

DEPARTMENT OF JUSTICE

ElderJustice INITIATIVE



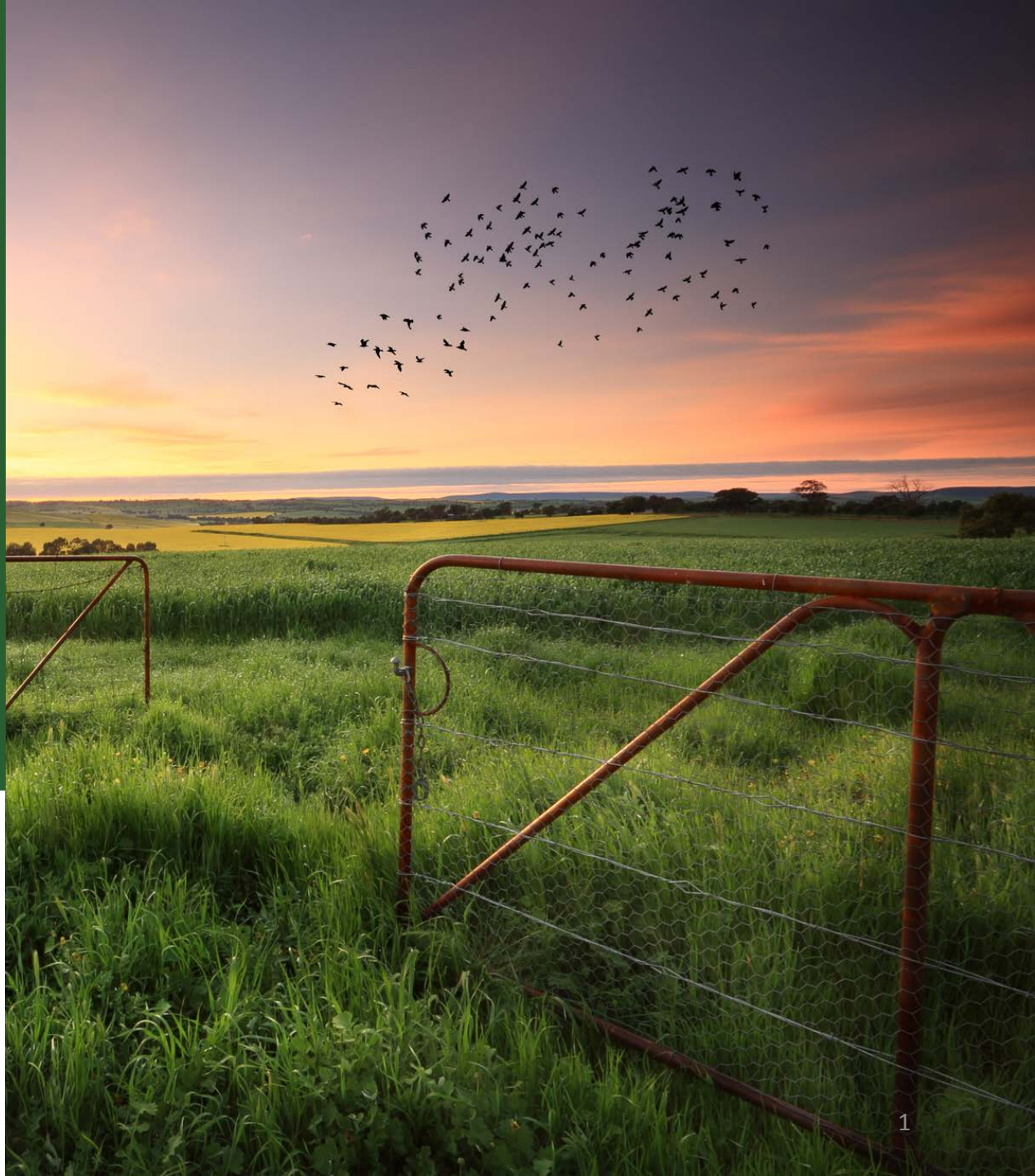
Rural and Tribal Elder Justice
Webinar Series

Utilizing Federal and Community Resources To Overcome the Opioid Epidemic in Tribal Communities

DECEMBER 14, 2018



OVCTTAC
OFFICE FOR VICTIMS OF CRIME Training and Technical Assistance Center



ELDER JUSTICE INITIATIVE

The **mission** is to support and coordinate the Department of Justice's enforcement and programmatic efforts to combat elder abuse, neglect, and financial fraud and scams that target older adults.

