A Qualitative Review of Policy Landscape: Facilitators and Barriers to Pharmacy-based Naloxone, Buprenorphine and Syringe access across four-states

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Background

Respond to Prevent (R2P) is a multi-component, randomized control trial implemented in four states (Massachusetts, New Hampshire, Oregon and Washington), in two large pharmacy chains with the aim of improving naloxone dispensing, buprenorphine prescribing, and non-prescription syringe sales.

Objective

The goal of this study was to identify facilitators and barriers (e.g. state-specific policies, store policies, regional characteristics) to R2P intervention implementation and effectiveness.

Methods

Methods: A mixed-methods approach consisting of:

1) An environmental scan of published academic literature and online materials from June 2021-October 2021

2) State specific timelines of key events pertaining to those policies and practices and

3) Semi-structured interviews with stakeholders (key informants) at the state and local levels (N=36) to provide further context for the policies and practices we discovered.

Results

Key informants (KIs) discussed state policies, pharmacy policies and local practices that facilitated access to naloxone, buprenorphine and syringes.

Interviewees from all states spoke about the impact of naloxone standing orders, active partnerships with community-based harm reduction organizations, and some federal and state policies like Medicaid coverage for these medications and buprenorphine telehealth permissions as key facilitators.

KI’s also discussed barriers like:

- Stigma
- Rurality
- Restrictive pharmacy policies
- High costs

“[High prices, even with health insurance] are a major factor when most patients refuse naloxone; as much as 10% [of refusals] were due to the cost of the copay” -- Massachusetts Key Informant

“There are counties where you have to drive several hours to access any kind of harm reduction services or primary care services or dental services, it’s not just these kind of services, right, like these are challenges the state faces and access to all kinds of healthcare” -- Oregon Key Informant

Conclusion

Findings from this study highlight facilitators and barriers across four states with respect to naloxone, buprenorphine and syringes access. Our results demonstrate the important role that harm reduction-related policies play in institutionalizing these essential services in communities and pharmacies while also identifying structural barriers where more focused state and local attention is needed.

RESPOND TO PREVENT (R2P) is an intervention dedicated to expanding harm reduction services in community pharmacies A four-state randomized trial funded by the National Institute on Drug Abuse (NIDA)