

zoon'gidewin: Having a Strong Heart

Tribal Responses to Drug Overdose

Case Study: White Earth Nation

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Overview

- Background
- Trends
- Response
- OFR Findings
- Current Efforts

Partnerships

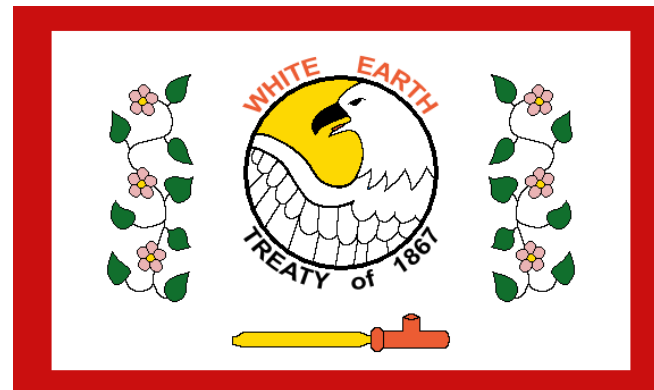




Background

White Earth Band of Chippewa

- 1867 Treaty with the Chippewa of the Mississippi
- Signed March 19, 1867 in Washington, D. C.



Complex Jurisdictional Systems

- Jurisdiction
 - Tribal Government Ordinances and Resolutions
 - Criminal/Civil – Public Law 83-280 (PL-280)
- State-Tribal Relationships
 - Minnesota Governor Executive Order (EO 13-10) – Gov't to Gov't Consultation, Coordination, and Cooperation
- Reservation/Urban Constituency
- Self-Governance / Determination & Federal Trust Responsibility
- Coordination and Delivery of Services

Health Care Delivery System

Tribal (Title I – 638 Contract)

- **Health Division**
 - Home Health Agency
 - Public Health Services
 - Ambulance Services
- **Behavioral Health Division**
 - MOUD - MAT/MOMS
 - SUD Outpatient Treatment
 - Residential Treatment
 - Mental Health

Federal

- **Indian Health Services**
 - Medical/Clinics
 - Pharmacy
 - Dental



Trends

Headlines

Fight of their lives: White Earth leads way in opioid battle

By [Nathan Bowe](#) on Jan 3, 2018 at 3:00 p.m.



After suffering great loss of life and livelihood on the White Earth Reservation, leaders there are now forging the way to tackling the opioid epidemic with model pilot programs for the state.

