

September 30, 2022



SCHOOL OF PUBLIC HEALTH

Oregon Substance Use Disorder Services Inventory and Gap Analysis

Estimating the need and capacity for services in Oregon across the continuum of care

Supported by the Oregon Health Authority & Oregon Alcohol and Drug Policy Commission Produced by the OHSU-PSU School of Public Health

Acknoweldgements

Authors:

Katie Lenahan, MPH¹ Sara Rainer, MPH¹ Robin Baker, PhD¹ Elizabeth Needham Waddell, PhD^{1,2}

¹Oregon Health & Science University-Portland State University School of Public Health

²Section of Addiction Medicine, Division of General Internal Medicine OHSU School of Medicine

Oversight provided by:

Samantha Byers, MPA Health Systems Division Oregon Health Authority

Reginald C. Richardson, PhD, MSW Tori Algee, LSSBB Alcohol and Drug Policy Commission State of Oregon

For more information contact:

Tori Algee Senior Analyst Alcohol and Drug Policy Commission State of Oregon <u>Tori.algee@dhsoha.state.or.us</u>

Please cite this publication as follows:

Lenahan K, Rainer S, Baker R, and Waddell, EN. (2022). *Oregon Substance Use Disorder Services Inventory and Gap Analysis.* OHSU-PSU School of Public Health, Oregon Health and Science University, Oregon Alcohol and Drug Policy Commission, and Oregon Health Authority, Health Systems Division and Public Health Division.

Additional thanks:

This report would not have been possible without the support of the authors of the Calculating for an Adequate Systems Tool (CAST) at JG Research. Thank you to Dr. Brandn Green and colleagues for your work to adjust estimates to reflect Oregon-specific counties and regions.

Thank you to all of the organizations and individuals who participated in our substance use disorder service survey, and to the members of the Oregon Alcohol and Drug Policy Commission, Oregon Health Authority, and other key individuals who helped to inform and guide this work, including:

- Tony Vezina, Executive Director, 4D Recovery
- Erin Stack, Research Manager, Comagine
- Gillian Leichtling, Director of Research and Evaluation, Comagine
- Pam Pearce, Executive Director, Community Living Above
- Caroline Cruz, General Manager, Confederated Tribes of Warm Springs Branch of Health and Human Services
- Kevin Baldwin, Program Manager, Consumer Drug Take-Back Solution
- Donald Mazziotti, Chief Executive Officer, Frontline Services PDX
- Victoria Buelow, Alcohol and Drug Lead Research Analyst, Health Promotion and Chronic Disease Prevention Oregon Health Authority
- Eric Martin, Director of Policy and Legislation, Mental Health & Addiction Certification Board of Oregon
- Van Burnham, Finance & Technology, Mental Health & Addiction Certification Board of Oregon
- Fernando Peña, Executive Director, NW Instituto Latino
- Heather Jefferis, Executive Director, Oregon Council for Behavioral Health
- Heather Ray, Project Coordinator, Oregon Council for Behavioral Health
- Suzanne Hidde, Health and Physical Education Specialist, Oregon Department of Education
- Dan Hoover, Addiction Medicine Physician, Oregon Health & Science University
- Honora Englander, Professor of Medicine, Oregon Health & Science University
- Todd Korthuis, Addiction Medicine Physician, Oregon Health & Science University
- Stephanie Renfro, Associate Director, Oregon Health & Science University Center for Health Systems Effectiveness
- Jude Leahy, Viral Hepatitis Prevention Coordinator, Oregon Health Authority
- Julia Dilley, Senior Research Scientist, Oregon Health Authority
- Shelagh Johnson, Adolescent & School Health Policy & Partnerships Specialist, Oregon Health Authority
- William Burchard, Analyst, Oregon Health Authority
- Dr. Anthony Biglan, Senior Scientist, Oregon Research Institute
- Jerrod Murray, Executive Director, Painted Horse Recovery
- Denise Acker, Operations Manager, Synergy Health Consulting

Contents

Acknoweldgements
Contentsii
xecutive Summaryvii
Key Findingsvii
Recommendationsvii
About the Inventory and Gap Analysis Process 1
What Is It? 1
Why Was It Done?
Understanding Gaps in Oregon's Prevention, Treatment, and Recovery Services
How Was It Done?
Needs Assessment
Substance Use Disorder Services Directory7
Calculating for an Adequate System Tool7
Substance Use Disorder Services Survey12
indings
0
Needs Assessment
Needs Assessment. 13 National Survey on Drug Use and Health: Substance use, substance use disorders, and unmet need for treatment services in Oregon 13 Oregon Health Plan Data on Substance Use and Use Disorders, 2020. 18 Access and Equity: Oregon Substance Use Disorder Workforce. 19 Substance Use Disorder Services Directory 19
Needs Assessment. 13 National Survey on Drug Use and Health: Substance use, substance use disorders, and unmet need for treatment services in Oregon 13 Oregon Health Plan Data on Substance Use and Use Disorders, 2020. 18 Access and Equity: Oregon Substance Use Disorder Workforce. 19 Substance Use Disorder Services Directory 19 Calculating for an Adequate System Tool (CAST) 20
Needs Assessment. 13 National Survey on Drug Use and Health: Substance use, substance use disorders, and unmet need for treatment services in Oregon 13 Oregon Health Plan Data on Substance Use and Use Disorders, 2020. 18 Access and Equity: Oregon Substance Use Disorder Workforce. 19 Substance Use Disorder Services Directory 19 Calculating for an Adequate System Tool (CAST) 20 Substance Use Disorder Services Survey 24
Needs Assessment. 13 National Survey on Drug Use and Health: Substance use, substance use disorders, and unmet need for treatment services in Oregon 13 Oregon Health Plan Data on Substance Use and Use Disorders, 2020. 18 Access and Equity: Oregon Substance Use Disorder Workforce. 19 Substance Use Disorder Services Directory 19 Calculating for an Adequate System Tool (CAST) 20 Substance Use Disorder Services Survey 24 Participating Organizations 25
Needs Assessment. 13 National Survey on Drug Use and Health: Substance use, substance use disorders, and 13 Oregon Health Plan Data on Substance Use and Use Disorders, 2020. 18 Access and Equity: Oregon Substance Use Disorder Workforce. 19 Substance Use Disorder Services Directory 19 Calculating for an Adequate System Tool (CAST) 20 Substance Use Disorder Services Survey 24 Participating Organizations 25 Staffing and Finance 29
Needs Assessment.13National Survey on Drug Use and Health: Substance use, substance use disorders, and unmet need for treatment services in Oregon13Oregon Health Plan Data on Substance Use and Use Disorders, 2020.18Access and Equity: Oregon Substance Use Disorder Workforce.19Substance Use Disorder Services Directory19Calculating for an Adequate System Tool (CAST)20Substance Use Disorder Services Survey24Participating Organizations25Staffing and Finance29Specialty Services.31
Needs Assessment13National Survey on Drug Use and Health: Substance use, substance use disorders, and unmet need for treatment services in Oregon13Oregon Health Plan Data on Substance Use and Use Disorders, 202018Access and Equity: Oregon Substance Use Disorder Workforce19Substance Use Disorder Services Directory19Calculating for an Adequate System Tool (CAST)20Substance Use Disorder Services Survey24Participating Organizations25Staffing and Finance29Specialty Services31Equity and Access33

Baker County
Benton County
Clackamas County 45
Clatsop County
Columbia County
Coos County
Crook County
Curry County
Deschutes County
Douglas County
Gilliam County
Grant County
Harney County
Hood River County
Jackson County
Jefferson County71
Josephine County73
Klamath County
Lake County
Lane County
Lincoln County
Linn County
Malheur County
Marion County
Morrow County
Multnomah County
Polk County
Sherman County
Tillamook County
Umatilla County
Union County

Wallowa County
Wasco County10
Washington County
Wheeler County
Yamhill County11
Summary of Findings11
Needs Assessment11
Calculating for an Adequate System Tool114
Substance Use Disorder Services Survey114
Recommendations
Appendices
Appendix A: County Needs AssessmentA-
Appendix B: Substance Use Disorder Service DirectoryA-2
Appendix C.1: Substance Use Disorder Services Survey, Treatment and Recovery Specific.A-7
Appendix C.2: Substance Use Disorder Services Survey, Prevention Specific
ReferencesA-11

List of Figures and Tables

Figure 1. National Survey on Drug Use and Health (NSDUH) 2016-18 Oregon regions ^a	. 5
Figure 2. Statewide demographics compared to demographics of prescribing and non-	
prescribing substance use disorder workforce ^a	19
Figure 3. CAST risk of hospitalization for alcohol or drug use by county	22
Figure 4. Percent of organizations reporting inadequate capacity for services	30
Figure 5. Organizations that reported transporatation or travel time as a barrier to their clients	S
	36
Table 1. Summary of NSDUH data inputs used for needs assessment and CAST	. 6
Table 2. Description and sources for data inputs used for CAST Risk Score.	
Table 3: Oregon data sources used to assess current service capacity	
Table 4. Prevalence of population reporting substance use nationwide, statewide, and by	
region, NSDUH 2020 ^a	14
Table 5. Number and percent of population estimated to have a substance use disorder,	
NSDUH 2020 ^a	15
Table 6. Number and percent of population estimated to have an alcohol use disorder, NSDUF	
2020 ^a	
Table 7 . Number and percent of population estimated to have an illicit drug use disorder,	
NSDUH 2020 ^a	17
Table 8. Number and percent of Oregon Health Plan (OHP) members with documented use	
disorder diagnosis, 2020	18
Table 9. CAST community characteristics contributing to CAST risk score, statewide	
Table 10: CAST community characteristics contributing to CAST risk score, by region	21
Table 11. CAST overall service gap, statewide and by region	
Table 12. Summary of CAST service gaps by service type ^a	
Table 13. Participating organizations by services provided: Behavioral health screening,	
prevention, treatment, recovery, by county and region	26
Table 14. Participating organizations by services provided: Behavioral health screening,	
prevention, treatment, recovery, by tribes served	28
Table 15. ASAM levels of care provided by 135 participating organizations that offer treatment	
Table 16. Capacity to meet current demand for services among participating organizations, by	
service type	
Table 17. Sources of funding among participating organizations	
Table 18. Changes in funding during COVID-19 and related to Measure 110	
Table 19. Specialty services offered by participating organizations	
Table 20. Peer support specialists (PSS) employed by participating organizations	
Table 21. Services provided by 141 participating organizations offering harm reduction	

Table 22. Medications prescribed and dispensed among 85 participating treatment	
organizations offering medications for opioid use disorder (MOUD)	33
Table 23. Supportive resources provided to clients	33
Table 24. Services that are specific for people of a protected class	34
Table 25. Specialty programming for pregnant or parenting people with young children	34
Table 26. Language interpretation services	35
Table 27. Languages interpreted	35
Table 28. Translated materials available for clients	35
Table 29. Virtual programming or teleservices	36

Executive Summary

The OHSU-PSU School of Public Health, in collaboration with the Oregon Health Authority and the Oregon Alcohol and Drug Policy Commission, conducted a rapid assessment of the state's substance use disorder services between September 2021 and September 2022.*

Key Findings

- All 36 Oregon counties showed violent crime, high alcohol outlet density, and low social association rates as Oregon's most substantial contributors to risk of hospitalization for a substance use disorder.
- There is a 49% gap in substance use disorder services needed by Oregonians.
- Most substance use disorder service providers lack capacity to meet demand for services.
- Statewide gaps in equity and access include insufficient provision of culturally relevant services to protected classes, language interpretation and translation services, and a workforce that does not represent the demographics of the state.
- Barriers to substance use disorder services persist in both transportation and technology.
- Among Oregon Health Plan members, rates of substance use disorder diagnoses suggest that less than half of those with a use disorder have been diagnosed or treated.
- There is a 51% gap in healthcare providers authorized to prescribe buprenorphine. Among surveyed facilities offering medications for opioid use disorder, half dispensed buprenorphine or naltrexone, while less than one third were certified Opioid Treatment Programs licensed to dispense methadone.
- Fewer than one in five surveyed providers offering harm reduction reported that they provided drug checking or syringe services.

Recommendations

- Treat encounters in the emergency department, hospital, shelters and justice systems as opportunities for connection to community treatment and naloxone distribution.
- Incentivize equitable distribution of linguistically and culturally relevant services.
- Address gaps in substance use disorder workforce, including both prescribers and credentialed staff providing essential prevention services and recovery supports.
- Increase support for service organizations to employ and bill for certified peer support specialists across the continuum of substance use disorder care.
- Invest in syringe service and other harm reduction programs, including drug checking.
- Expand access to medications for opioid use disorder through provider training, telemedicine, mobile services, and reduced wait times and insurance pre-authorization.
- Prioritize strategies that target affordable housing, education, and employment to reduce risk of substance use disorders and their consequences and to support long term recovery.

^{*} Please note that the current project was developed prior to passage of the Drug Addiction Treatment and Recovery Act (Measure 110), and data collection and analysis were underway during the selection of behavioral health resource network (BHRN) grantees in all 36 counties.

About the Inventory and Gap Analysis Process

What Is It?

In collaboration with the Oregon Health Authority and Oregon Alcohol and Drug Policy Commission (ADPC), researchers from the Oregon Health & Science University – Portland State University School of Public Health (OHSU-PSU SPH) conducted an inventory and gap analysis of service delivery resources available in Oregon to address substance use disorder prevention, harm reduction, treatment, and recovery. Substance is defined as alcohol and other drugs, including cannabis but excluding tobacco/nicotine. Other key definitions of terminology used throughout this report are provided below.

In support of the ADPC's 2020-2025 Oregon Statewide

<u>Strategic Plan</u>,¹ the Oregon Substance Use Disorder Services Inventory and Gap Analysis project focused on select services for substance use disorder prevention, harm reduction, treatment, and recovery, bringing health equity issues to the forefront. Key objectives included estimating by county, region, and statewide:

- County level risk of hospitalization due to a substance use disorder;
- Number of Oregonians experiencing a substance use disorder;
- Number of Oregonians in need of but not receiving treatment at a specialty facility for a substance use disorder;
- Gaps in select substance use disorder prevention, harm reduction, treatment, and recovery services; and
- Gaps in access, health equity, and other barriers to substance use disorder care.

Throughout the report, references to the substance use disorder continuum of care incorporate the following definitions of prevention, harm reduction, treatment, and recovery services:

- **Prevention**: Prevention services target factors most closely associated with increased risk for substance use across the life span. Prevention strategies include family- and school-based intervention programs; decreasing the availability and marketing of harmful products; reducing access to substances for underage persons; increasing the perception of harm; decreasing over-service of alcohol in restaurants, bars, and retail locations; increasing the use of health-promoting laws and policies; strengthening the use of effective early intervention and harm reduction strategies; increasing access to alternative pain and stress management therapies; and strengthening and expanding the prevention workforce.¹
- Harm Reduction: Individuals deserve services that promote health, regardless of whether they use drugs. Harm reduction is a set of practical strategies and ideas aimed at reducing negative consequences associated with drug use.² Harm reduction strategies are supported by evidence and compassion, such as distributing naloxone to rapidly reverse an opioid overdose or providing fentanyl test strips to check for contaminated

substances, and minimize the negative consequences of drug use.³ This report tabulates the following harm reduction services: syringe service programs, fentanyl test strip distribution, non-abstinence-based services, overdose prevention and reversal services, and providing information on safer drug use.

- Treatment: Treatment helps people disrupt addiction's powerful effects on the brain and behavior and regain control of their lives.⁴ Evidence-based treatments for substance use disorder can reduce substance use, related health harms (for example, infectious disease transmission), and overdose deaths. There are many kinds of treatment such as inpatient, live-in care in residential or hospital settings, treatment in an outpatient setting, and medications for the treatment of opioid use disorders. Effective treatment strategies focus on reducing barriers to accessing the most effective treatments, using motivational and cultural enhancements to encourage those who might be reluctant, advancing strategies to improve engagement and retention, and continuing to develop new therapeutic approaches.
- **Recovery**: 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.⁵ Recovery does not follow a linear process it is ongoing and not time-limited. There are multiple access points and routes to recovery. Common dimensions that support a life in recovery include *health*, such as management of one's disease(s) or symptoms and making informed, healthy choices that support physical and emotional well-being; *home*, having a stable and safe place to live; *purpose*, obtaining independence, income, and resources to participate in society, such as a job, school, volunteerism, or other creative endeavors; and *community*, relationships and social networks that provide support, friendship, love, and hope.⁶

Why Was It Done?

Oregon ranks 6th *in the nation for deaths due to alcohol.*⁷ In Oregon, excessive alcohol use is the third leading cause of preventable death and is responsible for over 2,000 deaths annually.⁸ Between 2010 and 2020, the annual rate of alcohol related deaths in Oregon rose from 38.6/100,000 to 43.7/100,000. Diseases related to excessive alcohol use and misuse include cancer, liver disease, diabetes, and alcohol dependence, and related injuries include those from motor vehicle crashes and violence.⁹ In 2020, Oregon ranked 5th in the US for the percentage of alcohol-impaired traffic fatalities; alcohol impairment was associated with 38% of all traffic fatalities.¹⁰

*Oregon ranks 2nd in the nation for deaths due to drug use.*¹¹ As of 2021, overdoses involving multiple substances accounted for over half of Oregon's fatal overdoses.¹² From 2000 to 2018, Oregon's death rate from drug overdose increased from 9.13/ 100,000 annually (313 deaths) to 13.63/100,000 (571 deaths).¹³ Post pandemic, the Oregon Health Authority reported a nearly 70% increase in overdose deaths between April/May 2019 and April/May 2020.¹⁴ In 2020, opioid-involved deaths accounted for 73% of drug overdose deaths, with fentanyl contributing to about 40% of those.¹⁴

Oregon ranks 1st in the nation for percent of population needing but not receiving treatment for substance use disorders.¹⁵ Oregon ranks 1st in the nation for percent of population (ages 12 and older) with illicit drug use disorder in the past year (9%), 2nd for percent of population (ages 12 and older) experiencing a substance use disorder in the past year (18%), and 5th for alcohol use disorder in the past year (12%).¹⁵ An estimated 22% of Oregonians aged 12 or older reported binge alcohol use in the past month, and an estimated 4.3% of Oregonians aged 12 or older used an illicit drug other than marijuana in the past month.¹⁶ Substance use disorder treatment needs among Oregon's justice-involved populations are significantly higher. Among the 12,020 adults in custody in Oregon's prisons, over half have a documented substance use disorder use.¹⁷

Understanding Gaps in Oregon's Prevention, Treatment, and Recovery Services

Responding to the urgent call for population-level estimates of need and service capacity as described in the <u>2020-2025 Oregon Statewide Strategic Plan¹</u> and the <u>Oregon Tribal Behavioral Health Strategic Plan – 2019 to 2024</u>,¹⁸ this report can be used to inform strategies and prioritize resource allocation more effectively by identifying counties and regions in Oregon where significant service gaps exist. The Oregon Substance Use Disorder Services Inventory and Gap Analysis project is a critical first step towards documenting currently available services; identifying the need for substance use disorder prevention, harm reduction, treatment, and recovery services across the state; and assessing gaps in services at the state, regional, and county-levels. In addition, this work supports the establishment of baseline service capacity data to enable measurement of progress toward the goal of building and implementing a comprehensive and sustainable statewide system.¹

How Was It Done?

A rapid assessment was conducted from September 2021 through September 2022, employing a four-pronged approach:

- Conducted a <u>needs assessment</u> using data from the National Survey on Drug Use and Health and Oregon Health Plan billing data to estimate the need for substance use disorder services in each county or region in Oregon.
- Developed a <u>substance use disorder services directory</u> of prevention, treatment, and recovery organizations in each Oregon county to inform the needs assessment and gap analysis process. Collected organization-level information to establish a baseline to measure current system capacity and contacted organizations through the substance use disorder services survey.
- Applied the <u>Calculating for an Adequate System Tool</u> (CAST) to generate estimates of risk and service capacity need that can help inform statewide planning efforts to improve the system of substance use care.^{19,20} The CAST utilizes information from the needs assessment as well as from literature reviews and Oregon specific utilization of

services to calculate an estimated number of services needed. The estimated services needed are compared to workforce data and information collected through the substance use disorder service survey to identify gaps in substance use disorder services.

• Conducted a <u>substance use disorder services survey</u> to obtain additional context and information in support of the CAST findings as well as other important gaps in access and health equity. Throughout the report this is referred to as the "Survey."

A brief summary of the approach follows.

Needs Assessment

National Survey on Drug Use and Health

<u>The National Survey on Drug Use and Health (NSDUH)</u> is a nationwide household survey that provides up-to-date information on self-reported alcohol and drug use.²¹ Data are provided at the state and regional levels, and for the United States as a whole. Each year, NSDUH interviews approximately 70,000 people ages 12 and older. Study results are released each fall and are used to inform public health programs and policies. In most cases, the survey is completed by the participant using a computer, tablet, or mobile device.²¹ As a result of the household-based sampling methodology, unhoused populations, incarcerated populations, and those in hospitals, nursing homes, or other congregate facilities are not represented in the data. As such, the reported prevalence estimates may be underestimated.

Despite its limitations, NSDUH provides the most comprehensive self-reported data available about substance use and substance use disorders available in the United States, offering a baseline estimate of the number of people who use or misuse specific substances, number of people with use disorders, as well as the number of people needing but not receiving treatment at a specialty facility for use disorders. NSDUH's classification of use disorders are based on criteria from the Diagnostic and Statistical Manual of Mental Disorders, 5th edition (DSM-5). NSDUH classifies individuals as needing treatment if the individual meets the DSM-5 criteria for a drug use disorder and did not receive treatment, received treatment for a use disorder at a specialty facility but reported they needed additional treatment, or used substances without a DSM-5 classified diagnosis but reported a need for treatment.^{22,23}

NSDUH data are reported at the national, statewide, and substate level. We utilized the 2016-2018 regions defined by NSDUH²⁴ and as shown in **Figure 1**. To create county and region estimates of use and use disorders, NSDUH state or region estimates were applied to 2020 US Census population data for the associated age groups. Regions were used to estimate region use estimates for most substances. In some cases, statewide or national data were used if region estimates were too small or not reported. In 2020, NSDUH began using the DSM-5 use disorder criteria in its estimates,²⁵ but these updated criteria have not yet been applied to regions. Therefore, we used NSDUH 2020 state level prevalence estimates for all estimates about use disorders and those needing but not receiving treatment at a specialty facility for a use disorder. The needs assessment data by county is available in <u>Appendix A</u>.

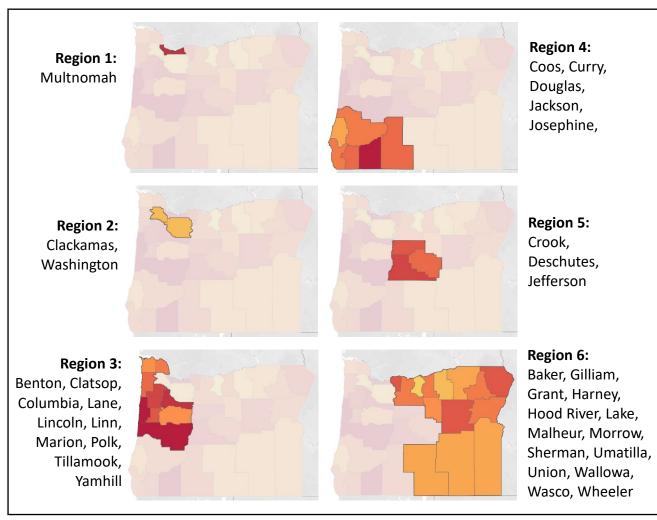


Figure 1. National Survey on Drug Use and Health (NSDUH) 2016-18 Oregon regions^a

^aOregon regions as defined by NSDUH 2016-18²⁴

NSDUH published new definitions of regions in April of 2022 with partial data available for substance use within these new regions.^{26,27} Based on the limited amount of data available with new regions, this report utilizes the 2016-2018 regions when applicable.

Table 1 provides summarizes the sources of NSDUH substance use disorder data used in this report.

Substance Use and Use Disorder Rates			
Binge alcohol use, past month			
Marijuana use, past year	2016-18 NSUDH substate		
Cocaine use, past year	estimates ²⁸		
Heroin use, past year			
Opioid misuse, past year	2020 NSDUH national estimate ¹⁶		
Includes heroin and opioid pain relievers			
Prescription pain reliever misuse, past year			
Illicit drug use other than marijuana, past month			
NSDUH Definition: "Illicit drug use includes the misuse of			
prescription psychotherapeutics or the use of cocaine (including			
crack), heroin, hallucinogens, inhalants, or methamphetamine.			
Misuse of prescription psychotherapeutics is defined as use in			
any way not directed by a doctor, including use without a	2020 NSDUH, Oregon statewide		
prescription of one's own; use in greater amounts, more often, or	estimates ¹⁶		
longer than told; or use in any other way not directed by a	estimates ¹⁰		
doctor. Prescription psychotherapeutics do not include over-the-			
counter drugs." ²⁹			
Methamphetamine use, past year			
Alcohol use disorder			
Illicit drug use disorder			
Pain reliever use disorder			
Opioid use disorder	2020 NSDUH national estimate ¹⁶		
Substance use disorder			
Needing but not receiving treatment at a specialty facility for			
an illicit drug use disorder	2020 NSDUH, Oregon statewide estimates ¹⁶		
Needing but not receiving treatment at a specialty facility for			
Alcohol Use disorder			
Needing but not receiving treatment at a specialty facility for			
Substance use disorder			

Oregon Health Plan Data

The Oregon Health Authority estimates that that there were nearly 73,000 emergency department visits and 17,000 hospital admissions for overdose in 2021.¹² As reported in the Oregon Criminal Justice Commission's <u>2019 Analysis of Oregon's Publicly Funded Substance</u> <u>Abuse Treatment System</u>, Oregon was estimated to spend \$472M (\$236M/year) on substance use prevention and treatment-related services.³⁰ Medicaid spending accounted for 63% of those dollars, with a 59% increase in per capita expenditures from 2010 to 2017.³⁰ To inform the current inventory and gap analysis with regard to current demand for services, Oregon Health & Science University's Center for Health System's Effectiveness (CHSE) updated their analysis using 2020 Medicaid claims data to estimate diagnosed substance use disorder diagnoses and treatment among Oregon Health Plan members, by age group. If the total number of Oregon Health Plan members in any given category is less than 11 people, a range of 1 - 10 is shown in place of the actual number to protect individuals. This data is available by region because the findings were too small to report at the county level.

Access and Equity: Oregon Substance Use Disorder Workforce

Health of a community is improved when the health care workforce is representative of the population it serves.³¹ As part of the needs assessment, we analyzed workforce data previously collected by the Mental Health & Addiction Certification Board of Oregon (MHACBO) and the Oregon Health Authority to compare Oregon's 2020 US Census demographics to the substance use disorder workforce. The workforce demographic data are comprised of demographic information about the county, prescribers (including physicians, nurse practitioners, and physician assistants), and non-prescribers (including Qualified Mental Health associates, Qualified Mental Health professionals, Certified Alcohol and Drug Counselors, and Certified Prevention Specialist). Information about demographics of the prescribing workforce was only available at the state level.

Substance Use Disorder Services Directory

An inventory of known services available across Oregon was compiled prior to conducing outreach to collect details about organization-level services in all Oregon counties. An initial list was compiled with support from the Oregon Council for Behavioral Health and Lines for Life, both with recently maintained lists of accredited substance use disorder organizations across the state. This list was cross referenced with <u>Oregon Health Authority's monthly release of the Oregon Substance Use Disorders Services Directory</u>.³² Additionally, OHSU-PSU SPH staff presented at various stakeholder meetings about this project, sharing the service list directly with others to help identify organizations that may have been missing from the initial list. Participating organizations were asked to identify additional substance use disorder services in their county to include in the process. <u>Appendix B</u> details the inventory or "directory" of services compiled during the rapid assessment.

Calculating for an Adequate System Tool

The Calculating for an Adequate System Tool (CAST) is a method for evaluating the capacity of the substance use disorder care system within a defined geographic area and provides users with both a risk assessment of county-level social and community determinants of substance use disorders, and an assessment of local service need across the continuum of care. Most often, the CAST has been used to estimate need for a county as the geographic unit,^{33–35} but it can be used for smaller or larger areas so long as data at those geographic levels is available or could be produced at scale. The CAST methodology was developed by an interdisciplinary group of researchers at the Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Behavioral Health Statistics and Quality (CBHSQ).¹⁹ Subsequent development and applications of the CAST were undertaken by JG Research & Evaluation.²⁰

In close collaboration with JG Research, we applied the CAST to assess the capacity of Oregon's substance use disorder service system by county, region, and statewide. The CAST includes service categories along the substance use disorder continuum of care including universal prevention, harm reduction, recovery support services, inpatient and outpatient treatment services, and treatment workforce, and produces community specific assessments of the capacity of the components of a community substance use disorder care system. Further, the CAST estimates recommended volume of services based on demographic characteristics correlated with adverse substance use outcomes within communities.²⁰

Included in this report are three core elements of the CAST:

- The risk score is a calculation of a county/region's risk contribution of social determinants of health and health disparities to the likelihood that a county/region's hospitalization rate for substance use disorders will be above the national median hospitalization rate for alcohol or other substance use diagnoses. This score is calculated by assessing community characteristics that contribute to the population's risk of a substance use disorder related injury.
- 2. The **risk level** provides a color-coded, visual benchmark about a county/region's general risk level, which is associated with the Risk Score.
- 3. The CAST estimates **needed number of services** using local inputs, including county demographic information and NSDUH estimates of substance use and use disorders and the number of individuals needing but not receiving treatment in the past year for the most commonly misused substances. Data inputs and sources are detailed below.

The following information provides guidance on how to interpret the CAST risk scores. Counties with a **moderate risk** score (a score of 10 to 20), have a 35-67 % likelihood of having a hospitalization rate above the national median hospitalization rate for drug/alcohol diagnosis. Counties with a **high risk** score (a score of 21 to 33), have a 69-92 % likelihood of having a hospitalization rate above the national median hospitalization rate for a drug/alcohol diagnosis. The CAST identified the national median hospitalization rate for a drug/alcohol diagnosis as 115 per 100,000 people in the population.²⁰ **Table 2** outlines the data sources used to calculate the CAST Risk Score in Oregon.

Table 2. Description and sources for data inputs used for CAST Risk Score.

Characteristic	Data Source
 % of adult population that is male % of population without high school diploma % of households with income below \$35,000 % of population with a college degree 	2020 US Census ³⁶
% of population that lives in a rural area	2010 US Census ³⁶
% of population with access to physical activity	University of Wisconsin Population Health Institute, 2010 & 2019 County Health Rankings ³⁷
Social Association rate per 100,000 people Social Association measures the number of membership associations per 10,000 people in the population. This number was adjusted to the rate per 100,000 people for use in the CAST. University of Wisconsin Population Health Institute calculates the social association by diving the total number of membership associations in a county (which include membership organizations such as civic organizations, bowling centers, golf clubs, fitness centers, sports organizations, religious organizations, business organizations, and professional organizations) by the total resident population of a county.	University of Wisconsin Population Health Institute. <u>2018 County Health Rankings</u> ³⁷
Violent crime rate per 100,000 people	University of Wisconsin Population Health Institute, <u>2014 & 2016 County Health Rankings</u> ³⁷
Alcohol outlet density (rate per 100 non- alcohol businesses) Alcohol outlet density, for purposes of the CAST methodology, is calculated by dividing the number of businesses with alcohol licenses (as reported by the OLCC), by the total number of non-alcohol business licenses, times 100. The total number of non-alcohol business licenses is calculated by taking the total number of businesses (as reported by the Oregon Business Registry), and subtracting the number of alcohol licenses.	<u>Oregon Liquor and Cannabis Commission</u> ³⁸ and <u>Oregon Business Registry</u> ³⁹

The **service gap** is estimated by comparing the CAST estimate for services needed by the number of services actually present in a community. In order to calculate the number of services needed, the CAST utilizes data about the community, as well as a variety of factors such as frequency of service, typical capacity of services, service usage rates, and NSDUH estimates of use or use disorders. New CAST service categories utilized in this Oregon specific report include Certified Prevention Specialist, Certified Alcohol and Drug Counselors, Qualified Mental Health Associates and Professionals, as well as inpatient and outpatient treatment categories, which collapse the American Society of Addiction Medicine classifications.

We estimated number of existing services through either our survey or through previously collected data sources. For example, data regarding distribution of naloxone were collected through the survey as there were no county level pre-identified sources of this information; data regarding number of certified prevention specialists were provided by the Mental Health & Addiction Certification Board of Oregon (MHACBO). A full list of data components and sources are provided in **Table 3**, which outlines all the capacity components measured with the CAST tool for this project, definitions for the component and their units of measurement, and the data used to calculate the current capacity across each component in Oregon. CAST estimations about number of needed services and county risk scores are intended to guide and inform decision-making, not to assess or critique a county's success.

	Population Definitions and Units of	Data Source for Oregon's		
Component	Measurement	Current Capacity		
Workforce				
Certified Prevention Specialist				
Certified Alcohol and Drug	Number of people certified in each specialty			
Counselors	through the Mental Health & Addiction			
Certified Behavioral Health Peer	Certification Board of Oregon, within a region	Mental Health & Addiction		
Support Specialist	or county. If a person has more than one	certification Board of		
Qualified Mental Health	certification, they are included in the counts for	Oregon ⁴⁰		
Associates	each one.			
Qualified Mental Health				
Professionals				
Prescribers with a	Number of prescribers with an active waiver	Comagine Health and Oregon		
Buprenorphine Waiver	within a region or county	Health Authority ⁴¹		
Substance Use Disorder Specifie				
	Number of organizations offering <u>American</u>			
Outpatient	Society of Addiction Medicine (ASAM) Levels of			
	<u>Care 1.0 to 2.5</u> ⁴²			
	Number of organizations offering <u>American</u>			
Inpatient	Society of Addiction Medicine (ASAM) Levels of			
	<u>Care 1.0 to 2.5</u> ⁴²	Substance Use Disorder		
Residential Detox	Number of Residential Detox facilities within	Services Survey		
Residential Detox	region or county			
	Number of peer-lead recovery care			
Recovery Community Centers	organization that provides a range of services			
Receivery community centers	including drop in services, within a region or			
	county			
		Mental Health & Addiction		
Recovery Residences	Number of beds available in recovery	certification Board of		
	residences within the region or county	Oregon ⁴⁰ and Substance Use		
		Disorder Services Survey		
Programs or Organizations Pro	widing substance use disorder Resources			
Facilities with Fentanyl Test	Number of substance use disorder			
Strip Distribution	organizations providing fentanyl test strips in a			
r	county or region	Substance Use Disorder		
Facilities with Naloxone	Number of substance use disorder	Services Survey		
Distribution	organizations providing Naloxone in a county			
	or region			
Syringe Service Programs	Number of programs within a county or region	Comagine Health and Oregon		
		Health Authority ⁴¹		
Prescription Drug Dropoff	Number of drug disposal events held per year,	Med-Project and Drug Take		
Locations	combined with all drug disposal locations	Back Solutions ⁴³		
Twelve Step Groups	Number of meetings in a county or region	Online Directories		
School Based Prevention	Number of assemblies for substance use	Estimates created based on		
Assemblies	prevention across entire county or region	data provided by the Oregon		
School Based Prevention	Number of classroom activities for substance	Department of Education		
Classroom Activities	use prevention across entire county or region	- P		

Table 3: Oregon data sources used to assess current service capacity

Substance Use Disorder Services Survey

A web-based survey tool was developed and implemented to collect detailed information on service capacity across prevention, treatment and recovery providers in Oregon (referred to here as the "survey"). The survey was designed around the goals and objectives of the Oregon Alcohol and Drug Policy Committee's Strategic Plan, which includes information about health equity and barriers in access to care, as well as the information needed for the CAST capacity analysis, as <u>described above</u>.

The full survey instrument is included in <u>Appendix C</u>. Survey items included:

- Types of services provided across the continuum of care;
- Services specific to a population, including services created specifically for people of a particular race/ethnicity, religion, gender, sexual orientation, disability, or veteran status;
- Service accessibility, such as service provision in multiple languages and barriers to transportation;
- Primary mechanisms of funding and whether funding amounts are currently adequate to carry out the organization's mission;
- Service capacity; and
- Items to assess issues of access and equity in substance use disorder services.

During the development stage, OHSU-PSU SPH researchers met with key stakeholders and community members who work in different sectors of the substance use disorder continuum of care to gain feedback and further refine the survey tool.

OHSU-PSU SPH staff conducted outreach and individual queries of all substance use disorder organizations identified through the substance use disorder service directory (Appendix B). Data collection began on February 16, 2022 and concluded on June 30, 2022. Outreach was initiated through phone calls or emails to collect or confirm contact information at each organization. Organizations had two options to complete the survey: 1) the organization's identified representative could schedule a phone interview with an OHSU-PSU SPH research staff member; or 2) organizations could complete an online, self-directed version of the survey on their own time. Phone interviews were conducted whenever possible.

When available, stakeholders provided introductions and connections to contacts at other organizations across the state, helping to increase responsivity. The first wave of data collection began with outreach to organizations who primarily provide treatment services. The second and third waves of data collection were focused on connecting with recovery organizations, followed by prevention organizations or initiatives with a survey tailored to measure prevention-based resources. Staff maintained a detailed communication log, noting outreach attempts and details about any challenges connecting with a specific organization or location.

Findings

Findings from the needs assessment, application of the CAST methodology, and a comprehensive substance use disorder services survey indicated gaps in services across the substance use disorder continuum of care in all Oregon counties. The needs assessment and the CAST quantified regional service needs and estimated gaps in services to meet that need. The survey findings contextualized the CAST risk scores and revealed further gaps in workforce, funding and health equity across the state.

Key findings for the needs assessment, CAST, and survey are presented here. Information by county is included in the <u>County Profiles</u> section at the end of the findings. Detailed needs assessment findings by region and county are included in <u>Appendix A</u>, and the substance use disorder services directory is included in <u>Appendix B</u>.

Needs Assessment

National Survey on Drug Use and Health: Substance use, substance use disorders, and unmet need for treatment services in Oregon

In most cases, the NSDUH survey data are robust for Oregon at the county or regional level and may be used to estimate prevalence of substance use and use disorders, as well as an estimated need for services. Please note that the findings from the NSDUH survey are not generalizable to unhoused and incarcerated populations or those housed in hospitals, nursing homes, or other communal dwellings, who were excluded from the national sample.

The following tables highlight statewide data, by the age groups 12 to 17, 18 to 25, age 26 and up, and ages 12 and up. NSDUH estimates are not created for people under age 12. For substance use estimates, we also included the NSDUH region estimates for ages 12 and up. For all county and region-specific data, please see <u>Appendix A</u>.

Table 4 includes the statewide number and percent of Oregonians who reported specific substance use, including binge alcohol use in the past month, marijuana use in the past month, heroin use in the past year, and methamphetamine use in the past year. Across the state, estimated prevalence of binge alcohol use were highest across these substances (22% of Oregonians age 12 and up).¹⁶ This accounts for over 800,000 people in the state. Binge alcohol use and marijuana use in the past month were highest among those ages 18 to 25, while heroin use and methamphetamine use in the past year were highest among those ages 26 and older.¹⁶

	0	Alcohol Use, t Month		uana Use, t Month		oin Use, st Year		phetamine Past Year
	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Total US age 12 and up	23.08	22.59-23.57	11.66	11.3 – 12.0	0.33 ^b	0.26-0.41 ^b	0.82	0.72-0.94
Statewide								
age 12 and up 3,675,924	22.00%	19.52-24.70	19.26%	16.70-22.12	0.56% ^b	0.25-1.25 ^b	1.93%	1.29-2.88
age 12 to 17 n = 305,645	4.77%	3.50-6.47	11.75%	9.09-15.05			0.18%	0.08-0.40
age 18 to 25 n = 419,575	31.43%	26.77-36.50	32.66%	27.36-38.44	0.10%	0.04-0.23	0.51%	0.28-0.90
age 26 and up n = 2,950,704	22.40%	19.53-25.57	18.12%	15.33-21.28	0.62%	0.27-1.42	2.31%	1.51-3.52
Regions (age 12 a	and up) ^c							
Region 1 n = 717,176	27.57%	24.12-31.30	27.15%	23.43-31.22	0.42%	0.21-0.85	0.98%	0.54-1.77
Region 2 n = 878,744	23.12%	20.07-26.47	15.76%	13.18-18.75	0.29%	0.14-0.58	0.85%	0.48-1.53
Region 3 n = 1,144,168	24.14%	21.28-27.25	19.38%	16.65-22.42	0.40%	0.21-0.78	1.14%	0.69-1.90
Region 4 n = 505,178	22.19%	18.62-26.23	18.78%	15.13-23.08	0.41%	0.20-0.83	1.66%	0.95-2.90
Region 5 n = 216,388	25.89%	21.18-31.23	17.24%	12.88-22.69	0.30%	0.14-0.63	1.07%	0.54-2.14
Region 6 n = 214,268	26.59%	22.32-31.35	14.30%	10.99-18.40	.43%	0.20-0.89	1.17%	0.63-2.19

Table 4. Prevalence of population reporting substance use nationwide, statewide, and by region, NSDUH 2020^a

^a Data adapted from NSDUH 2020¹⁶

^bTotal US and Oregon estimates for heroin use, past year is for the age group 18 and up, as there was no data available for people in the age group 12 - 17.¹⁶

^cRegion data available from 2016-18 NSDUH release²⁸

Table 5 details the estimated prevalence of substance use disorders among Oregonians across age groupings, as well as estimated prevalence of people who are needing but not receiving treatment at a specialty facility for a substance use disorder in the past year. NSDUH's definition of substance use/disorder includes illicit drugs, alcohol and marijuana. Again, the highest rates of substance use disorder were among Oregonians ages 18 to 25, at 28.83 %.¹⁶ The 18 to 25 age group also accounts for the largest number estimated to be needing but not receiving treatment at a specialty facility for a substance use disorder in the past year.

	Substance use disorder (SUD)		Needing but not receiving treatment at a specialty facility for a SUD in the past year		
	% with a SUD	95% CI	% needing but not receiving treatment	95% CI	
Total US age 12 and up	14.54%	13.90-15.20	13.89%	13.28-14.52	
Statewide					
age 12 and up 3,675,924	18.22%	15.14-21.77	18.08%	15.24-21.33	
age 12 to 17 n = 305,645	7.97%	5.39-11.63	8.15%	5.53-11.84	
age 18 to 25 n = 419,575	28.83%	22.69-35.87	29.62%	23.31-36.81	
age 26 and up n = 2,950,704	17.74%	14.21-21.93	17.44%	14.15-21.32	
2					

Table 5. Number and percent of population estimated to have a substance use disorder,NSDUH 2020^a

^aData adapted from NSDUH 2020¹⁶

Observing sub-types of substance use disorders (**Table 6** and **Table 7**), the trend continued among those ages 18 to 25 in having the highest estimated prevalence of specific use disorders.

Table 6 shows alcohol use disorder prevalence in Oregon by four age groupings, as well as those needing but not receiving treatment at a specialty facility for an alcohol use disorder in the past year. Alcohol use disorders were estimated to affect over 450,000 people in Oregon, with approximately 354,380 people needing but not receiving services in a specialty facility.¹⁶ Similar to the substance use disorder findings shown in Table 2, alcohol use disorder prevalence is highest among people ages 18 to 25, with 14.81% estimated to have an alcohol use disorder.¹⁶

Table 6. Number and percent of population estimated to have an alcohol use disorder, NSDUH2020^a

	Alcohol use disorder (AUD)		Needing but not receiving treatment at a specialty facility for an AUD in the past year		
Age	% with an AUD	95% CI	% needing but not receiving treatment	95% CI	
Total US age 12 and up	10.23%	9.68 - 10.81	9.95%	9.41 - 10.52	
Statewide					
age 12 and up 3,675,924	12.34%	9.87-15.32	11.65%	9.37-14.41	
age 12 to 17 n = 305,645	3.28%	2.02- 5.30	2.98%	1.87- 4.71	
age 18 to 25 n = 419,575	14.81%	10.82- 19.95	15.26%	11.21- 20.45	
age 26 and up n = 2,950,704	12.89%	9.92- 16.60	12.01%	9.31- 15.37	

^aData adapted from NSDUH 2020¹⁶

Table 7 shows the estimated prevalence of Oregonians with an illicit drug use disorder, and estimated prevalence of those needing but not receiving treatment at a specialty facility for an illicit drug use disorder in the past year. Again, the estimated prevalence was highest among Oregonians ages 18 to 25 (20.45%).¹⁶

	Illicit drug use disorder (IDUD)		Needing but not receiving treatment at a specialty facility for an IDUD in the Past Year		
Age	% with an IDUD 95 % CI		% needing IDUD treatment	95% CI	
Total US age 12 and up	6.64%	6.24 – 7.07	6.28%	5.89 – 6.69	
Statewide					
age 12 and up 3,675,924	9.04%	7.01–11.59	8.86%	6.77– 11.52	
age 12 to 17 n = 305,645	7.57%	5.12-11.05	9.39%	5.96– 14.51	
age 18 to 25 n = 419,575	20.45%	14.76– 27.62	19.98%	14.36-27.11	
age 26 and up n = 2,950,704	7.57%	5.40-10.50	7.23%	5.01–10.34	

Table 7. Number and percent of population estimated to have an illicit drug use disorder,NSDUH 2020^a

^aData adapted from NSDUH 2020¹⁶

Oregon Health Plan Data on Substance Use and Use Disorders, 2020

Table 8 includes the percent of the population enrolled in the Oregon Health Plan (Medicaid), as well as the prevalence of Oregon Health Plan members with a documented alcohol use disorder, opioid use disorder, "other" stimulant use disorder, and substance use disorder, by age group. See <u>Appendix A</u> for Oregon Health Plan data by region.

