



# The Opioid Crisis in Indian Country

Fond du Lac Community Meeting  
Tuesday, March 8, 2016  
Black Bear Casino Resort



**METHAMPHETAMINE**

**METHADONE**

**HEROIN**

**PRESCRIPTION  
DRUGS**



# Statistics

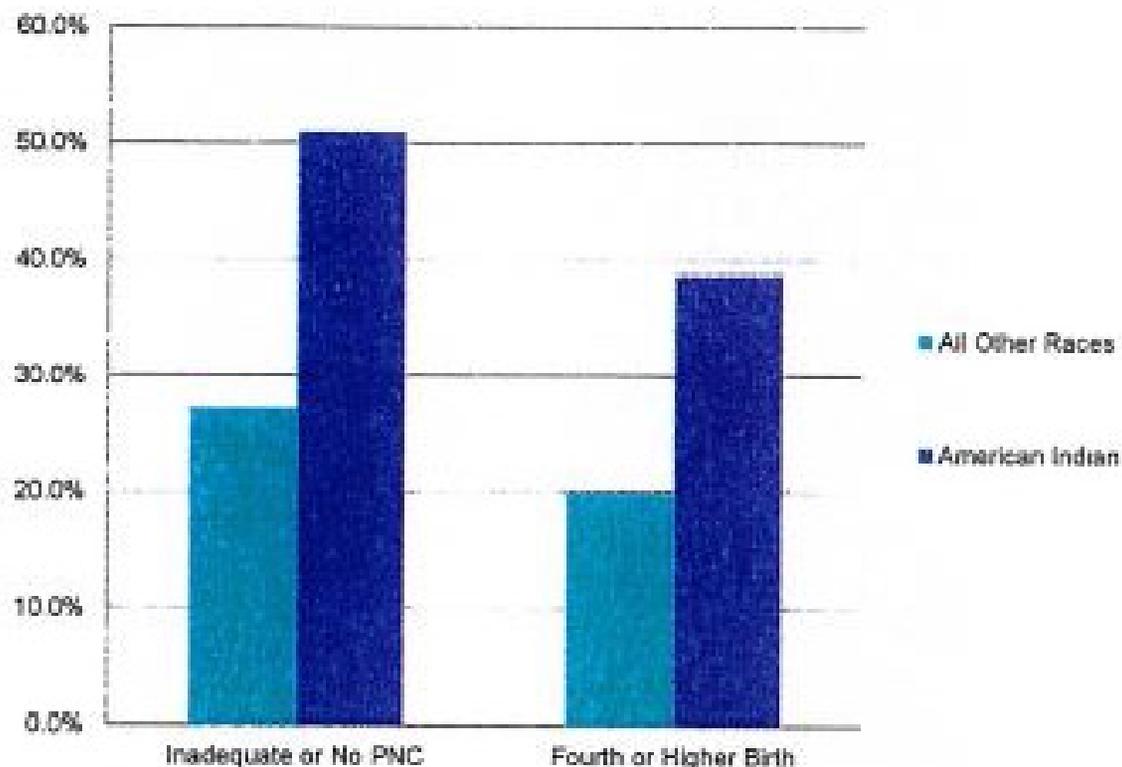
- Minnesota ranked first among all states in 2015 for deaths due to drug poisoning among American Indians/Alaska Natives.
- More than half of pregnant Minnesota women who are known to be opioid dependent are still prescribed opioids for pain during pregnancy.
- The rate of prescribed opioids for pain during pregnancy is twice as high among American Indians then among other Minnesotans.
- In Minnesota in 2013, the American Indian rate of death due to drug overdose is more than 5 times the rate of whites. This disparity is the **highest** among all states in the U.S. (MDH)
- Among American Indians in the U.S., Minnesota has the **highest** unintentional drug overdose mortality rate. (MDH)

## NAS Infants

American Indian NAS infants are more likely to have a mother who received no or inadequate prenatal care (PNC)

38 percent of American Indian NAS infants are the fourth or higher birth for that mother.

NAS Births - Differences between American Indians and all other race/ethnicities, 2009 - 2012

