

## Opiod Periodic Catalog List

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## Introduction

The following catalog is written with the intention of being a continuous working document examining the responses other state and local governments have implemented to combat the opioid epidemic. The purpose of this document is to catalog programs, approaches, interventions, and other measures taken as a response to the epidemic and determine their effectiveness over time. It is our belief that this concise catalog will help document the numerous methods that other communities have conducted and serve as a reference for what has been deemed effective and ineffective, and for ongoing programs that show promise. Effective programs could be considered for implementation in the Rochester region. We are aware of the likelihood that many programs should be included but may get overlooked. Inclusion of a program in this catalog is not necessarily an endorsement. Rather, we simply aim to document opioid epidemic response efforts throughout the country.

All entries are intended to be summaries and not reviews of the programs. Summaries aim to briefly include background information, the purpose of the study, research methods, and reported results. Some reviews of the programs can be found at <https://crimesolutions.gov/>. We did our best to categorize programs, but there will be instances where they need to be re-categorized; if this is the case, please notify us with any recommendations.

Additionally, entries followed by an asterisk (\*) indicate compliance with the New York State Office of Addiction Services and Supports **Schedule C – Approved Uses** document.

A final note, this is in no way an exhaustive listing of what is being done to combat the opioid crisis.

We would like to receive information on what you know and what is going on in Rochester to address the epidemic. This is a starting point, which we think can be helpful.

Please send any additional programs, interventions, and suggestions to Alexander Tobey (adtgcj@rit.edu) or Emma Linder (el5597@rit.edu).

## Overdose Prevention

### **Local Health Departments and the Implementation of Evidence-based Policies to Address Opioid Overdose Mortality**

A survey of 180 U.S. counties with high overdose mortality rates found that 94% of responding counties implemented Overdose Education and Naloxone Distribution (OEND) programs. Most counties also provided at least one form of medication to treat opioid use disorder (MOUD), though a significant number lacked access to key treatments like buprenorphine and methadone. Local health departments require adequate funding, staffing, and supportive policies to fully implement and sustain evidence-based strategies.

#### **\*II: B – 7, 8, 9; C – 1, 3**

- Feuerstein-Simon, R., Lowenstein, M., Sharma, M., Dupuis, R., Marti, X.L., and Cannuscio, C.C. (2020, October 1). Local health departments and the implementation of evidence-based policies to address opioid overdose mortality. *Substance Abuse*, 41(4), 468-474. <https://doi.org/10.1080/08897077.2019.1709250>

### **The Opioid-overdose Reduction Continuum of Care Approach (ORCCA): Evidence-based Practices in the HEALing Communities Study**

The HEALing Communities Study (HCS) aims to reduce opioid-involved overdose deaths in 33 intervention communities across four U.S. states by implementing three evidence-based practices

(EBPs): overdose education and naloxone distribution (OEND), medication for opioid use disorder (MOUD), and safer opioid prescribing. HCS developed the Opioid-overdose Reduction Continuum of Care Approach (ORCCA), which organizes EBP strategies and resources. Communities must implement at least five strategies, including one for OEND, three for MOUD, and one for opioid prescription safety.

**\*I: A – 1, 2; II: A—3; B – 2, 3; C – 1, 3; III: A – 2, 3**

- Winhusen, T., Walley, A., Fanucchi, L.C., Hunt, T., Lyons, M., Lofwall, M., Brown, J.L., Freeman, P.R., Nunes, E., Beers, D., Saitz, R., Stambaugh, L., Oga, E.A., Herron, N., Baker, T., Cook, C.D., Roberts, M.F., Alford, D.P., Starrels, J.L., Chandler, R.K. (2020, December). The Opioid-overdose Reduction Continuum of Care Approach (ORCCA): Evidence-based practices in the HEALing Communities study. *Drug and Alcohol Dependence*, 217. <https://doi.org/10.1016/j.drugalcdep.2020.108325>

### **Baltimore City’s Response to the Opioid Epidemic**

The Baltimore City Health Department reported that the City of Baltimore recorded 1,043 drug and alcohol-related deaths, 921 linked to fentanyl, in 2023. Their strategy includes saving lives with Naloxone; increasing access to on-demand treatment through medication-assisted treatment (MAT) and support services; fighting stigma through education by framing addiction as a treatable disease; prevention efforts, especially targeting youth through the Kids Off Drugs (K.O.D.) program; and data-driven decision-making to improve health outcomes. Additional initiatives include the *Community Risk Reduction Services*, which provides clean syringes and overdose reversal training, and *Staying Alive Overdose Response Program*.

