

YTWC Monthly Meeting Notes – January 18th, 2021

Attendees:

Name	Organization	Role
Amanda Ammon	Yurok Tribe Office of Self-Governance (OSG)	Assistant Director
Annelia Hillman	Yurok Temporary Assistance for Needy Families (TANF)	Project Outreach Manager, Meeting Facilitator
Anthony Ulmer	Yurok Tribal Child Welfare & Behavioral Services	Youth Prevention Specialist
Ashley Gephart	Humboldt County DHHS – Public Health	Program Coordinator
Aurelia Robbins	Yurok Health & Human Services (YHHS) – Youth Suicide Program	Youth Prevention Specialist, Noh-sue-no-wow’ program
Caleb Hare	Bear River Victim Services	Victim Advocate
Casey O’Neill	Yurok Tribe Indian Child Welfare Act (ICWA)	Community Navigator
Cecilia Moore	YHHS	Prevention Specialist, Noh-sue-no-wow’ project coordinator
Daniel Norton Luna	Yurok Tribal Court (YTC)	Community Outreach Specialist
Elizabeth Thurston	United Indian Health Services (UIHS)	Health Promotion Education Specialist
Erin Butler	YTWC	AmeriCorps VISTA
Ethan Makulec	Yurok Tribe Wellness Coalition (YTWC)	AmeriCorps VISTA, Notetaker
Hannah Lippe	Providence St. Joseph Hospital, CARE Network	Licensed Clinical Social Worker
Hollie Strahm	Yurok Tribe Public Health Department (YTPHD)	Public Health Officer
Holly LaRocque	UIHS	Health Promotion & Education Specialist
Holly Reed	Yurok Opioid Affected Youth Initiative (YOAYI)	Prevention Specialist
Kese McQuillen	Yurok Social Services	Youth Prevention Specialist
Kim Mamaradlo	YTC	Community Outreach Specialist
Lana McCovey	Yurok Tribal Council	Council Member
Lau-Lei Lawrence	YOAYI	Prevention Specialist
Lila Knott	YTC	Community Outreach Specialist
Lizzie Moore	YTPHD	Intern
Lori Nesbitt	YTC	Opioid Program Manager
Madison Green	Client Services Department (CSD)	Director
Marie Decora	YTC	Wellness Outreach Counselor
Matthias Kassahoun Spero	National Park Service – Safety, Health, & Wellness program	U.S. Park Ranger
Melinda Escarcega	YTC	Adult Wellness Case Manager
Naome Workman	Del Norte County Behavioral Health	Program Coordinator
Patti Lewis	Yurok Health & Human Services (YHHS)	COSSAP Manager for JJFWC
Rebecca Shufflin	UIHS	ICWA manager
Rob England	UIHS	Interim Tribal Public Health Director
Roberta Chavez	YTC	Court Social Worker
Robin Johnson	UIHS	Specialist
Shayna McCullough	YTC – Youth At-Risk Program	Youth Case Worker
Shirley Cain	JPS International	Unspecified
Tamara Honrado	YHHS	Deputy Executive Director
Theresa McQuillen	YHHS	Prevention Specialist

