

**Expanding Capacity
to Address the
Overdose Epidemic**

IMPACT REPORT



CDC Foundation
Together our impact is greater

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This impact report: Expanding Capacity to Address the Drug Overdose Epidemic" [also known as the Overdose Data to Action (OD2A) staffing support program] is supported by the Centers for Disease Control and Prevention (CDC) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$35,599,796 with 100 percent funded by CDC/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement by, CDC/HHS or the U.S. Government.

EXECUTIVE SUMMARY

In response to the urgent need to address drug-related fatalities in the United States, the CDC launched the Overdose Data to Action (OD2A) initiative in 2019. With nearly 300 lives lost daily to drug-related causes¹, OD2A works collaboratively with jurisdictions at various administrative levels, including state, tribal, county, and city health departments. Its primary objectives are to facilitate the implementation of prevention measures and to collect precise, thorough, and timely data on both nonfatal and fatal overdoses. This data is a foundation for bolstering programmatic initiatives and enhancing surveillance efforts.

OD2A is dedicated to comprehensively understanding and monitoring the complex and ever-evolving landscape of drug overdoses by seamlessly integrating data with prevention strategies. Building on its initial success, the CDC expanded OD2A in August 2023, offering new five-year cooperative agreements to 90 jurisdictions through two tailored programs: one focused on states and another specifically targeting localities and territories. CDC awarded approximately \$300 million to state, local, and territorial health departments through Year 4 of its Overdose Data to Action Project.

Recognizing the urgency of this public health and safety crisis, the White House has championed a comprehensive government response and a societal one. Since the outset of President Biden's administration, historic strides have been made to tackle the overdose crisis, with over \$100 billion (about \$310 per person in the US)¹ invested to curb illicit drug distribution and enhance treatment accessibility. Additionally, the Food and Drug Administration's approval of Naloxone for non-prescription, over-the-counter use last year² marks a pivotal advancement in providing life-saving intervention for opioid overdoses.

The landscape of the overdose crisis has undergone significant changes in recent decades. Illicitly produced synthetics, such as fentanyl, now play a predominant role in overdose fatalities, frequently being combined with other substances unbeknownst to the user. The CDC reports that fentanyl is responsible for more deaths among Americans under 50 than any other cause, surpassing fatalities from heart disease, cancer, and all other accidents combined.³ Among teenagers, overdose deaths related to synthetic opioids such as fentanyl have tripled in just the past two years. Also, there has been a notable rise in deaths related to stimulants and an increasing proportion of overdose cases involving multiple substances.

Overview of the **CDC OVERDOSE DATA TO ACTION (OD2A)**

OD2A MISSION AND GOALS

The following objectives drove the creation of OD2A in states and OD2A locally:

1. Addressing the shifting epidemiology of the drug overdose crisis.
2. Rectifying identified deficiencies in prevention measures.
3. Applying insights garnered from prior OD2A funding opportunities.
4. Recognizing the distinct roles and spheres of influence held by state and local health departments and their partners.

The complex and changing nature of the opioid overdose epidemic highlights the need for an interdisciplinary, comprehensive, and cohesive public health approach. States, territories, and local partners need access to complete and timely data on prescribing and nonfatal and fatal drug overdoses to understand the scope, direction, and contours of the epidemic. They also need the tools and resources to use these data to inform and target their prevention and response efforts. This NOFO (Notice of Funding Opportunity) integrates work funded through three previous CDC funding opportunities: Prescription Drug Overdose Prevention for States (CDC-RFA-CE15-1501), Data-Driven Prevention Initiative (CDC-RFA-CE16-1606) and Enhanced State Surveillance of Opioid Involved Morbidity and Mortality (CDC-RFA-CE16-1608). Focusing on the following:

- Increasing the comprehensiveness and timeliness of surveillance data,
- Building state and local capacity for public health programs determined to be promising based on research evidence,
- Making Prescription Drug Monitoring Programs (PDMPs) more straightforward to use and access;
- Working with health systems, insurers, and communities to improve opioid prescribing.

It adds new work focused on linkages to care and other areas of innovation supported by evidence-based practice.

Mission and Goals

This project seeks to recruit, vet, select, train, and onboard field staff to support surveillance, prevention, and response activities within OD2A-funded recipients and select unfunded states. The award has supported over 200 surge staff across 45 jurisdictions, including state, county, city, and territorial health departments and select subrecipients, to aid in implementing overdose surveillance and prevention activities. In 2022, the CDC Foundation provided 26 specialty training sessions to build staff knowledge and expertise, such as equity lens training, peer support, and linkage to care. The program also funded staff attendance at 163 job-specific training sessions and conferences to further build overdose prevention and response expertise.

CDC created OD2A in States and OD2A: Local to:

- Adapt to changes in the drug overdose crisis as it develops.
- Fill in the gaps in prevention efforts identified.
- Use the knowledge gained from past funding opportunities in OD2A.
- Consider the various roles and impacts of state and local health departments and their partners.

THE HISTORY OF OD2A AND THE CDC FOUNDATION

The Division of Drug Overdose Prevention (DOP) in the National Center for Injury Prevention & Control is pleased to announce that the CDC Foundation (CDCF) was awarded the project “Expanding Capacity to Address the Drug Overdose Epidemic.” This award aimed to strengthen OD2A recipients’ capacity to implement surveillance and prevention activities through staffing support for critical areas such as epidemiology, abstraction of mortality data, linkage-to-care, and project coordination.

In partnership with DOP, CDCF was tasked to recruit, vet, select, train, and place field staff in various community-level settings or within OD2A-funded health departments to help support implementing OD2A activities. CDCF began collaboration with interested OD2A jurisdictions to identify and select staff with the necessary skills and experience. This initiative provided nationwide staffing support to state health departments (positions that were challenging to fill). Positions include:

- State Unintentional Drug Overdose Reporting System (SUDORS) Abstractors (jurisdictional based)
- Peer Navigators
- Peer Recovery Specialists (linkage to care at the community level)
- Public Health Specialists (Public health/public safety)

Ultimately, the CDC Foundation’s Staffing Support program has supported over 200 surge staff across 45 OD2A jurisdictions to build workforce capacity, assist with data completeness and reporting, and support the implementation of effective prevention and response activities tailored to the specific needs of jurisdictions.

