



Overdose Prevention and Naloxone Distribution in Jails

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Lynn Wenger, MPH, MSW
Senior Project Director
RTI International



Becca Rose (Lilly)
Health Hub Coordinator
North Carolina Harm
Reduction Coalition



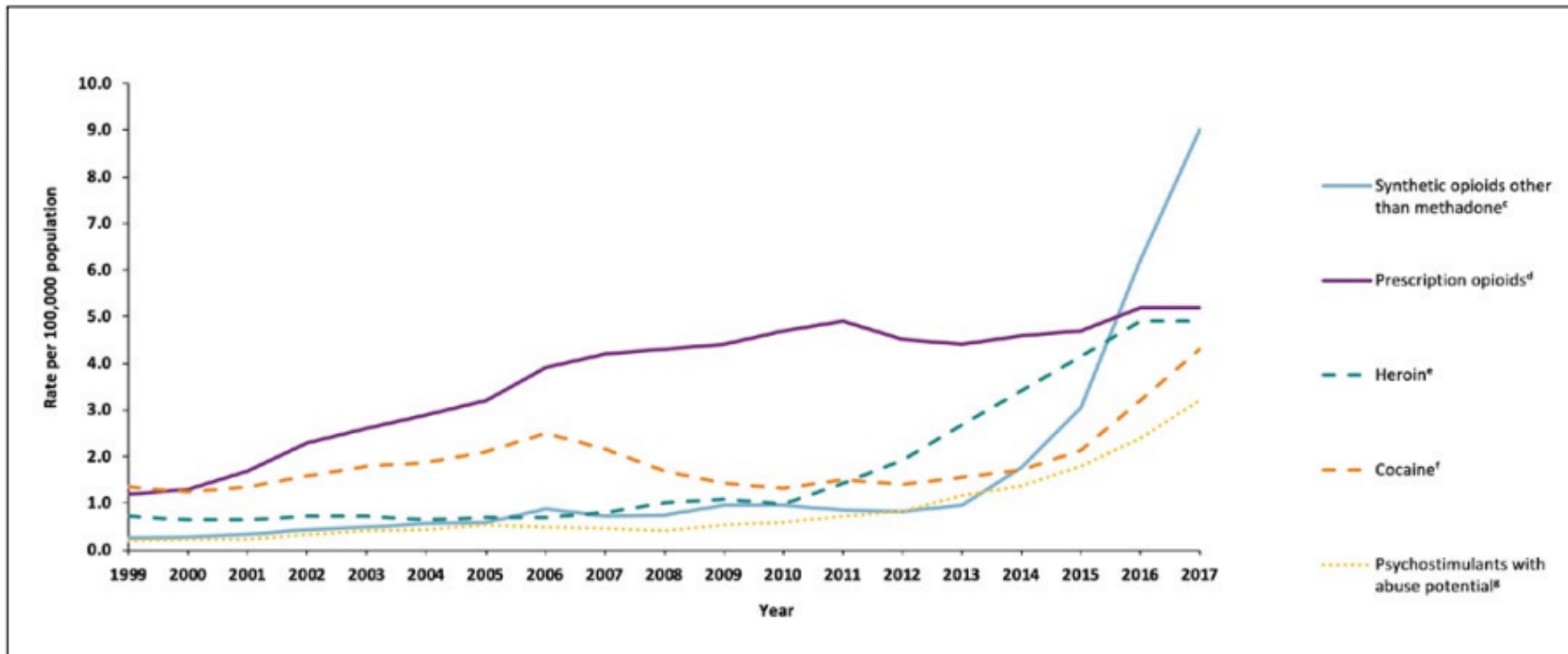
Presentation Overview

- The opioid overdose epidemic in the U.S.
- Naloxone basics
- Peer naloxone distribution
- Risk for opioid overdose post-release
- Barriers to and facilitators of implementation of OEND in jails
- OEND program models in jails



The NEXT Study: An Implementation Science Study of Overdose Prevention Education and Naloxone Distribution in Jails

Opioid Overdose Rates (per 100,000 population) by Drug or Drug Class and Year — United States, 1999–2017



Centers for Disease Control and Prevention (2019). Annual Surveillance Report of Drug-Related Risks and Outcomes—U.S. Surveillance Special Report. U.S. Department of Health and Human Services

Naloxone 101

- Naloxone is an opioid antagonist with no physical side effects except those associated with withdrawal
- When administered, naloxone attaches to the opioid receptors in the brain, kicking opioids off the receptors, reversing an opioid overdose
- Laypeople, including people who use drugs (PWUD) and other community members, have been trained and have been administering naloxone for more than 20 years
- Laws across the U.S. allow naloxone to be distributed under a physician's standing order
- Providers and laypeople have immunity from criminal and civil liability when prescribing, possessing, or administering naloxone

