



Governor Dan McKee's Task Force on Overdose Prevention and Intervention

March 10, 2021

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WELCOME & ANNOUNCEMENTS

Rhode Island's 10,000 Chances Project



Funded Rhode Island community-based organizations include:



The Providence
CENTER



Gateway Healthcare
Lifespan. Delivering health with care.



Rhode Island Hospital
Lifespan. Delivering health with care.

AIDS Care Ocean State



www.aidscaresos.org



east bay community
action program



WEBER*RENEW

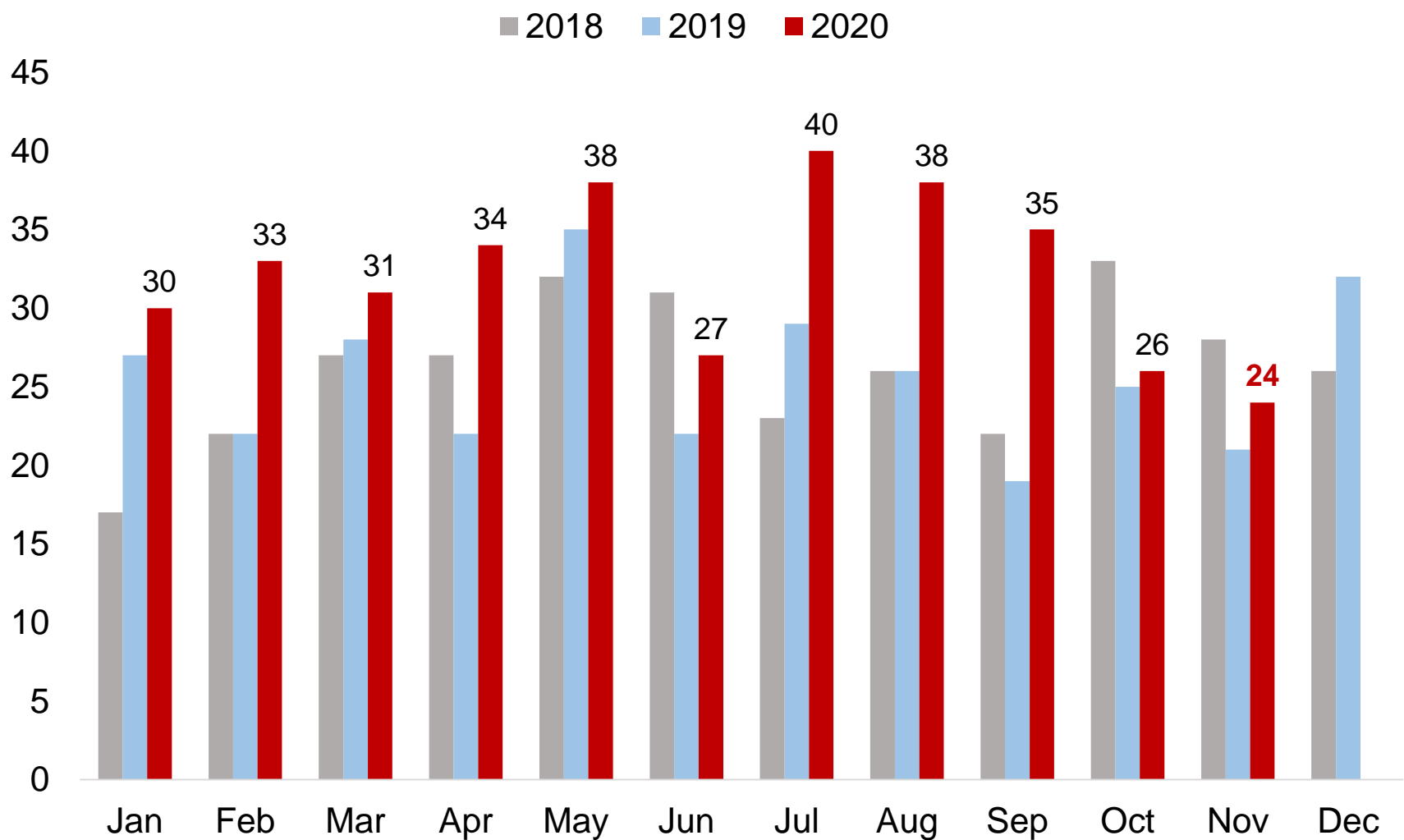
amos
HOUSE



Data Update: Rhode Island Accidental Drug Overdose Deaths January 2020-November 2020

