# Racial Equity Advancement in Communities through Harm Reduction Pennsylvania (REACH PA) Grant

## Background

Vital Strategies is the lead partner for states' work in the Bloomberg Overdose Prevention Initiative, launched in 2018 to tackle the overdose crisis in the United States. We are bringing a comprehensive approach to reduce overdose deaths in seven U.S. states where fatalities are among the highest in the country. We strive to promote innovation, improve quality, build scale, and ensure sustainability, grounded in data and evidence, and focused on racial equity. Our approach is multidisciplinary, inclusive, and responsive to local conditions.

The overdose crisis is affecting US communities everywhere and overdose fatalities are at an all-time high in Black and Indigenous communities. Over the past few years, we have seen national overdose death rates among Black men increase rapidly, and at a dramatically faster rate than white men. This national trend is mirrored in Pennsylvania. Vulnerability to overdose among these communities is compounded by harms caused by the War on Drugs. Responses to drug use have historically been rooted in coercion and punishment, especially for Black, Indigenous, and People of Color (BIPOC). As a consequence, BIPOC drug users have not received the same level of care and support as their white counterparts and are now experiencing exponential increases in overdose. These data demonstrate that overdose prevention and harm reduction services must focus on BIPOC communities to effectively reverse these trends. Progress against the still-rising rates will require taking a unified approach and addressing the root causes of overdose deaths and disparities including systemic and structural racism, houselessness, lack of investment in rural communities, low access to quality medical care, stigma, and the hyper-policing of BIPOC communities. Any action taken to address overdose must involve community members and the voices of people who use drugs.

## Purpose

The goal of this project is to bring an understanding of the harm reduction philosophy and practices to the work of Pennsylvania's community-based organizations in order to reduce the incidence of negative health effects and the number of fatal overdoses among BIPOC PWUD. Vital Strategies is requesting proposals from Black, Indigenous, and People of Color (BIPOC)-led organizations in Pennsylvania to provide racially equitable services addressing social determinants of health, including offering services to people who use drugs (PWUD). These services should be provided through means of outreach to meet the population where they are and to reduce as many barriers as possible. Additionally, Vital Strategies asks that participating organizations enhance their own knowledge and understanding of harm reduction through technical assistance sessions offered by the Scattergood Foundation.

Funding will be for one year, beginning January 1st, 2024, and is not to exceed \$50,000.

Vital Strategies plans to fund up to 9 projects.

The informational webinar on this grant opportunity will be held at 1pm on October 2<sup>nd</sup>, 2023. Register <u>here</u> or via the <u>RFP webpage</u>.

Full application due date is 10/30/2023 @ 11:59 PM EST. Submit via grant portal here.

<sup>&</sup>lt;sup>1</sup> JAMA Network

<sup>&</sup>lt;sup>2</sup> Pennsylvania ODSMP – Drug Overdose Surveillance Interactive Data Report

## Scope of Work

## Organizational Eligibility

To apply, individuals and organizations must meet the following criteria:

- Must be one of the following:
  - o 501 (c)(3),
  - o Have a fiscal sponsor.
  - o If your organization neither holds a 501 (c)(3) status nor is fiscally sponsored, yet maintains robust and sound fiscal recordkeeping practices, we invite you to reach out to us. We are open to considering alternative demonstrations of fiscal responsibility on a case-by-case basis. For more information, see the FAQ page (Appendix H).
- Led by Black, Indigenous, and People of Color (BIPOC) including collaborations between organizations in which at least one is led by a BIPOC.
- Engaged with Pennsylvania's most under-resourced neighborhoods, prioritizing rural and predominantly BIPOC communities.
- Committed to addressing the root causes of social/racial injustice at a community-level.
- Supportive of a person-centered and non-punitive approach to drug use.
- Applicants need <u>not</u> have a work history of engagement in activities and issues related to drug use.

## **Project Guidelines**

Vital Strategies and Scattergood are interested in proposals promoting health-based harm reduction approaches to drug use. Projects should seek to address inequity caused by racism and poverty; for example: the impact of the War on Drugs (increased incarceration, family separation and child removal), unequal access to naloxone and medications for opioid use disorder (MOUD), stigma toward people who use drugs, increasing Black maternal mortality, and lack of treatment options for stimulant users. Strong proposals will use innovative and expansive outreach strategies to engage underserved populations through place-based programming (at a brick-and-mortar location or through outreach in a neighborhood or community). Please note, this is a one-time funding opportunity and is not intended to support research projects.