Program Updates

- Patti Lewis – Comprehensive Opioid, Stimulant, and Substance Abuse Program (COSSAP)
 - COSSAP is a grant providing services to families with AOD problems, and those who have had children removed by the state. Working with tribal and state courts.
 - Focused on children and mothers who face issues due to drug use by pregnant mothers.
 - * Drugs supplied through umbilical cord to infant, causing babies to be born going into painful withdrawal for 1 week to 6 months: Neonatal Abstinence Syndrome (NAS). This can lead to long-term developmental and health problems.
 - * When children test positive at birth for drugs and alcohol, they are removed from parents 99% of the time.
 - Program goal: Transport parents to appointments & pre-natal/parenting classes, with goal of keeping parent off drugs while pregnant so baby is born healthy and not taken away.
 - * This program is preventative rather than punitive, and gives mothers a chance to keep children healthy and in their care
 - * Program open to people even if they are already in other wellness or MAT programs. Working with wellness court to that effect.
 - Hannah Lippe: Is this program replacing the ek-oh-nor program, is that program still going? Where should people be referred to? Both?
 - * Patti Lewis: Not replacing ek-oh-nor, a different program with its own grant funding.
 - * Alita Redner: ek-oh-nor is still taking referrals but bridging to other programs as well. Including Patti's COSSAP program, ICWA, suicide prevention programming, etc.
 - * Annelia: We're going through a restructuring in tribal departments that is still in progress which will effect and expand how much some programs interact.
 - Lila Knott: is this program encouraging addicted mothers to go into MAT? Or servicing pregnant mothers who are already on MAT?
 - * Patti Lewis: This program is focused on pregnant mothers, whatever other programs they are or are not on. Many cases already on the radar of CWS, so the main goal is to stop things before it gets to the point where a child would be removed by CWS.
 - Daniel Norton Luna: Is there a substance being focused on? Stimulants? All Substances?
 - * Patti: This particular grant is specifically for stimulants, but program also focused on marijuana, alcohol, and other substances as well.
- Lori Nesbitt – Tribal Court
 - Youth programs
 - * We have a teen court grant with Dale Moon, who is trying to get a juvenile justice group going with the youth. Joanne Carter comes in to help with IEPs, Eleonor Beall is working with juveniles who are in the justice system, Daniel's grant focused on victims of opioids and Kim Mamaradlo just joined as a new employee last week.
 - Adult programs
 - * Marie decora, Melinda Escarcega, and Jessica Wolsfeld working on wellness program grants, with one vacancy open.
 - * Two COSSAP grants working with parents through social services in Humboldt and Del Norte to get them to treatments like MAT.

- * In Humboldt, Amber miller and Pepper running a diversion program, with one vacancy open.
- * Veteran's grant led by Jessica Wolsfeld, victims of assault run by Vicki Bates just got approval to get house in Del Norte, Child support program managed by Jennifer Burgess, and legal assistance directed Angi Cavaliere.
 - Parents could use assistance filling out paperwork. We ran into situations this week about forms not being filled out properly, having someone who can help people with that would save tribal people a lot of heartache
- Aurelia Robbins - Noh-sue-no-wow' Youth suicide program
 - Serves youth between ages 10-24 and their families with suicide prevention, case management, education, cultural enrichment activities.
 - Suicide vs. suicide attempt: Successful vs. unsuccessful action taken to deliberately cause oneself to die.
 - * Risk factors: prior attempts, mood/mental disorders, adverse family/childhood experiences, relationship problems, historical trauma.
 - * Warning signs: Increased alcohol/drug use, social withdrawal, reckless behavior.
 - * Emergency signs: giving possessions away, collecting/saving pills, saying goodbye, buying a gun, tying up loose ends.
 - What does support look like? Talk openly and honestly, ask uncomfortable questions about suicide plans, don't argue about whether suicide is wrong or right, remove drugs & guns, be patient.
 - In 2015, Yurok declared a state of emergency due to a suicide epidemic in Weitchpec.
 - Goals: suicide prevention education to all youth and community members, provide QPR trainings to every Yurok tribal employee, increase awareness of resources, have a comprehensive suicide system of care accessible to all native youth.
 - * Develop infrastructure to serve at-risk youth, increase tribe's capacity to provide timely care & referrals, develop youth suicide plan, implement evidence based practices for screening& assessment.
 - Services provided: suicide prevention intervention, grief groups, cultural enrichment activities, case management outreach and stigma education, crisis response.
 - The prevalence of depression and other mental health concerns exist at disproportionality higher rates for both urban and reservation AI/AN communities.
 - * Second leading cause of death ages 15-24 and 25-34.
- Anthony Ulmer – YHHS Youth opioid response
 - Goal is to reduce opioid/stimulant use among youth ages 12-24 through increased access to services like prevention education, MAT, comprehensive case management, etc.
 - Factors that contribute to increase risk among native American communities: historical trauma, poverty, discrimination, lack of health insurance, etc.
 - What are opioids? Natural or synthetic chemicals that bond to opioid receptors in the brain to produce euphoric and pain-relieving effects.
 - * Opiates: heroin, morphine, codeine. Opioids: all natural or synthetic opioids
 - * Can cause drowsiness confusion, nausea, constipation, euphoria, slowed breathing.