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Fatal Overdoses in Rhode Island by Month, 2018-2020

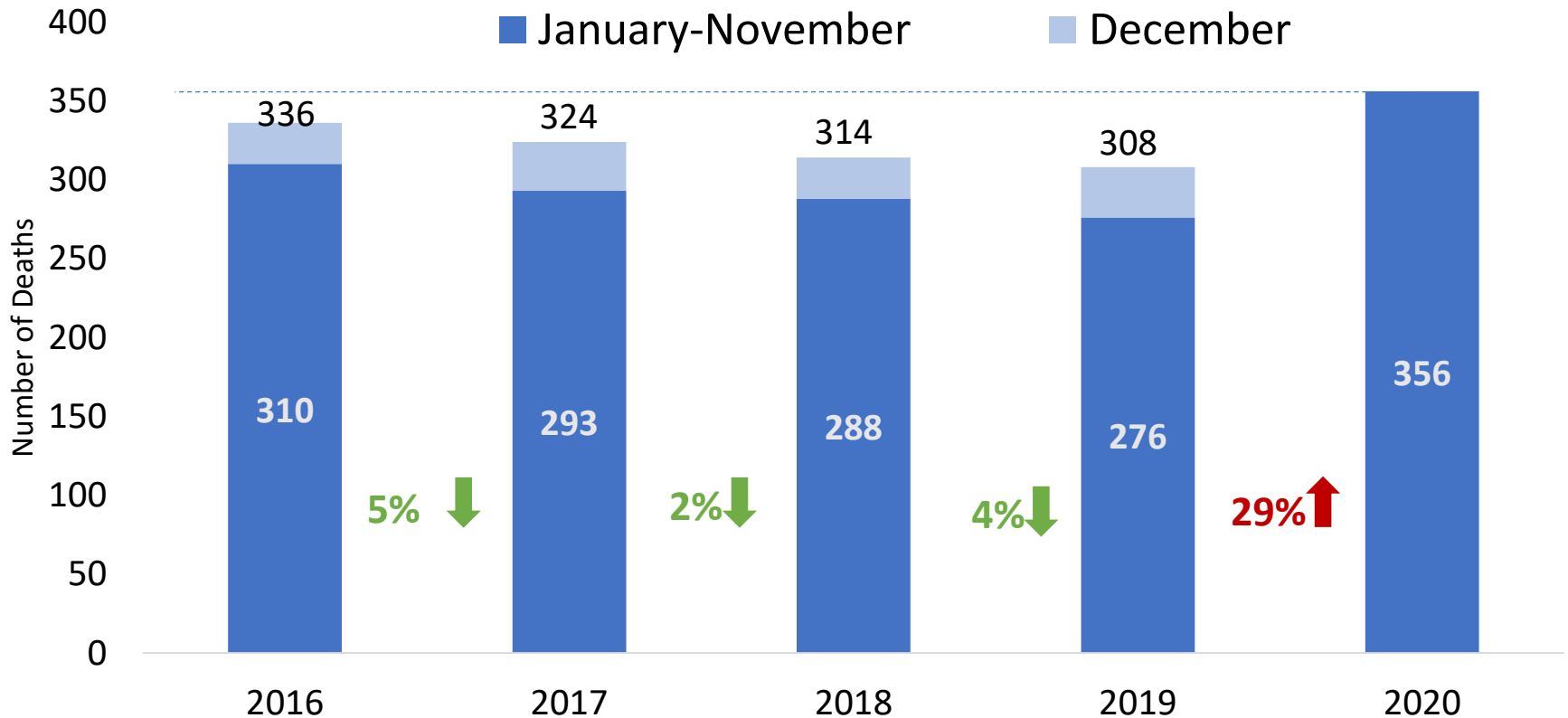


Source: Office of the State Medical Examiners (OSME), Rhode Island Department of Health (RIDOH). Data updated as of March 4, 2021. Note: Data reflect accidental drug overdose deaths and do not include suicides, homicides, or undetermined deaths.

