

**NATIONAL INSTITUTES OF HEALTH**

**Tribal Consultation Report:  
NIH Tribal Consultation on Research  
Needed to Address the Opioid Crisis,  
Including Managing Chronic Pain and  
Addiction Report**

NIH Helping to End Addiction  
Long-term<sup>®</sup> Initiative,  
Office of the Director,  
National Institutes of Health

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## Executive Summary

The Helping to End Addiction Long-term® Initiative, or NIH HEAL Initiative® is a trans-agency effort to speed scientific solutions to stem the national opioid public health crisis. The initiative aims to reduce suffering due to chronic pain and opioids; curb the rates of harmful opioid use, addiction, and overdose; enhance the management of chronic pain; and help individuals achieve long-term recovery from opioid addiction. NIH requested input from Tribal Nations about their priority areas of research and research-related needs to address the opioid crisis and support new strategies to improve chronic pain management and harmful opioid use, addiction, and overdose in American Indian and Alaska Native (AI/AN) communities. NIH seeks to build on input from the [2018 Consultation](#) and continue to adapt its approaches to the on-going crisis. Themes from the Consultation included the need for increased support for research tailored to the individual needs of AI/AN communities and with community leadership. Specific interests included culturally relevant data to characterize opioid issues, plant-based medicine, traditional healing practices, and supporting connections to traditional culture that could be further used to address, treat, and prevent chronic pain and opioid use disorder within individual communities. NIH is planning several initiatives to address the needs identified during the Consultation and welcomes with gratitude the opportunity to continue these engagements together to develop unique and culturally appropriate solutions for the health and well-being of AI/AN communities.

## Background

The opioid crisis is impacting all Americans, and Tribal communities have previously indicated through Consultation (NIH, 2018) that discovering solutions to this crisis for their communities is a high priority. In continued follow-up to the actions initiated by that [Consultation](#), and acknowledging that the overdose crisis has continued to evolve, NIH is seeking further input on this topic. The COVID-19 pandemic has stretched health care systems and created stress and uncertainty, including for American Indian and Alaska Native (AI/AN) communities, with implications for the opioid crisis as well as for mental and physical health outcomes. We seek to understand emerging needs that can be addressed through research to find solutions to the opioid crisis in the context of these challenges. In addition, approximately 50 million adults in the United States are affected by chronic pain. Previously identified strategies to address the crisis for all people include access to coordinated and appropriate chronic pain management; access to culturally appropriate addiction prevention and treatment; overdose prevention and reversal; and strategies to address accompanying mental and behavioral health issues that may increase risk for poor opioid use disorder outcomes.

NIH is focused on supporting research and the development of research infrastructure to aid AI/AN people and their communities by identifying community relevant solutions to the opioid crisis, including reducing suffering due to chronic pain and opioid addiction, and by preventing overdose deaths. The purpose of this Consultation was to request input from Tribal Nations about their priority areas of research interest and research-related needs to address the opioid crisis and support new strategies to improve chronic pain management and opioid misuse, addiction, and overdose in AI/AN communities. While current research is making advances, AI/AN communities continue to work to develop novel solutions, informed by Traditional Knowledge, to further address this evolving crisis. Understanding how research can aid Tribes to further these solutions and how NIH can best partner to provide support for

Tribally led research to address this crisis is critical to ensure that the research, and programs such as the NIH HEAL Initiative, are relevant and benefit AI/AN communities.

## Tribal Consultation Process

This Consultation was initiated on March 31, 2022 in accordance with [NIH Tribal Consultation Policy](#). The opportunity to submit written testimony was available until May 1, 2022. The Consultation was moderated by Dr. David Wilson, director of the NIH Tribal Health Research Office (THRO), and Herminia Frias, chair and Tucson area delegate for the NIH Tribal Advisory Committee. The session included presentations from Nora D. Volkow, M.D., director of the National Institute on Drug Abuse (NIDA), and Walter Koroshetz, M.D., director of the National Institute of Neurological Disorders and Stroke (NINDS).

## Tribal Consultation Virtual Meeting Summary Report

The following is a summary of feedback expressed through the Consultation and written comments, accompanied by specific actions the NIH HEAL Initiative is currently taking and considering implementing in the future. The following summary is a comprehensive description of the discussions during the Tribal Consultation, with additional input from Tribal-serving organizations considered and categorized in a subsequent section.

## Discussion

Themes of the discussion with Tribal leaders and NIH responses are included below.

**Theme:** The critical need for **support to AI/AN researchers** working within their own communities to find tailored community-based solutions for pain and opioid use disorder.

**NIH Response: Focus on Tribal and/or AI/AN-led research:** Support expanded capacity for Tribal and/or AI/AN-led research to ensure it is unique to the specific needs of AI/AN communities, including support for the next generation of researchers from AI/AN communities. Such efforts should specifically include integration of Indigenous world views and theories as well as traditional and cultural practices into research and ensure that research practices are grounded in Tribal sovereignty.

**Theme:** The **lack of effective, accessible pain management** approaches that can lead to substance use and inadvertent overdose was highlighted as a challenge to be understood and addressed within each community.

