

Buprenorphine Pilot Project at the NM Women's Prison

Frequently Asked Questions

1) What would the bill do?

The Buprenorphine Pilot Project at NM Women's Prison Bill would provide funding for 2 years of focused anti-addiction medication treatment to 30 women inmates with a chronic history of narcotic addiction who are approaching release back in to the community.

2) Why is this pilot program so important?

This Buprenorphine Pilot Project is very important because currently 75% of women who go to prison for the first time and have a history of heroin use will return to prison within 2.5 years. The Buprenorphine Pilot Project is an inmate treatment program that would provide the first medical intervention to break the cycle of repeated crimes to support persistent drug addiction. The 600 women incarcerated in the NM Women's Correctional Facility collectively leave behind 1800 dependent children under the age of 18. Incarceration in New Mexico costs about \$100/day. **Women repeating crimes and returning to prison for narcotic-related activities cost New Mexican taxpayers nearly \$3,000,000 per year.**

3) What is buprenorphine and is it effective?

Buprenorphine is a Drug Enforcement Agency-approved daily oral medication that, (when combined with Naloxone) effectively blocks the action of heroin and other narcotics. It is an extremely safe medication that is used in community-based narcotic treatment programs. People treated with Buprenorphine/Naloxone have no drug cravings, no need to obtain illegal drugs or commit crimes to obtain money to buy drugs.

4) How is buprenorphine used in our community?

Buprenorphine is used nationwide in community-based drug treatment programs. The medication can be prescribed in an office setting by any certified physician. New Mexico presently has 20 certified physicians and another 30 physicians eligible for certification.

5) What will we learn from this study?

Inmates participating in this study will be tracked for 2 years for indicators including: compliance with medication, abstinence from heroin and other narcotic use, non-incarceration, frequency and cost of psychotropic medications used, self-inflicted injury, infection and need for medical care. It is expected that these indicators will show dramatic improvement among women inmates treated with buprenorphine/naloxone. We will learn how much medical treatment of addiction can reduce transmission of disease, return to criminal activity and subsequent return to prison.

6) How will the study impact safety in the women's correctional facility?

Prison and jail facilities in other states and in other countries which provide opiate replacement with buprenorphine/naloxone or methadone show a statistically significant reduction in transmission of infectious diseases, inappropriate drug seeking from medical personnel, and less violence and aggressive behavior toward prison staff and other inmates. Safety of correctional officers and other inmates will improve with introduction of opiate replacement with buprenorphine/naloxone.