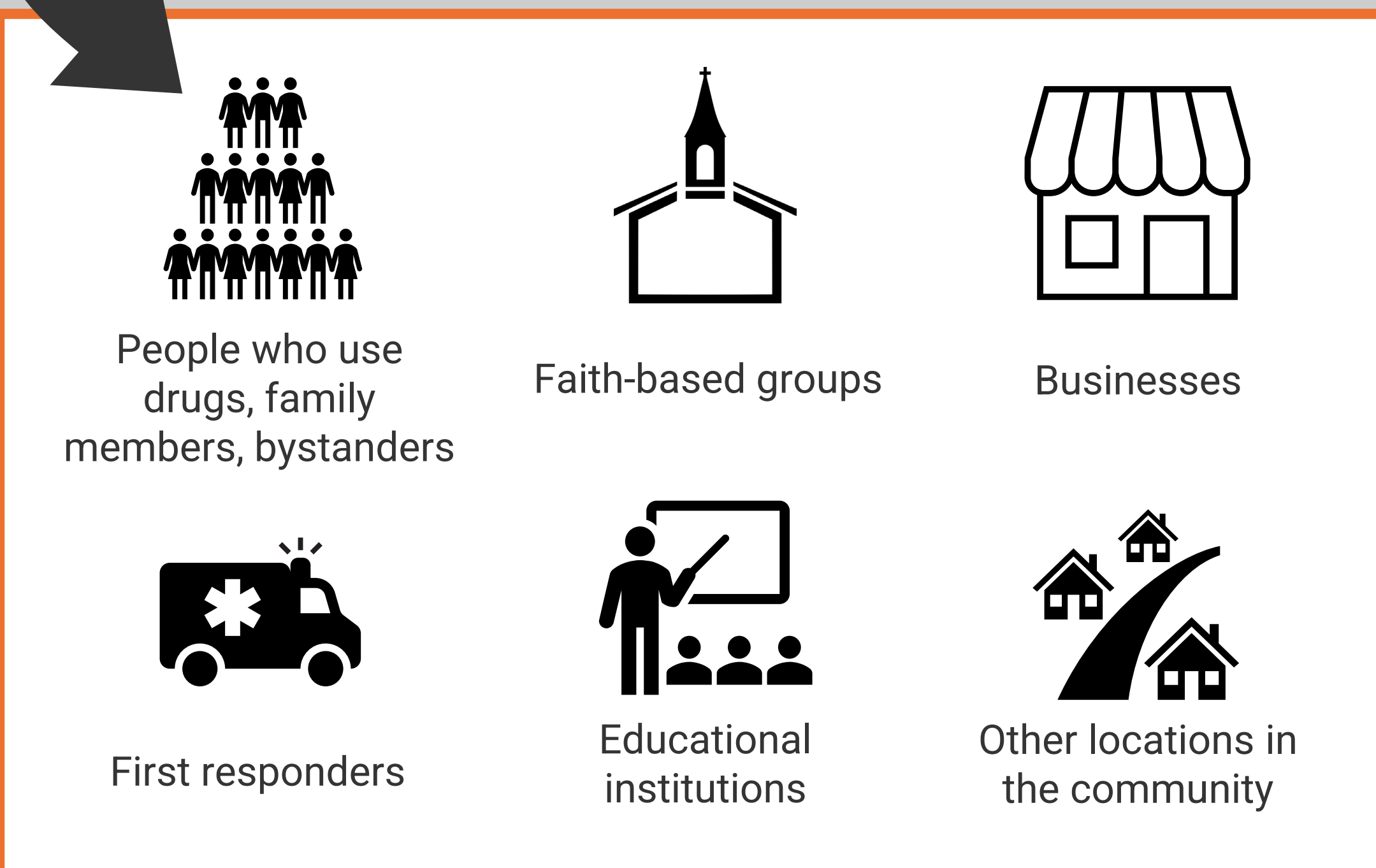
