

Survey questions with QR codes

- After slide 6, q1: : How would you describe your organization?
 - + Community-based organization
 - + Non-profit foundation
 - + Health department
 - + Other government agency or organization
 - + Academic institution
 - + Other
- After slide 6, q2: How familiar are you with OMM? (Scale)
- After slide 14: How often do you use data in your work? (Scale)
- After slide 17: Of these 3 audiences, which one do you most identify with? (pick 1)
- After slide 21: Are you currently tracking overdose prevention indicators within your organization? (yes, no, I don't know)
- After slide 35: Does your organization do any work to address stigma? (yes, no, I don't know)
- After slide 39: What word would you use to describe an effective partnership?



OVERDOSE MEASURES MATTER



A Data Collection Guide for Community-based Organizations, Health Departments and Funders

OverdoseMeasuresMatter.org

June 15, 2026

Today's Presentation

- OVERVIEW
- ABOUT THE CDC FOUNDATION
- ABOUT OVERDOSE MEASURES MATTER (OMM)
- OMM INDICATORS AND WEBSITE
- REAL-WORLD EXAMPLES
- Q&A



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www.OverdoseMeasuresMatter.org

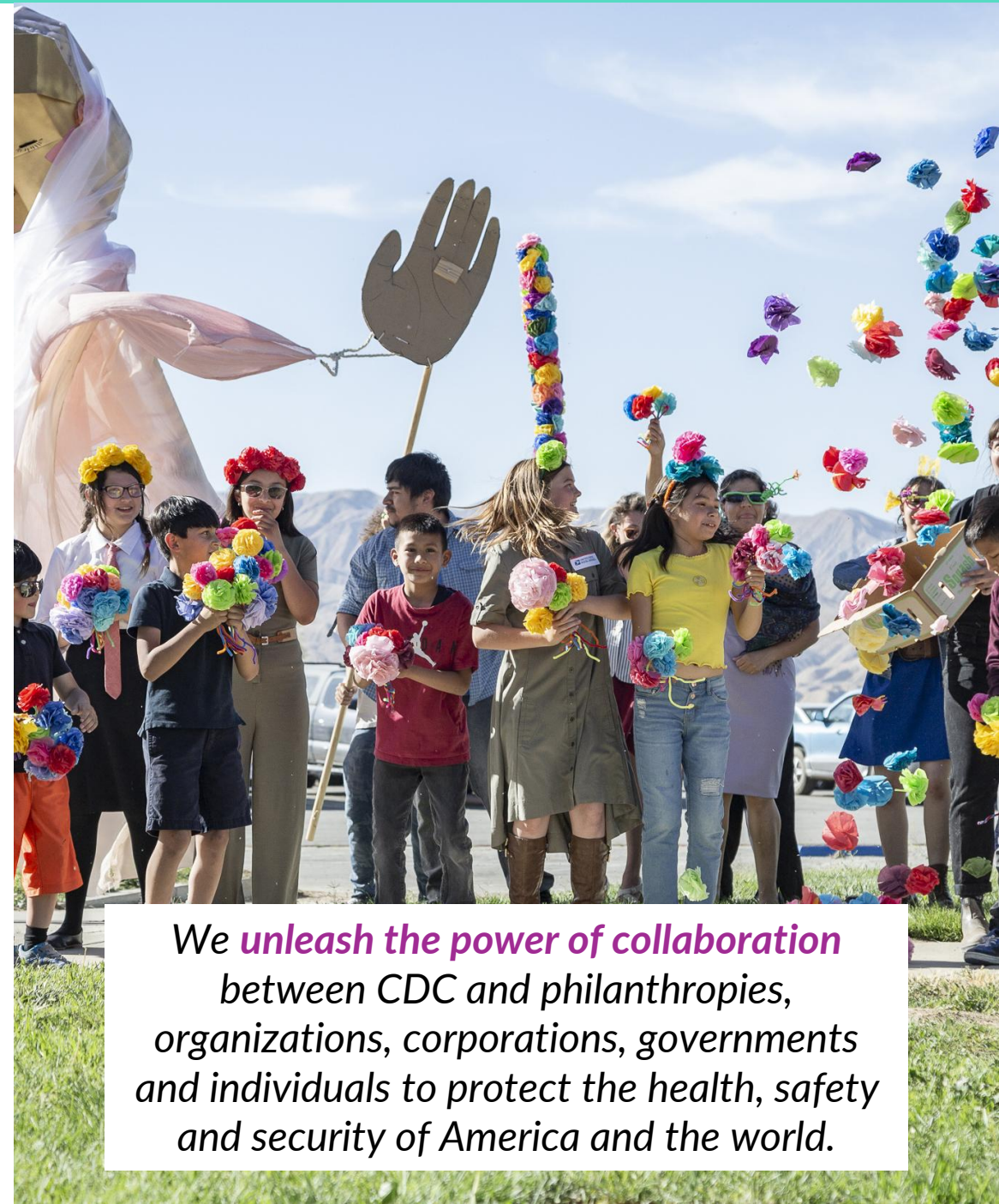
About the CDC Foundation

Who We Are

- Independent **501(c)(3) nonprofit** created by Congress
- Authorized to **mobilize private and philanthropic** support for CDC
- A connector linking **government, communities, funders, and organizations** to strengthen public health

