



INTERACT
FOR HEALTH

Opioid Harm Reduction

Request for Proposals

March 2022

GENERAL INFORMATION

Background

The United States continues to be in the midst of an opioid epidemic. More than 100,000 Americans died from drug overdoses between May 2020 and April 2021—the most ever recorded in a single year—according to the Centers for Disease Control and Prevention. That was an increase of almost 30% from the previous year when 78,000 drug overdose deaths were recorded. Drug overdose deaths were nearly three times greater than traffic accident deaths and two times greater than gun deaths during the same period. Most of the deaths were due to opioids, fueled by the powerful drug fentanyl, which is often added to illegal drugs to enhance their potency.¹

Not only is the nation in the middle of an opioid epidemic, it is also in the midst of a pandemic. As the 1.6 million Americans with opioid use disorder and their loved ones know well, overdose deaths have risen dramatically during the pandemic.² In 2020, the age-adjusted rate of overdose deaths was 42.2 per 100,000 in Greater Cincinnati, compared with 28.3 per 100,000 for the nation.³

Interact for Health has adopted a comprehensive approach to reduce the trend of opioid overdoses and deaths from opioids while recognizing the ongoing COVID-19 pandemic. The efforts includes increasing access to treatment, recovery support, reducing the stigma of addiction and supporting harm reduction strategies. Research shows that a comprehensive approach can reduce substance misuse and related problems.⁴

¹ *Drug overdose deaths hit record high*. Harvard T.H. Chan School of Public Health. (2021, November 19). Retrieved Jan. 28, 2022, from <https://bit.ly/3tZj85t>

² Connolly, B., & Meidl, C. (2021, Sept. 16). *Covid-19 has taken opioid use disorder from bad to worse*. The Pew Charitable Trusts. Retrieved Feb. 3, 2022, from <https://bit.ly/3q8ix02>

³ Centers for Disease Control and Prevention, National Center for Health Statistics. Underlying Cause of Death 2018-2020 on CDC WONDER Online Database, released in 2021. Data are from the Multiple Cause of Death Files, 2018-2020, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Accessed at <https://bit.ly/3ITDxiw> on Feb 3, 2022 2:45:33 PM

⁴ U.S. Department of Health and Human Services (HHS), Office of the Surgeon General. (2016). *Facing Addiction in America: The Surgeon General's Report on Alcohol, Drugs, and Health*. Washington, DC: HHS.

Since 2012, Interact for Health has supported the planning and implementation of harm reduction programs. Harm reduction is a set of practical strategies and ideas aimed at reducing the negative consequences associated with drug use. Programs that are centered on harm reduction follow the guiding principle of “meeting people where they are.” They incorporate a spectrum of strategies from safer use to managed use to abstinence to improve the health and wellness of people affected by drug use.⁵ Harm reduction strategies Interact for Health will fund include Overdose Fatality Review Teams, syringe services and non-syringe service programs, the distribution of naloxone (also known as Narcan), fentanyl test strips and harm reduction supply dispensing machines where allowed by law.

RFP Goal

To expand existing harm reduction efforts and support new harm reduction programs in Greater Cincinnati.

RFP Overview

Interact for Health seeks to support harm reduction programs that reverse the trend of overdoses and deaths from opioids in Greater Cincinnati. These initiatives may include planning or implementing a new program or expanding existing harm reduction services currently offered. Examples of projects that will be considered:

- Planning or implementing a new syringe services program.
- Expanding the services offered within a syringe services program to make it more comprehensive.
- Innovative approaches to deliver harm reduction services during the COVID-19 pandemic.
- Planning for or implementing a county level Overdose Fatality Review Team.
- Targeted distribution of naloxone and/or fentanyl test strips to people most at risk for an opioid overdose such as those:

⁵ Harm Reduction Coalition. n.d. *Principles of Harm Reduction*. Retrieved Jan. 15, 2020, from <https://bit.ly/3KJCOAS>

- Living in recovery housing.
- Leaving criminal justice settings.
- Receiving opioid use disorder treatment.
- Using substances such as cocaine or methamphetamine who may be unaware of fentanyl being present in their drug supply.
- Accessing a syringe services program.
- Discharged from the hospital after an opioid overdose.
- Efforts to reduce the stigma of harm reduction strategies and programs.

