

Beyond Detox: Building Tribal Recovery Ecosystems

Executive Summary

Behavioral health remains a significant challenge across Indian Country despite substantial investments by Tribal Nations, Urban Indian Organizations, the Indian Health Service (IHS), and federal partners in prevention, treatment, crisis response, and recovery services. Recent IHS evaluations, however, suggest that long-term recovery outcomes are influenced by factors extending beyond treatment itself, including family engagement, educational continuity, transportation access, housing stability, community support systems, and cultural connection. Although many of the findings discussed here emerged from youth behavioral health evaluations, the framework is broadly relevant across Tribal behavioral health systems.

Tribal self-governance has enabled Tribal Nations to develop diverse behavioral health systems reflecting local priorities, cultures, geography, and community needs. This diversity has created a nationwide laboratory of locally designed approaches and increased the need for tools that strengthen recovery, measure outcomes, and identify promising practices while preserving Tribal sovereignty.

Chipco Preserve recommends developing a voluntary Tribal Recovery Capacity Assessment Framework to help Tribal Nations measure local recovery capacity, identify service gaps, compare recovery needs with available supports, and prioritize investment without imposing a federal service model.

Strengthen Recovery Ecosystems: Support family engagement, educational continuity, workforce development, housing stability, transportation assistance, peer support, and community resilience initiatives that reinforce recovery after treatment.

Develop a Tribal Recovery Capacity Assessment Framework: Create a voluntary, Tribal-informed assessment tool that helps communities evaluate recovery capacity, including workforce availability, clinical continuity, recovery supports, cultural resources, transportation, housing, engagement systems, and outcome measures.

Support Tribal Innovation: Invest in Tribal-led approaches that strengthen client engagement, improve service coordination, enhance evaluation capacity, and support long-term recovery through locally controlled technologies and community-based solutions.

The Opportunity

Recent Indian Health Service evaluations identified a recurring challenge: treatment is often the beginning of recovery rather than its conclusion. Individuals leaving treatment frequently return to environments characterized by many of the same conditions that contributed to their original challenges, including educational disruption, transportation barriers, housing instability, family stressors, and limited access to ongoing support services. As a result, long-term outcomes are often influenced by factors extending beyond clinical treatment alone.

Tribal Self-Governance has enabled Tribal Nations to respond to these challenges in different ways. Tribes operate diverse behavioral health systems that reflect local priorities, cultures, geography, and community needs. Some emphasize traditional healing and cultural revitalization. Others focus on peer support, recovery housing, educational partnerships, workforce development, telehealth, or integrated behavioral health services. This diversity is an asset. The challenge is not identifying a single best model, but determining which approaches produce positive outcomes and how successful practices can be shared across Indian Country.

Across both Tribal and IHS systems, workforce recruitment, training, retention, and burnout remain persistent challenges that affect the availability and continuity of recovery services.

A Framework for Recovery Under Self-Governance

Recovery Ecosystems

For the purposes of this paper, a recovery ecosystem consists of the formal and informal systems that support individuals before, during, and after treatment, including family support, education, housing, employment, cultural engagement, peer support, transportation, and community-based services. Recovery depends upon more than treatment. Family engagement, education, employment, housing, transportation, peer support, cultural connection, and community resilience all contribute to long-term outcomes and the ability to sustain recovery after treatment.

Recovery Capacity Assessment

As Tribal systems become more diverse, comparisons based solely on program design become less useful. Outcome measures provide a common language for evaluating different approaches without requiring standardization. The objective is not to rank Tribal programs, but to help communities identify strengths, gaps, and opportunities for investment. A Tribal Recovery Capacity Assessment could evaluate six broad domains: workforce capacity, clinical continuity, recovery supports, community stabilizers, cultural and relational supports, and engagement systems. Together, these domains provide a more complete picture of recovery capacity than treatment metrics alone. Potential indicators include:

- Treatment engagement and completion
- Educational participation
- Cultural participation
- Housing stability
- Family engagement
- Employment and workforce participation
- Overdose events
- Suicide attempts
- Justice-system involvement
- Self-reported resilience and well-being

Tribes should retain the flexibility to define culturally relevant indicators that reflect local traditions, language revitalization efforts, community participation, and other priorities identified

by Tribal governments. The ultimate objective is not merely treatment completion but sustained wellness, as reflected in continued engagement, educational participation, housing stability, family support, cultural connection, and reduced behavioral health crises. Any Tribal Recovery Capacity Assessment Framework should be voluntary, Tribal-informed, and designed to support local decision-making rather than federal standardization. The framework would establish a common baseline for assessment while allowing Tribal Nations to account for local priorities, cultural practices, geography, population characteristics, and service delivery models.

Client Engagement and Coordination

Behavioral health evaluations consistently identify challenges in maintaining engagement after treatment. Communication gaps, fragmented service systems, transportation barriers, and geographic isolation often complicate continuity of care. Emerging technologies, including mobile platforms, telehealth tools, secure communication systems, peer-support applications, educational resources, and culturally relevant digital content, may help sustain engagement, improve coordination, reduce distance-related barriers, and strengthen connections among clients, families, schools, healthcare providers, and community organizations.

When developed and governed by Tribal Nations, these technologies have the potential to improve engagement, support recovery, reduce administrative burdens associated with communication, coordination, and outcome measurement, and strengthen local evaluation efforts while remaining aligned with community priorities and cultural values. Technology should not be viewed as a replacement for relationships. Rather, it should be viewed as a tool that supports and strengthens the relationships that sustain recovery.

Policy Recommendations

Strengthen Recovery Ecosystems: Support family engagement, educational continuity, workforce development, housing stability, transportation assistance, peer support, and community resilience initiatives that reinforce recovery after treatment.

Develop a Tribal Recovery Capacity Assessment Framework: Create a voluntary, Tribal-informed assessment tool that helps communities evaluate recovery capacity, including workforce availability, clinical continuity, recovery supports, cultural resources, transportation, housing, engagement systems, and outcome measures.

Support Tribal Innovation: Invest in Tribal-led approaches that strengthen client engagement, improve service coordination, enhance evaluation capacity, and support long-term recovery through locally controlled technologies and community-based solutions.

Conclusion

The future of Tribal behavioral health may depend less upon identifying a single best model and more upon enabling many different models to succeed. Recovery outcomes are influenced by the ecosystems surrounding treatment, including family support, education, housing, culture, transportation, peer relationships, and community engagement. Tribal self-governance provides

flexibility to address these factors through diverse, locally designed approaches. The challenge moving forward is identifying what works, sharing successful practices, and strengthening recovery while preserving Tribal sovereignty and local control. A voluntary Tribal Recovery Capacity Assessment Framework offers one potential path toward that goal by helping communities measure strengths, identify gaps, and prioritize locally determined solutions.

Works Consulted

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