

Current Federal Harm Reduction Work: CDC Activities

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The findings and conclusions in this presentation are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

CDC Approach to Prevent Overdoses and Substance Use-Related Harms

GUIDING PRINCIPLES



Promote Health Equity



Address Underlying Factors



Partner Broadly



Take Evidence-Based Action



Advance Science



Drive Innovation

STRATEGIC PRIORITIES



Monitor, Analyze, and Communicate Trends



Build State, Tribal, Local, and Territorial Capacity



Support Providers, Health Systems, Payors, and Employers



Partner with Public Safety and Community Organizations



Raise Public Awareness and Reduce Stigma





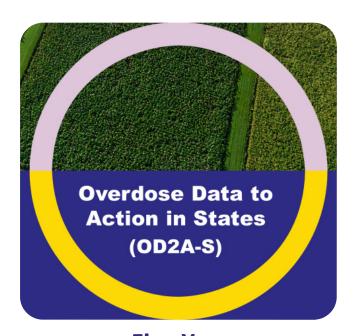


Overdose Data to Action (OD2A) Almost \$300M in Funding

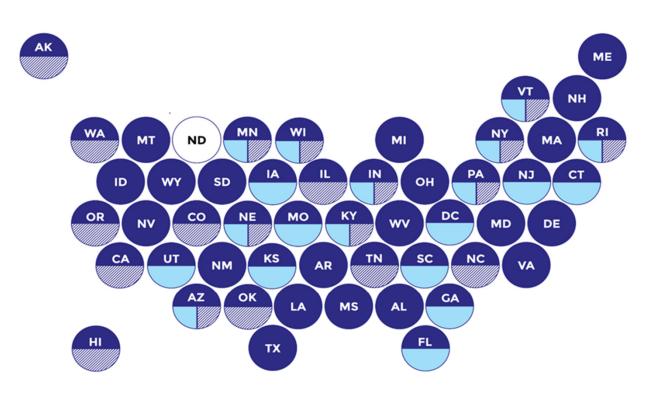
- Focuses on the complex and changing nature of the drug overdose epidemic
- Highlights the need for public health approach to reduce drug overdoses, deaths, and related harms
- Overdose Data to Action in States (OD2A-S)
- Overdose Data to Action LOCAL (OD2A:LOCAL)

SYNTHESIZE AND ANALYZE Data to Inform Action **PRIORITIZE** Feasible. Evidence-Informed, and → Focus analyses on most critical questions with clear timelines Impactful Interventions → Analyze the location, trends, and characteristics of nonfatal and fatal overdoses → Interpret data with engaged partners → Integrate lessons learned from current or previous intervention > Inform efforts with scientific evidence → Analyze alignment between community capacity → Select priority activities (via strategic planning. including treatment and harm reduction overdose fatality reviews, work group resources and burden recommendations, etc.) and ensure they are feasible > Interpret data with engaged partners, and have partner buy-in addressing their needs and data gaps > Implement changes in a timely manner Synthesize findings to identify key priorities for programmatic efforts **Engage Partners** & People with **Lived Experience IMPLEMENT** Evidence-**EVALUATE** Strategies and Impact and Make Informed and **Changes as Needed Responsive Programs** Ensure implementation has high fidelity, but is also → Assess program impact on drug overdose outcomes responsive to the unique needs of people served and and health disparities the community context Identify opportunities and challenges for Reach populations of focus to reduce overdoses and program improvement tailor programs to meet the needs of local populations → Disseminate and discuss findings with partners of focus and community context Reduce negative unintended consequences Commit to continual improvement driven by community feedback, staff insights, and process evaluations → Include feedback and experience of people receiving services Identify and respond to emerging challenges → Celebrate incremental progress

Began September 1, 2023



Five Years
September 2023 to August 2028



LEVEL OF JURISDICTION FUNDING

OD2A in States



Biosurveillance



Data linkage



Death Certificates

- Demographics
- · Decedent residence information
- · Cause of death information

State
Unintentional
Drug Overdose
Reporting System
(SUDORS)



