



Governor Dan McKee's Overdose Task Force

June 12, 2024

Richard Leclerc; Director, Rhode Island Department of Behavioral Healthcare, Developmental Disabilities & Hospitals
Philip Chan, MD, MPH; Consultant Medical Director, Rhode Island Department of Health
Ana Novais, MA; Assistant Secretary, Rhode Island Executive Office of Health and Human Services
Thomas Joyce, LCDP, CPRS; Task Force Community Co-Chair
Cathy Schultz, MPH; Task Force Director, Rhode Island Executive Office of Health and Human Services

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Welcome and Announcements

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Taking Pause to Recognize Juneteenth





Celebration of Rhode Island Pride Month

Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ+) Pride Month is held each year in the month of June and is dedicated to celebration and commemoration of LGBTQ+ pride.

The purpose of the commemorative month is to recognize the impact that lesbian, gay, bisexual, and transgender individuals have had on history locally, nationally, and internationally.

Rhode Island PrideFest and Parade (prideri.org)

Saturday, June 15, 2024

South County Pride Parade (www.tinyurl.com/49b78zab)

Saturday, June 22, 2024

Newport Pride Festival (www.newportprideri.org)

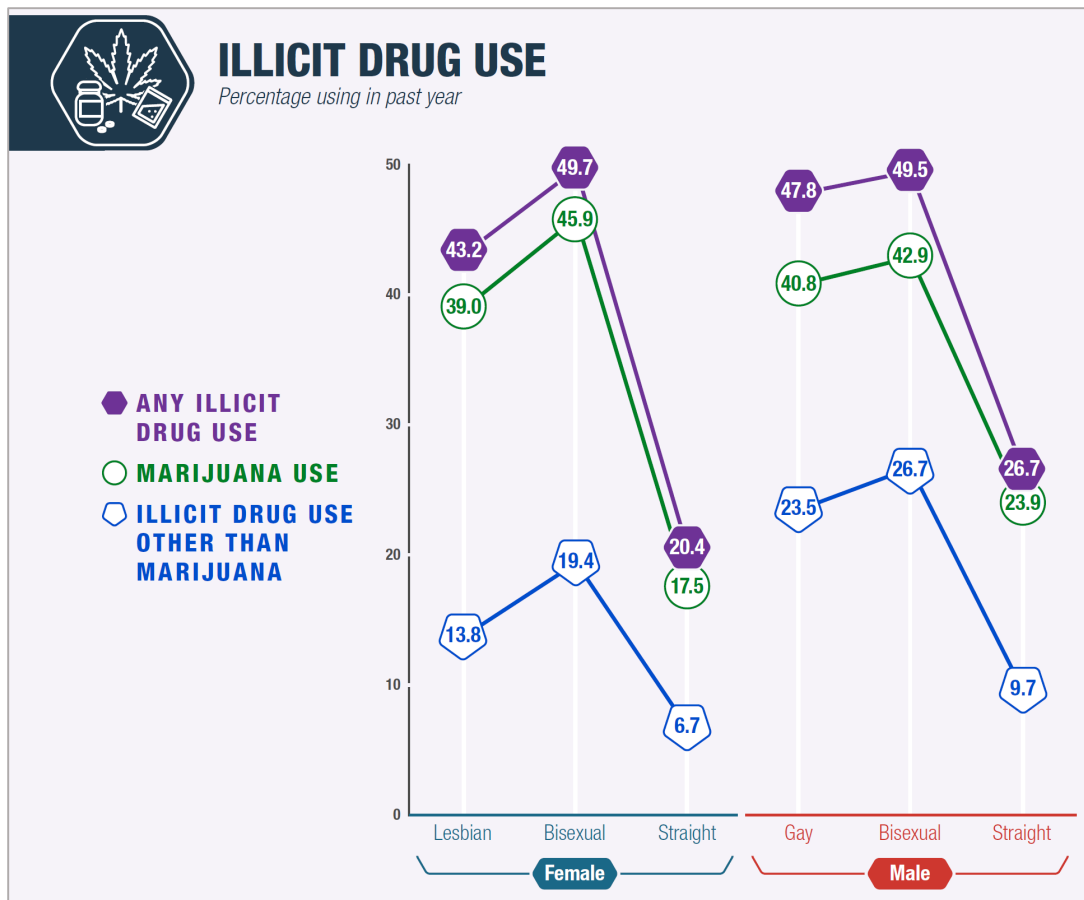
Saturday, June 29, 2024



*Pride Month began to honor the Stonewall Uprising in Manhattan in June of 1969.



Addressing Disparities in the LGBTQ+ Community



*Source: The National Survey on Drug Use and Health (NSDUH) is an annual household survey sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), June 13, 2023.

- **Sexual minority males** were **2 to 3 times more likely** than straight males to have used illicit drugs other than marijuana in the past year.
- **Sexual minority females** were **2 to 3 times more likely** than straight females to have used illicit drugs other than marijuana in the past year.

ILLICIT DRUG USE includes the use of marijuana, cocaine, heroin, hallucinogens, inhalants, and methamphetamine, as well as the misuse of prescription drugs (pain relievers, tranquilizers, stimulants, or sedatives). **MISUSE OF PRESCRIPTION DRUGS** means use in any way not directed by a doctor, such as use without a prescription of one's own, or use in greater amounts, more often, or longer than told to take a drug.