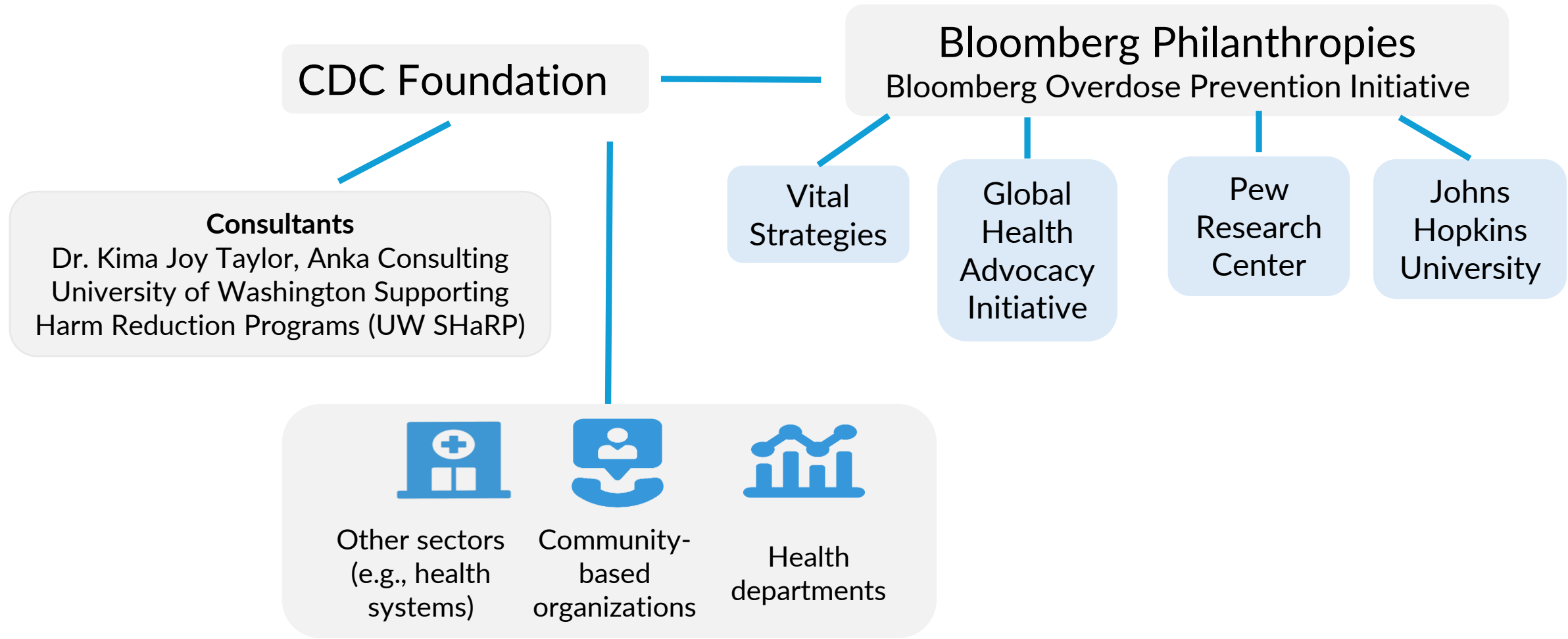
What We Do

- Support CDC's life-saving work through **flexible, cross-sector partnerships**
- Implement programs addressing **urgent and emerging public health needs**
- Expand impact through a **national network of partners**



We **unleash the power of collaboration** between CDC and philanthropies, organizations, corporations, governments and individuals to protect the health, safety and security of America and the world.

Project Partners



Why Data Matters?

Data helps us understand what's going on in our communities, our organization, our programs and with the people we serve

What do you measure?
How do you measure it?

Overdose prevention data guides us in understanding:

What we know about overdoses in our community

What we are doing to prevent overdoses

The efficiency of our efforts

The impact of our efforts

This allows us to identify:

What's working well?

What improvements may be needed?

Who is being served?

Who is being missed?

This knowledge can help us shape our programs to be more effective in preventing overdoses and saving lives

ABOUT OVERDOSE MEASURES MATTER

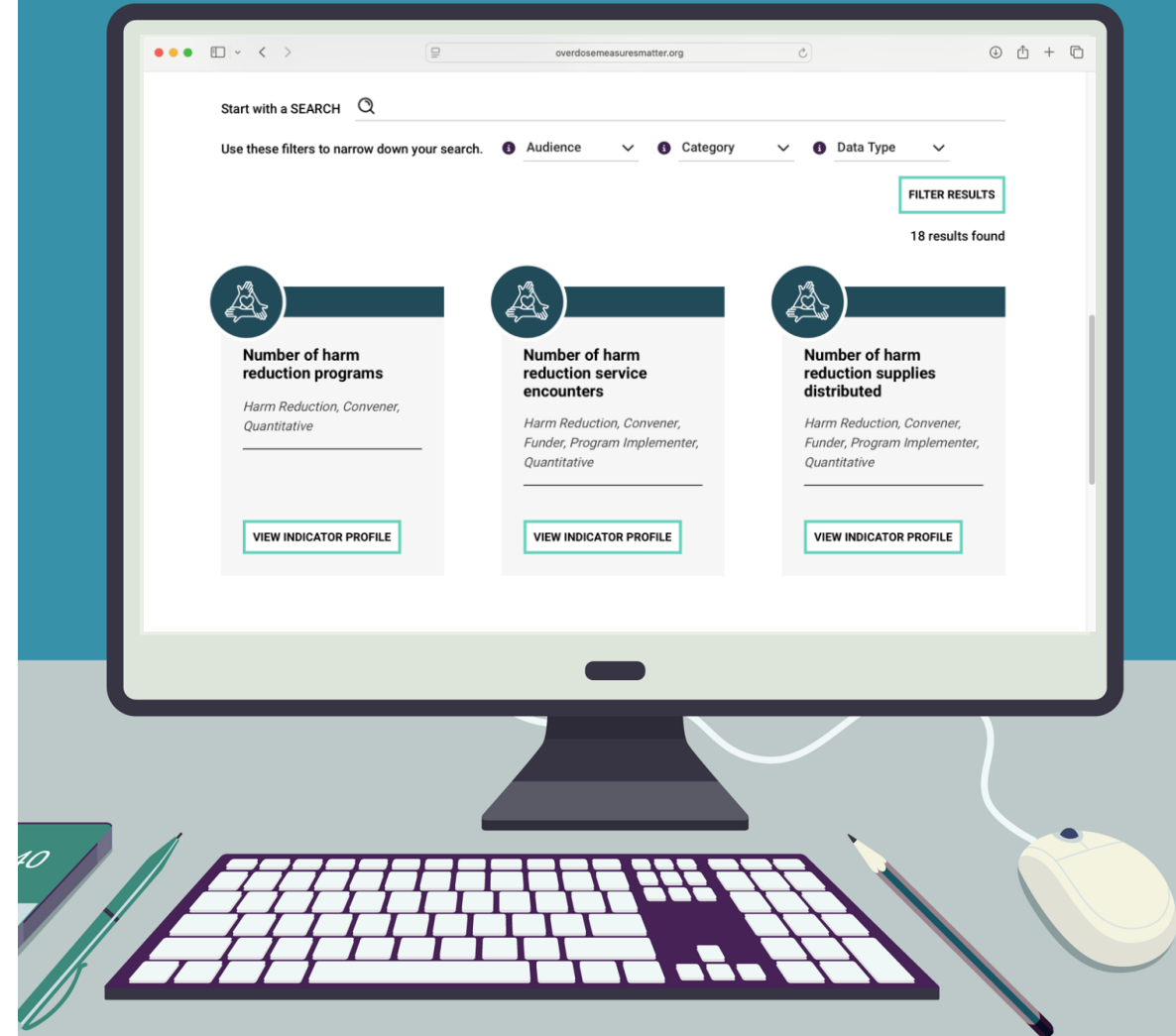


WHAT IS OVERDOSE MEASURES MATTER?

A website that helps you choose what to measure to help communities use data for overdose prevention.

It is not a database and does not collect or store data.

**Note: OMM is intended for data collection on all substances, not just opioids.*



HOW MIGHT OMM FIT INTO YOUR WORK?

OMM can help supplement current performance measures for *your own use*

- Fill in gaps
- Designed for your **own learning and decision-making**
- Learn more about the people you serve
- Run programs more efficiently and effectively
- Useful for beginners *and* experienced evaluators

TO SERVE COMMUNITY NEEDS

What services are needed most?

Are overdose prevention programs available in areas with the highest overdose rates?

What are common barriers to engaging potential clients?

Are there gaps in the types of referrals that are being made?

Are there opportunities to build linkage to care networks?

TO ADDRESS HEALTH ACCESS GAPS

Is everyone
able to
access
services?
Who is
being
missed?

