

State Harm Reduction Initiatives to Address the Opioid Crisis

2024 State Opioid Response (SOR) Grant Issue Brief

Background and Overview

The State Opioid Response (SOR) grant is administered by the Substance Abuse and Mental Health Services Administration (SAMHSA) to provide resources to states to address opioid misuse, opioid use disorder (OUD), and the opioid overdose crisis. States and territories can use SOR funds to increase access to Federal Drug Administration-approved medications for opioid use disorder (MOUD) and the continuum of care for opioid and stimulant misuse and use disorders (StUD).



This issue brief provides a summary of the states' harm reduction initiatives to address the opioid crisis. These initiatives aim to meet individuals where they are, promoting health and well-being through pragmatic, evidence-based approaches. The final section of the brief highlights examples of innovative state harm reduction initiatives.

Most Common Harm Reduction Initiatives Implemented by States with SOR Funds

The National Association of State Alcohol and Drug Abuse Directors (NASADAD) conducted an analysis of 2023 SOR-funded harm reduction initiatives. The analysis revealed nine commonly implemented harm reduction initiatives by the Single State Agencies (SSAs) for alcohol and drugs that administer the SOR Grants. The chart below provides a summary of these initiatives.

| Initiative | Summary | Number of State/Territorial Initiatives |
|-------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|
| Naloxone Training and Distribution | Naloxone distribution was the most common harm reduction service provided across states. Many states have various programs to provide naloxone through direct distribution, vending machines, or mail-order services. States also implement educational campaigns focused on overdose prevention, proper naloxone use, and the dangers of substances like fentanyl. | 51 |

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| Fentanyl Test Strips (FTS) | Fentanyl test strips are distributed by states to help prevent fatal overdoses caused by fentanyl-contaminated drugs. | 48 |
| Syringe Service Programs (SSPs) | States fund SSP to provide: <ul style="list-style-type: none"> • Education about overdose prevention • Screening, testing, and referral to treatment for viral hepatitis and HIV • Abscess and wound care • Naloxone distribution and education • Referral to substance use disorder (SUD) treatment and other medical services | 34 |
| Infectious Disease Testing | Many states include infectious disease testing, such as HIV and HCV, as part of their harm reduction services, particularly in SSPs and outreach programs, to reduce the spread of these infections among people who use drugs. | 28 |
| Mobile Health Units | States fund mobile health units that travel to underserved or rural areas to provide harm reduction services, such as naloxone distribution, and testing for infectious diseases like HIV and HCV. | 14 |
| Xylazine Test Strips (XTS) | Xylazine test strips detect the presence of xylazine, a veterinary tranquilizer that has increasingly been found in the illicit drug supply, particularly in combination with opioids like fentanyl. Several states fund these test strips to help identify xylazine that is mixed with opioids. | 10 |
| Harm Reduction Vending Machines | Vending machines dispense harm reduction supplies such as naloxone and fentanyl test strips. States fund their placement in easily accessible public locations to provide anonymous, low-barrier access to these resources. | 9 |
| Wound Care Kits and Education | States provide wound care kits and educational resources, especially in response to the rise of xylazine-related wounds. These kits help individuals care for injection-related wounds and prevent infections. | 9 |

Summary of Harm Reduction Initiatives

Harm reduction approaches are critical to addressing the opioid crisis in the United States, with a variety of strategies implemented by states to reduce the harms associated with substance misuse. The most widely adopted strategy is **naloxone training and distribution**, a life-saving medication that can reverse opioid overdoses. All states reported distributing naloxone through various channels, including direct distribution, vending machines, and mail-order services. Alongside naloxone, many states have also disseminated **fentanyl test strips**, a tool that allows individuals to test substances for the presence of fentanyl, thereby reducing the risk of fatal overdoses. Fentanyl test strips are now available in at least 48 states, underscoring their importance in harm reduction efforts.

