

GETTING ORGANIZED ROAD MAP

COMMUNITIES THAT HEAL PHASE 2



In Phase 2, your community coalition will review and discuss the menu of evidence-based strategies and develop a process for selecting the strategies to be implemented. Your coalition will also consider whether you'd like to create a communications campaign to raise public awareness or understanding of your overdose reduction efforts. Finally, during this phase, your coalition will identify needs and gaps in knowledge that can be addressed by bringing in technical expertise and additional resources.

This set of Road Maps is designed for individuals working to address the opioid crisis, including community coalition members, treatment providers, recovery support specialists, policymakers, and those with lived and living experience. It aims to support the creation of new coalitions or the reimagining of existing ones to enhance prevention, treatment, harm reduction, and recovery efforts in their communities.

Table of Contents



3 **Key Terms and Definitions**
Communities That HEAL:
Definitions

4 **Overview**
Phase 2 Activities

Activity 2.1:
Discuss Opioid-Overdose
Reduction Continuum of Care
Approach (ORCCA) Menu
Options and Procedures for
Selecting Evidence-Based
Strategies

8 **Activity 2.2:**
Develop a Distribution Plan
for the Communications
Campaign

Key Terms and Definitions

| TERM | DEFINITION |
|---|---|
| The Communities That HEAL (CTH) Intervention | An intervention that collaborated with community coalitions to develop data-driven plans and implement evidence-based strategies—such as overdose education and naloxone distribution, medications for opioid use disorder, and safer prescribing—to reduce opioid overdose deaths. |
| Evidence-based strategies | Interventions that have been shown, through research and evaluation, to be effective in changing people’s knowledge, attitudes, and behaviors to improve social and health outcomes. |
| Intervention | In a research study, an intervention is when researchers introduce or apply a change—such as a treatment, program, or method—to observe how it affects the participants or outcomes. |
| <u>Medications for opioid use disorder (MOUD)</u> | Medications that are U.S. Food and Drug Administration (FDA)-approved for the treatment of opioid use disorder. They are often used in combination with counseling and other behavioral therapies and include buprenorphine, methadone, and naltrexone in different formulations. |
| Naloxone | A medication that can reverse an opioid-related overdose. It can be given as a nasal spray (Narcan®) or injected into the muscle, under the skin, or into the veins. |
| Opioid-Overdose Reduction Continuum of Care Approach (ORCCA) | A set of evidence-based strategies aimed at reducing overdose deaths. It is organized into three categories: opioid overdose education and naloxone distribution, medications for opioid use disorder, and safer prescribing practices. |
| <u>Overdose education and naloxone distribution (OEND)</u> | Overdose education programs train and empower people to recognize and administer naloxone to someone who they suspect may be overdosing. Overdose education programs can be coupled with naloxone distribution with the goal of making naloxone more accessible and available in communities. |
| Safer Disposal | In the ORCCA, safer disposal refers to strategies that encourage proper discarding of unused, expired, or unwanted opioid medications to prevent accidental poisoning. Safer disposal practices include drug take-back events, permanent drug drop kiosks, and take-home disposal mechanisms. |
| <u>Safer Prescribing</u> | In the ORCCA, safer prescribing refers to strategies that promote responsible and effective opioid prescribing practices. These include training prescribers and pharmacists to manage patients with chronic pain safely and providing education on opioid safety to healthcare professionals and patients. |



Overview

Phase 2 Activities

- Discuss ORCCA menu options and procedures for selecting evidence-based strategies.
- Develop a distribution plan for the communications campaign.

Activity 2.1: Discuss Opioid-Overdose Reduction Continuum of Care Approach (ORCCA) Menu Options and Procedures for Selecting Evidence-Based Strategies

Timeline: 1 month*



Coalitions will review the **ORCCA** to better understand the different types of strategies they might implement to reduce opioid overdose deaths. Strategies are organized under the three menus shown below.

1

Opioid overdose prevention education and naloxone distribution in higher risk populations

An icon consisting of five stylized human figures in green, arranged in a slightly curved line.

2

Effective delivery of MOUD treatment with outreach and delivery to higher risk populations

An icon showing three stylized human figures in purple, with a white upward-pointing arrow overlaid on them, symbolizing growth or progress.

3

Safer opioid prescribing and dispensing

An icon of a red-outlined rectangular box with a white plus sign inside, representing a medical or pharmacy setting.

* Timelines are estimates based on the HEALing Communities Study; please note that activities may take longer depending on the level of community support, local policies, and availability of resources.

