
August 25, 2022
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Background

In 2021, drug overdose deaths in Rhode Island increased by 14%, with 435 people lost to a preventable drug overdose. This is highest number of lives lost ever recorded to date.

Direct investments in evidence-based and innovative community strategies are critical to effectively responding to this crisis and saving lives. In 2022, Rhode Island Attorney General Peter Neronha announced opioid settlements of more than $250 million to be directed to opioid abatement – including expanding access to opioid prevention, rescue, treatment, and recovery. These settlements include the provisioning of direct payments to municipalities over the next 18 years to respond to this crisis.

Purpose

The present guide provides municipal leaders, local organizers, non-profit organizations, first responders, and members of the public with a foundation and reference for developing and implementing evidence-based, data-driven strategies to address the drug overdose epidemic. This list of recommended strategies is not exhaustive; the development of new, innovative activities is encouraged.

There are five data-informed initiatives detailed in this guide, including resources related to: 1) Prevention; 2) Harm Reduction; 3) Rescue; 4) Treatment, and 5) Recovery. Cross-cutting Communication resources are also highlighted. Many of these initiatives are intended to leverage existing community-level work while also addressing the bias and discrimination of individuals, families, and friends impacted by substance use and overdose.

Racial and Health Equity

Both locally and nationally, inequities in drug overdose deaths continue to worsen for people of color. Over the last several years, overdose death rates for Black and Hispanic Rhode Islanders have been on the rise.

Addressing structural racism is foundational to reversing the local drug overdose epidemic. Structural racism in the US has created systems that have historically excluded, and marginalized people based on their race and ethnicity, which has caused people of color to suffer worse health outcomes.

Health equity is the idea that everyone has a fair opportunity to be healthy and get the quality care they need. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and healthcare. Creating health equity requires addressing racial inequities, which are the uneven distribution of social and economic resources and power that impacts the health and wellbeing of an individual and of entire communities.

Racial equity is not just the absence of overt racial discrimination; it is also the presence of deliberate policies and practices that provide everyone with the support they need to improve the quality of their lives. It is a state in which all people in society share equal rights and opportunities. Eliminating racism in must start with assessments of current policies, systems, and structures on every level.

Racial inequities persist in every system without exception. Acknowledging structural oppression and power as the roots of health inequities and reducing differences in health outcomes between
different groups of people through policies, practices, and organizational systems can help improve opportunities for all Rhode Islanders.

[1] Source: Race Forward, What is Racial Equity?
Prevention: Data-Informed Initiatives and Resources

**Prevention activities** provide the necessary tools and resources to empower individuals to avoid substance use and overdose.

**Regional Prevention Task Force (RPTF) Coalitions**

There are seven Regional Prevention Coalitions operating across Rhode Island. These Coalitions implement primary prevention activities to reduce risk factors contributing to substance use. Activities implemented by the coalitions utilize five of the six primary prevention strategies endorsed by the Center for Substance Abuse Prevention, and are aimed across the lifespan, as appropriate, based on the assessment of needs and resources. Consider partnering with your Regional Prevention Coalition to leverage strategies and increase impact.

**What do we know about this intervention?**

Rhode Island’s RPTF Coalitions employ a multi-faceted approach. For example, RTPF Coalitions successfully lowered tobacco use rates among youth and adults in Rhode Island by working toward changing local policies and practices as well educating about the dangers of tobacco.

**How much does it cost?** $0 - $10K

**For more information**, contact Elizabeth Farrar, Rhode Island Department of Behavioral Healthcare, Developmental Disabilities & Hospitals (BHDDH).

**Rhode Island Health Equity Zone (HEZ) Initiatives and Community Overdose Engagement (CODE) Collaboratives**

Consider engaging with a local HEZ or CODE Collaborative. There are currently 15 Health Equity Zones (HEZ) operating throughout Rhode Island, with most HEZ prioritizing drug overdose prevention and intervention activities. In addition, the State funds CODE Collaboratives in Providence, Pawtucket/Central Falls, and Woonsocket. These Collaboratives are led by a diverse group of partners who work together to implement prevention, rescue, and harm reduction strategies.

