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Understanding Addiction, Overdose Risk and Prevention: Practical Strategies for Justice Professionals

Funded by the Office of National Drug Control Policy and the Centers for Disease Control and Prevention

SHARE & CONNECT • COLLABORATE • INFORM & PROMOTE • HELP & IMPLEMENT

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Overdose Response Strategy

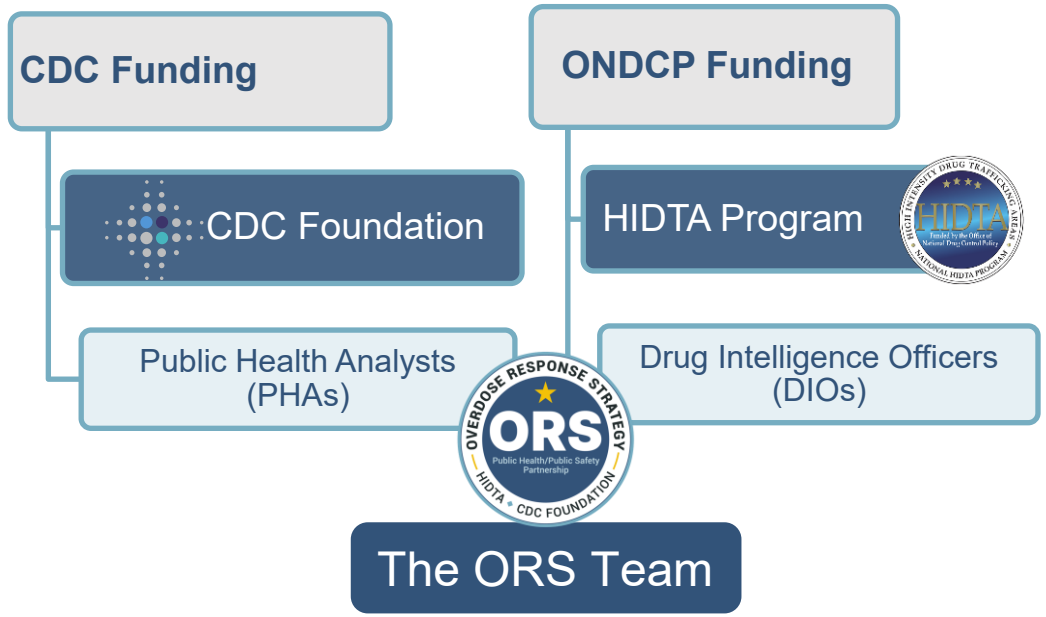
The ORS is a nationally coordinated, cross-sector collaboration between public health and public safety.

The mission of the ORS is to **help communities reduce fatal and non-fatal drug overdoses** by connecting public health and public safety agencies, through sharing information and effective strategies.

Connect

1. Go to www.orsprogram.org

2. Visit **"ORS Interactive Teams Map"** for team contact info



The ORS is implemented by 61 teams of DIOs and PHAs covering all 50 states, D.C., Puerto Rico and the U.S. Virgin Islands.

ORS Teams

PUBLIC HEALTH ANALYSTS

- Strategically embedded within agencies such as health departments, fusion centers, medical examiners' offices, universities and HIDTA Investigative Support Centers
- Enhance overdose reporting systems and increase interagency collaboration
- Develop relevant products to inform action and effective responses
- Facilitate rapid response strategies among key stakeholders during overdose events
- Support the evaluation of effective strategies

DRUG INTELLIGENCE OFFICERS

- Assigned to the HIDTA or to a fusion center in their state
- Mobilize public safety partners alongside the PHA to facilitate cross-sector work
- Fill a critical gap in intelligence sharing by reporting cross-jurisdictional links
- Leverage the DIO nationwide network to support information sharing on drug trafficking trends
- Notifications when local residents are arrested on felony drug charges in other parts of the state or country

ORS Teams

GUIDE

CONNECTOR

BRIDGE

TRANSLATOR

DIPLOMAT

THE OVERDOSE RESPONSE STRATEGY (ORS)

PUBLIC HEALTH | PUBLIC SAFETY | PARTNERSHIP

The **mission** of the ORS is to help communities **reduce fatal and non-fatal drug overdoses**. The ORS carries out this mission by using **four strategies** designed to strengthen community capacity to prevent fatal and non-fatal overdoses and facilitate access to treatment and long-term recovery support.

