CATHY There's a memorial at the offices of the US Drug Enforcement Administration unveiled yesterday that includes
WURZER: photos of those who've died of fentanyl overdoses in this country. Among the faces is Minnesota's own Prince, who, as the caption on his photo says, will be "Forever 57," the age he was when he was found dead of an overdose at his Paisley Park studios nearly seven years ago. His cousin Charles Smith submitted Prince's photo for the memorial.

In one year, from 2020 to 2021, 978 Minnesotans died of opioid-involved deaths. That's an all time high. Know that the opioid epidemic is not affecting all groups of Minnesotans equally. A proposal presented to lawmakers this month from the Minnesota Department of Human Services takes aim at these racial disparities.

Eric Grumdahl from the State Department of Human Services is on the line right now. He's the Assistant Commissioner of the Behavioral Health, Housing, and Deaf and Hard of Hearing Services Administration and helped put together the equity proposal. Commissioner, welcome.

ERIC Thanks so much. Appreciate the opportunity to put a spotlight on this issue.

GRUMDAHL:

CATHY I know people are going to be surprised to hear this, that in 2021, Native Americans were almost nine times more
WURZER: likely to die from a drug overdose than whites. Why are Indigenous and Black Minnesotans so disproportionately affected by the opioid epidemic?

ERIC We have seen, actually, that those disparities are widening, not shrinking. And so what that's really motivated the
GRUMDAHL: Walz Flanagan administration and the Department of Human Services to do is to listen to the communities and partners in those communities that understand what's needed to really turn that trajectory in the direction that we need it to turn.

Every opioid death, every death from substance use disorder is a preventable death. And the way in which our response needs to be calibrated, understanding that these impacts aren't felt equally across all communities, needs to reflect what those communities know about what they need. And so I'm really proud of the fact that the proposal that the governor and lieutenant governor presented to the legislature was really lifting up what we've heard from communities about the responses that they think will be most effective.

CATHY Give us a window into these conversations. I know you've been meeting with leaders of different MinnesotaWURZER: communities. What are you hearing?

ERIC Well, I think the first piece is just the way in which our entire substance use disorder system is really eager to
GRUMDAHL: move in the direction of evidence and adopting best practice wherever we're able to identify that, but also needing to really have those responses be driven by and grounded in the disproportionality that we see in who is suffering from this crisis and this epidemic.

And so part of the proposals that the governors advanced include really making sure that our resources are being targeted to the communities that are most acutely experiencing these deaths and this crisis and that the bodies, like the Opioid Epidemic Response Advisory Council, that are leading our state's response are made up of representatives of those communities as well. And so we've done a lot of listening to community partners, including our tribal government partners, our Urban Indian organizations, and other communities of color about the kinds of responses that are most helpful.

And I think across these proposals, you see not only adoption of the things that we've heard, a movement toward where evidence can guide us and where we can support the organizations that are on the ground doing this work, and across the board, a move toward an approach known as harm reduction where we are really trying to meet people where they're at and walk with everybody on their own journey toward recovery recognizing that we need a lot of different options to work for all the varying needs that exist in Minnesota.

CATHY You talked about the faces of this epidemic. We know the faces. We've seen them. We know the communitiesWURZER: most affected. But do we know the why?

ERIC I mean, I would say that there are as many whys and as many stories as there are individuals that are afflicted
GRUMDAHL: with substance use disorder. And when I speak with families and hear their stories about what their particular journey has been or the loved ones that they may have lost, what I really appreciate is that all of our responses have to be grounded in that understanding of meeting somebody where they are and working with them to figure out, what is the path for you to come back to recovery and stability?

Recognizing that we need options that have the flexibility in them to be able to respond to those needs. I'm also really proud of the way that I think we've really leaned into the way in which the challenges related to substance use disorder overlap with and intersect with all kinds of other challenges like housing instability.

Our proposals include a recognition based on some recent research conducted by the Department of Health and the Hennepin Healthcare Research Institute. We see a vast overrepresentation of people facing housing instability among those who are dying from overdose. And so these proposals also look at, how do we address the social conditions and the needs for access to housing that are also part of this crisis for so many Minnesotans?

CATHY I also understand that the proposal you've been working on covers behavioral health services for folks inWURZER: Minnesota prisons. How does that dovetail into the overall issue that we're talking about here?

ERIC There's been some exciting developments at a federal level around really recognizing the need for us to have aGRUMDAHL: really effective way for people to leave incarceration and transition successfully into community with the right kind of supports.

And so building on some of what we've seen from other states and where we send some federal appetite for us to do more in this space, really looking for opportunities to leverage our Medicaid authority in ways that help support individuals leaving incarceration to have access to the care that they need during their incarceration and afterward.

And that also includes-- to the point we were just talking about-- the housing instability. Very excited that our proposals include a way for people when they're returning to community to get access to stable housing as part of what happens during discharge.

That's something that we know, when it's available, works and has a tremendous impact on long term success in reentry and preventing recidivism. And we're hoping to build on that with the proposals that are in front of the legislature right now.

