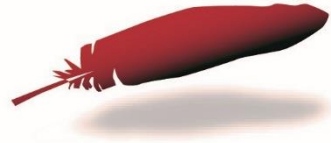


National Indian  
Health Board



# COVID 19 & SUBSTANCE USE

**Dr. Glorinda Segay & Courtney Wheeler**  
**National Indian Health Board**  
**Mental and Behavioral Health Webinar Series**  
**June 11, 2020**  
**3:00-4:00 pm EST**

# Disclaimer

- The views expressed in this webinar are those of the presenters and are based upon their extensive experience and expertise.
- This presentation is not meant to diagnose people or provide clinical advice.



# Training Agenda

- 3:00 pm (EST): Welcome
- Opening prayer
- Introduction
- Webinar Housekeeping
- Substance Use Statistics
- What is Substance Use
- Substance Use Treatment
- Substance use and COVID-19
- Q & A
- 4:00 pm (EST): Adjourn



# Introductions

- Dr. Glorinda Segay & Courtney Wheeler
  - Roles within NIHB
  - Experience working with Indian Country



# How to Use the Chat Box

- The chat box is located below the screen.
- A place to put
  - Questions you want to ask and
  - Comments you want to make.
- We will check it periodically and address any questions or concerns.



# Housekeeping

- This webinar will be recorded.
- We will follow the agenda as closely as possible.
- Power point will be made available after the presentation.
- Please ask questions.
  - We can all learn from each other.
- Evaluations will be provided after the webinar – please complete it.



# Learning Objectives

- By the end of this webinar, participants will be able to:
  - Describe some common elements of substance use seen in American Indian and Alaska Native (AI/AN) communities;
  - Describe the impact in AI/AN communities today;
  - Comprehend the DSM-5 diagnostic criteria for substance use;
  - Recognize differential analysis of substance use; and
  - Explain strategies for management and treatment of substance use.