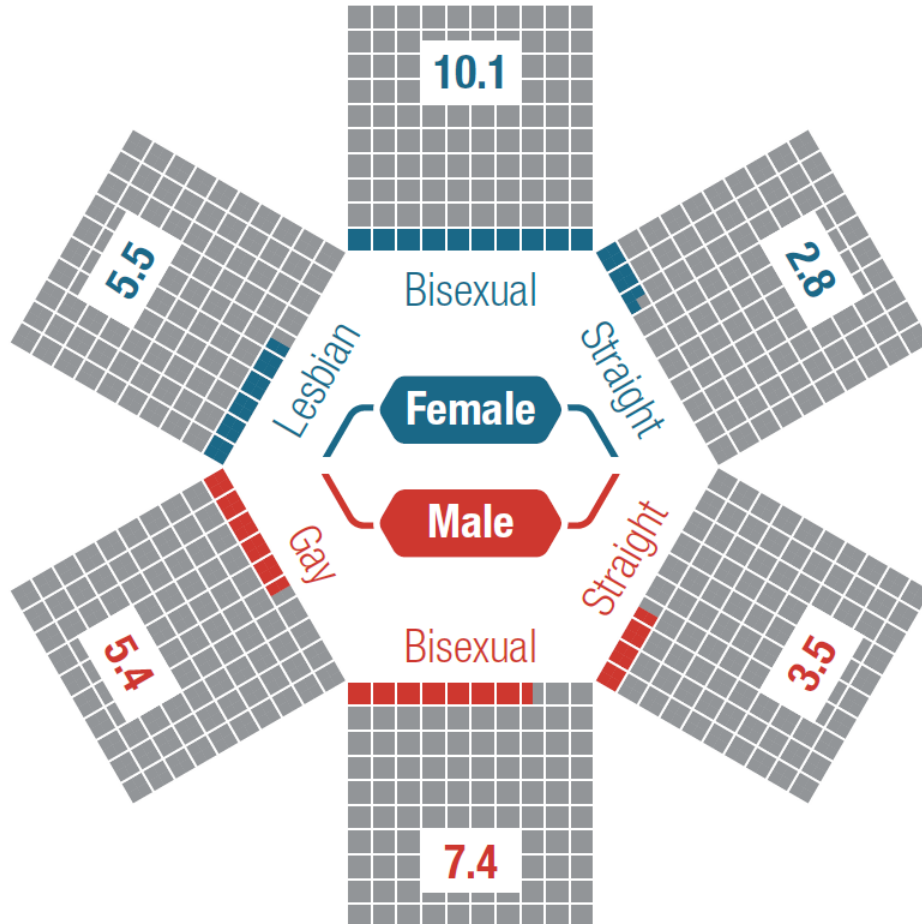
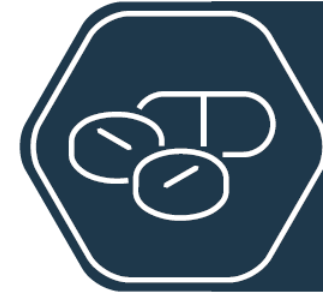
Note: Estimates were age adjusted to the adult age distribution of the 2000 U.S. standard population.

- **Sexual minority adults** were **at least twice as likely** as straight adults to have misused any CNS stimulant in the past year. Roughly similar patterns held for each individual CNS stimulant (cocaine, methamphetamine, or prescription stimulants).

Addressing Disparities in the LGBTQ+ Community

OPIOID MISUSE

Percentage misusing in past year



- ◆ **Bisexual females** were **almost twice as likely as lesbian females** and **more than 3 times as likely** as straight females to have misused opioids in the past year.
- ◆ **Bisexual males** were **about twice as likely** as straight males to have misused opioids in the past year. The prevalence **did not differ** between **gay males** and straight males.

Note: Estimates were age adjusted to the adult age distribution of the 2000 U.S. standard population.



Conclusion: What Can We Do?

Create an **affirming** and **welcoming** environment.

Ensure **surveillance** and **evaluation** approaches collect **sexual orientation and gender identity data**.

Provide education and training to staff and organizations about **LGBTQ+ cultural competency** (i.e., using the correct pronouns).

Address other concerns related to **LGBTQ+ health** (i.e., HIV care and prevention among gay and bisexual men).

