On the Move for Our Community

A Peer-Led Mobile Unit Bringing Services Where They're Needed Most

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Presenter:
Jason Meurlin, Data Analyst, Erie County Department of Health

Session Overview

- Part 1: Overview of Erie County
- Part 2: Outreach Goals and Definitions
- Part 3: History and Current State of Outreach in Erie County
- Part 4: Mobile Outreach Implementation and Recommendations

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Part 1:
Overview of Erie County

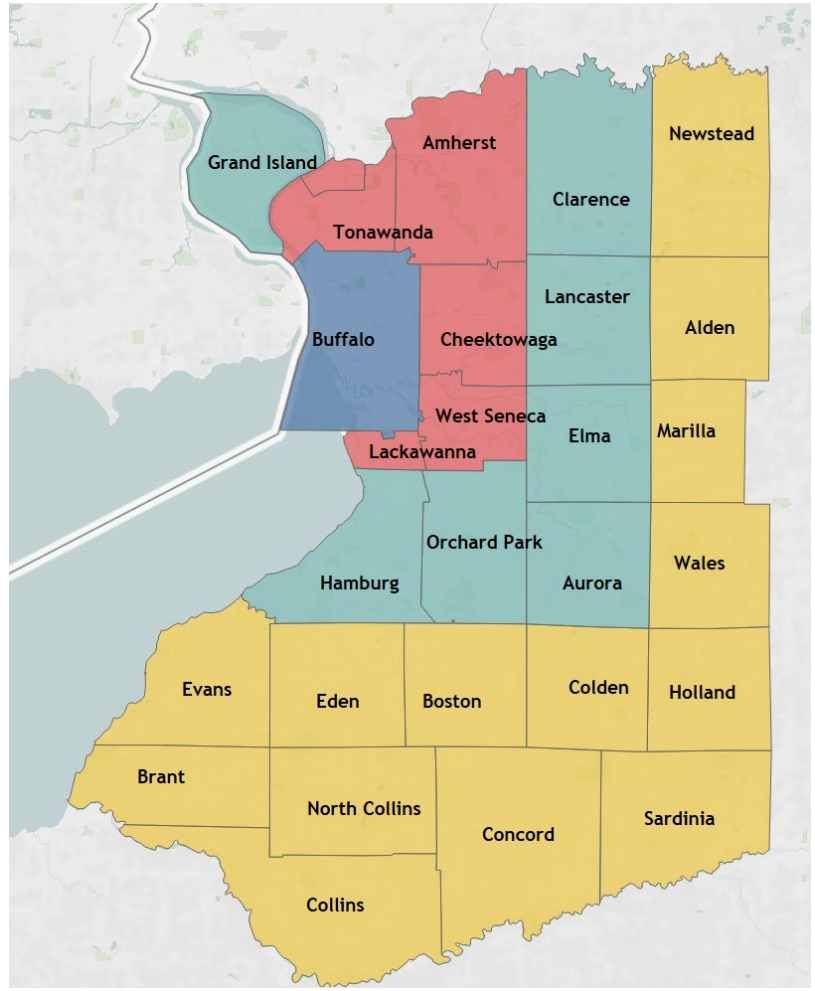
Geography, Demographics, Data Sources

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Erie County Geography

- Wide range of environments and population density
  - City of Buffalo
    - ~29% of county population
    - ~64% of Black population
  - Suburbs
    - ~58% of county population
  - Rural areas
    - ~13% of county population

Source: American Community Survey 2024 5-Year Estimates, United States Census Bureau



Map Legend

- Urban (City of Buffalo)
- Inner Suburb
- Outer Suburb
- Rural

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Erie County Demographics

	Population % (n = 954,236) 2020 Census	2023 Overdose % (n = 435)	2024 Overdose % (n = 358)	2025 Overdose % (n = 241)	2026 Overdose % (n = 204)
Race					
White	**73%**	**64%**	**63%**	**75%**	**70%**
Black/African American	**14%**	**33%**	**33%**	**23%**	**27%**
American Indian/Alaskan Native	**0.60%**	**2%**	**2%**	**< 1%**	**< 1%**
Other	**12%**	**1%**	**2%**	**1%**	**1%**
Ethnicity					
Not Hispanic or Latino	**94%**	**90%**	**92%**	**90%**	**94%**
Hispanic or Latino	**6%**	**10%**	**8%**	**10%**	**6%**