Percent of the Oregon population with Oregon Health Plan (Medicaid) was highest among people age 12 to 17, accounting for 53.8% of the population in that age group. Among Oregon Health Plan members ages 26 to 64, 5% received billable services associated with an alcohol use disorder diagnosis; 1.4% received services for an "other" stimulant use disorder, and 11% received services associated with a diagnosed substance use disorder.

Table 8. Number and percent of Oregon Health Plan (OHP) members with documented use disorder diagnosis, 2020

Age	Percent of population with OHP	wi docun Alcoh	embers ith nented ol Use rder	OHP mem document Use Dis	ed Opioid	OHP members with documented Other Stimulant Use Disorders ^b		OHP members with documented Substance Use Disorder ^c	
		n AUD	% AUD	n OUD	% OUD	n other use disorder	% other use disorder	n SUD	% SUD
Statewide									
age 12 to 17	53.8%	923	0.6%	133	0.1%	247	0.3%	2,637	1.7%
age 18 to 25	36.6%	3,710	2.4%	2,244	1.5%	2,808	0.9%	8,770	5.7%
age 26 to 64	25.8%	28,354	5.0%	22,221	4%	22,332	1.4%	61,646	11.0%
age 12 to 64	30.3%	32,987	3.8%	24,598	2.8%	25,387	1.1%	73,053	8.3%

Based on administrative claims data, substance use disorder categories are not mutually exclusive. ^aA range appears in place of data suppression due to small cell size, <11 cases. ^bOther Stimulant Use Disorders include use disorders associate with use of sedatives, hypnotics, anxiolytics, hallucinogens, inhalants, and other psychoactive substances. ^cSubstance use disorders include all people who have one or more use disorders.

Access and Equity: Oregon Substance Use Disorder Workforce

Health of a community is improved when the health care workforce is representative of the population it serves.³¹ **Figure 2** demonstrates gaps in the healthcare workforce in comparison to the demographics of the state. The largest disparities in Oregon's substance use disorder workforce were evident among people who are Hispanic or Latino. While 13.2% of Oregonians are Hispanic or Latino, only 6.3% of non-prescribers and 0.4% of prescribers in the substance use disorder workforce are part of this demographic. Gaps in prescribers persisted across Black/African American, American Indian/Native Alaskan, Native Hawaiian/Pacific Islanders, and multi-racial populations.

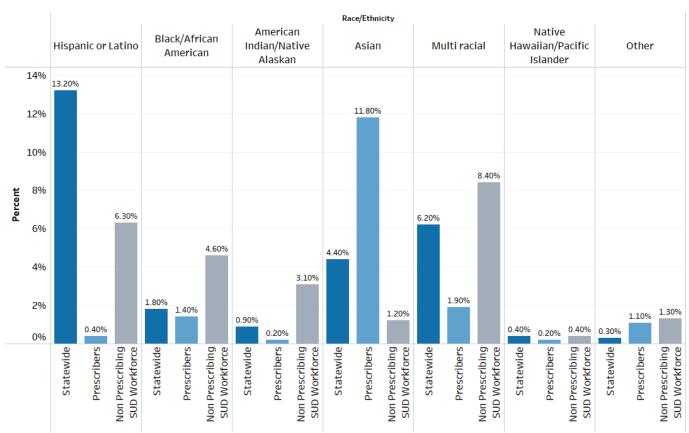


Figure 2. Statewide demographics compared to demographics of prescribing and nonprescribing substance use disorder workforce^a

^aPercent white (non-Hispanic/Latino) was excluded for better visual representation. Percent white by category are: Statewide, 74.9%; Prescribers, 79.7%; Non-prescribing workforce, 71.9%.

Substance Use Disorder Services Directory

After compiling a list of substance use disorder service organizations and their locations, a total of 1,637 service locations were identified across the continuum of substance use disorder care. Research staff reviewed the list to remove redundancies and verify that each service location was still open and offered substance use disorder prevention, treatment or recovery services. The final inventory includes contact information for 756 service locations statewide. See the <u>substance use disorder services survey</u> section for more information about identified

organizations with multiple service sites, and <u>Appendix B</u> for the full inventory of service locations identified.

Calculating for an Adequate System Tool (CAST)

Table 9 outlines the characteristics that contributed to Oregon's CAST Risk Score, with the characteristics contributing the most risk at the top, and the least amount of risk at the bottom. In Oregon, the characteristics that contributed the most to the CAST risk score include percent of population with access to physical activity, percent of population with college degrees, alcohol outlet density, and the social association rate per 100,000 people.

Table 9. CAST community characteristics contributing to CAST risk score, statewide

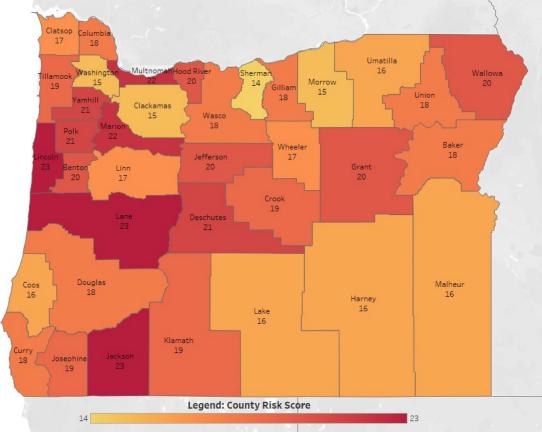
Risk Contribution	Characteristic	Estimate
HIGH	% of population with access to physical activity	88%
	% of population with college degree	34%
	Alcohol outlet density (rate per 100 non-alcohol businesses)	4
	Social association rate per 100,000 people	106
MODERATE	Violent crime rate per 100,000 people	241
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	18%
	% of population without high school diploma	8%
	% of the population that lives in a rural area	18%

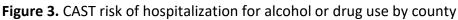
Table 10 highlights the level of risk attributed to each CAST characteristic by region. Regionally, alcohol outlet density, percent of population with access to physical activity, percent of the population with a college degree, and social association rate per 100,000 people contributed the most to risk scores across the state.

	Risk Contribution						
Characteristic	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	
Alcohol outlet density (rate per 100 non- alcohol businesses)*	HIGH	MODERATE	HIGH	HIGH	HIGH	HIGH	
% of population with access to physical activity	HIGH	HIGH	HIGH	HIGH	HIGH	MODERATE	
% of population with college degree	HIGH	HIGH	HIGH	MODERATE	HIGH	MODERATE	
Social Association rate per 100,000 people**	MODERATE	HIGH	HIGH	HIGH	HIGH	MODERATE	
Violent crime rate per 100,000	HIGH	LOW	LOW	MODERATE	MODERATE	LOW	
% of households with income below \$35,000	LOW	LOW	LOW	LOW	LOW	LOW	
% of population without high school diploma	LOW	LOW	LOW	LOW	LOW	LOW	
% of the population that lives in a rural area	LOW	LOW	LOW	LOW	LOW	LOW	
% of population that is male	LOW	LOW	LOW	LOW	LOW	LOW	

Table 10: CAST community characteristics contributing to CAST risk score, by region

Counties within NSDUH Regions: Region 1: Multnomah; Region 2: Clackamas, Washington; Region 3: Benton, Clatsop, Columbia, Lane, Lincoln, Linn, Marion, Polk, Tillamook, Yamhill; Region 4: Coos, Curry, Douglas, Jackson, Josephine, Klamath; Region 5: Crook, Deschutes, Jefferson; Region 6: Baker, Gilliam, Grant, Harney, Hood River, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, Wasco, Wheeler **Figure 3** provides a visualization of the CAST Risk scores across all counties in Oregon, with lighter yellow colors indicating a lower risk score, and darker red colors indicated a higher risk score. Risk scores in Oregon ranged between 14 to 23 on a scale of 0 to 33. In Oregon, 28 counties had a risk score designation of "moderate" (a score of 10 to 20) and eight counties had a risk scored designation of "high" (a score of 21 - 33), suggesting that all counties in Oregon had higher risk of hospitalization rates for a drug/alcohol diagnosis than the national median.





Risk scores can range between 0 to 33. In Oregon, risk score calculations fell between 14 to 23 CAST risk score analysis developed by JG Research

Table 11 shows the overall service gaps statewide and by region in Oregon. CAST estimations about number of needed services and county risk scores are intended to guide and inform decision-making, not to assess or critique a county's success. Based on the CAST model, overall, Oregon had a 49% gap in substance use disorder services statewide. This number is based on the CAST recommended number of services compared to the actual number of services. A 49% gap in services means that given the total number of recommended services in Oregon, an estimated 49% of them were missing. The gaps persisted across all parts of the substance use disorder continuum of care. Overall, substance use disorder service gaps regionally ranged from 39% in Region 6 (Baker, Gilliam, Grant, Harney, Hood River, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, Wasco, and Wheeler Counties), to 72% in Region 2 (Clackamas and

Washington Counties). The overall service gap by county and service categories are included in the <u>state and county profile</u> section of the report.

	Overall Service Gap	Region
Statewide	49%	Region 2
Region 1	42%	Region 3
Region 2	72%	Region 5 Region 6
Region 3	47%	
Region 4	42%	
Region 5	52%	Region 4
Region 6	39%	

Table 11. CAST overall service gap, statewide and by region

Counties within NSDUH Regions: Region 1: Multnomah; Region 2: Clackamas, Washington; Region 3: Benton, Clatsop, Columbia, Lane, Lincoln, Linn, Marion, Polk, Tillamook, Yamhill; Region 4: Coos, Curry, Douglas, Jackson, Josephine, Klamath; Region 5: Crook, Deschutes, Jefferson; Region 6: Baker, Gilliam, Grant, Harney, Hood River, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, Wasco, Wheeler

Table 12 highlights the CAST recommended number of services for the state. The recommended number of services is compared to the estimated number of existing services in Oregon, and allows us to generate an estimate of the number of services missing, referred to here as "gap in services." These select substance use disorder services are organized by substance use disorder workforce, substance use disorder specific facilities, and resources or programming. Across Oregon, gaps were observed in each of these categories. Among the substance use disorder workforce, the largest gaps were among Certified Prevention Specialists, with an estimated 906 more positions needed (94% gap), and Qualified Mental Health Professionals, with an estimated 11,740 more people needed (93% gap). Across substance use disorder facilities, the largest gap estimated by the CAST was Recovery Community Centers, with an estimated 137 more centers needed statewide (94% gap). Among substance use disorder programs and resources, the largest gap was syringe service programs, where an estimated 61 more programs are needed to meet Oregon's need (58% gap). County-level data are available in the county profiles.

	Estimated Number of Services				
			Gap in		
	Need	Actual	services	Percent	
Service Type	(n)	(n)	(n)	Gap	
Workforce – Statewide				66%	
Certified Prevention Specialist	968	62	906	94%	
Certified Alcohol and Drug Counselors	4,902	2,884	2,018	41%	
Certified Behavioral Health Peer Support Specialist	2,177	1,565	612	28%	
Qualified Mental Health Associates	20,493	2,776	17,717	86%	
Qualified Mental Health Professionals	12,619	879	11,740	93%	
Prescribers with a Buprenorphine Waiver	3,857	1,902	1,955	51%	
Facilities - Statewide				54%	
Outpatient	586	383	203	35%	
Inpatient	470	187	283	60%	
Residential Detox	103	75	28	27%	
Recovery Residences	7,078	3,219	3,859	55%	
Recovery Community Centers	145	8	137	94%	
Other Programming - Statewide				30%	
Facilities with Fentanyl Test Strip Distribution	127	83	44	35%	
Facilities with Naloxone Distribution	334	240	94	28%	
Syringe Exchange Programs	106	45	61	58%	
Prescription Drug Dropoff Locations	545	502	43	8%	
Twelve Step Groups	4,464	3,351	1,113	25%	
School Based Prevention Assemblies	2,223	1,572	651	29%	
School Based Prevention Classroom Activities	17,466	12,150	5,315	30%	

Table 12. Summary of CAST service gaps by service type^a

^aEstimates of need and service gaps produced using the Calculating an Adequate System Tool (CAST)²⁰

Substance Use Disorder Services Survey

Survey findings are presented below at the state level. Either county or regional level data from the survey are found in the <u>county profiles</u>. Note that the survey does not include a complete representation of all substance use disorder services statewide and is not necessarily generalizable to all prevention, treatment and recovery services offered within Oregon. In addition, due to already compiled databases and CAST definitions, treatment services are better represented in the current survey compared to prevention and recovery. Additional efforts will be required to better reflect the scope of prevention and recovery services available in Oregon, and the diverse workforce required to fully meet the need of Oregonians.

Participating Organizations

As described above, research staff identified and verified 756 service locations across the state. These sites were comprised of service locations for a total of 254 unique organizations in the state of Oregon currently providing one or more of the following services: substance use disorder prevention, treatment, and/or recovery services, with services delivered in one or more Oregon counties. Of those 254 unique organizations, 164 (65%) participated in the survey and rapid assessment process.

Each participating organization (N=164) completed one survey for each county in which they operated a service location. A total of 289 surveys were completed or partially completed by the 164 participating organizations, with up to one survey per organization, per county. Out of the 164 participating organizations, 139 completed surveys for multiple counties. Note that statewide counts include three additional organizations whose services were either statewide or virtual only. These organizations are included in statewide totals, but not county or region-specific totals.

Organizations self-reported up to four categories of service ("service types") across the continuum care, which was tabulated by county. Service types to choose from included substance use prevention, treatment, and/or recovery services, as well as behavioral health screenings (specifically the Patient Health Questionnaire (PHQ), Alcohol Use Disorder Identification Test (AUDIT), and General Anxiety Disorder (GAD)). **Table 13** below summarizes the number of total surveys completed (n=289), by region and county, and the percent offering each service type. Most organizations reported that they provided more than one service type. For example, an organization could state they offer prevention and treatment services, and therefore were included in the count for both of these categories. Statewide, 138 of participating organizations (48%) provided behavioral health screening[†]; 143 offered prevention services (50%), 183 offered treatment 54%, and 142 offered recovery services (50%).

⁺ Behavioral Health Screenings included the Patient Health Questionnaire (PHQ), Alcohol Use Disorders Identification Test (AUDIT), and General Anxiety Disorder (GAD).

Table 13. Participating organizations by services provided: Behavioral health screening,prevention, treatment, recovery, by county and region

		Percent of Participating Organizations Providing Screening, Prevention, Treatment and Recovery Services, by County and Region				
	N	Behavioral Health Screening (N=138)	Prevention (N=143)	Treatment (N=183)	Recovery (N=142)	
Statewide	289	48.3%	50.0%	64.0%	49.7%	
Region 1	52	48.1%	40.4%	71.2%	57.7%	
Multnomah	52	48.1%	40.4%	71.2%	57.7%	
Region 2	52	48.1%	44.2%	67.3%	61.5%	
Clackamas	28	39.3%	46.4%	64.3%	60.7%	
Washington	24	58.3%	41.7%	70.8%	62.5%	
Region 3	75	49.3%	38.7%	73.3%	52.0%	
Benton	4	50.0%	25.0%	100.0%	50.0%	
Clatsop	5	40.0%	40.0%	80.0%	60.0%	
Columbia	5	40.0%	40.0%	60.0%	40.0%	
Lane	20	45.0%	20.0%	90.0%	60.0%	
Lincoln	9	11.1%	55.6%	55.6%	44.4%	
Linn	7	71.4%	42.9%	85.7%	71.4%	
Marion	15	66.7%	46.7%	66.7%	46.7%	
Polk	2	50.0%	50.0%	0.0%	0.0%	
Tillamook	4	75.0%	50.0%	75.0%	50.0%	
Yamhill	4	50.0%	50.0%	50.0%	50.0%	
Region 4	40	40.0%	52.5%	50.0%	40.0%	
Coos	4	50.0%	75.0%	50.0%	25.0%	
Curry	1	0.0%	100.0%	0.0%	0.0%	
Douglas	6	16.7%	83.3%	16.7%	0.0%	
Jackson	15	40.0%	40.0%	53.3%	46.7%	
Josephine	8	37.5%	37.5%	50.0%	50.0%	
Klamath	6	66.7%	50.0%	83.3%	66.7%	
Region 5	16	62.5%	68.8%	62.5%	50.0%	
Crook	4	50.0%	75.0%	50.0%	25.0%	
Deschutes	10	70.0%	60.0%	70.0%	60.0%	

		1		1	1
Jefferson	2	50.0%	100.0%	50.0%	50.0%
Region 6	48	47.9%	77.1%	50.0%	33.3%
Baker	3	66.7%	66.7%	66.7%	33.3%
Gilliam	2	50.0%	50.0%	50.0%	0.0%
Grant	2	50.0%	100.0%	50.0%	0.0%
Harney	4	50.0%	75.0%	50.0%	50.0%
Hood River	4	75.0%	100.0%	75.0%	50.0%
Lake	3	0.0%	100.0%	0.0%	0.0%
Malheur	5	40.0%	100.0%	40.0%	40.0%
Morrow	2	50.0%	50.0%	50.0%	50.0%
Sherman	2	50.0%	100.0%	50.0%	50.0%
Umatilla	7	57.1%	57.1%	71.4%	28.6%
Union	3	33.3%	66.7%	33.3%	33.3%
Wallowa	2	50.0%	50.0%	50.0%	50.0%
Wasco	7	42.9%	85.7%	42.9%	42.9%
Wheeler	2	50.0%	50.0%	50.0%	0.0%

The survey also asked participants to self-report on services for Oregon Federally Recognized Tribes: "Which (if any) Oregon Tribes does your organization provide services to? Only select tribes if it is a tribally specific resources like Indian Health Service or a Tribally run organization."

Table 14 summarizes which organizations self-reported providing specific services for Native American Tribes. Out of the 164 participating organizations, 32 reported providing services to one or more tribes across one or more counties (19.5%). An organization may provide services to more than one tribe, so the sum of the number of organizations by tribe will be greater than the total.

Table 14. Participating organizations by services provided: Behavioral health screening,

 prevention, treatment, recovery, by tribes served

Tribe	Number of organizations providing services
Burns Paiute Tribe	7
Confederated Tribes of Coos	4
Confederated Tribes of Grand Ronde	10
Confederated Tribes of Siletz	8
Confederated Tribes of the Umatilla	10
Confederated Tribes of Warm Springs	10
Coquille Indian Tribe	5
Cow Creek Band of Umpqua Tribe of Indians	8
Lower Umpqua and Siuslaw Indians	4
The Klamath Tribes	8
Total number of organizations providing	
services specific to an Oregon Tribe	32

The American Society of Addiction Medicine (ASAM) outlines levels of care based on acuity and individual assets and challenges.⁴² The levels of care start with early intervention and then progressively increase in intensity and medical management through outpatient, intensive outpatient/partial hospitalization, residential/inpatient, and medically managed intensive inpatient. The ASAM levels of care highlight the need for a system that has the capacity and the ability to increase and decrease care intensity based on individual needs.⁴² Among participants reporting treatment services (N=183), 135 indicated services at specific levels of care summarized in **Table 15**. The majority (87%) offered intensive outpatient/partial hospitalization. About half offered early intervention (46%), outpatient (44%), and residential inpatient (51%). Fewer participating organizations offered residential detoxification services of any kind, with 16% providing medically managed intensive inpatient services.

	Number and percent of treatment facilities offering level of care				
Level of Care	n	%			
Early Intervention	62	45.9%			
Outpatient Services	60	44.4%			
Intensive Outpatient/Partial	118	87.4%			
Hospitalization					
Residential/Inpatient	69	51.1%			
Med Managed Intensive	22	16.2%			
Inpatient					
Residential Detox	30	22.2%			

Table 15. ASAM levels of care provided by 135 participating organizations that offer treatment

Staffing and Finance

As shown in **Table 16**, over half of survey participants reported capacity did not meet current demand for services (54%). In addition to capacity challenges, the majority of organizations also reported that funding was in inadequate to support their mission (60%). These findings are bolstered by organizations' self-reports about staffing levels and challenges filling vacant positions, with 66% of participants stating levels of staffing were inadequate to support their mission, and 80% of participants indicating difficulty filling vacant positions for staff.

	Capacity for services does not meet current demand		inadeo supp	Funding inadequate to support org mission		Staffing levels inadequate to support org mission		Difficulty Filling vacant positions	
	n	%	n	%	n	%	n	%	
Service Type									
Prevention	68	55.9%	54	51.9%	48	64.6%	48	77.1%	
Treatment	158	50.0%	121	63.6%	98	60.6%	96	85.4%	
Recovery	123	46.3%	88	60.3%	71	70.4%	70	74.3%	
Total	193	53.9%	263	59.7%	217	65.9%	214	79.9%	

Table 16. Capacity to meet current demand for services among participating organizations, by service type

Figure 4 shows data about capacity for services by region, which shows across all service types, 50 – 72.7% regions report that their capacity for services does not meet their demand for services. Region 4 (Coos, Curry, Douglas, Jackson, Josephine, Klamath) has the largest percent of organizations reporting inadequacies in their organization's capacity to serve clients.

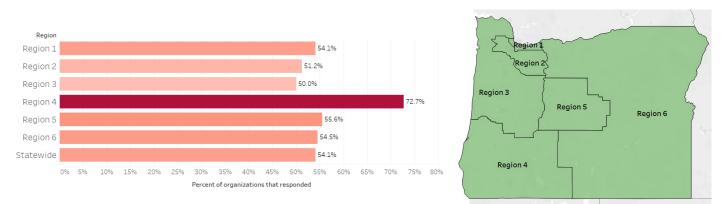


Figure 4. Percent of organizations reporting inadequate capacity for services

Counties within NSDUH Regions: Region 1: Multnomah; Region 2: Clackamas, Washington; Region 3: Benton, Clatsop, Columbia, Lane, Lincoln, Linn, Marion, Polk, Tillamook, Yamhill; Region 4: Coos, Curry, Douglas, Jackson, Josephine, Klamath; Region 5: Crook, Deschutes, Jefferson; Region 6: Baker, Gilliam, Grant, Harney, Hood River, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, Wasco, Wheeler

As shown in **Table 17**, survey participants reported a range of funding streams used to support their organizations. The majority indicated private insurance and Medicaid/Medicare, followed by state/county funding, federal grants, private grants, and Indian Health Service. Note that responses do not indicate the proportion of organization operating budgets funded through each source.

		Federal Grants	Indian Health	Medicaid/ Medicare	Private Insurance	State/County	Foundation/ Private
			Service				Grants
	n	% Yes	% Yes	% Yes	% Yes	% Yes	% Yes
Service Typ	e						
Prevention	52	46.2%	13.5%	84.6%	73.1%	69.2%	32.7%
Treatment	117	39.3%	12.0%	85.5%	73.5%	62.4%	25.6%
Recovery	88	44.3%	10.2%	76.1%	72.7%	69.3%	36.4%

Table 17. Sources of funding among participating organizations

As shown in **Table 18**, more than half of survey participants reported a reduction in billable visits due to the COVID-19 pandemic. At the time of survey administration, the application process to receive additional funds for substance use disorder services through Measure 110 had opened. About one in five survey participants reported increased funding through Measure 110.

	<u> </u>	D 1								
		Reduc	tion in bi	llable visits		Changes in funding				
		due to	COVID-1	9 pandemic	a	ssociated v	with Measure	e 110		
					%		%			
	n	% Yes	% No	% Unsure	Increase	% No	Decrease	% Unsure		
Service Ty	Service Type									
Prevention	54	NA	NA	NA	20.4%	63.0%	0	16.7%		
Treatment	119	64.8%	32.0%	64.8%	21.0%	58.8%	2.2%	18.5%		
Recovery	89	59.1%	36.4%	59.1%	22.5%	57.3%	2.2%	18.0%		

Table 18. Changes in funding during COVID-19 and related to Measure 110

Specialty Services

Table 19 summarizes selected specialty services reported by survey participants. Each row indicates the percent of participants offering each service, by service type. Among participants offering prevention services who completed the relevant survey items, 83% offered services for co-occurring disorders, 66% employed peer support specialists, 62% offered services targeted to justice-involved adults, and 59% offered outreach services to individuals currently houseless.

	Co-occurring substance use and mental health disorders		Opioid Treatment Program (OTP*)		Peer Support Specialists		Targeted to Justice- involved adults		Outreach Services to individuals who are houseless	
	n	% Yes	n	%Yes	n	%Yes	n	%Yes	n	%Yes
Service Type	е									
Prevention	57	82.5%	NA	NA	87	65.5%	103	62.1%	106	59.4%
Treatment	149	82.5%	85	35.3%	150	66.7%	170	60.6%	171	52.6%
Recovery	98	83.7%	NA	NA	89	75.4%	135	71.1%	137	70.1%

Table 19. Specialty services offered by participating organizations

Percentages and totals are based on respondents

*Among organizations that offer medications for opioid use disorder (N=85)

As shown in **Table 20**, among organizations who employed certified peer support specialists, Recovery Peers were the most commonly employed positions across organizations providing prevention, treatment, and recovery services.

		Recovery Mental F Peer Pee		Family Support Specialist	Youth Support Specialist
	n	% Yes	% Yes	% Yes	% Yes
Service Type					
Prevention	57	86.0%	45.6%	28.1%	45.6%
Treatment	100	92.0%	37.0%	15.0%	28.0%
Recovery	89	94.4%	31.5%	15.7%	25.8%

Harm reduction encompasses the policies, programs, and strategies that seek to minimize the harmful consequences of drug use and drug policies; it is both a philosophy and service delivery model that addresses the needs of people who use drugs as well as the needs of their communities (Marlatt et al., 1996; Roe, 2005; Calvo et al., 2017). In contrast to abstinence-based models, harm reduction embraces low-threshold access to services and does not make efforts to stop using drugs a precondition for support (Zelvin & Davis, 2001). A total of 141 out of the 289 survey participants indicated that they offered harm reduction services (**Table 21**). Of those, the majority provided information on safer drug use, non-abstinence-based services, and "other" harm reduction services. About half offered overdose prevention and reversal services. Fewer than one in five participants offering harm reduction reported that they provided drug checking.

		Syringe Service Program	Drug Checking	Non- abstinence based services	Overdose prevention and reversal	Info on Safer Drug Use	Other harm reduction
	n	% Yes	% Yes	% Yes	% Yes	% Yes	% Yes
Service Type	9						
Prevention	53	18.9%	9.4%	62.3%	52.8%	86.8%	71.7%
Treatment	141	13.5%	17.0%	71.6%	51.1%	88.7%	77.3%
Recovery	98	14.3%	17.3%	70.4%	48.0%	87.8%	76.5%

Table 21. Services provided by 141 participating organizations offering harm reduction

As shown in **Table 22**, a total of 85 out of the 183 participants offering substance use disorder treatment indicated that they prescribe or dispense one or more medications for opioid use disorder. About half of these dispensed medications only, but did not prescribe. Half dispensed at least one formulation of sublingual buprenorphine or buprenorphine/naloxone and 46% dispensed naltrexone. Approximately 30% of participating MOUD treatment providers (see Table 16) were certified Opioid Treatment Programs. Among those reporting any methadone services, 6 prescribed and dispensed, 9 prescribed only, and 9 dispensed only.

	Sublingual Buprenorphine		Sublingual Buprenorphine/ naloxone		Naltrexone (oral or injectable)		Methadone	
	n	%	n	%	n	%	n	%
MOUD Service								
Prescribed & Dispensed	21	24.7%	22	25.9%	25	29.4%	6	7.1%
Prescribed only	8	9.4%	8	9.4%	7	8.2%	9	10.6%
Dispensed only	38	44.7%	42	49.4%	39	45.9%	9	10.6%
Not reported	18	21.2%	13	15.3%	14	16.5%	61	71.8%

Table 22. Medications prescribed and dispensed among 85 participating treatment

 organizations offering medications for opioid use disorder (MOUD)

Equity and Access

Table 23 through **Table 29** indicate provision of services to increase accessibility of prevention, treatment, and recovery among protected classes, as well as individuals with limited access to culturally relevant services, and those that experience barriers to services related to transportation, technology, and housing.

As shown in **Table 23**, the majority of survey participants reported provision of transportation support and linkages to primary care for their clients. More than half (64%) of participants offering recovery support services indicated specialty programming for adults re-entering community from incarceration. A minority of survey participants indicated that they offered formal services to support employment, legal service needs, or evidence-based family support services.

		Transportation	Job training	Job placements	Linkages to primary care	Legal Services	Reentry from jail or prison	Evidence based family support services
	n	%Yes	%Yes	%Yes	%Yes	%Yes	%Yes	%Yes
Service Type								
Prevention	93	73.1%	30.1%	19.4%	84.9%	7.5%	40.9%	31.2%
Treatment	156	69.9%	26.3%	21.2%	86.5%	9.6%	46.8%	35.9%
Recovery	126	84.9%	42.1%	31.0%	84.1%	13.5%	64.3%	42.1%

Table 23. Supportive resources provided to clients

Table 24 shows the number of participants indicating programming to support protected classes. Nearly half (48%) of organizations offering recovery services indicated services specific to a racial or ethnic group, and 42% of organizations offering recovery services indicated gender-specific services. Among organizations offering prevention services, 48% did not

indicate specific programming for protected classes; 37% of organizations offering treatment and 26% of organizations offering recovery services also did not indicate offering specific programming for protected classes.

		Services specific to a Racial or ethnic group (culturally specific services)	Services specific to a certain religious group	Gender specific services	LGBTQIA2S+ specific services‡	Services specific for people with a mental or physical disability	Services for Veterans	None
	n	%Yes	%Yes	%Yes	%Yes	%Yes	%Yes	%Yes
Service Type	e							
Prevention	132	33.3%	0.8%	27.3%	14.4%	15.2%	8.3%	47.7%
Treatment	161	38.5%	2.5%	37.3%	18.6%	16.1%	13.7%	36.6%
Recovery	134	48.5%	3.7%	42.5%	2.1%	28.4%	20.1%	26.1%

Table 24. Services that are specific for people of a protected class	Table 24. S
--	-------------

As shown in **Table 25**, the majority of participating organizations did not report specialty programming for pregnant or parenting people with young children (56% of participants offering prevention, 60% of participants offering treatment, and 60% of participants offering recovery services.

		Inpatient	Outpatient	Housing	None
	n	% Yes	% Yes	% Yes	% Yes
Service Type					
Prevention	68	17.6%	39.7%	8.8%	55.9%
Treatment	174	13.2%	34.5%	8.0%	60.3%
Recovery	110	12.7%	35.5%	11.8%	59.1%

Table 25. Specialty programming for pregnant or parenting people with young children

As seen in **Table 26**, the majority of survey participants offered some type of language interpretation service, but fewer than 20% had certified interpreters on staff. About half of participants indicated they had certified staff who are multi-lingual.

⁺ LGBTQIA2S+ stands for lesbian, gay, bisexual, trans, queer and/or questioning, intersex, asexual, two-spirit, and the countless affirmative ways in which people choose to self-identify.

Table 26. Language interpretation services

		Certified interpreters on staff	Contracted service like Language Line	Certified staff who are multi-lingual	None
	n	% Yes	% Yes	% Yes	% Yes
Service Type					
Prevention	107	15.0%	57.9%	47.7%	18.7%
Treatment	174	17.2%	54.6%	47.1%	19.0%
Recovery	138	16.7%	47.1%	55.1%	23.9%

Table 27 shows the languages interpreted among participating organizations who offer interpretation services. When interpretation services are available, Spanish is most widely available, while ASL, Chinese, Russian, and Vietnamese are rare.

Table 27. Languages interpreted

		American Sign Language	Chinese	Russian	Spanish	Vietnamese
	n	% Yes	% Yes	% Yes	% Yes	% Yes
Service Type						
Prevention	59	16.9%	3.4%	5.1%	91.5%	3.4%
Treatment	88	28.4%	11.4%	12.5%	94.3%	11.4%
Recovery	81	27.2%	9.9%	17.3%	93.8%	9.9%

As shown in **Table 28**, printed materials are also offered frequently in Spanish, but not other language or accessible formats.

Table 28. Translated materials available for clients

		Spanish	Russian	Chinese	Vietnamese	Accessible formats (e.g., large print, Braille)
	n	% Yes	% Yes	% Yes	% Yes	% Yes
Service Type						
Prevention	76	81.6%	7.9%	3.9%	3.9%	2.6%
Treatment	130	69.2%	11.5%	8.5%	9.2%	4.6%
Recovery	105	64.8%	11.4%	4.8%	3.8%	1.0%

Table 29 summarizes barriers to transportation and technology reported by participating organizations, as well as availability of virtual programming. The majority of participants indicated that transportation is barrier to services. While more than half of participating organizations indicated that they offered some combination of billable treatment or counseling, or non-billable virtual services such as recovery groups, technology remains a barrier to accessing teleservices.

		Billable Treatment	Billable Counseling	Non- billable virtual services	None	a ba ace	nology is arrier to cessing services	is a ba	portation arrier to rvices
	n	% Yes	% Yes	% Yes	% Yes	n	% Yes	n	%Yes
Service Type	;								
Prevention	63	61.9%	75.0%	26.2%	40.5%	88	73.9%	105	65.7%
Treatment	140	79.9%	80.5%	28.7%	34.5%	150	69.3%	172	68.6%
Recovery	105	64.2%	76.6%	76.6%	48.2%	122	68.0%	138	71.7%

Table 29. Virtual programming or teleservices

Regionally, we also see barriers in transportation which are more pronounced in rural regions. Figure 5 shows the percent of organizations by region who reported that travel time or access to transportation is a barrier for their clients. In Region 4 (Coos, Curry, Douglas, Jackson, Josephine, Klamath) 86.2% of organizations reported transportation as a barrier, and in Region 6 (Baker, Gilliam, Grant, Harney, Hood River, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, Wasco, Wheeler) 77.4% of organizations reported transportation as a barrier.

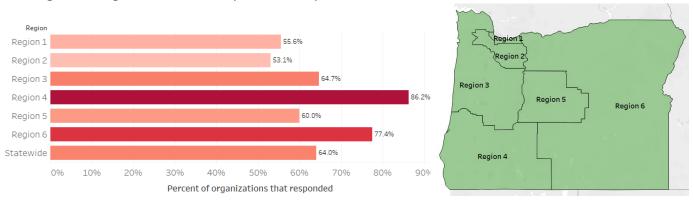


Figure 5. Organizations that reported transporatation or travel time as a barrier to their clients

Counties within NSDUH Regions: Region 1: Multnomah; Region 2: Clackamas, Washington; Region 3: Benton, Clatsop, Columbia, Lane, Lincoln, Linn, Marion, Polk, Tillamook, Yamhill; Region 4: Coos, Curry, Douglas, Jackson, Josephine, Klamath; Region 5: Crook, Deschutes, Jefferson; Region 6: Baker, Gilliam, Grant, Harney, Hood River, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, Wasco, Wheeler

What Are the Limitations?

The needs assessment, substance use disorder services directory, CAST, and survey together create a robust overview of the substance use disorder landscape across Oregon. Collectively, they provide a point in time snapshot of substance use prevalence and care systems gaps statewide, regionally, and at the county level. Each strategy employed has its own strengths and limitations; on their own, they may not paint a full picture of what is truly happening within a county or region. The following limitations should be considered when reviewing and interpreting data collected through this rapid assessment:

- The CAST is a powerful tool to quantify regional gaps in services that account for differences in both geography and population demographics. The methodology generates a risk score that can be used to address specific components that impact risk of hospitalization associated with substance use. However, it requires that users adopt pre-defined service categories across prevention, harm reduction, treatment, and recovery. Rigid categorization of "prevention", "harm reduction", "treatment" or "recovery" can be limiting. We employed operational definitions for each of these services for purposes of implementing the CAST tool. In practice, the continuum of care is not linear, and individual service needs and service providers do not operate within the boundaries of prevention, treatment and recovery.
- The CAST does not account for the presence or absence of culturally responsive services. This may lead to underestimates in gaps, and particularly for Black, American-Indian Alaskan Native (AIAN), and Latinx individuals, who are less likely to experience culturally appropriate treatment compared to non-Latinx white Americans.^{44,45}
- Treatment services were overrepresented in the inventory of services, compared to
 prevention and harm reduction. This is due to the fact that, historically, more resources
 have been put into place to catalog and maintain and record of substance use disorder
 treatment facilities. No such comprehensive list existed for prevention, harm reduction,
 or recovery services in Oregon. Moreover, the full scope and scale of prevention, harm
 reduction and recovery supports (including both service delivery and service gaps) can
 be difficult to quantify, particularly because funding streams and workforce
 credentialing systems are still developing to acknowledge and support the broad scope
 of this work.
- The categories outlined for services using the CAST are limited and do not adequately represent all services that truly provide substance use disorder services in Oregon
- While the substance use disorder services survey provides a rich source of contextual information, we achieved only a 65% response rates over the brief implementation cycle. Additional resources are required to carry out additional outreach to organizations who have not yet participated. Prevention and recovery organizations are most likely underrepresented in the CAST analysis and the survey findings. Small numbers may reduce the reliability of counties and regions within the state's rural and frontier areas.

Statewide and County Profiles

The following section includes select findings by county, compiled to provide key information from the needs assessment, CAST analysis, and survey.

Needs assessment data shared in the county profiles include prevalence information for the county, including the estimated number of individuals ages 12 and up with a substance use disorder and the number of individuals with a substance use disorder who need but are not receiving treatment at a specialty facility.

The CAST findings in the county profiles include all the components that go into the risk score for that county, as well as the risk score and risk level, using a color-coded gradient of gold to red to denote level of risk.

Additional CAST findings included in county profiles show the service gaps by selected CAST categories described <u>above</u>. If a county was determined to not have a gap in services for a specific category, that category is not shown in the county profile. The county profiles also include an overall CAST percent gap across all service categories.

Survey findings included in county profiles are reported at a regional level. A regional summary of responses from local agencies who participated in the inventory survey are included for the following survey questions:

- In [the county where your organization operates], does capacity for services meet the demand for services?
- In [the county where your organization operates], do you offer services in languages other than English (with certified interpreters on staff, using contracted services like language line, or certified staff who are multi-lingual)?
- In [the county where your organization operates], is travel time or access to transportation a barrier for clients?
- In [the county where your organization operates], do you offer any services that are specific for people of a protected class? A protected class refers to groups of people who are legally protected from being harmed or harassed by laws, practices, and policies that discriminate against them due to a shared characteristic. This includes race/ethnicity, religion, gender, sexual orientation, disability, or veteran status. For this survey, we are categorizing services that are specifically for members who are part of one of these protected classes for example, substance use disorder counseling that uses Indigenous customs, or support groups built for people who are LGBTQIA2S+[§].
- In [the county where your organization operates], do you provide outreach services to individuals who are houseless?

[§] LGBTQIA2S+ stands for lesbian, gay, bisexual, trans, queer and/or questioning, intersex, asexual, two-spirit, and the countless affirmative ways in which people choose to self-identify.

State of Oregon



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence Statewide:

669,753 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need Statewide:

664,607 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Statewide,** the Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score in Oregon State is **22**, which is considered a **HIGH level of risk** and corresponds to a 69-92% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

Statewide Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	% of population with access to physical activity	88%
	% of population with college degree	34%
	Alcohol outlet density	4
	Association rate per 100,000 people	106
MODERATE	Violent crime rate per 100,000	241
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	18%
	% of population without high school diploma	8%
	% of the population that lives in a rural area	18%

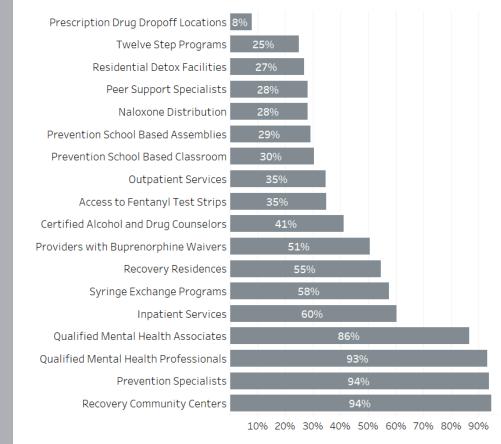
State of Oregon, continued

Across the state, organizations who particpated in the inventory survey reported:

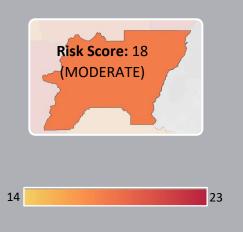
- 54.1% do not think their capacity meets the current demand for services;
- 24.6% do not offer services in languages other than English;
- 64% noted travel time or transportation as a barriers to accessing services;
- 40.4% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 37% do not provide outreach services to individuals who are houseless.

A review of the current SUD resources and service capacity across the state of Oregon provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Statewide County has an overall service gap of **49%**. This means out of the total number of recommended services in Statewide County, it is estimated that 49% are missing. The top identified service gaps are shown below.

Statewide Service Gaps Identified by the CAST



Baker County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Baker County:

2,638 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Baker County:

2,618 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Baker County's** Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **18**, which is considered a **MODERATE level of risk** and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

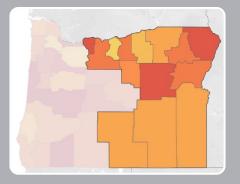
Baker County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	% of population with college degree	24%
	Alcohol outlet density	5
MODERATE	% of population with access to physical activity	72%
	Violent crime rate per 100,000	264
LOW	% of adult population that is male	52%
	% of households with income below \$35,000	26%
	% of population without high school diploma	8%
	% of the population that lives in a rural area	42%
	Association rate per 100,000 people	190

Baker, continued

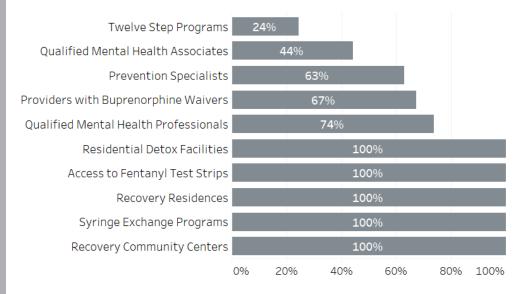
In Region 6, organizations who particpated in the inventory survey reported:

- 54.5% do not think their capacity meets the current demand for services;
- 12.9% do not offer services in languages other than English;
- 77.4% noted travel time or transportation as a barriers to accessing services;
- 60.9% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 35.5% do not provide outreach services to individuals who are houseless.

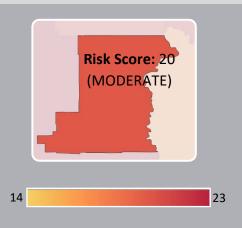


Region 6 is comprised of Baker, Gilliam, Grant, Harney, Hood River, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, Wasco, and Wheeler Counties. A review of **Baker County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Baker County has an overall service gap of **44%**. This means out of the total number of recommended services in Baker County, it is estimated that 44% are missing. The top identified service gaps are shown below.

Baker County Service Gaps Identified by the CAST



Benton County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Benton County:

15,581 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Benton County:

15,461 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Benton County's** Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **20**, which is considered a **MODERATE level of risk** and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

Benton County's Community Characteristics Contributing to CAST Risk Score

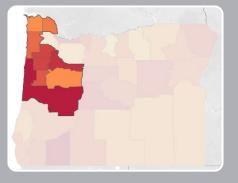
-			
D		-	L,
п		3	ĸ
_	-	_	-

	e	
Contribution	Characteristic	Estimate
HIGH	% of population with access to physical activity	90%
	% of population with college degree	54%
	Alcohol outlet density	4
MODERATE	Association rate per 100,000 people	130
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	20%
	% of population without high school diploma	4%
	% of the population that lives in a rural area	18%
	Violent crime rate per 100,000	128

Benton, continued

In Region 3, organizations who particpated in the inventory survey reported:

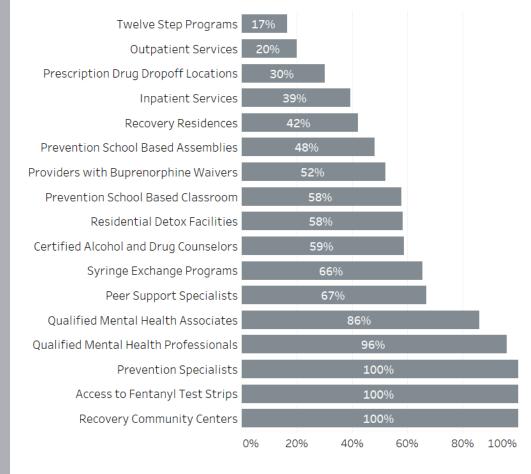
- 50% do not think their capacity meets the current demand for services;
- 23.9% do not offer services in languages other than English;
- 64.7% noted travel time or transportation as a barriers to accessing services;
- 25.8% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 40.3% do not provide outreach services to individuals who are houseless.



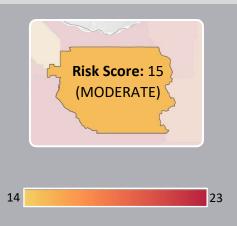
Region 3 is comprised of Benton, Clatsop, Columbia, Lane, Lincoln, Linn, Marion, Polk, Tillamook, and Yamhill Counties.

A review of **Benton County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Benton County has an overall service gap of **58%**. This means out of the total number of recommended services in Benton County, it is estimated that 58% are missing. The top identified service gaps are shown below.

