



**Massachusetts Department of Public Health**

# **Massachusetts Municipal Opioid Abatement Conference**

**Day Two**

**Wednesday, March 20<sup>th</sup> 2024**



# Massachusetts Department of Public Health

## Keynote: The Role of Government in Engaging People with Lived Experience in Decision Making

**Dr. Robert Goldstein**  
**Speaker**

# Day Two Overview

Session One: Facilitating Inclusive and Meaningful Community Engagement with Priority Populations

Session Two: Supporting Community Needs Assessment and Strategic Planning

Sessions Three: Sharing Information about Evidence-Informed Interventions



**Massachusetts Department of Public Health**

# **Session One: Facilitating Inclusive and Meaningful Community Engagement with Priority Populations**

**9:45am-10:50am**

**Julia Newhall  
Moderator**



## Introduction to **MOAR**

# Welcoming The Voice of Recovery to Municipality Overdose Abatement Planning!

Presented by: Maryanne Frangules, Executive Director



# Objectives



Inform you  
about **MOAR**



Describe what  
**MOAR** does



Review  
**MOAR's**  
impact across  
the state



Approach  
**MOAR** for  
Recovery  
Community  
Outreach

# Our Origin Story – 30 Yrs. and Going Strong



We were founded in 1991 by Maryanne Frangules with Leroy Kelly and a group of volunteers



Inspired by Senator Harold Hughes, a former US Senator in recovery, and founder of the national Society of Americans in Recovery (SOAR)



We are alive today because of the unwavering support of people in recovery, families, and friends



# Our Mission & Vision

Our mission is to organize recovering individuals, families and friends organized in a collective voice to educate the public about the value of recovery from alcohol and other addictions

We envision a society where addiction is treated as a significant public health issue and recovery is recognized as valuable to all our communities

**As in The Municipal Overdose Abatement Process**





# Diversity, Equity & Inclusion Statement



We are a voice for all people seeking the benefits of recovery.



Systemic racism, prejudice, and bias have been deeply ingrained in the history of the American health care system.



We are committed to doing the work necessary to address the struggles and inequities diverse groups of people face while seeking recovery services.



We are creating a collective voice for those seeking recovery for all people who have been historically underserved, marginalized, and oppressed



# What We Do



Build relationships with decision-makers and key partners, to prioritize the needs of all affected by addiction as **in the overdose abatement process**



Advocate for recovery support services such as peer recovery coaching and recovery centers **be part of any municipal overdose abatement process**



Educate the community and policy makers and the general public about supporting addiction prevention, treatment, harm reduction, and recovery as **in any municipal overdose abatement process**

# What is Drug Addiction?

Addiction is a chronic disease characterized by drug seeking and use that is compulsive, or difficult to control, despite harmful consequences. (National Institute of Health)

## What is Addiction Recovery?



7 in 10 adults who ever had a substance use problem considered themselves to be recovering or in recovery.

SAMHSA's [working definition of recovery](#) defines recovery as a process of change through which individuals improve their health and wellness, live self-directed lives, and strive to reach their full potential. And there are many faces and pathways.

# Why are there Overdose Abatement Funds?

## 6 People a Day Dying from Overdoses

### Community Conversations to Bring About Healing

- What is your vision ?
- What is missing in The Community ?
- Where are The Gaps?
- Does this Community Need support for Grandparents
- What about Funerals?
- What about Grief Groups?
- What about Recovery Resources ?
- What about Recovery Coaching?
- How to Find The Recovery Community to Make Your Choices!

**Bring The Hope To Your Community**

# Recovery Community Engagement

## Regional Coordinators' Work



- ❖ Offer continued support to the recovery centers
- ❖ Visit RCO's to build relationships, outreach for membership and to drop off MOAR recovery resources
- ❖ Visit and participate in RCO community meetings
- ❖ Attend and participate in Opioid Task Forces
- ❖ Facilitate Recovery Messaging trainings at RCOs
- ❖ Continually provide policy and budget updates to the community
- ❖ Recruit speakers to share their recovery stories
- ❖ Provide education to the community regarding Equity, Diversity, and Inclusion
- ❖ Recruit members of the recovery community with long term successful recovery from substance use disorder from local recovery centers, coalitions, and events





## What about a Peer Recovery Support Center !



<https://www..gov/info-details/peer-recovery-support-centers>

### Could Be in Your Municipality's Neighborhood!

Community. Connection. Support. Addiction Recovery Happens Here. The 39 Massachusetts Peer Recovery Support Centers (PRSC) are free accessible peer-led spaces that provide individuals in recovery from substance use, as well as families and loved ones affected by addiction, the opportunity to both offer and receive support in their community environment. Many have recovery coaches who bridge hope to challenges to make recovery possible.



