

54 Meadow Street, 9th Floor • New Haven, Connecticut 06519 • 203-946-6999

Justin Elicker, Mayor • Maritza Bond, MPH, Director of Health

Executive Summary

New Haven has seen dramatic increases in drug overdoses each year. According to the US Census, with a population of over 130,000, New Haven is a racially and ethnically diverse city; 29% of residents are White non-Hispanic, 34% are Black or African American, and 31% are Hispanic/Latinx. Nearly 40% of residents are under 25 years of age, 50% are 25 to 64, and about 11% are 65 years and older. The percent of persons in poverty is 25%. The owner-occupied housing unit rate is 28% as compared to other CT cities: Hartford 25%, Bridgeport 42%, Waterbury 45%.¹

Since 2015, the number of fatal overdose deaths has more than quadrupled in New Haven from 26 to 118 in 2021, which is the highest number of fatalities of any town or city in Connecticut. From 2019 to 2021, overdose deaths increased by 123%. There were three times as many fatal overdoses for males than females in 2021. Overdose deaths in age groups 15-24, 35-44, 55-64 doubled, but ages 45-64 more than quintupled.

Most alarming though, are the increases in fatal overdoses among people of color. According to the CT Department of Public Health (DPH) of the fatal overdoses in 2019, 29 of the individuals were White, 14 Black, and 10 Hispanic/Latinx. In 2020, fatal overdoses in people who are Black and Hispanic doubled. In 2021, the number of fatal overdoses among people who are White remained the same as 2020 but it increased to 48 and 34 for people who are Black and Hispanic/Latinx, respectively, equaling a staggering 243% increase in fatal overdoses in people who are Black and 240% increase in fatal overdoses in people who are Hispanic/Latinx since 2019.²

Similarly, the Emergency Department (ED) visits recorded in EpiCenter, also show people of color experiencing the most significant increases in ED utilization. From 2019 to September 2022, the percent of ED visits for people who are White decreased from 47% to 37%, while ED visits for people who are Black have slowly increased from 26% to 34% and the rate for those who are Hispanic/Latinx increased from 24% to 30% in 2021 and 26% 2022. The Overdose Mapping and Application Program (ODMAP), which identifies overdoses by neighborhood, underscores these same trends: increased overdoses overall but especially in the lower income neighborhoods in New Haven, such as The Hill, Fair Haven, and Newhallville.

To accomplish the New Haven Health Department's (NHV Health) mission of ensuring and advocating for the health and well-being of all residents, it is essential to disclose the health disparities and social determinants that play an instrumental role in our everyday life. The opioid epidemic is no exception. NHV Health will provide and expand access to educational resources including anti-stigma trainings, media campaigns, and academic detailing, all with a focus on "at-risk" populations, which as the data indicates, are Black and Hispanic/Latinx males. NHV Health will engage shelters, substance abuse treatment centers, mental health services, and other



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service organizations whose clientele aligns with our targeted populations in our program. NHV Health currently have a gap in our ability to provide trainings and communications in Spanish. To address this identified need, our program will 1.5 FTE peer navigators and 1.0 FTE program manager.

Also, local service providers have contacted NHV Health seeking more harm reduction-related trainings for their staff, including but not limited to overdose prevention, stigma reduction against people who use drugs (PWUD), and trauma-informed care. The trainings will build upon their preexisting knowledge but will offer a deeper dive into the opioid public health emergency.

NHV Health will also continue to improve data collection, analysis, presentation, and sharing with the public and partners since as NHV Health utilizes data driven approaches to outreach. Increasing and expanding educational resources can help meet the needs of disproportionately impacted populations and lessen gaping health disparities and improve health equity. Reducing stigma will encourage PWUD find and accept support within their community.

Strategy and Approach

Surveillance and Data Sharing

Local Health Departments (LHDs) in Connecticut, including Milford Health Department, Waterbury Health Department, Quinnipiack Valley Health District and East Shore District Health Department, use ODMAP to provide ongoing surveillance of overdoses and to tailor prevention efforts for those disproportionately impacted by overdose. Although LHDs have consistent access to overdose data, there is an opportunity to share information more publicly. NHV Health's Epidemiologist I currently compiles county-wide ODMAP data to share select overdose information weekly with the public (while ensuring HIPAA compliance) using a PowerBI dashboard on the NHV HEALTH and ConnectGNH.org websites. NHV HEalth will also share the dashboard with other LHDs and community partners to include on their websites. The dashboard will include data such as:

- Number of overdoses
- Drugs suspected in overdoses
- Town with the highest number of overdoses
- Town with the highest percentage of overdoses (by population)
- Aggregated demographic information

Sharing this data can help the public to better understand the urgent nature of the public health emergency and to address the needs of marginalized demographic groups.

