TRIBAL RESPONSE TO THE OPIOID EPIDEMIC IN CALIFORNIA

[SEPTEMBER 2020]
The opioid crisis is a nationwide problem of addiction to opioids, prescription pain relievers, heroin, and man-made opioids such as fentanyl. The addictiveness of these drugs continues to be misunderstood, leading to the misuse of these drugs and hundreds of thousands of overdose deaths. The opioid crisis has also negatively affected millions of individuals, their families, and their communities. In the United States, from 1999 to 2009, deaths involving opioids were more common among American Indian and Alaska Native (AIAN) communities than any other racial or ethnic minority group.

To address the opioid crisis, the 21st Century CURES Act was passed in December 2016, creating a program called the State Targeted Response (STR) to the Opioid Crisis. Through this program, almost $1 billion became available to American states and territories through grants aimed at funding interventions addressing the opioid crisis. The states and territories that received these funds were able to use the money to make it easier for people to access treatment for opioid use disorder (OUD). The most commonly referenced treatment approach is called medication-assisted treatment (MAT). MAT is a combination of therapy and medications that both help individuals recover from OUD and prevent overdosing. Other important goals of the STR program include encouraging prevention efforts, providing treatment, and strengthening recovery support services.

California’s health agency, the Department of Health Care Services (DHCS), received funds from the STR program and partnered with organizations across the state to focus on the opioid crisis in Tribal and Urban Indian communities. This partnership led to the creation of the Tribal MAT Project. The five main Tribal MAT partner programs and the efforts that they have made are detailed in this report. The data in this report is reflective of efforts through June 2020.

The California Consortium for Urban Indian Health (CCUIH) is a nonprofit statewide partnership of Urban Indian health organizations and substance abuse treatment facilities that support health promotion and access amongst urban American Indians in California. Under the Tribal MAT Project, CCUIH focused on five important activities: naloxone training, educational materials development and distribution, coalition building, outreach, and support of partner organizations.

The California Rural Indian Health Board (CRIHB) is a network of Tribal Health Programs, which are controlled and sanctioned by American Indian people, and their Tribal Governments. CRIHB is committed to elevating and promoting the health status and social conditions of the American Indian People in California. Under the Tribal MAT Project, CRIHB focused on five major activities: naloxone training, educational materials distribution, coalition building, outreach, and support of partner organizations.

TeleWell Behavioral Medicine, a program under Sprenger Behavioral Medicine Inc., provides psychiatric and addiction medicine services using telehealth technology. TeleWell partnered with California Indian Health Programs and local American Indian and Alaska Native (AIAN) communities to integrate culturally sensitive healing and best practices into their services. Throughout the Tribal MAT Project, TeleWell focused on improving access to MAT by delivering teleMAT services, offering webinars and remote recovery platforms, and providing remote and onsite clinic support.

A team from UCLA’s Integrated Substance Abuse Programs (ISAP) implemented a Tribal MAT educational model called the Extension for Community Healthcare Outcomes (ECHO). The Project ECHO model uses an established remote education approach to support healthcare providers in Indian Country to deliver MAT. Additionally, the ECHO model is a distance-based learning method used across the country to link specialists at academic medical centers with local clinics via web-based training. The focus of the Tribal MAT Monthly ECHO Clinics was to provide MAT education and technical assistance to those providing healthcare in American Indian and Alaska Native (AIAN) communities experiencing opioid use disorder (OUD).

Two Feathers Native American Family Services (NAFS) provides culturally driven mental health and wellness programming to all Native American youth and families living in Humboldt County. Under the Tribal MAT Project, Two Feathers-NAFS created a three-Tribe consortium that implemented intensive mental health and wellness services to a small number of multi-stressed Native families. Services included outreach, prevention efforts, and a culturally adapted wraparound program called Making Relatives.
Naloxone Training
In order to decrease overdose deaths, CCUIH and CRIHB purchased NARCAN® (naloxone) Nasal Spray and distributed it to Urban Indian and Tribal stakeholders. Naloxone is a spray that has been shown to save lives by reversing an opioid overdose. CCUIH and CRIHB gave training sessions on opioid overdose recognition, response, and naloxone administration using culturally adapted materials. CRIHB also provided additional educational events on domestic violence, suicide, and harm reduction.

Educational Materials
CCUIH and CRIHB developed and disseminated culturally adapted materials specific for AIAN patients, providers, and other stakeholders intended to educate communities about OUD and MAT. Materials included brochures, booklets, trifolds, and posters with information about prevention, treatment, and recovery.

Webcam Provision
CRIHB supported other Tribal MAT program outreach efforts by distributing webcams to community partners who lacked the equipment necessary to fully participate in the Tribal ECHO clinics and TeleWell webinars.