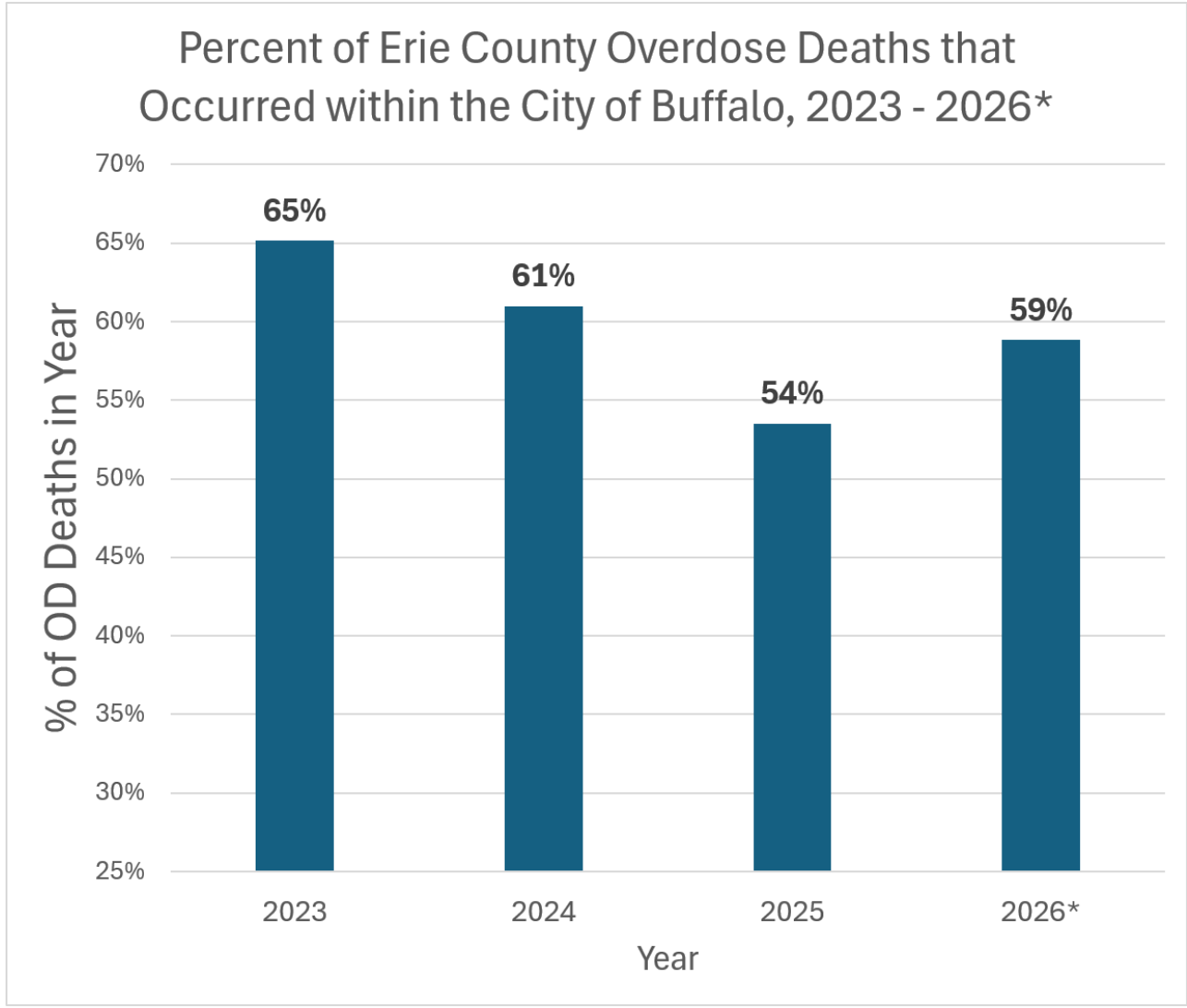
- Black population disproportionately affected by overdose deaths
  - Disparity improved significantly from 2024 to 2025, but is worsening in 2026 YTD

SOURCE: ERIE COUNTY MEDICAL EXAMINERS OFFICE . CASES REPORTED THRU 10/16/2026

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Overdose Deaths within City of Buffalo

- 2023: Nearly 2/3 of Erie County OD deaths occurred within Buffalo
- Significant decrease 2023 to 2025
- 2026: Trend reversal, increasing concentration of urban deaths
  - **2X** more OD deaths in Buffalo than expected from population alone
  - **29%** of county population, **59%** of OD deaths



SOURCE: ERIE COUNTY MEDICAL EXAMINERS OFFICE . CASES REPORTED THRU 10/16/2026

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Data Sources and Limitations

Data Source	Details	Advantages	Limitations
High Intensity Drug Trafficking Area (HIDTA) Office	- Aggregates law enforcement reports and EMS calls related to overdoses - Long standing relationship with the county, provides data regularly	- Have exact geographic locations we can map - Contain narrative details about the incident - Received weekly, can be used to stay on top of trends	- Often incomplete information - Can't determine the substance used - Significant underreporting
Erie County Medical Examiner's Office	- Provides overdose death data - Lucky to have one!	- More complete and accurate information than OD reports - Confirms the substances present at time of death	- Toxicology confirmation can take weeks or months - Can't be used for rapid response to trends
Local knowledge of outreach workers	- Have lived experience with substance use	- Often the most useful info for finding the specific spots where PWUD congregate	- Anecdotal and difficult to quantify