Targeted place-based and/or community-hub approach to substance use prevention, screening, harm reduction, treatment, and recovery for LGBTQ+



Overdose Response Strategic Alignment and Decision-Making Process Overview

Assistant Secretary Ana Novais, MS
Executive Office of Health and Human
Services

Overdose Strategic Plan (Roadmap)

Color Code Key:

Cross-Cutting Components

Core Pillars

I. Ensuring Racial Equity and Eliminating Disparities

II. Building Strong Governance and Community Engagement

III. Expanding Data Capacity and Surveillance

IV. Addressing the Social Determinants of Health

1. Reinforcing Comprehensive Prevention

2. Strengthening Harm Reduction and Rescue

3. Increasing Investment in Treatment

4. Supporting Recovery

Cross-Cutting Components

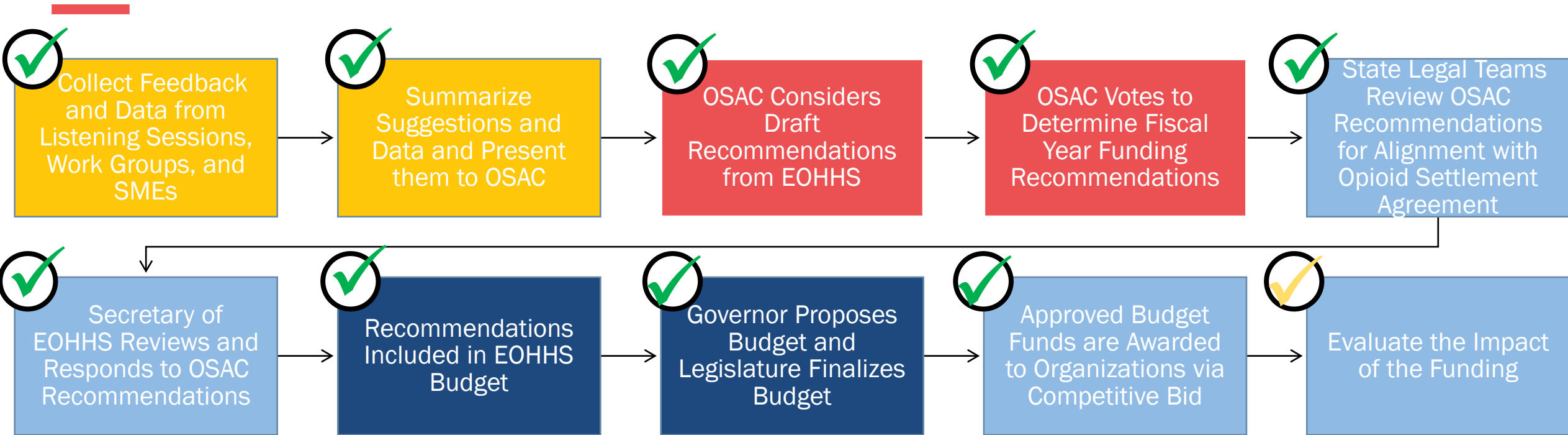
Core Pillars

The Governor's Overdose Task Force has set forth the following outcomes:

- To end the overdose crisis
- Ensure racial equity is embedded across all pillars: Prevention, Rescue/Harm Reduction, Treatment, and Recovery
- Improve lives and uplift community voices
- Use data to drive change
- Build connections to care

The Task Force remains committed to addressing the root causes of overdose, including the socioeconomic factors that influence health.

Process for Aligning Investments to Overdose Strategies



State Budgeting Process
Fully Explained on Next Slide

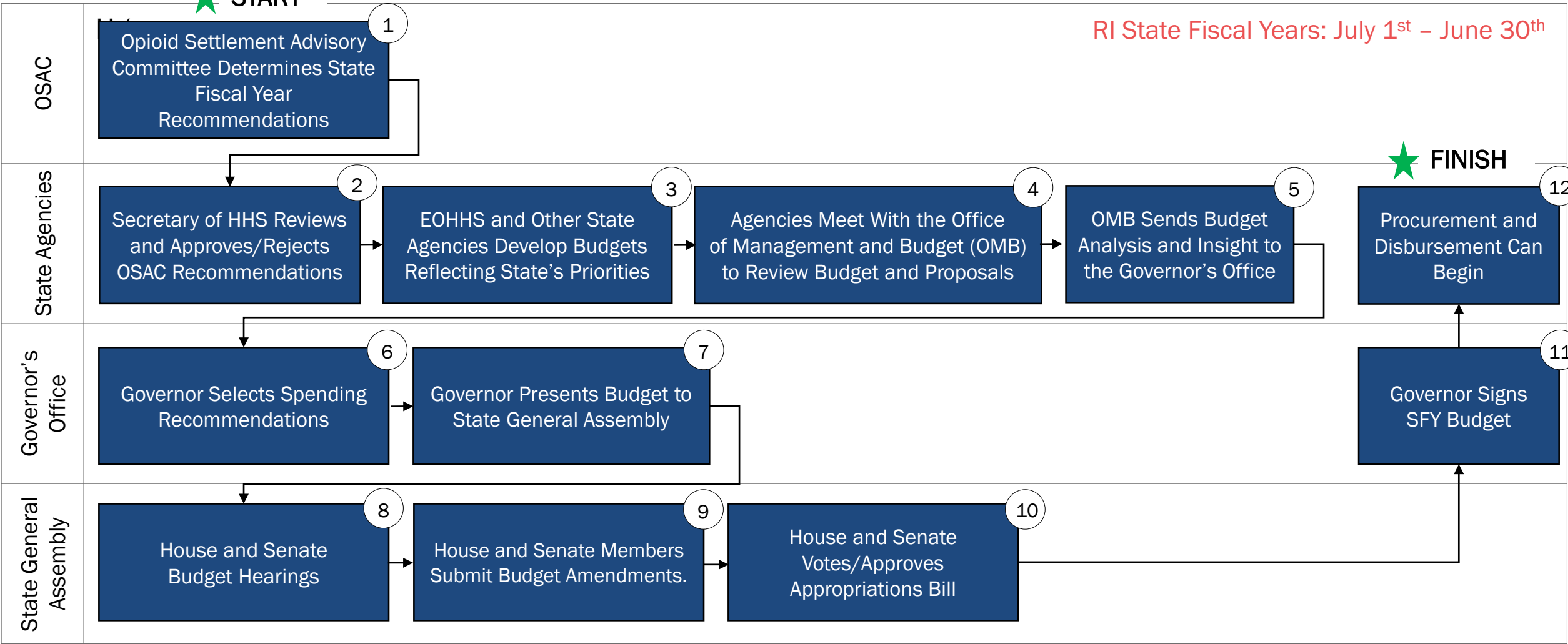
Responsibility by Color Code	
	EOHHS
	Opioid Settlement Advisory Committee
	Governor's Overdose Task Force
	State Budgeting Process