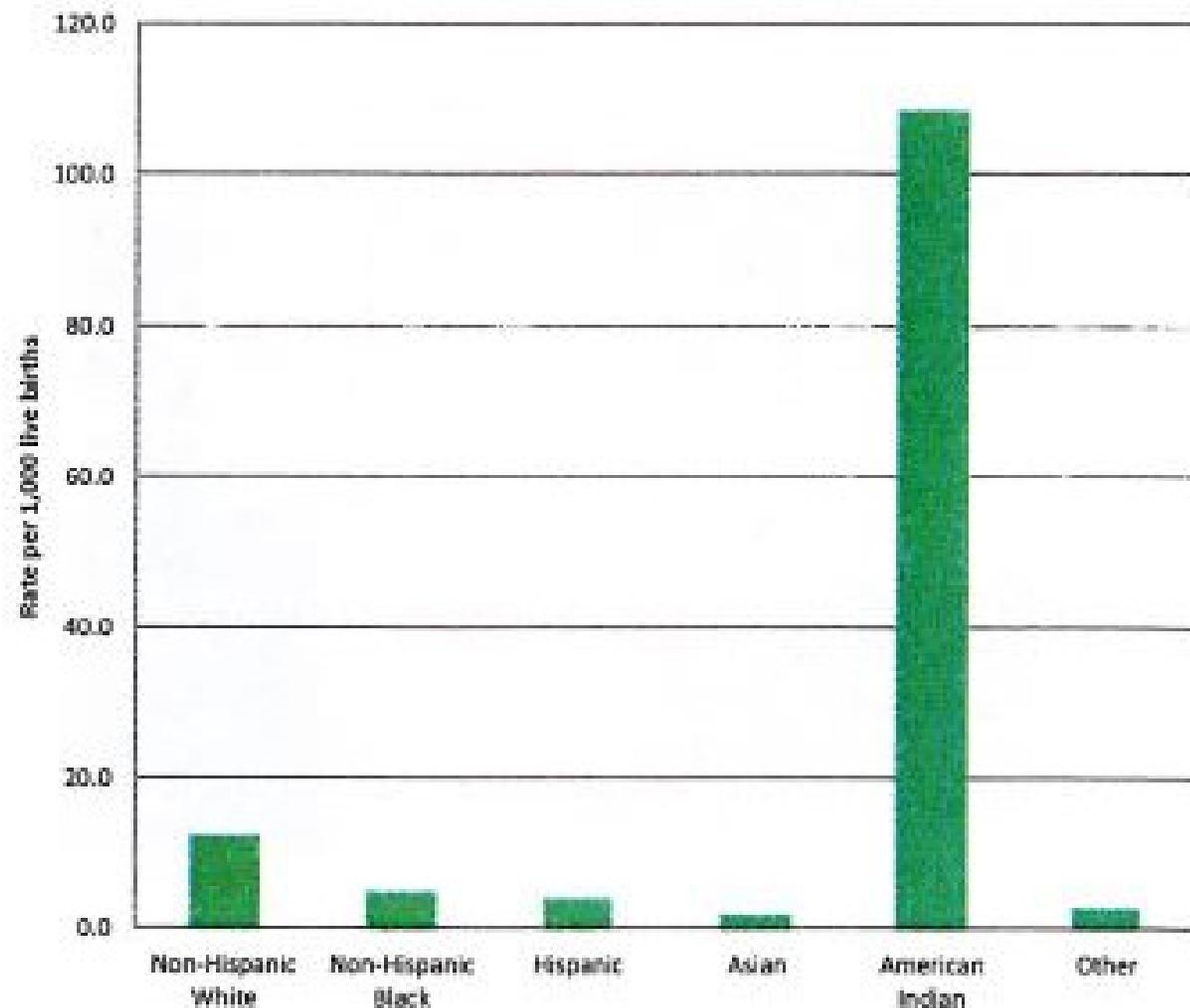


## Maternal Diagnosis of Opioid Abuse

Compared to non-Hispanic whites, American Indian women are 8.7 times more likely to be diagnosed with maternal opiate dependency or abuse during pregnancy.

More than one in ten pregnancies among American Indian women have a diagnosis of opiate dependency or abuse during pregnancy.

