

The Imani Breakthrough Project

A community, cultural and faith-based recovery initiative for Black and Latinx communities in response to our current Opioid crisis

CT ADPC, December 2022



Culturally-responsive, community-driven substance use recovery for Black and Latinx populations



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Yale Program for Recovery and Community Health

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The Imani Organizing Team

Special thanks to the churches, pastors, facilitators, and people with lived experience attending Imani. In memory of the many that we have lost to the opioid epidemic.



Land Acknowledgement

All land in CT was once Native territory. It is our duty to acknowledge that many of the institutions where we work or conduct research are indeed on Native land. GIVE THANKS!

Land acknowledgments do not exist in the past tense or historical context. Colonialism is a current ongoing process, and we need to be mindful of our present participation



We need you!

We need you our brothers, our sisters and our people!

Help us reaffirm ourselves in

Loving Ourselves;

Hold us

When we can't stand

'Cause soles of shoes have traveled on our backs for so

long;

We need you our brothers, our sisters and our people!

Adapted from "I Need You," by Imani Harrington





What is the meaning of Imani?

IMANI means “Faith” in Swahili



The Imani Breakthrough is an intervention developed to target people addicted to and actively using heroin and/or other opiates and other drugs. This is a state of CT’s Department of Mental Health and Addiction Services initiative funded by SAMHSA and is part of the Connecticut State Targeted Response (CT STR) to the Opioid Crisis and the State Opioid Response (SOR) funding.

Why Imani Breakthrough?

We aim to promote health and healing for ourselves and our communities!

How is this accomplished?

Through a participatory process, we...

- Create a sense of unity
- Create a sense of collective responsibility

So, that we are in this together!



Black people now OUTPACE White people in OUD deaths

ADDICTION

SSA SOCIETY FOR THE
STUDY OF
ADDICTION

Data Notes |  Full Access |

African Americans now outpace whites in opioid-involved overdose deaths: a comparison of temporal trends from 1999 to 2018