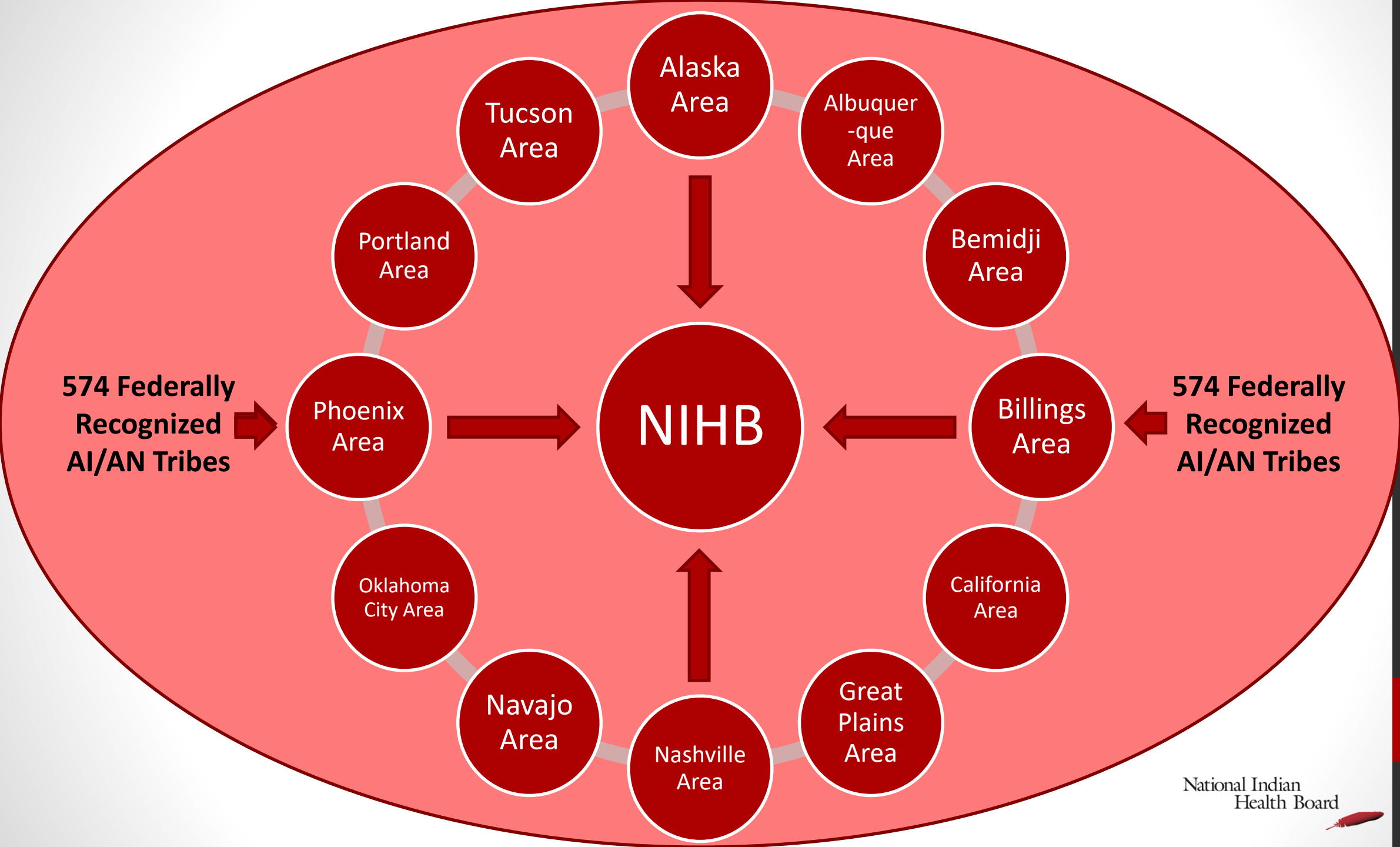
# National Indian Health Board

**Purpose:** To advocate on behalf of all federally recognized American Indian and Alaska Native Tribes to ensure the fulfillment of the trust responsibility to deliver health and public health services as assured through treaties, and reaffirmed in legislation, executive orders and Supreme Court cases.