These multisector collaboratives can help you engage with a variety of partners. Consider working with your local HEZ or CODE to provide education, harm reduction supplies, and other resource materials to institutions of higher education, arts and non-profit organizations, housing authorities, parks/recreation departments, hotels/motels, restaurants, faith-based organizations, and/or local businesses.

**What do we know about this intervention?**

Engaging with existing groups who are already doing work in your community is a vital way to expand limited resources and increase impact. Ensure these collaboratives have representation from partners/individuals that represent a variety of perspectives and sectors to increase the accessibility of harm reduction services and supplies and decrease stigma around substance use.

**How much does this cost?** <$5K

**For more information**, visit Rhode Island’s HEZ Initiative, PreventOverdoseRI.org, or email Lauren Conkey, Rhode Island Department of Health (RIDOH).
**Student Assistance Program/Project SUCCESS**

Adolescence is a critical risk period for substance use initiation and adverse outcomes related to substance use, particularly as drug use has been found to escalate between ages 12 and 19. Project Schools Using Coordinated Community Efforts to Strengthen Students (SUCCESS) can be implemented by a school’s Student Assistance Program.

This project incorporates several proven prevention strategies including increasing perception of risk or harm; changing adolescent norms and substance use expectancies, building and enhancing social and resistance skills; changing community norms related to substance use; and fostering and enhancing resiliency and protective factors, especially among high-risk youth.

**What do we know about this intervention?**

Research shows that prevention interventions can have positive long-term effects in reducing substance use. Data from the 2020-2021 Rhode Island Student Survey (RISS) shows that students at schools with Project SUCCESS demonstrated lower use of cigarettes, marijuana, and alcohol, and fewer depressive symptoms when compared with students at schools without Project SUCCESS.

**How much does it cost?** Cost varies; $5K-$10K+

**For more information**, contact Elizabeth Farrar, BHDDH.

**Mental Health First Aid**

This course teaches participants ways to help someone who may be experiencing a mental health or substance use crisis. The training enables people to identify, understand, and respond to signs of addictions and mental illnesses; intervention timing is one to two days in length.

**What do we know about this intervention?**

Those who have been trained in Mental Health First Aid practices have greater confidence in providing help to others, a higher likelihood of advising people to seek professional advice, improved concordance with health professionals about treatments, and decreased stigmatizing attitudes.

**How much does this cost?** $5K-$10K

**For more information**, visit Substance Use and Mental Health Leadership Council of Rhode Island or connect with a local EMS or law enforcement agency.

**Small Group Pain Management Workshops**

This series has been designed for individuals aged 18 and older who are experiencing chronic pain or chronic disease, serve as caregivers, or are looking to improve health. These workshops provide participants with tools to manage medications, fatigue, and frustration, along with proper nutrition, communication skills, ways to evaluate treatments, and action plans. Each session runs for 2.5 hours, and participants attend one session per week for six weeks. Classes contain 10-20 participants and are highly participatory.
What do we know about this intervention?

The mutual support that is provided to participants in these workshops builds confidence in their ability to manage their health and maintain active and fulfilling lives.

**How much does this cost?** $5K-$10K

For more information, visit CODAC’s Pain Solutions Program or email Nancy Sutton, RIDOH Chronic Pain Self-Management Program.
Harm Reduction: Data-Informed Initiatives and Resources

Harm reduction is a set of practical strategies and ideas aimed at reducing negative consequences associated with drug use. Harm reduction is also a movement for social justice built on a belief in, and respect for, the rights of people who use drugs.

Harm Reduction Supply Distribution and Education

Partner with your local harm reduction organization to provide harm reduction education and distribute naloxone and fentanyl test strips (FTS) to people who use drugs (and/or their families or loved ones), people at high risk of overdose (recreational users), and/or people located in overdose hot spots. A variety of strategies can be employed to distribute these life-saving resources including street outreach, mobile vans, and home delivery.

What do we know about this intervention?