Part 2:

Outreach Goals and Definitions

Outreach Types and Objectives

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Objectives of Outreach

- Goals of harm reduction outreach workers:
  - Encourage people who use drugs to engage with harm reduction services
  - Conversations regarding safter injection and overdose prevention practices
  - Be a trusted and safe resource when/if they are ready for treatment

- Supplies and services offered:
  - Connections to MOUD (via MATTERS)
  - Connections to housing (via SPOA)
  - Connections to mental/behavioral health services

Naloxone
Fentanyl and Xylazine Test Strips
Sterile Syringes
Sharps Containers
Condoms
Safe Injection Kits



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Erie County Outreach Definitions

- Harm reduction outreach: Any health department staff activity that occurs offsite with the intention of offering harm reduction supplies, connections to treatment, or advice regarding safer-use practices to people who use drugs
    - Types of outreach
        - Tabling: Setting up a table, usually at a public event, to offer harm reduction supplies and literature to both people who use drugs and the general public
            - Will not be covering further today
        - Mobile Outreach: Outreach where staff are moving around a predefined area, actively searching for people to offer supplies or services. Usually involves a combination of vehicles and walking streets in high traffic areas

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Erie County Outreach Definitions

- Harm reduction outreach: Any health department staff activity that occurs offsite with the intention of offering harm reduction supplies, connections to treatment, or education regarding safer-use practices to people who use drugs
  - Types of outreach
    - Standing outreach location: Areas attended by outreach staff on a regularly reoccurring basis to offer supplies and resources
    - Flex outreach: Outreach conducted at locations that change with current trends

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Types of Mobile Units

- Different terminology and requirements depending on the level of services offered
- Governed by Article 28 of New York Public Health Law
  - Requirements can be prohibitive
    - If an organization isn't already prepared with an outreach strategy and a need for specific functions
  - Designed with brick-and-mortar facilities in mind

Types of Mobile Units

- Mobile Extension Clinic/Mobile Health Van
  - Must have running water for hand washing
  - Requires Certificate of Need
    - Same requirement as hospitals and treatment centers
  - Can offer the full range of services that brick-and-mortar clinics can

- Mobile Medication Unit (MMU)
  - Requires permissions from DEA, SAMSHA, and OASAS
  - Can dispense buprenorphine and methadone

- Neither is what Erie County has attempted
  - Cost prohibitive to acquire a suitable vehicle
  - Erie County has switched its vehicle procurement model from ownership to leasing

Types of Mobile Units

- Erie County's use of outreach vehicles is best described as a generic mobile services unit
  - Not operating under Article 28

Can offer:

- Syringe access (through ESAP participation)
- Rapid testing for HIV, HCV, other STI's
  - Through partner organization
- Wound care supplies (bandages, gauze, etc.)

Can NOT offer:

- Direct dispensation of MOUD
- Comprehensive laboratory diagnostic tests
- Direct wound care treatment

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Part 3:

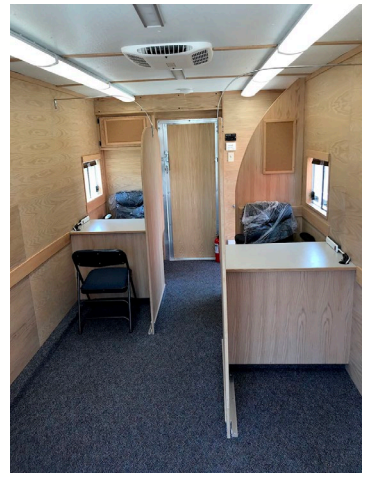
History and Current State of Outreach in Erie County

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Evolution of Erie County Harm Reduction Outreach

Outreach Method	2019	2020	2021	2022	2023	2024	2025	2026
Live Well Erie Van Mobile Unit								
Mobile Outreach								
Standing Outreach Locations								
Flex Outreach								