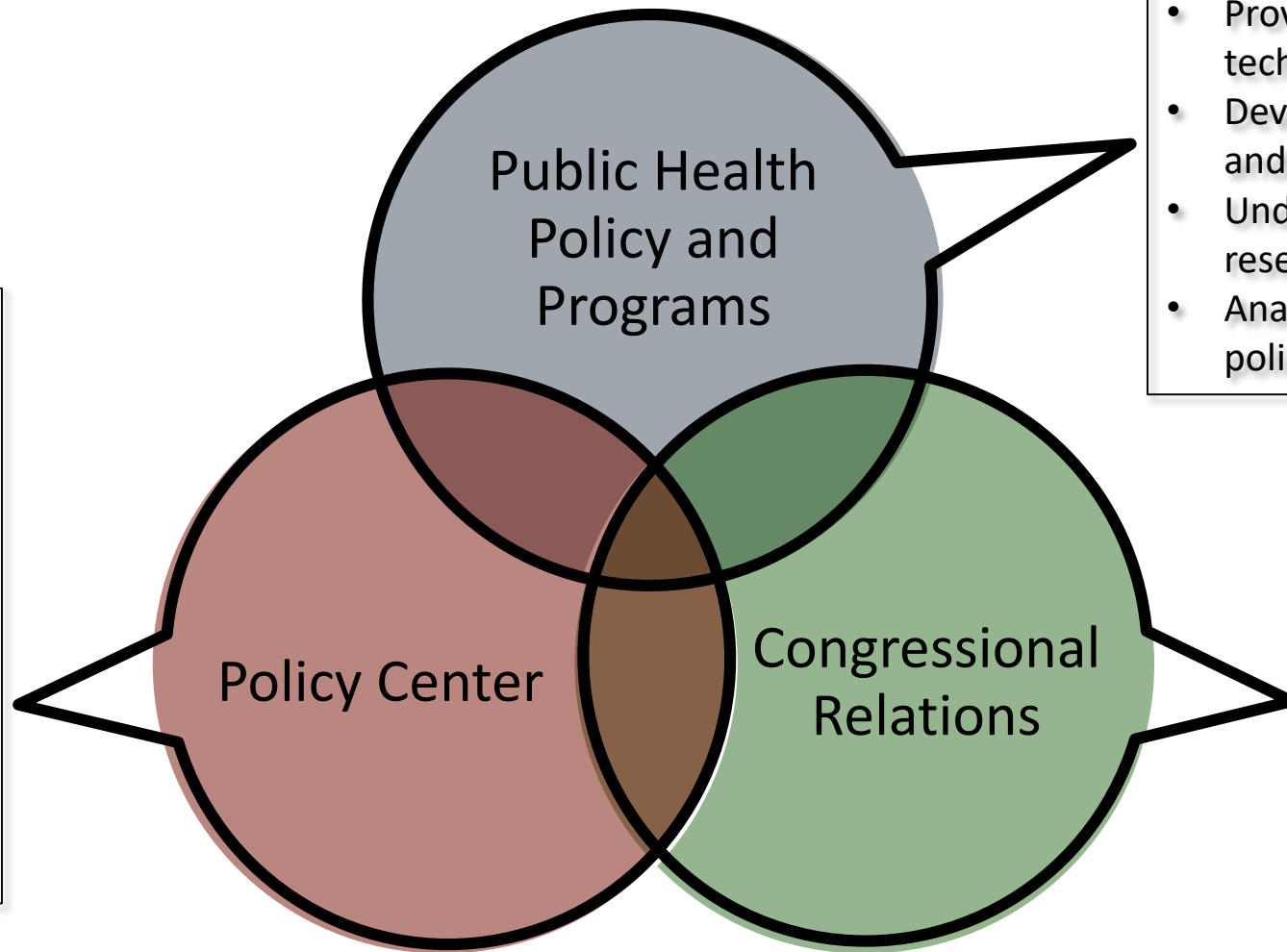
**Mission Statement:** One Voice affirming and empowering American Indian and Alaska Native Peoples to protect and improve health and reduce health disparities.







# What Does NIHB Do?



- Research, analyze, and make recommendations on policies, rules and regulations.
- Monitor judicial activity.
- Host and facilitation Tribal consultations.
- Provide technical assistance to Tribal advisory committees.

- Provide training and technical assistance.
- Develop programming and materials.
- Undertake public health research.
- Analyze public health policies and budgets.

- Monitor and propose bills.
- Educate members of Congress and staff.
- Analyze budgets.
- Advocate for favorable bills, edits, and resources.
- Provide testimony.



# Substance Use Statistics

- Rates of substance abuse among American Indians/Alaskan Natives is higher than the general U.S. population.
- American Indians/Alaskan Natives have the highest rates of alcohol, marijuana, cocaine, inhalant, and hallucinogen use disorders compared to others.
- 10% of American Indians/Alaskan Natives have a substance use disorder.



# Continuation

- 4% of American Indians/Alaskan Natives have an illicit drug use disorder.
- 7.1% of American Indians/Alaskan Natives have an alcohol use disorder.
- Substance dependence or abuse is higher among American Indians/Alaskan Natives.
- Methamphetamine abuse rates is highest among American Indians/Alaskan Natives.