All Drug Fatal Overdoses January 2016–November 2020



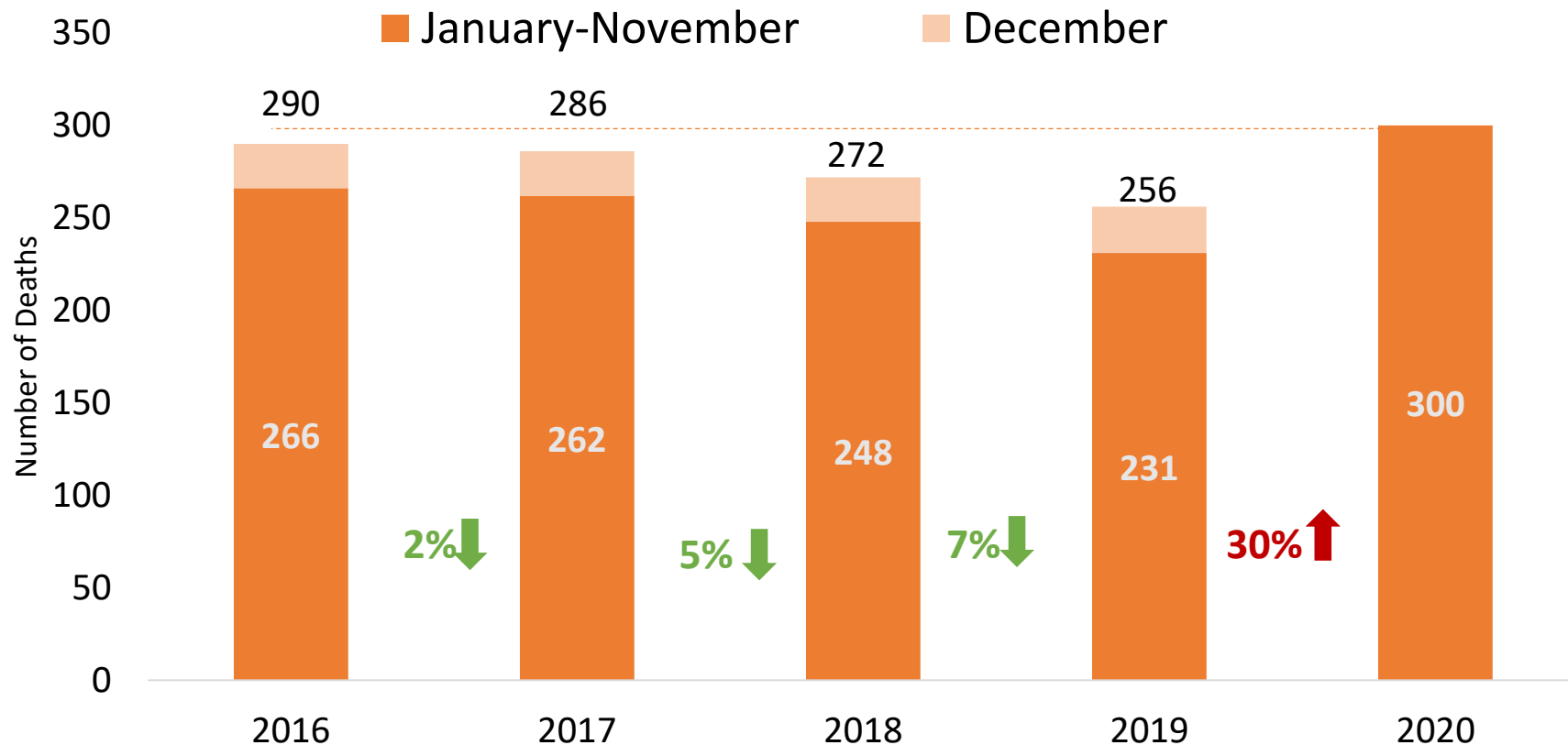
Fatal overdoses for which **any drug** contributed to cause of death **increased by 29%**, compared to the same time period in 2019.



