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Advocates and Elected Officials Demand Life-Saving Medication-Assisted Treatment for Those Incarcerated throughout New York State

Urgent Action Needed, as People Leaving Incarceration are at 40 times Higher Risk of Overdose Death within the First Two Weeks of Release

Providing Methadone and Buprenorphine to Incarcerated New Yorkers Saves Lives, Reduces Recidivism and Improves Treatment Retention Post-Release

City Hall, NY: Harm reduction organizations, drug policy activists, and treatment providers joined New York Assemblymember Linda Rosenthal in calling for access to medication-assisted treatment (MAT) in all New York jails and prisons on the same day that the State Assembly Committees on Corrections, Alcoholism and Drug Abuse, and Health held a hearing on the issue. Speakers highlighted the devastating impact incarceration has on the overdose crisis and the inhumane treatment people with an opioid use disorder currently receive while incarcerated. As part of their call for immediate action, advocates shared insight from successful programs outside of New York; states that have embraced comprehensive corrections-based treatment have significantly reduced recidivism and the rate of fatal overdose among people exiting incarceration.

With seven consecutive years of increasing overdose rates in New York City—and New York State having the fifth-highest overdose rate nationally within its correctional facilities—advocates demanded access to buprenorphine and methadone treatment in every prison and jail across the state. Speakers also called for the state to immediately divest from criminalization, prosecutions, and incarceration for people who use drugs and instead take a health-centered approach.

The press conference and the joint assembly hearing on the effectiveness of medication-assisted treatment in correctional settings highlight New York's treatment gaps and the available legislative remedies. The Medication Assisted Treatment bill (NYS8774A/S8914A) sponsored by Assemblymember Rosenthal and Senator Bailey will require all New York jails and prisons to offer medication-assisted treatment along with counseling and clinical support, discharge planning and reentry support. The bill will also ensure that these services are funded annually with respect to the needs of localities and administrative agencies.

“The opioid epidemic has hit every region of New York State, but nowhere is its reach felt more acutely than among our state's incarcerated population. The rates of addiction in our state's correctional facilities are astronomical, and yet we fail to make medication assisted treatment available at the vast majority of them,” said **Assemblymember Linda B. Rosenthal (D/WF- Manhattan), Chair of the Assembly Committee on Alcoholism and Drug Abuse**. “Access to MAT, especially when coupled with post-release treatment options, will help individuals manage potentially deadly withdrawal symptoms, reduce the number of overdose deaths and markedly lower rates of recidivism. We must pass my legislation, A. 8774, and ensure that the continuum of care that we continue to build out in New York absolutely runs through every correctional facility in the state.”

"Medication assisted treatment is nothing more than medication for an illness that is taking far too many lives in New York State," said **Alexis Pleus, Executive Director, TruthPharm**. "Incarceration causes harms to individuals, especially those who suffer from substance use disorder. Though the harms of incarceration cannot be eliminated without eliminating incarceration, we celebrate any step towards reducing the harms and saving lives. Certainly, providing medication will save lives. It may have saved the life of my own son as he was incarcerated for nearly 9 months prior to his death and was offered no medication and no treatment whatsoever for the very illness that led to his arrest. My son is just one statistic among thousands of inmates incarcerated for an illness for which they are offered no help."

Many of New York's jails and prisons lack the resources to provide adequate, evidence-based treatment for substance use disorder. The facilities that do offer treatment prioritize cognitive and behavioral care over comprehensive interventions that include medication used for maintenance therapy, such as methadone and buprenorphine.

By providing effective treatment and quality re-entry services to individuals while incarcerated, New York can potentially reduce the rate of fatal overdose, decrease the rate of recidivism and eventually spend less on incarceration and emergency health care.

"In New York City and throughout New York State, we have a critical opportunity to help fight the opioid epidemic and prevent thousands of overdose deaths by establishing comprehensive addiction-treatment programs within correction facilities that include MAT," said **Allegra Schorr, President of the Coalition of Medication-Assisted Treatment Providers and Advocates of New York State (COMPA)**. "What's more, we need to provide connections to effective services and treatment upon reentry into the community. Rhode Island and Connecticut have demonstrated the effectiveness of these life-saving programs. New Yorkers deserve a similar chance."

"Methadone and buprenorphine, two medications considered to be the most effective at reducing the harms of opioid use disorder and preventing fatal overdose, are locked out of New York's correctional system where they are desperately needed. The rate of fatal overdose is especially high within the formerly incarcerated population – people who are newly released are 40 times more likely to die from overdose. DPA does not support the criminalization of substance use, but until New York fully embraces public health over incarceration, correctional facilities should provide those in need of care with evidence-based treatment," said **Dionna King, Policy Manager, Drug Policy Alliance**.

"The status quo of forced withdrawal upon entry to most jails and prisons in this country harms people with opioid use disorder, sometimes even leading to suicide, and increases their risk of overdose and death upon release from jail or prison. As it currently exists, if someone overdoses in a Dunkin Donuts bathroom and the police run his name, and he has an open warrant and is subsequently brought to jail after being revived, that person cannot access the medication that can stabilize him, treat his withdrawal symptoms and possibly prevent him from a future fatal overdose. Starting treatment for him in jail with medication is simply common sense, in addition to being evidence-based clinical best practice as well as a necessary public health intervention," said **Kimberly Sue, MD, PhD, Harm Reduction Coalition**.

"Forced withdrawal while incarcerated is torture, painful, and disrupts recovery for people who already use medication-assisted treatment," said **Hiawatha Collins, Community Leader and Board Member at VOCAL-NY**. "Medication-assisted treatment is a critical tool for recovery for those who use opioids, and the lack of this lifesaving treatment during incarceration increases the risk of relapse and overdose. Until we dismantle the failed drug war, we must provide all New Yorkers who are incarcerated with humane access to medication that will keep them alive and healthy."