# Heroin Task Force Quarterly Community Partners Meeting

Tuesday, September 12, 2023 2:30-4:30 p.m.



## Heroin Task Force Virtual Community Partners Meeting Executive Summary September 12, 2023



- Click here to watch a video of the entire 9/12/2023 HTF Community Partners Meeting (including guest speaker)
- Click here to watch a video of guest speaker, Rachael Cooper from Shatterproof
- Click here to view Rachel's presentation: Addiction Stigma
- Click here to view a summary of the small group discussions (thanks Stigma Reduction Action Team!)

If you are interested in joining an action team or getting more involved, please contact the Action Team Chairs or Nicole Breu at <a href="mailto:nbreu@waukeshacounty.gov">nbreu@waukeshacounty.gov</a>.

For more information, please refer to the Waukesha County Heroin Task Force Website.

Approximately 52 community members participated in an interactive 2-hour virtual community gathering. The primary focus of this meeting was on Stigma Reduction & Awareness.

- 1. **Opening**: Waukesha County Executive Paul Farrow shared his gratitude to the HTF community partners as well as provided an update on the county's work to fight the opioid crisis. Check out the <u>Waukesha County Overdose Prevention site</u>.
- 2. **Today's presenter featured Rachael Cooper from Shatterproof.** Rachel's presentation focused on Addiction Stigma. The HTF took a "pre-workshop survey" to measure the level of stigma awareness in the coalition. Rachael shared this information along with national trends and research.
  - Small group discussions: The HTF partners moved into small breakout groups to further discuss potential
    opportunities for future work. The Stigma Reduction Action Team and the Steering Committee will be reviewing this
    information and considering next steps. Please refer to slides <a href="https://doi.org/10.1007/jhs.2007/
- 3. **2023 HTF Action Teams**: Each of the HTF Action Teams provided brief update to the group. Learn more about the action teams at the *Waukesha County Heroin Task Force Website*/

NOTE: Mark your calendars! Our final meeting of the year is scheduled for Tuesday, Dec. 5th from 2:30-4:30 p.m.!!



## WELCOME

## HTF COMMUNITY PARTNERS

Mary Simon, HTF Co-Chair





#### **Quarterly HTF Meeting Goals**

- Continue to grow HTF
   Community Partners Network
- Provide a networking opportunity for HTF Community Partners
- Hear from our 2023 HTF Action
   Teams

## Today: Focus on Stigma Reduction & Awareness Training

- Build a shared context for addiction stigma
- Understand and identify collective and individual action
- Engage in small and large group discussion to further understanding

#### Agenda





2:45-3:30: Stigma
Reduction & Awareness
Training WorkshopRachael Cooper

**3:30-3:35:** SHORT BREAK

3:35-4:20: Small group discussions to reflect on the workshop information

**4:20-4:30**: Brief HTF Action Team Updates

4:30 Final Reflection & Official Close

## What intention do you want to hold for yourself today?

To be and invite openness

Seek opportunity in discomfort.

Work through the difficult parts of new learnings

Whatever happens is the only thing that could have.

Trust and learn from silence.

Dream big.

Do something differently. Try out a new way.

Let go of old ideas, old habits, and old ways of being.

Give yourself permission to be yourself.

Listen with deep attentiveness.

Help others, and ask for help if you need it.

Stay open and maintain a sense of humor Attend to your own inner teacher. Pay attention to your reactions and responses.

What is offered in this space is by invitation, not demand. It's OK to say no.

Think deeply

Breathe.

Be willing to make mistakes.

Learn to respond to others with honest, open questions, instead of counsel or corrections.



Being kind with myself.