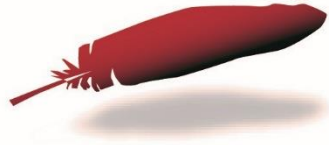


# Non-American Indian/Alaskan Native Statistics

- According to NSDUH, 19.7 million American adults battled a substance abuse disorder in 2017.
- Almost 74% of adults suffering from a substance use disorder in 2017 struggled with an alcohol use disorder.
- About 38% of adults in 2017 battled an illicit drug use disorder.
- That same year, 1 out of every 8 adults struggled with both alcohol and drug use disorder.
- In 2017, 8.5 million American adults suffered from both a mental health disorder and a substance use disorder, or co-occurring disorders.
- Drug abuse and addiction cost American society more than \$740 billion annually in lost workplace productivity, healthcare expenses, and crime-related costs.



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WHAT IS SUBSTANCE USE?

# What is Substance Use?

- The use of substances such as alcohol, caffeine, cannabis, hallucinogens, inhalants, opioids, sedatives, hypnotics, anxiolytics, stimulants, tobacco, and other substances to alter one's physical and mental state.
- The DSM-5 (Diagnostic Statistical Manual) has their own definition of substance use disorder.
  - The brain's and body's' growth for dependence on a substance to cope with adversities.



# Clinical Criteria of Substance Use Disorder (SUD)

- The DSM-5 has their clinical criteria as follows for SUD
  - Loss of control over drug/alcohol use
  - Investing large amounts of time obtaining substances
  - Cravings
  - Continued use in spite of relationship conflicts
  - Risk-taking, such as using while driving
  - Continued use in the face of developing health problems





# Signs of Substance Use Disorder

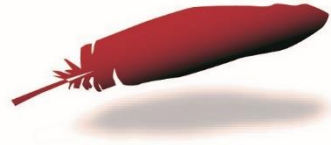
- Increasing tolerance levels
- Loss of interest in activities once enjoyed
- Withdrawal episodes
- Failed attempts to stop using
- Failing to meet obligations (e.g., work, home, school)



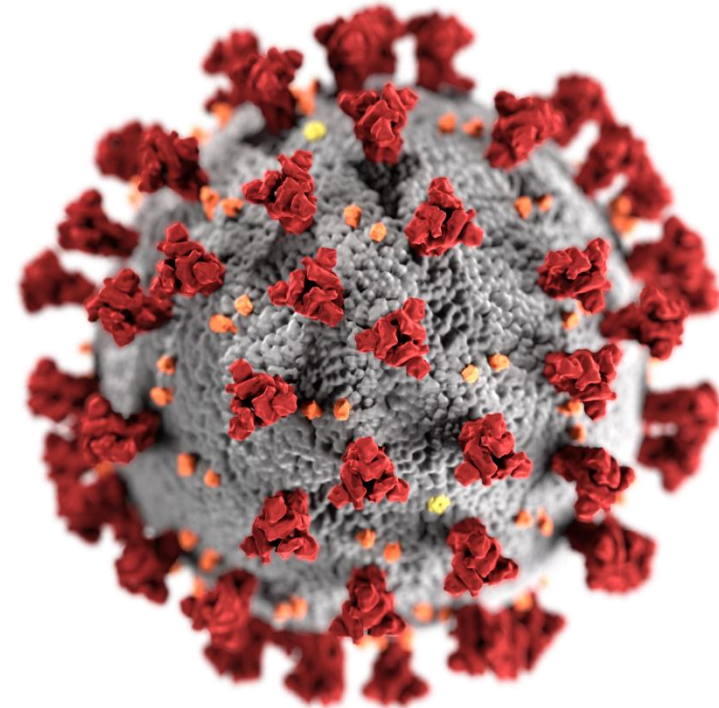
# Other Classifications

- Substance Misuse
  - Substance misuse refers to the use of substances for a purpose not consistent with legal or medical guidelines, most often with prescription medications.
- Substance Abuse
  - Uncontrolled use of alcohol, illegal drugs or prescribed drugs affecting normal daily life.