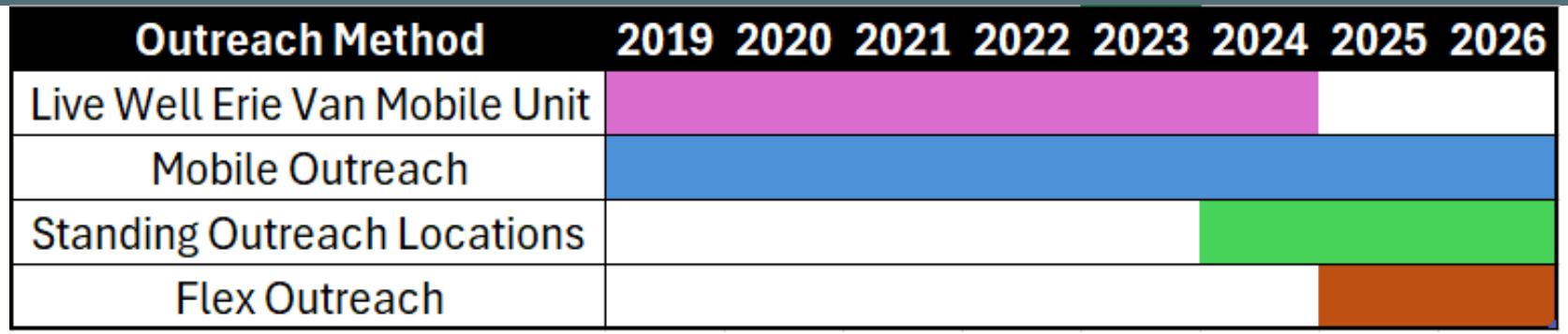
- Pre 2019
  - Street outreach primarily supported by HIV funding



- 2020-2022
  - Substance use outreach often paired with COVID-19 mitigation (antibody testing, mask distribution, vaccine administration)
  - Extensive use of Live Well van
    - Multi-purpose health van used by several departments
    - COVID-19 provided opportunity for to use it for outreach
  - Heavy focus on a few locations, limited reach

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Evolution of Erie County Harm Reduction Outreach



- 2023
  - Opioid settlement fund dollars allowed significant expansion of outreach team
  - Able to increase reach by sending subsets of the team to different locations
- 2024
  - Formalized standing outreach locations in conjunction with expanding partnerships with community organizations
- 2025 to Present
  - Formalization of flex outreach to expand reach
  - Shift towards more heavy use of personal vehicles for flexibility

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Current Outreach Model: Two-Pronged Approach

Standing Outreach

- Same locations attended regularly
- Builds trust through repeated informal interactions
- People know where to find us
- Generally a stationary location
- Generally occurs in City of Buffalo

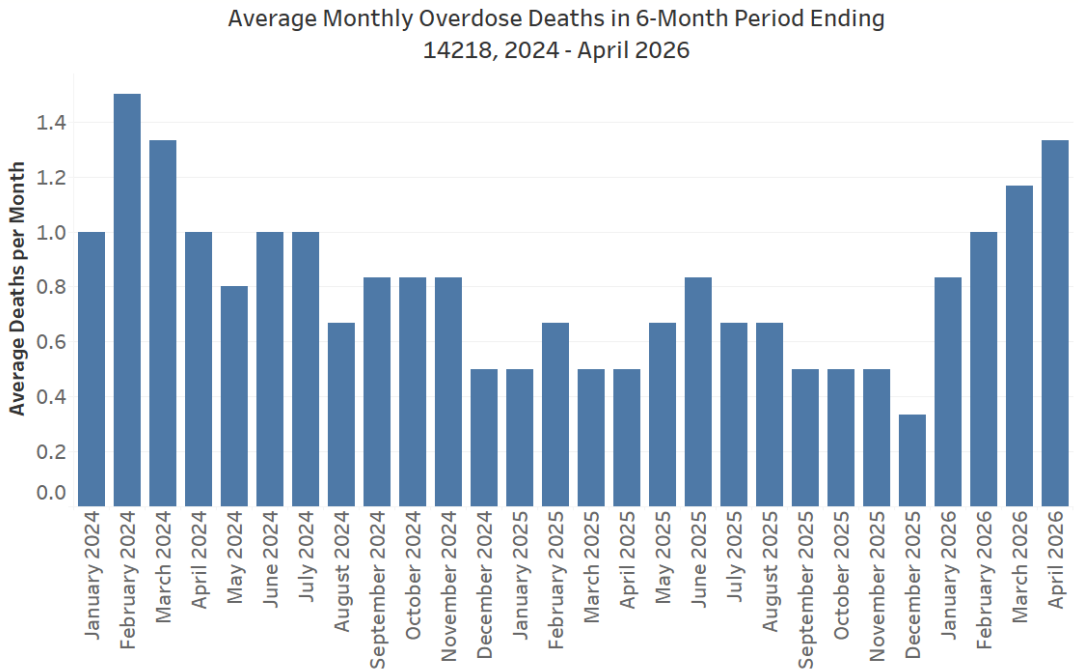
Flex Outreach

- Locations change based on current needs
  - Overdose report trends
  - Seasons/weather
  - Peer knowledge
- Allows us to reach new populations, within or outside of City of Buffalo
- Can be mobile, exploring surrounding area

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Metrics for Targeting Outreach

