



MILWAUKEE COUNTY
DEPARTMENT OF
HEALTH & HUMAN
SERVICES

harm reduction

train . supply . reduce . thrive

**Celebrating Progress, Building Partnerships,
Advancing Solutions**



Arrival and Breakfast

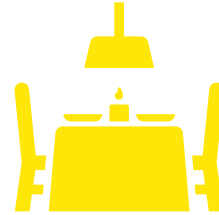
9:30 am - 10:00 am

Welcome

10:00 am – 10:30am

1,000 Door Challenge

10:30am-11:00am



Panelist Discussion

11:00 am – 12:00pm

Lunch and Networking

12:00 pm – 1:00 pm



Closing and action- putting plans into practice

1:00 pm – 2:00 pm

SUMMIT AGENDA

The Prevention Team



**Tanzanique
Cage**



**Clarence
Jenkins**



**Amy
Moebius**



**Jeremy
Triblett**



**Africa
Lucas**

Harm Reduction Summit Planning Team

The background of the slide is a photograph of a group of people at what appears to be a community event or fair. The image is heavily overlaid with a teal color. In the foreground, a person is wearing a yellow baseball cap. In the middle ground, a person is wearing a grey hoodie with "POLO 1967" printed on it. To the right, another person is wearing a dark blue hoodie with "WISCONSIN" printed on it. The scene is filled with people, some looking at displays or talking to each other.

1. Equitable Access & Distribution

2. Data-Driven Systems & Stigma Reduction

3. Sustained Collaboration & Capacity

2026 HARM REDUCTION MKE GOALS



**Strengthen the network of providers,
community members, and systems to
ensure sustainable, trauma-informed,
and person-centered support.**

SUSTAINED COLLABORATION & CAPACITY



Expand Stakeholder Engagement: Bring more people to the table from different industries and people who are actively using,

Holistic Recovery Model: Promote a new understanding of “recovery” that integrates harm reduction principles, with education that medication and the moral model aren’t the only recovery methods.

Provider Support: Establish a provider self-care and support network. Normalize a culture of professionals receiving resources they provide.

SUSTAINED COLLABORATION & CAPACITY

The background image shows a group of people at a conference or event. A teal overlay covers the entire image. The text is white and bold, positioned in the upper half of the image. The text reads: "Establish a unified, county-wide data collection, communication, and referral system to inform policy and resource allocation."

Establish a unified, county-wide data collection, communication, and referral system to inform policy and resource allocation.

DATA & LOGISTICS FOUNDATION

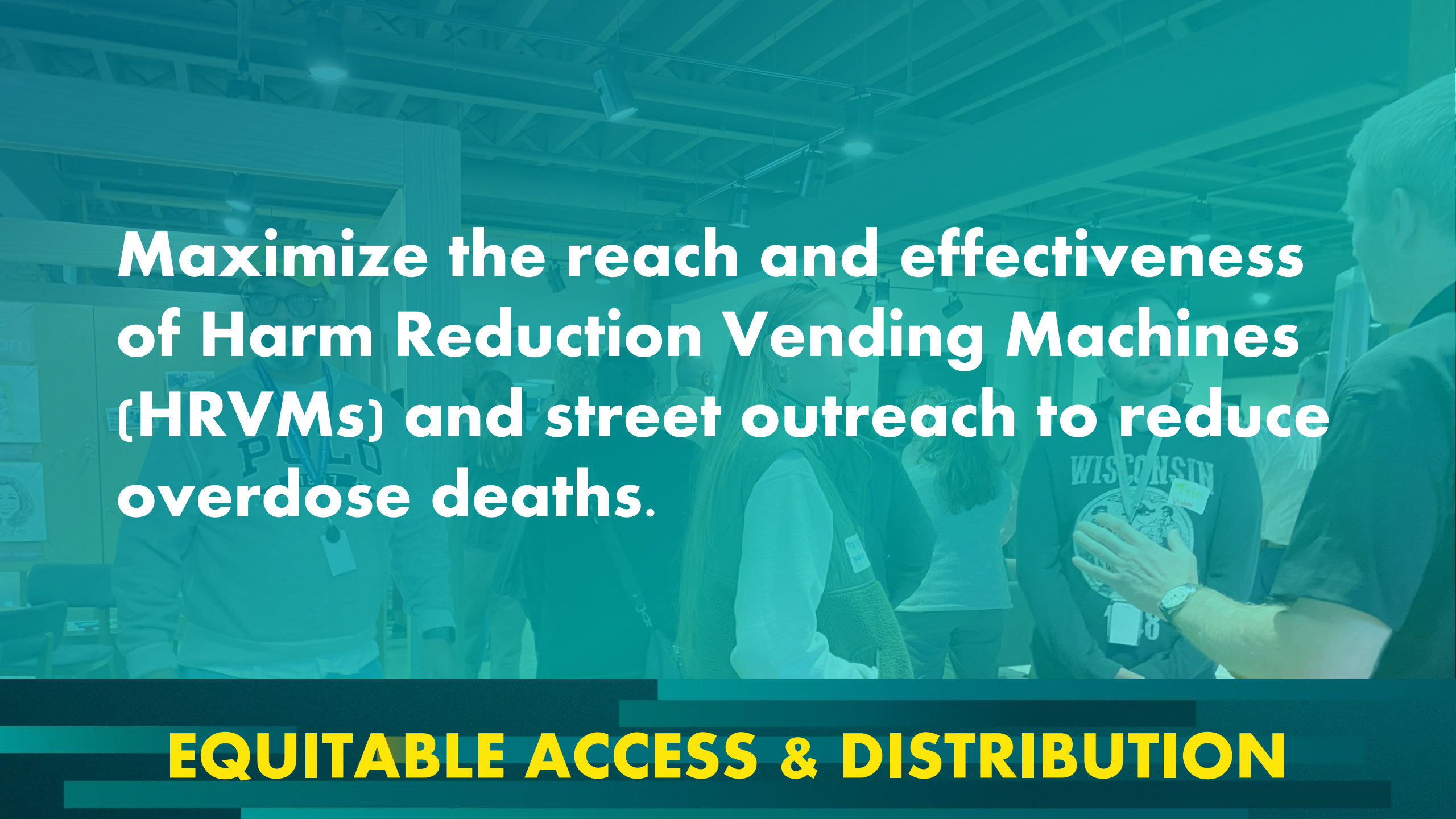


Unified Data Collection: Develop a county-wide harm reduction data alignment strategy that informs multi-municipality collaboration.

Policy Advocacy: Engage in open discussion and advocacy for reform on paraphernalia laws and collaborate with county officials.

Digital Hub: Establish a multimedia platform with an event calendar and easier communication methods (outside of email & summit).

DATA & LOGISTICS FOUNDATION

The background image shows a community event with several people. A man on the left wears a grey sweatshirt with 'PULD' and a lanyard. A woman in the center wears a white shirt and a dark vest. A man on the right wears a dark sweatshirt with 'WISCONSIN' and a graphic. The entire image is covered with a semi-transparent teal overlay.

Maximize the reach and effectiveness of Harm Reduction Vending Machines (HRVMS) and street outreach to reduce overdose deaths.

EQUITABLE ACCESS & DISTRIBUTION



Targeted HR Dissemination Strategies (HRDS) Placement: Ensure HRVM are placed in “hot spots” in proximity to residential vulnerability and high substance use rates.

