

Testimony to the United States Congress
***Senate Primary Health and Retirement Security Subcommittee of the Senate Health, Education, Labor,
and Pensions Committee.***

7/21/21 hearing on Addressing Disparities in Life Expectancy.

Thank you Chairman Sanders, Ranking Member Collins and members of the H.E.L.P. Committee. My name is Bob MacKenzie and I am the Chief of Police in Kennebunk, Maine. I am a veteran of public safety for over 40 years, to include 33 years in law enforcement, serving as Chief for the past thirteen years, and also served as a firefighter/Emergency Medical Technician up to the Critical Care level for over 30 years. I am also a proud Rotarian, Past-President of the Kennebunk Rotary Club and Chairman of the Rotary District 7780 Recovery Initiative. I also serve on the Board of Directors for Milestone Recovery and am a board member of United Way of Southern Maine.

I appreciate the opportunity and am honored to testify before you on a subject near and dear to my heart, the Opioid Epidemic and Substance Use Disorder and how it has impacted our society through not only the lens of a devoted public servant, but as a father.

Through my decades of public safety, I have been firsthand witness to the death and destruction caused by the disease of substance use disorder, (SUD) and the Opioid Epidemic far too many times. I have seen families devastated by the loss of their sons/daughters, brothers/sisters, mothers/fathers, and so on.

As devastating as these losses are it became even more real for me when I realized my daughter was suffering from an opioid use disorder. Because of the work I have been doing on SUD, specializing in the opioid epidemic, I knew my daughter was at great risk for death and I was afraid I would be on the receiving end of a death notification. I was fortunate to have the resources and knowhow in order to help my daughter find sobriety. It wasn't easy for her as she experienced a reoccurrence, but I am proud to say she is now 18 months in recovery and working with me on an initiative to help others with SUD.

There are many families and loved ones not as fortunate as ours and 2020 was a devastating year, not only because of COVID, but because of the loss of lives to SUD and the Opioid Epidemic. Maine saw a 33% increase in overdose deaths in 2020, losing 504 lives to overdose. The most recent national statistics I have seen shows a similar 30% increase, estimated to have a death toll of 93,000 Americans compared to over 72,000 deaths in 2019. What's important to remember, is these statistics are somebody's son/daughter, brother/sister, mother/father, etc..... My heart goes out to each and every one of them.

There have been resources allocated to SUD and the opioid epidemic, so you may ask why are we failing? We had made progress pre-pandemic, but SUD is a disease of isolation. COVID forced all of us to isolate and many of the resources that had been made available for those suffering with SUD were no longer available or took much time to adjust and could only be utilized remotely. Many of those with SUD do not have the resources to utilize online services. It is typical for those that use to use in solitude, and many die alone after using opioids.

On a positive note, resources for SUD have and will continue to adjust for the pandemic and we are becoming creative as to our approach. We have implemented a number of initiatives in our region over the past five years.

An example I will use is what we have done in Kennebunk, ME. The first thing I knew we needed to do was reduce stigma as stigma is the #1 barrier to recovery for those that use. Stigma related to SUD is far too prevalent in our society. Many believe those that use substances are less than and have little value in society. Once educated, people tend to open their minds and their hearts, thus progress can be made.

I first educated Kennebunk Rotarians on SUD and the opioid epidemic and trained many how to use Naloxone, the drug that reverses an opioid overdose. Once that was completed I trained our Chamber of Commerce, businesses, community members through various forums, Adult ED and even students at Kennebunk High school. Then our Rotary District became involved and I trained at least 35 Rotary clubs, presented at our Rotary District conference where I was fortunate enough to educate over 100 Rotarians from three Rotary Districts, and have traveled throughout Maine, New Hampshire Connecticut and upstate New York. Rotary Clubs in seacoast New Hampshire have held community forums on SUD and the Opioid Epidemic. All with the goals of reducing stigma and saving lives.

A new initiative our Rotary District has embraced and is financially supporting is the training of 30 Master Trainers with the goal of educating communities throughout our region on Adverse Childhood Experience's, otherwise known as, (ACE's). ACE's has proven to have significant negative outcomes on physical, mental and behavioral health, to include SUD for individuals and communities. These master trainers are now training school officials, law enforcement, community members and more to identify and work with at risk youth in a trauma-informed way. Approaching problems in a constructive, understanding way, called trauma informed care, rather than traditional punitive methods, has a substantial positive impact on future levels of addition, crime, violence and other societal issues.