Can you
tailor your
program to
better reach
people in
your
community?

Are peers
able to
connect
with people
with
substance
use
disorder?

How might
stigma
influence
how people
access and
initiate
care?

TO GAUGE PROGRAM EFFICIENCY AND PERFORMANCE

What happens after someone receives a referral to a program or service?

How can you work with your partners to improve your collective response to overdose prevention?

Are there opportunities to improve satisfaction and wellbeing among peer workers within your organization?

Are there opportunities to include people with lived experience in planning and key decision-making within your organization?

WHY WAS OVERDOSE MEASURES MATTER CREATED?

There was a need for a standardized set of overdose prevention indicators.

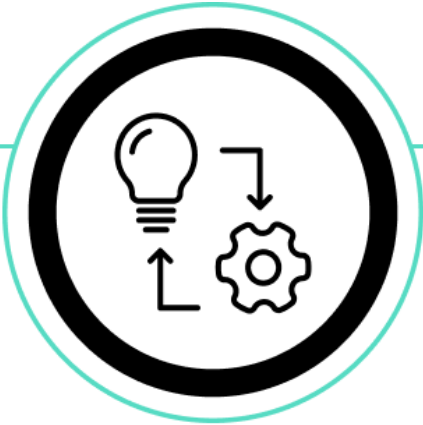
To reduce overdose and overdose deaths, communities need indicators that (are):

- Relevant for anyone
- Tailorable
- Produce accurate data for decision-making
- Center the organization and the community
- Guide collaboration

HOW DID WE DEVELOP THESE INDICATORS?

- **7 Work Groups:** Subject matter expert workgroups reviewed and refined an initial list of 500+ indicators
- **75 Diverse Perspectives:** Two preliminary sessions, three intensive sessions for core group of nine and one open forum
- **85 Public Health Departments:** Online survey to 200+ contacts to understand data currently available and desired
- **7 Awardees and \$90K in Grants:** Sites piloting indicators, collecting data, providing feedback on feasibility and relevance

WHO IS OVERDOSE MEASURES MATTER FOR?



**PROGRAM
IMPLEMENTERS**



**COMMUNITY
CONVENERS**



FUNDERS

Organizations may fall into more than one group
Indicators are searchable by audience, so you collect only what you need

OMM INDICATORS AND WEBSITE



WHAT TYPES OF INDICATORS ARE FEATURED?



HARM REDUCTION

Harm Reduction indicators relate to evidence-based approaches that save lives and lessen the harms of drug use, including disease transmission.



LINKAGE TO CARE

Linkage to Care indicators relate to the core overdose prevention strategy of connecting people to the services they need.



HEALTH ACCESS

Health Access indicators relate to whether everyone has a fair and just opportunity to access the care that they need.



PARTNERSHIPS

Partnership indicators relate to the process of establishing relationships across multiple sectors and organizations to develop, coordinate and implement tailored overdose prevention activities.



PEER WORKFORCE SUPPORT

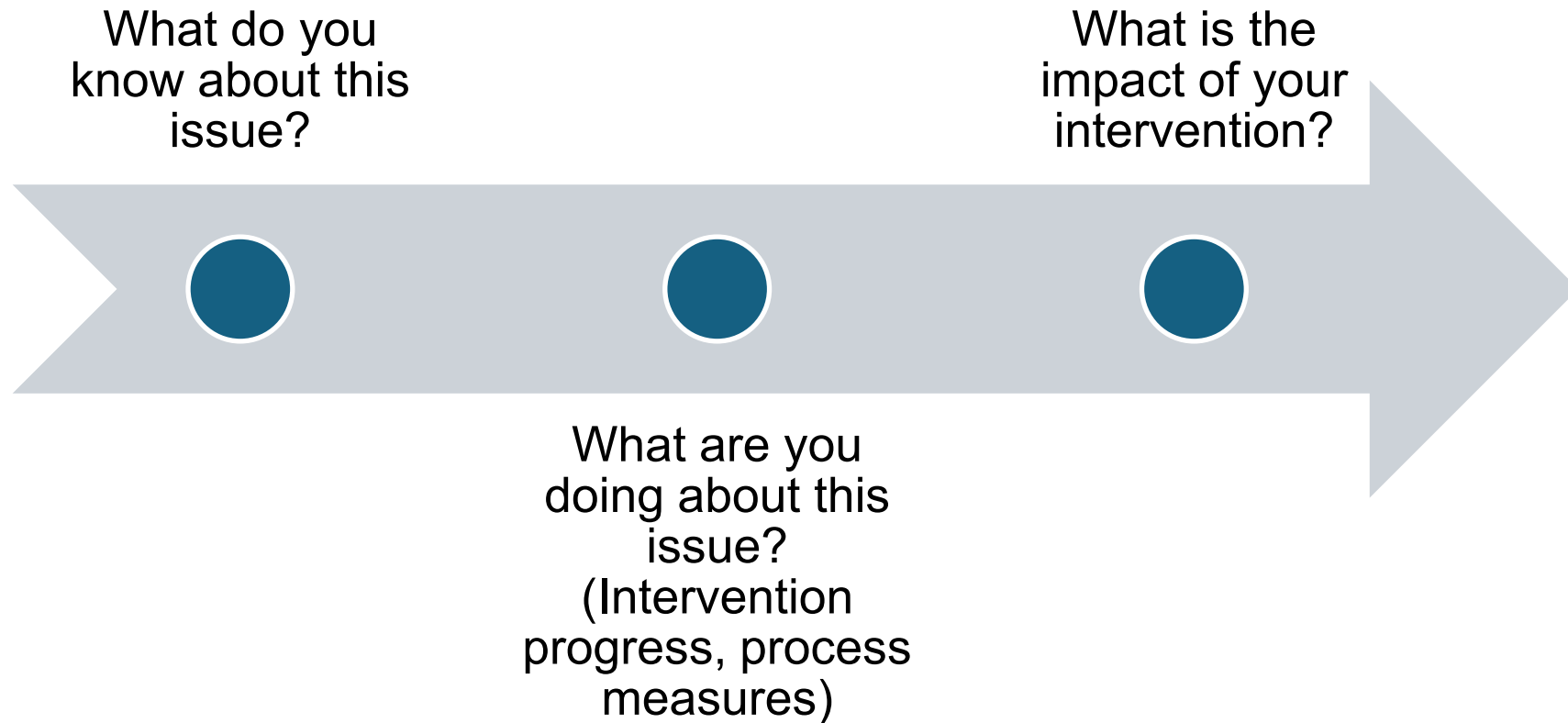
Peer Workforce Support indicators relate to practices and policies that support the establishment, development and sustainability of a peer workforce. Peer workers include people with lived and living substance use experience who help others in similar situations.



STIGMA REDUCTION

Stigma Reduction indicators relate to lessening situations where people with certain social identities are labeled, stereotyped and devalued, leading to discriminatory behavior and internalized shame.