The Initiative does so by—

- Promoting justice for older adults.
- Helping older victims and their families.
- Enhancing state and local efforts through training and resources.
- Supporting research to improve elder abuse policy and practice.

ELDERJUSTICE.GOV

You're fighting elder abuse on the front lines. We've got your back.

The mission of the Elder Justice Initiative is to support and coordinate the Department's enforcement and programmatic efforts to combat elder abuse, neglect, and financial fraud and scams that target our Nation's seniors.



Outreach Materials

Get involved, get safe community presentations, pamphlets, and materials on all types of elder abuse.



Prosecutor Video Series

Training videos geared toward successful prosecution of elder abuse cases.



Elder Abuse Research

References to articles, books, and government reports on all types of elder abuse and financial exploitation topics.



Elder Abuse Statutes

State statutes relevant to elder abuse cases.



MDT Guide & Toolkit

Start or grow a local elder abuse case review multidisciplinary team with this research- and resource-rich toolkit.



Financial Exploitation & Reporting

Learn about financial scams and find the right reporting agency.



Webinars

Webinars targeted to elder abuse professionals and those interested in elder abuse topics



PRESENTER



Karen (Kari) Hearod, LCSW
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Utilizing Federal and Community Resources To Overcome the Opioid Epidemic in Tribal Communities

CDR Kari Hearod



SAMHSA
Substance Abuse and Mental Health
Services Administration

Overview of Presentation and Discussion

- Statistics and contributing factors
- HHS Opioids Strategy
- SAMHSA's approach to tribal opioid and other substance use challenges
- SAMHSA funding streams
- Other SAMHSA resources
- About Tribal Action Plans (TAPs)
- Individual responsibility and action

The Opioid Epidemic by the Numbers

IN 2016...



116

People died every day
from opioid-related
drug overdoses



11.5 m

People misused
prescription opioids¹



42,249

People died from
overdosing on opioids²



2.1 million

People had an opioid use
disorder¹



948,000

People used heroin¹



170,000

People used heroin for
the first time¹



2.1 million

People misused prescription
opioids for the first time¹



17,087

Deaths attributed to
overdosing on commonly
prescribed opioids²



19,413

Deaths attributed to
overdosing on synthetic
opioids other than
methadone²



15,469

Deaths attributed to
overdosing on heroin²



504 billion

In economic costs³

Sources: ¹ 2016 National Survey on Drug Use and Health, ² Mortality in the United States, 2016 NCHS Data Brief No. 293, December 2017, ³ CEA Report: The underestimated cost of the opioid crisis, 2017

The Opioid Epidemic and Elders

- Opioid overdoses kill more than 42,000 people each year (CDC)
- 14.4 million Medicare beneficiaries (of 43.6 million enrolled in Medicare Part D) received opioids in 2016 (OIG)
- 2.7 million Americans age 50 and older misused Rx pain meds in 2015 (SAMSHA)

