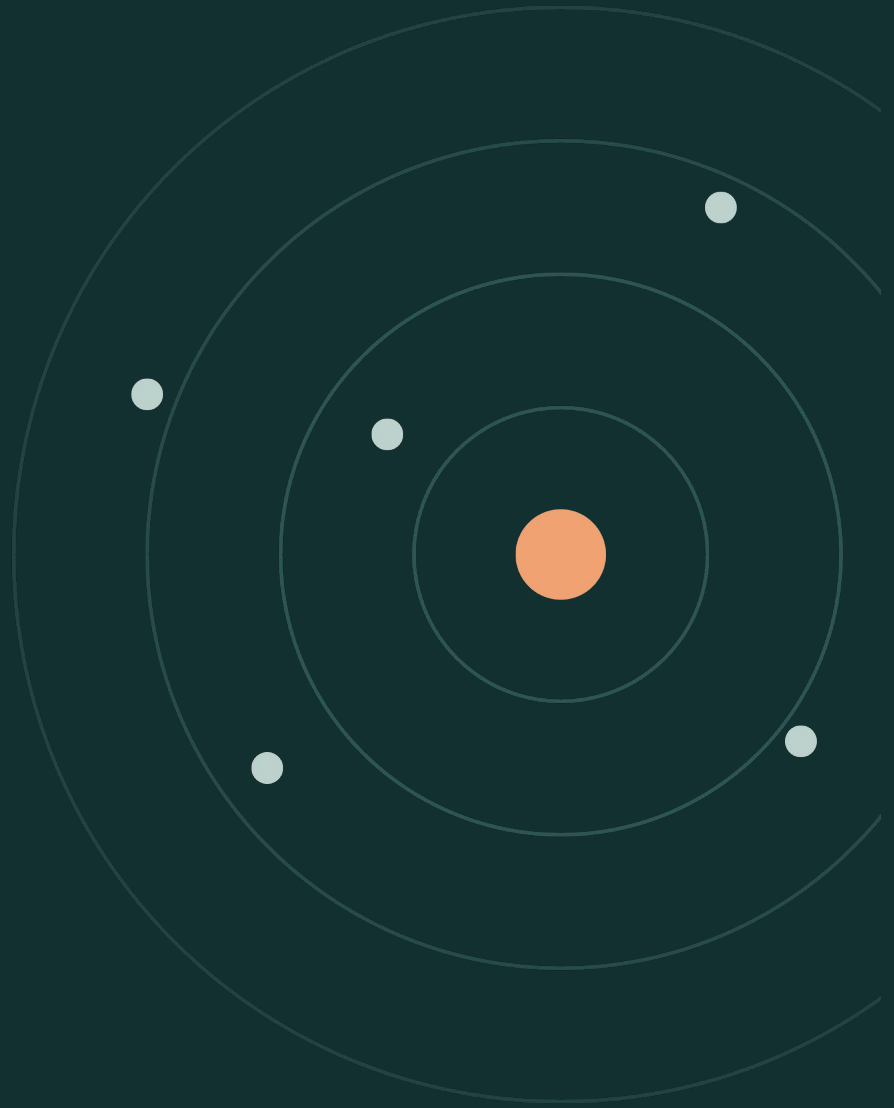
CAYUGA COUNTY COMMUNITY MENTAL HEALTH CENTER

From Access to Trust

Building a community-based harm reduction ecosystem in Cayuga County

BRIDGE Outreach & Drop-In Center · HOPE Program
Karina Anderson, Grant Coordinator and Program Founder



THE STARTING POINT

Overdose was hitting Cayuga County hard

34.5

overdose deaths involving any drug, per 100,000 residents

213.5

emergency department visits involving a drug overdose, per 100,000 residents

These county rates were the baseline we used to plan Year 1 of **Keeping People Alive** .

Behind each number is someone who needed a way in before a crisis.

Source: NYS Opioid Data Dashboard, county data for 2021–2022, crude rates as entered in the KPA Year 1 projection sheet

Cayuga County is service-rich. The gap was getting there — without shame.

Services were hard to reach by bus, and many spaces were treatment-first, leaving people who still use drugs feeling judged before they were helped.

