

## New York SOR Initiatives

### Addressing Opioid and Stimulant Misuse & Use Disorders: The Impact of State Opioid Response (SOR) Grants

The Substance Abuse and Mental Health Services Administration (SAMHSA) administers the SOR grant program. SOR addresses the opioid overdose crisis by providing resources to states and territories to increase access to Federal Drug Administration-approved medications for opioid use disorder (MOUD) and to reduce unmet treatment needs and opioid-related overdose deaths with prevention, harm reduction, treatment, and recovery supports. In 2020, SOR expanded to support evidence-based services for stimulant misuse and use disorders (StUD), including cocaine and methamphetamine.

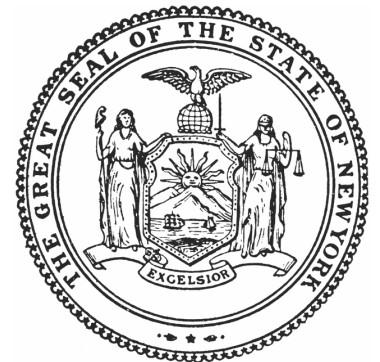
This brief was developed by the National Association of State Alcohol and Drug Abuse Directors (NASADAD) in collaboration with the Opioid Response Network (ORN) as part of a series of state reports intended to showcase initiatives across the continuum of care that states have implemented with SOR funds. The ORN is a SAMHSA-funded technical assistance and training center that works with states, health professionals, community organizations, the justice system, and individuals in all 50 states and nine territories to support efforts to address the opioid and stimulant crisis.



### Single State Agency (SSA): New York State (NYS) Office of Addiction Services and Supports (OASAS), Division of Grants Management and Special Projects

NYS OASAS has received \$231,489,551 in SOR funding from FY18 through FY23. For FY23–FY24, it received \$58,856,889.

OASAS has implemented a regional network approach to prevention, harm reduction, treatment, and recovery has given providers the opportunity to develop a regional network of care for opioid use disorder (OUD) and StUD through shared knowledge, identification of partnership opportunities, and the sharing or co-creation of programs. Networks have invested in regional initiatives aimed at improving data quality, promoting staff training/wellness, and developing shared referral systems using technology. Network providers formalized collaborations with memorandums of understanding, built new services together, and jointly pursued program funding opportunities.



Within each of the 13 regional networks, providers implemented prevention, harm reduction, treatment, and recovery services. For example, network providers:

- Deliver prevention evidence-based practices and strategies



- Provide harm reduction services, including targeted distribution of naloxone and fentanyl test strips, referrals to syringe service programs, and funding staff positions explicitly focused on harm reduction
- Provide evidence-based treatment, the most common being expanding MOUD access; providers also employ peers to improve treatment engagement and retention
- Deliver recovery services, including peer services, housing assistance, vocational support, medical and non-medical transportation, and services for the children and families of those in recovery; networks also invest in their recovery centers and youth clubhouses

Integration and support of the peer workforce is a focus across the regional networks. A majority of the recovery and treatment contracts through this initiative include funds to integrate peer positions into programs. Peer services are a central strategy toward meeting the larger regional objective of improving treatment initiation, engagement, and retention. Networks fund peer training and continuing education, cross-provider peer supervision, and peer wellness initiatives.

New York's SOR III overarching goals include having regional networks of care:

1. Address gaps in prevention services
2. Develop same-day MOUD
3. Provide evidence-based treatment
4. Integrate and support a peer workforce
5. Target populations within the criminal legal system
6. Expand and enhance services for youth and young adults (prevention, treatment, and recovery)
7. Expand access to family services
8. Integrate recovery services, with a focus on the peer workforce

### **Regional Network Approach (RNA) to Prevention, Harm Reduction, Treatment, and Recovery**

During the most recent one-year period, 2,695 individuals from diverse populations have been served through 14,058 encounters. Of all individuals served, 17% have a history of legal involvement, 11% are experiencing homelessness, 4% are adults over 64 years old, 2% identify as LGBTQIA+, 1% are veterans, and less than 1% each are pregnant, youth, undocumented, and identify as "X" gender.