Research consistently shows that community-based naloxone distribution is highly cost-effective, even under conservative assumptions. Research has also demonstrated that naloxone distribution to high-risk people can generate significant cost savings. In addition, FTS can effectively prevent overdoses. Evidence has shown that people who use substances changed substance-use behavior after using FTS to test drugs.

How much does this cost? <$5K

For more information related to fentanyl test strip and additional harm reduction supplies, email Michelle McKenzie, Preventing Overdose and Naloxone Intervention. For information on naloxone training and access to free naloxone, email Anita Jacobson, The University of Rhode Island Community First Responder Program.

Harm Reduction Training and Anti-Stigma Support

Municipalities can develop and host harm reduction trainings to reduce stigma and ensure a person-centered approach. Anti-stigma training and training on the principles of harm reduction can be provided for the following types of organizations: treatment providers, recovery housing providers, and medical providers.

What do we know about this intervention?

Evidence states that using harm-reduction strategies in primary care and other settings will reduce stigma, support patients earlier in their opioid use disorder (OUD) care, and improve safety, respect, and autonomy for patients with OUD.

How much does this cost? <$5K

For more information, email Cathy Schultz, RIDOH and download the printable Words Matter Guide.

Harm Reduction Vending Machines

Harm reduction vending machines are utilized in many places to reach individuals who may not have access to traditional harm reduction services. They ensure that harm reduction supplies are available 24 hours a day, seven days a week without being limited by traditional drop-in center hours.
These machines can contain a variety of supplies including: naloxone, fentanyl test strip kits, condoms, hygiene kits, and harm reduction kits (syringes, alcohol prep pads, cotton, clean water, Band-Aids, antibiotic ointment, tourniquets, cooker/caps, and sharps disposal box). Large sharps disposal boxes can also be co-located with these vending machines to keep communities safe and clean by promoting proper disposal of syringes.

**What do we know about this intervention?**

Harm reduction vending machines have been proven effective with little to no adverse consequences. The evidence suggests that vending machines can improve access to sterile needles and other harm reduction equipment in a cost-effective way.

**How much does this cost?** $5K-$10K

*For more information, visit AIDS Care Ocean State.*

**Harm Reduction Centers**

Harm reduction centers, also known as safe use sites or overdose prevention centers, are a vital part of the State’s strategy to reduce overdose deaths, save lives, and connect people to essential treatment and recovery support services.

In July 2021, Governor Daniel J. McKee signed legislation allowing for a harm reduction center pilot program in Rhode Island. Rhode Island’s Harm Reduction Centers regulations outline standard practices and services for harm reduction centers to ensure the health, safety, and wellbeing of all clients and staff. These locations allow people to safely consume pre-obtained substances in a supportive environment. These centers can be medically or peer-supervised, and stationary, mobile, housing, or hospital-based. Regardless of model, all harm reduction centers provide access to sterile equipment, an immediate overdose response, and integration with existing services such as substance use/medical treatment, harm reduction supplies, and other wrap-around services.

**What do we know about this intervention?**

There are more than 120 harm reduction centers in 10 countries around the world. This is a highly researched strategy that has shown to be extremely effective. Harm reduction centers have been found to increase treatment engagement and utilization of other services, increase safer use practices, and are cost-effective. Furthermore, they also decrease overdose deaths, all-cause mortality among people who use drugs, syringe reuse and sharing, and litter and crime surrounding the location. Critically, there has never been a death in a harm reduction site.

**How much does this cost?** $10K+

*For more information, visit PreventOverdoseRI.org or email Lauren Conkey, RIDOH.*
Rescue: Data-Informed Initiatives and Resources

**Rescue measures** can be taken to save that person's life in the event of an individual experiencing an overdose. These measures can include actions taken by community members, EMS or other first responders, and healthcare professionals.

**Promoting the Rhode Island Good Samaritan Law (GSL)**

Rhode Island’s [GSL](#) provides immunity for those who call for medical assistance in case of an overdose. It is important to educate the public about the GSL so that people call 9-1-1 in the event of an overdose. Use of plain language should be considered in the design of any GSL-related educational materials. Consider promoting messaging to culturally diverse populations, law enforcement, people who are actively using drugs, patients enrolled in medication-assisted treatment, and the general public.

