Local Overdose Safety Coalition Progress Report Results

Background and Methods

The California Department of Public Health (CDPH) Overdose Prevention Initiative provides funding to 22 local overdose safety coalitions across the state that are working to reduce opioid and other drug-related overdoses. Through a combined effort between CDPH and the California Overdose Prevention Network (COPN) Accelerator Program, semi-annual progress report surveys are administered to these coalitions. Information provided by the semi-annual progress reports inform coalition progress relating to a variety of reporting measures, specific coalition successes, and coalition challenges. The purpose of this evaluation report is to utilize progress report data collected through four surveys to highlight coalition progress on key indicators and address challenge areas over the last two years.

All data used in this evaluation report was self-reported by participating coalitions. Below includes a list of each survey administered, the number of coalitions who participated, and the reporting period covered:

- Report 1 (R1), administered September 2020 (n=23): January 1, 2020 – August 31, 2020
- Report 2 (R2), administered March 2021 (n=22): September 1, 2020 – February 28, 2021
- Report 3 (R3), administered September 2021 (n=22): March 1, 2021 – August 31, 2021
- Report 4 (R4), administered March 2022 (n=22): September 1, 2021 – February 28, 2022

Only responses from CDPH-funded coalitions (whether funded solely by CDPH or by both CDPH and COPN) were included. Descriptive statistics (i.e., relative frequencies, or proportions in each response category) were obtained for responses to the closed-ended, multiple-choice survey questions. Qualitative data from open-ended survey questions were analyzed using thematic analysis.

Overview of Key Findings

Analyses of responses from the four progress reports showed that the coalitions are making progress on activities but there are still some areas where continued attention may be needed. To summarize:

- Across all progress reports, a majority of coalitions (85% or more) reported their stage of development as one where their coalition was able to problem solve and make decisions through negotiations and consensus (called the "Norming" stage

of development in the coalition progress reports) or were achieving effective results (called the "Performing" stage of development).

- Overall, coalitions had positive self-assessments of their performance in a variety of categories across all progress reports. Areas of strong performance that were identified included dialogue, transparency, and trust. Areas of coalition performance where some improvement may be needed included accountability and commitment.
- Regarding the coalition activity of implementing/expanding naloxone distribution sites and systems, coalitions are making notable progress. Results from the fourth progress report survey found that 14% of coalitions have completed this activity and 73% are in progress to complete it. Less progress has been made on the activity of implementing local policy changes. 32% of the coalitions have either not started this activity or are in the planning stage.
- The fourth progress report included questions on health equity and social determinants of health (SDOH) and found that a majority of coalitions have extended some focus on health equity (77%) and SDOH (55%) when it comes to their overdose prevention efforts. There is a smaller subgroup of two coalitions that have not yet included either in their efforts and have limited to no plans to include them in the future. Some common reasons for this decision included coalition members do not have enough "bandwidth" and coalition members are unsure how to apply SDOH concepts to overdose prevention efforts.
- The top coalition successes identified were distribution of naloxone, providing community outreach, getting naloxone into schools, and work on medication assisted treatment (MAT) for youth.
- The top coalition challenges were center closures due to COVID-19, staffing burnout, obtaining school/district buy-in for opioid prevention, and obtaining community buy-in to implement MAT.
- COVID-19 specific challenges were identified as lack of in-person events, meetings, and trainings and staffing burnout, shortages, and turnover. Despite these challenges, coalitions reported a variety of creative ways that they have adapted and continued their work.

Recommendations and Additional Supports

- Coalitions may benefit from focusing on creating an environment where the coalition members are comfortable holding each other accountable to decisions and action items.
- There is a need for future coalition work to prioritize an increased focus on continuing progress with implementing local policy changes.
- Further follow-up and targeted support may be needed for coalitions that are not currently focusing on health equity and SDOH.
- Future technical assistance and support that coalitions have expressed a need for include resources focused on health equity and SDOH, youth focused resources, education, and awareness campaigns, and assistance with ODMAP.