Debra Furr-Holden , Adam J. Milam, Ling Wang, Richard Sadler

First published: 27 August 2020 | <https://doi.org/10.1111/add.15233>

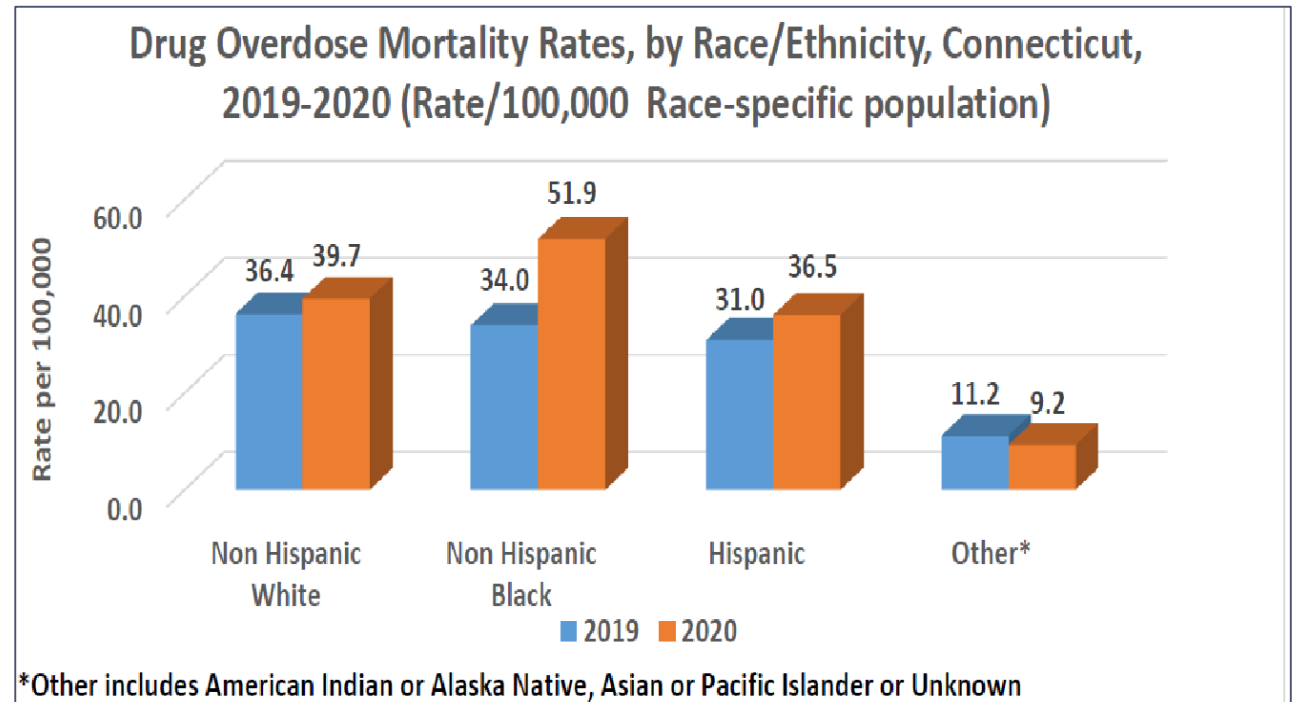


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Problem: Black/Latinx with SUDs Dying at Disproportionate Rates

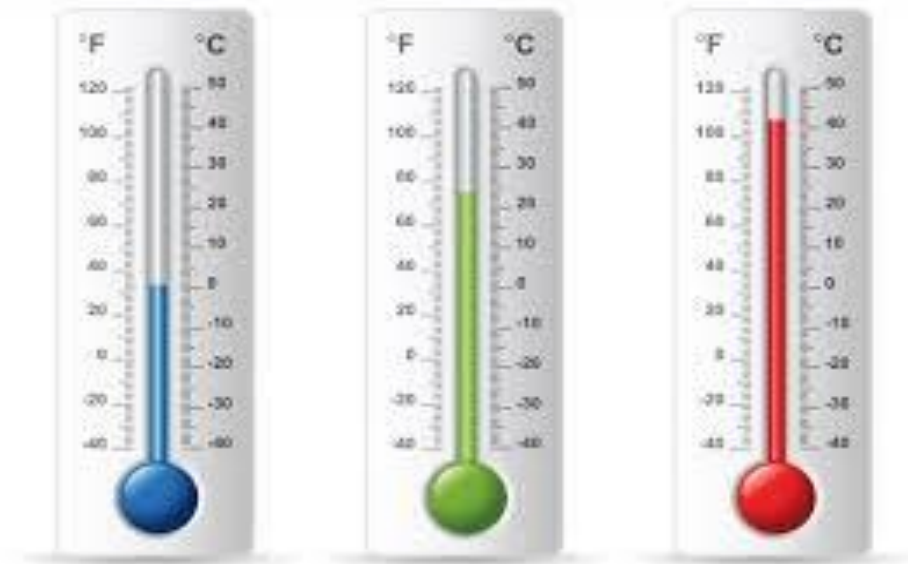
- Black and Latinx people with SUDs have seen a 140%/118% increase in death due to fentanyl
- Increased morbidity and mortality for Black & Latinx with AUD despite equal use
- Lack of access to effective AUD/ODU treatment for Black and Latinx people is a serious public health disparity leading to morbidity/mortality