- * Continual opioid abuse can result in physical dependence, addiction, overdose, or death. If use is reduced or stopped then withdrawal symptoms occur, since the body is so used to opioids being provided and stops producing its own natural opioids.
 - Withdrawal symptoms: muscle and bone pain, diarrhea, insomnia, etc.
 - MAT treatments, such as suboxone, methadone, or naltrexone are available and show positive results for social functioning, addiction, health, etc.
- What are stimulants? Caffeine, cocaine, meth, nicotine, prescription stimulants.
 - * Can produce temporary increase in activity in the brain, short term euphoric/energetic effects, suppressed appetite, increased sexual desire, opened breathing passages.
 - * Can as well cause: extreme weight loss, reduced sexual functioning, cardiovascular damage, chronic exhaustion, muscle deterioration, paranoia, depression, and hallucinations/delusions.
- Evidence based treatments for stimulant use disorder: motivational interviews, contingency management, community reinforcement, cognitive behavioral therapy.
- Contact aredner@yuroktribe.nsn.us or call for more information.
- Lau-lei Lawrence & Holly Reed – Yurok Opioid Affected Youth Initiative (YOAYI)
 - Holly works in north and east area, Lau-lei in south and north areas.
 - High prescription rates created crisis in Yurok country, tribal populations at a rate higher than Humboldt county, which is already 2x higher than national average.
 - Opioid Use Disorder (OUD) hurts families, causing child removal, truancy, fights, etc.
 - * OUD causes distress and impairment due to psychological and physical dependency brought on by the quick onset of tolerance and withdrawal symptoms.
 - When a parents has an OUD it effects the entire family, dependence on substance does not allow time or money for good parenting, and child can feel neglected/abandoned, and this may lead to youth substance use.
 - Targeted program participants: youth 12-24 affected by opioid crisis, particularly those likely to be involved in the juvenile justice system or chronically absent/truant youth.
 - Seek to improve public safety and youth/family outcomes for those effected by OUD by using data driven, culturally congruent responses.
 - Lacking OUD data and resources regarding youth OUD, multi-agency collaboration, etc.
 - Goals: reduce youth truancy, physical fights, drug use, crimes, and victimization.
 - * Objectives: Develop tribal action plan, develop screening, diversion, & wraparound programs, develop & implement tribal-county joint programs, gather and share data.
 - * Collaborating with: opioid task force, OJJDP, TANF, ICWA, Yurok Wellness Court, Yurok Tribal Police, Del Norte & Humboldt Superior Courts, Schools & SARB.
 - Services Offered: SBIRT, educational workshops, youth opioid summit, weekly youth groups and substance education groups, fitness activities and nutrient education, cultural activities, life skills development, support for the family, Narcan trainings, and more.
 - * ‘EEE youth group: 6:30-7:30pm on Wednesdays for all Yurok youth ages 12-24, with \$50 monthly incentive.
 - Shirley Cain: I love these cultural activities, especially the willow picking, thank you!
- Rebecca Shufflin – Yurok Tribal Welfare, ICWA

- ICWA team provides a combination of prevention services, referrals, and advocacy for families experiencing Child Welfare involvement and otherwise.
 - * Currently have ~185 open cases, though this number changes daily
 - * Family reunification, family maintenance, voluntary services
 - * Collaborates with Tribal TANF and behavioral health.
- Bringing Families Home program works in collaboration with Humboldt DHHS to help reduce number of families in child welfare system experiencing homelessness, increase family reunification, and prevent foster care placements.
 - * Provides housing first services including rapid rehousing, housing vouchers, etc.
 - * If you know of a family meeting criteria for homelessness, contact, us!
- Title IV-E program, managed by Valerie Ryles
 - * Works to identify cases that could be potential Title IV-E transfer cases that can be switched from Humboldt/Del Norte court to Yurok tribal court.
- Daniel: do you have brochure/flyers we can send out to coalition members?
 - * Rebecca: Yes, we have one that is currently going through the approval process.
- Shirley Cain (in chat): another resource for drug overdose - opioidmisusetool.norc.org

