RECOVERY ALLIANCE INITIATIVE

Glossary of Terms: Substance Use Disorder & Cross-Sector

A Working Reference Across RAI's North Carolina Partner Network

July 2026

Purpose of This Guide

Recovery Alliance Initiative (RAI) works as a backbone organization across a wide, multi-sector continuum spanning prevention, harm reduction, treatment, criminal justice, healthcare, housing, and recovery support. Each sector brings its own professional vocabulary, acronyms, and shorthand. This glossary is intended as a living, dual-purpose reference — useful both for RAI staff onboarding and cross-sector coordination, and for external partners and funders who need a shared vocabulary across the nine-county Eastern Carolina Continuum (ECC) region.

This is a first-pass draft covering 14 professional sectors RAI regularly engages. Terms are organized by the sector where they most commonly originate, though many terms (e.g., MOUD, NCCARE360, Recovery Capital) are used across multiple sectors — cross-references and a consolidated index are recommended as next steps. Feedback from Tom, Lara, Heather, Dean, and Lizzy on sector coverage, missing terms, and regional/local usage is welcome before this becomes a distributed or published resource.

Sectors Covered

1. Prevention & Public Health
2. Harm Reduction & Risk Mitigation
3. Treatment & Clinical / Behavioral Health
4. Recovery Support Services & Peer Support (RCOs)
5. Criminal Justice, Courts & Law Enforcement
6. Healthcare, Hospital Systems & EMS
7. Behavioral Health Managed Care, Medicaid & Payers
8. Housing & Homeless Services
9. Child Welfare & Family Services
10. Education (K–12 & Higher Education / Collegiate Recovery)
11. Employment & Workforce Development
12. Faith-Based & Grassroots / Community Organizations
13. Government, Policy & Funding
14. Data, Health IT & Care Coordination

Check out an additional resource from the Recovery Research Institute: ***Addictionary® – Recovery Research Institute***

If you have any suggestions or additions to this guide please contact us via our online form! https://recoveryall.org/contact-us/

1. Prevention & Public Health

School-based, community, and environmental prevention professionals; county/regional public health departments

SPF	Strategic Prevention Framework (SAMHSA's 5-step planning model: assessment, capacity, planning, implementation, evaluation).
SPF-Rx	SPF adaptation focused specifically on prescription drug misuse prevention.
Primary/Secondary/Tertiary Prevention	Prevention aimed at the general population before use begins (primary), at-risk groups showing early signs (secondary), or reducing harm/relapse after a problem exists (tertiary).
Universal / Selective / Indicated Prevention	IOM classification by risk level: universal (whole population), selective (higher-risk subgroups), indicated (individuals already showing early signs).
Environmental Strategies	Prevention approaches that change community conditions (policy, access, norms) rather than targeting individuals directly.
Protective Factors / Risk Factors	Conditions that buffer against (protective) or increase likelihood of (risk) substance misuse, drawn from the Risk & Protective Factor framework.
Social Determinants of Health (SDOH)	Non-medical conditions (housing, income, education, transportation) that shape health outcomes, including SUD risk.
DFC	Drug-Free Communities Support Program, a federal grant funding local youth substance use prevention coalitions.
CADCA	Community Anti-Drug Coalitions of America, a national prevention coalition training/membership organization.
PFS	Partnerships for Success, a SAMHSA prevention grant mechanism.
Logic Model	A visual tool linking prevention resources, activities, outputs, and outcomes used in grant reporting.
Coalition Capacity	A community coalition's readiness and infrastructure to plan and sustain prevention work.

2. Harm Reduction & Risk Mitigation

Syringe services programs, overdose prevention, and low-barrier outreach organizations

SSP	Syringe Services Program, providing sterile supplies, disposal, and linkage to care to reduce disease transmission.
NEP	Needle Exchange Program (often used interchangeably with SSP).
OEND	Overdose Education and Naloxone Distribution.
Naloxone / Narcan	An opioid antagonist medication that reverses opioid overdose.
Fentanyl Test Strips (FTS)	Low-cost strips allowing people to test drugs for fentanyl contamination before use.