James K, Jordan A: The Opioid Crisis in Black Communities. *The Journal of Law, Medicine & Ethics* 46:404-21, 2018
 Jordan, A., Mathis, M., Haeny, A., Funaro, M., Paltin, D., & Ransome, Y. (2021). An Evaluation of Opioid Use in Black Communities: A Rapid Review of the Literature
 C. Hart, 'People Are Dying Because of Ignorance, not Because of Opioids,' *Scientific American*, Nov. 1, 2017
 S. Bechteler and K. Kane-Willis, Chicago Urban League, *Whitewashed: the African American Opioid Epidemic*, Nov. 2017
 Cook et al., Assessing the Individual, Neighborhood, and Policy Predictors of Disparities in Mental Health Care. *Med Care Res Rev.* Aug 2017, [March-2021_2020-and-2019-Drug-Overdose-Deaths-Monthly-Report_CT_Updated-4_12_2021.pdf](#)

A Call To Action

Health Disparities and Inequities



Black and Latinx People and People with Mental Illness are dying 15-25 years earlier than the rest of society

-National Association of State Mental Health Program Directors Medical Directors Council, (2006).
Morbidity and Mortality in People with Serious Mental Illness).

Latinos/x
and Black
adults are
less likely to
access SUD
Tx in
Traditional
settings.

Racial/ethnic minorities in the US are less likely than whites to seek mental health treatment (including drug and alcohol).

Black and Latino/x people compared with other racial groups less likely to start drug and alcohol treatment.

If they do start, they don't really like the care they receive, i.e., lower treatment engagement.

This is where Black and Latino churches can be helpful.

Disparities in OUD Outcomes

Social Determinants of Health:

Racism

**Black and
Latinx
Person w/
OUD**



Housing

Vicarious Trauma

Unemployment

Legal
Involvement

Poverty

Redlining

Hopelessness

Policies

Acute/Chronic Stress

No Insurance

“Medical baggage”

“Othering”

Substance Use

Under-Education

Limited Access to Care

Food Insecurity

Absence of

Poor Working Conditions

Lack of Family Support

Black and Latinx churches are effective partners in helping people live healthier lives!

Religion and spirituality enable Black and Latinx people to cope with psychological distress (mind stress).

In urban Black communities (cities) 65-80% of adults attend church regularly; 75% of Latinx populations living in urban communities attend church regularly.

Many studies highlight the importance of church in drug and alcohol recovery programs, where members seek help from clergy (e.g., pastors, deacons, deaconess).

Unique from other recovery programs, Imani focuses on...

- Culturally-informed opioid education, Harm reduction, and naloxone distribution (OEND)
- Addressing the social determinants of health
- Ensuring harm reduction
- The importance of mutual support
- Intensive wraparound support
- Coaching in a safe and familiar environment
- IMANI philosophies
- Training facilitators who are members of the community/churches and those with lived experience of substance use

Imani Breakthrough Recovery Program: Model

Citizenship The 5Rs

“A way of thinking about “a life in the community.”

The 5Rs: to embrace being a citizen, people need a strong connection to the **rights**, **responsibilities**, **roles**, and **resources** that society makes available to its members and to *relationships* involving close ties, and supportive social networks in one’s community (Rowe et al). People also need a sense of belonging that is validated by others’ recognition & acknowledgment that they belong, are valued, and are needed (Rowe, et al).



Collaborating with IMANI Breakthrough

Learning Through Conversations with Communities and Faith-based Leaders and Members

Our process:

1. Learning through Conversations with communities and faith-based leaders and members.
2. Through conversations with organizing team, using suggestions from communities, to modify and develop the faith-based recovery program. Selected a model to combine the 5 Rs (Rowe, et al) and 8 Dimensions of Wellness (Swarbrick), with wrap-around coaches.
3. Decided to add a component focused on Education sessions for churches and communities

Overview: The Imani Breakthrough intervention involves two components and takes place over 6 months:

Part 1: 12 weeks of classes and activities focused on wellness enhancement

- 8 Dimensions of Wellness: Spiritual, Emotional, Physical, Financial, Environmental, Social, Intellectual, Occupational
- 5Rs of Citizenship Enhancement: Roles, Responsibilities, Relationships, Resources, Rights
- Wraparound Support and Coaching: Provided during the 12 weeks. Coaches provide weekly check-ins and are there to assist participants towards obtaining their recovery, hopes and dreams within the scope of the 8 Dimensions of Wellness and the 5Rs.)