THE SHIFT

From a clinical system to a low-threshold front door

Where we started	What BRIDGE does instead
Scheduled appointments	Walk in when you need to
Readiness for treatment expected	Help offered wherever someone is in their use
Services wait in the office	Staff go to the ER, meal sites, shelters and encampments
A phone number to call	A warm hand-off to a person
One need at a time	Supplies, food, housing help and peer support in one visit

THE ECOSYSTEM

Two programs, one system of care

BRIDGE Outreach & Drop-In Center

Keeping People Alive · NYS DOH High Burden Localities

- Harm reduction drop-in, co-located at CCMH in Auburn
- Narcan, safer-use and wound care supplies
- Peer support and basic needs
- County-wide Narcan distribution and training



Shared clients
Joint outreach
Weekly HOPE hours at BRIDGE
Two-way referrals

HOPE Program

Homeless Outreach & Peer Engagement · NYS DOH Priority Populations · with Cayuga Community Health Network

- Intensive case management
- Street outreach, urban and rural
- Housing navigation and Code Blue coordination
- Summer Shower Program

HOW IT CAME TOGETHER

Two years of building, one step at a time

Fall 2024

HOPE case manager and outreach peer start; BRIDGE hires its first peer

Early 2025

BRIDGE Drop-In Center opens inside CCMH

Summer 2025

Weekly ER discharge sessions; joint street outreach with HOPE

Fall 2025

BRIDGE takes over county Narcan distribution and red boxes

Nov 2025

“Outreach” joins the name; a new drop-in entrance

Spring 2026

HOPE office hours at BRIDGE; Summer Shower Program

2026

Narcan outreach role, new peers, 125 red box sites

INSIDE BRIDGE

What someone finds when they walk in

Overdose prevention

Narcan, hands-on training and overdose response education

Safer-use supplies

Wound care kits, test strips, hygiene and first-aid supplies

Basic needs

Food, clothing, hygiene and reproductive health products, bus passes

Peer support

People with lived experience who listen first and judge never

Case management

HOPE case managers on site weekly for housing, benefits and applications

Pathways

Warm hand-offs to treatment, mental health care and housing

OUTREACH

Meeting people where they already are

Hospital discharge

Weekly peer-led sessions reach people just before they leave the ER

Community meals and businesses

Tabling at meal programs, the Salvation Army and local businesses

Rural reach

Outreach to rural encampments, and library partnerships for residents far from Auburn

Streets and encampments

Joint outreach with HOPE brings Narcan, wound care and hygiene kits into the field

Summer Shower Program

Private showers paired with supplies, referrals and conversation

Online

Social media for hours, events and self-referral

THE HOPE PROGRAM

Outreach for people experiencing houselessness

Intensive case managers and an outreach peer from Cayuga Community Health Network take referrals from DSS emergency housing, shelters, BRIDGE and the street.

15

client cap per intensive case manager, so contact stays frequent and personal

20–22%

more outreach year over year, across downtown Auburn and rural areas

< 32°F

Code Blue: emergency housing placements coordinated with DSS in the cold

Sources: HOPE monthly reports, Nov 2024 (caseload cap), Sept 2025 (CCHN outreach estimate), Oct 2025 (Code Blue)

HEALTH EQUITY

Equity means removing the barriers

Structural barrier	How the programs respond
Criminal records and probation	Advocacy with landlords and programs; “second chance” placements
DSS sanctions and missed appointments	Sanctioned clients stay connected through outreach
Application fees, credit and income rules	Help with documents, applications and vouchers
Fear that disclosing use costs housing	Clear limits on what information is shared, and with whom
Benefit cuts and food insecurity	Food, community meals and supplemental resources

LIVED AND LIVING EXPERIENCE

Peers shape how the work is done

Peers from day one

Our first peer specialist was hired before the center opened and helped set it up, name it and introduce it to partners.

Supported, not burned out

Confidential, grant-funded supervision with an LCSW every two weeks to debrief and address vicarious trauma.

A career ladder

That peer moved into a county-wide Narcan outreach role; part-time peers and a volunteer pathway followed.

Clients as co-designers

A client survey built with a Cornell epidemiologist asks what is and isn't working.



Clients now bring their friends.

Peer-to-peer referral became one of our strongest ways of reaching new people — including Grace House residents introducing peers from nearby encampments.