Projects may use funds to:

- Implement harm reduction practices in conjunction with existing services,
- Offer services outside of regular business hours,
- Work towards partnerships with local social and healthcare services to provide connections to care,
- Offer compensation to program participants to help build programming and create connections to underserved groups.

Examples of harm reduction-oriented services include, but are not limited to:

- Disseminating safer drug use supplies (including test strips and naloxone), safer sex kits, hygiene kits, and menstruation kits,
- Providing in-house HCV/HIV, STI, and pregnancy testing,
- Offering services to support family preservation,
- Implementing low barrier services such as housing (housing-first model) and medical care (wound care, low threshold MOUD, primary care),
- · Providing case management and linkage to employment,
- Addressing community and individual level harm by utilizing a transformative/restorative
  justice model and/or offering community-based mediation,
- Connecting people who use stimulants to cardiac health resources,
- Referring and connecting clients to services for hepatitis C, HIV, pregnancy, wound care, domestic violence, housing, benefits, and Medications for Opioid Use Disorder (MOUD).

## **Organizational Expectations**

- 1. Increased understanding and knowledge of harm reduction among program staff.
- 2. Execution of project and deliverables proposed in application questions.
- 3. Engagement in up to six 2-hour technical assistance sessions with the Scattergood Foundation. Additional optional office hours or individual sessions available if interested.
- 4. Quarterly progress reports to Scattergood Foundation.

## **Proposal Requirements**

Full application due date is 10/30/2023 @ 11:59 PM EST. Submit via <u>Scattergood portal</u>. The questions below are included to allow applicants to review the questions ahead of viewing the portal. Please note, applicants are not expected to meet the character limit for each question and will not be penalized for brevity.

### **Create an Account**

Please create an account in the Scattergood Foundation's online grant portal. To create an account, please provide:

#### **Organization Information:**

- Organization Name
- Employer Identification Number/Tax ID (If your organization is fiscally sponsored, please contact the Scattergood Foundation)
- Website
- Phone
- Address
- Email Address

#### **User Information:**

- Name
- Phone
- Email Address

#### **Executive Officer Information:**

- Name
- Phone
- Email Address

#### **SECTION I: Organization Information**

- **1. Organization Mission:** Please describe your organization's mission and how it centers racial equity. (*5,000 characters*)
- **2. Organization Budget:** Which of the following best represents your organization's annual budget?
  - Less than \$50,000 per year
  - \$51,000 \$200,000 per year
  - \$200,000 \$500,000 per year
  - \$500,000 \$2,000,000 per year
  - \$2,000,000 \$5,000,000 per year
  - More than \$5,000,000 per year
- **3. Services Provided:** Please share the current services your organization provides (can be bullet points). (3,000 characters)
- **4. Organization Space and Working Hours:** Please provide information about the following: (3,000 characters)
  - If you have a brick-and-mortar location, please provide the address and the days/times you provide services.
  - If your organization is strictly mobile, please provide a list of the neighborhoods your visit and the days/times you provide services.
- **5. Community Served:** Please describe the community your organization supports. (*4,000 characters*)

In your answer, please include:

- What are the demographics of the community your organization serves (race, ethnicity, gender, etc.)? If you don't have exact numbers, provide an estimated number or percentage.
- What are some key strengths and assets of the community your organization serves?
- What are unique needs experienced by your community and how does your organization work to ensure their needs are met?
- **6. History of working with people who use drugs:** Please describe your organization's history of working with people who use drugs (PWUD). If you do not currently work with PWUD, please describe why the services you currently provide can benefit this community. (3,000 characters)

#### **Organization Representation**

To the best of your ability, please complete the following questions regarding demographic information about your organization's board, leadership team, and staff.

