

Newport County, Rhode Island

# 2022 Behavioral Health Community Listening Sessions Report



**Newport County Behavioral Health System**, known locally as **No Wrong Door**, is developing a coordinated, interagency behavioral health system that improves access and outcomes of mental health and substance use care for individuals and families in Newport County. No Wrong Door works to meet the challenges of children, adults & families struggling with behavioral health needs due to disparities in health care access and delivery. Listening Sessions held in each Newport County community have made clear the many obstacles that residents face when trying to access mental health services -these challenges will be among our priorities for the coming years.

## Overview

This project has been generously supported by grant funding through the Van Buren Charitable Foundation, the Gruben Foundation and the Rhode Island Foundation. The contents of the report reflect the summary of opinions and feedback presented by Listening Session participants and do not necessarily reflect the opinions of Strategic Prevention Partnerships, our funders, or our partners in No Wrong Door.

On behalf of Strategic Prevention Partnerships, we would like to thank each person who participated in the Listening Session Series and the community organizers who encouraged residents to attend and share their experiences. Thank you to the Newport Public Library, Middletown Public Library, Portsmouth Public Library, Tiverton Public Library, Jamestown Philomenian Library and the Little Compton Community Center for allowing us to host the sessions at your locations. Lastly, Thank you to the Newport County Prevention Coalition staff who supported this initiative.

The Community Listening Session series began as an effort to better understand the needs of Newport County residents who have experience with accessing mental health and substance use services or have a family member who has experience with behavioral health treatment. The listening session series was designed to create a regional snapshot of key behavioral healthcare experiences. Through this initiative, No Wrong Door was able to collect opinions on “what works” in terms of existing supports/programs as well as areas of improvement for new or existing supports. Through our six listening sessions, we were able to engage with 70 Newport County residents. This report is a compilation of the information obtained throughout this series and concludes with findings and recommendations.

## Research Questions

Participants of the listening sessions were asked the three following questions.

1. What do you see as barriers for people to access and receive quality mental health services in your town/city?

2. What do you see as barriers for people to access and receive quality substance use treatment in your town/city?

3. In your opinion, what issue discussed tonight is the main priority (one or more) for your community?

Each participant received a printed handout of the outlined questions in which they could submit written responses if they did not feel comfortable voicing their opinion in the group discussion. The collection of responses outlined in this report reflects both the verbal and written responses. It is important to mention that there were multiple similarities during our discussions of barriers to accessing mental health and substance use treatment services. No Wrong Door formed the questions separately with the express interest of illustrating the overlap in responses as well as the separate, unique viewpoints for both mental health and substance use treatment

Dates & Locations for each Listening Session:

### **Newport Listening Session**

Newport Public Library  
September 21st, 2022

### **Middletown Listening Session**

Middletown Public Library  
September 28th, 2022

### **Portsmouth Listening Session**

Portsmouth Public Library  
October 3rd, 2022

### **Tiverton Listening Session**

Tiverton Public Library  
October 5th, 2022

### **Jamestown Listening Session**

Jamestown Philomena Library  
October 12th, 2022\*

### **Little Compton Listening Session**

Little Compton Community Center  
October 19th, 2022

\*Due to a low turnout of participants at the Jamestown Listening Session, No Wrong Door was unable to obtain information from Jamestown residents about their experiences with behavioral healthcare services.

# Little Compton Listening Session

*Eight participants*

## Identified Mental Health Treatment Barriers

### 1. Transportation

- Participants noted Little Compton is a rural community; public transportation not being available was indicated as a barrier for residents.
- Participants voiced concern over the elderly population; residents requested more outreach to homebound individuals to ensure basic and medical needs are being met.
- Participants emphasized the need to bring resources into the community as opposed to requiring residents to seek assistance in other towns or states.