Local Overdose Safety Coalition Progress Report Results

Sectors and Partners

Report 4:
Administered March 2022
(Reporting Period:
September 2021 –
February 2022)

Top Sectors/Partners Which are Currently Represented in Coalitions

- Public health department
- Health care providers, hospitals, and clinics
- Mental health and addiction treatment services (Behavioral health)
- Law enforcement, jails, and corrections
- Payers/Health Plans

Top Sectors/Partners that Coalitions are Hoping to Recruit in the Coming Year

- Pharmacies
- Schools and academic institutions
- Faith-based community
- Consumers, families, advocates, and the community
- First responders
- Business
- People who use drugs

Stages of Development

During each reporting period (R1-R4), coalitions were asked to assess the overall status of their coalition based on the following criteria:

Forming = Working to establish expectations, develop trust, and agree on common goals.

Storming = Identifying power and control issues, developing communication skills, and reaching to leadership.

Norming = Working within an atmosphere of agreement on roles and problem-solving processes, with decisions made through negotiations and consensus.

Performing = Achieving effective and satisfying results, with routine processes in place that support ongoing achievement of performance goals through mutual and respectful collaboration.

Coalitions reassess their overall status over time and that contributes to the nonlinear progression displayed.
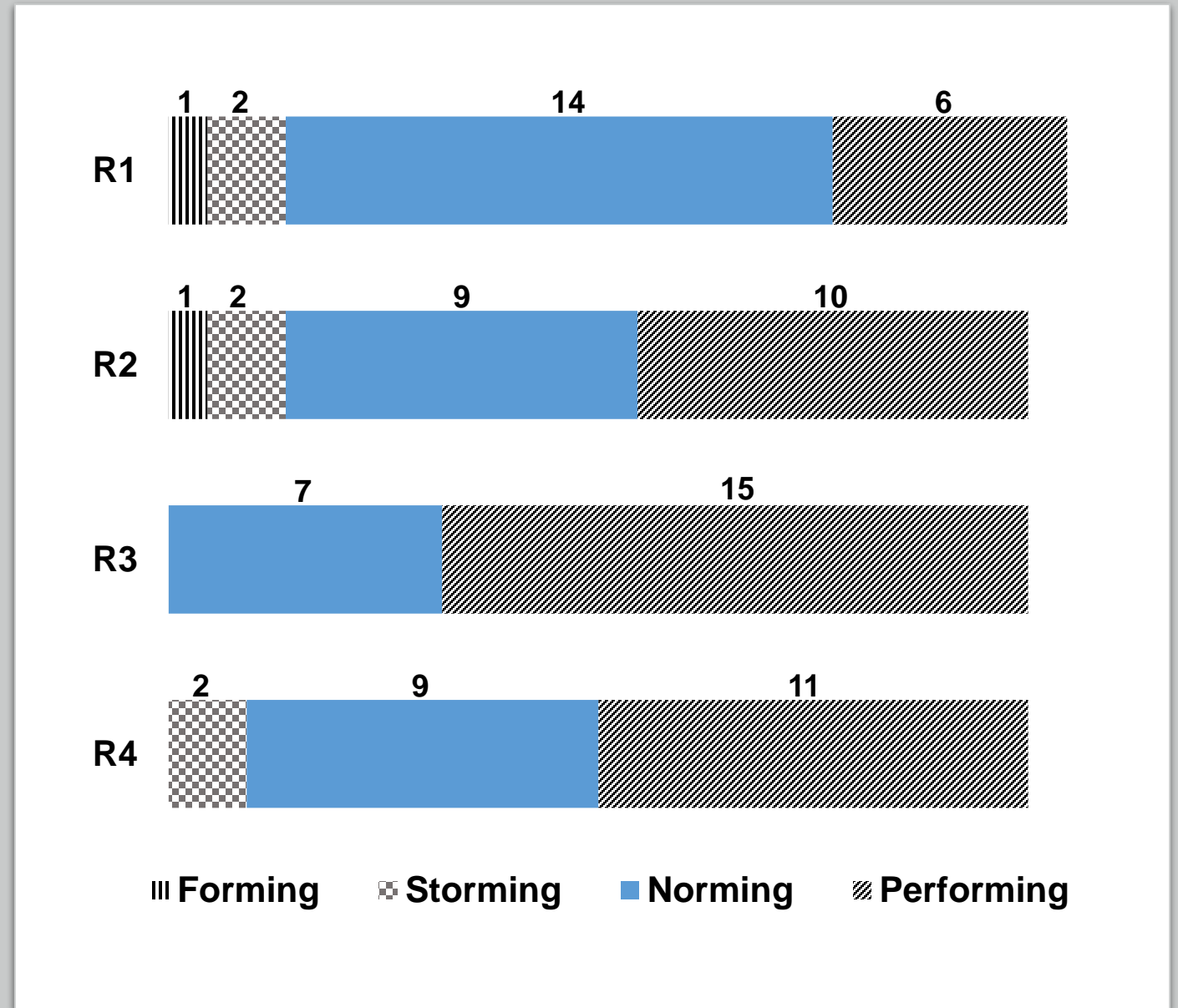
R1: January 2020 – August 2020; R2: September 2020 – February 2021;
R3: March 2021 – August 2021; R4: September 2021 – February 2022

