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Re: NC Good Sam Overdose Laws

Date: April 4, 2019

Good Samaritan Overdose Laws in North Carolina

Executive Summary

Accidental deaths by drug overdose have risen significantly in recent years, prompting the implementation of policies to reduce these deaths.

Good Samaritan laws have been a primary policy to address this issue.

North Carolina's Good Samaritan law is already better than laws in many other states, however, the state can benefit from increasing awareness of its law and expanding other drug-related policies to curb the high rates of overdose deaths.



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Good Samaritan Laws and the Opioid Epidemic

In 2016, overdose deaths surpassed motor vehicle accidents as the primary cause of injury-related death in the U.S.¹ A 2018 Gallup poll found that 69% of Americans believe that illegal drugs are an "extremely" or "very" serious problem in the country.² However, more overdose deaths are caused by prescription drugs than illegal drugs. Currently, 40 states have implemented Good Samaritan laws that provide varying immunity to people who seek medical attention during an overdose to reduce the number of accidental drug-related deaths.

Good Samaritan laws encourage bystanders to take action to attempt to save the lives of people who are overdosing. It is estimated that between 58% and 86% of overdoses occur in the company of others, making Good Samaritan laws a feasible way to decrease opioid deaths.³ Good Samaritan laws offer protections from certain criminal charges mostly related to drug use and possession. If a witness or victim of a drug overdose possesses illegal drugs, they may hesitate to contact emergency assistance. The law may protect an individual from these criminal charges and make it more likely that they contact emergency services to aid a person suffering from a drug overdose as soon as possible.

Good Samaritan Laws in North Carolina

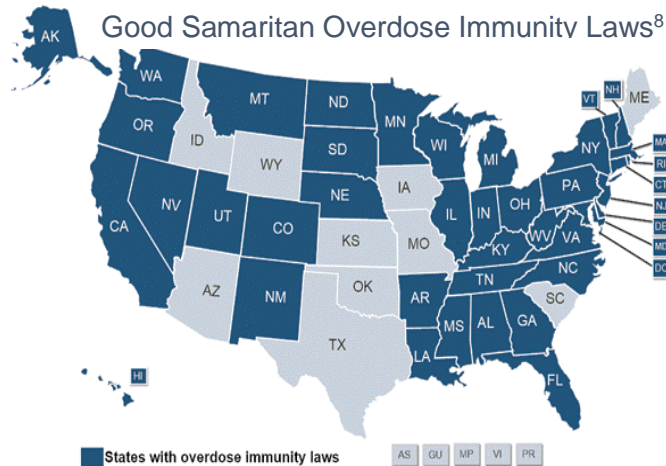
In 2017, North Carolina saw the second highest increase in opioid overdose deaths in the country, with 2,323 deaths in one year.⁴ This 22.5% increase in deaths from 2016 followed a nearly 40% increase from 2015 to 2016, showing the severity of the opioid epidemic in NC. Also, in 2015, the economic cost of unintentional opioid overdose death in the state was estimated at over \$1.5 billion.⁵

In North Carolina, Senate Bill 20 passed in 2013, protecting a person who seeks medical assistance for themselves or someone else experiencing an overdose from criminal prosecution for minor drug charges or underage drinking. In 2015, Senate Bill 154 passed, stating that a person seeking medical assistance and the victim of the overdose cannot be considered in violation of their parole or probation. Senate Bill 154 also requires a person seeking medical assistance to provide their full name to 911 or law enforcement to receive immunity.⁶

To address the ambiguities common in Good Samaritan laws, a bill modifying the language in North Carolina's current law recently passed in the Senate and is awaiting vote in the House. Senate Bill 106 aims to clarify the law to make it clear that victims of overdoses can be granted immunity even if they weren't the caller. This bill aims to encourage bystanders to seek help for overdoses without having to put their friends or loved ones at risk of legal ramifications.⁷

Limitations of Good Samaritan Laws

- Requiring individuals seeking help for an overdose to provide their full name can be a major deterrent from calling 911. This is a requirement for almost all Good Samaritan laws to be eligible for immunity and may limit their effectiveness.
- Fear of law enforcement, especially by minority groups who are disproportionately targeted by the law, can be another limitation of Good Samaritan laws' effectiveness in reducing overdose deaths.
- Due to vague language, Good Samaritan laws can be interpreted differently. This often allows the law to be implemented inconsistently and is often dependent on prosecutors' and law enforcements' understanding of the law.
- Because there has been a massive increase in the use of opioids in recent years, it is difficult to measure the effects of Good Samaritan laws in reducing overdose deaths, making it difficult to evaluate and improve these policies.