Xylazine ("Tranq")	A veterinary sedative increasingly found mixed into the illicit opioid supply, associated with severe wounds and naloxone-resistant sedation.
Good Samaritan Law	Legal protection from certain drug-related charges for people who seek help during an overdose.
Low-Barrier / Housing First	Service models that remove preconditions (e.g., abstinence) to access care or housing.
MOUD	Medications for Opioid Use Disorder (buprenorphine, methadone, naltrexone) — bridges harm reduction and treatment.
Overdose Fatality Review (OFR) Team	A multidisciplinary local team that reviews overdose deaths to identify systemic prevention opportunities.
Drug Checking / Spectrometry Services	Point-of-care or lab-based analysis of drug supply composition, sometimes via mail-in programs.
Harm Reduction Vending Machine	Automated dispensing of naloxone, FTS, and hygiene supplies in low-barrier public locations.

3. Treatment & Clinical / Behavioral Health

Licensed SUD treatment providers, clinicians, and behavioral health agencies

SUD	Substance Use Disorder — the clinical (DSM-5-TR) diagnostic term.
SAMHSA	Substance Abuse and Mental Health Services Administration, the federal agency overseeing behavioral health programs.
ASAM Criteria	The American Society of Addiction Medicine's standardized levels of care (e.g., Level 1 outpatient through Level 4 medically managed intensive inpatient) used to match patients to treatment intensity.
MAT / MOUD	Medication-Assisted Treatment / Medications for Opioid Use Disorder — FDA-approved medications combined with counseling and behavioral therapies.
OTP	Opioid Treatment Program, a federally regulated clinic authorized to dispense methadone.
OBOT	Office-Based Opioid Treatment, typically buprenorphine prescribing in a primary care or outpatient setting.
IOP / PHP	Intensive Outpatient Program / Partial Hospitalization Program — step-down levels of structured treatment.
Co-Occurring Disorder (COD) / Dual Diagnosis	Simultaneous presence of a mental health condition and a substance use disorder.
LCAS	Licensed Clinical Addiction Specialist, an NC clinical licensure for SUD treatment providers.
CADC / CSAC	Certified/Credentialed Alcohol and Drug Counselor titles (credentialing varies by state board).
Detox / Withdrawal Management	Medically supervised management of acute withdrawal symptoms, typically the first step before ongoing treatment.
Warm Handoff	A supported, direct transfer of a patient between providers/levels of care (e.g., ED to treatment) to reduce drop-off.

SBIRT	Screening, Brief Intervention, and Referral to Treatment — a clinical model for early identification of risky substance use.

4. Recovery Support Services & Peer Support (RCOs)

Recovery community organizations, peer support specialists, and recovery residences

RCO	Recovery Community Organization — a peer-run/peer-governed nonprofit providing recovery support services (RAI's core partner type).
RCC	Recovery Community Center, a physical peer-support drop-in space operated by an RCO.
CPSS / PSS	Certified Peer Support Specialist — an individual with lived recovery experience credentialed to provide peer services.
Recovery Capital	The internal and external resources (personal, social, community) an individual can draw on to initiate and sustain recovery (Granfield & Cloud framework).
ROSC	Recovery-Oriented System of Care — a coordinated network of community services organized to support long-term recovery.
Recovery Residence / Sober Living	Peer-supported, substance-free housing for individuals in recovery, often NARR-certified.
NARR	National Alliance for Recovery Residences, the body that sets recovery residence certification standards.
Recovery Coach	A peer professional who provides non-clinical guidance and support across the stages of recovery.
Pathways to Recovery	Language reflecting that recovery can occur via multiple routes (clinical treatment, mutual aid, natural recovery, faith-based, etc.).
Mutual Aid / 12-Step / SMART Recovery	Peer-led support group models (e.g., AA/NA, SMART Recovery, Celebrate Recovery) distinct from clinical treatment.
Recovery Capital Assessment (e.g., ARC/REC-CAP)	Structured tools used to measure an individual's recovery capital over time.
Whole Person Recovery	A framework addressing housing, employment, health, and relationships alongside abstinence/reduction goals.