## SUBSTANCE USE AND COVID-19



# Substance Use and COVID-19

According to studies:

- Compromised lung function due to COVID-19 may put those with opioid use disorder or meth at risk.
  - Slow breathing due to opioid use can cause hypoxemia, which can lead to cardiac, pulmonary, or brain complication – if severe can lead to overdose or death.
  - Meth is toxic and can cause pulmonary damage, cardiomyopathy, and pulmonary hypertension – there is a possibility of increased risk of adverse outcome due to COVID-19.



# Substance Use and COVID-19

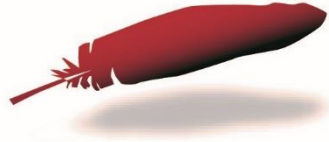
Physical distancing may increase likelihood of opioid overdose due to no one being around to administer naloxone.



# Substance Use and COVID-19 Risk

- Possible risk factors for substance users.
  - House instability
  - Incarceration
  - Poor access to health care and/or recovery support
  - Difficulty physically distancing
  - Increased disease transmission in shelters





# SUBSTANCE USE AND COVID-19

(SCENARIO)

# HOW COVID 19 MIGHT PLAY OUT SUBSTANCE USE (SCENARIO)

- Begins as ordinary day then starts to effect daily life situation.
- JW is living in an apartment in the city. He has a job with minimal pay but it has been day to day due to the COVID. Some days he will miss work due to alcohol withdrawals and his fear of contracting COVID. He has no transportation. He has a son but has no contact or involvement with him. He has no stable relationship with family. His friends are alcoholics that also use marijuana and meth.
- JW has a history of using whiskey, marijuana, and meth. JW went to rehab but continues to relapse. JW disclosed he last used whiskey one week ago and meth a month ago because he is bored. He says, “Nobody checks on me. Nobody cares, and I get bored sitting in this apartment all day.”

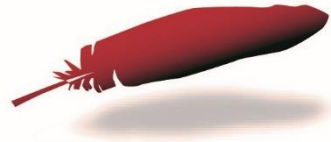




# CONTINUATION

- “I have nothing to do or look forward to.” “I hate this COVID because its ruining everything, I can’t see my friends, I can’t go no where, so I drink and get high, its passes time. I also crave it everyday.”
- Lastly, JW is a twin and grew up in a single family home. His father passed when he was a 8 years old. He took his first drink of alcohol when he was 6 years old, which he was offered by his uncle.
- JW has a history of being in prison due to aggravated assault and DWI. He has no driver’s license.





DISCUSSION:  
BASED ON WHAT JW IS EXHIBITING, WHAT  
SYMPTOMS DOES HE PRESENT WITH?

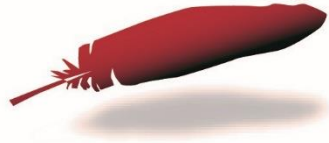


# Symptoms Exhibited by JW

- Cravings
- Continued use despite relationship conflicts.
- Risk-taking, such as using while driving
- Loss of interest in activities once enjoyed
- Withdrawal episodes
- Failed attempts to stop using
- Failing to meet obligations (work, home, school)



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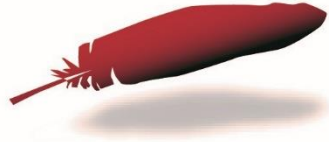
SO WHAT DOES THIS MEAN?



# QUESTIONS SOMEONE MIGHT ASK TO LEARN ABOUT THEIR CONDITION

- Could I have a problem?
- Is this normal?
- Am I able to stop?
- How long will I do this?
- What do I do?
- Where do I get help?
- Is this because of the COVID?
- What is the treatment for my problem?





## WAYS TO PREVENT SUBSTANCE USE

# Possible Activities to Help Others to Prevent Substance Use During this Pandemic

- Exercise
- Do an activity (crafts, beadwork, feather work, knitting, etc.)
- Spend time with pets or animals
- Meditation
- Listen and play music
- Daily readings
- Find an online support group
- Find a sponsor to help with process
- Breathing exercises
- Self Prayer
- Self Smudging
- Self Tobacco offering
- Spending time with positive people in positive environments.
- Say no to alcohol and drug use



# Additional Tips

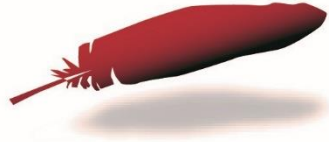


What tips or additional skills to avoid or reduce substances during this time can you share with us?