Customized Supply Strategy: Implement location-specific supply stocking in HRVMs, moving beyond universal kits.

Street Outreach: Convene HR Strategies to target Hot Spot Areas with street outreach.

EQUITABLE ACCESS & DISTRIBUTION



harm
reduction



DOORS CHALLENGE

June 12th
Canvassing and
Resource Fair

12 Unique Agencies

- Milwaukee County Parks: Kozy – 157 surveys
- Turner Hall Ballroom – 62 surveys
- MCHS – 57 surveys
- Wisconsin Community Services, Inc. (WCS) – 31 surveys
- Samad's House – 21 surveys
- MFD/CMS – 14 surveys

12 Unique Agencies

- Milwaukee Community Resources and Empowerment Services – 13 surveys
- AMRI Counseling Services – 8 surveys
- Outreach Community Health Centers – 4 surveys
- Milwaukee Fire Department – 3 surveys
- Dr. Martin L. King Community Center – 1 survey
- Oak Creek Fire Department – 1 survey



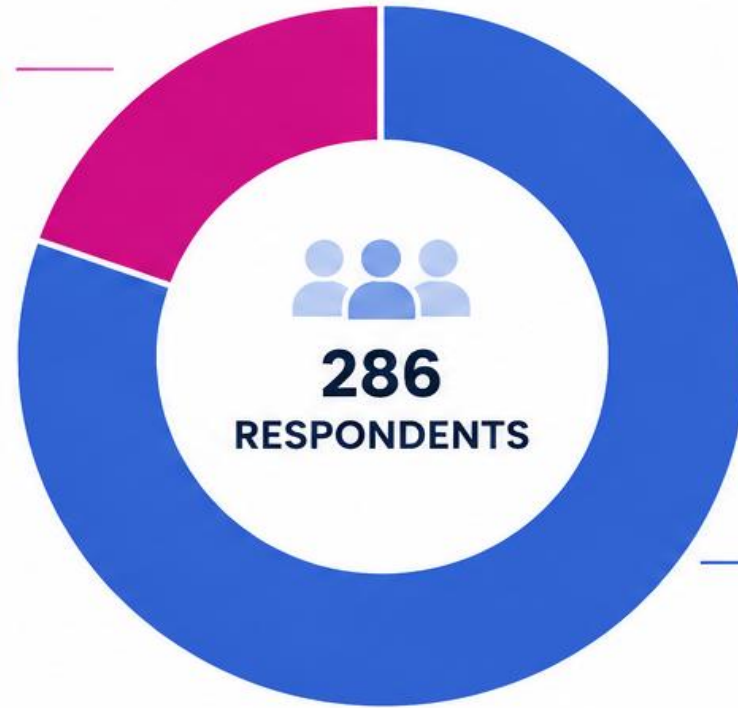
SURVEY QUESTION:

Did you know there was a harm reduction vending machine in your neighborhood?

RESPONSE	COUNT	PERCENTAGE
 No	231	81%
 Yes	55	19%
 TOTAL	286	100%

19%

Yes



81%
No

CAVASSING SURVEY RESULTS

KEY TAKEAWAYS



81% of respondents were unaware that a harm reduction vending machine is located in their neighborhood.



Only **19%** of respondents knew about the machine.



Increasing awareness is critical to improving access to life-saving harm reduction supplies.



Continued outreach and community engagement must remain a priority.



Four out of five residents surveyed did not know a harm reduction vending machine was available in their neighborhood, highlighting the need for continued outreach and community engagement.

**HARM
REDUCTION
MKE SUMMIT**

CAVASSING SURVEY RESULTS



We asked respondents if they knew what items are available in the harm reduction vending machine.