## Reflecting on "why we do what we do"

Overdose Awareness Day Vigil 8/31; Frame Park







Shining a light on Recovery Women's Health and Recovery Project (WHARP)





#### **Welcome County Executive Paul Farrow**

Update on Waukesha County's efforts to battle the opioid crisis







# Stigma Reduction Training & Awareness Workshop

Special thanks to our guest speaker, Rachael Cooper, from Shatterproof

> Rachael is the Senior Director for the National Stigma Initiative She is also serving on our HTF Stigma Reduction Action Team

# Let's reflect on this presentation in small groups



| Special thanks to our small group facilitators! |                     |  |
|---|---------------------|--|
| Lucy Medrow                                     | Jamie Bauer         |  |
| Mary Simon                                      | Felicia Behnke Shaw |  |
| Frances Thomas                                  | Nicole Kelly        |  |
| Julie Schumann                                  | Gabby Granata       |  |
| Terri Phillips                                  |                     |  |



#### **Small Group Discussion**

- 1. You will automatically be put into a breakout room.
- 2. There will be a designated "scribe" who will share their screen and take notes. They may do a little "light facilitation".
- 3. Speed introductions! Fast!
- Take a few moments to ponder the small group discussion question and begin sharing your thoughts.
- 5. Select a timekeeper! You will have 20 minutes in the breakout room.

#### **Breakout Room 1: Nicole Kelly**

### Instructions (total time 20 min.)

- 1. SPEED introductions
- 2. As a team, discuss each of the questions (see agenda).
- 3. Spend a few minutes on each question. (select a timekeeper!)
- 4. Be sure to take some time to identify potential actions for the HTF (question #5)
- 5. Highlight 1-2 thoughts / themes that emerged
- 6. Choose a reporter

## Q1: What resonated with you from this presentation?

- Data from the HTF survey
- How can we survey the Waukesha County community and utilize that data to make an action plan
- Storytelling
- Person first language
- Be clear with the media about what language should be used

- A lot of opportunity for community education
- Identifying critical audiences and tailoring messages

#### Q3: What feels doable?

## Q4: What might we (HTF) need to work up to? (if time permits)

#### Q5: What action might the HTF take in the next 12-18 months?

- Identifying our audiences
- Connect with people in recovery and encourage them to share their stories
- Identify small wins that individual members can accomplish
- Hold the HTF accountable
  - Training on how to hold people accountable without "calling them out"

- Harm reduction strategies are widely accepted
- Harm reduction strategies for other substances

- Community-wide SASI survey
- Offer needle exchange four days per week
- Harm reduction strategies for other substances
- Complete storytelling video series

#### **Breakout Room 2: Gabby**

### Instructions (total time 20 min.)

- 1. SPEED introductions
- 2. As a team, discuss each of the questions (see agenda).
- 3. Spend a few minutes on each question. (select a timekeeper!)
- Be sure to take some time to identify potential actions for the HTF (question #5)
- 5. Highlight 1-2 thoughts / themes that emerged
- 6. Choose a reporter

## Q1: What resonated with you from this presentation?

- Putting a name to ideas creating a common language.
- Statistics in the medical field were higher than expected
- Gap between services available and connecting to them - lack of hang offs
- Using person first and recover centered language and the importance of changing language - sympathetic narrative and sharing stories
- Knowing how to correct others

- Hoping the action team can further these conversations, not a one and done conversation.
- Focusing on person first language within the group
- Identify various layers when thinking about where to put the group's focus - different groups will require different interventions
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#### **Breakout Room 2** (second slide)

#### Q3: What feels doable?

- Continue to talk about stigma, not talked about enough. Looking at the language and stigma conversation beyond SUD.
- More education about how deadly the epidemic is.
- Need families to be more involved.
- Developing a tool
   highlighting person first
   language and how to share
   that more broadly to create
   the common language.

## Q4: What might we (HTF) need to work up to? (if time permits)

- Maintaining focus on the stigma conversation
- Sharing stories and community building and respect
- Considering this when looking at 2024 goals.

#### Q5: What action might the HTF take in the next 12-18 months?

- Working on story collection to highlight the person behind the SUD.
- Including these stories in other tools and resources that are created.
- Emphasis on allowing people to feel comfortable sharing their stories.
- Stigma reduction action team can come up with a one-pager with this basic information.

