Draft Agenda

Ward 5 NPA November 15, 2019 City Market Community Room 207 Flynn Ave

6:30pm-8:30pm

## Draft Agenda:

6:30-6:40 - Open Forum

6:40-7:00 - Fill Steering Committee Vacancy

Community Forum on Opiates and the Overdose Crisis

7:00-7:30 - Jackie Corbally, Opiate Policy Manager (Burlington Police Department)

7:30-7:50 - Grace Keller, Program Coordinator (Howard Center, Safe Recovery Program)

7:50 - 8:10 - Dr. Catherine Antley, physician on the "Icelandic Model"

8:10 - 8:30 - Scott Pavek, neighbor and advocate

- Bill Keogh, bkeoghsr@yahoo.com
- Alec Bauer, awbauer@gmail.com
- Ben Traverse, bentraverse@gmail.com
- Joanna Grossman, joeyinvermont@gmail.com
- Joe Dery, joedery@gmail.com
- Andy Simon, earthadventure@gmail.com

For more information about Wards 5 NPA visit their CEDO webpage

https://www.burlingtonvt.gov/CEDO/Neighborhood-Services/NPAs/Ward-5-NPA

**Keep Current on their Facebook page** https://www.facebook.com/Ward5NPA

In collaboration with Channel 17 cctv.org, we will also now be live streaming our meetings on YouTube, which will permit the submission of online comments during Q&A portions of the meeting: https://www.youtube.com/channel17townmeetingtv

**Notes on 11/15/18 Ward 5 Neighborhood Planning Assembly**

Draft Minutes

City Market Community Room 207 Flynn Ave

Ward 5 Steering Committee present: Ben Traverse, Andy Simon, Joe Dery (Note taker)

Meeting called to order 6:35pm
Greeting, moderator Andy Simon

**(2m00s in video) Open Forum**

Phet Keomanyvanh (CEDO NPA liaison) - Housing & Urban Development Community Development Block Grants are allocated to community organizations to address poverty, infrastructure. Looking for a Ward 5 resident to participate in the process. Involves a commitment of ~ 4 meetings, reviewing 20-30 applications. Contact Phet or the Steering Committee if interested.

Ben Traverse (NPA Steering) - The City's Residential Parking Permit program is being modified. Planning Commission will review this 28 November (before the next NPA). The number of permits will be limited, permits were previously free but now will be $10.

Community member: Asked which neighborhoods are affected

Joan Shannon (Council) - change only affects areas that already had resident-only parking

**(7m30s) Steering Committee election**

Andy (moderator): asked candidates to introduce themselves, indicate why they are interested.

Billy Clark: Attended UVM, then law school in Boston. Moved to Ward 5 this year to start family. Plans to continue attending meetings.

Mohamed Jafar: Born in Kenya, came to Burlington at 7, attended CES/EMS/BHS, graduated 2014, college in New Hampshire, returned recently. Has 10 younger siblings in school system and wants to get more involved in community.

(secret ballot voting for Ward 5 residents)

**Main Topic - Community Forum on Opiates and the Overdose Crisis**

**(13m15s) Jackie Corbally, City's Opiate Policy Manager, embedded with Burlington Police Department:**
'Addiction is a pediatric disease' slide on monitor is symbolic for recent cases. 3-month old with addicted mom, been working to get child to safe place for past 5 months. 9-month old, mom was overdosing with partner. Mom had put child in a dresser to avoid the child being taken away.
In field for many years, never seen epidemic like now. Struggling nationwide especially the past 4 years - 72000 in 2017; 67000 in 2016, 53000 in 2015. Burlington opiate policies are cutting edge for the US. Chief del Pozo and Mayor Weinberger are very engaged and trying to learn as much as possible.

Abused opioids are not only heroin, also prescription pills, and Fentanyl. Fentanyl is potent and dangerous, cut into herion, and now finding also in crack, marijuana, even tablets.

Chief del Pozo called to have a social worker embedded with in the police department. My role during past 2 years officers has been educated to recognize overdose, and to view person who is overdosing as someone with a chronic health problem.

Created CommStat meeting with Chief, Mayor, 35-45 other partners with legal/medical/enforcement background, tackling issues including prescribing practices for pain management, treatment during incarceration. Police and fire departments are encountering people who are overdosing, near death. They are seeing both mental health disorders and substance abuse. Alcohol is still most abused substance. Every law enforcement partner, reviews Chittenden County overdoses twice a month. Burlington Police's goal for overdose calls is to get people services, not arresting. The meetings ensure that officers have up-to-date information on available services. We want people to know where to go when they are ready to accept help.