5. Criminal Justice, Courts & Law Enforcement

Law enforcement, jails/prisons, court systems, probation/parole, and reentry programs

LEAD	Law Enforcement Assisted Diversion — a pre-booking diversion model connecting people to services instead of arrest.
Drug Court / Recovery Court	A specialized court docket offering treatment and supervision as an alternative to incarceration.
MAT in Corrections / Jail-Based MOUD	Provision of medications for opioid use disorder to incarcerated individuals, increasingly required by law/policy.

Reentry	Services and planning supporting an individual's transition from incarceration back into the community.
Diversion Program	Any process that redirects individuals from prosecution/incarceration toward treatment or services.
Probation/Parole Officer (PPO)	Community supervision officer who may refer clients to SUD/recovery services as a condition of supervision.
Post-Release Supervision	Structured supervision period following release from incarceration in NC.
Quick Response Team (QRT)	A multidisciplinary team (often law enforcement, EMS, peer support) that follows up with overdose survivors shortly after an event.
Naloxone Leave-Behind Program	Law enforcement or EMS practice of leaving naloxone kits at overdose scenes.
Collateral Consequences	Legal/social penalties (housing, employment, licensing barriers) that persist after a criminal conviction, often affecting people with SUD histories.
Certificate of Relief	NC legal mechanism reducing certain collateral consequences of a conviction for eligible individuals.

6. Healthcare, Hospital Systems & EMS

Hospitals, emergency departments, primary care, and emergency medical services

ED / ER	Emergency Department — a frequent first point of contact after overdose, often a target for warm-handoff protocols.
EMS	Emergency Medical Services — pre-hospital responders, often first to administer naloxone and identify overdose trends.
FQHC	Federally Qualified Health Center — community-based primary care clinics, many of which provide integrated SUD/behavioral health services.
Integrated Care / Behavioral Health Integration (BHI)	Model co-locating or coordinating behavioral health and primary medical care.
Peer Support in the ED	Placement of certified peer support specialists in emergency departments to engage overdose survivors.
EMResource / Syndromic Surveillance	Real-time data systems used by hospitals/public health to track overdose spikes.
ODMAP	Overdose Detection Mapping Application Program — near real-time overdose surveillance tool used by EMS/public health/law enforcement.
CDS / Controlled Substance	Drug categories regulated under the Controlled Substances Act, relevant to prescribing practices (e.g., opioids, benzodiazepines).
PDMP	Prescription Drug Monitoring Program (in NC, the NC Controlled Substances Reporting System) — a database tracking controlled substance prescriptions.
Discharge Planning	Hospital process for coordinating a patient's post-discharge care, a key linkage point to recovery/treatment services.
Telehealth / Telebehavioral Health	Remote delivery of SUD treatment or counseling services, especially relevant in rural ECC counties.

7. Behavioral Health Managed Care, Medicaid & Payers

LME-MCOs, NC Medicaid, and insurance/payer stakeholders

LME-MCO	Local Management Entity/Managed Care Organization — the NC entities (e.g., Trillium Health Resources) that manage Medicaid behavioral health/IDD/SUD benefits regionally.
NC Medicaid Direct vs. Managed Care	NC's dual system: fee-for-service Medicaid Direct alongside capitated Medicaid Managed Care (Standard Plans, Tailored Plans).
Tailored Plan	NC Medicaid managed care plan designed for individuals with significant behavioral health, IDD, or SUD needs.
HOP	Healthy Opportunities Pilots — NC Medicaid 1115 waiver program addressing non-medical drivers of health (housing, food, transportation); RAI has tracked HOP suspension implications.
1115 Waiver	Federal Medicaid demonstration waiver authority NC uses for HOP and other innovations.
Fee-for-Service (FFS) vs. Capitation	Payment models: per-service billing vs. a fixed per-member payment regardless of services used.
Credentialing / Enrollment	The process by which a provider or organization becomes authorized to bill Medicaid/insurance.
Value-Based Payment (VBP)	Reimbursement models tying payment to outcomes rather than service volume.
Billable Peer Support	Medicaid reimbursement pathways allowing certified peer support specialists' services to be billed (a topic in RAI's RCO billing pathway analysis).
Prior Authorization (PA)	Payer requirement that certain services/medications be pre-approved before delivery or reimbursement.
NCCARE360	NC's statewide coordinated care network/closed-loop referral platform connecting health and human services organizations — a frequent reference point alongside RAI's ENCRID concept.