**\*I: A – 1, 2.a, 5, II: C – 1, 3, 5, 6, 9, 10, 11, 12**

- Baltimore City Health Department. (n.d.). *Baltimore City’s Response to the Opioid Epidemic*. Baltimore City Health Department: City of Baltimore. <https://health.baltimorecity.gov/opioid-overdose/baltimore-city-overdose-prevention-and-response-information>

## How Philadelphia Is Responding to the Overdose Crisis in 2023

In April 2023, Philadelphia's Opioid Response Unit (ORU) released its latest action plan to combat the city's overdose crisis. The plan focuses on expanding targeted prevention efforts, reducing stigma, and engaging community partners to address the crisis. Initiatives include distributing 54,036 doses of naloxone and expanding access to medication for opioid use disorder (MOUD) through mobile methadone units. The City has invested \$3.5M in community-based initiatives and secured \$200M from nationwide opioid settlements to fund crisis response strategies. In partnership with law enforcement, Philadelphia is also working to disrupt open-air drug markets in the Kensington neighborhood. The ORU continues to coordinate these efforts across departments to support treatment, housing, public safety, and community recovery.

**I: A – 1, 2.a, 5, 6; B – 3; D – 4; II: C – 1, 2; III: A – 1, B – 1**

- Syed, N. (2023). *How Philadelphia Is Responding to the Overdose Crisis in 2023*. Managing Director's Office: City of Philadelphia. <https://www.phila.gov/2023-04-26-how-philadelphia-is-responding-to-the-overdose-crisis-in-2023/>

## Linkage to Action

Southern Nevada's Health District created the Linkage to Action (L2A) team with funding from the CDC Overdose Data to Action (OD2A) grant. L2A is committed to preventing overdose through education, surveillance, and linkage to supportive services such as peer navigators, medically assisted treatment after release, and referrals to mental health providers, sober living, and harm reduction education. L2A and OD2A partners provide community outreach services, like sterile syringes, wound care, and peer support, as well as a mobile outreach unit.

**I: A – 5, 7; B – 7; C – 2; D – 5; II: C – 11**

- Southern Nevada Health District. (n.d.). *Linkage to Action*. SNHD: State of Nevada. <https://www.southernnevadahealthdistrict.org/programs/substance-use-and-overdose-prevention/linkage-to-action/>

## Harm Reduction

### **Implementing Harm Reduction in Non-Urban Communities Affected by Opioids and Polysubstance Use: A Qualitative Study Exploring Challenges and Mitigating Strategies**

A study involving interviews with 22 professionals in Rhode Island and Massachusetts identified

several challenges to implementing harm reduction in these areas, including limited understanding of harm reduction, community stigma, inaccurate data reporting, and a prosecutorial mindset.

Communities could benefit from strategies such as identifying local advocates, educating the public about harm reduction, improving service visibility, and gaining support from local stakeholders, including law enforcement and government.

**\* II: B – 1, 2, 3, 5, 9; C – 9**

- Childs, E., Biello, K.B., Valente, P.K., Salhaney, P., Biancarelli, D.L., Olson, J., Earlywine, J.J., Marshall, B.D.L., Bazzi, A.R. (2021). Implementing harm reduction in non-urban communities affected by opioids and polysubstance use: A qualitative study exploring challenges and mitigating strategies. *International Journal of Drug Policy* 90. <https://doi.org/10.1016/j.drugpo.2020.103080>

### **Evidence for State, Community and Systems-Level Prevention Strategies to Address the Opioid Crisis**

A systematic review of 251 studies evaluated systems-level interventions targeting both provider and public behaviors, including state legislation, prescription drug monitoring programs (PDMPs), insurance strategies, clinical guidelines, provider education, naloxone distribution, and public safety collaborations. The review found low to moderate evidence supporting most interventions, with the strongest evidence for PDMPs, pain clinic legislation, insurance strategies, motivational interviewing, provider feedback on opioid prescribing, and educational programs.

**\* I: B – 9, II: A – 1, 2, 3, 5; B --, 1, 2, 4, 5; C – 1, 3**

- Haegerich, T.M., Jones, C.M., Cote, P.O., Robinson, A., Ross, L. (2019, November 1). Evidence for state, community and systems-level prevention strategies to address the opioid crisis. *Drug and Alcohol Dependence*, 204. <https://doi.org/10.1016/j.drugalcdep.2019.107563>

### **The Columbus & Franklin County Addiction Plan**

The Columbus and Franklin County Addiction Plan (CFCAP) aims to decrease overdoses and deaths, and infectious diseases like Hepatitis C and HIV/AIDS. Led by Columbus Public Health, the CFCAP committee includes city and county officials and subcommittees tasked with investigating innovative practices and providing recommendations to reduce overdoses and infectious diseases. Previously, the CFCAP committee focused on providing health services and public interventions like naloxone distribution, fentanyl test strip distribution, HIV testing, syringe collection, prevention education programs in schools, and education on Adverse Childhood Experiences (ACEs), trauma-informed care, and substance use. They have set a plan overview and goals for 2022-2025, focusing on helping people receive substance use disorder treatment, harm reduction services, and access to integrated healthcare.