Rates of Maternal Opioid Abuse by  
Race/Ethnicity, 2009-2012

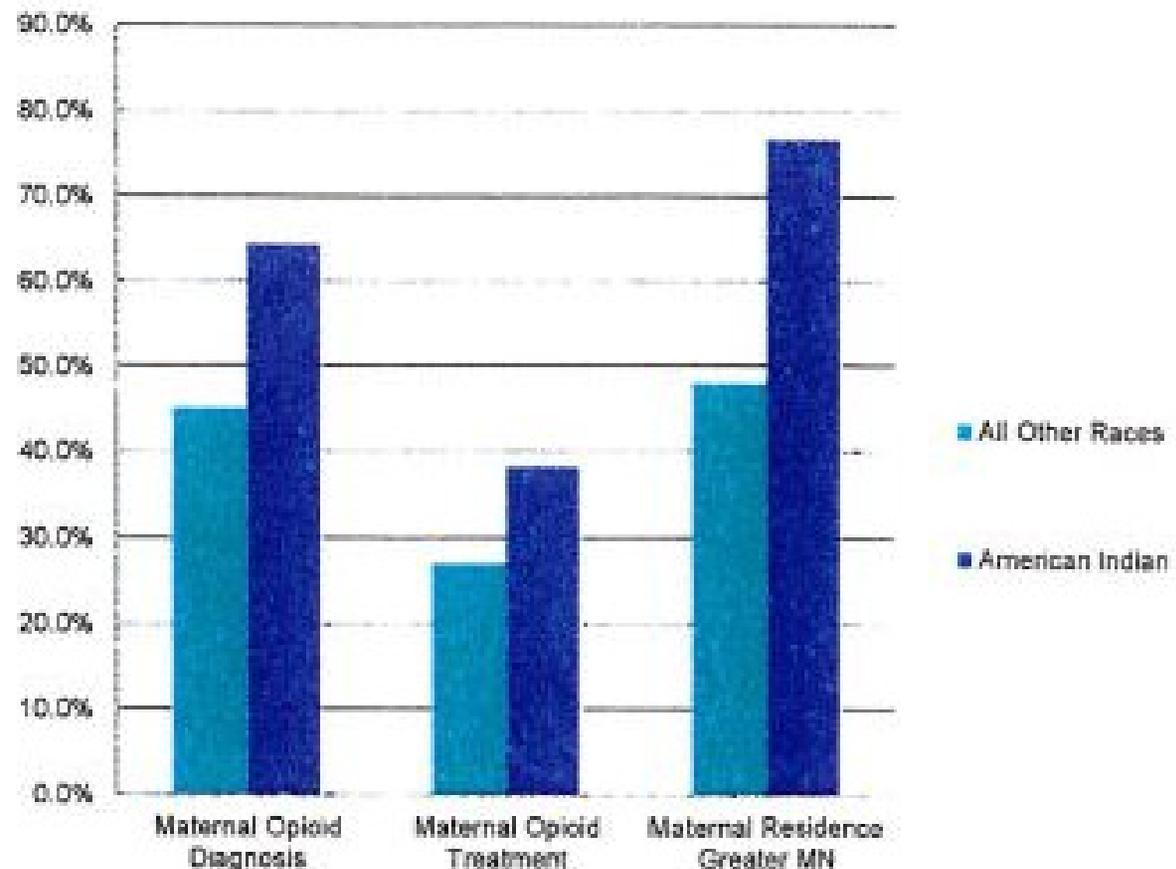


## NAS Infants

American Indian NAS infants are more likely to have a mother diagnosed with Opioid Substance Abuse and Opioid treatment during pregnancy.

78 percent of American Indian mothers of NAS infants live in Greater Minnesota.

NAS Births - Difference between American Indians and all other race/ethnicities, 2009 - 2012





# Opioid Use and Treatment History Results

Fond du Lac Human Services Division  
Institutional Review Board protocol number  
2014/12/15



# Overview

- 8 sections:
  - Demographic Information, Prescription Opioids for Pain, History of Illegal Drug Use and Treatment, History of Methadone Use, History of Methadone Use Prescribed at a State Licensed Methadone Treatment Facility, Take Home Methadone, Overall Impressions of Methadone Treatment, Community Knowledge of Methadone.
- Community experts employed by the Fond du Lac Human Services Division with extensive ties to, and knowledge of, the American Indian Community and those with a prior history of drug use identified potential participants. The community experts approached potential participants individually, informed them of the overall goals of the study, and invited them to participate. If the participant was interested they were read and signed a consent document. All interviews were conducted individually.

# Overview (continued)

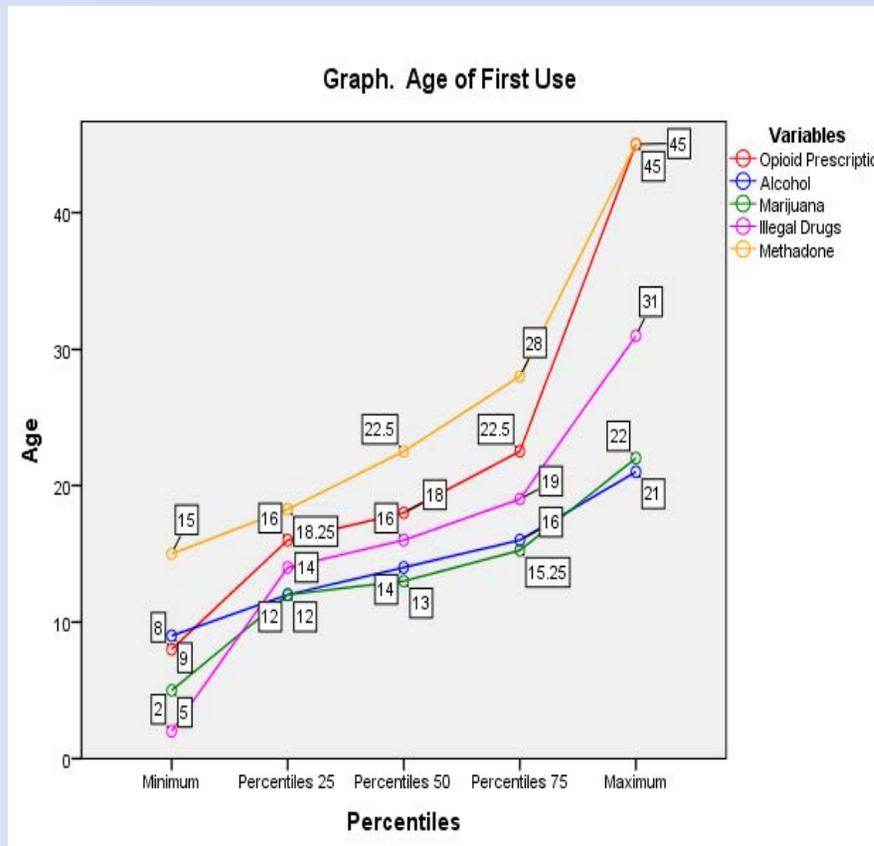
- An interviewer read instructions to participants for each section. Participants answered questions on their own copy. The interviewer did not see participant answers. Participants were able to ask for clarification or instructions at any time.
- Participants received a \$25 incentive.
- We took great care to protect participant anonymity.



