Multnomah County Health Department





MISSION AND PURPOSE

Our commitment is to our communities. Each of us deserves dignity, choice, and support. This means meeting people where they are, with compassion, cultural humility, and without judgment.

Every part of the Health Department plays a role in responding to the overdose crisis — Public Health, Corrections Health, Behavioral Health, and our Community Health Centers, including the Student Health Centers. We work together across the Health Department to adapt our strategies and our services to best meet current needs. We also rely on planning and coordination with other departments in the County, other local government agencies and programs, the hospital systems, community partners and community-based organizations, and state and federal agencies.

To improve both the immediate and long-term situation, we need everyone to coordinate around person-centered solutions that tackle the entire spectrum of this issue with innovation, equity, compassion, and dignity.

Our Overdose Response

Our response builds upon our existing body of work, engaging the full substance use and addiction service continuum to reduce health inequities and prioritize people unfairly impacted by oppression and exclusion.



BACKGROUND AND CONTEXT

Like many places around the country, Oregon has experienced an alarming increase in overdose deaths. Substance use is not new, but the problems caused by substance use have become dramatically worse in the last few years, driven by drugs like methamphetamine and fentanyl.

There is not one single cause of substance use, nor one single solution to the problem. A range of efforts are needed to address substance use, including prevention measures, help and care through periods of substance use, treatment and addiction counseling, and long-term support for recovery. In addition, we must address structural and cultural barriers that keep people from accessing available services. In order to tackle our substance use crisis, our society must prioritize solutions like stable housing, access to education, economic opportunity, and low-barrier access to healthcare and mental health support. Attention to these factors will help prevent substance use in the first place, strengthen our social connections and our communities, and address the current crisis.

The Health Department's Overdose Prevention and Response Plan directly addresses gaps in available prevention, harm reduction, treatment, and recovery services and infrastructure. A comprehensive analysis of substance use services in Oregon completed by OHSU-PSU School of Public Health in 2022/23 found that Multnomah County faces an estimated 42% gap in substance use disorder (SUD) services. More than half of participants in this study indicated awareness that their organization's capacity cannot meet current demand.

This plan focuses strictly on the expertise, programming, services, and resources within the scope of the Multnomah County Health Department. It outlines the Health Department's strategy to address the unique nature of the current overdose crisis.



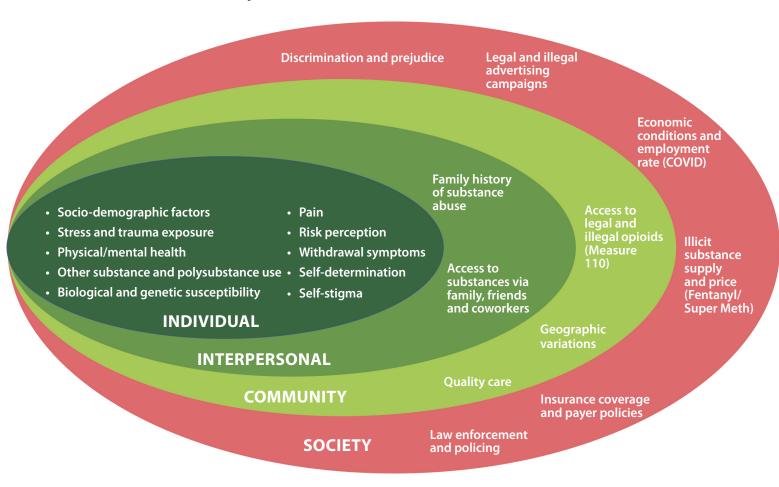
WHY WE ARE HERE

Drug use and addiction are complex issues. We know they are impacted by many factors such as personal and communal trauma, generational addiction patterns, discrimination and its many impacts, and economic injustice and disparity. But what is different now? Why have things gotten so much worse, so quickly? The answer: The drugs have changed. The drugs today are stronger, cheaper, and more addictive.

From 2021-2022 Multnomah County saw a 77% increase in drug deaths from synthetic opioids (fentanyl).

Social-Ecological Framework of the Illicit Substance Crisis

Major factors of illicit substance use/misuse



Adapted from: Jalali, M.S., Botticelli, M., Hwang, R.C. et al. <u>The opioid crisis: a contextual, social-ecological framework.</u> Health Res Policy Sys 18, 87 (2020). https://doi.org/10.1186/s12961-020-00596-8

BUILDING FROM A STRONG FOUNDATION

This plan builds upon a robust body of existing substance use prevention, harm reduction, treatment, and recovery programs and services.

Primary Prevention

18 HD programs or services

18 community partners

Harm Reduction

27 HD programs or services

56 community partners

Treatment

13 HD programs or services

28 community partners

Recovery Support

7 HD programs or services

26 community partners

Planning, Coordination, Data & Evaluation

The Health Department has a wide range of established services and programs that address substance use and overdose prevention currently being provided by the Health Department. This plan is an expansion of those services that are already being provided by the Health Department and its contractors.