MAT Funding Support
CCUIH and CRIHB developed MAT funding opportunities to support their partner organizations. This additional funding allowed partners to accomplish their goals of increasing access to MAT, reducing unmet treatment needs, reducing the incidence of opioid use disorder, and reducing opioid overdose related deaths.

Tribal MAT Champions
CCUIH and CRIHB developed a new community outreach position called MAT Champions. These individuals communicated and developed partnerships with Tribal, Urban, and community MAT organizations. They shared educational materials, hosted training sessions, and assisted local coalitions in developing resources.

Coalition Building
Both CCUIH and CRIHB collaborated to develop and lead the California Indian Opioid Safety Coalition (CIOSC). CIOSC is a professional statewide partnership of American Indian-serving organizations working together to address the opioid epidemic in California’s Indian communities. Throughout the Tribal MAT Project, CIOSC engaged its members by hosting collaborative meetings and webinars.

California Indian Opioid Safety Coalition (CIOSC) Meetings

<table>
<thead>
<tr>
<th>Meeting</th>
<th>Title</th>
<th># of attendees</th>
<th># of speakers</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st</td>
<td>“Kick off”</td>
<td>104</td>
<td>14</td>
</tr>
<tr>
<td>2nd</td>
<td>“Planning for Coalition Success”</td>
<td>31</td>
<td>6</td>
</tr>
<tr>
<td>3rd</td>
<td>“System of Care”</td>
<td>17</td>
<td>5</td>
</tr>
<tr>
<td>4th</td>
<td>“Planning for Action”</td>
<td>114</td>
<td>18</td>
</tr>
</tbody>
</table>

Total presenter count: 43
Total attendee count: 266
NALOXONE TRAINING

- 29 Trainings provided
- 401 Training attendees
- 1,087 Naloxone kits distributed

EDUCATIONAL MATERIALS

- 9,700 Educational brochures distributed
- 781 Educational brochures downloaded
- 1,400 Educational posters distributed
- 718 Educational posters downloaded

NALOXONE TRAINING

- 103 Trainings provided
- 1,351 Training attendees
- 12,024 Naloxone kits distributed

EDUCATIONAL MATERIALS

- 15,210 Educational brochures distributed
- 19,765 Educational posters distributed

Voices of Success from MAT Participants

"I've been sober since that day five years ago when I walked into my doctor’s office... dispelling myths about medication-assisted treatment for opioid use disorder... and finally asked for help."

"Suboxone has stopped my cravings and preoccupation with getting high."

"Even though some days are still hard, I know that I can make it through the tough times. I now have a good job, a house, and my family."

"Taking Suboxone [a medication used in MAT] helped me to stay sober long enough to concentrate on healing my trauma with a clear head."

"Medication-assisted treatment is a BIG part of my recovery."
Educational Webinars
TeleWell developed and provided an educational webinar series to aid community partners and healthcare providers who work with individuals experiencing OUD. Monthly webinars were held and made available on their website. Topics included information about OUD, potential treatments, cultural and traditional components of recovery, and how to adapt services during COVID-19 restrictions.

MAT Technical Assistance
TeleWell worked directly with Indian health clinics across the state to provide onsite and remote assistance for the development of their OUD programs. Services were provided to both new and existing MAT programs.

TeleMAT Care Provision
TeleWell provided telehealth recovery support services to American Indian patients who would otherwise be out of reach. Patients could receive care through video meetings with doctors specializing in MAT and addiction treatment.

Spirit of Healing Recovery Meetings
The TeleWell team hosted web-based recovery support meetings called “Spirit of Healing” which used cultural approaches to wellness and recovery.

Educational Webinars
- Total webinar attendee count: 183
- Total webinar views: 256
MAT Technical Assistance (T.A.)
- Clinics receiving T.A.: 18
- MAT programs started with TeleWell T.A.: 14
- Non-clinical Tribal entities receiving T.A.: 4
The Tribal MAT ECHO team at UCLA ISAP developed and hosted online sessions (called ‘clinics’) that connected doctors and other healthcare workers throughout California. The monthly Tribal MAT ECHO Clinics were one-hour sessions that included a didactic (designed to teach) presentation about MAT and case-based learning to address clinical questions from healthcare providers working with community members experiencing OUD. The team conducted clinics on various topics relevant to OUD treatment in AIAN communities.