Part 2: 10 weeks mutual support (post 12-week group education component)

Varick Memorial AME
Zion, New Haven, CT

Blackwell Memorial AME
Zion Church, Hartford, CT

Mount Aery Baptist,
Bridgeport CT

Burning Bush Family Life
Center, Waterbury, CT

Collaborating with
Churches and Selection
of Facilitators

Pastor Jose church – Oasis of
Blessings Christian Center,
New Britain, CT

Prince of Peace Church,
Bridgeport CT

Casa de Oracion y Adoracion,
New Haven, CT

IAR Nuevo Comoenzo (New
Beginnings) Church, Hartford, CT



Imani Breakthrough in Action: In the media



July 23, 2019

Healthy Churches 2020 Conference
Wholeness & Wellness | Prevention & Care



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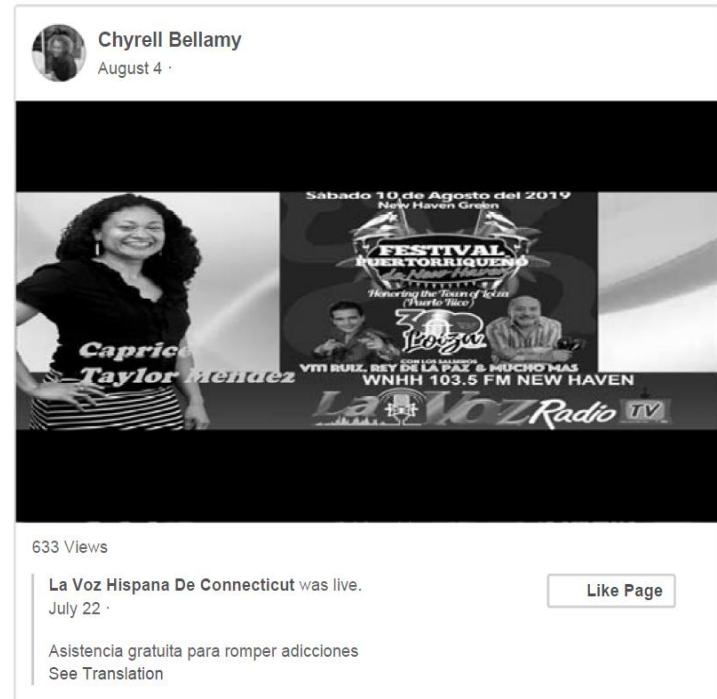
C: Landris Jones

ljones@varickmemorial.org

Dear Rev. Steele:

Congratulations! The Balm In Gilead is excited to honor **Varick Memorial AME Zion Church** with the **2019 Healthy Churches 2020 Best Practice Award** at the **6th Annual Healthy Churches 2020 National Conference, November 19-22, at the Sheraton Charlotte Hotel.** Award recipients will be recognized on Thursday, November 21, 2019 at 7pm during our Awards Dinner with Special Guest Artist, Israel Houghton.

Varick Memorial AME Zion Church has been selected because of your congregation's exceptional work in health promotion, disease prevention, disease management and service. As 2019 recipients of





From 2018 to 2022, Imani Breakthrough has been provided to approximately 1500 people to date in Connecticut and preliminary evidence shows it directly addresses the barriers that impede access to the most effective MAT available.

