

# Meth conference focuses on Tribe's 'full-phase' approach

More than 100 came to Grand Ronde to share ideas that are working to combat use of highly addictive drug

By Ron Karten

Smoke Signals staff writer

To deal with the local meth epidemic, the Confederated Tribes of Grand Ronde is doing several things right, including reaching out to partners in other Tribal communities and beyond them as well.

More than 100 people attended and almost two dozen speakers were featured during the two-day, Tribe-sponsored conference "Tools for Healing and Meth Prevention" held Sept. 13-14 at Spirit Mountain Casino.

**"We know meth users as young as 8 years old."**

~ Mike Stafford,  
Member of the Oregon  
Criminal Justice Commission  
and Governor's Meth Task Force

"We set it up as a conference to get information to the community and the partners we work with," Dave Fullerton, director of Social Services for the Tribe and conference coordinator, said.

"It's a full-phase approach that deals with enforcement, treatment, prevention and recovery. If you leave any of these out, there will be a lapse in the program. The big thing now is to bring people together to learn from each other."

Of the groups that need to be on board to make a "full-phase" approach work, schools are "the resistance point," said Mike Stafford, a member of the Oregon Criminal Justice Commission and staff member for the Governor's Meth Task Force.

"(Schools) say it's not a problem, and when you consider that the average person using meth is a seventh-grade dropout, you can see why the schools would say that," Stafford said.

The prevention/education component has to be taught in grade schools. Hardcore meth users are already gone by middle school, he said.

"We know meth users as young as 8 years old," Stafford said.

At every stage, the battles against meth abuse have run up against limitations.

"They're getting their children back the same day they get out," said Trish Jordan, board member and program coordinator for Portland-based Red Lodge Transition Services, which serves Indian women leaving incarceration for meth use. "They can't even take care of themselves (at that point)."

Recovery is also hampered because many meth addiction programs allow from three to six months for recovery when experience is showing that meth users need to be clean for six to nine months before treatment will have a chance of success.

Another recovery limitation involves Veterans Affairs hospitals, which won't take a patient while he's using, said Ray Lewallen, operations manager for the Soldier Reintegration Team serving mostly Oregon National Guard patients. He attended the conference to look for empty beds, like some of those at the Tribe's six-person Meth Transition Center.

"Hopefully, the beds here will help," Lewallen said.

Connections, or the lack of them, among the

different participants in the battle against illicit methamphetamine use ranked high on the list of needs that the conference addressed.

"The reality," said Joe Martineau (Minnesota Chippewa Tribe, Fond du Lac Reservation), Post Treatment Services coordinator for the Tribe, "is we're all connected."

The conference directed the discussion toward resources available from involved agencies and assessments about how those resources are being used.

To make a change, said Detective Mike Holsapple, lead investigator of the Polk County Interagency Narcotics Team, "all the components of detection, education and community" must be working together.

Addiction, once treated as a discrete group of acute (one-time) problems today is being approached as a chronic (never-ending) problem.

This treatment change requires researchers to fight risk factors (broken families, negative experiences, historical trauma) and provide protective factors (reinvesting in culture).

Risk factors are harder to root out. "It's easier to mobilize people to protect than to eliminate risk factors," said keynote speaker Dr. Dale Walker, director of the Center for American Indian Health, Education and Research at Oregon Health and Science University.

National Native American gang specialist Chris Grant provided input on the Grand Ronde area's fight with gangs. He described the connection between gangs in a community and drugs. He also led a training session for the Spirit

