

MIC Notes

Central Topic: Opioids and Substance Use Disorder

Friday, November 17, 2023

Zoom

Attendees:

Ellen Mahoney, Peaks Island

Katie Ford, Great Diamond Island

Douglas Cornman, Maine Seacoast Mission

Eva Murray, Matinicus

Mark Greene, Long Island

Catherine Haley, Vinalhaven

Cheryl Crowley, Cliff Island

Peter Huston, Great Lakes Islands Alliance

Jamie Lovely Penobscot Bay Community

Health Partnerships

Margaret Snell, Maine Seacoast Mission

Mary Anne Mitchell, Peaks Island

Michaela Schoeffler, Lincoln Health

Roger Berle, Cliff Island

Rota Knott, Acadia Family Center

Stella Rich, Casco Bay Recovery

Tara Young, Healthy Acadia

Will Matteson, Healthy Lincoln County

Yvonne Thomas, Island Institute

Kelly Cotiaux, Staff Representative for
Senator Collins

Imogen Moxhay, Island Institute, Peaks
Island

Alex Zipparo, Island Institute

Kate Tagai, Island Institute

Jen McFarland, Islesboro

Brenna Cohen, Island Institute

Minutes from October- Motion to accept the minutes. Moved and seconded .

Reminder that MIC will be reviewing and updating the strategic plan to be ratified for the February meeting in Augusta.

Island Updates:

Recognition of the tragedy on Long Island last week. There is a fund to help the family. Info on fund

Matinicus: PIA has been purchased by someone known to the community
New Matinicus Ferry was named for a WW2 Vet Charles Norman Shey

Peaks: Election results are in and two open seats remain on the PICouncil. The council will work to appoint two community willing to serve for one year positions until the next general election. Our communities beloved music director Jan Thomas died suddenly at home and the community came together to share a lovely memorial service and show of support for her two daughters and their young families.

Homestart moving ahead with fundraising to build 3 units of rental housing in the former parish hall of St Christopher's church.

New privy is operational at the community garden at Trott Littlejohn park.

Halloween at the Lions Club was a great night of community fun.

Central Topic: Opioids and Substance Use Disorder

Panelists

Will Matteson, Healthy Lincoln County

Stella Rich, Casco Bay Recovery

Rota Knott, Acadia Family Center

Tara Young, Health Acadia

Jamie Lovley (PBCHP)

Douglas Cornman, Maine Seacoast Mission

Michaela Schoeffler, Lincoln Health

Jamie Lovley and Michaela Schoeffler, Lincoln Health (Knox and Waldo County, Powerpoint Presentation)

YMCA Grant Funded department that does substance use prevention, tobacco prevention, and nutrition education. One of the only Y's in New England with such a department.

Substance use disorder is caused by a combination of behavioral, psychological, environmental, and biological." It is a disease like any other and has no moral basis.

Stigma reduction is key especially in getting helpful tools like Narcan into people's hands. Stigma prevents people from seeking help. Increases negative impact on individuals, families, and communities.

YMCA does education and trainings. Pamphlets and educational materials and resources are available for free for anyone in Knox and Waldo County.

Backpack reentry program which provides materials and tools in a backpack to individuals leaving incarceration.

Resources available: Medication, peer to peer, sober living homes, groups, counseling, etc.
Coastal Recovery Community Center

Tobacco has been in our culture for generations and is the #1 cause of preventable death in the U.S. Rates of smoking in people working in the trades is higher than other groups. 30% of youth have tried vaping and leads to higher rates of nicotine addiction. Those using nicotine are more likely to use other addictive substances and trigger relapse because it follows the same reward pathway in the brains.

Education, Quit Tools, and Policy.

QuitLink resources available for free- rack cards and posters

Education for youth and adults. Curriculum for middle and high school which prioritizes harm reduction and focuses on making healthy choices. Faculty, staff and parents get info on vaping. Trainings on how to refer people to Quitlink 1-800-QUIT-NOW. Tools plus coaching is more effective than trying to quit on your own.

Tara Young, Healthy Acadia – Hancock County

Nicotine Treatment. Physicians are doing a great job of asking about nicotine use and doing a pretty good job of referring patients to further treatment. Working to try to increase the amount of referrals made and people accessing support for quitting. Adults who use nicotine products live 10 years less than those who don't use nicotine products. Nicotine can interfere with medications, insurance premiums are increased, and smoking rates are inversely correlated to income. They will have higher likelihood of having disease as a result of smoking and less likely to afford the care necessary.

Nicotine has an adverse impact on mental health, particularly anxiety and depression- can cause or exacerbate as well as interact with medication. Do individual counseling but getting group support together has been challenging. If anyone is interested in supporting a group, in person or on Zoom, Tara is interested in setting up more groups for people.

Rota Knott, Acadia Family Center and Will Matteson, Healthy Lincoln County

Acadia Family Center has a building in Southwest Harbor where they did clinical work. Several years ago they shifted and have opened a community recovery center to support people in all stages of substance use recovery.

Three aspects: Adult recovery with drop-in events and planning fun social activities.

Education and youth recovery.