Benton County Service Gaps Identified by the CAST



Clackamas County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Clackamas County:

66,471 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Clackamas County:

65,960 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Clackamas County's** Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **15**, which is considered a **MODERATE level of risk** and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

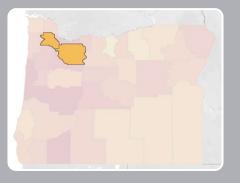
Clackamas County's Community Characteristics Contributing to CAST Risk Score

Contribution	Characteristic	Estimate
HIGH	% of population with access to physical activity	92%
	% of population with college degree	38%
	Association rate per 100,000 people	90
MODERATE	Alcohol outlet density	3
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	12%
	% of population without high school diploma	6%
	% of the population that lives in a rural area	18%
	Violent crime rate per 100,000	160

Olackamas, continued

In Region 2, organizations who particpated in the inventory survey reported:

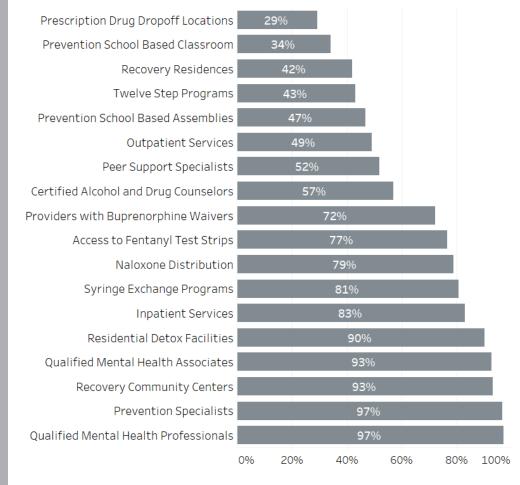
- 51.2% do not think their capacity meets the current demand for services;
- 30% do not offer services in languages other than English;
- 53.1% noted travel time or transportation as a barriers to accessing services;
- 39.1% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 39.6% do not provide outreach services to individuals who are houseless.



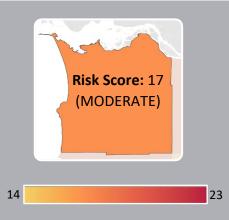
Region 2 is comprised of Clackamas and Washington Counties.

A review of **Clackamas County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Clackamas County has an overall service gap of **68%**. This means out of the total number of recommended services in Clackamas County, it is estimated that 68% are missing. The top identified service gaps are shown below.

Clackamas County Service Gaps Identified by the CAST



Clatsop County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Clatsop County:

6,574 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Clatsop County:

6,523 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Clatsop County's** Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **17**, which is considered a **MODERATE level of risk** and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

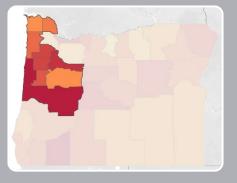
Clatsop County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	% of population with access to physical activity	92%
	Alcohol outlet density	7
MODERATE	% of population with college degree	24%
	Association rate per 100,000 people	130
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	20%
	% of population without high school diploma	8%
	% of the population that lives in a rural area	38%
	Violent crime rate per 100,000	163

Clatsop, continued

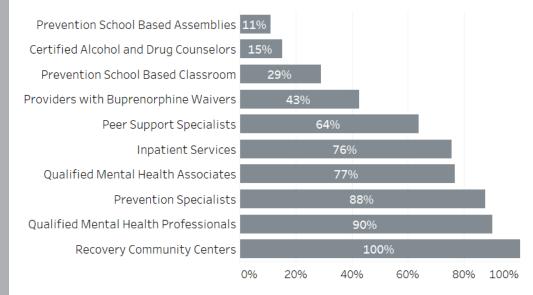
In Region 3, organizations who particpated in the inventory survey reported:

- 50% do not think their capacity meets the current demand for services;
- 23.9% do not offer services in languages other than English;
- 64.7% noted travel time or transportation as a barriers to accessing services;
- 25.8% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 40.3% do not provide outreach services to individuals who are houseless.

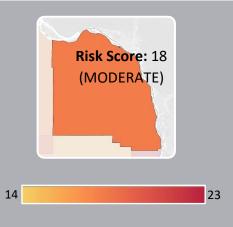


Region 3 is comprised of Benton, Clatsop, Columbia, Lane, Lincoln, Linn, Marion, Polk, Tillamook, and Yamhill Counties. A review of **Clatsop County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Clatsop County has an overall service gap of **33%**. This means out of the total number of recommended services in Clatsop County, it is estimated that 33% are missing. The top identified service gaps are shown below.

Clatsop County Service Gaps Identified by the CAST



Columbia County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Columbia County:

8,325 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Columbia County:

8,261 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Columbia County's** Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **18**, which is considered a **MODERATE level of risk** and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

Columbia County's Community Characteristics Contributing to CAST Risk Score

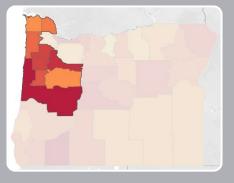
D	-	
•	-	
	_	

Contribution	Characteristic	Estimate
HIGH	% of population with access to physical activity	78%
	Alcohol outlet density	4
	Association rate per 100,000 people	70
MODERATE	% of population with college degree	18%
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	16%
	% of population without high school diploma	10%
	% of the population that lives in a rural area	44%
	Violent crime rate per 100,000	133

Oclumbia, continued

In Region 3, organizations who particpated in the inventory survey reported:

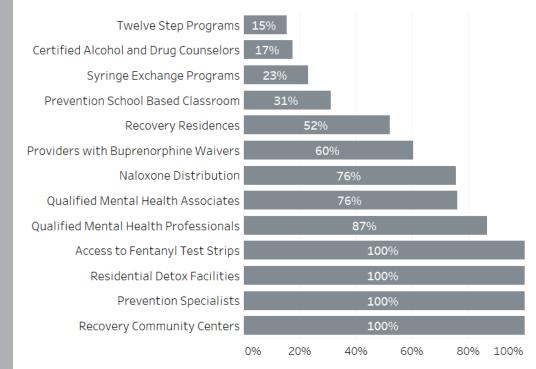
- 50% do not think their capacity meets the current demand for services;
- 23.9% do not offer services in languages other than English;
- 64.7% noted travel time or transportation as a barriers to accessing services;
- 25.8% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 40.3% do not provide outreach services to individuals who are houseless.



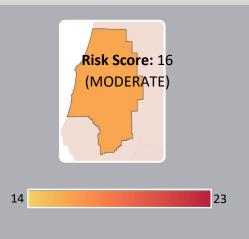
Region 3 is comprised of Benton, Clatsop, Columbia, Lane, Lincoln, Linn, Marion, Polk, Tillamook, and Yamhill Counties.

A review of **Columbia County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Columbia County has an overall service gap of **47%**. This means out of the total number of recommended services in Columbia County, it is estimated that 47% are missing. The top identified service gaps are shown below.

Columbia County Service Gaps Identified by the CAST



Coos County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Coos County:

10,414 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Coos County:

10,334 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Coos County's** Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **16**, which is considered a **MODERATE level of risk** and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

Coos County's Community Characteristics Contributing to CAST Risk Score

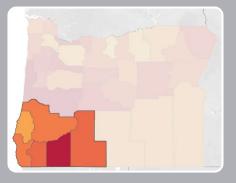
-		
D	c	ν
	-	n

Contribution	Characteristic	Estimate
HIGH	Alcohol outlet density	5
MODERATE	% of population with access to physical activity	76%
	% of population with college degree	20%
	Association rate per 100,000 people	130
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	24%
	% of population without high school diploma	10%
	% of the population that lives in a rural area	38%
	Violent crime rate per 100,000	170

Coos, continued

In Region 4, organizations who particpated in the inventory survey reported:

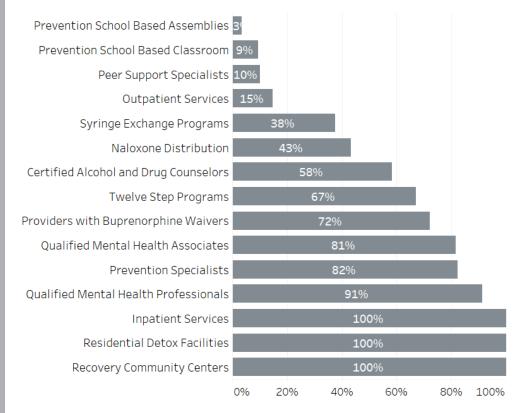
- 72.7% do not think their capacity meets the current demand for services;
- 20.7% do not offer services in languages other than English;
- 86.2% noted travel time or transportation as a barriers to accessing services;
- 57.9% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 30% do not provide outreach services to individuals who are houseless.



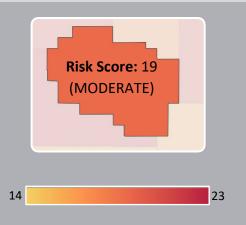
Region 4 is comprised of Coos, Curry, Douglas, Jackson, Josephine, and Klamath Counties.

A review of **Coos County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Coos County has an overall service gap of **49%**. This means out of the total number of recommended services in Coos County, it is estimated that 49% are missing. The top identified service gaps are shown below.

Coos County Service Gaps Identified by the CAST



Crook County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Crook County:

3,946 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Crook County:

3,916 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Crook County's** Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **19**, which is considered a **MODERATE level of risk** and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

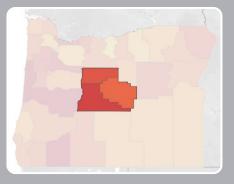
Crook County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	Alcohol outlet density	3
	Association rate per 100,000 people	110
	Violent crime rate per 100,000	346
MODERATE	% of population with access to physical activity	76%
	% of population with college degree	18%
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	20%
	% of population without high school diploma	10%
	% of the population that lives in a rural area	48%

Crook, continued

In Region 5, organizations who particpated in the inventory survey reported:

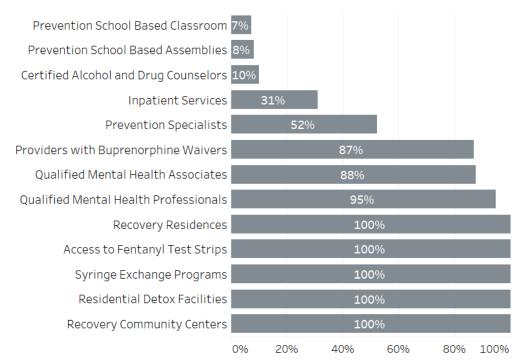
- 55.6% do not think their capacity meets the current demand for services;
- 33.3% do not offer services in languages other than English;
- 60% noted travel time or transportation as a barriers to accessing services;
- 46.2% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 40% do not provide outreach services to individuals who are houseless.



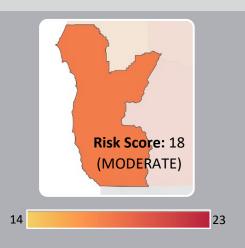
Region 5 is comprised of Crook, Deschutes, and Jefferson Counties.

A review of **Crook County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Crook County has an overall service gap of **50%**. This means out of the total number of recommended services in Crook County, it is estimated that 50% are missing. The top identified service gaps are shown below.

Crook County Service Gaps Identified by the CAST



Curry County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Curry County:

3,878 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Curry County:

3,848 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Curry County's** Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **18**, which is considered a **MODERATE level of risk** and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

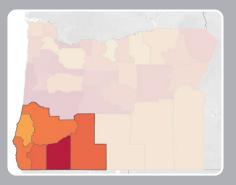
Curry County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	% of population with access to physical activity	92%
	Alcohol outlet density	5
	Association rate per 100,000 people	90
MODERATE	% of population with college degree	24%
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	24%
	% of population without high school diploma	8%
	% of the population that lives in a rural area	38%
	Violent crime rate per 100,000	108

Curry, continued

In Region 4, organizations who particpated in the inventory survey reported:

- 72.7% do not think their capacity meets the current demand for services;
- 20.7% do not offer services in languages other than English;
- 86.2% noted travel time or transportation as a barriers to accessing services;
- 57.9% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 30% do not provide outreach services to individuals who are houseless.



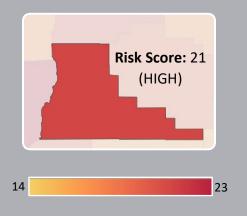
Region 4 is comprised of Coos, Curry, Douglas, Jackson, Josephine, and Klamath Counties.

A review of **Curry County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Curry County has an overall service gap of **69%**. This means out of the total number of recommended services in Curry County, it is estimated that 69% are missing. The top identified service gaps are shown below.

Curry County Service Gaps Identified by the CAST

Prevention School Based Assemblies 14% Prevention School Based Classroom 31% Providers with Buprenorphine Waivers 65% Peer Support Specialists 78% Qualified Mental Health Associates 80% Certified Alcohol and Drug Counselors 86% Qualified Mental Health Professionals 91% **Outpatient Services** 100% Naloxone Distribution 100% 100% Inpatient Services **Prevention Specialists** 100% **Recovery Residences** 100% Access to Fentanyl Test Strips 100% **Residential Detox Facilities** 100% Recovery Community Centers 100% 0% 20% 40% 60% 80% 100%

Deschutes County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Deschutes County:

31,712 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Deschutes County:

31,468 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Deschutes County's** Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **21**, which is considered a **HIGH level of risk** and corresponds to a 69-92% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

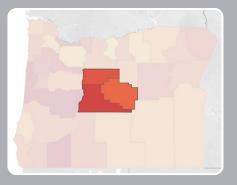
Deschutes County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	% of population with access to physical activity	90%
	% of population with college degree	38%
	Alcohol outlet density	3
	Association rate per 100,000 people	100
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	16%
	% of population without high school diploma	6%
	% of the population that lives in a rural area	28%
	Violent crime rate per 100,000	169

Deschutes, continued

In Region 5, organizations who particpated in the inventory survey reported:

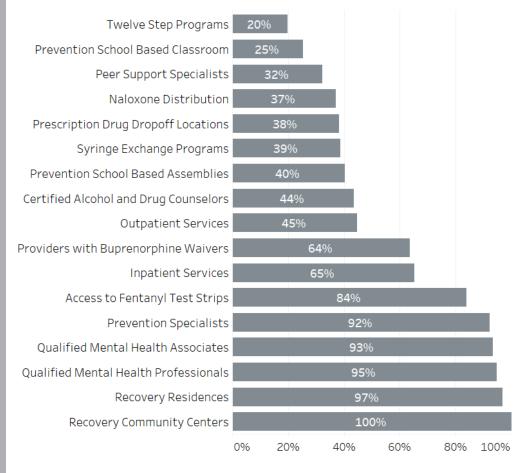
- 55.6% do not think their capacity meets the current demand for services;
- 33.3% do not offer services in languages other than English;
- 60% noted travel time or transportation as a barriers to accessing services;
- 46.2% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 40% do not provide outreach services to individuals who are houseless.



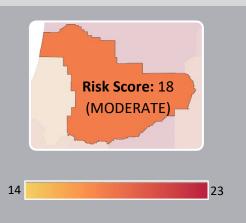
Region 5 is comprised of Crook, Deschutes, and Jefferson Counties.

A review of **Deschutes County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Deschutes County has an overall service gap of **56%**. This means out of the total number of recommended services in Deschutes County, it is estimated that 56% are missing. The top identified service gaps are shown below.

Deschutes County Service Gaps Identified by the CAST



Douglas County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Douglas County:

17,691 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Douglas County:

17,555 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Douglas County's** Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **18**, which is considered a **MODERATE level of risk** and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

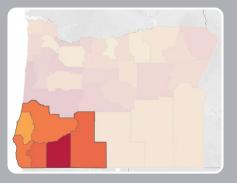
Douglas County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	Alcohol outlet density	5
	Association rate per 100,000 people	110
MODERATE	% of population with access to physical activity	64%
	% of population with college degree	18%
	Violent crime rate per 100,000	219
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	20%
	% of population without high school diploma	10%
	% of the population that lives in a rural area	42%

Douglas, continued

In Region 4, organizations who particpated in the inventory survey reported:

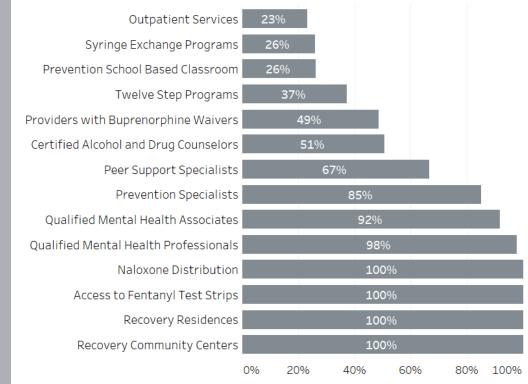
- 72.7% do not think their capacity meets the current demand for services;
- 20.7% do not offer services in languages other than English;
- 86.2% noted travel time or transportation as a barriers to accessing services;
- 57.9% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 30% do not provide outreach services to individuals who are houseless.



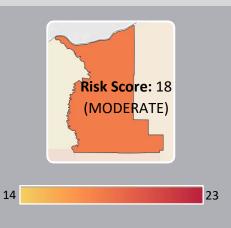
Region 4 is comprised of Coos, Curry, Douglas, Jackson, Josephine, and Klamath Counties.

A review of **Douglas County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Douglas County has an overall service gap of **53%**. This means out of the total number of recommended services in Douglas County, it is estimated that 53% are missing. The top identified service gaps are shown below.

Douglas County Service Gaps Identified by the CAST



Gilliam County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Gilliam County:

319 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Gilliam County:

316 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Gilliam County's** Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **18**, which is considered a **MODERATE level of risk** and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

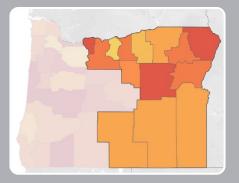
Gilliam County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	% of population with access to physical activity	82%
	% of the population that lives in a rural area	100%
	Alcohol outlet density	4
MODERATE	% of population with college degree	22%
LOW	% of adult population that is male	48%
	% of households with income below \$35,000	32%
	% of population without high school diploma	6%
	Association rate per 100,000 people	160
	Violent crime rate per 100,000	0

Gilliam, continued

In Region 6, organizations who particpated in the inventory survey reported:

- 54.5% do not think their capacity meets the current demand for services;
- 12.9% do not offer services in languages other than English;
- 77.4% noted travel time or transportation as a barriers to accessing services;
- 60.9% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 35.5% do not provide outreach services to individuals who are houseless.



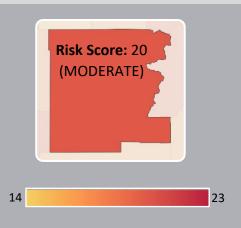
Region 6 is comprised of Baker, Gilliam, Grant, Harney, Hood River, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, Wasco, and Wheeler Counties. A review of **Gilliam County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Gilliam County has an overall service gap of **59%**. This means out of the total number of recommended services in Gilliam County, it is estimated that 59% are missing. The top identified service gaps are shown below.

Gilliam County Service Gaps Identified by the CAST

Prevention School Based Classroom Certified Alcohol and Drug Counselors Qualified Mental Health Professionals Inpatient Services Providers with Buprenorphine Waivers Peer Support Specialists Prevention Specialists Qualified Mental Health Associates Access to Fentanyl Test Strips Recovery Residences Recovery Community Centers

sroom	5%					
selors		57%				
ionals			83%			
ervices			100%)		
aivers			100%)		
ialists			100%)		
ialists			100%)		
ciates			100%)		
Strips			100%)		
dences			100%)		
enters			100%)		
	0% 2	20%	40%	60%	80%	100%

Grant County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Grant County:

1,158 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Grant County:

1,149 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Grant County's** Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **20**, which is considered a **MODERATE level of risk** and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

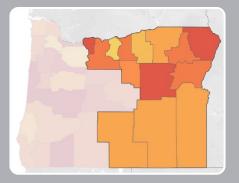
Grant County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	% of the population that lives in a rural area	100%
	Alcohol outlet density	5
	Association rate per 100,000 people	110
MODERATE	% of population with access to physical activity	62%
	% of population with college degree	20%
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	26%
	% of population without high school diploma	10%
	Violent crime rate per 100,000	69

Grant, continued

In Region 6, organizations who particpated in the inventory survey reported:

- 54.5% do not think their capacity meets the current demand for services;
- 12.9% do not offer services in languages other than English;
- 77.4% noted travel time or transportation as a barriers to accessing services;
- 60.9% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 35.5% do not provide outreach services to individuals who are houseless.

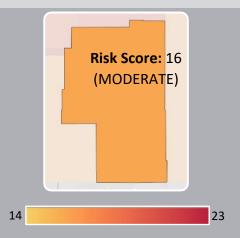


Region 6 is comprised of Baker, Gilliam, Grant, Harney, Hood River, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, Wasco, and Wheeler Counties. A review of **Grant County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Grant County has an overall service gap of **61%**. This means out of the total number of recommended services in Grant County, it is estimated that 61% are missing. The top identified service gaps are shown below.

Grant County Service Gaps Identified by the CAST

Peer Support Specialists	25%				
Certified Alcohol and Drug Counselors		53%			
Providers with Buprenorphine Waivers		56%			
Twelve Step Programs			88%		
Qualified Mental Health Associates			89%		
Qualified Mental Health Professionals			91%		
Residential Detox Facilities			100%		
Syringe Exchange Programs			100%		
Inpatient Services			100%		
Prevention Specialists			100%		
Access to Fentanyl Test Strips			100%		
Recovery Residences			100%		
Recovery Community Centers			100%		
	0% 20	% 40	0% 60	0% 80	% 100%

Harney County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Harney County:

1,184 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Harney County:

1,175 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Harney County's** Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **16**, which is considered a **MODERATE level of risk** and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

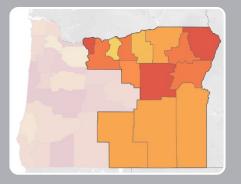
Harney County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	Alcohol outlet density	6
	Association rate per 100,000 people	100
MODERATE	% of population with access to physical activity	72%
	Violent crime rate per 100,000	230
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	26%
	% of population with college degree	16%
	% of population without high school diploma	8%
	% of the population that lives in a rural area	44%

Harney, continued

In Region 6, organizations who particpated in the inventory survey reported:

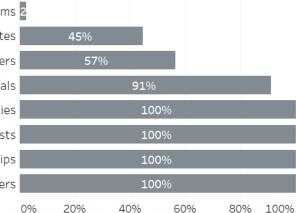
- 54.5% do not think their capacity meets the current demand for services;
- 12.9% do not offer services in languages other than English;
- 77.4% noted travel time or transportation as a barriers to accessing services;
- 60.9% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 35.5% do not provide outreach services to individuals who are houseless.



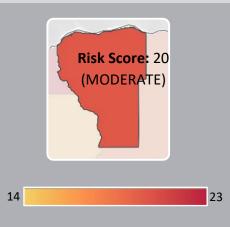
Region 6 is comprised of Baker, Gilliam, Grant, Harney, Hood River, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, Wasco, and Wheeler Counties. A review of **Harney County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Harney County has an overall service gap of **33%**. This means out of the total number of recommended services in Harney County, it is estimated that 33% are missing. The top identified service gaps are shown below.

Harney County Service Gaps Identified by the CAST

Twelve Step Programs 2 Qualified Mental Health Associates Providers with Buprenorphine Waivers Qualified Mental Health Professionals Residential Detox Facilities Prevention Specialists Access to Fentanyl Test Strips Recovery Community Centers



Hood River County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Hood River County:

3,708 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Hood River County:

3,679 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Hood River County's** Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **20**, which is considered a **MODERATE level of risk** and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

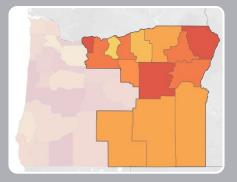
Hood River County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	% of population with access to physical activity	80%
	% of population with college degree	34%
	Alcohol outlet density	6
MODERATE	Association rate per 100,000 people	140
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	12%
	% of population without high school diploma	18%
	% of the population that lives in a rural area	52%
	Violent crime rate per 100,000	147

Hood River, continued

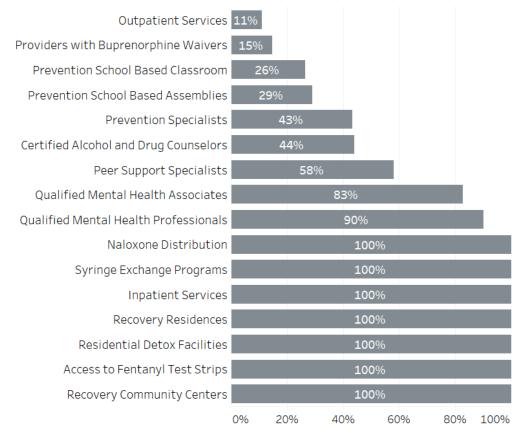
In Region 6, organizations who particpated in the inventory survey reported:

- 54.5% do not think their capacity meets the current demand for services;
- 12.9% do not offer services in languages other than English;
- 77.4% noted travel time or transportation as a barriers to accessing services;
- 60.9% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 35.5% do not provide outreach services to individuals who are houseless.

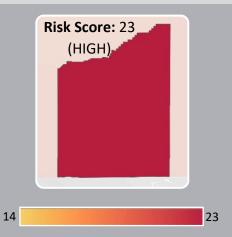


Region 6 is comprised of Baker, Gilliam, Grant, Harney, Hood River, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, Wasco, and Wheeler Counties. A review of **Hood River County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Hood River County has an overall service gap of **62%**. This means out of the total number of recommended services in Hood River County, it is estimated that 62% are missing. The top identified service gaps are shown below.

Hood River County Service Gaps Identified by the CAST



Jackson County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Jackson County:

35,211 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Jackson County:

34,940 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year Jackson County's Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is 23, which is considered a HIGH level of risk and corresponds to a 69-92% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

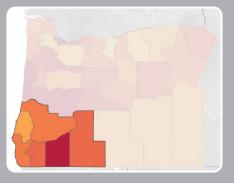
Jackson County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	% of population with access to physical activity	84%
	% of population with college degree	28%
	Alcohol outlet density	4
	Association rate per 100,000 people	100
	Violent crime rate per 100,000	335
LOW	% of adult population that is male	48%
	% of households with income below \$35,000	20%
	% of population without high school diploma	10%
	% of the population that lives in a rural area	20%

Jackson, continued

In Region 4, organizations who particpated in the inventory survey reported:

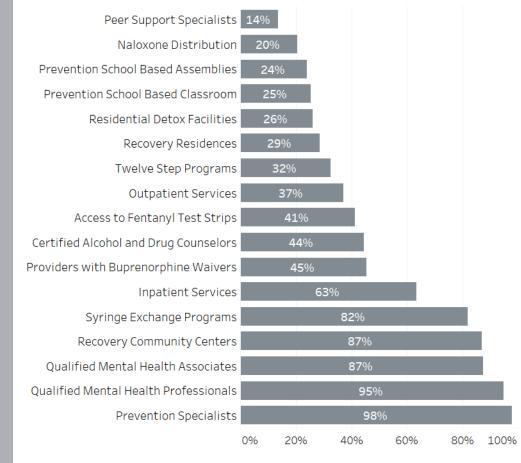
- 72.7% do not think their capacity meets the current demand for services;
- 20.7% do not offer services in languages other than English;
- 86.2% noted travel time or transportation as a barriers to accessing services;
- 57.9% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 30% do not provide outreach services to individuals who are houseless.



Region 4 is comprised of Coos, Curry, Douglas, Jackson, Josephine, and Klamath Counties.

A review of **Jackson County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Jackson County has an overall service gap of **47%**. This means out of the total number of recommended services in Jackson County, it is estimated that 47% are missing. The top identified service gaps are shown below.

Jackson County Service Gaps Identified by the CAST



Jefferson County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Jefferson County:

3,769 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Jefferson County:

3,740 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year Jefferson County's Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is 20, which is considered a MODERATE level of risk and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

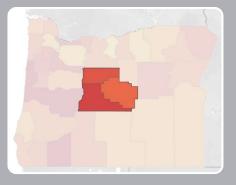
Jefferson County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	Alcohol outlet density	6
	Association rate per 100,000 people	80
MODERATE	% of population with access to physical activity	76%
	% of population with college degree	22%
	% of the population that lives in a rural area	64%
	Violent crime rate per 100,000	222
LOW	% of adult population that is male	52%
	% of households with income below \$35,000	24%
	% of population without high school diploma	12%

Jefferson, continued

In Region 5, organizations who particpated in the inventory survey reported:

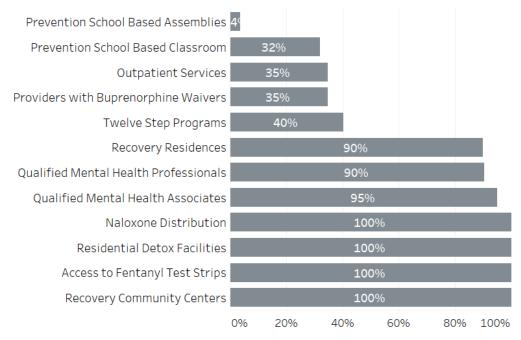
- 55.6% do not think their capacity meets the current demand for services;
- 33.3% do not offer services in languages other than English;
- 60% noted travel time or transportation as a barriers to accessing services;
- 46.2% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 40% do not provide outreach services to individuals who are houseless.



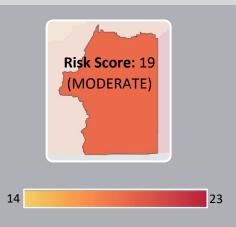
Region 5 is comprised of Crook, Deschutes, and Jefferson Counties.

A review of **Jefferson County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Jefferson County has an overall service gap of **48%**. This means out of the total number of recommended services in Jefferson County, it is estimated that 48% are missing. The top identified service gaps are shown below.

Jefferson County Service Gaps Identified by the CAST



Josephine County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Josephine County:

14,040 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Josephine County:

13,933 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year Josephine County's Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is 19, which is considered a MODERATE level of risk and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

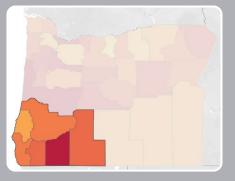
Josephine County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	% of population with access to physical activity	82%
	Alcohol outlet density	4
	Association rate per 100,000 people	80
MODERATE	% of population with college degree	18%
	Violent crime rate per 100,000	223
LOW	% of adult population that is male	48%
	% of households with income below \$35,000	24%
	% of population without high school diploma	10%
	% of the population that lives in a rural area	44%

Josephine, continued

In Region 4, organizations who particpated in the inventory survey reported:

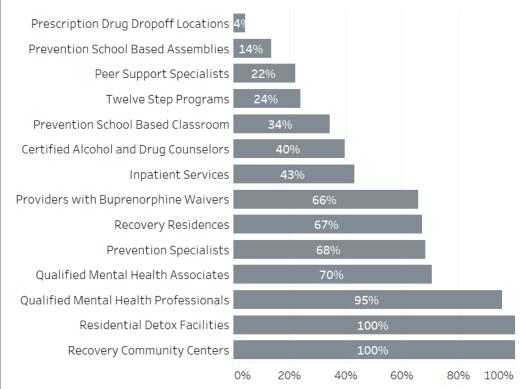
- 72.7% do not think their capacity meets the current demand for services;
- 20.7% do not offer services in languages other than English;
- 86.2% noted travel time or transportation as a barriers to accessing services;
- 57.9% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 30% do not provide outreach services to individuals who are houseless.



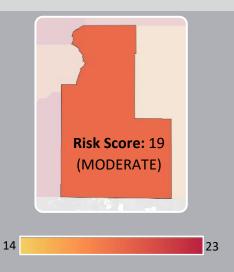
Region 4 is comprised of Coos, Curry, Douglas, Jackson, Josephine, and Klamath Counties.

A review of **Josephine County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Josephine County has an overall service gap of **42%**. This means out of the total number of recommended services in Josephine County, it is estimated that 42% are missing. The top identified service gaps are shown below.

Josephine County Service Gaps Identified by the CAST



Klamath County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Klamath County:

10,810 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Klamath County:

10,726 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Klamath County's** Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **19**, which is considered a **MODERATE level of risk** and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

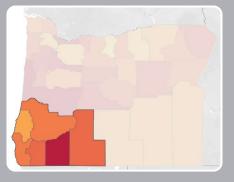
Klamath County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	% of population with access to physical activity	80%
	Alcohol outlet density	5
	Association rate per 100,000 people	110
MODERATE	% of population with college degree	22%
	Violent crime rate per 100,000	218
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	26%
	% of population without high school diploma	12%
	% of the population that lives in a rural area	38%

Klamath, continued

In Region 4, organizations who particpated in the inventory survey reported:

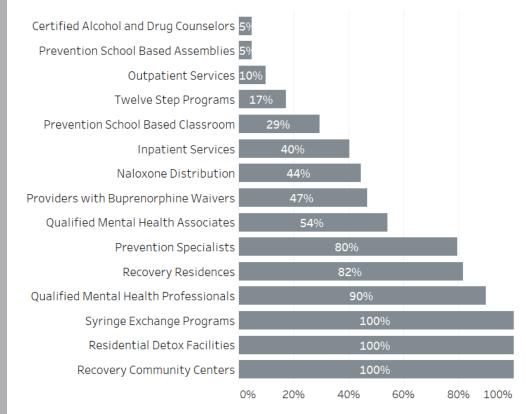
- 72.7% do not think their capacity meets the current demand for services;
- 20.7% do not offer services in languages other than English;
- 86.2% noted travel time or transportation as a barriers to accessing services;
- 57.9% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 30% do not provide outreach services to individuals who are houseless.



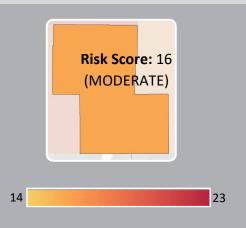
Region 4 is comprised of Coos, Curry, Douglas, Jackson, Josephine, and Klamath Counties.

A review of **Klamath County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Klamath County has an overall service gap of **45%**. This means out of the total number of recommended services in Klamath County, it is estimated that 45% are missing. The top identified service gaps are shown below.

Klamath County Service Gaps Identified by the CAST



Lake County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Lake County:

1,295 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Lake County:

1,285 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year Lake County's Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **16**, which is considered a MODERATE level of risk and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

Lake County's Community Characteristics Contributing to CAST Risk Score

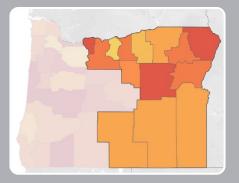
-		
υ	-	•
n.	-	•

Contribution	Characteristic	Estimate
HIGH	Alcohol outlet density	4
MODERATE	% of population with access to physical activity	76%
	% of population with college degree	20%
	% of the population that lives in a rural area	64%
LOW	% of adult population that is male	54%
	% of households with income below \$35,000	28%
	% of population without high school diploma	12%
	Association rate per 100,000 people	180
Null	Violent crime rate per 100,000	Null

Lake, continued

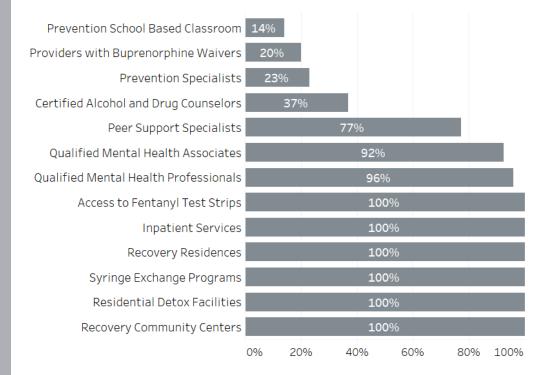
In Region 6, organizations who particpated in the inventory survey reported:

- 54.5% do not think their capacity meets the current demand for services;
- 12.9% do not offer services in languages other than English;
- 77.4% noted travel time or transportation as a barriers to accessing services;
- 60.9% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 35.5% do not provide outreach services to individuals who are houseless.

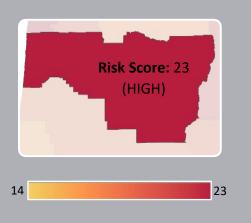


Region 6 is comprised of Baker, Gilliam, Grant, Harney, Hood River, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, Wasco, and Wheeler Counties. A review of **Lake County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Lake County has an overall service gap of **56%**. This means out of the total number of recommended services in Lake County, it is estimated that 56% are missing. The top identified service gaps are shown below.

Lake County Service Gaps Identified by the CAST



🛑 Lane County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Lane County:

61,585 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Lane County:

61,112 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year Lane County's Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is 23, which is considered a HIGH level of risk and corresponds to a 69-92% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

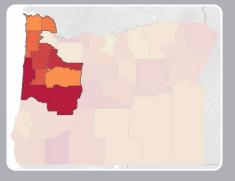
Lane County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	% of population with access to physical activity	88%
	% of population with college degree	32%
	Alcohol outlet density	3
	Association rate per 100,000 people	100
	Violent crime rate per 100,000	330
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	22%
	% of population without high school diploma	8%
	% of the population that lives in a rural area	18%

Lane, continued

In Region 3, organizations who particpated in the inventory survey reported:

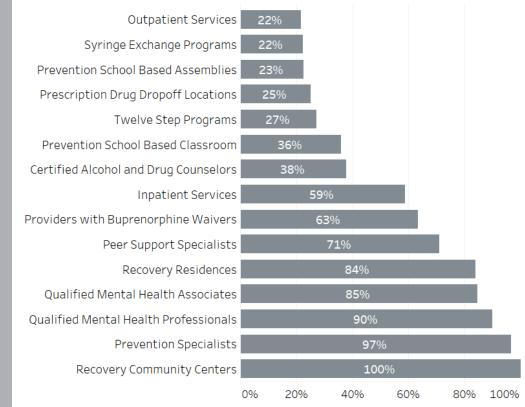
- 50% do not think their capacity meets the current demand for services;
- 23.9% do not offer services in languages other than English;
- 64.7% noted travel time or transportation as a barriers to accessing services;
- 25.8% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 40.3% do not provide outreach services to individuals who are houseless.



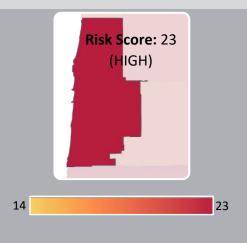
Region 3 is comprised of Benton, Clatsop, Columbia, Lane, Lincoln, Linn, Marion, Polk, Tillamook, and Yamhill Counties.

A review of **Lane County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Lane County has an overall service gap of **47%**. This means out of the total number of recommended services in Lane County, it is estimated that 47% are missing. The top identified service gaps are shown below.

Lane County Service Gaps Identified by the CAST



Lincoln County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Lincoln County:

8,233 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Lincoln County:

8,169 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Lincoln County's** Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **23**, which is considered a **HIGH level of risk** and corresponds to a 69-92% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

Lincoln County's Community Characteristics Contributing to CAST Risk Score

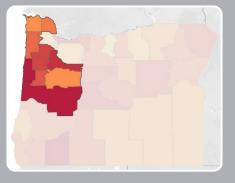
Risk Contribution	Characteristic	Estimate
HIGH	% of population with access to physical activity	92%
	% of population with college degree	28%
	Alcohol outlet density	6
	Association rate per 100,000 people	100
	Violent crime rate per 100,000	347
LOW	% of adult population that is male	48%
	% of households with income below \$35,000	24%
	% of population without high school diploma	8%
	% of the population that lives in a rural area	38%

100%

Lincoln, continued

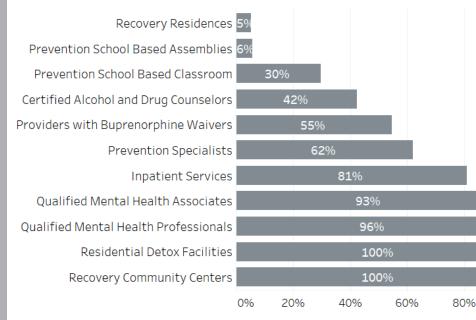
In Region 3, organizations who particpated in the inventory survey reported:

- 50% do not think their capacity meets the current demand for services;
- 23.9% do not offer services in languages other than English;
- 64.7% noted travel time or transportation as a barriers to accessing services;
- 25.8% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 40.3% do not provide outreach services to individuals who are houseless.

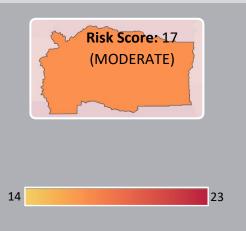


Region 3 is comprised of Benton, Clatsop, Columbia, Lane, Lincoln, Linn, Marion, Polk, Tillamook, and Yamhill Counties. A review of **Lincoln County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Lincoln County has an overall service gap of **38%**. This means out of the total number of recommended services in Lincoln County, it is estimated that 38% are missing. The top identified service gaps are shown below.

Lincoln County Service Gaps Identified by the CAST



🔵 Linn County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Linn County: 20,050 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Linn County:

19,896 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year Linn County's Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **17**, which is considered a **MODERATE level of risk** and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

Linn County's Community Characteristics Contributing to CAST Risk Score

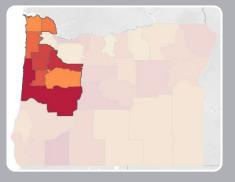
Die	
	~
NIS	•

Contribution	Characteristic	Estimate
HIGH	Alcohol outlet density	3
	Association rate per 100,000 people	110
MODERATE	% of population with access to physical activity	76%
	% of population with college degree	20%
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	18%
	% of population without high school diploma	10%
	% of the population that lives in a rural area	32%
	Violent crime rate per 100,000	112

Linn, continued

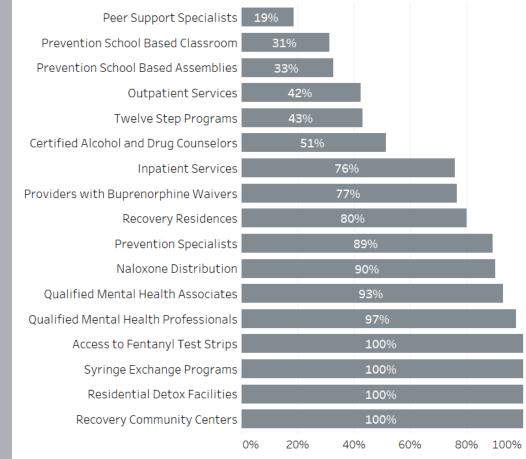
In Region 3, organizations who particpated in the inventory survey reported:

- 50% do not think their capacity meets the current demand for services;
- 23.9% do not offer services in languages other than English;
- 64.7% noted travel time or transportation as a barriers to accessing services;
- 25.8% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 40.3% do not provide outreach services to individuals who are houseless.

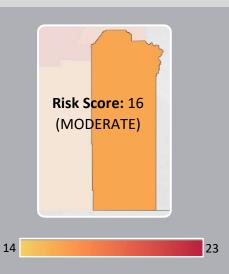


Region 3 is comprised of Benton, Clatsop, Columbia, Lane, Lincoln, Linn, Marion, Polk, Tillamook, and Yamhill Counties. A review of **Linn County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Linn County has an overall service gap of **68%**. This means out of the total number of recommended services in Linn County, it is estimated that 68% are missing. The top identified service gaps are shown below.

Linn County Service Gaps Identified by the CAST



Malheur County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Malheur County:

4,767 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Malheur County:

4,730 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year Malheur County's Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is 16, which is considered a MODERATE level of risk and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

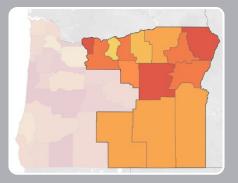
Malheur County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	Alcohol outlet density	5
	Association rate per 100,000 people	100
MODERATE	% of population with access to physical activity	68%
	Violent crime rate per 100,000	226
LOW	% of adult population that is male	54%
	% of households with income below \$35,000	28%
	% of population with college degree	14%
	% of population without high school diploma	18%
	% of the population that lives in a rural area	48%

O Malheur, continued

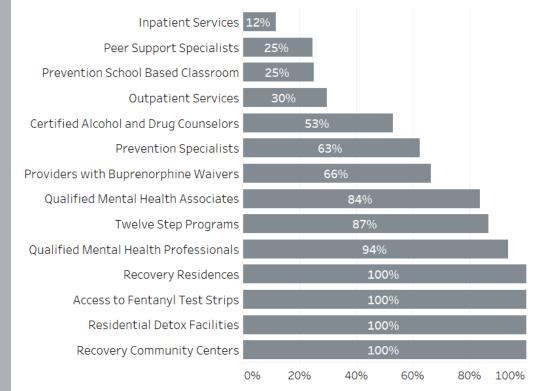
In Region 6, organizations who particpated in the inventory survey reported:

- 54.5% do not think their capacity meets the current demand for services;
- 12.9% do not offer services in languages other than English;
- 77.4% noted travel time or transportation as a barriers to accessing services;
- 60.9% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 35.5% do not provide outreach services to individuals who are houseless.

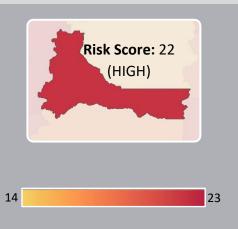


Region 6 is comprised of Baker, Gilliam, Grant, Harney, Hood River, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, Wasco, and Wheeler Counties. A review of **Malheur County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Malheur County has an overall service gap of **53%**. This means out of the total number of recommended services in Malheur County, it is estimated that 53% are missing. The top identified service gaps are shown below.