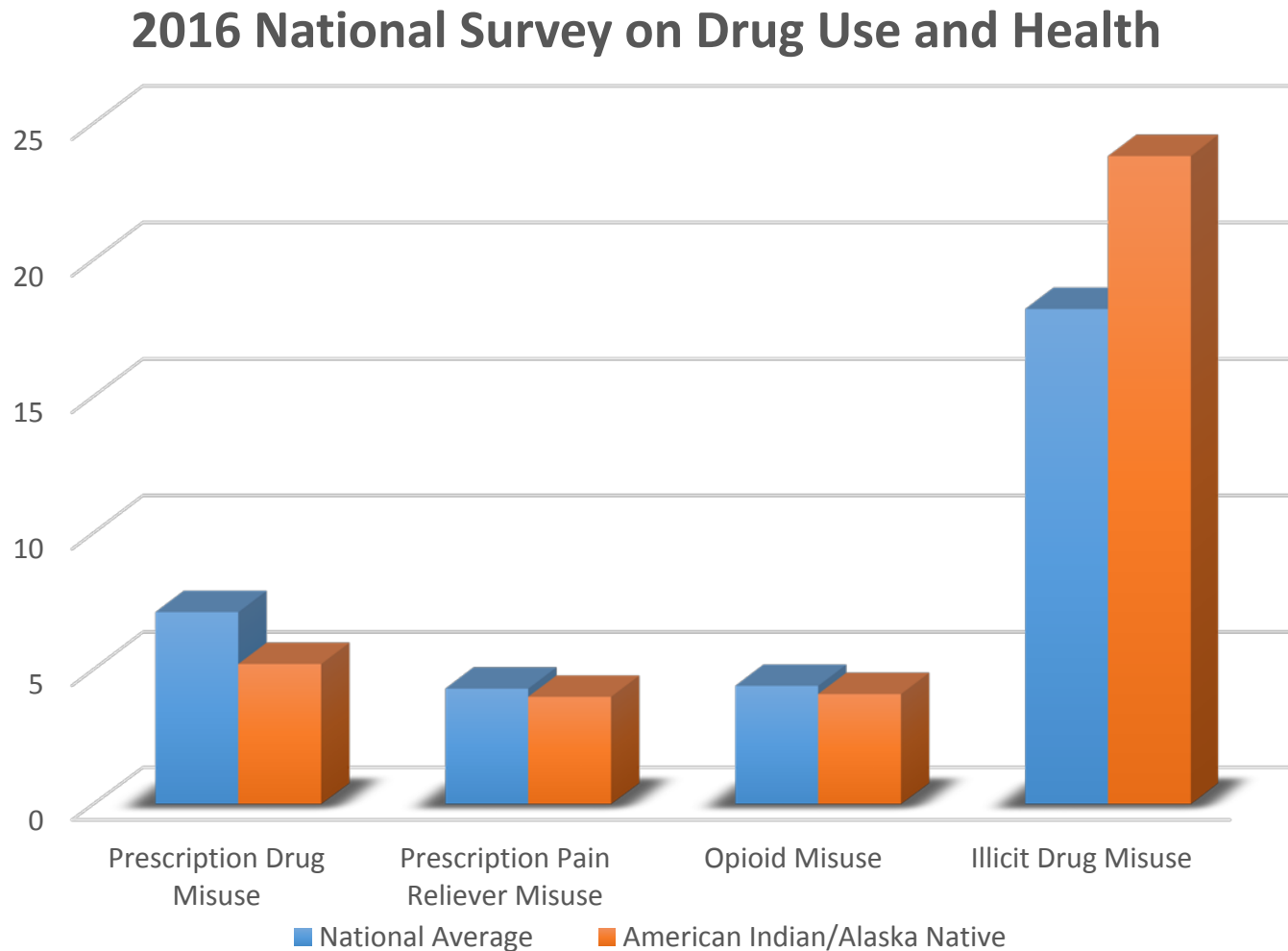
The Opioid Epidemic and Elders

- Opioid-related hospitalizations more than doubled over 10 years for adults ages 65 and older, and tripled among adults ages 45–64 in largely rural West Virginia.
- Only 11 percent of patients seeking addiction treatment in rural areas are able to receive opioid addiction treatment medications.

The Opioid Epidemic and Elders

- APS data show an increase in elder abuse. Some experts and law enforcement believe the opioid crisis is contributing to the increase, but APS and others not collecting data related to this.
- Rural grandparents more likely than urban counterparts to be raising a grandchild because their adult child is addicted to opioids. Challenges include raising children with physical and cognitive health problems.