ORS STRATEGIES

SHARE & CONNECT

Expand access and quality of cross-sector data, insights and trends to inform a coordinated response to the overdose crisis.

COLLABORATE

Build sustained cross-sector coordination and collaboration to enhance overdose prevention and response efforts.

INFORM & PROMOTE

Educate and train community members and partners on effective overdose prevention, treatment and recovery strategies.

HELP & IMPLEMENT

Help partners implement, improve and expand access to effective overdose prevention, treatment and recovery support services.

Community members and partners report greater awareness, improved skills and a stronger commitment to respond to and prevent overdoses.

Public health and public safety collaborate effectively to respond to and prevent overdoses.

COMMUNITIES ARE BETTER EQUIPPED TO PREVENT FATAL AND NON-FATAL OVERDOSES

and facilitate access to treatment and long-term recovery support.

REDUCE FATAL AND NON-FATAL OVERDOSES

October 2025

SHARE AND CONNECT cross-sector data to drive coordinated overdose response

Maintain or improve the functionality (e.g., access, timeliness, accuracy or content) of existing data systems or create new data systems **to meet an identified need**

Develop, design or disseminate **data briefs, reports, presentations, visualizations or bulletins on drug trends and emerging threats**

Disseminate **intelligence on interdiction** and **drug trafficking patterns/trends**

COLLABORATE across sectors to improve overdose prevention and response

Facilitate **cross-sector partnerships** for the purposes of leveraging or optimizing resources

Support the development or implementation of **multi-sector teams, taskforces or workgroups**

Develop, test and refine multi-sector **rapid response or spike response plans**

INFORM AND PROMOTE overdose awareness to equip communities and partners

Support the dissemination of **communication campaigns and informational materials**

Develop or deliver trainings to **partners or community members**

Host or participate in **community events** that support overdose prevention, treatment or recovery awareness

HELP AND IMPLEMENT solutions to strengthen overdose prevention efforts

Support partners in developing protocols and strategies for **implementing effective interventions**

Assist partners in implementing programs for intended audiences and **communities at increased risk of overdose**

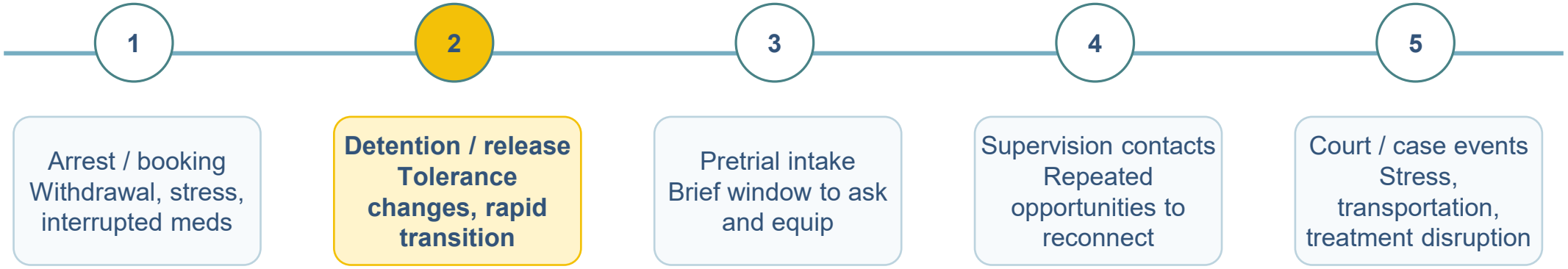
Provide technical assistance to support monitoring program impact and the implementation of effective strategies

Understanding Addiction, Overdose Risk and Prevention for Pretrial Services

Why pretrial is a high-leverage overdose prevention point

Arrest, release, supervision and reentry are moments when risk can change quickly.