# Survey Summary

- 62 Completed
- 30 Men, 32 Women
- Average age 31 (range 19-59)
  - Men 32.2 (range 21-59)
  - Women 29.4 (range 19-50)
- 54 enrolled in a federally recognized tribe, 8 not enrolled

# Initiation – Age of First Use



## Key points:

- Age 16: 75% already had marijuana/alcohol and 50% had already started using illegal drugs
- Age 18: 50% had an opioid prescription for pain
- Age 22.5: 75% had an opioid prescription for pain, 50% had methadone



# Prescription Opioids for Pain

- 82.5% have ever been prescribed Opioids/narcotics for pain
- 63.6% have sold or gave away part of an opioid prescription
- 57.9% have had part of an opioid prescription stolen
- 50.9% have traded a prescription opioid for another drug



# Prescription Opioids for Pain (continued)

- Only 21.4% have engaged in “doctor shopping”
- 22.8% have ever been prescribed methadone to treat or control pain
- 64.9% believe using Opioids/narcotics prescribed for pain led to their illegal drug use



# History of Illegal Drug Use and Treatment

- Average 4.40 (n=55) enrolled in in-patient treatment
- Average 2.46 (n=50) times enrolled in out-patient treatment

# Methadone Use

- 83.9% of all participants have used methadone. Of those that used methadone...
  - 94.2% have taken methadone not prescribed to them.
  - 78.8% have ever taken liquid methadone not prescribed to them.





# Methadone Use (continued)

- Of those that reported taking methadone . . .
  - 88.5% have combined methadone with other controlled substances
  - 62.8% have combined methadone with benzodiazepines
    - Jann, M., Kennedy, W. K., & Lopez, G. (2014, February). Benzodiazepines: a major component in unintentional prescription drug overdoses with opioid analgesics. *Journal of Pharmacy Practice*, 27(1), 5-16. doi:10.1177/0897190013515001
    - Mack, K. A., Zhang, K., Paulozzi, L., & Jones, C. (2015, February 1). Prescription Practices involving Opioid Analgesics among Americans with Medicaid, 2010. *Journal of Health Care for the Poor and Underserved*, 26(1), 182-198. doi:10.1353/hpu.2015.0009
  - 61.5% have injected methadone



# Methadone Use-First Dose

- We asked participants about how they obtained their first dose of methadone
  - Given by friend or family - 59.2%
  - Given by drug dealer - 16.3%
  - From a licensed treatment program - 14.3%
  - Bought from drug dealer - 10.2%
  - Stolen-0
  - Prescribed for pain-0
  - Other-0
- 85.7% were obtained through illegal means (i.e. not prescribed)
- 75.5% were given to them



# Methadone Assisted Therapy

- 20 survey participants reported receiving treatment at a state-licensed methadone clinic (32.3% of all participants)
- 70% received methadone from one clinic
- Respondents were in treatment for an average of 28.5 months at the time of the survey (range 0.5 -72 months)



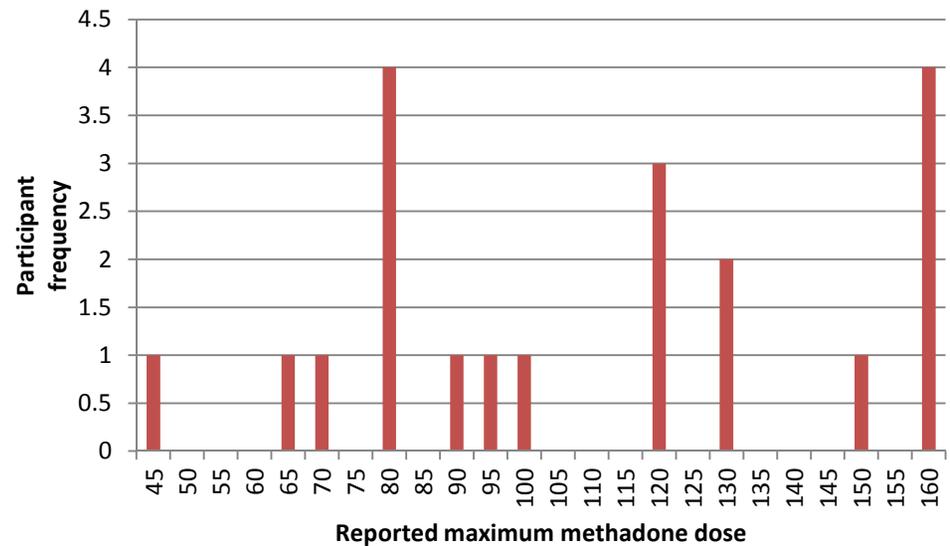
# Methadone Assisted Therapy (continued)

