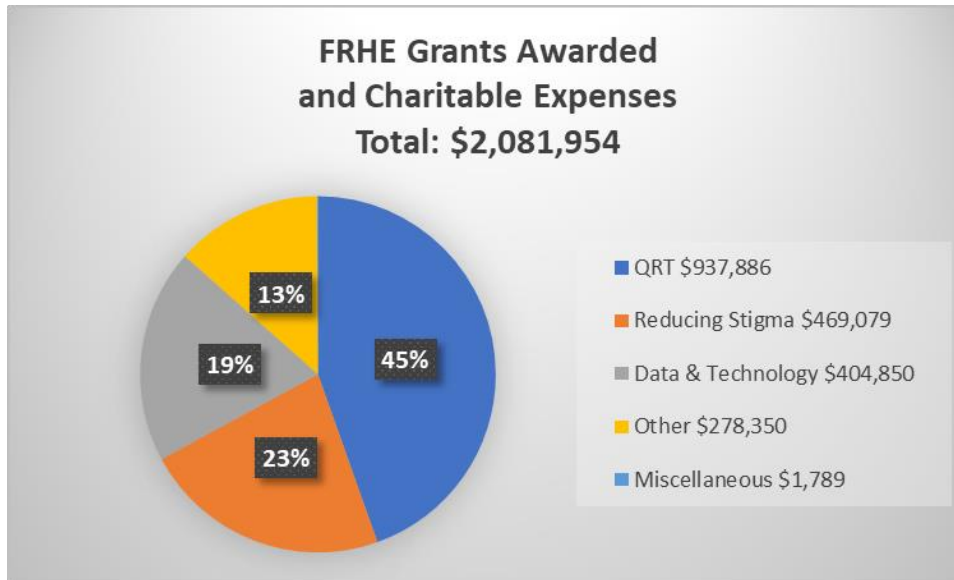# Funders Response to the Heroin Epidemic Summary Report

Overall Investment

The Funders Response to the Heroin Epidemic began in 2016 as a collaborative regional group of public and private funders who were interested in learning more about the opioid epidemic and associated issues, and providing financial resources and strategic support to strengthen local communities' response. Some funders contributed only once, in smaller amounts and took a more hands-off approach. A core group of funders were engaged over the life of the Fund and helped guide and direct the community investments. The core group included Interact for Health, Greater Cincinnati Foundation, The R. C. Durr Foundation, United Way of Greater Cincinnati, bi3 and Fifth Third Foundation, Jacob G. Schmidlapp Trusts. Funding totaled $2,081,954 by 13 contributors. The full list of funders and contribution levels can be found in Appendix A.

The initial hope in the early years of the FRHE was to attract other local, state and federal grant money to form an even larger funding pool. The funders hoped that pulling together resources and coordinating grantmaking would make a larger impact than working separately. After contracting with a local fundraising firm to develop a strategic approach to fundraising, it became apparent that significant time and money would need to be spent to achieve this goal. Funding contributions began in 2016 and ended in 2020. The collaborative funds were held at InterAct for Change, a 501(c)(3) nonprofit organization and wholly owned subsidiary of Interact for Health.

The members of the FRHE identified and agreed upon the following counties as the "service area": Hamilton, Butler, Warren, Clermont and Brown in Ohio; Boone, Kenton, Campbell and Grant in Kentucky; and Dearborn and Ohio in Indiana. A map of the service area can be found in Appendix B.

This report highlights the investment—grants and charitable expenses—in four portfolios: Quick Response Teams, Reducing the Stigma of Addiction, Supporting Data and Technology Expansion and Other. The list of grantee partners and charitable expenses can be found in Appendix C. Grants were awarded throughout the life of the Fund and into 2021. Some grantees requested extensions due to challenges mostly related to the COVID-19 pandemic. The last grant will end in early 2023. While interim progress and results can signal long-term impact, it will take many years to see the effects of many of these efforts on community level outcomes. The results and impact described below are based on what we know and can measure as of December 2022.

