



Behavioral Health Department

MH & AODA Outpatient • CCS • CST • TOR • RCTREE • CTAS
Native Connections • Noojimo'ewewin • MWC



August 2021 NEWSLETTER

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~Boozhoo from the Behavioral Health team~

We are excited to bring you news that you may find helpful. We hope to be able to provide information that you can use or share with others if you feel you are currently experiencing hard times, feeling down, or may not feel like you have anywhere to go.

Please use this newsletter as a resource for you to know you are NOT alone, and there are services that are here to help right in our own community!

***During Manoomininke-giizis (August),
we are highlighting
International Drug Overdose Awareness Day.***

International Drug Overdose Awareness Day is August 31!

article by Justin Hansen, Wisconsin Certified Peer Specialist

There is no doubt that drug overdose is an uncomfortable topic to talk about but it is important to bring this issue out into the light. Substance use disorder **is a mental health illness** and, as such, should be treated with the same compassion as cancer or diabetes. The more we know and understand, the more empowered we are to improve or save the lives of our, friends and community members. Then we can all heal together!

Let's start by defining what an overdose is. An overdose means having more of a drug (or combination of drugs) than your body can cope with. There are a number of signs and symptoms that show someone has overdosed, and these differ with the type of drug used. All drugs can cause an overdose, including prescription medication prescribed by a doctor. It is important to know the right amount and the right time to take your medication. It is also vital to know what drugs should not be mixed, and to seek help if you feel you are not in control of your drug use.

Many of us may have had our lives affected by an overdose, either personally, by a family member, or a close friend. Overdoses are preventable and all people can become overtaken by an overdose, not just people suffering from a substance use disorder. Imagine you've been prescribed an opioid by a doctor for pain following a medical procedure. The instructions say take twice daily for pain, but you can't remember if you've taken it, so you decide to take one. Turns out you already have taken your morning dose and now you start feeling different. We are all susceptible to an overdose if we do not following the proper instructions for medications.

Continued on page 2...

Continued from page 1...

Now for the more controversial aspect of overdoses and drug use. This is not meant as a free pass or an excuse to use drugs, and I DO NOT in any way condone the misuse of drugs. Please keep an open mind while reading this section and imagine that a loved one or someone you care about is suffering from a substance use disorder. If an individual chooses to use drugs and/or is stuck in their addiction, choosing to take steps to be safe and avoid an overdose seems like a good idea. The idea of harm reduction was a hard concept for me to grasp, but I looked at it from the parent perspective and my own struggles and knowledge with alcohol use disorder.

Harm reduction is a set of practical strategies and ideas aimed at reducing negative consequences associated with drug use. I'd rather the person using drugs be safe and hopefully at some point realize that they want a different life and decide to try sobriety instead of dying from an overdose. From my own struggles and time in recovery, I've learned that we can't force someone into recovery, but rather help them when they're ready for help. I won't get into the specific ways to stay safer while using substances, but the most effective way to counteract an opioid overdose is with the use of naloxone. It takes 15 minutes to learn how to administer naloxone. It takes 15 minutes to learn how to save someone's life from an opioid overdose. I know that some think this is the proverbial parachute for those who use opioids, but maybe it is a wakeup call for that person. Maybe the person that was saved using naloxone will decide that it's time to change. Go back to the beginning of the paragraph and imagine you were able to save your daughter or son from an opioid overdose using naloxone. The Noojimo'iwewin Center hosts a monthly Narcan (naloxone) training. Please contact me if you are interested in taking this training. 715-779-3707 ext. 2397 or email jhansen@redcliffhealth.org.

I hope you kept an open mind while reading this and I hope I maybe changed some minds. At the very least, I hope the seeds of recovery were planted.

Where there is life, there is hope!

Learn to recognize the signs of overdose—you could be a lifesaver!

