

Saginaw, Michigan—Community Listening Session on the Use of State Opioid Settlement Funds

Session Date: March 11, 2024

Summary

A community listening session was held in Saginaw, Michigan on March 11, 2024. The session was open to the public and promoted as a “listening sessions on the use of state opioid settlement funds”.¹

The session was held in collaboration with the Office of Representative Amos O’Neal,² and community partners from the Community Alliance for the People (CAP)³, Peer 360 Recovery Alliance⁴, and a regional prevention specialist. The session was held at the United Auto Workers Local 699, identified for its proximity to public transit and its location within the 48601 ZIP code; Saginaw County.⁵

The listening session was approximately 120 minutes in length and held at a time, collectively identified by collaborating partners.

Approximately 30 individuals attended the listening session with primary representation from federal, state, and local government, recovery, prevention, community health, behavioral health, faith-based, prevention, and housing sectors; noting the presence of participants with individual and/or familial lived experience with substance use, substance use disorder(s), mental health conditions, and/or involvement in the criminal-legal system.

Attendees were provided with an introduction to Representative O’Neal and session collaborators, as well as a brief overview of 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 Representative, OAC, and community 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*

¹ https://council.legislature.mi.gov/Content/Files/OAC/OAC_Saginaw_3.11.2024.pdf

² <https://housedems.com/amos-oneal/>

³ <https://www.saginawcap.org/>

⁴ <https://www.peer360recovery.org/>

⁵ “48601” ZIP Code Tabulation Area (ZCTA) ranked in the 96.9th percentile, per the Michigan Department of Health and Human Services, Substance Use Vulnerability Index (2020 MI-SUVI ZCTA Results); noting Saginaw County ranked in the 74th percentile (2020 MI-SUVI County Results).
<https://www.michigan.gov/opioids/category-data>

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?*

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 Saginaw listening session.

Recommendations

Direct funds to communities; prioritize cross-sector collaboration to improve service engagement and delivery

While collaboration was identified as a community strength, the need to expand and enhance collaboration across key sectors/systems was discussed as an ongoing community need.

Recommendations were made to direct opioid settlement funds back to the community to (a) expand necessary services along the care continuum, (b) increase service integration and community collaboration, and (c) enhance strategic partnerships to improve community response measures.

Cross-sector collaboration was identified as essential to planning and implementation efforts, with community partnership as an integral component in understanding local needs, offering opportunities maximizing resources, and enhancing service-delivery.

Address root causes of the overdose epidemic by supporting community investments and upstream solutions; invest settlement funds to improve social drivers [determinants] of health (SDOH)⁶

Recommendations were made for strategic investments around social drivers of health, including but not limited to the following:

- Increasing employment opportunities (economic stability);
- Increasing emergency, transitional, and long-term housing options; increasing access to affordable housing (neighborhood and built environment);
- Improving access to post-secondary education and vocational supports (education access and quality);
- Increasing access to behavioral health and recovery supports/services (health care access and quality);

⁶ <https://health.gov/healthypeople/priority-areas/social-determinants-health>

- Increasing opportunities for community connectedness through social, cultural, and recreational events (social and community context)

Discussion was held around the importance of community/SDOH investments as long-term prevention efforts.

Improve immediate access to care; support development of an engagement center

Recommendations were made for improving immediate access to care, especially during critical times, including when an individual elects to receive services and/or enter treatment.

Recommendations were made to (a) improve immediate access to service screenings (increase availability of ACCESS screenings; SUD service authorization for Medicaid beneficiaries and uninsured individuals), and (b) establish engagement center(s) to provide safe and stable settings that bridge gaps between service screening and service entry (withdrawal management programs; inpatient/residential SUD services).

Expand youth prevention services; expand outreach efforts and increase social and community supports for youth

Recommendations were made to increase youth prevention services, including education, early intervention, and culturally responsive supports within the K-12 education system, as well as in community and faith-based settings.

Recommendations were also made to increase direct outreach efforts to youth/transitional aged youth and to invest in community programming that supports social and community connectedness.

Discussion was held around the importance of expanding existing services and supports valued within the community, and expanding culturally responsive supports for BIPOC⁷ youth, including local youth coalitions and after school programming, developed from input from youth members.

Increase support for co-occurring needs; provide culturally responsive care

Recommendations were made to increase supports for co-occurring substance use and mental health disorders (COD), with discussion around the need for anti-stigma efforts and culturally responsive care for BIPOC communities. Noting that suggestions for anti-stigma efforts and culturally responsive care was discussed in the context of improving (a) service engagement, (b) client experience, and (c) overall health and social outcomes for co-occurring needs.

Include community voices in planning and decision-making; utilize the faith-based community as a key sector for all initiatives

Recommendations were made to actively include community members in the process of developing solutions for the overdose crisis. Discussion was held around the necessity of including faith-based communities/leaders as key partners for all initiatives delivered at the local/community level, including

⁷ "BIPOC": Black, Indigenous, People of Color

but not limited to education, outreach, youth prevention, harm reduction, overdose prevention, violence prevention, anti-stigma, housing support, family support, and recovery.

Faith-based communities and Faith leaders were identified as essential in planning and development efforts and as a central “hub” (access point) for further service/resource-linkage.

Embrace community connectedness as a prevention strategy; support events that bring communities together

Recommendations were made to support investments in social, cultural, and recreational opportunities that (a) enhance connectedness, (b) improve knowledge of and access to resources, and (c) strengthen community bonds.

Opportunities that bring community members together around a common purpose/event was identified as a priority, with discussion of prior activities/community functions that served to strengthen connections and unite community members.

Additional Considerations

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

- Improve family-oriented recovery and increase supports for families within key sectors, including recovery, treatment, criminal-legal, housing and faith-based.
- Increase housing and transportation supports; increase access to public transportation and expand peer-delivered transportation options.
- Increase recovery supports; expand post-incident response efforts, recovery support groups, case management, crisis supports, peer-led re-entry, and culturally responsive recovery supports.
- Expand and improve professional education/training around trauma (including generational trauma), lived experience, substance use, substance use disorders, mental health disorders, co-occurring needs, and culturally responsive care.
- Increase supports for justice-impacted individuals, including housing, employment, and specialized behavioral health treatment; increase supports for justice-impacted youth.
- Increase oversight and accountability measures for local service providers, including but not limited to recovery, transitional, and/or group home providers.