FRHE Grants Awarded
and Charitable Expenses
Total: $2,081,954

- QRT $937,886 — 45%
- Reducing Stigma $469,079 — 23%
- Data & Technology $404,850 — 19%
- Other $278,350 — 13%
- Miscellaneous $1,789

RESULTS: What happened and what progress was made

Community Outcomes

2017		2021
48.9 per 100,000 adults	Overdose death rate[1]	**42.2** per 100,000 adults
4,191 ED visits	# of overdose-related ED visits[2]	**2,691** ED visits
3,660 9-1-1 dispatches	# of overdose related 9-1-1 dispatches[3]	**2,461** 9-1-1 dispatches

While there is still work to be done to address the opioid epidemic, there has been progress in the right direction. From 2017 to 2021, Greater Cincinnati saw a 14% reduction in overdose death rate, 35% reduction in overdose-related ED visits, and a 33% reduction in overdose related 9-1-1 dispatches.

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[1] Centers for Disease Control and Prevention, National Center for Health Statistics. Underlying Cause of Death 1999-2020 on CDC WONDER Online Database, released in 2021. Data are from the Multiple Cause of Death Files, 1999-2020, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Accessed at http://wonder.cdc.gov/ucd-icd10.html on October 31, 2022.
[2] Hamilton County Public Health. Monthly Overdose Report. Accessed on October 31 2022 here.
[3] Hamilton County Public Health. Monthly Overdose Report. Accessed on October 31 2022 here.

Overdose Death Rate: Region vs. Nation
2017-2020, CDC Wonder | Per 100,000

14% decrease in the region

48.9   38.1   36   42.2

21.7   20.8   20   28.3

30% increase in the nation

2017   2018   2019   2020

—National —Regional
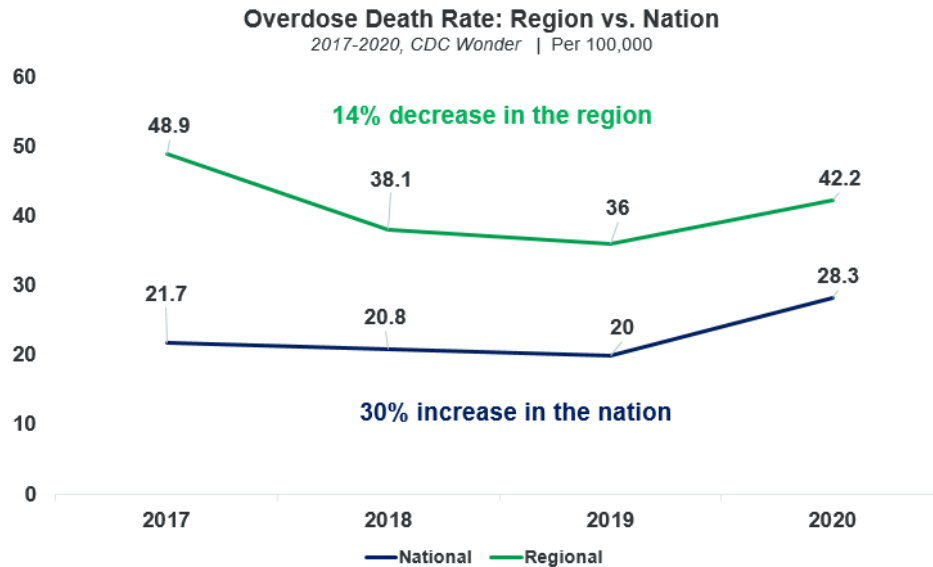
Given that partners and systems of care across Greater Cincinnati have collaborated for many years, the region adapted quickly to the COVID-19 pandemic—more so than other areas of the country—by offering drive-thru, mail-order and telehealth services to ensure clients received appropriate care. FRHE funding contributed to a number of these initiatives. As the data in the chart above show, while the region still lags behind the nation in rate of overdose deaths, **the region has seen a 14% decrease in overdose deaths since 2017 while the nation has seen a 30% increase**. In 2020, Kentucky ranked second, Ohio ranked fourth and Indiana ranked 13th in the nation for overdose deaths.[4]