# MOAR MiniGuide!

[https://www.moar-recovery.org/\\_files/ugd/3ec35a\\_824da1198e6c4497b51281ddb443e078.pdf](https://www.moar-recovery.org/_files/ugd/3ec35a_824da1198e6c4497b51281ddb443e078.pdf)



A Mini Guide with  
**MOAR** to come!

**Join the Voices for  
Recovery!**

# Continuum of Care Resources

Massachusetts Substance Use Helpline





# Abatement Fund Use

1. Opioid Use Disorder Treatment
2. Support People in Treatment and Recovery
3. Connection to Care
4. Harm Reduction
5. Address the Needs of Criminal Justice-Involved Persons
6. Support Pregnant or Parenting Women and Their Families, Including Babies with Neonatal Abstinence Syndrome
7. Prevent Misuse of Opioids and Implement Prevention Education

For more details, visit the [State website](#).

# What are Some Communities Doing ?

**Some are sharing funds - Using Recovery Coaches for Outreach and Support**

**A mobile crisis team to help respond to 911 calls involving mental health and substance use.**

**The balance of the funding covered staff that provides outreach for people struggling with homelessness and substance use.**

**Police staffing and training for the police and fire departments on Narcan, a brand of the overdose reversal drug naloxone.**

# Our Impact

## Nothing Happens without MOAR



**MOAR** engages over 10,000 community members, and it partners with allied organizations to represent the expanding voice for recovery.



**Maryanne Frangules,  
Executive Director**

**Former Face and Voices  
of Recovery Board  
Member, has served on  
many task forces and  
commissions to help give  
a voice to Recovery!**

# Our MOAR Events

Town Hall Meetings in every region -focused on policy and recovery

**MOAR** Laughs Comedy Fund Raiser in Arlington

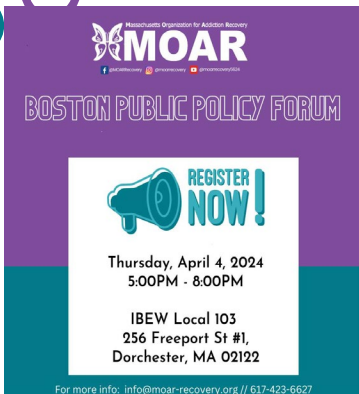
Year Round Fun and Summits

Recovery Month  
Every September

Action for Recovery Town Hall Meetings in April, May and June

Annual **MOAR** Holiday Celebration

**MOAR** and Friends Recovery Day



Boston Public Policy Dialogue



# Become a Member

You are Visible, Vocal, Valuable

Our Members are putting a face and a voice on recovery and organizing campaigns and events to raise awareness while celebrating recovery in their communities. Being a member means being part of the largest addiction recovery organization in Massachusetts.

How to Join \_\_\_\_\_

[www.MOAR-Recovery.org/membership](http://www.MOAR-Recovery.org/membership)

# THANK YOU!

# Q & A



# Including People Who Use Drugs

INCLUDING PEOPLE WHO ARE USING  
SUBSTANCES IN YOUR OPIOID  
ABATEMENT STRATEGY



# Creating a Plan



1

Understand the importance of an inclusive decision-making process

2

Articulate the dos and don'ts when engaging priority populations

3

Learn about common barriers that prevent meaningful engagement and strategies to overcome them

4

Know where to obtain assistance and resources when conducting community engagement



# Challenges





# Who is in the room?

- First responders
- Politicians
- People in recovery
- Providers
- Community Members
- Parents/Family members
- People who use substances but do not share that information.

# Meetings and Emails and etc.,

- Not all folks have a phone.
- Not all folks have daily access to tech.
- Some people may find it hard to navigate a schedule, other daily responsibilities may be priority.
- There is a wide range of individuals who use substances in a variety of ways.
- How can we accommodate people?



# Outing Oneself

I am a person in recovery.

I am a police officer.

I am a city council member.

I am a mother who lost a daughter.

I am a nurse practitioner at the local health center.

I am a developer in the city/town.

I am a person who uses substances.

I am a person who uses substances, and I am a person in recovery.

# Valid Life Experience

- People who are actively consuming substances are on the front lines.
- People who are using substances have valid information and perspective.
- People who are using substances have value and a lot to offer.
- People who use substances may not be welcomed if they are visibly high.
- People who are using substances are at the highest risk for overdose as they are using the substances every day.
- People who are using substances have **JUST** as much to offer as anyone else.



# Ways to Engage

When folks can't make the meetings.



# Reaching Out

- Connect with and visit your local harm reduction program that provides full service harm reduction. *(not just programs that give out Naloxone and test strips)*
- **If you and all the others in your group are paid to attend meetings, pay people who use substances to attend as well.**
- People may not want to come but want voices heard.
- Paid surveys or interviews to gather information and take back to the group.
- Hosting your meeting at locations where people who substances are.
- Utilize your local harm reduction program or local networks of harm reduction workers to recruit individuals.