### 2. Lack of Local Resources/Facilities

- The Wellness Center in Little Compton was identified as the only local resource for mental health services; feedback indicated clarification was needed regarding how the center is being utilized, current hours of operation, and available services. Participants spoke highly of a discontinued program through Newport Mental Health in which a clinician would be available at the Wellness Center on certain days.
- Attendees suggested the Wellness Center could be used more efficiently to better provide community outreach and decrease local stigma.

### 3. Increase Resources for Children and Adolescents

- Participants repeatedly expressed concern for children, adolescents, and young adults living in Little Compton and their ability to access appropriate mental health resources; caregivers expressed difficulty in accessing mental health practitioners through medicaid.
- Attendees identified the public school system as the primary local resource for mental health support; a social-emotional curriculum as well as SEL support-staff have been implemented within the school system. Residents urged an emphasis on protecting these practices and expanding content into the community.
- Caregivers felt more outreach was necessary to expand prevention education within the community itself; residents encouraged in-person events specific to adolescents in order to build community and mental health discourse.

# Little Compton Listening Session

*Eight participants*

## Identified Substance Use Treatment Barriers

### **1. Accessing Available Substance-Use & Recovery Resources**

- Participants expressed a lack of consistent and clear communication regarding availability of physical resources open to those seeking immediate treatment for substance use; residents desired a local resource to provide alternate locations for treatment.
- Attendees reiterated the importance of distributing accurate information within and throughout pre-existing community resources such as libraries and churches; a physical source of information was requested containing substance-use detox, rehabilitation, and long-term recovery centers and locations.
- Insurance was repeatedly identified as a barrier to those seeking substance use services for themselves and/or others; participants reported detrimental wait-times have led to increased further illicit drug-use, self-medicating, and/or has compounded pre-existing mental health issues.

### **2. Local Emergency Service Professionals & Role in Community**

- There was a perception among participants that people in the community experiencing substance use disorders were reluctant to seek help due to stigma and an inability to access appropriate services via local emergency response workers.
- Participants voiced an urgent need to train current first responders to effectively guide and/or redirect residents with substance use concerns to appropriate locations and/or medical professionals for appropriate treatment services.
- Residents suggested substance use issues were more prevalent within the community than reported; overdose calls in Little Compton are reportedly transported to Fall River. This has led to misinformation regarding overdose data and distorted the urgency needed to address these concerns openly within the community.
- Feedback stated that stigma surrounding substance use issues and subsequent lack of recovery resources within the community require outreach from effective organizations outside of Little Compton. There is a disconnect between available resources in the state and residents of Little Compton.

## Little Compton Listening Session

*Eight participants*

### Additional Specific Comments/Concerns

- Unique to Little Compton is the transition eighth grade students make into high school; adolescents transition out of the community. This presents a vulnerable time of transition for young adults in Little Compton.
- The majority of physical and mental health needs were met via Massachusetts- notably Fall River; residents described a physical disconnect between available resources in the state and residents of Little Compton.
- Participants voiced Brown University as an effective resource for after-care following detox; transportation was provided by the university to help specific patients consistently attend after-care appointments and maintain sobriety.
- NA and AA meetings were described as currently active and available to all residents within the local churches (St. Andrews, St. Catherines).



# Middletown Listening Session

*Twenty-two participants*

## Identified Mental Health Treatment Barriers

### 1. Role & Function of Newport Mental Health

- Majority of participants had direct, long-term experience receiving treatment services for mental health disorders at Newport Mental Health; these clients expressed feeling unable to communicate needs and a lack of clear communication from NMH.
- Participants raised questions concerning how grant money and/or funding to Newport Mental Health is allocated.
- Participants expressed specific concern regarding a lack of communal space for clients at the Valley Rd office. Clients expressed frustration that “their space was given to CODAC”.
- Frustrations indicated a need for more clarity about medications being dispersed as well as the process for receiving those services.
- Clients reported frequent staff shortages and turnover; participants reported this hindered their ability to establish, maintain, and sustain relationships of trust with staff; additionally, clients perceived assigned staff to be unqualified or not appropriately communicating with individuals on a consistent basis.
- Lack of diversity among trained professionals was a recurring concern for clients; for example, participants cited a need for diversity training to aid in a more comprehensive understanding of various cultures. Additionally, more informed trauma-response therapy and/or counseling was cited as a need.

