



*Indian Health Service • Division of Behavioral Health*

METHAMPHETAMINE SUICIDE PREVENTION INITIATIVE

## **Indian Health Service**

**Tribal Leaders Consultation Conference**

**Toiyabe Indian Health Project, Inc.**

*Sheila Turner*

*Glenn Nelson*



# Agenda

- Organization and Staff Introduction
- MSPI Focus
- Focus of the Evidence Based Practice or Practice based Evidence
- Year 1 Implementation
- Lessons Learned
- Year 2 Goals
- Q & A

# Organization

- Organization description
  - 638 Tribal Consortium of 7 Federally Recognized Tribes & 2 Indian Communities
  - Health Clinics at three sites: Medical, Dental, Preventive, Community Health, Dialysis and Behavioral Health
  - 40 years old
  - Extremely Rural (nearest major airport over 200 miles away)

# Staff Introductions

- Sheila Turner, CADCII-Program Director, Family Services
- Bob Kittle, LCSW
- Deborah Nielsen, MFT-Psychotherapist
- John Bukenberger, MFT – Psychotherapist
- Natalie Vega MFT Intern
- Glenn Nelson, Outreach/Intervention Worker
- Sage Romero, Prevention Worker
- Allison Piper, Prevention Worker

# Toiyabe's MSPI Focus

- Methamphetamine Treatment
- Suicide Prevention-Intervention/ ASIST model (Applied Suicide Intervention Skills Training)
- Warrior Down
- Gathering of Native Americans (GONA)
- Community Presentations – School Presentations to address Suicide Prevention
- American Indian Life Skills Curriculum
- Sons & Daughters of Tradition
- Project Venture

# Year 1. Evidence Based Practice Implementation

## Intensive Outpatient Program – Matrix Model

- Intense four month treatment program to treat addiction:
- Clients are able to remain in their communities and learn recovery in their home environment
- Families are able to participate in the client's recovery

# Year 1-Continued

## Warrior Down

- Relapse prevention and recovery support program for American Indians who are completing treatment or are returning to their communities from incarceration and in need of a support system
- Community driven and supported mentor based program
- Traditional American Indian approaches and 12 step methods
- Training for Community January 2010, follow up with goals and objectives in December of 2010

# Cultural Modifications

- Talking Circles
- 12 Step Red Road to Wellbriety
- Warrior Down Relapse Prevention/ Re-Entry Support
- Sobriety Gatherings
- Native American AA/NA groups (community facilitated)
- Prevention activities



# Cultural Modifications – Cont.

- Beading and Regalia Making ( Daughters of Tradition)
- Outdoor activities (Gathering sage, tobacco, Sweat rocks, Rock climbing, hiking)
- American Indian Life Skills Curriculum
  - Pilot Program with 5 and 6 year olds
- Project Venture

## **Year 1 Results or Observations**

- Increase the length of the initial intensive period from 1 month to 2 months
- 14 enrolled, 10 completed since January 2010
- Part of aftercare involves becoming mentors/support in the Warrior Down program

# Year 1 Results and Observations Cont.

- Moving Drug Testing out of Medical and into Community Health has been well received
- Cohesive group formation including the families
- Activities (physical and outdoor) for youth crucial to their recovery program
- Necessary to address historical trauma for continued community healing. Healing Forest

# Lessons Learned

- Structure and Consistency are necessary to continue the Intensive Outpatient Program
- Community is part of the on-going healing process
- It takes time to get the programs up and running successfully
- Hire a competent evaluator

# Year 2 Goals

- Hire Project Venture Coordinator and begin the program
- Work on developing a Wellness Court within the Tribal court system
- QPR (question, persuade, refer)
  - Suicide Prevention/Intervention community training and awareness
- Intensive Outpatient program with added services
- Continue Warrior Down with increased community input and support



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# Questions & Answers