Medical Examiner/Coroner Reports

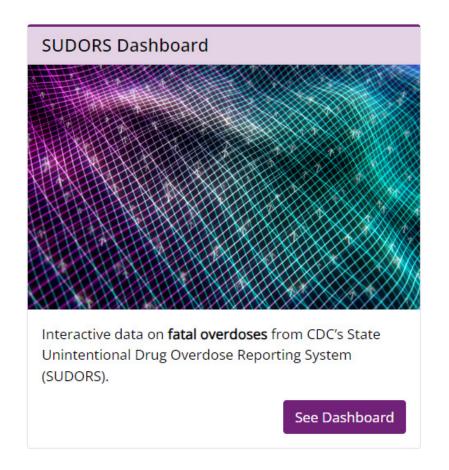
- Scene evidence of drug use
- · Timing and context of overdose
- Medical and social history/circumstances

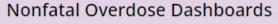


Toxicology Results

- · All substances detected
- · Substances that caused death
- Prescription status of substances

DOP Data Dashboards







Interactive data on **nonfatal overdoses** from CDC's Drug Overdose Surveillance and Epidemiology (DOSE) system and from the Fentalog Study.

See Dashboards

SOURCE: Data Dashboards & Alerts | Drug Overdose | CDC Injury Center - Accessed February 2024.

Prevention Strategies – OD2A - States



Clinician/Health System Engagement and Health IT/PDMP Enhancement



Public Safety Partnership/Intervention



Harm Reduction



Community-Based Linkage to Care

^{*} Recipients are required to implement interventions in all four prevention strategies.

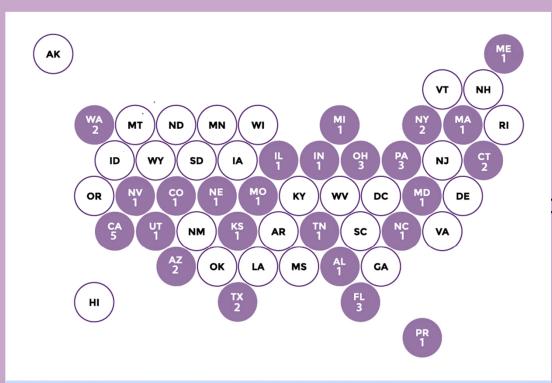


Harm Reduction in OD2A - State

- Utilizing peer navigators and people with lived experience to promote harm reduction and to decrease stigma. [Required]
- Ensuring people who use drugs (PWUD) have access to overdose prevention tools, treatment options, and drug checking equipment. [Required]
- Developing and sustaining partnerships with syringe services programs (SSPs) and harm reduction organizations to improve access to and delivery of harm reduction services and to reduce overdose.
- Creating and disseminating education and communication materials to increase awareness of and access to harm reduction resources and to combat stigma and change social norms around harm reduction.



OD2A - LOCAL



LEVEL OF JURISDICTION FUNDING

OD2A: LOCAL

Limiting Overdose through Collaborative Actions in Localities

	Name	State
	Jefferson County Department of Health	AL
) (Maricopa County Public Health Department	AZ
	Pima County Health and Community Services	AZ
	Alameda County Health Care Services Agency	CA
	Santa Clara County Public Health	CA
	Riverside University Health System - Public Health	CA
	Los Angeles County Department of Public Health	CA
	San Francisco Department of Public Health	CA
	Denver Department of Public Health and Environment	со
	City of New Haven Health and Human Services	СТ
	City of Hartford Health and Human Services	СТ
	Florida Department of Health - Palm Beach County	FL
	Florida Department of Health – Duval County	FL
	Florida Department of Health - Broward County	FL
	Chicago Department of Public Health	IL
	Health & Hospital Corporation of Marion County	IN
	Sedgwick County Health Department	KS
	Boston Public Health Commission	MA
	Baltimore County Department of Health	MD
	City of Portland, Maine, Public Health Division	ME
	Barry-Eaton District Health Department	MI
	St. Louis County Department of Public Health	MO
	Mecklenburg County Health Department	NC