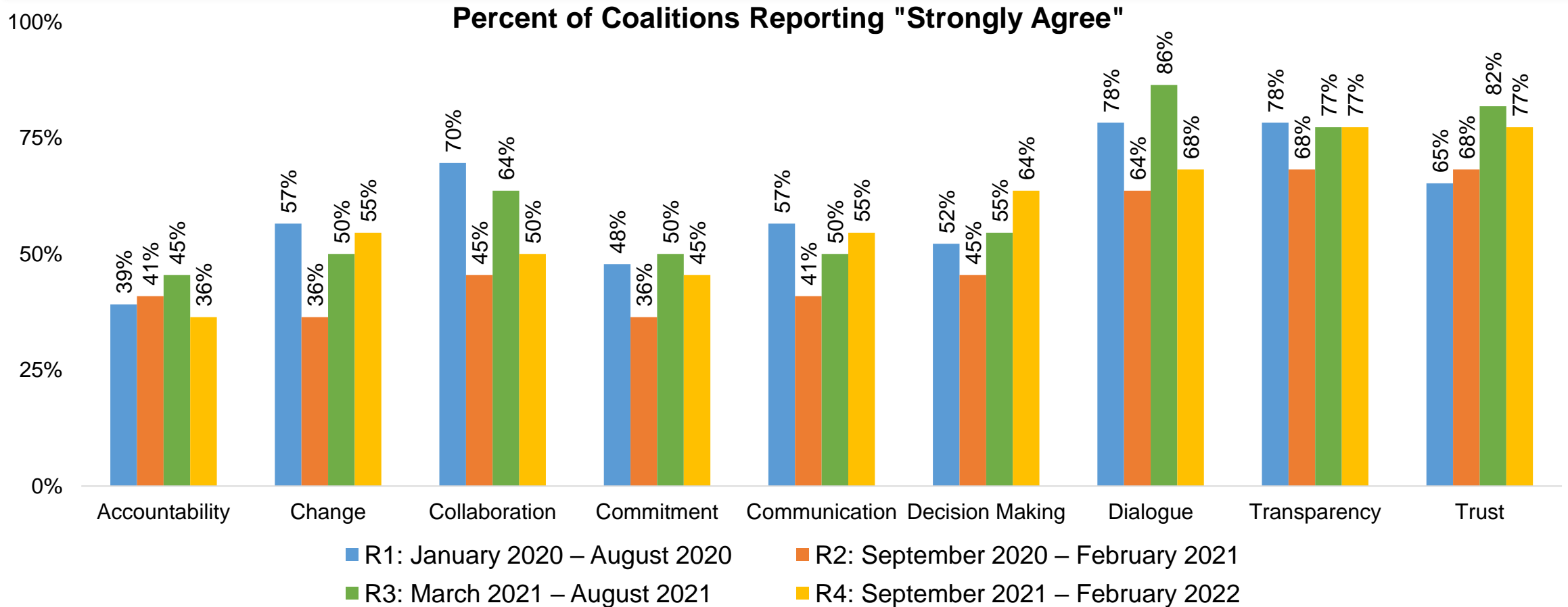# Self-Assessment of Coalition Performance
Across Progress Reports 1 - 4