Pretrial services may be one of the first structured community contacts after arrest, booking, detention, release or disruption in treatment.



Source: Binswanger et al., NEJM; Merrall et al., Addiction; CSG/BJA Reentry Primer; CDC Linkage to Care.

Addiction is treatable; Overdose risk is dynamic

Use risk information to trigger support and connection, not punishment.

Addiction Science

- Chronic, treatable health condition
- Return to use can be part of the condition
- Treatment and recovery support improve outcomes

Overdose Risk

- Lower tolerance after detention or abstinence
- Interrupted Medication for Opioid Use Disorder (MOUD) or treatment
- Recent nonfatal overdose or withdrawal

Justice Transitions

- Arrest, release, court stress, supervision changes
- Housing, phone, transport and ID barriers
- Rapid changes in drug supply and exposure

Ask: What changed since the last contact?

Then respond with a safety action: naloxone, MOUD connection, overdose plan, warm handoff or partner coordination.

What works best for overdose prevention?

Five evidence-based levers pretrial services can integrate, trigger or support during high-risk transitions

EQUIP	CONNECT	PLAN	NAVIGATE	COORDINATE
Naloxone and overdose response	**MOUD continuity and access**	**Overdose safety planning**	**Warm handoffs and peer support**	**Data and community partnerships**

Implementation test: Is it routine, easy, nonpunitive and connected to a partner?

Strategy 1: Make naloxone routine, normalized and easy to access

The goal is not one-time awareness. The goal is naloxone where overdose may happen.

1	2	3	4	5
Offer at intake, release, court or check-in	**Train** recognize overdose and respond	**Place** With client, family, peers, staff	**Refill** replace used, lost or expired kits	**Document** process measure - not a sanction

Pretrial practice moves

- Keep a standard script: "We offer naloxone to everyone because overdose can happen quickly and naloxone can save a life."
- Build naloxone into intake, release, check-in and family/support conversations.
- Track offers, kits, refills and barriers to access.

Source: CDC Lifesaving Naloxone; SAMHSA Overdose Prevention and Response Toolkit; CDC Public Health Considerations.

Strategy 2: Protect and connect MOUD

Medication continuity is overdose prevention, especially during justice transitions.

Ask supportively
"Are you currently taking methadone, buprenorphine or naltrexone?"

Protect continuity
Do not let court, custody, transportation or supervision logistics interrupt medication.

Connect fast
Use low-barrier providers, bridge clinics, Opioid Treatment Programs (OTPs), EDs, peers and same-day appointments.

Medication access before, during and after justice contact

Pretrial can help by removing friction: appointment reminders, transportation, phone access, ID/insurance navigation, release timing and communication with providers.

Avoid conditions or practices that require people to stop prescribed MOUD.

Source: NIDA Medications for Opioid Use Disorder; SAMHSA TIP 63; NIH/JCOIN 2025 jail MOUD study; CDC Linkage to Care.

Strategy 3: Use overdose safety planning, not scare tactics

A safety plan is a practical conversation about surviving the next high-risk transition.

1. **Carry naloxone:** and tell trusted people where it is
2. **Identify a support:** someone who can check in during high-risk moments
3. **Plan for lower tolerance:** especially after detention or abstinence
4. **Know supply risks:** follow local public health guidance
5. **Avoid dangerous mixing:** opioids with alcohol/benzos or sedatives
6. **Call 911:** know local Good Samaritan protections

Xylazine note: naloxone will not reverse xylazine itself but give naloxone when opioid overdose is possible and call EMS.

Source: CDC fentanyl and xylazine pages; SAMHSA Toolkit; Network for Public Health Law / NCSL Good Samaritan resources.

Strategy 4: Replace referral lists with warm handoffs

A referral is information. A warm handoff is connection.

High-value partners for pretrial workflows

- Opioid treatment programs and buprenorphine prescribers
- Bridge clinics, EDs, Federally Qualified Health Centers (FQHCs), mobile units
- Peer recovery specialists and community health workers
- Overdose prevention service programs and naloxone distributors
- Housing, transportation, Medicaid and benefits partners

The skill is not having every service in-house. It is making the next connection meaningful.