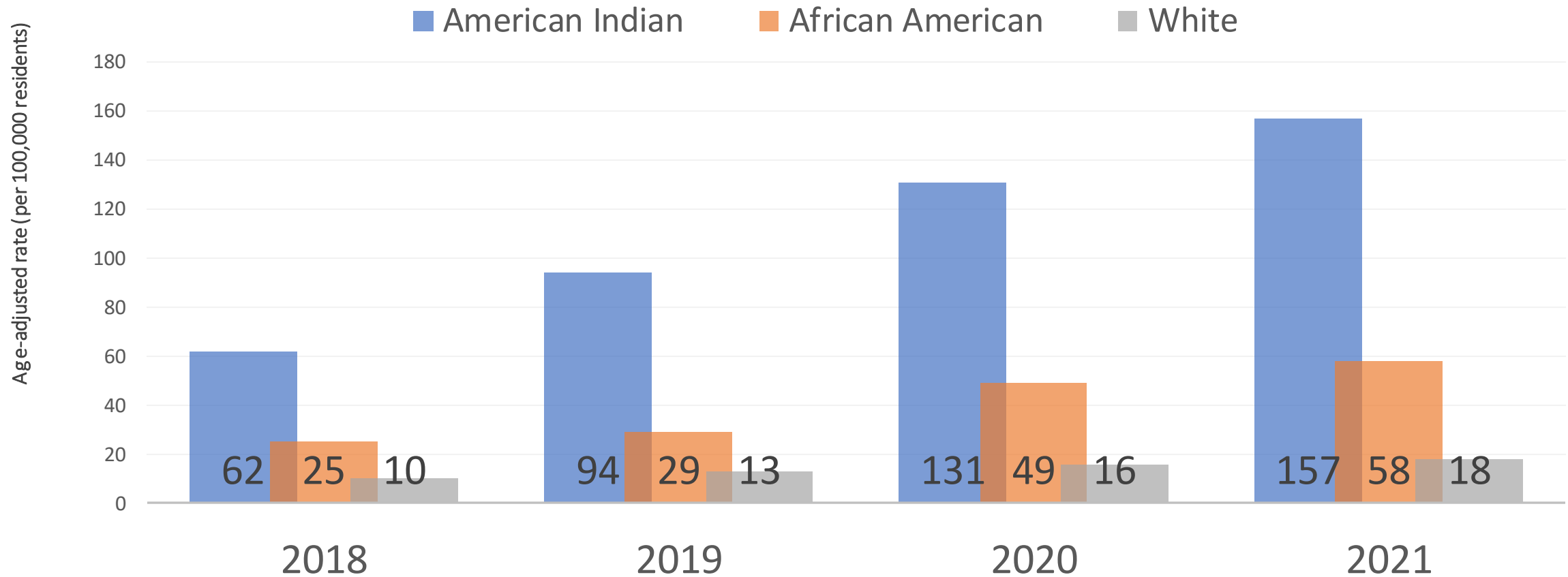
White Earth State of the Nation: Tribe is determined to win opioid battle

By [Nathan Bowe](#) on Apr 8, 2018 at 8:47 p.m.



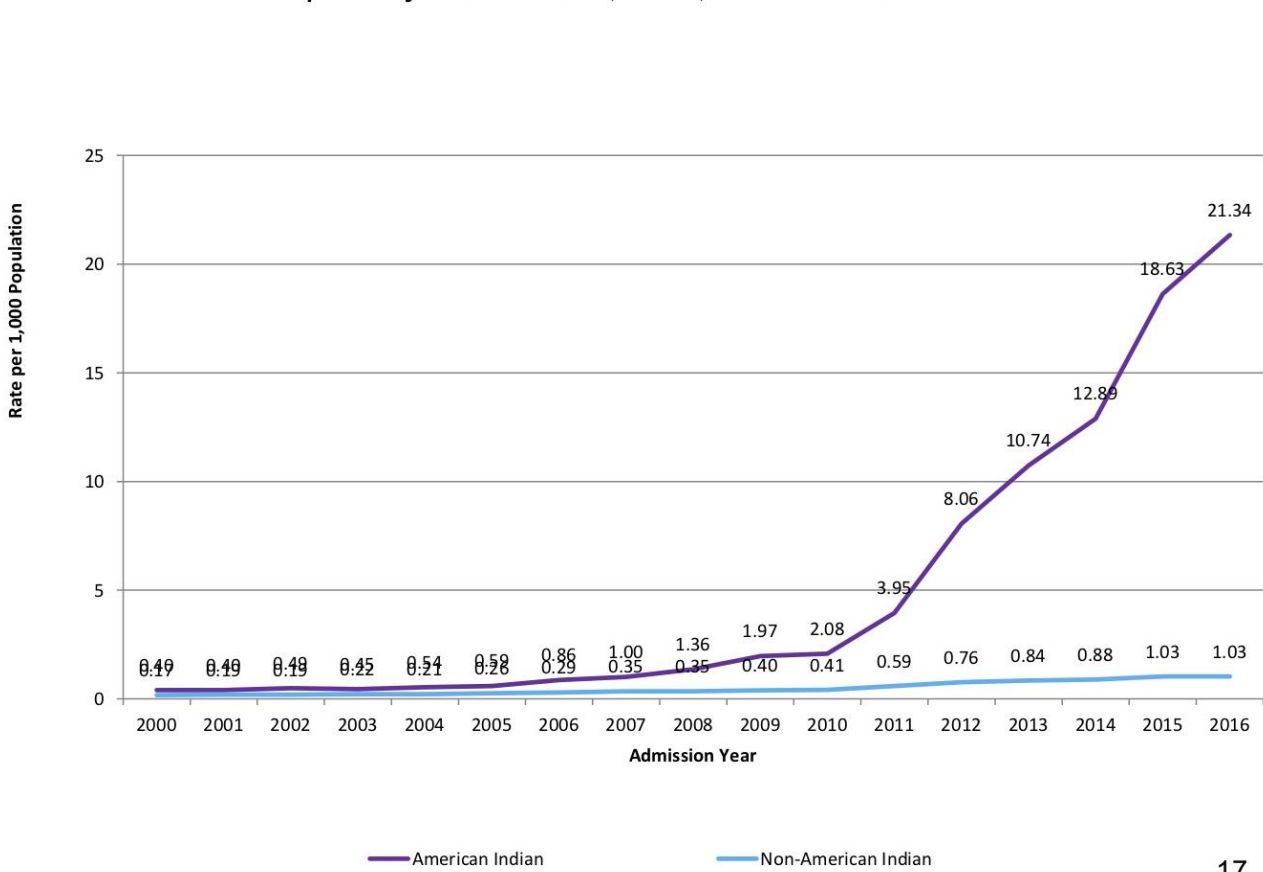
The White Earth Tribal Council dances its way to the front stage prior to the start of the State of the Band speech by Tribal Chairman Terry Tibbetts, left. He is followed by Secretary-Treasurer Tara Mason and council members Kathy Lynn Goodwin, Punky Clark and Umsy Tibbetts (the last two are partially hidden). Becker County Sheriff Todd Glander (center) was one of three area sheriffs that attended the event. Nathan Bowe / Tribune

