

Outlook

2025 APHA Policy Brief Intent to Write Form

From Google Forms <forms-receipts-noreply@google.com>

Date Mon 6/9/2025 5:25 AM

To Policy Develop <PolicyDevelop@apha.org>

Google Forms

Thanks for filling out [2025 APHA Policy Brief Intent to Write Form](#)

Here's what was received.

2025 APHA Policy Brief Intent to Write Form

Background: The Intent to Write Form must be completed by the sponsoring Member Unit to initiate the proposed policy brief process. This form is designed to assess the appropriateness of the topic, provide early feedback, and identify opportunities for collaboration. The rationale and proposed action steps are expected to evolve over time. The goal is for all eligible proposed policy briefs to advance beyond the Intent to Write phase. Authors may be asked by the Evidentiary Review Committee to revise to increase the potential for success. All questions must be answered.

Please contact policydevelop@apha.org if you have questions.

Email *

policydevelop@apha.org

What is the title of your proposed policy brief? *

As Equitable Response to the Ongoing Opioid Crisis

Contact Information of Corresponding Author

Name *

Jane Doe

Organization *

ABC University

Title *

Professor

APHA Member Units (Sections/SPIGs/Forums/Caucuses and Affiliates) in which active

*

ATOD

APHA Member ID *

123456

Email *

jdoe@abc.edu

Phone Number *

555-555-5555

Required Author Disclosure

During the past 12 months, have you or your spouse or partner had a personal, commercial, political, academic, or financial interest or relationship that might potentially bias and/or impact the content of the proposed Public Health Policy Brief?

*

☐ Yes☒ No

If yes, please list the interest or relationship

Sponsoring Member Unit

Proposed Policy Briefs must be sponsored by an APHA member unit to be considered for review. A sponsorship letter signed by the Chair of the sponsoring member unit must be provided.

Which APHA member unit is sponsoring the proposed policy brief?

*

ATOD

Upload the sponsorship letter (template found in Author Guidelines, Appendix 3)

*

Submitted files



SampleIntenttoWrite_SponsorLetter - Courtney Taylor.docx

Problem Statement/Importance of the Topic to Public Health/Rationale for Consideration

Describe the problem citing the importance to public health and the rationale for consideration **(160 words max)**

The policy brief must be: a) externally focused to APHA b) address one public health issue over different time periods and multiple populations or provide a strong justification for a focus on one population and time c) focused upstream and/or on root causes that are modifiable by public health action and d) contains justification and uses evidence to detail the problem and why action is necessary.

*

In 2019, 10.1 million United States residents used opioids nonmedically, mostly by misusing prescription opioids, despite almost halving the number of people initiating prescription opioid use from 425,000 in 2015 to 239,00 in 2019. In 2019, 0.9% of 18-25 year-old persons and 0.4% of 12-17 year-old persons had opiate use disorder (OUD). From 2019 to 2020 cocaine-associated overdose deaths increased by 26.5%. Synthetic opioid-associated mortality has increased by more than 15%. By 2018 non-Hispanic Whites, American Indian, and Alaska natives had the highest overdose death rates, while persons 65 years and older, non-Hispanic Blacks, and Hispanics had increasing overdose death rates. This policy responds to the opioid crisis manifested in prescription and illicitly manufactured synthetic opioid, polysubstance, and stimulant-associated fatal and nonfatal overdoses. This policy focuses on prevention of opioid use, treatment of OUD including medication for OUD (MOUD), and expanded monitoring of opioid use patterns, public health and safety outcomes.

Relationship to Existing Policy Statements

Please view existing policy briefs at <https://www.apha.org/policy-and-advocacy/public-health-policy-briefs/policy-database?sortFieldName=ItemDate&sortDisplayName=Newest&sortMode=desc>.

List a **maximum of the three** most relevant active policy statements/briefs and describe how the proposed brief relates to these active policy statements/briefs (**40 words max per related statement/brief**).

If no applicable active policy statements/briefs exists, please indicate that by checking the statement below.

