



Perceptions of Methamphetamine in Indian Country

INTERVIEWS WITH SERVICE PROVIDERS
IN TEN WESTERN TRIBES

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Letter from the Director

Colleagues:

As the opioid drug crisis ravages communities across the nation and grips the media's attention, a less well-known but equally pernicious drug epidemic is devastating Native American communities: addiction to methamphetamines.

Though methamphetamines are the drugs most commonly abused in tribal lands, use of opioids is a growing problem too. So too is alcohol abuse. And the results—lost lives, increased crime, broken homes, and child neglect—are horrific.

As you will see in the following pages, the drug cartels which are fueling the drug abuse epidemic in communities across our country are also hard at work in tribal lands. The trafficking and distribution of methamphetamines and other dangerous drugs continues unabated. However, there are policies and practices that can be employed to fight them, and they are detailed in this report on the Tribal Methamphetamine Initiative.

Based on interviews with 29 law enforcement professionals and social service providers who live or work in tribal lands, the report offers important insights and practical recommendations for prevention, treatment, and response to this crisis. In doing so, it also describes the challenges faced by criminal justice, social services, Indian Child Welfare, and mental/behavioral health professionals.

This report offers an eye opening look at the devastating spread of drug abuse in tribal lands, but it also offers hope for change. On behalf of the COPS Office, I thank Dr. Proctor and Ms. McCollum for their efforts in not only bringing the extent of this problem to our attention but also describing strategies for combatting it. Our thanks also go to the providers from ten western tribes who participated in the interviews contained in this report and whose insights inform many of its recommendations.

Sincerely,

A handwritten signature in black ink that reads "Phil Keith". The signature is fluid and cursive, with a long, sweeping tail on the letter "h".

Phil Keith, Director

Office of Community Oriented Policing Services



Executive Summary

The purpose of this report is to examine the impacts of the trafficking, distribution, and use of methamphetamines and other dangerous drugs in Indian country and across the nation. It also provides an accounting of the needs and challenges of providers in the areas of criminal justice, social services, Indian child welfare, and mental and behavioral health. Key findings include the following:

- Methamphetamine continues to be a significant problem in Indian country.
- Abuse of controlled prescription drugs is on the rise, and they could soon surpass methamphetamine as the drugs of choice in Indian country.
- Law enforcement officials reported that drugs are being trafficked to their areas by large non-Native drug trafficking organizations with international ties.
- Seventy percent of respondents stated that casinos located in their jurisdictions are being used to facilitate drug sales and sex trafficking by organized criminal gangs.
- High rates of larceny/theft, burglary, sexual assault, sex trafficking, and child and elder abuse and neglect were identified by law enforcement to be directly associated with the distribution and use of methamphetamine by Native Americans in Indian country.
- Law enforcement respondents reported that their greatest challenge was a lack of community support and resources, namely manpower, necessary to fulfill their duties.
- An overall theme from agencies that provide substance abuse treatment was a lack of detoxification centers needed for clients to be admitted to drug treatment centers.
- Social service providers reported that they lack funds to fulfill the needs of the clients they serve, such as housing, clothing, food, baby supplies, and health and hygiene products.





Introduction

The distribution and trafficking of meth in Indian country has been a major concern of tribal law enforcement since at least 2006, when seventy-four percent of the respondents to a Bureau of Indian Affairs survey indicated that of all drugs, meth posed the greatest threat to their community.

Many Native Americans in tribes across the nation are experiencing adverse effects from the distribution, trafficking, and use of methamphetamine (meth). These effects may be primarily individual, such as addiction or the displacement of children from homes where meth is being used, sold, or manufactured; or may afflict the tribe at large, such as higher crime rates associated with drug sales or the presence of international drug trafficking organizations (DTOs, also known as drug cartels) and the criminal gangs they work with (National Drug Intelligence Center 2011). These problems are not new, but they are straining an already burdened tribal law enforcement and damaging the people who reside in Indian country (National Congress of American Indians 2006).

The distribution and trafficking of meth in Indian country has been a major concern of tribal law enforcement since at least 2006 (Evans, 2006), when seventy-four percent of the respondents to a Bureau of Indian Affairs (BIA) survey indicated that of all drugs, meth posed the greatest threat to their community. They further indicated that meth in both crystal and powder form was moderately available in the communities they served. The majority of the responding agencies also responded that meth distribution was moderate to high in their communities and that criminal gangs were responsible for at least some distribution in their service areas. A smaller sample noted the role of Mexican DTOs in meth distribution in their areas (Evans, 2006). However, in its most recent assessment of the drug threat in the United States, the Department of Justice National Drug Intelligence Center (2011) has stated that Mexican DTOs are responsible for the majority of the methamphetamine smuggled into and distributed in the United States. Even when criminal street gangs are involved in the distribution, the Mexican DTOs continue to be the main supplier (National Drug Intelligence Center 2011).

In 2009, the U.S. Senate Committee on Indian Affairs heard testimony from several different tribes concerning the problem of drug smuggling and gang activity in Indian country. The committee heard from tribal leaders, tribal and federal law enforcement, treatment providers, U.S. Attorneys General, and even former gang members concerning their experiences with the use, trafficking, distribution, and treatment of meth, as well as gang activity in Indian country (Examining Drug Smuggling 2009). Testimonies of law enforcement officials revealed the presence of DTOs in Indian country, specifically Mexican DTOs. At that time the committee asked if there was any evidence, other than anecdotal, that could be offered to substantiate such claims. Arnold Moorin, director of the High Intensity Drug Trafficking Area Program at the White House Office of National Drug Control Policy, stated that research would have to be conducted to produce the empirical evidence needed to inform the committee of the nature and extent of the problem. Committee chair Senator Byron Dorgan asked Director Moorin to work with the committee to get “a base of information about what is happening with the drug cartels targeting Indian reservations” (Examining Drug Smuggling 2009). He went on to say that he was reluctant to increase funding to tribes to combat violence and other issues with meth and drug cartels until the committee had empirical evidence of the problem.

This research is one step toward providing such empirical evidence. Law enforcement and social service representatives from 10 tribes across the western United States participated in face-to-face interviews to provide data regarding their perceptions of the trafficking, distribution, and use of meth and its effects on their respective communities.



Literature Review

Collecting crime data regarding Native Americans is hampered by the difficulty of determining who qualifies as Native American for reporting purposes and what constitutes Indian country.

Defining Native Americans and Indian country

There is no singular criterion for determining who is considered Native American. “As a general rule, it is defined as someone who has blood degree from and is recognized as such by a federally recognized tribe or village (as an enrolled member) and/or the United States” (Bureau of Indian Affairs 2018). Each tribe retains the power to determine membership requirements. These requirements may be based on blood quantum, knowledge of the tribe’s history, language, culture, or any other factors defined by the Tribal government. Because race is a social construct and often determined by an individual’s self-reporting status, determining an exact number of Native Americans living in the United States is impossible. According to the U.S. Census Bureau, however, in 2014 the population of American Indian/Alaska Natives reporting one race was approximately 2.5 million. An additional 2.1 million American Indian/Alaska Natives self-reported as biracial (U.S. Census Bureau 2014).

Indian country is defined by the Federal government as “(a) all land within the limits of any Indian reservation under the jurisdiction of the United States Government, notwithstanding the issuance of any patent, and, including rights-of-way running through the reservation, (b) all dependent Indian communities within the borders of the United States whether within the original or subsequently acquired territory thereof, and whether within or without the limits of a state, and (c) all Indian allotments, the Indian titles to which have not been extinguished, including rights-of-way running through the same” (18 U.S.C. §1151). This definition includes all federal reservations, villages, missions, rancherias, and allotted and restricted lands. This jurisdictional fragmentation makes the collection of crime data in Indian country extremely difficult, particularly if the tribe under consideration does not have a tribal law enforcement agency or tribal court system to keep track of crimes committed or adjudicated on its lands.