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## SUBSTANCE USE TREATMENT

# Substance Use Treatment

- A person has to meet certain number of clinical symptoms in a certain time frame to be diagnosed with substance use disorder, per the DSM-5.
- If treatment is not sought, it can get worse.
- No single treatment is effective.
- People need to have immediate access to treatment.
- Effective wrap around treatment addresses all of the patient's needs.
- Staying in treatment long enough is critical.



# Substance Use Treatment (cont.)

- Counseling and other behavioral therapies including cultural services are the most commonly used forms of treatment.
- Medications are often an important part of treatment, especially when combined with behavioral therapies.
- Treatment should address other possible mental disorders.
- Medically assisted detoxification is only the first stage of treatment.
- Drug use during treatment must be monitored continuously.
- Treatment programs should test patients for HIV/AIDS, hepatitis B and C, tuberculosis, and other infectious diseases including COVID-19 as well as teach them about steps they can take to reduce their risk of these illnesses.



# Substance Use Treatment Things to Consider

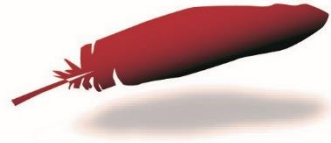
- Think about harm reduction strategies.
- Consider when an in-person visit is needed vs. a telehealth visit.
  - Room-to-room telehealth
- SAMHSA has suggested opioid treatment programs provide take home medication during the COVID-19 pandemic.
- Social isolation is a risk factor for relapse – virtual support meeting may be useful if access to the internet is available.
- Integrated Behavioral Health Care
- Create a task force team to address substance prevention.



# Substance Use Treatment Things to Consider (con't)

- Create a crisis response team as a wrap around service.
- Educate providers on substance use prevention.
- Create positive messaging to prevent substance abuse.
- Incorporate psychoeducation with treatment plans.
- Allow providers to receive professional training or education to improve their treatment strategies.
- Incorporate the Youth Risk Behaviors Surveillance System (YRBSS) to identify needs.
- Incorporate other needs assessment.



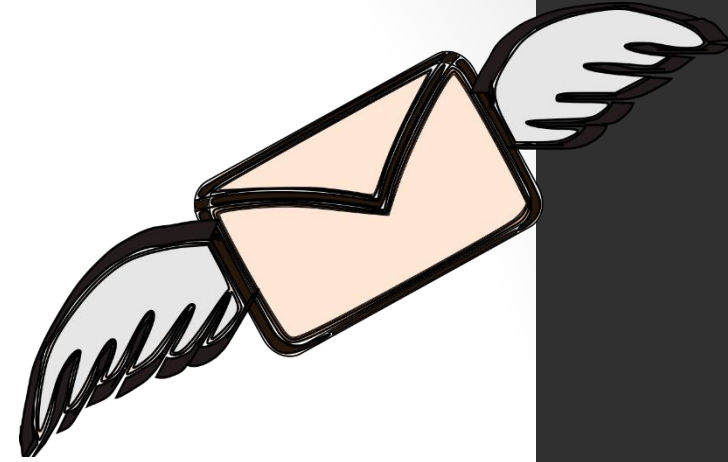


## QUESTIONS AND COMMENTS

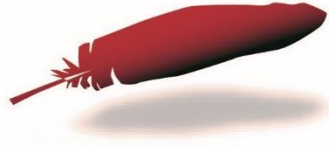


# Take Home Messages

- This public health education will:
  - help you understand substance use;
  - help you to advocate for those who suffer from substance use; and
  - how to recognize substance use symptom, and
  - use coping skills and/or get professional help.



