



# TACUNA

## Tradition and Connection for Urban Native Americans

Presented by Daniel Dickerson, DO, MPH  
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# TACUNA:

## Tradition and Connection for Urban Native Americans

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# Disclosures

There are no relevant financial relationships with ACCME-defined commercial interests for anyone who was in control of the content of this activity.



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# Background



- American Indians/Alaska Natives (AI/ANs) experience the highest rates of opioid use in California and 70% of AI/ANs reside in urban areas.
- To our knowledge, no culturally centered, evidence-based opioid prevention programs exist for emerging urban AI/AN young adults.
- Social network research conducted among urban AI/ANs is scarce.
- Opioid prevention interventions that integrate AI/AN traditional practices with evidence based treatments may be of benefit for this population.
- Community perspectives as it relates to social networks and opioid use among urban AI/ANs can help to create a feasible and community-acceptable program.

## Phase 1/UG3



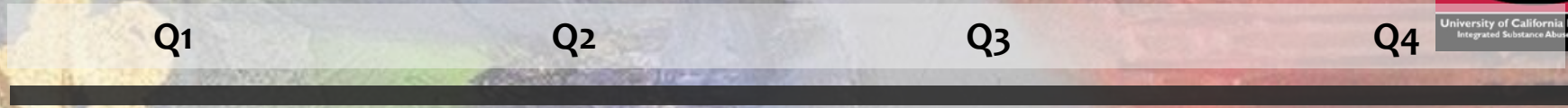
- **Aim 1.** Conduct focus groups with emerging adults (EAs), parents of EAs, American Indian/Alaska Native (AI/AN) providers, and our Elder Advisory Board (EAB) in urban communities throughout CA to understand how to:
  - a) best identify, reach, and engage AI/AN EAs to access programming addressing opioid use,
  - b) adapt and enhance our existing culturally sensitive prevention intervention program, Motivational Interviewing and Culture for Urban Native American Youth (MICUNAY), for AI/AN EAs to address social network factors that amplify (or reduce) opioid and AOD use risk, and
  - c) conduct a pilot test to ensure feasibility and acceptability of the TACUNA program.

## Phase 2/UH3



- **Aim 2.** Compare AI/AN EAs who receive TACUNA + Wellness Gathering (n=185) to AI/AN EAs who receive opioid education (n=185). Compare outcomes at 3, 6, and 12 months.
- **Aim 3.** Explore potential mechanisms of change for decreases in opioid and AOD use outcomes through mediation analyses, including changes in social networks and cultural connectedness.
- **Aim 4.** Develop and test strategies to facilitate sustainability of TACUNA within these communities through key informant interviews and focus groups upon conclusion of the randomized controlled trial.
- **Aim 5.** Conduct an economic evaluation to quantify programmatic costs and cost-effectiveness of the multi-tiered intervention approach, relative to opioid education.

# Timeline for Year 1/Phase 1



Q1

Q2

Q3

Q4

Focus groups: young adults, parents, provider, and EAB

Elder Advisory Board meetings

Program content development and approval

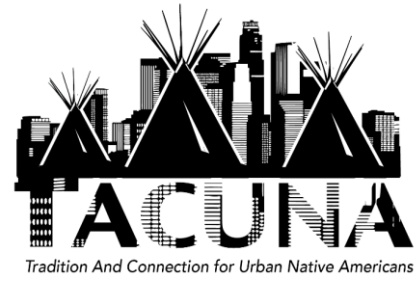
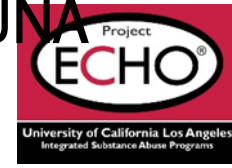
Pilot test of 3 workshops

IRB approval of materials for UH3/Phase II

Hiring and training of facilitators and survey administrators for 1<sup>st</sup> rollout



# Engaging the AI/AN community in the development of TACUNA



# Developing the Workshops