Approach

The ORCCA consists of practices organized under three menus: OEND, MOUD, and safer prescribing. **The ORCCA Practice Guide** describes the practices in detail, including the evidence supporting the practice, real-world implementation examples, and key considerations for implementing the practice in your community. Your coalition should review and discuss the guide to make sure key members understand practice possibilities before determining which practices you will implement.

Download the ORCCA Practice Guide:

- On page 5, you will find the **Tips for Data-Driven Strategy Selection** chapter, which provides guidance for navigating the three ORCCA menus.
- On page 19, you will find the **Discussion Guide for Community Leaders** worksheet, which will help your coalition identify needs that may be addressed through practices within each of the three ORCCA menus.



1. The **Guide** complements the ORCCA menus by providing guidance on how to pursue your coalition's selected strategies.

The tools in the **Guide** may help the coalition develop a shared vision for identifying and implementing the best evidence-based strategies fit for their communities. It was developed for the [Substance Abuse and Mental Health Services Administration \(SAMHSA\) Technology Transfer Centers \(TTC\) program](#).

TIP: Include people who represent key organizations that provide services related to the three evidence-based strategies as coalition members because they can help inform and facilitate this work.

2. Train coalition members on evidence-based strategies (e.g., OEND, MOUD, and Safer Rx).

You must ensure that all the coalition members are educated and trained on each evidence-based strategy before moving on to the selection stage. Trainings should provide a basic understanding of treatment and evidence-based strategies before the in-depth discussions on the ORCCA menus and strategy selection.

You can find an adaptable presentation on the evidence-based strategies on the Phase 2 Resources on the [CTH webpage](#).

3. Once the coalition has reviewed the ORCCA and has a good understanding of the strategies within each menu, members should discuss how they will select the strategies for their community.
 - **Engage people who have living or lived experience.** The coalition will require the perspective of members with living or lived experience. In other words, you should involve people who use or have used opioids in the past, people who consider themselves living in recovery, or people who are receiving treatment for substance use disorder.



Engaging with high-risk populations:

- Individuals who use opioids
- Individuals who have had a prior opioid overdose
- Individuals with reduced opioid tolerance
- Individuals who have used other substances (e.g., alcohol, benzodiazepines, stimulants)
- Individuals with a major mental health or medical condition
- Individuals who inject drugs

- **Engage service areas and professionals who will be expected to act on the practices in the decision-making process.** To ensure your coalition is more effective in reducing opioid overdoses in your community, it is recommended that at least one of the three evidence-based strategies from the ORCCA menus are implemented within each of three sectors: health care, behavioral health, and the criminal legal system.

Tool 2: Potential Settings for Strategy Implementation

| SECTOR | SETTING |
|--------------------------|---|
| Behavioral Health | <ul style="list-style-type: none"> • Syringe service programs • Addiction treatment and recovery facilities • Mental/behavioral health treatment facilities • Homeless shelters • Recovery housing • Department of Community-Based Services • Domestic violence programs |
| Health Care | <ul style="list-style-type: none"> • Emergency departments • Health departments • Pharmacies • Primary care • Inpatient service center • Outpatient clinics • Ambulatory surgery • Dental clinics |
| Criminal Legal | <ul style="list-style-type: none"> • Jails and correctional facilities • Community supervision programs • Law enforcement • First responder stations • Pretrial services • Drug courts or other specialty courts |
| Community | <ul style="list-style-type: none"> • Media outlets • Chamber of Commerce • Barbershops and hair salons • Libraries • Colleges, universities, and trade schools • Religious organizations and houses of worship • Restaurants/bars • Gas stations |

- **Prioritize equity.** Coalitions should discuss approaches for promoting equal access to services and resources for Black, Hispanic, Indigenous, and other people of color and other groups experiencing high frequencies of substance use disorder or opioid overdose.



Activity 2.2: Develop a Distribution Plan for the Communications Campaign

Timeline: 3 months*

The CTH intervention also included a series of health communication campaigns developed within the communities themselves, aimed at promoting implementation of evidence-based strategies, increasing demand for OEND and MOUD, and reducing stigma toward people with opioid use disorder. This activity provides guidance on implementing this in your community.

Review the [HEALing Communities Study communication campaign materials](#) for your community.

The communications campaign objectives are to:

- **Reduce stigma.** Make your community a judgment-free zone that supports people with opioid use disorder throughout their recovery.
- **Encourage treatment.** Remove treatment barriers and improve access to care so people can get the help they need.
- **Provide naloxone to reverse opioid overdoses.** Save lives by stocking naloxone at your organization and training staff to use it in the event of an opioid overdose.

What is a communications campaign?

A communications campaign is a coordinated effort to build knowledge, shift attitudes, or encourage action in a specific audience by distributing carefully planned messages through media channels the audience uses frequently. Health communications campaigns use a variety of media channels, including digital advertising, social media, billboards, public service announcements, and news stories, to promote a health message.

