



Minnesota Substance Use Disorder Community of Practice: October 25, 2023 Meeting Summary

Introduction

On October 25, 2023, participants attended the third Minnesota (MN) Substance Use Disorder (SUD) Community of Practice (CoP). The CoP is composed of people who are engaged in the field of SUD treatment and prevention in any capacity. This includes but is not limited to individuals with lived experience, providers, family members, researchers, recovery peers and advocates. The goal of the MN SUD CoP is to encourage the translation of knowledge into action and provide a framework for information sharing, competence development, rich discussion, and mentoring.

The MN SUD CoP meeting was facilitated by Health Management Associates (HMA) employees Jill Kemper, Boyd Brown, and Paul Fleissner, with ongoing subject matter expertise from Kamala Greene Genece, Charles Robinson, Debbi Witham, and Briana Jacob. The CoP meeting was also planned and conducted in partnership with three community consultants, George Lewis, Zhawin Gonzalez, and Yussuf Shafie. While HMA and the community consultants are available to provide a framework for the meetings, the goal of the MN SUD CoP is for participants to actively engage and set priorities for the CoP.

General Announcements

Boyd Brown, HMA, began the meeting with a few reminders for the CoP participants. These included:

1. **SUD Community Assessment Tool:** A reminder to participants to please send any completed or partially completed SUD Community Assessment Tools (more information on the Tool is available in the September MN SUD CoP Summary, located on the [MN SUD CoP website](#)).
2. **November Focus Groups:** A series of focus groups will be held in November. The goal for the focus groups is to provide an opportunity for participants to share thoughts around gaps in the Minnesota SUD treatment continuum and current community advocacy efforts. From the information gathered from previous efforts (e.g., SUD Summit and MN SUD CoP Planning Meetings), during the MN SUD CoP meetings thus far, from the completed Community Assessment Tools, and the information learned during the focus groups, HMA will be compiling a report of MN SUD treatment gaps for the state. There will be four focus groups which are divided by participant type, as shown in the table below. Registration links for the focus groups were sent to participants via email following the meeting.

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Date		
Thursday, November 2, 2023	-	
Tuesday, November 7, 2023	1:00-2:00 pm CT	People or family members with lived experiences; Tribal Nations or Tribal Social Services; People from communities disproportionately impacted by SUD
	-	
Monday, November 13, 2023	12:00-1:00 pm CT	MCO/Payer Representatives; Researchers and Members of the Academic Community

Voices of Experience Panel

Following announcements, participants heard from Artiste Mayfield, Founder and Director of [GrassRoots in Action](#).

About Artiste and GrassRoots in Action

Artiste Mayfield is the Founder and Director of GrassRoots in Action (GIA), a community organization which was founded two years ago, “in response to increased homelessness and violence in the Minneapolis-St. Paul metro. Founder Artiste Mayfield recognized a lack of community connection and created events to bring citizens of color together to discuss their visions for the future. GIA aims to increase civic engagement, educate the community on political institutions, and mobilize citizens to ensure their voices are heard in policymaking.”

Programs offered by GIA include:

- Community Spaces
- Voter Registration
- Community Engagement
- Phone Banking
- Career Development
- Internship Opportunities

Artiste noted that much of her work is in partnership with other community organizations. For example, a recent initiative titled, “Silence of the Blues,” intended to raise awareness about fentanyl overdose rates, in which they collaborated with three other Minnesota recovery and advocacy organizations. Through collaboration, they were able to advertise the event throughout the community, which resulted in attendance by community members, individuals in recovery, individuals currently using substances, and local elected officials.

In addition to her role with GIA, Artiste is also an individual in long-term recovery who has experienced personal and family hardships associated with SUD, including time in the justice system and a child who has passed after struggling with SUD. Through her experiences with SUD and the justice system, Artiste is in a position to engage with individuals on a level of understanding and encouragement, which was critical during her recovery. Prior to starting GIA, Artiste obtained a bachelor’s degree and a master’s degree and has used both her education and her life experiences to ensure that critical conversations are had with those who are trying to improve the system and with those affected by it. Artiste emphasized

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that she wants to continue to build on her more than 50 years of experience by continuing to move from conversations to actual change in Minnesota.