Primary Prevention

- Prevention and education materials
- Mass media campaigns
- Youth leadership activities
- Support for schools and parents
- Substance use prevention that addresses risk and protective factors for youth
- Culturally-specific prevention programming
- Substance use screenings
- Programming to reduce childhood trauma and increase resilience
- Promote healthy communities and families through all Health Department programs

Harm Reduction and Overdose Prevention

- Overdose prevention education/naloxone training
- Widespread naloxone distribution
- Testing and referral to treatment for infections that can be acquired through drug use
- Provision of supplies for safer use to reduce infections and injury experienced by people who use drugs
- · Referrals for SUD treatment and other supportive services
- Referrals to other behavioral health services
- Wound care and referrals to medical care
- Behavioral Health Resource Center low-barrier, peer-led support services
- · Collaboration to provide psychiatric emergency service triage and sobering support
- Outreach, engagement and connection to folks struggling with SUD, homelessness, or who are at risk of criminal justice involvement

Treatment Services

- Contracted services for withdrawal management, residential treatment, intensive outpatient treatment with housing support, and outpatient treatment
- Coordinated transitional care for people exiting custody
- Buprenorphine initiation, maintenance, and linkages to care for people treated for overdose
- Peer support for those seeking or contemplating treatment
- Provision of Medication Supported Recovery (MSR) and client support across multiple settings including Community Health Centers and Corrections Health clinics
- Referral pathways for people exiting correctional facilities, including pregnant people
- Family Involvement Team

Recovery Support

- Culturally-specific recovery mentoring and support
- Linkages to housing support, prosocial/drug-free activities, basic needs, etc.
- Recovery support groups
- Peer support
- Partnerships to support pregnant people, small children and families in recovery

Multnomah County offers many of these services and programs directly. We also work with dozens of community partners and community-based organizations, as well as people with lived experience, to inform, support and collaborate with us.

NEXT STEPS TO ADDRESS THE CRISIS







Culturally Specific



Evidence Based Practice



Geographic Equity



Community Health Data

Prevention

Prevention activities educate and support people and their communities to prevent the use and misuse of drugs, as well as the development of substance use disorders and other related high-risk behaviors.

FY24/25 Tactics

- Reduce prescription drugs in Multnomah County homes through distribution of drug deactivation (Deterra) kits
- Expand primary prevention and prosocial programming and policies tailored to youth, BIPOC, and LGBTQ2SIA+ communities at risk

Sample Activities

- Distribute 20,000 kits for safe disposal of prescription opioids
- Improve substance use prevention education in school and community settings
- Host culturally-specific community forums on substance use
- Identify policy, system and practice changes ranging from primary prevention to addressing barriers at local, state, and federal levels

Outcomes

- Increase resources to safely discard prescription opioids and reduce excess medications in the community
- Decrease initiation of illicit substance use and disrupt early use
- Establish measurements for prevention activities' impacts on youth, adults, and partners
- Establish policy agenda

Activity Spotlight - Expanding on the success of a pilot launched earlier this year, in the second half of FY24, the Health Department will expand distribution of Deterra kits for safe disposal of prescription opioids.

In an effort to focus on families and preventing risk for youth, this programming is conducted through partnership with schools and community partners. We aim to expand to five additional school districts/community partners.

Harm Reduction

Harm reduction approaches engage people who use drugs directly to prevent overdose and infectious disease transmission, build trusting relationships with providers, and connections to supportive social and medical services.

FY24/25 Tactics

- Increase capacity to provide low-barrier, accessible, and community-driven harm reduction services
- Expand service integration for people leaving correctional facilities

Sample Activities

- Expand Harm Reduction Clinic (HRC) hours and days of operations to serve an additional 175 unique clients annually
- Expand services available at HRC, including wound care and STI treatment for over 55 individuals per month
- Increase availability of syringe service programs across the county in coordination with partners
- Partner with DCJ and MCSO to create pathway for treatment for individuals leaving custody
- Coordinate naloxone access at County and community locations through CareOregon funds and pharmacy purchasing

Outcomes

- Increase number of people who receive services, including health care, at the HRC
- Provide MSR and other integrated services at the HRC to adults leaving correctional facilities
- Increase harm reduction offerings by nongovernment partners across the community
- Increase access to naloxone across the community

Activity Spotlight - In October 2023, the Health Department received grant funding for the Bureau of Justice Assistance (BJA) Comprehensive Opioid, Stimulant, and Substance Use Site-based Program.

Working collaboratively, Corrections Health, the Harm Reduction team, the Behavioral Health PATH team, DCJ, and MCSO, will bolster the care continuum between jail and post release settings. The project establishes new protocols and services to initiate MSR for individuals in custody and transition them to integrated peer, health education, social worker, and MSR services at the HRC when they leave custody. The HRC will provide MSR to 100 individuals leaving custody annually.