Syringe service programs are another key harm reduction strategy, with at least 34 states reporting funding of these programs. SSPs are community prevention programs that provide a range of services that prevent the spread of disease and protect communities. These programs often offer naloxone distribution, education, wound care, infectious disease testing, and referral to treatment, making them a comprehensive approach to harm reduction. Other harm reduction services include **infectious disease testing**, available in at least 28 states, which helps identify and manage conditions like HIV and HCV among individuals who misuse substances.

Additionally, **mobile health units** have been deployed in 14 states to reach underserved or rural populations. These units offer a range of harm reduction services, including naloxone distribution, and testing for infectious diseases, making healthcare more accessible to those in need. States have begun distributing **xylazine test strips** to help identify the presence of xylazine when mixed with opioids. These test strips are available in at least 10 states, aiming to reduce overdoses and health complications associated with the drug, which is increasingly being found in illicit opioid mixtures across the U.S.

Some states have also implemented innovative distribution approaches, such as **harm reduction vending machines**, which were reported in at least nine states. These machines dispense harm reduction supplies, including naloxone, fentanyl test strips, and provide a low-barrier access point for individuals who might otherwise struggle to obtain these resources. Additionally, **wound care kits and education**, reported by five states, address the physical harms associated with drug use, especially with the increase in xylazine-related wounds. These kits often include sterile supplies and instructions to treat and prevent infections and injuries. These diverse approaches highlight the multifaceted efforts states are making to reduce the harms of substance misuse, enhance individual health, and save lives.

Selected Examples of State Harm Reduction Initiatives

Naloxone Training and Distribution

Louisiana's Harm Reduction Hub, developed through the LaSOR 3.0 initiative, operates as a hub-and-spoke model in collaboration with the Louisiana Department of Health's (LDH) Office of Public Health (OPH). This model is designed to increase the accessibility and distribution of harm reduction materials throughout the state, with a primary focus on naloxone. The core

component of this model is a centralized distribution site, referred to as the "hub." The hub serves as an online portal where organizations across the state can request essential harm reduction products, report distribution data, and access educational resources and training related to overdose prevention and harm reduction practices. The products available through the portal include naloxone kits, fentanyl testing strips, safe storage and disposal materials, NaloxBoxes (community-based boxes that hold naloxone kits for public use), and naloxone vending machines.

Local organizations, referred to as the "spokes," register through the hub to become distribution sites. These organizations are typically community-based entities, such as non-profits, health clinics, or local government agencies, which are strategically located in areas of the state where harm reduction materials are most needed. OPH plays a vital role in this model by conducting outreach and engaging community partners to encourage them to become part of the distribution network. Each organization that becomes a distribution site is required to complete training on how to properly distribute naloxone and educate the community on its use. This training ensures that the distribution of naloxone and other harm reduction materials is done safely and effectively.

Through the SOR initiative, over 100,000 naloxone kits and 43,000 fentanyl test strips have been distributed, and around 64,000 individuals have been trained in naloxone use, leading to more than 4,900 reported overdose reversals.

Syringe Service Programs

The Michigan Department of Health and Human Services, through its Behavioral and Physical Health and Aging Services Administration, oversees SSPs that deliver harm reduction resources and education to individuals who use substances. SSPs offer a range of essential services, including health education on safe drug use, overdose prevention, and naloxone distribution to combat opioid overdoses. They also provide access to substance use disorder (SUD) treatment and recovery services, conduct testing for infectious diseases like HIV and HCV, and offer wound care and medical services for issues related to drug use. Michigan has 103 SSP locations across 58 of its 83 counties, reflecting a widespread commitment to harm reduction throughout the state.

In 2023, SSPs in Michigan distributed approximately 45,000 doses of naloxone—leading to over 1,200 opioid overdose reversals—conducted over 20,000 tests for HIV and HCV and referred nearly 10,000 individuals to substance use treatment services.