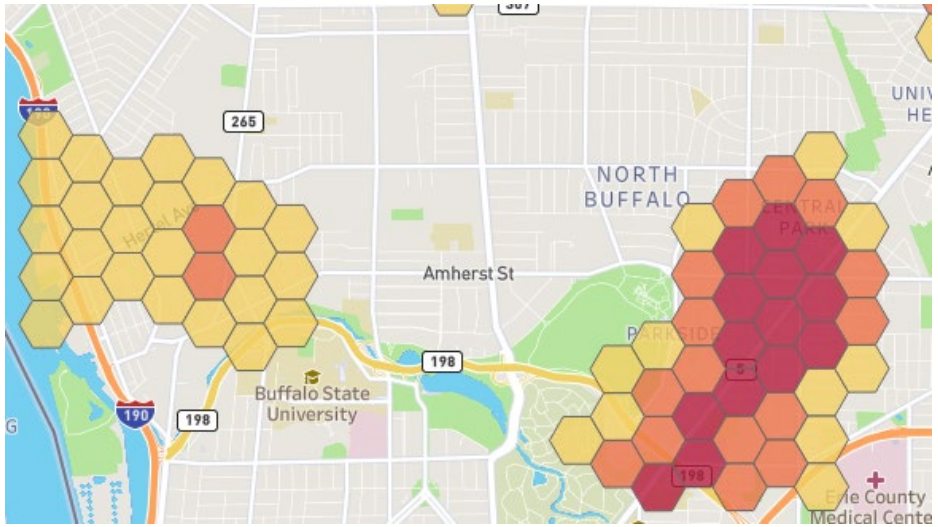
- ZIP code level overdose death trends
  - Historical analysis of ZIP codes with high death rates
    - Often the sites for standing outreach locations
  - Areas with increasing OD deaths relative to baseline
    - Useful for choosing flex outreach sites



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Metrics for Targeting Outreach

- Overdose report clustering
  - Spatial and temporal grouping of OD reports to identify hotspots
    - Heat maps are especially useful for sub-ZIP code level targeting
      - Details in Appendix
    - Generally look at 6-week or 12-week intervals



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Challenges with OHR Outreach Methods

- Home visits
  - Low success rate
    - Clients are often not home, don't want to engage, or don't live at the specified address
  - Intensive on time and mileage expense
  - Phased out in 2025 in favor of increased street outreach presence

- Live Well Erie van
  - Frequent mechanical issues
  - Logistical hurdles from vehicle being shared between multiple departments

- Flex outreach
  - Less successful at achieving connections to care than standing outreach
  - Time intensive to find suitable locations and build relationships
  - Limited capacity to react to changes quickly

Broader Outreach Landscape in Erie County

- Erie County is fortunate to have multiple other community-based outreach organizations
  - Presence has expanded in recent years
  - Several are highly mobile, using personal vehicles to travel to areas with unmet needs
  - Often partner with Erie County outreach team

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Importance of Data Sharing

- Challenges
  - Community organizations don't have access to our data sources
  - Sensitive information, must be disseminated responsibly and in aggregate

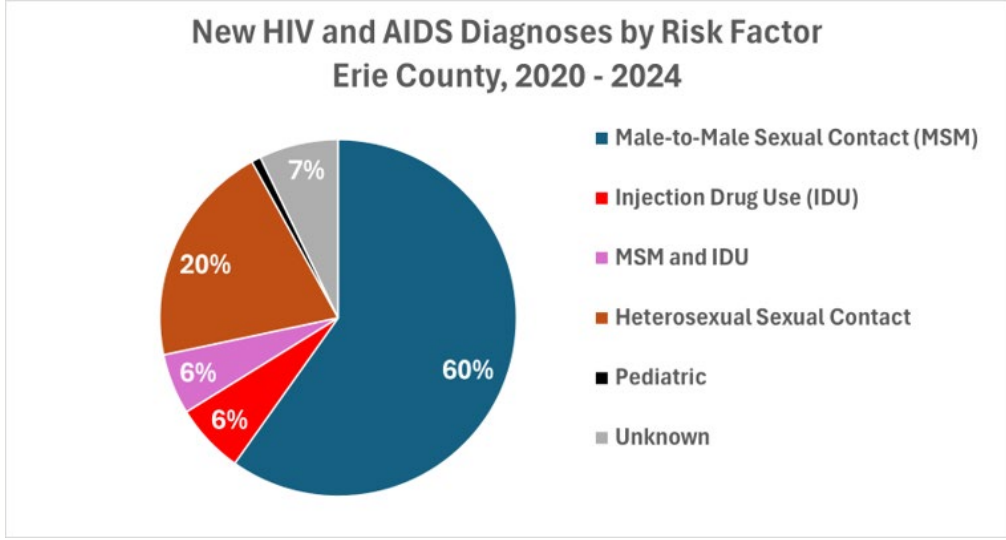
- Heat map reports and webinars for community partners
  - Excellent tool for keeping outreach orgs up-to-date with recent trends in substance use activity
    - Positive feedback with regards to improved outreach effectiveness
  - MOU's employed to ensure responsible use of data