Name	State		
Douglas County Health Department	NE		
Southern Nevada Health District	NV		
Fund for Public Health in New York City	NY		
Broome County Health Department	NY		
Franklin County Public Health	ОН		
Cuyahoga County Board of Health	ОН		
Hamilton County Public Health	ОН		
Allegheny County Health Department	PA		
Philadelphia Department of Public Health	PA		
Montgomery County Health and Human Services	PA		
Puerto Rico Department of Public Health	PR		
Knox County Health Department	TN		
Dallas County Health and Human Services	TX		
Harris County Public Health	TX		
Salt Lake County Public Health	UT		
Public Health - Seattle & King County	WA		
Snohomish County Health Department	WA		

40 Localities Funded

OD2A: LOCAL – Map of Foundational Activities, Strategies and Goals



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Harm Reduction

- Implement strategies that increase treatment entry, reduce drug use frequency and high-risk drug use practices, and improve the overall health of PWUD, with a focus on reducing overdose - including increased distribution of naloxone and overdose prevention education across settings
- May also include syringe access and disposal services, low-threshold access to treatment for substance use disorder, including MOUD, drug checking (for example, using fentanyl test strips), addressing policy barriers, and education about safer drug use.

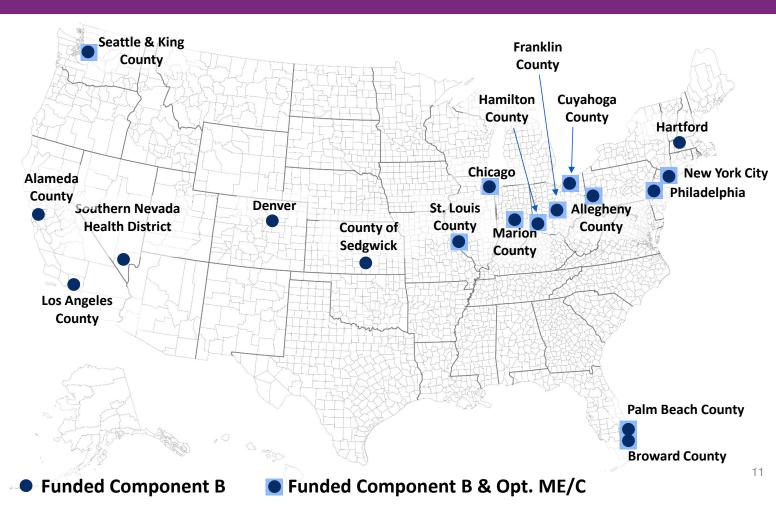
Testing Drugs and Drug Paraphernalia (Component B)

18 Funded

Key facts

- Number of states with recipients: 13
 - 5 in the Midwest
 - 3 in the Northeast
 - 1 in the South
 - 4 in the West
- Optional ME/C funding: 12
- Unintentional / undetermined overdose deaths 2021
 - Mean: 783
 - Median: 621
 - Total: 14,090 (14%)
- Population 2021
 - Mean: 2.2 million
 - Median: 1.4 million
 - Total: 40,151,356 (12%)
- CDC funding history
 - 10 funded OD2A
 - 4 funded IOPSLL





OD2A Success Stories



Ohio

Linkage to Care: The Rapid Response Emergency Addiction Crisis Teams program engages individuals who recently experienced a nonfatal overdose to provide access to treatment and offer harm reduction and other social service supports, with the primary goal of overdose prevention. The team conducts a physical health check, reviews withdrawal management and SUD treatment options, discusses harm reduction techniques to prevent the risk of overdose, and leaves behind naloxone.



Illinois

Building Harm Reduction Capacity: The Harm Reduction Community Linkage Project (HRCLP) aims to: build the capacity of harm reduction organizations statewide, increase awareness of the role of harm reduction in overdose prevention and response, improve coordination between the harm reduction community, and substance use disorder (SUD) treatment providers, connect people to SUD treatment and support services, provide case management.



