

# Naloxone Information for Community-Based Advocates

## What Is Naloxone?

Naloxone is a liquid, injectable medication whose sole function is to remove opioid chemicals from receptor sites in a person's brain. In an opioid overdose situation, a person's brain stem stops signaling for the person to breathe. When Naloxone is administered, the medication pushes all opioid chemicals from the receptor sites which allows the brain to resume signaling for the person to breathe. Naloxone comes in a pre-filled syringe or in a single dose vial that requires a needle.

Narcan is the brand name for the nasal spray version of Naloxone. It is a pre-filled, needle-free device that requires no assembly and is sprayed into one nostril while a person lies on their back. It comes in a two-dose carton for repeat dosing if needed.

There are several forms of Naloxone that are FDA approved. Injectable Naloxone and nasal spray Narcan are the two most commonly used and widely available across Colorado.

Naloxone, in any form, is an extremely safe medication that only has noticeable effects in people with opioids in their systems. Naloxone can cause detox or withdrawal symptoms, which may be uncomfortable or painful, so having health care access after the administration of Naloxone is extremely important. Some withdrawal symptoms may include headache, changes in blood pressure, rapid heart rate, sweating, nausea, vomiting, and tremors. Withdrawal symptoms may appear within minutes of Naloxone administration and subside in approximately two hours.

## Precautions to Consider

In most situations the benefits of administering Naloxone outweigh the risk or possible adverse reaction, but advocates should be aware of a few things before they use or distribute Naloxone to survivors. There are some precautions to consider, such as if it is known that someone is hypersensitive to naloxone hydrochloride, has a pre-existing cardiac disease or seizure disorder, or may need a lower dosage for geriatric use. There isn't adequate research about using Naloxone during pregnancy or when nursing. It is known that Naloxone crosses the placenta and may precipitate fetal withdrawal symptoms. It is possible for Naloxone to be transmitted during nursing, though it is recommended that if someone needs Naloxone for an opioid overdose not to breastfeed until the opioid drug is gone from their body. Opioids in breastmilk may cause sleepiness, problems with feeding and problems breathing for a baby. It's important for someone using opioids to discuss any concerns or questions with their healthcare provider and access follow up medical care after Naloxone has been administered.

## **How Prevalent is Opioid Overdose in Colorado?**

The misuse of opiates is a major public health epidemic in Colorado and across the U.S. There are several forms of opioids, including but not limited to Oxycodone, Morphine, Codeine, Fentanyl, Methadone, and Heroin. Data from the Colorado Department of Public Health and Environment (CDPHE) reports 543 opioid-related deaths in 2018 and 612 in 2019.

In response, the state of Colorado has been encouraging the use of Naloxone state-wide. All pharmacies in Colorado have standing orders and can provide Naloxone to anyone who requests it, and harm reduction organizations can also provide it. The Governor's Consortium for Prescription Drug Abuse Prevention, which is a collective of experts, has also been assembled to provide ongoing guidance and training. Anyone in Colorado can administer Naloxone and is protected from liability through public health harm legislation, including C.R.S. §18-1-711 and SB 13-014.

## **Harm Reduction Model**

Harm reduction is a set of practical strategies and ideas with the goal to reduce negative consequences and public health risks associated with drug use. It incorporates strategies of safer use and addresses conditions of use for individual and community needs and occurs between prevention of drug use and drug treatment. Harm reduction is also a social justice movement created to promote respect for people who use drugs and their rights.

Shared from the National Harm Reduction Coalition, some core principles of harm reduction practice are:

- Accepts, for better and or worse, that licit (prescription or over the counter) and illicit drug use is part of our world and chooses to work to minimize its harmful effects rather than simply ignore or condemn them.
- Understands drug use as a complex, multi-faceted phenomenon that encompasses a continuum of behaviors from severe abuse to total abstinence and acknowledges that some ways of using drugs are clearly safer than others.
- Establishes quality of individual and community life and well-being, not necessarily cessation of all drug use, as the criteria for successful interventions and policies.
- Calls for the non-judgmental, non-coercive provision of services and resources to people who use drugs and the communities in which they live in order to assist them in reducing attendant harm.
- Ensures that drug users and those with a history of drug use routinely have a real voice in the creation of programs and policies designed to serve them.
- Affirms drugs users themselves as the primary agents of reducing the harms of their drug use and seeks to empower users to share information and support each other in strategies which meet their actual conditions of use.
- Recognizes that the realities of poverty, class, racism, social isolation, past trauma, sex-based discrimination and other social inequities affect both people's vulnerability to and capacity for effectively dealing with drug-related harm.