# Reflect

- Do the individuals' making decisions on how to spend the money respect the input of people who are CURRENTLY using substances?
- Do you believe that people who are using substances have something to offer or is recovery/abstinence required in order for your group to take stock of their input?





# Is it possible?

- It can be, the abatement funds can be flexible.
- Yes, you can pay individuals' cash for their time.
- Is it easy? No, people feel uncomfortable and afraid.
- Will it happen, maybe...maybe not but you can adjust your strategy and guidelines.
- Will the powers that be listen to your requests and adjust? Not necessarily.
- Will you have to make adjustments in how you connect with people? Yes.
- Get creative!



# Including Bereaved People in Municipalities' Decisions About Opioid Abatement Funds

Robyn Houston-Bean, Founder, The Sun Will Rise  
[robyn@thesunwillrise.org](mailto:robyn@thesunwillrise.org) — 781-789-4604



# The SADOD-TSWR Partnership



- Direct Outreach
- 1-on-1 Peer Grief Support
- Peer Grief Support Groups



# We Touch Hundreds of Grieving People

Every one of them:

- Has their own very personal story
- Has been deeply harmed by substance use
- Has a right to have their voice heard

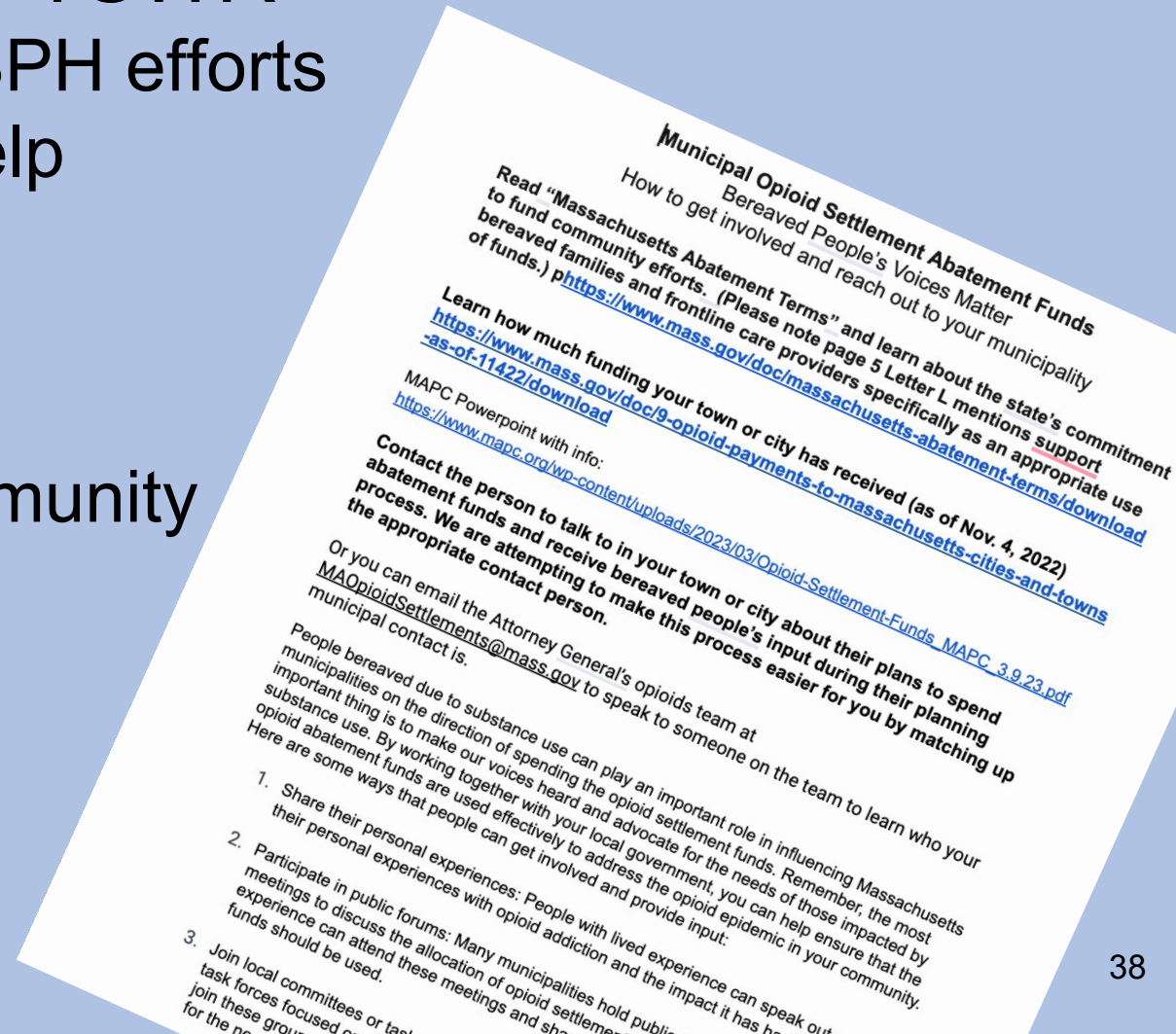
*Bereaved people are among the most experienced, knowledgeable, and passionate advocates for effective community responses to substance-use issues.*



