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Overdose Prevention in Jails

A Qualitative Study on Overdose
Prevention Education and Naloxone
Distribution Programming in Two
North Carolina County Jails

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NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

Background



This project was part of the Duke Opioid Collaboratory, funded by The Duke Endowment and administered through the Duke School of Medicine Department of Population Health Sciences. The Collaboratory convenes diverse partners to save lives, reduce stigma, and mitigate the harmful impact of drugs through the development, implementation, and evaluation of system-level interventions.

There is an urgent need to provide overdose education and naloxone distribution to individuals with criminal legal system involvement, as they are at especially high risk for death during community re-entry. The North Carolina (NC) Harm Reduction Coalition and the NC-based Overdose Response Strategy team partnered with the Duke Opioid Collaboratory to evaluate two overdose prevention programs with linkages to treatment, care, and/or supportive services upon release implemented in NC rural county jails. Between August and October 2021, the Duke evaluation team conducted semi-structured, in-depth interviews with five individuals who have participated in the implementation of overdose prevention education and naloxone distribution programs offered in rural communities. The evaluation team explored interview participants' knowledge and attitudes about naloxone, barriers and facilitators to program implementation, and the perceived impact of the program on people who are incarcerated, who work in the jails, and in the local community, including family and friends of people who are incarcerated. In this brief report, we share facilitators and barriers to program implementation and recommendations for program improvements.

Facilitators

- **Supportive leadership in the jail**
Active support from jail leadership allowed for more seamless implementation of the overdose prevention and naloxone distribution program and training of jail staff, especially in the distribution of naloxone upon release from the jail.
- **Hiring peer support specialists with lived experience**
Peer Support Specialists (PSS) were described as a critical and essential part of the program. PSS act as direct links to community resources and use their own lived experience related to incarceration or substance use to connect with and inspire program participants. Positive systemic changes in the jail and community were often attributed to the work of the PSS.
- **Establishing strong collaboration between peer support specialists and jail staff**
When implementation of the program included time for PSS and jail staff to build collaborative relationships, jail staff were more satisfied with the program and more likely to encourage people who are incarcerated to engage with the program and to give PSS autonomy to connect with and provide support to people incarcerated at the jail.
- **Highlighting that naloxone saves lives to get jail staff on board**
Although several jail staff members were initially resistant to the distribution of naloxone, they eventually showed support once they saw how naloxone helped save lives. In addition, taking opportunities to explain the importance of naloxone to jail staff helped them understand why this program is worth their time and effort.
- **Emphasizing community impact to ensure program support and participation**
Raising awareness of the high rates of overdose deaths in the community encouraged jail staff and leadership to be more supportive of the program. In addition, it was helpful to highlight that after receiving training in the jail on how to use naloxone, people took that information with them into the community once they were released and were equipped to respond in the event of overdose in the community.
- **Leveraging established community partnerships**
Jails that utilized their partnership network of agencies and programs in the community that actively serve people who use drugs were more easily and effectively able to implement their programs and coordinate linkages to care.
- **Using the program to empower people who are incarcerated**
The overdose prevention education class was an opportunity to empower people who are incarcerated by equipping them with skills, engaging in conversations aimed at destigmatizing incarceration, and reminding participants that they are valued and deserving of respect.

Barriers

- **Limited support from jail staff**
Some jail staff were not actively involved in raising awareness of the program offerings or helping identify individuals who could benefit from participation. In the beginning, several jail staff were not supportive of the program due to stigma around naloxone and people who use drugs.
- **Systemic gaps in supporting people during re-entry**
System-level barriers have made it more challenging to support people with a history of substance use who are incarcerated. More support is needed for linkages to care, including access to medication for opioid use disorder, transportation, housing, and mental health services when people are released from the jail.
- **Inconsistent ability to provide access to naloxone and educational materials upon release**
In some cases, naloxone and educational materials were discarded by jail staff due to lack of clarity around what personal belongings are allowed when people who are incarcerated are transferred to another facility.
- **Unsupportive community environment**
Current community culture can impact program implementation in the jail and at times does not align with harm reduction principles of the program.



Recommendations

The below table highlights actionable recommendations offered by interviewees and based on the facilitators and barriers at the jail, program, staff, and individual levels. These are suggestions to improve the current overdose education and naloxone distribution programs and support other jails interested in implementing similar programming.

JAIL-BASED OVERDOSE EDUCATION AND NALOXONE DISTRIBUTION PROGRAM RECOMMENDATIONS

LEVEL	RECOMMENDATION
Jail system and staff	<ul style="list-style-type: none"> • Explore options for naloxone and overdose education materials to remain with individuals' personal property if they are transferred to another facility/prison or to be mailed to a personal address • Expand onboarding training for jail staff to include topics such as harm reduction and to better prepare them to proactively refer individuals to the program • Ensure ample time is available for relationship building between jail staff and peer support specialists • Continue to reinforce the use of destigmatizing language • Focus on the positive impacts of naloxone
Program implementation team	<ul style="list-style-type: none"> • Explore additional options for raising awareness about the program and encouraging participation among people who are incarcerated • Share local overdose data and program successes and impact to raise awareness and facilitate program support and buy-in at the jail and in the community • Include a list of resources peer support specialists can provide in the education packet, including counseling, locations for MOUD, and support services such as food, housing, and transportation • Consider ways in which existing partnerships can support the program • Hire peer support specialists from the outset, so they can be involved in designing the program
People who are incarcerated	<ul style="list-style-type: none"> • Encourage individuals to participate in the program not only for their own safety, but for the safety of their community