Narcan

100

25%



Drug Testing Kits

84

21%



Gun Locks

72

18%



Drug Deactivation Bags

81

21%



Medication Lock Bags

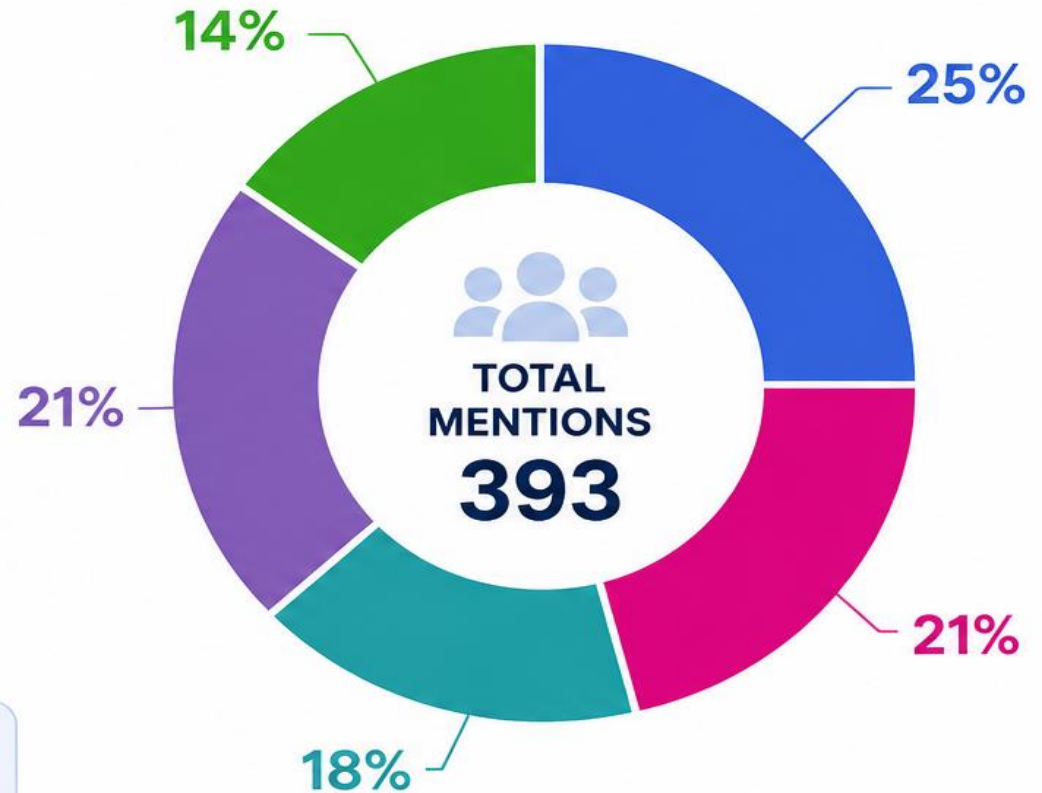
56

14%



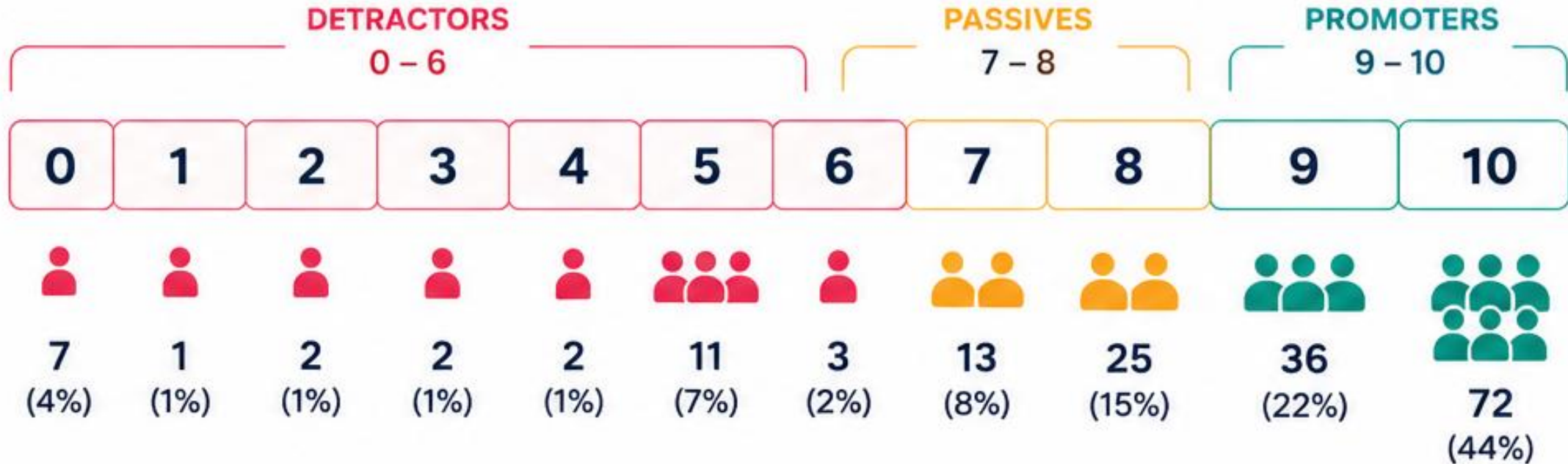
KEY TAKEAWAY

Narcan is the most recognized item in the machine, followed by drug deactivation bags and drug testing kits. There is an opportunity to increase awareness of all available items.



CAVASSING SURVEY RESULTS

HOW RESPONDENTS SCORED (0-10 SCALE)



KEY TAKEAWAY

With an NPS of 66, the majority of respondents are likely to use the harm reduction vending machine now that they know about it. Continuing outreach and education can help convert passives and detractors into future users.



89% are likely to use the machine (scores 7-10)

CAVASSING SURVEY RESULTS



1. What information would have made this easier?
2. What types of community needs or concerns came up most often during outreach?
3. What strategies felt most effective when approaching and engaging residents?
4. How can we continue building relationships in these neighborhoods beyond this challenge?
5. What challenges concern you most?
6. What partnerships should we build?

What do you think?

Although the event has concluded, the work continues. The 1000 Doors Challenge is not just a one day effort

- Continue outreach efforts throughout the year to build on the momentum of the 1000 Doors Challenge
- Encourage ongoing community dialogue about harm reduction needs and barriers
- Document and share success stories from outreach to highlight impact and engagement
- Prioritize reaching residents who were not available during initial canvassing efforts
- Use the survey consistently to track trends and measure community impact over time

HOW DO WE KEEP THE MOMENTUM GOING?

SMALL GROUP WORK

Reflection

- What information would have made this easier?
- What types of community needs or concerns came up most often during outreach?
- What strategies felt most effective when approaching and engaging residents?

Moving Forward

- How can we continue building relationships in these neighborhoods beyond this challenge?
- What challenges concern you most?
- What partnerships should we build?

LET'S TALK

What we heard:

- **Communities want connection not just services.**
- Many residents appreciated having someone stop, talk, and ask what they needed. Participants noted that consistent presence, familiar faces, and relationship-building are just as important as the resources themselves.
- **Basic needs continue to surface.**
- Food, housing, employment, transportation, and behavioral health resources were among the needs mentioned most often. Participants also identified opportunities to expand youth-focused education, bilingual resources, and stigma-reducing community education.
- **Harm reduction is still misunderstood.**
- Several teams shared that many residents wanted to know more about harm reduction itself. There were suggestions to provide clearer messaging, explain what is available in vending machines, and normalize conversations around overdose prevention before introducing supplies.

LET'S TALK

What worked:

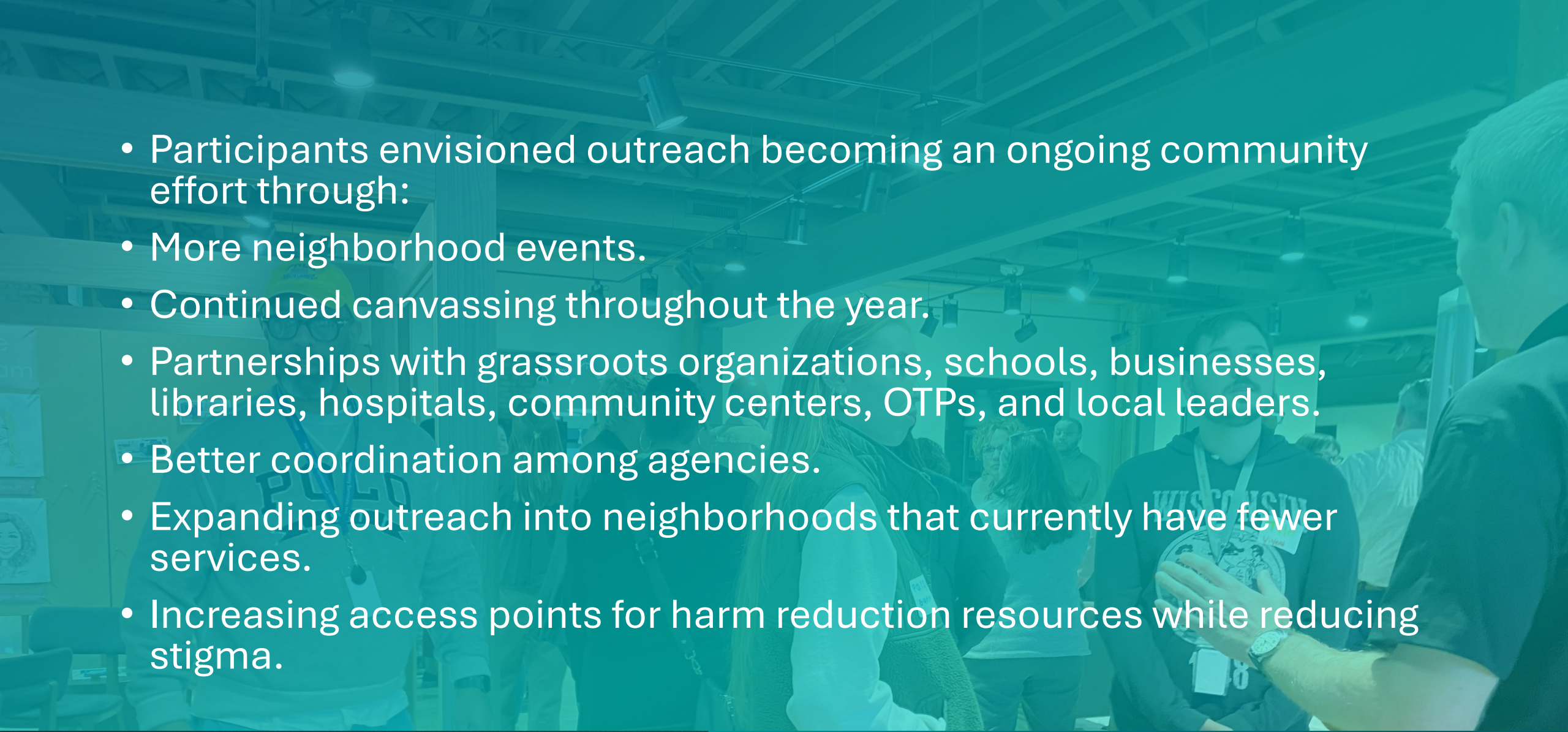
- Participants identified several strategies that made outreach more effective:
- Leading with conversation before resources.
- Working in pairs or small teams.
- Offering something tangible while creating space for discussion.
- Introducing yourself and explaining your role.
- Being genuine instead of scripted.
- Meeting people where they already gather.
- Many participants also emphasized that simply showing up consistently builds credibility over time.

