

# Community Overdose Engagement (CODE) At-A-Glance: Pawtucket/Central Falls

## May 2021 – December 2023

The Pawtucket/Central Falls CODE Initiative is a community-driven response to the local substance use and drug overdose epidemic. Each CODE is guided by a diverse collaborative of organizations that works in partnership with the Rhode Island Department of Health (RIDOH) to develop and implement an action plan in response to the most pressing needs of the community. This summary reflects the successes, challenges, and lessons learned throughout the initiative as reported by CODE partners.

### Primary Activities

- Convened monthly collaborative meetings of the Pawtucket/Central Falls Health Equity Zone (HEZ) Initiative Substance Use and Mental Health Task Force to leverage resources and address overdose in Pawtucket and Central Falls.
- Collaborated with Project Weber/RENEW (PWR) to identify an appropriate space to open and operate a fixed drop-in location in Pawtucket. Provided harm reduction services, basic needs, medical care (as available), and referrals to other services as requested.
- Increased outreach capacity throughout neighborhoods in Pawtucket and Central Falls.
- Conducted stigma and naloxone administration trainings with community members and key partners.

### Data Overview: Pawtucket/Central Falls CODE Activities<sup>1</sup>:

Encounters <sup>2</sup>	Naloxone doses distributed	Naloxone training	Referrals <sup>3</sup>	Number of Outreach Shifts
14,021	2,834	19 (320 trainees)	1,064	222

<sup>1</sup>From monthly reports

<sup>2</sup>Encounters include both mobile outreach and drop-in center

<sup>3</sup>Referrals include housing, treatment, peer support, basic needs, and other types of support for both outreach and drop-in center clients

Gender (Avg. % of clients served/mo.)	Race (Avg. % of clients served /mo.)	Ethnicity (Avg. % of clients served /mo.)
Male: 59%	Black: 22.1%	No response: 11.5%
Female: 33%	White: 54.8%	Hispanic: 26.6%
Non-binary: 0.2%	Asian: 0.1%	Non-Hispanic: 61.9%
No response: 7.8%	Other: 5.7%	
	No response: 17.3%	

### Facilitators and Successes

**Outreach coordination:** PWR partnered with Crossroads Rhode Island and the City of Providence to create an expedited referral system for treatment and housing.

**Naloxone training:** Provided naloxone training in the community through business outreach and the drop-in center.

**Safer smoking kit distribution:** Began in February 2022 and helped to reach people who identify as Black, Indigenous, and a person of color (BIPOC).

#### Drop-in center:

- The drop-in center provided space for community naloxone training, distribution of harm reduction supplies, walk-in medical services, and distribution of non-perishable food items.
- This location became a food bank, which allowed PWR to provide a wider range of healthy food options.

## Barriers

### Housing:

- Partners continued to advocate for the need of shelter and transition housing on the city level.
- There was a specific lack of housing for families who were in the middle of their recovery journey.
- Most shelters were forced to separate families.

### Treatment bed availability:

- There were challenges connecting clients who used stimulants (instead of opioids) to inpatient and outpatient treatment. Such challenges raised equity concerns.

### Fentanyl contamination:

- There was a spike in overdoses in Pawtucket due to fentanyl-contaminated cocaine, leading to fatal overdoses among PWR clients.
- The increase in fatal overdoses among clients was emotionally taxing for both clients and staff.

### Data:

- Limitations with data collection made it difficult to determine the exact number of unique outreach encounters that occurred during the project period.

### Law enforcement:

- The public did not always feel safe calling law enforcement to respond to overdoses.

### COVID-19 pandemic:

- The pandemic impacted the ability of CODE partners to serve clients (e.g., trainings, referrals, outreach) due to unique staffing shortages and mandated social distancing.

## Lessons Learned

### Stigma and perceptions of people who use drugs within police departments need to be addressed:

- The public did not always feel comfortable or safe calling law enforcement. Those who called 9-1-1 to respond to an overdose and had negative experiences with law enforcement were reluctant to call again.

### Addressing the social determinants of health is integral to preventing overdose:

- Implementing mobile HIV and hepatitis C testing for clients during outreach and managing a walk-in medical service program was integral to PWR clients. This program provided a direct contact to treatment services and helped streamline the intake process.