RECOGNISING & RESPONDING

OPIOID OVERDOSE

SIGNS OF OVERDOSE

- No response to stimuli
- Shallow, laboured or no breathing
- Cannot be woken up
- Snoring or gurgling
- Blue/grey lips or finger tips
- Floppy arms or legs

HOW TO RESPOND

- Check for danger
- Call an ambulance and stay on the line
- Put the person in recovery position
- If you have access to narcan/naloxone, assemble the mini-jet or ampoule and inject into thigh or upper arm (if you have a nasal spray, spray into one side of the nasal canal)
- Provide CPR
- If there has been no response within 3-5 minutes, and if you have it available, administer another dose of narcan/naloxone

TIME TO REMEMBER. TIME TO ACT.

31 AUGUST

INTERNATIONAL OVERDOSE AWARENESS DAY

RECOGNISING & RESPONDING

STIMULANT OVERDOSE

SIGNS OF OVERDOSE

- Hot, flushed or sweaty skin
- Headaches
- Chest pain
- Unsteadiness
- Rigid muscles, tremors or spasms
- Uncontrolled movements or seizures
- Difficulty breathing
- Psychotic symptoms in individuals with no prior mental illness
- Severe agitation or panic
- Altered mental state, such as confusion or disorientation

HOW TO RESPOND

- Check for danger
- Call an ambulance and stay on the line
- Reassure the person and make sure they are comfortable
- If overheating, try to loosen outer clothing, or put a wet towel on the back of their neck or under their underarms
- Check for a response
- Put person into recovery position and monitor

TIME TO REMEMBER. TIME TO ACT.

31 AUGUST

INTERNATIONAL OVERDOSE AWARENESS DAY

RECOGNISING & RESPONDING

ALCOHOL OVERDOSE

SIGNS OF OVERDOSE

- Confusion
- Loss of co-ordination
- Vomiting
- Seizures
- Irregular breathing (a gap of more than 10 seconds between breaths)
- Slow breathing (less than eight breaths per minute)
- Pale or blue tinged skin
- Low body temperature (hypothermia)
- Unconsciousness or passing out

HOW TO RESPOND

- Check for danger
- Call for an ambulance and stay on the line
- Stay with them
- Keep them warm
- If they are unconscious, put them in the recovery position and check that they are breathing (don't leave them on their back)
- If they are awake, try to keep them in a sitting position and awake
- Give CPR if they stop breathing before ambulance arrives

TIME TO REMEMBER. TIME TO ACT.

31 AUGUST

INTERNATIONAL OVERDOSE AWARENESS DAY

Boozhoo from Native Connections!

Native Connections helps Native American communities identify and address the behavioral health needs of

Native youth with an emphasis on suicide prevention and AODA misuse reduction among youth 0-24 years of age and their families. To contact staff: Mark Gokee—Phone #: 715-779-3741 EXT: 2409 E-mail: mgokee@redcliffhealth.org and Mark King – Phone #: 715-779-3741 EXT: 2414 E-mail: mking@redcliffhealth.org For more information, go to <http://redcliffhealth.org/what-we-do/behavioral-health/native-connections/> .

Firstly, we'd like to thank all the participants, staff, and volunteers who have been involved in the activities that have been put on over the last few months. Emerging from the lockdowns and being able to reconnect to our language, culture, and each other through events like language camp, has been a healthy and healing change of pace from last year.



Women's Equality: Beyond One Day

by Mark King

It was 101 years ago, on August 26th, 1920, that the Nineteenth Amendment was adopted into the United States Constitution, which allowed women the right to vote. It wasn't until the same day in 1972 that President Richard Nixon first proclaimed the first official Women's Equality Day, designated from the Nineteenth Amendment. Even though August 26th celebrates a historical mark regarding the rights of women, we have yet to fully achieve sex and gender equality, especially on a worldwide scale. Even in this country, most people think that men and women have equal rights under the law, and this isn't true. The Equal Rights Amendment (ERA) was meant to give equal protection under the law, but there is still an ongoing battle for its implementation into the Constitution. For more information about the ERA, visit this website https://www.equalitynow.org/era_explainer.

I think it's important for society to know the impact that women's equality has on our culture and vice versa. Not many people seem to recognize the difficulties that women experience in society today. Things such as the lack of laws guaranteeing equal pay and equal pension, and bad laws surrounding parental leave make it difficult for equality to be justified or commemorated by a single day.