LET'S TALK

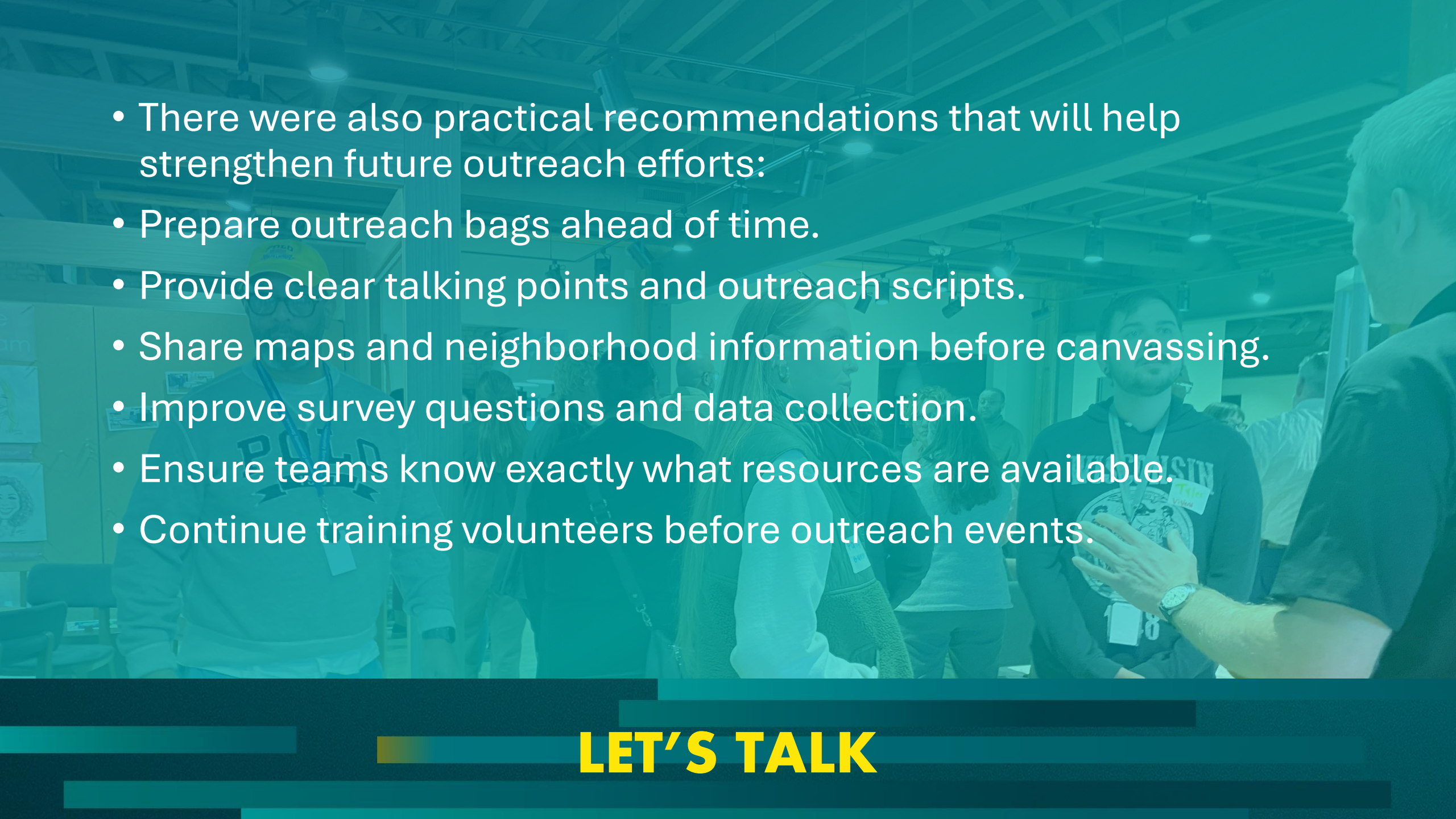
Relationships Matter More Than Resources Alone

- One of the most consistent themes throughout the reflections was that how we approached people mattered more than what we carried.
- Participants found success when they:
 - Introducing themselves first.
 - Had genuine conversations instead of following a script.
 - Listened before speaking.
 - Asked residents what they needed.
 - Worked in pairs or small teams.
 - Approached every interaction without judgment.
- Many participants reflected that people were much more willing to engage when they felt respected rather than "targeted."

LET'S TALK

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- Participants envisioned outreach becoming an ongoing community effort through:
 - More neighborhood events.
 - Continued canvassing throughout the year.
 - Partnerships with grassroots organizations, schools, businesses, libraries, hospitals, community centers, OTPs, and local leaders.
 - Better coordination among agencies.
 - Expanding outreach into neighborhoods that currently have fewer services.
 - Increasing access points for harm reduction resources while reducing stigma.

LET'S TALK

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- There were also practical recommendations that will help strengthen future outreach efforts:
 - Prepare outreach bags ahead of time.
 - Provide clear talking points and outreach scripts.
 - Share maps and neighborhood information before canvassing.
 - Improve survey questions and data collection.
 - Ensure teams know exactly what resources are available.
 - Continue training volunteers before outreach events.

LET'S TALK

THIS SUMMIT WILL FOCUS ON:

Unified Data Collection: Develop a county-wide harm reduction data alignment strategy that informs multi-municipality collaboration.

Policy Advocacy: Engage in open discussion and advocacy for reform on paraphernalia laws and collaborate with county officials.

Digital Hub: Establish a multimedia platform with an event calendar and easier communication methods (outside of email & summit).

DATA & LOGISTICS FOUNDATION



Charlie Bowen
Legal Action



Bonnie MacRitchie
Wisconsin Dept of
Corrections



Jonathan Belott
Milwaukee Fire Dept.



Connie Kostelec
Medical College of WI

HR MKE PANELISTS



Charlie Bowen is a staff attorney with Legal Action of Wisconsin and the primary attorney for their Overdose Prevention Project (OPP). This project is designed to meet clients where they are at and provide civil legal aid for people who use/d drugs. Entering its third year, OPP has become a robust outreach and advocacy program in Milwaukee and throughout Wisconsin. Charlie spends most of his time either in court or at one of over a dozen monthly outreach locations that vary from street corners to lobbies of treatment clinics. He gets to do this every day and couldn't be happier about it. When Charlie isn't practicing law, he enjoys spending time with his wife and three kids, halfheartedly exercising, and caring way too much about Milwaukee Bucks basketball.