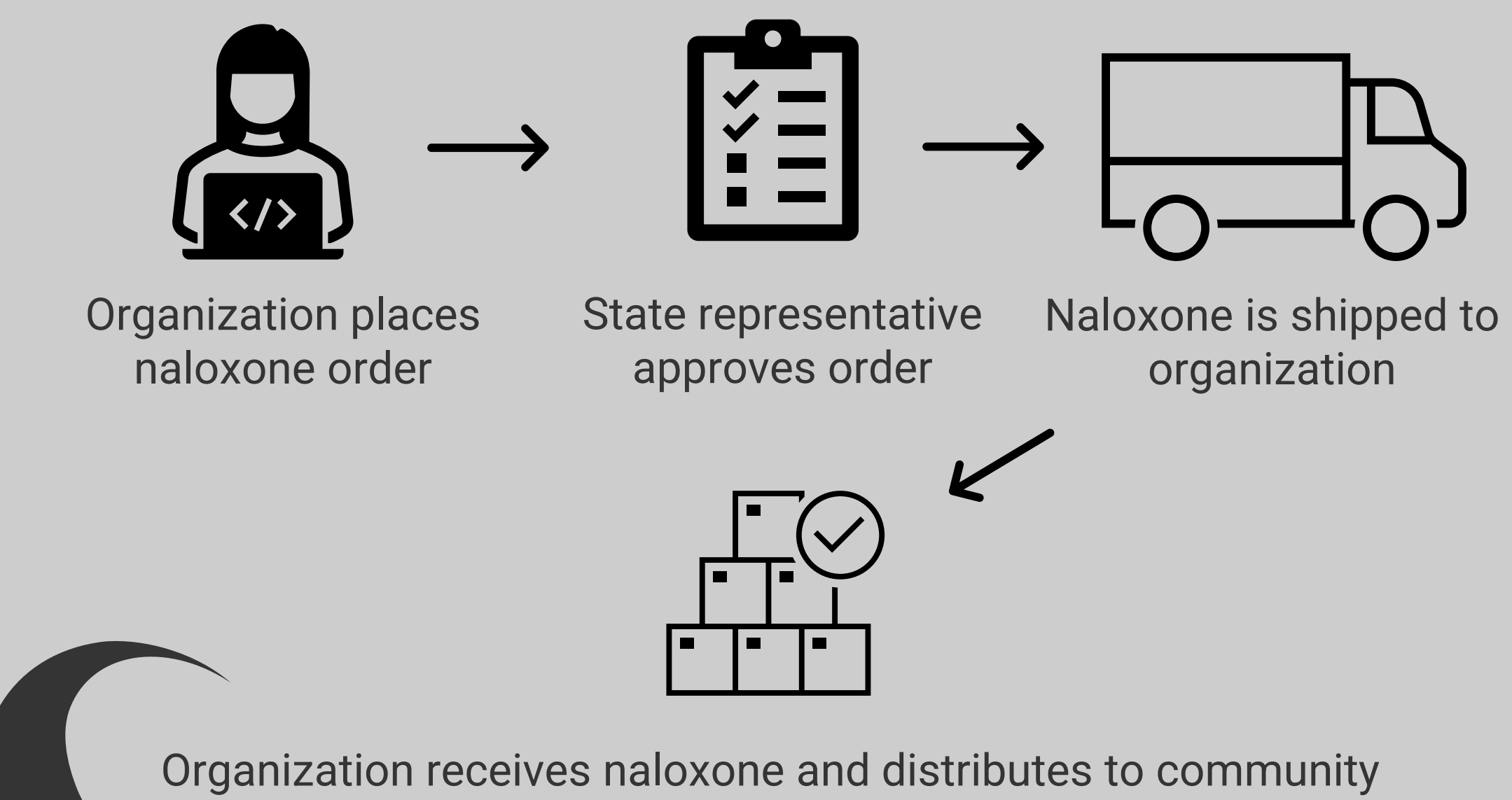


