

Naloxone distribution

Naloxone is a safe, highly effective medication used to **reverse opioid overdoses and save lives**. It works by blocking the effects of opioids to quickly restore breathing to someone who is overdosing.

About naloxone

Naloxone can be administered to someone overdosing on illicit opioids, such as heroin, or prescription opioids. It is a quick-acting medication, but its effects have a short duration, so immediate medical intervention or support is required after administration.¹ It can be administered as a nasal spray (commonly sold under the brand name Narcan), injected into the muscle or under the skin, or given through a vein. Naloxone is not a controlled substance and does not encourage or worsen substance use.^{2,3} When someone overdoses on opioids, their breathing slows and can stop completely — this is called respiratory depression and can be fatal. Naloxone only treats respiratory depression caused by opioids, but administering naloxone to someone without opioids in their system will not harm them.^{4, 5}

While naloxone is legal to possess and available to buy over the counter in all 50 states, purchasing it can still be cost-prohibitive.⁶ Free naloxone distribution programs are a critical public health strategy to increase the availability, use, and de-stigmatization of this lifesaving resource.⁷ Anyone can administer naloxone, including bystanders, though individuals should be given training and educational materials when possible to ensure effective administration in the event of an overdose.

About us

Healthy Minds Policy Initiative is a nonprofit LLC contracted by the Oklahoma Office of the Attorney General to support the Oklahoma opioid abatement grant program.

Type of administration	Pros	Cons
Nasal spray	Ease of use, portability	More expensive
Intramuscular injection	Less expensive	Laypeople may be uncomfortable administering an injection
Auto-injector	Ease of use (similar injection method to an EpiPen)	More expensive

Focus population

The potential audience for naloxone distribution is broad, but programs can consider starting with one of the following priority groups:

- People who use drugs (including stimulants such as methamphetamine, due to widespread fentanyl contamination and intentional co-use of stimulants and opioids)
- Friends, family, and others close to or directly serving people who use drugs
- Schools
- First responders
- Emergency room staff

EVIDENCE-BASED STRATEGIES FOR OPIOID ABATEMENT

Naloxone distribution as an opioid abatement strategy

Opioids were involved in about 75% of the 108,000 drug overdose deaths in the U.S. in 2022.⁸ However, increased availability of naloxone through overdose education and naloxone distribution programs have been strongly linked to decreased overdose death rates in multiple communities.⁹ States have used opioid settlement money for the expansion of naloxone distribution, and naloxone distribution is considered a well-supported intervention for opioid abatement.^{10, 11}

Opioid education and naloxone distribution are lifesaving and cost-effective.¹²

Years of research and evidence shows naloxone is safe, non-addictive, and has been used by medical professionals to temporarily restore a person's breathing after an opioid overdose.¹³

Available research indicates that naloxone distribution does not increase drug use.¹⁴

Nearly 40% of people who overdose are not alone when overdose occurs. Since naloxone cannot be self-administered, deaths are preventable by equipping bystanders with naloxone and education.¹⁵

Risk of opioid overdose is higher after someone is released from prison or jail or discharged from treatment, but naloxone distribution can help reduce injury and deaths during critical transitions for people who use opioids.¹⁶

Implementation considerations

Consider distributing naloxone and fentanyl test strip supplies directly to residents or to community organizations that support people after an overdose through services, referrals, and outreach.

Consider providing naloxone in bulk to supply points that offer 24/7 access in the community, such as at fire stations or other hosted locations.

When possible, naloxone distribution should be supported by training or educational materials to ensure people can identify when someone is overdosing and administer naloxone correctly.



Debunking naloxone myths

- You do not need medical training to administer naloxone
- Exposure to naloxone cannot harm the person giving or receiving it
- Naloxone is not a controlled substance or illegal to possess
- It is effective at reversing overdoses from prescribed and illicit opioids
- Distribution of naloxone does not increase or promote drug use

Additional reading and resources

[Naloxone overview](#) from the Centers for Disease Control and Prevention

[Overdose prevention and response toolkit](#) from the Substance Abuse and Mental Health Services Administration

[Naloxone and fentanyl test strip distribution](#) through the Oklahoma Department of Mental Health and Substance Abuse Services

EVIDENCE-BASED STRATEGIES FOR OPIOID ABATEMENT

References

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- 2 <https://www.fda.gov/drugs/postmarket-drug-safety-information-patients-and-providers/information-about-naloxone-and-nalmefene>
- 3 <https://www.cdc.gov/stop-overdose/caring/naloxone.html>
- 4 <https://harmreduction.org/issues/overdose-prevention/overview/overdose-basics/understanding-naloxone/>
- 5 <https://ldi.upenn.edu/our-work/research-updates/expanding-access-to-naloxone-a-review-of-distribution-strategies/>
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- 10 <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2819204>
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