OMM INDICATORS



OMM INDICATORS

Category	Indicator
PARTNERSHIP 	• Number of partners you work with to address and prevent overdoses and associated harms
PEER WORKFORCE SUPPORT 	• Description of efforts to support fair treatment of peer workers employed by your organization • Number of peer navigators embedded into community settings working to connect people to care and services • Percent of peer workers who have been employed and retained by your organization for at least one year
LINKAGE TO CARE 	• Description of barriers to initiating or engaging in care or services • Number or percent of referrals to care and services • Percent of people referred who initiate care • Percent of emergency departments with dedicated staff who assist people with substance use disorder (SUD), such as providing SUD assessments, harm reduction services, and provide linkage-to-care services/warm handoffs • Number of medications for opioid use disorder (MOUD) prescriptions filled

HOW TO SEARCH THE INDICATORS DATABASE

Indicators organized by:

- User groups
- Category
- Data type (quantitative vs. qualitative)

Start exploring indicators:

- Text search
- Filter options

To get started, you can search for indicators using a text search or by using any of the filter options. To learn more about each indicator, click on the "View Indicator Profile" icon.

Start with a SEARCH

Use these filters to narrow down your search. Audience Category Data Type

Selected Filters:

Categories: Linkage to Care X Partnerships X

Applied Filters:

Categories: Linkage to Care, Partnerships

6 results found

Barriers to receiving services

Linkage to Care, Convener, Funder, Program Implementer, Qualitative

Number or percent of referrals to care and services

Linkage to Care, Convener, Funder, Program Implementer, Quantitative

Percent of people referred who initiate care

Linkage to Care, Convener, Program Implementer, Quantitative

HOW TO USE INDICATOR PROFILES

- Click on “View indicator profile” button to pull detailed information about each indicator
 - + Description
 - + Rationale
 - + Ways to examine the data (disaggregates)
 - + Suggested use
 - + Health access considerations
 - + Evaluation considerations

The screenshot shows a web application interface for searching indicator profiles. At the top, a grey header bar contains three window control buttons. Below the header, a white box contains the following elements:

- Introductory text:** "To get started, you can search for indicators using a text search or by using any of the filter options. To learn more about each indicator, click on the 'View Indicator Profile' icon."
- Search bar:** Labeled "Start with a SEARCH" with a magnifying glass icon.
- Filter options:** A row of three filter categories: "Audience", "Category", and "Data Type", each with a dropdown arrow and an information icon.
- Selected Filters:** A section showing "Categories: Linkage to Care X Partnerships X".
- Buttons:** "FILTER RESULTS" and "CLEAR FILTERS" buttons.
- Results count:** "6 results found".
- Applied Filters:** A section showing "Categories: Linkage to Care, Partnerships".

Below the search interface, three indicator profile cards are displayed, each with a purple header bar and a white body:

- Card 1:** "Barriers to receiving services". Subtext: "Linkage to Care, Convener, Funder, Program Implementer, Qualitative". A "VIEW INDICATOR PROFILE" button is at the bottom.
- Card 2:** "Number or percent of referrals to care and services". Subtext: "Linkage to Care, Convener, Funder, Program Implementer, Quantitative".
- Card 3:** "Percent of people referred who initiate care". Subtext: "Linkage to Care, Convener, Program Implementer, Quantitative".

At the bottom right, the CDC Foundation logo is displayed with the tagline "Together our impact is greater".

LINKAGE TO CARE: BARRIERS TO RECEIVING SERVICES

INDICATOR OVERVIEW

Description

This is a qualitative indicator to assess the barriers that people with lived and living substance use experience (PWLLE) face while initiating or engaging in care to address current and ongoing needs.

We encourage you to consider if your organization would benefit from learning about barriers to care and service needs more broadly, or from selecting specific care and services that are most relevant to your context. For example, you may want to ask participants about:

- Barriers to all care and services that are needed (e.g. *"Reasons for not engaging/initiating care"*)
- Barriers to specific care and services that your organization directly provides or is interested in providing or is interested in learning more about (e.g. *"What barriers have you experienced in receiving medical care?"*)
- Barriers to specific care and services that are currently available in your community (e.g. *"What challenges have you faced using the transportation system?"*)

LINKAGE TO CARE: BARRIERS TO RECEIVING SERVICES

INDICATOR OVERVIEW

Rationale

People with lived and living substance use experience often face a high burden of complex medical needs such as chronic disease, chronic pain, acute infections, medications for opioid use disorder (MOUD) management and psychiatric care. Additionally, increased barriers in accessing primary care, dental care, housing and other services may also exist, especially among people historically underserved.

Insight into the experiences of PWLLE in navigating, accessing and initiating care, helps programs, communities and funders be better positioned to understand policy and/or program impacts, leverage resources to address disparities and unmet needs and promote access to care in underserved communities.

TIPS, RESOURCES AND TOOLS

The site also includes a variety of tips, resources and tools, including:

- Community engagement tips
- Data collection best practices
- Tips for funders
- An interactive tool for understanding qualitative and quantitative data types
- And more



COMMUNITY ENGAGEMENT

These community engagement strategies can help underserved.



Expand your definition of subject indicators and data collection to include:

- Those who understand the health and social issues
- People with lived and living experience
- People who know how to build trust



Engage community early and often to identify and address harmful metrics. Identify and engage community members who can help you understand the needs and experiences of the community.

Transparency and engagement are key to the success of the program. This step is critical to the success of the program.

On engaging with community members, information you collect is critical to the success of the program.

Work on the people who are most at risk. They should be examined and their needs addressed.

Centered language and culture. Valuing language and culture is critical to the success of the program.

Overdose Data and Response System. Community and partnership are key to the success of the program.

FOR FUNDERS

5 TIPS FOR FUNDERS

Funders—including philanthropic organizations, government agencies and others—play a crucial role in advancing overdose prevention efforts. Funders may inform policy decisions and which programmatic strategies are implemented and thus benefit from data that can help to provide evidence for implementation and justify sustained funding.

Funders are encouraged to partner with program implementers in the communities they serve to best address the needs of people who use drugs and prevent overdose. Some philanthropic organizations are already doing this well, having worked together to develop similar data reporting requirements. Additional tips are listed below.



Tip 1

Prioritize program implementers and limit data reporting requirements

When funding is allocated to program implementers, data collection should not be a barrier to service provision, and funders should limit data reporting requests to data that will be used to address program sustainability and ongoing funding priorities.

The indicators on this website have been grouped into categories that together can work to help measure progress in the overdose crisis. These categories are harm reduction, linkage to care, health access, partnerships, peer workforce support and stigma reduction. See the indicators.

INDICATOR DATA TYPES

Indicator data can help you understand the progress of a project and answer important questions. Quantitative data uses numbers you can convert into percentages, ratios or averages. Qualitative data answers the why by revealing the stories and experiences of community members and clients.

By using both types of data together, you can have a more complete picture of an issue. Here is information about each type of data and how they translate into measures. Use the tabs to toggle and compare qualitative and quantitative indicators.



Quantitative Indicators



Qualitative Indicators

HOW THE DATA ARE COLLECTED



Surveys with open-ended questions



Interviews



Focus Groups



Observations

EXAMPLES

Information about the characteristics, meanings, experiences, and opinions that can be explained numerically like:

Quantitative: How many organizations engaged people with lived or living experience (PWLE) in planning and any decision making of overdose prevention program?