**What do we know about this intervention?**

There is evidence to suggest that more education on GSL is needed and that knowledge of the GSL is associated with increased 9-1-1 emergency-calling behavior.

**How much does this cost?** <$5K

**For more information**, learn about the [Good Samaritan Law](#) and email [Michelle McKenzie](#) PONI.

**Opioid Overdose Education and Naloxone Distribution (OEND)**

Providing opioid overdose education and distributing naloxone can save lives and support people who are currently using substances. Key components of the OEND program include education and training regarding opioid overdose prevention, recognition of opioid overdose, opioid overdose rescue response, and issuing naloxone kits. First responders participate in annual training. There is opportunity for EMS/law enforcement and community members to train and learn together.

**What do we know about this intervention?**

OEND has been found to have a low rate of adverse events and to reduce overdose-related mortality. Citing thousands of naloxone rescues from laypeople, the Centers for Disease Control and Prevention (CDC) calls for more comprehensive naloxone distribution and training with respect to layperson rescue.

**How much does this cost?** $5K-$10K

**For more information**, visit [URI](#) or [PONI](#)

**NaloxBoxes**

NaloxBoxes are cabinets installed in public settings allowing bystanders to access naloxone to respond to an opioid overdose. Each NaloxBox has the capacity to hold four doses of naloxone and contains a mask for rescue breathing, gloves, alcohol pads, and overdose recognition and response materials in both English and Spanish. RIDOH’s [Substance Use Epidemiology Program](#) can provide municipalities with overdose hot spot map information to identify potential locations of NaloxBoxes.
What do we know about this intervention?

Studies consistently show that community-based naloxone distribution is highly cost-effective, even under conservative assumptions. These cabinets ensure that naloxone is easily accessible in areas that experience a high burden of overdose. There are many NaloxBoxes located throughout the state, with at least 30 installed by municipal Fire/EMS or police.

How much does this cost? <$5K

For more information, visit NaloxBox.org.

Rhode Island Safe Stations

Individuals can visit any fire station and many police stations, speak with the trained staff on duty, and immediately get connected to treatment and recovery support and services. Staff are available 24 hours a day, seven days a week and are trained to provide both mental health and substance use resources.

What do we know about this intervention?

The use of Safe Stations is an important strategy that has been employed in several Rhode Island municipalities, including Providence. According to the Providence Fire Department data, there have been nearly 200 Safe Station calls since 2020.

How much does this cost? $5K-$10K+

For more information, view the Safe Stations Implementation Guide or email Carolina Roberts-Santana, RIDOH, or Chief Zachariah Kenyon, Providence Fire Department.

Post-Overdose Outreach Program

Post-overdose outreach programs can be highly effective. Consider modeling a program after the former Drug Overdose Prevention Pilot Program at the West Warwick Police Department. This program placed a Behavioral Health Navigator within the department to provide outreach to individuals who received police response for an overdose. The Navigator rode along with officers on patrol to help divert people with mental health and substance use conditions into treatment and away from the criminal justice system. Outreach also included the provision of resource information, naloxone distribution, direct connection to treatment/recovery supports, and family support. The Navigator also provided an important role in training first responders on topics such as behavioral health conditions, substance use, and non-stigmatizing language.

What do we know about this intervention?

Per the North Carolina Harm Reduction Coalition, a follow-up visit conducted within days of a naloxone reversal serves as an opportunity to direct people who use drugs to harm reduction services and treatment/detoxification services when they are ready to reduce or stop their use; to provide naloxone, overdose prevention training and overdose prevention materials; and, to connect stakeholders involved in overdose response to work together to reduce overdose mortality.

How much does this cost? Cost varies; $5K-$10K+

For more information, email Heather Seger, RIDOH and Carolina Roberts-Santana, RIDOH, and visit LEAD National Support Bureau.
Treatment: Data-Informed Initiatives and Resources

**Treatment** is intended to help people manage their substance use conditions. Treatment can occur in a variety of settings utilizing an array of clinical approaches for different lengths of time depending on the unique needs of an individual's recovery. It can include medications as well as other evidence-based interventions and therapies.