Malheur County Service Gaps Identified by the CAST



Marion County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Marion County:

53,096 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Marion County:

52,688 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year Marion County's Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is 22, which is considered a HIGH level of risk and corresponds to a 69-92% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

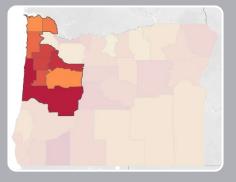
Marion County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	% of population with access to physical activity	80%
	% of population with college degree	24%
	Alcohol outlet density	3
	Association rate per 100,000 people	100
MODERATE	Violent crime rate per 100,000	233
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	18%
	% of population without high school diploma	14%
	% of the population that lives in a rural area	14%

Marion, continued

In Region 3, organizations who particpated in the inventory survey reported:

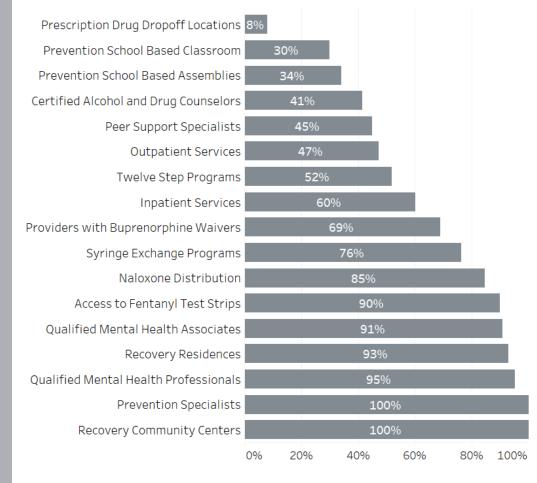
- 50% do not think their capacity meets the current demand for services;
- 23.9% do not offer services in languages other than English;
- 64.7% noted travel time or transportation as a barriers to accessing services;
- 25.8% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 40.3% do not provide outreach services to individuals who are houseless.



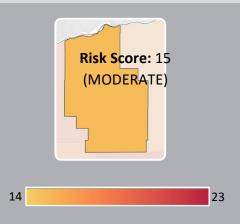
Region 3 is comprised of Benton, Clatsop, Columbia, Lane, Lincoln, Linn, Marion, Polk, Tillamook, and Yamhill Counties.

A review of **Marion County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Marion County has an overall service gap of **62%**. This means out of the total number of recommended services in Marion County, it is estimated that 62% are missing. The top identified service gaps are shown below.

Marion County Service Gaps Identified by the CAST



Morrow County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Morrow County:

1,826 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Morrow County:

1,812 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Morrow County's** Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **15**, which is considered a **MODERATE level of risk** and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

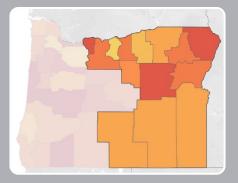
Morrow County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	% of population without high school diploma	22%
	Alcohol outlet density	5
	Association rate per 100,000 people	90
	Violent crime rate per 100,000	331
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	20%
	% of population with access to physical activity	56%
	% of population with college degree	10%
	% of the population that lives in a rural area	46%

Morrow, continued

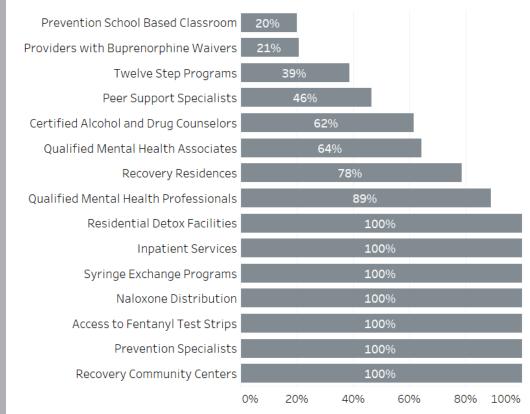
In Region 6, organizations who particpated in the inventory survey reported:

- 54.5% do not think their capacity meets the current demand for services;
- 12.9% do not offer services in languages other than English;
- 77.4% noted travel time or transportation as a barriers to accessing services;
- 60.9% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 35.5% do not provide outreach services to individuals who are houseless.

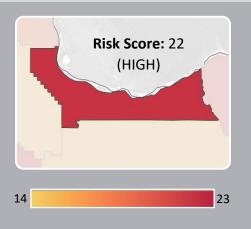


Region 6 is comprised of Baker, Gilliam, Grant, Harney, Hood River, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, Wasco, and Wheeler Counties. A review of **Morrow County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Morrow County has an overall service gap of **62%**. This means out of the total number of recommended services in Morrow County, it is estimated that 62% are missing. The top identified service gaps are shown below.

Morrow County Service Gaps Identified by the CAST



Multnomah County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Multnomah County:

130,670 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Multnomah County:

129,666 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Multnomah County's** Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **22**, which is considered a **HIGH level of risk** and corresponds to a 69-92% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

Multnomah County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	% of population with access to physical activity	96%
	% of population with college degree	46%
	Alcohol outlet density	4
	Violent crime rate per 100,000	474
MODERATE	Association rate per 100,000 people	120
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	18%
	% of population without high school diploma	8%
	% of the population that lives in a rural area	2%

Multnomah, continued

In Region 1, organizations who particpated in the inventory survey reported:

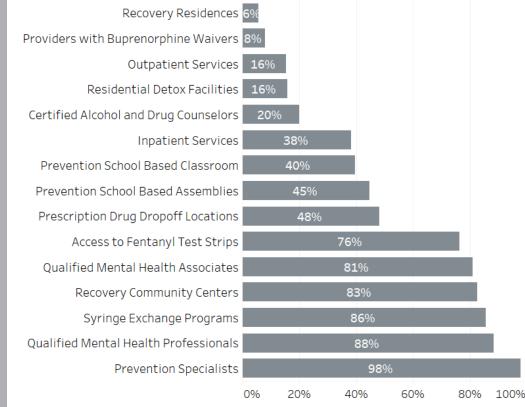
- 54.1% do not think their capacity meets the current demand for services;
- 28.3% do not offer services in languages other than English;
- 55.6% noted travel time or transportation as a barriers to accessing services;
- 24.4% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 33.3% do not provide outreach services to individuals who are houseless.



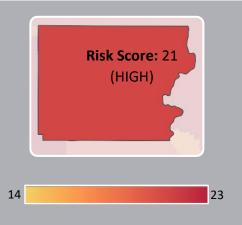
Region 1 is comprised of Multnomah County.

A review of **Multnomah County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Multnomah County has an overall service gap of **42%**. This means out of the total number of recommended services in Multnomah County, it is estimated that 42% are missing. The top identified service gaps are shown below.

Multnomah County Service Gaps Identified by the CAST



Polk County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Polk County: 13,711 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Polk County:

13,606 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Polk County's** Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **21**, which is considered a **HIGH level of risk** and corresponds to a 69-92% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

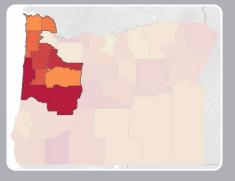
Polk County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	% of population with college degree	30%
	Alcohol outlet density	3
	Association rate per 100,000 people	80
MODERATE	% of population with access to physical activity	76%
	Violent crime rate per 100,000	230
LOW	% of adult population that is male	48%
	% of households with income below \$35,000	20%
	% of population without high school diploma	8%
	% of the population that lives in a rural area	20%

Polk, continued

In Region 3, organizations who particpated in the inventory survey reported:

- 50% do not think their capacity meets the current demand for services;
- 23.9% do not offer services in languages other than English;
- 64.7% noted travel time or transportation as a barriers to accessing services;
- 25.8% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 40.3% do not provide outreach services to individuals who are houseless.



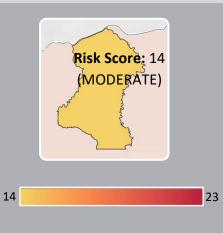
Region 3 is comprised of Benton, Clatsop, Columbia, Lane, Lincoln, Linn, Marion, Polk, Tillamook, and Yamhill Counties.

A review of **Polk County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Polk County has an overall service gap of **76%**. This means out of the total number of recommended services in Polk County, it is estimated that 76% are missing. The top identified service gaps are shown below.

Polk County Service Gaps Identified by the CAST

Prescription Drug Dropoff Locations	36	%				
Prevention School Based Classroom	4	2%				
Residential Detox Facilities		52%				
Prevention School Based Assemblies		54%				
Syringe Exchange Programs		57%				
Twelve Step Programs		58%				
Outpatient Services		66%				
Certified Alcohol and Drug Counselors		68%				
Providers with Buprenorphine Waivers		73%)			
Peer Support Specialists		769	%			
Qualified Mental Health Professionals			93%			
Qualified Mental Health Associates			93%			
Prevention Specialists			96%			
Naloxone Distribution			100%			
Recovery Residences			100%			
Inpatient Services			100%			
Access to Fentanyl Test Strips			100%			
Recovery Community Centers			100%			
	0% 20	0% 40)% (60%	80%	100%

Sherman County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Sherman County:

297 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Sherman County:

294 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Sherman County's** Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **14**, which is considered a **MODERATE level of risk** and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

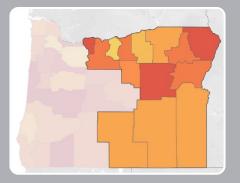
Sherman County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	% of the population that lives in a rural area	100%
	Alcohol outlet density	6
MODERATE	% of population with college degree	20%
LOW	% of adult population that is male	54%
	% of households with income below \$35,000	18%
	% of population with access to physical activity	56%
	% of population without high school diploma	10%
	Association rate per 100,000 people	290
	Violent crime rate per 100,000	58

O Sherman, continued

In Region 6, organizations who particpated in the inventory survey reported:

- 54.5% do not think their capacity meets the current demand for services;
- 12.9% do not offer services in languages other than English;
- 77.4% noted travel time or transportation as a barriers to accessing services;
- 60.9% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 35.5% do not provide outreach services to individuals who are houseless.



Region 6 is comprised of Baker, Gilliam, Grant, Harney, Hood River, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, Wasco, and Wheeler Counties. A review of **Sherman County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Sherman County has an overall service gap of **76%**. This means out of the total number of recommended services in Sherman County, it is estimated that 76% are missing. The top identified service gaps are shown below.

Sherman County Service Gaps Identified by the CAST

.4%	Prevention School Based Classroom
	Twelve Step Programs
	Certified Alcohol and Drug Counselors
	Providers with Buprenorphine Waivers
	Peer Support Specialists
	Qualified Mental Health Professionals
	Qualified Mental Health Associates
	Prevention Specialists
	Naloxone Distribution
	Recovery Residences
	Inpatient Services
	Access to Fentanyl Test Strips
	Recovery Community Centers

100% 100% 0% 20% 40% 60% 80% 100%

100%

100%

100%

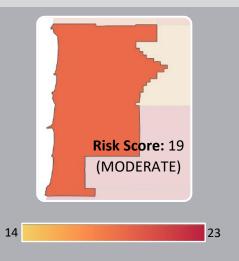
100%

100%

100%

100% 100% 100%

Tillamook County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Tillamook County:

4,405 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Tillamook County:

4,371 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Tillamook County's** Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **19**, which is considered a **MODERATE level of risk** and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

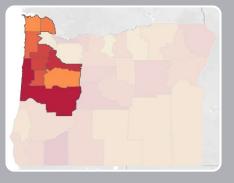
Tillamook County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	% of population with access to physical activity	88%
	Alcohol outlet density	6
MODERATE	% of population with college degree	22%
	% of the population that lives in a rural area	70%
	Association rate per 100,000 people	120
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	20%
	% of population without high school diploma	10%
	Violent crime rate per 100,000	97

Tillamook, continued

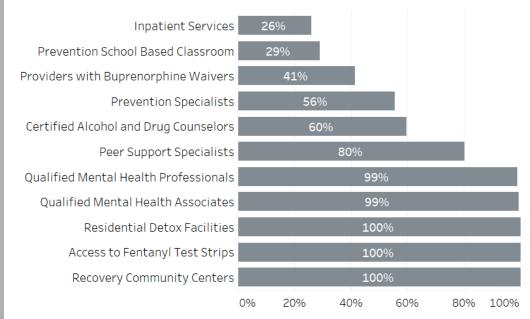
In Region 3, organizations who particpated in the inventory survey reported:

- 50% do not think their capacity meets the current demand for services;
- 23.9% do not offer services in languages other than English;
- 64.7% noted travel time or transportation as a barriers to accessing services;
- 25.8% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 40.3% do not provide outreach services to individuals who are houseless.

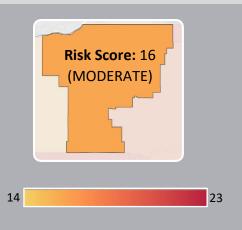


Region 3 is comprised of Benton, Clatsop, Columbia, Lane, Lincoln, Linn, Marion, Polk, Tillamook, and Yamhill Counties. A review of **Tillamook County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Tillamook County has an overall service gap of **45%**. This means out of the total number of recommended services in Tillamook County, it is estimated that 45% are missing. The top identified service gaps are shown below.

Tillamook County Service Gaps Identified by the CAST



🔵 Umatilla County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Umatilla County:

12,203 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Umatilla County:

12,109 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Umatilla County's** Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **16**, which is considered a **MODERATE level of risk** and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

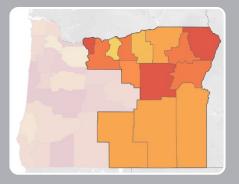
Umatilla County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	Alcohol outlet density	6
	Association rate per 100,000 people	100
MODERATE	% of population with access to physical activity	76%
	Violent crime rate per 100,000	223
LOW	% of adult population that is male	52%
	% of households with income below \$35,000	20%
	% of population with college degree	18%
	% of population without high school diploma	18%
	% of the population that lives in a rural area	30%

O Umatilla, continued

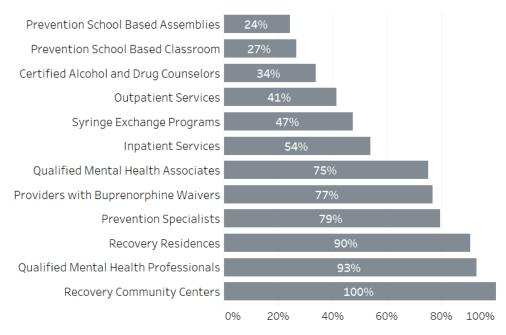
In Region 6, organizations who particpated in the inventory survey reported:

- 54.5% do not think their capacity meets the current demand for services;
- 12.9% do not offer services in languages other than English;
- 77.4% noted travel time or transportation as a barriers to accessing services;
- 60.9% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 35.5% do not provide outreach services to individuals who are houseless.

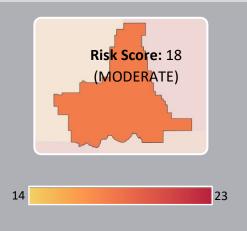


Region 6 is comprised of Baker, Gilliam, Grant, Harney, Hood River, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, Wasco, and Wheeler Counties. A review of **Umatilla County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Umatilla County has an overall service gap of **42%**. This means out of the total number of recommended services in Umatilla County, it is estimated that 42% are missing. The top identified service gaps are shown below.

Umatilla County Service Gaps Identified by the CAST



Union County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Union County:

4,090 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Union County:

4,059 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Union County's** Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **18**, which is considered a **MODERATE level of risk** and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

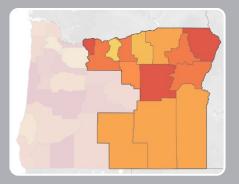
Union County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	% of population with access to physical activity	84%
	% of population with college degree	24%
	Alcohol outlet density	4
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	22%
	% of population without high school diploma	8%
	% of the population that lives in a rural area	42%
	Association rate per 100,000 people	160
	Violent crime rate per 100,000	137

Union, continued

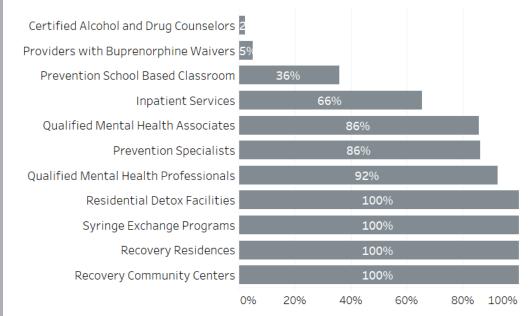
In Region 6, organizations who particpated in the inventory survey reported:

- 54.5% do not think their capacity meets the current demand for services;
- 12.9% do not offer services in languages other than English;
- 77.4% noted travel time or transportation as a barriers to accessing services;
- 60.9% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 35.5% do not provide outreach services to individuals who are houseless.

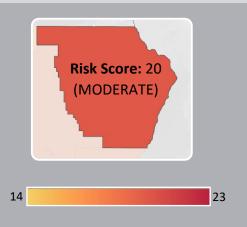


Region 6 is comprised of Baker, Gilliam, Grant, Harney, Hood River, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, Wasco, and Wheeler Counties. A review of **Union County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Union County has an overall service gap of **43%**. This means out of the total number of recommended services in Union County, it is estimated that 43% are missing. The top identified service gaps are shown below.

Union County Service Gaps Identified by the CAST



Wallowa County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Wallowa County:

1,178 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Wallowa County:

1,169 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year Wallowa County's Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is 20, which is considered a MODERATE level of risk and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

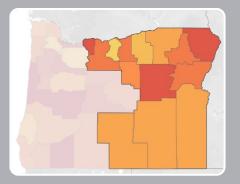
Wallowa County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	% of population with college degree	26%
	% of the population that lives in a rural area	100%
	Alcohol outlet density	4
	Association rate per 100,000 people	110
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	22%
	% of population with access to physical activity	56%
	% of population without high school diploma	6%
	Violent crime rate per 100,000	0

Wallowa, continued

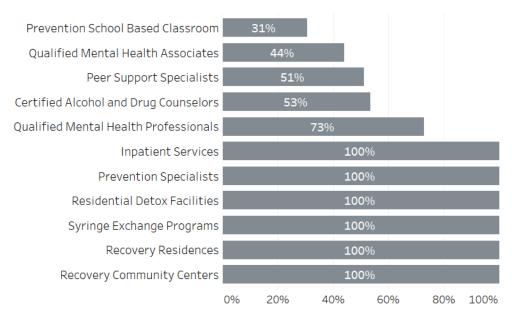
In Region 6, organizations who particpated in the inventory survey reported:

- 54.5% do not think their capacity meets the current demand for services;
- 12.9% do not offer services in languages other than English;
- 77.4% noted travel time or transportation as a barriers to accessing services;
- 60.9% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 35.5% do not provide outreach services to individuals who are houseless.

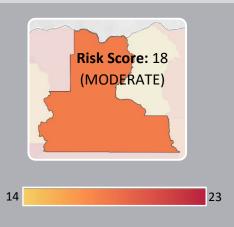


Region 6 is comprised of Baker, Gilliam, Grant, Harney, Hood River, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, Wasco, and Wheeler Counties. A review of **Wallowa County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Wallowa County has an overall service gap of **47%**. This means out of the total number of recommended services in Wallowa County, it is estimated that 47% are missing. The top identified service gaps are shown below.

Wallowa County Service Gaps Identified by the CAST



Wasco County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Wasco County:

4,137 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Wasco County:

4,105 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Wasco County's** Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **18**, which is considered a **MODERATE level of risk** and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

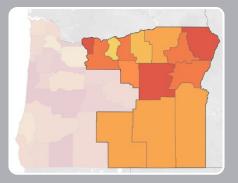
Wasco County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	% of population with access to physical activity	88%
	Alcohol outlet density	5
	Association rate per 100,000 people	110
MODERATE	% of population with college degree	20%
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	18%
	% of population without high school diploma	12%
	% of the population that lives in a rural area	34%
	Violent crime rate per 100,000	159

Wasco, continued

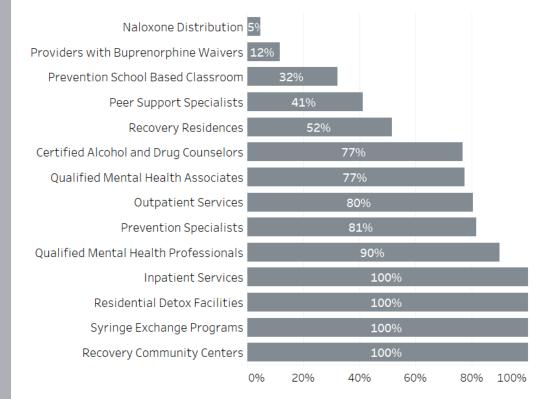
In Region 6, organizations who particpated in the inventory survey reported:

- 54.5% do not think their capacity meets the current demand for services;
- 12.9% do not offer services in languages other than English;
- 77.4% noted travel time or transportation as a barriers to accessing services;
- 60.9% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 35.5% do not provide outreach services to individuals who are houseless.

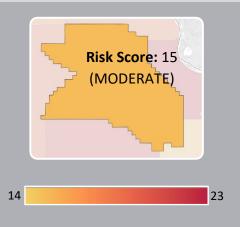


Region 6 is comprised of Baker, Gilliam, Grant, Harney, Hood River, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, Wasco, and Wheeler Counties. A review of **Wasco County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Wasco County has an overall service gap of **53%**. This means out of the total number of recommended services in Wasco County, it is estimated that 53% are missing. The top identified service gaps are shown below.

Wasco County Service Gaps Identified by the CAST



Washington County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Washington County:

93,636 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Washington County:

92,917 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year **Washington County's** Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **15**, which is considered a **MODERATE level of risk** and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

Washington County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	% of population with access to physical activity	98%
	% of population with college degree	44%
	Association rate per 100,000 people	70
MODERATE	Alcohol outlet density	3
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	12%
	% of population without high school diploma	8%
	% of the population that lives in a rural area	6%
	Violent crime rate per 100,000	169

O Washington, continued

In Region 2, organizations who particpated in the inventory survey reported:

- 51.2% do not think their capacity meets the current demand for services;
- 30% do not offer services in languages other than English;
- 53.1% noted travel time or transportation as a barriers to accessing services;
- 39.1% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 39.6% do not provide outreach services to individuals who are houseless.



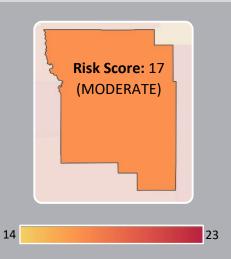
Region 2 is comprised of Clackamas and Washington Counties.

A review of **Washington County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Washington County has an overall service gap of **75%**. This means out of the total number of recommended services in Washington County, it is estimated that 75% are missing. The top identified service gaps are shown below.

Washington County Service Gaps Identified by the CAST

Preve	ntion School Based Classroom	31%	ó			
Prescr	iption Drug Dropoff Locations		47%			
Preven	tion School Based Assemblies		57%			
Providers	s with Buprenorphine Waivers		61%			
	Twelve Step Programs		62%			
	Peer Support Specialists		64%			
Certifie	d Alcohol and Drug Counselors		68%			
	Inpatient Services		72%)		
	Outpatient Services		75%	6		
	Recovery Residences		78	%		
	Syringe Exchange Programs		80	%		
	Naloxone Distribution		1	87%		
	Access to Fentanyl Test Strips			89%		
Quali	fied Mental Health Associates			95%		
	Recovery Community Centers			95%		
Qualifie	d Mental Health Professionals			96%		
	Prevention Specialists			99%		
	Residential Detox Facilities			100%		
		0% 2	0% 40	0%	60%	809

Wheeler County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Wheeler County:

242 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Wheeler County:

240 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year Wheeler County's Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is **17**, which is considered a **MODERATE level of risk** and corresponds to a 35-67% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

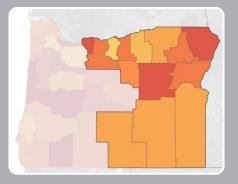
Wheeler County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	% of the population that lives in a rural area	100%
	Alcohol outlet density	4
	Association rate per 100,000 people	0
MODERATE	% of population with college degree	18%
LOW	% of adult population that is male	48%
	% of households with income below \$35,000	30%
	% of population with access to physical activity	50%
	% of population without high school diploma	6%
	Violent crime rate per 100,000	184

Wheeler, continued

In Region 6, organizations who particpated in the inventory survey reported:

- 54.5% do not think their capacity meets the current demand for services;
- 12.9% do not offer services in languages other than English;
- 77.4% noted travel time or transportation as a barriers to accessing services;
- 60.9% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 35.5% do not provide outreach services to individuals who are houseless.

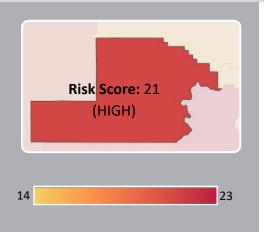


Region 6 is comprised of Baker, Gilliam, Grant, Harney, Hood River, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, Wasco, and Wheeler Counties. A review of **Wheeler County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Wheeler County has an overall service gap of **58%**. This means out of the total number of recommended services in Wheeler County, it is estimated that 58% are missing. The top identified service gaps are shown below.

Wheeler County Service Gaps Identified by the CAST

Qualified Mental Health Professionals	30%				
Providers with Buprenorphine Waivers			100%		
Peer Support Specialists			100%		
Certified Alcohol and Drug Counselors			100%		
Inpatient Services			100%		
Recovery Residences			100%		
Access to Fentanyl Test Strips			100%		
Qualified Mental Health Associates			100%		
Recovery Community Centers			100%		
Prevention Specialists			100%		
	0% 20	% 409	60)% 80	% 100%

Yamhill County



CAST Estimate of Substance Use Disorder (SUD) Prevalence & Treatment Need

Based on self-reported data from the National Survey on Drug Use and Health and CAST estimates, among those ages 12 and over

SUD Prevalence in Yamhill County:

16,909 individuals estimated with an SUD in the past year

Unmet SUD Treatment Need in Yamhill County:

16,779 individuals estimated needing but not receiving treatment in a specialty facility for SUD in the past year Yamhill County's Calculating for an Adequate System Tool (CAST) risk of hospitalization for alcohol or drug diagnosis score is 21, which is considered a HIGH level of risk and corresponds to a 69-92% likelihood of having a hospitalization rate above the national median hospitalization rate for drug or alcohol diagnosis. The CAST risk score accounts for social characteristics that are related to risk, as well as social disparities that may relate to lower access or utilization of services.

The community characteristics that are included in the CAST assessment are shown in the table below.

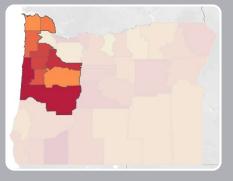
Yamhill County's Community Characteristics Contributing to CAST Risk Score

Risk Contribution	Characteristic	Estimate
HIGH	% of population with access to physical activity	80%
	% of population with college degree	28%
	Alcohol outlet density	8
	Association rate per 100,000 people	90
LOW	% of adult population that is male	50%
	% of households with income below \$35,000	16%
	% of population without high school diploma	10%
	% of the population that lives in a rural area	22%
	Violent crime rate per 100,000	128

Yamhill, continued

In Region 3, organizations who particpated in the inventory survey reported:

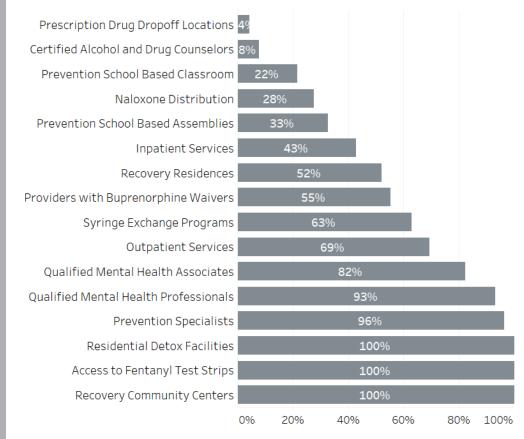
- 50% do not think their capacity meets the current demand for services;
- 23.9% do not offer services in languages other than English;
- 64.7% noted travel time or transportation as a barriers to accessing services;
- 25.8% do not offer any services that are specific for people of a protected class (e.g., race/ethnity, disabilty, sexual orientation); and
- 40.3% do not provide outreach services to individuals who are houseless.



Region 3 is comprised of Benton, Clatsop, Columbia, Lane, Lincoln, Linn, Marion, Polk, Tillamook, and Yamhill Counties.

A review of **Yamhill County's** current SUD resources and service capacity provides an overview of service gaps* for select types of prevention, harm reduction, treatment, and recovery services. Yamhill County has an overall service gap of **53%**. This means out of the total number of recommended services in Yamhill County, it is estimated that 53% are missing. The top identified service gaps are shown below.

Yamhill County Service Gaps Identified by the CAST



Summary of Findings

The Oregon Substance Use Disorder Services Inventory and Gap Analysis conducted from September 2021 through September 2022 revealed high rates of unmet treatment need and statewide gaps in critical substance use disorder prevention, harm reduction, treatment and recovery services.^{**}

Survey data revealed deficits in capacity of existing services to meet the needs of their clients. Even with the expansion of telemedicine and other virtual service delivery and supports since March of 2020, providers reported access to transportation and technology as persistent barriers to substance use disorder services across the continuum of care. Survey data further suggest statewide race and ethnic disparities in both workforce and access to culturally relevant services.

Needs Assessment

- Data from the National Survey on Drug Use and Health show that nearly 1 in 3 Oregonians ages 18 to 25, and 1 in 5 Oregonians ages 26 and up engaged in binge drinking in the last month.¹⁶ Fifteen percent of adults ages 18 to 25 and 13% of adults 26 and older have an alcohol use disorder.¹⁶ Twenty percent of Oregonians ages 18 to 25 have an "illicit drug use disorder".¹⁶
- Oregon's rates of marijuana use and methamphetamine use are above the national average.¹⁶ Moreover, unmet need for any substance use disorder treatment in a specialty facility is higher in Oregon than for the nation overall.¹⁶
- Among Oregon Health Plan members, who represent about 30% of the state's population ages 12 to 64, rates of substance use disorder diagnoses (6% of adults ages 18 to 25 and 11% of adults ages 26 to 64) suggest that less than half of those with a use disorder have been diagnosed.
- Oregon's healthcare workforce does not represent demographics of the state. In
 particular, Hispanic/Latinx, Black/African American, and Native American people in
 Oregon are underrepresented among prescribing physicians. Additional disparities exist
 among the non-prescribing workforce, with Hispanic/Latinx underrepresented among
 Oregon's Qualified Mental Health Associates, Qualified Mental Health Professionals,
 Certified Alcohol and Drug Counselors, and Certified Peer Specialists. These disparities
 exacerbate and sustain gaps in linguistically appropriate and culturally relevant care

^{**} Please note that the current project was developed prior to passage of the Drug Addiction Treatment and Recovery Act (Measure 110), and data collection and analysis were underway during the selection of behavioral health resource network (BHRN) grantees in all 36 counties.

Calculating for an Adequate System Tool

- Rapid assessment of substance use disorder services using the Calculating for an Adequate System Tool (CAST) demonstrated large gaps in number of recommended services statewide and by county across the continuum of care. All 36 counties in Oregon demonstrate moderate to high risk for a hospitalization rate above the national median for substance use disorder-related illness or injury.
- All 36 Oregon counties showed violent crime, high alcohol outlet density, and low social association rates as Oregon's most substantial contributors to risk of hospitalization for a substance use disorder compared to the nation as a whole.
- Statewide, the CAST estimates a 49% gap in services needed to address substance misuse and substance use disorder across the continuum of care in Oregon.
- Workforce gaps identified through the CAST included Certified Prevention Specialists (94%), Qualified Mental Health Professionals (93%) and Associates (86%), and prescribers with waivers to prescribe buprenorphine (51%).
- Substantial gaps in statewide treatment and recovery facilities identified by the CAST included: Recovery Community Centers (94%), Inpatient Treatment Facilities (60%), and Recovery Residences (55%). The CAST estimated a 58% gap in syringe service programs.

Substance Use Disorder Services Survey

- Survey findings suggest that more than half of service organizations lack capacity to meet current demand for services and have inadequate funding and staffing levels to support their organizational mission. Almost 69% of survey participants reported that transportation remains a barrier for their clients in accessing services.
- Less than half of surveyed organizations reported provision of services specific to a racial or ethnic group (culturally relevant services) or gender specific services. Less than one third of organizations offered specific services to LGBTQIA2S+ clients, clients with mental or physical disabilities, or veterans.
- Only 33.3% of surveyed organizations indicated they provide any kind of culturally specific prevention services, 38.5% provide culturally specific treatment services, and 48.5% provide culturally specific recovery services. Interpretation and translation services are rarely available in languages other than Spanish.
- The majority of surveyed organizations across the continuum of care indicated that they employ peer support specialists. Recovery Peers were most frequently employed. Among organizations providing prevention services, nearly half also employed Mental Health Peers, Family Support Specialists and Youth Support Specialists.

- Among the survey respondents that reported their organization provides prevention services, only 38% indicated that their capacity meets the current demand for prevention services in their communities. These respondents also reported several workforce concerns that affect their organization's ability to meet community needs. Only 33% indicated they have adequate staffing to meet their organizational mission, and 77% of prevention participants reported that they have difficulty filling vacant positions.
- A total of 141 out of the 289 survey participants indicated that they offered harm reduction services. Fewer than one in five participants offering harm reduction reported that they provided drug checking (fentanyl test strips) or syringe services.
- Among surveyed organizations offering treatment at specific levels of care (n=135), only 16% offered medically managed intensive inpatient, and 22% offered residential detox. The majority (87%) offered intensive outpatient/partial hospitalization services.
- A total of 85 out of the 183 participants offering substance use disorder treatment indicated that they prescribe or dispense one or more medications for opioid use disorder. Half dispensed at least one formulation of sublingual buprenorphine or buprenorphine/naloxone, and 46% dispensed naltrexone. Approximately 30% of participating MOUD treatment providers were certified Opioid Treatment Programs. Among those reporting any methadone services, 6 prescribed and dispensed, 9 prescribed only, and 9 dispensed only.

Recommendations

The Substance Use Disorder Service Inventory and Gap Analysis revealed alarming service delivery system gaps across categories of prevention, treatment, and recovery throughout the state. Moreover, existing services described critical gaps in capacity to deliver services to meet demand – including funding and identifying staff to fill vacant positions. Allocating resources to address substance misuse and substance use disorder in Oregon will require **investment in evidence-based and culturally relevant prevention, treatment, harm reduction, and recovery services that meet the needs of local communities**. Given the inequitable consequences of the War on Drugs and the misdistribution of resources for substance use disorder, work in this space must adopt an equity lens and work towards repairing the harm of failed drug policies and the underinvestment of resources in marginalized communities.

The following recommendations to expand and improve Oregon's capacity to meet the urgent need for substance use disorder prevention, harm reduction, treatment and recovery emerged from the inventory and gap analysis project.⁶

- Recognizing substantial gaps in the present substance use disorder systems of care and limited options for medically managed treatment, foster a "no wrong door" approach to treatment by allowing increased flexibility in payment structures, care settings, and credentialing.
- 2. Given the increasing rates of overdose from opioids and stimulants, treat encounters in the emergency department, hospital, shelters, and justice systems as opportunities for connection to community treatment and naloxone distribution.
- 3. Increase access to substance use disorder services through expanded transportation and technology.
- 4. Incentivize and monitor equitable distribution of linguistically and culturally relevant services, and services designed to meet the needs of protected classes.
- 5. Expand LGBTQIA2S+ specific services, particularly recovery services for youth who are at high risk for substance misuse and substance use disorder as compared to their cisgender, heterosexual peers and may benefit from targeted services.⁴⁶
- 6. Address gaps in the substance use disorder workforce, including both prescribers and credentialed staff providing essential prevention services and recovery supports.

⁶ Please note that this work was developed prior to passage of the Drug Addiction Treatment and Recovery Act (Measure 110), and data collection and analysis were underway during the selection of behavioral health resource network grantees in all 36 counties.

- 7. Significant investments in prevention are needed to support youth and families. Additional work focused on the prevention services landscape in Oregon is needed to better understand the broad scope of prevention services offered across the lifespan, how they are implemented across Oregon, and how to improve both quality and number of prevention services available to Oregonians.
- 8. Address known risk factors for hospitalization due to a drug or alcohol diagnosis (e.g., lowering alcohol outlet density and increasing opportunities for positive social connection).
- 9. Expand publicly funded recovery support services in a variety of settings, delivered by credentialed professionals including health care providers, counselors, and peers.
- 10. Expand access to all medications for opioid use disorder, including sublingual/oral and injectable formulations of buprenorphine, naltrexone, and methadone. Telemedicine and mobile medication units can increase access to patients in rural areas and patients who are houseless or unstably housed.
- 11. Invest in syringe service and other harm reduction programs, including drug checking.
- 12. Prioritize strategies that target affordable housing, education, and employment to reduce risk of substance use disorders and their consequences and to support long term recovery.

Appendices

Appendix A: County Needs Assessment

Table 1. Number and percent of Oregon Health Plan (OHP) population with documented useDisorder, 2020

	Percent of population	OHP members with an Alcohol Use Disorder		OHP members with an Opioid Use Disorder		OHP members with an Other Use Disorders		wi Substa	embers th a ince Use order
	with OHP	n AUD	% AUD	n OUD	% OUD	n other use disorder	% other use disorder	n with an SUD	% with an SUD
Statewide	-			-	-	-	-		
age 12 to 17	53.8%	923	0.6%	133	0.1%	247	0.3%	2,637	1.7%
age 18 to 25	36.6%	3,710	2.4%	2,244	1.5%	2,808	0.9%	8,770	5.7%
age 26 to 64	25.8%	28,354	5.0%	22,221	4%	22,332	1.4%	61,646	11.0%
age 12 to 64	30.3%	32,987	3.8%	24,598	2.8%	25,387	1.1%	73,053	8.3%
Region 1									
age 12 to 17	53.3%	121	0.5%	1 - 10	0-0.04%	30	0.3%	375	1.5%
age 18 to 25	36.3%	618	2.2%	388	1.4%	461	1.1%	1,511	5.3%
age 26 to 64	26.0%	6,066	4.9%	6,118	4.9%	5,129	2.0%	14,507	11.7%
age 12 to 64	29.6%	6,805	3.8%	6,516	3.7%	5,620	1.6%	16,393	9.2%
Region 2									
age 12 to 17	38.4%	144	0.5%	29	0.1%	38	0.3%	410	1.4%
age 18 to 25	29.3%	550	2.0%	328	1.2%	353	0.8%	1,264	4.6%
age 26 to 64	17.3%	3,977	4.2%	3,325	3.6%	2,574	1.2%	8,537	9.1%
age 12 to 64	21.2%	4,671	3.1%	3,682	2.4%	2,965	1.0%	10,211	6.8%

	Percent of population	000 2 1001 401		OHP members with an Opioid Use Disorder		OHP members with an Other Use Disorders		OHP members with a Substance Use Disorder	
	with OHP	n AUD	% AUD	n OUD	% OUD	n other use disorder	% other use disorder	n with an SUD	% with an SUD
Region 3									
age 12 to 17	58.6%	315	0.6%	41	0.1%	94	0.3%	952	1.7%
age 18 to 25	33.0%	1,341	2.5%	760	1.4%	991	0.9%	3,100	5.9%
age 26 to 64	27.5%	9,087	5.2%	6,587	3.8%	7,542	1.3%	19,437	11.1%
age 12 to 64	31.8%	10,743	3.8%	7,388	2.6%	8,627	1.0%	23,489	8.3%
Region 4									
age 12 to 17	68.4%	190	0.7%	27	0.1%	41	0.4%	474	1.8%
age 18 to 25	56.6%	602	2.3%	406	1.6%	487	1.1%	1,595	6.1%
age 26 to 64	37.0%	5,146	5.1%	3,810	3.8%	4,035	1.3%	11,525	11.4%
age 12 to 64	42.9%	5,938	3.9%	4,243	2.8%	4,563	1.1%	13,594	8.8%
Region 5									
age 12 to 17	52.6%	71	0.8%	1 - 10	0 - 0.1%	19	0.5%	188	2.0%
age 18 to 25	44.2%	305	3.5%	150	1.7%	220	1.0%	624	7.2%
age 26 to 64	25.8%	2,313	7.1%	1,031	3.2%	1,505	1.1%	3,917	12.0%
age 12 to 64	31.0%	2,689	5.3%	1,191	2.3%	1,744	1.0%	4,729	9.3%
Region 6									
age 12 to 17	65.5%	82	0.6%	18	0.1%	25	0.2%	238	1.8%
age 18 to 25	45.3%	294	2.6%	212	1.9%	296	0.7%	676	6.1%
age 26 to 64	29.2%	1,765	5.0%	1,350	3.8%	1,547	0.9%	3,723	10.5%
age 12 to 64	35.9%	2,141	3.6%	1,580	2.7%	1,868	0.7%	4,637	7.8%

Substance Use Data

Table 2. Number and percent of population reporting substance use for binge alcohol use past month, marijuana use past month, heroin use past year, and methamphetamine use past year, by age groups, NSDUH 2020^a

		Binge Alcohol U Past Month			Marijua Past N	ina Use, Aonth		Use, Past ear	Methamphetamine Use, Past Year	
County	Age	n	%	N	%	n	%	n	%	
Statewide		-		-			-		-	
	age 12 to 17	14,579	4.77%	35,913	11.75%			550	0.18%	
	age 18 to 25	131,872	31.43%	137,033	32.66%	420	0.10%	2,140	0.51%	
	age 26 and up	660,958	22.40%	534,668	18.12%	18,294	0.62%	68,161	2.31%	
	age 12 and up	808,703	22.00%	707,983	19.26%			70,945	1.93%	
Region 1										
	age 12 to 17	2,401	4.77%	5,914	11.75%			91	0.18%	
	age 18 to 25	24,307	31.43%	25,258	32.66%	77	0.10%	394	0.51%	
	age 26 and up	132,050	22.40%	106,819	18.12%	3,655	0.62%	13,618	2.31%	
	age 12 and up	197,726	27.57%	194,714	27.15%	3,012	0.42%	7,028	0.98%	
Multnoma	h									
	age 12 and up	197,726	27.57%	194,714	27.15%	3,012	0.42%	7,028	0.98%	
Region 2										
	age 12 to 17	3,706	4.77%	9,130	11.75%			140	0.18%	
	age 18 to 25	30,158	31.43%	31,338	32.66%	96	0.10%	489	0.51%	
	age 26 and up	157,941	22.40%	127,763	18.12%	4,372	0.62%	16,288	2.31%	
	age 12 and up	203,166	23.12%	138,490	15.76%	2,548	0.29%	7,469	0.85%	
Clackama	S									
	age 12 and up	84,347	23.12%	57,496	15.76%	1,058	0.29%	3,101	0.85%	
Washingt	on									
	age 12 and up	118,818	23.12%	80,994	15.76%	1,490	0.29%	4,368	0.85%	

		Binge Alc Past M			Marijuana Use, Past Month		Use, Past ear	Methamp Use, Pa	hetamine st Year
County	Age	n	%	n	%	n	%	n	%
Region 3									
	age 12 to 17	4,834	4.77%	11,908	11.75%			182	0.18%
	age 18 to 25	48,498	31.43%	50,396	32.66%	154	0.10%	787	0.51%
	age 26 and up	199,027	22.40%	160,999	18.12%	5,509	0.62%	20,525	2.31%
	age 12 and up	276,202	24.14%	221,740	19.38%	4,577	0.40%	13,044	1.14%
Benton									
	age 12 and up	20,643	24.14%	16,573	19.38%	342	0.40%	975	1.14%
Clatsop									
	age 12 and up	8,710	24.14%	6,992	19.38%	144	0.40%	411	1.14%
Columbia									
	age 12 and up	11,029	24.14%	8,855	19.38%	183	0.40%	521	1.14%
Lane									
	age 12 and up	81,595	24.14%	65,506	19.38%	1,352	0.40%	3,853	1.14%
Lincoln									
	age 12 and up	10,907	24.14%	8,757	19.38%	181	0.40%	515	1.14%
Linn									
	age 12 and up	26,564	24.14%	21,326	19.38%	440	0.40%	1,254	1.14%
Marion									
	age 12 and up	70,348	24.14%	56,476	19.38%	1,166	0.40%	3,322	1.14%
Polk									
	age 12 and up	18,166	24.14%	14,584	19.38%	301	0.40%	858	1.14%
Tillamook									
	age 12 and up	5,836	24.14%	4,685	19.38%	97	0.40%	276	1.14%

			cohol Use, Month		Marijuana Use, Past Month		Use, Past ear		ohetamine Ist Year
County	Age	n	%	n	%	n	%	n	%
Yamhill									
	age 12 and up	22,403	24.14%	17,986	19.38%	371	0.40%	1,058	1.14%
Region 4									
	age 12 to 17	1,854	4.77%	4,567	11.75%			70	0.18%
	age 18 to 25	14,793	31.43%	15,372	32.66%	47	0.10%	240	0.51%
	age 26 and up	93,910	22.40%	75,967	18.12%	2,599	0.62%	9,684	2.31%
	age 12 and up	112,099	22.19%	94,872	18.78%	2,071	0.41%	8,386	1.66%
Coos									
	age 12 and up	12,683	22.19%	10,734	18.78%	234	0.41%	949	1.66%
Curry									
	age 12 and up	4,723	22.19%	3,997	18.78%	87	0.41%	353	1.66%
Douglas									
	age 12 and up	21,546	22.19%	18,235	18.78%	398	0.41%	1,612	1.66%
Jackson									
	age 12 and up	42,883	22.19%	36,293	18.78%	792	0.41%	3,208	1.66%
Josephine									
	age 12 and up	17,100	22.19%	14,472	18.78%	316	0.41%	1,279	1.66%
Klamath									
	age 12 and up	13,165	22.19%	11,142	18.78%	243	0.41%	985	1.66%
Region 5									
	age 12 to 17	815	4.77%	2,008	11.75%			31	0.18%
	age 18 to 25	6,420	31.43%	6,672	32.66%	20	0.10%	104	0.51%
	age 26 and up	40,067	22.40%	32,411	18.12%	1,109	0.62%	4,132	2.31%
	age 12 and up	56,023	25.89%	37,305	17.24%	649	0.30%	2,315	1.07%

			cohol Use, Month		ana Use, Month		Use, Past ear	Methamp Use, Pa	ohetamine ast Year
County	Age	n	%	n	%	n	%	n	%
Crook									
	age 12 and up	5,607	25.89%	3,734	17.24%	65	0.30%	232	1.07%
Deschutes	5								
	age 12 and up	45,061	25.89%	30,006	17.24%	522	0.30%	1,862	1.07%
Jefferson									
	age 12 and up	5,355	25.89%	3,566	17.24%	62	0.30%	221	1.07%
Region 6									
	age 12 to 17	969	4.77%	2,386	11.75%			37	0.18%
	age 18 to 25	7,696	31.43%	7,997	32.66%	24	0.10%	125	0.51%
	age 26 and up	37,962	22.40%	30,709	18.12%	1,051	0.62%	3,915	2.31%
	age 12 and up	56,974	26.59%	30,640	14.30%	921	0.43%	2,507	1.17%
Baker									
	age 12 and up	3,850	26.59%	2,070	14.30%	62	0.43%	169	1.17%
Gilliam									
	age 12 and up	465	26.59%	250	14.30%	8	0.43%	20	1.17%
Grant									
	age 12 and up	1,690	26.59%	909	14.30%	27	0.43%	74	1.17%
Harney									
	age 12 and up	1,728	26.59%	929	14.30%	28	0.43%	76	1.17%
Hood Rive	er								
	age 12 and up	5,411	26.59%	2,910	14.30%	88	0.43%	238	1.17%
Lake									
	age 12 and up	1,889	26.59%	1,016	14.30%	31	0.43%	83	1.17%

			cohol Use, Month		ana Use, Month		Use, Past ear	-	ohetamine ast Year
County	Age	n	%	n	%	n	%	n	%
Malheur									
	age 12 and up	6,956	26.59%	3,741	14.30%	112	0.43%	306	1.17%
Morrow									
	age 12 and up	2,664	26.59%	1,433	14.30%	43	0.43%	117	1.17%
Sherman									
	age 12 and up	433	26.59%	233	14.30%	7	0.43%	19	1.17%
Umatilla									
	age 12 and up	17,809	26.59%	9,577	14.30%	288	0.43%	784	1.17%
Union									
	age 12 and up	5,969	26.59%	3,210	14.30%	97	0.43%	263	1.17%
Wallowa									
	age 12 and up	1,719	26.59%	924	14.30%	28	0.43%	76	1.17%
Wasco									
	age 12 and up	6,037	26.59%	3,247	14.30%	98	0.43%	266	1.17%
Wheeler									
	age 12 and up	353	26.59%	190	14.30%	6	0.43%	16	1.17%

^{a.} County data shown for age 12 and up only – NSDUH data is provided at the region level, and region data was applied to counties that make up each region.

