

Police-led addiction program in Gloucester shows first-year success, study finds

December 21 2016

About 95 percent of individuals with substance-use disorders who came to the Gloucester Police Department for help accessing addiction treatment were placed in detoxification or substance-use treatment programs during the first year of a widely publicized initiative aimed at combating the opioid epidemic, according to a report by Boston University researchers.

The report, in the *New England Journal of Medicine*, says that the "high direct-referral rate" by Gloucester [police](#) exceeds that of hospital-based initiatives designed to provide immediate access to detoxification and [treatment](#).

"Despite the many barriers, including previous arrests, that may prevent persons with an opioid-use disorder from engaging with police, 376 people sought help in the first year of this program," the report says.

The authors credited a number of factors for the program's success, including the motivation of participants to enter treatment, work by police to find placements and establish a relationship with a local treatment center, and state-mandated insurance covering drug detoxification.

In June 2015, the Gloucester Police Department began the initiative, dubbed the Angel Program, which encourages people with opioid use disorder to come to the department and ask for treatment help, with no threat of arrest. Officers work to place the substance users in local

treatment programs immediately.

From June 2015 through May of this year, more than 370 people came to police for assistance, says the report by School of Public Health (SPH), School of Medicine, and Boston Medical Center researchers. About half had previous drug arrests, and 83 percent reported last using opioids within a day of seeking help. Most of those requesting help (78 percent) reported injecting heroin, while 25 percent were using prescription opioids. About a third came from Essex County, including Gloucester; 41 percent came from other parts of the state.

In 94.5 percent of cases in which a person presented for assistance, police offered a direct treatment placement. And of those offered placements, 95 percent entered their assigned program.

In addition, 10 percent of participants came back to police after they relapsed for additional help, the authors said.

Lead author Davida Schiff, MD, a pediatric fellow at Boston Medical Center and student at SPH, said the results so far indicate that the program has filled a needed gap in accessing substance-use treatment services. She and senior author David Rosenbloom, professor of health law, policy and management at SPH, noted that more than 150 other police departments in 28 states have adopted similar programs.

BU researchers are tracking the program participants and will continue to monitor the Gloucester program.

"When the Gloucester police chief went on Facebook to announce that his officers were going to place individuals into treatment instead of jail, he changed the conversation about how communities should deal with the disease of addiction," Rosenbloom said. "As a result, lives are being saved every day all over the country."

Schiff said the power of the Gloucester model "has been to meet people where they are and to provide treatment on demand, 24 hours a day, when individuals present motivated to seek care." She said additional points of access "to a complicated, hard-to-navigate treatment system" are critical.

Police departments that have adopted the model say the Gloucester approach is a promising way to address the epidemic of heroin and prescription pain pills, which killed more than 47,000 people nationwide in 2014—more than died in car accidents, homicides or suicides.

More than 200 treatment centers across the country have signed on as partners.

During the period from 2009 through 2013, only 21 percent of people with opioid-use disorders received any type of treatment, according to a previous study.

Provided by Boston University Medical Center

Citation: Police-led addiction program in Gloucester shows first-year success, study finds (2016, December 21) retrieved 23 April 2024 from <https://medicalxpress.com/news/2016-12-police-led-addiction-gloucester-first-year-success.html>

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