Opioid-Involved Fatal Overdoses January 2016-November 2020

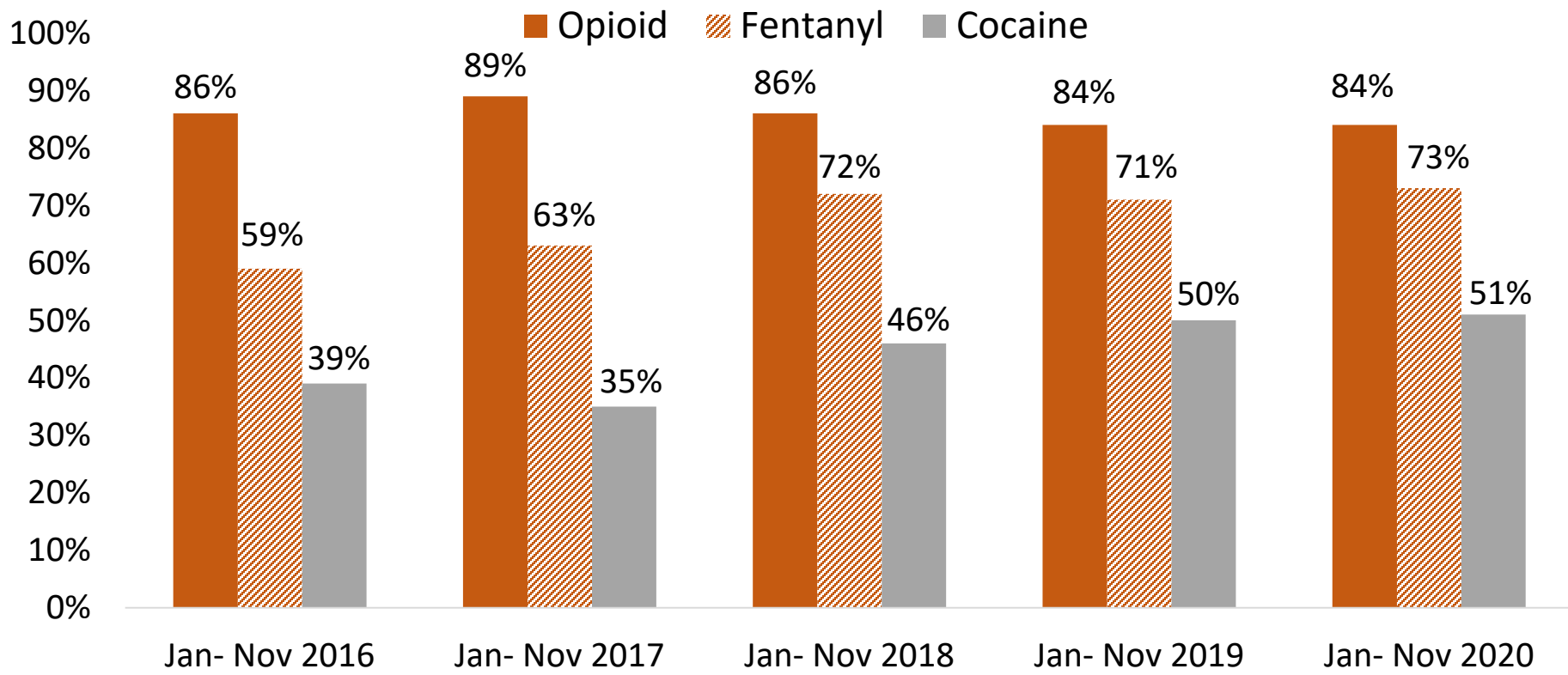


Fatal overdoses for which **any opioid**, including fentanyl, contributed to the cause of death **increased by 30%**, compared to the same time period in 2019.