Awards and Waves of Funding



2021: 9/21

41123:

\$20,429,480



2022: 9/22

41223:

\$9,087,646



2023: 8/23

41323:

\$6,082,678

2021

FEBRUARY 2021: CDC collaborates with the CDC Foundation team to leverage partnership Cooperative Agreement (CoAg) mechanisms.

These partnerships increase overdose prevention investments in additional localities, reach the most at-risk populations, and assist communities impacted by COVID-19, including CDC 1802 mechanisms and partnerships to support local jurisdictions.

AUGUST 2021: CDC issues the Notice of Award (NOA) to fund the CDC Foundation for the “Expanding Capacity to Address the Drug Overdose Epidemic.”

SEPTEMBER 2021: To further support the jurisdictions in responding to the overdose epidemic, CDC awards the CDC Foundation a Cooperative Agreement (CoAg) titled “Expanding Capacity to Address the Drug Overdose Epidemic” (6 NU380T000288-04-01) to strengthen OD2A recipients’ capacity to implement overdose surveillance and prevention activities through staffing support.

OCTOBER 2021: Grant Baldwin, Director, Division of Overdose Prevention, formally announces to jurisdictions in preparation for surge staffing support.

NOVEMBER 2021: CDC Foundation hosted OD2A Webinar: Overview of CDC Foundation Staffing Support for OD2A Recipients to announce upcoming Request for Application (RFA) to jurisdictions.

NOVEMBER 2021: CDC Foundation officially deploys Request for Application (RFA) to OD2A Jurisdictions.

39 States awarded, 46 jurisdictions & 10 subrecipients.

2022

JANUARY – FEBRUARY 2022: Hiring begins for Wave I - 150 field staff were hired and onboarded.

APRIL 2022: CDC Foundation deploys Request for Quote (RFQ) for training contractors.

AUGUST 2022: CDC awards CDCF additional funding of \$9,087,646 million to continue supporting and expanding the programs to additional OD2A jurisdictions.

2023

JANUARY 25TH – 26TH 2023: CDC Foundation hosts their first staffing retreat in Atlanta at CDC Foundation Headquarters

FEBRUARY 2023: Team site visits begin.

JULY 2023: Expanding Capacity to Address the Overdose Epidemic Impact Webinar.

AUGUST 2023: CDC awards additional funding of \$6,082,678 to continue OD2A strategies and onboard an additional 70+ positions and additional resources to support the program's growth.

SEPTEMBER 2023: CDC Foundation deploys RFA to jurisdiction.

OCTOBER 2023: WAVE III positions posted.

2024

FEBRUARY 2024: 69 additional staff onboard WAVE III.

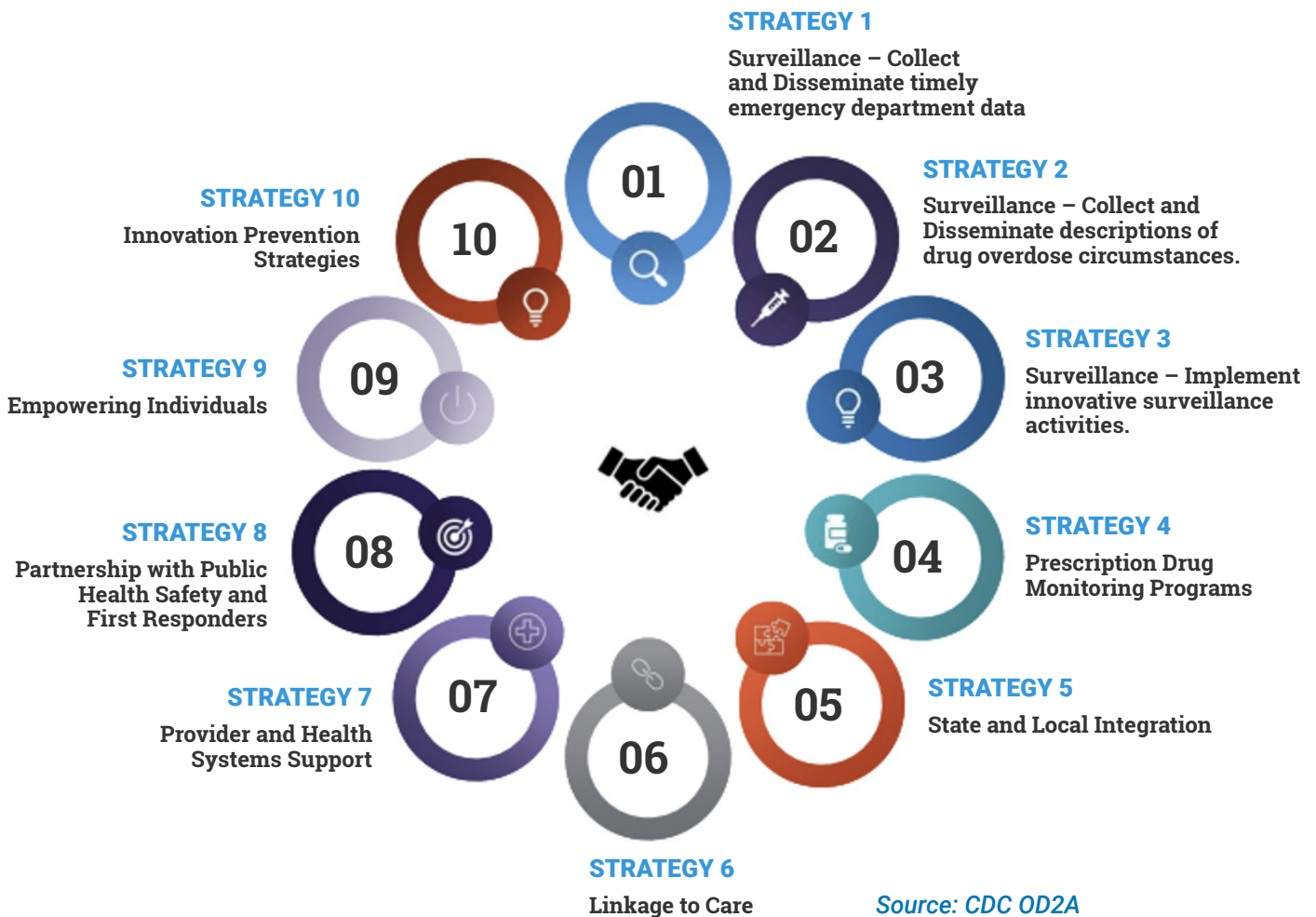
FEBRUARY 2024: CDC Foundation hosts Partnering for Impact Webinar

JUNE 2024: CDC Foundation staff prepare for closeout and end-of-year webinar

FRAMEWORK & STRATEGIES

OD2A operates within a data-to-action framework, employing various data types to enhance drug overdose prevention efforts. These encompass surveillance data, process and outcome evaluation data, and qualitative data, including interviews and focus groups, to enrich surveillance practices.

