

AN EMPHASIS ON SOLUTIONS RATHER THAN PROBLEMS

CAROL CHIAGO LUJAN, PH.D.

Numerous articles have been written about alcohol and American Indians. These articles have focused primarily on the etiology of drinking, the magnitude of the problem, the drinking patterns of American Indians, and the effects of alcohol consumption on American Indians' health and lifestyle. Few studies have actually addressed possible solutions to the problem. Dr. Phillip May's paper on alcohol policy for American Indians and bordertowns is one that begins to summarize the literature on alcohol policy as it relates to American Indians and Alaska Natives. His work should generate creative solutions within the American Indian and Alaska Native communities as well as encourage additional research in this area.

Alcohol policy for a number of American Indian tribes and Alaska Natives is one of ongoing concern. May provides an excellent summary of the policy literature and presents sound guidance for American Indian communities and bordertowns to follow. The presentation of figures listing specific recommendations for intervention, the tables providing mortality statistics, and the additional references within the bibliography all combine to provide a comprehensive compendium for interested policy-makers.

Major Themes and Points of Discussion

It is important to highlight four significant themes that surface in this paper: (1) there are no simple or easy solutions to the problem of alcohol abuse in any community; (2) communities must develop a comprehensive, consistent, and clearly defined alcohol prevention/intervention policy; (3) the policy must involve a public health approach focusing on the community and integrating all major institutions (such as the family, school, religion, law enforcement, courts, health services, community services, media, etc.); and (4) value and attitude changes must be promoted because social change in public health occurs after value and behavior shifts in primary social groups.

Furthermore, May accentuates two additional points that are significant factors in the prevention of alcohol abuse. The first point is often

neglected in prevention, intervention, and treatment modalities: the lack of emphasis on strengths within the community. The second point, regulating the sale and control of alcohol, is considered controversial in many Indian tribes and consequently often is not adequately discussed. Usually the issue of legalization is forced on the agenda as a result of a recent alcohol-related tragedy. Under these circumstances it is difficult to discuss the issue clearly and rationally without polarizing the community.

Strengths in the Community

There are more than 300 federally recognized tribes in the United States that differ in various ways, including language and culture as well as their experience with alcohol. Some tribes have serious substance abuse problems while others do not.

Many tribes have sophisticated and highly specialized tribal governments and constituencies. Within these tribes, there are hardworking, caring, and dedicated people. Examples of this are pervasive throughout Indian country. There are numerous committed, articulate, and well-educated tribal leaders who encourage developing innovative programs within the communities that are tailored to meet the specific needs of the community. For instance, under the leadership of Wilma Mankiller, the Cherokee tribe in Oklahoma has developed summer internships for high school youth. Each summer, students are assigned to work with an individual within the tribal government. This program provides several benefits for the high school participants, including increasing their knowledge and awareness of tribal government, providing a mentoring process for future tribal leaders, and giving students a means to earn money.

In addition, intervention and treatment programs are beginning to focus on aftercare and the family. The Phoenix Family Healing Center is one of the innovative programs that includes treatment for women and their children. This unique inpatient program offers culturally relevant continuity of care for both mothers and children. The center is currently in the process of including fathers within this holistic concept.

Furthermore, tribes are working cooperatively in their efforts to provide services to their membership. They are combining federal dollars with their own resources to provide intertribal services. For example, tribes in Oklahoma have combined their efforts and resources to build a child care center and recreation center. In the Northwest, a consortium of tribes have recently opened an emergency shelter for youth.

Young people across the country are also active in alcohol-prevention initiatives. Several teen support groups have been formed in various reservations across the country, including Tohono O'odham. Both the

public schools and the Bureau of Indian Affairs schools in this area have active student groups.

Additionally, intertribal councils in various parts of the country provide a unified voice for tribes within their region. The All Indian Pueblo Council in New Mexico has been in existence prior to the arrival of Western Europeans. It continues to be a viable mechanism for unity and political support for the 19 pueblos.

The above examples are only a few of the numerous and exciting activities that tribes are promoting as a means to strengthen and support the culture, the youth, the family, and the tribe. Unfortunately, these endeavors are seldom highlighted by the media. Rather, a major portion of media attention concerning American Indians has focused on the negative (Lujan, 1983).

Because of the negative stereotyping of American Indians that has been perpetuated throughout the centuries in literature and the media, many non-Indians have a distorted and negative view of Indian tribes. Furthermore, and most detrimental, a number of Indian people accept the negative stereotypes. This is particularly evident in the research by May and Smith (1988). The majority of Navajo respondents in this sample believed that Indians have a physiological or biological weakness to alcohol that non-Indians do not have. As May indicates, this is an inaccurate assumption; research indicates there are no differences between the Indians and non-Indians in their biophysiological susceptibility to alcohol. Stereotypes such as these become self-fulfilling prophecies and are used as an excuse for inappropriate behavior.

Regulation of Sale and Control of Alcohol

As May indicates, since 1953 tribes have had the authority to regulate alcohol traffic on their own reservation. However, as of 1974, only 92 reservations (31.4%) had passed laws to legalize alcohol on the reservation. Therefore, on the majority of the reservations, alcohol is still illegal. Earlier research by May (1976) indicates that tribes that have legalized alcohol tend to have lower rates of mortality and arrest than tribes that prohibit alcohol. Practical information such as this should be made available to the tribes so they can make knowledgeable decisions regarding legalization.

To adequately address the problem, tribes need to gain greater control over the sale and regulation of alcohol on or near the reservation. Those tribes that have alcohol establishments located on checkerboard areas (plots of land within the reservation boundaries that are owned and/or leased by non-Indians) should control and regulate the sale of alcohol within these areas; an example is the Cheyenne River Sioux.

Another important but neglected area in pursuing solutions to alcohol abuse is for tribes to work with the alcohol beverage companies. Dangerous and offensive advertising should be discouraged by tribes. For example, at a recent annual tribal fair, the local distributor of Budweiser beer threw candies packaged as Budweiser beer cans to children from their parade floats (Haiken, 1991). Tribes must take the initiative to contact these companies and attempt to change their advertising, labeling, and sponsorship. Several alcohol beverage companies are becoming sensitive to public concern about alcohol abuse and have developed various prevention programs.

Conclusion

May's paper is an outstanding summary of the alcohol policy literature and stimulates a number of ideas. The only suggestion I would make is to include teenage drinking as one of the behaviors that a community should not tolerate. This is a minor oversight considering the magnitude of the paper. This paper should be widely distributed to tribes for their use, review, and consideration.

Bureau of Indian Affairs
Office of Alcohol & Substance Abuse Prevention
1849 C Street, NW, Mail Stop 3-SIB
Washington, DC 20240-4000

References

- Haiken, M. (1991). This Bud's for you, kids. *Mother Jones*, May/June, p. 10.
- Lujan, C. C. (1983). Mass media stereotyping of American Indians. Unpublished manuscript.
- May, P. A. (1986). Alcohol legalization and Native Americans: A sociological inquiry. Dissertation, University of Montana, University Microfilms, Ann Arbor, Michigan.
- May, P. A., (1988). Some Navajo Indian opinions about alcohol abuse and prohibition: A survey and recommendations for policy. *Journal of Studies on Alcohol*, 49, 324-334.