Charlie Bowen- Legal Action



Bonnie MacRitchie is the Opioid Initiatives Director for the Wisconsin Department of Corrections with over 22 years' experience improving systems and developing stakeholder relationships in state and local government, the justice system, and non-profit organizations across the state of Wisconsin. Bonnie has been working with a team to increase access to Medications for Opioid Use Disorder (MOUD) for individuals incarcerated in DOC facilities and recovery support resources for clients under the supervision of the Division of Community Corrections.

Bonnie MacRitchie- Wisconsin Department of Corrections



Jonathan Belott is the Mobile Integrated Healthcare (MIH) Program Manager and Lieutenant with the Milwaukee Fire Department. Lieutenant Belott was appointed to the MFD as a firefighter in October 2011 before promoting to Heavy Equipment Operator and obtaining his Paramedic certification in September 2014, becoming a Community Paramedic in 2017. The MFD reopened a decommissioned firehouse to staff and house the expanding MIH team in 2019. Within months of arriving there, Lt Belott was tasked with developing the new Milwaukee Overdose Response Initiative (MORI) and became the first MORI Supervisor. He was promoted to Lieutenant in February 2020 and became the MIH-Supervisor later that year. He became the MIH Manager in June 2024, overseeing a team of over 100 members.

Jonathan Belott- Milwaukee Fire Dept



Constance Kostelac, PhD, MS is an assistant professor with the Institute for Health & Humanity, Division of Health Policy, Economics, and Data Analytics at the Medical College of Wisconsin (MCW) and Director of the Division of Data Analytics and Informatics for the Comprehensive Injury Center (CIC). Her current work focuses on preventing and reducing the impact of violence, substance use, and overdose on health outcomes through implementation, research, and evaluation activities with an emphasis on community engagement. Dr. Kostelac also has an emphasis on data sharing across sectors to support prevention and intervention activities, including leading the efforts of Data Share.

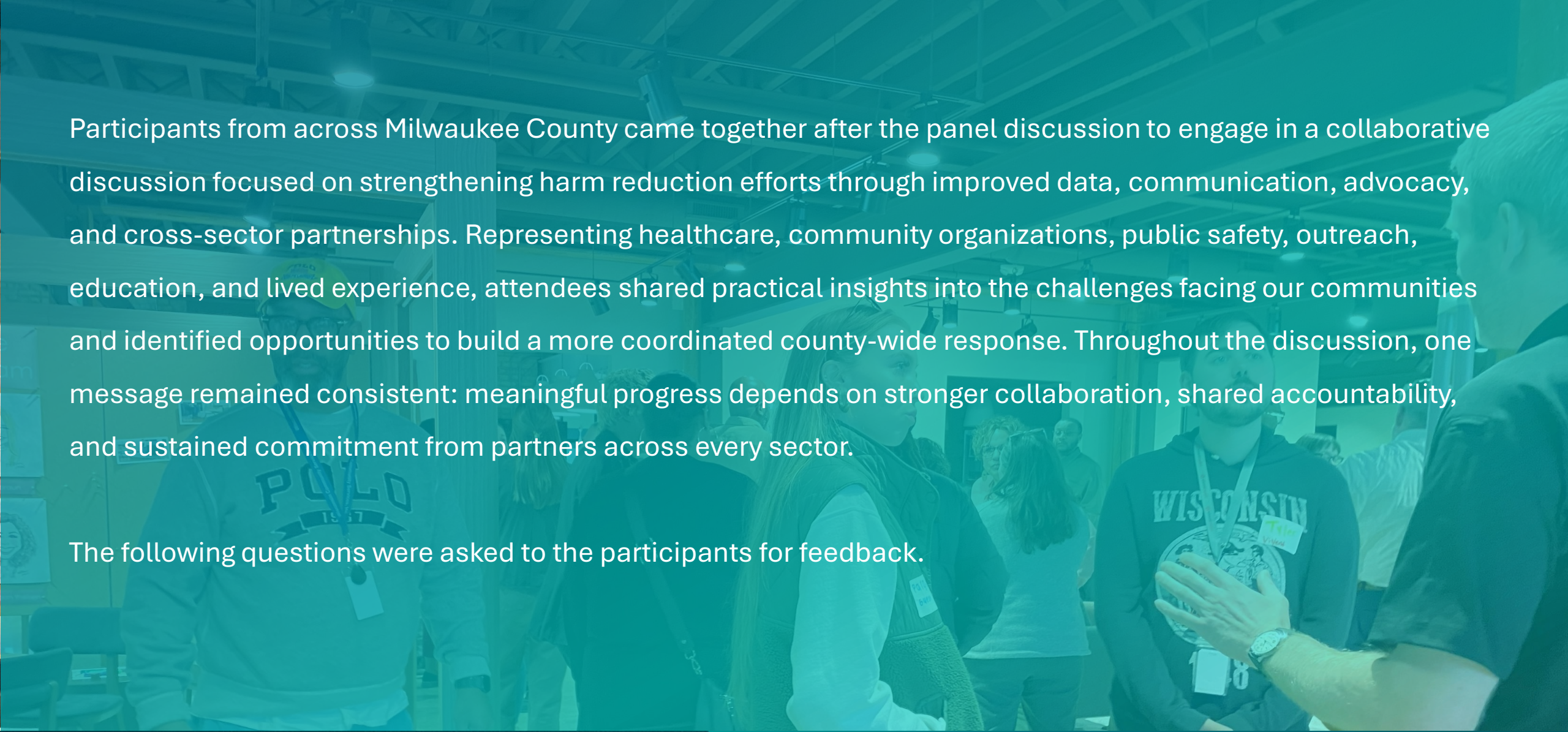
Constance Kostelac –Medical College of Wisconsin

Unified Data Collection: Develop a county-wide harm reduction data alignment strategy that informs multi-municipality collaboration.

