

Progress and Impact Mid-Biennium Report: Opioid Response (2025-2027)

OHA’s Opioid Response initiative includes the Behavioral Health Division, Public Health Division and the Office of Tribal Affairs. The 2025-27 General Fund investment is \$10 million; opioid settlement allocations to OHA (\$95 million) supplement the General Fund investment. OHA also receives federal funding from the CDC and SAMHSA to support the efforts outlined below.

Program background and summary

OHA's Opioid Response initiative coordinates work across the OHA Behavioral Health Division, Public Health Division, and Office of Tribal Affairs. OHA aligns these efforts with the [OHA Strategic Plan](#), the [2025-2029 State Health Improvement Plan \(SHIP\)](#), and the [Alcohol and Drug Policy Commission 2026-2030 Comprehensive Plan](#).

The primary goals of OHA's Opioid Response program are to: 1) provide culturally responsive, non-stigmatizing information to guide state, Tribal, local and community opioid response; 2) reduce disparities in illicit opioid use and reduce overdoses among disproportionately affected communities; and 3) prevent substance use, reduce risk for people who use drugs; increase enhance support for people in recovery. OHA works towards these goals through a wide range

of activities across focus areas (see program funding table below).

Federal funding to support OHA’s opioid response has been insufficient to meet community needs and was further impacted by the phasing out of Federal grants, despite increasing response needs. A [2024 assessment](#) estimated a \$6.83 billion annual cost to fill gaps in Oregon’s substance use disorder services and supports. Recent investments from the Oregon State Legislature and the Oregon Opioid Settlement Prevention, Treatment and Recovery (OSPTR) Board have helped fill critical gaps; however, community needs continue to outweigh the capacity of Oregon’s opioid use disorder (OUD) prevention, treatment and recovery infrastructure.

Trends and outcomes summary

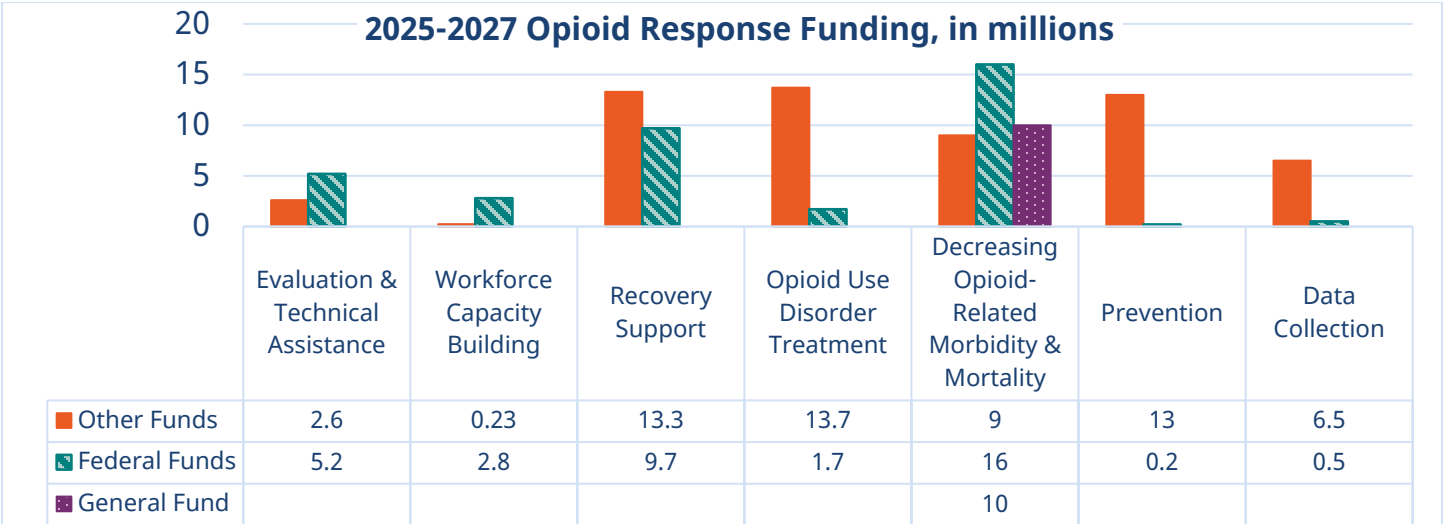
The Opioid Response Initiative advances the OHA Strategic Plan by integrating public health and behavioral health systems to expand OUD prevention, treatment, and recovery services. This initiative builds on historical investments in Oregon’s OUD infrastructure and workforce to support communities with the greatest needs.