# Ready, Willing, and Able to Help

## Grassroots outreach effort by TSWR

- Questionnaire modeled after BPH efforts
- So far, 200 grieverers want to help municipalities
- TSWR gives them a practical “advocacy handbook”
- Massachusetts bereaved community is expanding
- SADOD provides technical assistance & support



# Consider “Where They’re Coming From”

Keep in mind:

- Many people grieving a death from drug-alcohol use have had profound experiences of being stigmatized
- Their passion for change may come from negative personal experiences with the substance-use treatment system
- They want to be listened to and respected because of how much they have lost due to substance use.
- They commonly do advocacy and other community-spirited work in memory of their love one who died.



# Engaging, Working with Bereaved People

- Provide meaningful levels of participation
- Give opportunities for ongoing involvement
- Establish ways to monitor progress and success
- Recognize interests in learning and growing
- Eliminate financial and practical barriers to participation
- Include diverse perspectives, languages, cultures





# Let Us Help You Make Connections

- In the upcoming year, SADOD and The Sun Will Rise will interact with thousands of bereaved people.
- We are continually adding to the 200 people we have already identified who want to work with municipalities.

**Email:**

**[abatementconnections@thesunwillrise.org](mailto:abatementconnections@thesunwillrise.org)**

**We will help you if we can.**





# Opioid Abatement Funds: Facilitating Inclusive and Meaningful Community Engagement



Falmouth  
**COMMISSION ON  
SUBSTANCE USE**  
Targeting the Whole Community

## Community Engagement

# Overview & Goals:

- To engage with the community, increasing awareness around settlement funds and other town opportunities for involvement
- To involve people with substance use disorder and other lived experience in decision-making processes
- To be as inclusive as possible
- To be thoughtful and intentional with the process and to not create more harm for community members
- To create a model practice with community engagement event templates which other Cape towns can duplicate and individualize to the needs of their community



## Partners:

- Suzie Hauptmann, Human Services Director
- Falmouth Commission on Substance Use
- Kate Lena, Barnstable County Human Services - Substance Use Prevention Program Manager
- Advisory Group - Interested citizens and community stakeholders
- Sky Freyss-Cole, Consultant/Facilitator
- Design Team
- Community Members - People with lived experience/ those personally affected by the Opioid Crisis



# Engagement Process and Timeline:

## March-May:

Convened Advisory Group, Engaged Consultant/Facilitator, created design team and prep.

## June:

Convened large Community Conversation

## September:

Convened 5 Focus groups

## October:

Held a Reflecting Back session and 2 FCSU working sessions

## November:

Presentation to Select Board on community engagement process and key themes that emerged and with a request that Town begin RFP process that reflects the input of community members



**Join us at the table!**  
Let's talk about the opioid epidemic in Falmouth

**THURSDAY**  
**June 22, 2023 • 5:30-8:30pm**  
St. Barnabas Church • 91 Main Street • Falmouth

The Falmouth Commission on Substance Use invites you to have a facilitated conversation and share your experience about how the opioid epidemic has impacted you, your family and/or the community. Falmouth residents affected by Opioid Use Disorder and the professionals that serve Falmouth residents are encouraged to attend to assist in the process of identifying priority needs in Falmouth that will help guide future spending of Opioid Settlement Funds.

**Confidential RSVP:** Scan QR code, <https://tinyurl.com/5n6ew72f> or email [info.humanervices@falmouthma.gov](mailto:info.humanervices@falmouthma.gov) or call 508-548-0533. Light supper and childcare will be provided (please note in RSVP number of children/ages).

**Falmouth COMMISSION ON SUBSTANCE USE**  
Targeting the Whole Community

**Join a focus group!**  
Let's talk about the opioid epidemic in Falmouth...

The Falmouth Commission on Substance Use is hosting a series of focus group conversations as part of our community engagement process this year. Falmouth residents who are or have been impacted by the Opioid Epidemic are encouraged to participate in a focus group that best fits their experience.

- SEPTEMBER 18TH, 5:30 PM: FAMILY MEMBERS OF PEOPLE IN ACTIVE ADDICTION, AND/OR IN RECOVERY FROM OPIOID USE DISORDER
- SEPTEMBER 19TH, 5:30 PM: FAMILY MEMBERS/LOVED ONES WHO HAVE LOST SOMEONE TO OPIOID USE DISORDER
- SEPTEMBER 27TH, 7:00 PM: PARENTS IN RECOVERY OR SEEKING RECOVERY FROM OPIOID USE DISORDER
- SEPTEMBER 28TH, 5:30 PM: BLACK, INDIGENOUS AND PEOPLE OF COLOR IMPACTED BY THE OPIOID EPIDEMIC
- SEPTEMBER 28TH, 3:00 PM: YOUNG PEOPLE IN RECOVERY, SEEKING RECOVERY, OR STRUGGLING WITH THEIR SUBSTANCE USE (24 AND UNDER) - GUS CANTY REC CENTER

**SVP:** All focus groups to be held in Falmouth. Please use the following link: <https://tinyurl.com/5n6ew72f>, QR Code or call 508-548-0533 to register.