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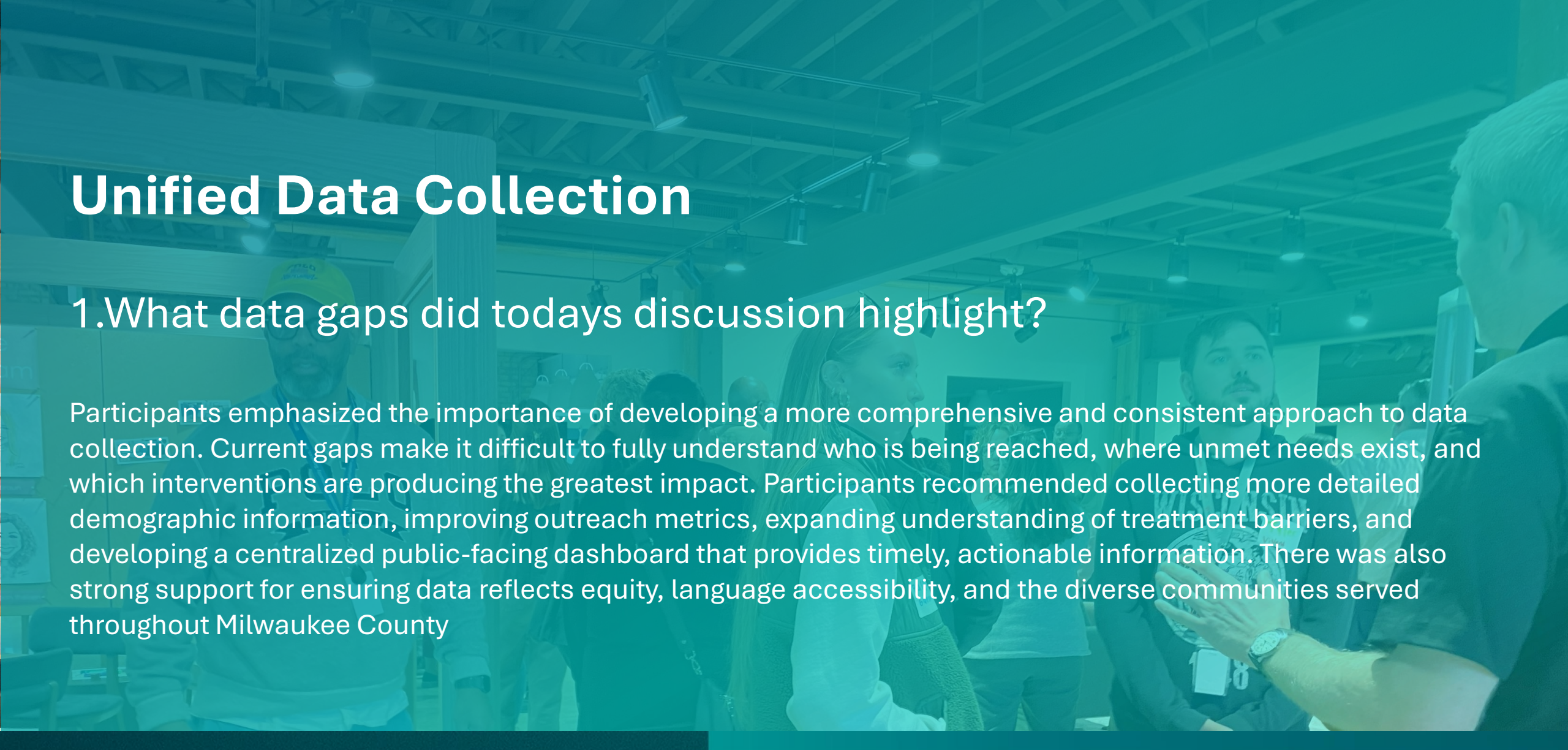
HR MKE PANELIST REFLECTION



Participants from across Milwaukee County came together after the panel discussion to engage in a collaborative discussion focused on strengthening harm reduction efforts through improved data, communication, advocacy, and cross-sector partnerships. Representing healthcare, community organizations, public safety, outreach, education, and lived experience, attendees shared practical insights into the challenges facing our communities and identified opportunities to build a more coordinated county-wide response. Throughout the discussion, one message remained consistent: meaningful progress depends on stronger collaboration, shared accountability, and sustained commitment from partners across every sector.

The following questions were asked to the participants for feedback.

PANEL REFLECTION DISCUSSION

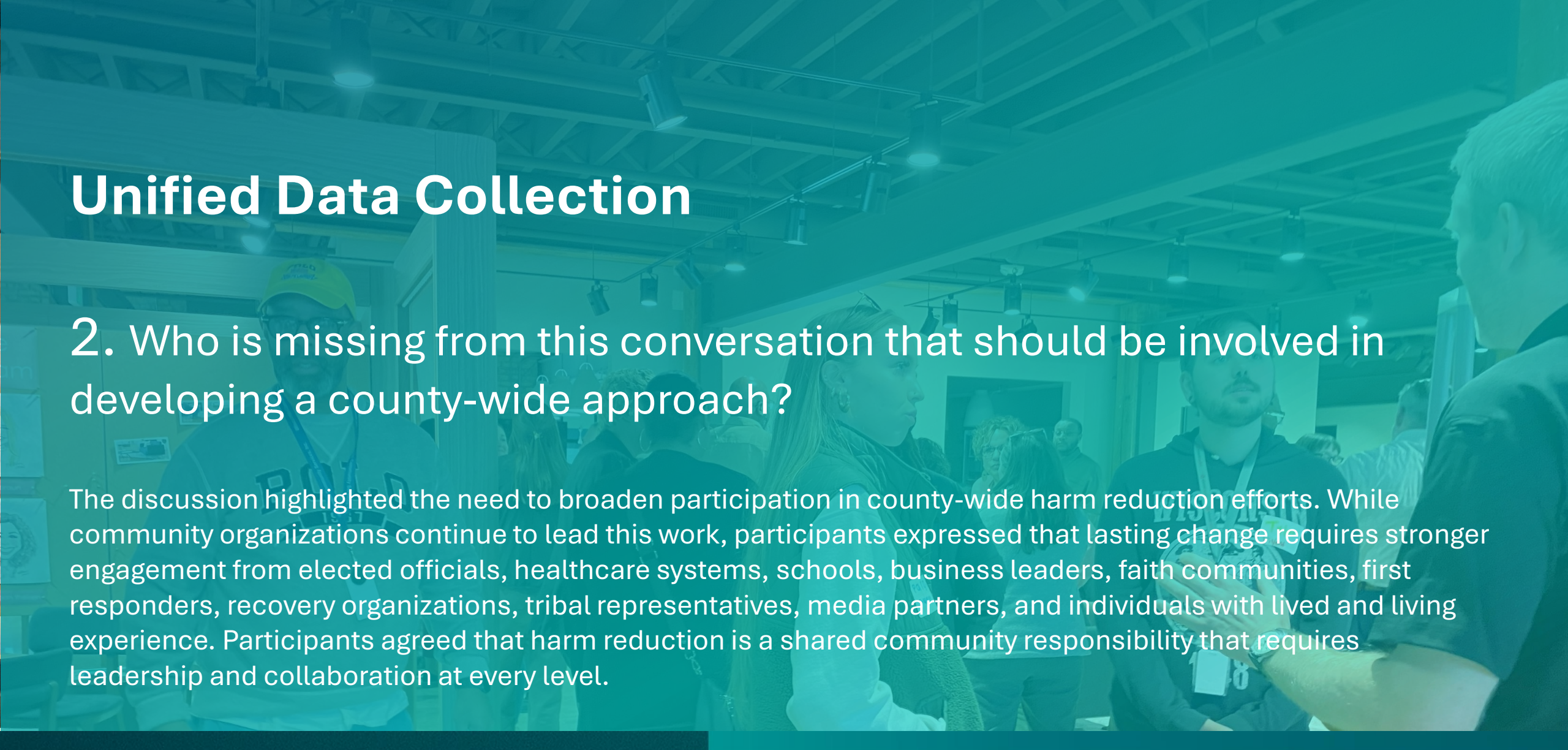


Unified Data Collection

1. What data gaps did today's discussion highlight?

Participants emphasized the importance of developing a more comprehensive and consistent approach to data collection. Current gaps make it difficult to fully understand who is being reached, where unmet needs exist, and which interventions are producing the greatest impact. Participants recommended collecting more detailed demographic information, improving outreach metrics, expanding understanding of treatment barriers, and developing a centralized public-facing dashboard that provides timely, actionable information. There was also strong support for ensuring data reflects equity, language accessibility, and the diverse communities served throughout Milwaukee County.