**NIH Response: Understand pain as a whole-person experience:** Invest in research to better understand expressions and experiences of pain, including psychological and spiritual aspects, protective factors, and resilience grounded in AI/AN culture and practice.

**Theme:** The importance of **social determinants of health** in understanding the unique needs of AI/AN communities, across age groups and including pregnant and parenting people.

**NIH Response: Support research to aid in intervening on the Social and Structural Determinants of Health,** including the root causes of disparities such as historical trauma,

housing conditions, economic factors, and access to health care and education. Such research should address the multiple pathways to substance use, including behavioral health and pain (physical and mental). The scope of supported research should acknowledge that community reports indicate that opioids are in multiple drugs and interact with other drugs, and that other drugs, such as methamphetamine, are now drivers of overdose death.

**Theme:** The need to understand the **role of traditional medicine, ceremony, and other approaches** – including physical activity and spirituality – to address both pain management and substance use disorder. These approaches could be on the level of the individual and the community, like creating more green space to encourage physical activity. Research should focus on these practices as well as how to best improve delivery and access to them within communities.

**NIH Response: Support holistic approaches to health and well-being for AI/AN communities:** Expand research programs that incorporate traditional healing practices and focus on spiritual, physical, mental, and emotional health; support non-pharmacologic solutions; and engage in discussion with federal partners to facilitate research with traditional plant-based medicine. Where desired, understand how such approaches could complement existing Western-based medicine, while safeguarding traditional medicines and practices within AI/AN communities.

**Theme:** The importance of **relevant, accurate, timely data** on substances in communities and use patterns to inform community-level strategies and new research questions.

**NIH Response: Build infrastructure to support attaining meaningful data within AI/AN communities:** Invest in data resources to ensure accurate, real-time data specific to each community and/or region to inform response to the overdose crisis and pain management in communities. Such efforts will also respect Tribal data sovereignty, ownership and the need for protection and benefit for the communities to whom the data belong.

**Theme:** Research solutions that are **scalable and can be tailored** to other communities are needed. While development of an evidence-base is important, solutions need to be implementable and incorporate prevention, treatment, and service delivery.

**NIH Response: Support research on integrative, community-selected health approaches:** Intervention and implementation science research should reflect community-chosen intervention strategies, including culturally adapted evidence-based practices and locally developed promising practices. Design and testing should consider evaluation, scalability, and sustainability.

## Next Steps

Tribal communities have previously indicated through Consultation (NIH, 2018) that discovering solutions to the opioid crisis for their communities is a high priority. In continued follow-up to the actions initiated by that [Consultation](#), and acknowledging that the overdose crisis has continued to evolve, HEAL is committing to launching new programs as well as continuing the conversations (or dialogue) from this Consultation, valuing the time required for these discussions.

HEAL will incorporate the feedback from this Consultation into efforts it plans to launch in 2022 and early 2023, designed to address several of the concerns and needs raised during the consultation. Specific activities that HEAL plans to launch, designed to respond to Consultation, will be informed by the following themes:

- Expanded research capacity to address opioid use, pain management, and related health outcomes, including through training and technical assistance activities to support AI/AN researchers through the NIH grant application and management processes.
- Enhanced infrastructure for data storage, analysis, and dissemination to improve surveillance of factors that contribute to the opioid and overdose crises at the local level, including local data and connections to state and regional data.
- Added infrastructure for implementation science projects at the local level across a range of research areas, incorporating elements informed by community engagement efforts.
- Implementation studies could include projects related to many of the specific interests described in this report relevant to addressing chronic pain and opioid use disorder. Support for these studies would include a range of interventions that Tribal communities can choose to implement, including evidence-based practices as well as locally developed practices such as holistic approaches, strength-based strategies, and integration of traditional medicine, ceremony, and culture.

HEAL recently launched planning activities for the [HEAL Research Dissemination and Engagement Center](#), a broad effort focused on building partnerships with communities that stand to benefit from HEAL findings to help define research processes and data and information dissemination practices. HEAL is currently considering ways to specifically engage with AI/AN communities to understand community needs and plan future activities that are tailored to them.

## Additional Input from Tribal-serving Organizations

NIH also received feedback during the Consultation and through written comments from Tribal-serving organizations, which do not have sovereign status as Tribal Nations. As such, their comments were considered and categorized separately. Comments focused on several areas:

- Need for investment in AI/AN research infrastructure for the benefit of their communities, including infrastructure for reliable data that is relevant to local communities and access to substance use disorder treatment and recovery services.
- Research in plant-based medicine, including using Schedule 1 substances and GMP requirements for clinical trials in order to support access to and integration of traditional healing approaches to address substance use disorder
- Research to understand the effects of overdose on the brain to inform treatment and recovery approaches

## Closing

We are very grateful to the Tribal Nations, Tribal organizations, and urban AI/AN community members who spent time with us discussing these issues and looking for pathways forward. We also thank the NIH Tribal Health Research Office, whose support and coordination were essential throughout the Tribal Consultation process. The NIH HEAL Initiative deeply appreciates the opportunity to engage with Tribal Nations and looks forward to continuing these important and timely conversations.