Nature and extent of crime in Indian country

Collecting crime data regarding Native Americans is hampered by the difficulty of determining who qualifies as Native American for reporting purposes and what constitutes Indian country. Historically, the Federal Bureau of Investigation (FBI) has overseen the collection of crime statistics nationwide. The FBI relies on the voluntary submission of crime data from law enforcement agencies; however, tribal agencies are not required to report and many are not equipped to do so. It was not until the Tribal Law and Order Act (TLOA) of 2010 that any meaningful efforts were made to improve measures of crime in Indian country. The TLOA allocated funds and training for tribal agencies to aid in the collection and reporting of crime data in Indian country.

In 2010, there were 566 tribal entities in the United States eligible for funding and services from the BIA and 334 federally and state recognized reservations (Perry 2015). “Prior to 2008, the FBI’s *Crime in the United States* report combined most reports from tribal law enforcement agencies into a general grouping under the BIA” (Perry 2015, 1). In 2008, only 12 tribal law enforcement agencies reported 12 months of complete data to the Uniform Crime Report. Under the TLOA, reporting by tribal law enforcement has grown, and by 2013 a total of 158 tribal law enforcement agencies reported 12 months of complete crime data.

According to the Bureau of Justice Statistics’ *Tribal Law and Order Data Collection Activities* (2012), there were a total 17,000 violent crimes and 54,000 property crimes reported by 158 tribal law enforcement between 2008 and 2010. Of the 17,000 violent crimes, aggravated assault constituted 77 percent of total incidents, followed by forcible rape (15 percent), robbery (5 percent), and criminal homicide (3 percent). Out of the 54,000 property crimes the majority were larceny/theft (55 percent), followed by burglary (26 percent), motor vehicle theft (14 percent), and arson (5 percent). These statistics provide some much-needed information about crime in Indian country,

however, the information is incomplete, as it only includes information from the 158 tribes who participated and only includes crimes known to police. Victimization surveys may provide more information about the nature and extent of crime in Indian country.

Victimization surveys regarding the Native American population overall have found that, in every age group below 35 years old, Native Americans suffer higher rates of violent victimization than any other racial or ethnic group (Perry 2004). Across all age groups, according to the National Crime Victimization Survey (NCVS), Native Americans experience a per capita rate of violence twice the rate of the U.S. population. Among Native Americans between the ages of 25 and 34 years old, the rate of violent victimization was more than two and a half times the rate for all persons the same age. Among Native Americans, men were more likely to be victims of crime than were women. The rate of violent victimization among Native American women, however, was more than double that among all women. Moreover, Native American women suffer the second-highest rates of homicide (after African-American women) and higher rates of rape, sexual assault, and physical assault than African-American and Caucasian women (Bachman et al. 2008; Perry 2004). Furthermore, Native Americans of both genders were more likely than other groups to be physically or sexually assaulted by a stranger or acquaintance (as opposed to an intimate partner or family member) (Perry 2004, 8).

Yuan, Koss, Polacca, and Goldman (2006) in their study across six Native American tribes also found that rates of physical assault and rape were significantly higher than those for the general population. Forty-five percent of their sample of Native American women reported being physically abused as an adult; 14 percent reported they had been victims of rape. Thirty-eight percent of Native men reported being physically assaulted and 2 percent were reportedly raped since age 18 (Yuan et al. 2006, 1566). The strongest predictors of violent victimization among

their sample included marital status,¹ lifetime alcohol dependence, and childhood maltreatment including physical, sexual, emotional, abuse and physical neglect.

Another source of data regarding crime in Indian country is the number of cases filed in the Federal court system for prosecution by U.S. Attorneys General. According to the most recent data available, the number of concluded cases (those successfully adjudicated) in Indian country increased over the past several years, reaching approximately 13 to 18 percent for the period 2009 to 2011 (Adams, Samuels, and Kelly 2015). Sixty-two percent of all Indian country matters that were concluded were violent crimes. Murder and sexual assault together comprised two-thirds of those violent crimes with assault comprising the remaining one-third. Property crimes made up approximately 12 percent of all cases, followed by drug crimes at 10 percent, public order offenses at 8 percent, immigration offenses at 8 percent, and the remaining 4 percent a miscellany of minor offenses. Additionally, the number of prosecutorial declinations of crimes originating from Indian country declined from 38 percent in 2009 to 34 percent in 2011 (Adams, Samuels, and Kelly 2015). The implications of the number of prosecutorial declinations are discussed in further detail in the following section.

Indian country jurisdiction

Congress has acted on several occasions to limit tribal sovereignty in the context of criminal jurisdiction. These include the Major Crimes Act of 1885 (MCA), the Indian Country Crimes Act (ICCA), 18 U.S.C. §1153, and the Indian Civil Rights Act of 1968 (ICRA) (Kronk 2006). Additionally, the United State Supreme Court's 1978 decision in *Oliphant v. Suquamish Indian Tribe*, 435 U.S. 191, removed tribal jurisdiction over non-Native Americans, placing jurisdiction over non-Native American offenders who offend against Native Americans, in Indian country, into the hands of the Federal government (Kronk 2006). These measures have tied the hands of Tribal governments in effectively managing crime in Indian country.

This expansion of Federal jurisdiction over crimes in Indian country is complicated by the number of prosecutorial declinations. Hundreds of cases in Indian country—the numbers reported range from 34 percent of cases (Adams, Samuels, and Kelly 2015) to 65 percent (Owens 2012)—are dismissed from prosecution by the Federal government. Federal prosecutors' most commonly cited reason for declining to prosecute was reported to be "insufficient evidence," followed by "lack of criminal intent" and, finally, "witness problems" (Adams, Samuels, and Kelly 2015, 21). In contrast, only 15 percent of all Federal cases were declined for prosecution (Motivans 2015).

"Substantive criminal offenses and punishments in Indian country cases are determined according to two Federal statutes, the Major Crimes Act [MCA] and Indian Country Crimes Act [ICCA]. Both only apply to Indian country and solely in cases where Native Americans are involved" (Eid and Doyle 2010, 1097). The MCA applies to only certain major crimes, all felonies under 18 U.S.C. §1661: murder, manslaughter, kidnapping, maiming, sexual abuse, incest, assault with intent to commit murder, assault with a dangerous weapon, assault resulting in serious bodily injury, assault against an individual under 16, arson, burglary, robbery, embezzlement, and theft (18 U.S.C. §1153). The ICCA grants the Federal government authority to prosecute all general federal crimes in Indian country. It applies to interracial crimes in which either the defendant or the victim is Native American, and allows for concurrent jurisdiction by the tribal court in a criminal prosecution when the offender is Native American.

The ICRA, written to apply the protections of the Bill of Rights to Indian country, had a substantial impact on the scope of tribal enforcement authority in criminal matters by limiting the sentences that could be applied by tribal courts. When federal prosecutors decline to prosecute a major crime and the tribe subsequently decides to exercise concurrent jurisdiction, the ICRA restricts the tribal court's authority to adequately punish the offender (Owens 2012). Originally, tribes were limited to

1. "Women who were in cohabitating relationships, separated, or divorced were reported to be at greater risk of being assaulted into adulthood" (Yuen et al. 2006, 1581).

sentences of only one year in prison and minimal fines. The provisions concerning punishment, however, were changed with the passing of the Tribal Law and Order Act of 2010 (TLOA). This act was designed to strengthen tribal law enforcement and allow tribes to prosecute and prevent crime more effectively (Perry, 2015). The measure deputized Special Assistant U.S. Attorneys to prosecute crimes committed in Indian country in Federal courts. It also gave greater authority to tribes to hold perpetrators accountable, increasing the maximum sentence tribal courts can enact to three years of incarceration, a fine up to \$15,000.00, or both. These provisions are designed to increase communication between tribal law enforcement, Federal authorities, and the court system (Rosenthal, 2010). Rod Robinson, the Director of the Office of Indian Alcohol and Substance Abuse (OIASA), praised the legislation as “the most critical opportunity created in the last two decades to improve services and acquire critical resources to improve tribal communities” (Conway 2013, 3). TLOA will delineate services offered and needs that tribes have identified into a unified collaborative effort—a move that has been very slow in coming and will hopefully allow tribes some freedom to incorporate traditions and customs back into their judicial system.