FamilyStat meeting with head of DCF for Chittenden County is able to cover confidential cases of high-risk families. At highest risk are people facing incarceration or 3+ overdoses in 7 days. 95% had experienced some past trauma. Trying to minimize time that children are separate from parents, since this perpetuates trauma within the family.

In my role I am not law enforcement, and also not a clinician, so more able to talk more freely with people brought in by officers and get them connected to resources. Also have been advising officers disturbed by overdose situations, and partnering with South Burlington police on human trafficking.

Meth-amphetamine is now present in Vermont despite limiting purchases of pseudo-ephedrine. Police departments are seeing meth in 3 of 5 stops where drugs are encountered. State, police departments are scrambling to educate on symptoms and identification. Meth is a stimulate that lasts 9-15 hours, this is very long and people often take opioids to come down.

Chief del Pozo encouraged separation of medication-assisted treatment from counseling. The low-barrier of 'Safe Recovery' encourages this treatment and could stop fatal overdoses. Dr. Kimberly Blake joined the program, now prescribing Buprenorphine, honoring her son who died from overdose in 2017.

It is wonderful that we have so many partners, but cannot do this alone. Need to look at our neighbors, family with opioid abuse as people with a chronic health disease.

Community member: what age range is most impacted

Jackie: 25 to 40, but some folks in 50s-70s and also younger people. More males. VT has done a good job to getting Narcan (naloxone, an opioid overdose antidote) into the community.

Community member: Do we have preventative education in our schools

Jackie: Had Student Assistance Professionals, but impacted by budget cuts 9-10 years ago. Mayor recognizes that the Iceland model works, and we need to be doing more.

Community member: We need to take away the shame around addiction. I had a gambling addiction. With an addiction, nothing else seems to matter -- didn't understand that it was a disease before experiencing it. In the 10 years since overcoming this, have been successful, but this good fortune was due to the support system.

Jackie: Thank you, addiction can take many forms. My advice to parents is to watch your children online/smartphones, because social media is

encouraging addictive behavior. Watch what they are getting in the mail, methamphetamine and pills are being distributed this way.

Community member: Who is getting rich from the sales of these substances?

Jackie: Dealers from Detroit, Springfield, Philadelphia are here in Vermont, and the street prices are 5x as high as those places.

Billy Clark: What role can prison play? I have seen court sentencing of many clearly dealing with addiction.

Jackie: We need to hold dealers when they are incarcerated, but this is not always happening. It is great that Medication-assisted treatment is now allowed. If incarcerated for more than 6 months, we need to get services into prison like Rikers Island (ed: NYC prison).

Ben Traverse: How do you deal with the pressure of a worsening crisis. We are very lucky to have you!

Jackie: My heart is really in this position. I did experience compassion fatigue a few months ago. I can call Grace Keller and others to vent. I need to keep doing this for my two teen children, who were born to heroin-addicted mothers. I am lucky to have the support partners but we need the whole community working together to address this. I am leaving cards with contact information for available opioid addiction resources. Burlington is fortunate to have Chief del Pozo pushing to address this! So if you see the Chief, or any officer, be sure to thank them.

**(56m30s) Grace Keller, Program coordinator, Howard Center Safe Recovery**
I run the oldest, largest, only full-time syringe exchange in Burlington at 45 Clark St downtown. Open since 2000. 18 year trusted relationship with difficult to reach population. 1300 people last year, 45% from outside of Chittenden County - many other exchanges have limited hours. Offering syringe retrieval on call, track where they are found. Cities that have exchanges have fewer syringes found on the streets. Syringe exchange is the best conduit to treatment - connected 228 people last year. Medication assisted treatment is the standard of care and keeps people alive. One of the only programs that works with people while they are actively using. Vermont laws to make Narcan available were passed after we brought clients to testify at the State House. All ambulances and state police and most local police are now carrying Narcan. Broadest law in the US to give immunity to people calling for help. Have seen fatal overdoses

