

Lapeer, Michigan—Serenity House Communities (SHC)

Session Date: January 24, 2024

Summary

A community listening session was held in Lapeer, Michigan on January 24, 2024. The session was open to the public and promoted as a “listening session on the use of state opioid settlement funds”.¹

The session was held at Serenity House Communities (SHC), located within the 48446 ZIP code; Lapeer County.² SHC is a Recovery Community Organization (RCO) that “provides substance use and co-occurring disorders support for men and women in Lapeer and Genesee counties. Services are conducted utilizing a Community Resiliency model that meets participants in their current stage of change and empowers them towards a path of recovery. SHC provides a wide spectrum of services including advocacy and educational events to reduce stigma, recovery coaching, and recovery support groups. The organization specializes in the delivery of holistic medicine approaches that range from Recovery Reiki to yoga and acupuncture.”³

The community listening session was approximately 90 minutes in length and held at a time that aligned with the existing community meeting schedule at SHC. Approximately 7 individuals attended the listening session, with primary representation from the recovery sector. Noting that most participants sharing lived experience with substance use, substance use disorder(s), and/or mental health conditions.

Attendees were provided a brief overview of the Opioid Advisory Commission (OAC) and the Community Voices initiative. Facilitation format and participation expectations were discussed at the beginning of the session. Session structure was flexible, allowing for roundtable discussion, with voluntary participation, as desired. Clarifying questions from the OAC facilitator(s) were permitted by the group. Attendees were provided with the following considerations for discussion:

Your experience—*What would you like to share about your experience(s)?
Professionally and/or personally*

Your observations—*What are you seeing in your community?
Strengths/Benefits; Needs/Gaps*

Your input—*How should the State be spending [state share] opioid settlement dollars?*

¹ https://council.legislature.mi.gov/Content/Files/OAC/OAC_Lapeer_1.24.2024.pdf

² “48446” ZIP Code Tabulation Area (ZCTA) ranked in the 48.9th percentile, per the Michigan Department of Health and Human Services, Substance Use Vulnerability Index (2020 MI-SUVI ZCTA Results). <https://www.michigan.gov/opioids/category-data>

³ <https://flintserenityhouse.org/our-story>

Your questions—What questions do you have for the Opioid Advisory Commission or state government officials?

The following themes were identified from discussion with participating attendees. The “Recommendations” category was developed by OAC staff to capture thematic elements shared during the Lapeer/SHC community session.

Recommendations

Prioritize anti-stigma and increase education efforts within the community

Recommendations were made to prioritize anti-stigma efforts around substance use, substance use disorders (SUD), and mental health conditions. Discussion was held around community-specific stigma, especially that surrounding drug use, injectable drug use, and use of medications for treatment/management of opioid use disorder (MOUD). Further discussion was held around limited access to local MOUD providers/prescribers.

Recommendations were made to improve education on trauma, substance use, substance use disorders, mental health conditions, co-occurring disorders, recovery supports, evidence-based practices, and local resources within all key sectors/systems, including but not limited to community health/behavioral health, criminal-legal system, K-12 education system, and among local service providers.

Increase supports for housing and transportation

Recommendations were made to increase supports for housing and transportation. Participants provided recommendations for expansion of emergency and/or recovery housing options, with input to increase peer and/or case management support services for (a) identification of individuals in need of housing supports and (b) engagement/linkages to care.

Noting recommendation for increased transportation support, with suggestion for peer professionals and/or RCOs to assist in addressing unmet transportation needs; rides to residential and/or outpatient treatment, legal/correctional appointments, recovery supports, and mental health services.

Increase access to harm reduction and health promotion supports

Recommendations were made to increase access to harm reduction and health promotion supports, including overdose reversal products (naloxone), sterile syringes, and smoking supplies. Noting further discussion around stigma as a perceived barrier to expansion/utilization of harm reduction supports.

Expand youth prevention efforts, including secondary and tertiary supports for youth

Recommendations were made to expand youth prevention services, education, and early intervention services within K-12 education systems as well as community-based settings. Further recommendations were made for increasing secondary and tertiary prevention measures (e.g.,

treatment options; harm reduction supports) for youth and transitional-aged youth; noting stigma as a perceived barrier to utilization of harm reduction/overdose prevention supports.

Additional Considerations

The following items represent additional considerations and recommended strategies/services shared by participants:

- Improve supports to address co-occurring SUD and mental health disorders; increase integrated care options within SUD and mental health treatment systems.
- Increase recovery support services to assist with linkages to care and bridge gaps in cross-system services.
- Increase case management and wraparound supports for individuals involved in the criminal-legal system.
- Enhance cross-system coordination across key sectors including harm reduction, prevention, recovery, and treatment.
- Increase community outreach and education efforts, including efforts with local businesses and behavioral health service providers, around health, substance use, SUD, mental health conditions, trauma, and local resources.

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