



**BIG CITIES
HEALTH COALITION**

PUBLIC HEALTH WORKS | Preventing & Mitigating Harms from Substance Use

Big city health departments not only prevent and reduce harm from overdoses, but also improve health outcomes for people who use drugs.

They are among the first to detect emerging drug trends, identify inequities in fatal and non-fatal overdoses, pinpoint hot spots, fund and provide supportive services rooted in reducing harm to individuals using, hold systemwide convenings, and implement quality improvement initiatives.

Big city health departments are also the first to identify and respond to local impacts, working to mitigate the effect of overdose and other harmful effects of substance use, including disease transmission.

They pilot, implement, and test innovative strategies that are often copied in states and local communities across the country.

How big city health departments prevent and reduce harm from substance use



PREVENTION

- ▶ Invest in programs that prevent substance use disorders (SUDs) and their co-occurrence with other behavioral health and infectious disease conditions.
- ▶ Distribute naloxone and fentanyl test strips; offer drug checking services and other harm reduction activities.
- ▶ Follow up with non-fatal overdose survivors.



DATA

- ▶ Collect and disseminate mortality/morbidity and surveillance data, evaluations, local assessment and Overdose Fatality Reviews.
- ▶ Improve procedures to collect nonfatal overdose surveillance.



A Philadelphia Department of Public Health worker explains how to use the overdose reversal drug naloxone contained in a free pack distributed at a public library.



COMMUNITY INPUT AND EDUCATION

- ▶ Convene stakeholders and establish local task forces.
- ▶ Develop and execute community-wide education and stigma reduction campaigns.
- ▶ Amplify the voices of those with lived experience.



CROSS-SECTOR PLANNING, IMPLEMENTATION, AND EVALUATION

- ▶ Convene and lead cross-government planning.
- ▶ Implement cross-sector policies and interventions (e.g., naloxone distribution in shelters).
- ▶ Coordinate and engage with health care systems.
- ▶ Train and provide technical assistance to first responders.
- ▶ With governmental and non-governmental partners, evaluate the impact of local interventions.



POLICY, ADVOCACY, RESEARCH

- ▶ Advocate for evidence-informed policy that improves access to prevention, harm reduction, treatment, and recovery support services.
- ▶ Invest and participate in research to further understand SUD, risk factors for overdose, and evidence-based interventions to prevent or mitigate the effects of overdose.
- ▶ Support arrest deflection programs that promote linkage to treatment and harm reduction services and reduce repeated public safety engagement.



TREATMENT

- ▶ Expand health care providers' capacity to offer evidence-based screening, treatment, and recovery services.
- ▶ Provide health services to those with SUDs who are incarcerated, experiencing homelessness, and/or pregnant/new to parenting; connect the public at large to safety net and addiction treatment services as needed.
- ▶ Establish medication programs for opioid use disorder (MOUD) across a spectrum of need in populations that are most at risk.



The Street Medicine team at the San Francisco Department of Health provides outreach, engagement, and care – including overdose follow-up and medication for addiction treatment – for unsheltered people experiencing homelessness.

The Big Cities Health Coalition (BCHC) is a forum for the leaders of America's largest metropolitan health departments to exchange strategies and jointly address issues to promote and protect the health and safety of their residents. Collectively, BCHC's 35 member jurisdictions directly impact more than 61 million people, or one in five Americans.

For more information, contact **Chrissie Juliano** at juliano@bigcitieshealth.org

bigcitieshealth.org