Ending the Epidemic Task Force Recommendation Form



COMPLETE

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Q1: OPTIONAL: This recommendation was submitted by (please provide your first and last name, affiliation, and email address)

First Name Joe

Last Name Amon

Affiliation Director, Human Rights Watch

Email Address amonj@hrw.org

Q2: Title of your recommendation Ensure access to evidence based drug-

dependency treatment for incarcerated drug users.

Q3: Please provide a description of your proposed recommendation

Provide access to Medication-Assisted therapy (MAT) for prisoners dependent on opioids and ensure continuous availability including during prisoner transfers and through linkage to post-release care.

Q4: For which goal outlined in the Governor's plan to end the epidemic in New York State does this recommendation apply? (Select all that apply)

Respondent skipped this question

culturally and linguistically appropriate	Q5: This recommendation should be considered by the following Ending the Epidemic Task Force Committee (Select all that apply)	Prevention Committee: Develop recommendations for ensuring the effective implementation of biomedical advances in the prevention of HIV, (such as the use of Truvada as pre-exposure prophylaxis (PrEP)); for ensuring access for those most in need to keep them negative; and for expansion of syringe exchange, expanded partner services, and streamlined HIV testing by further implementing the universal offer of HIV testing in primary care, among others. The Committee will focus on continuing innovative and comprehensive prevention and harm reduction services targeted at key high risk populations, as well as grantfunded services that engage in both secondary and primary prevention. Care Committee: Develop recommendations to support access to care and treatment in order to maximize the rate of HIV viral suppression. The Committee will promote linkages and retention in care to achieve viral suppression and promote the highest quality of life while significantly decreasing the risks of HIV transmission. Recommendations will also ensure a person centered approach is taken and that access to
	Q6: Does this recommendation require a change to an existing policy or program, or the creation of a new policy or program?	Respondent skipped this question
an existing policy or program, or the creation of a question	Q7: Would implementation of this recommendation be permitted under current laws or would a statutory change be required?	Respondent skipped this question
an existing policy or program, or the creation of a new policy or program? Q7: Would implementation of this recommendation be permitted under current laws or would a question Respondent skipped this question	Q8: Is this recommendation something that could feasibly be implemented in the short-term (within the next year) or long-term (within the next three to six years)?	Respondent skipped this question

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Q9: What are the perceived benefits of implementing this recommendation?

Medication-assisted therapy for example with methadone or buprenorphine, prevents opioid withdrawal, decreases opiate craving, and diminishes the effects of illicit opioids. Often called opioid substitution therapy or opiate agonist therapy, MAT is one of the most effective and best-researched treatments for opioid dependence. Once a patient is stabilized on an adequate dose it relieves cravings and permits a person to function normally.

While medication-assisted therapies are among the most effective treatment for opioid dependence, they also play a crucial role in reducing the transmission of disease among injection drug users. The World Health Organization (WHO), the United Nations Office on Drugs and Crime (UNODC), and the Joint United Nations Programme on HIV/AIDS (UNAIDS) have each supported the expansion of MAT because it has proven effective for HIV and hepatitis C prevention, as well as reducing illicit opioid use and deaths due to overdose, improving uptake and adherence to antiretroviral treatment for HIV-positive people who use drugs, and is cost-effective to society.

Q10: Are there any concerns with implementing this recommendation that should be considered?	Respondent skipped this question
Q11: What is the estimated cost of implementing this recommendation and how was this estimate calculated?	Respondent skipped this question
Q12: What is the estimated return on investment (ROI) for this recommendation and how was the ROI calculated?	Respondent skipped this question
Q13: Who are the key individuals/stakeholders who would benefit from this recommendation?	Respondent skipped this question
Q14: Are there suggested measures to accompany this recommendation that would assist in monitoring its impact?	Respondent skipped this question
Q15: This recommendation was submitted by one of the following	Respondent skipped this question