Qualitative: Is there a person focused on and going to seek treatment?

ADVANTAGES

Answers the "how" and "why" questions

How? Why?

Provides contextual data to explain complex issues



Gives voice to people

HOW TO GET STARTED WITH OMM

- Review the indicators to identify the ones that best fit your organizational goals and priorities
 - + What do you need to know?
 - + What's feasible?
 - + What question would this indicator help you answer?
 - + What would you do?

⊖ SELECTING OVERDOSE PREVENTION INDICATORS

To start, review the [overdose indicators](#) to identify the ones that best fit your organizational goals and priorities. Consider indicators that provide the information your organization needs and consider the tips below for further guidance.

Tip 1: Determine what you need to know about your program



- What questions do you have about your program?
- Do you need to know this information, or do you just want to know it?
- How will you use the data you collect?

Tip 2: Use existing data sources when possible



- What data sources do you have available (e.g., census, existing surveys, public health surveillance and routine program data,
- How can indicators complement what is already known from existing data?

www.overdosemeasuresmatter.org/getting-started

REAL-WORLD EXAMPLES



OMM PILOT PROJECT

Key component in development process – sites funded to field-test OMM indicators

✧ September 2023 – August 2024

Select, monitor and evaluate a set of indicators

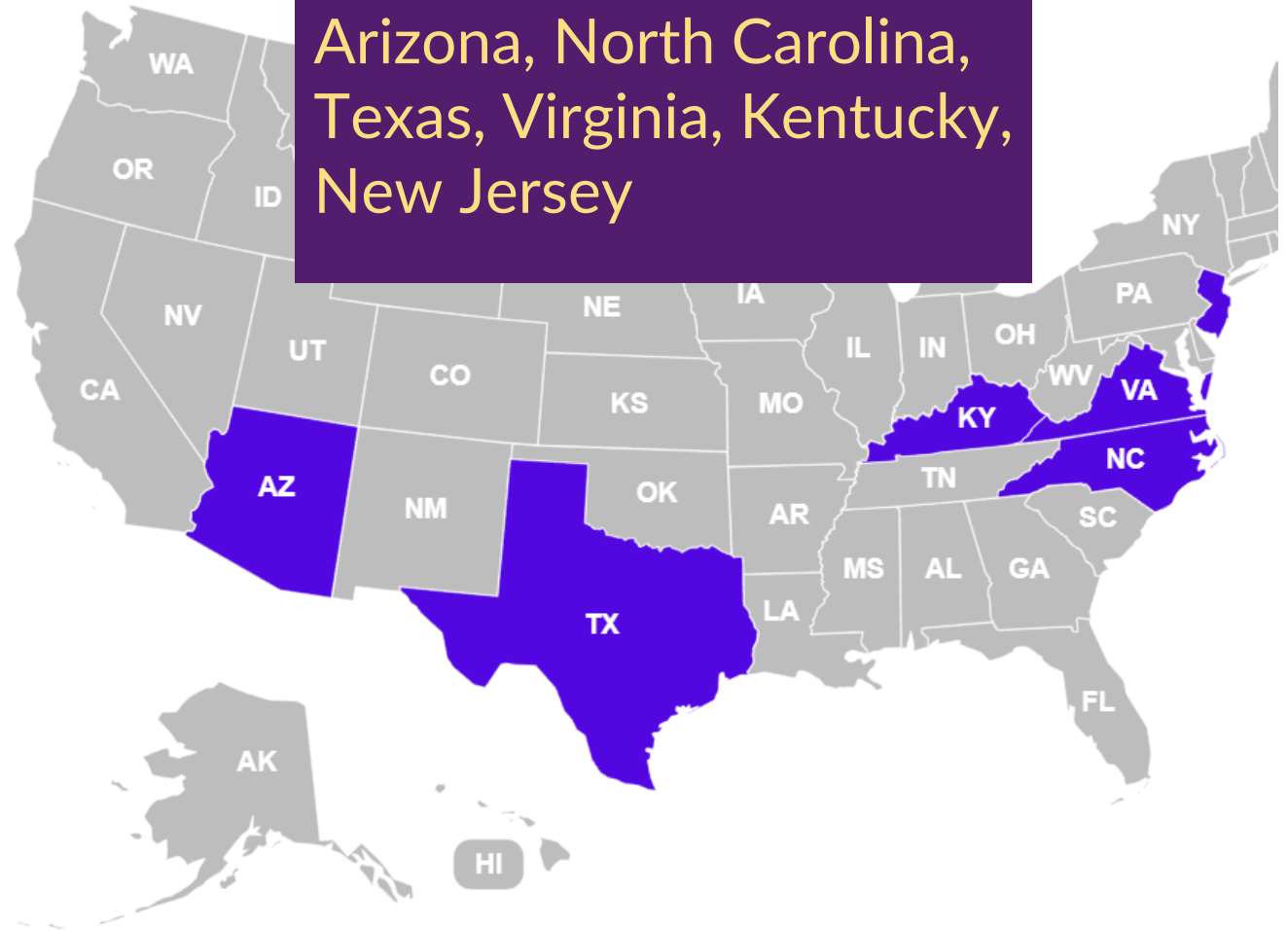
Share learnings and insights across sites

Provide feedback on the ease of data collection and utility

Provide recommendations for indicators



7 sites in 6 states:
Arizona, North Carolina,
Texas, Virginia, Kentucky,
New Jersey