Title IX of the Violence Against Women Reauthorization Act of 2013 (VAWA) allows tribes to assert jurisdiction “to investigate, prosecute, convict, and sentence” both Native Americans and non-Natives who assault Native “spouses or dating partners or violate a protection order in Indian country.” Moreover, under Section 906 of Title IX of VAWA, offenders convicted in tribal courts are subject to the same penalties allowed under Federal law. This means offenders, both Native and non-Native, may face up to 20 years for crimes of violence (i.e., physical assault and sexual assault) perpetrated against Native Americans. This is a significant step toward restoring tribal self-governance and returning the ability to effectively combat crime against Native peoples to their proper tribal authorities.

Policing in Indian country

Tribal law enforcement is a necessity borne out of the U.S. Federal government’s removal of many Native Americans to reservations (Perry 2009; Wells and Falcone 2008). According to Wells and Falcone, “[T]he creation of the Federal reservation system made implementation of local Native based police forces an invaluable, cost effective, non-military method for maintaining social order within Indian reservations” (p. 649). In short, the Federal government did not want the responsibility or the expense of providing law enforcement on Indian reservations. As such, it allowed many tribes to establish law enforcement agencies, tribal courts, and correctional facilities with jurisdiction solely over crimes involving Native Americans in Indian country.

Traditionally, elders and the community joined together in administering tribal justice using social and religious pressure to ensure compliance by Tribal members. Until the middle of this century, few Indian tribes maintained a formal court system; emphasis was on restitution and restoration, rather than on punishment. This system of tribal self-governance was nearly eliminated during the Assimilation and Allotment Era (1887–1943), when large portions of Indian country were destroyed and lands relegated to non-Native land owners. The Allotment Era created a patchwork of jurisdictions in Indian country and further complicated jurisdictional issues between federal, tribal, and state agencies. Tribal justice systems were further damaged by the passage of PL 83-280, which abolished Federal jurisdiction of Indian country in certain states and relegated matters of law and justice to already overburdened state and local governments² (Wells and Falcone 2008, 649-650).

As a result of this history, the system of jurisdiction in Indian country is “almost impossibly complex” (Wells and Falcone 2008, 650). In general, policing in Indian country falls under one of three categories: tribal (sovereign), federal (BIA), or non-Native (local). Funding of tribal agencies is also a complex

2. PL 83-208 conferred complete jurisdiction to six state governments: California, Minnesota (except Red Lake Reservation), Nebraska, Oregon (except Warm Springs Reservation), Wisconsin, and Alaska. It allowed nine other states to acquire optional jurisdiction in whole or in part over Indian country within their boundaries: Nevada, Idaho, Iowa, Washington, South Dakota, Montana, North Dakota, Arizona, and Utah (Perry 2015, 1).

matter. Sovereign tribal agencies are primarily funded by the tribe and sometimes through Federal grant monies through the Department of Justice. BIA agencies are administered by the BIA's Office of Justice Services (OJS) and are funded by the Federal government under the Department of the Interior. Non-Native local agencies are funded by state, county, or municipal agencies. Some agencies are funded partially by the tribe and partially by the BIA under the Indian Self-Determination and Education Assistance Act of 1975 (PL93-683), which provides federal funding of, but local tribal control over, the implementation of police forces in Native communities (Wells and Falcone 2008).

In addition to these jurisdictional issues, tribal law enforcement is also hindered by a lack of officers. On tribal lands, there are approximately 1.3 police officers per 1,000 tribal citizens, compared to 2.9 per 1,000 in non-tribal areas with comparable populations (under 10,000). It has been estimated that there is a 42 percent unmet staffing need among tribal law enforcement agencies. For example, the Oglala Sioux Tribe's Department of Public Safety consists of fewer than 100 sworn officers serving 40,000 residents over almost 2 million acres of land, while Navajo Nation has approximately 200 full time officers to patrol a reservation the size of West Virginia. "It is extremely difficult for 2-3 officers to cover an area the size of a small state" (National Congress of American Indians 2006).

When law enforcement agencies are understaffed, it is impossible for them to engage in proactive policing efforts. Proactive policing is defined as strategies intended to prevent crime. When there is a lack of law enforcement, police can only be reactive; meaning they are responding to calls for service. Proactive policing allows law enforcement to address the potential for crime before it happens. It includes things like problem-oriented policing; police initiated neighborhood watch programs; school resource officers, etc.

One way tribes compensate for the lack of adequate law enforcement is through cross-deputization agreements with non-tribal law enforcement agencies at the state and local levels. Cross-deputization agreements allow non-tribal law enforcement to cross jurisdiction, when the need arises, until appropriate law

enforcement arrives. For example, the Cherokee Nation is comprised of 14 contiguous counties encompassing approximately 9,000 square miles. With only 33 Cherokee Nation Marshals to cover the area, they rely on cooperative partnerships with 56 criminal jurisdictions at the local and state levels to help meet the needs of the Cherokee people.

Not all tribal law enforcement agencies have these agreements, however. Many tribes consider not only cross-deputization but all such cooperative agreements to encroach on tribal sovereignty, arguing that outside agencies will take advantage of any access to tribal land. Proponents, on the other hand, argue that the absence of such agreements puts the safety of tribal citizens at risk and invites criminals onto reservations where they are beyond the reach of state and local laws and officials. For example, bilateral extradition agreements, which provide for the surrender of persons accused of crimes under the laws of the requesting state or tribe, require broader cooperative agreements for their execution. Without some level of shared access and jurisdiction, criminals are able to commit crime in one jurisdiction and flee to the other without fear of being apprehended or pursued. This means that the reservation may become a safe haven for non-Native drug traffickers and other criminals, over whom tribal law enforcement has no jurisdiction, fleeing state law enforcement agencies. It can be argued that these gaps in law enforcement and jurisdiction draw organized crime and criminals to Indian country for the express purposes of committing crime under protection of law.

Methamphetamine and other drugs in Indian country

Amphetamine was developed early in the 20th century by Japanese scientists. During World War II, it was used to treat fatigue in soldiers. It was used for medicinal purposes to treat hyperactivity, obesity, and other medical ailments. The drug, also known as "speed" or "uppers," was popular among athletes, college students, motorcycle gangs, and truck drivers. In the 1980s, the United States declared the key ingredient used to make amphetamine a controlled substance and put it under federal control. Cooks making the drug for Outlaw Motorcycle

Gangs (OMGs) discovered ephedrine, an ingredient in cold medicine, could be used to produce a related drug, twice as potent as amphetamine: methamphetamine, or crystal meth (Brownstein, Mulcahy, and Huessy 2014; Gilbreath 2015). The Drug Enforcement Agency (DEA) soon cracked down on ephedrine, and in response methamphetamine cooks learned to make meth from its replacement in over-the-counter cold medicine, pseudoephedrine. Pseudoephedrine can be broken down into ephedrine, though the process requires highly flammable chemicals (Gilbreath, 2015). Ephedrine was also supplied to OMG cooks by Mexican DTOs.