### 2. Community Spaces

- Participants reported a desire for safe, community spaces; repeated responses indicated a desire to implement community-driven support groups and opportunities for people experiencing mental health concerns to socialize.
- Clients expressed potential to utilize designated spaces within Middletown for computer classes to help family members and/or caretakers and those seeking mental health services to effectively navigate existing digital resources; specifically, residents asked for direction to locate AA/NA meeting locations, to find practicing mental health professionals in the area accepting new patients, to obtain knowledge concerning the Medical Transportation Management (MTM) process, and to receive clarification on insurance processes.
- Participants requested better use of current infrastructure, such as libraries, to provide opportunities for communal support and learning groups.

# Middletown Listening Session

*Twenty-two participants*

## **3. Accessing Available Mental Health Resources**

- Participants requested a common resource for residents to provide an updated, comprehensive list of available mental health facilities, services, programs and/or qualified mental health professionals.
- Family members and/or caretakers for those seeking mental health resources desired clarity concerning treatment options available; specifically, participants expressed confusion concerning insurance, treatment, and medication options.
- Middletown residents emphasized the importance of dispersing information and resources to all residents; specifically, participants expressed a lack of knowledge regarding active resources available.

## Identified Substance Use Treatment Barriers

### **1. Medical Personnel & Substance- Use Treatment Referral**

- Participants perceived a disconnect between primary care doctors and/or medical staff and effective substance-use treatment referrals; clients and/or caretakers felt medical staff was not aware or able to provide alternative substance-use treatment and aftercare referrals.
- Middletown participants suggested it would be helpful for primary care doctors to be able to direct families for further aftercare, further treatment, etc. Residents expressed a lack of accessibility to mental health services for children and family members affected by familial addiction.
- Participants suggested a need for in-person partial day programs specific to adolescence in order to decrease likelihood of self-medication; residents expressed the need to invest in preventive measures.

### **2. Current Resources Available**

- Middletown participants described positive experiences at Middletown and Newport Hope Recovery Center locations.
- Participants expressed a desire for in-person partial day programs at Newport Hospital; previous experiences were described as positive and effective. Virtual meetings were reportedly not as effective for clients.

## Middletown Listening Session

*Twenty-two participants*

### Additional Specific Comments/Concerns

- Parents and caretakers of young people seeking mental health services reported long wait-times; clarity was needed concerning available treatment resources for children and/or young adults for the interim. The wait time for a comprehensive evaluation is currently 8-12 months at Bradley Hospital
- Middletown participants expressed concern for those without homes; residents requested temporary housing and/or overnight housing shelters for the colder months.
- Participants reported a need for female-specific treatment services; female sober-living residences would offer safe places for after-care treatment. Additionally, women-focused support groups within the community were of interest to residents.



# Newport Listening Session

*Twenty-five participants*

## Identified Mental Health Treatment Barriers

### 1. Transportation

- Non-drivers reported difficulty getting to and from appointments (doctors, specialists, dentists, counseling, etc.); participants reported an increased likelihood of recurring/worsening health problems: both mental and physical.
- Non-drivers have limited public transportation on Aquidneck Island; majority of feedback cited a minimum of 2 bus rides for specialist appointments outside of Newport and on Aquidneck Island.
- Attendees suggested free access to public transport would benefit homeless/low-income residents.
- Participants voiced interest in opportunities for in-home appointments/counseling/therapy as opposed to navigating public transportation

### 2. Housing

- Residents reported a lack of affordable and/or temporary housing available in Newport; feedback collected reflected a need for overnight shelters/warming centers for those experiencing homelessness.
- Participants suggested increased communication between municipalities could provide more housing options across and within Newport County.
- Feedback expressed that the homeless population requires access to 24 hour, safe shelters in the community; there is currently no overnight warming center on Aquidneck Island.
- Participants expressed a need for long and short-term residential housing options to safely receive mental health treatment.