- 7. **Board Membership Racial Diversity:** What percent of your organization's board membership identifies as Black, Indigenous or people of color?
  - Less than 25%
  - 25% 50%
  - More than 50%
  - N/A (or, organization doesn't collect this data)
- **8. Board Membership Lived Experience:** Does your organization's board include people with mental health or substance use lived experience?
  - Yes
  - No
  - Unsure
  - N/A
- **9. Executive Team Racial Diversity:** What percent of your organization's executive team membership identifies as Black, Indigenous or people of color?
  - Less than 25%
  - 25% 50%
  - More than 50%
  - N/A (single person organization)
- **10. Executive Team Lived Experience:** Does your organization's executive team include people with mental health or substance use lived experience?
  - Yes
  - No
  - Unsure
- **11. Staff Racial Diversity:** What percent of your organization's staff identify as Black, Indigenous or people of color?
  - Less than 25%
  - 25% 50%
  - More than 50%
  - N/A (single person organization)
- **12. Staff Lived Experiences:** Does your organization's staff include people with mental health or substance use lived experience?
  - Yes
  - No
  - Unsure
- **13. Organization Representation Additional Information:** Is there anything you'd like share about racial diversity and representation of people with mental health or substance use lived experience on your board, executive team, and staff? (2,000 characters)

#### **SECTION II: Project Information**

- **14. Project Description:** Please describe your proposed program. (*5,000 characters*) In your description, please include:
  - What are the objectives of the newly funded project?
  - What methods will the program use to reach the target population (i.e., outreach, partnering with community organizations, connections with local businesses, social media advertisements, etc.)?
  - Will there be any partnerships for the project? What role will they play?
- **15. Project Work Plan:** [Upload] Please provide a work plan for the project, including a timeline and staff that will be working on the project. See **Appendix E** for an example.
- **16. Budget:** [Upload] Please provide a detailed budget that describes how your organization plans to use the grant funds. Project budgets can be for up to \$50,000 over an 11-month period anticipated to begin on January 15, 2023. If you are requesting funding for items that could be obtained through state or local entities, please include justification and/or description of additional need.
- **17. Outcomes:** Please describe the outcomes your organization hopes to achieve within the grant period. (3,000 characters)

Example outcomes may include:

- Increased knowledge of how to support people who use drugs
- Improved attitudes toward harm reduction
- Improved access to harm reduction supplies (e.g. syringes, fentanyl test strips, etc.)
- **18. Evaluation:** Please describe how your organization will measure the outcomes of the project. (5,000 characters) See <a href="Appendix F">Appendix F</a> for examples.

# (Appendix A) Key Concepts and Definitions for a Harm Reduction Approach

**Harm reduction:** providing services to people who use drugs without the expectation that they stop using drugs. Engagement of people who use drugs is non-judgmental and non-stigmatizing.

**Racial equity:** eliminating racial disparities by applying strategies targeted to close the gaps in service access, delivery, and quality.

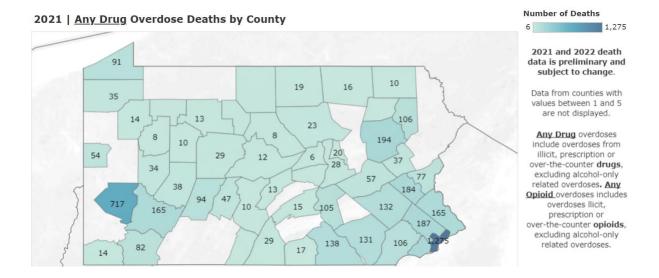
**Low barrier:** eliminating as many barriers as possible to care, such as intake procedures or drug abstinence requirements.

**Person-centered:** focusing on the individual and unique needs of a person to provide customized support.

**Medications for Opioid Use Disorder (MOUD):** "The Food and Drug Administration (FDA) has approved three medications that safely and effectively treat opioid use disorder (OUD) to improve the health and wellbeing of people living with OUD". MOUD is "defined by ongoing, long-term treatment with one of these three medications" – Methadone, buprenorphine (Buprenex, Butrans, Sublocade, Subutex, and others), and Naltrexone (Depade, Revia, Vivitrol)<sup>3</sup>

<sup>&</sup>lt;sup>3</sup> Jun. 20, 2023, Aug. 7, 2023, Jul. 24, 2023, Jul. 19, 2023, Aug. 1, 2023, Jul. 26, 2023, Aug. 15, 2023, Aug. 15, 2023, & Aug. 16, 2023. (2023, August 7). *Medication-assisted treatment ("mat") for opioid use disorder.* NACo. https://www.naco.org/resources/opioid-solutions/approved-strategies/mat

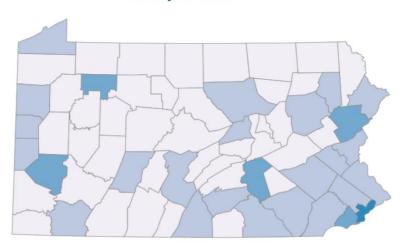
## (Appendix B) Overdose Data by County (2021)

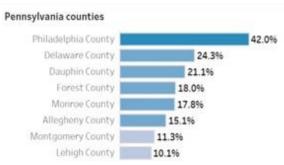


## (Appendix C) Race/Ethnicity by County (2020)

Percent Black or African American Alone or in Combination, Total Population by County: 2020

## Pennsylvania: 12.7%





## (Appendix D) Budget Template

Applicants must use the budget template provided <a href="here">here</a>.