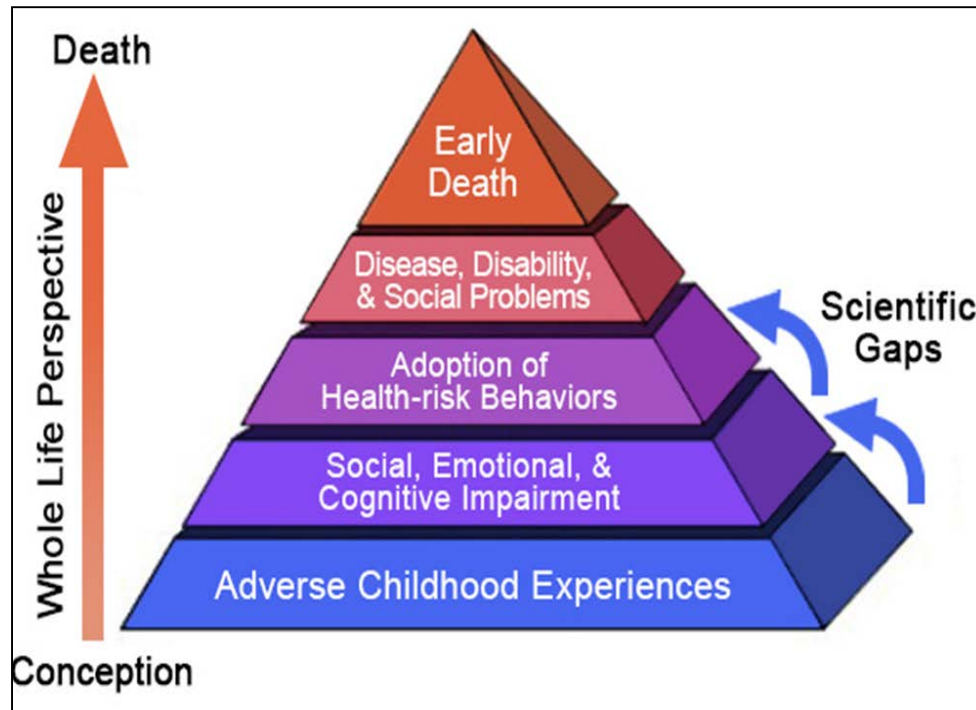
Opioid Misuse: AI/AN versus National Average



Adverse Childhood Experiences (ACEs)

- Physical abuse
- Sexual abuse
- Emotional abuse
- Physical neglect
- Emotional neglect
- Mother treated violently
- Substance misuse within household
- Household mental illness
- Parental separation or divorce
- Incarcerated household member

ACEs and Behavioral Health



ACEs are common

ACEs cluster

ACEs have a dose response relationship with many health problems

Yappalli



Synthetic opioid deaths closely linked to illicit fentanyl supply

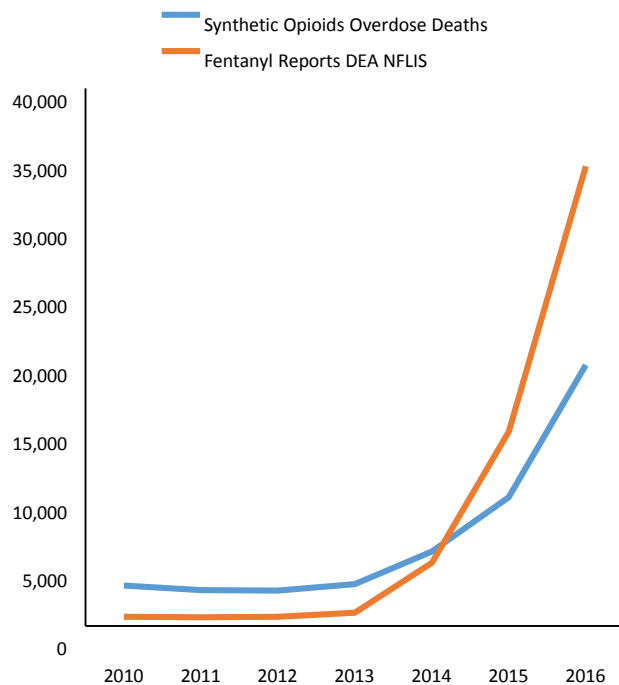
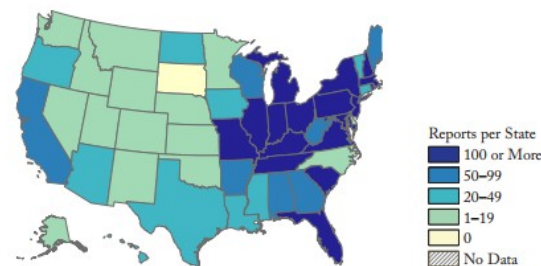