Public Health Department – Lizzie Moore

- Public health department was formed recently, specifically in relation to covid
 - COVID not slowing down, but our response to it is stabilizing, so department is trying to figure out what the next issues to focus on should be.
 - Sending a survey to members of the YTCW to ask what issues they see as most important
 - * Start on new issues, or help with existing projects? Upstream or downstream issues?
- Lori Nesbitt: A suggested topic would be basic health education for everybody, since people are missing doctors appointments, check-ups, and lacking overall health.
 - Lizzie: We can add a basic/general health education option.
- Annelia: Is this decision about where funding will be directed to do these projects, or is this choosing the health departments focus going forward?
 - Lizzie: Choosing the health department's focus going forward. Though, where funding is directed/what grants are available will effect this process and which projects are pursued.
- Lizzie: diseases (liver disease, diabetes, etc.) are downstream issues related to upstream causes (food sovereignty), so hard to say if they should be focused on independently or not.
 - Annelia: It's all interconnected so you can't put one in front of the other, but education about diseases like these is definitely needed. Also, developing triage and immediate crisis resources would definitely be useful as another good option.
 - Lori: Triage/crisis resources are services we don't have at all currently and people need.
- Casey O'Neill: Poverty underlies all these issues, so that should be a potential focus issue.
 - Lizzie: We can add that as an issue, though it is both an upstream and downstream issue, since economic hardship is a condition surrounding all these issues.
- Daniel: environmental/living space cleanliness, messy homes/property can be mentally taxing to live in and clean, could be another potential issue to help with.

Yurok Tobacco Wellness Project Presentation – Annelia Hillman

- CA Tobacco Control Program Grant: 5-year grant agreement until 2025, ~ \$1 million, 15 tribes funded, focused on culture as prevention, upstream causes, and environmental change.
- Native people have the highest smoking rate (28.2%) compared to other ethnic groups in CA and US, cancer is 2nd leading cause of death among native community
 - Native American youth have the highest smoking rate of any racial/ethnic group.
- Honoring of traditional tobacco: tobacco has long history of use in Yurok ceremonies and prayers, hope to educate people on difference between sacred commercial tobacco use.
- Project goals: reduce secondhand smoke exposure, prevent youth tobacco use, increase traditional tobacco awareness, decrease tobacco litter & increase tobacco litter cleanups.
- Objectives 1 & 2: Tobacco-free workplaces and tribal events (2020-2022)
 - Updating and formalizing workplace and tribal event tobacco-free policies to include vape products, cannabis, smokeless tobacco, but would not apply to traditional tobacco.
- Commercial Tobacco definition: any product made or derived from tobacco, or that contains nicotine intended for human consumption whether inhaled, smoked, chewed, sniffed, etc.
 - Any electronic smoking device that delivers nicotine or other substances to a person.
 - Any component, part, or accessory of either of the above, whether or not it has nicotine.
- Main activities: community education and public opinion surveys, policy workgroup and development, policy presentation and potential policy adoption.
 - Tribal leader interviews in different sectors, community surveys, etc.
- Community support for indoor tobacco-free policy: 91% moderately or extremely supportive.
- Tobacco-free policy committee includes: council member, HHS, UIHS, public safety, etc,
- Yurok tobacco-responsibility Act covered areas
 - Indoor: government buildings, hotels, tribal casino, bars, stores, etc.
 - Outdoor: tribal events/worksites, athletic events, dining areas, amphitheater, etc.
 - Beaches, rivers, campsites: smoking individual must be 30 feet away from others.
- Objective 3: Yurok Youth Coalition
 - Combined effort with tobacco program and opioid crisis programs
 - ‘EEE wellness group: Youth advocacy leadership trainings, youth outreach, etc.
 - * 6 weeks each of activities on belonging, interdependency, mastery, & generosity.
- Objective 4: Commercial Tobacco Waste
 - Tobacco butts account for 35% of CA litter, cuts down 6 million trees per year.
 - Litter cleanups are an opportunity to get youth involved.
- Traditional tobacco will be excluded from tobacco restrictive policies.
- Long-term hope is to continue these efforts through to 2030.
- Youth coalition meeting Wednesdays 6:30-7:30, changed from 5:30
- Rob England: we have recently updated our definition of tobacco in the organization.

Next Meeting: February 15th, 2022, 1 – 3pm