Central to this approach is a commitment to health equity and reducing health disparities, achieved through active engagement with partners and integrating individuals with lived experience into all facets of the program. Through this model, funded jurisdictions can swiftly and equitably address the needs of their constituents, leveraging data to drive actions aimed at mitigating overdose deaths and substance use-related harms.



CDC FOUNDATION TEAM

The success of the Cooperative Agreement “Expanding Capacity to Address the Drug Overdose Epidemic” [also known as the Overdose Data to Action (OD2A) staffing support program] was largely driven by the dedication, expertise, and teamwork of our staff. Their hard work and commitment have been instrumental in achieving the project’s goals and delivering high-quality results. Below, we highlight the key contributions and performance of our team members throughout the project lifecycle.

Core Staff

Senior Managers:

- Avis Bullard, Senior Portfolio Manager
- Brandee Dunn, Senior Project Manager

Project Managers:

- Ethel Stewart
- Keaura Looney
- Ashley Howells
- Antraneise Jackson

Peer Project Managers:

- Jessica DeFranca
- Matthew Craine

Operations Team:

- Teonia Alexander, Operations Analyst
- Carmyn Martin Boone, Operations Specialist
- Kiki Swanson, Operations Specialist
- Rhodrick Harlson, Operations Coordinator
- John James II, Senior Operations Specialist

Training Team:

- Calvin Bibbs, Training and Contracts Specialist

Communications:

- April Biagioni, Communications Specialist

Monitoring and Evaluation:

- Oladoyin Onawole, Monitoring & Evaluation Specialist

Several members of the OD2A Core Team pose below for a picture during the February 2024 Retreat in Atlanta.



Pictured from left to right Carmyn Martin-Boone, John Michael, Ethel Stewart, Jessica DeFranca, Mathew Craine, Keaura Looney, Kiki Swanson, Brandee Dunn, Avis Bullard, Rhodrick Harelson, April Biagioni, Calvin Bibbs

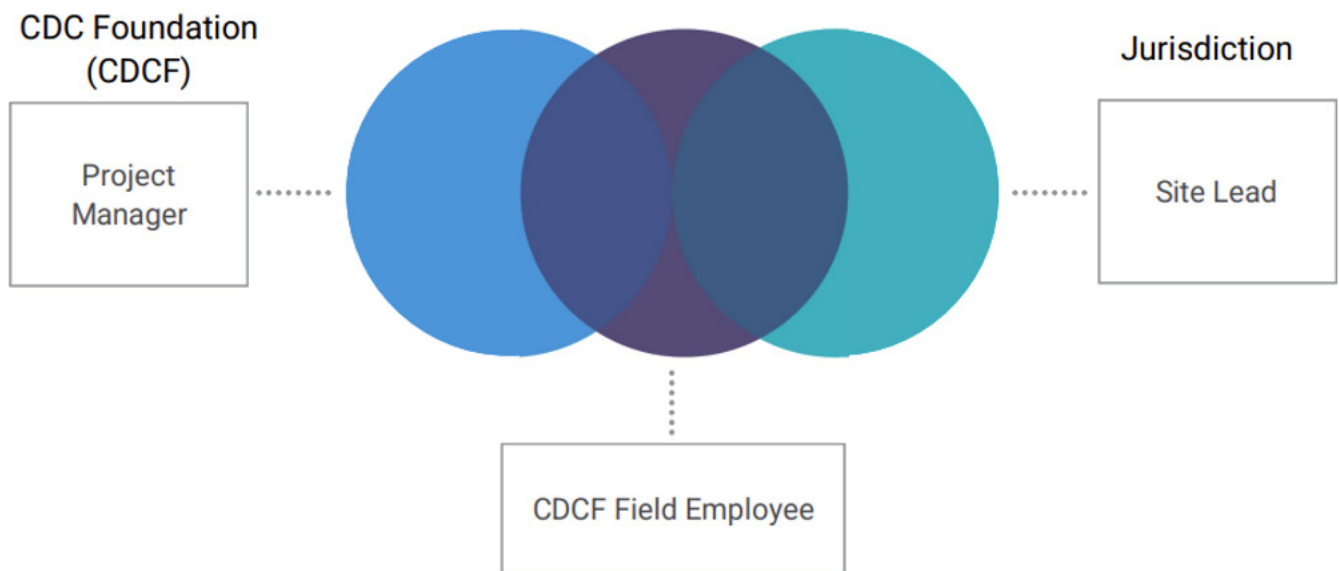
Field Employees

Jurisdictional Supported positions include:

- **Epidemiologist:** Assists in data submission, analysis, and other epidemiological needs.
- **State Unintentional Drug Overdose Reporting Systems (SUDORS) data abstractor:** Collects and abstracts data on drug overdose deaths from death certificates, coroner/medical examiner reports, and postmortem toxicology reports for entry into a web-based CDC platform shared with the National Violent Death Reporting System (NVDRS).
- **Peer Recovery Navigator/Peer Coordinator and Linkage to Care Coordinator:** Supports emergency departments, harm reduction organizations, syringe service programs, and public health/public safety initiatives within communities by delivering services and connecting individuals to evidence-based treatment, such as medications for opioid use disorder (MOUD) in all jurisdictions.
- **Overdose Coordinator:** Provides training and technical assistance to external partners engaged in prevention efforts and works to help create sustainability of overdose prevention programming.
- **Data Analyst:** Plans, develops, and conducts analysis of overdose surveillance data and data related to overdose prevention efforts.
- **Data Visualization Specialist:** Develops graphics focused on drug overdose data, creating charts, graphs, and maps for print and digital platforms.
- **Program Implementation Specialist:** Works with jurisdiction staff to develop and implement/enhance systems and processes to ensure consistent, high-quality project management.
- **Program Coordinator:** Supports the OD2A-funded recipients in the implementation of OD2A surveillance, prevention, and evaluation activities.
- **Program Evaluator:** Designs, implements, and maintains a framework and process for monitoring and evaluating projects within the Overdose Data to Action team.
- **Academic Detailer:** Works with prescribers and pharmacies to inform pain management practices related to the treatment of substance use disorder and helps create sustainability of overdose prevention programming.
- **Recovery Coach:** Utilizes lived experience with substance use disorder or co-occurring disorders to assist individuals in linkage to care and needed services, performing community outreach for harm reduction initiatives and assisting in linking people to needed services.
- **Next-of-Kin Social Worker:** Conducts interviews with family and friends of individuals who have died because of overdose and works with numerous Overdose Fatality Review Teams to provide data and information.

- **Public Health Educator:** Supports the local jurisdiction in educating the public on health initiatives as they pertain to the OD2A program objectives.
- **Laboratory Scientist:** Supports opioid/overdose sample collection and toxicology testing in a forensic toxicology laboratory setting.
- **Toxicologist:** Works to obtain, review, and analyze data and reports from overdose fatalities.
- **Information Technology Specialist:** Reviews and establishes data systems associated with overdose surveillance.

Partnering to Address Staffing Needs



OVERVIEW OF JURISDICTIONAL PARTNERSHIPS

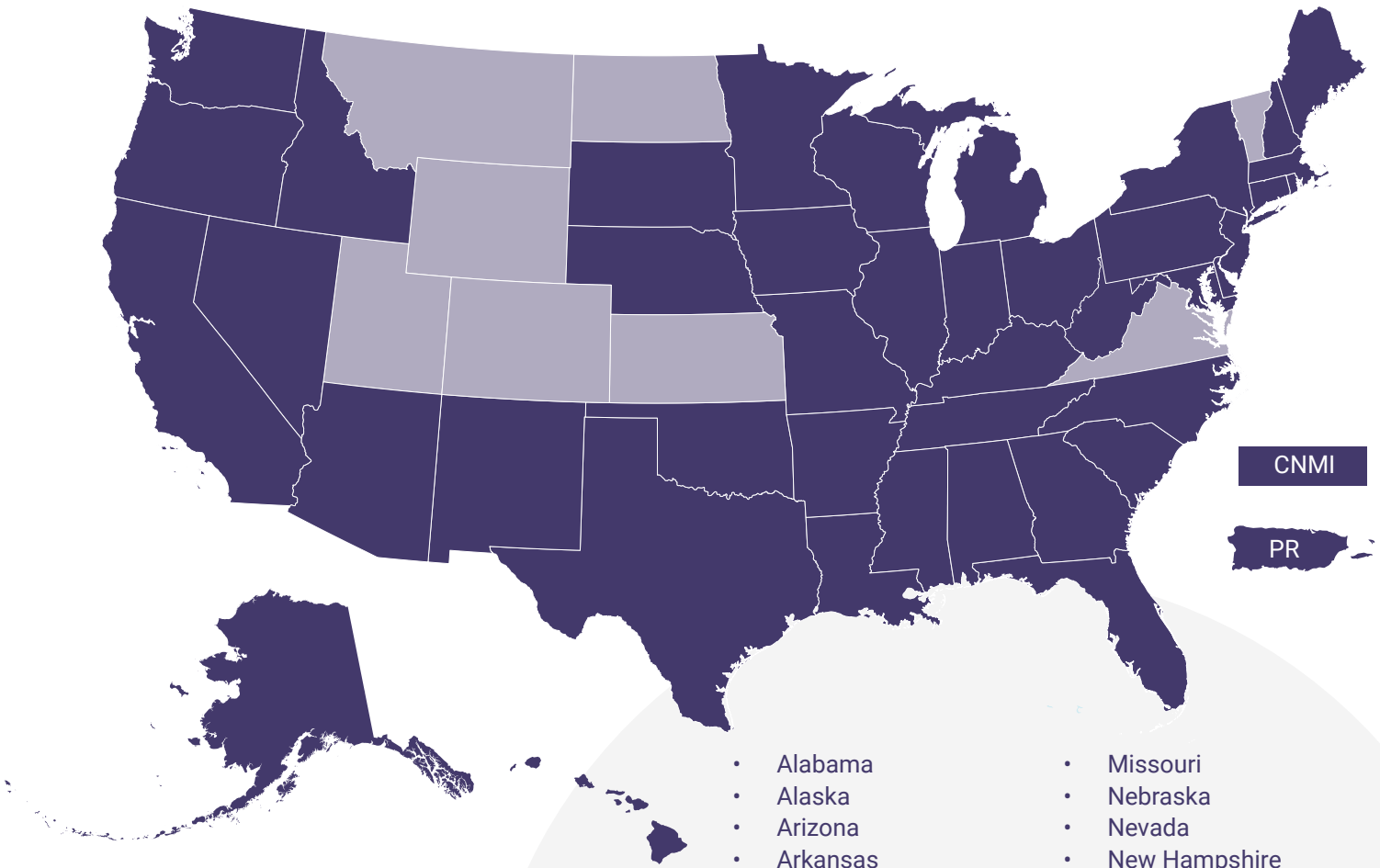
The CDC Foundation believes that community-based organizations (CBOs) are essential partners in the public health system and integral to ensuring meaningful impact on health outcomes. CBOs are a trusted community resource to improve economic, social, physical, and emotional well-being. CBOs, especially those led by residents with lived experience and an understanding of the communities in which they work, are vital to providing more equitable access to opioid information and services. Supporting these organizations also contributes to the development of local leaders. Support for these organizations is funneled through our jurisdictional partnerships.