Figure 3 Fentanyl reports in NFLIS, by State, 2001



Figure 4 Fentanyl reports in NFLIS, by State, 2015



Known or suspected exposure to fentanyl in past year (n = 121)				
Behavior or experience	APR	95% CI	p	
Regular heroin use	4.07	1.24–13.3	0.02	0

Source: Carroll et al, Int. J. Drug Policy, 2017 and CDC Epi-Aid 2015–2016 OH and MA

Treacherous Potency

Lethal doses of heroin, fentanyl, and carfentanyl

[LEFT TO RIGHT]



Fentanyl and Counterfeit Products Broaden At-Risk Population

Counterfeit Norco Poisoning Outbreak — San Francisco Bay Area, California, March 25–April 5, 2016

Kathy T. Vo, MD^{1,2}; Xander M.R. van Wijk, PhD³; Kara L. Lynch, PhD³; Alan H.B. Wu, PhD³; Craig G. Smollin, MD^{1,2}

Figure 3: Counterfeit 30 Milligram Oxycodone Pills Containing Fentanyl.



Fentanyl-Fentanyl Overdose Events Caused by Smoking Contaminated Crack Cocaine — British Columbia, Canada, July 15–18, 2016

Salman A. Klar, MPH¹; Elizabeth Brodtkin, MD¹; Erin Gibson¹; Shovita Padhi, MD¹; Christine Predy²; Corey Green, MHSc¹; Victoria Lee, MD¹



Deaths Involving Fentanyl, Fentanyl Analogs, and U-47700 — 10 States, July–December 2016

Julie K. O'Donnell, PhD¹; John Halpin, MD¹; Christine L. Mattson, PhD¹; Bruce A. Goldberger, PhD²; R. Matthew Gladden, PhD¹



SAMHSA
Substance Abuse and Mental Health
Services Administration

HHS 5-POINT STRATEGY TO COMBAT THE OPIOIDS CRISIS

- BETTER DATA
- BETTER PAIN TREATMENT
- PREVENTION, TREATMENT & RECOVERY
- MORE OVERDOSE REVERSERS
- BETTER RESEARCH



PACT: SAMHSA's Tribal Opioids Approach

- **Priority**
 - February 28, 2018, governor's letter calling on them to ensure tribes are engaged in state programs in meaningful and beneficial manner
- **Access**
 - Increased access to funding (set-asides or minimum tribal awards)
 - New Tribal Opioids Response Grant Program (\$50,000,000 set-aside)
- **Collaboration**
 - Tribal-State Policy Academy to improve relationships and develop collaborative plans focused on tribal opioids and other substances
 - Federal partnership (Town Hall and Joint Tribal Advisory Committee)
- **Technical Assistance**
 - Substance abuse
 - Mental health
 - Prevention

SAMHSA Grant Examples

Grant Name	Description	Amount	# Awards	Due Date
Mental Health Awareness Training	Purpose: train to recognize signs/symptoms of mental disorders (SMI and/or SED) and community resources; establish linkages with school- and/or community-based mental health; crisis de-escalation.	Up to \$125,000 py	Up to 126	6/8/18
Community Programs for Outreach & Intervention with Youth and Young Adults at Clinical High-Risk for Psychosis	Identify youth and young adults, up to 25 years old, at clinical high risk for psychosis and provide evidence-based interventions to prevent the onset of psychosis or lessen the severity of psychotic disorder	Up to \$400,000 py	Up to 28	6/11/18
Tribal Behavioral Health Grants/Native Connections	Prevent and reduce suicidal behavior and substance use, reduce impact of trauma, and promote mental health among native youth through age 24 years	Up to \$250,000 py	Up to 30	6/22/18
Infant and Early Childhood Mental Health	Targets children from birth to 12 years of age at risk for, with early signs of, or mental health diagnosis	Up to \$500,000 py	9	6/29/18
Mental Health Technology Transfer Center	Resource, capacity, and mental health workforce development technical assistance	Up to \$500,000 py	1 tribal	7/3/18

SAMHSA Grant Examples (continued)