While all Good Samaritan laws provide some legal protection for bystanders and/or victims of overdoses, their characteristics vary. Almost all laws require 911 callers to provide their full name to authorities. Also, most laws do not offer protection related to crimes involving the sale, distribution, or trafficking of controlled substances.

Policies Across the Country

Limited Immunity Policies

New York's 2011 Good Samaritan law provides immunity from charge and prosecution for possession of up to eight ounces of controlled substance, any amount of marijuana, paraphernalia offenses, and “sharing” of drugs. It does not provide protection for individuals on parole or probation or with an open warrant. Increases in emergency department visits for heroin overdoses after the enactment of the Good Samaritan law suggest that drug users and those around them were positively impacted by the policy change.⁹

In 2015, **Virginia** passed a safe reporting law that protects a person who seeks medical attention for themselves or another person overdosing. Policymakers have argued that the law is meant to protect only the caller, not necessarily the victim, unless they are the same person. Opponents of the law argue that bystanders will fear calling for help when the victim is incapacitated to protect them from facing criminal charges. The law is aimed to reduce the number of accidental overdose deaths, however, its vague language can be a deterrent for seeking help for an overdose.¹⁰

Likewise, **Alaska** only provides immunity to the person who summoned help, not specifically the overdose victim. **Colorado** and **Nebraska** only grant immunity to the first person who seeks help for an overdose, meaning that other bystanders may be prosecuted if they remain on the scene. **North Dakota** and **Ohio** limit the amount of times people can be eligible for immunity under their Good Samaritan laws. In North Dakota, immunity can only be granted once; in Ohio, it can be granted up to two times.¹¹

Other Good Samaritan Overdose Policies

Ohio's Good Samaritan law requires overdose victims to seek a screening and receive a referral for addiction treatment within 30 days of the overdose to be eligible for immunity. Although this law seems to be a proactive step in reducing overdoses, police and prosecutors often file charges immediately, rather than giving victims the full 30 days to seek treatment before charging them.¹² Ohio's law shows a common problem with the interpretation of Good Samaritan laws and how their enforcement can vary.

North Dakota's original Good Samaritan law required 911 callers to “cooperate with law enforcement.” This provision was removed by a bill in 2018 because bystanders who cooperated were sometimes forced to admit to larger crimes that led to prosecution, making witnesses of overdoses reluctant to call for help.¹³ This policy change may offer insight into removing the requirement for callers to provide their name to authorities.

SEE AN OVERDOSE? CALL 911. SAVE A LIFE.

The 911 Good Samaritan Law protects you when calling for medical help if you see or experience an overdose.

For more information on overdose prevention, support, or referral to treatment, call the 24/7 hotline, 1-888-NYC-WELL or visit www.nycwell.cityofnewyork.us



The image to the left shows an example of a PSA to increase awareness about Good Samaritan Laws in NY.¹⁴

Policy Recommendation

Ambiguous legislation can increase fear of prosecution and reduce the chance that a bystander will call for help. North Carolina's law could be improved by adding more comprehensive protections and being more specific about the protections offered. If it passes, Senate Bill 106 will improve these protections for overdose victims.

Also, laws like New York's that prevent bystanders from being prosecuted for sharing small amounts of drugs are effective in increasing the likelihood that someone will call 911.

Finally, North Carolina legislators should take additional steps to increase awareness of the law, train law enforcement, and continue to increase access to naloxone in order to limit the detrimental effects of the opioid crisis.

Other Strategies for Reducing Overdose Deaths

Naloxone Access

In addition to Good Samaritan laws, increasing private access to naloxone has been a strong policy to reduce accidental overdose deaths. Naloxone is a drug that blocks opiate receptors in the nervous system and is used to reverse opioid overdoses. The North Carolina Harm Reduction Coalition has distributed over 60,000 naloxone kits to users, their friends, and families in the last six years and over 10,000 of the kits have been used to reverse an overdose. This access was made possible by the State Health Director passing legislation to allow naloxone to be given to people at risk of overdose by pharmacies throughout the state.¹⁵ This is an example of a strong policy that can be successful in reducing overdoses in addition to Good Samaritan Laws.

Awareness

One of the largest barriers to efficacy with Good Samaritan laws is a lack of awareness. In Washington state, the government created a public service announcement that directed people to a website explaining the details of the Good Samaritan Law. The state also distributed informational wallet cards at clinics and put up posters about the law at drug treatment centers.¹⁶ In Seattle, people who visit safe needle exchange sites are also given wallet cards describing the state's Good Samaritan law.¹⁷

Representatives from the NC Harm Reduction Coalition visit methadone clinics across the state twice a year and provide patients with information and brochures about naloxone access and the state's Good Samaritan laws. Additional measures to increase awareness of the law would make Good Samaritan laws more effective in reducing overdose deaths.¹⁸

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