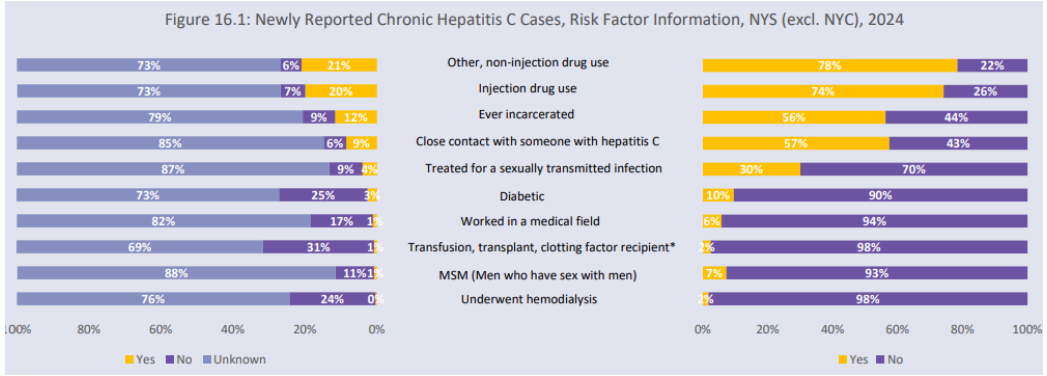
- Overdose data dashboards
  - Aggregate data available on county website
  - Working to improve and expand available data metrics

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Expanding the Harm Reduction Continuum: Disease Testing

- Injection drug use is an important risk factor for HIV and Hepatitis C
- Partnership with the Erie County Sexual Health Clinic allows us to offer HIV and Hepatitis C testing at some of our standing outreach locations
  - Emphasizes the importance of interdisciplinary teams and collaborations between organizations
  - Our outreach workers serve as familiar faces, can encourage people to be tested who otherwise would not have





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Part 4:

Mobile Outreach Implementation and Recommendations

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Drivers of Successful Outreach

- Interdisciplinary teams, co-location of multiple services [1][3][9]
  - Peers with lived experience play a crucial role [1][2]
  - Can also include: medical professionals for wound care and MOUD prescriptions, MHC's, etc.
- Partnering with trusted community organizations [1][4]
- Non-judgmental environment [1][2]
- Consistent presence [1][2]
- Prioritizing client agency [1]

- Key theme: Building trust
  - Target population often has prior negative experiences with accessing services
  - Overcome by building a relationship over time

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Drivers of Successful Outreach

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  - Peers with lived experience play a crucial role [1][2]

    Article title: *"This whole thing is relationship medicine": A qualitative analysis of mobile and street-delivered medication for opioid use disorder in King County, Washington, using RE-AIM. [1]*

    - Study interviewed 21 outreach workers providing MOUD during mobile/street outreach

"I think it's the team that you assemble…We are a second chance employer. A lot of our staff come from a place of lived experience…and that you can identify with and connect with patients on a very different level…that keeps them engaged with us."

– R17, program manager, mobile team

- Supports Erie County's experience
  - Outreach team is mostly peers with lived experience
  - Partnership with Sexual Health Clinic
    - Getting tested for HIV/HCV can get people to think about their health more broadly, and consider addressing their substance use

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Drivers of Successful Outreach

- Consistent presence
- Supports Erie County's experience
  - Significantly more success at locations we attend regularly compared to other areas

Understanding the role of street medicine in harm reduction: a case study of Street Medicine St. Louis

> "We know you guys [Street Med STL providers] come down here every Saturday, so like you guys or someone from like [Organization 6], if they would be interested, [Person 1], or like any of them. We know them. We love them. We're familiar with them, we're comfortable with them." (Subject 8)

This consistent presence contrasted sharply with less frequent or impersonal outreach. Subject 8 further clarified:

> "Like no offense to the [organization] people that were just here, we appreciate them coming out once a month, but for them to come down here and try to teach us something, they'd be less likely to pay attention."

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Challenges with Mobile Unit Implementation

- High start-up costs and maintenance expenses
  - Massachusetts study looking at 4 mobile units
    - Median starting cost: ~$60,000, Median monthly operating expense: ~$15,000 [5]
    - Approximate cost for first year: ~$250,000
  - Erie County explored such a vehicle, and start-up costs exceeded $200,000 with necessary vehicle modifications

- Skepticism from local officials and community members
  - Many don't see the need, or don't want them operating in their area [6][7]
  - Local officials may feel pressure from constituents to block mobile outreach [6]
  - Even if harm reduction outreach is permitted, certain methods may not be [8]
    - Local example, safe smoking supplies

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Challenges with Mobile Unit Implementation

- Workforce limitations
  - Concerns from providers needed to operate the unit
    - Worried about safety[7]
    - Comfort of day-to-day operations[7]
  - Difficult to coordinate schedules between multiple participating parties, may not be available during ideal outreach times (e.g. evenings)[8]