Grant Name	Description	Amount	# Awards	Due Date
Strategic Prevention Framework—Partnerships for Success	Reduce onset and progression of substance abuse and related problems and strengthen prevention capacity infrastructure. Focus is on youth 9-20 years of age to address underage drinking. Applicants may target up to two additional, data-driven substance abuse prevention priorities.	Tiered amounts between \$500,000 to \$2,260,000 (applicants must check tiers)	34 (at least 5 awards to tribes, tribal orgs, urban Indian orgs)	7/6/18
Medication Assisted Treatment (MAT) – Prescription Drug and Opioid Addiction (PDOA)	Expand/enhance access to MAT for persons with opioid use disorders. Focus is on entities within states with highest rates of primary treatment admissions for heroin and opioids per capita and states with the most dramatic increases for heroin and opioids.	Up to \$524,670 py (\$65,583,803 total – at least \$5 M for tribes, tribal orgs, urban Indian orgs)	Up to 125 <u>total</u> (tribal and non-tribal)	7/9/18
Prevention Technology Transfer Center	Training and technical assistance for substance abuse prevention field	Up to \$500,000 py	1 tribal	7/10/18

Background: Opioid State Targeted Response

- 21st Century Cures Act, Public Law 114-255, signed on December 13, 2016
- Section 1003 of the Act authorizes funding for Opioid State Targeted Response (STR) grants
- \$500 million for Fiscal Year (FY) 2017 and \$500 million for FY 2018
- \$1.0 billion in FY 2019 for SOR, includes set-asides for tribal communities (\$50 million) and hard hit states

Tribal Opioids Response (TOR) Grant:

- New tribal program established under the FY 2018 Omnibus Appropriations—\$50,000,000 tribal set-aside
- SAMHSA sought immediate tribal leader input to meet program development and award deadlines. Input:
 - Ensure program flexibility to meet varying tribal needs
 - Make awards directly to tribes and not states
 - Funding should reach all tribes
 - Continue to seek consult to prepare for future funding
 - <https://www.samhsa.gov/grants/grant-announcements/ti-18-016>

Opioid Overdose Prevention Tool Kit

The Toolkit equips providers, individuals, communities, and governments on ways to prevent/respond to opioid overdose. It addresses issues for first responders, treatment providers, and those recovering from opioid overdose.

store.samhsa.gov/product/Opioid-Overdose-Prevention-Toolkit-Updated-2016/SMA16-4742



TIP 63: Medications for Opioid Use Disorder

This Treatment Improvement Protocol (TIP) reviews the use of the three Food and Drug Administration (FDA)-approved medications used to treat opioid use disorder (OUD)—methadone, naltrexone, and buprenorphine—and the other strategies and services needed to support recovery for people with OUD.



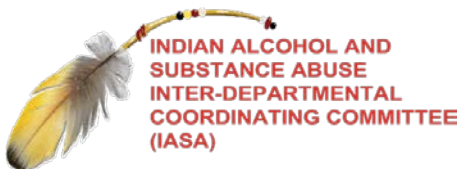
SAMHSA MATx Mobile Application

MATx empowers health care practitioners to provide effective, evidence-based care for opioid use disorders. This free app supports practitioners who provide medication-assisted treatment (MAT), as well as those who plan to do so in the future.



Tribal Law and Order Act (TLOA): TAP Requirement

"The governing body of any Indian tribe may, at its discretion, adopt a resolution for the establishment of a Tribal Action Plan to coordinate available resources and programs, including programs and resources made available by this chapter, in an effort to combat alcohol and substance abuse among its members."



TAP: Federal-Tribal Cooperation

At the request of any Indian tribe pursuant to a resolution, the following federal agencies shall cooperate with the tribe in the development of a TAP:

- Bureau of Indian Affairs
- Office of Justice Programs
- Substance Abuse and Mental Health Services Administration
- Indian Health Service

