

**Joint Interim Committee on Addiction
& Community Safety Response**

January 10, 2024

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Tony Vezina, Chair

ADPC 2020-25 Strategic Plan:

4 Outcomes
4 Strategic Goals

OUTCOMES

- Decreased prevalence of substance use disorders
- Decrease of Oregonians who die from substance use-related causes
- Reduce health disparities
- Reduce economic burden of substance use in Oregon

STRATEGIC GOALS

- Statewide system
- Prevention
- Access to Treatment
- Recovery Supports

Oregon's Drug Overdose Rate is 3X Higher than the Benchmark Goal in the Strategic Plan

Strategic plan benchmark goal:

12.4 per 100,000 in 2017 to

10.4 or less per 100,000 by 2025.

In 2022, that rate climbed to **31.1 deaths per 100,000**.

Rate for American Indian or Alaska Native Oregonians increased from 46.6 per 100,000 in 2021 to **85 per 100,000** in 2022.

Rate for Black or African American Oregonians increased from 33.6 per 100,000 in 2018 to **78.3 per 100,000** in 2022

ADPC's Framework Aligns with Federal Strategy Recommendations

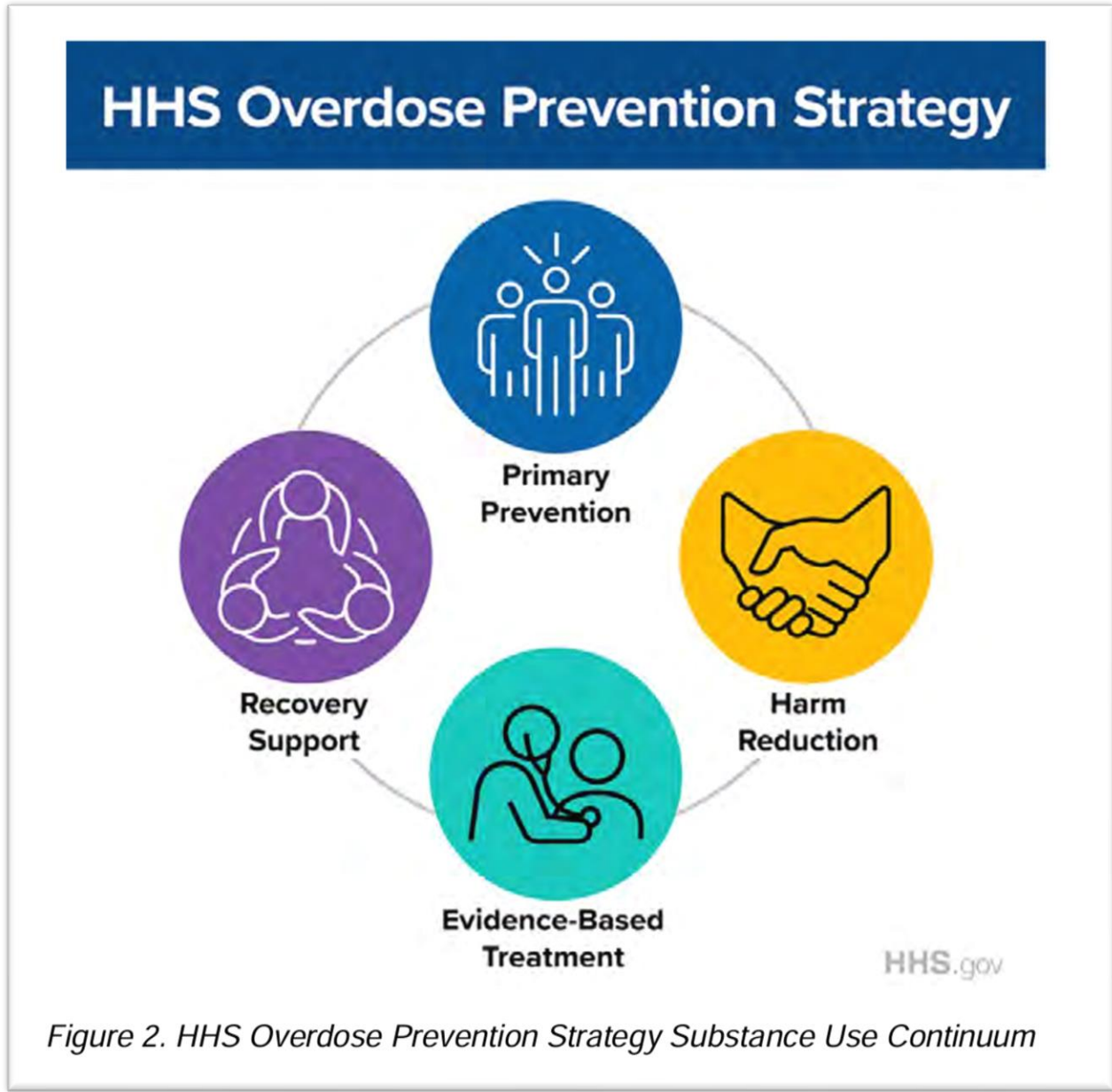
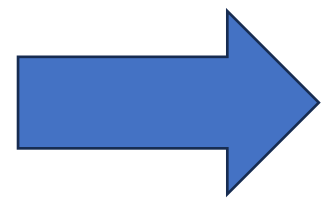
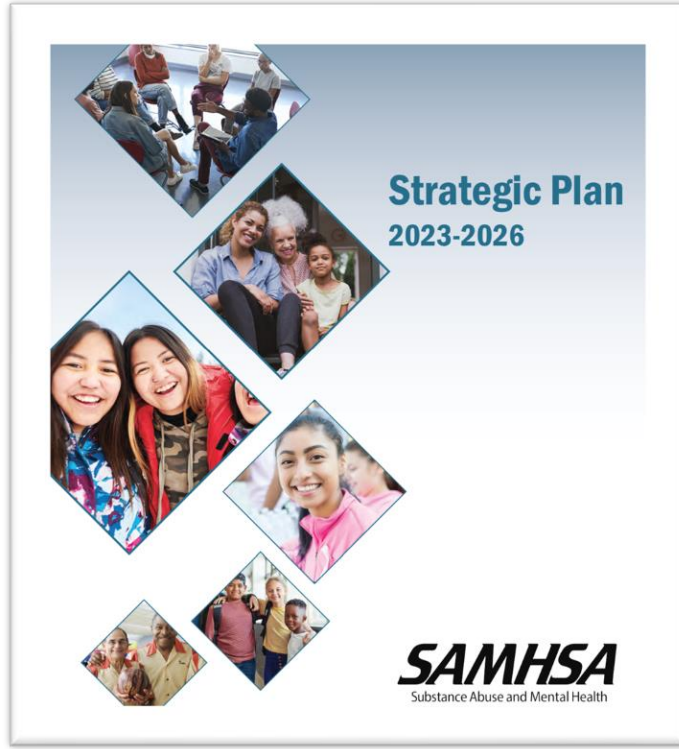