- Does not attempt to minimize or ignore the real and tragic harm and danger associated with licit and illicit drug use.

### **Organizational Choices and Training**

It's important to know how to recognize and respond to a potential overdose, though it is more likely for someone to experience overdose when they are not around staff. Community-based organizations can choose to keep Naloxone in first aid kits to administer as needed, and also have the option to give Naloxone to survivors to carry themselves. It is encouraged that organizations have a policy and protocol regarding when to administer Naloxone along with follow up steps, including contacting medical care and disposal of any medical supplies. Organizations may also consider creating a policy and protocol for disposing of unused opioids or drug paraphernalia if a survivor wants to get rid of them, or if they are found or left unclaimed in a shelter. If getting proper materials, such as sharps containers, is a barrier for your organization using Naloxone, please reach out to Violence Free Colorado for support.

Advocates may have concerns regarding administering or providing Naloxone and it's important for organizations to explore the source of those concerns, including any judgment towards or assumptions about people who use drugs. It may be helpful to review the principles of harm reduction and explore how they might fit with an organization's mission and values. It can also be helpful to talk about concerns or questions with another community-based organization that has already implemented the use of Naloxone.

No formal training is required to dispense Naloxone. There are several videos available online, along with downloadable brochures and other prevention and education materials. *Also see the Resources section at the end of this document.*

Naloxone Brochure: <http://www.corxconsortium.org/wp-content/uploads/Naloxone-Brochure.pdf>

Naloxone video: <https://www.youtube.com/watch?v=JJmCfseNtsU>

4 forms of Naloxone administration: <https://www.youtube.com/watch?v=-xTKsHFBXII>

Multiple Naloxone videos: <https://prescribetoprevent.org/patient-education/videos/>

Narcan video: <https://www.narcan.com/patients/how-to-use-narcan>

Narcan video: <https://www.youtube.com/watch?v=tGdUFMrCRh4>

## **Considerations for Survivors of Domestic Violence**

People who have experienced trauma, especially interpersonal violence, have a greater likelihood of using substances. Substance use can be related to using pain medications to address injuries, as a way to moderate trauma symptoms, due to genetic predispositions, as a result of coerced use, or for other reasons. It's helpful to acknowledge how common substance use is and asking what survivors might need for support around this. Talking about substance use and Naloxone are directly a part of survivor safety and fit well within safety planning conversations within survivor-defined advocacy. It's also important to have referrals for substance use treatment available for survivors accessing shelter and non-residential services. Supporting survivors around using substances also makes your organization more accessible and trauma-informed.

If an organization chooses to keep Naloxone in first aid kits, it's important to inform survivors that it is available just like any other first aid or health-related items or any services available for survivors to access.

If an organization chooses to give Naloxone to survivors to carry on their person, additional safety planning is necessary and ongoing. When advocates are prepared to talk about substance use in general, as well as safety plan around overdose prevention and possible forced withdrawal as a tactic of abuse, survivors who use opioids are better supported and more prepared.

Some things to discuss with survivors:

- Who will they share information about having Naloxone and how to use it with?
- Where will they keep their Naloxone?
- Will it be nearby/accessible while they are using?
- Who is around when they are using?
- Is there access to follow up health care?
- While there are instances where someone could misuse Naloxone to force a survivor into withdrawal, that risk is much less likely or severe than someone actually dying from an overdose while using opioids.
- Being forced into withdrawal is painful and can definitely be used as a tactic of abuse; at the same time, people who choose to use abusive behaviors can use this as a tactic of abuse whether or not survivors are aware of and have access to Naloxone.

## How Can Community-Based Organizations Obtain Naloxone or Narcan?

### Colorado Department of Public Health and Environment

Community-based domestic violence organizations can obtain their own standing order for Naloxone under the category of a harm reduction organization using this Colorado Department of Public Health and Environment (CDPHE) link:

<https://www.colorado.gov/pacific/cdphe/naloxoneorders>

After obtaining a standing order, an organization can access Naloxone or Narcan for free through CDPHE's Naloxone Bulk Purchase Fund Opportunity.