Substance Use Disorder Data

Table 3. Number and percent of population estimated to have a substance use disorder (SUD),NSDUH 2020^a

	Substance	Use Disorder	Needing But Not Reco Specialty Facility fo Disorder in t	or a Substance Use
Age	n	%	n	%
Statewide		-		
age 12 to 17	24,360	7.97%	24,910	8.15%
age 18 to 25	120,963	28.83%	124,278	29.62%
age 26 and up	523,455	17.74%	514,603	17.44%
age 12 and up	669,753	18.22%	664,607	18.08%
Region 1				
age 12 and up	130,670	18.22%	129,666	18.08%
Multnomah				
age 12 and up	130,670	18.22%	129,666	18.08%
Region 2				
age 12 and up	160,107	18.22%	158,877	18.08%
Clackamas				
age 12 and up	66,471	18.22%	65,960	18.08%
Washington				
age 12 and up	93,636	18.22%	92,917	18.08%
Region 3				
age 12 and up	208,468	18.22%	206,866	18.08%
Benton				
age 12 and up	15,581	18.22%	15,461	18.08%
Clatsop				
age 12 and up	6,574	18.22%	6,523	18.08%

	Substance U	Jse Disorder		eiving Treatment at a for a Substance Use the Past Year
Age	n	%	n	%
Columbia				
age 12 and up	8,325	18.22%	8,261	18.08%
Lane				
age 12 and up	61,585	18.22%	61,112	18.08%
Lincoln				
age 12 and up	8,233	18.22%	8,169	18.08%
Linn				
age 12 and up	20,050	18.22%	19,896	18.08%
Marion				
age 12 and up	53,096	18.22%	52,688	18.08%
Polk				
age 12 and up	13,711	18.22%	13,606	18.08%
Tillamook				
age 12 and up	4,405	18.22%	4,371	18.08%
Yamhill				
age 12 and up	16,909	18.22%	16,779	18.08%
Region 4				
age 12 and up	92,043	18.22%	91,336	18.08%
Coos				
age 12 and up	10,414	18.22%	10,334	18.08%
Curry				
age 12 and up	3,878	18.22%	3,848	18.08%

	Substance U	Jse Disorder	Needing But Not Receiving Treatment at Specialty Facility for a Substance Use Disorder in the Past Year		
Age	n	%	n	%	
Douglas					
age 12 and up	17,691	18.22%	17,555	18.08%	
Jackson					
age 12 and up	35,211	18.22%	34,940	18.08%	
Josephine					
age 12 and up	14,040	18.22%	13,933	18.08%	
Klamath					
age 12 and up	10,810	18.22%	10,726	18.08%	
Region 5					
age 12 and up	39,426	18.22%	39,123	18.08%	
Crook					
age 12 and up	3,946	18.22%	3,916	18.08%	
Deschutes					
age 12 and up	31,712	18.22%	31,468	18.08%	
Jefferson					
age 12 and up	3,769	18.22%	3,740	18.08%	
Region 6					
age 12 and up	39,040	18.22%	38,740	18.08%	
Baker					
age 12 and up	2,638	18.22%	2,618	18.08%	
Gilliam					
age 12 and up	319	18.22%	316	18.08%	

	Substance U	Jse Disorder	Needing But Not Receiving Treatment at Specialty Facility for a Substance Use Disorder in the Past Year		
Age	n	%	n	%	
Grant					
age 12 and up	1,158	18.22%	1,149	18.08%	
Harney					
age 12 and up	1,184	18.22%	1,175	18.08%	
Hood River					
age 12 and up	3,708	18.22%	3,679	18.08%	
Lake					
age 12 and up	1,295	18.22%	1,285	18.08%	
Malheur					
age 12 and up	4,767	18.22%	4,730	18.08%	
Morrow					
age 12 and up	1,826	18.22%	1,812	18.08%	
Sherman					
age 12 and up	297	18.22%	294	18.08%	
Umatilla					
age 12 and up	12,203	18.22%	12,109	18.08%	
Union					
age 12 and up	4,090	18.22%	4,059	18.08%	
Wallowa					
age 12 and up	1,178	18.22%	1,169	18.08%	
Wasco					
age 12 and up	4,137	18.22%	4,105	18.08%	

	Substance	Use Disorder	Needing But Not Receiving Treatment at a Specialty Facility for a Substance Use Disorder in the Past Year		
Age	n	%	n	%	
Wheeler		-	-		
age 12 and up	242	18.22%	240	18.08%	

^a·NSDUH data on substance use disorder utilizing DSM-5 classification of use disorders only available at the state level, which have been applied to counties for these estimates

Alcohol Use Disorder Data

Table 4. Number and percent of population estimated to have an alcohol use disorder (AUD),NSDUH 2020

	Alcohol Us	e Disorder	at a Specialty Facilit	t Not Receiving Treatment 7 Facility for an Alcohol Use der in the Past Year		
Age	n	%	n	%		
Statewide				-		
age 12 to 17	10,025	3.28%	9,108	2.98%		
age 18 to 25	62,139	14.81%	64,027	15.26%		
age 26 and up	380,346	12.89%	354,380	12.01%		
age 12 and up	453,609	12.34%	428,245	11.65%		
Region 1						
age 12 and up	88,500	12.34%	83,551	11.65%		
Multnomah						
age 12 and up	88,500	12.34%	83,551	11.65%		
Region 2						
age 12 and up	108,437	12.34%	102,374	11.65%		
Clackamas						
age 12 and up	45,019	12.34%	42,502	11.65%		
Washington						
age 12 and up	63,418	12.34%	59,872	11.65%		
Region 3						
age 12 and up	141,190	12.34%	133,296	11.65%		
Benton						
age 12 and up	10,553	12.34%	9,963	11.65%		
Clatsop						
age 12 and up	4,452	12.34%	4,203	11.65%		

	Alcohol Us	se Disorder	Needing But Not Receiving Treatment at a Specialty Facility for an Alcohol Use Disorder in the Past Year		
Age	n	%	n	%	
Columbia		-		-	
age 12 and up	5,638	12.34%	5,323	11.65%	
Lane					
age 12 and up	41,710	12.34%	39,378	11.65%	
Lincoln					
age 12 and up	5,576	12.34%	5,264	11.65%	
Linn					
age 12 and up	13,579	12.34%	12,820	11.65%	
Marion					
age 12 and up	35,961	12.34%	33,950	11.65%	
Polk					
age 12 and up	9,286	12.34%	8,767	11.65%	
Tillamook					
age 12 and up	2,983	12.34%	2,817	11.65%	
Yamhill					
age 12 and up	11,452	12.34%	10,812	11.65%	
Region 4					
age 12 and up	62,339	12.34%	58,853	11.65%	
Coos					
age 12 and up	7,053	12.34%	6,659	11.65%	
Curry					
age 12 and up	2,626	12.34%	2,479	11.65%	

	Alcohol Us	se Disorder	at a Specialty Facili	Needing But Not Receiving Treatment at a Specialty Facility for an Alcohol Use Disorder in the Past Year		
Age	n	%	n	%		
Douglas		_		-		
age 12 and up	11,982	12.34%	11,312	11.65%		
Jackson						
age 12 and up	23,848	12.34%	22,514	11.65%		
Josephine						
age 12 and up	9,509	12.34%	8,978	11.65%		
Klamath						
age 12 and up	7,321	12.34%	6,912	11.65%		
Region 5						
age 12 and up	26,702	12.34%	25,209	11.65%		
Crook						
age 12 and up	2,672	12.34%	2,523	11.65%		
Deschutes						
age 12 and up	21,478	12.34%	20,277	11.65%		
Jefferson						
age 12 and up	2,552	12.34%	2,410	11.65%		
Region 6						
age 12 and up	26,441	12.34%	24,962	11.65%		
Baker						
age 12 and up	1,787	12.34%	1,687	11.65%		
Gilliam						
age 12 and up	216	12.34%	204	11.65%		

	Alcohol U	se Disorder	Needing But Not Receiving Treatment at a Specialty Facility for an Alcohol Use Disorder in the Past Year		
Age	n	%	n	%	
Grant		-		-	
age 12 and up	784	12.34%	740	11.65%	
Harney					
age 12 and up	802	12.34%	757	11.65%	
Hood River					
age 12 and up	2,511	12.34%	2,371	11.65%	
Lake					
age 12 and up	877	12.34%	828	11.65%	
Malheur					
age 12 and up	3,228	12.34%	3,048	11.65%	
Morrow					
age 12 and up	1,236	12.34%	1,167	11.65%	
Sherman					
age 12 and up	201	12.34%	190	11.65%	
Umatilla					
age 12 and up	8,265	12.34%	7,803	11.65%	
Union					
age 12 and up	2,770	12.34%	2,615	11.65%	
Wallowa					
age 12 and up	798	12.34%	753	11.65%	
Wasco					
age 12 and up	2,802	12.34%	2,645	11.65%	

	Alcohol Use Disorder		Needing But Not Receiving Treatment at a Specialty Facility for an Alcohol Use Disorder in the Past Year	
Age	n	%	n	%
Wheeler		-		
age 12 and up	164	12.34%	155	11.65%

Illicit Drug Use Disorder Data

Table 5. Number and percent of population estimated to have an illicit drug use disorder(IDUD), NSDUH 2020

Age	Illicit Drug Use Disorder		Needing But Not Receiving Treatment at a Specialty Facility for an Illicit Drug Use Disorder in the Past Year	
	n	%	n	%
Statewide				
age 12 to 17	23,137	7.6%	28,700	9.39%
age 18 to 25	85,803	20.4%	83,831	19.98%
age 26 and up	223,368	7.6%	213,336	7.23%
age 12 and up	332,304	9.0%	325,687	8.86%
Region 1				
age 12 and up	64,833	9.0%	63,542	8.86%
Multnomah				
age 12 and up	64,833	9.0%	63,542	8.86%
Region 2				
age 12 and up	79,438	9.0%	77,857	8.86%
Clackamas				
age 12 and up	32,980	9.0%	32,323	8.86%
Washington				
age 12 and up	46,458	9.0%	45,533	8.86%
Region 3				
age 12 and up	103,433	9.0%	101,373	8.86%
Benton				
age 12 and up	7,731	9.0%	7,577	8.86%
Clatsop				
age 12 and up	3,262	9.0%	3,197	8.86%

Age	Illicit Drug Use Disorder		Needing But Not Receiving Treatment at a Specialty Facility for an Illicit Drug Use Disorder in the Past Year	
	n	%	n	%
Columbia				
age 12 and up	4,130	9.0%	4,048	8.86%
Lane				
age 12 and up	30,556	9.0%	29,947	8.86%
Lincoln				
age 12 and up	4,085	9.0%	4,003	8.86%
Linn				
age 12 and up	9,948	9.0%	9,750	8.86%
Marion				
age 12 and up	26,344	9.0%	25,819	8.86%
Polk				
age 12 and up	6,803	9.0%	6,668	8.86%
Tillamook				
age 12 and up	2,186	9.0%	2,142	8.86%
Yamhill				
age 12 and up	8,390	9.0%	8,223	8.86%
Region 4				
age 12 and up	45,668	9.0%	44,759	8.86%
Coos				
age 12 and up	5,167	9.0%	5,064	8.86%
Curry				
age 12 and up	1,924	9.0%	1,886	8.86%

Age	Illicit Drug Use Disorder		Needing But Not Receiving Treatment at a Specialty Facility for an Illicit Drug Use Disorder in the Past Year	
	n	%	n	%
Douglas				
age 12 and up	8,778	9.0%	8,603	8.86%
Jackson				
age 12 and up	17,470	9.0%	17,122	8.86%
Josephine				
age 12 and up	6,966	9.0%	6,828	8.86%
Klamath				
age 12 and up	5,363	9.0%	5,256	8.86%
Region 5				
age 12 and up	19,561	9.0%	19,172	8.86%
Crook				
age 12 and up	1,958	9.0%	1,919	8.86%
Deschutes				
age 12 and up	15,734	9.0%	15,421	8.86%
Jefferson				
age 12 and up	1,870	9.0%	1,833	8.86%
Region 6				
age 12 and up	19,370	9.0%	18,984	8.86%
Baker				
age 12 and up	1,309	9.0%	1,283	8.86%
Gilliam				
age 12 and up	158	9.0%	155	8.86%

	Illicit Drug Use Disorder		Needing But Not Receiving Treatment at a Specialty Facility for an Illicit Drug Use Disorder in the Past Year	
Age	n	%	n	%
Grant				
age 12 and up	574	9.0%	563	8.86%
Harney				
age 12 and up	587	9.0%	576	8.86%
Hood River				
age 12 and up	1,840	9.0%	1,803	8.86%
Lake				
age 12 and up	642	9.0%	630	8.86%
Malheur				
age 12 and up	2,365	9.0%	2,318	8.86%
Morrow				
age 12 and up	906	9.0%	888	8.86%
Sherman				
age 12 and up	147	9.0%	144	8.86%
Umatilla				
age 12 and up	6,055	9.0%	5,934	8.86%
Union				
age 12 and up	2,029	9.0%	1,989	8.86%
Wallowa				
age 12 and up	584	9.0%	573	8.86%
Wasco				
age 12 and up	2,053	9.0%	2,012	8.86%

	Illicit Drug Use Disorder		Needing But Not Receiving Treatment at a Specialty Facility for an Illicit Drug Use Disorder in the Past Year	
Age	n	%	n	%
Wheeler		-	-	
age 12 and up	120	9.0%	118	8.86%

Appendix B: Substance Use Disorder Service Directory

An inventory of known services available across Oregon was compiled prior to conducing outreach to collect details about organization-level services in all Oregon counties. An initial list was compiled with support from the Oregon Council for Behavioral Health and Lines for Life, both with recently maintained lists of accredited substance use disorder organizations across the state. This list was cross referenced with Oregon Health Authority's monthly release of the <u>Oregon Substance Use Disorders Services Directory</u>. Additionally, OHSU-PSU SPH staff presented at various stakeholder meetings about this project, sharing the service list directly with others to help identify organizations that may have been missing from the initial list.

Please note that this directory was developed for the Oregon Substance Use Disorder Inventory and Gap Analysis, completed in September, 2022. It includes organizations contacted and invited to participate in the substance use disorder services survey between March and June of 2022. Please consult organizations' web sites for current contact information and specific services offered.

Baker

New Directions NorthWest

Services Provided: Prevention, Treatment Address: 3425 13th St, Baker City, OR 97814 Website: <u>https://newdirectionsnw.org/</u> Phone Number: (541) 523-7400

Benton

Acme Counseling

Services Provided: Treatment Address: 310 NW 5th St Ste 1 3 & 5, Corvallis, OR 97330 Website: <u>www.acmecounseling.com/</u> Phone Number: (541) 286-4010

Benton County Public Health

Services Provided: Treatment, Prevention Address: 530 NW 27th St, Corvallis, OR 97330 Website:

https://www.co.benton.or.us/health Phone Number: (541) 757-6844; (541) 766-6835

Cascade Pathways

Services Provided: Treatment Address: 344 NW 6th St, Corvallis, OR 97330 Website: <u>https://cascade-pathways.com/</u> Phone Number: (541) 954-7077

Community Outreach, Inc

Services Provided: Treatment Address: 626 NW 4th St, Corvallis, OR 97330 Website: <u>www.communityoutreachinc.org/</u> Phone Number: (541) 758-3000

Discovery Counseling

Services Provided: Treatment Address: 877 NW Grant St, Corvallis, OR 97330 Website: <u>www.discoverycounseling.co/</u> Phone Number: (541) 752-2703

Milestones Family Recovery Services

Services Provided: Treatment Address: 442 NW 4th St, Corvallis, OR 97331 Website: http://www.milestonesrecovery.com/ Phone Number: (541) 738-6832

Clackamas

4D Recovery Services Provided: Recovery Address: 324 NE 9th St, Gresham, OR 97030 Website: <u>https://4drecovery.org/</u> Phone Number: (971) 407-8196

Acadia Northwest

Services Provided: Treatment Address: 504 Main St Ste A Oregon City, Oregon City, OR 97219 Website: <u>https://acadianw.com/</u> Phone Number: (503) 245-6262

Bridges to Change

Services Provided: Treatment Address: 900 Main St Ste 200, Oregon City, OR 97045 Website: www.bridgestochange.com/ Phone Number: (503) 465-2749; (971) 256-4194

Cascadia Behavioral Health

Services Provided: Treatment Address: 17070 SE Mcloughlin Blvd, Milwaukie, OR 97267 Website: <u>https://cascadiabhc.org/</u> Phone Number: (503) 238-0769; (503) 303-4000

Clackamas County Health Centers

Services Provided: Treatment Address: 1002 Library Ct, Oregon City, OR 97045 Website: <u>www.clackamas.us/healthcenters</u> Phone Number: (503) 655-8264

Clackamas County Health Centers

Services Provided: Treatment Address: 998 Library Ct, Oregon City, OR 97045 Website: <u>www.clackamas.us/healthcenters</u> Phone Number: (503) 655-8401

Clackamas County Health Centers

Services Provided: Treatment Address: 2051 Kaen Rd Ste 367, Oregon City, OR 97045 Website: <u>www.clackamas.us/healthcenters</u> Phone Number: (503) 655-8471

Clackamas County Health Centers

Services Provided: Treatment Address: 38872 Proctor Blvd, Sandy, OR 97055 Website: <u>www.clackamas.us/healthcenters</u> Phone Number: (503) 722-6650

Clackamas County Non-emergency Line Services Provided: Call Line Address: 11212 SE 82nd Ave Ste O, Happy

Valley, 97087 Website: <u>https://clackamasnewdev.prod.acquia-</u> <u>sites.com/behavioralhealth/urgentmentalh</u> <u>ealth</u> Phone Number: (503) 742-5335

Clackamas County Prevention Coalition

Services Provided: Prevention Address: 112 11Th St, Oregon City, OR 97801 Website:

website.

https://www.clackamas.us/cfcc/ youth.html Phone Number: (503) 655-8840

Clackamas County Public Health Division

Services Provided: Prevention Address: 2051 Kaen Rd Ste 367, Oregon City, OR 97045 Website: https://www.clackamas.us/publichealth Phone Number: (503) 742-5300

Clackamas Fire District #1

Services Provided: Address: 11300 SE Fuller Rd, Milwaukie, OR 97222 Website: <u>https://clackamasfire.com/</u> Phone Number: (503) 742-2600

CODA, Inc

Services Provided: Treatment Address: 10822 SE 82nd Ste K, Clackamas, OR 97086 Website: www.codainc.org/ Phone Number: (503) 654-7444

Community Living Above

Services Provided: Prevention Address: West Linn, OR 97036 Website: https://www.communitylivingabove.org/ Phone Number: (503) 719-2057

Clackamas County Substance Abuse Program

Services Provided: Treatment Address: 9000 SE McBrod Ave, Milwaukie, OR 97222 Phone Number: 503-655-8262

Crossroads Treatment and Counseling Services

Services Provided: Treatment, Prevention Address: 501 Pleasant Ave Ste 4F, Oregon City, OR 97045 Website: www.crossroadstreatment.co/ Phone Number: (503) 682-7744

Crossroads Treatment and Counseling Services

Services Provided: Treatment Address: 8855 SW Holly Ln Ste 122, Wilsonville, OR 97070 Website: <u>www.crossroadstreatment.co/</u> Phone Number: (503) 682-7744

DBA: Oregon Recovery Behavioral Health / Renaissance Recovery Resources, Inc. (P.C.)

Services Provided: Prevention, Treatment, Recovery Address: 695 SE 1St St, Canby, OR 97013 Website: <u>https://oregonrecovery.com/</u> Phone Number: (503) 304-4358

FolkTime

Services Provided: Recovery Address: 11211 SE 82nd Ave Ste, Portland, OR 97086 Website: <u>https://folktime.org/</u> Phone Number: (503) 238-6428

Harmony Academy

Services Provided: Recovery Address: 2507 Christie Dr, Lake Oswego, OR 97034 Website: https://www.oregonrecoveryschools.org/ Phone Number: (503) 496-3929

Integrated Health Clinics

Services Provided: Treatment Address: 17882 SE Mcloughlin Blvd, Milwaukie, OR 97267 Website: <u>http://integratedclinics.com/</u> Phone Number: (503) 353-9415

Kaiser Permanente

Services Provided: Treatment Address: 10163 SE Sunnyside Rd Ste 490, Clackamas, OR 97015 Website: <u>www.kp.org/</u> Phone Number: (503) 513-4412

Kaiser Permanente

Services Provided: Treatment Address: 9900 SE Sunnyside Rd, Clackamas, OR 97015 Website: <u>www.kp.org/</u> Phone Number: (800) 813-2000

Kaiser Permanente

Services Provided: Treatment Address: 9800 SE Sunnyside Rd, Clackamas, OR 97015 Website: www.kp.org/ Phone Number: (800) 813-2000

Lifestance Health (formerly Western

Psychological & Counseling Services, PC) Services Provided: Treatment Address: 890 SE 82nd Dr, Gladstone, OR 97027 Website: https://lifestance.com/locations/?user_loca tion=oregon Phone Number: (503) 659-5515

Lifeworks Northwest

Services Provided: Treatment Address: 4105 SE International Way #501, Milwaukie, OR 97222 Website: <u>www.lifeworksnw.org/</u> Phone Number: (503) 496-3201

Lifeworks Northwest

Services Provided: Treatment Address: 18905 Portland Ave, Gladstone, OR 97027 Website: <u>www.lifeworksnw.org/</u> Phone Number: (503) 496-3941

LoveOne

Services Provided: Harm Reduction Address: Oregon City, OR 97405 Website: https://www.loveonecommunity.org/ Phone Number: (503) 312-3106

Mental Health & Addiction Association of Oregon

Services Provided: Recovery Address: 10373 NE Hancock St Ste 106, Portland, OR 97220 Website: <u>https://www.mhaoforegon.org/</u> Phone Number: (503) 922-2377

Morrison Kids

Services Provided: Treatment Address: 1713 Penn Ln Ste B, Oregon City, OR 97045 Website: www.morrisonkids.org/ Phone Number: (503) 258-4545

Neighborhood Health Centers

Services Provided: Treatment Address: 178 SW 2nd Ave, Canby, OR 97013 Website: <u>https://www.nhcoregon.org/</u> Phone Number: (503) 416-4547

Neighborhood Health Centers

Services Provided: Treatment Address: 10330 SE 32nd Ave, Milwaukie, OR 97222 Website: <u>https://www.nhcoregon.org/</u> Phone Number: (503) 513-8950

Neighborhood Health Centers

Services Provided: Treatment Address: 728 Molalla Ave, Oregon City, OR 97045 Website: <u>https://www.nhcoregon.org/</u> Phone Number: (503) 656-9030

Northwest Bible Training Center

Services Provided: Recovery Address: 23172 S Bluhm Rd, Beavercreek, OR 97004 Website: <u>https://www.nwbtc.org/</u> Phone Number: (503) 632-1953

Northwest Family Services

Services Provided: Prevention Address: Unavailable Website: <u>https://www.nwfs.org/</u> Phone Number: (503) 546-6377

Northwest Treatment

Services Provided: Treatment Address: 336 N Holly, Canby, OR Website: <u>www.nwtreatment.com/</u> Phone Number: (503) 655-1029

Northwest Treatment

Services Provided: Treatment Address: 6523 SE King Rd, Milwaukie, OR Website: <u>www.nwtreatment.com/</u> Phone Number: (503) 655-1029

Northwest Treatment

Services Provided: Treatment Address: 511 Main St Ste 201, Oregon City, OR Website: <u>www.nwtreatment.com/</u> Phone Number: (503) 655-1029

Northwest Treatment

Services Provided: Treatment Address: 706 Main St, Oregon City, OR 97045 Website: <u>www.nwtreatment.com/</u> Phone Number: (503) 655-1029

Oregon City Together

Services Provided: Prevention Address: 1404 7th St, Oregon City, OR 97045 Website: <u>https://www.octogether.org/</u> Phone Number: (503) 708-6929

Oregon Trail Recovery

Services Provided: Treatment Address: 10600 SE Mcloughlin Blvd Ste 102 202 205-207 & 210, Milwaukie, OR Website: <u>www.oregontrailrecovery.com/</u> Phone Number: (503) 901-1836

Pacific Crest Trail Detox

Services Provided: Treatment Address: 13240 SE Rusk Rd, Milwaukie, OR 97222 Website: <u>https://pctdetox.com/</u> Phone Number: (855) 704-5552

Parrott Creek Child and Family Services

Services Provided: Treatment Address: 22518 S Parrot Creek Rd, Oregon City, OR 97045 Website: <u>www.pcreek.org/</u> Phone Number: (503) 722-4110

Parrott Creek Child and Family Services

Services Provided: Treatment Address: 1001 Molalla Ave, Oregon City, OR 97045 Website: <u>www.pcreek.org/</u> Phone Number: (503) 722-4110

Phoenix Rising Transitions

Services Provided: Recovery Address: Po Box 723, Gresham, OR 97030 Website: <u>https://phoenix-rising-</u> <u>transitions.org/</u> Phone Number: (503) 866-1554

Quest Center for Integrative Health

Services Provided: Treatment Address: 112 Beavercreek Rd, Oregon City, OR 97045 Website: <u>https://quest-center.org/</u> Phone Number: (503) 248-5464

Todos Juntos

Services Provided: Prevention Address: 126 S Knott St, Canby, OR 97013 Website: <u>https://www.todos-juntos.net/</u> Phone Number: (503) 544-1513

VA Medical Center

Services Provided: Treatment Address: 1750 Blankenship Rd Ste 300, West Linn, OR 97068 Website: <u>www.portland.va.gov/</u> Phone Number: (503) 210-4900

Clatsop

Awakenings by the Sea Services Provided: Treatment Address: 1325 N Holladay Dr, Seaside, OR 97138 Website: <u>www.awakeningsbythesea.com/</u> Phone Number: (503) 738-7700

Clatsop Behavioral Healthcare

Services Provided: Treatment Address: 790 Astor St, Astoria, OR 97103 Website: <u>https://www.clatsopbh.org/</u> Phone Number: (503) 325-5722

Clatsop Behavioral Healthcare

Services Provided: Treatment Address: 2120 Exchange St Ste 203 & 301, Astoria, OR 97103 Website: <u>https://www.clatsopbh.org/</u> Phone Number: (503) 325-5722

Clatsop Behavioral Healthcare

Services Provided: Treatment Address: 318 S Holladay Dr, Seaside, OR 97103 Website: <u>https://www.clatsopbh.org/</u> Phone Number: (503) 325-5722

Clatsop Behavioral Healthcare

Services Provided: Treatment Address: 65 N Hwy 101 Ste 204, Warrenton, OR 97146 Website: <u>https://www.clatsopbh.org/</u> Phone Number: (503) 325-5722

Clatsop Behavioral Healthcare

Services Provided: Treatment Address: 326 SE Marlin Ave, Warrenton, OR 97146 Website: <u>https://www.clatsopbh.org/</u> Phone Number: (503) 325-5722

CODA, Inc

Services Provided: Treatment Address: 2367 S Roosevelt St, Seaside, OR 97138 Website: <u>www.codainc.org/</u> Phone Number: (503) 239-8400

Potentials, llc

Services Provided: Treatment Address: 100 39th St Ste 2B, Astoria, OR 97103 Website: <u>www.potentialsllc.com/</u> Phone Number: (503) 325-2398

Virtue at the Pointe

Services Provided: Treatment Address: 263 W Exchange St, Astoria, OR 97103 Website: https://www.virtueatthepointe.com/ Phone Number: (866) 493-1692

Columbia

Columbia Community Mental Health Services Provided: Treatment Address: 185 N 4th St, St. Helens, OR 97051 Website: <u>www.ccmh1.com/</u> Phone Number: (503) 396-4271

Columbia Community Mental Health

Services Provided: Treatment Address: 469 N Nehalem St, Clatskanie, OR 97016 Website: <u>www.ccmh1.com/</u> Phone Number: (503) 397-5211

Columbia Community Mental Health

Services Provided: Treatment Address: 51577 Columbia River Hwy Ste C, Scappoose, OR 97056 Website: <u>www.ccmh1.com/</u> Phone Number: (503) 397-5211

Columbia Community Mental Health

Services Provided: Treatment Address: 58646 Mcnulty Way, St. Helens, OR 97051 Website: <u>https://www.ccmh1.com/</u> Phone Number: (503) 397-5211

Columbia Community Mental Health

Services Provided: Treatment, Recovery Address: 445 Port Ave Ste A & H, St. Helens, OR 97051 Website: <u>https://www.ccmh1.com/</u> Phone Number: (503) 397-5211

Columbia Community Mental Health

Services Provided: Treatment, Recovery Address: 1005 Cougar St, Vernonia, OR 97064 Website: <u>https://www.ccmh1.com/</u> Phone Number: (503) 397-5211

Columbia Community Mental Health

Services Provided: Treatment, Recovery Address: 51579 Columbia River Hwy Unit F, Scappoose, OR 97056 Website: <u>https://www.ccmh1.com/</u> Phone Number: (503) 438-2157

Columbia County Public Health

Services Provided: Prevention Address: 230 Strand St, St Helens, OR 97051 Website: https://www.columbiacountyor.gov/depart ments/PublicHealth Phone Number: (503) 397-7247

Inner Journey Healing Arts Center

Services Provided: Prevention, Treatment, Recovery Address: 161 St Helens St Ste 102, St Helens, OR 97051 Website: https://www.innerjourneyhealingarts.org/

Phone Number: (503) 543-6100

Medicine Wheel Recovery Services, Incorporated

Services Provided: Treatment Address: 58147 Columbia River Hwy Ste C, St. Helens, OR 97051 Website: <u>www.medicinewheelrecovery.org</u> Phone Number: (503) 396-5322

OHSU - Scappoose

Services Provided: Treatment Address: 51377 SW Old Portland Rd Crossrds Plz Unit C, Scappose, OR 97056 Website: https://www.ohsu.edu/primarycare/ohsu-primary-care-clinic-scappoose Phone Number: (503) 418-4222

Coos

Adapt Integrated Health Care Services Provided: Treatment Address: 400 Virginia Ave Ste 201, Bend, OR 97702 Website: <u>https://adaptoregon.org/</u> Phone Number: (541) 492-0200; (541) 672-2691

Adapt Integrated Health Care

Services Provided: Treatment Address: 2668 Coos Bay Blvd, Coos Bay, OR 97420 Website: <u>https://adaptoregon.org/</u> Phone Number: (541) 751-0357

Adapt Integrated Health Care

Services Provided: Treatment Address: 400 Virginia Ave, North Bend, OR 97459 Website: <u>https://adaptoregon.org/</u> Phone Number: (541) 751-0357

Bay Area First Step

Services Provided: Treatment Address: 155 S Empire Blvd, Coos Bay, OR 97420 Website: <u>https://bayareafirststep.org/</u> Phone Number: (541) 756-3111

Coos Health & Wellness

Services Provided: Prevention Address: 281 Laclair St, Coos Bay, OR 97420 Website: https://cooshealthandwellness.org/ Phone Number: (541) 266-6700

HIV Alliance

Services Provided: Prevention Address: Unavailable Website: <u>https://hivalliance.org/</u> Phone Number: (541) 342-5088

Waterfall Community HC

Services Provided: Prevention Address: 826 S 11th St, Coos Bay, OR 97420 Website: <u>https://www.wfall.org/</u> Phone Number: (541) 756-6232 x400

Crook

BestCare Treatment Services

Services Provided: Treatment Address: 1059 NW Madras Hwy, Prineville, OR 97754 Website: https://www.bestcaretreatment.org/ Phone Number: (541) 323-5330

Crook County Health Department Services

Provided: Prevention Address: 375 NW Beaver St Ste 100, Prineville, OR 97754 Website: <u>https://co.crook.or.us/health</u> Phone Number: (541) 447-5165

Imagine Freedom LLC

Services Provided: Treatment Address: 445 NW 3Rd St, Prineville, OR 97754 Website: <u>www.imaginefreedomllc.com/</u> Phone Number: (541) 447-6959

Rimrock Trails

Services Provided: Treatment Address: 446 NW 3Rd, Ste. 104, Prineville, 97754 Website: <u>www.rimrocktrails.org/</u> Phone Number: (541) 388-8459

Rimrock Trails

Services Provided: Treatment Address: 1333 NW 9th St, Prineville, OR 97754 Website: <u>www.rimrocktrails.org/</u> Phone Number: (541) 447-2631

Curry

HIV Alliance Services Provided: Prevention Address: Unavailable Website: <u>https://hivalliance.org/</u> Phone Number: (541) 342-5088

Deschutes

BestCare Treatment Services Services Provided: Treatment Address: 1470 NW 4th St, Redmond, OR 97756 Website: https://www.bestcaretreatment.org/ Phone Number: (541) 316-7520

BestCare Treatment Services

Services Provided: Treatment Address: 340 NW 5th St #202, Redmond, OR 97756 Website: https://www.bestcaretreatment.org/ Phone Number: (541) 504-2218

BestCare Treatment Services

Services Provided: Prevention, Treatment, Recovery Address: 676 Negus Way, Redmond, OR 97756 Website: https://www.bestcaretreatment.org/ Phone Number: (541) 504-9577

BestCare Treatment Services

Services Provided: Prevention, Treatment, Recovery Address: 908 NE 4th St Ste 101 & 201, Bend, OR 97701 Website: https://www.bestcaretreatment.org/

Phone Number: (541) 504-9577; (541) 516-4099; (541) 617-7365

BestCare Treatment Services

Services Provided: Prevention, Treatment, Recovery Address: 676 NE Maple Ave, Redmond, OR 97756 Website: https://www.bestcaretreatment.org/ Phone Number: (541) 516-4099

Bridging the Gap Treatment Service, LLC

Services Provided: Treatment Address: 150 SW 4th St, Redmond, OR 97756 Website: <u>www.btgtreatmentservices.com/</u> Phone Number: (541) 699-6998

CLEAR Alliance

Services Provided: Prevention Address: 247 N Main St, Prineville, OR 97754 Website: <u>https://clearalliance.org/</u> Phone Number: (541) 508-3062

Deschutes County Health Services

Services Provided: Treatment Address: 2577 NE Courtney Dr, Bend, OR 97701 Website: www.deschutes.org/health/page/behaviora I-health/ Phone Number: (541) 322-7500

Deschutes County Health Services

Services Provided: Prevention Address: 1340 NW Wall St, Bend, OR 97701 Website: www.deschutes.org/health/page/behaviora I-health/ Phone Number: (541) 322-7500

Deschutes County Health Services

Services Provided: Prevention Address: 1128 NW Harriman St, Bend, OR 97701 Website: www.deschutes.org/health/page/behaviora I-health/ Phone Number: (541) 322-7500

Deschutes County Health Services

Services Provided: Prevention Address: 406 W Antler Ave, Redmond, OR 97756 Website: www.deschutes.org/health/page/behaviora I-health/

Phone Number: (541) 322-7500

Deschutes County Health Services

Services Provided: Prevention, Treatment Address: 51340 Hwy 97 S, La Pine, OR 97739 Website: https://www.deschutes.org/ health Phone Number: (541) 322-7500

New Priorities Family Services

Services Provided: Treatment Address: 1655 SW Highland Ave #3, Redmond, OR 97756 Website: <u>www.mynewpriorities.com/</u> Phone Number: (541) 923-2654

Oregon Recovery & Treatment Center (ORTC)

Services Provided: Treatment Address: 155 NE Revere Ste 150, Bend, OR 97701 Website: <u>https://ortc.care/</u> Phone Number: (541) 617-4544

Pacific Northwest Adult & Teen

Challenge Services Provided: Treatment Address: 401 NE Burnside Ave, Bend, OR 97701 Website: <u>www.teenchallengepnw.com/</u> Phone Number: (503) 208-9004

Pfeifer & Associates

Services Provided: Treatment Address: 3835 SW 21St St Ste 103, Redmond, OR 97756 Website: <u>www.pfeiferandassociates.com/</u> Phone Number: (541) 504-9326

Pfeifer & Associates

Services Provided: Treatment Address: 23 NW GreeNWood Ave, Bend, OR 97701 Website: <u>www.pfeiferandassociates.com/</u> Phone Number: (541) 536-8879

Pfeifer & Associates

Services Provided: Treatment Address: 16440 Finley Butte Rd, La Pine, OR 97739 Website: <u>https://pfeiferandassociates.com/</u> Phone Number: (541) 536-8879

Rimrock Trails

Services Provided: Treatment Address: 548 SW 13th St, Bend, OR 97702 Website: <u>www.rimrocktrails.org/</u> Phone Number: (541) 388-8459

Rimrock Trails

Services Provided: Treatment Address: 215 SW 7th St, Redmond, OR 97756 Website: <u>www.rimrocktrails.org/</u> Phone Number: (541) 388-8459

Serenity Lane

Services Provided: Treatment Address: 601 NW Harmon Blvd, Bend, OR 97701 Website: <u>www.serenitylane.org/</u> Phone Number: (541) 383-0844

Skyline Recovery

Services Provided: Recovery Address: 835 NW Bond St Ste 100, Bend, OR 97703 Website: https://www.skylinerecoverybend.com/ Phone Number: (541) 782-8882

St Charles School-Based Clinic Sisters

Services Provided: Prevention Address: 535 N Reed St, Sisters, OR 97759 Website:

https://www.stcharleshealthcare.org/ Phone Number: (541) 526-6623

Sunstone Recovery

Services Provided: Treatment Address: 625 NW Colorado Ave, Bend, OR 97701 Website: <u>www.sunstonerecovery.com/</u> Phone Number: (541) 610-3009

Turning Points Recovery Services

Services Provided: Treatment Address: 1435 NE 4th St Ste B, Bend, OR 97701 Website: www.turningpointsrs.org/ Phone Number: (541) 306-4446

Turning Points Recovery Services

Services Provided: Treatment Address: 412 SW 8th St #140 A&B, Redmond, OR 97756 Website: <u>www.turningpointsrs.org/</u> Phone Number: (541) 306-4446

Turning Points Recovery Services

Services Provided: Treatment Address: 131 NW Hawthorne Ave Ste 207, Bend, OR 97701 Website: <u>www.turningpointsrs.org/</u> Phone Number: (541) 480-8876

Turning Points Recovery Services

Services Provided: Treatment Address: 185 SW D St, Madras, OR 97741 Website: <u>www.turningpointsrs.org/</u> Phone Number: (541) 480-8876

VA Medical Center

Services Provided: Treatment Address: 2650 NE CtNEy Dr, Bend, OR 97701 Website: <u>www.portland.va.gov/</u> Phone Number: (541) 647-5200

Douglas

Adapt Integrated Health Care Services Provided: Treatment Address: 651 NE Division St, Myrtle Creek, OR 97457 Website: https://adaptoregon.org/ Phone Number: (541) 229-8953

Adapt Integrated Health Care

Services Provided: Treatment Address: 680 Fir St, Reedsport, OR 97467 Website: <u>https://adaptoregon.org/</u> Phone Number: (541) 440-3532

Adapt Integrated Health Care

Services Provided: Treatment Address: 3099 NE Diamond Lake Blvd, Roseburg, OR 97470 Website: <u>https://adaptoregon.org/</u> Phone Number: (541) 492-0206

Adapt Integrated Health Care

Services Provided: Prevention, Treatment Address: 621 W Madrone, Roseburg, OR 97470 Website: <u>https://adaptoregon.org/</u> Phone Number: (541) 672-2691

Adapt Integrated Health Care

Services Provided: Treatment Address: 548 SE Jackson St, Roseburg, OR 97470 Website: <u>https://adaptoregon.org/</u> Phone Number: (541) 672-2691

Adapt Integrated Health Care

Services Provided: Treatment Address: 272 Medical Loop Ste C & E, Roseburg, OR 97470 Website: <u>https://adaptoregon.org/</u> Phone Number: (541) 672-2691

Adapt Integrated Health Care

Services Provided: Treatment Address: 2700 NW Stewart Pkwy Annex B, Roseburg, OR 97471 Website: <u>https://adaptoregon.org/</u> Phone Number: (541) 672-2691

Adapt Integrated Health Care

Services Provided: Treatment Address: 2001 NW Newcastle St, Roseburg, OR 97471 Website: <u>https://adaptoregon.org/</u> Phone Number: (541) 672-2691

Adapt Integrated Health Care

Services Provided: Treatment Address: 531 NE Comstock, Sutherlin, OR 97479 Website: <u>https://adaptoregon.org/</u> Phone Number: (541) 672-2691

Adapt Integrated Health Care

Services Provided: Treatment Address: 217 Pioneer Way, Winchester, OR 97475 Website: <u>https://adaptoregon.org/</u> Phone Number: (541) 672-2691

Adapt Integrated Health Care

Services Provided: Treatment Address: 548 SE Jackson St Ste 100, Roseburg, OR 97470 Website: <u>https://adaptoregon.org/</u> Phone Number: (541) 673-2770; (541) 672-2691

Adapt Integrated Health Care

Services Provided: Treatment Address: 2064 SE Douglas Ave, Roseburg, OR 97470 Website: <u>https://adaptoregon.org/</u> Phone Number: (541) 673-5119

Adapt Integrated Health Care

Services Provided: Treatment Address: 5 St Johns Way, Reedsport, OR 97467 Website: <u>https://adaptoregon.org/</u> Phone Number: (541) 751-0357

Cow Creek Behavioral Health

Services Provided: Prevention Address: 2589 NW Edenbower Blvd, Roseburg, OR 97470 Website: https://douglas.or.networkofcare.org/ Phone Number: (800) 935-2649

Cow Creek Health and Wellness

Services Provided: Prevention Address: 480 Wartahoo Ln, Canyonville, OR 97417 Website: https://douglas.or.networkofcare.org/ Phone Number: (800) 935-2649

HIV Alliance

Services Provided: Prevention Address: 647 W Luellen Ste #3, Roseburg, OR 97471 Website: <u>https://hivalliance.org/</u> Phone Number: (541) 342-5088

Serenity Lane

Services Provided: Treatment Address: 2575 NW Kline St, Roseburg, OR 97470 Website: <u>www.serenitylane.org/</u> Phone Number: (541) 673-3504

VA Medical Center

Services Provided: Treatment Address: 913 NW Garden Valley Blvd, Roseburg, OR 97470 Website: <u>https://www.va.gov/roseburghealth-care/</u> Phone Number: (541) 440-1000

Gilliam

Community Counseling Solutions

Services Provided: Treatment Address: 120 Arlington Mall, Arlington, OR 97812 Website:

www.communitycounselingsolutions.org/ Phone Number: (541) 384-2666

Community Counseling Solutions

Services Provided: Treatment Address: 422 Main St, Condon, OR 97823 Website:

www.communitycounselingsolutions.org/ Phone Number: (541) 676-9161

Grant

Community Counseling Solutions

Services Provided: Prevention Address: 528 E Main St Ste W, John Day, OR 97845 Website: <u>https://ccswebsite.org/</u> Phone Number: (541) 575-1466

Community Counseling Solutions

Services Provided: Treatment Address: 528 E Main St, John Day, OR 97845 Website: www.communitycounselingsolutions.org/ Phone Number: (541) 575-1466

Community Counseling Solutions

Services Provided: Treatment Address: 150 E Main St Ste 101 & 104, John Day, OR 97845 Website: www.communitycounselingsolutions.org/ Phone Number: (541) 575-1466; (541) 676-9161

Community Counseling Solutions

Services Provided: Treatment Address: 194 Ford Rd, John Day, OR 97845 Website:

www.communitycounselingsolutions.org/ Phone Number: (541) 676-9161; (541) 575-0237

Harney

Burns Paiute Alcohol and Drug Program Services Provided: Treatment, Recovery Address: 100 Pasigo St, Burns, OR 97720 Website: <u>www.burnspaiute-nsn.gov/</u> Phone Number: (541) 573-2267

Harney County Health Department

Services Provided: Prevention Address: 420 N Fairview Ave, Burns, OR 97720

Website:

www.co.harney.or.us/index.php/features/h ealth-public-safety/health- department/ Phone Number: (541) 573-2271

Oregon Youth Authority

Services Provided: Treatment, Recovery Address: 1800 W Monroe, Burns, OR 97720 Website: <u>https://www.oregon.gov/oya/</u> Phone Number: (541) 573-3133

Hood River

Hood River County Prevention Services Provided: Prevention Address: 309 State St, Hood River, OR 97031 Website: https://www.hoodriverprevents.com/

Phone Number: (541) 386-2500

Mid-Columbia Center for Living

Services Provided: Treatment Address: 3686 Davis Dr, Hood River, OR 97031 Website: <u>www.mccfl.org/</u> Phone Number: (541) 296-5452

Mid-Columbia Center for Living

Services Provided: Treatment Address: 300 Wa Na Pa St, Cascade Locks, OR 97014 Website: <u>https://www.mccfl.org/</u> Phone Number: (541) 296-5452

Mid-Columbia Center for Living

Services Provided: Treatment Address: 1610 Woods Ct, Hood River, OR 97031 Website: <u>https://www.mccfl.org/</u> Phone Number: (541) 386-2620

One Community Health

Services Provided: Treatment, Address: 849 Pacific Ave, Hood River, OR 97031 Website: <u>https://www.onecommunityhealth.org/</u> Phone Number: (541) 386-6380

Providence Health

Services Provided: Treatment Address: 814 13th St, Hood River, OR 97031 Website: <u>https://www.providence.org/</u> locations/or/hood-river-memorial-hospital/ behavioral-health Phone Number: (541) 387-6138

The Next Door, Inc.