Due to the shutdowns associated with the COVID-19 pandemic, many substance use disorder providers that serve as frontline workers temporarily closed. This, along with reported fear of going to the emergency department from first responders and other factors, likely contributed to an increase in overdose deaths in 2020. These increases were seen nationwide in 2020, but Greater Cincinnati experienced a smaller increase. The region had a **17% increase in overdose death rate from 2019 to 2020, whereas the nation saw a 42% increase.**

To achieve these community level outcomes, many partners and many interventions come into play. A comprehensive approach to addressing opioids includes many factors and this work focused on changing the way we react to those who need help, decreasing stigma and increasing data, technology and other cross cutting efforts.

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[4] CDC. Drug Overdose by State. Accessed 11/1/22 at:
https://www.cdc.gov/nchs/pressroom/sosmap/drug_poisoning_mortality/drug_poisoning.htm 2021 Data expected Winter 2023.

Progress and Results (2016 through December 2022)		
Strategies and Goals	Targets	Results
1. **Quick Response Teams**: Improve connection to treatment and social services by supporting programs that connect clients to treatment.	• Programs that connect people to care established in each of the 11 counties in FRHE service area. • 15% of clients connected to treatment.	• All 11 counties in FRHE service area have programs to connect people to care (eg. Quick Response Teams) in operation. • 14.4% of clients were connected to treatment among four programs in QRT evaluation.[5]
2. **Reduce stigma**: Pilot and spread promising practices focused around reducing the stigma of the opioid epidemic.	• Develop and test a reducing stigma media toolkit. • Launch toolkit for public use with at least 25 downloads.	• A comprehensive toolkit was launched in partnership with design agency Hyperquake. • Two pilot stigma-reduction campaigns completed; toolkit launched with eight grantees.[6] • Toolkit requested by 71 community partners from 17 states and four countries.
3. **Cross-cutting Efforts: Data, Technology:** Pilot and spread promising practices focused on innovation in data and technology.	• Two pilot projects launched. • One project spread to scale.	• Data infrastructure created through funding to Hamilton County Public Health; leveraged a $2 million federal investment. • Responsive funding provided to increase telehealth capacity during COVID.

Quick Response Teams

FRHE was an early investor in this cross-system and cross-collaborative model. The model has been adopted regionally and nationally. In addition to supporting the teams, FRHE also invested in the software system Cordata, which was developed to track interactions and outcomes. Cordata has entered into an agreement with the state of Ohio, offering teams an opportunity to access a license free of charge. The estimated leveraged funds from the grants made by the FRHE is estimated to be more than $2.5 million. This model of pre-arrest diversion is now funded by state and federal funds and many of our local QRTs have been successful in applying for and receiving these grants. The personal stories are very touching and it's easy to see how impactful these grants have been on individuals' lives. Below is a success story from a QRT grantee.

"...all the family members are in active recovery. They have moved from the home they had spent their entire lives in. They now all have full-time employment and talk about having groceries and utilities in their new homes: the basic things others often take for granted. The QRT gets frequent updates and pictures from the family about how great life is going. Recently,

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[5] Including teams representing Adams County, Clermont County, Colerain Township and Middletown.
[6] For more information visit: https://www.interactforhealth.org/campaign-to-reduce-stigma-of-addiction/.

the QRT received a picture of them, standing in front of two vehicles they had worked hard to purchase, holding up their new valid driver licenses."

Reducing Stigma

The toolkit has been used by grantees, local community partners and agencies across the nation and world. The toolkit was able to target different audiences successfully. "[A campaign that performs well across this many audiences is] something I haven't seen in 26 years of market research." – George Brown, Vice President, Acupoll Precision Research.