Name of Organization: Your Org Name						
Project: "Sample Community Harm Rec						
Grant Period: January 1, 2024-Decem	ber 31, 2024					
A. Personnel						
A. Personner Staff	Title	Г	Cost	Year 1 Salary (\$)	Year 1 - FTE (%)	Year 1 Total
Staff Smith	Community Advocate	\$	30,000	30,000	100%	30,000
						9
	Total Personnel	\$	30,000			
Description of duties						
B. Fringe Benefits						
	Percent Fringe		25%			
Total Fringe			7,500			6
	Total Personnel and Fringe	\$	37,500			
C. Transcillatoration and Manufactures	1					
C. Travel/Meetings/Workshops	0		04			
Purpose of Travel/Location	Computation	_	Cost			
Local travel for outreach events	0.65/mile * 2600 miles	\$	1,690			
Total Travel		\$	1,690			8
Description of travel/meeting/workshop	op activities					
D. Equipment						
Item	Computation		Cost			
N/A			0			
Total Equipment		\$	* <u>-</u>			
Description of equipment						
E. Contracts/Consulting						
Item	Computation		Cost			
N/A		\$				
Total Contracts/Consulting		\$				
Description of contracts/consulting						
F. Advertising/Media/Communications					,	
Item	Computation		Cost			
Professional Photographer for Outreach Even		\$	1,500			
Total Advertising/Media/Communications		\$	1,500			
Description of advertising/media/com	munications					
G. Other Direct Costs						
Item	Computation		Cost			
Factor ditact at a	CA labele in 4000 abiles		4.000			
Fentanyl test strips Total Other Direct Costs	\$1/strip x 4000 strips	\$	4,000 4,000			
Total Direct Costs Budget		\$	44,690			
Total Indirect Costs Budget  Total Indirect Costs			44,030			
Total Project Costs		S	44.690			

## (Appendix E) Sample Work Plan

This is a **sample** work plan and is not intended to be a directive.

**Project Description:** This project will allow XYZ Food Pantry to stock harm reduction supplies including naloxone, hygiene kits, and fentanyl test strips. Funding will also support one part-time employee who is responsible for providing training and education to the food pantry clientele. Partner with local harm reduction organization who can help link people to other harm reduction resources and substance use treatment if desired.

#### **Project Goals:**

- Increase access to harm reduction supplies in the community.
- Increased education about harm reduction and overdose reversal in the community.
- Reduction of stigma in community about harm reduction and people who use drugs.
- Increase linkage to harm reduction resources and substance use treatment.
- Socialize and normalize harm reduction and substance use treatment in the community.

Timeline: 12 months - January 1, 2024-December 31, 2024

#### **Key Milestones:**

**Quarter 1/Week 1:** Order naloxone, fentanyl test strips, and items for hygiene kits. Meet with harm reduction organization partner to discuss referral process.

Quarter 1/Week 3: Begin making hygiene kits to put in the food pantry.

**Quarter 1/Week 4:** Stock pantry with hygiene kits, naloxone, and fentanyl test strips. Create and display information about the products and ensure the part-time employee is available to provide training and education to the clientele. Report aggregate data to harm reduction organization partner.

**Quarter 2/week 1:** Quarterly check in with harm reduction organization partner to troubleshoot referral process and discuss project progress.

**Quarter 2:** Distribute # naloxone kits, # fentanyl test strips, and # hygiene kits in the second quarter. Provide at least # trainings in the second quarter.

**Quarter 3/week 1:** Quarterly check in with harm reduction organization partner to troubleshoot referral process and discuss project progress.

**Quarter 3:** Distribute # naloxone kits, # fentanyl test strips, and # hygiene kits in the third quarter. Provide at least # trainings in the third quarter.