Recent Work in the News featuring GrassRoots in Action

Listed below are some of the recent news and video articles featuring Artiste and her work through GrassRoots in Action.

- [Nonprofit Encouraging Leaders holds event to remember those lost due to opioids and introduce prevention efforts](#)
- [Young people leading fight against opioid crisis in communities of color](#)
- [Helping Minnesota's 'unrentables' overcome troubled pasts](#)
- [Aggressive tenant screening creates class of 'unrentables'](#)

Help us continue to highlight Voices of Experience! If you would like to volunteer or have recommendations for continuing to highlight voices of lived experience, please let us know at mnsudcop@healthmanagement.com.

Minnesota SUD Community Advocacy

During the second half of the meeting, [Charles Robbins \(HMA\)](#), presented on effective methods for advocating in your community. Charles has been transforming communities for over three decades, including founding [Project Angel Heart](#), an organization serving meals to individuals who are ill, movement building at [GLAAD](#) – the world’s largest Lesbian, Gay, Bisexual, Transgender and Queer (LGBTQ) media advocacy organization, CEO of [the Trevor Project](#), a suicide prevention and crisis organization for LGBTQ youth, as well as extensive efforts in advocacy and strategic planning in city, state, and local government.

During Charles’ presentation, he provided information and resources related to the following topics:

- Defining core concepts – community engagement, health equity, and collective impact;
- Identifying community members and community partners;
- Reviewing the Continuum of Community Participation matrix;
- Discussing the key principles and best practices for community engagement; and
- Understanding how using the [Collective Impact Model](#) can lead to change.

Slides and descriptions for each of these topics is provided in the slides in Appendix A below.

Breakout Room Discussion

Following Charles’ presentation, CoP participants were randomly assigned to breakout rooms to discuss community advocacy. In addition to other thoughts and ideas, participants were asked to (1) suggest ideas for group norms the CoP should implement, and (2) suggest how can the MN SUD CoP can transition to a collective impact that is community led*. A summary of breakout rooms discussions is provided below.

*see slide 13 in Appendix A for more information on these terms

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What group norms should the MN SUD CoP implement?

- Center discussions around voices of experience
- Prioritize methods for engaging voices of experience (both in the CoP and in outside advocacy work).
- Include voice of experience representatives on boards/panels.
- Include voices of experience who are diverse, including racial and ethnic backgrounds, locations, ages, and those “new” to recovery.
- Do not reduce individuals to their addiction, prioritize names and self above disease.
- Ensure everyone feels welcome. Prioritize value and respect and respect other’s time and opinions.
- Level-set on goals and priorities for all organizations involved.
- Utilize plain language where possible in order to better include all participants.
- Acknowledge other challenges faced by the SUD community, including housing, mental health, food access, etc.
- Establish methods to share and receive information among participants (email, website, etc.).
- Commit to advocacy work outside of the CoP.
- Understand that while we are establishing “norms,” there is no such thing as “normal.”

How can the MN SUD CoP transition to a collective impact that is community led?

- Find sustainable funding pathways for SUD working (including payer reimbursement) to move away from reliance on grant funding.
- Support and fund organizations who meet the needs of priority populations.
- Utilize existing grant funding dollars (such as Opioid Settlement) to improve SUD outcomes.
- Find ways to demonstrate outcomes of collaborative efforts.
- Build sustainable structure, roles, and norms so everyone knows how they should be participating in the effort.
- Identify the correct time and method for transitioning to community led work so previous efforts do not get lost.
- Reduce administrative burdens on smaller community advocacy, treatment, and non-profit organizations. Consider organizations who can help reduce burden by taking on administrative activities.
- Come with a shared goal of moving past conversation and into actual change.

