SNOFO Learning Community

Serving people who use drugs and those with co-occuring mental health needs

March, 2024

Disclaimer

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ASL Interpretation and Transcription

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  - Kip Opperman
  - Meagan Thorp
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Session 1 Presenters

Maseta
Dorley,
TAC

Theresa
Young, TAC

Rachel Post,
TAC

Tyshaun
Perryman,
Guest Expert

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Session 1 Agenda

- Introductions and housekeeping- 10 min
- Centering your core values- 15 min
- Available data sources to assess need- 15 min
- Centering data from People w/ Lived Expertise- 15 min
- Guest Presenter: Tyshaun Perryman- 25 min
- Wrap Up, Q&A, Next Steps- 10 min

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Whole Person Care

Whole Person Care consists of physical, emotional, behavioral, social, spiritual and financial care

Physical
Emotional
Behavioral
WHOLE PERSON CARE
Social
Spiritual
Financial

Cambia Health Foundation Image

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Centering Your Core Values

Poll Question

What are the foundational core values you bring to this work?

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What Are Foundational Core Values?

- Compassion
- Empathy
- Housing is a Human Right
- Everyone is capable of recovery, health and wellness with the right supports
- Inequities and institutional racism, ableism and classism contribute to homelessness
- Nothing about us without us: solutions require substantive and compensated inclusion with living experts
- Self determination must be preserved
- Redistribute power and check privilege

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Why Are Core Values Important?

- We must ensure we have aligned with these core values to effectively implement evidence-based practices serving people who use drugs and who have co-occurring behavioral health conditions.

- Inability to do so will limit efficacy of services delivered and **will cause harm**

- Centering these core values is also critical in our comprehensive assessment of unmet community needs.

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Impact of Stigma

- Stigma results in a lack of prioritization of funding for a comprehensive and culturally responsive SUD system of care, including those that address co-occurring mental illness

- Stigma prevents people from getting the care they need, leading to poor health outcomes

- Less than 10% of people who have a substance use disorder receive treatment

- One study showed that of people who died from overdose, only 51% had accessed treatment in the 12 months prior

Larochelle MR, Bernstein R, Bernson D, Land T, Stopka TJ, Rose AJ, Bharel M, Liebschutz JM, Walley AY. Touchpoints - Opportunities to predict and prevent opioid overdose: A cohort study. Drug Alcohol Depend. 2019 Nov 1;204:107537. doi: 10.1016/j.drugalcdep.2019.06.039. Epub 2019 Sep 3. PMID: 31521956; PMCID: PMC7020606.

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Quantitative Data Sources

To Assess Community Need

Identifying the Unmet Needs

We have to know what exists before we can correct for what doesn't! These sources of data and information can help illuminate what your system has and what it needs.

Housing and HUD-Related Sources	Health-Related Sources	
• HMIS/ Stella	• Community Health Needs Assessment	• Single State Agency Treatment Episode Data Set (TEDS)
• PIT	• High Utilizer and Emergency Services Data	• Health Center Uniform Data System
• HIC	• Public Health/ Medical Examiner Data (overdoses)	• Other?

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Poll Questions

Which of these data sources do you currently use to assess needs among the population you are serving?

Which of those that you don't currently have access to, would be beneficial for your planning?

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Centering Data From People With Lived Expertise in Your Assessment Process

"Those closest to the pain should be closest to the power"
-Representative Ayanna Pressley

HHRC
HOMELESS AND HOUSING RESOURCE CENTER

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What Does That Look Like?

- An acknowledgment of past harms
- Not just a seat at the table but decision-making power
- Ongoing feedback collection, not just "one and done"
- Compensation for expertise
- Author privileges or credit if contributing to research
- Community members as research contributors, not data
- Accessible platforms to give feedback
- Community Engaged and Community Driven

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Acknowledgement of past harms

Bias

Bias is an inclination or preference that interferes with impartial judgment.

Explicit Bias, refers to the attitudes or beliefs someone knowingly holds.

Unconscious Bias, refers to unintentional or automatic mental associations an individual has.

Gender Bias is behavior that shows favoritism toward one gender over another.

Exclusion

Exclusionary processes create inequitable distribution of resources and unequal access to capabilities and rights.

Exclusion can be displayed by factors including geographical distance from services, language barriers, physical difficulties, or unsupportive laws and policies.

Collecting Qualitative Data

- Community Engaged & Community Driven
- Use multiple methods of data collection for accessibility
  - Value the feedback over the format
- Compensation for participants, provision of childcare, transportation, and conducting information-gathering in the contributor's community
- Implement processes for ongoing data collection and feedback
  - CAB, regular engagement of people receiving your services in larger formats, feedback at different phases of assessment (ex: survey question design, review of findings and next steps)

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Compensation for expertise

- In creating equitable systems, people with lived and living expertise must be seen and valued as equal partners who are paid equitably for the work.

