

## **Strengthening Our Community: Facing Heroin and Substance Use**

### **We heard you!**

On Wednesday January 25, 2017 over 65 people attended the Strengthening Our Community: Facing Heroin and Substance Use community dialogue in Pittsfield, New Hampshire to share their concerns and priorities for addressing the issues of heroin and substance use. The focus was on prevention, treatment, and recovery and how the Pittsfield community can get informed and take next steps together. Key leaders spoke as part of a panel to share information, followed by facilitated small group discussions. Panelists included: Michele Merritt- Policy Director of New Futures; Dr. Molly Rossignol- Addiction Medicine Physician at Concord Hospital; Audrey Clairmont- Lead Clinician of Choices at Riverbend Community Mental Health; Sergeant DiGeorge- K-9 Officer of the Pittsfield Police Department; Amber Violette- Student Assistance Program (SAP) Counselor at Pittsfield Middle High School; and Dave Simpson, Firefighter and EMT at Pittsfield Fire Department.

The following information highlights the action ideas that rose to the top. These ideas will inform next steps for the Pittsfield Wellness Coalition, as well as individuals and organizations. For more information or to get involved with the Pittsfield Wellness Coalition, contact Susan Bradley [sbradley@pittsfieldnhschools.org](mailto:sbradley@pittsfieldnhschools.org).

### **Priorities for Prevention**

Two of the five small groups focused their small group discussion time on prevention, with approximately 24 people total across both groups. While several ideas and issues were discussed, there was a strong emphasis on starting prevention efforts early, providing education for youth and adults, breaking down stigma surrounding substance use disorders, increasing access to transportation, assuring access to a variety of activities and alternatives for young people and adults, and creating a strong infrastructure for youth leadership and voice.

### **Education**

Both groups discussed heavily the need for education of young people around substance use, as well as adults. Both groups recognized that adults and youth in Pittsfield all could benefit from education around substance use disorder.

### **Start Prevention Early**

Panelist and participants shared information about how consistent early efforts are both preventative, and much less costly to the community and state. Prevention efforts also help reduce demand for substances and can create a community culture of talking about difficult issues and supporting healthy choices.

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Across both prevention focused small groups, participants emphasized that prevention education should happen much earlier in a child's life, and saw a need for more consistent exposure throughout their education, beyond what is currently offered in health class. While several ideas for preventive messages were brought up, both groups identified the need to build empathy and break down the stigma surrounding substance use disorders.

### **Access to Activities and Community Engagement**

Some of the strongest prevention evidence for youth is in support of involvement in community and school activities and participants would like to see these efforts strengthened. Types of programs mentioned included community gardens, youth visiting seniors, community based fundraisers, drama clubs, apprenticeships, leadership opportunities, and work skills. The link between involvement and purposeful engagement and prevention is clear. Participants discussed the importance of people feeling a sense of belonging to the community. They emphasized the importance of youth and adults being connected with a variety of opportunities and interests in the community, as well as connected *to* community- with a web of relationships, such as peer-to-peer, counselors, and adult-youth support.

### **Access to Resources and Transportation**

One of the two prevention focused small groups focused heavily on the need for access to resources, specifically pertaining to services and locating services, as well as how to help a friend or family member who has substance use disorder. Furthermore, they discussed the issue of transportation and finding better ways for getting people to the services they need.

### **Priorities for Treatment**

Approximately 12 participants decided to spend the small group discussion time focused on treatment. Participants discussed ways to work locally to help connect people to services, including a strong emphasis on access to transportation and treatment, as well as making information on treatment and recovery options up to date and easy to find.

### **Connecting people to services, with easy to find information**

The treatment group focused heavily on the need for people to connect with others as a network of support in the community. They suggested a centralized hub of information that is proactively kept up to date with important information- perhaps on the town website- to include emergency numbers and what resources are available in NH. They also saw a need for a support person to help connect people to the Police Department, Fire Department, and EMT to best connect people to services needed.

### **Advocate for Treatment**

Making treatment more accessible was a primary topic of conversation, and participants identified steps that could be taken locally- including in addressing barriers to treatment such as insurance and transportation.