BACKGROUND

- Naloxone is a life-saving intervention that can reverse opioid overdoses and plays a critical role in mitigating the harms of the ongoing opioid crisis (1).
- A program in Illinois provides free nasal naloxone through an online portal to organizations registered as Overdose Education and Naloxone Distribution (OEND) programs or Drug Overdose Prevention Programs (DOPP).
- These organizations include harm reduction agencies, non-profit community organizations, substance use disorder treatment programs, medical and public health facilities, and criminal justice institutions.
- Program processes:

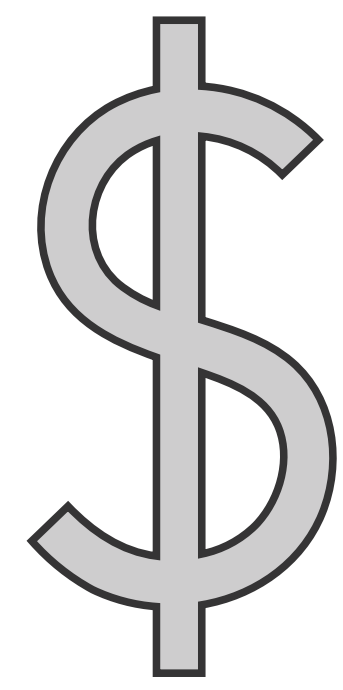


METHODS

- From June to August 2024, we conducted 15 key informant interviews with Illinois policymakers, implementation partners, and representatives from programs that ordered naloxone through the online portal.
- The semi-structured interview guides explored successful aspects of implementation, challenges related to ordering, distributing, and tracking naloxone in communities, potential outcomes of the project, and the sustainability of distribution efforts.
- All interviews were recorded, transcribed, and coded using Dedoose qualitative software. Using an applied analysis approach, we identified common themes and synthesized the findings (2).

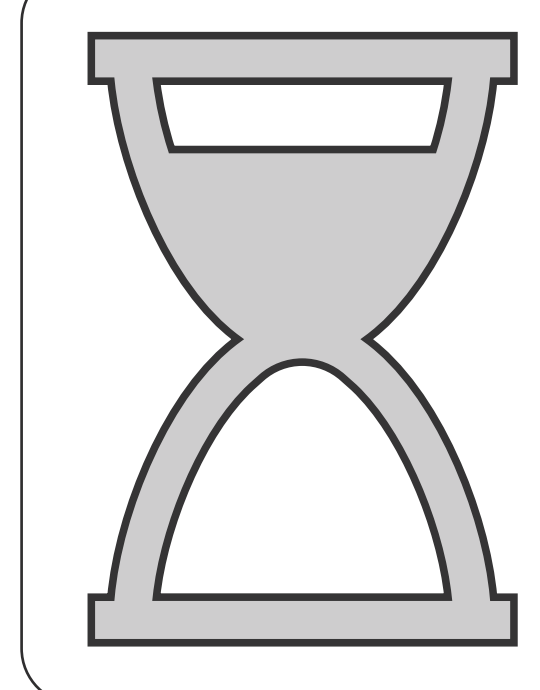
RESULTS

IMPROVED RESOURCE ALLOCATION



With the program covering the cost of naloxone, organizations could allocate more funds to other harm reduction supplies (e.g., fentanyl test strips) and increased staffing for education and distribution. Several participants also appreciated that there was no restriction on how much naloxone they could order.

ENHANCED ORDERING EFFICIENCY



The process of ordering and receiving naloxone was fast, user-friendly, and efficient, with few challenges noted. Participants emphasized that the quick turnaround time from ordering to receipt of the naloxone was crucial in responding to spikes in overdose trends in specific neighborhoods.

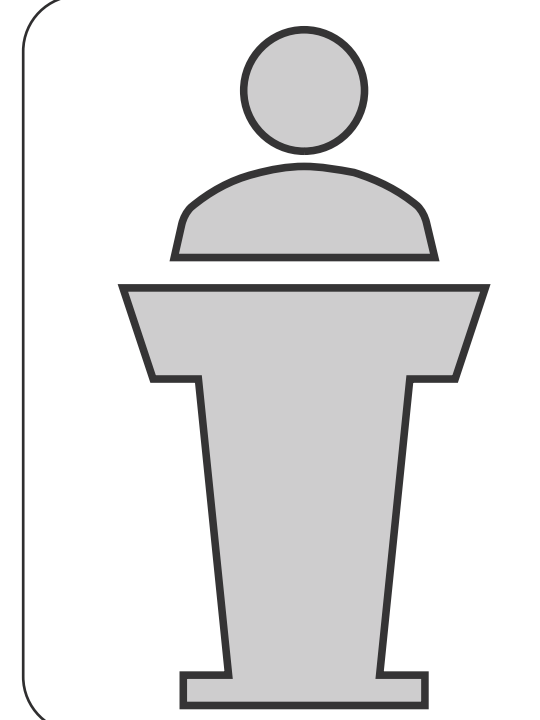
“Being able to have this access to naloxone, it’s the most important resource that we distribute. The cost of each box is [otherwise] absolutely prohibitive to us [without this program].”