By the 1990s, meth had begun to spread into rural communities in the west and Midwest, where most users could not afford the more expensive cocaine. In 2004, Mexico legally imported 224 tons of pseudoephedrine, twice as much as needed to make cold medicine; the extra 100 tons was cooked into meth and smuggled into the United States. This was the purest meth to hit American streets; it brought about an increase in demand for the drug and a resurgence of the methamphetamine epidemic (Gilbreath 2014).

Meth use is often accompanied by the use of other drugs. Research has found that meth users commonly use heroin or opioids to help bring them down from a high, while opioid and heroin users often use methamphetamine to enhance and prolong the effects of their euphoric highs (Lamonica and Boeri 2012). (Opioids are synthetic drugs that possess narcotic properties similar to opiates, which are heroin and its derivatives.) According to the National Survey on Drug Use and Health, people with abuse or dependence on other drugs (i.e., marijuana, meth, cocaine, or alcohol) are more likely to have heroin abuse or dependence. The survey also found that most people who reported using heroin were using at least three other drugs. Thus, the increase in opioid use has bolstered the use of meth. In 1995, the FDA approved the analgesic opioid OxyContin for pain related to cancer; however, it was quickly adopted, and aggressively marketed, for treating chronic non-cancer pain.

Opioid prescriptions for pain in the United States nearly quadrupled from 1999 to 2013. By 2010, the misuse and abuse of prescription opioids, had become a national epidemic.

The issue of substance abuse among Native Americans is not novel; however, the face of the issue is changing. Native Americans now experience the highest meth usage rates of any ethnic group in the nation (National Congress of American Indians 2006). Meth is quickly replacing alcohol as the drug of choice on many reservations. An even more dangerous practice has emerged of mixing alcohol consumption with illegal substances. A 2009 report by the Substance Abuse and Mental Health Services Administration (SAMHSA) stated that 11.7 percent of Native Americans and Alaska Natives had used illicit drugs while consuming alcohol in the last 30 days. There are many reasons for the high rate of substance abuse, but the poverty and remoteness of many tribal communities play a large part. “Compared with the national average... American Indian or Alaska Native adolescents were twice as likely to be living in poverty (37.2 percent vs. 18.1 percent), and were more likely to live in non-metropolitan areas (50.1 percent vs. 16.5 percent)” (Substance Abuse and Mental Health Services Administration 2011).

Effects of drug abuse on Native children in Indian country

The greatest risk factor for a child being abused is living in a home with alcoholism or addiction: parents who have substance abuse problems are three times more likely to be reported for abuse and four times more likely to neglect their children than parents who do not have substance abuse issues (Bubar, Winokur, and Bartlemay 2007). Substance abuse by parents or other caretakers also endangers children in other ways, by exposing them to driving under the influence of drugs, interpersonal violence, parental neglect, and the environmental hazards of toxic methamphetamine labs (National Drug Intelligence Center 2011). All told, the Shoshone and Arapaho Tribal Court and Prosecutor’s Office reports that 98 percent of all

criminal, juvenile, minor-in-need-of-care, and involuntary commitment for mental health treatment cases are in some way substance abuse-related (Examining Drug Smuggling 2009). Intervening to remove children from homes where they are drug-endangered causes its own harms, and introduces new dangers. The fastest-growing and most vulnerable population in foster care is children under the age of three years who are removed due to parental maltreatment related to substance abuse. This age group accounts for 58.7 percent of the victims of parental maltreatment and 80 percent of its fatalities (Moriarty, 2012).

Additionally, children whose parents have substance abuse issues have a higher likelihood of developing substance use problems themselves. In 2006, Chairwoman Wesley-Kitcheyan of the San Carlos Apache tribe in Arizona, testified before Congress that that approximately 60 percent of all babies born in 2004 to San Carlos tribal members were born addicted to methamphetamines; approximately 25 percent of pregnant women on the reservation tested positive for methamphetamine (The Problem of Methamphetamine 2006, 16).

The cognitive, emotional, and behavioral problems exhibited by children growing up in drug environments leave them vulnerable for years to come.





Methods

History is fraught with examples of non-Native researchers ignoring fundamental rights of tribes and their members.

A qualitative research design was used to gather information from tribal service providers concerning their perceptions of the problem of methamphetamine and other dangerous drugs in each of their jurisdictions. Qualitative research designs are best used to gain an in-depth look at the phenomena under investigation; they are often used when the population of interest is difficult to access, such as Native Americans living or working in Indian country. They are also used when the purpose of the research is to discover the perceptions and experiences of people from their own points of view. Qualitative research has often been more successful with Native Americans than quantitative research, which has been viewed as impersonal and intrusive (Harding et al. 2012; Sobeck, Chapleski, and Fisher 2003).

For example, it has been argued that some of the most egregious harms committed against Native Americans have been at the hands of researchers who have exploited Native people for their own gain. History is fraught with examples of non-Native researchers ignoring fundamental rights of tribes and their members. Often the Native communities under study were not fully informed of the purposes of the study, deceived by researchers with ulterior motives, and never advised as to the final outcomes of the research. These abuses made many tribes distrust participating in research conducted by both Natives and non-Natives. In response, many tribes created research review boards to protect their members from being harmed by participation in research (Harding et al. 2012).

Native Americans should be consulted and included as partners in research on their communities (Harding et al. 2012; Sobeck, Chapleski, and Fisher 2003).

Those practices were followed in this study. Both the principal investigator and the research assistant are members of a federally recognized American Indian tribe with backgrounds in working with Native Americans. Furthermore, Native American professionals in the areas of law enforcement, social services, and

mental and behavioral health were consulted to aid in creating surveys and to provide input on how to best relate to professionals in their respective fields.

Three semi-structured interview schedules were created: one for law enforcement, one for social services / Indian Child Welfare, and one for mental and behavioral health respondents. The use of semi-structured surveys allows for the use of prompts and probes, the reordering of questions, and the inclusion or exclusion of questions based upon information obtained in each individual interview and on the nature and tone of the interview itself.

Twenty-three tribes were selected for possible inclusion in the study based on their geographic locations near known drug corridors or on being identified in national news coverage of meth in Indian country. All tribes were located in the Western United States. Each tribe was first sent an introduction letter describing the purpose of the research. If the tribe indicated, by returning the letter with the appropriate tribal official's signature, that they were willing to participate, the research review process was then initiated: approval or permission was sought from the tribe's Institutional Review Board (IRB) or other proper tribal authorities.^{3, 4} Upon IRB approval, those stakeholders identified by the tribe as the proper contact persons were sent a copy of the initial recruitment letter and a consent letter. They were also informed that, should they choose to participate, the research team would contact them via telephone to set up a time and place for the interview.

Once dates and times were scheduled, the research team met with the respondent and, upon respondents' consent, commenced interviews following a semi-structured schedule. Ten

out of the 23 tribes contacted chose to participate, a response rate of 43 percent. The final sample consisted of interviews with 16 professionals from tribal law enforcement and 13 from social services, Indian Child Welfare (ICW), and mental and behavioral health.

Upon arrival at the scheduled interview each participant was given another copy of the informed consent form to sign and given an opportunity to ask any questions or ultimately decline to participate. Participants were not compensated and all participants were promised confidentiality. Initially, the plan was to meet one-on-one with each respondent in a private area; however, several respondents asked to have a colleague participate or sit in. We obliged all such requests and asked that all respondents sign a consent form. On several occasions, an interview started with only one respondent and ended up with three or more. The principal investigator and research assistant took handwritten notes only—no recording devices were used.