- Vehicles don't increase reach in and of themselves
  - Each mobile unit can only be in one place at a time [10]
    - Mobile vs. "Actually mobile"
    - One org found itself needing a second, smaller vehicle to deploy from the mobile site to improve reach
  - Can be effective if integrated into a broader outreach context [9]

Recommendations for Mobile Outreach

- Explore government funding of community initiatives
- Expand data sharing and data support to community organizations
    - Provide and safeguards advice regarding responsible data use and interpretation
- Aid in coordination across different organizations to fill gaps in service coverage
    - Help connect interdisciplinary teams for more comprehensive services
    - Help community orgs coordinate who is going where, avoid oversaturation
- Consider whether a specialized outreach vehicle is necessary
    - May be able to get most of the benefit in personal or county vehicles
        - Erie County has policies and guidelines for personal vehicle use to minimize liability

Key Takeaways for Other Communities

- Mobile outreach requires balance between consistency and adaptability
  - Contradictory goals: maintaining a predictable schedule at defined locations vs. moving to new areas in response to trends
  - Potentially mitigate by changing locations seasonally and announcing changes in advance

- Avoid duplicating efforts
  - Community organizations often have good existing relationships and local knowledge, no need to duplicate

- If the goal is to increase reach, a dedicated outreach vehicle might not be the answer
  - Divide and conquer: supporting multiple community-based teams can cover more ground and be more responsive than a single unit

Key Takeaways for Other Communities

- Government can be effective at filling gaps in data and funding
  - Better access to data, can provide a big picture view
  - Can offer direct funding to overcome start-up costs

- Other services (e.g. wound care, safe ingestion supplies, disease testing) can an important gateway to MOUD or other substance use treatment services
  - Interdisciplinary teams are very important, we rely heavily on collaborations

- Mobile outreach vehicles can be a useful tool, when incorporated into broader existing outreach practices
  - Consider what services you already offer, what you would like to offer, and how a dedicated vehicle might support that goal

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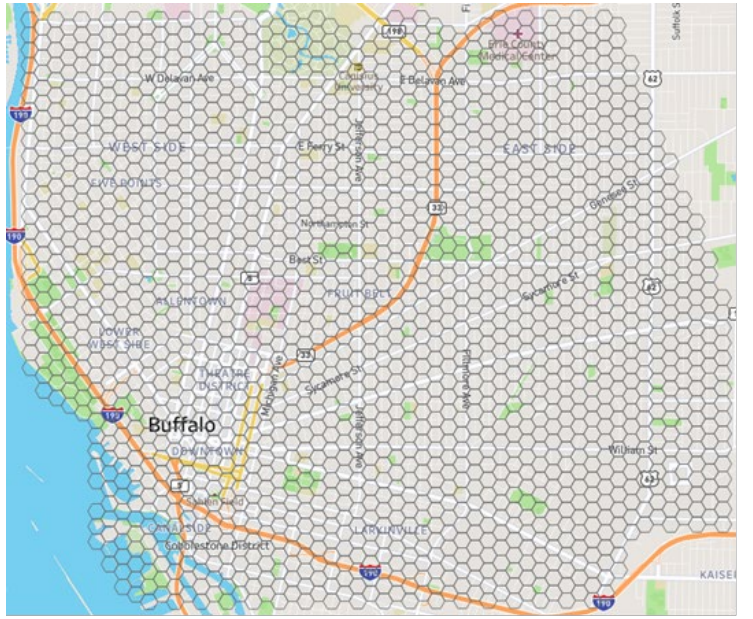
References