8. Housing & Homeless Services

Continuum of Care agencies, shelters, and housing support organizations

CoC	Continuum of Care — the local/regional planning body coordinating HUD-funded homelessness services.
HMIS	Homeless Management Information System — the data system CoCs use to track housing/homelessness services.
Housing First	An approach prioritizing rapid placement into permanent housing without preconditions like sobriety, paired with supportive services.

PSH	Permanent Supportive Housing — long-term subsidized housing paired with services for people with disabilities, including SUD.
RRH	Rapid Re-Housing — short/medium-term rental assistance and services to quickly resolve homelessness.
Recovery Housing	Substance-free transitional or permanent housing supporting individuals in recovery (distinct from clinical treatment).
Coordinated Entry	A standardized, community-wide process for assessing and prioritizing people experiencing homelessness for housing resources.
Chronic Homelessness	A HUD-defined status (long-term or repeated homelessness combined with a disabling condition) prioritized in housing resource allocation.
PIT Count	Point-in-Time Count — the annual federally mandated count of people experiencing homelessness.
Eviction Diversion	Programs/legal assistance aimed at preventing eviction before it results in housing loss.

9. Child Welfare & Family Services

County Departments of Social Services, family courts, and child/family-serving agencies

DSS	Department of Social Services — the county-level agency administering child welfare, Medicaid eligibility, and public assistance in NC.
CPS	Child Protective Services — the DSS function investigating child abuse/neglect, including cases involving parental substance use.
Plan of Safe Care	A federally required (CAPTA) plan for infants affected by prenatal substance exposure and their families.
NAS / NOWS	Neonatal Abstinence Syndrome / Neonatal Opioid Withdrawal Syndrome — withdrawal symptoms in newborns exposed to substances prenatally.
Family Treatment Court	A specialized court integrating SUD treatment with child welfare case oversight to support family reunification.
Kinship Care	Placement of children with relatives or close family friends when parents cannot safely care for them.
Family Preservation Services	In-home services aimed at keeping families safely together and avoiding removal.
ACEs	Adverse Childhood Experiences — a research framework linking childhood trauma exposure (including household substance misuse) to later health/behavioral outcomes.
Reunification	The child welfare goal/process of safely returning a child to their parent(s) after removal.
TANF	Temporary Assistance for Needy Families — a federal/state cash assistance program often intersecting with family SUD case management.

10. Education (K–12 & Higher Education / Collegiate Recovery)

School systems, student assistance programs, and college/university student wellness offices

SAP	Student Assistance Program — school-based early identification/intervention services for students with substance use or related concerns.
DFSCA	Drug-Free Schools and Communities Act — federal law requiring IHEs and school districts to maintain drug/alcohol prevention programs and biennial reviews.
Biennial Review	The DFSCA-mandated two-year evaluation of a college's alcohol/drug prevention program effectiveness.
CRP / CRC	Collegiate Recovery Program / Collegiate Recovery Community — campus-based support structures for students in recovery.
ARHE	Association of Recovery in Higher Education — the national collegiate recovery membership/standards organization.
Recovery-Friendly Campus	A designation/framework indicating a campus has adopted policies and supports for students in or seeking recovery.
Amnesty / Medical Amnesty Policy	Campus policy waiving certain conduct penalties for students who seek help during an alcohol/drug emergency.
Title IX / Student Conduct Office	Campus offices whose processes sometimes intersect with substance-related incidents.
SACSCOC	Southern Association of Colleges and Schools Commission on Colleges — the regional accreditor whose compliance standards (e.g., CR 12.1) can require documented substance use prevention programming.
Core Alcohol and Drug Survey / Healthy Minds Study	Common national survey instruments campuses use for substance use prevalence data.