## **Preventing Opioid and Stimulant Misuse Before It Starts**

New York has used SOR to support proper drug disposal efforts and implementing workplace training programs and a parenting and family skills training program.

### **Drug Deactivation System**

Drug deactivation pouches are a convenient, environmentally sound option for proper drug disposal. Under SOR, OASAS partners with providers across the continuum of care to distribute the pouches to their local communities. Additionally, OASAS partners with the NYS Office for the Aging, funeral homes, the NYS Department of Corrections and Community Supervision, local law enforcement, and local governmental units and municipalities to extend the reach of this prevention initiative.

Through 2023, OASAS has distributed 310,000 drug deactivation pouches to these partners, reaching at least one location in each of the state's 62 counties.

### Team Awareness

Team Awareness is a workplace training program that addresses behavioral risks associated with substance misuse among employees, their coworkers, and indirectly, their families. This program has been shown to increase employee help-seeking for troubled workers and supervisor responsiveness, enhance the work climate, and reduce problem drinking. These results are achieved by promoting social health, increasing communication between workers, improving knowledge and attitudes toward alcohol- and drug-related protective factors in the workplace (such as company policy or employee assistance programs), and increasing peer referral behaviors. Under SOR, Team Awareness has expanded to more than 15 counties.

### Strengthening Families Program (SFP)

SFP is a parenting and family skills training program that consists of 14 consecutive weekly skill-building sessions. Parents and children work separately in training sessions and then participate together in a session to practice the skills they learned earlier. Two booster sessions are available for use six months to one year after the primary course. Children's sessions concentrate on setting goals, dealing with stress and emotions, communication skills, responsible behavior, and how to handle peer pressure. Parent sessions focus on setting rules, nurturing, monitoring compliance, and applying appropriate discipline. SFP is delivered to families across the state in both urban and rural areas. Data show an increase in protective factors, including effective parent-child communication, positive family management practices, and supportive family involvement, all of which lead to reduced youth substance use.

### Teen Intervene (TI)

TI is an evidence-based practice for teenagers aged 12 to 19 experiencing mild to moderate problems associated with alcohol or other drug use. It is a comprehensive screening, brief intervention, and referral to treatment (SBIRT) model of care. TI integrates the Stages of Change Model, motivational interviewing (core), and cognitive behavioral therapy to help teens reduce and ultimately eliminate their substance use. Youth are initially screened using a simple and efficient questionnaire called the CRAFFT Questionnaire. The program is typically administered in three one-hour sessions, with each session conducted 10 days apart. The first two sessions occur one-on-one between the teen and the counselor, and parents are invited to participate in the third session to address issues as a family. TI has historically been implemented across the state in school settings. SOR has given providers across the state an opportunity to expand their referral base outside of school settings to many community-based locations.

## Overdose Reversal Efforts: Saving Lives

New York uses several mechanisms to reduce overdoses, including overdose reversal agent distribution and education.

### Opioid Overdose Training and Naloxone Distribution

Opioid overdose prevention trainers train and provide naloxone kits to stakeholder groups across the state. During the most recent one-year period, 5,155 individuals were trained, reaching people in 61 of the 62 NYS counties. Additionally, 6,354 kits were distributed as part of the training.

During the most recent one-year period, 32,527 naloxone kits, 3,261,420 fentanyl test strips, and 2,637,320 xylazine test strips were shipped to New Yorkers through the ordering portal.

### **OASAS Harm Reduction Supply Portal**

OASAS created an online portal through which individuals and OASAS and OMH providers can order harm reduction supplies (e.g., naloxone kits, fentanyl test strips, and xylazine test strips). OASAS collaborates with two harm reduction community-based organizations to fulfill orders at no charge.