In Minnesota in 2021, American Indians were almost **nine times** as likely to die from a drug overdose than whites, and African Americans are more than three times as likely to die from a drug overdose than whites.



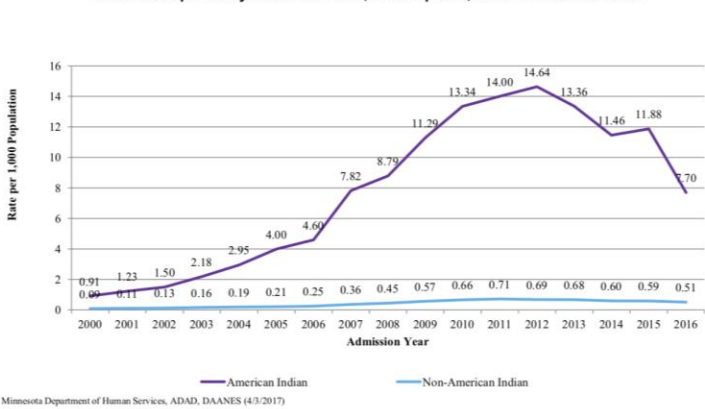
Historical Context

Chemical Dependency Treatment Rates, Heroin, for Minnesota Residents



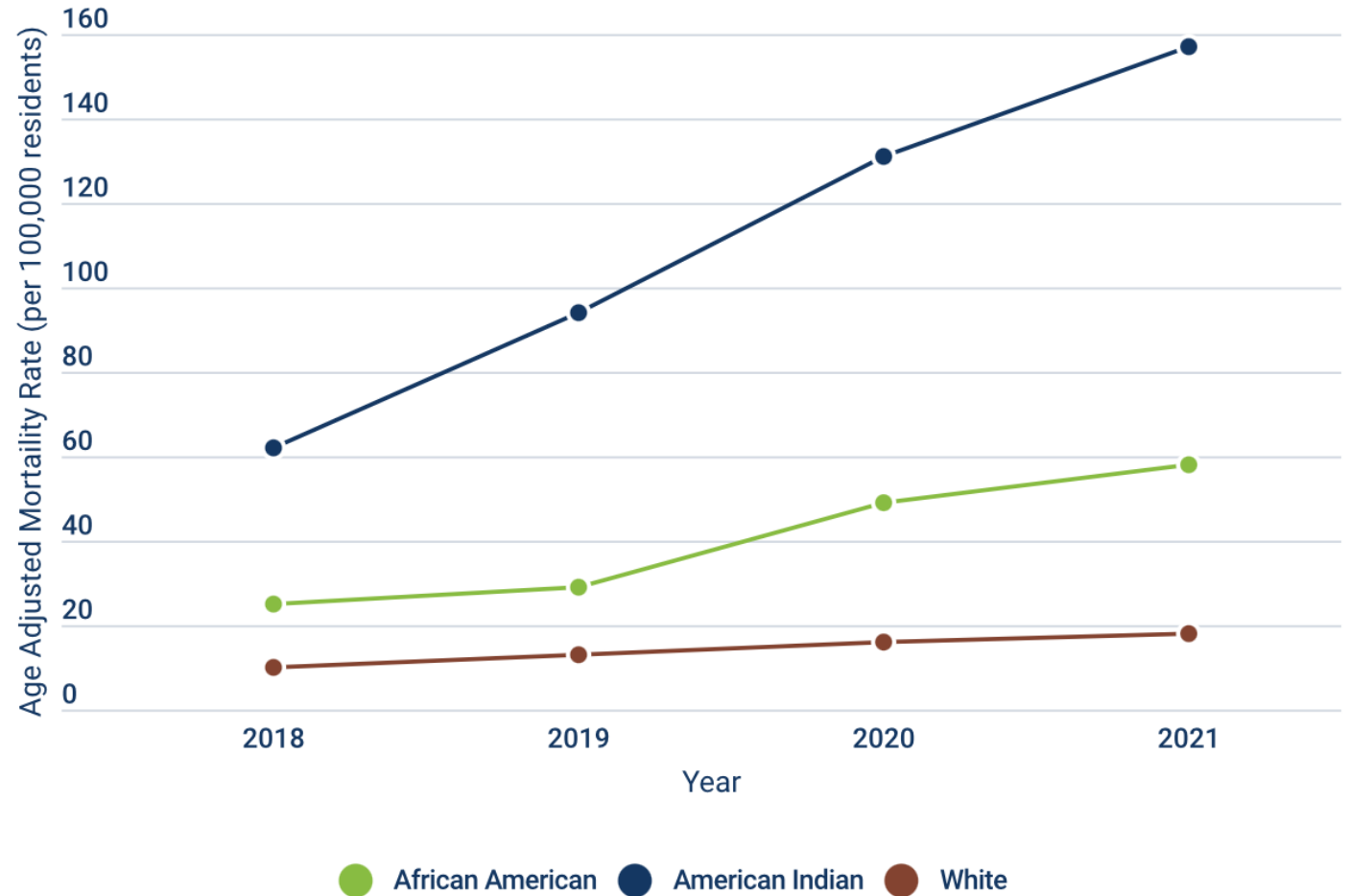
Minnesota Department of Human Services, ADAD, DAANES (4/3/2017)

Chemical Dependency Treatment Rates, Other Opiates, for Minnesota Residents



Minnesota Department of Human Services, ADAD, DAANES (4/3/2017)