Figure 2. HHS Overdose Prevention Strategy Substance Use Continuum

Alcohol and Drug Policy Commission Actions

1. October 9 - Commission directed Committees of Experts in Prevention, Treatment, Recovery and Harm Reduction to Develop Recommended Actions for Oregon to take to reduce the number of people who die in 2024 related to overdose.
2. ADPC and System of Care Advisory Council are forming a Joint Youth Substance Use Committee, and also made youth-specific recommendations, approved by both entities in December.
3. December 11 – Commission approved 14 Recommended Actions.

Prevention Committee Recommendations

1. Substance Use Prevention Hub to build infrastructure to strengthen Oregon's overdose/polysubstance use prevention system.
2. Substance Use Prevention Coordinators in every Oregon County and Tribe.
3. ADPC Analysis of Primary/Universal Prevention in Oregon, including current workforce, intervention types, training and technical assistance needs, existing community coalitions, partnerships with schools, and areas of unmet need.

Treatment Committee Recommendations

4. Increase Access to Medications for Opioid Use Disorder (MOUD)
 - a. Address state policy and payor barriers.
 - b. MOUD in all system entry points (emergency departments, hospitals, carceral settings, residential facilities, etc.).
 - c. Fund mobile units and the development of medication units for methadone administration for every Opioid Treatment Program.

Treatment Committee Recommendations Continued

5. Funding for additional sobering centers; withdrawal management and residential facilities and partial hospitalization, prioritizing projects that are achievable in the next 6-12 months and in regions with the highest need.

Recovery Committee Recommendations

6. Increase access to Recovery Housing.

- a. Provide information and facilitate cross-agency support of the model.
- b. Fund recovery housing in addition to Housing, Rental Assistance and Shelter Capacity.

Recovery Committee Recommendations Cont'd

7. Integrate peers with emergency responders, public safety, emergency departments, withdrawal management, treatment, recovery, housing, harm reduction services, and MAT providers.
8. Fund Recovery Community Centers, with priority for centers serving youth, culturally specific and rural populations.

Harm Reduction Committee Recommendations

9. Develop and fund a statewide strategy for the purchase and distribution of naloxone.
10. Implement a statewide drug checking network utilizing drug checking technology and mail order access, paired with statewide technical assistance, training, and operational support to the network across the state.
11. Expand Syringe Service Programs to ensure access to comprehensive harm reduction wraparound and engagement services in every county.

Youth Recommendations

12. Funding for youth and family treatment services.
13. Funding for primary prevention.
14. Funding to create a youth SUD strategic plan by 2025. This plan should include specific strategies to improve access to care for youth, evidence-based and evidence-informed, strategies for upskilling the current workforce and increasing system capacity across the continuum of care.



Thank you!

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