One grantee in the pilot campaign used the creative materials to directly reach people struggling with addiction and their loved ones. "The project was a great success. Over the three-month time period, we increased our overall census at our treatment centers, providing life-saving substance use disorder treatment. We admitted the highest number of individuals in the month of February year to date and believe the campaign to have been one of the top influences for this increased number. We saw a tremendous increase in our overall call volume as well as traffic to our website and Facebook page. Overall, we saw an increased awareness of the availability of Substance Use Disorder treatment in the Northern Kentucky region." – Transitions, Inc.

Hamilton County used the creative materials to develop a campaign specifically targeting high-risk minority populations. About $600,000 of federal money was used to fund two waves of this campaign.

The reducing stigma toolkit is a resource available for download on Interact for Health's website and continues to be accessed by partners across the world. The estimated leveraged funds by all partners using the toolkit is well over $1 million.

Cross-cutting Efforts: Data, Technology

One of the early investments made by the funding collaborative was in Hamilton County Public Health, which led the way for standardized processes for collection, management and analysis of data and dissemination of reports that characterize overdoses in the region. This investment helped set up HCPH for a federal grant, Data to Action, which has further improved data collection and user-friendly dashboards. This work will continue to be sustained with lasting benefit for the region.

Fairly early in the pandemic, the funding partners came together and collectively agreed to direct resources to technology hardware and software to improve access to telehealth services. This shift to a virtual platform will continue, even as people take on a hybrid approach and in-person gatherings resume.

A treatment provider shared how important the telehealth expansion during the pandemic was for its clients. "In the beginning of the pandemic, we quickly realized that we had to establish a plan to continue providing services to all clients. Since many of our clients rely on in-person appointments we knew we could not suddenly stop all services, especially to our SUD clients who depend on us for their treatment. A plan to provide services through telehealth was put in place. A major issue with the telehealth plan was that most clients are 200% poverty level and

did not have access to necessary equipment to conduct telehealth visits. The grant provided from the FRHE allowed us to purchase equipment and data plans for those clients to use to continue the necessary treatment needed for their well-being. The success of our telehealth services has led us to continue using these services moving forward. We found that clients were willing to participate with these new services and were able to keep clients on track to sobriety once they had technology available to them." – Talbert House

LESSONS LEARNED

Portfolio Level Learnings

- **Empowering communities to build relationships** across sectors and to set the agenda for their community allowed for long-term success, even in the face of an unexpected global pandemic.
- **Stigma** remains a significant barrier to all our strategies and impacts the progress of specific projects despite strides made through the implementation of the reducing stigma campaign.
- It is vital to **meet communities where they are** and identify programs that fit individual community needs and resources. Many programs were adapted to meet the differing needs of our communities (i.e., rural versus urban).
- An unintended benefit of COVID-19 was a **rapid adoption of technology** and telehealth services in the region.
- **Data consistency** across the three states remains a challenge that our partners are working to address through new funding partners.

Funders Collaborative Learnings

- **Convening** funding partners to learn about a community crisis and bring together leveraged dollars can add value and streamline resources to make the most impact.

- **Identify a lead organization** that has the capacity to manage a Funders Collaborative and provide content-level expertise or bring in experts from the community.

- A long-term Funders Collaborative needs to have structure, but also be **adaptive to change and responsive to community needs.**

- **Each funder brings its own expertise to the table** – not all of us had expertise in the opioid epidemic but we brought expertise in community partnerships, state funding opportunities, evaluation, etc.

- **Consistent focus and commitment on the work** – whether it be due to staff turnover or shifting priorities of the funders or even when we moved to more of a maintenance phase (not awarding grants but rather supporting those to whom we had already given grants).