Persistent Race-Rate Disparities



Tribal & Community- Driven Initiatives

Gaa'wiin Gaayabi – No More

DOPE Talks

Harm Reduction Coalition

Public Health Emergency

Drug Task Force

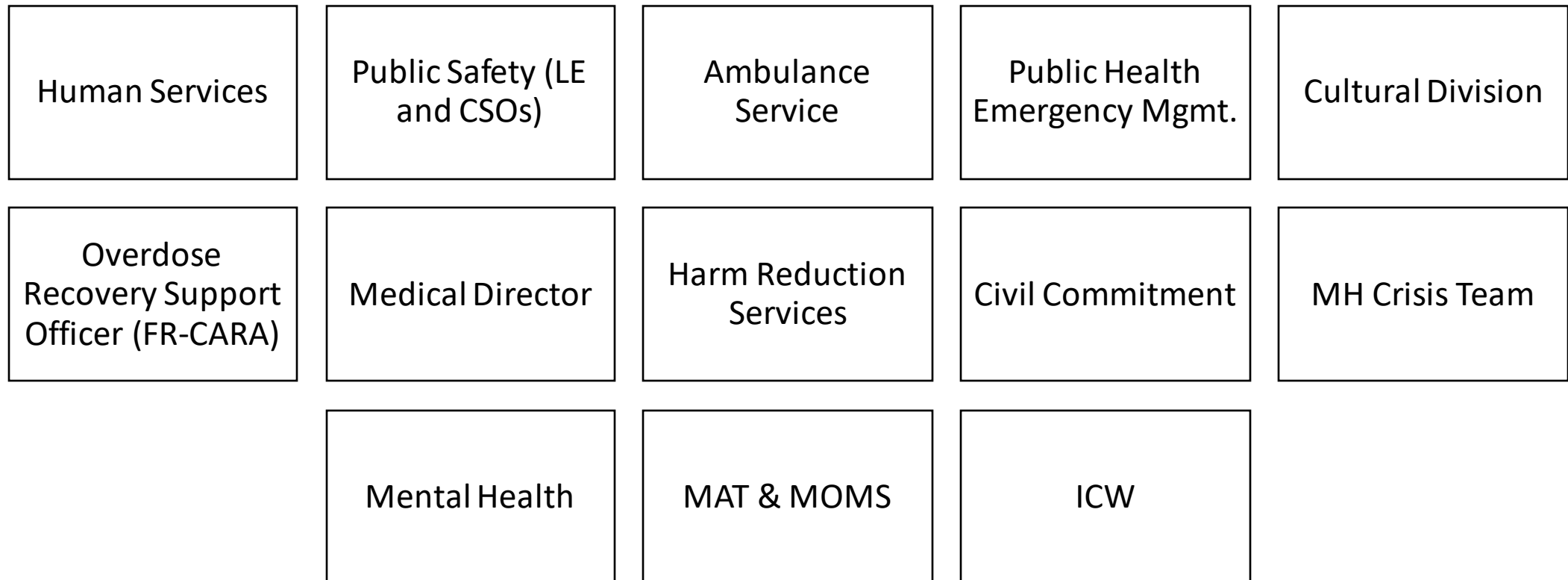
Paradigm Shift – Public Safety

Law Enforcement
and Pregnant
Women → MOMS
Program

Public Health
Strategies →
Naloxone & Pre-
Arrest Diversion

Data-Driven
Responses →
Fatality Review
Team

Overdose Response Committee – Drug Task Force



Overdose Response Committee (ORC) Focus

Support and expand a system-wide initiative to mitigate and prevent mortality and morbidity associated with the opioid epidemic.

Reduce and prevent overdose fatalities by using data-driven strategies to improve communication related to drug trends between emergency health care providers, law enforcement, public health services, and substance misuse treatment providers.

WEN Strategy

WEN ORC identified 2 priority comprehensive prevention and intervention strategies within the Opioid TAP:

1. Overdose Fatality Review (OFR)
2. Pre-Arrest Diversion (PAD)

Pre-Arrest Diversion

“Naloxone Plus” – Engagement w/Tx and recovery support as part of OD response, integration with Tx, and support to family (naloxone)

Active Outreach - OD Recovery Support Officer to support pathway in recovery for up to 45 days

Self-Referral – Surrender and amnesty

Officer Referral – LE engaged in supporting pathway to recovery

The image features a dark blue background. A lighter blue circle is positioned on the right side, partially overlapping a vertical line that runs from the top to the bottom of the frame. The text 'OFR' is centered within the circle.