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CLOSING



# Related Resources

- [National Drug Early Warning System \(NDEWS\)](#)
- [Drug Abuse Data from the Community Epidemiology Work Group \(Archives\)](#)
- [Economic Costs of Drug Abuse in the United States, 1992-2002 \(PDF, 2.4MB\)](#) - Detailed description by the Office of National Drug Control Policy of the societal costs of drug abuse
- [Monitoring the Future Survey](#) - Study funded by NIDA and performed by the University of Michigan
- [Youth Risk Behavior Survey](#) - Study conducted by the Centers for Disease Control and Prevention
- [National Survey on Drug Use and Health](#) - Study conducted by the Substance Abuse and Mental Health Services Administration (SAMHSA)
- Nihb.org



# Additional Resources

- [Guidance for Law Enforcement and First Responders Administering Naloxone \(PDF | 117 KB\)](#)
- [Letter to Treatment Providers on PPE \(PDF | 543 KB\)](#)
- [COVID-19 Public Health Emergency Response and 42 CFR Part 2 Guidance \(PDF | 168 KB\)](#)
- [TAP 34: Disaster Planning Handbook for Behavioral Health Treatment Programs](#)
- [Considerations for the Care and Treatment of Mental and Substance Use Disorders in the COVID-19 Epidemic \(PDF | 125 KB\)](#)
- [Considerations for Crisis Centers and Clinicians in Managing the Treatment of Alcohol or Benzodiazepine Withdrawal during the COVID-19 Epidemic: March 19, 2020 \(PDF | 213 KB\)](#)
- [Considerations for Outpatient Mental and Substance Use Disorder Treatment Settings \(PDF | 104 KB\)](#)
- [COVID-19: Interim Considerations for State Psychiatric Hospitals \(PDF | 210 KB\)](#)
- [Virtual Recovery Resources \(PDF | 244 KB\)](#)
- [Tips For Social Distancing, Quarantine, And Isolation During An Infectious Disease Outbreak](#)
- [Disaster Distress Helpline](#)
- [Telework and DFWP Drug Testing During COVID-19](#)



# More Resources

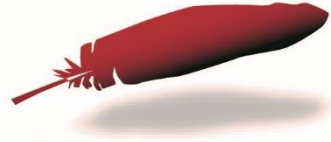
- [Opioid Treatment Program \(OTP\) Guidance \(March 16, 2020\) \(PDF | 216 KB\)](#)
- [OTP Guidance for Patients Quarantined at Home with the Coronavirus \(PDF | 160 KB\)](#)
- [FAQs: Provision of Methadone and Buprenorphine for the Treatment of Opioid Use Disorder in the COVID-19 Emergency \(PDF | 202 KB\)](#)
- [Sample OTP COVID-19 FAQs \(PDF | 341 KB\)](#)
- [Use of Telemedicine While Providing Medication-Assisted Treatment \(PDF | 146 KB\)](#)



# REFERENCES

- National Indian Health Board
- Diagnostic Statistical Manual-IV
- American Addictions Center
- Sunrise House
- Center for Disease Control Preventive Health
- Substance Abuse & Mental Health Services Administration
- National Institute on Drug Abuse
- National Survey on Drug Use and Health (NSDUH)

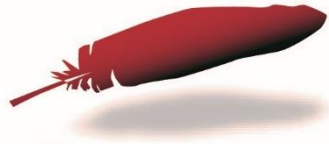




## FINAL QUESTIONS AND COMMENTS



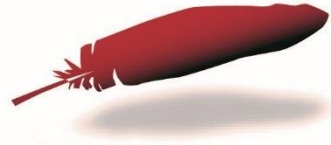
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## PLEASE COMPLETE YOUR EVALUATIONS

Courtney will send you a link and this is where you complete and submit.





# Ahehee (Thank you!)

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