**Falmouth COMMISSION ON SUBSTANCE USE**  
Targeting the Whole Community

**Join a focus group!**  
Your Opinion Matters! Let's talk about the opioid epidemic in Falmouth!

**WEDNESDAY, SEPTEMBER 27TH, 3:00 PM**  
**FALMOUTH SCHOOL ADMINISTRATION BUILDING**

The Falmouth Commission on Substance Use is hosting a focus group conversation with Falmouth Public School personnel on the impact of the opioid epidemic as part of our community engagement process this year. We encourage participants in this focus group to share their experience on how the crisis has impacted them, their students and the families they serve.

**RSVP:** Please use the following link: <https://tinyurl.com/5n6ew72f>, QR Code or call 508-548-0533 to register. Registration is confidential (do not need full name).

**Falmouth COMMISSION ON SUBSTANCE USE**  
Targeting the Whole Community



**THANK YOU!**

**Falmouth COMMISSION ON SUBSTANCE USE**  
Targeting the Whole Community

### ROUND 1: HOW HAVE YOU BEEN IMPACTED BY THE OPIOID EPIDEMIC HERE IN FALMOUTH? HOW HAVE YOU SEEN OR COMMUNITY BE IMPACTED?

- Sticky notes with various responses.

### ROUND 2: IN TERMS OF HOW WE RESPOND TO THE OPIOID EPIDEMIC HERE IN FALMOUTH: WHAT'S WORKING WELL NOW? WHAT HAS WORKED WELL IN THE PAST?

- Sticky notes with various responses.

### ROUND 3: BASED ON OUR CONVERSATIONS SO FAR... WHAT'S MISSING? WHERE ARE THE GAPS? + WHAT NEEDS TO BE NAMED NOW?

- Sticky notes with various responses.

### What's WORKING?

...has in the past?

- \* Mass Health
- \* Having Sobor houses in the area
- \* Place like WellSpring
- \* The community comes together a lot
- \* Freedom Church (recovery church) - individual
- \* Heroin project
- \* PTI transportation to cars
- \* NARCA Shop
- \* Lots of meetings
- \* Fellowship House

### WHAT'S WORKING?

...and/or what has worked in the past?

- \* Heroin Project - "they have everything"
- \* Informal family meetings - someone abroad experience, arrived in the fall, educated
- \* "Walk to Recovery" (N) - at the end of your life
- \* Sharing experiences - talking in schools
- \* Any prevention effort
- \* Night on the green - "duh, I didn't know"
- \* Close supportive friends - "I will walk beside you"
- \* Being honest

### WHAT'S MISSING? NOT WORKING?

- \* "Spin day" does not work
- \* Insurance systems broken
- \* Long term treatment
- \* Community involvement - Don't talk about it
- \* Single treatment - Disconnect w/ mental health
- \* Treatment options that fit w/ life, more options (night hotline etc)
- \* Lack of bridge from treatment to sober house
- \* Decarceration
- \* Transportation - limited! Need vans - meetings
- \* People need a ride - nobody has a license
- \* Need a license - stuck in 3rd downward cycle

### What would we like to see more of?

- \* Identify high risk youth
- \* Provide safe spaces
- \* Dual diagnosis - mental health
- \* Grief support for young adults/siblings
- \* In school peer support
- \* Scholarships for people in recovery

### Missing / gaps

- \* Providing alternatives for stress management
- \* Additional Tools @ all age levels
- \* CPR + NARCA training
- \* Treatment opportunities for family members
- \* We know where this is going... But feel we can't stop it
- \* Right now - don't have a way to connect kids w/ each other (share resources/build relationships)
- \* Having students have agency to be a part of the conversation themselves

### Priority needs in the school community environment?

- \* Systemic plan for what students get when Education + Support (Health curriculum)
- \* Early intervention Education
- \* Helping people access
- \* Strengthen relationships
- \* What is the base?
- \* Supporting groups in the peer via
- \* How can we support w/ addiction?