The MN SUD CoP will reconvene on December 19, 2023, at 2:00 p.m. CT. Registration for the December meeting is available via the [Zoom registration link](#).

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Appendix A: September 26th MN SUD CoP Slides

Please email mnsudcop@healthmanagement.com if you require these slides in an additional format.

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Minnesota Substance Use Disorder (SUD) Community of Practice (CoP)

OCTOBER 25, 2023

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Agenda

Welcome & Announcements

Voices of Experience

SUD Community Voice and Advocacy

Wrap Up and Next Steps

UPDATES AND ANNOUNCEMENTS

Boyd Brown





Updates and Announcements



Thank you for feedback on the MN SUD Community Assessment Tool! Send completed or partially completed Tools to mnsudcop@healthmanagement.com.



Next steps: November Focus Groups



MN SUD CoP November Focus Groups

- Opportunity to **share thoughts** around gaps in the MN SUD treatment and community advocacy efforts.
 - From the information gathered from previous efforts and during the focus groups, **HMA will compile a report of MN SUD treatment gaps** for the state.
- Participants are asked to attend one of the four focus groups.
 - If you feel you fall into multiple categories, we ask that you attend only one.
 - If you feel you don't fit into any of the categories or cannot attend during the scheduled time, please choose to attend any one of the four.

Date	Time	Participants
Thursday, November 2, 2023	2:00-3:00 pm CT	DHS Representatives; County Social Services; DOC Representatives; MDH Representatives
Tuesday, November 7, 2023	1:00-2:00 pm CT	People or family members with lived experiences; Tribal Nations or Tribal Social Services; People from communities disproportionately impacted by SUD
Thursday, November 9, 2023	10:00-11:00 am CT	RCO Representatives; SUD Treatment Providers; Community Advocates
Monday, November 13, 2023	12:00-1:00 pm CT	MCO/Payer Representatives; Researchers and Members of the Academic Community

VOICES OF EXPERIENCE

Presenters: Artiste Mayfield





ABOUT ARTISTE AND GRASSROOTS IN ACTION

- Artiste is the Founder and Director of [GrassRoots in Action](#)

“GrassRoots in Action (GIA) was founded in response to increased homelessness and violence in the Minneapolis-St. Paul metro. Founder Artiste Mayfield recognized a lack of community connection and created events to bring citizens of color together to discuss their visions for the future. GIA aims to increase civic engagement, educate the community on political institutions, and mobilize citizens to ensure their voices are heard in policy-making.”



- Programs include:
 - Community Spaces
 - Voter Registration
 - Community Engagement
 - Phone Banking
 - Career Development
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RECENT WORK IN THE NEWS

- Nonprofit Encouraging Leaders holds event to remember those lost due to opioids and introduce prevention efforts
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- Helping Minnesota's 'unrentables' overcome troubled pasts
- Aggressive tenant screening creates class of 'unrentables'

Photo credit: STAR Tribune



Community Voice and Advocacy

Charles Robbins



Community Voice to Make Change

Core Concepts

Community Engagement:

The process of working collaboratively with and through groups of people affiliated by geographic proximity, special interest, or similar situations to address issues affecting the wellbeing of those people.

Health Equity:

Exists when all people can attain their full health potential and no one is disadvantaged from achieving this potential because of the color of their skin, ancestry, level of education, gender identity, sexual orientation, age, religion, the job they have, the neighborhood in which they live, socioeconomic status, or whether they have a disability.

Collective Impact:

Collective Impact is a disciplined, cross-sector approach to solving complex issues on a large scale. It is the commitment of a group of actors from different sectors to work together towards common agenda for solving a complex social problem.

Core Concepts

Equality



The assumption is that **everyone benefits from the same supports**. This is equal treatment.

Equity



Everyone gets the supports they need (this is the concept of "affirmative action"), thus producing equity.