A total of 29 participants were interviewed. The shortest interview lasted just under an hour; the longest over four hours. The research team was diligent in its efforts to allow respondents to share as much or as little information as they wished. In general, respondents were very forthcoming in their answers. All tribal identifiers were removed and replaced with non-identifying codes. All personal references and any identifying information (e.g., names of cities, counties, agencies, participants, etc.) were also removed or replaced with alphanumeric codes. Upon completion of data collection, the interviews were transcribed and content analysis was conducted.

3. The researchers were advised by the Cherokee Nation IRB that potential tribes needed to first be contacted to gain permission to invite them to participate in the study, and that only with this permission should they proceed with procuring the prospective tribe's IRB or other granting authority's approval.

4. The researchers were advised by Northeastern State University (NSU) that because Cherokee Nation (CN) was the grantee and the research was being conducted with Native Americans that IRB approval should first be obtained from the CN IRB and only then submitted for approval to the NSU IRB. Both CN and NSU IRBs required approval before applications to the prospective participating tribal IRBs could be submitted.



Results

According to the DEA, law enforcement agencies reported that marijuana was the most widely used and highly available illicit drug in Indian country, but that methamphetamine posed the greatest threat to Native communities.

The following results are from the interviews conducted with 29 tribal representatives (16 law enforcement officers and 13 social service providers). Male participants, almost exclusively from law enforcement, comprised 58 percent of the sample, and females the other 42 percent. Results and selected quotes from the interviews are presented below.

To the question, *What drug poses the greatest threat to your tribe?*, the most common answers, in order, were as follows: (1) alcohol and marijuana; (2) methamphetamine; (3) controlled prescription drugs; (4) synthetic cannabinoids (i.e. K-2 or Spice); (5) synthetic cathinones (i.e., bath salts); (6) cocaine; and (7) heroin. Alcohol and marijuana were equally common responses. When asked to explain their answers, respondents who answered alcohol or marijuana cited these substances' wide availability, while respondents who named meth or prescription drugs cited their potential to damage the user and the tribe. These perceptions are consistent with national reports; according to the DEA, law enforcement agencies reported that marijuana was the most widely used and highly available illicit drug in Indian country, but that methamphetamine posed the greatest threat to Native communities (National Drug Intelligence Center 2014).

Here are some examples of what the respondents had to say about drugs and their effects on Native Americans in Indian country:

- Meth poses the greatest threat, once in a while we have a marijuana bust, but there is not as big of an impact with marijuana. Meth is the biggest threat, because it impacts everyone involved beyond just the user and the ease of getting a hold of it. Marijuana is the next biggest threat. It is so easily available.
- Prescription abuse is a big problem as well as the selling of prescription pills.

- Meth right now, but pain pills are quickly becoming an issue. Pain pills are what we are getting the most new calls on.

- We have seen a big increase in prescription abuse.

Several tribes reported that synthetic marijuana, known by the street name K-2 or Spice, was becoming a problem for the tribal community.

- Prescription drugs and fake-ass marijuana. Legislation isn't keeping up. We see violence and homicide more with meth. Death related to pills is normally a suicide.
- K-2 is also big problem among young adults.
- We have had big problems with K-2.

Overwhelmingly, service providers reported that majority of drug use is polydrug use. Methamphetamine users will often use alcohol, marijuana, or controlled prescription drugs when they are coming off a high (National Drug Intelligence Center 2011).

- Nobody is straight up alcohol. They use alcohol and marijuana together or prescription meds plus meth. Tramadol, hydrocodone.
- Meth poses the biggest threat, because it is more addictive. We are starting to see more, along with marijuana and coke. Marijuana is very easy to get; there are large shipments that go through the rez [reservation]. There is a lot of abuse of hydrocodone, OxyContin, Lortabs, opioids, and Xanax. We are starting to see bath salts trickle in now. We are seeing a lot of Spice. Most of the kids are more hooked on meth. Spice is popular among 30- to 40-year-olds.

One of the main purposes for the current research was to gather law enforcement's perceptions of the presence of DTOs in Indian country and their role in trafficking methamphetamine and other dangerous drugs in tribal communities. These criminal organizations "control much of the production, transportation[,] and wholesale distribution of illicit drugs destined for and in the United States" (National Drug Intelligence Center 2011, 7). There have been national reports in large newspapers as well as Congressional reports about organized international DTOs, also known as cartels, targeting Native American populations in Indian country. To explore this issue, law enforcement respondents were asked "Where do you think people are getting

drugs?" According to the respondents, methamphetamine, marijuana, and cocaine are trafficked into their communities, or to areas adjacent, by non-Natives who are part of larger DTOs. They indicated that non-Natives are selling to Natives who then deal drugs on the reservation. Seventy percent of the responding tribal agencies reported that casinos played a major role in the trafficking and distribution of drugs in their respective jurisdictions. When it came to controlled prescription drugs, law enforcement reported that most abusers were "doctor shopping" or were stealing prescription drugs from family members who had obtained the drugs legally.

- Native selling to Native on reservation. Off reservation, non-Native selling to Native who then bring it back. They can really get it in any of the surrounding areas.
- We are hearing a lot about cartels supplying the drugs. Some of them are trying to use the area casinos to move the drugs through. A lot of the time they are using casino parking lots for drug deals. I think it is being trafficked in as well. What we are seeing is being brought in by non-Natives; coming in from [bordering states]. We've heard that the Gulf and Juarez cartel are the suspected DTO's that are trafficking through this area; when I was doing more undercover work those were the connections that I was seeing.
- Non-Natives are bringing it in to Natives. The casino is a point of entry. We also have some houses that have lots of traffic that we are watching. They are buying it [K-2] at head shops. The trafficking is organized and stuff running through the casino is definitely organized.
- I think non-Natives are the ones trafficking larger amounts of the drugs, and local Natives are the ones who are distributing the drugs on the reservation. We have ran across several drug stash houses. The cartel knows the rez very well, to the point of using tribal "safe houses." There are three different cartels that run through the area, two out of [nearby town]. Non-Natives are bringing it to Natives who are then distributing. They use the rez as a safe haven because they know they can get away with it. They know we lack manpower. We shut off the pipeline they had coming in, but they are still coming in through the mountains.

- It's easy to get meth. If they want they can get it. We are close to [city] so they can get whatever they want. They get it from dealers who go to the city and bring it back. We have made arrests of huge cartel members. They run out of the casinos. They launder money and sell drugs out of the casino.
- The cartel has to be involved, or a very close group of people. The amount of drugs around here is too high for it not to be organized trafficking. I think it's a chain that goes cartel, then another local mule, then distributor. Main [traffickers] are non-Natives; dealers, people with prison ties, and extended family members. We call them come homers—people who have left for a long period of time and then return—because they still have that connection to the community and reservation. They are the ties that bring in meth and other drugs. I think there is drug trafficking; definitely with marijuana.

While criminal gangs are often difficult to separate from DTOs by definition, there is a distinction between criminal gangs involved in the drug market and the larger, often international, suppliers. “Criminal gangs—that is street, prison, and outlaw motorcycle gangs—remain in control of most of the retail distribution of drugs throughout the United States” (National Drug Intelligence Center 2011, 11). With a few exceptions, tribes reported they did not have a “problem” with criminal gangs. Agencies generally reported that any gangs were really just “kids” who were “wannabes,” or they were family members that ran in a group and participated in crime together. They reported that these “wannabe gangs” generally emulated West Coast gangs, specifically the Bloods, Crips, and MS-13.

- Not really. Mostly just gang wannabes. Small groups of two to three male juveniles.
- I don't think we have organized gang issues. We have a [nearby big city] gang that hides out here. We had a lot of

Juggalos.⁵ But that has calmed down. Tribe passed a law forbidding possession [wearing] of any Juggalo memorabilia. So all of that is illegal here.