11. Employment & Workforce Development

Workforce boards, vocational rehabilitation, and employer partners

NCWorks	North Carolina's public workforce development system connecting job seekers (including those in recovery) to employment services.
VR / Vocational Rehabilitation	Now titled: Division of *Employment and Independence for People with Disabilities,* EIPD for short. See entry below.
Division of Employment and Independence for People with Disabilities (EIPD)	State services assisting individuals with disabilities, including SUD-related impairments, in obtaining additional education/professional development to aid in finding and maintaining employment.
Second Chance Hiring	Employer practices/policies intentionally hiring individuals with criminal records or histories of substance use.
Individual Placement and Support (IPS)	An evidence-based supported employment model adaptable for individuals in behavioral health recovery.
Recovery-Friendly Workplace	An employer designation/initiative (modeled on programs in other states) supporting employees in or seeking recovery.

WIOA	Workforce Innovation and Opportunity Act — the federal law funding much of the public workforce system.
Ban the Box	Policies delaying criminal history questions until later in hiring to reduce barriers for justice-involved applicants.
On-the-Job Training (OJT)	Employer-based training subsidized through workforce programs, sometimes used as a reentry/recovery employment pathway.

12. Faith-Based & Grassroots / Community Organizations

Churches, ministries, and volunteer-led community groups engaged in recovery support

Faith-Based Recovery Ministry	Church- or denomination-affiliated recovery support (e.g., Celebrate Recovery, Overcomers Outreach) integrating spiritual practice with recovery.
Celebrate Recovery	A widely used Christian 12-step-based recovery program model operating out of local churches.
Community Health Worker (CHW)	A trusted, often grassroots-based worker who provides outreach, education, and navigation support, frequently in underserved communities.
Grassroots Coalition	An informal or newly formalizing community group organizing around a local SUD/recovery issue, often a capacity-building focus for backbone organizations like RAI.
Backbone Organization	In Collective Impact methodology, the entity (RAI's own role) that coordinates strategy, data, and communication across a multi-sector initiative.
Collective Impact	A structured cross-sector collaboration framework (common agenda, shared measurement, mutually reinforcing activities, continuous communication, backbone support) underlying RAI's coordination model.
Lived Experience / Lived Expertise	Firsthand experience with substance use and/or recovery, valued as expertise in grassroots and peer-driven organizations.
Volunteer Recovery Support	Informal, non-credentialed community support (transportation, mentoring, meeting hosting) that supplements formal recovery services.

13. Government, Policy & Funding

Federal and state agencies, legislators, and funder/oversight bodies RAI engages for grants and policy

HRSA	Health Resources and Services Administration — federal agency funding programs including RCORP (Rural Communities Opioid Response Program).
RCORP	Rural Communities Opioid Response Program — HRSA's grant initiative funding rural SUD prevention/treatment/recovery infrastructure, the source of RAI's current subcontract with ECU.
NOFO	Notice of Funding Opportunity — the federal grant solicitation document (e.g., HRSA-26-037).
De Minimis Indirect Cost Rate	The standard 15% indirect cost rate nonprofits may claim on federal awards without a negotiated rate agreement.