OD2A is intentional about building solid and lasting partnerships that will strengthen the public health infrastructure and help address the opioid epidemic. CDC and the CDC Foundation are working together with partners to provide resources, expertise, and more capacity to communities across the country who are struggling with this surge of opioid overdoses and deaths. As a part of the opioid response, the CDC's National Center for Injury Prevention and Control funded nine organizations, including the CDC Foundation, to tackle this public health crisis. CDC provides technical assistance and support to 48 states and the District of Columbia. States facing the highest burden need further capacity, including staffing and resources, and the CDC Foundation is working to meet this need.

To further support OD2A-funded jurisdictions' capacity to implement overdose surveillance and prevention activities, the CDC Foundation provides staffing support to jurisdictions across the country. In addition to hiring and managing staff, the CDC Foundation coordinates and delivers specialty training sessions to build staff knowledge and expertise in areas such as peer learning and linkage to care, equity in overdose, and recovery certification.



CDC Foundation Supported Jurisdictions by State and Territory



The states/territories shaded in dark purple represent where the CDC Foundation has partnered with jurisdictions to assist with staffing support efforts.

- Alabama
- Alaska
- Arizona
- Arkansas
- California
- Connecticut
- Delaware
- District of Columbia
- Florida
- Georgia
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kentucky
- Louisiana
- Maine
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi
- Missouri
- Nebraska
- Nevada
- New Hampshire
- New Jersey
- New Mexico
- New York State
- North Carolina
- Northern Mariana Islands
- Ohio
- Oklahoma
- Oregon
- Pennsylvania
- Puerto Rico
- Rhode Island
- South Carolina
- South Dakota
- Tennessee
- Texas
- Washington State
- West Virginia
- Wisconsin

SITE VISITS:

Support Local
Innovation and
Capacity Building

SITE VISITS

Site visits are essential for the success of the Expanding Capacity to Address the Overdose Epidemic program. They help promote engagement and collaboration, share best practices, and demonstrate accountability and transparency in federal funds usage.

- 1. Assessment of Implementation:** Site visits help to assess how effectively the strategies outlined in the program are implemented on the ground.
- 2. Identifying Successes and Challenges:** By observing the activities and initiatives undertaken in various locations, project managers can identify successful approaches and areas that may require improvement or additional support.
- 3. Building Relationships:** It provides an opportunity for project managers to connect directly with local stakeholders. This direct engagement promotes collaboration, ensuring the program is a collective effort aligned with the needs and priorities of the communities it serves.
- 4. Sharing Best Practices:** Site visits allow different sites participating in the program to share best practices and lessons learned. This exchange of ideas and experiences can lead to innovation and improvement in overdose prevention efforts across the program.

By conducting site visits, we demonstrate our commitment to accountability and transparency in federal funds usage to address the overdose crisis. This visibility into the program's activities and outcomes shows our dedication to the communities we serve. Throughout the program, we have had the opportunity to visit the following jurisdictions and would like to thank them for all their hard work and commitment!

Site visits are crucial for understanding site-specific information and engaging with stakeholders. Key activities before the visit include reviewing collected data, preparing questions, and coordinating roles within the team. During the visit, activities include meeting with site representatives, touring facilities, and gathering information firsthand. Post-visit, teams may present findings and continue engagement with stakeholders. This process enhances understanding of community needs and facilitates effective response efforts, particularly in areas related to overdose surveillance and response. By conducting public site visits, we demonstrate our commitment to accountability and transparency in federal funds usage to address the overdose crisis. This visibility into the program's activities and outcomes shows our dedication to the communities we serve.

2023–2024 Site Visits

Jurisdiction	Event Type	Date
Hawaii Department of Health	Onsite	February 2023
North Carolina Division of Public Health	Onsite	March 2023
St. Louis Department of Health	Onsite	March 2023
Arkansas Department of Health	Onsite	March 2023
Kentucky Department for Public Health	Virtual	March 2023
Knox County Department of Health (Tennessee)	Onsite	March 2023
New Jersey Department of Health	Onsite	April 2023
Georgia Department of Public Health	Onsite	April 2023
San Diego County Department of Health	Onsite	April 2023
LA County Department of Public Health	Onsite	April 2023
Mobile County Health Department (Alabama)	Virtual	April 2023
Schenectady County Public Health Services (New York)	Onsite	April 2023
D.C. Department of Health	Onsite	May 2023
Franklin County Health Department (Ohio)	Onsite	May 2023
Baltimore County Health Department	Onsite	May 2023
Tennessee Department of Health	Virtual	May 2023
Mississippi State Department of Health	Onsite	May 2023
Connecticut Department of Health	Onsite	May 2023
St. Louis Department of Health	Onsite	June 2023
Washington State Dept of Health	Virtual	April 2024
Connecticut Department of Health	Virtual	April 2024
Mississippi State Dept of Health	Onsite	April 2024
Texas Department of Health	Virtual	April 2024
Baltimore County Health Department	Virtual	April 2024
Kentucky River Health District	Onsite	April 2024
Puerto Rico Department of Health	Virtual	May 2024
Boston Public Health Commission	Virtual	May 2024
Pima County Health Department (Arizona)	Onsite	May 2024
Tennessee Department of Public Health	Virtual	June 2024
Oregon Health Authority	Virtual	June 2024
Dallas County Health & Humas Services	Virtual	June 2024
Riverside County Health Department (California)	Virtual	June 2024
Florida Department of Health	Virtual	June 2024
Marion County Public Health Department (Indiana)	Virtual	June 2024
Louisiana Department of Health	Virtual	June 2024
Barry-Eaton District Health Department (Michigan)	Virtual	June 2024
Maryland Department of Health	Virtual	June 2024
Santa Clara County Public Health Department (California)	Virtual	TBD

JURISDICTION SPOTLIGHTS



MISSOURI

CITY OF ST. LOUIS DEPARTMENT OF HEALTH

The City of St. Louis Department of Health, with the help of the CDC Foundation Field employees, launched a new Behavioral Health Bureau to address the community's rising mental health and substance abuse issues. The Bureau's objectives include creating linkages to care for substance use prevention, increasing data availability on substance use, reducing stigma, and promoting help-seeking behaviors.