### 3. Paperwork/Forms/Applications

- Residents stated that streamlining applications/forms across municipalities and/or programs would help them to better navigate paperwork; participants repeatedly expressed feelings of being overwhelmed and/or confused by application processes.
- Feedback from participants indicated language barriers present further uncertainty for residents in terms of how and where to receive support.

# Newport Listening Session

*Twenty-five participants*

- Specific participants in Newport identified a lack of adequate literacy skills; they expressed shame, embarrassment, and stigma as hindrances to receiving assistance.
- Participants expressed an interest in improving reading and writing skills if opportunities were to be provided.

## **4. Lack of Resources (Supply & Demand)**

- Residents indicated long wait times to receive appropriate treatment- both medical and mental; participants described increased mental health issues and/or worsening pre-existing conditions due to delays in treatment and/or evaluation.
- Feedback suggested that inadequate staffing and frequent turnover presented difficulties in establishing trust between patients and staff members.
- Participants reported the need for community outreach to more effectively provide active, available resources within the community.
- Participants expressed frustration for phone calls not being returned.

## Identified Substance Use Treatment Barriers

### **1. Lack of Appropriate Facilities/Staff**

- Participants expressed the need for more substance-use treatment facilities on Aquidneck Island with transportation being identified as a critical barrier to sustained recovery.
- Residents requested more diversity in the way after-care is structured; for example, participants expressed interest and success with in-home therapy, small-group support, in-person partial day programs, etc.
- Feedback indicated long wait-time to receive appropriate treatment as being detrimental to people's health and leading to increased illicit substance use.
- Residents requested an increase in coordination between organizations to help streamline necessary documentation to access services.

# Newport Listening Session

*Twenty-five participants*

## **2. Increase Resources for Basic-Needs Assistance to Help those in Recovery**

- There is a growing awareness of the prominence of dual diagnoses for those experiencing substance misuse; participants expressed a need for both short and long-term residential housing programs to adequately receive both mental health as well as immediate substance-use treatment.
- Residents expressed interest in local, in-patient services for those seeking treatment; participants described sober-living residences in Newport being dismantled. There is a growing need for communal, sober-living facilities for both long and short-term treatment.
- Participants identified locations to shower as well as access to clean clothes via laundry assistance as priorities for Newport residents in recovery and/or receiving substance-use treatment.
- Newport participants recognized the importance of prevention for younger people within the community; they requested more social, safe, communal events and activities for children and/or adolescents.

## **Additional Specific Comments/Concerns**

- Feedback suggested the homeless population in Newport needs more community outreach especially for safe-shelter as well as medical and/or appropriate dental treatment; increased access to showers and clean clothing needed. Participants suggested implementing programs within the community to achieve long-term solutions; for example, teaching/outreach programs to show residents how to gain employment.
- Specific residents requested peer-outreach for single fathers in Newport to provide small-group support.
- CODAC was referenced as an effective resource for those seeking experienced professionals in all areas of substance use treatment as well as for specific disorders and/or illnesses requiring treatment.

# Portsmouth Listening Session

*Ten participants*

## Identified Mental Health Treatment Barriers

### **1. Medical Personnel & Mental Health Treatment Referrals**

- Feedback reported a perception of disconnect and/or lack of communication between traditional medical practitioners and available mental health support resources; residents reported confusion over the role of primary care and/or pediatricians for clients seeking treatment for mental health issues.
- Participants stated that protocol is unclear for the role of general practitioners and mental health issues such as panic attacks, suicidal thoughts and/or statements, depression, etc.; participants reported experiences that varied greatly from individual to location.
- Consequently, participants recommended a physical resource to be distributed throughout the medical community for consistent and effective redirection to available resources; participants described feeling unsure or unclear of alternative treatment options in the area.
- Participants were inquiring about rehabilitation options for mental health issues; residents placed an emphasis on developing life skills and employment guidance as opposed to substance-use treatment.

