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Homeless and Housing Services Providers Confront Opioid Overdose



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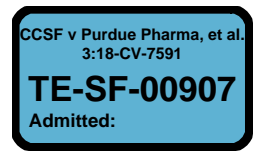
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Homeless and Housing Services Providers Confront Opioid Overdose

Across the United States, from rural areas to big cities, people experiencing homelessness are caught up in the opioid epidemic. Some begin using opioids after losing their homes, whereas others lose their homes because of opioid use.

As prescription opioids like oxycodone have become pricier and harder to get on the street, heroin gets cheaper and easier to obtain. Many opioid users switch to heroin, often mixed with other substances like fentanyl and carfentanil. Many people who purchase opioids illegally unknowingly inject these other substances, which increases the potential for overdose.

The SAMHSA Homeless and Housing Resource Network spoke with the staff of various programs—a health clinic with many clients experiencing unsheltered homelessness, an emergency shelter, and a permanent supportive housing program using a Housing First approach to serve people with an active opioid use disorder—to learn more about the problem.

The opioid epidemic is devastating and overdoses are all too common. One person experiencing homelessness was found in the alley behind the health clinic. Another was found in the men's room of the emergency shelter. A third was found in the apartment that she had just moved into after years on the street. Their lips were blue, a result of an overdose that suppressed their respiration rate and deprived them of oxygen.

These three were lucky. They were not among the 91 Americans who die of opioid overdoses every day. Why? Because the people who came to their aid had access to naloxone, a drug that can be sprayed into the nose or injected into a muscle to quickly counteract the effects of the opioid. Sometimes, a person who has overdosed also needs CPR to restore the heart's rhythm, but naloxone alone saves many lives. For example, the Baltimore City Health Department of Baltimore, Maryland, documented 425 overdose reversals in 2016.

Most adults can learn to administer naloxone. A physician revived the person discovered in the alley, but most naloxone doses are administered by people who are not medical professionals. A shelter worker who attended a 90-minute training revived the person found in the shelter's men's room. A friend revived the woman in her new

apartment using the naloxone kit that is distributed to tenants with a history of opioid use.

SAMHSA encourages homeless and housing service providers to make naloxone available and to train providers, people experiencing homelessness, and their friends and family to administer the lifesaving remedy. SAMHSA's [Opioid Overdose Prevention Toolkit – updated 2018](#) provides advice for physicians, first responders, and consumers and families. The 2013 version was downloaded more than 45,000 times in the first year it was available, and many people continue to download the toolkit each day. In addition to the toolkit, many [other resources](#) are available on overdose prevention.

Naloxone is used regularly in some communities. In others, providers are hesitant to implement overdose prevention programs. A common concern is the public misperception that programs encourage drug use. The providers interviewed agreed—the idea is not to enable drug use but to get people into treatment.

Matt Tice, who leads a clinical team serving supportive housing tenants with an opioid use disorder, calls on the field to overcome the fear of naloxone, just like public health agencies had to address HIV prevention head-on. He said, "I have heard a lot of parallels between the AIDS crisis of the late 1980s and the current opioid crisis. There is so much stigma within agencies, within families. Let's bring it to light, equip people adequately, and talk about it, and then we will be in a much better place."

Although opioid use disorder treatment is challenging, medication-assisted treatment works for many people, and [resources are available](#) to implement this intervention. It uses one of several federally approved pharmaceuticals to reduce dependency. The specific choice of treatment depends on numerous factors, such as whether a person continues to use street drugs.

Together, SAMHSA and providers nationwide are working together to reduce overdose deaths and get people the treatment they need. To find treatment in your community, use SAMHSA's [Behavioral Health Treatment Services Locator](#) or call [SAMHSA's National Helpline](#), 1-800-662-HELP (4357).

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SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.

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