IMPACT:

- Conducted site visits and developed a Strategic Plan based on the city's needs.
- Implemented a Community Assessment and recruited 14 new positions, including the Bureau Chief, to lead the new Behavioral Health Bureau.
- Analyzed city data and collaborated with local partners to access additional data.
- Mapped treatment and recovery services in the city and responded to a school shooting incident, mapping crisis response patterns.
- Held over 100 community meetings to build relationships and formed the Opioid and Substance Use Task Force.
- Completed a Narcan Project and provided training to the new Bureau staff.
- Delivered a Substance Use and Overdose Prevention Strategic Plan, a data dashboard template, and a Health Equity White Paper and Toolkit.
- Additionally, they wrote and disseminated three RFPs to fund community agencies for the strategic plan.

"Public health is public safety. Through the coordinated efforts of the Department of Health and many community partners, the Behavioral Health Bureau's forward-thinking strategy will make our city safer by addressing the root causes of crime and supporting the mental health and substance use needs of St. Louis residents."

-MAYOR TISHAURA O. JONES



NEW JERSEY

NEW JERSEY DEPARTMENT OF HEALTH

The New Jersey Department of Health and New Jersey Office of the Attorney General partnered with over 18 community-based organizations, including local and state law enforcement and EMS, medical professionals, mental health clinicians, and lawyers to create the “Hotspot Outreach Initiative”

IMPACT:

- Distributed Naloxone kits, hygiene kits, harm reduction outreach material about overdose reversal, AED, and Naloxone administration.
- Saturated the state with Naloxone, in high-risk areas of increased health disparities.
- Conducted harm reduction outreach activities, direct linkage to care (real-time beds), referral to treatment and overdose training and education sessions.



LA COUNTY

LOS ANGELES DEPARTMENT OF HEALTH

OD2A focuses on understanding and tracking the complex and changing nature of the drug overdose epidemic and highlights the need for seamless integration of data into prevention strategies, **The Los Angeles Department Health** was able to hire staff devoted to data abstraction.

IMPACT:

- SUDORS Abstractors were able to catch up on the backlog of cases within the state.
- Completed 1,930 cases.

“As outlined with the MOA with death certificates, coroner’s reports, and emergency room data, abstractors can collate and enter information applicable to sudden unintentional deaths related to opioid usage. The collection of this information can be presented to other programs, staff, and policymakers.”

- CHERRY DAVENPORT, Program Manager



NEW YORK

SCHENECTADY HEALTH DEPARTMENT

Schenectady, New York Community Health partnered with multiple community-based organizations as well as local and state law enforcement and EMS to aid in overdose prevention efforts including training in Narcan use.

IMPACT:

- Trained over 100 staff at the New York Recovery Center in Narcan use.
- Provided patient support through CDCF peer support specialist.
- Increased the efficacy and efficiency of staff.

“Having peer support specialists has made a world of difference with staff and patients. Bobby and Norene have been instrumental in smart recovery goals (when individuals feel uncomfortable and want to use). Because of Bobby and Norene, patients stay in the program longer than they would have otherwise. The patient impact is significant and helps increase the efficacy and efficiency of staff.”

- TONI SPERA, Conifer Park Program Manager



Pictured from left to right: Robert Bobby Brown (CDCF), Norene Clark (CDCF)



MISSISSIPPI

MISSISSIPPI DEPARTMENT OF HEALTH

OD2A was able to provide the **Mississippi Department of Health** with staffing support to hire a staff to work on educating partners about location-specific circumstances and risk factors, alerting health providers, public health professionals, medical examiner and coroner offices, and other partners of newly emerging drug threats, informing drug overdose prevention and response planning and strategies using toxicology and circumstance data.

IMPACT: Evaluating the impact of overdose prevention and response efforts.

“They were so impressed with Dominique’s work; the Mississippi Department of Health has offered him a full-time position.”

- CHERRY DAVENPORT, Program Manager



ARIZONA

PIMA COUNTY DEPARTMENT OF PUBLIC HEALTH

The site visit notes summarize the efforts of various organizations in Tucson, AZ, focusing on overdose prevention and support services:

Siham Ahmed and Linda Cifuentes played a pivotal role in bridging the gap between county prevention programs and the community, facilitating critical information exchange and relationship building.”

- BRIAN ELLER, Division Manager- Pima County Public Health

1. HOPE:

1. Specializes in peer support services.
2. Provides peer support in justice and healthcare settings.
3. Distributes harm reduction items.
4. Coordinates with external partners for referrals and linkage to care.
5. Highlights the Supportive Treatment and Engagement Program (STEP) for maintaining contact with participants and facilitating referrals.
6. Participates in provider networks and coalitions to improve service coordination and collaboration.

2. Tucson Indian Center (TIC):

1. Focuses on Native American communities in Pima County.
2. Focuses on overdose prevention education and distribution of harm reduction supplies.
3. Provides care coordination and health system navigation.
4. Participates in provider networks to support individuals with substance use disorders.

3. CODAC:

1. Community Liaison/Educator involvement in community-wide collaboration and coordination.
2. Monthly CODAC Collaboration meetings for information sharing and distribution of harm reduction items.
3. Educates community leaders on overdose prevention, substance use treatment navigation, and the Good Samaritan Law.
4. Outreach efforts to establish new community partnerships.
5. Key roles played by Siham Ahmed and Linda Cifuentes in bridging the gap between county prevention programs and the community.

4. Data Presentation and Utilization:

1. CDC Foundation Field employees Siham Ahmed and Linda Cifuentes presented the integration of Tucson EMS data with medical examiner and PDMP systems.
2. Generated hot maps to identify high overdose rate areas such as unhoused encampments, bus stops, and low-income apartment housing.
3. Community partners used this data to implement targeted interventions, including Naloxone training and distribution.
4. Brian Eller acknowledged the significant contributions of Siham Ahmed and Linda Cifuentes in compiling and analyzing data.

5. Apartment Visits

1. Site visits to identified hotspot apartments.
2. Discussions with site managers about installing Narcan wall mount kits and onsite training initiatives.
3. Demonstrated a coordinated approach involving PCHD staff, Tucson City OD prevention Peers, and CDCF field employees to implement overdose prevention measures at the grassroots level.

IMPACT



TRAINING HIGHLIGHTS

Reframe Health & Justice provides harm reduction education and overdose prevention training to communities affected by the opioid epidemic.