**\*I: A – 1, 3; B – 1, 5; C – 7; D – 1, 5; E – 1, 4; II: C – 1, 9, 12; III: D – 1, 4**

- Columbus Public Health Addiction Resources. (n.d.). *The Columbus & Franklin County Addiction Plan: Bridging the Gap for Opiate & Drug Addiction Recovery*. CPH: The City of Columbus. <https://cfcap-columbus.hub.arcgis.com/>

## **State-Level Initiatives**

### **State of Illinois Overdose Action Plan**

The State of Illinois Overdose Action Plan (2022) focuses on addressing the opioid crisis through a comprehensive approach that includes prevention, treatment, harm reduction, and addressing racial and social disparities. The plan emphasizes social equity by targeting structural racism and involving

people with lived experiences in developing solutions. Key priorities include reducing high-risk opioid prescribing, expanding access to medication-assisted recovery (MAR), increasing harm reduction services such as syringe exchange programs and naloxone distribution, and supporting justice-involved populations through diversion programs and access to treatment in correctional facilities. The plan also highlights the importance of addressing maternal and infant health, increasing access to treatment for pregnant and postpartum women, and ensuring continuity of care for individuals leaving jails and prisons. Continuous evaluation and community involvement are central to the plan's implementation.

**\*I: A – 1, 3; B – 1, 5; C – 7; D – 1, 5; E – 1, 4; II: C – 1, 9, 12; III: D – 1, 4**

- Illinois Department of Human Services. (n.d.). *State of Illinois Overdose Action Plan*. IDHS: State of Illinois. [https://www.dhs.state.il.us/OneNetLibrary/27896/documents/By\\_Division/SUPR/State-of-Illinois-Overdose-Action-Plan-March-2022](https://www.dhs.state.il.us/OneNetLibrary/27896/documents/By_Division/SUPR/State-of-Illinois-Overdose-Action-Plan-March-2022)

### **Texas Targeted Opioid Response**

The Texas Targeted Opioid Response (TTOR) is a statewide public health initiative aimed at combating the opioid epidemic. The program focuses on four key strategies: prevention, treatment, integration, and recovery. These strategies target at-risk populations including those in rural areas, individuals using multiple substances, and those with limited access to services. TTOR provides naloxone distribution, safe drug disposal programs, overdose prevention education, and access to medications for opioid use disorder (MOUD). It also offers peer recovery support, housing, and employment assistance. Funded by the Substance Abuse and Mental Health Services Administration (SAMHSA), TTOR has successfully distributed over 596,000 naloxone kits and provided treatment to thousands of individuals. Through ongoing data monitoring, training initiatives, and community partnerships, TTOR aims to reduce opioid-related overdose deaths and improve access to treatment across Texas.



**\*I: A – 1, 3; B – 1, 5, 6; C – 7; D – 1, 5; E – 1, 4; II: C – 1, 9, 12; III: D – 1, 4**

- Texas Health and Human Services Commission. (2023). *Texas Targeted Opioid Response*. THHSC: State of Texas. <https://www.hhs.texas.gov/sites/default/files/documents/ttor-primer.pdf>

### **North Carolina's Opioid and Substance Use Action Plan**

North Carolina's Opioid and Substance Use Action Plan (OSUAP) targets four key areas: centering equity and lived experiences; preventing future addiction by addressing trauma in children and families; reducing harm from polysubstance use; and, improving access to care for justice-involved individuals, as well as expanding housing and employment support. The plan is data-driven, with progress tracked through a comprehensive data dashboard that allows for real-time monitoring of state, regional, and county-level metrics to assess the impact of strategies aimed at reducing overdoses and preventing future waves of the epidemic.

**\*I: A – 1, 3; C – 7; D – 1, 5; E – 1, 4; II: B – 1, 5, 6; C – 1, 9, 12; III: D – 1, 4**

- North Carolina Department of Health and Human Services. (n.d.). *North Carolina's Opioid and Substance Use Action Plan*. NCDHHS: State of North Carolina. <https://www.ncdhhs.gov/about/department-initiatives/overdose-epidemic/north-carolinas-opioid-and-substance-use-action-plan>

### **Opioid Awareness**

Pennsylvania's Department of Health (PA DOH) is addressing the opioid epidemic with a multifaceted approach that includes the Prescription Drug Monitoring Program (PDMP) to prevent abuse, a standing order for naloxone to make overdose reversal accessible, and the *Warm Handoff* program to connect patients to treatment. The state has developed prescribing guidelines, continuing education for healthcare providers, and launched the Pennsylvania Substance Use Navigation (PA-SUN) Program to expand treatment for opioid use disorder (OUD). PA DOH also focuses on harm reduction

education and removing barriers to medications for OUD, supported by county-level data tracking through the Opioid Data Dashboard.