1. Organization applies to the Naloxone Bulk Fund through an online application:  
<https://www.colorado.gov/pacific/cdphe/naloxone-bulk-purchase-fund-opportunity>
2. Organization attaches their standing order to the application
3. Each applicant is reviewed to confirm their standing order is current, the address is a physical address for shipping, and then an account is set up
4. Once confirmed eligible, the organization contact receives a Naloxone Order Form
5. Fill out the form, indicating how many units of each type of Naloxone the organization needs
6. Naloxone is shipped free to the agency at no cost
7. The steps above take 4-6 weeks

CDPHE can provide multiple types of Naloxone:

- Narcan nasal spray
- Naloxone in a pre-filled syringe
- Naloxone in a single dose vial without a needle

### Signal Behavioral Health Network

Another option to obtain Narcan nasal spray only is through Signal Behavioral Health Network, which is contracted through the Colorado Office of Behavioral Health to provide free Narcan to harm reduction organizations. After obtaining a standing order:

1. An organization completes and signs a Memorandum of Understanding (MOU) with Signal Behavioral Health Network

**For questions about Naloxone ordering through CDPHE:**  
Erin Flynn, MPH  
Naloxone Bulk Fund Coordinator  
Violence Injury Prevention-  
Mental Health Promotion Branch  
[erin.flynn@state.co.us](mailto:erin.flynn@state.co.us)

- a. Determine number of Narcan kits requested; include name, title, address and email of the person responsible for signing the MOU
- b. Provide name, title, address and email of the person who will be receiving the shipment of Narcan from Adapt Pharma. If it is the same as above, just note “same as MOU signer
2. Agree to provide monthly tracking of the distribution of Narcan (template will be provided, no personally identifying information is requested)
3. Train each individual who receives a Narcan kit from the organization
  - a. EMS or Harm Reduction Organizations may provide training to groups
  - b. Can download the OpiRescue app on a mobile phone
  - c. YouTube video: <https://www.youtube.com/watch?v=tGdUFMrCRh4>

**For questions about Narcan ordering through Signal Behavioral Health:**  
 Troy Bowman  
 Community Engagement Coordinator  
 Signal Behavioral Health Network  
[tbowman@signalbhn.org](mailto:tbowman@signalbhn.org)

## **Resources**

### **Colorado Department of Public Health and Environment (CDPHE)**

- Overdose Prevention  
<https://www.colorado.gov/pacific/cdphe/opioid-prevention>
- Obtain Standing Orders  
<https://www.colorado.gov/pacific/cdphe/naloxoneorders>
- Naloxone Bulk Purchase Fund Opportunity  
<https://www.colorado.gov/pacific/cdphe/naloxone-bulk-purchase-fund-opportunity>
- Public Health Harm Reduction Legislation  
<https://www.colorado.gov/pacific/cdphe/colorado-public-health-harm-reduction-legislation>
- Standing Orders for Harm Reduction Agencies  
[https://www.colorado.gov/pacific/sites/default/files/PW\\_Naloxone-standing-orders-template\\_Harm-Reduction.pdf](https://www.colorado.gov/pacific/sites/default/files/PW_Naloxone-standing-orders-template_Harm-Reduction.pdf)
- Colorado Household Medication Take Back Program  
<https://www.colorado.gov/pacific/cdphe/colorado-medication-take-back-program>
- CDPHE Data via Colorado Health Institute  
<https://www.coloradohealthinstitute.org/research/more-coloradans-died-drug-overdose-2019-fentanyl-related-deaths-spiked>

### **Colorado Consortium for Prescription Drug Abuse Prevention**

[www.corxconsortium.org](http://www.corxconsortium.org)

- Naloxone Brochure

<http://www.corxconsortium.org/wp-content/uploads/Naloxone-Brochure.pdf>

- Community Reference  
<http://www.corxconsortium.org/communityreference/>

### **Stop the Clock Colorado – pharmacy locator**

<http://stoptheclockcolorado.org/map/>

### **Harm Reduction Action Center (CO)**

[www.harmreductionactioncenter.org](http://www.harmreductionactioncenter.org)

- SB 13-014  
[http://harmreductionactioncenter.org/HRAC\\_DOCUMENTS/LEGAL/Naloxone.legislation.SB14.pdf](http://harmreductionactioncenter.org/HRAC_DOCUMENTS/LEGAL/Naloxone.legislation.SB14.pdf)