Florida

Naloxone Distribution: The Department of Health in Marion County and Ocala Fire Rescue (OFR) are working to increase the availability and distribution of naloxone in the community. Naloxone is available for free for those in need at the Department of Health. For its part, OFR offers follow-up visits and resource referrals for persons with an opioid use disorder or for those who have experienced an overdose. OFR will deliver naloxone and offer access to community programs including substance abuse counseling, rehabilitation and support services.

Overdose Response Strategy:

National Public Health/Public Safety Program

Public Health Analyst (PHA) and Drug Intelligence Officer (DIO) Teams across 33 High Intensity Drug Trafficking Areas (HIDTAs) covering 50 states, DC, Puerto Rico and US Virgin Islands









Share data systems between public health and safety

Implement overdose prevention and response strategies

Evaluate promising public health and safety strategies

orsprogram.org



ORS Success Stories



Kansas

> Strategic Naloxone Distribution: After identifying several apartment complexes in overdose hotspot by utilizing the Overdose Data Mapping Application to analyze geolocation data, the Kansas ORS team partnered with Safe Streets Wichita, a substance use prevention and harm reduction coalition. Safe Streets Wichita then created a door hanger with a QR code that directed individuals to a website with information on how to obtain free naloxone. Resulting in an increase in the number of naloxone orders as well as an increase in media coverage.



Mississippi

Improving Overdose Response Capacity: In collaboration with the Mississippi State Department of Health (MSDH), the Mississippi ORS Team began producing a monthly Rapid Alert Reports to help communities respond to illicit and prescription drug use. The report is published to the MSDH website and distributed to approximately 250 public health partners and 100 local law enforcement agencies. Using this information, public health and public safety partners can review areas which may need additional resources to minimize drug overdoses and ensure efficient distribution of the state's resources.



Maryland

Improving Access to Treatment: After reports from treatment providers experiencing barriers with their clients obtaining their buprenorphine prescriptions at pharmacies, the Maryland ORS Team joined a coalition to increase access to medication-assisted treatment and reduce overdose deaths. As a result of the coalition's work a plan was established promoting buprenorphine as a life-saving medication that should be accessible to those who are appropriately prescribed without barriers.

Combatting Overdose through Community Level Intervention

\$1.3M in FY24



Example COCLIs

- Strengthening Alaskan Communities (AK): Reaching rural Alaskan communities with naloxone, prevention training and harm reduction services
- Somerset County Overdose 1st Response (ME): QRT in rural area to increase
 access to low barrier treatment, recovery services and social supports;
 complemented by establishment of "drop-in" community connection centers
 where people with SUD and affected others can access supportive services
- Savage Sisters (Philadelphia, PA): Mobile van to offer harm reduction equipment and ability to link to treatment; partnership with law enforcement where van can accompany first responders when going to overdose scene
- Addiction Center of Brome County (Broome County, NY): Assisting children
 experiencing ACES, especially those impacting by the opioid epidemic, with
 interventions such as play therapy, SBIRT, trauma screening, youth peer
 advocacy, and Youth Mental Health First Aid
- Project Elevate Hope (Baker County, North Florida): Increase access to treatment by identifying and meeting transportation needs through various projects, including a bicycle program for individuals with suspended or revoked licenses; will support individuals in recovery find and sustain employment through individualized programs designed to meet specific needs (training, interviewing, professional clothing)
- ReDirect Plus—Families Against Narcotics (Michigan): Expand existing
 program to reach 6 additional counties in southeastern MI; partnership with
 County Prosecutors" offices that allows individuals with SUD who are also
 involved in the CJ system to divert from legal consequences and obtain
 treatment

COCLI Success Stories



West Virginia

Morgan County Partnership: They coordinated a multi-sector employment strategy to reduce overdoses in rural Morgan County. included expanding the existing local Rx and Opioid Prevention Taskforce and the Drug-Free Community Coalition. The program educated over 5,000 residents on stigma, provided naloxone to 483 residents, and identified service gaps and opportunities for expansion. Over 1,000 students were screened for mental health and substance use. Six hundred and fifty-one were referred to services or treatment. Over 2,000 doses were distributed to the entire Eastern Panhandle of West Virginia.