PANEL REFLECTION DISCUSSION

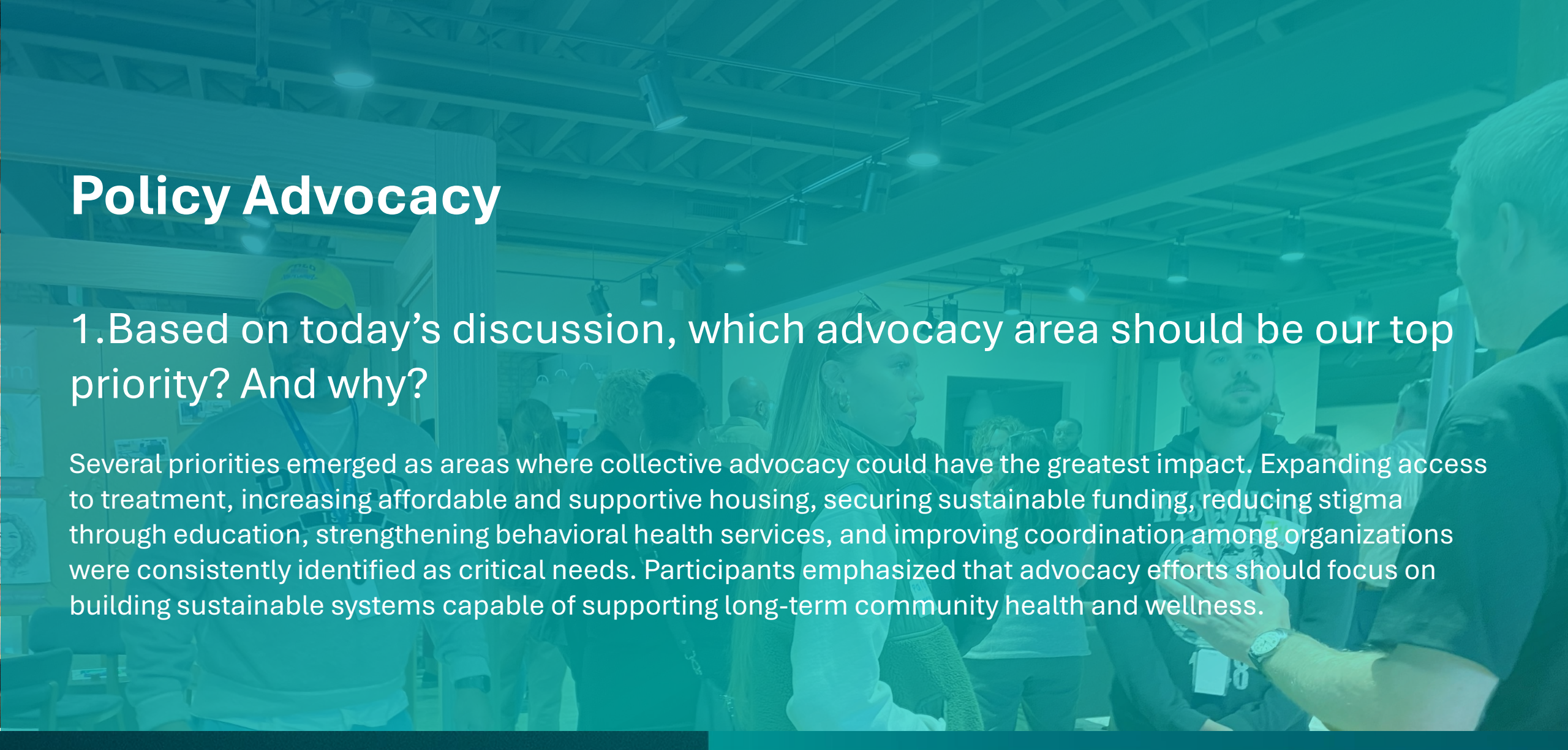


Unified Data Collection

2. Who is missing from this conversation that should be involved in developing a county-wide approach?

The discussion highlighted the need to broaden participation in county-wide harm reduction efforts. While community organizations continue to lead this work, participants expressed that lasting change requires stronger engagement from elected officials, healthcare systems, schools, business leaders, faith communities, first responders, recovery organizations, tribal representatives, media partners, and individuals with lived and living experience. Participants agreed that harm reduction is a shared community responsibility that requires leadership and collaboration at every level.

PANEL REFLECTION DISCUSSION



Policy Advocacy

1. Based on today's discussion, which advocacy area should be our top priority? And why?

Several priorities emerged as areas where collective advocacy could have the greatest impact. Expanding access to treatment, increasing affordable and supportive housing, securing sustainable funding, reducing stigma through education, strengthening behavioral health services, and improving coordination among organizations were consistently identified as critical needs. Participants emphasized that advocacy efforts should focus on building sustainable systems capable of supporting long-term community health and wellness.