- 65% have taken benzodiazepines while in treatment
- 70% have been prescribed Opioids/narcotics by their healthcare provider while in methadone treatment
- 25% have received methadone from a healthcare provider while also receiving treatment from a methadone clinic

# Methadone Assisted Therapy- Maximum Dose

- Average 109.8 mg  
range 45-160 m/d)
- 80% had doses  
higher than 80 m/d)
- 50% had doses  
higher than 120  
m/d

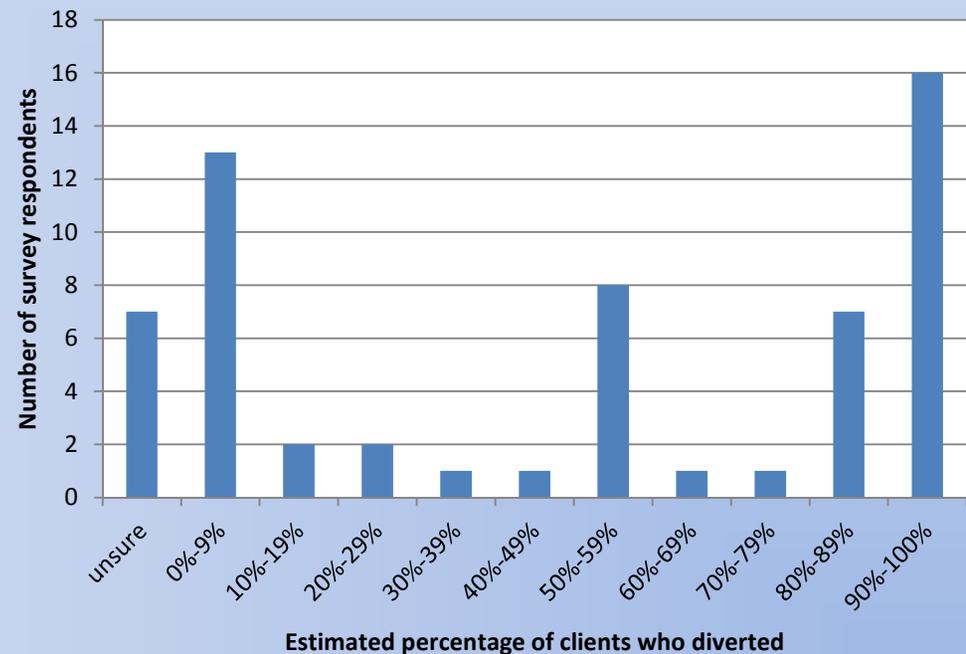
Maximum methadone dose reported  
on Opioid History Survey (n=20)



# Community Perceptions of Diversion

- What percentage of methadone clients, that you are aware of, sold or gave away portion of their take home methadone?

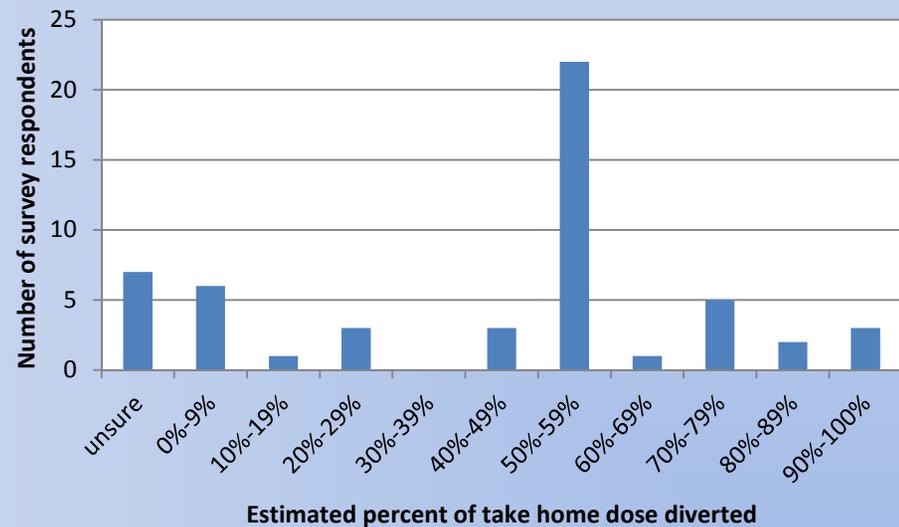
	All Respondents
Unsure	7 (11.9%)
0-24%	16 (27.1%)
25%-49%	3 (5.1%)
50%-74%	10 (16.9%)
75%-100%	23 (39.0%)



# Community Perceptions of Diversion (continued)

- What percentage of take home methadone did clients sell or give away?