### **Harm Reduction Supply Vending Machines**

Twelve harm reduction supply vending machines were installed in locations throughout the state. In 2024, 414 naloxone kits, 1,390 xylazine test strips, and 2,090 fentanyl test strips were dispensed through them.

### **Information Awareness**

Across the state, each regional network shares information on local naloxone trainings, services available across the continuum, and connections to events such as National Overdose Awareness Day, a day to honor and reflect on people who have died of overdose and celebrate people who dedicate themselves to harm reduction and saving lives.

## **Implementing Harm Reduction Strategies**

New York has used SOR to support allowable harm reduction strategies.

### **Mobile Overdose Prevention Services**

Peers conduct “On-the-Spot” mobile street outreach in high-risk areas, such as churches and liquor and corner stores, providing naloxone and fentanyl test strip trainings, COVID-19 test kits, face masks, hand sanitizer, and sexual health resources. This project serves all populations and age groups, and when needed, staff refer individuals to treatment services. Part of the project’s success has been training peers to interact with people across all lifestyles and to prepare and pack harm reduction supplies in a safe and compact manner.

### **Overdose Prevention and Education**

In the Coordinated Behavioral Health Services Network (the Mid-Hudson region of NYS), SOR has expanded access to drug test kits for populations, including individuals who have experienced overdose, those who use opioids, families and friends of those who use, school staff, individuals who have a drug-related interaction with police, and the re-entry population. Additionally, peers provide education on emergency response and Good Samaritan laws while setting up and servicing emergency naloxone “public access cabinets.”

### **Community Harm Reduction**

In the Citywide Addiction Support Network (the NYC region), a provider collaborates with local organizations, including healthcare providers, law enforcement, and community-based organizations, to deliver:

- Safer substance use education and peer outreach
- Naloxone and fentanyl test strips, as well as harm reduction supplies like wound care and hygiene kits
- Support for treatment and recovery, including access to MOUD and peer support services
- Outreach to at-risk populations, such as people experiencing homelessness and those involved in the criminal justice system

## Increasing Access to Treatment

New York has used SOR to enhance access to OUD treatment, including deploying mobile medication units, increasing access to addiction specialists, establishing a 24/7 hotline, expanding crisis intervention programming, and offering transportation to access treatment services.

### Mobile Medication Units (MMU)

Two MMUs were implemented in New York City. Each MMU has trained medical staff who dispense methadone according to prescribed doses and monitor patients for any adverse effects. Through counseling and medical services, MMUs address not only the physical aspect of addiction but also the psychological and social factors that contribute to OUD. MMUs provide comprehensive services, including medical assessments, counseling, referrals to other social services, and support for co-occurring health conditions.

### New York City Health + Hospital Corp “ExpressCare Behavioral Health”

Within New York City Health + Hospital emergency departments, social workers and peers provide brief interventions, assessments, and navigation to treatment post-discharge for patients with substance use disorder (SUD). This increases access to addiction specialists for consultation and referral across three NYC boroughs, both virtually and in-person. The ExpressCare nurse practitioners provide consultations to the emergency department for patients regarding MOUD. Additionally, they see patients in an outpatient setting who require “bridging,” or temporary treatment, until they can be navigated to a maintenance treatment provider. In addition to relieving administrative burdens, ExpressCare enables faster access to care and a person-centered approach.

### 24/7, 365 COAST Hotline

As part of the Capital Behavioral Health Network, the main goal of the COAST Hotline is to connect individuals who call with rapid access (within 24 hours of referral to a regional partner) to low-threshold buprenorphine services, including a clinical assessment and prescription. A secondary goal involves leveraging harm reduction case managers who work with local re-entry programs, including treatment courts and diversion programs, to identify individuals who have recently been released or are vulnerable and in need of MOUD access and support. Harm reduction resources are made available as needed. The hotline connects individuals with peer navigators who link them to other peers across the network based on geography or the desired needs of the caller.