Coalitions were asked to assess their coalition on the following:

- **Accountability** - The coalition members are comfortable holding each other accountable to decisions and action items.
- **Change** - The coalition can be effective in promoting policy and systems change.
- **Collaboration** - Existing coalition collaboration is sufficient to achieve local project goals.
- **Commitment** - Individual members are committed to coalition decisions, even if they initially disagreed with the direction proposed.
- **Communication** - A coalition communication system exists that supports accountability.
- **Decision Making** - An agreed upon decision- making style is in place within our coalition.
- **Dialogue** - Coalition members are able to openly dialogue about differing points of view in the spirit of finding the best solution(s).
- **Transparency** - The coalition members are open and transparent with their points of view.
- **Trust** - Trust exists among members of our coalition.

Response options included: "Strongly Agree", "Somewhat Agree", "Somewhat Disagree", "Strongly Disagree", and "Don't Know".

Self-Assessment of Coalition Performance
Across Progress Reports 1 - 4

Percent of Coalitions Reporting "Strongly Agree"

Category	R1	R2	R3	R4
Accountability	39%	41%	45%	36%
Change	57%	36%	50%	55%
Collaboration	70%	45%	64%	50%
Commitment	48%	36%	50%	45%
Communication	57%	41%	50%	55%
Decision Making	52%	45%	55%	64%
Dialogue	78%	64%	86%	68%
Transparency	78%	68%	77%	77%
Trust	65%	68%	82%	77%

- R1: January 2020 – August 2020
- R2: September 2020 – February 2021
- R3: March 2021 – August 2021
- R4: September 2021 – February 2022

Note: For each performance category the bars displayed appear in the same order as the key (R1, R2, R3, and R4).