	All Respondents
Unsure	7 (12.5%)
0-24%	7 (12.5%)
25%-49%	6 (10.7%)
50%-74%	26 (46.4%)
75%-100%	10 (17.9%)





# Self-Reported Diversion

- Of the 20 people that reported receiving take home methadone 65% reported diverting in some way.
  - 60% diverted through selling
  - 60% diverted through gifting
  - 50% diverted through trading
  - 45% diverted through all three routes



## Self-Reported Diversion (continued)

- Participants reported diverting between 5% and 80% during a typical month.
- An average of 47.8% of their take home dose was diverted during a typical month.

# Diversion Summary

	What percent of methadone clients divert take home doses?	What percent of take home doses are diverted on average?
Self-Report	65%	47.3%
Community Perceptions	54.8% (average estimate of how many clients divert at least some take home doses)	50.4% (average estimate of how much is diverted from take home doses)
Community Perceptions	88.5% believe at least some clients divert take home doses	85.7% believe at least some take home methadone is diverted



# Methadone Use-First Dose

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  - From a licensed treatment program - 14.3%
  - Bought from drug dealer - 10.2%
  - Stolen-0
  - Prescribed for pain-0
  - Other-0
- 85.7% were obtained through illegal means (i.e. not prescribed)
- 75.5% were given to them



# Summary

- 79% of all survey participants reported taking illegal methadone.
- 75.5% of first doses of methadone were given to participants, mostly by friends or family.
- 66% of all survey participants reported taking liquid methadone not prescribed to them.
- The drug using community believes that most methadone clients are diverting at least some take home methadone away from prescribed use.
- Self-reported diversion of take home methadone is very high, both in terms of number of clients participating and amount diverted.

**Liquid methadone is widely available in the drug using community and is freely distributed among users.**



# Getting at the Problem

- Primary Prevention
- Secondary Prevention
- Tertiary Prevention

# Primary Prevention

- Summer Recreation
- After School Programs
- Posters
- Community Education
- Community Collaborative Council
- Suicide Prevention
- Hope Project



**Not all WOUNDS  
are VISIBLE.**



***Be willing to listen.***  
**Comrades can PREVENT SUICIDE.**  
**Speak up, reach out . . .**  
**you're not alone.**



The National Suicide Prevention Lifeline  
1-800-273-TALK (8255)

Brought to you by the Fond du Lac Human Services Division and IHS.



# Primary Prevention

- Honoring Sobriety Feasts Monthly
- Digital Story Telling Contest
- Father and Sons Gatherings
- Women's Gatherings
- Drug Take Back
- Tip Line
- In School Education Program





# Primary Prevention

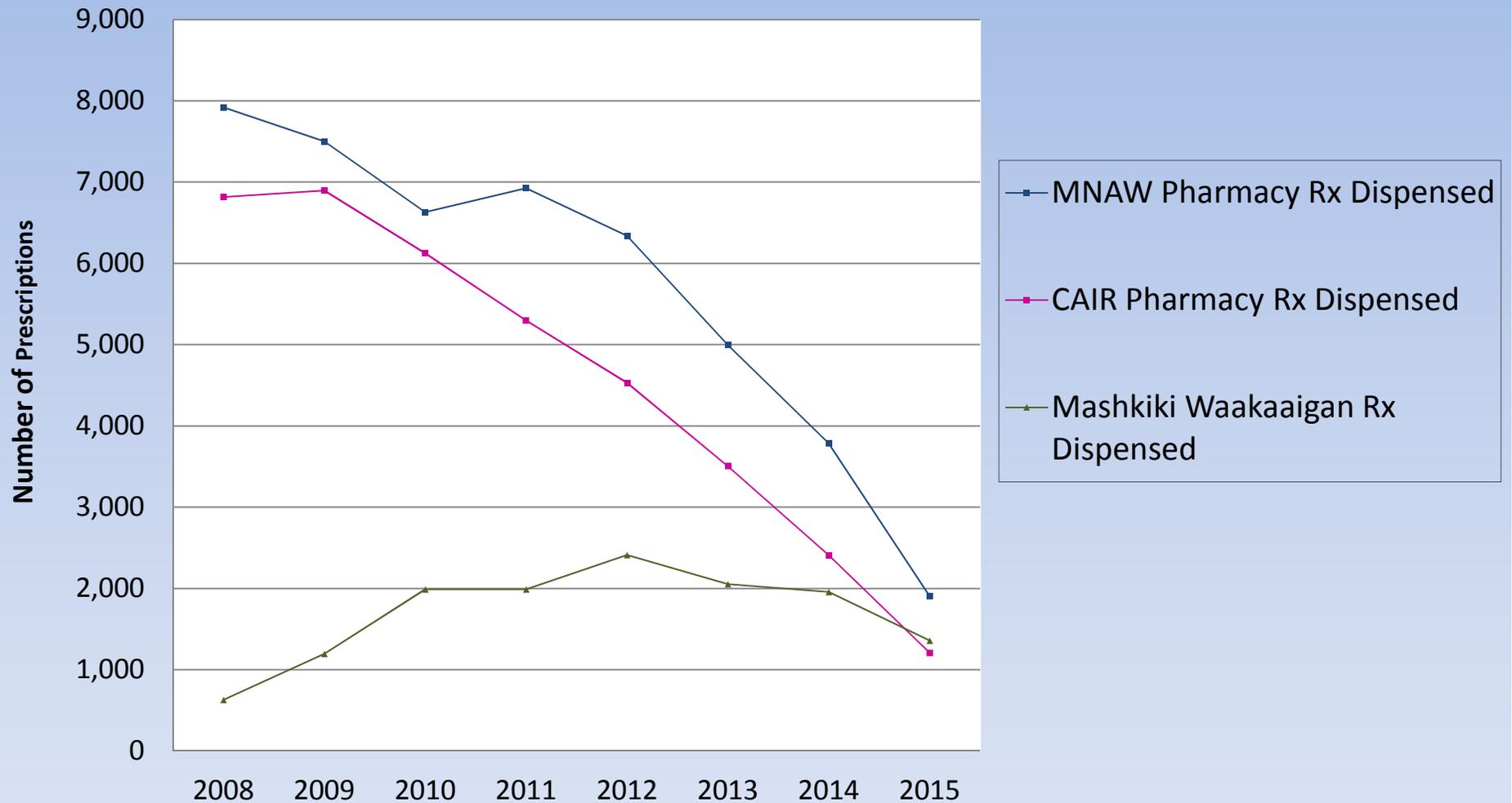
- Child Protection Activities
- Zero Tolerance Policy
- Banishment/ Exclusion Ordinance
- Interdivisional Cooperation
- Law Enforcement Engagement
- Community Wide Meetings