**Quarter 4/week 1:** Quarterly check in with harm reduction organization partner to troubleshoot referral process and discuss project progress.

**Quarter 4:** Distribute # naloxone kits, # fentanyl test strips, and # hygiene kits in the fourth quarter. Provide at least # trainings in the fourth quarter.

Quarter 4/Week 4: Final report submitted to Scattergood Foundation.

### Responsibilities:

### **Food Pantry Manager:**

- Supervise overdose prevention/harm reduction staff person.
- Ensure there is space in pantry for harm reduction and overdose prevention materials.
- Supervise day to day operations of food pantry.

#### **Overdose Prevention/Harm Reduction Staff:**

- Order harm reduction supplies and make hygiene kits.
- Stock the pantry with items.
- Provide training and education to pantry clientele.
- Make referrals as needed to harm reduction organization partner.

### **Harm Reduction Organization Partner:**

• Receive warm handoff from Overdose Prevention/Harm Reduction staff at pantry.

#### **Resources Needed:**

- Naloxone, fentanyl test strips, and materials for hygiene kits
- Bus passes and vouchers to support transportation to harm reduction organization partner.

**Budget:** 50,000.00/year

## (Appendix F) Sample Outcomes Measurements/Metrics

**Desired Outcome:** Increased access to naloxone and overdose reversal trainings in targeted community.

#### **Metrics:**

- Number of naloxone kits distributed per [time frame].
- Number of reported naloxone uses by staff per [time frame].
- Number of individuals trained on how to use naloxone and recognize the signs of an overdose.
- Narrative or qualitative responses can be collected in addition to quantitative/using numbers. For example, an organization could collect individual's experiences (with consent/anonymously) using naloxone for the first time or what it was like to talk with friends or family about carrying naloxone.

## (Appendix G) Scoring Guide

Criteria Dimensions	Scale (highest number is best)		Reviewer Score				
Baseline Eligibility							
Does the proposal fit within the scope of the harm reduction strategies described in the RFP or provide a clear alternate strategy aligned with the intent of the RFP?	YES/NO						
If YES, then the application is eligible, and reviewers may proceed with scoring. In NO, then application is not eligible, and reviewers may stop here.							
Fidelity to and commitment to racial equity approach, harm reduction framework							
Harm Reduction Framework: How strongly does the proposal align with a harm reduction framework and principles?	1 to 10						
Racial Equity Commitment: How clear is the plan for the proposed activities to advance racial equity?	1 to 15						
Inclusion plan: To what degree are harm reduction providers and people with lived experience involved in guiding and decision-making for the proposed project?	1 to 10						
Quality and clarity of the proposal							
Agency leadership, staffing, and membership: To what degree is agency leadership and decision making authority comprised of Black, Indigenous, other people of color, and other marginalized groups?	1 to 15						
Agency capacity: What is the level of the applicant's capacity, buy-in from essential partners, and relationships with the population to be served, to perform the proposed activities?	1 to 10						

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Scope of work: To what degree			
are the proposed activities	41.45		
grounded in evidence, reflecting	1 to 15		
best practices, and aligned with			
priority harm reduction strategies?			
Workplan and timeline: To what			
degree does the workplan have	1 to 10		
clear deliverables and appropriate	1 10 10		
timelines?			
<b>Evaluation plan:</b> How clear is the			
data collection plan to evaluate	1 to 5		
project objectives?			
Budget: How strongly are the			
proposed expenditures	1 to E		
appropriate, feasible, and focused	1 to 5		
on proposed strategy?			
	Dooch and	Impact	
	Reach and	iiiipact	
Focus and reach: To what			
degree is the proposed project			
likely to reach BIPOC populations			
and other marginalized groups	1 to 15		
who are highest risk in the			
community, and does it serve to			
reduce health disparities?			
Jurisdictional level of need: To			
what degree does the relevant			
jurisdiction show indicators of	440 5		
need, e.g. fatal and nonfatal	1 to 5		
overdose rates and other key			
health indicators?			
	Financial C	apacity	
	a.ioidi G	apacity	
Organizational Budget: Assign			
the following numbers according			
to organizational budget:			
>50k/year = 5 points			
51k-200k/year = 4 points	0-5		
200k-500k/year = 3 points	<b>U</b> - <b>U</b>		
500k-2m/year = 2 points			
2m-5m/year = 1 point			
5m/year+ = 0 points			
		Total Saara	Out of 120 points
		Total Score	Out of 120 points
			<u>l</u>