### What's working / What has worked in the past?

- \* Sharing stories of addiction on panel (5th/6th) - "You're not alone"
- \* Empathy, REACT, CONNECTION
- \* Impassioned age group - making choices
- \* Added additional school adjustment counselors
- \* Lots of resources in town
- \* "Social Dist" / food sanitation
- \* Recovery High School
- \* Our ongoing services - peer support
- \* Hidden in plain sight
- \* Treated adult / Mentors

### What would we like to see

- \* Funding for parents transitioning at a time to living on their own - certain level
- \* More support for parents - keeping families together
- \* More private availability - therapy on a family level
- \* Women's Children's Program - housing w/ kids
- \* More support w/ transportation - support for the kids
- \* De-stigmatization
- \* More well-being (6 plus like it)
- \* More support / integrated way when
- \* Support w/ work place next - career support
- \* Credit counseling
- \* Childcare / daycare vouchers / babysitting
- \* Alternative for parents to care w/ animals - many, many
- \* More sober living for women/women, people
- \* A place to meet w/ other kids + spend time

### WHAT'S MISSING? +/OR NOT WORKING?

- \* Limited State-funded Programs
- \* Family Support
- \* Identifying Recovery Coach
- \* Uninsurance of Resources available
- \* Emergence those closed
- \* Choose your family or choose your recovery
- \* Coming soon - peer to peer support
- \* No places for the youth to stay - for the future
- \* Barriers to access
- \* Protection for self-recovery
- \* Places for DDPS w/ kids
- \* Kids' activities during meetings
- \* More support for the students
- \* More not all equal when it comes to access to resources
- \* Legal not shared in multiple environments
- \* Liaison - support for parents

### Falmouth Schools 9/27, 3PM

- \* Welcome + Introduction
- \* Check-in round: Your name, your role(s), + Briefly - How have you seen your school community impacted by the opioid epidemic?
- \* In terms of how we respond in Falmouth: What are the priority needs in the school community environment? What has worked in the past?
- \* What's missing? Where are the gaps?
- \* Wrap-up - what hasn't been said? Anything to add?

### WHAT'S WORKING?

- \* Cape Verdean Club: Fundraising "SOBER DANCE"
- \* MASH -> certification
- \* Rocky's gym -> family environment, connections
- \* Support system, rides etc. FREE if you can't pay
- \* Falmouth Community -> those who do not just talk
- \* Those who guide, share resources, connect + help people
- \* Lots of meetings: AA + NA, availability
- \* BOO - "don't start alone" -> same people
- \* NARCA - in Falmouth: A lot of businesses
- \* Mobility of NARCA BYES - you still have support
- \* House visits after overdose -> more than just that people

### WHAT'S MISSING?

- Sticky notes with various responses.

### NOT WORKING:

- \* People sober long time + still can't get their license
- \* Not staying @ high levels/or not reaching the peak
- \* Access to funds for people doing work on the ground
- \* We need grant writers!

### WHAT WOULD WE LIKE TO SEE MORE OF?

- \* Support after treatment - in to housing - sober house
- \* Secure sober housing - regardless of # + insurance
- \* Available for scholarships - all about the parents
- \* Caps on sober living costs
- \* Sober houses w/ structure
- \* "Navigation" to help folks get there that make them
- \* Conditional license -> more cooperation from RWU
- \* More community support - people calling people

### What's one thing that is staying with you?

"... I check out."

