

## Implementation Profile:

### Southeast Utah Department of Health



#### Case Study Snapshot

The [Southeast Utah Health Department](#) (SEUHD) provides services for Carbon, Emery, and Grand Counties, a jurisdiction that has consistently had one of the highest overdose rates in Utah. Across these counties, individuals who work blue collar jobs and those aged 30-45 experience the highest overdose fatalities. In 2018, to reduce overdoses and better meet the needs of people who use drugs, SEUHD started a comprehensive harm reduction program including distribution of safer use supplies, naloxone, and fentanyl test strips among other critical supplies and resources. Data has shown that residents primarily access services in the county where they live and there are varying levels of awareness and acceptance of harm reduction in each county. Therefore, SEUHD has worked to tailor their overdose prevention approach to each county's specific needs. SEUHD focuses their harm reduction efforts on Carbon and Emery Counties since Grand County has an independent hospital-based harm reduction program. Key overdose prevention strategies include:

- Fentanyl and xylazine test strip distribution
- Mobile harm reduction program
- Continuous engagement with local law enforcement

#### Southeast Utah Health Department<sup>1</sup>

**Fatal Overdoses (2023): 12**  
**Population (2023): 40,459**  
**Square Mileage: 9,614.8**

#### Program Description

To prioritize delivery of services and urgently address increases in overdoses, SEUHD focused on standing up their harm reduction program quickly, with less emphasis on community engagement during early implementation. They were aware that they would need to be intentional and dedicate significant time to raise awareness and build support from hesitant community members and law enforcement. Once the program was established and service delivery was underway, SEUHD expanded their efforts to engage their communities and raise public awareness of their harm reduction services. Through the program, they provide a variety of harm reduction materials such as:

- Fentanyl and xylazine test strips
- Naloxone training and distribution
- Sterile syringes
- Safer use kits: cooker, tourniquet, cotton balls, alcohol swabs, antiseptic wipes, Brillo pads
- Wound care kits: gauze, band-aids, antibiotic ointment, alcohol swabs, sterile water
- Hygiene care kits: shampoo, conditioner, soap, chap stick, toothbrush, toothpaste, deodorant, comb, mouth wash, period products
- Safer sex kits: condoms, lube, safe sex education cards
- Harm reduction educational materials: information on test strip use, safer injection practices, information on medical and recovery services, housing options, and employment

SEUHD is fortunate to be able to provide both fixed-site and mobile delivery services. They distribute harm reduction materials from their health department office in Carbon County Monday through Wednesday and conduct mobile distribution of supplies in both Carbon and Emery County on Thursdays. Community engagement is a key factor in deciding where the mobile unit will go although once locations are decided upon, they try to establish consistency and visit the same locations at the same time on a weekly basis. They also prioritize visits to informal community spaces that serve as hubs for secondary distribution of harm reduction materials, such as homes of individuals they have previously worked with.

## Harm Reduction Partnerships

When the health department initially launched the harm reduction program, there was a great deal of trepidation from local law enforcement partners

and a lack of communication from both sides. As the program has grown, SEUHD staff have made intentional and strategic efforts to further engage and educate local law enforcement to build a stronger partnership. Due to these efforts, law enforcement partners have increased interest in understanding community overdose prevention efforts. Additionally, changes in health department and law enforcement leadership led to mutual commitment to resolving any misunderstandings that existed when the harm reduction program was first established or may still exist. SEUHD shares data with law enforcement and has been able to connect the dots between syringe disposal information, overdose fatality trends, and drug-related crime data to amplify impact and highlight how the harm reduction program is meeting important needs in the community. Sharing data has been an effective strategy for building support among law enforcement and continues to be utilized by SEUHD as they advocate to include pipes in their safer use kits. In response to law enforcement concerns about the distribution of pipes for safer smoking, SEUHD has temporarily paused distribution of pipes but are leveraging the relationships they've built to further understand law enforcement concerns and provide additional education on the value of this service. They are hopeful that key findings from a 3-part client survey demonstrating the need for pipes among the individuals they work with will be a compelling tool.