OFR

BACKGROUND

- American Indians in Minnesota have 9x the opioid overdose death rates of other groups; one of the largest such disparity in the United States.
- Disparate rates of overdose fatalities and other health inequities facing American Indians are driven by historical and contemporary factors (e.g. racism, trauma, underfunded health programs).
- OFR is a method of convening a multi-disciplinary group of stakeholders to identify contributors to overdose deaths and opportunities for prevention of future deaths, including health care system changes.
- However, OFR has only been implemented at the state and county level – not at the tribal level.

“is linked with indigenous peoples’ right to maintain, control, protect and develop their cultural heritage, traditional knowledge and traditional cultural expressions, as well as their right to maintain, control, protect and develop their intellectual property over these.”

United Nations Declaration on the Rights of Indigenous Peoples, 2008

Data Sovereignty

Project Goals

- Identify factors that contribute to American Indian opioid overdose deaths
- Provide recommendations of ways to address these factors
- **Ultimate Goal:** Reduce opioid overdose deaths and health inequities

Method

- OFR method adapted from Rebbert-Franklin et al. (2016).
- Representatives from tribal organizations such as mental health, substance use, law enforcement, and ambulance services
- Data included death certificates, corrections records, and records from participating tribal organizations
- OFR team members filled out case report prior to each meeting
- Number of participants ranged from 8 to 14

Key Innovations & Adaptations

- Tribal resolution to support data sharing
- Added social media review
- Focused on strengths of each individual
- Reviewed fewer cases at each meeting
- Cultural coordinator joined each meeting

Focus Groups

| | OFR team focus groups | Community focus groups |
|-------------|---|---|
| Timing | Pre and post overdose fatality review meetings | Pre and post overdose fatality review meetings |
| Eligibility | Participating in OFR | Community leadership positions or active in addressing opioid crisis |
| Sample size | N=6 pre-OFR, n=8 post-OFR | 5 pre-OFR, 4 post-OFR |
| Topics | Perceptions of OFR Cultural Fit Protective/risk factors for overdose | Perceptions of OFR Cultural Fit Protective/risk factors for overdose |

Main Findings: Focus Groups

Protective Factors

- Cultural Resiliency
- Naloxone Availability
- Innovative Solutions
- Social Connectedness

Risk Factors

- Implications of Historical Loss
- Historical and Contemporary Trauma
- Shame and Stigma
- Effects on Children (intergenerational)
- Jurisdictional Issues and Rurality

Discussion

- Opioid OFR provides a novel look across health care, recovery/addiction services, public safety, and other related systems to identify ways to improve these systems to prevent future overdose deaths.
- OFR may be a useful strategy to implement within other tribal communities and settings. It provides a contextual examination that can align with Indigenous cultural beliefs about death.
- Future research should also examine OFR's potential to contribute to community healing and inform community interventions that address the cycles of trauma.

Implications

- Barriers & facilitators to evidence-based treatment/services
 - Rural – isolation, stigma
 - Limited providers
- Practical Strategies
 - Improving access to evidence-based medications
 - MAT & Naloxone/Narcan[®]
 - Improving access to psychosocial services
- Building trust, compassion, non-coercive, non-judgmental
- **Key** = Partnerships with local harm reduction/syringe exchange programs
- **Reminder** – many meaningful pathways to recovery

Current Efforts in Response to OFR Pilot

- **Hesitation/Fear of Calling 911**
 - Expanding Overdose Education/Naloxone Distribution
 - Spike Alert/Bad Batch Alerts/Public Health Advisory (**ODMAP State**)
- **SUD Coordination**
 - Assessments and Early Intervention Services/Support (**TRDO**)
 - Medications First Model
 - COVID = Community Service Officer (CSO)/Wellness Navigators
- **Medical/Mental Health**
 - Care & Treatment Coordination
 - Integrated Care
- Connection to spirituality/traditional practices = Strengthen cultural identity
- OFR and Healing (**MDH**)



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“With Courage, White Earth is determined to
win this battle.”