Proportion of Fatal Overdoses by Select Substance, January-November 2016-2020

- The proportion of fatal overdoses involving **fentanyl** was similar to the same timeframe in 2019.
- About 1 in 2 fatal overdoses involved **cocaine**, similar to 2019 trends.



Source: Office of the State Medical Examiners (OSME), Rhode Island Department of Health (RIDOH). Data updated as of March 4, 2021. Note: Data reflect accidental drug overdose deaths and do not include suicides, homicides, or undetermined deaths.



Addiction + Overdose Evidence Update

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Presentation to Governor's Overdose Prevention and
Intervention Task Force

March 10, 2021

**RHODE
ISLAND**

EXAMPLE: Behavioral Health (BH) Statewide Conversation/Messaging Work Group Planning Process

Goal: So much of the work of the Task Force Work Groups include ensuring that Rhode Islanders have access to **clear education** and **messaging on behavioral health**: about how to seek treatment, receive harm reduction information and materials, and prevent initial substance use and mental health diagnoses, symptoms, and/or relapse. The goal of the BH Statewide Conversation Work Group is to create and share these messages, with ongoing participation from community partners and people who either use or have used drugs – with a race equity lens.

Top 2021 Priorities:	Tier?	Timeline/Next Implementation Step
<p>Overhaul state messaging efforts, by looking toward nationally researched and locally tailored behavioral health language that is proven to reach a variety of audiences: people with mental health conditions, people who use drugs, their families and supporters, and people not using drugs, including a focus on contaminated or counterfeit drug supply and a connection to local resources.</p>	<p>2 – Note that final campaign assets must be signed off on by state leadership (EOHHS/Gov’s Office) as stated in the Work Group’s Charter</p>	<ul style="list-style-type: none"> • The Work Group used a new process (see Charter) to engage community members in the creation of the creative and media support for the 10,000 Chances campaign, and will evaluate it in February. • The Work Group will continue to use this process for the upcoming Substance Exposed Newborns (SEN) campaign beginning in the spring. • SOR Year 3 campaign planning will begin shortly.
<p>Continue to engage a diverse group of community members in the development, design, and distribution of communications campaign, through focus groups and ongoing input strategies – and use this process to bring in new voices to the Task Force.</p>	<p>3</p>	<ul style="list-style-type: none"> • Work Group will continue to engage with community members for press opportunities. See this Boston Globe article and this Warwick Beacon article from February 2021, and this Providence Journal op-ed from a Parent Support Network and a RICARES Peer Recovery Support Specialist. • Latina 100.3 radio interview in February 2021 with a Peer Recovery Support Specialist from East Bay Recovery Center.
<p>Emphasize messaging that takes on bias, fear, and discrimination directed at people who use drugs, with a race equity lens. Recovery messaging must include the shift from addiction as a vice to addiction as a disease; the hope of a full life; and the reinforcement that true recovery is personal, self-directed, and doesn’t look the same – but always needs a welcoming community.</p>	<p>3</p>	<ul style="list-style-type: none"> • The Work Group will ensure that findings from last year’s BH Survey can be implemented through anti-bias and anti-discrimination messaging. • <i>Opioids in Our Community: A Neighborhood Conversation</i> aired on PBS in both English and Spanish in February and March 2021, and focuses on anti-bias and anti-discrimination messaging.