- Building with Community Power & Engagement
- Housing First: Addressing Homelessness as a Driver of Overdose
- Health Equity in Data & Evaluation

MHEC - Michiana Healthcare Education Center, Inc. (MHEC) is an AHA Training Site and Training Center. They specialize in healthcare training and provide academic detailing sessions to local community organizations and medical offices in the North Carolina area.

- Academic Detailing Sessions

Faces & Voices Recovery provides training and technical assistance to Peer Recovery Support Providers supporting state and local jurisdictions. Faces & Voices is a national non-profit organization pioneering the peer recovery movement for the past 21 years.

- Trauma-Informed Care
- Motivational Interviewing
- Peer Leadership Development

ICF International Inc. provides training and technical assistance, survey research, evaluation, strategic communications, and more for agencies that need expanded capabilities to achieve their public health service goals.

- Key Partnerships in Overdose Prevention
- Measuring and Reducing Addiction Stigma

CCAR (Connecticut Community for Addiction Recovery) provides Recovery Coach Academy and supplementation training geared toward developing, supporting peer recovery focused roles.

- Ethical Considerations for Recovery Coaches
- Recovery Coach Academy
- Coachervision

C4 Innovations provides training geared toward cultural humility, data-based storytelling, motivational interviewing and addressing racial disparities and social determinants of health, supporting the needs of a larger range of field staff roles.

- Cultural Humility
- Motivational Interviewing
- Self Advocacy

Kahuina Consulting provides training for field staff focusing on data use cases and identifying the best use of available data. This will be conducted through virtual courses focused primarily on finding the right data sources, wireframing analyses outputs and implementing those results.

- Wireframing Analysis Output
- Building Partnerships
- Communicating Results

COMMUNITIES OF PRACTICE (CoP)

Communities of Practice (CoP) refer to “collectives of individuals united by a common interest, a specific set of challenges, or a passion for a particular subject, engaging in continual interaction to enhance their understanding and skills.” In March 2023, the CoP channels were created in Microsoft Teams. The CDC Foundation offered monthly meetings that ranged from 30 minutes to an hour. This gave field employees who held similar roles across different jurisdictions the opportunity to collaborate, network, and learn from one another.

PURPOSE - To share best practices, lessons learned, resources, and network with other CDC Foundation team members in similar roles.

MONTHLY MEETINGS - Meetings will be held the 2nd week of every month and will begin in March.

TEAMS CHANNEL - Opportunity to stay connected outside of the meetings and share knowledge/ask questions of your peers!

EVALUATION SURVEY - Please ensure survey is completed after each CoP meeting.

“I am excited to hear about other SUDORS projects and activities! I like to learn what others are doing to help me grow.”

-Anonymous SUDORS



EVALUATING THE IMPACT

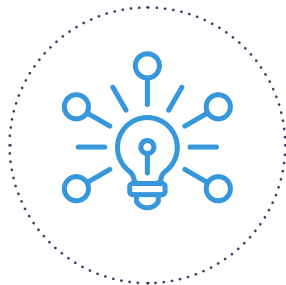
Training Survey Report

Survey Responses from February to June 2023



95%

of respondents agree or strongly agree with the statement
"I feel my skills and abilities were enhanced by the trainings this month."



93%

of respondents agree or strongly agree with the statement
"The information presented at the trainings this month will be useful in my current position at my jurisdiction."

Field Employee Monthly Survey Report

At CDCF, we deeply value the insights and experiences of our field employees engaged in OD2A activities. To ensure the Expanding Capacity to Address the Overdose Epidemic program remains effective and efficient, we conducted a monthly survey to gather their feedback. This report encompasses 940 surveys completed by field employees across 42 different jurisdictions from October 2022 to May 2024.



940
SURVEYS
COMPLETED

BY FIELD EMPLOYEES
ACROSS

42
JURISDICTIONS

Who are the survey participants?

Top 5 jurisdictions represented	# of survey responses
Tennessee	85
New York	69
North Carolina	68
California	58
Connecticut	57

Top 5 positions represented	# of survey responses
SUDORS Data Abstractor	183
Epidemiologist	178
Data Analyst	71
OD Coordinator	66
Program Evaluator	64

TOP STRATEGIES

Surveillance - Collect and disseminate descriptions of drug overdose death circumstances required for state recipients, D.C. and Puerto Rico.

State and Local Integration - Improve state and local prevention efforts to build more effective and sustainable surveillance and implement community-level interventions in high-burden areas.

Empowering Individuals - Increase awareness about drug-related harms, treatment and risk reduction strategies to help individuals make informed decisions.

Linkage to Care - Ensure people are connected to the care they need by leveraging systems and upstream prevention efforts.

Partnerships with Public Safety and First Responders - Develop new and/or enhance existing partnerships with public safety partners to improve data sharing and advance prevention efforts.

TOP ACTIVITIES

	Cleared backlog of data	226
	Facilitated an internal/external meeting	212
	Developed or published reports	165

KEY FINDINGS

How would you rate your ability to organize, prioritize and complete assigned tasks from your jurisdiction this month?



67% OF FIELD EMPLOYEES rate that they **exceed expectations or are outstanding** in their ability to organize, prioritize and complete assigned tasks from their jurisdiction within the month of completing the survey. **A remaining 33% rate that they meet expectations.**

I feel my skills and abilities are well utilized in my position at the local level.



77% OF FIELD EMPLOYEES **totally agree with the statement** "I feel my skills and abilities are well utilized in my position at the local level."

Community of Practice Survey Report

CDCF establishes communities of practice groups to enable field employees in similar positions across different jurisdictions to network and exchange best practices. From March 11 to March 15, 2023, facilitators gathered feedback from CoP participants to evaluate the groups' impact on field staff.

Community of Practice Groups	
Data Visualization, Data Analyst, Epidemiologists, Academic Detailer	19 FEs
SUDORS	13 FEs
Linkage To Care, OD Coordinator, Peer Navigators, Recovery Coaches, Health Educator	12 FEs
Program Evaluators and Program Coordinators	11 FEs
Implementation Specialists	7 FEs

Data Visualization, Data Analyst, Epidemiologists, Academic Detailer

100% of respondents agree or strongly agree with the statement
"This meeting provided content that is relevant to my job."

90% of respondents agree or strongly agree with the statement
"My understanding of the subject matter has increased as a result of this meeting."