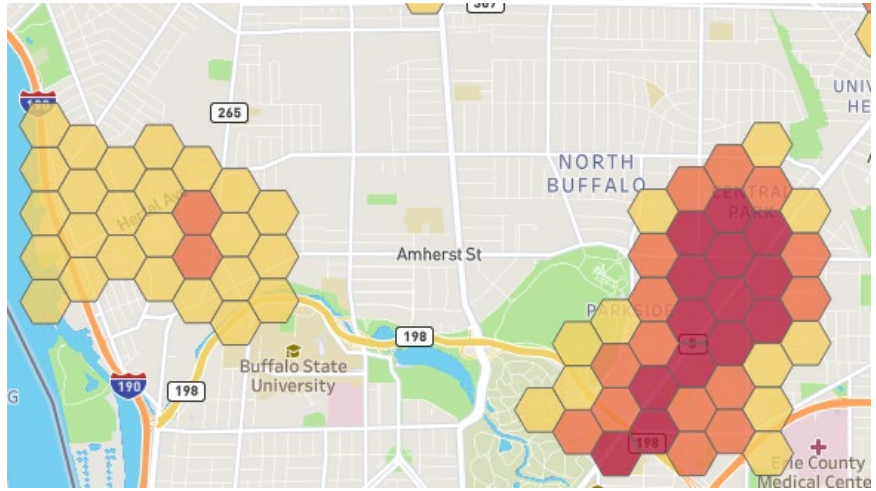
1. Strong M, Rodgers C, Harbick K, Wang K, Gatanaga OS, Glick SN, Corcorran M, Heidari O. "This whole thing is relationship medicine": A qualitative analysis of mobile and street-delivered medication for opioid use disorder in King County, Washington, using RE-AIM. Res Sq [Preprint]. 2026 Apr 1:rs.3.rs-9132767. doi: 10.21203/rs.3.rs-9132767/v1. PMID: 41960325; PMCID: PMC13060497.
2. Gzesh, A., Truel, J.S., Adams, D.R. et al. Understanding the role of street medicine in harm reduction: a case study of Street Medicine St. Louis. Harm Reduct J 22, 161 (2025). https://doi.org/10.1186/s12954-025-01313-w
3. Tschampl CA, Wicks JJ, Hodgkin D, Regis C, Baptista J, Chapman BP, Davies ME, De La Cruz K, Peugh K, Pinkhover A, Plant B, Gupta PS, Mackin S, Urquhart CE, Walsh S, Gaeta JM, Horgan C, Taveras EM. Multisite Mobile Addiction Services: Four-Year Outcomes. Int J Environ Res Public Health. 2026 Jun 4;23(6):756. doi: 10.3390/ijerph23060756. PMID: 42354287; PMCID: PMC13299212.
4. Ingram T, Rubi S, Dantzler S, DeFiore-Hyrmer J, Brown JL, Sprunger J, Winhusen TJ, Lyons MS. Collaboration with community partners to expand naloxone access in the HEALing Communities Study. J Am Pharm Assoc (2003). 2026 May-Jun;66(3):103044. doi: 10.1016/j.japh.2026.103044. Epub 2026 Feb 11. PMID: 41687780; PMCID: PMC13032780.
5. Castry M, Tin Y, Feder NM, Lewis N, Chatterjee A, Rudorf M, Samet JH, Beers D, Medley B, Gilbert L, Linas BP, Barocas JA. An economic analysis of the cost of mobile units for harm reduction, naloxone distribution, and medications for opioid use disorder. J Subst Use Addict Treat. 2024 Dec;167:209517. doi: 10.1016/j.josat.2024.209517. Epub 2024 Sep 17. PMID: 39299504; PMCID: PMC11527578.
6. Rubi S, Ingram T, Brown JL, Sprunger J, Matherny P, Lyons MS and Winhusen TJ (2026) Implementation of mobile medical units for naloxone distribution and MOUD linkage in Ohio's HEALing Communities Study: a community case study. Front. Public Health 14:1883800. doi: 10.3389/fpubh.2026.1883800
7. Miller, M., Song, M., Bessler, A. et al. "How are we going to be able to pull that off?": staff perspectives on the early implementation of mobile medication units in New York State. Addict Sci Clin Pract 21, 51 (2026). https://doi.org/10.1186/s13722-026-00694-y
8. Chatterjee A, Baker T, Rudorf M, Walt G, Stotz C, Martin A, Kinnard EN, McAlearney AS, Bosak J, Medley B, Pinkhover A, Taylor JL, Samet JH, Lunze K. Mobile treatment for opioid use disorder: Implementation of community-based, same-day medication access interventions. J Subst Use Addict Treat. 2024 Apr;159:209272. doi: 10.1016/j.josat.2023.209272. Epub 2023 Dec 19. PMID: 38128649; PMCID: PMC10947870.
9. Pinkhover A, Celata K, Baker T, Chatterjee A, Lunze K. Mobile addiction treatment and harm reduction services as tools to address health inequities: a community case study of the Brockton Neighborhood Health Center mobile unit. Front Public Health. 2024 Jun 18;12:1407522. doi: 10.3389/fpubh.2024.1407522. PMID: 38957203; PMCID: PMC11217472.
10. Bianchet E, de Gijsel D, Del Toro-Mejias LM, Stopka TJ, Hoskinson RA Jr, Dowd P, Friedmann PD. More than Just Buying a Van: Lessons Learned from a Mobile Telehealth HCV Testing and Treatment Study. Viruses. 2024 Aug 30;16(9):1388. doi: 10.3390/v16091388. PMID: 39339864; PMCID: PMC11437394.

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Appendix: Heat Map Methodology

- Getis-Ord Statistic (Gi*)
  - Fit hexagonal grid over analysis area
  - Determine how many events occur in each cell
  - Define spatial relationships (inverse distance)
  - Calculate Z-scores, represented by color
- Software
  - Analysis conducted in R, visualizations in Tableau
  - Parker Webb (NYSPHC fellow!), translation from GIS
- Modifications
  - Scale cell size of grid based on report density
  - Scale inverse distance weighting factor
    - Weighting decays more slowly in less dense areas
  - Apply Gaussian smoothing







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Thank You!

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