Services Provided: Treatment Address: 965 Tucker Rd, Hood River, OR 97031 Website: <u>www.nextdoorinc.org/</u> Phone Number: (541) 386-6665

A-37

Jackson

Addictions Recovery Center

Services Provided: Treatment, Recovery Address: 338 N Front St, Medford, OR 97501

Website:

https://www.addictionsrecovery.org/ Phone Number: (541) 779-1282

Addictions Recovery Center

Services Provided: Treatment, Recovery Address: 16 S Peach, Medford, OR 97501 Website: <u>www.addictionsrecovery.org/</u> Phone Number: (541) 779-1282

Addictions Recovery Center

Services Provided: Treatment, Recovery Address: 1025 E Main St, Medford, OR 97504 Website: <u>www.addictionsrecovery.org/</u> Phone Number: (541) 779-1282

Childrens Advocacy Center

Services Provided: Prevention Address: 816 W 10th St, Medford, OR 97501 Website: <u>https://cacjc.org/</u> Phone Number: (541) 734-5437

Comprehensive Treatment Center

Services Provided: Treatment Address: 777 Murphy Rd, Medford, OR 97504 Website: www.crchealth.com/ Phone Number: (541) 705-2258

Family Nurturing Center

Services Provided: Recovery Address: 745 N Rose St, Pheonix, OR 97535 Website: https://familynurturingcenter.org/ Phone Number: (541) 613-9053

Family Nurturing Center

Services Provided: Recovery Address: 212 N Oakdale Ave, Medford, OR 97201 Website: https://familynurturingcenter.org/ Phone Number: (541) 779-5242

Jackson County Public Health

Services Provided: Prevention Address: 140 S Holly St, Medford, OR 97501 Website: <u>https://jacksoncountyor.org/hhs/</u> Phone Number: (541) 774-8209

Kolpia Counseling Services

Services Provided: Treatment Address: 607 Siskiyou Blvd, Ashland, OR 97520 Website: <u>www.kolpiacounseling.com/</u> Phone Number: (541) 482-1718

Kolpia Counseling Services

Services Provided: Treatment Address: 836 E Main St Ste 6, Medford, OR 97504 Website: <u>www.kolpiacounseling.com/</u> Phone Number: (541) 500-8023

La Clinica

Services Provided: Treatment, Recovery Address: 910 S Central Ave, Medford, OR 97501 Website: <u>https://laclinicahealth.org/</u> Phone Number: (541) 535-6239

La Clinica

Services Provided: Treatment, Recovery Address: 221 W Stewart Ave Ste 101, Medford, OR 97501 Website: <u>https://laclinicahealth.org/</u> Phone Number: (541) 535-6239

Oasis Center of the Rogue Valley

Services Provided: Treatment , Recovery Address: 1025 E Main St Ste 108, Medford, OR 97504 Website: http://oasiscenterroguevalley.org/ Phone Number: (541) 200-1530

OnTrack Rogue Valley

Services Provided: Treatment Address: 300 W Main St, Medford, OR 97501 Website: <u>https://ontrackroguevalley.org/</u> Phone Number: (541) 772-1777

Drug Rehab Central Point

Services Provided: Treatment Address: 1911 Hazel St, Medford, OR 97501 Website: https://www.drugrehabcentralpoint.com/ Phone Number: (541) 472-9939

Options for Southern Oregon

Services Provided: Treatment Address: 200 Beatty, Medford, OR 97501 Website: <u>http://www.optionsonline.org/</u> Phone Number: (541) 476-2373

Oregon Recovery & Treatment Center (ORTC)

Services Provided: Treatment Address: 750 Biddle Rd, Medford, OR 97504 Website: <u>www.ortc.care/</u> Phone Number: (541) 690-1990

Phoenix Counseling Center

Services Provided: Treatment, Prevention, Recovery Address: 149 S Main St, Phoenix, OR 97535 Website: <u>www.phoenixcounseling.org/</u> Phone Number: (541) 535-4133

Reclaiming Lives Recovery Cafe

Services Provided: Recovery Address: 228 E Main St, Medford, OR 97504 Website: <u>https://reclaiming-lives.org/</u> Phone Number: (541) 292-1618

Rogue Community Health

Services Provided: Treatment, Harm Reduction Address: 19 Myrtle St, Medford, OR 97504 Website: https://roguecommunityhealth.org/ Phone Number: (541) 773-3863

Rogue Retreat

Services Provided: Recovery Address: 711 E Main St #25, Medford, OR 97504 Website: <u>https://www.rogueretreat.org/</u> Phone Number: (541) 499-0880

Jefferson

BestCare Treatment Services

Services Provided: Treatment Address: 850 SW 4th St Ste 302, Madras, OR 97741 Website: https://www.bestcaretreatment.org/ Phone Number: (541) 475-4822

BestCare Treatment Services

Services Provided: Prevention, Treatment, Recovery Address: 236 SE D St, Madras, OR 97741 Website: https://www.bestcaretreatment.org/ Phone Number: (541) 475-5300

Confederated Tribes of Warm Springs

Services Provided: Prevention Address: 1115 Autumn Ln, Warm Springs, OR 97761 Website: <u>www.warmsprings-nsn.gov/</u> Phone Number: (541) 553-1161

Turning Points Recovery Services

Services Provided: Treatment Address: 125 SW C St, Madras, OR 97741 Website: <u>www.turningpointsrs.org/</u> Phone Number: (541) 306-4566

Josephine

Adapt Integrated Health Care Services Provided: Treatment Address: 418 NW 6th St, Grants Pass, OR 97526 Website: <u>https://adaptoregon.org/</u>

Phone Number: (541) 474-1033

Adapt Integrated Health Care

Services Provided: Treatment Address: 356 NE Beacon Dr, Grants Pass, OR 97526 Website: <u>https://adaptoregon.org/</u> Phone Number: (541) 474-1033

Family Nurturing Center

Services Provided: Recovery Address: 411 NW E St, Grant Pass, OR 97526 Website: https://familynurturingcenter.org/ Phone Number: (541) 779-5242

HIV Alliance

Services Provided: Prevention Address: 132 NE B St, Grants Pass, OR 97526 Website: <u>https://hivalliance.org/</u> Phone Number: (541) 342-5089

Josephine County

Services Provided: Prevention Address: 715 NW Dimmick St., Grants Pass, OR Website: <u>https://www.co.josephine.or.us/</u> Phone Number: (541) 474-5325

Josephine County Community Corrections

Services Provided: Treatment, Prevention Address: 510 NW 4th St, Grants Pass, OR 97526 Website: <u>https://</u> www.josephinecounty.gov/departments/ community_corrections/index.php Phone Number: (541) 474-5191

OnTrack Rogue Valley

Services Provided: Treatment Address: 720 NW 6th St, Grants Pass, OR 97526 Website: <u>https://ontrackroguevalley.org/</u> Phone Number: (541) 955-9227

Options for Southern Oregon

Services Provided: Treatment Address: 319 Caves Hwy, Cave Junction, OR 97523 Website: <u>http://www.optionsonline.org/</u> Phone Number: (541) 476-2373

Options for Southern Oregon

Services Provided: Treatment Address: 1545 Harbeck Rd, Grants Pass, OR 97527 Website: <u>http://www.optionsonline.org/</u> Phone Number: (541) 476-2373

Options for Southern Oregon

Services Provided: Treatment Address: 1215 SW G St, Grants Pass, OR 97526 Website: <u>http://www.optionsonline.org/</u> Phone Number: (541) 476-2373

Options for Southern Oregon

Services Provided: Treatment Address: 1181 SW Ramsey Ave, Grants Pass, OR 975267 Website: <u>http://www.optionsonline.org/</u> Phone Number: (541) 476-2373

Options for Southern Oregon

Services Provided: Treatment Address: 109 NE Manzanita Ave, Grants Pass, OR 97526 Website: <u>http://www.optionsonline.org/</u> Phone Number: (541) 479-8847

Oregon Recovery & Treatment Center (ORTC)

Services Provided: Treatment Address: 1885 NE 7th St, Grants Pass, OR 97526 Website: <u>https://ortc.care/</u> Phone Number: (541) 955-3210

Oregon Youth Authority

Services Provided: Treatment, Recovery Address: 2001 NE F St, Grants Pass, OR 97526 Website: <u>https://www.oregon.gov/oya/</u> Phone Number: (541) 471-2862

Siskiyou Community Health Center

Services Provided: Treatment Address: 1701 NW Hawthorne Ave, Grant Pass, OR 97526 Website: <u>https://siskiyouhealthcenter.com/</u> Phone Number: (541) 472-4777

Southern Oregon Pathways

Services Provided: Treatment Address: 418 NW 6th St, Grant Pass, OR 97526 Website: <u>https://addiction-support.com/</u> Phone Number: (541) 450-9615

Klamath

BestCare Treatment Services Services Provided: Prevention, Treatment, Recovery Address: 4775 S 6th St, Klamath Falls, OR 97603 Website: https://www.bestcaretreatment.org/ Phone Number: (541) 504-9577

BestCare Treatment Services

Services Provided: Treatment Address: 2555 Main St, Klamath Falls, OR 97601 Website: https://www.bestcaretreatment.org/ Phone Number: (541) 883-2795

Klamath Basin Behavioral Health

Services Provided: Treatment Address: 725 Washburn Way, Klamath Falls, OR 97603 Website: <u>www.kbbh.org/</u> Phone Number: (541) 883-1030

Klamath Basin Behavioral Health

Services Provided: Treatment Address: 3203 Vandenberg Rd, Klamath Falls, OR 97603 Website: <u>www.kbbh.org/</u> Phone Number: (541) 883-1030

Klamath Basin Behavioral Health

Services Provided: Treatment Address: 2210 Eldorado Ave, Klamath Falls, OR 97601 Website: <u>www.kbbh.org/</u> Phone Number: (541) 883-1030

Klamath Basin Behavioral Health

Services Provided: Treatment Address: 121 Iowa St, Klamath Falls, OR 97601 Website: <u>www.kbbh.org/</u> Phone Number: (541) 883-1030

Klamath Tribal Health

Services Provided: Treatment, Prevention Address: 633 Main St, Klamath Falls, OR 97601 Website: <u>https://klamathtribes.org/klamath-tribal-</u> health-family-services/

Phone Number: (541) 783-2721

Klamath Tribal Health

Services Provided: Prevention Address: 330 Chiloquin Blvd, Chiloquin, OR 97624 Website: <u>https://klamathtribalhealth.org/</u> Phone Number: (541) 783-3293

Klamath Tribal Health

Services Provided: Prevention Address: 3949 S 6th St, Klamanth Falls, OR 97603 Website: <u>https://klamathtribalhealth.org/</u> Phone Number: (541) 882-1487

Lutheran Community Services NW

Services Provided: Treatment Address: 2545 N Eldorado Ave, Klamath Falls, OR 97601 Website: <u>https://lcsnw.org/</u> Phone Number: (541) 883-3471

Red is the Road to Wellness (RRW)

Services Provided: Treatment, Recovery Address: 1433 E Main St, Klamath Falls, OR 97601 Website: <u>https://rrwlife.com/</u> Phone Number: (541) 797-0088

Transformation Wellness

Services Provided: Treatment, Recovery Address: 3647 Hwy 39, Klamath Falls, OR 97603 Website: www.transformwc.org/

Phone Number: (541) 884-5244

Lake

Lake County Prevention

Services Provided: Prevention Address: 35 S G St, Lake View, OR 97630 Website:

https://www.lakecountyor.org/government /prevention/ Phone Number: (541) 947-2114 ext 441

Lake Health District

Services Provided: Treatment Address: 87127 Christmas Valley Hwy, Christmas Valley, OR 97641 Website: www.lakehealthdistrict.org/ Phone Number: (541) 947-2114; (541) 947-6021

Lake Health District

Services Provided: Treatment Address: 700 S J St, Lakeview, OR 97630 Website: <u>www.lakehealthdistrict.org/</u> Phone Number: (541) 947-6021

Lake Health District

Services Provided: Treatment, Prevention Address: 323 S G St, Lakeview, OR 97630 Website: <u>www.lakehealthdistrict.org/</u> Phone Number: (541) 947-6021

Lake Health District

Services Provided: Treatment Address: 215 N G St, Lakeview, OR 97630 Website: <u>www.lakehealthdistrict.org/</u> Phone Number: (541) 947-6021

Lake Health District

Services Provided: Treatment Address: 100 N D St, Lakeview, OR 97630 Website: <u>www.lakehealthdistrict.org/</u> Phone Number: (541) 947-6021

Lake Health District Prevention Dept.

Services Provided: Prevention Address: 100 N D St Ste 100, Lake View, OR 97630 Website: https://lakehealthdistrict.org/lake-countypublic-health/ Phone Number: (541) 947-6045

Lane

Cascade Health

Services Provided: Treatment Address: 2650 Suzanne Way Ste 120, Eugene, OR 97408 Website: <u>https://cascadehealth.org/</u> Phone Number: (541) 345-2800

Center Family Development, Inc.

Services Provided: Treatment Address: 1501 Pearl St, Eugene, OR 97401 Website: <u>https://www.c-f-d.org/</u> Phone Number: (541) 342-8437

Centro Latino Americano

Services Provided: Treatment Address: 944 W 5th St, Eugene, OR 97402 Website: <u>https://centrolatinoamericano.org</u> Phone Number: (541) 687-2667

Emergence Addiction & Behavioral Therapies

Services Provided: Treatment Address: 1040 Oak St, Eugene, OR 97401 Website: <u>www.4emergence.com/</u> Phone Number: (541) 342-6987

Emergence Addiction & Behavioral Therapies

Services Provided: Treatment Address: 710 Adams Ave, Cottage Grove, OR 97424 Website: <u>www.4emergence.com/</u> Phone Number: (541) 393-0777

Emergence Addiction & Behavioral Therapies

Services Provided: Treatment Address: 78 Centennial Loop Unit A, Eugene, OR 97401 Website: <u>www.4emergence.com/</u> Phone Number: (541) 687-8820

Emergence Addiction & Behavioral Therapies

Services Provided: Treatment Address: 1461 Oak St, Eugene, OR 97401 Website: <u>www.4emergence.com/</u> Phone Number: (541) 687-9141

Emergence Addiction & Behavioral Therapies

Services Provided: Treatment Address: 2149 Centennial Plz Ste 4, Eugene, OR 97401 Website: <u>www.4emergence.com/</u> Phone Number: (541) 741-7107

Emergence Addiction & Behavioral Therapies

Services Provided: Treatment Address: 374 Q St, Springfield, OR 97477 Website: <u>http://www.4emergence.com/</u> Phone Number: (541) 746-4041

Emergence Addiction & Behavioral Therapies

Services Provided: Treatment Address: 4969 Hwy 101, Florence, OR 97439 Website: <u>www.4emergence.com/</u> Phone Number: (541) 997-8509

Equinox Clinic

Services Provided: Treatment Address: 160 E 18th Ave, Eugene, OR 97401 Website: <u>https://equinoxclinics.com/</u> Phone Number: (541) 790-2455

Exodus Recovery Services

Services Provided: Treatment, Recovery Address: 24983 Dunham Rd, Veneta, OR 97487 Website: <u>https://countrycounseling.org/</u> Phone Number: (541) 243-8914

G Street

Services Provided: Treatment Address: 1435 G St, Springfield, OR 97477 Website: <u>www.gstih.org/</u> Phone Number: (541) 735-9420

Integrated Health Clinics

Services Provided: Treatment Address: 715 Lincoln St, Eugene, OR 97401 Website: <u>http://integratedclinics.com/</u> Phone Number: (541) 344-3574

Lane County Medication Assisted

Treatment Program Services Provided: Treatment Address: 151 W 7th Ave, Eugene, OR 97401 Website: <u>https://lanemat.info/</u> Phone Number: (541) 682-4035

Lane County Public Health

Services Provided: Treatment Address: 2411 Martin Luther King Jr Blvd, Eugene, OR 97401 Website: <u>www.lanecounty.org/</u> Phone Number: (541) 682-3608

Lane County Public Health

Services Provided: Treatment Address: 151 W 7th Ave Room 520, Eugene, OR 97401 Website: <u>www.lanecounty.org/</u> Phone Number: (541) 682-4041

Lane County Public Health

Services Provided: Treatment Address: 151 W 7th Ave Ste 163, Eugene, OR 97401 Website: <u>https://www.lanecounty.org/</u> Phone Number: (541) 682-4464

Lane County Public Health

Services Provided: Treatment Address: 151 W 7th Ave Room 310, Eugene, OR 97041 Website: <u>https://www.lanecounty.org/</u> Phone Number: (541) 682-8961

Looking Glass

Services Provided: Treatment Address: 260 E 11th Ave, Eugene, OR 97401 Website: <u>https://www.lookingglass.us/</u> Phone Number: (541) 484-4425

Looking Glass

Services Provided: Treatment Address: 1790 W 11th Ave, Eugene, OR 97402 Website: <u>https://www.lookingglass.us/</u> Phone Number: (541) 484-4425

Looking Glass

Services Provided: Treatment Address: 550 River Rd, Eugene, OR 97404 Website: <u>https://www.lookingglass.us/</u> Phone Number: (541) 686-2688

Looking Glass

Services Provided: Treatment Address: 2655 Martin Luther King Jr Blvd, Eugene, OR 97401 Website: <u>https://www.lookingglass.us/</u> Phone Number: (541) 686-2688

Looking Glass

Services Provided: Treatment Address: 2517 Martin Luther King Jr Blvd, Eugene, OR 97401 Website: <u>https://www.lookingglass.us/</u> Phone Number: (541) 686-2688

Looking Glass

Services Provided: Treatment Address: 2485 Roosevelt Blvd, Eugene, OR 97402 Website: <u>https://www.lookingglass.us/</u> Phone Number: (541) 686-2688

Looking Glass

Services Provided: Treatment Address: 210 E 6th St, Junction City, OR 97448 Website: <u>https://www.lookingglass.us/</u> Phone Number: (541) 686-2688

Looking Glass

Services Provided: Treatment Address: 1403 F St, Springfield, OR 97477 Website: <u>https://www.lookingglass.us/</u> Phone Number: (541) 686-2688

Oregon Recovery & Treatment Center (ORTC)

Services Provided: Treatment Address: 1485 Market St, Springfield, OR 97477 Website: <u>https://ortc.care/</u> Phone Number: (541) 653-8284

Oregon Youth Authority

Services Provided: Treatment, Recovery Address: 04859 S Jetty Rd, Florence, OR 97439 Website: <u>https://www.oregon.gov/oya/</u> Phone Number: (541) 997-2076

OSLC Developments, Inc

Services Provided: Treatment Address: 10 Shelton Mcmurphey Blvd, Eugene, OR 97401 Website: <u>www.oslcdevelopments.org/</u> Phone Number: (541) 485-2711

Peace Health

Services Provided: Treatment Address: 770 E 11th Ave, Eugene, OR 97401 Website: www.peacehealth.org/ Phone Number: (541) 685-1794

Reconnections Counseling

Services Provided: Treatment Address: 1720 34th St, Florence, OR 97439 Website:

www.reconnectionscounseling.com/ Phone Number: (541) 574-9570

Relief Nursery

Services Provided: Recovery Address: 1720 W 25th Ave, Eugene, 97405 Website: <u>https://reliefnursery.org/</u> Phone Number: (541) 343-9706

Relief Nursery

Services Provided: Recovery Address: 850 42nd St, Springfield, 97478 Website: <u>https://reliefnursery.org/</u> Phone Number: (541) 343-9706

Serenity Lane

Services Provided: Treatment Address: 1 Serenity Ln, Coburg, OR 97408 Website: <u>www.serenitylane.org/</u> Phone Number: (541) 485-1577

Serenity Lane

Services Provided: Treatment Address: 4211 W 11th Ave, Eugene, OR 97402 Website: www.serenitylane.org/ Phone Number: (541) 485-1577

Siletz Community Health Clinic

Services Provided: Treatment Address: 2468 W 11th Ave, Eugene, OR 97380 Website: Unavailable Phone Number: (541) 484-4234

South Lane Mental Health

Services Provided: Treatment Address: 367 N 6th St, Cottage Grove, 97424 Website: <u>www.slmh.org/</u> Phone Number: (541) 767-4223

South Lane Mental Health

Services Provided: Treatment Address: 411 Washington St, Cottage Grove, OR 97424 Website: <u>www.slmh.org/</u> Phone Number: (541) 942-2850

South Lane Mental Health

Services Provided: Treatment Address: 75 S 5th St, Cottage Grove, OR 97424 Website: <u>www.slmh.org/</u> Phone Number: (541) 942-3939

South Lane Mental Health

Services Provided: Treatment Address: 37 N 6th St, Cottage Grove, OR 97424 Website: <u>www.slmh.org/</u> Phone Number: (541) 942-3939

South Lane Mental Health

Services Provided: Treatment Address: 1245 Birch Ave, Cottage Grove, OR 97424 Website: <u>www.slmh.org/</u> Phone Number: (541) 942-3939

South Lane Mental Health Services Provided: Treatment Address: 288 Mill St Bldg M, Springfield, OR 97477 Website: www.slmh.org/ Phone Number: (541) 942-3939

White Bird Clinic

Services Provided: Treatment Address: 341 E 12th Ave, Eugene, OR 97401 Website: <u>https://whitebirdclinic.org/</u> Phone Number: (541) 342-8255

White Bird Clinic

Services Provided: Treatment Address: 990 W 7th Ave, Eugene, OR 97401 Website: <u>https://whitebirdclinic.org/</u> Phone Number: (541) 342-8255

White Bird Clinic

Services Provided: Treatment Address: 970 W 7th, Eugene, OR 97401 Website: <u>https://whitebirdclinic.org/</u> Phone Number: (541) 642-8255

White Bird Clinic

Services Provided: Treatment Address: 350 E 11th Ave, Eugene, OR 97401 Website: <u>https://whitebirdclinic.org/</u> Phone Number: (541) 683-1641

Willamette Family, Inc

Services Provided: Treatment Address: 195 W 12th Ave, Eugene, OR 97401 Website: <u>https://wfts.org/</u> Phone Number: (541) 762-4300

Lincoln

Confederated Tribes of Siletz Indians Services Provided: Prevention Address: 201 SE Swan Ave, Siletz, OR 97380 Website: https://www.ctsi.nsn.us/preventionprogram/ Phone Number: (541) 444-9606

Discovery Counseling

Services Provided: Treatment Address: 650 Hemlock St Ste C, Waldport, OR 97394 Website: <u>www.discoverycounseling.co/</u> Phone Number: (541) 563-3330

Discovery Counseling

Services Provided: Treatment Address: 1424 SE 51St St, Lincoln City, OR 97367 Website: <u>www.discoverycounseling.co/</u> Phone Number: (541) 574-9050

Discovery Counseling

Services Provided: Treatment Address: 1638 N Coast Hwy, Newport, OR 97365 Website:

http://www.discoverycounseling.co/ Phone Number: (541) 574-9050

Discovery Counseling

Services Provided: Treatment Address: 332 SW Coast Hwy, Newport, OR 97365 Website: <u>www.discoverycounseling.co/</u> Phone Number: (541) 574-9052

Equinox Clinic

Services Provided: Treatment Address: 1800 SE Hwy 101 Ste H/I, Lincoln City, OR 97367 Website: <u>https://equinoxclinics.com/</u> Phone Number: (541) 790-2456

Lincoln County Health and Human Services

Services Provided: Treatment Address: 3780 SE Spyglass Ridge, Lincoln City, OR 97367 Website: www.co.lincoln.or.us/hhs Phone Number: (541) 265-0530

Lincoln County Health and Human Services Services Provided: Treatment

Address: 36 SW Nye St, Newport, OR 97365 Website: <u>www.co.lincoln.or.us/hhs</u> Phone Number: (541) 265-0530

Lincoln County Health and Human Services

Services Provided: Treatment Address: 322 NE Eads St, Newport, OR 97365 Website: <u>www.co.lincoln.or.us/hhs</u> Phone Number: (541) 265-0530

Lincoln County Health and Human Services

Services Provided: Treatment Address: 1800 NE Sturdevant Rd, Toledo, OR 97391 Website: <u>www.co.lincoln.or.us/hhs</u> Phone Number: (541) 265-0530

Lincoln County Health and Human Services

Services Provided: Treatment Address: 3000 Crestline Dr, Waldport, OR 97394 Website: <u>www.co.lincoln.or.us/hhs</u> Phone Number: (541) 265-0530

Lincoln County Health and Human Services

Services Provided: Treatment Address: 4422 NE Devils Lake Rd, Lincoln City, OR 97367 Website: <u>www.co.lincoln.or.us/hhs</u> Phone Number: (541) 265-4179

Lincoln County Health and Human Services Services Provided: Treatment Address: 51 SW Lee St, Newport, OR 97365 Website: <u>www.co.lincoln.or.us/hhs</u> Phone Number: (541) 265-4179

Phoenix Wellness Center

Services Provided: Treatment Address: 145 N Coast Hwy Unit B, Newport, OR 97365 Website: https://phoenixwellnesscenter.org/ Phone Number: (541) 270-9426

Power House Detox

Services Provided: Treatment Address: 3955 Salmon River Hwy, Otis, OR 97368 Website: <u>https://power-house-</u> <u>detox.business.site/</u> Phone Number: (541) 720-4636

Reconnections Counseling

Services Provided: Treatment Address: 1345 NW 15th St, Lincoln City, OR 97367 Website: www.reconnectionscounseling.com/ Phone Number: (541) 574-9570

Reconnections Counseling

Services Provided: Treatment Address: 547 SW 7th St, Newport, OR 97365 Website: www.reconnectionscounseling.com/ Phone Number: (541) 574-9570

Reconnections Counseling

Services Provided: Treatment Address: 326 NE 2nd St, Toledo, OR 97391 Website: www.reconnectionscounseling.com/

Phone Number: (541) 574-9570

Siletz Community Health Clinic

Services Provided: Treatment Address: 200 Gwee-Shut Rd, Siletz, OR 97380 Website: <u>https://www.ctsi.nsn.us/tribal-</u> services/healthcare/ Phone Number: (541) 444-8286

Linn

Cascade Pathways

Services Provided: Treatment Address: 425 SW 2nd Ave Ste 203, Albany, OR 97321 Website: <u>https://cascade-pathways.com/</u> Phone Number: (541) 954-7077

Comprehensive Treatment Center

Services Provided: Prevention Address: 213 NW Water Ave, Albany, OR Website: <u>https://www.ctcprograms.com/</u> Phone Number: (541) 730-4123

Linn County Health Services - Alcohol & Drug Program

Services Provided: Treatment Address: 1600 S Main St, Lebanon, OR 97355 Website: www.co.linn.or.us/health/ Phone Number: (541) 451-5932

Linn County Health Services - Alcohol & Drug Program

Services Provided: Treatment Address: 455 3Rd Ave SW, Albany, OR 97321 Website: www.co.linn.or.us/health/ Phone Number: (541) 967-3819

Linn County Health Services - Alcohol & Drug Program

Services Provided: Treatment Address: 104 4th Ave SW Room 238, Albany, OR 97321 Website: www.co.linn.or.us/health/ Phone Number: (541) 967-3866

Linn County Health Services - Alcohol & Drug Program

Services Provided: Treatment Address: 799 Long St, Sweet Home, OR 97386 Website: <u>www.co.linn.or.us/health/</u> Phone Number: (541) 967-3866

Linn County Health Services - Alcohol & Drug Program

Services Provided: Treatment Address: 315 SW 4th Ave, Albany, OR 97321 Website: www.co.linn.or.us/health/ Phone Number: (541) 967-3888

Linn County Health Services - Alcohol & Drug Program

Services Provided: Treatment Address: 2730 Pacific Blvd SE, Albany, OR 97321 Website: www.co.linn.or.us/health/ Phone Number: (541) 967-3888

Oregon Youth Authority

Services Provided: Treatment, Recovery Address: 4400 Lochner Rd SE, Albany, OR 97322 Website: <u>https://www.oregon.gov/oya/</u> Phone Number: (541) 791-5900

Pacific Northwest Adult & Teen Challenge

Services Provided: Treatment Address: 31700 Fayetteville Dr, Shedd, OR 97377 Website: <u>www.teenchallengepnw.com/</u> Phone Number: (503) 208-9004

Samaritan Health Services

Services Provided: Treatment, Recovery Address: 100 Mullins Dr Ste C2, Lebanon, OR 97355 Website: <u>www.samhealth.org/</u> Phone Number: (541) 451-6388

Samaritan Health Services

Services Provided: Treatment, Recovery Address: 111 N Main St Ste A, Lebanon, OR 97355 Website: <u>www.samhealth.org/</u> Phone Number: (541) 451-7114

Serenity Lane

Services Provided: Treatment Address: 1050 Price Rd SE, Albany, OR 97322 Website: <u>www.serenitylane.org/</u> Phone Number: (541) 928-9681

Malheur

Altruistic Recovery Services Provided: Treatment, Prevention, Recovery Address: 1052 SW 4th Ave, Ontario, OR 97914 Website: <u>https://www.medicarelist.com/</u> Phone Number: (541) 216-6068

Lifeways Inc.

Services Provided: Treatment Address: 686 NW 9th St, Ontario, OR 97914 Website: Unavailable Phone Number: (541) 889-2490

Lifeways Inc.

Services Provided: Prevention Address: 702 Sunset Dr, Ontario, OR 97914 Website: Unavailable Phone Number: (541) 889-9167

Malheur County Health Dept

Services Provided: Prevention Address: 1108 SW 4th St, Ontario, OR 97914 Website: <u>https://malheurhealth.org/</u> Phone Number: (541) 889-7279

Marion

Amazing Treatment

Services Provided: Treatment Address: 525 Ferry St SE Ste 203, Salem, OR 97301 Website: https://www.facebook.com/amazingtreatm entsalem/ Phone Number: (503) 363-6103

Bridgeway Recovery Services, Inc Services Provided: Treatment Address: 750 Front St, Salem, OR 97301 Website: <u>www.bridgewayrecovery.com/</u> Phone Number: (503) 363-2021

Bridgeway Recovery Services, Inc

Services Provided: Treatment Address: 3325 Harold Dr NE, Salem, OR 97305 Website: <u>www.bridgewayrecovery.com/</u> Phone Number: (503) 363-2021

Bridgeway Recovery Services, Inc

Services Provided: Treatment Address: 3321 Harold Dr NE, Salem, OR 97305 Website: <u>www.bridgewayrecovery.com/</u> Phone Number: (503) 363-2021

Center for Addiction and Counseling Services

Services Provided: Treatment Address: 460 Lancaster Dr NE, Salem, OR 97301 Website: <u>www.cacssalem.com/</u> Phone Number: (503) 584-1906

Comprehensive Treatment Center

Services Provided: Prevention Address: 1160 Liberty St SE, Salem, OR 97302 Website: <u>https://www.ctcprograms.com/</u> Phone Number: (503) 854-0157

Creekside Counseling

Services Provided: Treatment Address: 2586 12th Pl SE, Salem, OR 97302 Website: <u>www.creeksidecounseling.com/</u> Phone Number: (503) 371-4160

Oregon Recovery Behavioral Health / Renaissance Recovery Resources, Inc.

Services Provided: Prevention, Treatment, Recovery Address: 1184 Mcgee Ct NE, Keizer, 97303 Website: https://oregonrecovery.com/ Phone Number: (503) 304-4358

Oregon Recovery Behavioral Health / Renaissance Recovery Resources, Inc.

Services Provided: Prevention, Treatment, Recovery Address: 465 Commercial St NE Ste 150, Salem, OR 97301 Website: <u>https://oregonrecovery.com/</u> Phone Number: (503) 304-4358

Great Circle Recovery

Services Provided: Treatment Address: 1011 Commercial St NE, Salem, OR 97301

Website: https://www.greatcirclerecovery.org/ Phone Number: (503) 983-9900

Kaiser Permanente

Services Provided: Treatment Address: 2400 Lancaster Dr NE, Salem, OR 97305 Website: <u>www.kp.org/</u> Phone Number: (503) 331-5299

Kaiser Permanente Services Provided: Treatment Address: 5940 Ulali Dr, Keizer, OR 97303 Website: <u>www.kp.org/</u> Phone Number: (800) 813-2000

Marion County Health Department

Services Provided: Treatment Address: 3925 Fisher Rd NE, Salem, OR 97305 Website: <u>www.co.marion.or.us/</u> Phone Number: (503) 362-1399

Marion County Health Department

Services Provided: Treatment Address: 1118 Oak St SE, Salem, OR 97301 Website: www.co.marion.or.us/ Phone Number: (503) 585-4949

Marion County Health Department

Services Provided: Treatment Address: 3180 Center St NE, Salem, OR 97301 Website: <u>www.co.marion.or.us/</u> Phone Number: (503) 588-5351

Marion County Health Department

Services Provided: Treatment Address: 3867 Wolverine St NE Bldg F, Salem, OR 97305 Website: <u>www.co.marion.or.us/</u> Phone Number: (503) 588-5352

Marion County Health Department

Services Provided: Treatment Address: 2045 Silverton Rd NE Ste A & B, Salem, OR 97301 Website: www.co.marion.or.us/ Phone Number: (503) 588-5358; (503) 588-5357

Marion County Health Department

Services Provided: Treatment Address: 976 N Pacific Hwy, Woodburn, OR 97071 Website: www.co.marion.or.us/ Phone Number: (503) 981-5851

Marion County Health Department

Services Provided: Treatment Address: 2421 Lancaster Dr NE, Salem, OR 97305 Website: <u>www.co.marion.or.us/</u> Phone Number: (503) 588-5352

NW Human Services

Services Provided: Treatment Address: 1143 Liberty St NE, Salem, OR 97301 Website: <u>http://</u> www.northwesthumanservices.org/ Phone Number: (503) 588-5825

NW Human Services

Services Provided: Treatment Address: 694 Church St NE, Salem, OR 97301 Website:

http://www.northwesthumanservices.org/ Phone Number: (503) 588-5827

Oregon Youth Authority

Services Provided: Treatment, Recovery Address: 2630 N Pacific Hwy, Woodburn, OR 97071 Website: <u>https://www.oregon.gov/oya/</u> Phone Number: (503) 981-2565

Pacific Ridge Residential Alcohol & Drug Treatment Center

Services Provided: Treatment Address: 1587 Pacific Ridge Ln SE, Jefferson, OR 97352 Website: <u>www.alcoholismtreatment.com/</u> Phone Number: (503) 361-7758

Pelton Project

Services Provided: Treatment Address: 714 Lost Ln, Keizer, OR 97303 Website: http://www.peltonproject.org/chinook Phone Number: (503) 463-6499

Portland DBT Institute Inc.

Services Provided: Treatment Address: 454 17th St NE, Salem, OR 97301 Website: <u>https://www.pdbti.org/</u> Phone Number: (503) 231-7854

Serenity Lane

Services Provided: Treatment Address: 960 Liberty St SE, Salem, OR 97302 Website: <u>www.serenitylane.org/</u> Phone Number: (503) 588-2804

Siletz Community Health Clinic Services Provided: Treatment Address: 3160 Blossom Dr NE Ste 105, Salem, OR 97305 Website: www.ctsi.nsn.us/ Phone Number: (503) 390-8099

VA Medical Center Services Provided: Treatment Address: 1750 Mcgilchrist St Ste 130, Salem, OR 97302 Website: www.portland.va.gov/ Phone Number: (503) 721-1499

Willamette Family, Inc

Services Provided: Treatment Address: 435 Lancaster Dr NE, Salem, OR 97301 Website: <u>www.wfts.org/</u> Phone Number: (503) 585-6388

Morrow

Community Counseling Solutions

Services Provided: Treatment Address: 5278 E Main St Ste, John Day, OR 97845 Website:

www.communitycounselingsolutions.org/ Phone Number: (541) 575-1466

Community Counseling Solutions

Services Provided: Treatment Address: 68982 Willow Creek Rd, Heppner, OR 97836 Website: www.communitycounselingsolutions.org/ Phone Number: (541) 676-5143

Community Counseling Solutions

Services Provided: Treatment Address: 201 SW Kinkade Ave, Boardman, OR 97818 Website: www.communitycounselingsolutions.org/ Phone Number: (541) 676-9161

Community Counseling Solutions

Services Provided: Treatment Address: 104 SW Kinkade Ave, Boardman, OR 97818 Website: www.communitycounselingsolutions.org/ Phone Number: (541) 676-9161

Community Counseling Solutions

Services Provided: Treatment Address: 550 W Sperry St, Heppner, OR 97836 Website: www.communitycounselingsolutions.org/ Phone Number: (541) 676-9161

Community Counseling Solutions

Services Provided: Treatment Address: 528 E Main St Ste W, John Day, OR 97845 Website: www.communitycounselingsolutions.org/

Phone Number: (541) 676-9161

Multnomah

4D Recovery Services Provided: Recovery Address: 3807 NE Martin Luther King Jr Blvd, Portland, OR 97212 Website: <u>https://4drecovery.org/</u> Phone Number: (971) 703-4623

Acadia Northwest

Services Provided: Treatment Address: 9570 SW Barbur Blvd Ste 100, Portland, OR 97219 Website: <u>www.acadianw.com/</u> Phone Number: (503) 245-6262

Acadia Northwest

Services Provided: Treatment Address: 10101 SW Barbur Blvd Ste 101, Portland, 97219 Website: <u>www.acadianw.com/</u> Phone Number: (503) 245-6262

Acadia Northwest

Services Provided: Treatment Address: 11790 SW Barnes Rd Bldg A Ste 140, Portland, OR 97225 Website: <u>www.acadianw.com/</u> Phone Number: (503) 643-7300

Addictions Northwest, LLC

Services Provided: Treatment Address: 1141 NE Division St, Gresham, OR 97030 Website: <u>www.addictionsnw.com/</u> Phone Number: (503) 328-6973

Addictions Northwest, LLC

Services Provided: Treatment Address: 2215 N Lombard St, Portland, OR 97217 Website: <u>https://rehabnow.org/</u> Phone Number: (503) 328-6973

Advance Treatment Center, LLC

Services Provided: Treatment Address: 18210 E Burnside St Ste A, Portland, OR 97233 Website: <u>www.advancetx.com/</u> Phone Number: (503) 766-2582

Allano Club of Portland

Services Provided: Recovery Address: 909 NW 24th Ave, Portland, OR 97210 Website: <u>https://www.portlandalano.org/</u> Phone Number: (503) 222-5756

Asian Health and Services Center

Services Provided: Treatment Address: 9035 SE Foster Rd, Portland, OR 97266 Website: <u>https://www.ahscpdx.org/</u> Phone Number: (503) 872-8822

Big Village

Services Provided: Prevention Address: 421 SW Oak St #520, Portland, OR 97204 Website: <u>http://bigvillagepdx.org/</u> Phone Number: (503) 988-8222

Bridges to Change

Services Provided: Treatment Address: 7916 SE Foster Rd Ste 201, Portland, OR 97206 Website: <u>www.bridgestochange.com/</u> Phone Number: (503) 465-2749

Cascadia Behavioral Health

Services Provided: Treatment Address: 4212 SE Division St Ste 100, Portland, OR 97206 Website: <u>https://cascadiabhc.org/</u> Phone Number: (503) 238-0705

Cascadia Behavioral Health

Services Provided: Treatment Address: 10373 NE Hancock St Ste 200, Portland, OR 97220 Website: <u>https://cascadiabhc.org/</u> Phone Number: (503) 253-6754

Cascadia Behavioral Health Services Provided: Treatment Address: 3036 NE Martin Luther Jr Blvd, Portland, OR 97212 Website: <u>https://cascadiabhc.org/</u> Phone Number: (503) 283-3763

Central City Concern

Services Provided: Prevention, Treatment, Recovery Address: 726 W Burnside St, Portland, OR 97209 Website: <u>https://centralcityconcern.org/</u> Phone Number: (503) 228-4533

Central City Concern

Services Provided: Treatment Address: 33 NW Broadway, Portland, OR 97209 Website: <u>https://centralcityconcern.org/</u> Phone Number: (503) 294-1681 Phone Number: (503) 294-1681

Central City Concern

Services Provided: Treatment Address: 12133 E Burnside St, Portland, OR 97233 Website: <u>https://centralcityconcern.org/</u> Phone Number: (971) 361-7700

Central City Concern

Services Provided: Treatment Address: 12121 E Burnside St, Portland, OR 97209 Website: <u>https://centralcityconcern.org/</u> Phone Number: (971) 361-7700

CODA, Inc

Services Provided: Treatment Address: 1027 E Burnside St, Portland, OR 97214 Website: <u>www.codainc.org/</u> Phone Number: (503) 239-8400

CODA, Inc

Services Provided: Treatment Address: 1030 NE Couch, Portland, OR 97232 Website: <u>www.codainc.org/</u> Phone Number: (503) 239-8400

CODA, Inc

Services Provided: Treatment Address: 1427 SE 182nd St, Portland, OR 97233 Website: <u>www.codainc.org/</u> Phone Number: (503) 239-8400

Comprehensive Treatment Center

Services Provided: Treatment Address: 324 NW Davis St, Portland, OR 97209 Website: <u>www.portlandctc.com/</u> Phone Number: (503) 226-2203

Comprehensive Treatment Center

Services Provided: Treatment Address: 6601 NE 78th Ct Ste A-3, Portland, OR 97218 Website: <u>www.crchealth.com/</u> Phone Number: (503) 549-1062

Comprehensive Treatment Center

Services Provided: Treatment Address: 2600 SE Belmont St, Portland, OR 97214 Website: <u>www.crchealth.com/</u> Phone Number: (503) 673-9353

Crestview Recovery

Services Provided: Treatment Address: 6025 SE Belmont St, Portland, OR 97215 Website: https://www.crestviewrecovery.com/

Phone Number: (866) 262-0531

FolkTime

Services Provided: Recovery Address: 232 SE 80th Ave, Portland, OR 97215 Website: <u>https://folktime.org/</u> Phone Number: (503) 238-6428

Fora Health

Services Provided: Treatment Address: 10230 SE Cherry Blossom Dr, Portland, OR 97216 Website: <u>https://forahealth.org/</u> Phone Number: (503) 535-1151

Fresh Out Community Based Reentry Program

Services Provided: Recovery, Prevention Address: 4200 NE Martin Luther King Jr Blvd, Portland, OR 97212 Website: <u>https://freshoutcbrp.org/</u> Phone Number: (503) 764-8373

Holistic Healing Behavioral Healthcare

Services Provided: Treatment Address: 5257 NE Martin Luther Jr Blvd Ste 201, Portland, OR 97211 Website: <u>https://holistichealingbh.org/</u> Phone Number: (503) 954-2077

Impact NW

Services Provided: Recovery Address: 10055 E Burnside, Portland, OR 97292 Website: <u>https://impactnw.org/</u> Phone Number: (503) 721-1740

Impact NW

Services Provided: Recovery Address: 4610 SE Belmont St, Portland, OR 97292 Website: <u>https://impactnw.org/</u> Phone Number: (503) 721-6760

Impact NW

Services Provided: Recovery Address: 7211 SE 62nd Ave, Portland, OR 97292 Website: <u>https://impactnw.org/</u> Phone Number: (503) 721-6777

Integrated Health Clinics

Services Provided: Treatment Address: 3610 NE 82nd, Portland, OR 97220 Website: <u>www.integratedclinics.com/</u> Phone Number: (503) 353-9415

Kaiser Permanente

Services Provided: Treatment Address: 19500 SE Stark St, Portland, OR 97233 Website: <u>www.kp.org/</u> Phone Number: (503) 674-4785