State Budgeting Process for Task Force Recommendations

RI State Fiscal Years: July 1st – June 30th

★ START

★ FINISH



(NOTE: General Assembly may increase, decrease, alter, or strike out any item in the budget.)

Summary of Community Conversations and Work Group OSAC Recommendations

Cathy Schultz, MPH,

Governor's Overdose Task Force Director

2024 Governor's Overdose Task Force (GOTF) Funding Recommendations Process

In February 2024, the Task Force Director facilitated conversations with Work Group Co-Chairs to complete recommendations slides for FY2026

GOTF Working Group Co-Chairs

- In February 2024, GOTF Work Group co-chairs were provided with template slides and a copy of the Strategic Plan to collect community input for FY2026 OSAC recommendations. They were asked to select 3-5 activities and focus on sustainability, evidence-based strategies, and strategic plan alignment.

Work Group Recommendation Process

- Each work group used the months of March and April to collect recommendations, either during their meetings and/or through surveys. The Rescue and Harm Reduction work groups coordinated and combined their recommendations.

GOTF Community Conversation Meeting

- The May 2024 GOTF meeting included a community conversation with breakout sessions to reflect eight areas of focus: Racial Equity, SDOH (Housing and basic needs); SDOH (family); Emerging Issues, Prevention, Harm Reduction, Treatment and Recovery.

Report Outs

- In May and June 2024, the Task Force Director reported out the key takeaways from the May Community Conversation breakout sessions with the work group co-chairs and Task Force for final feedback.

Example - Priorities by GOTF Working Groups (SFY 2026)

Each of the GOTF working groups were asked to complete the following slides explaining the purpose, strategies, and financial priorities of their respective groups.

- I. Communications
- II. Data
- III. Family Task Force
- IV. First Responders
- V. Harm Reduction
- VI. Prevention
- VII. Race Equity
- VIII. Recovery
- IX. Rescue
- X. Substance Exposed Newborns
- XI. Treatment

Example – Work Group: Funding Priorities

#	Priority	Expected Impact	Geographic Reach (Statewide/Local)
1			
2			
3			
4			
5			

Feedback from the May 8 Governor's Overdose Task Force Meeting

There were eight breakout sessions and this presentation features highlights from discussions on the following topics:

1. Racial Equity
2. Emerging Response to Changing Epidemic
3. Social Determinants of Health (SDOH) – Family
4. Social Determinants of Health (SDOH) – Housing
5. Prevention
6. Harm Reduction and Rescue
7. Treatment
8. Recovery

Ensuring Racial Equity and Eliminating Disparities

Strategies	Recommendations from the GOTF
<p>Ensure that the Race Equity conversation is being embedded across all pillars</p>	<ul style="list-style-type: none">• Diversify workforce across all pillars (Prevention, Harm Reduction, Treatment, and Recovery) ensuring livable wages and professional development opportunities.• Incentivize agencies to hire people of color and offer living wages, staff trainings, community workshops and a diversity of professionals with lived experiences in the substance use field.• Create more funding and resource opportunities for qualitative data collection to inform Task Force decision-making and support work groups• Increase community-led marketing and educational resources targeting marginalized communities and people of color, including youth. Ensuring cultural competence and multilingual communication.

Building Strong Governance and Community Engagement

Strategies	Recommendations from the GOTF
<p>Emergency Funds and Municipal Alignment</p>	<ul style="list-style-type: none">• Continue to sustain emergency funding to address emerging issues and changing drug supply• Increase local level overdose prevention response through community engagement initiative opportunities (CODE)• Increase municipal representation at the Task Force
<p>Track what we do and create line of accountability while strengthening community's voice in the Task Force, including people with living and lived experience</p>	<ul style="list-style-type: none">• Sustain Community Co-Chairs stipends and diversify Task Force and Opioid Settlement Advisory Committee

Expanding Data Capacity and Surveillance

Strategies	Recommendations from the GOTF
<p>Ensure that data is disaggregated by race/ethnicity</p>	<ul style="list-style-type: none">• Sustain staff support to manage the Harm Reduction metrics dataset, tracking needle distribution, safe smoking kits, fentanyl test strips, and ensure these are equitably distributed in Rhode Island.
<p>Pursue additional data-sharing between RIDOH, across state agencies, and community organizations</p>	<ul style="list-style-type: none">• Sustain staff support for Substance Use Epidemiology Program to manage the Harm Reduction Surveillance System and other data requests.• Sustain leadership and oversight of the State’s mandated Overdose Fatality Review (OFR) Team.• Sustain laboratory and contractor to monitor drug supply