Treatment

With the right treatment and support, people can and do live in recovery from addiction. Varied settings for treatment — inpatient, residential, and outpatient — are essential to meeting the specific needs and circumstances of individuals.

FY24/25 Tactics

- Expand SUD treatment capacity at various levels of care
- Improve the coordinated system of care for people leaving correctional settings through the Corrections Health Transition Services Program

Sample Activities

- Expand stabilization and transitional housing capacity through SHS funds
- Provide case management and care coordination to an additional 150 people through the PATH program
- Expand withdrawal management capacity (50 new beds) and youth and adult residential treatment capacity (5 new beds) for uninsured and insured individuals
- Expand access to MSR at HRC and Community Health Centers through lower barrier approaches, including mobile options
- Develop transition plans for 2,000+ clients, including tactics to address at least two social determinants of health

Outcomes

- Increase number
 of uninsured and
 insured people
 accessing residential
 treatment, withdrawal
 management,
 stabilization, sobering,
 and transitional housing
- Increase number of people served by the PATH program
- Ensure all people exiting custody who request MSR, treatment or harm reduction services have a transition plan

Activity Spotlight - As a trusted and known resource in the community, the Health Department will focus on expanding access to Promoting Access to Hope (PATH) services. The PATH program helps those who are houseless or close to becoming houseless get treatment for SUD.

Expansion of services in FY24 will focus on reaching culturally-specific communities, as well as increasing presence and outreach in downtown Portland. The program anticipates increasing the number of individuals served by 43% (FY23 Baseline = 350).

Recovery

Recovery and treatment are intrinsically linked. Recovery is highly personal, occurs via many pathways, and is deeply to connected an individual's social and built environments.

FY24/25 Tactics

- Increase capacity to address the intersection of substance misuse, homelessness, and access to services
- Increase capacity for peer-delivered services

Sample Activities

- Create or expand recovery-oriented housing and beds
- Expand hours at youth and adult recovery programs to include nights and weekends, in collaboration with partners
- Increase short-term rent assistance funds for an additional 50 people in recovery support services
- Provide continuing education opportunities for peers to increase knowledge, skills, and professional development
- Offer incentives for community partners to support training and recruitment of new peers and retention of existing peers

Outcomes

- Increase the number of people in permanent and transitional supportive housing
- Increase the number of people in recovery housing
- Increase delivery of peer services via Health Department and contracted partners
- Increase opportunity for peer skill building and capacity

Activity Spotlight - Sustained recovery is deeply connected to social connection and supports. The expansion of this plan focuses on investments to increase the number, diversity, and availability of peer-led recovery services.

The Health Department will focus on contracts with peer organizations to 1) provide community based outreach focused on individuals experiencing SUD and homelessness; 2) increase peer support within low barrier housing; and 3) provide street outreach and support in institutional settings with a focus on BIPOC and culturally-specific communities.

Communications

Strategic communications promotes changes in knowledge, attitudes, norms, and behaviors. This is essential to destigmatizing addiction and establishing hope among people who use drugs and others for recovery and the future.

FY24/25 Tactics

- Expand Health Department recovery messaging through high visibility marketing campaign
- Expand Health Department fentanyl prevention messaging through focused youth marketing campaign

Sample Activities

- A pro-recovery/antistigma campaign to reduce shame, promote hope and recovery, and promote accessing recovery pathways
- A youth-focused fentanyl awareness campaignaimed at preventing use of fentanyl and decreasing incidence of overdose and overdose deaths among youth/ young adults

Outcomes

- Prevent/delay initiation of substance use
- Increase number of people accessing available support resources and services.
- Increase awareness and decrease stigma of recovery and recovery resources
- Increase utilization of Lines for Life treatment/ recovery information services

Activity Spotlight - Sample billboard for recovery communications campaign



Game day brought to you by recovery.

#RecoveryIsPossible Amultnomah County



Call 988 or visit recoverynetworkoforegon.org

Data Collection, Analysis and Application

This response requires strategy and implementation from all divisions of the Health Department and the work of each division must be coordinated with the others.

FY24/25 Tactics

- Improve infrastructure to coordinate Health Department and community needs
- Improve data infrastructure

Outcomes

- Develop and implement a dashboard with view of both current status and trends in substance use and metrics for Health Department substance use response programs and services
- Establish a workgroup for assessment and refinement of progress on this plan and future response needs
- Key stakeholders and the public have timely access to overdose and other related data

Looking Ahead

The substance use landscape is dynamic — new drugs may come to our region, price and availability may affect use, and different infectious diseases may spread. Changes can happen quickly. This plan is a response to the current crisis and may change. We are committed to monitoring the situation and changing tactics as needed to minimize unnecessary suffering and save lives.

Visit multco.us/overdose-response for more information, updates, and additional resources.

