Livingston County ROSC – November 2023

Community Resource Assessment

Background:

This report summarizes results recently obtained regarding the current status of substance use and mental health disorders (SUD/MH) within Livingston County, including the role of the Livingston County ROSC in this overall picture, as seen by its community members through key informant interviews and ROSC Council members through dedicated working sessions and open discussions/information sharing (October-November 2023 Council Meetings). Approximately 25 different members of the community were engaged via the aforementioned methods. They were asked to help provide their opinions and observations relative to strengths and opportunities for improvement among both the Livingston County ROSC and local resources available to the recovery community (e.g., agency services, peer supports, meetings, etc.).

The goal was to obtain honest, point-in-time feedback pertaining to past ROSC accomplishments, its current state, and the future of the Livingston ROSC. It should be mentioned that a majority of the information gathered was qualitative and based more on opinions and personal experiences. Going forward, the Livingston ROSC will seek ways to gather more quantitative measures to assess its available resources. Formats for obtaining input included in-person interviews with key informants (leaders/members of targeted populations) and local PLEs (People with Lived Experience), impromptu discussions, ROSC Council working sessions, and other self-evaluation questionnaires disseminated via Slido. Our interviews and surveys targeted a diverse representation across industry and community sectors, including Education, Substance Use Disorder (SUD) Treatment Centers, Behavioral Health/Mental Health Specialists, Peer Recovery Specialists, Human Services, Law Enforcement, Faith-Based Organizations, and PLEs.

In the context of this document, "participants" refers to the combination of everyone providing the Livingston ROSC with information, thoughts and opinions, including key informants interviewees, subject matter experts (SMEs) from both Human Services and local Recovery Community, People with Lived Experience (PLEs) (including those from local A.A., Al-Anon, Celebrate Recovery), Family and Allies of PLEs, our Community Needs Assessment (CNA), and the 2023 Key Informant Interviews.

Questions Asked:

This Resource Assessment utilized ROSC's Strategic Plan and SWOT Gap Analysis (Strengths, Weaknesses, Opportunities, & Threats) as a roadmap for interviews, breakout group analysis, Slido voting, and large group discussions. The Livingston ROSC will develop a formalized self-survey tool to measure council and community members' qualitative feedback, while also working to create viable quantitative metrics to attempt to measure success more definitively. In the meantime, this resource assessment is largely shaped around responses to the following questions:

Key Informant Interview:

- Do you believe substance use is an issue in the community?
- What do you consider the biggest concerns related to substance use in your community?
- What factors do you believe most contribute to substance use issues in the community?

- Are you aware of any services available for those who are currently dealing with substance use in Livingston County? If yes, please describe.
- What additional resources would you suggest to better address substance use concerns in Livingston County?
- What is the biggest obstacle(s) in connecting people with substance use disorders or any medical conditions to the proper resources? If you could change any one thing for those with substance use disorder in Livingston County, what would it be?

Strategic Planning with ROSC Council:

- Which aspects of the Strategic Plan do you feel the ROSC is executing well? How did we get to where we are today?
- Which areas of the Strategic Plan do you believe the ROSC could use additional support or retooling?
- Which aspects of recovery or specific services/supports do you feel are still under-represented in the Strategic Plan?
- What obstacles, barriers or persistent challenges still exist and how do we overcome them?
 Where do we want to be in two more years?

Executive Summary/Key Findings:

- Overall, the most pressing need for recovering people is transportation, according to participants. A
 robust 77% of surveyed ROSC council members agreed that some form of free or more affordable
 public transportation should be offered for early recoverees to attend mutual support groups, step
 meetings, doctor appointments, treatment or outpatient sessions, service work, and other recoveryoriented commitments.
- When asked "if you could change one thing" in Livingston County relative to substance use disorders,
 the overwhelming responses were also Transportation and Sober Living; the dearth of options in these
 two areas were also cited most commonly as the biggest obstacles to recovery in local community.
 Lack of willingness (by recoverees) was also named but that is out of scope for ROSC purposes (though
 we hope our events and initiatives spark some interest and willingness to 'check out' recovery).
- Key informant interviews indicated that people believe lower incomes ("poverty"), peer pressure, untreated mental health (MH) issues/lack of MH resources, and easy underage access to alcohol and cannabis are all primary contributing factors to substance use issues in the county.
- Other areas named as the *number one* priority included Harm Reduction Awareness & Initiatives (15%) and Stigma Reduction (8%). Unfortunately, despite remaining a gap and hugely foundational piece to recovery, only one participant felt Sober Living/Housing should be the top priority. It could be theorized that more community members understand the criticality of sober living, but perhaps felt it would be too much for the ROSC to take on alone.
- Anecdotally, a vast majority of participants felt the Livingston ROSC has been successful at connecting
 with local service agencies and with communicating and 'branding' of the Livingston County ROSC (i.e.
 "getting out in the community"); in over half the cases people felt law enforcement was sufficiently
 represented.
- With regard to training, participants ranked various topics in the following order: 1) SUD Stigma (33%), 2) ROSC "101"/Importance of PLE Involvement and Mental Health Recovery & Supports tied for #2, each with 25% of participants' support; and lastly was Harm Reduction Strategies (17%).