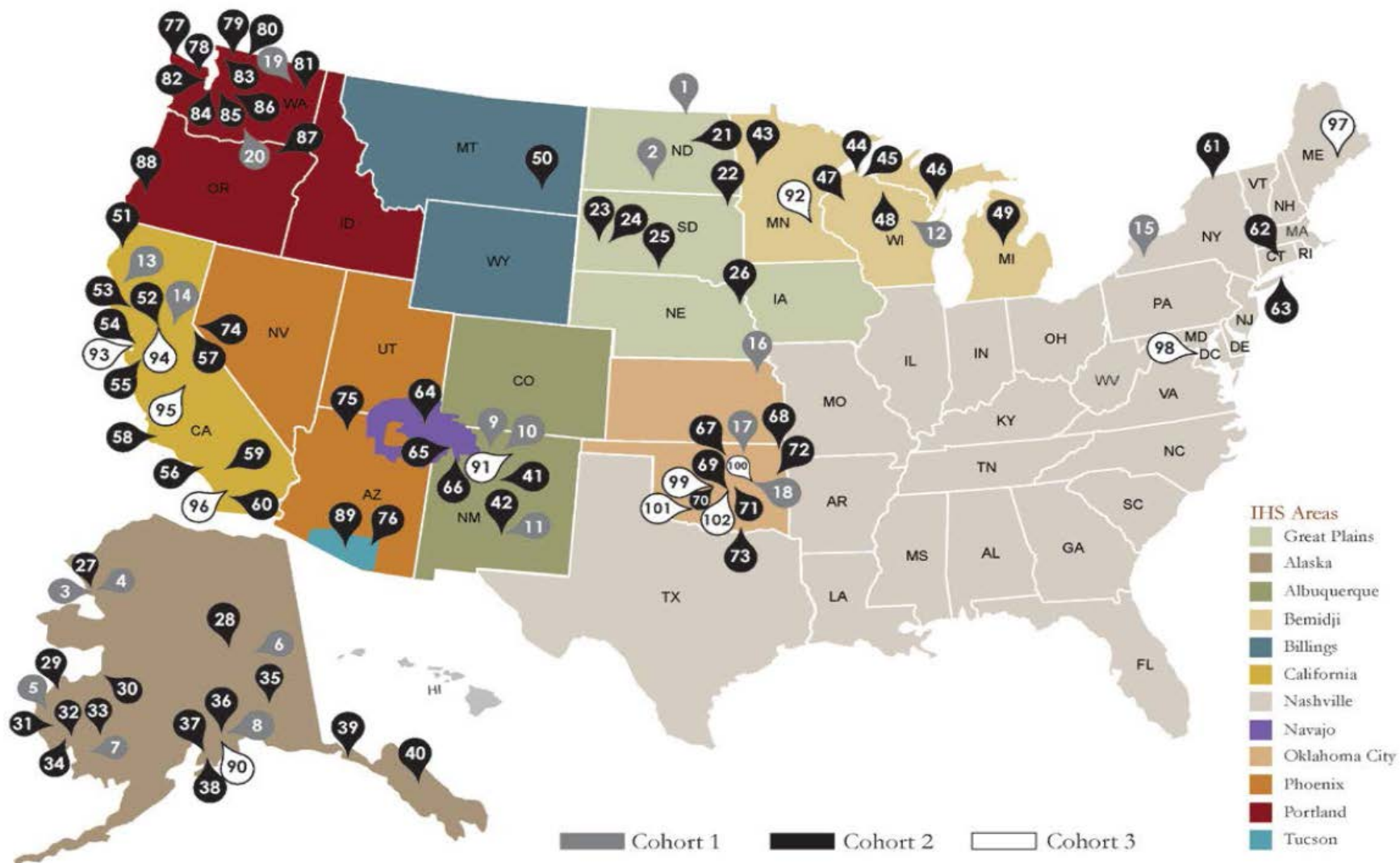


TAP Requirements

- Assessment of the scope of the problem
- Identification and coordination of available resources
- Development of goals and strategies
- Identification of community and family roles in the TAP
- Development of procedures for amending/revising TAPs
- An evaluation to measure outcomes
- Updates every 2 years



Native Connections Grantee Map



Like all Older Adults, Rural Elders Vulnerable to Medication Abuse

- Use more Rx and OTC medications than any other age group, and may develop increased medication sensitivity as they age.
- Have higher risk of accidental misuse or abuse due to conditions like, sleep disorders and insomnia, and anxiety that occurs in this population.
- Surplus of opioid meds in many rural areas.