Addressing the Social Determinants of Health (Communications)

Strategies	Recommendations from the GOTF
<p>Increase the building of community capital through education and messaging (Communications)</p>	<ul style="list-style-type: none">• Increase diversity in marketing and educational resources through a comprehensive marketing campaign to reach the urban core, people of color and BIPOC youth that are culturally relevant (See racial equity)• Educational materials, text messaging (printed, social media toolkits, etc.)• Public website (PreventOverdoseRI.org) ensuring equity and transparency• Community-based funding opportunities of translation services, campaigns, compensation for feedback, etc.• Communications campaigns (review existing campaigns to ensure they are equitable) and create new campaigns with a focus on family perspectives, Veterans, prenatal care, youth, use of stimulants, and other emerging issues

Addressing the Social Determinants of Health

Strategies	Recommendations from the GOTF
<p>Focus on disparities across all pillars, (i.e., housing, stable employment, etc.)</p>	<ul style="list-style-type: none">• Mobile medical respite (wound care) and referrals to medical respite• Continue reentry and other housing supports• Continue basic needs supports• Expanded oral health access for SUD/ODD clients• Continue non-profit capacity building opportunities
<p>Provide safeguards to address and improve social connectedness and social determinants</p>	<ul style="list-style-type: none">• Offer grief and trauma support for those who have lost a loved one to overdose and for families who have witnessed an overdose, both fatal and nonfatal.• Sustain and increase access to trauma supports for peer recovery specialists• Advocate for livable wages for families and individuals so they do not have to work multiple jobs

Reinforcing Comprehensive Prevention

Strategies	Recommendations from the GOTF
Implement evidence-based primary prevention in schools, professional settings, and high-risk communities	<ul style="list-style-type: none">• All priority schools (middle and high school) will be equipped to intervene on youth behavioral health needs of students and prevent further complexity (e.g., substance use disorder)• Sustain and expand existing after school, mentorship, and leadership development programs for youth and young adults
Incorporate prevention for workplace injuries, disability leaves, and rehabilitation services	<ul style="list-style-type: none">• Continue to sustain BIPOC construction initiative (across treatment and recovery pillar)
Prioritize prevention strategies that recognize race equity, eliminate structural racism and disparities	<ul style="list-style-type: none">• Prioritize prevention strategies that recognize race equity, eliminate structural racism and disparities based on race, ethnicity, sexual orientation, gender, gender identity, age, and ability.

Strengthening Harm Reduction and Rescue

Strategies	Recommendations from the GOTF
Sustain naloxone accessibility via a statewide plan and evaluate impact	<ul style="list-style-type: none">• Sustain infrastructure for statewide, centralized IM and IN naloxone hub, including storage, distribution, education, training, data collection and evaluation.
Maximize access to harm reduction materials and resources	<ul style="list-style-type: none">• Sustain infrastructure for harm reduction tool hub (i.e., fentanyl test strips, safe smoking kits, safe snorting kits, condoms, wound care, basic needs, etc.)• Sustain vending machines and expand access to harm reduction supplies including 24-hour access.• Sustain and expand innovative strategies and develop infrastructure to reduce fatal overdose in private settings for people who use alone.• Prioritizing using language from the HR/Rescue perspective in communications and include messaging on stimulant use risk.

Strengthening Harm Reduction and Rescue

Strategies	Recommendations from the GOTF
<p>Ensure harm reduction services are comprehensive and responsive to the evolving needs of people who use drugs</p>	<ul style="list-style-type: none"> • Support overdose prevention center through education, infrastructure, and advocacy • Sustain and expand drug user health to address prevention and treatment of infectious diseases and access to treatment • Sustain existing harm reduction mobile outreach teams • Increase street outreach for women of childbearing age with substance use conditions including perinatal harm reduction toolkit. • Sustain and expand infrastructure to perform drug checking in high-risk communities
<p>Improve alternate post-overdose engagement strategies</p>	<ul style="list-style-type: none"> • Expand Safe Landings • Improve post-overdose warm-hand offs and referrals through innovative bridge programs
<p>Prioritize racial equity-focused harm reduction outreach strategies, including to undocumented people</p>	<ul style="list-style-type: none"> • Prioritize racial equity-focused harm reduction outreach strategies, including to undocumented people

Increasing Investment in Treatment

Strategies	Recommendations from the GOTF
Increase capacity and reduce barriers to ensure treatment-on-demand	<ul style="list-style-type: none">• Increase access to various levels of treatment, including but not limited to MOUD; increase services to women and children, and reduce racial and cultural access barriers• Continue funding the Buprenorphine Hotline• Expand treatment services for people of color using stimulants and other substances leveraging funding through OSAC and other state and federal funds.• Expand contingency management in non-outpatient treatment programs (OTP) settings
Improve partnerships among SUD and primary care providers	<ul style="list-style-type: none">• Explore nurse liaison model training-Stimulant use disorder (StUD) and substance use disorder (SUD) retention/case management, anti-stigma education, referrals, and training