Overview of Imani Breakthrough Preliminary Data

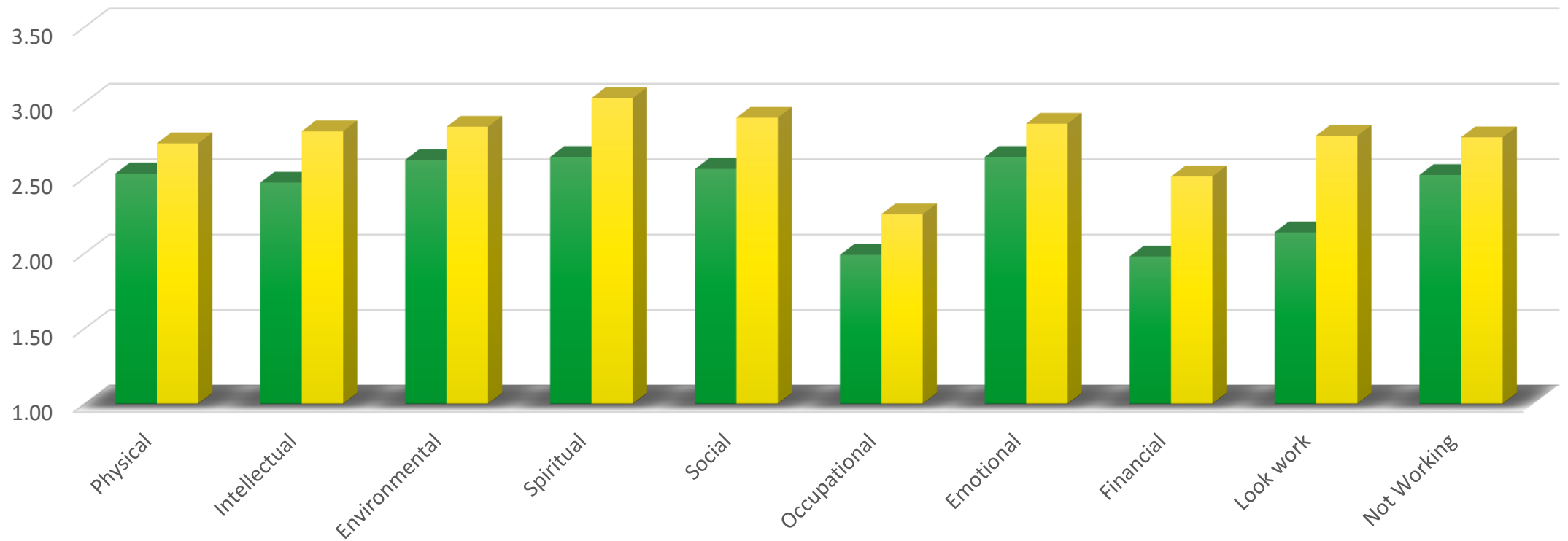
Demographic Information



Demographic Characteristics	
43% Female, 57% Male	74% Have experienced homelessness
Mean age – 47 y/o (SD 12)	43% Have experienced childhood physical, verbal, or sexual abuse
22% Latinx/Hispanic	50% Have witnessed physical, verbal, or sexual abuse as a child
61% African American	65% Have experienced violence as an adult
13% White/Caucasian	69% Have witnessed violence as an adult
78% high school diploma or less	47% Attend Religious/Spiritual meetings
81% currently not working	49% Engage in religious/spiritual practice
75% Have been hospitalized at least once	11% Are members of a club or social group
44% - 3 or more times	67% Currently were not receiving substance use services
31% - 5 or more times	25% report use of opioid
65% Have been incarcerated	53% report use of alcohol
14% are currently on probation/parole	43% report use of cocaine and/or crack cocaine