Infectious Diseases Testing and Peer Support

The Oregon Health Authority Behavioral Health Division's PRIME+ (Peer Recovery Initiated in Medical Establishments + Infectious Disease Testing and Linkage to Treatment) is a comprehensive program aimed at tackling the combined challenges of SUDs, overdoses, and infectious diseases like HIV and hepatitis C. The model integrates peer recovery support within several settings, provides testing for these infections, and facilitates connections to appropriate treatment and care. The program leverages the unique insights and experiences of peer mentors who engage individuals.

Peer mentors play a crucial role, acting as a bridge between vulnerable populations and the healthcare system. To further enhance its impact, the program has expanded its outreach and engagement efforts, targeting medical settings, shelters, and community spaces where individuals struggling with substance use and infectious diseases are most likely to be found. The key elements of PRIME+ include:

- **Linkage to Treatment:** Peers help individuals navigate the healthcare system, connecting them to SUD treatment, testing and treatment for HCV and HIV, and access to primary care.
- **Harm Reduction and Overdose Prevention:** Peer mentors use a harm reduction framework to meet people where they are. This includes providing education on safer substance use practices and distributing tools such as naloxone, fentanyl testing strips, and other overdose prevention materials.
- **Recovery Support:** Beyond immediate medical care and harm reduction, PRIME+ offers ongoing recovery support. Peer mentors are trained to guide individuals through the recovery process, helping them build sustainable recovery paths and connect with community resources.

PRIME+ is a critical component of Oregon's broader strategy to address the ongoing opioid epidemic and related substance use and infectious diseases. As of 2023, the PRIME+ program has provided peer-based harm reduction support to more than 3,400 individuals who use drugs across 23 sites in 20 counties.

Mobile Health Units

The Virginia Department of Behavioral Health and Developmental Services funds mobile harm reduction services through mobile SUD treatment units managed by community mental health agencies. Funded by the SOR grant, these mobile units are deployed to underserved and high-risk populations, particularly in rural and remote areas with limited access to traditional healthcare. The program specifically targets groups most likely to benefit from harm reduction services, including individuals experiencing homelessness, recently incarcerated persons, people who misuse substances, and communities with high overdose rates. Each unit is equipped with essential resources such as naloxone, fentanyl and xylazine test strips, and referrals for HIV testing to help prevent the spread of infectious diseases. Additionally, the mobile units provide medical and dental care to individuals who may otherwise lack access to such services.

Through 2023, the mobile units have reached more than 30 underserved communities across Virginia, reversed over 500 overdoses with naloxone, and conducted health screenings for about 2,500 individuals, resulting in nearly 1,200 referrals to SUD treatment and other health services.

The success of Virginia's mobile units has relied on partnerships with local organizations, including faith-based groups, local jails, libraries, community colleges, free clinics, and health departments. These collaborations enhance outreach and provide trusted, accessible locations for engaging with at-risk individuals and connecting them to necessary health services and longer-term care.



Harm Reduction Vending Machines

The Idaho Department of Health and Welfare, Division of Behavioral Health has implemented Harm Reduction Vending Machines (HRVMs) providing a unique model for dispensing harm reduction supplies. Modeled after traditional coin-operated vending machines, HRVMs offer essential items such as hepatitis C test kits, condoms, and naloxone. In July 2021, Idaho became the second state in the U.S. to deploy HRVMs. Under SOR III, funds have facilitated the installation of additional HRVMs across Idaho, increasing their total number to approximately 10 machines statewide. This expansion aims to enhance accessibility to harm reduction supplies in more communities, particularly in underserved or high-risk areas. These funds not only facilitated the purchase and installation of the machines but also covered the salaries of staff members who assist users with operating the machines and connect them to treatment and recovery support.

Since their expanded deployment, the HRVMs have distributed over 2,000 doses of naloxone and, along with tens of thousands of other harm reduction supplies like test kits.



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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