CROSS - SECTOR PARTNERSHIPS

Partners across sectors widen the reach

Public health and clinical

- Cayuga County Health Department
- Public health nurses
- Cayuga County Mental Health
- Cayuga Counseling
- Local hospital ER
- Cornell University epidemiologist

Harm reduction

- ACR Health and its syringe exchange
- Onondaga County syringe exchange
- NYS harm reduction network
- Businesses hosting Narcan

Housing and social services

- Department of Social Services
- Auburn Housing Authority
- Unity House
- Grace House
- County Homeless Task Force
- Cayuga Works

Grassroots and community

- Nick’s Ride4Friends
- Red Door Church meals
- Salvation Army
- Local colleges
- Rural libraries

IMPACT

Reach, by the numbers

125

Red Naloxone Box sites, nearly all checked and restocked in Sept 2026

75%+

increase in Narcan distribution after a dedicated outreach role began (Aug 2026)

4

new agencies joined the Narcan network in a single month (Feb 2026)

7–10

clients a week engaged by one peer specialist, in the center and on the street (Apr 2026)

24+

clients outfitted with seasonal clothing from the county-wide drive (May 2026)

20–22%

year-over-year growth in HOPE outreach (Sept 2025)

Sources: BRIDGE High Burden Localities monthly reports; HOPE monthly reports (CCHN)

UTILIZATION TRENDS

How people find BRIDGE has changed

2025

We went to them

Street outreach, ER sessions, partner visits, and red boxes carrying BRIDGE information

LATE 2025 – SPRING 2026

Partners send them

Agencies use BRIDGE for needs they can’t meet; HOPE clients get both programs in one visit

2026

Clients bring each other

Word of mouth and returning clients now drive steady growth in foot traffic

Seasons matter: severe weather cut drop-in traffic in January 2026; spring and summer brought steady increases in visits, referrals and Narcan training requests.

CLIENT STORIES

What trust makes possible

Unhoused since 2018

Granted a voucher and moved into rent-stabilized housing.

A mother and four children

Housed together after months of intensive case management.

Back with her children

After transitional housing fell through, she secured a permanent home and reunified with her kids.

Out of jail, not onto the street

Emergency housing, warm clothing and food right after release.

Several clients who drifted away came back and were housed — because the relationship stayed open, without judgment.

RURAL REALITIES

Navigating rural service barriers

Barrier	What we tried
Transportation and distance	Bus passes, an agency car, rural library outreach, going to people
Winter weather	Code Blue placements, clothing and food drives, supply drops
No separate entrance	A designated drop-in entrance, signage, outreach outside the building
Few peers in a small county	Contracted peers, LCSW supervision, a volunteer pathway
No working phone	Gift cards, phone and data cards, pocket planners
A shifting drug supply	Test strips, Narcan at nearly every contact, safer smoking supplies via ACR Health

REDUCING STIGMA

Changing the culture inside systems of care

Harm reduction inside mental health

Co-location at CCMH means a person in crisis can reach internal supports without starting over somewhere new.

Overdose prevention in everyday places

Businesses and community sites carry Narcan, and every kit and red box points back to BRIDGE.

Names send a message

Adding “Outreach” to BRIDGE’s name told people staff would come to them. Contact rose soon after.

Welcome, with boundaries

People who struggle elsewhere stay welcome here; clear expectations keep clients and staff safe.

SUSTAINABILITY

Building infrastructure that lasts

Braided funding

NYS DOH High Burden Localities (BRIDGE), NYS DOH Priority Populations (HOPE) and opioid settlement resources [add specific uses]

Absorbing what would have ended

When another grant sunset, BRIDGE took over county Narcan distribution with no gap in access.

Growing our own workforce

Peer promotion, new part-time peers and a volunteer pathway toward future peer roles.

Planning for what's next

A sustainability plan, county-wide Situation Tables, and a spike response team planned with Cornell.

TAKEAWAYS

What we'd tell another rural county

1 **Start with relationships, not a building.** Outreach and partner visits came before the doors opened.

2 **Put services where people already are.** Case management works better in the drop-in than the office.

3 **Housing is a beginning.** Support has to continue after placement.

4 **Keep the door open after setbacks.** Progress is rarely a straight line.

5 **Count reach beyond your front door.** Red boxes, trainings and outreach are impact too.

Trust is built one visit at a time.

Thank you. Questions?

[Presenter names, titles and contact information]