Kaiser Permanente

Services Provided: Treatment Address: 3550 N Interstate Ave, Portland, OR 97227 Website: <u>www.kp.org/</u> Phone Number: (800) 813-2000

Kaiser Permanente

Services Provided: Treatment Address: 3325 N Interstate Ave, Portland, OR 97227 Website: www.kp.org/ Phone Number: (800) 813-2000; (503) 331-5299

Lifestance Health (formerly Western Psychological & Counseling Services, PC)

Services Provided: Treatment Address: 1700 NW Civic Dr Ste 310, Gresham, OR 97030 Website: <u>https://lifestance.com/</u> Phone Number: (503) 669-4300

Lifestance Health (formerly Western Psychological & Counseling Services, PC)

Services Provided: Treatment Address: 3500 NE Martin Luther King Jr Blvd Ste 200, Portland, OR 97212 Website: <u>https://lifestance.com/</u> Phone Number: (503) 327-8205

Lifestance Health (formerly Western

Psychological & Counseling Services, PC) Services Provided: Treatment Address: 2222 E Powell, Gresham, OR 97080 Website: <u>https://lifestance.com/</u> Phone Number: (503) 669-4300

Lifeworks Northwest

Services Provided: Treatment Address: 3716 NE Martin Luther King Jr Blvd, Portland, OR 97212 Website: <u>www.lifeworksnw.org/</u> Phone Number: (503) 288-8066

Lifeworks Northwest

Services Provided: Treatment Address: 8425 N Lombard St, Portland, OR 97203 Website: <u>www.lifeworksnw.org/</u> Phone Number: (503) 645-3581

Lifeworks Northwest

Services Provided: Treatment Address: 18417 SE Oak St, Portland, OR 97233 Website: <u>www.lifeworksnw.org/</u> Phone Number: (971) 727-8026

Mental Health & Addiction Association of Oregon

Services Provided: Recovery Address: 10373 NE Hancock St Ste 106, Portland, OR 97220 Website: https://www.mhaoforegon.org/evolve Phone Number: (503) 922-2377

Mind Solutions, LLC

Services Provided: Treatment Address: 3311 NE Martin Luther King Jr Blvd Ste 104, Portland, OR 97212 Website: <u>www.mindsolutionsusa.com/</u> Phone Number: (503) 206-8856

Miracles Club

Services Provided: Recovery Address: 4200 NE Martin Luther King Jr Blvd, Portland, OR 97212 Website: <u>https://www.miraclesclub.org/</u> Phone Number: (503) 249-8559

Miracles Club

Services Provided: Recovery Address: 1306 NE 2nd Ave, Portland, OR 97232 Website: <u>https://www.miraclesclub.org/</u> Phone Number: (503) 249-8559

Modus Vivendi, LLC

Services Provided: Treatment Address: 1441 SE 122nd Ave Ste C & D, Portland, OR 97216 Website: <u>https://www.drug-rehabs.org/</u> Phone Number: (503) 781-9065

Morrison Kids

Services Provided: Treatment Address: 912 NE Kelly Ave Ste 200, Gresham, OR 97030 Website: <u>www.morrisonkids.org/</u> Phone Number: (503) 258-4200

Morrison Kids

Services Provided: Treatment Address: 11035 NE Sandy Blvd, Portland, OR 97220 Website: <u>www.morrisonkids.org/</u> Phone Number: (503) 258-4200

Morrison Kids

Services Provided: Treatment Address: 9911 Mt Scott Blvd, Portland, OR 7266 Website: <u>www.morrisonkids.org/</u> Phone Number: (503) 258-4690

Morrison Kids

Services Provided: Treatment Address: 1507 NE 122nd, Portland, OR 97230 Website: <u>www.morrisonkids.org/</u> Phone Number: (503) 258-4690

Multnomah County Behavioral Health

Services Provided: Prevention Address: 619 NW 6th Ave, Portland, OR 97209 Website: https://www.multco.us/behavioral-health/ Phone Number: (503) 988-4888

Multnomah County Behavioral Health

Services Provided: Prevention Address: 421 SW Oak St Ste 520, Portland, OR 97204 Website: https://www.multco.us/behavioral-health/ Phone Number: (503) 988-5464

NARA

Services Provided: Prevention Address: 1776 SW Madison, Portland, OR 97205 Website: <u>https://www.naranorthwest.org/</u> Phone Number: (503) 224-1044

NARA

Services Provided: Treatment Address: 1631 SW Columbia, Portland, OR 97201 Website: <u>https://www.naranorthwest.org/</u> Phone Number: (503) 231-2641

NARA

Services Provided: Treatment Address: 1438 SE Division, Portland, OR 97202 Website: <u>https://www.naranorthwest.org/</u> Phone Number: (503) 548-0346

NARA

Services Provided: Treatment Address: 17645 NW St Helens Hwy, Portland, OR 97231 Website: <u>https://www.naranorthwest.org/</u> Phone Number: (503) 621-1069

NARA

Services Provided: Treatment Address: 1310 SW 17th Ave, Portland, OR 97201 Website: <u>https://www.naranorthwest.org/</u> Phone Number: (503) 936-8241

NARA

Services Provided: Treatment Address: 12360 E Burnside, Portland, OR 97233 Website: <u>https://www.naranorthwest.org/</u> Phone Number: (971) 279-4800

NAYA Family Center

Services Provided: Prevention Address: 5135 NE Columbia Blvd, Portland, OR 97218 Website: <u>https://navapdx.org/</u> Phone Number: (503) 288-8177 ext217

New Avenues for Youth

Services Provided: Recovery, Prevention Address: 1220 SW Columbia St, Portland, OR 97201 Website: <u>https://newavenues.org/</u> Phone Number: (503) 224-4339

New Narrative

Services Provided: Treatment Address: 1952 SE 122nd Ave, Portland, OR 97233 Website: <u>https://newnarrativepdx.org/</u> Phone Number: (503) 726-3690

New Narrative

Services Provided: Treatment Address: 2521 SE 74th Ave, Portland, OR 97206 Website: <u>https://newnarrativepdx.org/</u> Phone Number: (503) 726-3800

New Season Treatment Center

Services Provided: Treatment, Prevention, Recovery Address: 16420 SE Division St, Portland, OR 97236 Website: <u>https://www.newseason.com/</u> Phone Number: (503) 762-3130

New Start Program

Services Provided: Treatment Address: 12180 SE Market St, Portland, OR 97216 Website: <u>www.newstartprograms.com/</u> Phone Number: (971) 279-4993

Northwest Family Services

Services Provided: Treatment, Prevention Address: 6200 SE King Rd, Portland, OR 97222

Website: www.nwfs.org/ Phone Number: (503) 546-6377

Northwest Instituto Latino

Services Provided: Recovery Address: 10209 SE Division St Bldg B, Portland, OR 97266 Website: <u>http://nwilpdx.com/</u> Phone Number: (503) 719-7609

Northwest Treatment

Services Provided: Treatment Address: 948 NE 102nd Ave Ste 101, Portland, OR 97220 Website: <u>www.nwtreatment.com/</u> Phone Number: (503) 655-1029

OHSU Benson Wellness Center

Services Provided: Treatment Address: 546 NE 12th Ave, Portland, OR 97232 Website: <u>https://www.ohsu.edu/primarycare/ohsu-primary-care-clinic-bensonwellness-center/</u> Phone Number: (503) 418-0409

OHSU Harm Reduction and BRidges to Care (HRBR) Clinic

Services Provided: Treatment Address: 3270 SW Pavilion Loop Ste 350, Portland, OR 97239 Website: <u>https://www.ohsu.edu/</u> Phone Number: (503) 494-2100

OHSU IMPACTS

Services Provided: Treatment Address: 3270 SW Pavilion Loop Ste 350, Portland, OR 97239 Website: <u>https://www.ohsu.edu/</u> Phone Number: (503) 494-2100

Oregon Change Clinic

Services Provided: Treatment Address: 1836 NE 7th Ave Ste 103, Portland, OR 97212 Website: https://www.oregonchangeclinic.com/ Phone Number: (503) 719-7985

Oregon Change Clinic

Services Provided: Treatment Address: 1817 NE 6th Ave, Portland, OR 97212 Website: https://www.oregonchangeclinic.com/

Phone Number: (503) 719-7985

Outside In

Services Provided: Treatment Address: 1132 SW 13th Ave, Portland, OR 97205 Website: <u>www.outsidein.org/</u> Phone Number: (503) 535-3800

Pacific Northwest Adult & Teen Challenge

Services Provided: Treatment Address: 5040 SE 82nd Ave, Portland, OR 97266 Website: <u>www.teenchallengepnw.com/</u> Phone Number: (877) 302-7149

Painted Horse

Services Provided: Recovery Address: 10209 SE Division St, Portland, OR 97266 Website: <u>http://paintedhorserecovery.org/</u> Phone Number: (971) 205-5144

Parrott Creek Child and Family Services

Services Provided: Treatment Address: 8940 SE 72 Ave, Portland, OR 97206 Website: <u>www.pcreek.org/</u> Phone Number: (503) 722-4110

Portland DBT Institute Inc.

Services Provided: Treatment Address: 5200 SW Macadam Ave Ste 580, Portland, OR 97239 Website: <u>https://www.pdbti.org/</u> Phone Number: (503) 231-7854

Portland Rescue Mission

Services Provided: Recovery Address: 13207 NE Halsey St, Portland, OR 97230 Website: https://portlandrescuemission.org/ Phone Number: (503) 647-7466

Portland Rescue Mission

Services Provided: Recovery Address: 10336 NE Wygant, Portland, OR 97220 Website: https://portlandrescuemission.org/ Phone Number: (503) 647-7466

Portland Rescue Mission

Services Provided: Recovery Address: 111 W Burnside St, Portland, OR 97209 Website: https://portlandrescuemission.org/ Phone Number: (503) 906-7690

Progressive Counseling Services Inc.

Services Provided: Treatment Address: 9226 SE Division St Ste D, Portland, OR 97266 Website: www.progressivecounselingservices.com/ Phone Number: (503) 821-7274

Providence Health

Services Provided: Treatment Address: 5228 NE Hoyt St Bldg B, Portland, OR 97213 Website: <u>https://www.providence.org</u>/ Phone Number: (503) 574-9242

Quest Center for Integrative Health

Services Provided: Treatment Address: 2901 E Burnside, Portland, OR 97214 Website: <u>https://quest-center.org/</u> Phone Number: (503) 238-5203

Quest Center for Integrative Health

Services Provided: Treatment Address: 2720 NE Flanders, Portland, OR 97232 Website: <u>https://quest-center.org/</u> Phone Number: (503) 238-5203

Quest Center for Integrative Health

Services Provided: Treatment Address: 2901 E Burnside, Portland, OR 97214

Website: https://quest-center.org/ Phone Number: (503) 248-5464

Recovery Blvd

Services Provided: Treatment, Recovery Address: 1206 SE 11th St, Portland, OR 97214 Website: <u>https://www.recoveryblvd.com/</u> Phone Number: (503) 897-1916

Recovery Works NorthWest

Services Provided: Treatment, Recovery Address: 173 NE 102nd Ave, Portland, OR 97220 Website: <u>www.recoveryworksnw.com/</u> Phone Number: (503) 906-9995

Serenity Lane

Services Provided: Treatment Address: 10920 SW Barbur Blvd, Portland, OR 97219 Website: <u>www.serenitylane.org/</u> Phone Number: (503) 244-4500

Serenity Lane

Services Provided: Treatment Address: 12662 SE Stark, Portland, OR 97233 Website: www.serenitylane.org/ Phone Number: (541) 244-4500

Shanti Recovery & Wellness

Services Provided: Treatment, Recovery Address: 3769 Se Milwaukie Ave, Portland, OR 97202 Website: <u>https://shantipdx.com/</u> Phone Number: (503) 206-8850

Siletz Community Health Clinic

Services Provided: Treatment Address: 12790 SE Stark Ste 102, Portland, OR 97233 Website: <u>www.ctsi.nsn.us/</u> Phone Number: (503) 238-1512

SLO Recovery Center

Services Provided: Treatment, Recovery Address: 1122 NE 122nd Ave Ste A-200, Portland, OR 97230 Website: https://www.slorecoverycenter.com/ Phone Number: (503) 954-1890

Teras Interventions and Counseling

Services Provided: Treatment Address: 3945 SE Hawthorne Blvd, Portland, OR 97214 Website: <u>www.terasinc.org/</u> Phone Number: (503) 719-5250

Tree House Recovery

Services Provided: Treatment, Recovery Address: 4713 N Albina Ave Ste 301, Portland, OR 97217 Website: www.TreeHouseRecoveryPDX.com/ Phone Number: (503) 850-2474

VA Medical Center

Services Provided: Treatment Address: 1800 NE Market Dr, Fairview, OR Website: <u>www.portland.va.gov/</u> Phone Number: (503) 220-8262

VA Medical Center

Services Provided: Treatment Address: 3710 SW Us Veterans Hospital Rd, Portland, OR 97239 Website: <u>www.portland.va.gov/</u> Phone Number: (503) 220-8262

Volunteers of America Oregon

Services Provided: Treatment, Prevention, Recovery Address: 10564 SE Washington St, Portland, OR 97216 Website: <u>https://www.voaor.org/</u> Phone Number: (503) 228-9229

Volunteers of America Oregon

Services Provided: Treatment, Prevention, Recovery Address: 3910 SE Stark St, Portland, OR 97214 Website: <u>https://www.voaor.org/</u> Phone Number: (503) 235-8655

WomenFirst Transition & Referral Center

Services Provided: Recovery Address: 21440 SE Stark St, Gresham, OR 97230 Website: https://www.rebuildwomenfirst.org/ Phone Number: (619) 674-1791

Polk

Amazing Treatment Services Provided: Treatment Address: 110 N Monmouth Ave, Monmouth, OR 97361 Website: https://www.facebook.com/amazingtreatm entsalem/ Phone Number: (503) 363-6103

NW Human Services

Services Provided: Treatment Address: 180 Atwater St N, Monmouth, OR 97361 Website: http://www.northwesthumanservices.org/ Phone Number: (503) 378-7526

Polk County Behavioral Health

Services Provided: Treatment Address: 1310 Main St E, Monmouth, OR 97361 Website: <u>www.co.polk.or.us/bh</u> Phone Number: (503) 400-3550

Polk County Behavioral Health

Services Provided: Treatment Address: 1520 Plz St NW Ste 150, Salem, OR 97304 Website: <u>www.co.polk.or.us/bh</u> Phone Number: (503) 585-3012

Polk County Behavioral Health

Services Provided: Treatment Address: 2200 E Ellendale, Dallas, OR 97338 Website: <u>www.co.polk.or.us/bh</u> Phone Number: (503) 623-5588

Polk County Behavioral Health

Services Provided: Treatment Address: 182 SW Academy St, Dallas, OR 97338 Website: <u>www.co.polk.or.us/bh</u> Phone Number: (503) 623-9289

Polk County Health Services

Services Provided: Prevention Address: 182 SW Academy St Ste 333, Dallas, OR 97338 Website: <u>https://www.co.polk.or.us/bh</u> Phone Number: (503) 623-9289

Sherman

Mid-Columbia Center for Living

Services Provided: Treatment Address: 302 Scott St, Moro, OR 97039 Website: <u>www.mccfl.org/</u> Phone Number: (541) 296-5452

Tillamook

Adventist Health

Services Provided: Treatment, Recovery Address: 1000 3Rd St, Tillamook, OR 97141 Website: Unavailable Phone Number: (503) 815-2292

Nehalem Bay Health (The Rinehart Clinic)

Services Provided: Treatment Address: 230 Rowe St, Wheeler, OR 97147 Website: <u>https://www.rinehartclinic.org/</u> Phone Number: (800) 368-5182

Oregon Youth Authority

Services Provided: Treatment, Recovery Address: 6700 Officer Row, Tillamook, OR 97141 Website: <u>https://www.oregon.gov/oya/</u> Phone Number: (503) 842-2565

Oregon Youth Authority

Services Provided: Treatment, Recovery Address: 6820 Barracks Cir, Tillamook, OR 97141 Website: <u>https://www.oregon.gov/oya/</u> Phone Number: (503) 842-4243

Tides of Change

Services Provided: Advocacy Address: 1902 2nd St, Tillamook, OR 97141 Website: https://www.tidesofchangenw.org/ Phone Number: (503) 842-9486

Tillamook Family Counseling Center

Services Provided: Treatment Address: 906 Main Ave, Tillamook, OR 97141 Website: <u>www.tfcc.org/</u> Phone Number: (503) 842-8201

Umatilla

CARE

Services Provided: Prevention Address: 216 SE 4th St, Pendleton, OR 97801 Website: <u>https://www.co.umatilla.or.us/</u> Phone Number: (541) 379-3575

Community Counseling Solutions

Services Provided: Treatment Address: 211 SW 1st, Pendleton, OR 97801 Website: https://ccswebsite.org/locations/ Phone Number: (541) 278-6330

Community Counseling Solutions

Services Provided: Treatment Address: 435 SE Newport, Hermiston, OR 97838 Website: <u>https://ccswebsite.org/locations/</u> Phone Number: (541) 564-9390

Community Counseling Solutions

Services Provided: Treatment Address: 707 E Broadway, Milton-Freewater, OR 97862 Website: www.drugrehabmiltonfreewater.com/ Phone Number: (541) 938-3988

Eastern Oregon Recovery Center

Services Provided: Treatment Address: 216 SW Hailey Ave, Pendleton, OR 97801 Website: <u>www.eoaf.org/</u> Phone Number: (541) 276-3518

Eastern Oregon Recovery Center

Services Provided: Treatment Address: 4708 NW Pioneer Pl, Pendleton, OR 97801 Website: <u>www.eoaf.org/</u> Phone Number: (541) 278-2558

Oregon Recovery & Treatment Center (ORTC)

Services Provided: Treatment Address: 110 SW 20th St Ste 3, Pendleton, OR 97801 Website: <u>https://ortc.care/</u> Phone Number: (541) 429-8261

OWHN COPES Clinic/Grande Ronde Recovery

Services Provided: Treatment Address: 715 SW Dorion Ave, Pendleton, OR 97801 Website: <u>www.owhn.org/</u> Phone Number: (541) 429-8800

The Power House Residential Drug Treatment Center

Services Provided: Treatment, Recovery Address: 32406 Diagonal Rd, Hermiston, OR 97838

Website:

https://www.powerhousetreatment.com/ Phone Number: (541) 276-3518

The Power House Residential Drug Treatment Center

Services Provided: Treatment, Recovery Address: 32773 W Walls Rd, Hermiston, OR 97838 Website: Unavailable Phone Number: (541) 720-4657

TM Counseling & Consulting

Services Provided: Treatment Address: 920 SW Frazer Ave Ste 219, Pendleton, OR 97801 Website: https://www.drugrehabpendleton.com/ Phone Number: (541) 276-1022

Umatilla County Public Health

Services Provided: Prevention Address: 200 SE 3Rd St., Umatilla, OR Website: <u>https://ucohealth.net/</u> Phone Number: (541) 278-5432

Yellowhawk Tribal Health Center

Services Provided: Treatment Address: 46314 Timine Way, Pendleton, OR 97801 Website: <u>www.yellowhawk.org/</u> Phone Number: (541) 240-8670

Union

Center for Human Development, Inc. Services Provided: Prevention Address: 540 S Main St, Union, OR 97883 Website: <u>https://www.chdinc.org/schoolbased-health-centers</u> Phone Number: (541) 562-5166

Center for Human Development, Inc.

Services Provided: Treatment Address: 708 K Ave, La Grande, OR 97850 Website: <u>https://www.chdinc.org/schoolbased-health-centers</u> Phone Number: (541) 663-3330

Center for Human Development, Inc.

Services Provided: Treatment Address: 570 8th St, Central Point, OR 97827 Website: <u>https://www.chdinc.org/</u> Phone Number: (541) 962-8800

Center for Human Development, Inc.

Services Provided: Treatment Address: 1400 Birch St, Elgin, OR 97827 Website: <u>https://www.chdinc.org/</u> Phone Number: (541) 962-8800

Center for Human Development, Inc.

Services Provided: Treatment Address: 703 O Ave, La Grande, OR 97850 Website: <u>https://www.chdinc.org/</u> Phone Number: (541) 962-8800

Center for Human Development, Inc.

Services Provided: Treatment Address: 2300 N Spruce, La Grande, OR 97850 Website: <u>https://www.chdinc.org/</u> Phone Number: (541) 962-8800

Center for Human Development, Inc. Services Provided: Treatment Address: 906 Sixth St, La Grande, OR 97850 Website: <u>https://www.chdinc.org/school-</u> based-health-centers

Phone Number: (541) 962-8800

Center for Human Development, Inc.

Services Provided: Treatment Address: 2301 Cove Ave, La Grande, OR 97850 Website: <u>https://www.chdinc.org/</u> Phone Number: (541) 962-8845

Center for Human Development, Inc.

Services Provided: Prevention Address: 2608 May Ln, La Grande, OR 97850 Website: <u>https://www.chdinc.org/</u> Phone Number: (541) 963-5360

Oregon Youth Authority

Services Provided: Treatment, Recovery Address: 58231 Oregon Hwy 244, La Grande, OR 97850 Website: <u>https://www.oregon.gov/oya/</u> Phone Number: (541) 963-3611

Union County Safe Communities Coalition Services Provided: Prevention Address: 1106 K Ave, La Grande, OR 97850 Website:

https://www.ucsafecommunities.org/ Phone Number: (541) 963-1068

Wallowa

Building Healthy Families

Services Provided: Prevention Address: Unavailable Website: <u>http://oregonbhf.org/</u> Phone Number: (541) 426-9411

Wallowa Valley Center for Wellness

Services Provided: Treatment, Recovery Address: 603 Medical Pkwy, Enterprise, OR 97828 Website: <u>www.wvcenterforwellness.org/</u> Phone Number: (541) 426-4524

Wallowa Valley Center for Wellness

Services Provided: Treatment, Recovery Address: 301 W Main St, Enterprise, OR 97828 Website: <u>www.wvcenterforwellness.org/</u> Phone Number: (541) 426-4524

Wallowa Valley Center for Wellness

Services Provided: Treatment, Recovery Address: 207 W 1St St, Enterprise, OR 97828 Website: <u>www.wvcenterforwellness.org/</u> Phone Number: (541) 426-4524

Wallowa Valley Center for Wellness

Services Provided: Treatment, Recovery Address: 204 S River St, Enterprise, OR 97828 Website: <u>www.wvcenterforwellness.org/</u> Phone Number: (541) 426-4524

Wallowa Valley Center for Wellness

Services Provided: Treatment, Recovery Address: 103 Hwy 82 Ste #1, Enterprise, OR 97828

Website: <u>www.wvcenterforwellness.org/</u> Phone Number: (541) 426-4524

Wallowa Valley Center for Wellness

Services Provided: Treatment, Recovery Address: 101 E Main St, Enterprise, OR 97828 Website: <u>www.wvcenterforwellness.org/</u> Phone Number: (541) 426-4524

Wallowa Valley Center for Wellness

Services Provided: Treatment, Recovery Address: 301 E 7th St, Joseph, OR 97846 Website: <u>www.wvcenterforwellness.org/</u> Phone Number: (541) 426-4524

Wallowa Valley Center for Wellness

Services Provided: Treatment, Recovery Address: 601 Whiskey Creek Rd, Wallowa, OR 97885

Website: <u>www.wvcenterforwellness.org/</u> Phone Number: (541) 426-4524

Wasco

Bridges to Change

Services Provided: Treatment Address: 212 Washington St, The Dalles, OR 97058 Website: <u>www.bridgestochange.com/</u> Phone Number: (503) 465-2749

Confederated Tribes of Warm Springs

Services Provided: Prevention Address: 1233 Veterans St, Warm Springs, OR 97761 Website: <u>https://warmsprings-</u> nsn.gov/program/community-counseling/ Phone Number: (541) 553-1161

Mid Columbia Medical Center

Services Provided: Treatment Address: 1700 E 19th St, The Dalles, OR 97058 Website: <u>https://www.mcmc.net/our-</u> services/family-medicine/ Phone Number: (541) 296-1111

Mid-Columbia Center for Living

Services Provided: Treatment Address: 1060 Webber St, The Dalles, OR 97058 Website: <u>https://www.mccfl.org/</u> Phone Number: (541) 296-5452

One Community Health

Services Provided: Treatment Address: 1040 Webber St, The Dalles, OR 97058 Website: https://www.onecommunityhealth.org/the-

<u>dalles</u> Phone Number: (541) 296-4610

The Next Door, Inc. Services Provided: Treatment Address: 1113 Kelly Ave, The Dalles, OR 97058 Website: <u>www.nextdoorinc.org/</u> Phone Number: (541) 296-8118

Youth Think

Services Provided: Prevention Address: 200 East 4th St, The Dalles, OR 97058 Website: <u>https://youththink.net/</u> Phone Number: (541) 506-2673

Washington

4D Recovery Services Provided: Recovery Address: 362 SW Oak St, Hillsboro, OR 97123 Website: <u>https://4drecovery.org/</u> Phone Number: (971) 703-4623

Another Chance Recovery Center

Services Provided: Treatment, Recovery Address: 12670 NW Barnes Rd Ste 200, Portland, OR 97229 Website: www.anotherchanceclinicalservices.com/ Phone Number: (971) 269-8124

Asian Health and Services Center

Services Provided: Treatment Address: 3800 SW Cedar Hills Blvd #196, Beaverton, OR 97005 Website: <u>https://www.ahscpdx.org/</u> Phone Number: (503) 372-9198

Bridges to Change

Services Provided: Treatment, Recovery Address: 1049 SW Baseline St Ste D480, Hillsboro, OR 97123 Website: www.bridgestochange.com/ Phone Number: (503) 465-2749; (503) 746-4365

Center of Excellence in Co Occurring Medicine

Services Provided: Treatment Address: 12655 SW Center St Ste 150, Beaverton, OR 97005 Website: <u>https://coementalhealth.com/</u> Phone Number: (503) 832-0945

CODA, Inc

Services Provided: Treatment Address: 152 SE 5th Ave, Hillsboro, OR 97123 Website: <u>www.codainc.org/</u> Phone Number: (503) 239-8400

CODA, Inc

Services Provided: Treatment Address: 10362 SW Mcdonald, Tigard, OR 97224 Website: <u>www.codainc.org/</u> Phone Number: (503) 624-0312

CODA, Inc

Services Provided: Treatment Address: 720 SE Washington St, Hillsboro, OR 97123 Website: <u>www.codainc.org/</u> Phone Number: (855) 733-2632

CODA, Inc

Services Provided: Treatment Address: 11970 SW Greenburg Rd, Tigard, OR 97223 Website: <u>www.codainc.org/</u> Phone Number: (855) 733-2632

Comprehensive Treatment Center

Services Provided: Prevention Address: 10763 SW Greenburg Rd, Tigard, OR Website: <u>https://www.ctcprograms.com/</u> Phone Number: (503) 558-6979

Inner Journey Healing Arts Center

Services Provided: Prevention, Treatment, Recovery Address: 134 SE 5th Ave Ste C, Hillsboro, OR 97123 Website: https://www.innerjourneyhealingarts.org/ Phone Number: (503) 543-6100

Kaiser Permanente

Services Provided: Treatment Address: 19185 SW 90th Ave, Tualatin, OR 97062 Website: <u>www.kp.org/</u> Phone Number: (503) 885-5266

Kaiser Permanente

Services Provided: Treatment Address: 4855 SW Wern Ave, Beaverton, OR 97005 Website: <u>www.kp.org/</u> Phone Number: (800) 813-2000; (503) 885-5266

Kaiser Permanente

Services Provided: Treatment Address: 19075 Tanasbourne Dr, Hillsboro, OR 97124 Website: <u>www.kp.org/</u> Phone Number: (855) 632-8280

Lifestance Health (formerly Western

Psychological & Counseling Services, PC) Services Provided: Treatment Address: 8280 NE Mauzey Ct, Hillsboro, OR 97124 Website: <u>https://lifestance.com/</u> Phone Number: (503) 439-9531

Lifestance Health (formerly Western Psychological & Counseling Services, PC)

Services Provided: Treatment Address: 1500 NW Bethany Blvd Ste 320, Beaverton, OR 97006 Website: <u>https://lifestance.com/</u> Phone Number: (503) 567-3260

Lifestance Health (formerly Western Psychological & Counseling Services, PC)

Services Provided: Treatment Address: 18765 SW Boones Ferry Rd Ste 100, Tualatin, OR 97062 Website: <u>https://lifestance.com/</u> Phone Number: (503) 612-1000

Lifestance Health (formerly Western Psychological & Counseling Services, PC)

Services Provided: Treatment Address: 7455 SW Beveland St, Tigard, OR 97223 Website: <u>https://lifestance.com/</u> Phone Number: (503) 624-2600

Lifestance Health (formerly Western Psychological & Counseling Services, PC)

Services Provided: Treatment Address: 9700 SW Beaverton-Hillsdale Hwy, Beaverton, OR 97005 Website: <u>https://lifestance.com/</u> Phone Number: (503) 626-9494

Lifestance Health (formerly Western Psychological & Counseling Services, PC)

Services Provided: Treatment Address: 9670 SW Beaverton-Hillsdale Hwy, Beaverton, OR 97005 Website: <u>https://lifestance.com/</u> Phone Number: (503) 626-9494

Lifeworks Northwest

Services Provided: Call Line Address: 5228 NE Hoyt St, Portland, OR 97213 Website: <u>www.lifeworksnw.org/</u> Phone Number: (503) 291-9111

Lifeworks Northwest

Services Provided: Treatment Address: 1340 E Main St, Hillsboro, OR 97123 Website: <u>www.lifeworksnw.org/</u> Phone Number: (503) 597-6089

Lifeworks Northwest

Services Provided: Treatment Address: 971 SW Walnut St, Hillsboro, OR 97123 Website: <u>www.lifeworksnw.org/</u> Phone Number: (503) 640-5297

Lifeworks Northwest

Services Provided: Treatment Address: 10700 SW Beaverton-Hillsdale Hwy #110, Beaverton, OR 97005 Website: <u>www.lifeworksnw.org/</u> Phone Number: (503) 645-3581

Lifeworks Northwest

Services Provided: Treatment Address: 8770 SW Scoffins St, Tigard, OR 97223 Website: <u>www.lifeworksnw.org/</u> Phone Number: (503) 684-1424

Mental Health & Addiction Association of

Oregon

Services Provided: Recovery Address: 5293 NE Elam Young Pkwy_X000D_ Ste 110, Hillsboro, OR 97124 Website: <u>https://www.mhaoforegon.org/</u> Phone Number: (503) 922-2377

Morrison Kids

Services Provided: Treatment Address: 14025 SW Farmington Ste 160, Beaverton, OR 97005 Website: <u>www.morrisonkids.org/</u> Phone Number: (503) 258-4200

Neighborhood Health Centers

Services Provided: Treatment Address: 10690 NE Cornell Rd, Hillsboro, OR, 97214 Website: https://www.nhcoregon.org/services/behav ioral-health/ Phone Number: (503) 848-5861

New Narrative Services Provided: Treatment Address: 9025 SW Center St, Tigard, OR 97223 Website: <u>https://newnarrativepdx.org/</u> Phone Number: (503) 726-3690

Recovery Works NorthWest

Services Provided: Treatment, Recovery Address: 12540 SW Main St Ste 202, Tigard, OR 97223 Website: <u>www.recoveryworksnw.com/</u> Phone Number: (503) 906-9995

Safe Journeys

Services Provided: Prevention, Treatment, Recovery Address: 18801 SW Martinazzi Ave Bldg A Ste 206, Tualatin, OR 97062 Website: http://www.safejourneysonline.com/ Phone Number: (503) 989-0991

Tigard Turns the Tide

Services Provided: Prevention Address: 6960 SW Sandburg, Tigard, OR 97223 Website: Unavailable Phone Number: (503) 431-4022

Tualatin Together

Services Provided: Prevention Address: 21800 SW 91st Ave, Tualatin, OR 97062 Website: Unavailable Phone Number: (503) 431-4151

Virgina Garcia

Services Provided: Treatment, Recovery Address: 2251 E Hancock St Ste 103, Nerberg, OR 97132 Website: <u>https://virginiagarcia.org/</u> Phone Number: (971) 281-3000

Washington County

Services Provided: Prevention Address: 155 N First Ave, Hillsboro, OR 97124 Website: Unavailable Phone Number: (503) 846-8611

Washington County Addictions

Services Provided: Prevention Address: 5240 NE Elam Young Pkwy Ste 150, HIllsboro, OR 97124 Website: https://www.co.washington.or.us/ Phone Number: (503) 846-4528

Wheeler

Community Counseling Solutions

Services Provided: Treatment Address: 401 4th St, Fossil, OR 97830 Website:

www.communitycounselingsolutions.org/ Phone Number: (541) 763-2746; (541) 676-9161

Yamhill

Virgina Garcia

Services Provided: Treatment, Recovery Address: 3305 NW Aloclek Dr, Hillsboro, OR 97124 Website: <u>https://virginiagarcia.org/</u> Phone Number: (503) 352-8610

Yamhill County Health and Human Services

Services Provided: Treatment Address: 850 NE Booth Bend Rd, McMinnville, OR 97128 Website: <u>https://hhs.co.yamhill.or.us/</u> Phone Number: (503) 434-7523

Yamhill County Health and Human Services

Services Provided: Treatment Address: 627 NE Evans, McMinnville, OR 97128 Website: <u>https://hhs.co.yamhill.or.us/</u> Phone Number: (503) 434-7523

Yamhill County Health and Human Services

Services Provided: Treatment Address: 625 NE Galloway, McMinnville, OR 97128 Website: <u>https://hhs.co.yamhill.or.us/</u> Phone Number: (503) 434-7523

Yamhill County Health and Human Services

Services Provided: Treatment Address: 1535 SW Shirley Ann Dr, McMinnville, OR 97128 Website: <u>https://hhs.co.yamhill.or.us/</u> Phone Number: (503) 434-7523

Yamhill County Health and Human Services

Services Provided: Treatment Address: 1525 W Shirley Ann Dr, McMinnville, OR 97128 Website: <u>https://hhs.co.yamhill.or.us/</u> Phone Number: (503) 434-7523

Yamhill County Health and Human Services Services Provided: Treatment Address: 2251 E Hancock, Newberg, OR 97132 Website: <u>https://hhs.co.yamhill.or.us/</u> Phone Number: (503) 434-7523

Yamhill County Health and Human Services

Services Provided: Prevention Address: Unavailable Website: Unavailable Phone Number: (503) 434-7523

Yamhill County Health and Human Services

Services Provided: Treatment Address: 420 NE 5th, McMinnville, OR 97128 Website: <u>https://hhs.co.yamhill.or.us/</u> Phone Number: (503) 434-7527

Yamhill County Public Health

Services Provided: Prevention Address: Unavailable Website: Unavailable Phone Number: (503) 434-7525

Statewide

Boulder Care Services Provided: Treatment Address: Unavailable Website: <u>https://www.boulder.care/</u> Phone Number: (888) 608-0836

Charlie Health

Services Provided: Treatment Address: Unavailable Website: <u>https://www.charliehealth.com/</u> Phone Number: (866) 365-3295

Need 4 Narcan

Services Provided: Prevention, Harm Reduction Address: Unavailable Website: <u>https://need4narcan.org/</u> Phone Number: (503) 804-4514

Northwest Family Services

Services Provided: Prevention Address: Unavailable Website: <u>www.nwfs.org/</u> Phone Number: (503) 546-6377

Oregon Health Authority - Health Systems Division - Addiction, Treatment, Recovery and Prevention Services Unit Services Provided: Prevention Address: Unavailable Website: <u>https://www.oregon.gov/oha/</u> Phone Number: (503) 945-5772

Appendix C.1: Substance Use Disorder Services Survey, Treatment and Recovery Specific

Intro Statement

In collaboration with the Oregon Alcohol and Drug Policy Commission and Oregon Health Authority, Dr. Elizabeth Waddell and the OHSU-PSU School of Public Health are working on an initiative to inventory the available substance use disorder (SUD) prevention, treatment, and recovery services across Oregon (OR).

This survey is intended to collect information about your organization's SUD services to inform a statewide gap analysis. The inventory and gap analysis process will be used to better understand and identify where to target resources. This survey will take approximately 20-30 minutes to complete. You will be able to exit the survey and re-enter to complete it at a later time, so long as it is within one week of starting the survey.

If you (or another representative at your organization who can speak to the types of services, capacity and reach, and staff and leadership demographics) would prefer to walk through this survey over the phone with a staff member filling out responses on your behalf, please email the project director.

Full Survey Questions

Organization's Name

Your Name and Contact Information

- O Name ______
- O Role ______
- O Email ______
- O Phone _____

Please select the counties where your organization provides services, and/or where your organization is physically located.

- Baker County
- Benton County
- Clackamas County
- Clatsop County
- Columbia County
- Coos County
- Crook County
- Curry County
- Deschutes County

- Douglas County
- Gilliam County
- Grant County
- Harney County
- Hood River County
- Jackson County
- Jefferson County
- Josephine County
- Klamath County
- Lake County
- Lane County
- Lincoln County
- Linn County
- Malheur County
- Marion County
- Morrow County
- Multnomah County
- Polk County
- Sherman County
- Tillamook County
- Umatilla County
- Union County
- Wallowa County
- Wasco County
- Washington County
- Wheeler County
- Yamhill County
- N/A or all counties

Which (if any) Oregon Tribes does your organization provide services to?

(Only select tribes if it is a tribally specific resources like Indian Health Service or a Tribally run organization.)

- Burns Paiute Tribe
- Confederated Tribes of Coos, Lower Umpqua and Siuslaw Indians
- Confederated Tribes of Grand Ronde
- Confederated Tribes of Siletz
- Confederated Tribes of the Umatilla
- Confederated Tribes of Warm Springs
- Coquille Indian Tribe
- Cow Creek Band of Umpqua Tribe of Indians
- The Klamath Tribes
- 🗌 n/a

Display This Question:

If If Please select the counties where your organization is physically located. q://QID5/SelectedChoicesCount Is Greater Than or Equal to 2

Do the services you offer differ for different counties in Oregon, or do all locations offer similar services? (For example, in one county do you offer treatment or recovery services that are not available in another county?)

- Services differ county to county
- Services are the same in each county
- Unsure

What type(s) of SUD services does your organization provide? (Select all that apply)

- Behavioral Health Screening (PHQ, AUDIT, GAD)
- Prevention
- Treatment
- Recovery
- Other_____

Display This Question:
If What type(s) of SUD services does your organization provide? (Select all that apply) = Behavioral
Health Screening (PHQ, AUDIT, GAD)
Which behavioral health screenings do you provide? (Select all that apply)
PHQ (Patient Health Questionnaire, screens for depression)
AUDIT (Alcohol Use Disorders Identification Test, screens for alcohol use disorder)
GAD (General Anxiety Disorder screens for anxiety)
Other
What ages does your organization serve? (Select all that apply)
Under 10
Age 11 18
Age 19 25
Age 26 30
Age 31+
Older Adults (65+)
Display This Question:
If What type(s) of SUD services does your organization provide? (Select all that apply) = Treatment

What level(s) of treatment care are provided? (Please select the level that best represents the care you provide, regardless of whether you are using ASAM or are ASAM certified.)

- 0.5 Early Intervention
- □ 1.0 Outpatient Services
- 2.0 Intensive Outpatient/partial Hospitalization Services
- 2.1 Intensive Outpatient Services
- 2.5 Partial Hospitalization Services
- 3.0 Residential/Inpatient Services
- 3.1 Clinically Managed Low-Intensity Residential Services
- 3.3 Clinically Managed Population Specific High-Intensity Residential Services
- 3.5 Clinically Managed High-Intensity Residential Services
- 3.7 Medically Monitored Intensive Inpatient Services
- 4.0 Medically Managed Intensive Inpatient Services
- Residential Detox

Does your organization offer services for co-occurring disorders/dual diagnosis? (For the purposes of this survey, co-occurring disorders refer to an individual having one or more substance use disorders and one or more mental health disorders.)
○ Yes
○ No
 Unsure
Do you offer any of the following types of harm reduction services? (Select all that apply)
Syringe service program
Drug checking (e.g. fentanyl test strips)
Non-abstinence-based services (e.g., not required to stop use for housing, employment, or other support)
Overdose prevention and reversal (e.g., naloxone distribution)
Safe consumption sites
Providing information on safer drug use
Other (clarify below)
Does your organization offer any specialty programming for pregnant or parenting people with young children? (Select all that apply) Yes, Inpatient Yes, Outpatient Yes, Housing No Does your organization prescribe and/or dispense medications for opioid use disorder? Yes
○ No
 Unsure
<i>Display This Question: If Does your organization prescribe and/or dispense medications for opioid use disorder? = yes</i>
Is your organization a certified Opioid Treatment Program?
○ Yes
○ No

Display This Question: If Does your organization prescribe and/or dispense medications for opioid use disorder? = yes

	Prescribed	Dispensed	Both	n/a
Methadone (Diskets, Intensol, Methadose, Dolophine)	0	0	0	0
Buprenorphine (Sublocade, Belbuca, Probuphine, Buprenex, Butrans)	0	0	\bigcirc	\circ
Naltrexone (Vivitrol, ReVia)	0	\bigcirc	\bigcirc	\bigcirc
Buprenorphine AND Naloxone (Suboxone)	0	0	\bigcirc	0

Which medications for opioid use disorder does your organization prescribe and/or dispense?

Does your organization have Peer Support Specialists?

- O Yes
- O No
- Unsure

Display This Question: If Does your organization have Peer Support Specialists? = yes

Which type of certified Peer Support Specialists (PSS) does your organization have? (Select all that apply)

Recovery Peer: A person in addiction recovery with two years abstinence who provides support
services to people seeking recovery from addiction.

Mental Health Peer: A person with lived experience of mental health challenges who provides support services to other people with similar experiences.

Family Support Specialist: A person with experience parenting a child or youth with substance
use or mental health challenges who supports other parents with children or youth with
substance use or mental health challenges.

Youth Support Specialist: A person with lived experience with substance use or mental health
treatment who also had difficulty accessing education, health or wellness services who wants to
provide support services strictly with people under the age of 30.

Other Peer or traditional health worker/liaisons.

🗌 n/a

Display This Question: If Does your organization have Peer Support Specialists? = yes

Are the Peer Support Specialist positions paid or volunteer?

- All paid
- Some paid
- All volunteer
- Unsure

Does your organization provide any of the following resources? (Select all that apply)

- Client transportation services (provided or voucher)
- Job or trade specific training
- Job placements
- Linkages to primary care
- Housing services (not referral)
- Legal services
- Beentry services for people coming out of jail or prison
- Evidence based family support services (e.g., CRAFT, Johnson Institute Intervention, or Al-Anon)

Do you provide any targeted services to justice involved adults?

- O Yes
- O No
- Unsure

Optional: Any additional information about types of services offered

The following questions inquire about accessibility, inclusion, and accommodations for services.

Do you offer services in languages other than English? (Select all that apply)

- Yes, with certified interpreters on staff
- 」 Yes, with a contracted service program like Language Line
- J Yes, with Certified Staff who are multi-lingual
- ☐ No, services are only offered in English

Display This Question: If The following questions inquire about accessibility, inclusion, and accommodations for services.... = Yes, with certified interpreters on staff, Or The following questions inquire about accessibility, inclusion, and accommodations for services.... = Yes, with Certified Staff who are multi-lingual

What other languages do you provide services through interpreters or multi-lingual staff? (Select all that apply)

- Spanish
- 🗌 Russian
- Chinese (including Mandarin and Cantonese)
- 🔄 Vietnamese
- American Sign Language
- Other

Do you have printed or web-based information available in languages other than English?

- O Yes
- O No
- Unsure

Display This Question: If Do you have printed or web-based information available in languages other than English? = Yes

What other languages or formats are printed or web-based information available in? (Select all that apply)

- Spanish
 Russian
 Chinese (ir
- Chinese (including Mandarin and Cantonese
- Vietnamese
- Accessible formats (e.g., large print, Braille)
- Other

Do you offer any services that are specific for people of a protected class? Please select all that apply, and only select if the services are specifically for the identified group (e.g., SUD counseling that uses Indigenous customs, or support groups only for Veterans).

"Protected class" refers to groups of people who are legally protected from being harmed or harassed by laws, practices, and policies that discriminate against them due to a shared characteristic. This includes race/ethnicity, religion, gender, sexual orientation, disability, or veteran status.

- None
- Services specific to a Racial or ethnic group (culturally specific services)
- Services specific to a certain religious group
- Gender specific services
- LGBTQ+2S specific services
- Services specific for people with a mental or physical disability
- Services for Veterans
- Other

Do you have services or protocols in place for clients who are undocumented?

- O Yes
- O No
- Unsure

Is travel time or access to transportation a barrier for clients?

- O Yes
- O No
- Unsure

Do you offer any of the following virtual programming or teleservices?

- Billable counseling teleservices
- Billable treatment services
- U Non-billable virtual services, like Recovery meetings, trainings, classes, or peer mentor services
- No virtual or teleservices
- Other

Display This Question: If Do you offer any of the following virtual programming or teleservices? = Billable counseling teleservices, Or Do you offer any of the following virtual programming or teleservices? = Billable treatment services, Or Do you offer any of the following virtual programming or teleservices? = Non-billable virtual services, like Recovery meetings, trainings, classes, or peer mentor services

Is access to technology a barrier for clients utilizing Teleservices?

- O Yes
- O No

How does your organization approach Trauma Informed Care?