- **Provided opportunity to learn more** about each other's priorities and processes – set the stage for relationship building and collaboration outside of the FRHE.
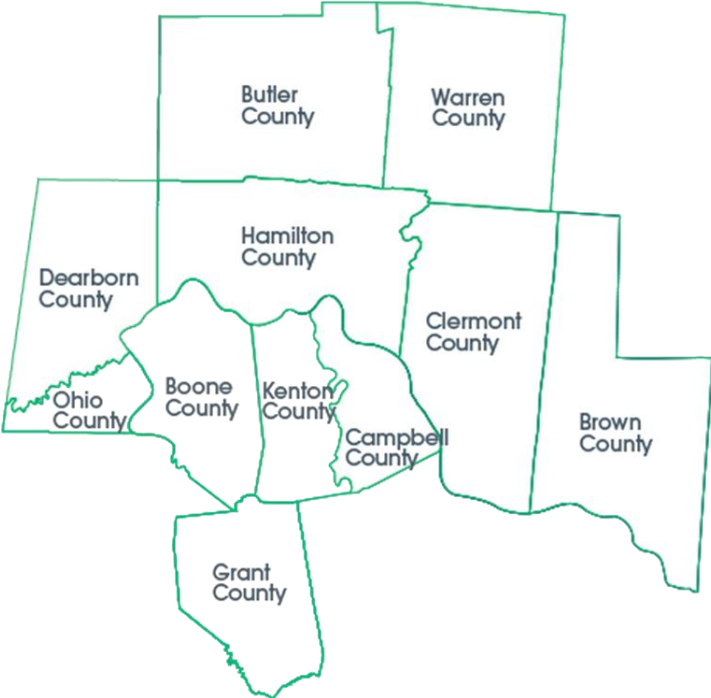
Appendices

Appendix A
Funders Response to the Heroin Epidemic Contributions

Contributor	Amount
Interact for Health	$ 1,100,000
Greater Cincinnati Foundation	$ 505,000
United Way of Greater Cincinnati	$ 280,000
Fifth Third Foundation, Jacob G. Schmidlapp Trusts	$ 100,000
The R.C. Durr Foundation	$ 50,000
bi3	$ 20,000
Difference Maker Legacy Fund	$ 10,000
Cincinnati Bar Foundation	$ 5,500
The E. Kenneth & Esther Marie Hatton Foundation	$ 5,000
Deloitte	$ 3,841
M. Firesheets	$ 1,910
Costco	$ 594
Ohio Society of Radiologic Technologists	$ 100
United Way-other	$ 9
Total	**$ 2,081,954**

Appendix B
Funders Response to the Heroin Epidemic (FRHE) counties

Butler County

Warren County

Hamilton County

Dearborn County

Clermont County

Ohio County

Boone County

Kenton County

Campbell County

Brown County

Grant County

Appendix C
Funders Response to the Heroin Epidemic
Grants Awarded and Charitable Expenses