Types of Naloxone



Intramuscular



Intranasal

Peer Naloxone Distribution

- Syringe Service Programs (SSPs) have been providing highly successful HIV and HCV prevention interventions to PWUD since the late 1980's
- Since 1996, SSPs have integrated opioid overdose education and naloxone distribution (OEND) programs into regular service provision (Sporer & Kral, 2007)
- In a 2019 survey, 237 community-based SSPs reported distributing 702,232 doses of naloxone in the preceding 12 months, up from 90 programs distributing 140,053 in calendar year 2013 (Lambdin et al., 2020; Wheeler et al., 2015)
- Studies show that communities with OEND programs have lower fatal overdose rates than communities without OEND programs (Walley et.al., 2013)

Post-release Overdose Risk

- Risks of overdose in the first two weeks post-release are three to eight times higher than in the following ten weeks, and 40 to 129 times higher than in the general population (Binswanger et al., 2007; Merrall et al., 2010; Ranapurwala et al., 2018)
- Many people exiting incarceration witness overdoses, providing opportunities to intervene with naloxone (Davidson et al., 2019; Wenger et al., 2019a).



Why are former inmates at high risk of overdose?

- Abstinence and infrequent use during incarceration lowers opioid tolerance, increasing risk of overdose in the event of relapse
- Limited access to drug treatment and lack of social support following release
- Inadequate services to support integration into the community
- Thus, opioid relapse is common and a risk for overdose is high after release from prison or jail

Barriers to Jail OEND Programming

- Informational barriers
 - Lack of knowledge about opioid overdose rates and risks upon release
 - Misconceptions about naloxone
 - Lay persons couldn't possibly use naloxone effectively
 - Liability concerns
- Logistical barriers
 - Lack of funding and overburdened staff
 - Restrictive movement in jail
 - Difficulty getting jail clearance for outside providers

Facilitators of Jail OEND Programming

- Interagency opioid overdose coalition
- Local harm reduction programming
- Re-entry program near the jail
- County operated jail health programming
- Internal champions
 - County administrators
 - Jail health care providers
 - Jail substance use treatment providers
 - Re-entry clinic providers
 - Harm reduction service providers

Existing OEND Programs in CJ Settings

- Several states such as Connecticut, Iowa, Michigan, New Hampshire, New Mexico, North Dakota and Rhode Island have implemented programs
- Most programs are implemented at the local/county level like Austin, TX; Los Angeles, CA; San Diego, CA; San Francisco, CA; Boulder, CO; Denver, CO; Durham, NC; Multnomah, OR; Seattle, WA; and Chicago, IL
- All programs use similar curriculum and distribute similar naloxone kits



In this 3/21/2016, photograph, inmate Eric Burton examines a naloxone dose while conferring with a doctor at the Denver County Jail in downtown Denver. (AP Photo/David Zalubowski)

OEND Program Models

- Program providers – outside agencies, correctional staff, current jail program staff who provide substance use treatment, HIV/HCV testing and/or pharmacy staff
- Participants – all people who are being released, people who report opioid use prior to incarceration
- Trainings – one-on-one or a group setting with an individual trainer and/or video
- Naloxone – attached to property or vending machine, and a participant is given a voucher and instructions to pick up naloxone at a local SSP or pharmacy

San Francisco County Jail OEND Program

- Roll out 2013 in the re-entry pod
- Collaboration:
 - The Drug Overdose Prevention and Education (DOPE) Project, supplies Naloxone and staff training
 - Jail Health Services (JHS), provides training to inmates and dispenses Naloxone
 - San Francisco Sheriff's Department and San Francisco Adult Probation Division, permit access to inmates and provide space for trainings

OEND Protocol

- JHS staff visit the pods monthly. People, who are within one month of their release date, are called to participate in a group training
- All participants watch the video “Staying Alive on the Outside” (18 minutes) <https://www.youtube.com/watch?v= QwgxWO4q38>
- Inmates who watch the video can opt-in to receive a naloxone kit upon release
- Those who opt-in, meet with staff one-on-one for 5 minutes to go over any questions, practice with a naloxone demo, and complete paperwork
- In addition, JHS staff review jail intake records, offer trainings to people whose records indicate they are at risk of opioid overdose, and they also receive referrals from other jail health medical staff
- Inmates, who are seen a result of outreach or referrals, receive one-on-one OEND training
- JHS staff places naloxone kit in property
- Inmates are encouraged to test for HIV/HCV/STIs and participate in other health interventions offered by JHS



Looking for more information on implementation?