Trauma-informed care recognizes and responds to the signs, symptoms, and risks of trauma to better support the health needs of patients who have experienced Adverse Childhood Experiences (ACEs) and toxic stress.

U We have formal training and implementation of trauma informed care at our organization

- U Trauma informed care is implemented informally within in our organization
- Trauma informed care is not part of our care model
- □ Other _____

Do you provide outreach services to individuals who are houseless?

- O Yes
- O No
- Unsure

Optional: Any additional comments you have about how clients access services or barriers they might face accessing services

Next are questions about capacity for services, which we will be asking by county groupings. It is ok if some of these numbers approximate.

ny neonle can your organization provide services to in [COUNTY]? How m

ow many people can your organization provide services to in [COONTY]:
isplay This Choice:
If What level(s) of treatment care are provided? (Please select the level that best represents the c =
5 Early Intervention
Or What level(s) of treatment care are provided? (Please select the level that best represents the c
1.0 Outpatient Services
Or What level(s) of treatment care are provided? (Please select the level that best represents the c
2.0 Intensive Outpatient/partial Hospitalization Services
Or What level(s) of treatment care are provided? (Please select the level that best represents the c
2.1 Intensive Outpatient Services
Or What level(s) of treatment care are provided? (Please select the level that best represents the c
2.5 Partial Hospitalization Services
Outpatient treatment number of clients on caseload?
isplay This Choice:
If What level(s) of treatment care are provided? (Please select the level that best represents the c =
0 Residential/Inpatient Services
Or What level(s) of treatment care are provided? (Please select the level that best represents the c
3.1 Clinically Managed Low-Intensity Residential Services
Or What level(s) of treatment care are provided? (Please select the level that best represents the c
3.3 Clinically Managed Population Specific High-Intensity Residential Services
Or What level(s) of treatment care are provided? (Please select the level that best represents the c
3.5 Clinically Managed High-Intensity Residential Services
Or What level(s) of treatment care are provided? (Please select the level that best represents the c
3.7 Medically Monitored Intensive Inpatient Services

Or What level(s) of treatment care are provided? (Please select the level that best represents the c... = 4.0 Medically Managed Intensive Inpatient Services

Or What level(s) of treatment care are provided? (Please select the level that best represents the c... *= Residential Detox*

O Inpatient Treatment: how many beds?

Display This Choice:

If Does your organization provide any of the following resources? (Select all that apply) = Housing services (not referral)

○ Housing services, how many clients at one time?

Display This Choice:

If What type(s) of SUD services does your organization provide? (Select all that apply) = Recovery

• Recovery services how many people enrolled in peer or group support services?

In [COUNTY], does your capacity for services current meet your demand for services?

- O Yes
- O No
- Unsure

Optional: Any additional comments about capacity for services in [COUNTY]

These next questions are about the types of services your organization provides, **specifically** in [COUNTY]

In [COUNTY], what type(s) of SUD services does your organization provide? (Select all that apply)

Behavioral Health Screening (PHQ, AUDIT, GAD)
Prevention
Treatment
Recovery
Other
Display This Question: If In \${Im://Field/1}, what type(s) of SUD services does your organization provide? (Select all that = Behavioral Health Screening (PHQ, AUDIT, GAD)
Which behavioral health screenings do you provide? (Select all that apply)
PHQ (Patient Health Questionnaire, screens for depression)
AUDIT (Alcohol Use Disorders Identification Test, screens for alcohol use disorder)
GAD (General Anxiety Disorder, screens for anxiety)
Other
Q4.7 In [COUNTY], what ages does your organization serve? (Select all that apply)
Under 10
Age 11 18
Age 19 25
Age 26 30
Age 31+
Older Adults (65+)

Display This Question: If In \${Im://Field/1}, what type(s) of SUD services does your organization provide? (Select all that = Treatment
In [COUNTY], what level(s) of treatment care are provided? Please select the level that best represents the care you provide, regardless of whether you are using ASAM or are ASAM certified.
0.5 Early Intervention
1.0 Outpatient Services
2.0 Intensive Outpatient/partial Hospitalization Services
2.1 Intensive Outpatient Services
2.5 Partial Hospitalization Services
3.0 Residential/Inpatient Services
3.1 Clinically Managed Low-Intensity Residential Services
3.3 Clinically Managed Population Specific High-Intensity Residential Services
3.5 Clinically Managed High-Intensity Residential Services
3.7 Medically Monitored Intensive Inpatient Services
4.0 Medically Managed Intensive Inpatient Services
Residential Detox
In [COUNTY], does your organization offer services for co-occurring disorders/dual diagnosis? (For the purposes of this survey, co-occurring disorders refer to an individual having one or more substance use disorders and one or more mental health disorders.)
○ Yes
○ No
○ Unsure
In [COUNTY], do you offer any of the following types of harm reduction services? (Select all that apply)
Syringe service program
Drug Checking (e.g. fentanyl test strips)
Non-abstinence-based services (e.g., not required to stop use for housing, employment, or other support)
Overdoes prevention and reversal (e.g., naloxone distribution)
Safe consumption sites
Providing information on safer drug use
Other (please describe)

In [COUNTY], does your organization offer any specialty programming for pregnant or parenting people with young children? (Select all that apply)

- Yes, Inpatient
- Yes, Outpatient
- Yes, Housing
- 🗌 No

Display This Question: If Loop current: In \${Im://Field/1}, what type(s) of SUD services does your organization provide? (Select all that... = Treatment

In [COUNTY], does your organization prescribe and/or dispense medications for opioid use disorder? (If yes at some locations and not at others, please select yes.)

More information about Opioid Treatment Programs can be found <u>here</u>.

- Yes
- O No
- Unsure

Display This Question: If Loop current: In \${Im://Field/1}, does your organization prescribe and/or dispense medications for opioid use d... = yes

Is your organization a certified Opioid Treatment Program?

- O Yes
- O No

Display This Question: If Loop current: In \${Im://Field/1}, does your organization prescribe and/or dispense medications for opioid use d... = yes

In [COUNTY], which medications for opioid use disorder do you prescribe and/or dispense?

	Prescribed	Dispensed	Both	n/a	
Methadone (Diskets, Intensol, Methadose, Dolophine)	0	0	0	0	
Buprenorphine (Sublocade, Belbuca, Probuphine, Buprenex, Butrans)	0	0	0	\bigcirc	
Naltrexone (Vivitrol, ReVia)	0	\bigcirc	\bigcirc	\bigcirc	
Buprenorphine AND Naloxone (Suboxone)	0	0	\bigcirc	\bigcirc	

In [COUNTY], does your organization have Peer Support Specialists?

- O Yes
- O No
- Unsure

Display This Question: If Loop current: In \${Im://Field/1},	does your organization have Peer Support
Specialists? = ves	

In [COUNTY], which type of certified Peer Support Specialist does your organization have? (Select all that apply)

Recovery Peer: A person in addiction recovery with two years abstinence who provides
support services to people seeking recovery from addiction.

Menta	al Health Peer: A person w	vith lived experience	of mental health	challenges who
provid	des support services to oth	er people with simila	ar experiences.	

Family Support Specialist: A person with experience parenting a child or youth with
substance use or mental health challenges who supports other parents with children or
youth with substance use or mental health challenges

✓ Youth support Specialist: A person with lived experience with substance use or mental health treatment who also had difficulty accessing education, health or wellness services who wants to provide support services strictly with people under the age of 30

Other Peer or traditional health worker/liaisons

🗌 n/a

Display This Question: If Loop current: In \${Im://Field/1}, does your organization have Peer Support Specialists? = yes

Are these Certified Peer Support Specialist positions paid or volunteer?

- All paid
- Some paid
- All volunteer

In [COUNTY], does your organization provide any of the following resources? (Select all that apply)

- Client transportation services (provided or voucher)
- Job placements
- Linkages to primary care
- Legal services
- Beentry services for people coming out of jail or prison
- $_$ Evidence based family support services (like CRAFT, Johnson Institute Intervention, or Al-Anon)

In [COUNTY], do you provide any targeted services to justice involved adults?

- O Yes
- O No
- O Unsure

Optional: Any additional notes about types of services in **[COUNTY]**

The next question is about your organization's capacity in **[COUNTY]**. It is ok if some of these numbers approximate.

How many people can your organization provide services to in the following categories:

Display This Choice:

If Loop current: In \${Im://Field/1}, what level(s) of treatment care are provided? Please select the level that be... = 0.5 Early Intervention

Or Loop current: In \${Im://Field/1}, what level(s) of treatment care are provided? Please select the level that be... = 1.0 Outpatient Services

Or Loop current: In \${Im://Field/1}, what level(s) of treatment care are provided? Please select the level that be... = 2.0 Intensive Outpatient/partial Hospitalization Services

Or Loop current: In \${Im://Field/1}, what level(s) of treatment care are provided? Please select the level that be... = 2.1 Intensive Outpatient Services

Or Loop current: In \${Im://Field/1}, what level(s) of treatment care are provided? Please select the level that be... = 2.5 Partial Hospitalization Services

O Outpatient treatment number of clients on caseload

Display This Choice:

If Loop current: In \${Im://Field/1}, what level(s) of treatment care are provided? Please select the level that be... = 3.0 Residential/Inpatient Services

Or Loop current: In \${Im://Field/1}, what level(s) of treatment care are provided? Please select the level that be... = 3.1 Clinically Managed Low-Intensity Residential Services

Or Loop current: In \${Im://Field/1}, what level(s) of treatment care are provided? Please select the level that be... = 3.3 Clinically Managed Population Specific High-Intensity Residential Services

Or Loop current: In \${Im://Field/1}, what level(s) of treatment care are provided? Please select the level that be... = 3.5 Clinically Managed High-Intensity Residential Services

Or Loop current: In \${Im://Field/1}, what level(s) of treatment care are provided? Please select the level that be... = 3.7 Medically Monitored Intensive Inpatient Services

Or Loop current: In \${Im://Field/1}, what level(s) of treatment care are provided? Please select the level that be... = 4.0 Medically Managed Intensive Inpatient Services

Or Loop current: In \${Im://Field/1}, what level(s) of treatment care are provided? Please select the level that be... = Residential Detox

○ Inpatient Treatment: how many beds?

Display This Choice:

If Loop all: In \${Im://Field/1}, does your organization provide any of the following resources? (Select all th... = Housing services (not referral)

○ Housing services, how many clients at one time?

Display This Choice:

If Loop all: In \${Im://Field/1}, what type(s) of SUD services does your organization provide? (Select all that... = Recovery

○ Recovery services how many people enrolled in peer or group support services?

In [COUNTY], does your capacity for services currently meet your demand for services?

- O Yes
- O No
- Unsure

Optional: Any additional notes about service capacity in [COUNTY]

We will continue with questions about how services are accessed by clients and any other types of programming or supports that are available on site.

In [COUNTY], do you offer services in languages other than English? (Select all that apply)

- Yes, with certified interpreters on staff
- Yes, with Certified staff who are multi-lingual
- ☐ No, services are only offered in English

Display This Question: If Loop current: In \${Im://Field/1}, do you offer services in languages other than	
English? (Select all that apply) = Yes, with certified interpreters on staff	

Or Loop current: In \${Im://Field/1}, do you offer services in languages other than English? (Select all that apply) = Yes, with Certified staff who are multi-lingual

What other languages do you provide services through interpreters or multi-lingual staff? (Select all that apply)

Spanish
Russian

- Chinese (including Mandarin and Cantonese)
- U Vietnamese
- American Sign Language
- Other

Do you have printed or web-based information available in languages other than English?

- O Yes
- O No
- Unsure

Display This Question: If Loop current: Do you have printed or web-based information available in languages other than English? = Yes

What other languages or formats are printed or web-based information available in? (Select all that apply)

- Spanish
- 🗌 Russian
- Chinese (including Mandarin and Cantonese)
- U Vietnamese
- Accessible formats (e.g., large print, Braille)
- ____ Other

In [COUNTY], do you offer any services that are specific for people of a protected class? Please select all that apply, and only select if the services are specifically for the identified group (e.g., SUD counseling that uses Indigenous customs, or support groups only for Veterans).

"Protected class" refers to groups of people who are legally protected from being harmed or harassed by laws, practices, and policies that discriminate against them due to a shared characteristic. This includes race/ethnicity, religion, gender, sexual orientation, disability, or veteran status.

- 🗌 None
- Services specific to a Racial or ethnic group (cultural services)
- Services specific to a certain religious group
- Gender specific services
- LGBTQ+2S specific services
- Services specific for people with a mental or physical disability
- Services for Veterans
- 🗌 Other

In [COUNTY] do you have services or protocols in place for clients who are undocumented?

- O Yes
- O No
- Unsure

If other, or more specific info about Racial/ethnic, religious, or gender groups provided, please describe for [COUNTY]

In [COUNTY], is travel time or access to transportation a barrier for clients?

- O Yes
- O No
- Unsure

In [COUNTY], do you offer any of the following virtual programming or teleservices?

- Billable treatment teleservices
- Billable counseling teleservices

□ Non-billable virtual services like Recovery meetings, trainings, classes, or peer mentor services

No teleservices

Display This Question:

If Loop current: In \${Im://Field/1}, do you offer any of the following virtual programming or teleservices? = Billable treatment teleservices

Or Loop current: In \${Im://Field/1}, do you offer any of the following virtual programming or teleservices? = Billable counseling teleservices

Or Loop current: In \${Im://Field/1}, do you offer any of the following virtual programming or teleservices? = Non billable virtual services like Recovery meetings, trainings, classes, or peer mentor services

In [COUNTY], is access to technology a barrier for clients utilizing Teleservices?

- O Yes
- O No

In [COUNTY], how does your organization approach Trauma Informed Care?

Trauma-informed care recognizes and responds to the signs, symptoms, and risks of trauma to better support the health needs of patients who have experienced Adverse Childhood Experiences (ACEs) and toxic stress.

- Yes, formal training/implementation of trauma informed care
- Yes, informally
- O No
- Unsure

In [COUNTY], do you provide outreach services to individuals who are houseless?

- O Yes
- O No
- Unsure

Optional: Any additional notes about access or barriers to services in [COUNTY]

The next few questions briefly address your organization's financial resources across all locations.

From the list of funding sources below, please select the sources where you receive significant funding (select all that apply):

Medicaid/Medicare

- Private Insurance
- Indian Health services
- Funding from state or county
- Federal Grants
- Foundation or Private Grants
- Other sources of funding

Is your funding adequate to carry out your organization's mission?

- O Yes
- O No
- Unsure

Has your organization experienced a reduction in billable visits due to COVID-19 and the pandemic?

- O Yes
- O No
- Unsure

Has your organization experienced any changes in funding due to Measure-110?

- Yes, increase in funding
- Yes, decrease in funding
- O No
- Unsure

Is your organization currently part of or applying to be a part of a Behavioral Health Resource Network (BHRN)?

- Currently part of a BHRN
- Applied to be part of a BHRN
- O No

Optional: Any additional information or comments about funding

Before asking quantitative questions about number of staff and staff demographics, we will start with some general questions to help us understand any staffing needs.

Is your current level of staffing adequate to support your organization's mission?

- O Yes
- O No
- Unsure

Do you have difficulty filling vacant positions?

- Yes
- O No
- Unsure

The following questions inquire about the number of people in different leadership and staff positions at your organization.

How many people are on your leadership team (for example, executive director or CEO)?

Optional: Any additional notes about leadership team numbers

The following questions are about your SUD Care staff, which will be asked for the specific county where services are provided

Q7.2 In [COUNTY], how many paid full-time positions in each category

Qualified Mental Health Professionals include: Clinical Social Workers, Licensed Professional Counselors, Marriage and Family therapist, Psychologist

Prescribing Clinicians with an X-Waiver: An "X waiver" refers to the <u>Drug Addiction Treatment Act</u> (<u>DATA 2000</u>) "waiver" legislation that authorized the outpatient use of buprenorphine for the treatment of opioid use disorder.

Prescribing clinicians include: Psychiatrists and any other Medical Doctor, Physician Assistant (PA), Nurse Practitioner (NP), Osteopath (DO)

Count people in the highest qualification for example, if a QMHP is also a Certified Alcohol and Drug Counselor, only count them as QMHP.

- O Qualified Mental Health Professionals (QMHP)____
- O Qualified Mental Health Associate (QMHA) _____
- Certified Alcohol and Drug Counselors_____
- Certified Peer Mentors_____
- Case Managers____
- Number of Prescribing Clinicians who prescribe any medications for SUD____
- Prescribing Clinicians with an X-waiver (MD/NP/DO/PA) ____
- How many other certified traditional health workers not already counted here_____

If other type of certified traditional health workers, please describe here:

In [COUNTY], does your organization have any volunteer positions?

- O Yes
- O No

Display This Question:

If Loop all: In \${Im://Field/1}, does your organization have any volunteer positions? = yes How many volunteer positions? _____

Optional: Any additional notes or comments about the number of care staff

The following questions inquire about demographics of your organization's leadership team.

Within each gender category, please share the number of people on the Leadership Team who are:

- O Cisgender men _____
- O Cisgender women
- Transgender men
- O Transgender women _____
- O Nonbinary _____
- O Gender fluid ______

Is there a category you use to track employees' gender that we did not include here?

Optional: Additional comments about gender of leadership team

The next set of questions are about the race and ethnicity of your organization's leadership. Please answer as best as you can with the number of people in each category

Within each race/ethnicity category, please share the number of people on the Leadership Team who are:

- Black/African American _____
- O Hispanic/Latino ____
- American Indian/Alaska Native _____
- O Asian ____
- Native Hawaiian/Pacific Islander ____
- O White ____
- Two or more races ____
- O Unknown _____

Optional: Additional Comments about Race/ethnicity of Leadership Team

Those are all of our questions for you today. Please press submit at the bottom of the page to finalize your survey

If you need to go back to edit questions, please press the back button.

If you have any issues with the survey or need additional help, please reach out by contacting Katie Lenahan, Project Director, at <u>Lenahank@ohsu.edu</u>.

Appendix C.2: Substance Use Disorder Services Survey, Prevention Specific

Intro Statement

In collaboration with the Oregon Alcohol and Drug Policy Commission and Oregon Health Authority, Dr. Elizabeth Waddell and the OHSU-PSU School of Public Health are working on an initiative to inventory the available substance use disorder (SUD) prevention, treatment, and recovery services across Oregon (OR).

This survey is intended to collect information about your organization's SUD Prevention services to inform a statewide gap analysis. The inventory and gap analysis process will be used to better understand and identify where to target resources. This survey will take approximately 20-30 minutes to complete. You will be able to exit the survey and re-enter to complete it at a later time, so long as it is within one week of starting the survey.

If you (or another representative at your organization who can speak to the types of services, capacity and reach, and staff and leadership demographics) would prefer to walk through this survey over the phone with a staff member filling out responses on your behalf, please email the project director.

Full Survey Questions

Organization's Name

Your Name and Contact Information

\bigcirc	Name
\bigcirc	Role
\bigcirc	Email
0	Phone

Please select the counties where your organization provides services, and/or where your organization is physically located.

Baker County
Benton County
Clackamas County
Clatsop County
Columbia County
Coos County

Crook County
Curry County
Deschutes County
Douglas County
Gilliam County
Grant County
Harney County
Hood River County
Jackson County
Jefferson County
Josephine County
Klamath County
Lake County
Lane County
Lincoln County
Linn County
Malheur County
Marion County
Morrow County
Multnomah County
Polk County
Sherman County
Tillamook County
Umatilla County
Union County

Wallowa County
Wasco County
Washington County
U Wheeler County
Yamhill County
N/A or all counties
Which (if any) Oregon Tribes does your organization provide services to? (Only select tribes if it is a tribally specific resources like a Tribally run organization or programming built by or for Native American people.)
Burns Paiute Tribe
Confederated Tribes of Coos, Lower Umpqua and Siuslaw Indians
Confederated Tribes of Grand Ronde
Confederated Tribes of Siletz
Confederated Tribes of the Umatilla
Confederated Tribes of Warm Springs
Coquille Indian Tribe
Cow Creek Band of Umpqua Tribe of Indians
The Klamath Tribes
n/a
Does your organization provide prevention services to youth or adults? Please check all that apply.
Youth
Adults

Display This Question:

If Does your organization provide prevention services to youth or adults? Please check all that apply. = youth

For youth-based prevention services, which of the following prevention programs do you offer at your organization?

Advocacy Event : Media campaign with a specific, community change agenda related to behavioral health or management of substance use. Garnering local news attention to move forward the cause is a key consideration.
Community Prevention for Youth: Substance use prevention programs being implemented within community settings.
Educational Support Programs for Youth: Education programs aimed at helping recovering youth to achieve educational goals.
Electronic Media-based Intervention for Youth: Electronic media-based interventions that focus on promoting health and safety behavior change in youth (18 or younger).
Intensive Family Services for Youth: Intensive family services offer intensive, home-based crisis intervention, individual and family counseling, case management activities, and life-skills education for families with children under the age of 18 identified as being at-risk of placement outside of their home.
Mentorship Program for Youth: Mentorship programs improve the well-being of the child by providing a role model that can support the child academically, socially and/or personally.
Peer Supports for Youth: Peer supports work by providing someone who has the lived experience of behavioral health issues or substance abuse and can provide direct support through skill building and information sharing.
School-based prevention: School-based prevention that focus on promoting health and safety behavior change in youth (18 or younger)
Other
This Question: Does your organization provide prevention services to youth or adults? Please check all that apply. S

For adult based prevention services, which of the following prevention programs do you offer at your organization?

D

Advocacy Events for Adults: Media campaign with a specific, community change agenda related
to behavioral health or management of substance use. Garnering local news attention to move
forward the cause is a key consideration.

Community Prevention for Adults: Substance abuse prevention programs being implemented within community settings.

□ Educational Support Programs for Adults: Adult education programs aimed at helping recovering community members to achieve educational goals.

Mass Media Campaigns Cessation or use reduction for adults: Media campaigns that disseminate cessation-related messages through television, radio, print media, billboards, and other major media outlets that intend to reach a large population of people and are not dependent on person-to-person contact. Cessation and use reduction campaigns are intended to get active users of substances to decrease or cease their consumption.

- Mass Media Campaigns Stigma and treatment access reduction for adults: Media campaigns that disseminate messages through television, radio, print media, billboards, and other major media outlets that intend to reach a large population of people and are not dependent on person-to-person contact. Stigma and treatment access campaigns are intended to decrease the stigma associated with behavioral health treatment programs, in an effort to increase enrollment in treatment programs.
- Mental Health crisis intervention: Mental health crisis intervention programs offer immediate. short-term mental health aid to individuals who are experiencing a mental health crisis event.

Other _____

Display This Question:

If If For youth based prevention services, which of the following prevention programs do you offer at y... q://QID221/SelectedChoicesCount Is Greater Than or Equal to 1

Carry Forward Selected Choices from "For youth-based prevention services, which of the following prevention programs do you offer at your organization? "

For youth-oriented prevention services in \${Im://Field/1}, please share the number of events and estimated number of people impacted per year

	Number of events per year	Number of Participants/clients reached per year
Advocacy Event: Media campaign with a specific, community	,	
change agenda related to behavioral health or management of		
substance use. Garnering local news attention to move forward		
the cause is a key consideration.		
Community Prevention for Youth: Substance use prevention		
programs being implemented within community settings.		
Educational Support Programs for Youth: Education programs aimed at helping recovering youth to achieve educational goals.		
Electronic Media-based Intervention for Youth: Electronic media-		
based interventions that focus on promoting health and safety		
behavior change in youth (18 or younger).		
Intensive Family Services for Youth: Intensive family services offer		
intensive, home-based crisis intervention, individual and family		
counseling, case management activities, and life-skills education		
for families with children under the age of 18 identified as being		
at-risk of placement outside of their home.		
Mentorship Program for Youth: Mentorship programs improve		
the well-being of the child by providing a role model that can		
support the child academically, socially and/or personally.		
Peer Supports for Youth: Peer supports work by providing		
someone who has the lived experience of behavioral health issues		
or substance abuse and can provide direct support through skill		
building and information sharing.		
School-based prevention: School-based prevention that focus on		
promoting health and safety behavior change in youth (18 or		
younger)		
Other		

Display This Question:

If If For adult based prevention services, which of the following prevention programs do you offer at y... q://QID222/SelectedChoicesCount Is Greater Than or Equal to 1

Carry Forward Selected Choices from "For adult based prevention services, which of the following prevention programs do you offer at your organization?"

For adult oriented prevention services in ${lm://Field/1}$, please share the number of events and estimated number of people impacted per year

	Number of events per year	Number of participants/clients reached per year
Advocacy Events for Adults: Media campaign with a specific,		
community change agenda related to behavioral health or		
management of substance use. Garnering local news attention to		
move forward the cause is a key consideration.		
Community Prevention for Adults: Substance abuse prevention		
programs being implemented within community settings.		
Educational Support Programs for Adults: Adult education		
programs aimed at helping recovering community members to		
achieve educational goals.		
Mass Media Campaigns Cessation or use reduction for		
adults: Media campaigns that disseminate cessation-related		
messages through television, radio, print media, billboards, and		
other major media outlets that intend to reach a large population		
of people and are not dependent on person-to-person contact.		
Cessation and use reduction campaigns are intended to get active		
users of substances to decrease or cease their consumption.		
Mass Media Campaigns Stigma and treatment access reduction		
for adults: Media campaigns that disseminate messages through		
television, radio, print media, billboards, and other major media		
outlets that intend to reach a large population of people and are		
not dependent on person-to-person contact. Stigma and		
treatment access campaigns are intended to decrease the stigma		
associated with behavioral health treatment programs, in an		
effort to increase enrollment in treatment programs.		
Mental Health crisis intervention: Mental health crisis		
intervention programs offer immediate. short-term mental health		
aid to individuals who are experiencing a mental health crisis		
event.		
Other		

In \${Im://Field/1}, does your capacity for services current meet your demand for services?

- O Yes
- O No
- O Unsure

Do you have any other information you would like to share about prevention services in ${\rm Im:}/{\rm Field/1}$?

The next set of questions are about services your organization might offer.

Do you offer any of the following types of harm reduction services? (Select all that apply)

- □ Syringe service program
- Drug checking (e.g. fentanyl test strips)
- □ Non-abstinence-based services (e.g., not required to stop use for housing, employment, or other support)
- Overdose prevention and reversal (e.g., naloxone distribution)
- Providing information on safer drug use
- Other (clarify below) _____

Does your organization have Peer Support Specialists?

- O Yes
- O No
- Unsure

Display This Question: If Does your organization have Peer Support Specialists? = yes

Which type of certified Peer Support Specialists (PSS) does your organization have? (Select all that apply)

- Recovery Peer: A person in addiction recovery with two years abstinence who provides support services to people seeking recovery from addiction.
- Mental Health Peer: A person with lived experience of mental health challenges who provides support services to other people with similar experiences.
- □ **Family Support Specialist**: A person with experience parenting a child or youth with substance use or mental health challenges who supports other parents with children or youth with substance use or mental health challenges.
- □ Youth Support Specialist: A person with lived experience with substance use or mental health treatment who also had difficulty accessing education, health or wellness services who wants to provide support services strictly with people under the age of 30.
- Other Peer or traditional health worker/liaisons.
- 🗌 n/a

Display This Question: If Does your organization have Peer Support Specialists? = yes Are the Peer Support Specialist positions paid or volunteer?

- All paid
- Some paid
- All volunteer
- Unsure

Does your organization provide any of the following resources? (Select all that apply)

- Client transportation services (provided or voucher)
- □ Job or trade specific training
- □ Job placements
- Linkages to primary care
- Housing services (not referral)
- Legal services
- Reentry services for people coming out of jail or prison
- Evidence based family support services (e.g., CRAFT, Johnson Institute Intervention, or Al-Anon)

Do you provide any targeted services to justice involved adults?

- O Yes
- O No
- Unsure

Optional: Any additional information about types of services offered

The following questions inquire about accessibility, inclusion, and accommodations for services.

Do you offer services in languages other than English? (Select all that apply)

- □ Yes, with certified interpreters on staff
- □ Yes, with a contracted service program like Language Line
- □ Yes, with Staff who are multi-lingual
- □ No, services are only offered in English

Display This Question:

If The following questions inquire about accessibility, inclusion, and accommodations for services.... = Yes, with certified interpreters on staff

Or The following questions inquire about accessibility, inclusion, and accommodations for services.... = Yes, with Staff who are multi-lingual What other languages do you provide services through interpreters or multi-lingual staff? (Select all that apply)

- Spanish
- Russian
- Chinese (including Mandarin and Cantonese)
- □ Vietnamese
- American Sign Language
- Other

Do you have printed or web-based information available in languages other than English?

- O Yes
- O No
- Unsure

Display This Question: If Do you have printed or web-based information available in languages other than English? = Yes_____

What other languages or formats are printed or web-based information available in? (Select all that apply)

- Spanish
- Russian
- Chinese (including Mandarin and Cantonese
- Vietnamese
- Accessible formats (e.g., large print, Braille)
- Other

Do you offer any services that are specific for people of a protected class? Please select all that apply, and only select if the services are specifically for the identified group (e.g., Prevention activities that incorporate Native traditions, or a girl's mentoring group).

"Protected class" refers to groups of people who are legally protected from being harmed or harassed

by laws, practices, and policies that discriminate against them due to a shared characteristic. This includes race/ethnicity, religion, gender, sexual orientation, disability, or veteran status.

- □ None
- Services specific to a Racial or ethnic group (culturally specific services)
- Services specific to a certain religious group
- Gender specific services
- □ LGBTQ+2S specific services
- Services specific for people with a mental or physical disability
- Services for Veterans
- Other

Is travel time or access to transportation a barrier for participants of your prevention programs?

- Yes
- O No
- Unsure

Do you offer any virtual programming?

- Yes
- O No
- O Other _____

Display This Question: If Do you offer any virtual programming? = Yes

Is access to technology a barrier for the people you are trying to reach?

- O Yes
- O No

How does your organization approach Trauma Informed Care?

Trauma-informed care recognizes and responds to the signs, symptoms, and risks of trauma to better

support the health needs of patients who have experienced Adverse Childhood Experiences (ACEs) and toxic stress.

- □ We have formal training and implementation of trauma informed care at our organization
- Trauma informed care is implemented informally within in our organization
- Trauma informed care is not part of our care model
- Other _____

Do you provide outreach services to individuals who are houseless?

- O Yes
- O No
- Unsure

Optional: Any additional comments you have about how clients access services or barriers they might face accessing services ______

The next few questions briefly address your organization's financial resources across all locations.

From the list of funding sources below, please select the sources where you receive significant funding (select all that apply):

\square	Funding from state or county
\Box	i unung nom state of county

- Federal Grants
- □ Foundation or Private Grants
- Indian Health Services
- Other sources of funding ______

Is your funding adequate to carry out your organization's mission?

- O Yes
- O No
- Unsure

Has your organization experienced any changes in funding due to Measure-110?

- Yes, increase in funding
- Yes, decrease in funding
- O No
- Unsure

Is your organization currently part of or applying to be a part of a Behavioral Health Resource Network (BHRN)?

- Currently part of a BHRN
- Applied to be part of a BHRN
- O No

Optional: Any additional information or comments about funding

Before asking quantitative questions about number of staff and staff demographics, we will start with some general questions to help us understand any staffing needs.

Is your current level of staffing adequate to support your organization's mission?

- O Yes
- O No
- Unsure

Do you have difficulty filling vacant positions?

- O Yes
- O No
- Unsure

The following questions inquire about the number of people in different leadership and staff positions at your organization.

How many people are on your leadership team (for example, executive director or CEO)?

Optional: Any additional notes about leadership team numbers

The following questions are about your SUD Prevention staff, which will be asked for the specific county where services are provided

In \${Im://Field/1}, how	many full-time Prevention	Staff are part of your	organization?
--------------------------	---------------------------	------------------------	---------------

)	Peers
\bigcirc	Prevention Specialist
\bigcirc	Other Prevention Staff
\bigcirc	Volunteers
Op	tional: Any additional notes or comments about the Number of Care Staff
	each gender category, please share the number of people on the Prevention Team i /Field/1} who are:
	/Field/1} who are:
	<pre>/Field/1} who are: Cisgender men</pre>
	/Field/1} who are: Cisgender men Cisgender women
	'Field/1} who are: Cisgender men Cisgender women Transgender men

Within each race/ethnicity category, please share the number of people on the Prevention team in \${lm://Field/1} who are:

\bigcirc	Black/African American
\bigcirc	Hispanic/Latino
\bigcirc	American Indian/Alaska Native
\bigcirc	Asian
\bigcirc	Native Hawaiian/Pacific Islander
\bigcirc	White
\bigcirc	Two or more races
\bigcirc	Unknown
The foll	owing questions inquire about demographics of your organization's leadership team.
Within	each gender category, please share the number of people on the Leadership Team who are:
\bigcirc	Cisgender men
\bigcirc	Cisgender women
\bigcirc	Transgender men
\bigcirc	Transgender women
\bigcirc	Nonbinary
\bigcirc	Gender fluid
Is there	e a category you use to track employees' gender that we did not include here?
Ор	tional: Additional comments about gender of leadership team

The next set of questions are about the race and ethnicity of your organization's leadership. Please answer as best as you can with the number of people in each category

Within each race/ethnicity category, please share the number of people on the Leadership Team who are:

\bigcirc	Black/African American	
\bigcirc	Hispanic/Latino	
\bigcirc	American Indian/Alaska Native	
\bigcirc	Asian	
\bigcirc	Native Hawaiian/Pacific Islander	
\bigcirc	White	
\bigcirc	Two or more races	
\bigcirc	Unknown	
Optional : Additional Comments about Race/ethnicity of Leadership Team		

Are there other organizations you recommend we connect with that provide similar services in your county / region? Any lesser known organizations or people we should connect with?

Those are all of our questions for you today. Please press submit at the bottom of the page to finalize your survey

If you need to go back to edit questions, please press the back button. If you have any issues with the survey or need additional help, please reach out by contacting Katie Lenahan, project director, at <u>Lenahank@ohsu.edu</u>.

References

- 1. Alcohol and Drug Policy Commission. 2020-2025 Oregon Statewide Strategic Plan. 2020. https://www.oregon.gov/adpc/siteassets/pages/index/statewide%20strategic%20plan%20f inal%20(1).pdf
- Harm Reduction Coalition. Principles of harm reduction. National Harm Reduction Coalition. Accessed September 27, 2022. <u>https://harmreduction.org/about-us/principles-of-harm-reduction/</u>
- The Biden-Harris Administration's Statement of Drug Policy Priorities for Year One. Washington, DC: Executive Office of the President of the United States, National Office of Drug Control Policy; 2021. <u>https://www.whitehouse.gov/wp-</u> <u>content/uploads/2021/03/BidenHarris-Statement-of-Drug-Policy-Priorities-April-1.pdf</u>
- National Institute on Drug Abuse. Drug, brains, and behavior: The science of addiction. Published online 2020. Accessed September 26, 2022. <u>https://nida.nih.gov/publications/drugs-brains-behavior-science-addiction/treatment-recovery</u>
- 5. Substance Abuse and Mental Health Services Administration. *SAMHSA's Working Definition of Recovery*. Rockville, MD: US Department of Health and Human Services; 2012. Accessed September 26, 2022. <u>https://store.samhsa.gov/sites/default/files/d7/priv/pep12-recdef.pdf</u>
- 6. Substance Abuse and Mental Health Services Administration. Recovery and recovery support. Published 2022. Accessed September 26, 2022. <u>https://www.samhsa.gov/find-help/recovery</u>
- Global Life Partners. USA alcohol death rate by state. World Life Expectancy. Published 2021. Accessed September 26, 2022. <u>https://www.worldlifeexpectancy.com/usa/cause-ofdeath/alcohol/by-state/</u>
- Oregon Health Authority. Excessive alcohol use prevention. Published n.d. Accessed September 26, 2022. <u>https://www.oregon.gov/oha/PH/PREVENTIONWELLNESS/excessivealcoholuse/Pages/index.aspx</u>
- 9. Oregon Health Authority, Public Health Division. Alcohol related deaths, Oregon, 2010 to 2020. Published February 15, 2022. Accessed September 26, 2022. <u>https://visual-data.dhsoha.state.or.us/t/OHA/views/SHIP 15988995409180/dash17alcohol?iframeSizedT oWindow=true&%3Aembed=y&%3AshowAppBanner=false&%3Adisplay_count=no&%3Ash owVizHome=no&%3Aorigin=viz_share_link&%3Atoolbar=no</u>
- 10. Stewart T. *Overview of Motor Vehicle Crashes in 2020*. Washington, DC: National Highway Traffic Safety Administration; 2022. Report No. DOT HS 813 266.

- 11. Global Life Partners. USA drug use death rate by state. World Life Expectancy. Published 2021. Accessed September 26, 2022. <u>https://www.worldlifeexpectancy.com/usa/cause-of-death/drug-use/by-state/</u>
- 12. Oregon Health Authority, Public Health Division. *Opioids and the Ongoing Drug Overdose Crisis in Oregon: Report to the Legislature*. Portland, OR; 2022. This report fulfills the OHA annual reporting of opiate and opioid overdoses that ORS 432.141 requires. <u>https://sharedsystems.dhsoha.state.or.us/DHSForms/Served/le2479_22.pdf</u>
- Oregon Health Authority. Prescribing and drug overdose data dashboard. Published n.d. Accessed September 26, 2022. <u>https://www.oregon.gov/oha/ph/preventionwellness/substanceuse/opioids/pages/data.as</u> <u>px</u>
- 14. Oregon Health Authority. OHA sees 70% increase in Oregon drug overdose deaths during April, May. Published October 28, 2020. Accessed September 26, 2022. <u>https://www.oregon.gov/oha/ERD/Pages/OHA-sees-70-percent-increase-in-Oregon-opioid-deaths-during-April-May.aspx</u>
- 15. Mental Health and Addiction Certification Board of Oregon. *Oregon Data Extracted from the National Survey on Drug Use and Health, Released December 2021.* 2021. <u>https://mhacbo.org/media/2021_epidemiology.pdf</u>
- 16. Substance Abuse and Mental Health Services Administration. National Survey on Drug Use and Health. Rockville, MD: Center for Behavioral Health Statistics and Quality; 2021. Accessed September 26, 2022. <u>https://www.samhsa.gov/data/data-we-collect/nsduhnational-survey-drug-use-and-health</u>
- 17. Oregon Department of Corrections. *Quick Facts*. 2022. https://www.oregon.gov/doc/Documents/agency-quick-facts.pdf
- Oregon Health Authority. Oregon Tribal Behavioral Health Strategic Plan 2019 to 2024.
 2019. Accessed September 27, 2022. <u>https://www.oregon.gov/oha/HSD/AMH/docs/Tribal-BH-Strategic-Plan-2019-2024.pdf</u>
- 19. Green B, Lyerla R, Stroup D, Azofeifa A, High PM. A tool for assessing a community's capacity for substance abuse care. *Prev Chronic Dis*. 2016;13:57. doi:http://dx.doi.org/10.5888/pcd13.160190
- 20. Green B, Lyerla R, Stroup D, Jones K. *Calculating an Adequate System Tool: CAST Manual*. JG Research & Evaluation; 2018. <u>https://igresearch.org/wp-content/uploads/2018/06/cast-handbook-development-jg-research-evaluation-v1.pdf</u>
- 21. Substance Abuse and Mental Health Administration. National Survey on Drug Use and Health: About the survey. Published n.d. Accessed September 27, 2022. <u>https://nsduhweb.rti.org/respweb/about_nsduh.html</u>

- 22. American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders*: DSM-5. 5th ed. 2013.
- 23. Robinson SM, Adinoff B. The classification of substance use disorders: Historical, contextual, and conceptual considerations. *Behavioral Sciences*. 2016;6(3). doi:10.3390/bs6030018
- 24. Substance Abuse and Mental Health Administration. 2016-2018 National Survey on Drug Use and Health Substate Region Definitions. Center for Behavioral Health Statistics and Quality; 2020. Accessed September 27, 2022. <u>https://www.samhsa.gov/data/report/2016-2018-nsduh-substate-region-definitions</u>
- 25. Substance Abuse and Mental Health Administration. 2020 National Survey of Drug Use and Health (NSDUH) Releases. Accessed September 27, 2022. https://www.samhsa.gov/data/release/2020-national-survey-drug-use-and-health-nsduh-releases
- Substance Abuse and Mental Health Administration. 2018-2020 NSDUH Substate Region Definitions. Center for Behavioral Health Statistics and Quality; 2022. Accessed September 28, 2022. <u>https://www.samhsa.gov/data/report/2018-2020-nsduh-substate-regiondefinitions</u>
- 27. Substance Abuse and Mental Health Administration. 2018-2020 Substate Estimates of Substance Use and Mental Illness. Center for Behavioral Health Statistics and Quality; 2022. Accessed September 28, 2022. <u>https://www.samhsa.gov/data/report/2018-2020-substate-estimates-substance-use-and-mental-illness</u>
- Substance Abuse and Mental Health Administration. 2016-2018 Substate Estimates of Substance Use and Mental Health. Center for Behavioral Health Statistics and Quality; 2019. Accessed September 27, 2022. <u>https://www.samhsa.gov/data/report/2016-2018-substate-estimates-substance-use-and-mental-illness</u>
- 29. Substance Abuse and Mental Health Administration. 2020 National Survey on Drug Use and Health (NSDUH): Methodological Summary and Definitions. Center for Behavioral Health Statistics and Quality; 2021. Accessed September 27, 2022. https://www.samhsa.gov/data/sites/default/files/reports/rpt35330/2020NSDUHMethodSu mmDefs091721.pdf
- 30. Fitzgerald J, Schmidt M, Oregon Criminal Justice Commission. *Analysis of Oregon's Publicly Funded Substance Abuse Treatment System: Report and Findings for Senate Bill 1041.* Oregon Criminal Justice Commission; 2019. Accessed September 27, 2022. <u>https://www.oregon.gov/cjc/CJC%20Document%20Library/SB1041Report.pdf</u>
- 31. Pittman P, Chen C, Erikson C, et al. Health workforce for health equity. *Med Care*. 2021;59(Suppl 5):S405-S408. doi:10.1097/MLR.000000000001609

- 32. Oregon Health Authority. *Oregon Substance Use Disorder Services Directory*. Salem, OR: Health Services Division; 2022. Accessed September 27, 2022. https://www.oregon.gov/oha/HSD/AMH/docs/provider-directory.pdf
- 33. Green B, Kim F. Needs Assessment of the Missoula County Substance Use Care System. 2021. Accessed September 27, 2022. <u>https://www.missoulacounty.us/home/showpublisheddocument/76093/637733518156570</u> 000
- 34. Kunkel K. *New Mexico Substance Use Disorder Treatment Gap Analysis*. New Mexico, NM: New Mexico Department of Health; 2020. Accessed September 27, 2022. <u>https://www.nmhealth.org/publication/view/marketing/5596/</u>
- 35. Nevada Substance Abuse Prevention and Treatment Agency. *Regional Capacity Assessment Report: Washoe County 2019*. Carson City, NV: Division of Public and Behavioral Health; 2019. Accessed September 27, 2022. <u>https://dpbh.nv.gov/uploadedFiles/dpbhnvgov/content/Programs/ClinicalSAPTA/Washoe% 20CapAssess%20Final%20-%20REVISED.pdf</u>
- 36. US Census Bureau. 2020 Oregon Data. Published 2021. Accessed September 27, 2022. https://data.census.gov/cedsci/all?q=Oregon%202020
- 37. University of Wisconsin Population Health Institute. County health rankings & roadmaps. Accessed September 27, 2022. <u>https://www.countyhealthrankings.org/</u>
- 38. Oregon Liquor and Cannabis Commission. Liquor licensing. Published 2022. Accessed September 27, 2022. <u>https://www.oregon.gov/olcc/lic/Pages/licensing_activity.aspx</u>
- 39. Oregon Secretary of State. Oregon business registry: Active businesses county data. Published September 2, 2022. Accessed September 27, 2022. <u>https://data.oregon.gov/business/Active-Businesses-County-data/6g49-bcrm</u>
- 40. Mental Health and Addiction Certification Board of Oregon. MHACBO behavioral health workforce analytics - Addiction. Published 2020. Accessed September 27, 2022. https://mhacbo.org/en/mhacbo-behavioral-health-workforce-analytics-addiction/
- 41. Comagine Health, Oregon Health Authority. *Overdose-Related Services & Projects Summary by Oregon County*. 2022. Accessed September 27, 2022. <u>https://www.oregon.gov/oha/PH/PREVENTIONWELLNESS/SUBSTANCEUSE/OPIOIDS/Docu</u> <u>ments/CountyServiceSummary.pdf</u>
- 42. American Society of Addiction Medicine. About the ASAM Criteria. Published 2022. Accessed September 27, 2022. <u>https://www.asam.org/asam-criteria/about-the-asam-criteria</u>

- 43. Oregon Department of Environmental Quality. Safe drug disposal. Published 2022. Accessed September 27, 2022. <u>https://medtakebackoregon.org/</u>
- 44. Acevedo A, Panas L, Garnick D, et al. Disparities in the treatment of substance use disorders: Does where you live matter? *J Behav Health Serv Res.* 2018;45(4):533-549. doi:10.1007/s11414-018-9586-y
- 45. Moullin JC, Moore LA, Novins DK, Aarons GA. Attitudes towards evidence-based practice in substance use treatment programs serving American Indian Native communities. *J Behav Health Serv Res.* 2019;46(3):509-520. doi:10.1007/s11414-018-9643-6
- Green KE, Feinstein BA. Substance use in lesbian, gay, and bisexual populations: an update on empirical research and implications for treatment. *Psychol Addict Behav*. 2012;26(2):265-278. doi:10.1037/a0025424