Self-Assessment of Coalition Performance

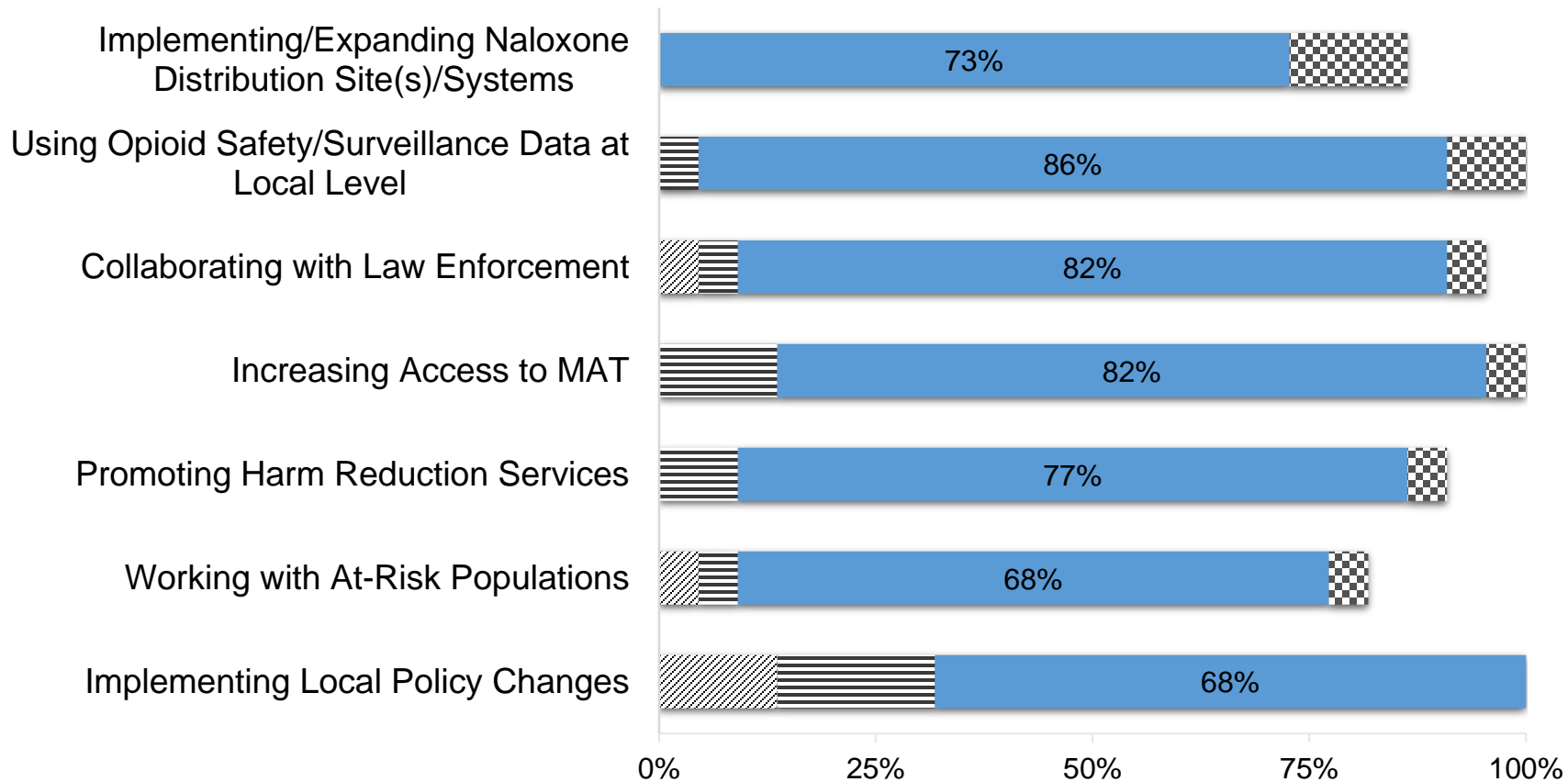Report 4: Administered March 2022 (Reporting Period: September 2021 – February 2022)
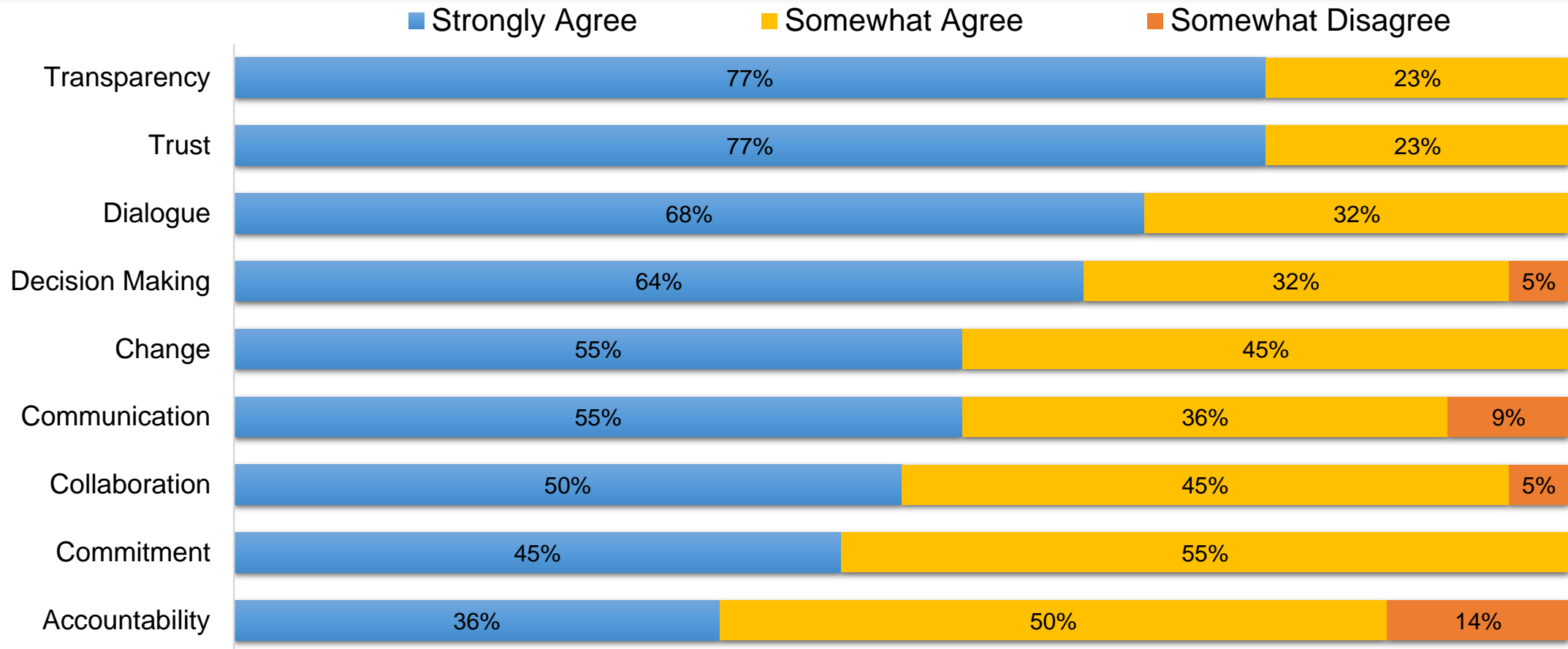
Note: No coalitions responded "Strongly Disagree" or "Don't Know". Each bar graph in the visual above displays the percent of "Strongly Agree" first, followed by "Somewhat Agree". Some coalitions responded "Somewhat Disagree" and this percent is displayed last in the bar graphs with three response categories.

