



Local authorities and prisons failing to reduce opioid deaths

Many of England's local authorities are failing to provide enough of a life-saving overdose reversal medication to people who need it

FOR IMMEDIATE RELEASE

LONDON (MARCH 5, 2019) – Drug-related deaths in England are at a record high, yet [a new report by Release](#) shows that local authorities are failing to provide enough naloxone – a life-saving medication that reverses opioid overdoses by counteracting the drugs' effect – to people who need it. This is particularly shameful given that there were 1,829 opioid-related deaths in England in 2017, and that naloxone is cheap to acquire and has no potential for misuse.

To reduce such deaths, most local authorities have **take-home naloxone programmes**, whereby naloxone is made available for people to take home, typically without a prescription. Following Freedom of Information requests, Release found that 149 of 152 local authorities provide take-home naloxone – but that the amount dispensed is drastically insufficient.

Zoe Carre, Policy Researcher at Release, stated: “There is a crisis of drug-related deaths in this country and many local authorities are failing to protect people from fatally overdosing on opioids, such as heroin. The amount of take-home naloxone given out nationally has been abysmally low. This life-saving medication is not reaching those who most need it.”

“People who use drugs are an extremely stigmatised group in society, facing significant health risks which are exacerbated by the Government's ideological abstinence-focused approach to drug use. If any other group of people were needlessly facing barriers to accessing a cheap and effective life-saving medication, there would be widespread public outrage.”

Take-home naloxone is available in almost every local authority in England, and nine local authorities have introduced take-home naloxone programmes since [our last report](#). Nonetheless, the amount supplied is extremely limited:

- 16 take-home naloxone kits were given out for every 100 people using opiates in FY 2017/18 – equivalent to only 16% coverage*
- If we take into account take-home naloxone kits dispensed in previous years which have not yet expired, the estimated national coverage among people who use opiates was 28 per cent over the last two years, and 34 per cent over the last 3 years*
- In many areas, take-home naloxone kits were not made available to key populations most likely to experience or witness an opioid overdose. Of the 152 local authorities:
 - 11% did not provide kits to the family and friends of people who use opioids
 - 25% did not provide kits to people in contact with outreach services for homeless populations
 - 58% did not provide kits to clients accessing opioid-related treatment or services at community pharmacies

- Darlington was the only local authority in England which did not report having either a take-home naloxone programme or any plans to implement one

Alarming, many prisons in England are also failing to provide naloxone to vulnerable groups. Estimates suggest that there is a three- to eightfold increased risk of drug-related death among former prisoners in the first 2 weeks after release from prison, compared with the following 10 weeks. Despite this, among the 109 prisons in England reporting on take home naloxone, only 56 had such a programme in place. Meanwhile, only 1 of the 5 Young Offender Institutions in England reporting on take home naloxone said they gave the medication to people leaving custody.

Amal Ali, Associate Researcher at Release, stated:

“Imprisoned people are among the most marginalised in society and face a significant risk of overdosing on an opioid during the immediate post-release period. To reduce deadly overdoses, it is essential for prisons to offer at least one life-saving take home naloxone kit to every person upon their release from custody. By neglecting to do so, prisons are failing to fulfil their duty of care.”

Access to take home naloxone should be easy and available to all people who use – or have a history of using - opioids, yet our research shows significant limitations to access. Despite these barriers, access is improving in several parts of England.

Zoe Carre went on to state: “While there is certainly much room for improvement, it is not all doom and gloom. Since last year, more local authorities have initiated take home naloxone programmes and are making this available to people on Opioid Substitution Therapy, such as methadone. Several local authorities are also leading the way, by developing innovative ways to make the life-saving medication accessible to all.”

**As the shelf-life of Prenoxad (i.e. injectable naloxone) is 36 months from the point of manufacture to expiry, we would expect at least 33 per cent coverage in a given year, 66 per cent over 2 years and 100 per cent over 3 years.*

Note to the editor:

Release is the UK’s national centre of expertise on drugs and drug laws, providing free and confidential specialist services to professionals, the public, and people who use drugs. Release also campaigns for the reform of UK drug policy, particularly the removal of criminal sanctions for possession offences, in order to bring about a fairer and more compassionate legal framework to managing drug use in our society.

Read Release’s new report – [Finding a Needle in a Haystack: Take-Home Naloxone in England 2017/18](#).

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