### **2. Increase Resources for Children and Adolescents**

- 'Word of mouth' was identified as the most effective method to find available mental health treatment for children and young adults
- Caregivers and parents reported especially long wait-times for children to receive treatment and evaluation; counseling for appropriate therapy for children and/or adolescents was identified as a priority concern among attendees.
- Caregivers and/or parents suggested support groups would be beneficial for those seeking additional resources for their children as well as themselves; participants strongly preferred in-person meetings as opposed to virtual.
- Parents reported increased wait-time for in-school support and limited therapeutic options for adolescents; online resources weren't providing accurate and updated information for parents/caregivers.

# Portsmouth Listening Session

*Ten participants*

## Identified Substance Use Treatment Barriers

### 1. Peer-Recovery Training & Implementation

- Participants requested more opportunities for peer-recovery model training and implementation; feedback indicated a lack of physical resources as well as staff shortages and insurance obstacles requiring alternate options for sustained recovery.
- Some participants recounted lack of insurance coverage for those not actively using but seeking treatment; Marigold Health App. mentioned as an effective, digital resource for those seeking small group support.
- Implementation for small group support within the community was a priority for residents; for example, participants requested peer-organized and run support groups to help people quit smoking.

### 2. Community Outreach

- Participants lacked clarity on where substance-use treatment clients could receive consistent treatment; residents reported frequent turnover of caseworkers and/or inability to locate appropriate professionals.
- Community outreach from local resources identified as helpful for residents to receive accurate, up to date information as opposed to relying on digital resources; participants suggest websites for treatment are not reliable or do not accept medicaid.

## Additional Specific Comments/Concerns

- Participants reported positive experiences with Portsmouth Police Department.
- Participants requested testing kits for fentanyl to be available for residents.



# Tiverton Listening Session

*Seven participants*

## Identified Mental Health Treatment Barriers

### 1. Transportation

- Lack of public transportation in Tiverton was a priority concern for participants; the majority of residents must leave the area to seek appropriate mental health treatment.
- Tiverton residents reported seeking mental health services in Massachusetts, namely Fall River, or on Aquidneck Island; this has led to overcrowding and long wait-times at those facilities.
- Participants recommended community-driven efforts to help residents locate active mental health treatment providers and resources.
- Participants expressed concern for the town's elderly population. Lack of reliable public transportation hindered non-drivers from meeting basic needs. Residents requested implementing consistent outreach services for the elderly in both Tiverton and Little Compton.

### 2. Increase Resources for Children and Adolescents

- Specific concerns were expressed concerning the evaluation process for children and/or adolescents; parents reported confusion over where to go for diagnosis and subsequent referrals.
- Participants wanted more information about existing mental health resources; specifically, residents wanted more information regarding KidsLink hotline.
- Youth and/or adolescents weren't receiving timely mental health evaluations and necessary treatment; caregivers felt unclear on where to receive accurate information to assist in finding qualified support and/or treatment for themselves and those they care for.
- Clarity was needed regarding the role of pediatricians and mental health evaluations for children; participants reported being directed to emergency room services for mental health issues with little or no after-care put in place following discharge.

## Identified Substance Use Treatment Barriers

### 1. Prevention Education & Intervention

- Written and verbal feedback suggested an urgent need among residents to address prevention education for youth; specifically mentioned were the dangers of fentanyl.

## Tiverton Listening Session

*Seven participants*

- Participants were concerned that long wait-times for youth could result in self-medication and/or an increase in illicit drug-use.
- Residents wanted representatives from substance-use recovery centers to provide accurate information regarding active and available locations within driving distance.
- Residents requested more disbursement of naran within the community as well as more opportunities to be trained to assist others.
- Participants voiced recognition of the frequency of dual-diagnosis among those receiving help for substance-use; residents wanted to reduce stigma within the community by providing accurate information regarding the relationship between mental health issues and subsequent substance-use as self-medicating.

### Additional Specific Comments/Concerns

- A lack of affordable housing in Tiverton was a concern for residents.