

Press Release

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SAFE Glen Cove Coalition: NIDA Study- Offering Buprenorphine Medication to People with Opioid Use Disorder in Jail May Reduce Recidivism

The National Institute on Drug Abuse (NIDA) recently funded a study conducted by the [Justice Community Opioid Innovation Network \(JCOIN\)](#), a program to increase high-quality care for people with opioid misuse and opioid use disorder in justice settings.

The study was conducted in two rural Massachusetts jails and found that people with opioid use disorder (OUD) who were incarcerated and received a medication approved to treat opioid use disorder, known as buprenorphine, were less likely to face rearrest and reconviction after release than those who did not receive the medication. Data showed 32% reduction in rates of probation violations, reincarcerations, or court charges when the facility offered buprenorphine to people in jail compared to when it did not.

NIDA maintains studies like this provide much-needed evidence and momentum for jails and prisons to better enable the treatment, education, and support systems that individuals with an opioid use disorder need to help them recover and prevent reincarceration. Not offering treatment to people with opioid use disorder in jails and prisons can have devastating consequences, including a return to use and heightened risk of overdose and death after release.

A growing body of evidence suggests that medications used to treat OUD including buprenorphine, methadone, and naltrexone, hold great potential to improve outcomes among individuals after they're released. However, offering these evidence-based treatments to people with OUD who pass through the justice system is not currently standard-of-care in U.S. jails and prisons, and most jails that do offer them are in large urban centers.

While previous studies have investigated the impact of buprenorphine provision on overdose rates, risk for infectious disease, and other health effects related to opioid use among people who are incarcerated, this study is one of the first to evaluate the impact specifically on recidivism, defined as additional probation violations, reincarcerations, or court charges. The researchers recognized an opportunity to assess this research gap when the Franklin County Sheriff's Office and the Hampshire County House of Corrections, jails in two neighboring rural counties in Massachusetts, both began to

offer buprenorphine to adults in jail, but at different times. Franklin County was one of the first rural jails in the nation to offer buprenorphine, in addition to naltrexone, beginning in February 2016. Hampshire County began providing buprenorphine in May 2019.

According to the researchers, this was sort of a 'natural experiment' where two rural county jails located within 23 miles of each other had very similar populations and different approaches to the same problem. Most people convicted of crimes carry out short-term sentences in jail, not prisons, so it was important for us to study our research question in jails.

The researchers observed the outcomes of 469 adults, 197 individuals in Franklin County and 272 in Hampshire County, who were incarcerated and had opioid use disorder, and who exited one of the two participating jails between Jan. 1, 2015 and April 30, 2019. During this time, Franklin County jail began offering buprenorphine while the Hampshire County facility did not. Most observed individuals were male, white, and around 34 to 35 years old.

Using statistical models to analyze data from each jail's electronic booking system, the researchers found that 48% of individuals from the Franklin County jail recidivated, compared to 63% of individuals in Hampshire County. As well, 36% of the people who were incarcerated in Franklin County faced new criminal charges in court, compared to 47% of people in Hampshire County. The rate of re-incarceration in the Franklin County group was 21%, compared to 39% in the Hampshire County group.

Additional analysis showed that decreases in charges related to property crimes appeared to have fueled the 32% reduction in overall recidivism.

Existing data already shows that offering medications for opioid use disorder to people in jail can prevent overdoses, withdrawal, and other adverse health outcomes after the individual is released. Though this study was done with a small sample, the results show convincingly that on top of these positive health effects, providing these medications in jail can break the repressive cycle of arrest, reconviction, and reincarceration that occurs in the absence of adequate help and resources.

NIDA is a component of the National Institutes of Health, U.S. Department of Health and Human Services and supports most of the world's research on the health aspects of drug use and addiction. For more information about NIDA and its programs, visit www.nida.nih.gov.

The SAFE Glen Cove Coalition is conducting an opioid prevention awareness campaign entitled. "Keeping Glen Cove SAFE," in order to educate and update the community regarding opioid use and its consequences. To learn more about the SAFE Glen Cove Coalition please follow us on www.facebook.com/safeglencovecoalition or visit SAFE's website to learn more about the Opioid Epidemic at www.safeglencove.org.