#### Instructions (total time 20 min.)

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- 6. Choose a reporter

## Q1: What resonated with you from this presentation?

- Like how she differentiated different types of stigma; stigma is not just one term
- "What you call people" affects their recovery
- 9 different points of stigma;
- Surprised at how much stigma is still out there; still haven't turned the corner

- Like that she brought the index (measurable tool) forward-similar from PDO
- May be opportunity for us to survey; use that tool with Shatterproof to look at different sectors to see where there is room for growth (heat map the stigma); is it demographics?
   Gather data to drive some initiative
- There is a stigma disconnection; even once you are healthy? How do we create better, healthier, connections?
- The stigma around Narcan; it's not a drug, it's life saving medication
- Educational opportunities

#### Q3: What feels doable?

- Offering parent education would be huge; effects on their kids (ARC- wake up call); also parenting through recovery
- Narcan/fentanyl training with education administrators; school board members,- Welcome back to school training!!
- In service training??
- Survey...

## Q4: What might we (HTF) need to work up to? (if time permits)

- Minors; making it okay to have minors have naloxone training
  - Possible advocacy and/or explore literature in this area?
- Should an MOUD be available for minors? Some medical folks along this journey with us?
- What tools would best fit different individuals?

#### Q5: What action might the HTF take in the next 12-18 months?

- Developing a training for school boards and school staff on narcan/naloxone would be hugely beneficial
- Bringing pieces of this presentation to the police department and the healthcare professionals
- Guidelines that stigma reduction team is creating... get this out there!! How can we distribute this to others? To whom?
- Survey to identify groups

## Instructions (total time 20 min.)

- 1. SPEED introductions
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- 6. Choose a reporter

## Q1: What resonated with you from this presentation?

- Shocked: statistic about healthcare providers and their views
- Frequent interaction with those with SUD doesn't change viewpoint, shocking
- Workplace in general is a discriminatory place. Only 22% okay with a boss with SUD compared to marrying in a family
- Educational profession: social work etc is there data on that?

neonle should go to treatment

- Q2: What are the implications for the work of the HTF?
  - We've talked a lot about specific professions and how they may need more education around this. Need targeted education at specific professions
  - What would our county survey data be in general and also by profession
  - A lot of this is that we perceive it as negative, but like the survey said 90% wanting to improve. Maybe those professions are thinking in new ways but we don't know it.
- Been discussing with PD chiefs about Oak Boxes and response has been very positive. Our law

#### **Breakout Room 4 (second slide)**

#### Q3: What feels doable?

- Sending survey out, asking it to be completed, and then compile data
- Simple, direct to the point education on stigma, especially language
- Knowing the national data maybe offering additional supports and making it available to our healthcare systems.
- Curious how much this is incorporated into schools.
   YBRS it was hard to get schools to have youth complete it. Similarly, maybe introducing the ideas

of stigma etc. so youth don't

## Q4: What might we (HTF) need to work up to? (if time permits)

- Getting the local data, what is the stigma perspective of those in our community
- Maybe people in our community are ahead of the curve? Data is needed to know what the plan is.
- As a community we have struggled to have a needle exchange or other harm reduction techniques/safe places for use. Some law enforcement have programs (STAR maybe?) where you can bring in paraphernalia to have discarded. But almost no one does it. How do we strengthen those

- Q5: What action might the HTF take in the next 12-18 months?
- Community-based survey data and have it broken out by profession to help with planning
- Hire experts with community-based surveys to do it really wellmaximize responses
- Hard to know where we are going if we don't know where we are
- Something around language/stigma- broadly distributed in work environments

#### **Breakout Room 5: Frances Thomas**

### Instructions (total time 20 min.)

- 1. SPEED introductions
- 2. As a team, discuss each of the questions (see agenda).
- 3. Spend a few minutes on each question. (select a timekeeper!)
- 4. Be sure to take some time to identify potential actions for the HTF (question #5)
- 5. Highlight 1-2 thoughts / themes that emerged
- 6. Choose a reporter