### **DVP Policy to consider: Safety Policies Template**

[https://drive.google.com/drive/folders/0B9eaXW7\\_92zScm9aU2FZa2l1Uzg](https://drive.google.com/drive/folders/0B9eaXW7_92zScm9aU2FZa2l1Uzg)

### **Colorado Department of Human Services**

Opioid Crisis in Colorado: The Office of Behavioral Health's Role, Research and Resources

<https://www.colorado.gov/pacific/cdhs/opioid-crisis-colorado-office-behavioral-healths-role-research-and-resources>

### **National Institute on Drug Abuse (NIDA)**

"Colorado: Opioid-Involved Deaths and Related Harms." Apr. 2020,

<https://www.drugabuse.gov/drug-topics/opioids/opioid-summaries-by-state/colorado-opioid-involved-deaths-related-harms>

### **National Harm Reduction Coalition**

<https://harmreduction.org/>

- Principles of Harm Reduction  
<https://harmreduction.org/about-us/principles-of-harm-reduction/>
- Opioid Overdose Basics  
<https://harmreduction.org/issues/overdose-prevention/overview/overdose-basics/responding-to-opioid-overdose/administer-naloxone/>

### **Futures Without Violence**

Health E-Bulletin, Fall 2018

<https://www.futureswithoutviolence.org/wp-content/uploads/Health-eBulletin-DVAM-18.pdf>

### **Substance Abuse and Mental Health Services Administration (SAMHSA)**

- Naloxone in Shelter Settings: A Success Story from Michigan, May 2019  
<https://www.samhsa.gov/homelessness-programs-resources/hpr-resources/naloxone-shelter-settings-success-story-michigan>
- Useful Resources on Opioid Overdose Prevention, Feb. 2020

<https://www.samhsa.gov/homelessness-programs-resources/hpr-resources/useful-resources-opioid-overdose-prevention>

### **The National Center for Biotechnology Information, National Institutes of Health**

Rhode Island Domestic Violence Shelter Policies, Practices, and Experiences Pertaining to Survivors With Opioid Use Disorder: Results of a Qualitative Study. E. Rothman, R. Stone, and S. Bagley, Nov. 2018 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6259060/>

### **Training Videos**

- Naloxone video: <https://www.youtube.com/watch?v=JJmCfseNtsU>
- 4 forms of Naloxone administration: <https://www.youtube.com/watch?v=xTKsHFBXII>
- Multiple Naloxone videos: <https://prescribetoprevent.org/patient-education/videos/>
- Narcan video: <https://www.narcan.com/patients/how-to-use-narcan>
- Narcan video: <https://www.youtube.com/watch?v=tGdUFMrCRh4>

### **Webinars**

- National Center on Domestic Violence, Trauma & Mental Health, Gabriela Zapata-Alma, LCSW, CADC “Overdose Prevention and Education and Response for Survivors of DV/SA” August 2020 <https://youtu.be/mvoYTuCNSqQ>
- National Center on Domestic Violence, Trauma & Mental Health, Gabriela Zapata-Alma, LCSW, CADC “Understanding the Dynamics and Context of Substance Use for Survivors of Domestic Violence and/or Sexual Assault” April 2020 [https://www.youtube.com/watch?v=p5F\\_CBGJFG8&list=PLtqTOxKbS28EtHkApLBIOB9G83XDbdLiW&index=6&t=4028s](https://www.youtube.com/watch?v=p5F_CBGJFG8&list=PLtqTOxKbS28EtHkApLBIOB9G83XDbdLiW&index=6&t=4028s)
- National Center on Domestic Violence, Trauma & Mental Health, Gabriela Zapata-Alma, LCSW, CDAC & Chicago Recovery Alliance, Iliana Espinosa-Ravi, MSW, MPH “Overdose Prevention and Reversal in Anti-Domestic Violence Advocacy” August 2019 <http://www.nationalcenterdvtraumamh.org/trainingta/webinars-seminars/2018-trauma-opioids-and-domestic-violence/>  
Webinar handout  
<https://drive.google.com/file/d/1qvTdFV8yuQ0tSa2XzLI-I9k2c8F9x49D/view>

### **Smartphone Apps**

- U-Turn Opiate Overdose, English  
<http://myhealthapps.net/app/details/189/u-turn-opiate-overdose-response>
- OpiRescue  
<https://opirescue.com/>