

Overdose Prevention



**A public health approach will
reduce deaths from overdose.**

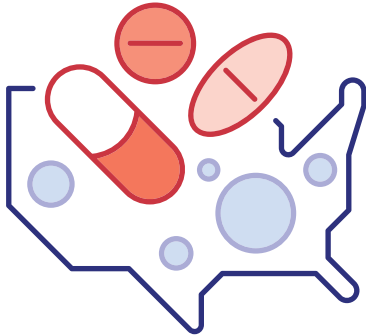
Vital Strategies partners with governments, providers and communities to support health-centered solutions rooted in evidence.

**There is an overdose epidemic in the
United States.**

More than 93,000 people died of drug overdoses in 2020, the highest number of overdose deaths ever recorded in a single year in the United States. Every overdose death is preventable.

Technical Intervention Package for Overdose Prevention

Vital Strategies is working to establish effective policy and program models that can be adapted and implemented across the country.



Make medications accessible

Expand availability of lifesaving medications

- 1 Maximize training and dispensing of the opioid overdose antidote, naloxone, across settings, including health care, first responders, criminal justice, social services, and communities and families affected by drug use.
- 2 Expand opioid agonist treatment, such as methadone and buprenorphine, across settings, including jails and prisons, community supervision, emergency departments, perinatal care providers, mobile units, telemedicine, community health centers and substance use disorder treatment programs.



Engage communities

Reduce stigma, increase public awareness, expand harm reduction services and support people who use drugs

- 3 Establish low-threshold 24-hour drop-in/off centers in high-need areas with a comprehensive array of supports, such as sterile syringe access and disposal, drug testing tools, supervised consumption, peer support, and service needs assessment and navigation.
- 4 Enhance care coordination and case management across health and social service settings for people with substance use disorder.
- 5 Authorize and expand syringe access services.
- 6 Conduct mass media campaigns to improve public understanding and engagement, reduce stigma, advance equity, and increase access to resources.
- 7 Engage and mobilize communities to address drug overdose, across geographies and demographics, grounded in equity and inclusive of people who use drugs and people directly affected by drug use and overdose.

High-value, evidence-based strategies for governments to prioritize



Support, don't punish

Transform the response to drug use from a criminal and moral problem to a health issue, for all people

- 8 Offer alternatives to arrest, such as police-assisted diversion, for drug-related charges.
- 9 Prevent and/or eliminate health and social penalties that punish people for active or continued substance use, such as
 - loss of public housing
 - ineligibility for public assistance
 - untimely discharge from, or abstinence-only requirements for, substance use disorder treatment
 - punitive child welfare policies and practices
 - technical violations of parole and probation



Use Data

Collect and analyze data to inform policy and response, and to address disparities

- 10 Establish local multisectoral data-driven collaboratives and statewide data hubs.
- 11 Leverage prescription drug monitoring programs as a tool for public health surveillance and to guide provider support.

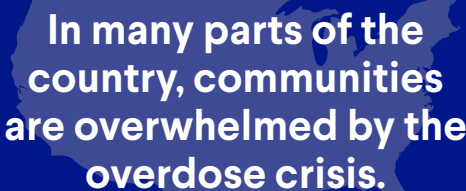
OVERDOSE PREVENTION

Our Overdose Prevention Program is bringing a comprehensive approach to reduce overdose deaths in two states, Michigan and Pennsylvania.

Vital Strategies is a leading technical and implementation partner for an initiative, funded by Bloomberg Philanthropies, to tackle the overdose epidemic in the United States. The Overdose Prevention Program is bringing a comprehensive approach to reduce overdose deaths in two states, Pennsylvania and Michigan, where fatalities are among the highest in the country. Along with the other partners—Pew Charitable Trusts, Johns Hopkins Bloomberg School of Public Health and CDC Foundation—Vital Strategies is working to establish effective policy and program models that can be adapted and implemented across the country.

Overdose and drug use touch multiple systems and sectors, from public health to criminal justice, social services, health care and others. Progress will require leadership across all levels of government, from communities, providers, institutions, and advocates, and include people who use drugs as well as their families and friends. Accordingly, Vital Strategies' approach is multidisciplinary, inclusive, and highly responsive to local conditions and priorities.

Addressing barriers to health for populations who have been historically disadvantaged and marginalized, including Black, Latinx, and Indigenous communities, requires a special commitment to racial equity. As momentum builds for a health-based approach to drug use, it is important to address how Black people and other people of color experience the collateral consequences of drug use criminalization, including mass incarceration and surveillance, loss of eligibility for public housing and public assistance, poor access to medications such as methadone and buprenorphine, and punitive policies and practices related to child welfare, parole and probation. Progress will require an approach grounded in racial equity.



In many parts of the country, communities are overwhelmed by the overdose crisis.

Emergency medical services and first responders are flooded by calls for rescue and frustrated by the lack of ongoing support for the people they have saved.

Incarceration related to drug use drives significant racial disparities in our criminal justice system, while doing little to help people with drug problems, and increasing their vulnerability to overdose.

A patchwork of treatment services leaves too many, including communities of color, without meaningful access to effective care or the ongoing support services they need.

Harm reduction services engage people who are using drugs and are critical to overdose prevention; however, they are typically underfunded and insufficient to meet demand.

Stigma around drug use makes people less likely to seek help or to receive the help they need, including counseling, care and medications. This stigma is further compounded for people with marginalized identities and experiences related to race, gender, class, sexual orientation and criminal justice involvement.



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