td>20.8%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>443</strong></td>
<td><strong>443 Cases</strong></td>
</tr>
</tbody>
</table>

The State Magistrate estimates that 98% of the cases passing through the State 
Magistrate’s Court in Kake are drug and alcohol-related; a majority of that percentage are 
repeat offenders, (Mike Jackson, State of Alaska Court Magistrate, verbal communication 
2015). The specific substance abuse patterns among adult offenders in Kake are chronic, 
binge, and weekend alcohol and drug abuse. The most commonly abused substances are 
alcohol, marijuana, cocaine, methamphetamine, and prescription drugs. The impact on 
the community has been severe, contributing to physical and mental health issues
including Fetal Alcohol Syndrome Disorders (FASD), fatal accidents, personal financial depletion, immediate and long-term health problems, and suicide.

Three landmark studies between 1989 and 1994—the Alaska Federation of Natives (1989) study, the Pulitzer Prize-winning series “A People in Peril” by the Anchorage Daily News (1989), and a report from the Alaska Natives Commission (1994)—confirmed that problem drinking is “epidemic” among Alaska Natives and identified alcohol abuse as their number one health problem. Heavy drinking is associated with suicidal behavior, suicide, and deaths from unintentional injury (Kettl & Bixler, 1993; Marshall & Soule, 1998; Borowsky, Resnick, Ireland, & Blum, 1999). Unintentional injury rates are more than three times higher than the overall U.S. population, while suicide rates are more than four times higher (U.S. Department of Health and Human Services, Indian Health Service, 2001). Suicide is a particularly critical problem among young male Alaska Natives, who are 14-40 times more likely to commit suicide than other U.S. males in the same age group (Marshall & Soule, 1998; Center for Substance Abuse Prevention, 2002). Alcohol use is also linked to homicide, family violence, and fetal alcohol syndrome. Binge drinking and abuse of inhalants and marijuana is common, especially in male adolescents and younger adults (Zebrowski & Gregory, 1996; Stillner, Kraus, Luekefeld & Hardenbergh, 1999; Miller et al., 2002; Denny, Holtzman & Cobb, 2003).

Many authors and researchers have emphasized the need for a culturally appropriate understanding of problems in Native American and Alaska Native populations because of the complexities and varying influences related to alcohol abuse (Spicer et al., 2003). This issue is highlighted even more when one considers that in the
past, alcohol researchers often alienated communities by excluding Native peoples from participation in the design, conduct and interpretation of results. (Mohatt, Hazel, et al., 2004). There is a growing recognition that research methods and interventions need to be designed with collaboration from Native people using constructs and procedures that make sense to community members, avoid repeating historical trauma, are respectful of their privacy and culture, build on their historical traditions of healing, and identify their areas of strength and resiliency (Mills, 2003; Mohatt, Hazel, et al., 2004; Whitbeck, Adams, Hoyt, & Chen, 2004).

2. Describe current or previous efforts, if any, to address the problem(s) identified in item #1 and state whether they were effective.

Currently, OVK relies on substance abuse treatment services from the regional Native health service provider, Southeast Alaska Regional Health Consortium (SEARHC). This program is accessed through the village health clinic’s distance delivered services (polycom) and consists of diagnostic evaluations, ASAM level-of-care assessments, referrals to out of town treatment facilities for Intensive or Residential services outside of the Southeast Alaska Region (1,000 miles in distance), treatment planning, individual therapy, and outpatient therapy groups coordinated with other small villages in the region. Aside from the Salvation Army’s attempts at starting local Alcoholics Anonymous meetings, with varying degrees of success, Kake has not developed its own alcohol program or other types of interventions.

3. Describe any current gaps in services related to the problem(s) identified in items #1 and #2 that will be addressed through this grant application

There are no locally delivered alcohol and substance abuse services in Kake. Although clinical treatment services are available through SEARHC, they are mostly distance delivered via Polycom, a video teleconferencing system. This system places
significant limitations on the types of activities that therapy group members can participate in, including subsistence-based and ceremonial activities grounded in Tlingit culture and tradition. OVK believes a locally delivered, culturally-based program would provide the community with the best chance of achieving transformational change by focusing on traditional activities as a vehicle for therapy and recovery. This approach is supported by studies examining cultural connectedness as a protective factor against substance abuse in Native American communities. (Journal of Consulting and Clinical Psychology 2009 Aug; 77 (4): 751-62. “A community-based treatment for Native American historical trauma: prospects for evidence-based practice”. Gone JP.)

OVK lacks outreach services aimed at increasing public awareness of the damaging effects of alcohol and substance abuse on individuals, families, and the community itself. The intractability of the problem has led to an attitude of resignation in the community and an acceptance of the situation as the norm. Outreach activities would help bring the issue to the forefront of community awareness, inviting open dialogue and discussion of the problem and encouraging community involvement.