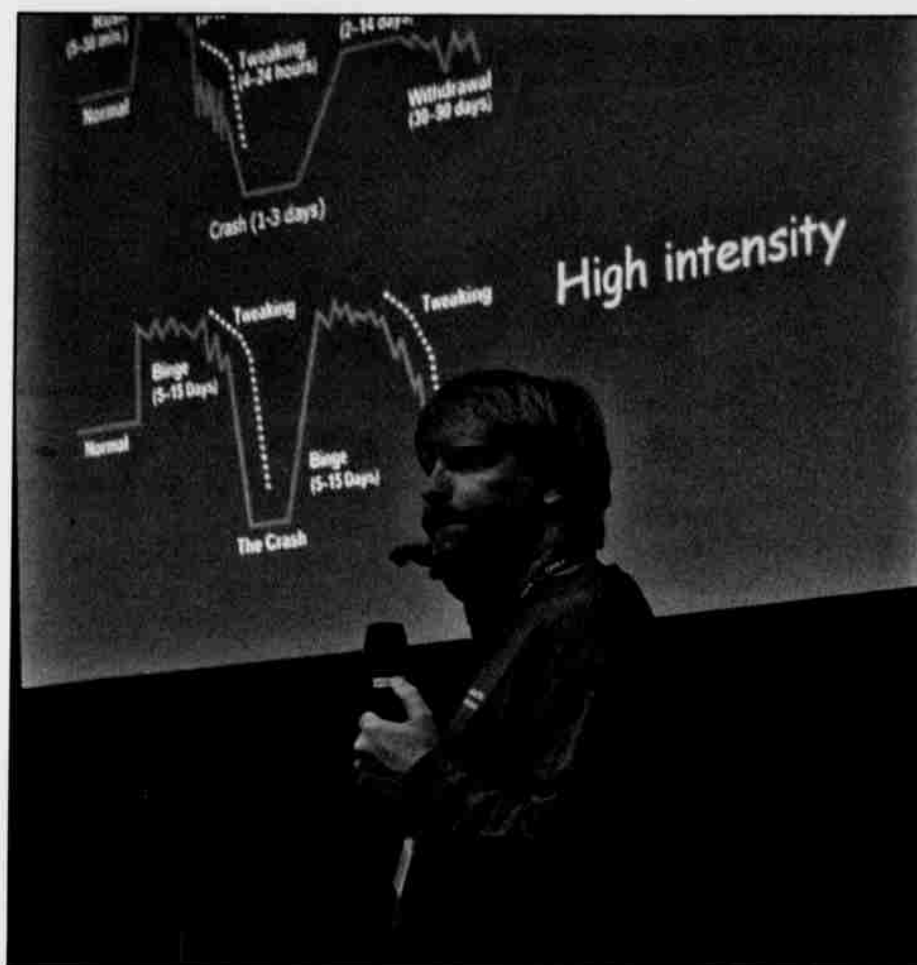


Photo by Ron Karten

**Rob Bovett, legal counsel for the Oregon Narcotics Enforcement Association and author of Oregon's meth lab chemical control laws, presented the conference wrap-up, describing the wide-ranging solutions available when communities, social service and police agencies work together.**

Mountain Casino Security Department. (For more on Grant, see the *Smoke Signals* profile in the June 1, 2007, issue).

The conference featured dozens of experts from the fields of education, treatment, law enforcement and community, including a number of former meth addicts. The conference offered keynote speakers and break-out sessions focusing on the best practices in each of these areas.

Meth, according to the Office of National Drug Control Policy, is a highly addictive stimulant that can be injected, snorted, smoked or swallowed. Meth users feel a short, intense "rush" when the drug is initially taken. The immediate effects of meth include increased activity and decreased appetite.

However, long-term meth abuse can cause addiction, anxiety, insomnia, mood disturbances and violent behavior. Additionally, psychotic symptoms such as paranoia, hallucinations and delusions (such

as the sensation of bugs crawling under the user's skin) can occur. The psychotic symptoms can last for months or years after meth use has ended, the federal agency wrote on its Web page.

Of all American subgroups, Indians show the highest percentage in meth abuse, Walker said, with 74 percent of Indian Country problems stemming from it. At the same time, he said, the Grand Ronde approach to fighting meth use is a good model for others to use.

The Tribe has modeled "full-phase" meth fighting tools as part of its effort, according to Walker, by entering into statewide efforts, reaching out and partnering; partnering within the Tribe as well, spreading the word on meth education throughout the Tribe; and showing its willingness to work with non-Tribal support systems within the community.

"We've been putting it out there," said Fullerton, "that we want to work together. We're not going to resolve it alone. We're modeling the behavior that we're looking for (throughout the community)."

The conference was largely funded by the Administration for Native Americans. A \$598,000, two-year grant also funded the start-up of the Meth Transition House and Post Treatment Services program. ■



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