Additionally, NVH Health will continue its data sharing initiative with representatives from Milford Health Department, Waterbury Health Department, Quinnipiack Valley Health District and East Shore District Health Department. The group will continue meeting monthly to determine how to better share data and how to work together to react quickly to sudden increases



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in overdoses or novel trends. The goal is to have more coordinated, county-wide responses, to share best practices in prevention, and to improve surveillance.

Providers and Health Systems Support

To ensure that providers effectively manage their patients with pain, an academic detailing program (ADP) will be provided in the County utilizing the most recent provider guidelines from the CDC. The ADP will consist of three, in-person educational sessions taught by a peer naviagator that focus on helping prescribers/pharmacists make appropriate decisions about opioid prescribing, signs of substance use disorder (SUD), how to use the Connecticut Prescription Monitoring and Reporting System (CPMRS), and the importance of co-prescribing naloxone. The peer navigator will contact prescribers/pharmacists throughout the County to recruit participants.

Stigma Reduction

To combat stigma against PWUD, a training will be developed (in English and Spanish) that focuses on harm reduction, reducing stigma, and overdose prevention. The training will be presented in collaboration with partnering LHDs, community-based organizations, and service providers throughout the County to recruit participants from multiple levels of the social ecological model (PWUD, community members). Additionally, training sessions will be offered and tailored to applicable to public safety and first responders. The trianings will be recoreded and sent it to partner organizations and embed it within the NHV HEALTH website for anyone to view. This ensures that the program is sustainable and can continue to be used in the future.

Finally, NHV Health launch a bi-lingual communications campaign across the County to reduce stigma of opioid use disorder. The campaign will utilize online ads and social media, in addition to physical ads (e.g., billboards, newspaper ads) to reach as many people as possible.

Additionally, the training program will focus on reducing stigma by sharing positive stories of those with SUD and tips for supporting PWUD. A systematic review⁵ of studies by the British Columbia Mental Health and Addiction Services demonstrates that these are effective antistigma strategies.

Population of Focus

NHV Health's Academic Detailing Program (ADP) will target prescribers/pharmacists throughout the County. The training program will be available for all community members, but NHV Health will specifically recruit for PWUD and their families by partnering with service providers (e.g., treatment facilities, recovery programs, transitional housing) who will connect with their clients and staff. NHV Health regularly collaborate with local service providers and have earned their trust by providing naloxone trainings for clients and staff in the past.



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Additionally, NHV Health will tailor a version of our training for public safety and first responders as part of new-recruit training classes and/or professional development days. This program will enhance our training to cover more topics and allow us to train public safety and first responders throughout the County.

NHV Health will ensure that activities are reaching those disproportionately impacted by substance use and overdose by collaborating closely with our partners who work with those with SUD on a daily basis. They will help us identify participants for our trainings. Furtner, the trainings will be presented in both English and Spanish to reach Spanish-speaking residents. By utilizing real stories, people with SUD may relate more to the campaign and feel that there is hope for their future. Also, given that Black communities are disproportionately impacted by the increases in overdose deaths, it is critical to improve data sharing to ensure that this concerning trend is analyzed and prevention programs are tailored accordingly. Our data sharing initiative will improve data sharing and overall surveillance throughout the County.

The City of New Haven convenes a Harm Reduction Taskforce, which meets monthly. The Taskforce includes people with lived experience and those who represent harm reduction groups in the area. Their input was used to guide this proposal and will continue to seek ongoing input and feedback from them to inform our decisions. NHV Health also regularly engages Community Advisory Boards to make sure that all of our programs and communications are community-driven and incorporate community feedback.

NHV HEALTH ensures that all of our materials and communications adhere to Culturally and Linguistically Appropriate Services (CLAS) standards. New Haven Health Department will present our community trainings and our communications campaign in both English and Spanish to reach the maximum number of residents. New Haven Health Department will also use the communication materials, which includes real stories from PWUD and those with SUD.