Self-Assessment of Coalition Activities

Report 4: Administered March 2022 (Reporting Period: September 2021 – February 2022)

Legend: ▨ Not Started/No Current Activity ≡ Planning Stage ■ In Progress ▨ Completed

Activity	In Progress
Implementing/Expanding Naloxone Distribution Site(s)/Systems	73%
Using Opioid Safety/Surveillance Data at Local Level	86%
Collaborating with Law Enforcement	82%
Increasing Access to MAT	82%
Promoting Harm Reduction Services	77%
Working with At-Risk Populations	68%
Implementing Local Policy Changes	68%

Coalitions were asked to describe their work on the following activities. Response options included: "Completed", "In Progress", "Planning Stage", "Not Started/No Current Activity" and "N/A".

For activities that coalitions are not involved in they selected "N/A" and are not displayed in the following graph.
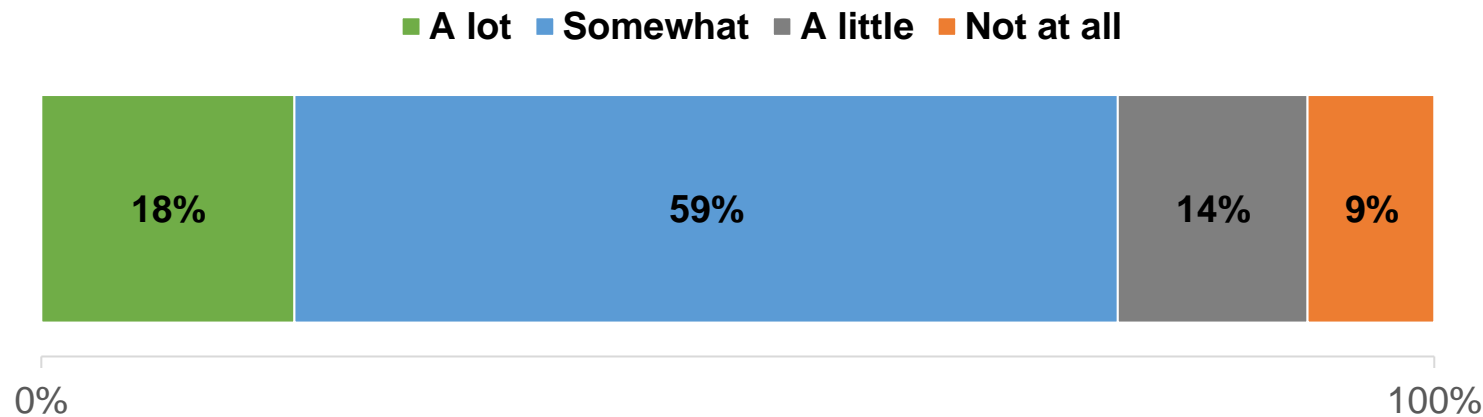
Majority of coalitions indicated "In Progress" for each of the coalition activities.

