



Recommendations  
OF THE  
**MAINE OPIATE  
COLLABORATIVE**

May 2016

**LAW ENFORCEMENT**

**TREATMENT**

**PREVENTION & HARM REDUCTION**

# Community Forums

- What we hoped to accomplish:
  - 10 forums total, 1 in each of 9 public health districts
- What actually happened:
  - 22 community forums
  - 20 Maine communities
  - Every public health district
  - 12 of 16 counties
  - 40 to 150 people each – over 1500 people total

# MAINE OPIATE COLLABORATIVE

Community Forums



# Prevention and Harm Reduction

- **Get at the root causes:** trauma, pain, poverty, hopelessness, insecurity
- **Invest in kids early:** early childhood education, home visiting
- **Reduce bias and stigma:** adjust our language and educate communities, families, providers, law enforcement
- **Youth/student education and supports:** create safe spaces to talk; after-school groups; engage peers, adult mentors, and people in recovery; normalize the conversation around trauma; teach life/coping skills; school forums
- **Community/parent education and supports:** education about addiction and how we can support people with substance use disorder, support groups, community forums, engage businesses, engage recovery community
- **Screening and early intervention for trauma:** schools, primary care
- **Change the culture and the treatment for chronic pain**
- **Reduce access:** drug take-backs, education on safe storage, reduce over-prescribing, mandate use of Prescription Monitoring Program (PMP)
- **Approach marijuana policy with caution**
- **Reduce harm:** needle exchanges, expand access to Narcan
- **Support for people in recovery:** employment, housing, transportation to appointments/meetings, build hope and sense of community, promote success stories
- **Engage the recovery community**

# Treatment

- **Reduce financial barriers:** more health insurance options, community fundraisers
- **Reduce logistical barriers:** community transportation programs
- **Expand treatment infrastructure:** more providers of Medication Assisted Therapy (MAT); more providers of counseling; increase local options for treatment, including detox, residential rehab, intensive out-patient, social detox; more beds for women; resource hubs (storefront and online)
- **Improve/expand treatment systems:** real-time referrals; warm hand-offs between all aspects of treatment and recovery; coordination system among providers and social service agencies for wrap-around care
- **More capacity to treat co-occurring (mental health and substance use) disorders**
- **Engage the recovery community:** mentoring/peer-to-peer

# Law Enforcement

- Diversion/LEAD model
- Drug courts
- Operation HOPE model with local treatment options
- Mental health/substance use disorder professionals embedded in police departments (Portland LEAAP model)
- Share drug arrest data (Diversion Alert model)
- More funds for law enforcement to follow drug cases and root out dealers – focus on dealers and support people with substance use disorder
- Treatment options in jail: counseling plus medication, peer-to-peer supports, engage recovery community
- More treatment and family supports for incarcerated women
- Community engagement: reporting
- Comprehensive pre-release programs: support, housing, employment, skill-building
- Educate - reduce stigma - build relationships between people in recovery and law enforcement

## The one thing everyone agreed on...

- No single approach or group will solve this—our communities must come together and we must all get involved!

# What's Next

- **It's up to us!!!**