- When participants were asked to provide one or two words to describe ways the ROSC can improve
 access to resources and services in Livingston County, the following were most commonly named:
 Awareness of Local Services and Stigma Reduction took the lead, while the consistent theme of
 Partnerships, Collaboration, Contacts and More PLEs were also prominent.
- Despite above efforts, the overall community is still not entirely aware of what the ROSC is and how it can benefit community; several participants also felt the Liv-ROSC would benefit from clarifying (in literature, newsletter, social media, etc.) that *anybody* can join the ROSC; one need not be in recovery or work in the field to be involved.
- Additional efforts, adjustments, and resilience required in order to continue increasing education and awareness about all things recovery-related in Livingston ROSC. Potentially includes partnerships to help educate within schools, churches, businesses, etc.
- 100% of respondents asked were able to identify at least two recovery-oriented resources/services in their area (e.g. Alano Club, Institute for Human Resources (IHR), Livingston Cty Health Department, Celebrate Recovery, etc.).
- Recent informal audit of local recovery meetings indicates Livingston County has a decent A.A.
 presence in Pontiac and Dwight, but not much else is available along the lines of multiple or meeting
 options for recovery. Lacking Narcotics Anonymous, All Recovery, SMART Recovery, and recently lost
 one of its two Celebrate Recovery meetings. The community might also benefit from more substance specific groups like Cocaine Anonymous, Crystal Meth Anonymous, or even something K2/Spice
 Anonymous or Family/Young Peoples' Recovery.

Gaps/Concerns:

- Lack of sufficient public transportation for people seeking recovery services.
- Stigma remains an issue in the community so more awareness/education is required. Stories panels, testimonials, YouTube videos are all ways to spread the message.
- Very little PLE representation on council outside of staff among the lead agencies.
- Sober living is generally unavailable to newcomers or people coming out of SUD treatment or jail/prison, looking to maintain recovery.
- Community does not realistically support multiple pathways of recovery based on limited availability/diversity of meeting types.
- Liv-ROSC has yet to build a strong relationship with the local A.A. or Pontiac Alano Club, which hosts the vast majority of meetings in the county.
- During Key Informant Interviews, there were a few cases where respondents felt the community in general was not interested in advancing mental health services in the area. This could be based on one or two individual experiences, it could be an exaggeration, or it could be relevant and worth noting as a concern.
- Adolescent services could use additional attention. There are Prevention efforts at local schools
 through Chestnut and Center for Community Engagement (anti-vaping, SUD Awareness, etc.),
 however, there is an overall lacking presence adolescent-oriented recovery services. Examples include
 no representation from IL State Conference for Young People in A.A. (ISCYPAA), no meetings catered
 to young people in recovery, no Ala-Teen for youths who may be struggling to cope with parents of
 siblings who are in active addiction, no teen-specific sober recreation (e.g. game nights, movie nights,
 open gyms, etc.) ...yet.

Observations:

- Key informants interviewed were not necessarily subject matter experts on Recovery or SUD/MH issues. Some work in law enforcement, schools, churches, or other community-facing agencies that come across substance use and mental health disorders but are not trained or experienced firsthand in what is most important to recovering people or newcomers. They were delegates from key stakeholder areas reporting what they were seeing and hearing with their own eyes and ears.
- Many of the same issues from the initial Community Needs Assessment two years ago are still relevant today, but this is to be expected. Examples include sober living (not enough beds or sober living facilities available), need for more education and awareness to reduce stigma, general recovery services (transportation, childcare, employment) still are sparse, need more diversity of recovery meetings, and need for more PLEs on Liv-ROSC council.
- Attendance at special events varies and is generally difficult to predict. Events that are requested are
 not always supported. However, weather and scheduling has played an issue and time just takes time,
 so we remain diligent and resilient.
 - o Increased collaboration with the existing 12-step (e.g., Alano Club in Pontiac, IL) should also improve awareness and/or participation levels.
- Harm Reduction appears to be split down the middle where it was a top vote for high prioritization in some cases, but among the bottom with other groups.

Recommendations:

- 1. Seek ways to engage the council for increased input on strategic direction and tactical objectives on a regular, periodic basis (e.g., quarterly, or at least semi-annually).
- 2. Launch sub-committees or workgroup and/or solicit volunteers to research, problem-solve and return to council with potential solutions for issues like public transportation, sober living, lack of multiple pathways to recovery, stigma reduction, and others as identified.
- 3. Continue to prioritize ROSC recruitment and collaboration among agencies, PLE's and the recovery community, faith-based/churches, law enforcement, local 12-step, and others as identified.
- 4. Create a more permanent or formalized assessment tool (e.g., self-survey, online questionnaire, SurveyMonkey, etc.) for continuous monitoring and assessment of local recovery-oriented resources.
- 5. Ensure constituents have opportunities to suggest or weigh in on relevance of ROSC Council meeting topics, as well as overall ROSC goals and activities (e.g., quarterly Council 'working sessions').
- 6. Speak with subject matter experts and recovery community members to identify *new* support groups that could potentially thrive in Livingston County (e.g., Narcotics Anonymous, Cocaine Anonymous, Crystal Meth Anonymous, K2/Spice Anonymous, additional Celebrate Recovery meeting, All Recovery, or other emerging recovery programs not presently represented with "brick and mortar" meetings (SMART Recovery, Recovery Dharma, Women for Sobriety, Ala-Teen, et al).
- 7. Continue rigorous efforts to recruit and retain PLEs from larger, established local recovery programs, such as Alcoholics Anonymous, Narcotics Anonymous and Celebrate Recovery.
- 8. Determine ways to involve local media in ROSC messaging and promotion to increase exposure and help "create a community buzz" in towns like Pontiac and Dwight regarding ROSC.

- 9. Work with local agencies (and potentially any cannabis dispensary(s) in Livingston County) on Harm Reduction and SUD campaigns; risks of cannabis use, particularly among adolescents, and consider other potential areas of collaboration.
- 10. Continue to offer opportunities for ROSC Council and local PLE's to weigh in on ROSC goals and activities, such as solutions to transportation, methods of stigma reduction, events the ROSC should be present, and so on.