Map created at www.fla-shop.com

COMMUNITY OF PRACTICE

Community-based organizations
and health departments
funded to use OMM

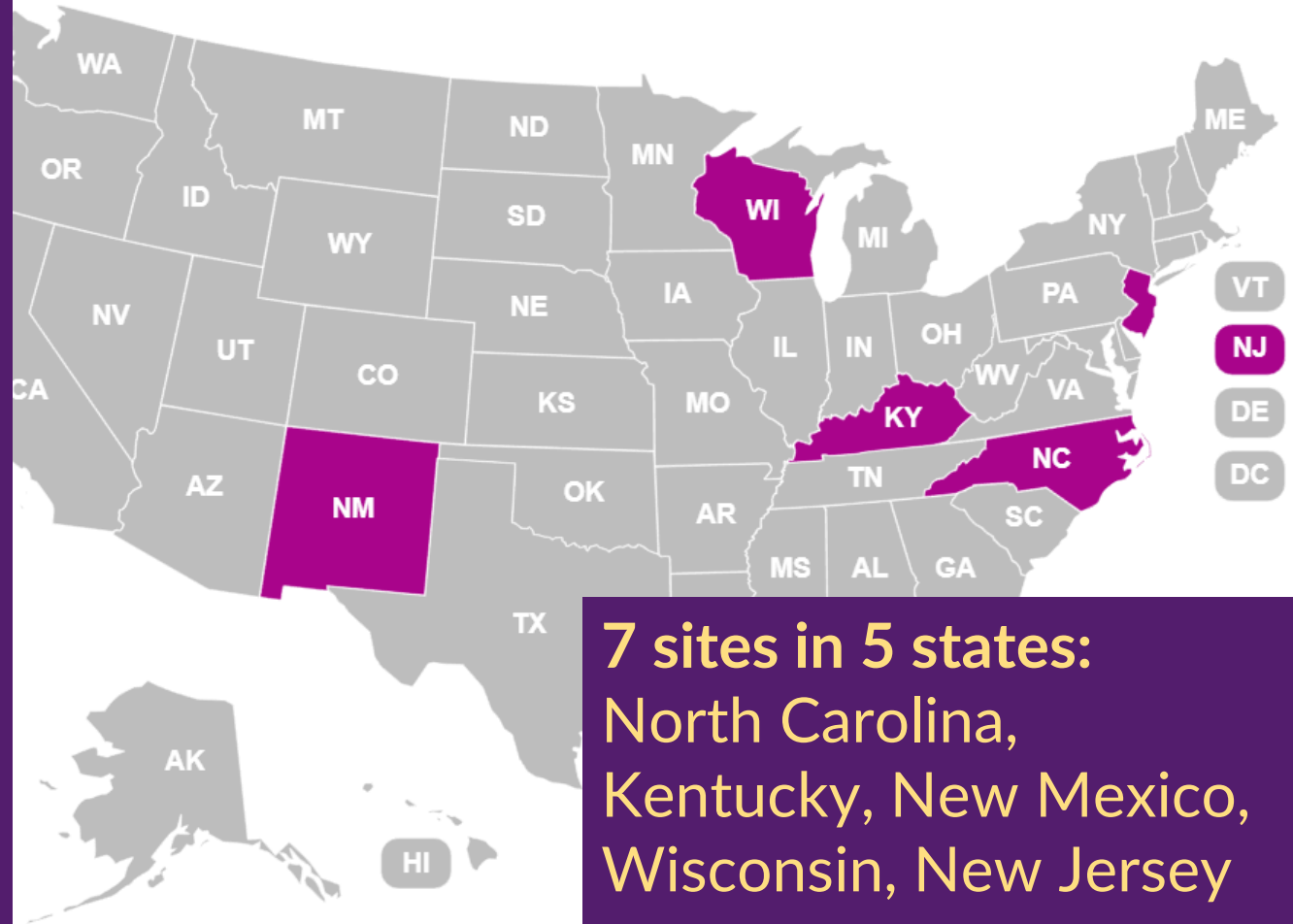
☼ June 2025 – June 2026

Progress data
collection,
tracking, or use of
indicators

Participate in CoP
to communicate
learnings and
progress

Provide feedback
on OMM website

Provide
recommendations
for CoP



PILOT SITE: UK ST. CLAIRE

- Lead organization: The Northeast Kentucky Area Health Education Center at UK St. Claire Hospital in Morehead, KY
- Teamed up with partners, NE KY Substance Use Response Coalition and the Gateway District Health Department
- Provide support to PWLE across 19 counties through a variety of projects and programs
- Used six indicators to address questions they had about:
 - + Coroner function; data collection
 - + Emergency department service to people with SUD or present at overdose
 - + Stigma among first responders



NORTHEAST KENTUCKY



Gateway District Health Department

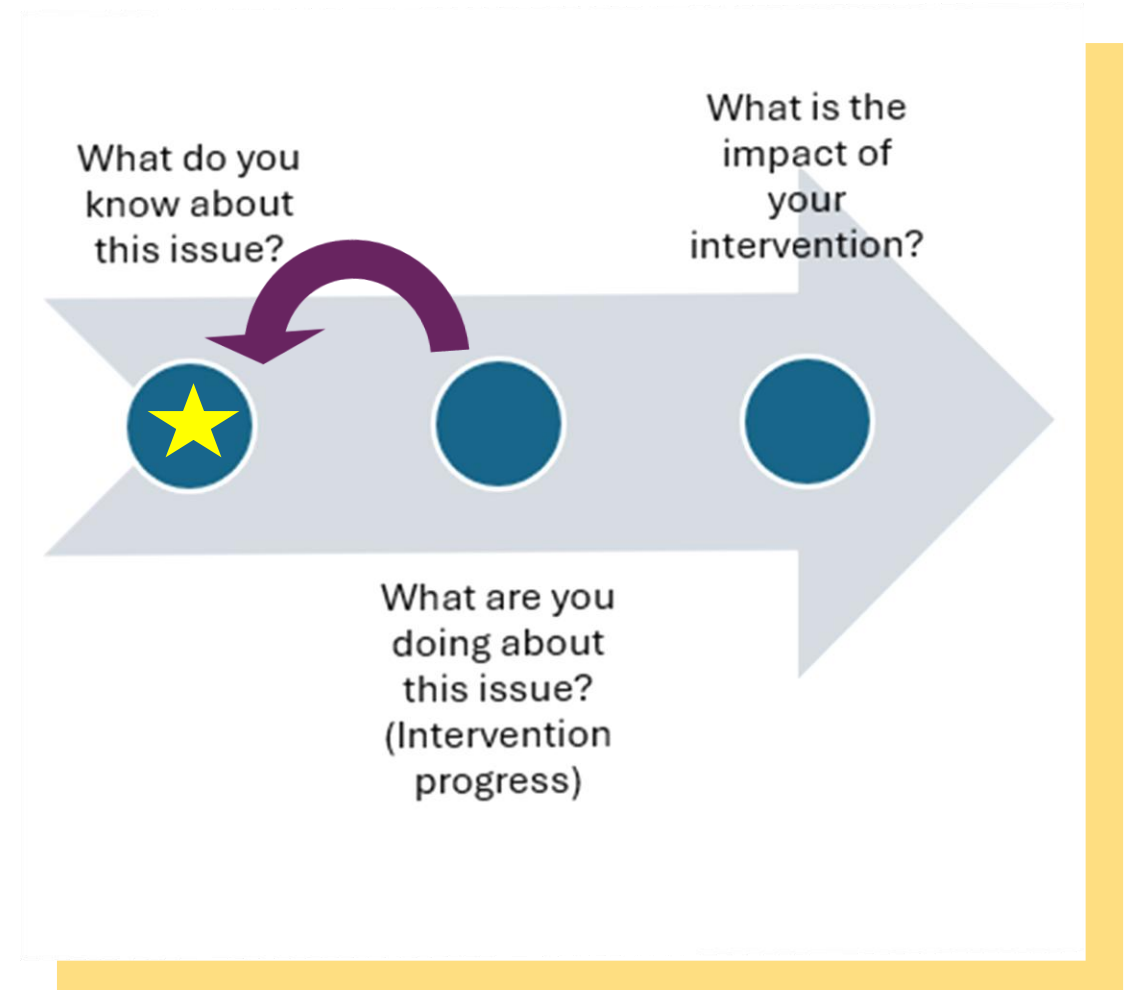
Bath, Elliott, Menifee, Morgan, and Rowan

P.O. Box 555 - Gudgell Avenue • Owingsville, KY 40360
(606) 674-6396 • Fax: (606) 674-3071

WHAT DID THEY WANT TO KNOW?