Source: CDC Linkage to Care; JCOIN; SAMHSA Toolkit.

Strategy 5: Partner on data-informed prevention

Focus on earlier, coordinated action that protects people and communities.

Signals:
nonfatal overdose, EMS calls, jail releases, interrupted MOUD, repeated missed contacts, local fentanyl/xylazine alerts

→

Shared picture:
aggregate trends, de-identified patterns, gaps in naloxone and MOUD access, high-risk transition points

→

Coordinated response:
partner alerts, targeted naloxone, mobile outreach, bridge appointments, policy fixes, staff training

Pretrial contribution: share what you can safely share; protect what you must protect.

- Prefer aggregate or de-identified patterns when possible.
- Use consent, policy and legal guidance for individual-level health information.
- Build feedback loops: what did pretrial staff see, what did partners do, what changed?

Trust is part of the intervention.

Source: CDC Public Health Considerations for Strategies and Partnerships; CDC Overdose Prevention strategic priorities.

Build overdose prevention into the pretrial workflow

Intake / Assessment	Ask brief risk questions; normalize naloxone; identify current MOUD, treatment and urgent barriers.
Release / First contact	Offer naloxone; schedule or confirm MOUD appointment; address phone, transport, ID and safe contact.
Supervision check-ins	Reinforce safety plan; replace naloxone; troubleshoot barriers before they become crises.
Crisis / Noncompliance	Treat missed contacts, return to use, or positive screens as risk signals; reconnect rather than only escalate.

Workflow design question: What is the next best safety action staff can take in under 10 minutes?

Source: Implementation translation from SAMHSA Toolkit, CDC Linkage to Care, and reentry overdose prevention guidance.

Let's practice: Where can pretrial lower risk?

A 28-year-old client is released after four days in detention. Before arrest, they were using opioids daily and taking buprenorphine intermittently. They missed two doses in detention, lost their phone and will stay alone tonight. Their next court date is in three weeks.

1. Immediate safety	2. Medication continuity	3. Follow-up / warm handoff
What can be done before the client leaves today?	What medication or treatment connection needs protection?	Who closes the loop in the next 24-48 hours?

Prompt for discussion: Name one action you can do directly and one action a partner should do.

Monday morning checklist: Move from concept to routine

Choose a few changes that can survive real workflow pressure.

30 days

Map the local safety net:
Naloxone supply, MOUD access, bridge clinics, peers, overdose education, crisis response

60 days

Build the workflow:
Standard scripts, referral pathway, warm handoff protocol, privacy guardrails

90 days

Measure and improve:
Naloxone offers, kits/refills, MOUD appointments made, warm handoffs completed, barriers fixed

Start with the highest-risk transition point your agency touches most often.

Source: Implementation planning synthesis from CDC/SAMHSA overdose prevention guidance

Takeaway for pretrial services

Your job is not to treat addiction.
Your job is to make survival and connection more likely at every contact.

Identify risk. Reduce lethality. Preserve treatment. Strengthen connection.

Sources and implementation resources

CDC: Preventing Opioid Overdose
www.cdc.gov/overdose-prevention/prevention/index.html

CDC: Lifesaving Naloxone
www.cdc.gov/stop-overdose/caring/naloxone.html

SAMHSA: Overdose Prevention and Response Toolkit
library.samhsa.gov/product/overdose-prevention-response-toolkit/pep23-03-00-001

NIDA: Medications for Opioid Use Disorder
nida.nih.gov/research-topics/medications-opioid-use-disorder

SAMHSA TIP 63: Medications for Opioid Use Disorder
library.samhsa.gov/product/tip-63-medications-opioid-use-disorder/pep21-02-01-002

CDC: Linking People with OUD to Medication Treatment
www.cdc.gov/overdose-prevention/hcp/clinical-guidance/linkage-to-care.html

CSG Justice Center / BJA: Reducing Overdose Risk During Reentry
csgjusticecenter.org/publications/implementing-evidence-based-strategies-to-reduce-overdose-risk-during-reentry-a-primer-for-reentry-professionals/