*Timelines are estimates based on the HEALing Communities Study; please note that activities may take longer depending on the level of community support, local policies, and availability of resources

Approach

Once you have decided who needs the message—your priority groups or “audience”—your coalition should consider developing a plan for how you will disseminate the message. Each community will complete a [distribution plan](#) that outlines touchpoints and media channels that will reach your priority audience (e.g., community leaders, providers, and people with living or lived experience).

Ideally, distribution planning will commence 2 to 3 weeks before campaign distribution starts. Distribution plans are “living documents” that you should revisit and update throughout the campaign.

Step 1: Prepare for Distribution Planning

- Host a brainstorming session that includes a diversity of perspectives and experiences.
- Establish your coalition’s communication goals, objectives, and priority audience.
- Review promotional materials from other [communication campaigns](#).

Align Around Your Community’s Priority Objectives and Groups

Before you start brainstorming and drafting the specifics of your distribution plan, you will first want to ensure everyone aligns around your community’s priority objectives and audiences.

DISCUSSION QUESTIONS

Tip: Focus on what your group seeks to accomplish as a result of the community campaign. Avoid the temptation to talk about what you will do and how you will do it (those are tactics), and instead, talk about the change you want to accomplish (results).

- What communication efforts have been implemented in this community in the past or are planned? What can we learn and gain inspiration from to inform and influence individual and community decisions about reducing opioid overdose deaths and stigma or increasing demand for prevention, screening, treatment, and recovery services?
- What does success look like? How will the communication campaign increase community awareness and support for evidence-based strategies? Increase demand for OEND and MOUD? Increase treatment supports for individuals? Increase recovery supports for individuals? Reduce manifestations of stigma?
- How can we integrate and coordinate campaign activities with service providers (health care, criminal justice, and other settings) who prevent, screen for, treat, and support recovery from OUD?
- How can we integrate and coordinate with other opioid overdose interventions like efforts to increase access to and use of naloxone products for an opioid overdose?





Questions to facilitate brainstorming:

- How will we reach each of the three priority audiences? Consider key channels, touchpoints, openings, and messengers.
- What organizations or individuals should be engaged in distribution activities?
- What coalition or community resources might be particularly helpful in reaching different priority groups?
- What additional materials (other than those provided) would be useful or needed for the campaign?
- Where are the best communication channels to deliver campaign messages? What are the best places to distribute different types of campaign materials (e.g., print, digital)? For each priority group? For each topic?
- Who is in a position to help us increase access and availability of naloxone and MOUD? How can they help remove barriers and create opportunities that improve access? How can we reach them with campaign distribution?

Step 2: Collaborate to Develop Your Community's Distribution Plan

- Understand what distribution planning is and its goals and have some ideas for how it can be accomplished.
- Confirm with your coalition how distribution planning will be done for your community, who needs to be involved, and how often plans will be reviewed and discussed.

Step 3: Campaign Timeline and Calendar

Use a campaign calendar during distribution planning and as you review your progress. Think about how you can tie in key themes and events when distributing campaign materials, or how a national observance might provide another opportunity to distribute campaign messages.

[Campaign Playbook 4: How to Plan and Organize Your Communications Around Key Topics and Events](#) can provide your coalition with how to organize your community's activities using a campaign calendar.

A campaign calendar is a tool for planning and organizing communication activities around key topics and events over a specified period.

Start by establishing a core theme for each month, which will help you develop messages that build upon and reinforce one another. A campaign calendar can also highlight national, state, and local events—such as health observances, special activities, and holidays—ensuring your content remains fresh, timely, and relevant. Use this calendar during your distribution planning and when reviewing your progress.

A comprehensive set of eight topical campaign “playbooks” is available, offering practical guidance on all aspects of campaign implementation—from media and distribution planning to sustainability strategies. To explore these resources, including Campaign Playbook 4, visit [Communication Campaign Playbooks](#). These playbooks provide valuable tips to help ensure the success and longevity of your campaign efforts.

Step 4: Implement and Finalize Your Distribution Plan

- Share and approve your final distribution plan with your coalition.
- Monitor progress by continuing to review and revise your distribution on a regular basis (e.g., monthly).

As part of coalition activities, ensure a final communication distribution plan is reviewed and approved by your coalition. Schedule follow-up meetings/check-ins with your communication team to review progress and reflect on lessons learned, which will continually inform your next steps. This plan and related activities should be reviewed, updated, and expanded as the campaign evolves over its lifespan.

What's Next?

In Phase 3, you'll work together to create a custom profile and data dashboard for your community, which will guide the planning of community actions.