**Expanding Treatment Access**
The number one shared goal for the Statewide Opioid Settlement funding is to expand treatment to in-need populations who are at risk for an overdose. In order to do so, it is vital to have access to a local treatment facility. Municipalities can assist with the expansion process by identifying local buildings that can be utilized to house treatment agencies. Loan repayments, rental assistance, assistance with zoning issues, and construction approvals are ways that can make treatment accessible to local, underserved populations.

Additional State Settlement funding can support the local expansion process of treatment facilities by offering startup funding for the first six months including construction, furniture, staffing, and more.

**What do we know about this intervention?**
The National Institute on Drug Abuse (NIDA) reports that 80% of the people who needed treatment for illicit drug use did not receive treatment.

- Opioid Use Disorder Treatment | National Institute on Drug Abuse (NIDA) (nih.gov)
- Linking People with Opioid Use Disorder to Medication Treatment (cdc.gov)

**How much does this cost?** $5K-$10K

**For more information,** email Linda Mahoney, BHDDH; 401-462-3056.
Recovery: Data-Informed Initiatives and Resources

Recovery is a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.

Expansion of the Rhode Island Imani Faith-Based Community Recovery Program
BHDDH is implementing the Imani Project, a pilot program working within faith-based organizations in areas deemed at high risk for opioid overdoses. The goal is to support the implementation of the Yale University faith-based Imani model on how to engage Black and Latino populations to build strong community-based referrals for treatment and recovery supports at the culturally appropriate community level. The pilot program initially is limited to two faith-based organizations and has potential to be expanded.

This program provides an innovative approach to engaging vulnerable groups into substance use disorder (SUD) treatment, by focusing on the Substance Abuse and Mental health Services Administration (SAMHSA)’s eight dimensions of wellness (social determinants of health/SDOH), seven domains of citizenship, culturally informed education, and referral to medication-assisted treatment (MAT) or any FDA-approved pharmacotherapy for treating a substance use disorder as needed.

Municipalities can support this program by providing space for the mobile mental health van to schedule regular stops. Also consider engaging out-patient providers who provide grief support by providing a space and media coverage for community events to address local losses.

What do we know about this intervention?
The Imani Breakthrough Project was established in Connecticut in 2018. It is a collaborative, culturally centered, and community-driven faith-based opioid recovery initiative.

How much does this cost? $5K-$10K

For more information, Ericka Mack Andrews, BHDDH; 401-462-3056.

Support a Local Recovery Community Center
Recovery community centers exist to provide information, education, non-clinical recovery support, and a peer-based supportive community that builds hope and supports healthy behaviors for individuals with a behavioral health condition.

What do we know about this intervention?
Studies show that individuals connected to recovery community centers have more resources to sustain their recovery than those who aren’t connected, as well as higher self-esteem, higher quality of life, and lower psychological distress.

How much does this cost? $1K-$10K

For more information, connect with a local Recovery Community Center or email Sarah Saint Laurent, BHDDH; 401-462-0950.
**Support Rally 4 Recovery RI**

The Rally 4 Recovery is Rhode Island’s largest celebration honoring National Recovery Month every September. There are multiple events across the state during September, with the main event being held in Providence. This free, family-friendly festival has guest speakers, food, live music, activities for children and adults, and more. The event ends each year with a brief, but powerful ceremony, commemorating those we have lost, and celebrating the reality that recovery changes lives, is possible, and is happening. Provide financial support for the Rally 4 Recovery, or work with partners to help promote local events in your community.

**What do we know about this intervention?**
The Rally has grown each year since its start in 2003. It has received multiple awards – SAMHSA’s “Best Rally in United States” Award in 2010 and a designation as the 2013 National Hub Event for Recovery Celebrations by Faces and Voices of Recovery. This event is attended in large numbers and is beloved by the recovery community of Rhode Island.