Results – 8 Dimensions of Wellness

Dimensions of Wellness Change in Score from Baseline to Week 12

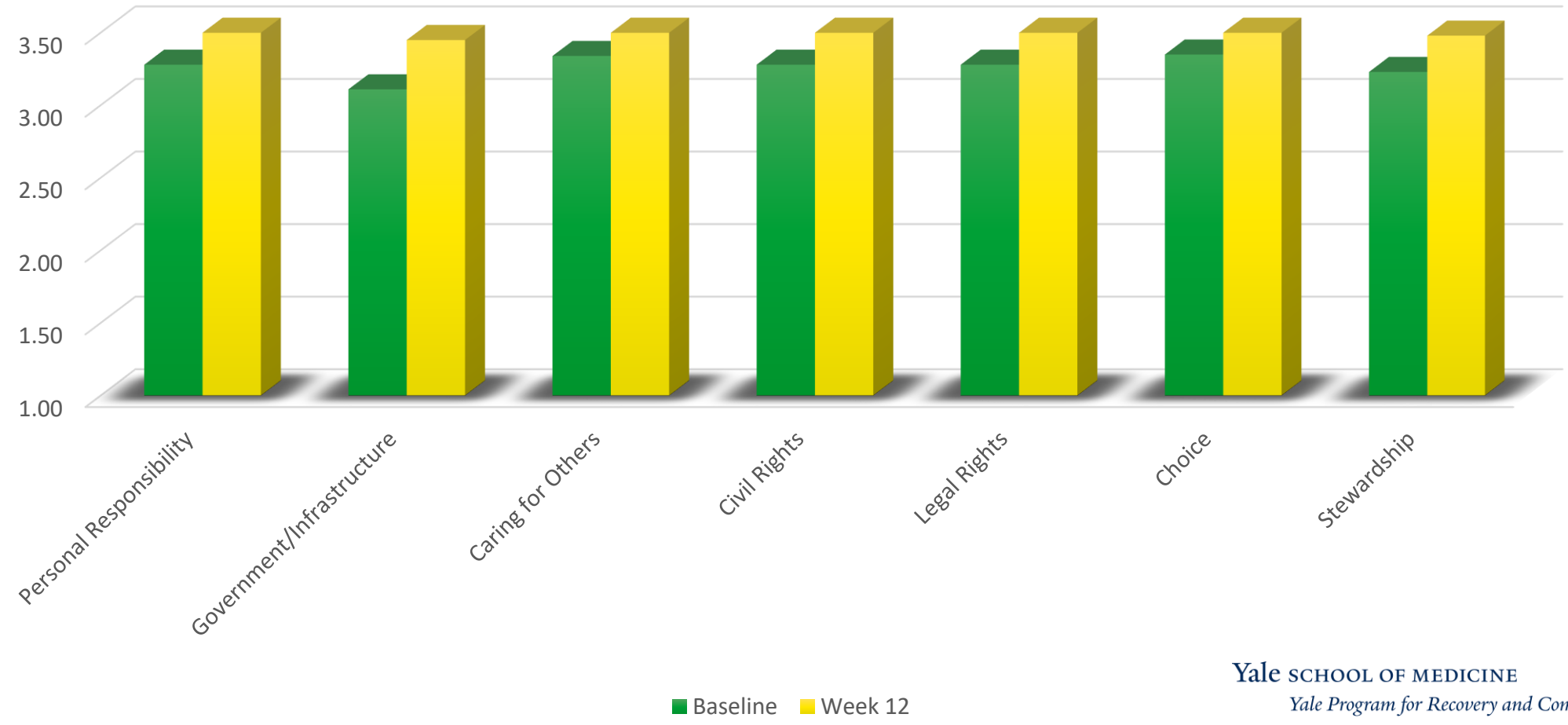


■ Baseline ■ Week 12

Results – Citizenship subscales in Imani



Citizenship Score Change from Baseline to Week 12



Qualitative Data

Self-Actualization:

“...The last 15 years of my life is ... I did a lot of programs and never finished. I was super negative about life. I never had self-worth. There are other people just like me that have a lot of problems. Graduating from this program opened doors. I got my GED, and I’m going to see what my purpose is...”

Autonomy:

“I got to take back my control. I’m the one that makes my reality...”

Culture and Faith:

“Spiritually is a motivation. Sometimes it is the only thing that you have. Helps me validate my feelings because I have so many thoughts and I believe that it is important. My power comes from my thoughts, my values too.”





Questions/Ideas

IMANI

BREAKTHROUGH

Thank you for your time!