Difficulties of transportation- including the lack of public transportation and the distant location of services- were identified as key barriers to treatment and to aiding treatment to be more successful. In part, the groups expressed a lot of concern for people to get to physicians, as well as treatment recoveries such as HOPE for NH- an organization whose mission is to support addiction recovery in all communities across New Hampshire. The Treatment group suggests building a network of local drivers to provide rides to help.

Participants discussed insurance barriers- including for people with no insurance or who are underinsured. Also discussed was the coordination of services, and the need for more providers closer to home, including Inpatient and outpatient treatment options and detox facilities.

### **Priorities for Recovery**

Approximately 12 participants decided to spend the small group discussion time focused on recovery. Priorities discussed in this area were the need for ongoing support, education, and outreach, including clear and up to date information for resources, and increase access for systems of support- such as transportation and more local meetings.

### **Make sure information is up to date and easy to find**

Participants in the recovery group focused heavily on the need for increased education and sharing/distributing of accurate information about recovery. The group discussed 211- a free and confidential service that helps people across North America find the local resources they need, accessible 24 hours a day/7 days a week. There was question to whether or not people know about and/or how to access 211, as well as other recovery hot lines. There was an emphasis on the need to for accurate and up to date information provided on 211, and ensuring it was locally relevant to Pittsfield. They discussed the role of EMTs, the Fire Department, the Police Department, and the schools in distributing accurate information and education. There was a strong emphasis on *meeting people where they're at*- whether online with social media or in place- such as in the school- to share and distribute important this information. They also suggested regular newspaper ads for resources to run in the Suncook Valley Sun.

### **Assure Access to Transportation**

The recovery group also expressed a need for better access to transportation. They considered ideas for transportation, such as using the senior bus or utilizing the existing Community Action Program, which is accessible for people to doctor's appointments. There was question whether or not they could use CAP or senior bus to get people to

substance use related meetings outside of Pittsfield, including to Hope For NH in Concord- an organization whose mission is to support addiction recovery in all communities across New Hampshire. They also considered the Manchester NH Safe Station model, where each Manchester NH Fire Station is a designated safe environment for individuals seeking assistance looking for treatment to start their path to recovery. With Safe Stations, the Firefighters will arrange for or provide a medical assessment not to exceed their scope of training, and if there is cause for concern that there is something else medically wrong with the patient, transportation to an appropriate level medical facility will be arranged for and provided by Manchester's contracted 911 service AMR. They also considered having new meeting locations- closer to and in Pittsfield- to reduce transportation needs, including hosting recovery meetings at the school. Finally, they discussed the potential role that the Fire Department, Police Department, and EMT could be to hold a list of numbers of volunteers to reach out to if someone is in need of transportation.

### **Create a Visible, Active, and Accessible Recovery Community**

The recovery group expressed concern on breaking down stigma, especially since Pittsfield is a small town. They saw a need for ongoing support and outreach, as these efforts help reduce stigma and the negative role of shaming and labeling and can emphasize the need for inclusion, hope, and dignity. There was a strong emphasis on creating more access to meetings in the Pittsfield community, to include 12 step programs as well as alternative non-12 step programs. They prioritized finding a way to revitalize the Narcotic Anonymous (NA) meetings, start a Heroin Anonymous (HA) meetings, and increase the number of Alcoholics Anonymous (AA) meetings- which is currently only 1 meeting a week. They was an idea to host recovery meetings at the schools for youth and adults, being that the school is already central in the community, and that it may reduce the need for transportation for some.

### **Youth Voice Priorities on Treatment, Prevention, and Recovery**

There were approximately 9 middle and high school aged participants who decided to spend the small group discussion in the Youth Voice group- focusing across treatment, prevention and recovery. Priorities discussed in this area were education and awareness, reducing stigma, and more sustained dialogue for youth around substance use.

### **Education**

The youth voice group discussed the need for better education across every prevention, treatment and recovery. They discussed the need for better education around awareness, knowledge about substance use and substance use disorder, and treatment options for young people. They advocated for DARE at the high school level, as well as prevention activities in the community and its schools, as designed by young people to best tailor to their needs.

