

## Improving Systems of Care for Individuals with Opioid Use Disorder in New Mexico

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In 2021, roughly two New Mexicans died a day due to an opioid overdose, with a total of 717 deaths. Even after taking several steps to minimize the impact of the opioid epidemic, the New Mexico Department of Health determined that approximately 40,000 people in New Mexico are living with opioid use disorder (OUD), and roughly 7,000 are not receiving any sort of treatment.

Medication-assisted treatment (MAT) is the current gold standard for treating opioid use disorder. MAT uses a combination of pharmaceutical intervention and cognitive and behavioral therapy to address both the physical and emotional components of dependency, which is why many people consider it an ideal treatment method.

I interviewed six medical providers, peer support specialists, and public health professionals in Eddy, Taos, and Luna counties to determine potential strategies for increasing access to MAT in their communities.

## Strategies to Increase MAT Access: Develop stronger programs to connect people in the carceral system to treatment when they are incarcerated and when they are released

Compared to the general population, prisoners and jail inmates are 10-40 times more likely to die from an opioid overdose when released to the community. This risk of an overdose is especially acute in the time immediately following someone's release from prison or jail, with one study finding that individuals were 129 times more likely to die from an overdose in the first two weeks after release. **Developing bridge programs** that offer robust MAT within correctional facilities, followed by seamless transitions to continued care upon release, can effectively mitigate the risk of opioid-related overdoses.

New Mexico has been a leader when it comes to developing jail-based MAT programs. Bernalillo County Behavioral Health Services Department and the Bernalillo County Metropolitan Detention Center (MDC) developed the first privately owned Opioid Treatment Program in the United States. Additionally, in 2016, Rhode Island became the first state to implement a comprehensive program for treating opioid use disorder in its correctional system. An evaluation of the New Mexico program found a decrease in recidivism for participants and an increase in community-based treatment upon release. These programs also decreased the likelihood of opioid use post-release compared to those without comprehensive systems while incarcerated. New Mexico state could benefit from following Bernalillo's successful Metropolitan Detention Center model and adding components of the Rhode Island model as well.

To develop similar comprehensive systems seen in Bernalillo's Metropolitan Detention Center model and the Rhode Island model, more New Mexico counties might consider implementing these protocols within New Mexico jails and prisons:

- Screen all individuals for opioid use disorder upon intake.
- Have individuals identified as possibly having opioid use disorder undergo an assessment with a team of diverse medical providers (nurse, physician, counselor).
- Offer MAT with all medications approved by the Food and Drug Administration (Methadone, Buprenorphine, and Naltrexone).
- Train all patients receiving MAT in using Naloxone to properly respond to someone overdosing.
- Organize follow-up care at discharge so patients have a designated provider to see upon release.

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• Ensure individuals leave the correctional facility with Naloxone in hand and information about where to get more Naloxone if needed.

Despite the initial cost of implementing these protocols, research has found that preemptively investing in substance use treatment can save money in the long run. A New Mexico study found a reduction in long-term spending for individuals receiving a jail-based MAT compared to those not receiving MAT. This cost reduction stemmed from lower rates of recidivism, indicating that carceral MAT ultimately proves more cost-effective than incarceration alone.

## Strategies to Increase MAT Access: Ensure individuals are housed while receiving treatment

Supportive housing is an important component during recovery, especially after reentry from the carceral system. This is especially important for individuals who may otherwise be homeless or recently released from the carceral system. Adopting a Housing First model, which emphasizes providing immediate housing to individuals without requirements like sobriety or a lack of a criminal record, can improve opioid use disorder patient outcomes. Housing First models were seen to significantly lower substance use and increase treatment retention compared to treatment-first approaches for substance use disorder.

Adopting a statewide model of Housing First gives people stability of a place to live while they are undergoing treatment for their opioid use disorder. Under the current statewide model, some transitional housing for those recently released from the carceral system and some homeless shelters do not allow take-home treatment medications in their facilities. Others do not allow an individual to be on any medication to assist in dependency management and require someone to be completely detoxed from any type of opioid.

An example of an already existing Housing First model in New Mexico can be seen in the Mesilla Valley Community of Hope (MVCH) in Doña Ana County. Mesilla Valley Community of Hope is an alliance of community organizations that provide services for individuals who are unhoused, near homeless, disabled, and living in poverty. They offer a variety of housing options for those in need, including permanent supportive housing, rapid housing, and veteran housing. New Mexico would benefit from adopting a statewide Housing First approach to short-term and long-term housing assistance programs and can use Mesilla Valley Community of Hope as a guide to help build that approach.

## Recommendations

By addressing systems-level access to treatment for opioid use disorder, it is possible to improve the lives and likelihood of survival when individuals reenter society from the carceral system. New Mexico is poised to make major strides toward opioid use disorder treatment by building on existing programs to connect people in the carceral system to treatment and adopting a Housing First model statewide.

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