10,000 Chances Project: Highlighting Rhode Islanders' Stories

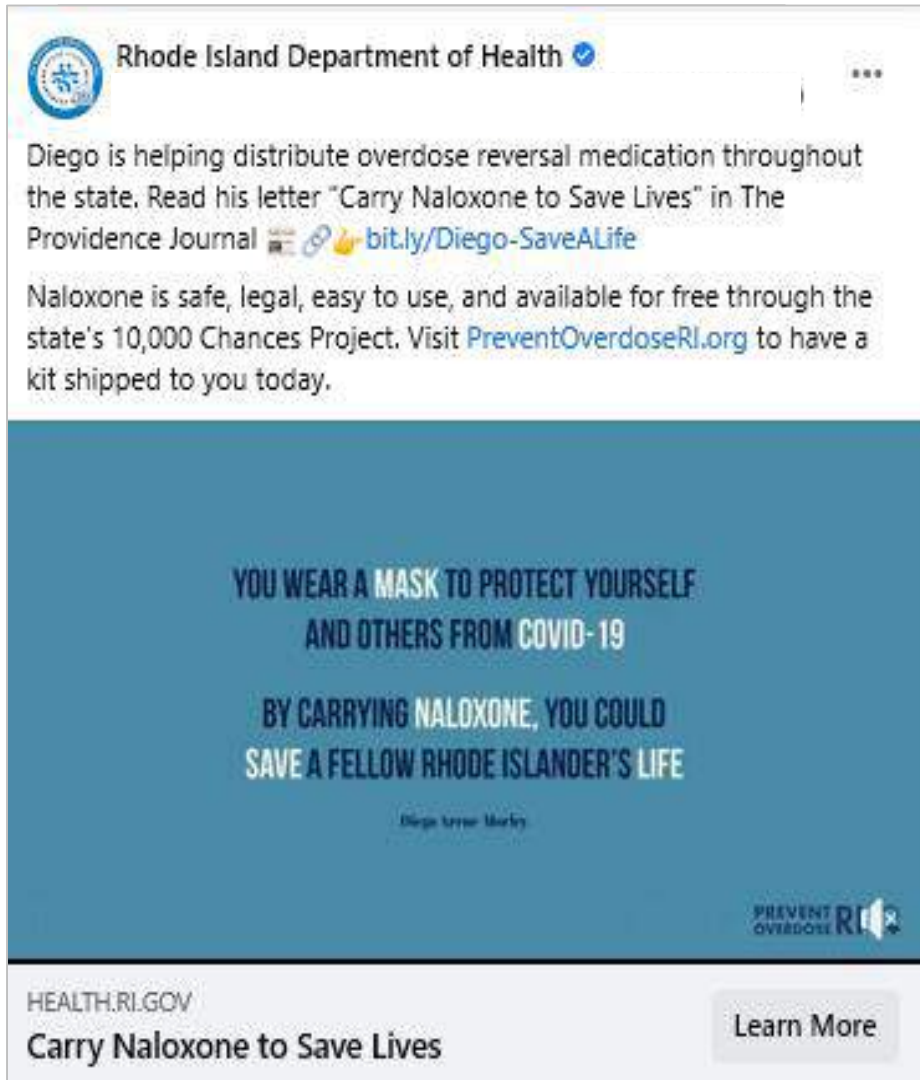


parent
support
network
OF RHODE ISLAND



LATINA
100.3 FM

10,000 Chances Project: Highlighting Rhode Islanders' Stories



Rhode Island Department of Health ✓

Diego is helping distribute overdose reversal medication throughout the state. Read his letter "Carry Naloxone to Save Lives" in The Providence Journal [bit.ly/Diego-SaveALife](https://www.providencejournal.com/story/news/2020/09/15/diego-carries-naloxone-to-save-lives/5311110002)

Naloxone is safe, legal, easy to use, and available for free through the state's 10,000 Chances Project. Visit PreventOverdoseRI.org to have a kit shipped to you today.

**YOU WEAR A MASK TO PROTECT YOURSELF
AND OTHERS FROM COVID-19**

**BY CARRYING NALOXONE, YOU COULD
SAVE A FELLOW RHODE ISLANDER'S LIFE**

Diego Torres Morley

PREVENT OVERDOSE RI

HEALTH.RI.GOV
Carry Naloxone to Save Lives

[Learn More](#)





PUBLIC COMMENT



Senator Sheldon Whitehouse

Overview of the Comprehensive Addiction and Recovery Act (CARA) 3.0



PUBLIC COMMENT