

A Shadowed Existence

Prisoners face numerous health risks, but one of the deadliest threats to women in particular lurks just outside the jailhouse walls.

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Virginia Suarez expected to start life anew after being released from prison in New York. Instead, she was closer to death: Suarez accidentally overdosed four times. Lucky for her, none of these incidents was fatal. “When you finish your sentence, [the criminal justice system] puts you on the streets,” she says. “You have no home, no job, nothing, so some people turn to drugs.”

The period of greatest risk for overdose occurs shortly after release from incarceration. Particularly for women who struggle with mental health issues or substance abuse, the stress of dealing with parole requirements, housing restrictions, employment discrimination and child custody battles can draw many to drugs as a way to cope. In addition, the body’s tolerance level for opiates in particular drops after periods of abstinence. This means previously addicted women who are drug-free while incarcerated are at greater risk of an unintentional overdose if they start using again.

For the past five years, drug overdose has surpassed auto fatalities as the leading cause of accidental death in the United States. According to a study in the *New England Journal of Medicine*, people recently discharged from prison are 129 times more likely to die from an overdose than the general population during their first two weeks of release, and women are at significantly higher risk than men.

“We had a 22-year-old client die from overdose the day after she was released from jail,” says Deon Haywood, director of Women With a Vision, a nonprofit that provides health services and support to women of color in New Orleans. “She’d written us a letter saying that she hoped to turn her life around and reconnect with her mother when she got out. She didn’t get that chance.”

Indeed, second chances are becoming increasingly scarce when it comes to drug overdose. According to a July 2013 report by the Centers for Disease Control and Prevention (CDC), national overdose rates for women have increased fivefold during the past decade. But for women recently released from incarceration, the rates are even higher. What’s more, the National Center on Addiction and Substance Abuse reports that while 65 percent of the U.S. prison and jail population meets the criteria for substance abuse, only 11 percent receive treatment while incarcerated.

Fortunately, new solutions are sweeping the country and offering ways to reduce death from drug

overdose for formerly incarcerated women: 911 Good Samaritan laws and access to the overdose antidote naloxone.

The 911 Good Samaritan laws, now enacted in 14 states and the District of Columbia, encourage people who witness or experience an overdose to seek help. The legislation grants limited immunity to drug users from substance abuse or drug paraphernalia charges if they call 911. Studies show that more than half of drug overdoses occur in the presence of a friend or family member, but fear of police involvement deters the majority from seeking help. For people with a criminal history in particular, dialing 911 and summoning the police could have serious consequences, including a return to jail for parole violations.

“If people are reluctant to seek help [for an overdose] because they fear potential prosecution, granting them a level of immunity will facilitate 911 calls and save lives,” explains Daryl Atkinson, a former inmate who is now an attorney with the Southern Coalition for Social Justice. Atkinson’s reasoning is supported by findings from a recent Washington study that showed people who use drugs are 88 percent more likely to call for help if their state enacts a 911 Good Samaritan law.

The other new lifesaving legislative reform increases access to naloxone, a medication that reverses the effects of overdose from opiates, or pain relievers. Similar to the EpiPen that’s prescribed for allergic reactions, naloxone is safe and effective to use even by people with no medical training. Although the drug is available by prescription in all states, fear of civil liability often deters doctors from prescribing naloxone to opiate-using patients, and it often keeps bystanders from administering the antidote.

Currently, 13 states and the District of Columbia have enacted laws to remove these liabilities, and the CDC reports that community programs have distributed about 53,000 naloxone kits to people at risk of overdose. The result? The drug saved more than 10,000 people from overdosing. “[Women With a Vision] gave naloxone to a young woman just released from jail,” says Deon Haywood. “A couple [of] days later, she had already used it to save someone in her family.”

The 911 Good Samaritan and naloxone access laws are still new—most were enacted between 2010 and 2013—and many people are viewing them as a healthier way to handle the rising threat of just-released inmates dying of overdose. In addition, these laws create a greater public awareness of the topic and also offer a departure from a strictly punitive response to drug use. The legislation is a move toward a more rehabilitative, health-centered approach to substance abuse.

It remains to be seen whether this trend will continue. But with U.S. incarceration rates the highest in the world, and with overdoses claiming more women and men’s lives each year, even a small step in the right direction gives hope.