- Compensating people with lived and living expertise insufficiently or expecting them to volunteer without compensation is inequitable and disrespectful, and it creates financial barriers to the design of effective policies and practices.

- Payment methods can include compensation in the form of:

  Cash, Money order, Cash Gift cards, Checks, ACH transfers (direct deposit)

  Payment apps: Zelle, Cash App, PayPal, Venmo

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The Importance of Operationalizing Findings

- Collecting data to fulfill grant and/or organizational requirements only furthers harm against the people we work with. It is reinforcing that we are not truly and authentically valuing their experience
- We must be intentional about operationalizing programmatic changes that put the feedback we receive into practice
  - Our assessment (data sources) of the problem is secondary and inherently less accurate (feedback from PWLE)
- Plans to make change should be presented for feedback & a process to collect feedback during implementation is also critical

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Questions to Guide Your Process

Critical questions before collecting data:

1. What is the purpose of collecting this data? (e.g., assess needs and gaps, change procedures, amend staffing, etc.)
2. Am I only collecting data that I need to answer my question and not extraneous information for my own interest?
3. How will the data be assessed, by whom, and when?
4. Who are the decision-makers that can change policies/programs to address findings and how are they involved?
5. To what extent is there organizational/community buy-in for change? (is it possible to operationalize this)

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Guest Expert: Tyshaun Perryman, CARC

Tyshaun is from Boston. He is a public health consultant, Certified Addictions Recovery Coach, and community liaison. Tyshaun has done both research and community engagement work that demonstrates Recovery Coaches' effectiveness in breaking barriers to treatment and healthcare services as it relates to racial disparities for Black and Latinx communities. He endeavors to continue to break barriers in racial disparities in health care. Tyshaun has 25 years of experience and expertise in community engagement, community organizing, and advocacy for diverse populations.

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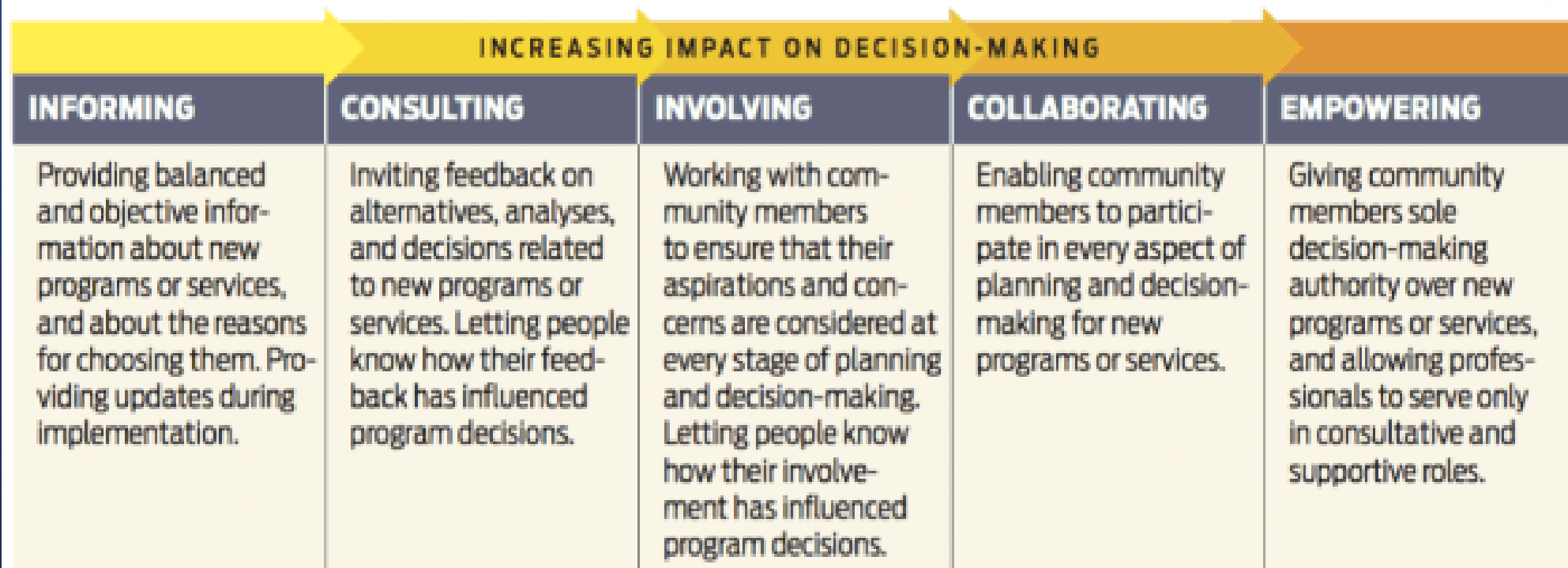Services Administration

My Work in CE

Racial Health Equity Diversity Equity and Inclusion.