Supporting Recovery

Strategies	Recommendations from the GOTF
<p>Build recovery capital across personal, family/social, community, and cultural environments</p>	<ul style="list-style-type: none"> • Sustain recovery-friendly workplace initiatives • Increase quality and availability of recovery housing through continued support of existing houses and expansion of new houses • Expand family supports and caregiver connection across the state focusing on BIPOC and Latino communities by developing family peer workforce and evidence-based supports • Continue to provide sponsorships and support for IOAD and Rally4Recovery • Increase support of recovery community centers to become the focal point of recovery services in the community • Sustain existing faith-based resources in disproportionately impacted communities • Create a regularly updated community recovery resource guide that is available both via an app and as a download off a website
<p>Recruit, support, expand, and train peer recovery specialists</p>	<ul style="list-style-type: none"> • Expand and continue career opportunities, trainings, and professional development for peer workforce and ensure a livable wage
<p>Support substance exposed newborn interventions</p>	<ul style="list-style-type: none"> • Sustain and expand evidence-based peer support interventions for prenatal and postnatal people

Thank you

Cathy Schultz, MPH, Governor's Overdose Task Force Director

Cathy.A.Schultz@ohhs.ri.gov

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Racial Equity Work Group (REWG) Update

June 12, 2024

Governor's Overdose Task Force

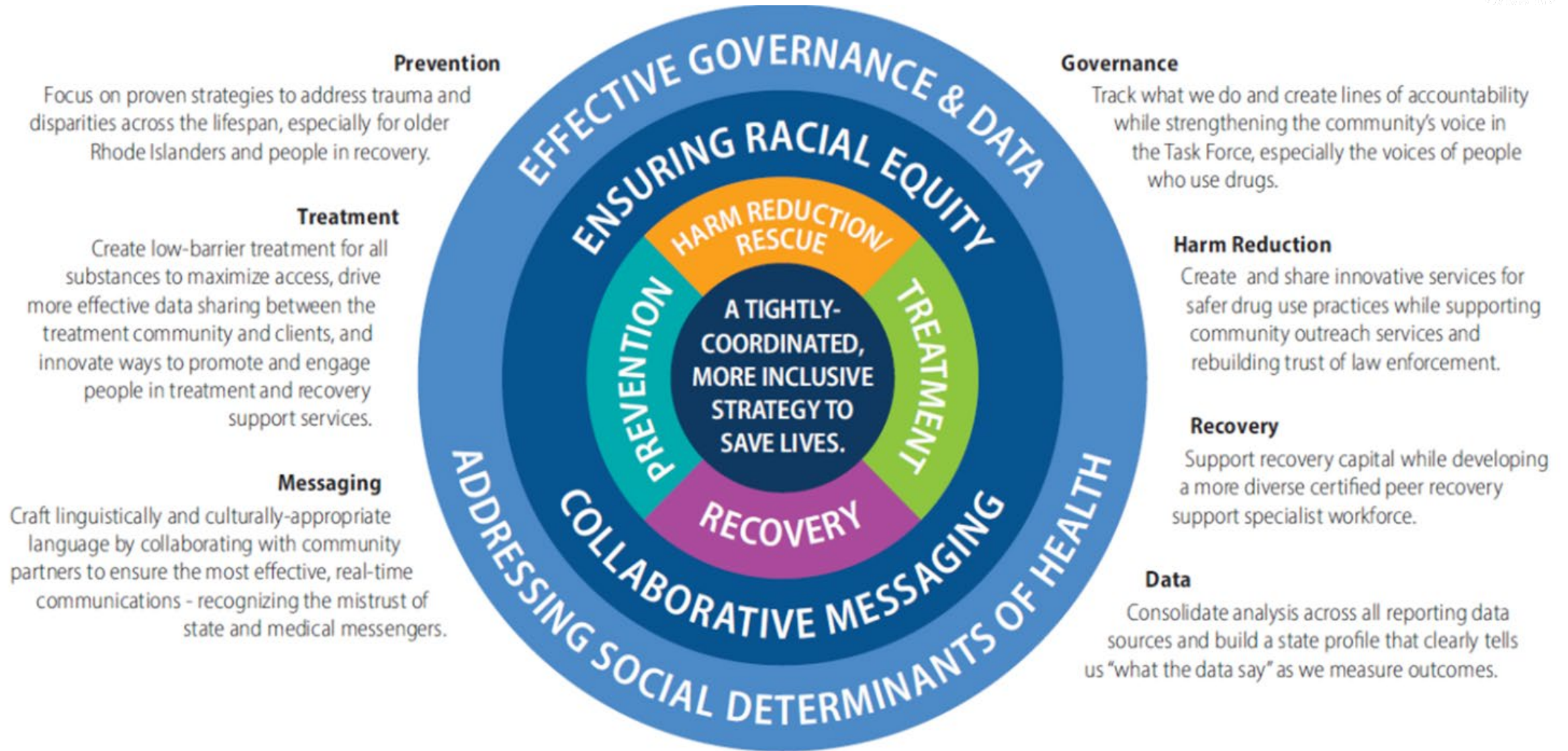
Monica B. Tavares, BA; Education and Outreach Coordinator, Rhode Island Department of Health

Dennis Bailer; Overdose Prevention Program Director, Project Weber/RENEW

Carlene Fonseca; Owner, The Greatest You Consulting and Member of Pawtucket/Central Falls Health Equity Zone

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Governor's Overdose Task Force Priorities



REWG Purpose Statement



This work group seeks to address racial equity in healthcare, advocate for criminal justice and legislative reforms, and increase the diversity in leadership roles in the 10 working groups across the Task Force Overdose Prevention Strategic Plan and empower members to bring a racial equity lens to all other work groups of the Governor's Overdose Task Force.