4. Explain how your tribe identified and prioritized the problem(s) described above to be addressed through this grant funding.

The community of Kake has been struggling issues with substance abuse and the other issues that arise as a result, such as domestic violence, assault, and more recently homicide. The clear data from SEARHC’s 2006 Community Report helped OVK fully realize the impact that alcohol and substance abuse was having on the community. While SEARHC has been providing telehealth services, it is clear that the community needs to share in the awareness of this deep impact and more people need to step forward to seek help before courts are involved. A discussion for the solutions to this problem has been ongoing, and has involved
representatives throughout the community and region. In October of 2013, OVK’s Council met for 3 days to discuss its goals for 2014, and expansion of the substance abuse program was a large part of that discussion. In particular, OVK’s Council saw the need for substance abuse and youth services to coordinate efforts to more comprehensively address individual needs and to improve overall prevention efforts.

5. Describe how the proposed grant-funded program will address the identified problems.

The proposed project would supplement and enhance SEARHC’s telehealth services, by providing residents with the additional option of locally based therapy groups centered on traditional activities and cultural elements, combined with evidence-based behavioral health components. In recent years, more people in the community have been embracing traditional singing and dancing. These activities have had the effect of bringing people together, generating enthusiasm and community pride. Traditional singing and dancing is seen as having therapeutic value, and incorporating it into the alcohol and substance abuse program is aimed at helping group members become culturally grounded and reconnected to the community. The act of making one’s own regalia for performing the traditional songs and dances is also an activity that will help group members by “giving their hands something to do” (Nat Austin, OVK Social Service staff), as well as allowing them to create something culturally meaningful in a process of recovery.

In addition to traditional activities, the groups will incorporate evidence-based practices for substance abuse treatment. This part of the program will be based on “Native American Journal: Strengthening the Spirit”, an interactive workbook and treatment program published by The Change Companies. Community outreach efforts would be directed toward increasing public awareness and dialogue regarding the problems associated with alcohol and
substance abuse, and encouraging community participation.

6. For each identified problem in item #1, identify the specific goals and objectives of the proposal that will be accomplished in 36 months. Provide details about the specific tasks and activities necessary to accomplish each goal and objective.

The goal of the proposed ASAP is to reduce the problems associated with alcohol and substance abuse in the Native village of Kake, Alaska, including physical and mental health issues as well as crime and social problems; and to interrupt the transmission of the problem to future generations of the community.

Objective 1:

Develop a locally delivered alcohol and substance abuse program centered on cultural values and traditional activities combined with evidence-based practices.

Activities:

OVK will hire a Program Coordinator/Group Facilitator for the program. If not already certified, this person would begin training for certification as a Chemical Dependency Counselor I through the Alaska Commission for Behavioral Health Certification (ACBHC).

OVK will hire a Program Associate for the program, who would be hired locally and would act as assistant and trainee to the Program Coordinator. The Program Associate would also be working towards certification through ACBHC, as well as acquiring the experience and skills to move into the position of Program Coordinator at the end of the grant-funding period, if necessary. Consideration will be given to hiring both a male and a female to reduce perceptions of bias, since both sexes will be represented in the groups.

Purchase materials for “Native American Journal: Strengthening the Spirit” from The Change Companies and begin designing the weekly groups around this format. This program was created specifically for Native Americans in alcohol/substance abuse treatment.
“Strengthening the Spirit” takes a holistic look at the effects alcohol and other drugs have on the body, mind, emotions and spirit through a process of journaling and self-reflection. It assists clients in discovering how their values can help them maintain both physical and mental health and encourages people to take responsibility for their own recovery. Interactive Journaling® is included in SAMHSA’s National Registry of Evidence-based Programs and Practices (NREPP).

Additional program materials would be acquired to reinforce and supplement the Journaling workbook and program, e.g. materials that could be used for homework assignments, relevant news or research findings, visual aids or additional presentation materials.

Locations for weekly and monthly meetings would be arranged. Where appropriate, OVK will obtain verbal agreements for using the property. Rules will be established for the weekly groups, including: meeting times; guidelines for dealing with group absences; rules of behavior such as clients attending groups while under the influence; confidentiality between group members as well as confidentiality agreements for guests; homework expectations; boundary issues; etc. A list and schedule of guest speakers/presenters will be arranged for both the weekly and monthly groups.

Sources of materials for traditional activities and regalia making will be identified and the DVD, “Carving from the Heart” will be purchased. This documentary is about a man from the neighboring village of Craig, Alaska who channels his grief for the loss of his son to cocaine addiction by carving a traditional totem.

Once hiring and planning are completed, the group meetings will begin. At the outset of the program, one of the activities the group will be charged with is the renaming of the
Alcohol and Substance Abuse Program (ASAP) with a traditional Lingit name.