INCREASED TRUST AND PREDICTABILITY



The consistent supply of naloxone provided predictability for those seeking access to this life-saving medication, increasing trust between individuals and the community organizations that serve them.

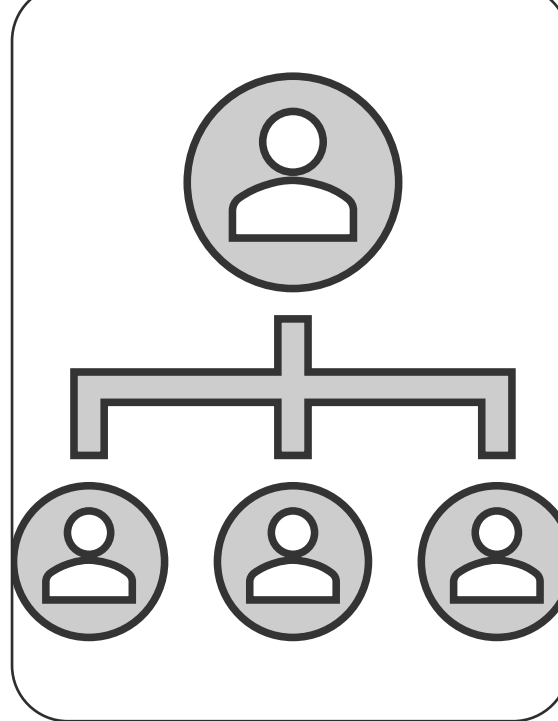
REDUCED STIGMA



The program helped reduce stigma and promoted acceptance of the medication by increasing awareness, education, and training. Naloxone served as an entry point for deeper conversations about harm reduction and substance use. However, participants noted that additional efforts to further reduce stigma are needed.

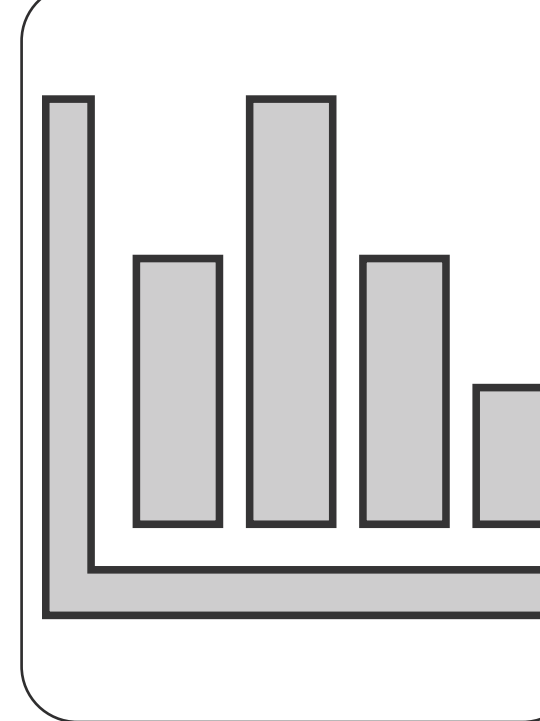
“Our ability to be out in the community providing [naloxone] without running out is a game changer. It allows us to have a consistent presence... [It offers] predictability for us and predictability for the community that we’re going to be available.”

EXPANDED ACCESS AND INSTITUTIONAL BARRIERS



The program facilitated access to naloxone for a wide range of organizations, including many that did not previously distribute the medication. However, many hospitals, educational institutions, and correctional facilities faced policies that created barriers to obtaining and distributing naloxone.