Health Equity

Report 4: Administered March 2022 (Reporting Period: September 2021 – February 2022)

Coalitions were asked to what extent their coalition is focusing on addressing health equity in their overdose prevention efforts.

Below is a graph of coalition self-reported progress:

- **17 (77%) coalitions focused on addressing health equity "A lot" or "Somewhat"**

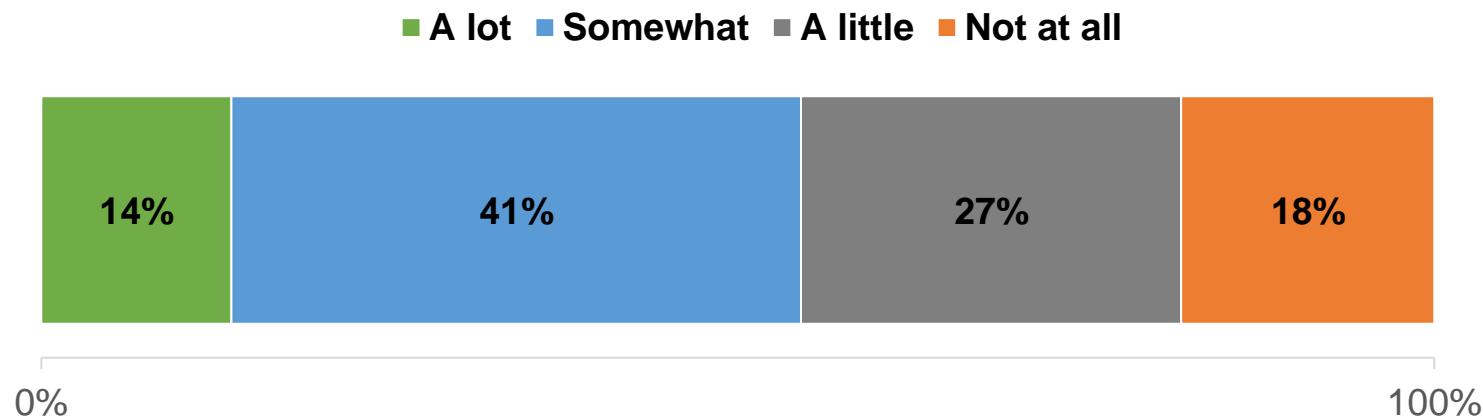- **2 (9%) coalitions reported "Not at all"**

Note: The graph above displays each response category in the same order as the graph key.

Social Determinants of Health (SDOH)

Report 4: Administered March 2022 (Reporting Period: September 2021 – February 2022)

Coalitions were asked to what extent their coalition is focusing on addressing the social determinants of health (SDOH) in their overdose prevention efforts.

Below is a graph of coalition self-reported progress:

■ A lot ■ Somewhat ■ A little ■ Not at all

| 14% | 41% | 27% | 18% |

0%   100%

- **12 (55%) coalitions focused on addressing Social Determinants of Health "A lot" or "Somewhat"**

- **4 (18%) coalitions reported "Not at all"**

Note: The graph above displays each response category in the same order as the graph key.

Health Equity and Social Determinants of Health

Report 4:
Administered March 2022
(Reporting Period: September 2021 – February 2022)

The two coalitions that answered "Not at all" regarding focusing on Health Equity answered the same for SDOH.

Four coalitions answered "Not at all" for SDOH, two had the same answer for Health Equity and the other two answered "Somewhat" for Health Equity.