Racial Equity Definition



Racial equity is a process of eliminating racial disparities in the:

- availability, accessibility, and perception of treatment and services;
- leadership/power in structures and systems; and
- overall health and life circumstances.

It is the intentional and continual practice of changing the:

- makeup of decision-making bodies and leadership;
- policies across multiple systems;
- perceptions of the system; and
- diversity in the landscape of service providers by prioritizing measurable change in the lives of people of color.

REWG Current Infrastructure



Affinity Group

The Black, Indigenous, and People of Color (BIPOC) Affinity Group is a space to understand the experiences, challenges, and barriers professionals of color face while providing services. Organizations are encouraged to send BIPOC staff as representatives to participate.

- Identify ways staff could align our work with a racial equity lens;
- Network to discuss professional development needs and training opportunities;
- Share experiences and challenges; and
- Identify solutions and support systems.

Expert Advisory Panel

A network of experts in content areas that disproportionately impact the people of color community. Provide support to the Governor's Overdose Task Force work groups to assure that racial equity is integrated into interventions brought to REWG for feedback.

Racial Equity Policies

Address policies, practices, systems, and structures by prioritizing measurable changes in the lives of people of color.

Racial Equity Implementation



REWG Recommended Changes

- Collaborated with RIDOH's communications team on the *Small Amount* public awareness campaign to make changes to billboard and bus shelter advertisements, so that the risks of fentanyl contamination in **crack cocaine** and a variety of other substances are front and center.

Phase 1



Phase 2



Racial Equity Implementation

Provided input on descriptive language to be more inclusive of people of color on RIDOH materials.

Phase 1

How to Recognize an Overdose

Common signs to look out for

Slow breathing

A person may have very slow, shallow breaths, make gurgling noises, or stop breathing.



Trouble waking up

A person may be awake but unable to talk, or may not respond when you try to wake them up.



Turning Pale

They could look very pale or have blue lips and fingernails.



Phase 2

How to Recognize an Overdose

Common signs to look out for

Slow breathing

A person may have very slow, shallow breaths, make gurgling noises, or stop breathing.



Trouble waking up

A person may be awake but unable to talk, or may not respond when you try to wake them up.



Changes to skin tone

A person's skin tone can turn grayish or ashen to bluish purple.



What to do next?

Call 9-1-1, give naloxone, and support ventilation if the person doesn't respond.



For 24/7 treatment and recovery services, call BH Link: 401-414-LINK (5465)

We all have a role to play in ending the overdose crisis. What's yours? Find out at PreventOverdoseRI.org

PREVENT OVERDOSE RI

Racial Equity Implementation



Use data to drive action and encourage other work groups and community partners to do the same

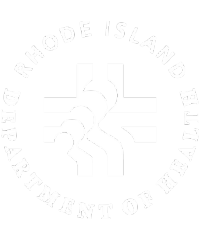
- Collaborated with RIDOH's Substance Use Epidemiology Program and community partners to highlight data that shows disparities among people of color.

Collaborated with the Treatment Work Group

- Collaborated with Amos House and Prevent Overdose and Naloxone Intervention (PONI) to conduct focus groups with people of color and their experiences seeking and maintaining treatment.
- Partnered with epidemiologist from the Department of Behavioral Healthcare, Developmental Disabilities & Hospitals (BHDDH) for data analysis and report presented to the Task Force and work groups.
- Statewide Survey – Brown University School of Public Health and PONI



Racial Equity Implementation



- Safe smoking spaces were included in Rhode Island's Harm Reduction Center Regulations ([216-RICR-40-10-25](#)).
- This addition was influenced by a RIDOH data presentation about cocaine-involved overdose data in Rhode Island.
- Safer smoking kits have been funded by the State and distributed by community partners.
- Application process for co-chairs and committee members to include prioritization of diversity and lived experience.

Racial Equity Implementation

Opioid Settlement Advisory Committee (OSAC)

“Guiding Principles” were changed to include racial equity language to ensure all work funded by the Opioid Settlement incorporates racial equity principles into the work plan.

Proposed Equity Language for All Procurements

We will use language like this (with your edits welcome) in every procurement for Settlement-funded projects. Please provide edits to Marti.Rosenberg@ohhs.ri.gov by September 1, 2022.

