Data from the National Household Survey on Drug Abuse (National Institute, 1989) show that about 50 percent of all U.S. adolescents have used alcohol. The comparable figure for American Indian and Alaskan Native youth ("Native youth" hereafter) is approximately 80 percent (Beauvais, Oetting, & Wolf, 1989). Early experimentation with alcohol and drugs places Native youth, in particular, at risk for serious problems. What creates this situation, and, more to the point, what is happening to correct it?

**RISK FACTORS**

Living up to worthy expectations can be difficult for anyone, especially in the contemporary world, where most youth are challenged to experiment with alcohol and drugs. Many Native youth, however, face additional hazards that increase their risk for alcohol and substance abuse (Native American Development Corporation, 1990a): cultural conflict, post-traumatic stress, and low self-esteem.

When traditional Native values clash with the values of the dominant society, cultural conflict results (Four Worlds Development Project, 1984a). Native youth can easily be caught in a no-man's land of confusion and fuzzy self-image. Besides coping with the normal challenges of adolescence, Native youth must also deal with their identity as Indians. In this effort they face a microcosm of all the problems with which their culture struggles. Of
course, cultural conflict--as a longterm social and economic process--is also related to risks associated with low socioeconomic status (see, for example, Hafner, Ingels, Schneider, & Stevenson, 1990).

Many Indian youth also face the hazards of post-traumatic stress. This is a state in which isolation, fear, guilt, shame, depression, anger, irritability, and other symptoms follow a trauma. Native peoples' history of oppression and present circumstances mean that the risk of trauma is comparatively high. The immediate family of many Indian youngsters likely includes individuals who experienced the concentration camp existence of the first reservations; involuntary confinement at boarding schools; or various other social, psychological, and spiritual insults. Life expectancy for Indians is considerably less than for the general public (Indian Health Service, 1990). Native youth may experience post-traumatic stress first-hand, but also through living and coping with someone else's trauma.

Choices concerning alcohol and substance abuse are tied in some way to self-esteem and the source of this esteem (Mason, 1985). Unfortunately, Indian program specialists nationwide can cite various examples, including test results, that show tribal youth demonstrate lower self-confidence than the population at large.

**PREVENTION AND TREATMENT CONCEPTS**

In 1988-90, staff in two projects of the Department of Education's Drug-Free Schools and Communities program interviewed specialists and community workers to identify what Native people felt could be done. The ideas obtained appear in a series of seven pamphlets (see the lists at the end of this Digest). Most programs, however, base their work on four key concepts.

* Alcohol and drug abuse are family and community problems. They hurt all tribal
members, not only the abuser but his/her family, friends and associates as well. The negative effects of alcohol and substance abuse are physical, mental, emotional, and spiritual.

* Alcoholism is multi-generational. Presently, it is affecting 3-4 generations and will affect generations to come.

* Alcoholism is like the tip of an iceberg. It rides atop a submerged mass of other problems.

* Alcoholism often co-exists in Indian communities with certain specific other problems like depression, self-hate, cultural shame, and stress-related acting out.

**EMERGING ATTITUDES**

Project staff also identified a number of emerging attitudes across Indian country. Tribes and Native communities, for example, report that they are taking steps themselves to eliminate abuse. The sentiment is growing that the best--perhaps only way--to conquer Indian alcohol and substance abuse is for tribal people to take the initiative. Indian involvement and direction are essential.

In addition, optimism that success is possible characterizes these efforts. Native American tribes and communities are becoming increasingly confident that their members can reject abuse, and, more importantly, will continue to reject it in the future.

It is also becoming widely recognized that, in its struggle against abuse, a tribal community’s most valuable resource is its own people. Allies in this cause include parents and families, school personnel, social service providers, and physical and mental health care providers. In addition, court, law enforcement and tribal government personnel can provide valuable assistance.

Tribal traditions and spiritual values are also being recognized as providing an additional vital
resource. These traditions and values must be articulated and renewed. People of the community, it is being said, must take part in all aspects of the effort against alcohol and substance abuse. They need to feel involved and must believe that they have designed and own the effort.

**STEPS TOWARD SOLUTIONS**

To be successful, local groups should draw support from the community. Participants should work with the problem of substance abuse in their community as they see it. A Native community might follow these steps to design an effective program:

* Get people together and ask community members to define how alcohol and substance abuse specifically affect their youngsters.

* Encourage community members to talk about substance abuse.

* Ask questions to see what is currently being done to combat the problem and identify what still needs to be done.

* Work through a community committee, develop a plan, and decide who can help where. Look for ways to coordinate existing and new activities.

* Divide planning and implementation responsibilities among community members. Recruit volunteers and use existing resource personnel.

* Find the gaps and seek training for local people where necessary.

* When necessary, identify and use outside resources but provide means for assuring community control and responsibility for how these resources are coordinated with local activities.

* Keep track of what takes place, including
progress. Measure small steps.

The Salish and Kootenai Tribes in northwestern Montana have included these steps in their Blue Bay Healing Center (Native American Development Corporation, 1990b).

SAMPLE APPROACHES

Many tribal and community workers believe that Native youth will make better choices about their lives if youngsters know more about--and take a more active part in--their tribal heritage. In this view, Native youth achieve the positive self-esteem that comes with belonging to something larger than themselves. In general, however, three types of programs stand out.

* Physical challenge programs use tribal culture and environments as the basis for excitement and accomplishment, while underscoring the message that there is no place for alcohol or substance abuse in the involved activities.

* Tribally sponsored chapters of national youth organizations (for example, Boy Scouts, Girls Scouts, Campfire, and 4-H) provide a framework for self-actualization and esteem-building.

* Peer support groups meet weekly so students can share thoughts and feelings in a protected environment that recognizes Native heritage and encourages development of healthy attitudes about life, including those relating to substance abuse.

A variety of activities emphasize tribal involvement in such programs. These activities range from traditional cultural practices like dancing, sweat lodge, or other ceremonies, through incorporation of traditions into contemporary events, to new events like alcohol- and drug-free tribal pow-wows and graduation celebrations. The important thing is that the feeling of an individual's tribal pride and unity be transmitted.
BUILDING FOR THE FUTURE

The consensus appears to be that the best means for fighting alcohol abuse in a Native community is one that the community develops itself. Such an approach has the key advantage of belonging to the people it aims to help.

Though programs and activities vary, results are encouraging. Statistics show a 61 percent reduction in the Native American death rate from alcoholism—but a figure that (as of 1987) was still three times that for all races in the U.S. (Indian Health Service, 1990).

Though a lot has been accomplished in recent years, much hard work remains. Fortunately, Native people themselves have begun to describe the ways and establish the means for doing it.

REFERENCES


among Native American youth. Unpublished dissertation, University of New Mexico, Albuquerque, NM.


ADDITIONAL RESOURCES


Native American Development Corporation.