Grantee	*Goal*	*Service Area*	*Timeframe*	*Amount*
Addiction Services Council	to expand the capacity of the Hamilton County Quick Response Team by adding a peer mentor	Hamilton	1/17-12/19	$ 100,000
Atrium Medical Center Foundation	to support Middletown Quick Response Team	Butler	7/18-12/20	$ 60,000
Atrium Medical Center Foundation	to support the efforts of the Middletown QRT	Butler	4/21-12/22	$ 30,000
Brighton Center	to increase treatment options for 18-24 year olds at Brighton Recovery Center for Women	Kentucky Service Area	12/15-5/18	$ 45,000
Clermont County Mental Health & Recovery Board	to improve responses to opioid overdoses in Clermont County by creating a Quick Response Team	Clermont	1/17-12/19	$ 100,000
Clermont County Mental Health & Recovery Board	to support the Milford/Miami Township Addiction Response Team	Clermont	6/18-5/21	$ 60,000
Clermont County Mental Health & Recovery Board	to support an anti-stigma media campaign in Clermont County	Clermont	6/19-11/19	$ 48,000
Clermont County Mental Health & Recovery Board	to support Quick Response Team efforts in Clermont County	Clermont	7/19-11/21	$ 125,066
Community Mental Health Center, Inc.	to support the implementation of a recovery coach program at CMHC	Indiana Service Area	8/21-1/23	$ 52,460
Envision Partnerships	to support an anti-stigma media campaign in Butler County	Butler	7/19-12/19	$ 58,000
First Step Home, Inc.	to expand telehealth services in the Family Unity Center	Hamilton	4/21-9/22	$ 6,850
Grant County Schools	to support an anti-stigma media campaign in Grant County	Grant	6/19-11/19	$ 13,000
Hacking Heroin Collaborative dba Realworks	to expand telehealth equipment to regional treatment providers	Entire Service Area	7/20-7/22	$ 25,000
Hacking Heroin Collaborative dba Realworks	to implement technology pilots in treatment settings designed to improve consumer participation and retention	Entire Service Area	7/21-6/22	$ 150,000
Hamilton County General Health District dba Hamilton County Public Health	to inform the regional opioid response by creating a multicounty data sharing resource	Hamilton	1/17-12/19	$ 100,000
Mental Health America of Northern Kentucky and Southwest Ohio	to build the capacity of the Core Life program as an evidence-based, replicable practice	Boone, Campbell	11/17-5/19	$ 115,850
Mental Health Recovery Board Serving Warren & Clinton Counties	to implement the Cordata system for QRT teams in Warren and Clinton counties	Warren, Clinton	8/18-12/20	$ 20,000
Mental Health Recovery Board Serving Warren & Clinton Counties	to support QRT operations in Warren County and plan for a QRT in Clinton County	Warren, Clinton	4/21-3/22	$ 35,000
Northern Kentucky Area Development District	to build the capacity of the Core Life program as an evidence-based, replicable practice	Boone, Campbell	5/17-11/17	$ 87,500
Northern Kentucky Area Development District	to support Northern Kentucky Pre-Arrest Diversion Expansion & Sustainability	Kentucky Service Area	10/18-9/20	$ 145,615

One Community One Family Inc	to support an anti-stigma media campaign in Dearborn County	Dearborn	7/19-12/19	$ 8,000
SMART Recovery USA Inc.	to support SMART Recovery telehealth expansion in Greater Cincinnati	Ohio Service Area	7/20-6/21	$ 40,000
Talbert House	to implement Cordata for two Quick Response Teams in Hamilton County	Hamilton	6/18-5/21	$ 30,000
Talbert House	to support telehealth expansion at Talbert House	Butler, Clinton, Warren	7/20-6/21	$ 33,000
The Crossroads Center	to support expansion of opioid treatment services during COVID-19 at The Crossroads Center	Hamilton	6/20-5/21	$ 50,000
Warren County, Ohio	to support a campaign to reduce the stigma of addiction in Warren County	Hamilton	12/19-5/20	$ 50,200
Total				**$1,588,541**

Charitable Expenses- Payee	Description	Amount
Lewis & Clark	Consultation- Fundraising: FRHE	$ 30,000
Vendome Group	Rx Drug Abuse and Heroin Summit- Conference Registration for community partners	$ 2,970
Clermont County Mental Health & Recovery Board	Rx Drug Abuse and Heroin Summit- Conference travel expenses	$ 5,000
Northern Kentucky Area Development District	Rx Drug Abuse and Heroin Summit- Conference travel expenses	$ 8,000
Cincinnati Health Department	Rx Drug Abuse and Heroin Summit- Conference travel expenses	$ 1,902
Hamilton County Public Health	Rx Drug Abuse and Heroin Summit- Conference travel expenses	$ 3,128
TASC	TA Support- QRT/Deflection	$ 53,245
Cordata Healthcare	Software for QRTs	$ 95,500
Hyperquake	Reducing Stigma Campaign- Development, Implementation, Testing with Acupoll, TA Support to Grantees	$ 198,700
Clermont County Mental Health & Recovery Board	Reimbursement for CanvaPro- Reducing Stigma Campaign	$ 184
MNI Targeted Media	Digital Media Ads for Regional Reducing Stigma Campaign	$ 92,995
Miscellaneous	(food for meetings, mileage, etc.)	$ 1,789
Total		$ 493,413