## (Appendix H) FAQ

### 1. I don't have 501(c)(3) status. Can I apply?

A 501(c)(3) status is <u>not</u> necessary to be eligible for this RFP. If you do not have 501(c)(3) status, we ask that you obtain a fiscal sponsor or be able to demonstrate sound fiscal recordkeeping for the last 2 years. Please reach out to <u>info@scattergoodfoundation.org</u> if you have questions about eligibility. A fiscal sponsor is "a nonprofit organization that provides fiduciary oversight, financial management, and other administrative services to help build the capacity of charitable projects." See this explanatory <u>video</u> about fiscal sponsorship from NEO Law Group. We can help link you to reputable organizations used by other subgrantees. If you have questions about this or would like to ask about opting out of using a fiscal sponsor, please reach out to us at <u>overdose@vitalstrategies.org</u>.

## 2. My organization doesn't work specifically with or for people who use drugs. How can we best go about designing a proposal?

For any applicant, we recommend engaging directly with your constituents, members, client/patient populations, and other stakeholders to identify pressing issues or needs that could be addressed through this RFP. Collaborating with your base on proposal development is a good way to get buy-in and learn directly from community members about the most urgent needs. It also helps you to understand the available resources and opportunities to leverage. For example, family members of people impacted by the War on Drugs are often the most engaged in this work, from intervention design and public education to trainings to organizing and advocacy.

## 3. How do I find additional funding to continue this work at the end of the grant period?

Vital Strategies and the Scattergood Foundation will provide technical assistance and facilitate access to other experts and stakeholders in the field. We will assist with capacity building for our grantees, including identifying funding opportunities as well as addressing other capacity needs that grantees raise.

#### 4. What are the consequences of deliverables not being met?

Inability to meet deliverables can jeopardize payment. However, we understand that plans can be disrupted by forces beyond our control. We urge continuous communication with the Scattergood Foundation when encountering roadblocks. The Scattergood Foundation and Vital Strategies can work with you to strategize and troubleshoot around roadblocks and amend project activities, timeline, and deliverables if deemed necessary.

### 5. What does it mean to work with a racial equity approach?

A racial equity toolkit is available <u>here</u>. You can also access <u>Taking Action on Race</u> <u>Equity in Drug User Health Programs</u>. This training is free and open access and can be shared with anyone regardless of Vital Strategies funding. Using a racial equity

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approach means you are proactively seeking to first understand the racial inequities present in your area including understanding how Black, Indigenous, Latinx, and other populations of color are impacted by overdose and drug policy. Decision making and community engagement efforts should be intentional in their inclusion of people of color. There should be clear goals, objectives, and strategies for addressing the inequities present in addition to a plan for monitoring as well as responding to lack of progress or a potential exacerbation of inequities.

**6.** Can I apply for this RFP if I've already received funding from Vital Strategies? Yes, you can apply for this RFP if you're a previous or current subgrantee.

## 7. If this RFP is for Vital Strategies funding, what role does the Scattergood Foundation play?

The Scattergood Foundation is acting as Grants Administrator for Vital Strategies' Racial Equity RFP. This means that the Scattergood Foundation is working with Vital Strategies to review and select proposals and will be responsible for managing funds, ensuring funds are used as outlined in the proposal, and complying with conditions set forth by Vital Strategies. They will also lead all technical assistance and training opportunities and will work with subgrantees to track progress via regular reporting check-ins.

- 8. Will there be future funding opportunities with Vital Strategies?

  No, this is a one-time award. Vital Strategies is sunsetting our work in Pennsylvania at the end of 2024.
- 9. What should I do if I need help completing the application?

You can reach out to <a href="mailto:info@scattergoodfoundation.org">info@scattergoodfoundation.org</a> or <a href="mailto:overdose@vitalstrategies.org">overdose@vitalstrategies.org</a> who can provide support. We are also hosting an informational webinar on October 2<sup>nd</sup>, 2023 at 1pm ET. Register <a href="mailto:here">here</a> or via link available on the RFP webpage:
<a href="https://www.scattergoodfoundation.org/support/special-grant-programs/REACH-PA">www.scattergoodfoundation.org/support/special-grant-programs/REACH-PA</a>