A Primer for Implementation of Overdose Education
and Naloxone Distribution in Jails and Prisons



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https://opioidresponsenetwork.org/ResourceMaterials/Naloxone-Prison-Primer_v2.pdf



Naloxone Access and Overdose Prevention Education in Jails and Prisons

Opiate Overdose Prevention Education



Naloxone Training

- Training people, who use drugs and who are incarcerated on how to confidently administer Naloxone, greatly reduces the chance of overdose death post-release
- There are at least a few people in our weekly training who use drugs and do not know what Naloxone is or where they can access it

Overdose Prevention Education for Stimulants and Other Non-Opiate Based Drugs

- Fentanyl can be present in non-opiate street drugs such as crack or methamphetamine and in the form of pressed pills
- Stimulant users often aren't the first to hear about Naloxone and can be under the impression that because they only use stimulants, they are not at risk of opiate overdose—this is not true
- Clearing up misinformation surrounding Naloxone and the administration of Naloxone is vital to reducing stigma and often allows people who use drugs to have the knowledge and tools to pass that information on to others in high-risk communities

Naloxone Access and Overdose Prevention Education for Incarcerated Women



In the United States, black women are nearly 3 times more likely to die from pregnancy- and childbirth-related causes than white women. (Reuters / Brian Snyder)

- Women often face gender-specific challenges when it comes to drug use including:
 - Pregnancy
 - Higher risk of emotional/psychological distress due to abuse and trauma
 - Greater chance of experiencing sexual abuse and assault
- Providing a space for women to discuss their drug use free of judgment as well as the challenges they face, and how to keep each other safe post-release is crucial in training

Drug Use Inside Jails and Prison



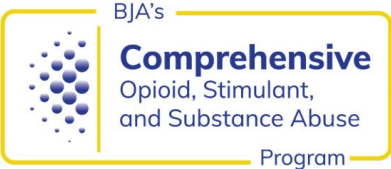
- We cannot fail to recognize the reality of opiates making their way into correctional facilities
- Overdoses do happen in this setting
- Providing Naloxone kits and regular training to correctional officers in addition to those who are incarcerated reduces death by overdose

Drug Use Inside Jails and Prison

- If you work in the substance use field, or in corrections, I encourage you to connect and ask these questions:
 - Do people leave with Naloxone upon their release?
 - Is overdose prevention education being given on a routine basis?
 - How can we collectively reduce overdose deaths in jail/prison and post-release?



Reducing Stigma and Providing Support



Reducing Stigma and Providing Support

- When speaking to this vulnerable population it is important to be mindful of the language you use

Examples:

- “People who use drugs” instead of “drug addicts” or “junkies”
- “Substance use disorder” instead of “substance abuse”

Reducing Stigma and Providing Support

People who use drugs and who are incarcerated deserve education and support especially when it has the potential to reduce harm in their life, in the lives of others, and prevent overdose deaths.

Overdose deaths ARE preventable!

Thank you!



Contact Information

- Lynn Wenger, M.S.W., M.P.H.
Presenter
Email: lwenger@rti.org
Phone: (510) 665-8219
- Kevin Strom, Ph.D.
Project Director
Email: kstrom@rti.org
Phone: (919) 485-5729
- Becca Rose (Lilly)
Presenter
Email: becca@nchrc.org
Phone: (910) 228-7605
- Sara Calvin, M.S.
Associate Project Director
Email: scalvin@rti.org
Phone: (919) 541-6882