Educate Before You Medicate: Know Your Options

- Acetaminophen (Tylenol®) or ibuprofen (Advil®)
- Cognitive behavioral therapy – a psychological, goal-directed approach in which patients learn how to modify physical, behavioral, and emotional triggers of pain and stress
- Exercise therapy, including physical therapy
- Medications for depression or for seizures
- Interventional therapies (injections)
- Exercise and weight loss
- Other therapies such as acupuncture and massage

Responding to the Crisis

- Ensuring linkages to APS for any older adult who is self-neglecting or being abused.
- Treating older adults misusing pain meds or using illegal opioids.
- Providing education and support for those taking opioids for chronic pain.
- Expanding aging services and other efforts to support grandparents raising grandchildren.

Responding to the Crisis

- Public awareness efforts to ensure people of all ages understand dangers of opioid misuse and drug-sharing.
- Prescriber education must preserve rights of older adults living with pain to obtain Rx opioids when medically warranted, while ensuring prescribers consider risks of opioid misuse by their older patients.

Responding to the Crisis

- Education efforts must involve health care provider and emergency response education about the unique needs of rural older adults exposed to opioids.
- More primary care physicians – the main prescribers in rural America – need federal approval to prescribe a drug that treats opioid use disorder.

If You Are Prescribed Opioids For Pain:

Never take opioids in greater amounts or more often than prescribed.

Follow up with your primary health care provider within ____ days.

- Work together to create a plan on how to manage your pain.
- Talk about ways to help manage your pain that don't involve prescription opioids.
- Talk about any and all concerns and side effects.

Help prevent misuse and abuse.

- Never sell or share prescription opioids.
- Never use another person's prescription opioids.

Store prescription opioids in a secure place and out of reach of others (this may include visitors, children, friends, and family). Safely dispose of unused prescription opioids: Find your community drug take-back program or your pharmacy mail-back program, or flush them down the toilet, following guidance from the Food and Drug Administration (www.fda.gov/Drugs/ResourcesForYou).

Visit www.cdc.gov/drugoverdose to learn about the risks of opioid abuse and overdose.

If you believe you may be struggling with addiction, tell your health care provider and ask for guidance or call SAMHSA's National Helpline at

1-800-662-HELP.



Safe Storage and Disposal



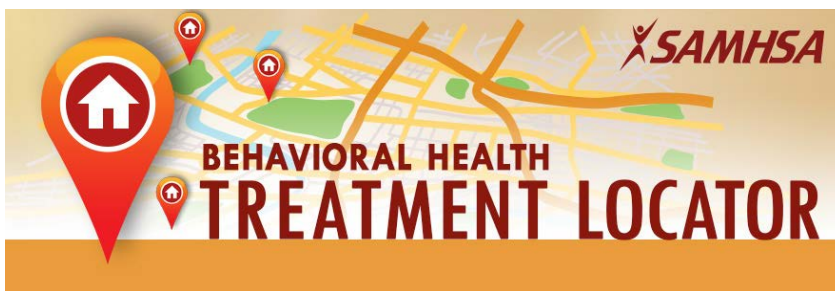
Safe Storage and Disposal

*I, Surgeon General of the United States Public Health Service, VADM Jerome Adams, am emphasizing the importance of the overdose-reversing drug naloxone. For patients currently taking high doses of opioids as prescribed for pain, individuals misusing prescription opioids, individuals using illicit opioids such as heroin or fentanyl, health care practitioners, family and friends of people who have an opioid use disorder, and community members who come into contact with people at risk for opioid overdose, **knowing how to use naloxone and keeping it within reach can save a life.***



BE PREPARED. GET NALOXONE. SAVE A LIFE

Partnering for Effectiveness



<https://findtreatment.samhsa.gov/>

OVERDOSE PREVENTION PROGRAMS

Find the nearest overdose prevention and naloxone program.

<http://prescribetoprevent.com/>



STR-TA
Consortium

State Targeted Response Technical Assistance

**Working with
communities
to address the
opioid crisis.**



Navigating Toward Healthier Communities

- ▶ **SAMHSA's STR-TA Consortium is here to assist you.** Our goal is to provide the resources and technical assistance you need to address the opioid crisis in your communities.



If you need technical assistance to support evidence-based practices in the prevention, treatment and recovery of opioid use disorders in your community, submit a request to **www.getSTR-TA.org**

www.getSTR-TA.org | str-ta@aaap.org | 401-270-5900

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Thank you

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Additional Information

Elder Justice Initiative

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www.elderjustice.gov