CDC: Fentanyl
www.cdc.gov/overdose-prevention/about/fentanyl.html

CDC: Xylazine
www.cdc.gov/overdose-prevention/about/what-you-should-know-about-xylazine.html

Network for Public Health Law: Naloxone and Good Samaritan Laws
www.networkforphl.org/resources/legal-interventions-to-reduce-overdose-mortality-naloxone-access-and-good-samaritan-laws/

CDC: Public Health Considerations for Strategies and Partnerships
www.cdc.gov/overdose-prevention/php/public-health-strategy/index.html

NIH Research Matters: Benefits of Treating OUD in County Jails
www.nih.gov/news-events/nih-research-matters/benefits-treating-opioid-use-disorder-county-jails

Use with local protocols, legal guidance and current state policy on: naloxone, Good Samaritan protections, MOUD access and data sharing.

ORS Training and Technical Assistance

ORS Training Opportunities

- ORS Monthly Training Webinars
- ORS Learning Communities
- ORS Learning Intensives
- ORS Annual Conference

Learning Communities

- Data
- Justice Continuum Overdose Prevention
- Overdose Fatality Review and Public Health & Safety Teams
- Overdose Prevention and Policy
- Overdose Response

Learning Communities

Data

The purpose of the Data Learning Community (DLC) is to assist ORS teams in leveraging public health and public safety data, maximize data sharing partnerships and improve knowledge of data analytical methodologies to improve desired health outcomes and reduce overdoses.

The DLC will provide informational presentations and technical assistance on topics such as:

- Data visualization
- Communicating insights from data
- Data analysis/visualization software
- Describing the utility and potential uses of commonly available public safety data
- Describing the utility and potential uses of commonly available public health data
- Opportunities and approaches to combining public health and public safety data to create new insights and many more data related topics

Learning Communities

Justice Continuum Overdose Prevention

The Justice Continuum Overdose Prevention Learning Community is grounded in Policy Research Associates' Sequential Intercept Model which recognizes that individuals with substance use disorders often encounter multiple points of contact—or "intercepts"—across the justice system. The purpose of the JCOP Learning Community is to support and promote alignment of overdose prevention strategies across intercepts to reduce fatal and non-fatal overdose among justice-involved individuals. The aim of this learning community is:

- Build cross-sector partnerships among justice agencies, public health, behavioral health providers, overdose prevention support services and community-based service systems.
- Generate buy-in for overdose prevention services at each intercept.
- Identify and address barriers—such as policy constraints, information gaps and operational silos—that disrupt overdose prevention and continuity of care between intercepts.
- Promote and advance effective overdose prevention practices.
- Develop tools and resources that help ORS staff support justice leaders assess readiness, plan implementation and coordinate services across intercepts.
- Facilitate peer learning, highlighting examples of how overdose prevention efforts can be aligned and reinforced throughout the Sequential Intercept Model.

Learning Communities

Overdose Fatality Review and Public Health & Safety Teams

The OFR-PHAST Learning Community aims to support the ORS network by providing a dedicated, collaborative space to strengthen their engagement in the fatality review and public health and public safety framework. By connecting public health and public safety professionals, these sessions facilitate peer-to-peer strategy development and the sharing of best practices across jurisdictions. In this space we will highlight successes by celebrating successful program implementations and outcomes resulting from OFR reviews and collaborative efforts.

The OFR-PHAST Learning Community aims to:

- Strengthening the expertise required to translate multidisciplinary review findings and multi-sector data into actionable, community-specific prevention strategies.
- Develop tailored strategies for state and jurisdictional OFR and PHAST activities.
- Explore opportunities for collaboration with external partners to broaden resource networks.
- Address and provide technical assistance (TA) to specific questions and recurring themes identified by teams.
- Highlighting "Success Stories" to feature effective practices and proven outcomes.
- To ensure continuous support, dedicated office hours are available throughout the month for individual consultations and deeper technical dives.

