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HONORING NATIONS: 2003 HONOREE

Na'Nizhoozhi Center, Inc. Navajo Nation in collaboration with Zuni Pueblo, City of Gallup, McKinley County, Indian Health Services, and the State of New Mexico (Gallup, NM)

2205 East Boyd Gallup, NM 87301 Phone: (505) 722-2177 Web: <u>www.wellbriety-nci.org</u>

In collaboration with other concerned tribal and non-tribal governments, the Navajo Nation established the Na'Nizhoozhi Center, Inc. in 1992 to address the problem of public intoxication in Gallup, New Mexico. Remarkable not only for its success in dramatically reducing Gallup's alcohol-related ills, but also for serving a substantial off-reservation Native population, the Center demonstrates the power of an intergovernmental collaboration led by an Indian nation that looks beyond assigning fault for a social crisis in order to heal a shared community.

In 1988, the Albuquerque Tribune dubbed Gallup, New Mexico, Drunk Town, USA, and drew local and national attention to a problem that plagues many reservation border towns. Gallup, neighbor to the Navajo Nation, Zuni Pueblo, and other Indian communities, has a population of 21,000 residents. However, this population regularly grows to over 100,000 on weekends as Indians from surrounding reservations with strict no-alcohol policies frequent the City's sixty-one bars and liquor stores. This surge in alcohol consumption comes with an equal surge in alcohol-related problems: indigence, aggressive panhandling, motor vehicle accidents, accidental deaths, deaths from exposure, and homicides.

Long before the Albuquerque Tribune and other media outlets drew attention to Gallup's alcoholrelated ills, the National Institute on Alcoholism and Alcohol Abuse identified McKinley County, where Gallup is located, as having the highest composite index of alcohol-related problems of all US counties. Between 1975 and 1985, McKinley County experienced chronic alcoholism at nineteen times the national average, alcohol-related traffic accidents at seven times the national average, and deaths from all alcohol-related causes at four times the national average. McKinley County's alcohol problem is a problem endemic to Indian Country. According to 2002 Indian Health Service statistics, American Indians and Alaska Natives die from alcoholism at nearly eight times the rate of Americans generally.

Prior to the intense print and broadcast media scrutiny, Gallup's public officials had done little to address its alcohol-related problems, even though the problems could adversely affect the City's heavy stream of tourism. Gallup is commonly referred to as the Indian Capitol of the World. Every August, Gallup's population nearly doubles as over 20,000 visitors attend the Annual Intertribal Indian Ceremonial to see Indian dances; buy Indian jewelry, art, rugs, and pottery; and enjoy the local scenery. The negative media attention forced area business owners, city officials, and tribal governments to concentrate on the epidemic of alcoholism that threatened their social and economic livelihood. City officials and leaders from surrounding governments were challenged to shed the title of Drunk Town, USA, and, more importantly, to address a problem that affected so many of their respective citizens.

As a result, in 1992, the Navajo Nation, Zuni Pueblo, the City of Gallup, McKinley County, Indian Health Service, and the State of New Mexico secured an \$850,000 grant to operate the Na'Nizhoozhi Center, Inc., (NCI) an alcohol treatment center that offers services for publicly intoxicated individuals

in Gallup. Currently employing eighty staff members and twenty student interns, NCI offers alcoholism prevention programs, shelter, and treatment for intoxicated individuals, and follow-up care for alcoholics. Reflecting the Navajo philosophy that all people are interconnected, NCI refers to its clients as "relatives."

NCI's intervention services are at the core of its offerings. The Center's staff members, 95 percent of whom are Indian, are fully trained to work with relatives suffering from severe alcoholism. NCI provides protective custody services for adults who are apprehended for public drunkenness or who enter emergency rooms intoxicated. Relatives who enter NCI's protective custody are offered access to nursing care, short-term shelter, and screening for sexually transmitted diseases. Staff members educate relatives regarding NCI's detoxification programs, vocational classes involving therapeutic arts and crafts projects, and outpatient workshops. Departing relatives are offered free or reduced rate transportation to their residences.

Those who choose to participate in an NCI detoxification program may select among several service options. The Center offers an intensive five-day intervention; a fifteen-day shelter program for clients who require structured daily activities, job placement, and ancillary care; and a 23 ½-day adult residential treatment program during which clients are taught self-sufficiency skills in a culturally and spiritually appropriate setting. Detoxification graduates have access to the Center's outpatient services as long as is needful for them to heal.

NCI is committed not only to addressing alcoholism as it occurs, but also to deterring patterns of abuse before they start. To this end, the Center works closely with local schools to educate students about healthy living. NCI has developed a culturally appropriate curriculum to promote youth awareness of the dangers of sexually transmitted diseases, drug abuse, and alcoholism. The Center offers, as well, a youth employment program that matches students with mentors and provides life skills development opportunities. NCI also partners with local community groups such as churches and Navajo government chapters to raise awareness about alcoholism and to highlight the Center's intervention services.