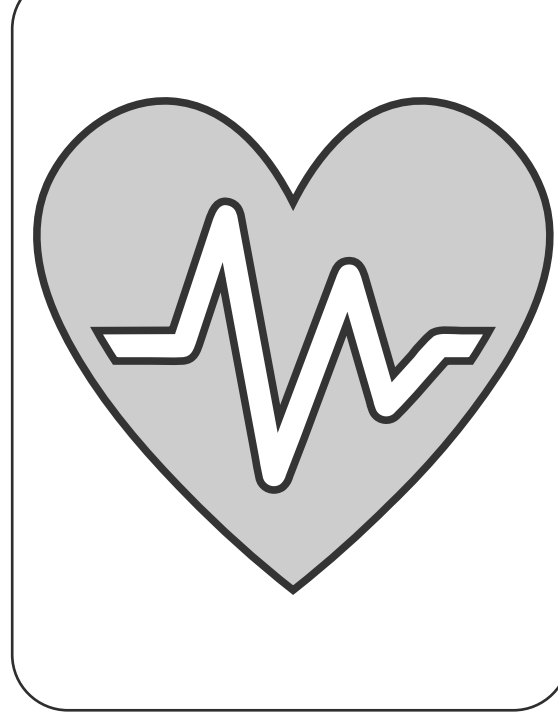
DATA COLLECTION CHALLENGES



Organizations were required to report the number of naloxone boxes distributed, recipient demographics, and overdose reversals. Participants noted that some organizations did not enroll in the DOPP due to administrative issues. Collecting and tracking accurate data during overdose situations is a national challenge.

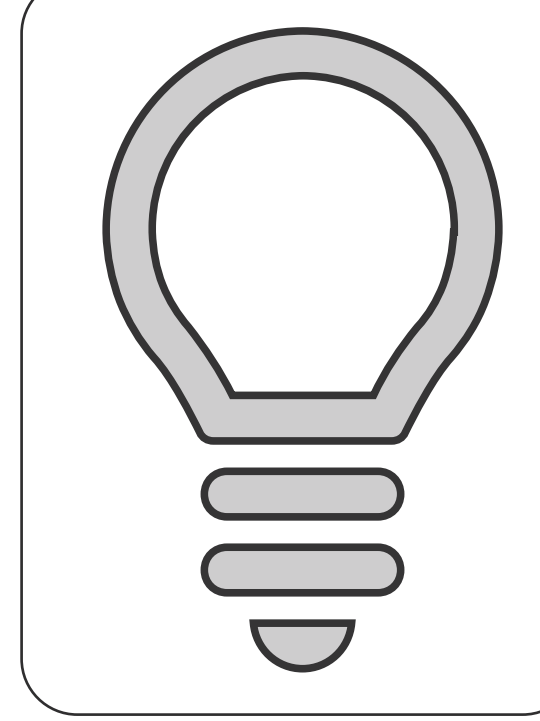
“[More naloxone access] has a direct correlation with more people surviving... Because people do recover. People can recover. They just need to be given the chance to do it... In a nutshell, that is what this program is doing.”

IMPACT ON OVERDOSE FATALITIES



The program was cited as playing a critical role in saving lives across Illinois. Many participants highlighted reductions in overdose fatalities and increases in non-fatal overdoses, attributing these trends to the widespread distribution of naloxone.

SUSTAINABILITY CONSIDERATIONS



Most participants felt the program should offer intramuscular naloxone, as some people who use drugs prefer it and it is less costly than the nasal option. All participants expressed concern that reduced funding for this program would limit naloxone availability, potentially increasing overdose fatalities.

“The loss [of this program] would be devastating to our work, no question about it. Especially for communities of color, the communities we serve, it would be like, ‘See, told you,’ and it would be a real slap in the face.”

DISCUSSION

In conclusion, this Illinois program increased the distribution of a life-saving intervention for opioid overdoses. Trends in overdose statistics (3) and anecdotal evidence strongly suggest the program helped reduce fatalities. While the program expanded naloxone access in the community, further work is needed to reach more individuals at risk.

Recommendations:

- Continue to fund and expand naloxone distribution efforts.**
- Offer intramuscular naloxone** alongside the nasal option on the program site to accommodate different preferences and reduce costs.
- Encourage more organizations to register** with the DOPP and distribute naloxone provided through the program.
- Streamline data collection requirements** and reduce administrative burden of program participation.
- Consider funding wastewater analysis** to collect more accurate information about naloxone distribution and program impacts (4).
- Introduce legislation requiring health insurers to reimburse hospitals for distributing naloxone** upon discharge.
- Leverage trusted messengers to promote naloxone distribution** in hospital, educational, and correctional settings.

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