Even for myself, growing up in a masculinized community within Ashland, WI and living with my single mother through my adolescent years, it took me so long to realize just how inaccurate my perceptions were when it came to gender. As I grew older, I started to notice subtle power moves in media, particularly in rewatching older films I used to enjoy. In a lot of media today, women are often portrayed either sexually, as being too sensitive and "weak", being too opinionated, or as having a strong dependency on others. These are simply often-repeated stereotypes about women that contribute to inequality.

The truth is that women are just as powerful, just as intelligent, just as able, and just as courageous as men. They deserve to have every equal right as that of men, no matter what the environment or situation is. They deserve equal opportunities, justice, and they deserve to be heard. Women provide us life, and for that we should celebrate their lives and equality every day and not just on a single day.

Sources: https://en.wikipedia.org/wiki/Women%27s_Equality_Day
https://www.equalitynow.org/era_explainer

RC TREE Program



The Red Cliff Youth and Family TREE Project or RC TREE for short, is a program that can offer substance abuse services to individuals who are in the age range of 12 to 25 years old. This age group is particularly vulnerable to substance use, as their brains are still in the process of developing the functions responsible for decision making and they are often more reliant on basing actions off their thoughts and feelings to situations. Certain drugs affect a person's dopamine levels and when dopamine is highly produced in the body, it results in the individual feeling sensations of pleasure and happiness. Due to the emotions that can be felt after a person first engages in substance use, this could result in that individual continuing forward with substance use behaviors, in hopes of trying to experience the same feelings they felt when they had first begun their drug use.

In joining the RC TREE project, we have a variety of treatment and recovery services that can be made available to clients. To determine which services will be the most beneficial for an individual, RC TREE uses service assessments as a way to find out about a client's substance use behaviors and the information gathered can be used to develop a service plan for them. The service assessments themselves are interviews asking about the frequency of a client's substance use behaviors and asking about other factors like living conditions and current physical health, which could be reasons as to why the person struggles with substance use. As a client's time in the program progresses, more service assessments are conducted to help adjust the service plan as needed to ensure the services provided to the individual are continuing to be of help to them, in their effort to reduce their substance use behaviors. [Due to the important information the service assessments collect on a client for the RC TREE providers to use in deciding what a client's service plan will look like, incentives for completing the service assessments are offered to clients. The only exception is the intake service assessment, as the interview is a part of the program's client enrollment process.](#)

For more information on the RC TREE project or any of our services, you can call (715)-779-3741

In honor of International Drug Overdose Awareness Day, which will be occurring on August 31st, here's a chart from the National Institute on Drug Abuse (NIDA) of statistics on fatal drug overdoses experienced by youth in 2019. With death being the biggest impact of a drug overdose, sharing these numbers gives an idea of how many adolescents and young adults are at risk of potentially dying from a drug overdose.

Drug Overdoses in Youth

Drug Overdoses, Ages 15-24	Number of Deaths, 2019
Total Overdose Deaths	4,777
Female	1,459
Male	3,318
Alcohol ¹	109
Cocaine	850
Heroin and other illicit opioids ²	3,391
Marijuana	There are no reports of teens or young adults dying from an overdose of marijuana alone. But there are reports of individuals who have sought treatment in emergency rooms, reporting uncomfortable side effects after consuming high THC levels in smoked marijuana or marijuana edibles.
Prescription Drugs: Benzodiazepines (e.g. sedatives) Common Prescription Opioids (pain relievers) ³	727 672
Synthetic Cannabinoids (K2/Spice)	Nationwide numbers are not currently available.

Noojimo'iwewin Center

The Noojimo'iwewin Center Certified Peer Support Specialists are back in their offices at the Nooji Center, 37450 Water Tower Road! We are currently hosting client peer support appointments Monday through Friday, 8:00am -4:30pm and in-person outdoor recovery meetings (listed below).

Services are available for local Tribal and non-tribal community members.

All our staff can be reached by phone and email.

Please call **715-779-3707** and extension, or email staff:

Ed Metelica, Peer Specialist, Ext. 2451 or email emetelica@redcliffhealth.org

Justin Hansen, Peer Specialist, Ext. 2397 or email jhansen@redcliffhealth.org

Cassie McCrow, Nooji Project Coordinator, Ext. 2450 or email cmccrow@redcliffhealth.org

The Noojimo'iwewin Center is a safe, sober and welcoming drop-in center and community space.