## Data

Since the harm reduction program was implemented in 2018, SEUHD has collected client demographics and syringe distribution data. Deeper data collection began in 2024 with a 3-part client survey aimed at better understanding the substance use landscape in their jurisdiction, gathering

critical information from clients on what resources they use and/or want, and further informing SEUHD about how to better support people who use drugs in their community. Some notable insights from this qualitative and quantitative survey include:

- 100% of respondents use wound care kits.
- 86% of respondents use safer injection kits.
- 72% of respondents use fentanyl test strips regularly.
- 85% of respondents would use a pipe if offered by SEUHD.
- 36% of respondents worry about calling emergency services when someone experiences an overdose.

SEUHD is using information gathered from the survey to further engage with local law enforcement and EMS, amplify client needs and concerns, and to demonstrate the strong utilization of harm reduction materials within their jurisdiction.

## Costs and Staffing

The SEUHD harm reduction program is run by one full-time and one-part time staff member, with an epidemiologist coordinator providing additional support as needed. Despite an increase in staffing from only one full-time staff member when the program started, the program is still understaffed. In addition, although SEUHD has one staff member with lived experience who brings many valuable personal connections to the community, they have identified a need to increase involvement with people who have lived and living experience into their harm reduction program planning.



SEUHD uses funding received as sub-recipients of state level grants to financially sustain their harm reduction program, supplemented with local opioid settlement funds. They are fortunate to receive naloxone and test strips from the Utah Department of Health and Human Services for no-cost.

## Barriers

**Limited Public Transportation:** SEUHD serves a three-county jurisdiction and, like many other rural and frontier counties, the absence of public transportation is a major barrier to accessing overdose prevention, harm reduction, healthcare, and other essential wellness services. SEUHD works to address this barrier by providing mobile distribution of harm reduction supplies, but this requires significant staff time, resources, and commitment to sustain.

### **Independent Harm Reduction Program in Grand County:**

Although there is a hospital-based independent harm reduction program in Grand County, SEUHD has no official partnership or communication with the program. SEUHD would like to build this partnership and coordinate the provision of harm reduction services to Grand County residents, given there is likely some duplication of efforts between these two programs. Increased coordination would not only be more efficient, but it would also create data sharing opportunities to deepen SEUHD's understanding of the local overdose prevention landscape and outstanding community needs.

### **Facilitators**

**Utilizing Data:** Data has been successfully used by the SEUHD team to highlight the need for harm reduction and public health services. By comparing local and state overdose fatality rates, they have been able to demonstrate a need within their community for harm reduction services. They have shared the comparison of state and local overdose fatality rates with various decision makers, such as the mayor, board of health, other legislators, and influential community members. They have also utilized the harm reduction client survey data to engage with local law enforcement and help challenge stigma towards harm reduction.

**Increased Community Engagement:** In recent years, SEUHD has increased communication about their harm reduction program to community members and organizations. Due to the harm reduction program being highly controversial, there was initial hesitation to promote it widely. SEUHD has since found community engagement to be a facilitator in the expansion of their harm reduction work, particularly with regards to increased engagement with local law enforcement. They have

also focused on boosting communication with influential community members and posting more about their available programs and services on their website. As they have shared more, community leaders and residents have become less hesitant about public health.

### **Sustainability**

While the SEUHD harm reduction program relies on grant funding, they have been able to use opioid settlement funds to continue this work. Settlement funds offer a long-term funding stream, ensuring some financial stability for their current program capacity. Although SEUHD is interested in expanding their harm reduction program, lack of funding options has limited their ability to do so. Beyond funding, they are currently working on expanding partnerships to increase community buy-in for harm reduction. Education provided by SEUHD and recent relationship building efforts have helped local law enforcement understand that syringes are both a legal and effective public health and harm reduction strategy. Law enforcement buy-in has been critical to sustaining their syringe services program and SEUHD hopes that with additional education, they will gain similar support for safer smoking supplies and will be able to resume distribution of pipes.

### **References**

<sup>1</sup>Overdose Fatalities: Self-Reported  
Population: Census, Annual Estimates of the Resident  
Population for Counties: April 1, 2020 to July 1, 2023  
(CO-EST2023-POP)  
Square Mileage: Census, Annual Geographic Table

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