Justice



All 3 can see the game without supports or accommodations because **the cause(s) of the inequity was addressed**. The systemic barrier has been removed.

What do we mean by community?

A community is a group of people who are brought together by something in common. This can include things like cultural background, shared experience, and geographic location. One person can belong to many different communities.

Community Members

Groups of individuals who have something in common

- Parents
- People who use drugs
- People in recovery
- Shared culture/ethnicity

Community Partners

Organizations, agencies, or community groups

- Parent/Teacher Association
- Minnesota Coalition for the Homeless
- Coalition of Greater MN Cities
- Opioid Epidemic Response Advisory Council

Continuum of Community Participation

Many different types of activities constitute community engagement.

- Most are state led as they apply to funding and priority setting.
- Some of these activities are formal and some are informal in nature.
- These include Community of Practice and Collective Impact models

	Inform	Consult	Involve	Collaborate	Empower
	<ul style="list-style-type: none"> • Led by state • State holds power 	<ul style="list-style-type: none"> • Led by state • State holds power 	<ul style="list-style-type: none"> • Led by state • State holds power 	<ul style="list-style-type: none"> • Co-led • Power is shared 	<ul style="list-style-type: none"> • Led by community • Community holds power
Purpose	Provide information	Get and incorporate feedback	Ensure needs and interests are considered	Partner and share decision-making power	Support and follow the community's lead
	One-way communication	One-way communication	Two-way communication	Two-way communication	Two-way communication
	Address immediate needs or issues	Inform the development of state programs	Advance solutions to complex problems	Advance solutions to complex problems	Problems and solutions are defined by the community
Methods	<ul style="list-style-type: none"> • Town halls • Community meetings • Media • Social media • Materials • Web 	<ul style="list-style-type: none"> • Focus groups • Interviews • Surveys • Stakeholder groups 	<ul style="list-style-type: none"> • Audience & user testing • Advisory groups • Steering committees • Community conversations 	<ul style="list-style-type: none"> • Collective impact • Coalition building • Partnership building 	<ul style="list-style-type: none"> • Community immersion • Community mobilization
Promise	We will keep you informed about this project	We will listen to you and incorporate your feedback into our project	We will ensure your concerns and needs are reflected in our project	We will work with you in planning all aspects of this project	We will implement the project you come up with
When to use	There is no alternative because of urgency, regulatory reasons, or legal boundaries	You want to improve an existing service or program but the options of change are limited	You need community perspective and buy-in to successfully implement the project	Community members have a strong desire to participate and you have the time to develop a partnership	Community members want to own the project and you are committed to a long-term relationship
The Goal = working toward community-driven engagement					

As you move to the right, the engagement activities become increasingly community led. This means communities take the lead on identifying priorities, overall direction, and decision making.

Source: Washington Department of Health Community Engagement Guide

Key Principals of Community Engagement

Community engagement can be complex. To be effective, we need to recognize and respect the diversity and assets of the communities we are engaging. It takes a long time to build strong relationships, and it takes even longer to repair relationships that have been damaged.

- **Do research:** Understand community culture, norms, values, power and political structures, economic conditions, social networks, demographic trends, and history.
- **Allow community members to self-identify:** Some communities and individuals may have intersectional identities, which means they are members of more than one group that has been historically marginalized or oppressed.
- **Prioritize unheard perspectives:** Give space and power to the perspectives of those whose voices are least heard.
- **Value others' time:** Never expect community members to volunteer their time and value their contributions through stipends, reimbursement, or support for one of their priorities.
- **Avoid tokenism:** Individuals should never be expected to speak on behalf of or represent an entire community.
- **Recognize strengths and assets:** Even communities that experience the greatest health and economic inequities have strengths, assets, and resources that should be acknowledged and leveraged.
- **Be proactive:** Reach out to potential partners and community members as early as possible.
- **Ensure communication is ongoing:** Collaboration requires continual opportunities for conversation and sharing
- **Be transparent:** Be honest and forthcoming about the purpose and how you will use the input you receive.
- **Meet people where they are:** Be flexible in your approach. Go to the community—where members gather—and work to build relationships and trust. Look for opportunities to immerse yourself in the community you are trying to reach by attending community events and groups.