Interact for Health anticipates these grants will

begin in the spring of 2022. These awards will not exceed **18 months**. Planning grants will be no more than **\$20,000** and must demonstrate a strong implementation and sustainability plan as Interact for Health is completing the final year of its strategic plan and cannot assure support for implementation. Implementation or expansion projects will be no more than **\$75,000** and must address how services will be offered successfully during the COVID-19 pandemic. Interact for Health will award a total of **\$250,000** with this request for proposals. The amounts awarded will vary by project. Desired applicants are community-based nonprofits or public health organizations.

DEFINITIONS

- **Naloxone, or Narcan**, is a medication designed to rapidly reverse an opioid overdose.
- **Syringe services programs** provide a range of services that include linking clients to substance use disorder treatment; providing access to and disposal of sterile syringes and injection equipment; and vaccination, testing for and linking clients to care and treatment for infectious diseases. People who participate in syringe services programs are five times more likely to seek treatment for a substance use disorder.⁶
- **Non-syringe services programs** may include all the services of a syringe services program

excluding the syringes.

- **Fentanyl test strips** check for the presence of fentanyl and its associated analogues including carfentanyl in the unregulated drug supply. Fentanyl can be mixed with heroin, cocaine and methamphetamine. If people are aware of fentanyl, they are likely to modify their behavior by not using the drugs, using the drugs more slowly, using the drugs with others who have naloxone or changing their purchasing behaviors.⁷
- **Harm reduction supply dispensing machines** are standalone machines containing a wide variety of harm reduction supplies including but not exclu-

sively naloxone, safe injection materials and syringes. These machines are often accessible to clients of a syringe services program through a unique code provided by a harm reduction specialist and based on a brief assessment of need.

- **Overdose Fatality Review Teams** conduct confidential reviews of resident drug and alcohol overdose deaths to identify opportunities to improve member agency and system-level operations in a way that will prevent future similar deaths. The teams identify missed opportunities for prevention and gaps in the system, build working relationships between local stakeholders on overdose prevention, and improve overall collaboration and communication within a jurisdiction.

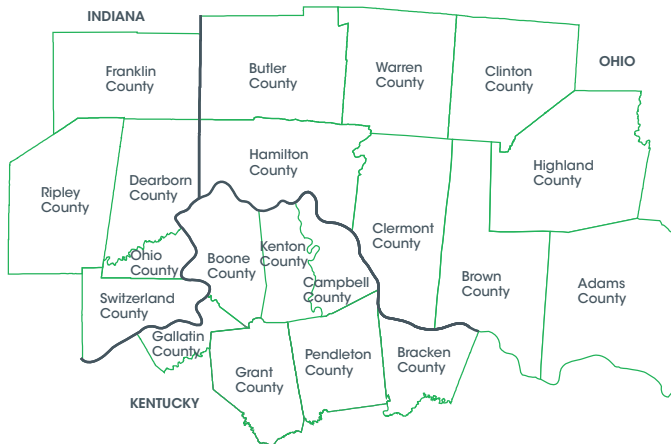
⁶ Centers for Disease Control. (2019). Syringe Services Programs. Retrieved Jan. 15, 2020, from <https://bit.ly/3t6IFFK>

⁷ Sherman, S.G., Park, J.N., Glick, J., McKenzie, M., Morales, K., Christensen, T., Green, T.C. (2018) FORECAST Study Summary Report. Johns Hopkins Bloomberg School of Public Health. Available at <https://bit.ly/3qWPucl>

Eligibility Criteria

Applicants must:

- Be a public or private nonprofit or governmental organization.
- Provide services in at least one county of Interact for Health's 20-county service area (see map).



Organizations that are not nonprofits or governmental entities may still seek funding through fiscal sponsorship. A fiscal sponsorship is a relationship between a 501(c)(3) tax-exempt nonprofit organization (the sponsor organization) and charitable project that does not have a tax-exempt status (the sponsored organization).

Each state's statutes contain language regarding the establishment of syringe service programs, naloxone distribution and disbursement and possession of fentanyl test strips. Please be sure to review the statutes prior to submitting your proposal.

