

Overdose Data to Action: Public Health-Public Safety Partnerships

Key Takeaways and Next Steps from ASTHO's Public Safety, Public Health, and Harm Reduction Overdose Prevention Focus Groups

Introduction

Strengthening partnerships between public health and public safety can enhance comprehensive efforts to reduce overdoses. ASTHO, with support from CDC, conducted focus groups with public health and public safety partners involved in overdose prevention activities, including CDC's [Overdose Data to Action \(OD2A\)](#) cooperative agreement recipients. The focus groups examined overdose-related issues and harm reduction attitudes and concepts, and identified potential engagement opportunities for public health and public safety around overdose prevention. This document outlines key takeaways from these focus groups and serves as a guide for public health professionals as they build and strengthen relationships with public safety partners.

Focus group participants included CDC partners engaged in public health/public safety projects, OD2A jurisdiction staff, local law enforcement and public safety individuals, harm reduction partners, and other subject matter experts. The participants self-selected themselves into the following categories: law enforcement/public safety national membership organizations, public health organizations, harm reduction organizations, local law enforcement organizations, and local public safety organizations (e.g., emergency medical services, firefighters). Two focus group meetings were held per category, bringing the total number of focus groups held to 10.

Key Takeaways and Public's Health Role in Response

The following six key takeaways outline public health's role in establishing and maintaining relationships with public safety around overdose prevention from focus group data.

Takeaway	Public Health's Role
<p>1. Build relationships and increase collaboration between public health, harm reduction, and public safety, including getting buy-in from leadership and other champions.</p>	<ul style="list-style-type: none"> • Begin or enhance public health and safety teams to align activities and roles, identify champions of innovative overdose prevention efforts, and conduct peer-to-peer learning and training. • Convene and mediate discussions between public safety and harm reduction partners to better understand their interactions with individuals at high risk of overdose and explore opportunities for collaboration. • Identify champions in law enforcement and High Intensity Drug Trafficking Areas, including public health analysts and drug intelligence officers engaged in the Overdose Response Strategy, who can conduct peer-to-peer learning and training around substance use, stigma, and other deflection activities. • Emphasize that public health and law enforcement have shared goals of reducing drug use and overdose and contributing to safe and healthy communities.
<p>2. Use education, training, and community engagement to address stigma and misconceptions.</p>	<ul style="list-style-type: none"> • Increase buy-in for evidence-based overdose prevention efforts by engaging in more in-person conversations with law enforcement, fire departments, and emergency medical services. • Provide public safety staff with information about overdose reduction programs and policies including: naloxone and fentanyl test strip distribution, syringe services programs, Crisis Intervention Team trainings, trauma-informed care, compassion fatigue, and Good Samaritan laws. • Meet public safety partners where they are through discussion on how the overdose crisis has impacted their work, tensions of enforcement, interventions they have employed, and the benefits of evidence-based overdose prevention and harm reduction that have by been adopted by other public safety agencies around the country. • Identify and engage community partners and organizations to ensure overdose prevention efforts are driven by input from the communities these programs are designed to serve.

Takeaway	Public Health's Role
<p>3. Update policies related to overdose prevention and treatment.</p>	<ul style="list-style-type: none"> • Share model legislation and provide technical assistance on policy topics such as Good Samaritan laws, syringe service program bills, and fentanyl test strip distribution policies. • Create resources using data to outline the benefit of these policies. • Explore policies and practices with public safety partners that focus on connecting people who are at risk for or have experienced overdose to services. • Ensure task forces, coalitions, and steering committees focused on reducing and responding to overdoses in the community include public safety partners.
<p>4. Leverage and braid multiple funding sources to supplement insufficient funding and resources.</p>	<ul style="list-style-type: none"> • Identify sources of funding to sustain overdose prevention efforts, including but not limited to private foundations, opioid settlement money, Edward Byrne Memorial Justice Assistance Grant funding, Comprehensive Opioid, Stimulant, and Substance Abuse Program funding, State Opioid Response funding, and other relevant funding opportunities. • Collaborate with a wide-ranging group of partners, such as harm reduction organizations and public safety organizations, when applying for grant funding for overdose prevention efforts to ensure a broad and unified approach to reduce overdoses. • Provide evidence of return on investment and success stories for harm reduction programs and unique cross-sector partnerships when applying for funding.
<p>5. Promote data sharing between public health, public safety, and harm reduction partners.</p>	<ul style="list-style-type: none"> • Develop bi-directional data sharing relationships and agreements between public health and public safety to improve both partners' understanding of overdose in the jurisdiction. • Share overdose morbidity and mortality data with harm reduction and public safety. • Encourage partners such as EMS and harm reduction to share data when appropriate. • Consider statewide implementation of an Application Programming Interface between Overdose Detection Mapping and Application Program and emergency medical services data. • Engage a range of partners including community organizations, harm reduction, public safety, and others as appropriate to respond to overdose spikes or abnormalities in fatal and nonfatal overdose. • Consider implementing an Overdose Fatality Review capability to identify system gaps and innovative community-specific overdose prevention and intervention strategies.
<p>6. Invest in emerging practices, such as comprehensive naloxone distribution and diversion and deflection programs.</p>	<ul style="list-style-type: none"> • Reach out to public institutions, including jails and libraries, to gauge their interest in installing naloxone vending machines or kits in their facilities. • Partner with public safety, harm reduction, and other community organizations to identify funding sources and distribution practices to ensure all partners have access to an adequate naloxone supply. • Incorporate individuals with lived experience when planning education, training, and outreach efforts related to addressing substance use and stigma. • Integrate public safety prevention activities such as quick response teams or law enforcement assisted diversion programs.

Next Steps

Building on the success of ASTHO's June 2022 OD2A Public Health, Public Safety Convening, which brought together public health and public safety partners to discuss overdose-related issues, harm reduction, and successful public health-public safety partnerships during the overdose crisis, ASTHO will host another convening in 2023. The 2023 OD2A Public Health and Public Safety Convening will include a deeper dive into the role of public health and how OD2A can further support public health and public safety partnerships to reduce overdose morbidity and mortality. For additional resources, please visit ASTHO's [2022 Public Health, Public Safety Convening web page](#).

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