### **Increasing Support and Reducing Stigma**

Participants in the Youth Voice group identified a need for reducing stigma and increasing acceptance, in part since people who feel isolated are less likely to seek help. They also emphasized having strong support systems, with youth to youth and youth to adult connections, including support groups so people know they are not alone. They emphasized the power of hearing from someone who has been there/experienced substance use disorder themselves, especially peer to peer. They saw a need to have accessible recovery coaches that know how to support youth, and for stronger encouraging messages of acceptance and hope. They also saw a need for people in recovery to share their stories, to help those who are struggling and also for preventative measures. Finally, they advocated for supporting more positive messages about Pittsfield and how people talk about the community, with a need to break down stereotypes of the community and community members, and build acceptance.

### **Advocating for Sustained Dialogue and Support**

Participants in the youth voice group identified a need for sustained dialogue around this topic, and emphasized lifting up the voices of people in recovery, supporting youth to youth and youth to adult support, and having more conversations about substance use and substance use disorder in the school.

### **Conclusion**

Many of the solutions and action steps shared are efforts that can be taken locally. The community should expect to hear from the Pittsfield Wellness Coalition as they work on strategies to move this work forward, and people who wish to be stay engaged are encouraged to join efforts with the Pittsfield Wellness Coalition. For more information, please contact Susan Bradley- member of the Wellness Coalition and Pittsfield, NH School District staff at [sbradley@pittsfieldnhschools.org](mailto:sbradley@pittsfieldnhschools.org).

### **Summary of Key Action Steps**

Key themes that stood out across all groups related to education, transportation, better dissemination of resource information, reducing stigma, and increased access to AA/NA/HA meetings directly in Pittsfield.

1. **Education** -Each groups discussed the need for better education around substance use and substance use disorder. Conversation focused on the need for increased education for youth, parents, family and the community as a whole.
2. **Transportation** – each group identified transportation as a barrier to accessing resources around prevention, treatment and recovery.
3. **Keep information sources up to date and easy to find** – each group identified a need for a better method of communicating vital information around prevention, treatment and recovery. Each group had a sense that people just don't know where to begin to look for resources and a need for clarity exists.

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4. **Sustain a variety of activities and alternatives for youth and adults-** including creating programs for youth leadership and peer support.
5. **Support a visible recovery community-** including youth to youth, adult to adult, and youth to adult connections and support.
6. **Reduce Stigma and Build Acceptance** – each group mentioned the need for reducing stigma and building acceptance as a way to better serve the community around each of the guiding topics.
7. **Advocate for Recovery Meetings** – each group identified the lack of meetings in Pittsfield, and the difficulty of accessing meetings outside of Pittsfield. Many groups mentioned that AA is the only meeting held in Pittsfield, and it has limited meetings. Most groups expressed a desire for more locally held meetings, for 12 step and non-12 step meetings to Pittsfield.

**Strengthening Our Community Partners:** Pittsfield Listens was asked to partner with the Wellness Coalition to co-host the event. The following organizations also contributed to the planning: Capital Area Public Health Network, Concord Hospital Family Health Center, Early Head Start, Economic Development Committee, First Congregational Church of Pittsfield, Grace Capital Church, New Futures, NH/Dartmouth Family Medicine Residency Program, Pittsfield Fire Department, Pittsfield, NH School District, Pittsfield Police Department, Pittsfield School Board, Pittsfield Select Board, Pittsfield Youth Voice *in it Together* (PYViiT) of Pittsfield Listens, Pittsfield Youth Workshop, Riverbend Community Mental Health, and Second Start.

**Appendices can be found at [www.Pittsfieldlistens.org](http://www.Pittsfieldlistens.org)**

Appendix

A [\\_StrengtheningOurCommunityDiscussionGuide](#)

B [\\_AllSmallGroupNotes\\_Transcribed](#)

Additional Resource: <http://drugfreenh.org/get-information/speak-up-campaign>

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