Clinic Attendee Breakdown

- 25% Medical
- 48% Administrative
- 15% Behavioral
- 12% Other

Webcams distributed
Provided to:
- Indian Health Programs
- Community providers

Tribal MAT ECHO Clinics
Topics included:
- Traditional healing
- Historical trauma
- Practitioner & patient interactions
- Pain management & risk reduction
- Stigma
- Overdose prevention
- Case studies

Clinic attendees
Representing:
- Urban Indian organizations
- Tribal organizations
- Treatment/recovery centers
- Consultant groups
- Federally Qualified Health Centers (FQHCs)
Tribal Youth and Family Services Consortium

Two Feathers developed a community-based youth and family services consortium with Tribal partners. This consortium focused on creating a culturally informed system of care that provided OUD prevention and treatment services, suicide prevention, and intensive case management services for AIAN youth and their families. These wraparound services were built on individual and family strengths to help improve overall well-being.

Culturally Appropriate Outreach and Prevention Efforts

Two Feathers developed and implemented culturally-based programs alongside local Native leaders, non-profit organizations, and agencies. These programs were focused on youth and families and promoted youth resiliency, socio-emotional skills, mental well-being, and community building. To encourage community engagement, Two Feathers hosted the 2019 Critical Issues in Native American School Based Mental Health Conference in collaboration with the Indian Health Service, Humboldt County Department of Health and Human Services, and local school districts.

TWO FEATHERS MAT SUBSTANCE ABUSE SERVICES

<table>
<thead>
<tr>
<th>Description</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referrals from Klamath Trinity Joint Unified School District</td>
<td>75</td>
</tr>
<tr>
<td>Youth with co-occurring disorders received individual therapy</td>
<td>55</td>
</tr>
<tr>
<td>Youth with SUD received assessment &amp; counseling</td>
<td>26</td>
</tr>
<tr>
<td>Youth participated in wraparound services</td>
<td>23</td>
</tr>
<tr>
<td>Youth assessed and referred to inpatient treatment</td>
<td>3</td>
</tr>
</tbody>
</table>

Percent of youth and families successfully engaged in services: 96%
This community report highlights the five Tribal MAT funded agencies and their focus to increase community strengths, increase partnerships between stakeholders, and build trust and respect between the community and providers.

With limited data for Tribal and Urban Indian populations, this information is vital to understand what is working as each of the Tribal MAT Project partners had specific program activities and outreach to AIAN communities. The USC team evaluated these primary components of the Tribal MAT projects: 1: Development and distribution of culturally adapted OUD materials, 2: MAT Champion outreach, 3: Coalition building and partner engagement, 4: Naloxone training and distribution, 5: Provision of educational and ECHO clinic webinars, 6: Provision of technical assistance to clinics attempting to establish or enhance MAT programs, 7: Delivery of MAT services through telemedicine, 8: Wraparound services, 9: Intensive case management, and 10: Cultural programming. Access to culturally specific materials, coalitions, trainings, webinars, funding opportunities, and MAT technical assistance are now available, with the efforts of the five Tribal MAT Project partners, to help reduce OUD in Tribal and Urban Indian populations in California.

The following recommendations are based on the evaluation outcomes of the five Tribal MAT programs:

**In April 2020, DHCS announced continued funding for the Tribal MAT Project. This additional support will continue funding for and engagement of partners within AIAN communities. These efforts are crucial if we are to effectively address the opioid crisis across California.**

**Innovative outreach efforts are still necessary to address issues of stigma and trust among patients receiving treatment for OUD. Funding is needed for community based navigators to serve as a trusted resource for information on available MAT and OUD services.**

**Program efforts should include training that prepares stakeholders to apply for funding to support MAT and OUD programs while retaining healthcare workers in their communities.**

**Future funding should consider incorporating increased access to technology for stakeholders addressing OUD and providing MAT services. For example, as telehealth is becoming more prevalent, funding broadband access should be a top priority for the DHCS.**

**Continued advocacy for the AIAN communities of California must be included in future funding opportunities. Training programs on advocacy and the legislative process should be available for community members to empower them to develop future policies.**

**Funding is needed for community based navigators to serve as resources for information on MAT, OUD, and wraparound services. Continued funding will aid in the incorporation of traditional healing and recovery approaches using community accepted best practices for OUD and MAT program development.**

**For more information about the five Tribal MAT programs and their available resources, please visit their websites listed below, or reach out to the listed Tribal MAT primary contact.**

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**Tribal MAT Project**  
http://www.californiamat.org/mat-project/tribal-mat-program/

**California Consortium for Urban Indian Health (CCUIH)**  
https://ccuih.org/medicationassisted-treatment-project/  
Tribal MAT Primary Contact:  
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**California Rural Indian Health Board (CRIHB)**  
https://crihb.org/  
Tribal MAT Primary Contact:  
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**TeleWell**  
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**UCLA ISAP Tribal MAT ECHO**  
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**Two Feathers Native American Family Services**  
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