

NEW YORK / NEW JERSEY HIDTA HIGH INTENSITY DRUG TRAFFICKING AREA

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Dear Ms. Wolff:

The Overdose Response Strategy (ORS) is investigating how to improve overdose prevention interventions for people experiencing homelessness in response to reports from local partners that overdose deaths among this population have increased sharply. Such reports are backed by evidence. In Boston, for example, the overdose mortality rate among people experiencing homelessness more than doubled between 2004 and 2018. In Los Angeles, overdose mortality increased suddenly from 2016 to 2019, making overdose the leading cause of death among people experiencing homelessness in Los Angeles County in 2017. In San Francisco, in 2020, there were more than twice the number of deaths than in previous years, with most deaths associated with overdose. As these data suggest, current approaches for preventing overdose may not be reaching all groups. More tailored interventions are urgently needed. Given the high contact that public safety has with people experiencing homelessness, the ORS has a critical role to play in helping identify and facilitate access to interventions that better address the needs of this population.

We are requesting technical assistance from your team and others at the Centers for Disease Control and Prevention to assist the ORS with investigating the availability and reach of overdose prevention interventions specifically designed for people experiencing homelessness. This investigation will include different data collection activities that are still being finalized. The primary goal of the investigation will be the identification of tailored interventions for

people experience homelessness that can be scaled up nationally, in addition to best and promising practices that other interventions can adopt. Secondary goals will include (1) the development of recommendations for improving patrol officer interactions with people experiencing homelessness and the ability of officers to connect individuals with appropriate interventions and (2) a deeper understanding of the relationship between overdose and homelessness to further inform prevention efforts. The ORS does not currently have capacity to design and coordinate the data collection activities necessary to meet these goals. However, ORS teams across the U.S. will assist by collecting the information. The ORS will retain ownership of the data collected.

Thank you for your consideration.

Sincerely,

Chair

ORS Executive Committee

Director

New York/New Jersey HIDTA