The groups would meet twice per week for 1.5 hours. At least one of the weekly meetings would be scheduled during the weekend since this is a high-risk time for problem drinking. The group meeting time would be divided into segments for working through the Interactive Journaling program, holding Talking Circles or unstructured dialogue, the presentation of additional program material, and participating in traditional singing, dancing, and crafting of regalia.

The monthly meetings would be more informal than the weekly groups, but always focused on wellness and sobriety. The primary aims of the monthly meetings include modeling of alcohol and substance-free living and activities; group cohesion and support; separation of group members from habitual patterns that lead to substance abusing behavior; pro-social activities and community involvement/acceptance. Monthly activities would include potlucks and serving traditional foods; inviting guest speakers, local artists, craftsmen, musicians, or dancers for demonstrations; having group members give demonstrations of special skills such as carving, skin-sewing, or basket-weaving; Drumming Circles and traditional subsistence activities; special celebrations for seasonal events or holidays; storytelling; etc. Anyone from the community would be welcome to join the monthly groups as long as they are sober. Spouses, partners, and family members, including children, would especially be encouraged to attend.

The total length of the ASAP would be at least 9 months for each client. Continued attendance at the monthly meetings, however, would be open to anyone as long as they are sober, and will serve as an Aftercare program for those wishing to participate. The program will also allow former clients to volunteer to help with the weekly groups at the discretion of the Program
Objective 2:

Increase public awareness and dialogue regarding alcohol and substance abuse and the need for community involvement, as well as informing the community of the availability of services.

Activities:

The Program Coordinator would research, identify, and/or create program outreach materials such as posters, brochures, handouts, fliers, etc. for distribution at public places such as store, Post Office, businesses, churches, etc. These materials should include information specific to FASD, as well as program contact information.

ASAP will also have a presence at community events, such as Kake Day Celebration, Choose Respect Walk, Career Fair, Domestic Violence event, and the Culture Camps, for the purpose of distributing informative materials, talking to people about the issues, and inviting people to participate in program activities, etc.

ASAP Staff will also work with the Youth Program Coordinator to coordinate activities that educate and engage youth.

7. Describe the management structure, staffing, and in-house or contracted capacity to complete each of the proposed projects, and any organizational changes that may result if funding is awarded. Include detailed information about existing resources within the tribe and the community that will help make this project a success.

OVK has strong management and accountability practices, with an annual operating budget of over $1 million. OVK has an established record of successful service delivery to the Tribe and the community at-large, plus long-term healthy relationships with Federal, State and private funding sources. Accountability is maintained through day-to-day interaction with individuals, families, other offices, public meetings, newsletters,
mandatory narrative progress and quarterly financial reports, funding contacts, and the Tribe's annual A-133 fiscal and compliance audits.

OVK has two staff members working in its Social Services Department. Ann Jackson serves as the Social Services Director and Nat Austin serves as the Social Services Assistant. Both Ann and Nat are dedicated to furthering the development of OVK’s social services programs and will be involved in helping to implement the proposed Alcohol and Substance Abuse Program. In addition to paid staff, OVK has numerous elders who are willing to volunteer their time and skills to help make the Alcohol and Substance Abuse Program a success.

8. Identify current government and community initiatives that complement or coordinate with the proposal and any partnerships that will be created or enhanced as a result of funding. Describe the roles of each identified partner. Examples may be advisory boards, Tribal Leaders, nonprofits, private organizations, and regional relationships, etc.

OVK’s proposed program complements the State of Alaska Department of Health and Social Welfare’s current Strategic Prevention Framework Initiative. This initiative is focused on researching the impact of alcohol, tobacco and other drug use and abuse and its effect on the overall health of Alaska. The initiative is led by The State Epidemiology Workgroup, which functions as a collective of multidisciplinary professionals experienced in data analysis as well as substance abuse, research, program management, and strategy development. Results of the work include an ongoing review of substance-related consumption, consequences, and influences; identifying gaps in data development to improve future State Prevention Framework activities; and providing direction and advice to communities through publication of this data. The SPF SIG also provides ongoing training opportunities that are available via webinar for rural residents.
9. **Describe how the applicant will know if the program works and how success will be determined and measured. Describe how data will be collected and assessed to measure the impact of proposed efforts. What will be measured? How will data be collected? Who is responsible for collecting the data? How is success defined?**

Objective behavioral assessments will be conducted with each client in the ASAP using OAARS, Outcome Assessment And Reporting System. This is a brief, practical outcome tool for assessing treatment effectiveness for alcohol and substance abuse clients. Key measures of initial outcomes including completion status for the initial phase of the program and engagement and recovery status during three and six months of aftercare are documented. ASAP’s Program Coordinator will conduct these assessments.