SAMHSA BCOR	SAMHSA's Building Communities of Recovery grant program funding RCO capacity-building (e.g., TI-26-010).
NC DHHS / DMHDDSUS	NC Department of Health and Human Services / Division of Mental Health, Developmental Disabilities, and Substance Use Services — the primary state behavioral health agency and block grant administrator.
Block Grant (SABG)	Substance Abuse Prevention and Treatment Block Grant — the core federal-to-state formula funding stream for SUD services.
Opioid Settlement Funds	State and county funds from national opioid litigation settlements, allocated to abatement activities including prevention, treatment, and recovery support.
SAM.gov / Grants.gov / eRA Commons	Federal registration systems organizations must maintain to apply for and receive federal grants.
Scope of Work (SOW)	The contractual document defining deliverables, activities, and performance measures under a state or federal grant/contract.
Indirect Cost Rate Agreement (NICRA)	A negotiated rate agreement allowing an organization to claim indirect costs above the de minimis rate.

14. Data, Health IT & Care Coordination

Health information exchange, referral platforms, and data/evaluation partners

NCCARE360	NC's statewide closed-loop referral platform connecting health and human services providers (see also Sector 7).
Unite Us	The technology vendor powering the NCCARE360 platform in North Carolina.
HIE	Health Information Exchange — infrastructure enabling secure sharing of patient health data across organizations.
Closed-Loop Referral	A referral process that tracks whether a client actually received the service they were referred to, not just that the referral was made.
42 CFR Part 2	Federal regulation providing heightened confidentiality protections specifically for SUD treatment records, stricter than standard HIPAA.
HIPAA	Health Insurance Portability and Accountability Act — the baseline federal health information privacy law.
Data Sharing Agreement (DSA)/MOU	Formal agreements governing how partner organizations exchange client or program data.
Logic Model / Theory of Change	Evaluation frameworks mapping how program activities are expected to produce outcomes, common in grant reporting.
Community Needs Assessment (CNA)	A structured data-gathering process identifying gaps and priorities across a service region, foundational to RAI's regional planning.
ENCRID	Eastern NC Recovery Intelligence Dashboard — RAI's own proposed data layer concept complementing NCCARE360 with regional recovery-focused metrics.

County-Specific Reference: RAI's Nine-County ECC Footprint

The terms above are largely cross-regional. This appendix captures locally specific organizations, programs, and initiatives identified in each of RAI's nine ECC counties, so RAI staff and partners can recognize local shorthand when it comes up in county-level meetings. All nine counties share Trillium Health Resources as their LME-MCO/Tailored Plan administrator (see Sector 7). This is a snapshot as of mid-2026 compiled from public county and state sources — program names, staff, and contacts turn over, so treat this as a starting point for verification with each county's health department or DSS rather than a final record.

Carteret County

County seat: Morehead City / Beaufort

Carteret County Health Department (CCHD)	County health department; administers the PORT program and harm reduction services.
Post Overdose Response Team (PORT)	CCHD's Certified Peer Support Specialist team that conducts 72-hour outreach after a non-fatal overdose, in partnership with EMS, law enforcement, and the local ED.
Peer Recovery Center of Carteret County	Local peer-run recovery community space in Morehead City; co-hosts community outreach events with PORT.
Carteret CARES	County initiative/webpage branding for coordinated substance use crisis response.
Carolina Wellness Centers – Sea Level (ICGH Treatment Centers)	A 104-bed behavioral health and SUD treatment facility (detox, crisis stabilization, MAT) opened in partnership with the county in 2024.
Consolidated Human Services	Carteret's combined health/social services governance structure, led by a Consolidated Human Services Director.

Craven County

County seat: New Bern

Craven County Health Department	County health department administering harm reduction and opioid-related services.
Craven County Community Collaborative	RAI-supported local collaborative selected as an NCDHHS opioid settlement pilot site, coordinating an estimated $15.6M in settlement funds through 2040.
Coastal Coalition for Substance Abuse Prevention (CCSAP)	Craven-based regional substance use prevention coalition.
PORT Health Services – New Bern	Licensed Opioid Treatment Program (OTP) providing methadone/buprenorphine services; PORT Health also operates sites in Greenville, Washington, and Kinston.