EOHHS (or procuring agency) acknowledges the history of structural racism and its impact on health. We are committed to improving the quality of life for all Rhode Island residents while eliminating the inequities that threaten the lives of communities of color who are disproportionately affected by substance use, chronic diseases, and their risk factors. Vendors for this Opioid Settlement-funded project shall describe in detail how your organization acknowledges and addresses structural racism, and how your project aims to improve the health of Rhode Island’s BIPOC and LGBTQ+ communities, as well as people with disabilities and veterans – and how it seeks to eliminate these disparities. Your project will be evaluated by these activities in Task X. In addition, please provide the following information:

- Your agency’s strategy for eliminating health disparities and approaching equity
- Performance measures for your proposed project that focus on reducing known disparities.



Overdose Prevention in BIPOC Communities



The OSAC identified the need to expand overdose prevention education and outreach in communities of color, including undocumented people.

Request for Proposals: Strengthening Community Engagement to BIPOC at Risk of an Opioid Overdose

- \$1 million dedicated to fund organizations with strong cultural competence, lived experience, shared identity, and language
- Strategies:
 1. Address social determinants of health
 2. Expand connections to harm reduction services
 3. Ensure linkages to care, treatment, and recovery support
 4. Decrease stigma around substance use
 5. Provide education and harm reduction tools to family and friends through community engagement

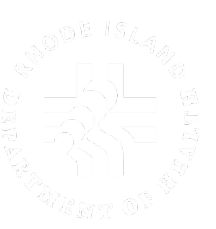
Reframe Health and Justice (RHJ) Collaboration



Strategic Planning

- Research and learn the landscape of Rhode Island.
- Create guidelines for all Governor's Overdose Task Force work groups to understand structural racism and implement racial equity into work plans and strategic plans.
- Increase capacity through skill-building and workshop learning sessions.
- Implement Racial Equity Program/Policy Rubric for the Governor's Overdose Task Force.
- Provide access to materials in a [resource library](#).

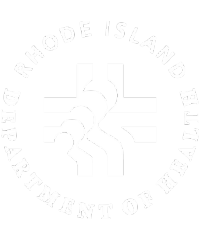
RHJ Learning Sessions



Collaborated with RHJ: Provided learning sessions for work group co-chairs, members, State, and community partners to gain skills in understanding and implementing racial equity within their work, including:

- Understanding racial equity in practice
- Creating brave spaces
- Analyzing programs for racial equity
- Using the correct evaluation and metrics
- The impact of racialized criminalization on drug user's health
- Facilitating conversations on race and challenging microaggressions

Hosted technical assistance sessions to address any questions, feedback, or comments after each workshop.



RHJ Recommendations: Task Force Level

- Make a commitment to racial equity in the Task Force
- Use a racial equity rubric to clarify expectations of analysis
- Engage in continued learning and ongoing support for racial equity practices
- Develop a shared understanding of the role of criminalization and its impact on the health of people who use drugs
- Do a policy analysis of the current Rhode Island laws and identify places for improvement to support collective policy goals
- Complete a racial equity impact analysis for all Task Force recommendations

Challenges



- Overcoming desensitization to racial disparities in data
- Moving from health equity theory to practice; ensuring that everyone has a good understanding of racial and health equity
- Using data to drive action
- Bringing in more representation from communities of color in the REWG and to the Task Force more broadly
- Balancing quantitative data with stories of lived experience

Challenges Identified Across All Work Groups



Criminalization and Policing

- Disparities while incarcerated
- Re-entry and access to support; post-conviction support
- Policing of BIPOC staff
- Child and family welfare

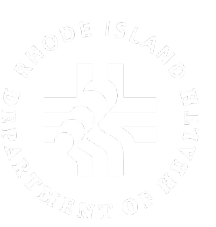
Diversity in Task Force Leadership

- Policy change for Task Force/structure recommendations

Diversity of Staffing Needs

- Criminalization of BIPOC staff
- Lack of insurance/coverage available
- Role of stimulants (especially for the Treatment Work Group)

Looking Ahead



- Refine REWG mission throughout work groups and within the Overdose Task Force.
- Support marketing and educational efforts for community outreach and prevention.
- Advocate for more funding and resource opportunities for qualitative data collection to inform Task Force decision-making and support work groups, focusing on closing racial and ethnic disparities.
- Advocate for diversifying workforces of treatment, recovery, and harm reduction programs through staff investment and support.

Resources



Harm Reduction and Peer Support Organizations	Project Weber/RENEW - weberrenew.org Parent Support Network of Rhode Island - psnri.org Community Care Alliance - communitycareri.org East Bay Recovery Center - ebcap.org Anchor MORE - anchorrecovery.providencecenter.org Preventing Overdose and Naloxone Intervention (PONI) - poniri.org
Prevent Overdose RI (PORI)	preventoverdoseri.org
Rhode Island Opioid Settlement Advisory Committee	eohhs.ri.gov/Opioid-Settlement-Advisory-Committee preventoverdoseri.org/opioid-settlement
Preventing Overdose and Naloxone Intervention (PONI)	poniri.org
Community First Responders Program (CFRP) - University of Rhode Island (URI)	web.uri.edu/cfrp
Committee on Racial and Ethnic Fairness in the Courts	www.courts.ri.gov/programs-services/Pages/racial-ethnic-fairness.aspx
Racial Equity Program and Policy Rubric for the Rhode Island Governor's Overdose Task Force	Racial Equity and Policy Rubric

Thank You!

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Public Comment

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