BEST PRACTICES FOR ALL METHODS OF ENGAGEMENT

	Inform	Consult	Involve	Collaborate	Empower
Methods	<ul style="list-style-type: none">• Town halls• Community meetings• Media• Social media• Materials• Web	<ul style="list-style-type: none">• Focus groups• Interviews• Surveys• Stakeholder groups	<ul style="list-style-type: none">• Audience & user testing• Advisory groups• Steering committees• Community conversations	<ul style="list-style-type: none">• Collective impact• Coalition building• Partnership building	<ul style="list-style-type: none">• Community immersion• Community mobilization

BEST PRACTICES FOR ALL METHODS OF ENGAGEMENT

Assess Preferred Methods	Mix of Communication Channels	Ensure Accessibility	Reduce Bias	Get Active Consent
<p>Whether planning for in-person or virtual engagement, or a combination of both, make sure to choose a method that is accessible and appropriate for the community. If appropriate, use an existing community meetings.</p>	<p>Consider a mix of traditional and non-traditional communication channels for getting the word out about your community engagement opportunity. You may also choose a variety methods along the continuum</p>	<p>There are many different aspects of accessibility that you need to consider, including physical accessibility, language, culture, and location. Identify and address other barriers for participation, like childcare, food, or transportation.</p>	<p>Asking open-ended questions gives you the chance to learn something you were not expecting and provides space for discussion. Questions should not perpetuate stereotypes, introduce biases, or stigmatize members of the community.</p>	<p>Obtain at least verbal consent for most methods of engagement. Utilize consent forms for participants if you plan to use audio recordings, video recordings, or take photos publicly.</p>

Collective Impact

Charles Robbins



What is the Collective Impact Model?

Collective Impact is a disciplined, cross-sector approach to solving complex issues on a large scale.

First defined by John Kania and Mark Kramer of FSG: Social Impact Consultants in an article published in the [Stanford Social Innovation Review](#) in the Winter of 2011, it includes five conditions and three pre-conditions, which when applied in a comprehensive way, have demonstrated remarkable effectiveness in addressing a broad range of issues.

FIVE CONDITIONS OF THE COLLECTIVE IMPACT MODEL

COMMON AGENDA

All participants have a shared vision for change, including a common understanding of the problem, and a joint approach to solving it through agreed upon actions.

SHARED MEASUREMENT

Collecting data and measuring results consistently across all participants ensure efforts remain aligned and participants hold each other accountable.

MUTUALLY REINFORCING ACTIVITIES

Participant activities must be differentiated while still being coordinated through a mutually reinforcing plan of action.

CONTINUOUS COMMUNICATION

Consistent and open communication is needed across the many players to build trust, assure mutual objectives, and appreciate common motivation.

BACKBONE SUPPORT

Creating and managing collective impact requires a dedicated staff and a specific set of skills to serve as the backbone for the entire initiative and coordinate participating organizations and agencies.

BREAKOUT ROOMS

- You will be randomly assigned to **one of the six** breakout rooms
- Take time to introduce yourself, get to know one another, and discuss the prompts from the next slide.
 - We will **return in 20 minutes**

DISCUSSION FOR BREAKOUT GROUPS

1. Please suggest ideas you have for group norms that the CoP should implement.
2. How can the CoP transition to a collective impact that is community led?

WRAP UP AND NEXT STEPS

Jill Kemper





Next MN SUD CoPs

- December 19, 2023: 2:00-3:30 pm CT
- Focus Groups in November

Evaluation Survey

- Brief 3 question survey (link in chat)

Meeting Follow-up

- Eligible participants complete the October Stipend Form
- CoP summary will be posted to the MN SUD CoP website in the coming weeks