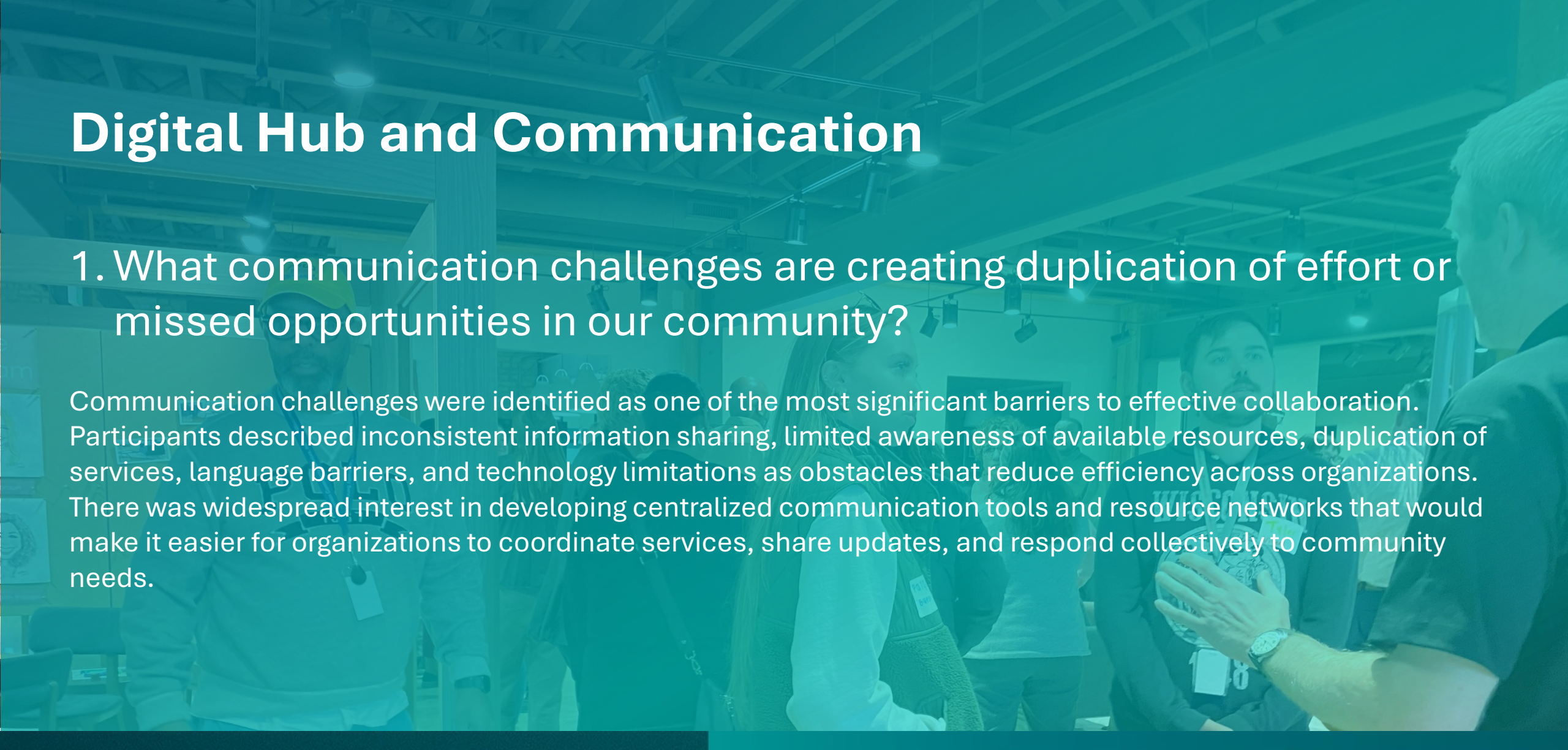
PANEL REFLECTION DISCUSSION

Policy Advocacy

2. What role should our organizations play in educating elected officials and community leaders?

Participants expressed a strong desire to strengthen relationships with elected officials by providing meaningful opportunities to understand the realities facing communities. Recommendations included inviting policymakers to outreach events and future summits, sharing outcome data alongside personal stories, hosting educational workshops and listening sessions, and developing practical policy recommendations informed by frontline experience. These efforts were viewed as essential to creating informed decision-making and stronger public support for harm reduction initiatives.

PANEL REFLECTION DISCUSSION

The background of the slide is a photograph of a community event, possibly a fair or festival, with a teal color overlay. In the foreground, a man in a white shirt and a woman in a white shirt are looking towards the right. In the background, other people are visible, including a man in a blue shirt and a woman in a white shirt. The scene is outdoors with a wooden structure in the background.

Digital Hub and Communication

1. What communication challenges are creating duplication of effort or missed opportunities in our community?

Communication challenges were identified as one of the most significant barriers to effective collaboration. Participants described inconsistent information sharing, limited awareness of available resources, duplication of services, language barriers, and technology limitations as obstacles that reduce efficiency across organizations. There was widespread interest in developing centralized communication tools and resource networks that would make it easier for organizations to coordinate services, share updates, and respond collectively to community needs.

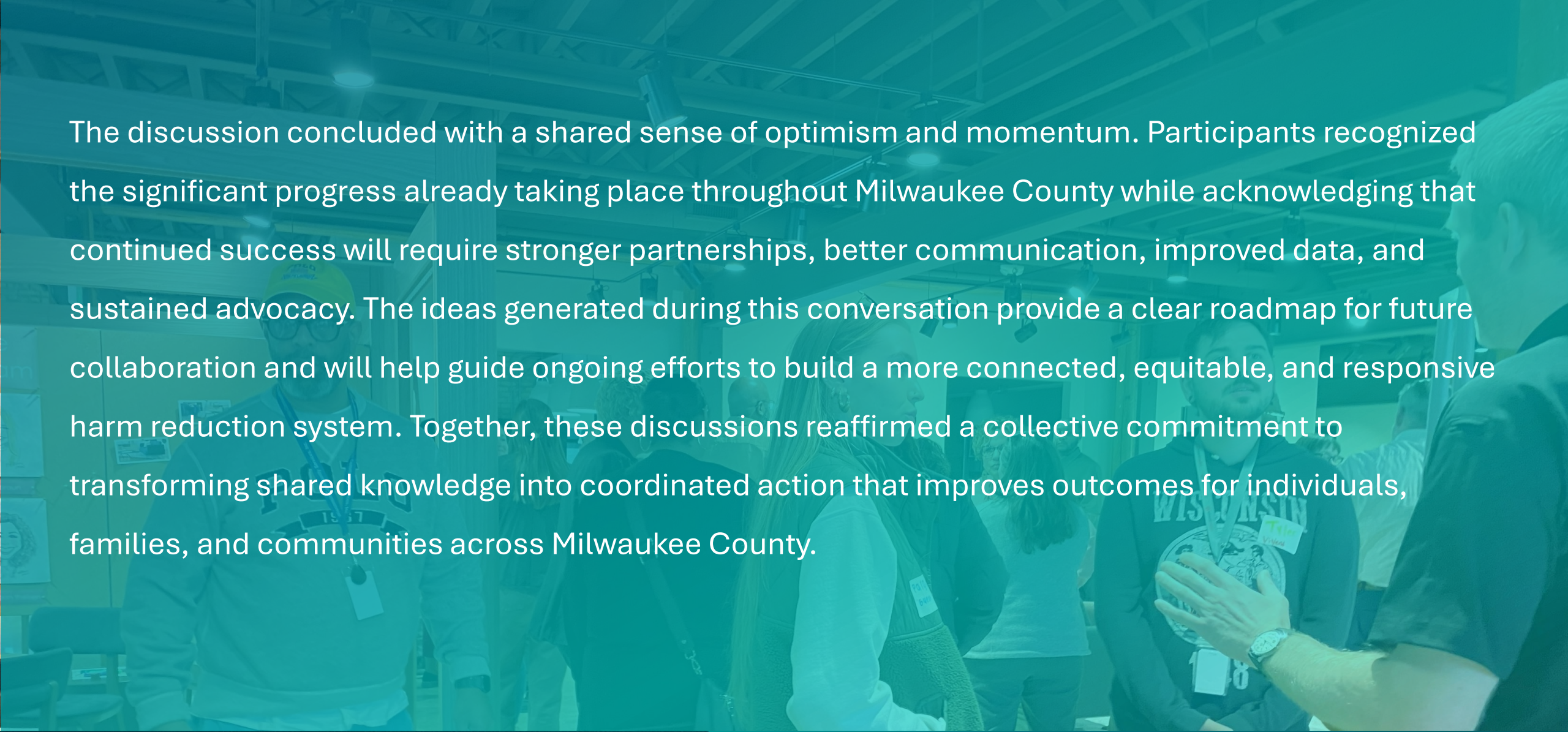
PANEL REFLECTION DISCUSSION

Digital Hub and Communication

2. What information do you regularly need from other organizations that is currently difficult to find?

Organizations expressed the need for easier access to current information regarding available services, eligibility requirements, housing resources, treatment options, funding opportunities, community events, and organizational contacts. Participants envisioned a centralized digital hub that would provide real-time updates and improve coordination between agencies, ultimately allowing organizations to connect individuals with services more quickly and effectively.

PANEL REFLECTION DISCUSSION



The discussion concluded with a shared sense of optimism and momentum. Participants recognized the significant progress already taking place throughout Milwaukee County while acknowledging that continued success will require stronger partnerships, better communication, improved data, and sustained advocacy. The ideas generated during this conversation provide a clear roadmap for future collaboration and will help guide ongoing efforts to build a more connected, equitable, and responsive harm reduction system. Together, these discussions reaffirmed a collective commitment to transforming shared knowledge into coordinated action that improves outcomes for individuals, families, and communities across Milwaukee County.

PANEL REFLECTION DISCUSSION

Harm Reduction Summit #2 Event
Feedback



COMPLETE THE SURVEY



**MILWAUKEE
COUNTY**