Learning Communities

Overdose Prevention and Policy

The Overdose Prevention and Policy Learning Community (OPPLC). Attendees can expect to explore secondary and tertiary prevention approaches, gain expertise in navigating drug policies and engage in cross-jurisdictional collaboration. This learning community is designed to better equip ORS teams and their partners with the tools and knowledge needed to address the evolving overdose crisis effectively, bridging gaps between primary prevention and overdose prevention to foster comprehensive community strategies. By enhancing expertise in these areas, the OPPLC aims to empower ORS teams to reduce fatal and nonfatal overdoses more effectively.

Learning Communities

Overdose Response

The purpose of the Overdose Response Learning Community is to promote and support overdose spike response planning. This group will look at existing and emerging resources, overdose spike response plan development and exercises, and partners and activities to consider including in response planning. The Overdose Response Learning Community aims to:

- Cultivate peer-to-peer learning around overdose spike response
- Improve coordination, delivery of evidence-based and promising activities and evaluation of actions taken during overdose spikes
- Build the body of evidence about what is and is not working in the realm of overdose spikes
- Build capacity for technical assistance to communities in spike response planning and activities

Other Learning Opportunities

ORS TRENDS, ANALYSIS & THREATS (TAT) WEBINARS

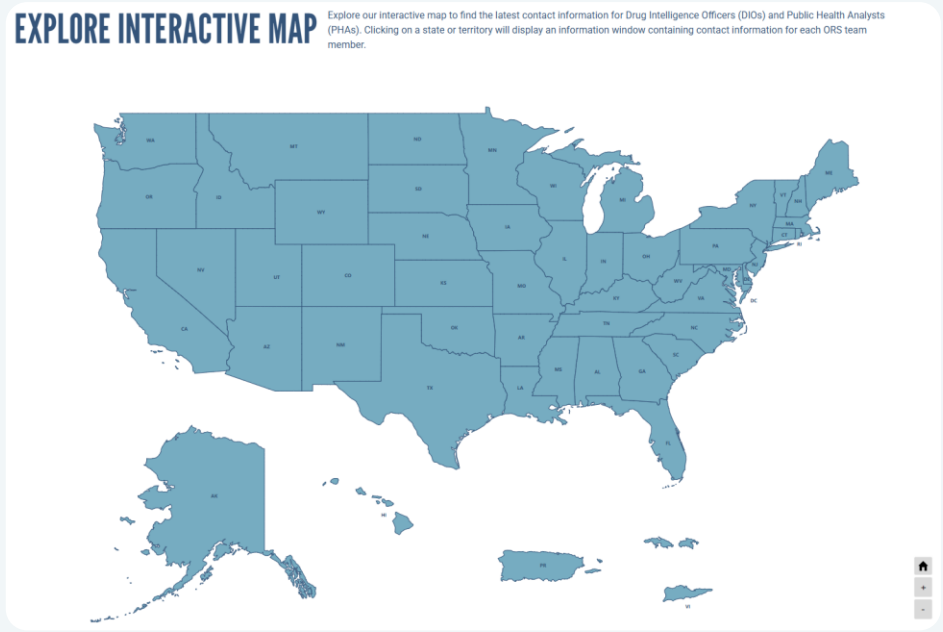
The ORS Trends, Analysis & Threats webinars are a bi-monthly series delivering briefings on current and emerging drug trends from experts with leading forensic and toxicology labs. These webinars are open to any interested professionals throughout the country working in public safety, public health or other disciplines to prevent overdoses.

https://orsprogram.org/tat-webinars/

ORS News


ONDCP AND CDC HIGHLIGHT THE CRITICAL ROLE OF THE OVERDOSE RESPONSE STRATEGY
In a joint statement released by the White House, the Centers for Disease Control and Prevention (CDC) and the Office of National Drug Control Policy (ONDCP) recognized the Overdose Response Strategy (ORS) as the only national program specifically designed to strengthen overdose prevention through coordinated public health and public safety partnerships.
READ THE FULL STATEMENT HERE →

Connect with us!



Click the interactive map above to find your ORS Team!

Visit us at ORSprogram.org!

Sign up for learning opportunities!

Questions?

Let us know how we did!