### TAKEAWAYS

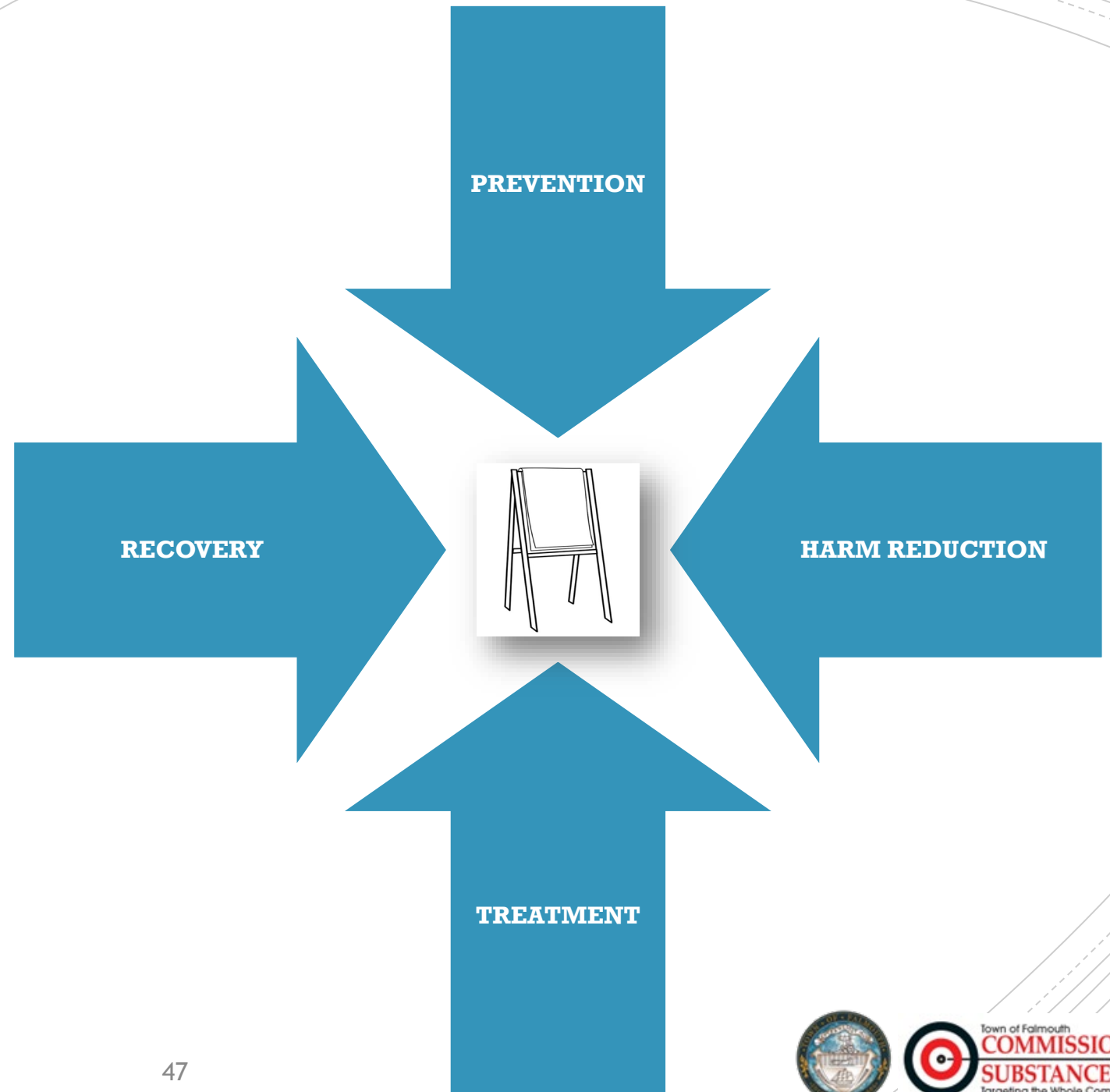
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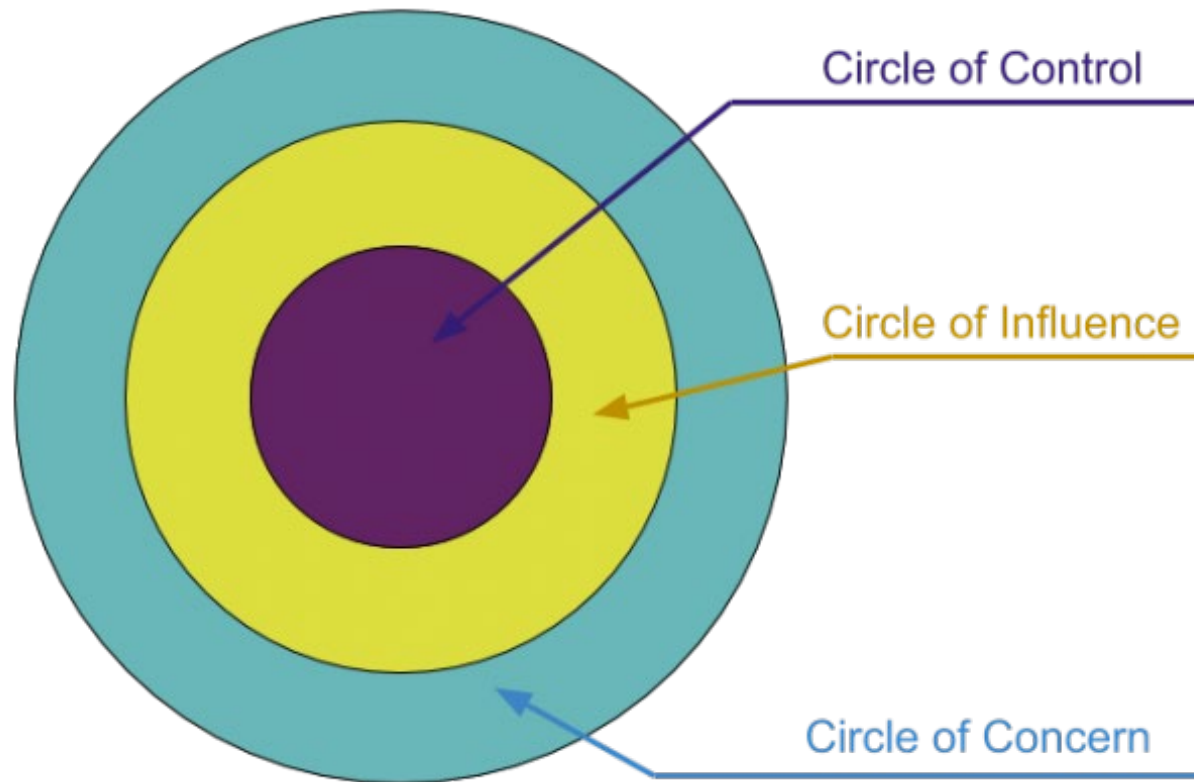
### WHAT'S NOT WORKING?