## Q1: What resonated with you from this presentation?

- Stigma that surrounds people in long term recovery
- Sometimes personal experience shapes how a person interacts with you (positive and negative)
- Person first language and the stigma of language (addict, dirty, etc.) - a good reminder
- Levels of stigma
  - People don't want to be identified as someone with a substance use disorder (individual stigma)
  - Consequences of community stigma marriage rates

- Identify a procedure to use this information, data, and research in our work
- Continued visibility and continual efforts in breaking down stigma
- Importance of Collective impact
  - Workforce development center
- Figuring out how to use language to help and not hinder a person's experience in recovery (talking points)
- Advocacy

Q3: What feels doable?

Q4: What might we (HTF) need to work up to? (if time permits)

Q5: What action might the HTF take in the next 12-18 months?

- Share stories of people in recovery, connected to substance use
- Collective Impact reach to partners that may not be the obvious choice of partner but would be really impactful
  - Employers
    - Someone in recovery willing to hire people
  - WorkforceDevelopment Board

 Policy & Advocacy change connect with groups who do this well. Around workforce and SUD

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### Instructions (total time 20 min.)

- 1. SPEED introductions
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- 3. Spend a few minutes on each question. (select a timekeeper!)
- Be sure to take some time to identify potential actions for the HTF (question #5)
- 5. Highlight 1-2 thoughts / themes that emerged
- 6. Choose a reporter

## Q1: What resonated with you from this presentation?

- Competency around stigma reduction
- This is a stigma-aware group
- Would have been good to do a baseline survey with starting the group
- The healthcare provider stigma level was alarming

- The group has potential for the ripple effect to the community
- The Stigma Reduction group has evolved and will continue to form the group and community
- The Stigma Reduction group should consider a presentation directed for healthcare providers - even using the survey instrument for baseline and sharing that with healthcare leadership to leverage support/education/awareness training

#### Breakout Room 6 (second slide)

#### Q3: What feels doable?

#### Healthcare provider training and potential use of the survey instrument to measure stigma within the field

- Smaller steps to build up to this but helping to train students in the healthcare field on stigma reductions
- Sharing more personal stories / creating videos for organizations to share for connecting to purpose

## Q4: What might we (HTF) need to work up to? (if time permits)

- Capturing the attention of medical / nursing / other healthcare students
- Survey the community at large

#### Q5: What action might the HTF take in the next 12-18 months?

- Leveraging the academic connections within the HTF participants to start the steps for stigma reduction
- Gathering information on the curriculum within medical programs to understand what is being done on implicit bias, stigma reduction, etc. (MCW residency program, others)
- Building Continuing Education modules to share with many groups

#### **Breakout Room 7: Felicia Behnke Shaw**

### Instructions (total time 20 min.)

- 1. SPEED introductions
- 2. As a team, discuss each of the questions (see agenda).
- 3. Spend a few minutes on each question. (select a timekeeper!)
- 4. Be sure to take some time to identify potential actions for the HTF (question #5)
- 5. Highlight 1-2 thoughts / themes that emerged
- 6. Choose a reporter

## Q1: What resonated with you from this presentation?

- Seeing stigmas
- Small things that are actually huge things - EX: Papercuts small but really hurts
- Data ready for the action
- Fear and experiences and understanding
- Embarrassed with the perceptions of healthcare workers
- Education
- Unconscious biases no bad intent until you think about it

- Time and money
- Opportunity on educating on this on the little things that are big things
- Using the Data

#### Q3: What feels doable?

- YES seeing already some of the messages and education that is getting out there
- More opportunities and understanding it will take time to complete
- Education receptive to hearing about the unconscious biases
- This is a crisis people have to start listening

## Q4: What might we (HTF) need to work up to? (if time permits)

- Using the presentation that Rachel used and worked off of it
- Not reinventing the wheel
- Start building off of what is there
- Biases are going to take a long time to change, people slip back practice and time to master the changes in beliefs and thoughts

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#### Q5: What action might the HTF take in the next 12-18 months?