### Expansion of Sherpa Program

This Suffolk-Nassau County peer-led care coordination crisis intervention program assists individuals at risk of overdose and/or family members in navigating and overcoming barriers related to accessing services. Care coordinators assist individuals in connecting to appropriate levels of care and service providers. The program aids individuals and families in overcoming social determinants of health and increasing successful MOUD induction and maintenance, as well as achieving successful treatment outcomes and reducing relapse and overdose rates.



### Non-Medical Transportation

In the Upstate New York Integrated Care Network (which covers parts of the Finger Lakes and Southern Tier regions), five regional partners have expanded access to treatment services by offering transportation services across their rural counties. Funded partners either employ a full-time driver to transport clients to their appointments or provide bus passes, Uber or Lyft rides, and taxi services.

## Supporting Long-Term Recovery

New York has used SOR to assist individuals in recovery by providing peer support trainings and services.

### Peer Recovery Coaching and Ethics Training Program

A NYC-based training program was created to increase access to peer support. Individuals receive information on the role of a peer, credentialing details, job placement opportunities, and best practices in competency. The program also supports peer coach training graduates in obtaining their CRPA provisional certification. To date, six trainings have been delivered, reaching over 200 individuals.

### Recovery Community and Outreach Centers (RCOC)

Fifteen RCOCs provide a community-based, non-clinical setting that is safe, welcoming, and alcohol- and drug-free for the whole community. The centers promote long-term recovery through skill-building, recreation, employment readiness, and the opportunity to connect with peers who are going through similar challenges. They also offer health, wellness, and other critical supports to individuals and families in recovery from SUD or seeking recovery. During FY23, RCOCs provided recovery peer support or peer support group services to 4,099 unique individuals.

### Workforce Training Center

The Workforce Training Center is designed to improve support for individuals to obtain training certification, work experience, mentorship, and support in securing and maintaining employment as a peer.

Activities include:

- Certified lead peer mentors and trainers conducting regional outreach to link individuals to care while mentoring peers in the process
- Free peer trainings, including recertification
- Peer internships for individuals progressing through certification
- Peer trainings offered in in-person, hybrid, and virtual formats
- Mentorship programs for employed peers



## Reaching & Serving Populations of Focus

New York has identified several subpopulations for targeted initiatives: pregnant and parenting women, youth and young adults, LGBTQIA+ populations, people experiencing homelessness, people in criminal justice settings, veterans, and undocumented populations.

### Justice-Involved Peer Program

This peer program was funded to address significant challenges upon reentry into the community from the criminal legal system. A peer with lived experience in the justice system delivers services to improve individuals' access to recovery and a better quality of life. They do this by promoting recovery, removing barriers, connecting individuals with community recovery supports, and encouraging healthy living. Working with individuals who are completing their sentences, on probation, or recently involved with the system, a peer provides support services in the form of recovery coaching sessions, assistance with employment (including developing interview skills and workplace etiquette), and access to personal recovery-based activities (such as developing a relapse prevention plan, recovery wellness plan, and understanding triggers).

### Recovery Community and Outreach Centers (RCOCs)

RCOC work includes activities to:

- Train recovery staff to be trauma-informed and knowledgeable about common mental health issues
- Work directly with specific vulnerable populations, including veterans and individuals recently released from incarceration
- Provide transportation to link individuals in recovery to criminal justice, child welfare, mental health, hospital/medical, prevention, or treatment services and facilities via RideHealth when all other transportation options are not available



**About the Opioid Response Network (ORN):** ORN is a group of diverse individuals and organizations working collaboratively to address the opioid and stimulant crisis. Funded by SAMHSA's SOR/Tribal Opioid Response (TOR) Technical Assistance (TA) grant, ORN works with states, health professionals, community organizations, the justice system, and individuals in all 50 states and nine territories to provide education and training. **Visit the ORN website [here](#) or request training or TA [here](#).**

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