Reasons for not focusing on Health Equity or SDOH:

- All the coalitions that reported not focusing on health equity selected **coalition members do not have enough "bandwidth"** as one of the reasons why. Regarding not focusing on SDOH, 3 of the 4 organizations also reported this.
- For SDOH, another common reason was **coalition members are unsure of how to apply SDOH concepts to drug overdose prevention efforts.**

Health Equity and Social Determinants of Health

Report 4: Administered March 2022 (Reporting Period: September 2021 – February 2022)

Technical Assistance

When asked "What resources or technical assistance would be helpful in integrating health equity and/or SDOH into your coalition's work?", common themes among responses were:

- A need for webinars and or training opportunities
- Support with targeted messaging, resources, and tools

Plans for Expanding Coalition Work on Health Equity and/or SDOH*

- 3 coalitions reported no plans at this time
- 3 coalitions reported that plans were in discussion
- The 11 remaining coalitions reported plans to either expand their work with existing community partners or have identified specific populations they plan to work with

* 5 coalitions did not respond; 4 of these coalitions were those that responded that they were not focusing on Health Equity or SDOH

Top Successes and Challenges

Report 4: Administered March 2022 (Reporting Period: September 2021 – February 2022)

Coalition Successes

- Distribution of naloxone

- Provide outreach to the community and provide information and resources at various events

- Naloxone into schools

- MAT for youth work

Coalition Challenges

- Center closures due to COVID-19

- Staffing challenges, burnout among staff/coalition members, and training new staff

- School/district buy-in for opioid prevention

- Community buy-in to implement MAT in the county

COVID-19 Impacts

Report 4: Administered March 2022 (Reporting Period: September 2021 – February 2022)

COVID-19 Challenges

59% Identified challenges related to lack of in-person events, meetings, presentations, trainings, or interactions

36% Identified staffing related challenges (including staff burnout or staffing shortage/turnover)

Adaptations and Opportunities

❖ Switching to virtual platforms for meetings and events

❖ Delivering on-line trainings

❖ Hosting drive-thru events

❖ Forging new relationships with service providers to help provide outreach to hard to reach populations

Additional Technical Assistance or Support

Report 4:
Administered March 2022
(Reporting Period:
September 2021 –
February 2022)

Coalitions were asked to describe any requests for specific TA, training, tools/resources, or other support during the next 6 months.

Themes among responses included:

- Resources/guidance/support focused on health equity and or SDOH
- Youth focused resources and education/awareness campaign samples
- Assistance with ODMAP

Appendix
Additional Interpretations

Stages of Development

During each semi-annual progress report, coalitions assessed the overall status of their coalition. There were only two instances where coalitions reported being in the "Forming" stage of development, which were in the first two years of the projects. The most common development stages across all reporting periods were "Norming" and "Performing". Reporting period three included the largest number of coalitions (15) that reported being in the "Performing" development stage.

Self-Assessment of Coalition Performance

Coalitions assessed their progress across nine categories during each semi-annual report. Coalitions rated their performance for each category with the following response options: "Strongly Agree", "Somewhat Agree", "Somewhat Disagree", "Strongly Disagree", and "Don't Know". The response "Strongly Agree" indicates that the performance category is one that the coalition identifies as performing well in. Looking at the trends over time demonstrates that responses to the first progress report started out strong with most of the coalitions indicating "Strongly Agree" for the performance categories. During the second progress report there was a noticeable decrease in the percent of coalitions that indicated "Strongly Agree"; this may be related to delayed impacts that COVID-19 had on coalition performance. The coalitions generally reported increased performance for each category in the third progress report.

Self-Assessment of Coalition Performance: Report 4

Coalition performance responses for the fourth progress report found that no coalitions reported "Strongly Disagree" or "Don't Know". There were a few who responded "Somewhat Disagree" for accountability (14%) and communication (9%). A reoccurring theme across all the reporting periods that continues into the fourth report is that the performance area of accountability is where future work is needed. Only 36% of coalitions reported "Strongly Agree" regarding "The coalition members are comfortable holding each other accountable to decisions and action items".