The sheer number of cases NCI handles is both a measurement of its success as well as an indicator of how necessary its work is. Since 1992, NCI has handled over 250,000 cases, frequently serving as many as seventy-five relatives each day. Statistics show that the Center's efforts are making a difference. Since the Center's establishment, Gallup has experienced a precipitous drop in alcohol abuse and alcohol-related ills. While other factors contributed to these trends the New Mexico state legislature banned Sunday liquor sales, closed down drive-up windows in liquor stores, and allowed for a five-day protective custody hold for repeat offenders the Center not only advocated for these preventative measures, but also exerted its own marked influence on Gallup's alcoholism. For example, within six years of NCI's establishment, Gallup experienced a 50 percent drop in protective custody admissions and a 33 percent drop in alcohol-related emergency room visits to the Gallup Indian Medical Center. Over these same six years, Gallup boasted a 59 percent drop in alcohol-related deaths.

Four of NCI's distinguishing characteristics deserve the particular attention of tribal and local governments seeking to replicate the Center's successes. First, the Center is a model of effective coalition building. The Navajo Nation, Zuni Pueblo, the City of Gallup, McKinley County, Indian Health Service, and the State of New Mexico all recognized that alcohol abuse in Gallup was a common concern with implications for every governmental institution. NCI formalized the interest of these governments and government agencies in combating alcohol abuse by providing each a seat on NCI's Board of Directors. Such equal representation on the board helps to ensure equal participation. NCI's willingness to draw upon the expertise and resources of other institutions is also admirable. For example, NCI works closely with the Center for Disease Control and the New Mexico Highway and Transportation Department.

Second, the governments that founded and now comprise NCI's Board of Directors maintain an intense focus on solving the problem, not on assigning blame. Cities that border Indian reservations yet do not have the strict no-alcohol policies that the reservations themselves impose are frequently

plagued by alcohol-related ills. In such circumstances, it is easy for tribal and local governments to assume uncompromising attitudes about the other's responsibility for the problem. While city governments insist that tribes must solve the problem because their populations abuse alcohol, tribal governments insist that cities that allow for the sale of alcohol should assume responsibility for the resulting social crises. The collaborating governments of NCI refuse to embrace such confrontational postures. Their common concern for the larger community has resulted in an off-reservation solution that promotes the healing of an alcoholic Indian population, improves the relationship between Indians and non-Indians, and strengthens the entire region.

Third, NCI's alcohol treatment succeeds because it is culturally suited to its clientele. The Center demonstrated its commitment to clients' cultural traditions in naming itself the Na'Nizhoozhi Center, Inc. Na'Nizhoozhi is the Navajo name for Gallup and sustains its commitment to culturally appropriate treatment by offering traditional methods of healing. The Center's Hiina'ah Bits'os, or Eagle Plume Society, Ke'na'hasdlii, or outpatient services, and Ts'aa' Bee Na'nitin, or Navajo Basket Teachings Project, respond to the Navajo philosophy of the Beauty Way and involve traditional healing practices such as sweat lodge ceremonies, tobacco ceremonies, talking circles, and sacred songs and prayers. As noted above, NCI calls its clients relatives in acknowledgement of the unity between those suffering from alcoholism and those treating them. NCI staff members report that this familial/cultural milieu helps relatives to strengthen their self-identity, thus allowing them to focus on healing. NCI's successes in incorporating Navajo and Zuni cultures could easily be adapted to any tribe's cultural traditions and teachings.

Fourth, NCI's treatment is not only consistent with tribal cultural traditions, but also responsive to current trends in the Gallup community. NCI studies its clientele carefully in order to tailor its services to a changing population a hallmark of highly effective social service programs. In recent years, higher rates of aggressive alcoholism among younger consumers have resulted in NCI's development of intervention techniques that target younger relatives. Similarly, the Center's careful monitoring of past relatives convinced NCI of the importance of developing individual and family support networks. There is nothing antiquated about NCI's traditional healing practices.

Sadly, countless Native and non-Native communities grapple with the problem of alcoholism and its related social ills. In Indian Country, these problems are particularly pervasive but often inadequately addressed through governmental intervention. This is especially true when the problems manifest themselves off-reservation. The Na'Nizhoozhi Center, Inc., is a shining example of how Native and non-Native governments can come together to address a common concern in an effective, humane, and culturally sensitive manner. The result is a strengthening of Indian nations and the larger communities in which they flourish.

Lessons:

- Combating chronic alcoholism and its social ills requires linkages between treatment programs, law enforcement, and courts. Addressing such problems in off-reservation Native communities requires additional collaboration, including partnerships with city officials, faith communities, local business leaders, and non-Native residents.
- Culturally based approaches to service provision, client interaction, and program administration can increase the effectiveness of tribal programs. At Na'Nizhoozhi, for example, Native spirituality and ceremonies provide problem drinkers with dignified alternatives to drinking.
- Publicizing success combats the negative press frequently associated with Native people and alcohol. Working with the media to raise community awareness about the effects of alcohol abuse and to publicize results of prevention and intervention efforts, the NCI coalition has banished Gallup's former moniker of Drunk Town, USA.