Harm Reduction—Naloxone (Narcan) is one of the strongest harm reduction tactics. Overdose looks different depending on the substance.

Loss of consciousness

Pinpoint/constricted pupils

Blue lips and fingertips

Irregular breathing

If you see someone who looks like they are suffering from an overdose, ask if they are ok. If you get no response, run knuckles down their breastbone and if they are responsive they will react. Administer Narcan and then call 911. It may take more than 1 dose to counteract the opioids. There are scary drugs out there that don't respond to Narcan. Zylozene doesn't respond to Narcan. There are test strips to test for fentanyl and zylozene. Zylozene can have a significant impact on the fetus of a pregnant woman.

Hiring a recovery coach and growing their programming. If you are in the service area, would love to have a conversation about how to support unbridged islands in setting up recovery services.

Narcan received approval to be an OTC drug. Shift to see it as a first aid tool and that it needs to be available wherever first aid supplies are available.

Some harm reduction strategies are controversial still because they are seen as enabling. There is nothing enabling about Narcan. There is no capacity for misuse, it causes withdrawal immediately, there is no incentive to use it other than to save a person's life. Usually, it is someone administering it to someone else, so the previous requirement to get a prescription didn't make sense as a system for distribution.

Want to make sure that it is available for every community in Maine because it is so important.
Douglas Cornman, Seacoast Mission

Therapeutic process is a key tool to use with substance misuse. Douglas is a board-certified creative arts physiotherapist.

Every situation has two sides. When he talks to people about the treatment process, when people say, "But that doesn't work for me" there is always another perspective. Substance misuse is a disease. It is easy to blame them, but they are burdened with their misuse in a way we can't imagine. For those witnessing, we need to do so from a position of kindness and empathy even if we will never fully understand the position of that person.

It is easy to say "that could never happen to us." But it can happen to anyone. The impact of substance use goes beyond the individual to their family, friends, community. There is support for everyone involved in the situation, not just the person directly using.

For treatment to be effective, the individual must want the help. When we witness substance use we want to "save the person" but the person using the substance must take an active and leading role in their own recovery for it to be successful. Counseling is not a perfect science. Counseling relationships take openness, vulnerability, and trust which are hard to achieve. Not every counselor/patient match is going to work. It could take multiple attempts before the individual finds a truly effective counselor for themselves. The problem is that insurance won't pay for multiple assessments which disincentivizes trying on counselors until they find a good match. No treatment approach is perfect. Multi-therapeutic approach is the most successful. If someone is challenged by their treatment approach and they are only using one approach, encourage them to use multiple approaches simultaneously. E.g. Group counseling, individual counseling.

Substance use is often a mask for other issues that the individual may not want to address because they are equally stigmatized.

Recovery and treatment are not linear. There are plateaus and setbacks and it is lifelong. Recovery is possible with trust, compassion, and a supportive community.

If you know anyone who wants to talk about the process of therapy and how to find a good therapist, Douglas is happy to talk through the process.

Stella Rich, Casco Bay Recovery

Grew up on Peaks Island and lived there for 21 years. Met a man from Long Island at 18 and was married by 22. Drinking was a common part of the culture. Because she didn't drink every day, she didn't realize she had a problem at first. It wasn't what she was doing but the way she was doing it was the problem (to blackout). "I knew that things were bad and I didn't know how to stop it." Didn't know how to get to be the mom she wanted to be. There was so much shame. All the effort went to make her life look ok on the outside. She didn't know how to get help or what help was available. She ended up at a detox center at 35. It is a disease that impacts mind, body, and soul. It wasn't a matter of just getting through the physical impacts of addiction. She has been sober for 4 years. Addiction is a family disease it impacts everyone but the beauty is that recovery does, too. People are starting to reach out to her to hang out as a first step in their own recovery because she talks so openly about her journey and process. There is still so much shame and stigma associated with addiction. They reach out, but they say, "please don't tell anyone."

In Maine recovery and rehab is expensive and not very accessible.

Stella admits about 100 people into treatment per year. Even when she shows them the first step, people leave treatment because it is constant work and you have to work on the mind, body and spirit simultaneously. But the mind will tell you everything is ok when you start to feel better and yet you aren't yet. There is work still to do.

Family Restored- resources for families, groups, scholarships for treatment

Douglas Cornman, Maine Seacoast Mission

Full disclosure and transparency, I am a board-certified creative arts psychotherapist. I was a licensed mental health counselor but am not currently licensed in Maine. Substances are not my area of clinical expertise. The therapeutic process is, and this is the lens and perspective from which I am speaking.

I want to remind us that situations involving substance misuse are never the same, even if they seem similar. They are messy, complicated, hard to comprehend and navigate on all levels, especially when support seems unavailable or not helpful.

It is going to be easy to negate and/or take issue with everything I'm about to share with you. However, statistically and from my own experience and research, what I am about to share is evidence based and relevant.

1. Substance misuse is not a choice. It is a disease, just like asthma and diabetes are diseases. It is way too easy to hold the person who is using responsible and/or blame them for their situation; however, they are burdened with their misuse in a way that we cannot imagine. Those of us who are witnessing can do so from a position of kindness, compassion, and empathy, even though we don't understand it.
2. Despite growing awareness and understanding, substance misuse continues to be stigmatizing and misunderstood. Keep in mind the position the person who is using is in as we "judge" or try to understand and navigate what is happening.