Interested in understanding stigma in their community:

- + **OMM:** Describe practices, programs and policies within or supported by your organization to address stigma towards people who use drugs
- + **Tailored to:** Stigma towards people who use drugs, among first responders



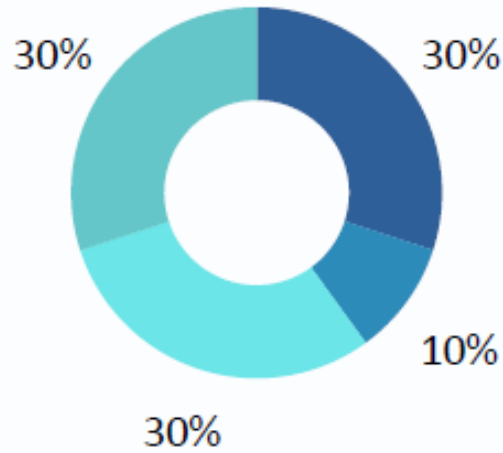
WHAT DID THEY DO?

- Engaged 20 first responders in three counties
 - + EMTs/paramedics, firefighters, sheriff's deputies, police officers
 - + First person interviews
 - + Anonymous surveys



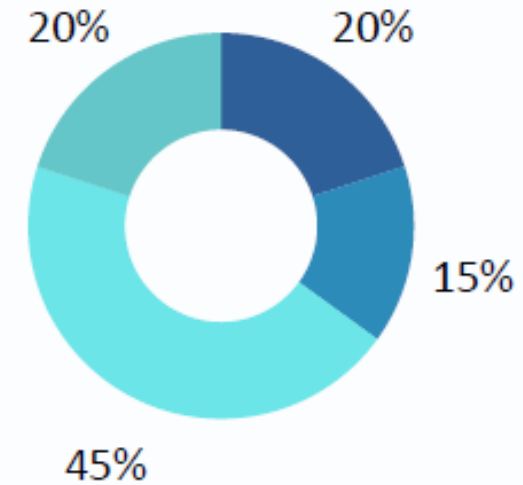
WHAT DID THE DATA SHOW?

A. "An individual with an addiction has the ability to stop whenever he/she chooses."



Agree Somewhat Agree Somewhat Disagree Disagree

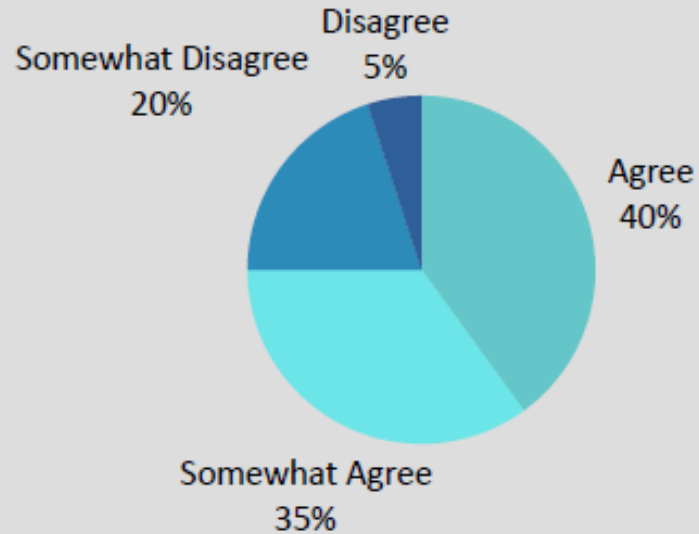
B. "Addiction is a choice."



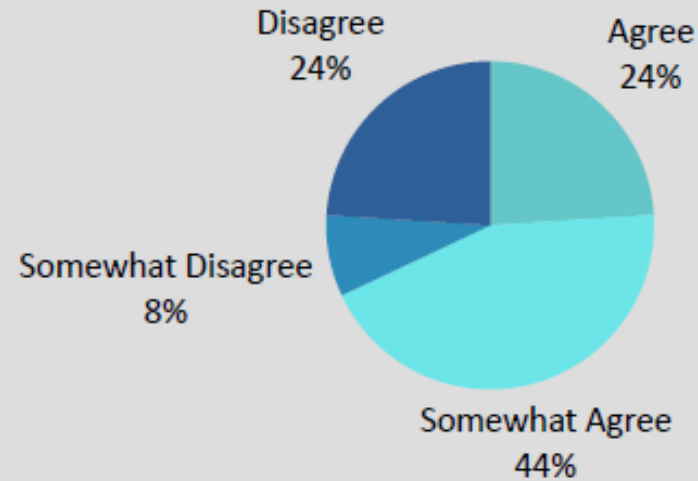
Agree Somewhat Agree Somewhat Disagree Disagree

WHAT DID THE DATA SHOW?

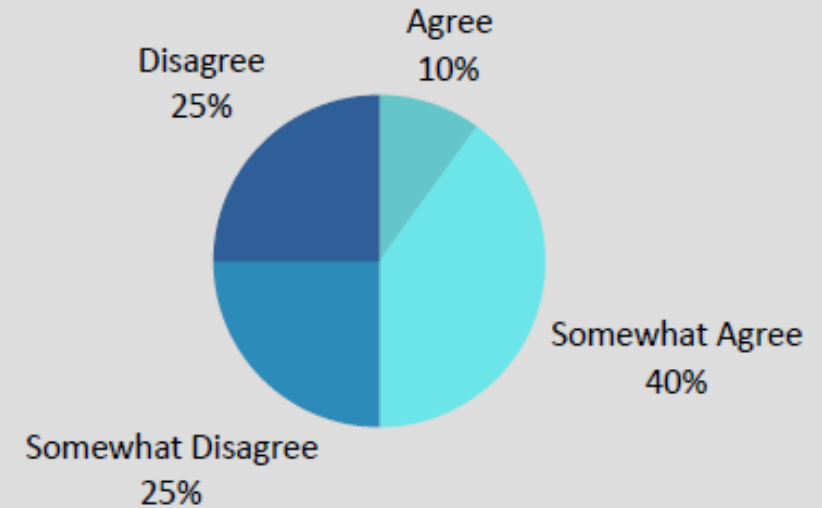
C. "Sometimes I am frustrated that we respond to the same individual multiple times for SUD-related issues."



D. "SUD is a treatable medical condition."



E. "Using naloxone to reverse an overdose only gives individuals another chance to reuse the drug of their choice."



HOW WERE THE DATA USED?

- Suggests need for education about stigma for first responders
- Applied for and received funding to expand survey to assess substance use disorder-related stigma in 17 counties



OMM WEBSITE: REDUCING STIGMA TO IMPROVE CARE IN KENTUCKY



NORTHEAST KENTUCKY
Substance Use Response Coalition

REDUCING STIGMA TO IMPROVE CARE IN KENTUCKY

Started in 2018, the Northeast Kentucky Substance Use Response Coalition's member organizations work together to provide educational, clinical, and preventive interventions that directly impact the opioid and substance use crisis across 19 counties.