- Not really here; what we normally see is high school kids who claim gang ties, or try to affiliate themselves as “gangs-tas.” They run around with red or blue clothing. Some of them don't even know what it means. When you see someone in their thirties carrying a two-year-old kid dressed all in red, that kid has no idea why they are dressed that way.
- No, we have people who claim gang affiliation but they are usually family, or a group of friends that live around here. They emulate the Bloods and Crips. Basically, it is a bunch of kids who watch too much MTV.

There were very few reports of methamphetamine laboratories in Indian country among the tribes we visited. Those who said they had found evidence of manufacturing stated these were very small-capacity production laboratories, also known as “one-pot” or “shake-and-bake” laboratories. The majority reported that the methamphetamine they were seeing was brought in from surrounding areas. Only one tribe reported finding marijuana being illegally grown in Indian country. Like methamphetamine, the majority of tribes believed that marijuana was being trafficked in by organized drug traffickers.

Law enforcement respondents were asked to describe the relationship between drugs (methamphetamine specifically) and crime in their jurisdictions. The majority reported that the crimes associated with drugs were primarily property crimes and sex trafficking. Here are some of their responses:

- Burglary, robbery, snatch and grab, illegal gaming, prostitution, human trafficking.
- There has been an increase in burglaries or stealing stuff they can trade for drugs.
- It's [drug crime] mostly connected to burglary. Violent crime is down. The property crime is people pill seeking.

5. A Juggalo is a fan of the hip-hop duo Insane Clown Posse. The FBI listed Juggalos as a gang in 2011, with the caveat that Juggalo criminal activity is generally “sporadic, disorganized, [and] individualistic” (National Gang Intelligence Center 2011). Juggalos and the Insane Clown Posse have protested the gang designation through lawsuits, charity efforts, and a 2017 march on Washington, D.C. (Bendrev 2017).

- Houses are broken into and they are taking flat screen TVs only, 40 inches or bigger. They may not even take other valuables. Dealers only take 40 inch TVs or bigger as payment for drugs. They are also taking EBT cards for drugs.
- Breaking and entering doesn't happen much. Sometimes there is an increase in assaults due to increased drinking but we do not see much of an increase in property crimes. We do have a prostitution ring; it is tied to meth distribution. The girls are around 21 years old.
- We had a problem with prostitution out at the casino, it had calmed down, but now seems to be ramping back up. There is both organized and unorganized prostitution going on out there. There is actually a group of transgender [Native] prostitutes that are out there turning tricks. They are lucky to be alive. They will get a john and then when discovered [to be transgender] they are beaten.

The presence of violent crime in Indian country due to methamphetamine, while not the norm, was reportedly severe in context. Here are two examples of violent crime related to methamphetamines from two law enforcement agencies:

- Aggravated assault, we average about one to two a day! Rapes are up there, they are being committed by uncles, brothers, cousins, and dads. We have about one to two a month that are reported. We probably have one or more a week that isn't reported. This year a 13-year-old got a hatchet to her head by three guys—her brother and two of his friends—who climbed through her window and raped her. She fought back and survived, but she lost her motor skills; the doctors don't know if she will recover them with time or not. The offenders were 14 years old.
- We had a double murder around Christmas time last year. Three druggie dealers believed this guy was a snitch so they decapitated him with a screwdriver. They stole a car and drove to [nearby town]. One of the men and the woman—who were a couple—got paranoid about the third guy [who participated in the murder] so they shot him in the head. They drove back to the reservation and lit the car on fire with his body inside.

In 2007, reports surfaced that members of the Sagaste-Cruz drug gang deliberately targeted Native women from the Wind River reservation for exploitation in the pursuit of establishing a drug market in Indian country (Wagner 2007). According to reports, the Sagaste-Cruz drug gang believed that Native Americans were an ideal population to exploit, based on the rate of alcoholism among Native Americans. In 2009, tribal law enforcement discovered a massive illegal marijuana cultivation site on the Warm Springs Indian reservation estimated to be worth \$10 million in street value. According to detectives the site was linked to a major Mexican drug gang with ties to an even larger DTO (Millman 2009). And in 2013, New Mexico drug investigators with the help of tribal law enforcement arrested a member of the Sinaloa drug cartel who was suspected of running cocaine and heroin out of a large tribal casino (U.S. Marshals Service 2013). Based on these and other reports gleaned from news sources and Congressional reports, we asked tribal law enforcement if they perceived the exploitation of Native resources (e.g., women, land, housing, businesses) to be a problem in their communities.

Several respondents indicated that there was some degree of exploitation of Native American resources. The main resource perceived to be under exploitation was Native American women and their families. Service providers described cases in which Native American women would meet non-Native men outside of Indian country and subsequently engage in romantic relationships. Soon thereafter, the women's homes and lives would be taken over by these men and exploited for gain, such as access to buyers in a new drug market or free housing or commodities afforded the woman due to her Native status. Respondents also reported that drug traffickers were using casinos in Indian country to conduct their illegal business transactions, such as drug sales, sex trafficking, and money laundering. Here are some selected quotes from the respondents:

- Yes, it usually starts with drugs. Women will go out and bring back a non-Native man. To keep her happy he will buy her things like a vehicle, smokes; he will provide for the family and then he will do drug trafficking out of the house. Everything will run along fine until he does something to

upset her and then she will squawk. We have also run across several drug stash houses. We have had problems with fugitives hiding out, but there are also issues with trying to build cases.

- Absolutely. Non-Natives will go up to Natives and they chat them up and they get together. Then they will infiltrate into their families. There was one woman who was swindled out of \$30,000 by her [then] boyfriend. Her dad gave him money for renovations to the home but he took off. There are lots of people exploiting them. They can get rich. For example, some pottery can go for \$50,000 for one pot. They exploit these families making pottery.
- I don't think they realize they are being taken advantage of. The girl will meet with someone and they move to be closer to her and of course they also have moved in the mom, dad, or grandma. They may be paying the bills for the family but the family still qualifies for assistance.

Social service providers were asked to describe their perceptions of the problems associated with substance abuse, specifically methamphetamine, and the tribal members they served. The majority reported that child neglect, sexual abuse, and elder abuse were common issues they have dealt with. Here are some of their responses:

- Neglect is the main factor prompting removal of children from the home.
- Neglect and abuse. Sexual abuse is a big issue. It's abuse within the immediate family. That's a problem in this area.
- We have problems with substance abuse, neglect, and child endangerment. For example, children were left at the police station because there is no one to answer door at home after school—left on bus. Another case was where there was a five-year-old found with grandma passed out behind the wheel at the lounge.
- Rape, sexual abuse are so prevalent. These people are not inherently bad—they are using drugs to deal with bad things that have happened to them. And it is not bullying on the playground—it's being raped since they were nine years old and so were their mom and grandma too.

- We also have a problem with elder abuse associated with having a gambling problem; either they [the elders] themselves, or they have family members who exploit them for money for gambling.
- We've had several calls from grandma about missing pills, and when we get there she doesn't want to push the issue because her grandkid was the one who took her pills.

Social service providers were asked how many of their cases involving children were related to substance abuse of any kind. These providers reported the overwhelming majority were related to substance abuse, primarily alcohol.

- All of our cases are substance abuse-related, because there is neglect. So alcohol and drugs. Second is sexual and third is physical abuse.
- 100 percent of cases are substance abuse-related. The majority of those, around 80 percent, are alcohol.
- Initially you think like half, but then once you get ball rolling and see what's really going on, 85 to 90 percent are substance abuse-related issues. For example, they come in for neglect and then you see the neglect is related to the substance abuse.
- The majority of kids going into permanent care, their parents are on meth; around 75 to 85 percent.
- 75 percent of referrals are alcohol-related.
- About 60 to 75 percent of cases substance abuse-related. Probably less than one percent are meth-related. The rest are alcohol and probably marijuana.