Program evaluation will include the use of the Tri-Ethnic Center’s “Community Readiness Survey”. This assessment tool is available through Colorado State University’s Tri-Ethnic Center for Prevention Research. This survey assesses a community’s readiness to address an issue based on 5 key dimensions: Community knowledge of an issue; Community knowledge of efforts; Community climate; Leadership; and Resources. This method uses a set of open-ended survey questions about a community’s attitudes, knowledge, beliefs, etc. about an issue (alcohol and substance abuse in this case). A small number of key respondents are interviewed and the responses are scored using scales provided for each of the 5 dimensions of community readiness. A level of readiness, from 1 to 9, is assigned to each dimension. Program strategy is then developed around these scores, with dimensions with the lowest levels of readiness typically being addressed first.

This model’s appropriateness for this program lies, in part, in the simplicity of its design and the ease of conducting the surveys. Conducting the survey at the onset of the funding period will provide program staff with a baseline measure of people’s attitudes and beliefs regarding the issue. Subsequent administrations will show how those attitudes and
beliefs have changed. Comparing the data from multiple administrations of the survey will inform program staff as to where to focus efforts for increasing community readiness and engagement regarding alcohol and substance abuse problems in Kake. ASAP and/or OVK Social Service program staff will conduct the Community Readiness Surveys.

Success for both of these assessment tools will be defined as increases in individual clients progress as determined by the OAARS data, as well as upward changes in dimensions of community readiness throughout the funding period as measured by the Community Readiness Surveys.

10. **Describe how evaluation, collaborative partnerships, or other methods will be used to leverage ongoing resources and facilitate a long-term strategy to sustain the project when the federal grant ends.**

i. **Describe any challenges you anticipate in sustaining the program beyond the grant funding.**

OVK’s long-term strategy for the Alcohol and Substance Abuse Program includes maintaining the strength of the program’s existing capabilities while also remaining open to new ideas and approaches as the program matures. The data collected from the community and individual surveys will inform program staff regarding what aspects of the program are working, as well as those areas that need further development. Assessing the community’s reactions regarding the impact of the program will help guide its development toward increasing public engagement and support. The behavioral data collected from individuals in the program will allow program staff to evaluate how well the target population is being served in the immediate context of the therapy groups. The long-term effectiveness can also be gauged from follow-up contacts made after clients leave the program.

The Outreach services of the proposed program will have the potential of creating an even greater network of support as businesses, churches, and other agencies and institutions
respond to its efforts with in-kind donations of building space, advertising, supplies, volunteers, and other resources.

OVK’s greatest strengths are in its human resources, including staff as well as community members. One of the keys to sustaining the Alcohol and Substance Abuse Program will be to ensure that program staff has sufficient and ongoing training to best serve the community’s interests. Training and certification programs, as well as continuing education to increase the skill levels of those working in the program are an investment the community makes in itself. Experienced and knowledgeable staff members will lend weight and credibility to the program, increasing the likelihood of community support. Kake also has many elders willing to volunteer for this program. They are a storehouse of traditional knowledge regarding food harvesting and preservation, land and water resources, storytelling, arts and crafts, and traditional singing and dancing. Their willingness to contribute their skills and talents to the program is invaluable.

One challenge that the proposed program may face is retaining the Program Coordinator beyond the funding period, especially if the person chosen for this position is recruited from outside of Kake. For this reason it is important to begin training the Program Associate in Chemical Dependency Counseling as soon as the funding period begins so that s/he will be in a position to assume the Program Coordinator position if this happens.

11. Address the tribe’s need for financial assistance and the inability of the agency to implement the proposed plan without federal funding. This should be linked to the needs identified in the Tribal Narrative Profile.

Kake is a distressed community where economic barriers such as lack of industry, high costs for power and transportation, and geographic isolation contribute to a high need for social services. OVK is responsible for coordinating and providing a wide range of services
for its tribal citizens. OVK coordinates general assistance programs, such as housing assistance, employment and training, and health care, and is responsible for managing projects for housing improvement; job creation; and energy projects that help reduce residents’ soaring utility costs. At the core of these social services, OVK works to preserve culture through language projects and community-wide activities, and to ensure that all services delivered have a cultural basis.

Due to its isolated location, residents of Kake often have to rely on regional organizations for services and support. As much as possible, OVK desires to have those services available within the community, especially when those services are critical for the health and well-being of all community members. Due to the high demand for services, OVK’s budget limits its ability to provide direct services.

*If you are requesting funding in multiple purpose areas, is the receipt of BJA Purpose Area #3 funding required for the implementation of any other purpose area being requested? If so, explain.*

No. However, OVK designed this proposed program as 2 complementary parts to address the core issue of community wellness. To remove one program would reduce the effectiveness of the other programs’ activities.