90% of respondents agree or strongly agree with the statement
"As a result of participating in this meeting, I can identify actions or ideas I can apply to my job."

SUDORS

100% of respondents agree or strongly agree with the statement
"This meeting provided content that is relevant to my job."

76% of respondents agree or strongly agree with the statement
"My understanding of the subject matter has increased as a result of this meeting."

88% of respondents agree or strongly agree with the statement
"As a result of participating in this meeting, I can identify actions or ideas I can apply to my job."

Linkage To Care, OD Coordinator, Peer Navigators, Recovery Coaches, Health Educator

79% of respondents agree or strongly agree with the statement
“This meeting provided content that is relevant to my job.”

82% of respondents agree or strongly agree with the statement
“My understanding of the subject matter has increased as a result of this meeting.”

91% of respondents agree or strongly agree with the statement
“As a result of participating in this meeting, I can identify actions or ideas I can apply to my job.”

Program Evaluators and Program Coordinators

100% of respondents agree or strongly agree with the statement
“This meeting provided content that is relevant to my job.”

100% of respondents agree with the statement
“My understanding of the subject matter has increased as a result of this meeting.”

100% of respondents agree or strongly agree with the statement
“As a result of participating in this meeting, I can identify actions or ideas I can apply to my job.”

Implementation Specialists

91% of respondents agree or strongly agree with the statement
“This meeting provided content that is relevant to my job.”

82% of respondents agree with the statement
“My understanding of the subject matter has increased as a result of this meeting.”

91% of respondents agree or strongly agree with the statement
“As a result of participating in this meeting, I can identify actions or ideas I can apply to my job.”

ABSTRACTS, PUBLICATIONS, PRESENTATIONS

Fatal Unintentional and Undetermined Intent Drug Overdose Trends by Race/Ethnicity, 2015-2021

Authors: Nicholas Cortes; Heather Clinton; Jessica Brockmeyer; Susan Logan

CDC Foundation, assigned to Connecticut Department of Public Health, Hartford, CT

Connecticut Department of Public Health, Hartford, CT

Results From a Descriptive Analysis of Kratom-Involved Overdose Deaths in Palm Beach County, Florida, 2021

Authors: Tenzin Yangchen, MA; McClaren Rodriguez, MPH; Janette Baird, PhD; Benjamin D. Hallowell, PhD, MPH; Mackenzie M. Daly, MPA; Rachel S. Wightman, MD, FACMT; Justin Berk, MD, MPH, MBA; Francesca L. Beaudoin, MD, PhD; Laura C. Chambers, PhD, MPH

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Research, Data Evaluation, and Compliance Unit, Rhode Island Department of Behavioral Healthcare, Developmental Disabilities, and Hospitals, Providence, Rhode Island, USA

Department of Medicine, Alpert Medical School of Brown University, Providence, Rhode Island, USA

Corresponding author: Laura C. Chambers, Brown University Department of Epidemiology, Box G-S121-2, 121 South Main Street, Providence, Rhode Island, 02912; E-mail: laura_chambers@brown.edu; Phone: (734) 904-5279.

MSDH Linking to Care

Author: Dominique Deleo

Disparities in Bystander Response for Overdose Deaths in Tennessee, 2019-2022

Authors: Jessica Korona-Bailey, MPH, Jenna Moses, MPH, Mircea Lazar, PhD, Kristi Hall, MPH, Sutapa Mukhopadhyay, PhD

Tennessee Department of Health, Office of Informatics and Analytics, Andrew Johnson Tower 7th Floor, 710 James Robertson Parkway, Nashville, TN 37243, United States

CDC Foundation, 600 Peachtree St NE Ste 1000, Atlanta, GA 30308, United States

Using Geographic Information Systems (GIS) to Evaluate Transportation Accessibility of Drug Checking Sites in a Region of New York State, 2023

Author: Spencer Keable

CONCLUSION

The Expanding Capacity to Address the Overdose Epidemic initiative is a testament to the power of collaborative effort and strategic intervention in the face of a grave public health crisis. Since its inception, the initiative has made significant strides in understanding and mitigating the overdose epidemic through a robust framework of data collection and prevention strategies. The initiative's expansion in August 2023, with \$300 million awarded to state and local jurisdictions underscores the CDC's unwavering commitment to saving lives and enhancing public health.

The successes of Expanding Capacity to Address the Overdose Epidemic initiative are evident in the enhanced surveillance capabilities and the effective implementation of prevention measures across various jurisdictions. This progress would not have been possible without the dedication and tireless efforts of state, tribal, county, and city health departments, as well as the invaluable support from the White House and other federal agencies. Collective action has resulted in historic investments and groundbreaking advancements, such as the FDA's approval of Naloxone for over-the-counter use, which has the potential to save countless lives.

As we reflect on the achievements of the program, it is crucial to acknowledge the profound impact of synthetic opioids, particularly fentanyl, in driving the overdose crisis. The data-driven approach of the program has provided critical insights into these evolving challenges, enabling targeted and effective responses. The dedication to continuous improvement and adaptation ensures that we are well-equipped to address future challenges and continue making progress in the fight against drug overdoses.

We extend our deepest gratitude to everyone involved in this funding agreement. Your unwavering support, collaboration, and commitment have been instrumental in our successes thus far. Together, we have laid a solid foundation for a safer, healthier future for all. As we move forward, let us remain steadfast in our mission to combat the overdose crisis, confident that we can save lives and foster lasting change through our continued partnerships and collaboration with state and local partners.

REFERENCES

1. [Injury Center | Injury Center | CDC](#)
2. [One Year After Releasing its Groundbreaking Overdose Prevention Strategy, HHS Announces New Data Showing Nation Has Expanded its Ability to Treat Addiction and Save Lives | HHS.gov](#)
3. Kariisa M, O'Donnell J, Kumar S, Mattson CL, Goldberger BA. Illicitly Manufactured Fentanyl–Involved Overdose Deaths with Detected Xylazine – United States, January 2019–June 2022. MMWR Morb Mortal Wkly Rep 2023;72:721–727. DOI: <http://dx.doi.org/10.15585/mmwr.mm7226a4>.

**Expanding Capacity to
Address the Overdose Epidemic**



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