



Addressing the Drug Overdose Epidemic: Best Practices for Opening Overdose Prevention Sites

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With over 100,000 [drug-involved overdose deaths](#) in 2023 alone and gaps in access to treatment and other services for people who use drugs (PWUD), comprehensive strategies are needed to address the drug-overdose epidemic. [Overdose Prevention Sites \(OPS\)](#), also known as safe injection or safe consumption sites, can **save lives, improve health outcomes for PWUD, and enhance quality of life for surrounding communities**. These sites provide a safe location for people to use drugs while supervised by medical professionals and trained staff who can immediately respond to signs of overdose.

[OnPoint NYC](#), the nation's first OPS, has shown to be [vital in the public health response](#) to the opioid crisis. While relatively new in the U.S., OPS have operated for several decades in [other countries](#) and research has consistently shown they [save lives and provide many benefits](#), including **reductions in overdoses, emergency room visits, healthcare costs, and criminal justice involvement**. Despite this, there are barriers to implementing OPS in the U.S. Addressing these barriers and leveraging best practices for overdose prevention sites are among the strategies policymakers can consider to improve health and community outcomes.

Overdose Prevention Sites: Benefits as Strategy to Address Drug Overdose Epidemic

- **Neighborhood Improvements & Resource Optimization**
 - **Improve quality of life for communities** by decreasing public drug use and hazardous syringe disposal in the streets. Studies show [no increases in crime, nuisance, or drug use](#) in the surrounding neighborhoods where OPS are located.
 - **Increase access to [integrated care](#)**, including treatment programs, primary care, and additional services (e.g., drug testing, needle exchange, naloxone distribution, counseling, pharmacotherapy, referrals to social services).
- **Positive Health Outcomes**
 - Provide **life-saving services**. There have been millions of supervised injections at OPS across countries and [no fatal overdoses](#) reported. OnPoint NYC has reversed nearly 1,700 overdoses since opening in 2021.
 - Offer invaluable resources that **address social needs that influence health outcomes**, such as personal hygiene (e.g., showers, laundry), free clothing, food, peer support groups, employment support, legal aid, and other essential resources.
 - **Reduce risky behaviors and transmission** of Hepatitis C/HIV in PWUD.
- **[Cost-effective](#)**
 - **Reduce burden on local hospitals and emergency responders**. Preventing overdoses reduces ambulance calls, emergency room visits, and hospitalizations.
 - **Lessen burden on local police departments** by decreasing narcotics enforcement (e.g., [decreased drug possession arrests](#)). Notably, a cohort study of OPS in New York found no significant increases in crime after the sites were opened.
 - **Example:** a [cost-benefit analysis](#) projected that if the city of Baltimore, MD opened a single OPS, they would see **nearly \$6 million in net savings per year**

Lessons Learned Opening OPS Across States

As an initial hurdle, the legal status of OPS has been uncertain in the U.S., which has posed [barriers to opening](#) in some states. While OnPoint in New York City successfully opened two OPSes in 2021, SafeHouse in [Philadelphia faced legal challenges](#) and several barriers that prevented them from opening.

Overall, a lack of community involvement, legal concerns, and misinformation about the impact on crime and safety have been barriers to expanding OPS in the U.S. However, OPS in NYC demonstrates it is possible to open OPS as a safe, effective, and essential public health service. Successful implementation requires strong community collaboration and education.

LESSONS LEARNED FROM EFFORTS TO OPEN OVERDOSE PREVENTION SITES

BARRIERS	FACILITATORS
<ul style="list-style-type: none"> • Top-down approach: began with formal legal processes to open OPS • Community mistrust/misinformation & starting from scratch: Approached landlords who did not have familiarity with harm reduction services and refused to rent their space due to concern about impact on neighborhood crime and safety • Lack of community involvement in planning led to opposition & added mistrust • Concerns about legality and federal response impacted funding and financing 	<ul style="list-style-type: none"> • Bottom-up approach: began with building trusted relationships in local communities • Community trust and building on existing infrastructure: Approached existing harm reduction agencies, where building managers already trusted the organizations and were open to expansion of those services to OPS • Community involvement & political champions helped 2 Manhattan sites open with support from the district attorney and law enforcement leadership

Implications for Policymakers

As part of a comprehensive approach to reducing overdoses, policymakers can consider harm reduction strategies – such as opening Overdose Prevention Sites – that have improved health and community outcomes. The following options include lessons learned from barriers and facilitators to implementing OPS.

- **Support community interventions** that start by building relationships and [collaborations among local community stakeholders](#). Implementers should talk with residents, landlords, and community leaders to assess their needs and perceptions about opening an OPS in the area. Community members should also be engaged in the design, launch, and long-term operation of the OPS.
- **Build upon [existing harm reduction infrastructure](#)**, such as expanding services of trusted, local organizations who already provide services (e.g., syringe exchanges) to include OPS.
- **Promote education** that dispels myths and fosters informed discussions regarding OPS. Education is warranted that directly addresses questions about safety (e.g., there has not been an increase in crime rates where OPS have been opened).
- **Offer a comprehensive response** to community concerns surrounding drug use, such as additional prevention, treatment, and harm reduction services. A multifaceted strategy can maximize impact given the complexities involved in reducing illicit drug use.
- **Ensure services are sustainable**, such as through city sponsorship. Opioid litigation funds may be another available funding stream.
- **Adapt existing models** (e.g., [Vancouver Coastal Health’s manual](#)) to the needs of the local community.