# Secondary Prevention

- Primary Care Provider Education/Cooperation
- Clear Drug Abuse Prevention Policies
- Alternative Treatments
- Drug Contracts
- Urine Drug Testing
- Referral to Behavioral Health and/or Tx
- Ongoing Dialogue Regarding C2s in PTC
- Interdepartmental Cooperation

# Controlled Substances Dispensed





# Secondary Prevention (continued)

- Pharmacy uses Prescription Drug Monitoring Program (PDMP)
- Drug Testing for Employment and RTW
- Methadone Diversion Prevention
  1. Referral Policies
  2. Resisting Inappropriate Practice
  3. Engage Politically – Six resolutions
  4. Develop Alternatives



# Tertiary Prevention

- Adult Treatment
- Adolescent Treatment
- Increased Behavioral Health attention
- Network with other providers
- Community Based Research
- Innovative Initiatives

# FOND DU LAC TAGWII RECOVERY CENTER



3/9/2016



## Adult Treatment – Tagwii Recovery Center Adolescent Treatment – Mino wii jii win

### Program Goals:

- To elevate the well-being of individuals afflicted with addiction
- To provide long term culturally specific community-based treatment
- To heal the whole person, family and community
- To build a strong alumni base for generational sobriety and healthy living

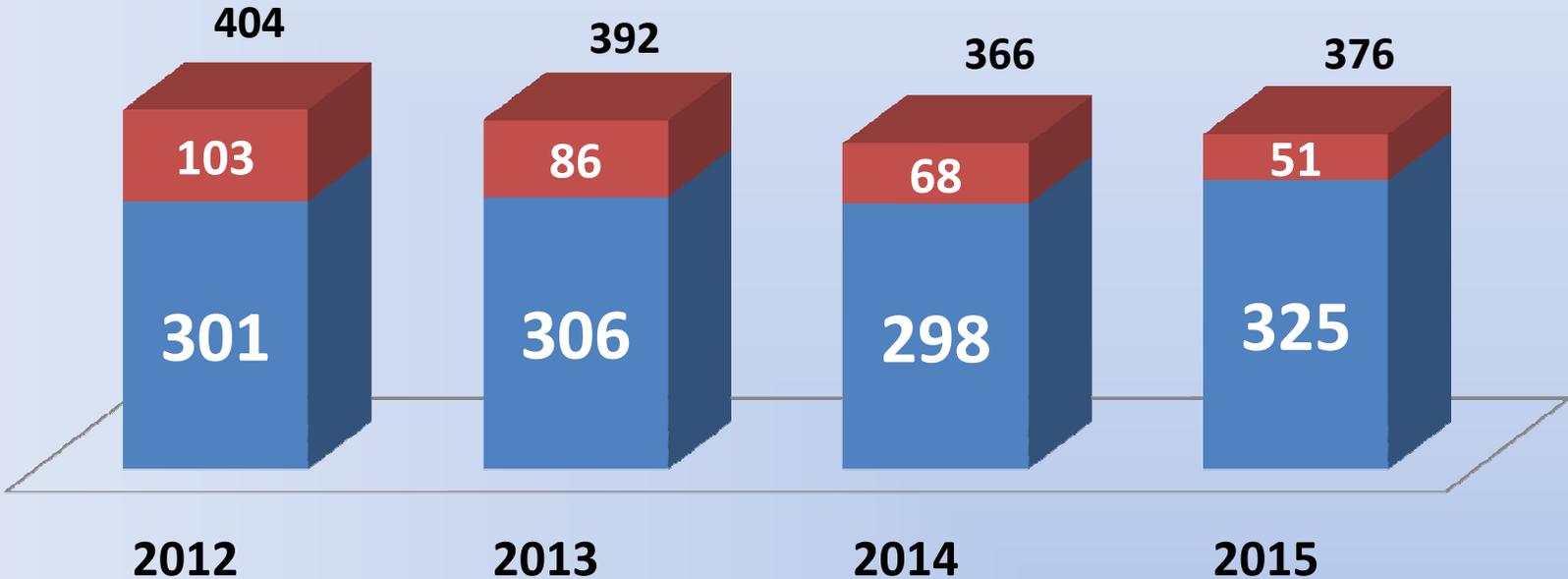


# Admission / Assessment Process

- Referral made for Assessment by
  - Mental Health, Social Services, Medical, Probation, family, or self
- Rule 25 Assessment
- Referral made to FDL program if stable.
  - 30 day program assessment period
- Referral made to Inpatient facility for stabilization before entering optx

# Rule 25 Assessments

■ Adult ■ Adolescent



	2012	2013	2014	2015
<b># Assessors</b>	6	4	3	4
<b>Wait Time</b>	< 2 Weeks	1-2 Weeks	1-2 Weeks	3-5 Days

# Program Design

- Length of treatment is based on a client's need and personal goals
- Adolescent Program 6 to 9 months
- Adult Program 6 to 12 months. Most clients are 12 to 18 months
- Treatment hours are designed to work around a client's school/work/family schedule to ensure success
- Transportation/Child Care Provided
- Matrix Model, 12-Steps, Red Road to Wellbriety ,True Thought, Live It
- Early Recovery/Relapse Prevention Groups, Change Group, Life /Social Skills, and Wellness Group
- Mental and Medical Assessments
- Frequent Drug Testing
- Family Involvement
- Case Management- Housing, Employment



# Culture

- Smudge
- Talking Circles
- Traditional Teaching and Values
- Drum & Singing
- Gathering of Traditional Medicines
- Sweat Lodge
- Traditional Healers