CATHY WURZER:	And you've been around state government for a while. You know how it all works and the politics behind some of this. With this large budget surplus that the state of Minnesota has, are you encouraged that some of these proposals will become law?
ERIC GRUMDAHL:	I feel tremendously hopeful. I'm an optimist by nature in the face of these challenges, but I feel tremendously hopeful about the way in which everybody that I talk to understands that we are at a moment not just of opportunity.
	We're at a moment of crisis that we really need to think about, how do we use the opportunity that we have right now with our budget surplus to invest in responses that are really going to help transform how we address substance use disorder, how we address housing instability how we address all the other factors that are needed to make Minnesota the best state in the country to raise a kid?
CATHY WURZER:	Eric Grumdahl, I appreciate your time. Thank you so very much.
ERIC GRUMDAHL:	Thank you, Cathy. Appreciate the chance.
CATHY WURZER:	Eric Grumdahl is Assistant Commissioner of the Behavioral Health, Housing, and Deaf and Hard of Hearing Services Administration at the State Department of Human Services.
	[MUSIC PLAYING]
	So at the beginning of the conversation, I mentioned that data from 2021 shows that Native people in Minnesota were nine times as likely to die from a drug overdose than white Minnesotans. Now, this is not news to Native leaders, and many are mobilized around solutions both in the state legislature and in their own communities.
	Sharon Day is an elder and leader in the Minneapolis Urban Native community. She's a member of the Bois Forte Band of Ojibwe and the Executive Director of Indigenous Peoples' Task Force that offers harm reduction in South Minneapolis. Sharon, welcome. Boozhoo.
SHARON DAY:	Yeah, boozhoo.
CATHY WURZER:	How would you like to introduce yourself? However you'd like.
SHARON DAY:	Well, I think did a good job already.
CATHY WURZER:	OK, good. Thank you. It's good to talk with you again. Well, what did you make of the conversation I had with Assistant Commissioner Grumdahl? He specifically was talking about we touched on the Native community. You've been pushing lawmakers and the governor to focus on prevention. Do you think the state's listening to you?
SHARON DAY:	Well, when I talked with the governor and the lieutenant governor, they seem to be in support of it. However, we have a bill that Senator Mary Kunesh has authored in the Senate I think it's Senate file 2273 and that hasn't had a hearing yet, and that really deals with prevention for that population, 18 to 24.

And as I said to the governor, prevention with humans is like taking care of the water. It's much easier to keep the water pure and clean than to try to clean it up once it's polluted. Same thing with humans. It's easier and far more cost effective to offer prevention services than it is to do treatment once somebody's addicted.

- CATHY I've heard some say in the community that culture is prevention, so tell us what's happening to get young NativeWURZER: folks and adults involved in cultural activities.
- SHARON DAY: Yeah. Well, at IPTF, we've been doing peer education programming since 1990. And we know from our own work with young people-- we provide them with culturally based after school activities, we have a theater program that deals with all of the social issues in our community.

And I really believe with this opioid epidemic, young people need to come forward and speak to their peers. We have a peer to peer navigation recovery program for youth. And they come in, and they go through a boot camp on peer to peer navigation recovery and also work readiness skills.

And then we send them out into the community organizations for a two month internship, and some of those internships have become ongoing jobs for our young people. So they're in that sort of age that's sort of floundering. They're not in college.

They may not be working. They may be in recovery themselves. So we're trying to give them that some of the cultural messages that are so important to our well-being and give them a little jumpstart.

CATHY I know you're organizing this public event coming up here called Honor Our Loved Ones, and that's to draw
WURZER: attention to the opioid overdoses in the state. Can you tell us about that? And especially, sadly, your own personal experience?

SHARON DAY: Yeah. Just over a year ago, my grandson died of a fentanyl overdose. He had spent most of the last two years of his life in recovery, and he had a slip on Thursday and Sunday morning He was a binge drinker, but somebody gave him something on Sunday morning. And it had fentanyl in it, and he died.

And so what we're trying to do here is let policymakers know that these individuals are relatives, and they're not just a statistic. And also, people can go to our website.

And they can click on the QR code, and upload their picture of their friend, their family member, and say three things about them-- three things like, Joey loved fishing, he love helping people, and he loved being out on the water. There'll be a program that day.

But the idea is to reduce the stigma, and there's a lot of stigma around drug use. I worked for years in the chemical dependency field. And even there, there's a hierarchy. It's OK to be an alcoholic. It's not OK to be a drug addict. And yet they stem from the same-- it's an addiction either way.

But there is that hierarchy. And I've been surprised that even some folks that we've been working with like say to us, I don't want to put the image of my son or my grandson-- I don't want him to be known as a drug addict.

And the idea is to show that there's so much more than that. But there is so much stigma, and I think that also makes it hard for people to seek help.

CATHY	Because the stigma and the shame.
WURZER:	
SHARON DAY:	Yes.
CATHY	Can people send the images by a specific date, Sharon?
WURZER:	
SHARON DAY:	Yes. We're trying to get them to us by I believe it's April 11th. The website is not the IPTF website. We created a separate website, so it's remember, R-E-M-E-M-B-E-R, O-L-O, remember our loved ones, dot org.
CATHY WURZER:	OK. Sharon Day, I appreciate talking to you. Your knowledge is second to none. Thank you so very much. Thanks what you're doing, too.
SHARON DAY:	Yeah. Thanks, Cathy.
CATHY	Sharon Day is an elder and leader in the Minneapolis Native community, in the Minneapolis Urban Native
WURZER:	community. She's also a member of the Bois Forte band and Executive Director of the Indigenous Peoples' Task
	Force in South Minneapolis.