- Little videos that short videos (recovery video and the words videos)- that could be on the website and used
- Humanizing the message
- Environmental scanning using the tool the anti-stigma toolkit
- Creating more anti-stigma campaigns and working to educate and change beliefs
- Capitalizing on Social Media
- Targeting Healthcare Professionals
- Providing support to families
- Looking at the data

#### **Breakout Room 8: Lucy Medrow**

### Instructions (total time 20 min.)

- 1. SPEED introductions
- 2. As a team, discuss each of the questions (see agenda).
- 3. Spend a few minutes on each question. (select a timekeeper!)
- 4. Be sure to take some time to identify potential actions for the HTF (question #5)
- 5. Highlight 1-2 thoughts / themes that emerged
- 6. Choose a reporter

## Q1: What resonated with you from this presentation?

- Stigma education for students
- Different types of stigma (public, structural, self)
- Time & impact of education
- People first language

- Diving deep into research and data driven research
- Small group or 1-on-1 conversations
- O.A.K. box sharing
- Stigma survey share with Waukesha County
- Resource sharing (access, treatment, medication list for MOUs, etc...) "one stop shop"
- Continue to build support on community partners
- Focus more on "one pill that kill"
- Fact sheet on opiods
- Education for the community

| Q3: What feels doable?   | Q4: What might we (HTF) need to work up to? (if time permits) | Q5: What action might the HTF take in the next 12-18 months?           |
|--|---|--|
| <ul> <li>Facts sheets</li> <li>Continue to educate on stigma reduction</li> <li>Centralized resource database</li> </ul> | • Type here   | <ul> <li>Centralized resource database</li> <li>Fact Sheets</li> </ul> |

## Instructions (total time 20 min.)

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- 3. Spend a few minutes on each question. (select a timekeeper!)
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- 5. Highlight 1-2 thoughts / themes that emerged
- 6. Choose a reporter

## Q1: What resonated with you from this presentation?

- The statistics from this group were shocking-67% open to a safe injection site
- The language and culture is crucial
- Shifting is thinking is hard but change is happening!
- Waiting for people to catch up with these changes could cause people to leave and DIE

- This effort was great!
- Keep looking at language
- More education-engage young people before they learn stigmatizing language early!

Q3: What feels doable?

Q4: What might we (HTF) need to work up to? (if time permits)

Q5: What action might the HTF take in the next 12-18 months?

- Speak with kids!
- Be intentional with our time at community gatherings-give people time to reflect back on a situation where they could have used better language or experienced; reflection in a safe space
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#### **Personal Reflection**





Take a piece of paper out and contemplate this question:

# What might my personal next steps be in this journey?





# 2023 Action Teams



**Brief Verbal Updates from our Action Teams** 

#### **2023 Action Teams**



#### 1. Stigma Reduction Action Team

- a. Reduce stigma and build understanding of substance use disorder & harm reduction strategies
- b. Create a shared common message

#### 2. Support Recovery Action Team

a. Provide recovery support for individuals & families

#### 3. CHIP Substance Use Action Team (CHIP= Community Health Improvement Plan)

a. Identify opportunities to improve policies in upstream work to support system level changes

#### 4. Metrics & Measurements Action Team

- a. Build data literacy
- b. Support action teams with data needs



# AGENCY OR PARTNER ANNOUNCEMENTS

## Do you have something to share with the full group?

Raise your hand and share!





# NEXT STEPS Larry Nelson



- Summary slide deck and recording will be sent out in the next week or so!
- ✓ Action teams will continue their work.
- ✓ We will continue to provide periodic email updates with information
- ✓ FINAL 2023 HTF Community Gathering (2:30-4:30)
  - Tuesday December 5th