**How much does this cost?** $1K-$10K

**For more information**, visit Rally4RecoveryRI.

**Family Supports**

By utilizing local and other resources, municipalities can develop a network of support and programming for families affected by overdose in your municipality. This is intended for families affected by opioid-related trauma (i.e., overdose or family member struggling with opioid use).

**What do we know about this intervention?**
Community reinforcement training for families and significant others of people who use drugs is a way to help improve relationships with the person who uses drugs, as well as a unilateral intervention to increase treatment entry.

**How much does this cost?** <$5K

**For more information**, visit Friends Way or the Family Task Force.

**Recovery Friendly Workplace Initiative**

Recovery Friendly Workplaces (RFW) support people and their communities by recognizing recovery from substance use disorder as a strength. They work intentionally with people in recovery by creating a safe, healthy environment where employers, employees, and communities can collaborate to create positive change and eliminate barriers for those who are impacted by substance use. Recovery friendly advisors will work with interested employers in finding evidence-based practices to meet their needs and help develop and sustain the RFW initiative in the workplace.

**What do we know about this intervention?**
Workplaces that implement evidence-based health and safety programming retain healthier, more productive, and more motivated employees. There are over 60 employers in RI who are RFWs, including RIDOH, Blue Cross Blue Shield, and the City of East Providence.

**How much does this cost?** <$5K

**For more information**, visit RecoveryFriendlyRI.com or email Jonathon Goyer, RFW.
Communication Resources

Municipal leaders and community partners can use these resources to share critical public health messaging about overdose and substance use via social media, direct email, websites, and newsletters.

Govener’s Overdose Prevention and Intervention Task Force
The monthly newsletter for the Governor’s Task Force includes meeting presentations, community updates, funding opportunities, local resources, and more. Read previous newsletters and subscribe today.

RIDOH Publications and Materials on Addiction and Overdose
RIDOH’s website, health.ri.gov, offers educational materials and publications about addiction and overdose topics that can be shipped free of charge. Use this form to order these materials.

Prevent Overdose RI (PORI) Website Resources
Rhode Island’s overdose information website offers information relevant to specific audiences.
- Healthcare Providers
- First Responders
- People Who Are Impacted by Overdose and Substance Use
- People Who Use Drugs
- People Who Are In Recovery

Download and share PORI’s infographics on PORI's Social Media Toolkit webpage and share them via newsletters, websites, and social media platforms (Facebook, Twitter, or Instagram).

Post a public event on PORI’s Local Events webpage.

Campaign Toolkits
These campaign toolkits contain ready-to-use social media messaging, graphics, and education materials to communicate about substance use, mental health; and connection to Rhode Island’s resources and services. Messaging is available in English and Spanish.
- Three Words Can Make a Difference: Communication Toolkit
- Small Amount: Communication Toolkit
- Pregnant People and Mothers Who Use Substances and Their Substance-Exposed Newborns: Communication Toolkit

Community-Centered Narcan® Training Video
Project Weber/RENEW created a Narcan® training video so people can better access information on how to respond to an overdose and save lives. The video is peer led and represents a community-centered approach. Use this link to share the video with your networks.

Opioid Overdose Rescue: 5 Ways to Save a Life
Watch this six-minute training video to learn how to recognize when someone may be overdosing on opioids and provide life-saving assistance. Use this link to share with your networks.

Public Health Alerts for Increased Overdose Activity
RIDOH and BHDDH send Rhode Island Overdose Action Area Response (ROAAR) public health advisories to a variety of stakeholders to alert these audiences of increased drug overdose activity occurring throughout the state. Sign up to receive ROAAR alerts and get connected to local resources to address substance use and overdose in your community.
RIDOH’s Drug Overdose Surveillance Data Hub
Get up to date, municipal-level drug overdose information, including non-fatal and fatal overdose data focused on municipal, county, and statewide trends. This Data Hub is managed by RIDOH’s Substance Use Epidemiology Program.

Words Matter Guide
Rhode Island’s Words Matter Guide models language and messaging to help communicate person-first language related to behavioral health conditions, developmental and/or intellectual disabilities, sexual orientation, and gender identity. These recommendations are intended to make it easier to talk with people, write about them, and share their stories. Click here to access the Guide.