Interact for Health's commitment to equity, diversity and inclusion

Interact for Health strives to promote health equity in all that we do. For us, health equity means that everyone throughout our diverse region has a fair and just opportunity to live the healthiest life possible. This requires that we intentionally work to reduce health disparities, as well as tackle the underlying root causes, such as inequality, poverty and discrimination based on race, ethnicity, gender, physical and mental ability, age, education, immigration status, geography, socioeconomic status and sexual orientation. We are on a journey to learn

and work toward equity, diversity and inclusion within our own operations and practices at Interact for Health, and we encourage our grantee partners to join with us.

Interact for Health is particularly interested in supporting organizations and projects that:

- Understand disparities and intentionally work to reduce disparities.
- Authentically engage and include community stakeholders, especially those who the project aims to reach.
- Deploy equitable practices and culturally relevant services, with staffing of the project that is representative of the community served.
- Identify opportunities to engage in policy and advocacy to achieve systemic change.

Grantee Requirements

Grant recipients will be expected to complete an Evaluation Plan in partnership with Interact for Health's Evaluation Officer within 60 days after the grant is awarded to measure effectiveness of the grant. This will include setting goals, objectives and identifying outputs and outcomes including metrics used to track those items. Grantees will be expected to identify draft goals and outcomes as part of the application process. Outcomes for similar projects include increasing geographic coverage of harm reduction services in the region; increasing engagement of nontraditional opioid users and non-white people who use drugs; decreasing negative health outcomes related to drug use (infectious disease, incidence of infection, etc.).

Questions can be directed to Evaluation Officer Michelle Lydenberg at mlydenberg@interactforhealth.org.

PROPOSAL SELECTION CRITERIA

Interact for Health will use the following criteria to select the most competitive proposals. Prioritized programs will demonstrate:

- How the opioid epidemic has affected their community, using local data when possible.
- How efforts will reach people most at risk for opioid overdose or death.
- An understanding and commitment to secondary distribution of harm reduction strategies, as appropriate.
- Existing relationships or the ability to engage key decisionmakers, public health officials, community partners and potential clients in the planning process.
- An authentic method of receiving input and feedback from people who use the services.
- New or innovative approaches to working in communities of color and communities whose residents have lower incomes, as appropriate to the geographic area.
- A clearly delineated budget with justification for each line item.
- A plan to sustain the project or program after grant funding has ended.
- The ability to plan or implement the proposed project during the COVID-19 pandemic.
- A clear plan for evaluating the project, including how data will be collected and reported and the person responsible for this work.

Timeline

Proposal webinar	1-2 p.m. March 31, 2022
Proposal deadline	5 p.m. April 26, 2022
Site visits	May 2-6, 2022
Notification of grant award	May 24, 2022

Proposal Webinar

A proposal webinar will be held to answer questions about the RFP concept and application process **from 1 to 2 p.m. Thursday, March 31, 2022**. Attendance is optional and not required in order

to submit a proposal. Please contact Lisa Myers at lmyers@interactforhealth.org to receive access information for the live webinar or to receive the recording after March 31.

Proposal Submissions

Completed applications must be submitted **no later than 5 p.m. April 26, 2022**, via Interact for Health's online grants management system. To begin the application process or to access a PDF of the required application questions, please visit [the Funding Opportunities page of our website](#). If you have an open grant or have received a grant from Interact for Health in the past two years, your email address may already be registered in the system. For assistance with the application process, please contact Director of Grants Management Kristine Schultz at kschultz@interactforhealth.org.

Site Visits

Before selecting projects for funding, Interact for Health staff will conduct a site visit, either virtual or in person, with the potential grantee. Representatives from collaborating organizations are required to attend the site visit. This meeting allows Interact for Health staff to hear more about the proposed project and ask any clarifying questions. Site visits will be conducted **May 2-6, 2022**. Applicants will indicate their preferred timeslot during the application process. Site visit topics will include:

- General discussion of your proposed project and budget.
- Population of focus for the project.
- Any disparities that exist and how this project plans to address them.
- Community engagement tactics.
- Collaborating partners and organizations or those you plan to engage.

Questions

For any questions regarding the process please contact Program Officer Lisa Myers at lmyers@interactforhealth.org or 513-910-0770.