among people who are waiting for treatment.
As a new initiative, Fentanyl test strips now available.
Newest initiative is low-barrier access to Buprenorphine right at the clinic, can give dose immediately. Received federal grant for treatment access, now can keep people who cannot go anywhere else. Medication provided with secure, timed dosing wheel. Recent case, person asked for help and had medication 40 minutes later. This is how it needs to be to save more lives. 17 times had clients arrive in active overdose, highlights importance of having Narcan with first responders and in the community.
Fentanyl is worse than heroin, more potent, and shorter acting. In one year, clients who have witnessed an overdose jumped from 26 to 80 percent. Biggest issue facing the program is the stigma, shame. People afraid to get help, concerned that someone else needs the treatment more. Lucky to have support of the police department for Bup/suboxone programs. Waiting a day for treatment is too long, but wait lists have been getting shorter.

Community member: Do you have a capacity constraint?

Grace: Dr. Blake hit first-year prescribing limit of 30 in 8 days. We have been able to shift patients out in other providers, but are looking for a second doctor.

Mohamed Jafar: what do you suggest that we do as a community?

Grace: People are suffering from addiction but they want to be productive members of society. Teach kids compassion for people suffering from addiction, and make it OK to talk about. On Governor's prevention council, looking at kids and families. Vast majority of clients are coming from poverty or trauma.

Bill Keogh: do you see marijuana as a gateway drug?

Grace: It is hard to know, by the time clients are at the syringe exchange, there is a lot going on. Some say marijuana helps when nothing else does. Maybe 40% of clients started using their primary (opioid) drug before they were 18, 30% before 16, a few even 10-11 years old. But delaying first use of any drug is a win. Nearly all clients smoke tobacco.

Community member: is the exchange always open?

Grace: I wish, but it is open Monday-Friday 9-5.

**(87m15s) Dr. Catherine Antley, Physician in South Burlington**
**Presenting the Icelandic model for addressing addiction.** The cost of drug addiction is very high. I am affiliated with 'Upstream Lamoille County' and we focus on prevention. The cost of prevention is much less than treatment, analogous to vaccination. >90% of people with substance abuse problems began smoking/drinking/other drugs before 18. Iceland, drastically reduced abuse rates from 1998 to today. We should solve our opioid crisis by focusing on educating and monitoring kids as Iceland did. Substance abuse is in part due to industries marketing addictive products - tobacco, alcohol, pain drugs.

Andy (Moderator): running short on time, could Scott (Pavek) return at another meeting so we can give enough time.

Scott: Yes, willing to return

Catherine:
(plays a few videos)
- marketing of tobacco products in 1950s, draw comparison to marijuana
- brain chemistry of addiction
- alcohol use rates, 20% consume 80% of product

We are focused on dealing with the current crisis. Iceland is about making an environment for kids so they will not become addicts. If young people can get to 21 or 25 without using addictive substances, they are less likely to have substance abuse.
Iceland banned advertising of alcohol and tobacco products.

Andy (Moderator): let's make time for some questions

Community member: why are you using the word 'addicts' (this other category of people) instead of recognizing as people just like ourselves.

Catherine: Yes 'addict' is not a good word, should be a person with a substance problem. The Iceland approach includes a non-judgmental attitude, and the program focused on creating community connections.

Community member: It's easy to fall into seeing/describing people as 'resources' in public policy discussions.

Catherine: It isn't the fault of a child for falling into substance abuse. We need to spend resources on prevention among youth as much as we do on intensive care.

Andy (Moderator): We have to end now due to time, maybe we could have (Catherine) back to finish the presentation. We hope to continue talking about this in our future meetings.

Ben Traverse: The new steering committee member elected is Mohamed Jafar. This was a special election to fill a vacancy, will have an election for all 7 positions in the spring.

Meeting adjourned 8:40pm

# Neighborhood Planning Assembly Attendees

| NPA (choose one) | | Wards 1 & 8 | | Wards 2 & 3 | | Wards 4 & 7 | | Ward 5 | | |
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Date of Assembly : 11/15/18 Location: City Mkt + Sou

Please return to your convenor, _____,
or email to ***cedofd@burlingtonvt.gov***

1 ANDY SIMON
2 Billy Clark
3 Joe Dery
4 Ruby Perry
5 Bill Teago
6 Bob Fishel
7 Marcia Gustafson
8 Catherine Autey
9 Jan Ko Corbay
10 Ben Traverse
11 Joan Sherman
12 Mohamed Jafar
13 Phet Keomuyvanh
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