Service providers were also asked about the ease with which their tribal clients could access services, including wait times for essential services such as inpatient treatment. Several agencies had services available for clients the minute they walked through the door. Others reported that it may take weeks or months before they are able to provide services. The main factor mediating response time and ease of services appeared to be the size of the tribal population that the agency was serving. This was also true for law enforcement when asked about response times to call for service within their various tribal jurisdictions.

The larger the tribal jurisdiction, the greater the response times; they ranged from four days to two hours. Smaller tribal jurisdictions reported a response time average of eight minutes.

Each of the respondents was asked what their biggest challenges and greatest needs were in their respective fields of service.

Law enforcement respondents reported that their number one challenge was a lack of trust and cooperation from tribal community members, including members of the local tribal council.

The second biggest challenge was a lack of manpower, specifically recruiting qualified officers willing to live in tribal areas that suffer from a serious lack of housing, low wages, and poor job security. Finally, law enforcement respondents reported that the current laws governing their tribal entity were insufficient and in some cases nonexistent when it came to the issues they are facing. Here are some responses:

- Community support or lack thereof. Most police are considered outsiders. We are always encouraging [the community] to join in. But they ostracize you. They constantly pick on you. Only now are people starting to call the police station for service. We had started going to tribal meetings but they became so hostile. They don't understand what we can and cannot do.
- The biggest challenge is getting officers here, and once they are here how to keep them here. The area is so remote anyone that comes in from the city is not used to it. Or if they are married and move here their families are not happy. Because there is no housing. You cannot lease a home here unless you are a tribal member. Officers are forced to live in the BIA compound. A few officers are allowed to live in the housing projects due to the "essential community" member laws mandated by the Federal government. But then the community treats them as outsiders and most of them opt to move back to the BIA compound or further away to outlying areas. Those are tourist areas where most things are overpriced and home values are overinflated. I've thought about making new employees sign a two-year contract to at least get back the amount we spent on training. I'm down to my core group that's going to stick around awhile. The Tribal Law and Order codes aren't up to date.

- If we had the resources and staff available I think we could do more, but we have to have a large visibility in the community and enough personnel to respond to calls. [On officers needed:] Ideally, at least seven more; we are understaffed. We don't have time for paperwork, not to mention time for family, et cetera; on top of regular reports there are annual reports, inspections, et cetera. If we had more officers we could have D.A.R.E. [Drug Abuse Resistance Education], and paperwork could be completed on time, but now I have to pull officers to take care of other issues. BIA looks at it as collateral duties, and that's not fair. In other agencies D.A.R.E. is considered a promotion. If we had a designated D.A.R.E. officer he may have to leave to deal with a domestic violence situation in the middle of a presentation, or the guy may have to arrest dad or mom after seeing the kid in the D.A.R.E program.
- Educating the community about problems that exist, and how reporting people will make this a safer place to live. They are in denial about the extent of the problems here.

When it came to the biggest needs and challenges for their tribal members, social service providers reported a lack of treatment facilities, specifically detox centers. Transportation to access services, employment, and fresh food, as well as adequate housing, jobs, and foster homes were also listed among the biggest needs. Here are some of the responses:

- Substance abuse and mental health are the services needed the most. Parenting skills are not bad when the parent is sober, it's when they are high or drunk that it's bad. Dealing with a serious lack of resources. We need substance abuse detox. We can't send into rehab if they are strung out on drugs and IHS [Indian Health Services] won't detox. We don't have anyone to do mental health assessment; IHS won't. And they won't do psychiatric evaluations. IHS refuses to do forensic evaluation or interviews. If they [the client] don't have Medicaid we don't have any place to send them. I had to buy Breathalyzer and UA [urine analysis] kits out of my own budget to test parents when they come in. I can't send someone to treatment if there is nowhere to send them.

- Very little treatment available for juvenile users. Meth is so different than alcohol or other drug issues. We end up being detox so they can be fairly stable before going to treatment. Meth patients take more time, because they have so many needs. Over past year the number of meth kids here increased. I have kids telling me that they have had kid dealers holding guns to their heads who are also meth dealers. These kids suffer from PTSD due to these types of traumatic incidents.
- Most people who need these services don't live in [big city]. We are trying to serve the tribe as a whole. Clinics in [tribal area] don't always have substance abuse counselors. Clinics are understaffed so many clients have to drive. Transportation is the biggest problem. We can't get patients to treatment when they live outside town. Many live a good distance away from the treatment that they need. They may live in an area that has a clinic, but it will be for mental health and not substance abuse and the patient needs substance abuse [treatment]. And it is not just transportation—there are not enough resources.
- We need housing. There is not enough housing. There are 400 people on the waitlist for housing. It is not unusual to have three generations living in the home. If you have 13 people living in a two bedroom house it causes stress. When people leave treatment they have nowhere to go.
- We need jobs. Most people try to work. They can get education, but if they get vocational training still the jobs are somewhere else. There is a big problem with a lack of transportation. Vehicles are hard to come by so you have to try and catch a ride.
- There are not enough foster families [on reservation] for children to be placed. One family we recruited took the baby, then decided not to foster and they just dumped the newborn baby. They brought the baby back to us here in the office and said they just couldn't do it anymore. We really need a good five to ten foster families to be able to handle the load. We have about seven or eight families outside of the reservation. Not a lot of luck with getting foster families on the reservation.

- There is not enough placement here [on reservation]. There is a big need for certain age groups like zero to five [years] because there are not enough childcare services and for children 16 to 21. Another area is big sibling groups. Recently we had sibling group of eight; they went to three different homes—off reservation. We also had a sibling group of four we couldn't place. We aren't able to recruit enough families for groups and younger and older children.

There were two main themes that emerged when social service providers were asked about how they measured success: length of treatment and the reunification of children with their parents if they have been removed. Other responses included participation in community events and number of referrals; one tribe reported the allocation of grant money as its best measure.

Following are selected responses from respondents.

- Personally, by the cases that don't return. Even getting referrals, because it means people see us as competent.
- Success is length of time in treatment. The people who come in regularly are the ones who are most likely to be successful. We work according to the harm reduction idea. For example, if they come to counseling for six months and they are sober for some of those months, that's better than nothing.
- If they are making progress. If they aren't coming in drunk or high. When they have a clean UA when they visit. When parents ask for help. Like the dad that checked into treatment after going on a drinking binge because he wants his kids back.
- There was one woman who had her fourth felony DUI and she went through Healing Court kicking and screaming, but now she has been sober for six years. She has her kids back and she is taking care of others. She comes in on her own to maintain her sobriety. It works when people change their social lives.





Conclusion

Seventy percent of the respondents stated that casinos located in their jurisdictions were being used to facilitate drug sales and sex trafficking by organized gangs.

Methamphetamine continues to be a major problem for tribal communities, though abuse of controlled prescription drugs is on the rise and could soon surpass methamphetamine as a threat to Native Americans in Indian country. The nature and extent of the trafficking, distribution, and use of methamphetamine are a significant and dangerous threat to the tribal communities that participated in this study. Alcohol and abuse of controlled prescription drugs, nonetheless also reportedly pose serious threats to the lives and welfare of Native Americans.

In interviews with the authors, tribal law enforcement officials reported that methamphetamine was the illegal drug that posed the greatest threat to their tribal communities. Many believed that abuse of controlled prescription drugs was quickly becoming a threat as well. Several agencies also reported that use of synthetic cannabinoids, also known as synthetic marijuana, K-2, and Spice, was a growing concern. All respondents agreed that methamphetamine was qualitatively different than other drugs due to its addictive nature and the harms that result from the manufacturing, trafficking, distribution, and use of the drug in Indian country.