Oklahoma

Oklahoma State University: The National Center for Wellness and Recovery (NCWR) Opioid & Psychostimulant Project is strengthening and expanding substance use disorder/opioid use disorder (SUD/OUD) prevention, treatment, and recovery (PTR) services for populations in three rural Oklahoma counties: Mayes, McIntosh, and Muskogee. A newly-implemented ECHO in Oklahoma aimed to educate healthcare providers on best practices for veteran care and veteran-specific health issues. Providing MAT to 99 clients, with 83 clients still engaged at the end of the reporting period. All clients received HIV screening and referrals for needs (vision care, housing, employment, utilities,, obtaining of IDs, transportation, etc.)



Arizona

Amistades, Inc: Southern Arizona leaders across community sectors including health, education, public safety joined to address the increase in overdose fatality from psychostimulant and opioid use occurring along the US-Arizona border. The project delivered messaging, education, and services in a linguistic and cultural way that engaged the Latino population. The emphasis was to reach transborder residents who may be reluctant to enter services due to fear of deportation or arrest. A radio broadcast ran weekly throughout the year which covered the Good Samaritan law and Rx360 (harms of misusing prescription drugs).

Providing Technical Assistance to Those Planning or Delivering Harm Reduction Services In Their Community

The National Harm Reduction Technical Assistance Center (NHRTAC) is a joint project by CDC and SAMSHA

The National Harm Reduction Technical Assistance Center (NHRTRAC) provides free help to any person or organization in the country that is providing (or planning to provide) harm reduction services or adopt a harm reduction approach.

GOAL

• To improve the capacity and performance of harm reduction programs throughout the United States by ensuring access to high-quality, comprehensive technical assistance (TA).

SERVING

 Local prevention, treatment, recovery, and harm reduction organizations and advocates, as well as state, local, and county health departments and universities

CAPABILITIES

With the utmost confidentiality for those we serve, our experts provide assistance in the following areas:

- Harm reduction basics and getting started (i.e. syringe services programs and understanding opioid settlement)
- · Harm reduction program development, planning, and sustainability
- Harm reduction program data and evaluation
- Building community resilience and achieving health equity
- Mental health and substance use treatment and service health care integration
- Overdose prevention in substance use disorder (SUD) treatment and recovery settings
- Peer support in recovery settings
- Information on SUD treatment and recovery support services







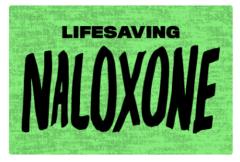




Fentanyl is up to 50x more potent than heroin and 100x more potent than morphine. Learn more about the dangers of fentanyl and how it has taken over the drug supply.



Polysubstance use occurs when two or more drugs are taken together, either intentionally or unintentionally. Learn more about the risks and consequences of mixing different types of drugs.



Naloxone is a safe medication that can reverse an overdose from opioids, including heroin and fentanyl. Learn more about where to get naloxone and how to use it.



Addiction is a disease, not a character flaw. There are many ways to treat substance use disorders.

Learn more about what options are available and how to support loved ones on their recovery journey.

SOURCE: https://www.cdc.gov/stopoverdose





This Season, There Are More Ways than Ever to Protect Our Health



Safe, updated vaccines – For the first time ever, vaccines and other preventive antibodies are available for all three major fall and winter respiratory viruses: flu, COVID-19, and RSV.



Widely available effective treatments – Treatments available for flu and COVID-19 can reduce the risk of severe illness, hospitalization, and death.



Rapid antigen tests – These tests, some of which can be used at home, can quickly detect viruses so there are no delays in getting treatment and taking steps to protect family and coworkers.



Everyday actions – Covering coughs and sneezes, frequent handwashing, wearing masks, improving air quality, and staying home if you **are** sick **can help reduce the spread of respiratory viruses.**

QUESTIONS



