



Delaware Nation

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BREAKING THE CYCLE OF MISUSE AND ABUSE OF OPIOIDS AND HEALING OUR COMMUNITY

GENERAL WELFARE PROGRAM GUIDELINES

REASON: Opioid addiction is very serious and can happen to anyone. Overdose deaths due to any type of opioid use have been on the rise among Native Americans since 2000. Deaths and injuries from opioid misuse are more common in states with large rural populations. Teens and young adults (between 16 and 30) have the highest risk of opioid misuse, opioid use disorder (OUD) and death from overdose.

PURPOSE: This program provides access to various resources for support to reduce the opioid crisis in our community by:

- Providing a subsidy to families who have an adult wage earner seeking short- or long-term recovery in a creditable treatment facility. By addressing the family's financial issues, this assistance would deter some of the financial burden that could affect the patient's commitment to short- or long-term treatment.
- Providing lock boxes for families to store medications and other potentially hazardous materials.
- Providing medication disposal bags so families can safely throw away unwanted or expired medications or drugs.
- Providing free Naloxone (Narcan) for known or suspected opioid overdose in adults and children.

SERVICE AREA: Nation-wide (**Naloxone [Narcan] will be available locally only**)

TYPE OF FINANCIAL ASSISTANCE: Financial assistance below will be available **as long as funds are remaining**:

- General Welfare Family Subsidy: \$500.00 a month for up to 6 months to assist with food, gasoline or utilities. A wage-earning family member must be checked into a residential facility for treatment. This assistance will be provided **one time per calendar year** while household member is in short- or long-term treatment facility. The recipient will need to provide proof of admission and attendance documentation to continue receiving these funds each month.

ELIGIBILITY REQUIREMENTS:

- Enrolled Delaware Nation citizen
- Non-natives living with Delaware Nation citizen
- 18 years old and older

REQUIRED DOCUMENTS:

- Copy of CDIB card
- Copy of State issued ID (if you do not have a CDIB card)
- * Proof of admission to Treatment Center, if applying for Family Subsidy Assistance

- * Provide a W-9 for adult receiving payment (if not already on file in the Finance department)

DEFINITIONS:

Opioids: A class of drugs that include the illegal drug heroin, synthetic opioids such as fentanyl, and pain relievers available legally by prescription, such as oxycodone, hydrocodone, codeine, morphine, etc.

Heroin: An illegal drug derived from opium which people inject, sniff, snort or smoke. Also known as *smack, dope, China white and tar*.

Fentanyl: A synthetic (man-made) opioid that is 50x more potent than heroin and 100x more potent than morphine. Street names for fentanyl include *Apache, China Girl, Jackpot, Dance Fever, and TNT*.

Pharmaceutical fentanyl: Primarily prescribed to manage acute and chronic pain associated with advanced cancer.

Non-pharmaceutical fentanyl: Illicitly manufactured, and is often mixed with heroin and/or cocaine with or without the user's knowledge in order to increase the drug's effect.

Patient admission criteria: Any person who is admitted to a creditable maintenance treatment facility by a qualified personnel who has determined that the person is currently addicted to an opioid drug and that the person became addicted at least 1 year before admission for treatment.

Detoxification treatment: Any person who is admitted to short- or long-term detoxification treatment by a qualified personnel. No more than two detoxification treatments episodes can be completed in a one-year time span. Short-term rehab stays are usually 30 days long. Long term stays can be 90 days, 6 months, 1 year or up to 2 years.

Application and supporting documents should be emailed to CHR@delawarenation-nsn.org or mailed to:

**C/O Ambrea Marshall
Delaware Nation
P.O. Box 825
Anadarko, OK 73005**

Once a completed application and documents are obtained, your application for assistance will be processed. Please know that it takes 7-14 days for processing payments.

BREAKING THE CYCLE OF MISUSE AND ABUSE OF OPIOIDS

GENERAL WELFARE PROGRAM APPLICATION

(Please Print)

Name _____ **Enrollment #** _____

Physical Address _____

Mailing Address (if different) _____

Contact Number: _____ **Email:** _____

Which of the following general welfare assistance are needed (Check all that apply):

- ☐ Medication Lock Box (1 per household)
- ☐ Medication Disposable Bags (1 per household)
- ☐ Free Naloxone (Narcan) – Available for pickup at Delaware Nation
- ☐ * Family Subsidy Assistance

*** Please fill out the information below when applying for Family Subsidy Assistance.**

List all individuals who reside in your household:

Name	Relationship to Applicant	Date of Birth	An enrolled citizen of a tribe		CDIB #
			Yes	No	

List All Monthly Income for Household Members:

Name	Relationship to Applicant	Amount of Monthly Income

Certification:

I certify that the information given in this application is true and correct to the best of my knowledge. I understand that willful, false statements or information or misrepresentations are criminal offenses and could cause me to be ineligible for future assistance.

Applicant's Signature

Date

APPROVED ☐

DENIED ☐

REASON FOR DENIAL:

Director's Signature

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KYODOLED Locking Key Medicine Box,First Aid Key Safe Box with Lock,Key Medication Storage Lock Box for Drugs Use, 12.2" x 7.8" x 8.2" White

Visit the KYODOLED Store
4.6 799 ratings | 10 answered questions
200+ bought in past month

\$39.99 (\$39.99 / Count)

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Color: **[White] -Medium**

\$45.99 (\$45.99 / Count)	\$49.99 (\$49.99 / Count)	\$39.99 (\$39.99 / Count)
\$32.99 (\$32.99 / Count)	\$19.99 (\$19.99 / Count)	\$24.99 (\$24.99 / Count)
1 option from \$149.99	\$25.99 (\$25.99 / Count)	\$49.99 (\$49.99 / Count)

Brand KYODOLED
Product Dimensions 7.8"D x 12.2"W x 8.2"H
Lock Type Key
Color [White] -Medium

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Brand: Element MDS
4.6 176 ratings
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No annual fee.

Brand Element MDS
Number of Items 3
Item Form Capsules, Tablets, Lotion, Cream
Unit Count 3.0 Count
Package Bag
Information

About this item

- Safe, effective medication disposal for expired or unused medication.
- Renders the medication unusable and undesirable in accordance with DEA and FDA guidance.
- Dispose of tablets, capsules, liquids, lotions and creams—including controlled substances.
- Each bag will dispose of up to 250 standard-sized tablets. **Contains three bags**
- Simple instructions: Add medication, add water, shake and throw away in household trash.

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