Law enforcement professionals perceived both methamphetamine and marijuana to be highly available and easy to obtain. They reported that drugs were being trafficked into their areas by large non-Native drug trafficking organizations and being distributed by local Native American dealers. Seventy percent of the respondents stated that casinos located in their jurisdictions were being used to facilitate drug sales and sex trafficking by organized gangs. Larceny, theft, burglary, sexual assault, and sex trafficking were the main crimes directly associated with the trafficking, distribution, and use of methamphetamine in Indian country. Few agencies reported the presence of criminal gangs.

Respondents reported that their greatest challenge was a lack of community support and resources, namely manpower, necessary to fulfill their duties. Several agencies spoke of the difficulties they face in attracting qualified candidates for law enforcement positions. Poor wages and a lack of adequate housing in Indian country were seen as the greatest obstacles in the recruitment of qualified law enforcement officers. The lack of manpower was directly related to the officers' inability to engage in community policing projects such as DARE and community watch programs that they believed would help strengthen community relationships and aid in the fight against drugs in Indian country. There were indications that training for law enforcement was available, however, respondents stated that they were not able to take advantage of those training opportunities because it would leave their agencies short staffed.

Social service providers also perceived methamphetamine to be uniquely different than other illegal drugs due to the nature of the harm that results from its use—particularly the harms suffered by Native American children. They reported that the overwhelming majority of their cases are related to substance abuse, namely of alcohol, methamphetamine, and controlled prescription drugs. Many described substance abuse as an epidemic that they were not equipped to deal with due to a lack of resources and manpower.

Several respondents reported that they lacked the funds to fulfill their clients' needs, such as housing, clothing, food, and healthcare products (e.g., diapers and toothpaste). They reported that the lack of transportation in Indian country (both private and public) inhibited their clients' ability to access fresh food in grocery stores, healthcare, and employment.

Agencies that provide substance abuse treatment also reported a lack of detoxification centers, which they need so that clients can be admitted to inpatient drug treatment centers. Ninety percent of the tribes included in this study had no treatment centers or programs designed specifically to treat methamphetamine addiction. Respondents expressed the need for halfway and sober living establishments for those coming out of treatment and transitioning back into the tribal community.

Both agencies responsible for child welfare and some tribal officials reported that there were not enough foster homes or foster families in the communities they serve. This has resulted in many Native children being placed with non-family members outside of Indian country. Professionals described situations where Native families were separated due to cultural differences between state and tribal agencies. Many reported that once children were taken from tribal lands, few ever returned.

Limitations

The results of this study should be considered in light of the several limitations of qualitative methodology and the sensitive nature of the research. Most notably, there were several times when law enforcement respondents declined to answer questions they felt would jeopardize or otherwise threaten ongoing drug investigations—for example, when asked to provide information regarding specific DTOs engaged in trafficking drugs in Indian country. They were also reluctant to disclose information regarding investigative techniques that are used to combat drug smuggling and distribution. This is absolutely understandable, considering the research team were not law enforcement officials and were outsiders to the respective tribal areas. However, as Congress has asked for empirical evidence of specific DTOs operating in Indian country before funding for tribal law enforcement will be allocated, it would have been helpful to have this information.

Some participants that tribal executives initially suggested the research team contact did not have enough information to answer all of the questions posed. For example, the majority of social service respondents were unable to provide information regarding child protective services or the number of children removed due to methamphetamine in their homes, but offered information about available social services in general. Moreover, there were insufficient numbers of mental and behavioral health participants. Additional participants could have provided invaluable information concerning the state of methamphetamine addiction and treatment among Native Americans in Indian country.

Furthermore, due to the sensitive nature of the research there was a reluctance, and at times outright refusal, of many tribes to participate in the current initiative. While this is certainly understandable, research is vital to addressing the needs of Native Americans in Indian country. Intertribal cooperation is necessary to aid in the collection of data in Indian country. This means that researchers need to work to gain the trust of tribes. One thing we found is that participants were more likely to open up and trust us as researchers when we met with them in person. Researchers should try and meet with as many tribal officials as possible to explain the purposes of the research and to listen to their concerns. This will also give the researchers a chance, in person, to explain the research and allow them to assure the tribe that all confidences will be kept and allow a chance to explain how the research will benefit the tribe. The results of all research need to not only be submitted to each tribe, but explained.

Implications

Three major implications can be drawn from the results of this study. First, funding for personnel support for tribal law enforcement is critically needed to allow these agencies to adequately address the trafficking and distribution of methamphetamine and the resultant crimes of theft, violence, sexual abuse, sex trafficking, and child and elder neglect in tribal communities. Second, detoxification centers for drug and alcohol users and additional resources and services for their children should be made available in tribal communities. Treatment centers and programs that address the unique problems associated with methamphetamine addiction need to be established. These centers should use evidence-based practices and incorporate traditional cultural components. Third, the influence of drug trafficking and distribution on the inhabitants of Indian country needs further research, particularly in regard to social services, mental and behavioral health, law enforcement, and tribal justice systems. Additional funding and support for this research should be made available to Native American researchers.



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About the COPS Office

The **Office of Community Oriented Policing Services (COPS Office)** is the component of the U.S. Department of Justice responsible for advancing the practice of community policing by the nation's state, local, territorial, and tribal law enforcement agencies through information and grant resources.

Community policing begins with a commitment to building trust and mutual respect between police and communities. It supports public safety by encouraging all stakeholders to work together to address our nation's crime challenges. When police and communities collaborate, they more effectively address underlying issues, change negative behavioral patterns, and allocate resources.

Rather than simply responding to crime, community policing focuses on preventing it through strategic problem-solving approaches based on collaboration. The COPS Office awards grants to hire community policing officers and support the development and testing of innovative policing strategies. COPS Office funding also provides training and technical assistance to community members and local government leaders, as well as all levels of law enforcement.

Since 1994, the COPS Office has invested more than \$14 billion to add community policing officers to the nation's streets, enhance crime fighting technology, support crime prevention initiatives, and provide training and technical assistance to help advance community policing. Other achievements include the following:

- To date, the COPS Office has funded the hiring of approximately 130,000 additional officers by more than 13,000 of the nation's 18,000 law enforcement agencies in both small and large jurisdictions.
- Nearly 700,000 law enforcement personnel, community members, and government leaders have been trained through COPS Office-funded training organizations.
- To date, the COPS Office has distributed more than eight million topic-specific publications, training curricula, white papers, and resource CDs and flash drives.
- The COPS Office also sponsors conferences, roundtables, and other forums focused on issues critical to law enforcement.

COPS Office information resources, covering a wide range of community policing topics such as school and campus safety, violent crime, and officer safety and wellness, can be downloaded via the COPS Office's home page, www.cops.usdoj.gov. This website is also the grant application portal, providing access to online application forms.



Native American tribes across the United States have experienced many adverse effects from the distribution, trafficking, and use of methamphetamines and other dangerous drugs. These effects range from higher crime rates associated with the sale of drugs, to the displacement of children from homes where methamphetamine is being abused or trafficked, to the exploitation of Native resources. In an effort to address the increasing concerns raised by the methamphetamine problem in Indian country, law enforcement and social service providers were asked to participate in qualitative interviews regarding their perceptions of the methamphetamine use and implications for crime and treatment in the tribal communities where they work and live. The purpose of the study was to determine the nature, extent, and effects of methamphetamine trafficking, distribution, and manufacturing in Indian country. A further goal was to determine what, if any, other illegal drugs or substances posed problems for tribal agencies and the programs and policies that are needed to help solve this complex public safety problem.



COPS
Community Oriented Policing Services
U.S. Department of Justice

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