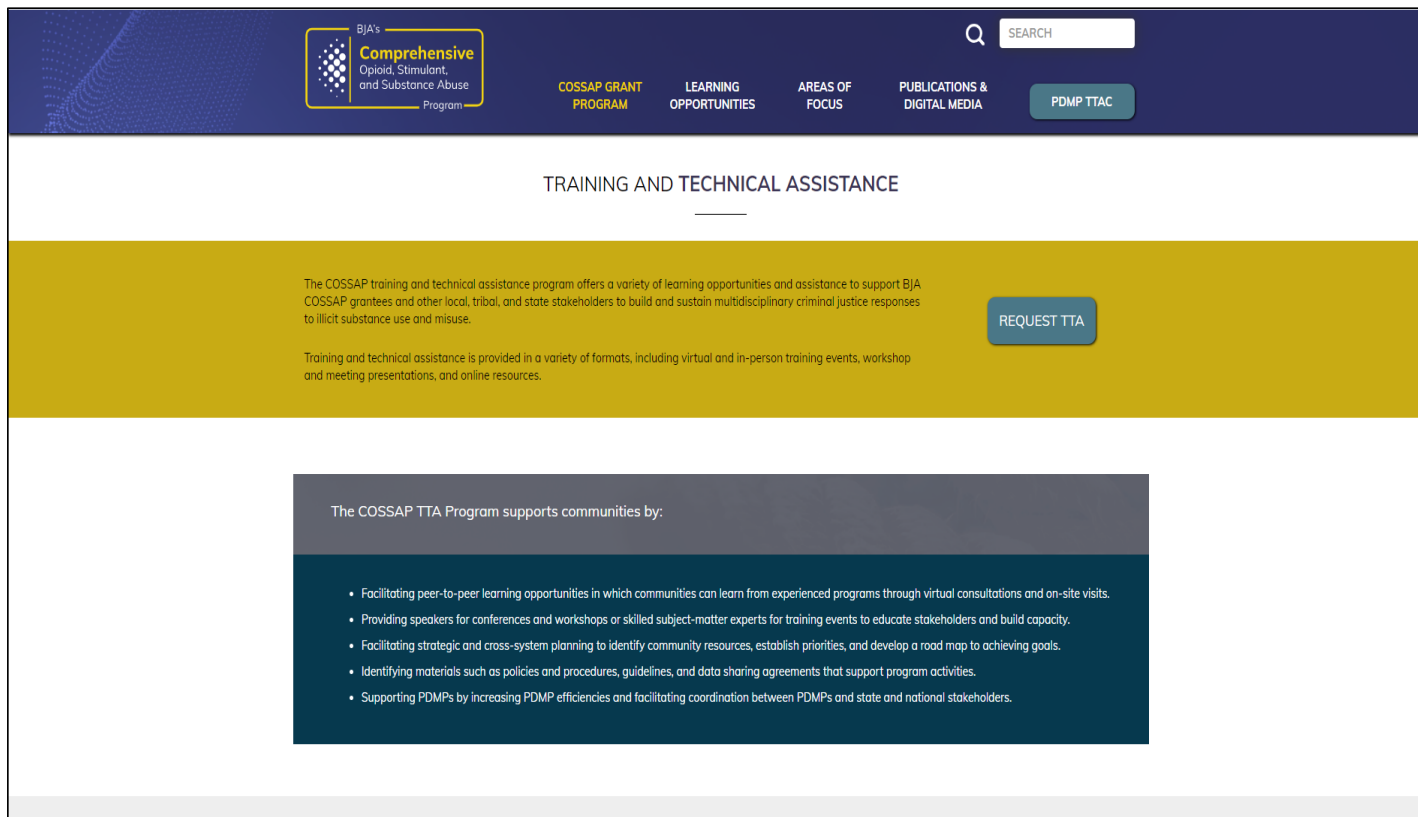
Bureau of Justice Assistance's **Comprehensive Opioid, Stimulant, and Substance Abuse Program (COSSAP) Resource Center**



www.cossapresources.org



<https://cossapresources.org/Program/TTA>



The screenshot shows the website for the COSSAP TTA Program. The header is dark blue with the BJA's Comprehensive Opioid, Stimulant, and Substance Abuse Program logo on the left. Navigation links include COSSAP GRANT PROGRAM, LEARNING OPPORTUNITIES, AREAS OF FOCUS, PUBLICATIONS & DIGITAL MEDIA, and PDMP TTAC. A search bar is also present. The main content area is white with a yellow banner for 'TRAINING AND TECHNICAL ASSISTANCE'. Below this, there is a yellow box with text describing the program and a 'REQUEST TTA' button. A dark blue box contains a list of services provided by the TTA program.

BJA's **Comprehensive** Opioid, Stimulant, and Substance Abuse Program

COSSAP GRANT PROGRAM LEARNING OPPORTUNITIES AREAS OF FOCUS PUBLICATIONS & DIGITAL MEDIA PDMP TTAC

SEARCH

TRAINING AND TECHNICAL ASSISTANCE

The COSSAP training and technical assistance program offers a variety of learning opportunities and assistance to support BJA COSSAP grantees and other local, tribal, and state stakeholders to build and sustain multidisciplinary criminal justice responses to illicit substance use and misuse.

REQUEST TTA

Training and technical assistance is provided in a variety of formats, including virtual and in-person training events, workshop and meeting presentations, and online resources.

The COSSAP TTA Program supports communities by:

- Facilitating peer-to-peer learning opportunities in which communities can learn from experienced programs through virtual consultations and on-site visits.
- Providing speakers for conferences and workshops or skilled subject-matter experts for training events to educate stakeholders and build capacity.
- Facilitating strategic and cross-system planning to identify community resources, establish priorities, and develop a road map to achieving goals.
- Identifying materials such as policies and procedures, guidelines, and data sharing agreements that support program activities.
- Supporting PDMPs by increasing PDMP efficiencies and facilitating coordination between PDMPs and state and national stakeholders.

