People struggling with addiction deserve treatment and care. However, due to stigma, criminalization, and the failed war on drugs, people are being prevented from accessing the care and the support they need to live healthy lives.

More than 72,000 people die of fatal drug overdoses every year in the United States.\(^1\) **In New York, nearly 4,000 died last year alone.**\(^{\text{ii}}\) **Most of these deaths are preventable.** Medication-Assisted Treatment (MAT) – also known as Medication Assisted Recovery – using Methadone, Buprenorphine, or Naltrexone, is one of the most effective ways for people with Opioid Use Disorder to stop using heroin, prescription pills, or other opioid drugs. Medication-Assisted Treatment is the **only** intervention proven to reduce mortality by as much as 38-59%\(^{\text{iii}}\) — meaning, it saves lives. While these medications are typically available in community-based clinics, primary care, and/or outpatient substance use treatment settings, they are underused in jails and prisons.\(^{\text{iv}}\)

**Why does this matter?** Individuals recently released from jails or prisons are up to **10 to 18 times** more likely to die of a fatal overdose than the general population is,\(^{\text{v}}\) yet very few correctional facilities offer effective treatment for substance use disorder. This means people struggling with opioid addiction can’t get evidence based treatment while being detained in jail or prison. And people entering jail or prison who are already taking these medications often undergo painful withdrawal from them while inside.

Treating substance use as a health issue is impossible under the current racist drug war and system of criminalization. For a truly health-based approach, we need full decriminalization of psychoactive substances (drugs), sex work, mental health, and poverty. As harm reductionists, in the short term we support deploying effective treatment and recovery pathways to people wherever they are – including people detained in jails and prisons.

Providing these medications in jails and prisons is urgently important to support people with opioid dependency – and has already proven effective. The first MAT program was launched on Riker's Island Jail Complex in New York City more than 30 years ago.\(^{\text{vi}}\) Connecticut launched small pilots in its facilities\(^{\text{vii}}\) and a state-wide effort has been implemented in Rhode Island.\(^{\text{viii}}\) Studies have found these programs to be an effective and high impact way to save lives; reduce the risk of overdose upon release; increase connectivity to treatment and care; and improve people’s ability to recover. **The evidence is clear:** MAT programs reduce the likelihood that someone with an opioid use disorder will return to jail or prison.\(^{\text{iii}}\)

**How to Implement MAT in New York State Jails and Prisons**

In New York State, county jails are run by the sheriff (with the exception of Riker’s in New York City, which is run by the Mayor). Riker’s has a MAT program, in place for 30 years, having pioneered it. There are only a few county jails outside of New York City that have MAT programs, but only Albany, NY uses a comprehensive approach that includes all three opioid medications and utilizes a harm reduction approach to discharge.\(^{\text{is}}\) In **Albany**, Katal worked to
organize stakeholders and educated the county sheriff about MAT in jails. Once the sheriff agreed, we worked together to develop and implement the program, using existing treatment, healthcare, and harm reduction resources. Other counties in New York can – and must – follow suit.

State prisons in New York are run by the Department of Corrections under state law, and to implement MAT in those facilities, legislation is needed.

Katal is working in collaboration with End Overdose NY partners on legislation to save lives in New York. The Medication-Assisted Treatment in the Correctional Settings Act (S2161-Bailey/A833-Rosenthal) would:

- Implement MAT programs in jails and prisons
- Require the state to fund these programs
- Establish a program for people who are incarcerated so that they can opt into treatment at any point during their incarceration.

Through this legislation, people detained in jails or prisons can receive treatment for the entirety of their incarceration, and receive a collaborative reentry strategy upon release. This will save lives, reduce addiction rates among people in jails and prisons, and reduce recidivism. Our communities need this legislation passed now to save lives!

To learn more and get involved, or if you want to an overdose prevention training, please contact:

- **Cedric Fulton, Community Organizer, Katal:** cfulton@katalcenter.org | (518) 965-6771
- **Keith Brown, Director of Health & Harm Reduction, Katal:** keith@katalcenter.org | (518) 527-6263

---

vi Vestal, C. “Opioid treatment at Rikers Island is a long-standing success, but few jails adopt it.” WMHT, 23 May 2016. https://www.pbs.org/newshour/nation/opioid-treatment-at-rikers-island-is-a-long-standing-success-but-few-jails-adopt-it