3. Substance misuse impacts everyone associated with the person misusing the substance. No one can avoid the impact of the individual's response and behavior.
4. Some semblance of support is available, even though it may not feel like it. Support can be available for everyone involved in the situation.
5. The identified individual must want help. I strongly feel that "saving someone from their addiction" is a myth. The person must take an active and leading role in their recovery for it to have any chance of success.
6. Most of us think of counseling as the treatment of choice. Counseling is not a perfect science. The most effective therapeutic relationships take trust, risk, and an openness to be vulnerable, something that is often mistaken for weakness. Also, not every counselor / client match is a good or therapeutic one. I may be a great therapist for one person, and a completely ineffective therapist for another. As difficult and tiring as it is, it may take multiple attempts to find the "right" counselor / client match.
7. No treatment approach is perfect. A multi-therapeutic approach is often the most successful (e.g.: medication, counseling, both individual and group, peer support, etc.)
8. The recovery process requires transparency and vulnerability. The identified person must be open to this level of exposure which is difficult, takes time, and requires tremendous strength and courage.
9. Substance misuse is often a gateway to other issues, such as anxiety, depression, and/or other mental health challenges. Substances can be a mask for these other issues. The individual may not want to take off that mask and expose themselves to things that carry a "greater" stigma.
10. Recovery and treatment are not linear processes. There are many plateaus and setbacks along the way. It is a life-long journey, which can be exhausting.
11. As dire as this sounds, recovery is not impossible. Thousands of people live successful, productive, and joy filled lives in recovery. It takes a community that is mutually supportive to aid in the process, and it takes trust, compassion, and grace from everyone involved.

Discussion

Kendra: How do you know when your friends or community members are having a problem? They hide it so well. Are there signs?

Stella: Some of the physical signs are weight loss, grey skin, eyes are dilated. But there isn't a type. It's hard to tell. I admit people into treatment who no one would believe that they were suffering from substance use disorder. People are super sneaky about it. Recommend Family Restored meetings for anyone, there is so much to learn.

Rota: It depends on the substance. It can be more obvious if people are using alcohol. It is about the powers of observation. Even a small change can be an indication they are using or they have changed substances. It can be personal and subtle, so you have to know a person and closely observe a person.

Jamie: We can't shame ourselves if you don't recognize the signs in someone. It is why reducing the stigma is so important.

Tara: Notice any differences, start engaging someone in a conversation and explore anything that is out of the ordinary and ask clearly and directly without judgement.

Ellen: One thing that Will said, is that the newer street drugs don't react to Narcan. What can we do?

Jamie: If someone appears to be suffering from an overdose and have the signs of an overdose, you won't harm them by administering Narcan. It may not be what they need in that moment, but there isn't an alternative because nothing has been developed for those drugs that don't react. The best thing is to get medical professionals on the scene as fast as possible.

Donna: A few years ago she wrote a letter to all the entities on the island offering public Narcan in a weather proof box. She was so disheartened that only one entity accepted the offer. The board of selectmen was against her even making the offer. Donna has Narcan on her at all times. It is free, the training doesn't take long. It seems like something any engaged community members should have. I don't know how we get past the stigma so that we can say its ok for everyone to have Narcan. There should be another avenue to get the public to carry it.

Rota: One of the things I tell people is that it could be them that need the Narcan. You can touch something that has a substance on it that causes an overdose and you just don't know. You don't know when you or someone you love could touch something someone left behind and overdose.

Jamie: Been talking to someone to have it in their AOD box as a first aid tool. Overdose isn't strictly related to illicit drug use. It can be related to memory issues, a child accessing improperly stored medication, etc. It is about overcoming the myths associated with it.

Ellen: We had the II run an EMT course back in the day. Could MIC make available a zoom Narcan training and have it sent out to the island communities in the same way we made sure there were AED's in public spaces.

Douglas: It is going to take all of us together to break down the stigma about these resources. The Sunbeam will put posters about resources, they have Narcan and test strips available but there are individuals on islands who don't want these resources to be made publicly available because of the stigma. Boxes of resources get destroyed or disappear because people don't want to talk about it within their community. If communities are afraid of the resources, it is a real barrier.

Kelly: Make sure you know what you have in your house and make sure that it isn't just left around. If someone passes away, make sure that the drugs they had are disposed of properly so it doesn't go missing.

Eva: If you are trying to get sober and your only social group are also using, it constantly exposes you and tempts you and it is a real small town burden because you can't go find new friends.

Douglas: there is an island specific AA group that Douglas can put you in touch with if its of interest.

Additional Resources

Casco Bay Area Substance Use Disorder Resources:

211 United Way: <https://www.211.org/get-help/substance-use>

PRCC Portland Recovery Community Center. (PRCC): <https://portlandrecovery.org/>

Alliance for Addiction and Mental Health Services

Maine: <https://thealliancemaine.org/membership/member-providers/>