- Treatment and Community Activities





# Tagwii @ A Glance

- **Who Are Our Clients:**

- Average age – 25.5 (Males 26 / Females 25)
  - Less than 7% are self-referred 68% have a history of IV use
  - 70% have MI/CD
  - 30% are homeless
  - Most likely to be a street heroin or Rx user
  - Less than 20% are employed

- **2015 Client Outcomes:**

- 94 unduplicated (34 carried over from 2014; 60 New Clients)
  - 49 clients entered treatment one or more times in 2015
- 21 graduated
- 26 in treatment on 12/31/2015
- 77 people discharged @ ASA/ASR
  - Left, conduct, transferred to inptx, incarcerated
  - 02 people discharged Medical

# Treatment Networking

## Specialty Courts – St. Louis County

- Addiction Specialists  
Represented on all 3 courts
- Culturally sensitive
- Immediate team responses to recovery efforts
- Intensive monitoring outside of treatment
- Weekly hearings

## Probation – Carlton County

- Informal collaboration
- Increased flexibility in response to relapse
- Frequent drug testing  
responsibility of the treatment provider
- Informal bi-weekly probation meetings
- Access to County Prisoners



# Mino Wii Jii Win





# Adolescent Treatment

- Adolescents have high degrees of anxiety, depression, ptsd, adhd,
- Tx for addiction must be accompanied by mental health treatment
- In-patient tx not effective. Adolescents need out patient tx and aftercare with mental health therapy.
- Frequent relapses should be expected and finding appropriate consequences requires insight and vigilance. Family needs to be involved. Addicted families reduce the likelihood of success, but doesn't eliminate it.
- Hope for the future – resiliency – plays a strong role in recovery.
- If they are on their own, they are less likely to make it. Need to build a social network even if it isn't their family...trust, hope, empathy, compassion, right relationship, respect, love.
- Kids need structure. Need to find purpose, identity. Need help and encouragement to do that.



# Other Approaches

- Tagwii Plus, women's initiative
- Tagwii, Vivitrol
  - Newly implemented, early outcomes are promising, continued observations important
- Buprenorphine/Suboxone
  - Planning stages nearly complete, coordinated with medical providers, high scrutiny required.



# Other Approaches

- Treatment Related Housing Opportunities
  - Up to 30 units (single residential & family) to be planned
  - Fond du Lac Reservation Business Committee approved funds to be set aside March 2016
  - Next step is to determine location



**Thank You!**