☐ No related active policy statements/briefs

Policy #1 Number and Title

20154- Prevention and Intervention Strategies to Decrease Misuse of Prescription Pain Medication

How does the proposed policy brief relate to Policy #1?

Updates 20154 (Prevention and Intervention Strategies to Decrease Misuse of Prescription

Pain Medication) to reflect a shift in the nature of the opioid crisis. Emphasizes addressing a landscape of increased use of synthetic opioids, polysubstance use, and growth in stimulant overdose deaths.

Policy Brief #2 Number and Title

A Public Health Approach to Protecting Workers from Opioid Use Disorder and Overdose Related Occupational Exposure, Injury and Stress

How does the proposed policy brief relate to Policy #2?

Expands on 202012 to address the drivers of the current drug overdose crisis, primarily driven by opioids, as the primary cause of injury-related deaths across the whole US population. Aim to expand beyond workforce protection to focus on nonmedical use of prescribed opioids with a particular emphasis on the most affected age groups.

Policy Brief 3 Number and Title

How does the proposed policy brief relate to Policy #3?

Potential Action Steps

Provide **three** potential action steps (**50 words max per step**). Action steps should be specific, measurable, reasonable, timely/feasible/relevant, inclusive, and equity focused.

Note: up to 10 action steps are allowed in the full policy brief, please identify the three most relevant to the proposed policy brief. In the full brief, there should be a strong correlation between the problem statement

and the action step. The three steps listed below can be revised and expanded upon in the full proposed policy brief submission.

Action Step #1 *

Across health departments, systems and social services agencies develop comprehensive syringe services programs (SSPs) for people who inject drugs, with special attention to vulnerable and marginalized populations. The SSPs should be able to find and provide services to PWID within the first year of their injected substance use.

Action Step #2 *

Within four years health departments, systems and social services agencies should fund, develop, implement and evaluate workforce training curricula directed towards harm reduction strategies addressing provider bias, benefits of prescription drug monitoring program use, fentanyl testing strips, access to safe consumption sites, SSPs and community overdose education.

Action Step #3 *

Within three years, federal, state and local health agencies should develop a surveillance system integrated into health systems, emergency medical systems and treatment centers for real-time data access to expand monitoring of patterns of opioid use and related public health safety outcomes.

Alignment with the APHA Strategic Plan

More information on the strategic plan can be found at <https://www.apha.org/about-apha/strategic-plan-summary>.

Describe your proposed policy brief's alignment with **at least one** of the following strategic plan priorities **(40 words max per priority)**

Build Workforce Capacity and Effectiveness

This proposed policy brief will call for action to increase education and training for the public health workforce to prevented harm through knowledge and availability of medications for opioid use disorder and safe consumption and testing practices.

Champion Public Health

This proposed policy brief will focus on expanded monitoring of patterns of opioid use and safety outcomes. It will highlight public health laboratories unique qualifications to lead testing non-fatal overdose samples and train public health professionals and policy makers to act.

Advance Equitable Public Health Practices and Outcomes

The proposed policy brief will focus addressing access for vulnerable and marginalized populations. Action steps will foster equitable access to prevention and intervention services and aim to increase availability of safe consumption sites, fentanyl testing and workforce training underserved populations.

Alignment with the Public Health Code of Ethics

More information can be found at https://www.apha.org/getcontentasset/43d5fdee-4ccd-427d-90db-b1d585c880b0/7ca0dc9d-611d-46e2-9fd3-26a4c03ddcbb/code_of_ethics.pdf?language=en

Describe your proposed policy briefs alignments with the Public Health Code of Ethics focusing on the core values of professionalism and trust, health and safety, health justice and equity, interdependence and solidarity, human rights and civil liberties, and inclusivity and engagement **(40 words max)**.

*

The proposed policy brief calls for increased health and safety in vulnerable/underserved populations. Harm prevention and increasing equity in access to prevention and intervention

services are the key strategies and actions.

Signature

Signature of the submitter. Format s/firstname lastname/s

*

s/ Jane Doe/s

Date of signature *

MM DD YYYY

06 / 06 / 2025

[Create your own Google Form](#)

Does this form look suspicious? [null]Report