Three member organizations, UK St. Claire hospital, the Northeast Kentucky Area Health Education Center and the Gateway District Health Department, worked on this pilot project to test OMM indicators.

Nearly everyone in the region has been affected by addiction. The coalition has implemented a broad range of programs including jail re-entry, medical provider training and youth prevention to address substance use prevention, treatment and recovery. Stigma toward those experiencing substance use disorder remains prevalent.

The coalition used Overdose Measures Matter (OMM) to learn more about stigma and identify community-responsive strategies to address biases and improve care.

USING OMM INDICATORS TO REDUCE BARRIERS TO CARE

COLLECTING DATA

The NE Kentucky Substance Use Response Coalition worked with subject matter experts to develop surveys to collect data on six indicators. Through the health department's syringe exchange program (SEP), people with lived and living experience (PWLE) were surveyed on three OMM indicators. Other partners surveyed emergency department staff, local coroners and first responders using three additional indicators.

Indicators used for surveys administered at the health department SEP:

- [Number of fentanyl test strips distributed](#)
- [Percent of care-seeking people who use drugs \(PWUD\) who reported that supplementary program-provided supports increased their access to care](#)
- [Number and description of prevention activities, interventions, and/or policies resulting from multi-sector partnerships](#)

Indicators used for surveys administered with other coalition partners:

- [Assessment of the continuum of care for people who use drugs \(PWUD\) who enter the local emergency department](#)
- [Perceived stigma towards people who use drugs among first responders](#)
- [Assessment of protocols used by local coroners to determine drug overdose deaths*](#)

*This indicator is not from the OMM site—the coalition developed it for local use.

www.overdosemeasuresmatter.org

This project is supported by the CDC Foundation through a grant from Bloomberg Philanthropies. The contents do not necessarily represent the official views of the CDC Foundation or Bloomberg Philanthropies.



INVESTMENT IN THE FUTURE

"... helping individuals to be successful in our society mitigates many of the social determinants that negatively impact people with addiction illnesses.... it furthers our mission to serve the marginalized and disenfranchised who are simply seeking an opportunity to better their lives"

—Mr. Donald Lloyd, UKSC President/Chief Executive Officer

Brittany Harrington is a Recovery and Outreach Coordinator. As a person recovering from SUD, she works daily to advocate for and support people like her in 10 Kentucky counties.

www.nkycoalition.org | www.overdosemeasuresmatter.org

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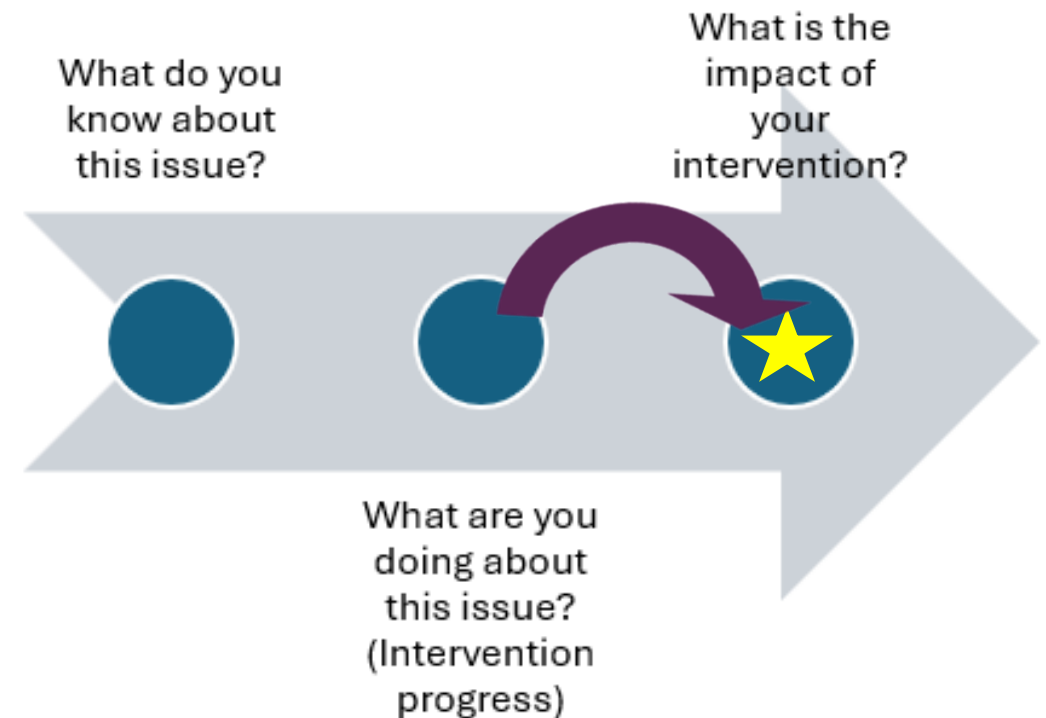
COP SITE: KENTUCKY HARM REDUCTION COALITION



Athena Bannister-Short
Louisville, Kentucky

WHAT DID WE WANT TO KNOW?

- Interested in understanding the impact of their partnerships
 - + **OMM:** Number of partners you work with to address and prevent overdoses and associated harms
 - + **Tailored to:** Activities and impact of key partnerships



WHAT DID WE DO?

- Surveyed organizational partners:
 - + How has your partnership with us affected your organization's work?
 - + Which of the following groups or partner types does our organization indirectly reach or influence because of your partnership?
 - + Which types of organizations or partners do you wish we had stronger connections with to better support your work and the people you serve?



WHAT DID THE DATA SHOW?

- Findings:
 - + 12 respondents, diverse network
 - + Engage partners through multiple pathways
 - + Positive impact on partnering organizations
 - + Identified key sectors for further engagement
 - + Identified future opportunities for collaboration
- Action: Will use data to demonstrate the role they play in local prevention, recovery and treatment ecosystem; share with policymakers, stakeholders and funders:
 - + Connector
 - + Capacity builder
 - + Co-implementer



For more information, please visit our website at www.kyhrc.org

- Or contact

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Coordinator

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WHAT DID WE LEARN?

- Communities are different based on things like local or state policies, geography, culture, resources and drug supply
- Organizations and health departments operate under these variable conditions, but may have different priorities, capacity, staff and funding
- Working across sectors can help leverage resources, knowledge and understanding
- Flexibility is key
- Data can help guide the work, demonstrate your value and impact and help save lives



INTERESTED IN LEARNING MORE ABOUT OMM?

- Complete this brief survey to:
 - + Share your feedback on OMM
 - + Receive updates about new OMM content, features and tools
 - + Get invitations to future learning sessions



Getting Started with OMM



www.overdosemeasuresmatter.org/getting-started



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Attributions and Acknowledgements:



**Bloomberg
Philanthropies**

Financial Support is provided through a grant from Bloomberg Philanthropies to the CDC Foundation as part of the Overdose Prevention Initiative. The content of this presentation belongs to the authors and do not necessarily represent the official views of the CDC Foundation or Bloomberg Philanthropies.