Engage BIPOC lead community-based organizations, faith-based organizations, tribal-based organizations that have been traditionally overlooked with funding, technical assistance and resources but they have a tremendous impact within their respective communities.

The Spectrum of Community Engagement

INCREASING IMPACT ON DECISION-MAKING

INFORMING	CONSULTING	INVOLVING	COLLABORATING	EMPOWERING
Providing balanced and objective information about new programs or services, and about the reasons for choosing them. Providing updates during implementation.	Inviting feedback on alternatives, analyses, and decisions related to new programs or services. Letting people know how their feedback has influenced program decisions.	Working with community members to ensure that their aspirations and concerns are considered at every stage of planning and decision-making. Letting people know how their involvement has influenced program decisions.	Enabling community members to participate in every aspect of planning and decision-making for new programs or services.	Giving community members sole decision-making authority over new programs or services, and allowing professionals to serve only in consultative and supportive roles.

Adapted from the IAP2 Public Participation Spectrum, developed by the International Association for Public Participation.

Note: Engagement activities can include community surveys, neighborhood outreach projects, partnerships with grassroots organizations, public meetings, and efforts to select community representatives

Leading with Living Expertise/Community Advisory Board

- Utilizing people with lived experiences with substance addiction

- Pay them as Public health consultants like a doctor or lawyer.

- They inform us on what recovery services look like for the BIPOC community.
- We also use our expert consultants as part of a community advisory board: They help create the grant application process as well as review the grant applications to determine which community base organizations will receive grant funding.

Integrated Consciousness Equity/Collective

Consciousness

- Empower and integrate people from different backgrounds. Groups that feel ignored can gain greater control over their lives and their community. When people from different areas of the community work together, they often find that they have much in common.

- Create local networks of community members. The more people who know what is going on and who are willing to work toward a goal, the more likely a community is to be successful in reaching its goals.

- Create several opportunities for discussing concerns.

- Increase trust in community organizations and governance. Working together improves communication and understanding. Knowing what government, community citizens and leaders, and organizations can and cannot do may reduce future conflict.

(Adapted from Bassler et al, 2008).

Nubian Square Task Force Meeting And Opiod Remediation Funds

The Nubian Square Task Force Meeting is a meeting ran by the Addiction Services through the City of Boston. Members meet Bi-weekly to discuss outreach and recovery supports for the Nubian Square community.

Present are community health centers, Boston Police Department, local community leaders Recovery Coaches and other forms of outreach workers and various other public health and human services organizations and leaders.

At this meeting I was able to collaborate with city officials to educate the community on the Opioid Remediation Funding and gather community input on how the Opioid Remediation Funding should be spent.

Influencing the City of Boston to use $250,000 worth of funding to go towards emergency funding for families directly impacted by the opioid epidemic.

Community Synergy Applied

- Synergy is the combined power of a group of things when they are working together that is greater than the total power achieved by each working separately

- Teamwork at its best results in a synergy that can be very productive.

- Synergy creates a whole that is greater than the simple sum of its parts. Allowing Organizations to consolidate resources to benefit each entity involved while advancing the greater larger community

- I link a wellness coach, with a residential provider with a substance addiction counselor

- Resulting in individual getting all needs met with the power to make choices on there individual pathway.

- Do I want MAT, or Wellness or all

- Housing security, Transportation needs is met

- All organizations bill the same insurance.

Practical Engagement/Strategies Tips Techniques.

Get into the community. Meet with community leaders and stakeholders. Relationships, Relationships Relationships

Attend Community Functions

Make engagement personable in person face to face meetings

- Indigenous Summit: talk to guest speaker 45-minutes in parking lot

Build external necessary relationships to connect community members leaders and organizations

Free stuff, gifts, sponsorships always work when connecting to community

100-1000 scholarship or church fund

Suggestions: Next Steps

- ❏ Review data sources more in depth using provided links
- ❏ Identify data sources that you are not currently using that could help guide your community assessment process
- ❏ Identify what partnerships you might need to access or collect this data
- ❏ Assess the quality of your feedback process from PWLE
- ❏ Identify areas for improvement and steps toward making this process more equitable and authentic
- ❏ Identify partners you might need to strengthen your services based on the feedback you receive

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Session 2: March 12

Resource Mapping to Maximize Partnerships and Coordination of Services

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Questions and Answers

Additional Technical Assistance

Do you have a question about this Learning Community or SAMHSA technical assistance for your community? Reach out to your HUD TA coach or submit a question to HHRC. Under the **"Subject"** section of the Contact Us form, **please select "HUD SNOFO Grantee TA Question."**

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Evaluation and Certificate of Participation

https://lanitek.com/P?s=764346

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Thank You!

SAMHSA's Homeless and Housing Resource Center provides high-quality, no-cost training for health and housing professionals in evidence-based practices that contributes to housing stability, recovery, and an end to homelessness.

Contact Us:

http://hhrctraining.org/ | info@hhrctraining.org | 518-439-7415x4