**\*I: A – 7; C – 2; II: A – 1, 3, 5; C – 2, 3, 5; III: A – 2; B – 2; C – 5**

- Pennsylvania Department of Health. (n.d.). *Opioid Awareness*. PA DOH: Commonwealth of Pennsylvania. <https://www.pa.gov/en/agencies/health/programs/opioids.html>

## City-Level Initiatives

### Alexandria Opioid Work Group

Created in 2015, the Alexandria Opioid Work Group (OWG) has five key areas to combat drug addiction and the opioid crisis. The plan aims to provide addiction prevention and education, treatment, overdose response and recovery, the diversion of people with addiction into treatment, and supply reduction and law enforcement strategies. The OWG created a Strategic Three-Year Plan, for 2023-2026, to eliminate opioid misuse and its effects throughout Alexandria. City staff and community partners like the police, fire, and health departments, public schools, sheriff and attorney's office, and additional services all participate in the OWG.

**\*I : A, D; II : A, B, C; III: A**

- City of Alexandria Virginia. (2023, April 28). *Alexandria Opioid Work Group*. OWG: City of Alexandria Virginia. <https://www.alexandriava.gov/opioids/program/alexandria-opioid-work-group>

### King County Opioid Prevention and Response

The City of Seattle, Washington, and its surrounding county, King County, focus on five action areas to prevent overdoses: treatment and community-based, recovery-focused care; behavioral health beds and facilities; overdose reversal medication and fentanyl testing; a diverse behavioral health

workforce; and, reduced disproportionality in overdoses. The goal is for people to receive evidence-based and people-centered care without barriers.

**\*I : 1, 3, 5, 6 9; II: B – 1, 10, 11; C – 1, 3, 5, 9, 11**

- King County. (n.d.). *Overdose prevention and response*. <https://kingcounty.gov/en/dept/dph/health-safety/safety-injury-prevention/overdose-prevention-response>

### **Evaluating Alternative Crisis Response in Denver’s Support Team Assisted Response (STAR) Program: Interim Findings**

Since 2020, The Support Team Assisted Response (STAR) Program, in Denver, is a response team with behavioral health clinicians and paramedics that provides care to those who experience substance misuse, resource needs, mental health distress, transportation issues, resource connection woes, and more. STAR partners with local cultural services, behavioral health care providers, the Denver Health Paramedic Division, and Denver 911 to execute on its program. In analyzing the program service outcomes, STAR plans to identify a comparison group to study the difference in public safety outcomes for those who received STAR services and those who did not. In 2024, they plan to release a report focused on STAR outcomes, conduct a cost study, and estimate the demand for STAR services and the budget required. They currently produce a Community-Engagement Network Study to evaluate the clients’ experiences and perceptions of STAR services.

**\*I: A – 5; C – 7, 9; D – 1.f; II: C – 11, 12; III: A – 2, B – 1, C – 2**

- Gillespie, S., Curran-Groom, W., & Rogin, A. (2024). *Evaluating alternative crisis response in Denver’s Support Team Assisted Response (STAR) program: Interim findings*. Urban Institute: Washington, DC. [https://www.denvergov.org/files/assets/public/v/1/public-health-and-environment/documents/cbh/star/evaluating\\_alternative\\_crisis\\_response\\_in\\_denvers\\_support\\_team\\_assisted\\_response\\_program-interim\\_findings.pdf](https://www.denvergov.org/files/assets/public/v/1/public-health-and-environment/documents/cbh/star/evaluating_alternative_crisis_response_in_denvers_support_team_assisted_response_program-interim_findings.pdf)

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## About the Center for Public Safety Initiatives

The Center for Public Safety Initiatives (CPSI) is a multi-disciplinary research center that examines strategies to reduce crime and enhance the administration of justice. It provides program evaluation, data analytics, and project management services to area law enforcement, community non-profits, and other criminal justice professionals, and it contributes to general knowledge generation of the nature and causes of crime and violence. Its educational goals include training graduate and undergraduate students in strategic planning, program evaluation, and policy analysis.

The foundation of the Center is the practice of action research in which relevant data and analyses are brought to bear on the day-to-day decision-making processes of organizations. The Center serves the practice of policy development and implementation in real time and is a testing ground for 21st century university engagement, demonstrating how rigorous research and analysis can play a role in improving the lives of society's most marginalized citizens.

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