A third initiative in the Kennebunk area includes a community-based, fund-raising group called Above Board that came forward with the desire to raise money to support our efforts on savings lives in 2018 & 2019. A total of \$110,000.00 was raised and was used to train community members to become Recovery Coaches. A Recovery Coach is a mentor to those with SUD and helps them find their path to recovery, and stay in recovery. In addition, these funds were used to train our law enforcement officers on how to help those with SUD. There

are times when law enforcement needs to use enforcement, but there are many more times when law enforcement officers can be an ally and help those in need. I am proud to say that this model of law enforcement training became a mandatory training module for all officers in Maine last year. We also were able to utilize these funds to partner with a mental health agency as so a clinician would ride-along with officers and assist those with SUD and mental health issues.

The fourth initiative currently underway in our community is the Kennebunk Area Response to SUD. We convened stakeholders of three towns to include, town managers, law enforcement, physicians, recovery centers, faith based leaders, mental health providers, those in recovery and more. We first identified the issues surrounding SUD, what resources we currently have but even more important, identified gaps as so we can create a strategic plan to close the gaps. This type of initiative educates everyone as so we are on the same page, are more efficient, cost effective and not working in silos.

The fifth initiative we have utilized in Kennebunk are interns. In early 2020 we partnered with the University of New England to bring on an intern from UNE's School of Social Work where we had a graduate student intern at Kennebunk PD for a full semester. This student was supervised by a licensed clinician, but was able to conduct ride-along with officers as well as conduct follow-ups on those who were struggling with SUD and mental health issues. Given the success of this initiative, we are currently in a process to hire a mental health clinician. We also utilized AmeriCorps to have a VISTA intern at our PD for two years to provide additional support for our efforts on SUD.

A sixth initiative prior to the pandemic was partnering with The Family Restored, which is a support group for families of loved ones struggling with SUD. Family is a support network and can play a critical role of a loved ones recovery. I had many sleepless nights when my daughter was struggling, and I had a pretty decent handle on resources and what needed to be done. Most families are at a loss, don't know what to do or where to turn and in many instances unknowingly enable their loved ones. Family support groups is a harm reduction tool and should be prevalent and accessible throughout our country.

Even with the initiatives we have brought forth there are many other initiatives which would be very beneficial and I feel are needed in order to have the best outcomes and save lives. Here are some of my thoughts:

Peer led recovery community centers, such as the Portland Recovery Community Center, (PRCC) is a community center open to those in need. PRCC's vision statement explains it well: *PRCC's vision is that every person affected by addiction in Maine will have direct access to a local recovery community center that provides support groups, education, and individual resources to enhance their ability to heal, strengthen and grow in their recovery pathway, throughout all stages of their journey.* Maine currently has 13 recovery community centers

with the goal of 17, one for each county in Maine. I believe once again we need one in every community in our nation as SUD is that prevalent.

Another vital need is recovery/detox centers. I can speak as a board member of Milestone Recovery in Portland, Maine which is a non-profit center providing a life-saving function to those with SUD from all over. Milestone runs on a very tight budget but does not refuse anyone who cannot pay. In Maine there are very few options for recovery centers, and many of the ones we do have are for-profit. Many with SUD do not have the means to pay or have health insurance that cover the costs, so there are many times where people in need do not receive the help they want/need. It is important to note that many of those with SUD who are ready for recovery only have a short window to get help before their disease changes their mind.

It is my opinion that mental health clinicians should be available to every law enforcement agency. Based on our experience with our intern and clinician, and based upon my over 33 years on the job, we need the expertise of a licensed professional clinician to assist us, not only at the time of mental health events, but to conduct follow up with those suffering from SUD/mental health calls that law enforcement come into contact with. Clinicians have the knowhow, time and ability to connect those in need to the correct services. Although law enforcement officers are not licensed mental health clinicians, we routinely have to play that role as options are limited to those in need. Our agency and town has benefited from the COPS hiring grants in the past, but now is the time to allocate funds for licensed clinicians to be embedded within law enforcement agencies. It's not only a community policing initiative, it will save lives and save money in the long run.

Thank you once again for this opportunity and I appreciate your time to this critical issue facing our country. By working together we will make a difference and save lives!