Duplin County

County seat: Kenansville

Duplin County Health Department	County health department; distributes naloxone and coordinates the county Opioid Team.
Duplin Coalition for Health	County health coalition with a dedicated Mental Health & Substance Use work group focused on prevention, recovery, and stigma reduction.
Duplin Substance Use Coalition	County-specific substance use coalition (contact housed at the health department).

Open Door Addiction Center	Local medically assisted treatment provider based in Magnolia.
SEAHEC "Our Community Link"	A web-based resource/referral platform (from South East AHEC) serving Duplin alongside New Hanover, Pender, Brunswick, and Columbus counties.

Greene County

County seat: Snow Hill

Greene County Department of Public Health	County health department in Snow Hill offering harm reduction resources.
Greene County DSS	County Department of Social Services, co-located with the health department.
Reentry Council of Lenoir, Greene & Jones Counties	A tri-county reentry body connecting justice-involved individuals in Greene County to substance use, mental health, and mentorship support.
NC Harm Reduction Coalition (NCHRC) network	Statewide harm reduction organization whose syringe services/mobile exchange network extends into the region including Greene.

Jones County

County seat: Trenton

Jones County Health Department	County health department in Trenton.
Recovery and Re-Entry Support Program	Jones County Health Department program connecting residents to substance use and mental health support alongside reentry services.
Reentry Council of Lenoir, Greene & Jones Counties	Shared tri-county reentry coordination body (see Greene County entry).

Lenoir County

County seat: Kinston

Lenoir County Health Department	County health department in Kinston.
Recovery Together ENC	Regional recovery coalition headquartered in Kinston, active across Lenoir and surrounding counties; media/advocacy partner for local recovery court coverage.
NC Recovery Court (Lenoir) / Family Accountability and Recovery Court	Local specialty docket(s) under the statewide NC Recovery Courts (formerly Drug Treatment Court) framework; Lenoir's recovery court opened in 2023 as an alternative to incarceration.
Reentry Council of Lenoir, Greene & Jones Counties	Shared tri-county reentry coordination body (see Greene County entry).

Onslow County

County seat: Jacksonville

Onslow County Health Department	County health department administering harm reduction and opioid response programs.

Strategic Opioid Advanced Response (SOAR)	A collective-impact team of 30+ community partners coordinating Onslow's opioid response strategy.
Onslow County Quick Response Team (QRT)	Post-overdose follow-up team incorporating peer support specialists, EMS Community Paramedics, and law enforcement.
Jacksonville Dept. of Public Safety – COSSUP Grant	Federal Comprehensive Opioid, Stimulant, and Substance Use Program grant funding a Licensed Clinical Addiction Specialist embedded with Jacksonville police.
MCCS Substance Abuse Program / Marine & Family Programs (Camp Lejeune)	Military-specific substance use and family support services for active-duty Marines and dependents — a sector unique to Onslow within the RAI footprint.
Onslow County Community Paramedics / "Safe Landings"	EMS-based community paramedicine and harm reduction program partnering with the health department.

Pamlico County

County seat: Bayboro

Pamlico County Health Department	County health department in Bayboro.
Pamlico County Human Services Center	Co-located DSS/human services hub in Bayboro.
Pamlico County Disaster Recovery Coalition (PCDRC)	A broader county resource/recovery coalition (originally disaster-focused) that also maintains a substance use and behavioral health resource list.

Wayne County

County seat: Goldsboro

Wayne County Health Department	County health department in Goldsboro; operates a Syringe Support Services harm reduction program.
Wayne County Coalition for Addiction and Life Management (CALM)	501(c)(3) community-based substance use prevention and recovery coalition serving Wayne County.
Wayne County Recovery Coalition	County coalition focused on reducing substance misuse and connecting residents to treatment and recovery resources.
Recovery Together ENC	Regional recovery coalition with Wayne County staff leadership involvement (coordinator based at waynegov.com); also active in Lenoir County (see above).
Wayne County Day Reporting Center (DRC)	A single-point-of-entry court-affiliated program offering substance use counseling, job training, and behavior management for justice-involved residents.