Noojimo'iwewin Center Recovery Meetings

Summer / Fall 2021

Tuesday - Red Cliff Men's Gathering 6:00PM

Thursday - Nooji Narcotics Anonymous 10:00AM

Friday - Nooji Alcoholics Anonymous 6:00PM

All meetings are in-person and held outside with COVID precautions in place. If it is raining, the meeting will be cancelled.

If you are not feeling well, please stay home. If you have not had both COVID vaccinations, you will be required to wear a mask (masks provided).

Thank you for helping to keep Red Cliff safe!



Noojimo'iwewin Center, 37450 Water Tower Rd, Red Cliff, WI

For more information call 715-779-3508



Noojimo'iwewin & Minobimaadiziwin Gitigaanin Farm Work Together for Recovery!



The garden is finally taking off. It seemed like it took forever for the veggies to start growing, due to my late planting. I see the Farm's plants and these are so far behind, but they are now starting to flourish. It takes patience and

commitment to grow plants. There's that period of time after transplanting that they just sit there and the roots grow. That is invisible to the eye. You plant the seeds in the early spring indoors and they take off and start growing and once they go in the ground they have a period of transition where growth seems to stagnate. I experienced this stagnation in my recovery and I see it in others. The initial excitement of early recovery wears off and life starts and there's a period of "is this all there is?", but it takes patience and commitment to get through that period. Many doors will open in your life while in recovery if you let them. More will be revealed!

RCCHC Mental Health & Substance Abuse Services

The RC Tree, CCS, AODA and Mental Health Outpatient Services are all currently accepting referrals. We provide telehealth services and are opening back up to face-to-face appointments.

To begin the AODA inpatient treatment process, please call Mishomis Wellness Center (MWC) and complete an intake. You will then be assigned an AODA counselor and begin the process for inpatient treatment. Due to limited treatment centers available because of COVID-19 and processing required paperwork, it takes nearly two weeks to get a treatment date.

Relapse Prevention Support is offered daily virtually or in-person.

Intoxicated Driver's Program (IDP) is available for those seeking those services.

Contact Patsy Gordon (MWC) for referral to MH and/or AODA services at **715 -779 - 3741**.

Important Addresses & Phone numbers

Behavioral Health Support Line M-F 8-4:30 p.m.

715-779-3509

Mental Health Crisis Line 24 hours

1-866-317-9362

National Suicide Prevention Lifeline

1-800-273-8255

Or text "LIFE" to 61222

Red Cliff Community Health Center 36745 Aiken Road

715-779-3707

Noojimo'iwewin Center 37450 Watertower Road, Bayfield

715-779-3707 Ext. 2450, 2451, 2452 or 2397

Mishomis Wellness Center-37390 North Bradum, Bayfield

715-779-3741

Red Cliff Washburn Behavioral Health -409 W Bayfield St 715-373-0639

name it 2 tame it

shame



If you have ever seen the movie "UP" you probably know what shame is. Doug the dog is looked down upon and made to feel he is not as good as the other dogs and is pushed away from or out of the pack. Doug seems sad, lonely and hurt by this shaming. The pack even makes Doug wear "the cone of shame" so everyone will see Doug is being shamed.

In real life, the cones of shame we put on people are not so easy to see. They can come in the form of stigma, gossip, unwelcoming looks, avoidance, exclusion, labeling/ name-calling, judging, and many other things. Shame drives disconnection and feelings of hopelessness. Shame prevents people from seeking the help that they need.

Learning to identify shame and the stigmas that cause it are first steps to ending it in our community. Call out shaming when you see it and make the choice to not engage in shaming others.

To learn more about shame and get tips on how to stop it:

<https://www.northernhealth.ca/health-topics/stigma>

and

<https://brenebrown.com/blog/2013/01/14/shame-v-guilt/>

and

https://www.ted.com/talks/brene_brown_listening_to_shame

and

<https://drugabuse.com/addiction/stigma/>