In 2024, [the number of overdose deaths decreased for the first time in Oregon since 2016](#). While the 2024 decrease in overdose deaths is heartening, overdose deaths remain much higher than before the COVID-19 pandemic, and Oregon

health care systems remain heavily burdened by overdose-related encounters. Furthermore, Black/African American communities and American Indian/Alaska Native communities continue to experience the highest rates of fatal and nonfatal overdoses in Oregon.

The Opioid Response Initiative is addressing these challenges through collaborative, data-driven, community-informed approaches that advance equity and center the voices of individuals with lived experience.

Program funding*



* In honoring the government-to-government relationship between the State of Oregon and the Nine Federally Recognized Tribes of Oregon, OHA follows federal and state laws and policies to provide direct funding to support the opioid response in Tribal communities.

Objectives, outputs and outcomes

Metrics highlighted in green indicate performance that has met or exceeded the established benchmark, target, or expected outcome during the reporting period.

Objective 1:
Support local capacity for community-driven prevention approaches

Outputs:
Administer funding to 37 Alcohol and other Drug Prevention and Education Program grantees and 11 Overdose Prevention & Education Program grantees to support locally tailored prevention programs

Administer funding to 17 community-based organizations and 8 Regional Health Equity Coalitions to support culturally and linguistically specific prevention projects

Outcome:
Increased local prevention programming tailored to specific communities

AY25 baseline: \$4,434,509

AY27 status: \$14,544,718

Objective 2:
Expand access to medications for the treatment of opioid use disorder

Output:
Establish 10 new OUD Treatment sites through a mix of Opioid Treatment Programs (OTPs), mobile medication units and non-mobile medication units

Outcomes:
Reduced distance to OTPs, particularly among rural and frontier communities

Increased utilization of Methadone in Oregon

AY25 baseline: N/A – this is a new objective established through a 2024 investment from the OSPTR Board

AY27 status: To date, 4 of the 10 new OTPs are open and fully operational; the remaining 6 are expected to open by early 2027

Objective 3:
Administer funding to the Nine Federally Recognized Tribes of Oregon & the Urban Indian Health Program-Native American Rehabilitation Association of the Northwest

Outputs:
Disburse and administer State Opioid Response funding

Disburse and administer Oregon opioid settlement funding

Outcome:
Increase financial resources to support culturally responsive interventions for Tribal community priorities in addressing the opioid crisis, supporting prevention, treatment and recovery

Considerations

Opioid use disorder and overdose have an enormous impact on individuals, families and communities. Addressing Oregon’s overdose crisis will continue to require significant resources, broad partnerships and data-driven policies and investments spanning the continuum of prevention, treatment, and recovery.

OHA’s response to the opioid crisis involves numerous interrelated initiatives across the agency. This document is not comprehensive and reflects a portion of OHA's Opioid Response efforts. OHA is committed to engaging local partners and the Nine Federally Recognized Tribes in Oregon to continue implementing community-led approaches that reduce stigma, advance

equity, center community voice and address rapidly evolving substance use and overdose trends.

Oregon’s overdose rates represent an ongoing and complex public health crisis created by multiple social, economic and systemic factors. There is no single policy, initiative or intervention that one agency could implement to fix what has been decades in the making. Addressing this crisis requires a cross-agency, multisector response to address the factors contributing to opioid use and overdose. Source: [Opioids and the Ongoing Drug Overdose Crisis in Oregon: 2025 Report to the Legislature](#).

Other formats and languages

You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact OHA Public Health and Behavioral Health Divisions at IVPP.General@oha.oregon.gov or 971-221-1553 (voice/text). We accept all relay calls.

Public Health Division & Behavioral Health Division

800 NE Oregon Street
Portland, OR 97232
971-221-1553

