Oregon Youth Addiction Alliance

Regular Meeting Agenda

May 23, 2025 3:00 - 5:00 PM

Meeting link: https://zoom.us/j/92479393540?pwd=yd4R7Sm6JjMW0P22hRaazB8NOoUFED.1

Join by phone: (+1) 346-248-7799

Meeting ID: 924 7939 3540

Passcode: 291376

Chairs: Kamryn Berk & Kaleb Gambee

Vice Chair: Erica Fuller

Facilitators: Jummy Akinyode, Shaunte Duron, & Susan Fischer-Maki

Staff: Joyleen Carter (SOCAC) & Wes Rivers (ADPC)

Supporting Meeting Materials

- Youth Adult Partnership Training
- Draft Charter

Group Agreements:

- Be present and involved
- What is shared in this space, stays in this space.
- Varied and opposing ideas are welcome. Challenge ideas, not people.
- Use the names and pronouns people introduce themselves with.
- Focus on our shared purpose: improving the system for Oregon youth.
- Listen actively respect others when they speak and avoid interrupting.
- Honor those with quieter voices. If you tend to talk more, give others space to speak. If you are quieter, try to speak up.
- Be mindful of power dynamics in the room.
- Avoid acronyms!
- Avoid problem-solving for one person's situation or crises.
- Propose solutions whenever possible don't just value the problem.
- Adults must take <u>youth-adult partnership training</u> before attending regularly.

#	AGENDA ITEM	TIME	OWNER
1	Welcome	3:00 - 3:10	Kaleb
2	Ice Breaker	3:10 - 3:20	Kamryn
4	Breakout Group: Brainstorm Big Ideas Round 1 Home Non-clinical recovery spaces	3:20 - 3:55	Jummy
5	Break	3:55 - 4:00	Jummy
6	 Breakout Group: Brainstorm Big Ideas Round 2 Home Non-clinical recovery spaces 	4:00 - 4:50	Jummy
6	Public Comment	4:50 - 4:55	Jummy
7	Closing - Through-line - Group Check-In - Preview next meeting: - Subcommittee Workgroup meeting - June 11th - OYAA meeting -June 20th	4:55 - 5:00	Kaleb

Note: The Alliance may choose to take agenda items out of order, pull, defer, or shorten presentation time of agenda item(s) to accommodate unscheduled business needs. Anyone wishing to be present for an item should arrive when the meeting begins to avoid missing an item of interest.

The meeting location is accessible to persons with disabilities. A request for an interpreter for the hearing impaired or for other accommodations for persons with disabilities should be made at least 48 hours before the meeting to: Corina Vasquez at corina.vasquez@oha.oregon.gov.

OYAA Subcommittee Notes Wednesday 5/14/25

Members: Annette Majekodunmi, Araceli Granados , Ashlie Kangas, Erica Fuller, Kaleb Gambee, Kayla Lara-Ryall, Madison Dunn, Miranda Steward

Absent: Giovanny Dillanes, Kati Jokinen, Michael Liang, Tony Vezina, Vanessa Nordyke, Kamryn Berk

Non-Members: Joyleen Carter, Jummy Akinyode , Wes R. Rivers, Shaunte Duron-Okotete

Key Takeaways

- Need for more integrated, accessible SUD support in schools (e.g. on-site counselors, universal screenings, peer support programs)
- Importance of addressing root causes and providing holistic support (housing, nutrition, etc.)
- Desire to shift from punitive to supportive approaches for students with SUD
- Value of improving collaboration between schools, health centers, and community partners

Next Steps

- Upcoming full council meeting on May 23rd
- Continue brainstorming innovative ideas in next subcommittee meeting
- Hear from expert speakers on leading work in the field
- Monitor progress of relevant bills in state legislature

Summary By Topics

MURAL NOTES

Brainstorming: Educational Settings

- Create standardized but individualized programs with peer mentor/buddy systems
- Establish more recovery schools to avoid relapse "domino effect"
- Offer support groups integrated into school curriculum
- Train school staff on culturally-responsive approaches to mental health/SUD
- Improve counselor-to-student ratios (suggested 1:250)
- Provide crisis care and on-demand counseling consistently
- Implement universal SUD screenings to enable early intervention
- Promote sober social events with incentives
- Develop peer-focused campaigns (e.g. "See something, say something" for SUD)
- Target alternative education environments with additional resources

Brainstorming: Clinical Treatment & Recovery

- Establish drop-in centers for accessible support
- Utilize public spaces (libraries, parks) for less clinical treatment settings
- Address holistic needs (housing, nutrition) as part of treatment
- Improve insurance reimbursement rates to incentivize SUD treatment provision
- Tackle workforce issues through training and stigma reduction
- Provide vouchers/financial supplements for residential treatment costs

Ensure culturally-specific and linguistically-appropriate services

Brainstorming: Legal & Carceral Settings

- Maintain health insurance coverage for individuals entering/exiting carceral settings
- Offer diverse treatment modalities and evidence-based programming
- Provide transition support plans for re-entering school/community
- Ensure access to education and skill-building opportunities while incarcerated
- Improve transportation support and visiting hours for families

Legislative Updates

- HB 2502 passed procedural vote, moving to Ways and Means committee
- Bill now focused solely on recovery schools funding
- Other components moved to HB 3321 and HB 2929

Chronological Summary

Meeting overview and ground rules @ 11:03 - Kaleb Gambee, the co-chair of the Oregon Youth Addiction Alliance, welcomed everyone and reviewed the group agreements, including being present, challenging ideas not people, and avoiding acronyms. He explained the agenda for the day, including icebreakers, brainstorming breakout groups, and public comment.

Icebreaker: What inspires you? @ 15:41 - Participants shared what motivates or inspires them about the work of the Oregon Youth Addiction Alliance, including helping other youth access recovery opportunities, providing support to those in need, and using personal experiences to drive positive change in the community.

Brainstorming: Carceral and legal settings @ 29:00 - The group brainstormed ideas for how to create access to a full continuum of evidence-based treatment and recovery support for people in carceral settings. Key ideas included maintaining health insurance coverage, providing diverse treatment modalities, continuing education and skills-based learning, transportation and visiting hour support, and leveraging community partnerships and non-clinical spaces.

Brainstorming: Clinical treatment and recovery @ 46:00 - The group discussed how to design accessible, flexible, and culturally rooted treatment that adapts to the real lives of youth and their families. Ideas included utilizing community spaces rather than clinical settings, building partnerships with local providers, addressing workforce barriers like stigma and reimbursement rates, and incorporating family involvement and aftercare support.

Brainstorming: Educational settings @ 1:19:34 - The group explored how to redesign school responses to student substance use disorder, shifting from punishment to prevention through a full continuum of care. Key ideas included student self-referral policies, peer

support and recovery school models, integrating mental health and SUD services on campus, and increasing funding and training for school-based professionals.

Recap and next steps @ 2:01:14 - Kaleb Gambee reflected on the civic engagement and innovative ideas generated during the meeting, noting that the "through line" was a focus on exploring new possibilities to better support youth. Wes Rivers provided an update on relevant legislation. The group was informed that the next meeting would feature expert presentations to build on the brainstorming.