- Sticky notes with various responses.

## Key Themes:

Identified key themes  
that emerged  
throughout the process





# Circles of control, influence, and concern





legal positive meetings integrate adults community  
finding breaking reimbursement access youth detox  
together stigma prevention first peer communication  
**support** new early wellstrong beds use mothers  
healthy level living **education** etc **sober** outreach good  
information responders treatment people schools houses need  
just family care intervention school **services** mobile  
help housing workers addiction integrated health increased  
scholarships recovery resources easier center  
training parents programs nothing kids thresholds  
insurance police availability continuing changes  
women insurances aftercare



QUESTIONS



THANK YOU

## Next Steps:

- Work with town staff to create RFP/grant application for distribution in January 2024
- Continue community engagement via regular Commission meetings and additional focus groups as needed



# Opioid Settlement- Implementation in Boston

## Process and Learnings

**Jen Tracey, MSW**  
**Director, Office of Recovery Services,**  
**Boston Public Health Commission**



# Organizational Background

- **BPHC Mission Statement:** "To work in partnership with communities to protect and promote the health and well-being of all Boston residents, especially those impacted by racism and systemic inequities..."
- Opioid Settlements Funds hold significant importance to the Boston community and we are committed to maintaining transparency and honoring voices impacted by the epidemic
- Conducted community engagement across Summer 2023



# Boston's Priority Populations

- Families who have lost a loved one
- Individuals who use opioids
- Individuals in recovery from opioids
- Youth at-risk of developing opioid use disorder
- Black and Latinx communities, because of increased risk of overdose

# Methods Used for Data Collection

<b>Listening Sessions</b> – Neighborhood-specific sessions, or sessions specific to priority populations like families	8 sessions (~200 participants and 72% BIPOC)
<b>Surveys (Eight languages)</b> – Major languages of Boston	415 respondents (35% BIPOC)
<b>Longform RFI</b> – Up to 2 pages	11 responses (Almost all agencies)
<b>Population Health Research</b>	Such as health department data and academic literature

# Reach Methods

- Partnered with leaders in diverse communities, nonprofits, and faith institutions
- Partnered with neighborhood associations
- Engaged Recovery Services harm reduction and residential treatment clients
- Sent email blasts internally and through partner newsletters
- Press strategy, including interviews with our ED Dr. Bisola Ojikutu
- Made a designated website to refer folks digitally

# Analysis and Synthesis

- Partnered with researchers to analyze the quantitative survey data and the qualitative listening session and RFI data
- Developed a framework to synthesize the information
- Elevated strategies that reflect the voices of people impacted, address system gaps, and promote equity



# Public Recommendations

**1.**

**Housing  
Support**

**2.**

**Equity Grants**

**3.**

**Overdose  
Prevention**

**4.**

**Supporting  
Grieving  
Families**

**5.**

**Youth  
Prevention**

# Do's and Don'ts

Do's	Don'ts
Go directly to people with lived experience (visit treatment programs and harm reduction spaces)	Don't assume audiences understand the difference between your settlement funds, the State's share, another city's, etc
Visit existing community groups because organizing is time-intensive	If there is ambiguity around who is starting your local engagement, don't wait (start the conversation!)
Partner with researchers/epidemiologists to help with analysis	Don't only engage institutional leaders
Use incentives when possible to compensate participation	Avoid a rigid presentation. Some community meetings might give you 15min, but others give you an 45min

# Overcoming Barriers to Engagement

Barriers	Ways to Overcome
Historically marginalized communities can be skeptical of government assessments	Partner with community leaders throughout the planning and implementation of the assessment
Geographic affiliation	Hold multiple listening sessions; engage groups from different neighborhoods
Comfortability with technology	Conduct physical listening sessions in addition to providing online feedback mechanisms
Language	Translate surveys into multiple languages. Outreach to community orgs associated with non-English communities
Busy-ness	Offer quick survey for busy people, and a longer RFI for people who want more space to write

# Be Trauma-Informed

- These conversations can be painful for participants who have lost loved ones
- Contextualize conversation. The dollars are welcome but the loss is irreplaceable
- Recognize bravery when people share their experiences openly
- Every [culture deals with grief differently](#). Be mindful of cultural sensitivities when addressing grief and loss.

# Resources for Engagement Efforts

- Boston Opioid Settlements Report – [in-depth write up](#) of methods and results
- Boston built its survey questions around the [MA Municipal Abatement Terms](#)
- Other municipalities are welcome to copy and modify Boston's [survey questions](#)
- Duke University Opioid Abatement Needs and Investment [Tool](#) – uses population data and algorithms to recommend evidence-based interventions

Questions?