



FOR IMMEDIATE RELEASE

## **England's local authorities failing to act as opioid deaths soar**

### **As opioid-related deaths hit a record high, most of England's local authorities are failing to provide a safe and cheap overdose reversal medication to those who need it**

LONDON (December 18, 2017) – As opioid-related deaths reach a record high in England, research undertaken by Release raises serious concerns about local authorities' provision of naloxone – a life-saving cost-effective medication proven to reduce opioid overdose deaths. The data, acquired through Freedom of Information requests, found that whilst 138 out of 152 local authorities confirmed they provided take home naloxone, the level of provision was chronically inadequate and certainly was not sufficient to prevent opioid deaths to any meaningful extent.

Zoe Carre of Release, who undertook the research, stated "There were nearly 1900 opiate-related overdose deaths registered in England in 2016 - the highest number since records began, and over 4 times higher than the figure in 1993. Many of these deaths could have been prevented if naloxone, a life-saving antidote to opioid overdose, was provided more widely for people to take home. The scale of the problem is a public health crisis, as such, it requires a national and coordinated response, and Government must not leave it to local authorities but must take action to prevent more people dying."

The availability of take home naloxone is extremely limited. Of the 151 authorities surveyed, 117 provided details on the number of kits given out in 2016/17:

- Only 12 take-home naloxone kits were given out for every 100 people using opiates (equivalent to only 12% coverage) in these areas;
- 18 areas did not give out any take-home naloxone in the 2016/17 financial year (including the 13 local authorities that did not provide take-home naloxone);
- Coverage was between 1% and 20% in 73 areas;
- The worst performing local authority was Surrey with only 1% coverage and the best performing local authority was Somerset with only 49% coverage.

Naloxone can save the life of someone overdosing, is cheap, and has no potential for misuse, so it is imperative for local authorities to provide it to people who are at high-risk of experiencing or witnessing an overdose – yet many are not doing so. Access to this medication should be easy and available in services where people who inject drugs, or have a history of injecting drug use, yet the data showed significant limitations to access. Of the 138 local authorities providing naloxone, almost a third did not provide naloxone through needle and syringe programmes and almost a fourth did not provide take-home naloxone to patients accessing Opioid Substitution Therapy (OST) and/or to family, friends, and/or carers of people at risk of overdose. Such individuals could witness a loved one overdose, but without being provided with take-home naloxone provision by local authorities, they may be helpless in preventing their death.

Significant barriers to accessing take home naloxone were also identified. Almost 1 in 5 require an individual to be referred and/or to book an appointment to receive the life-saving medication. Over 20% of the local authorities providing take home naloxone required an individual to be assessed before receiving take-home naloxone. These requirements are a major barrier to naloxone access, and are therefore contributing factors

to overdose deaths. People who use drugs are already marginalised in many ways – they need less barriers to life-saving medications, not more.

Zoe Carre went on to say: “The Drug Strategy 2017 recommended that ‘all local authority areas should have appropriate naloxone provision in place’, unfortunately the approach taken in some local authorities is far from adequate and may be contributing to avoidable overdose deaths. A national take-home naloxone programme is needed in England as a matter of urgency to coordinate and monitor take-home naloxone provision across local authorities. This has been successfully implemented in Scotland, and England should follow suit. Government must act now to prevent more of its vulnerable and marginalised citizens from dying.”

**Note to the editor:**

[Release](#) is the UK 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.

Detailed information on naloxone coverage at a local level and barriers to accessing the medication is available at: [www.release.org.uk/naloxone](http://www.release.org.uk/naloxone)

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