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f facebook.com/ceicmh

www.ceicmh.org

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## **USING THIS TOOLKIT**

This toolkit has been specifically designed for communities, families, and individuals facing the opioid epidemic. It is the goal of Community Mental Health Authority of Clinton, Eaton, and Ingham Counties (CMHA-CEI) that this toolkit helps family, friends, staff, and peers, to disseminate information about the opioid epidemic with their peer groups and community networks.

The intent of this Opioid Prevention Toolkit is to inform our networks about the opioid epidemic and increase awareness, promote local resources, and reduce stigma around behavioral health issues affecting our communities.

#### **GETTING STARTED**

All of the information found within this toolkit can be used to educate the public with background knowledge of opioid use and provide them with warning signs and risk factors. National, state, and local resources are also available. The information and resources within the Facebook post sections can be used to make posts on your personal/agency/community Facebook page to raise awareness around this topic.

All you need to do is simply:

- 1. Copy the post text,
- 2. Paste the post text,
- 3. Attach any images that may be specified, and
- 4. Post!

## **QUESTIONS?**

Should you have any questions or comments regarding the information and resources provided in this toolkit you can contact our skilled staff for assistance.

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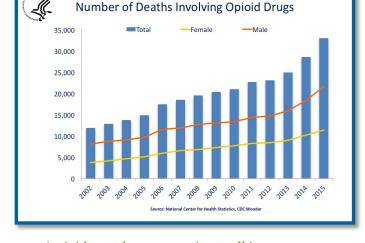
#### **OPIOIDS**

Opioids include prescription medications used to treat pain by acting on the body's central nervous system. Common opioids are morphine, codeine, methadone, oxycodone, hydrocodone, fentanyl, hydromorphone, and buprenorphine, as well as illegal drugs such as heroin and illicit potent opioids such as fentanyl analogs.

Opioids act as pain blockers. As the opioid connects with the human brains receptors, the body's perception of pain is diminished. Once the body's perception of pain is reduced, mood swings, slow breathing, and constipation may occur.

#### **DATA**

- All United States overdose deaths involving opioids increased to more than 42,000 deaths in 2016
- Men are 59% more likely than women to die due to opioid overdose
- Highest rates by racial groups: Whites, American Indians/Alaskan Natives, and Blacks
- Highest rate age group: 45-49 years old
- Opioid overdose deaths increased 27.7% from 2015-2016



**National Overdose Deaths** 

For more information, visit

https://www.samhsa.gov/capt/tools-learning-resources/opioid-overdose-prevention-toolkit

## WHO IS AT RISK?

- Anyone who uses opioids/heroin/prescription pain relievers for long-term management of chronic pain
- Anyone receiving rotating opioid medication regimens
- Anyone that has been discharged from emergency medical care following opioid overdose
- Anyone that has finished opioid detoxification or is abstinent for a given time
- Anyone released from incarceration
- Anyone that has a history of opioid use disorder/opioid misuse/mental health disorder
- Anyone taking psychotropic medication while taking prescription opioids



#### OTHER RISK FACTORS

- Experienced childhood sexual abuse
- Belonging to a lower social class/lower household income
- Living in a rural area/having weaker social bonds
- Moving several times
- Experiencing a larger number of negative life events
- Alcohol misuse or illicit substance use among social network
- Greater peer substance abuse
- Greater parental favorable attitudes towards substance abuse or prescription drug misuse
- Being divorced/not being married
- Past 30-day alcohol misuse/30-day mental health disorder
- Having "fair" or "poor" general health/any type of pain conditions
- Having a prescription for opioids
- Past incarceration/previous admission to a psychiatric hospital
- Young age substance use/prescription use
- Any genetic factors/high levels of fatigue/poor appetite
- Paying for any prescription with cash/having a history of opioid abuse/opioid misuse
- Perception that prescription drug misuse is acceptable and safe/readily available

## PROTECTIVE FACTORS

- Having a high school diploma/college diploma
- Being a current student
- Having a higher commitment to doing well in school
- Having greater perception of substance abuse risks
- Being employed
- Having health insurance
- Having positive well-being
- Having a higher household income
- Having a stronger parental bond

## TREATING OPIOID MISUSE/OVERDOSE

Recognize the signs: Overdose signs may include unconsciousness or inability to awaken orally or upon sternal rub, slow or shallow breathing or difficulty breathing (choking, gurgling, snoring), fingernails or lips that are turning blue, slow heartbeat and/or low blood pressure.





## STRATEGIES TO PREVENT OPIOID MISUSE/OVERDOSE

- Encourage providers, individuals at risk, family members, friends, and others to learn how to prevent and manage opioid overdose
- Ensure access to treatment for persons who are misusing opioids or who have a substance use disorder
- Ensure ready access to naloxone (a synthetic drug, similar to morphine that blocks opiate receptors in the nervous system)
- Encourage the public to call 911
- Encourage prescribers to use state prescription drug monitoring programs (PDMPs)

## **NALOXONE**

Naloxone can be defined as a synthetic drug, similar to morphine that blocks opiate receptors in the nervous system. If a person is showing any signs of opioid overdose, naloxone should be administered. If naloxone is administered and the person is not responding, it is important to wait 2 to 3 minutes before administering another dose of naloxone.

Naloxone can be given by intranasal spray and by intramuscular (into the muscle), subcutaneous (under the skin), or intravenous injection.

The person who has been injected with naloxone may feel unpleasant, confused, or aggravated. It is important to provide reassurance and explain what is happening throughout the process. Individuals that have been injected with naloxone should be monitored for at least 4 hours following the last dose.

Naloxone can be used in life-threatening overdose situations with pregnant women. In addition to any person, the dosage, route of administration and overdose symptoms can cause side effects if not done properly. Continued rescue breathing is advised for individuals who are waiting for the naloxone effect to take place.

If a person is not responding to the naloxone, an alternative explanation for the clinical symptoms should be considered. Most likely the person is overdosing not on an opioid, but rather another substance and may need emergency medical attention.



#### SAFE DISPOSAL OF UNWANTED MEDICATIONS

Currently there are few safe and convenient ways for individuals to dispose of unused prescription drugs. Twenty to sixty percent of prescription medications go unused and are eventually disposed. Nearly all unused prescription and non-prescription over-the-counter pharmaceuticals enter either the solid waste system or the sewage system. Neither disposal method is environmentally sound. Pharmaceuticals flushed down the toilet pass through the sewage treatment plants, which are generally not designed to screen for these chemicals. Pharmaceuticals discarded in landfills can seep into the surrounding water table.

"The abuse of prescription drugs is our nation's fastest-growing drug problem," said Office of National Drug Control Policy Director Gil Kerlikowske. Because prescription drugs are legal, they are easily accessible, often from a home medicine cabinet. Further, some individuals who misuse prescription drugs, particularly teens, believe these substances are safer than illicit drugs because they are prescribed by a healthcare professional and sold behind the counter. Keep all medications that may be at risk for misuse locked up, even if expired or not in use.

A federal study released in June of 2010, found that ER visits for misused prescription and over-the-counter drugs are now as common as visits for the use of illegal drugs. In 2008, the misuse of pain relievers — including oxycodone, hydrocodone and methadone — led to about 305,000 ER visits, more than double the number in 2004. And this new study shows it is a problem that affects men and women, people under 21, and those over 21.

#### **About The Capitol Area Take Back Meds Program**

The Take Back Meds Program is a joint effort between local pharmacies, law enforcement, as well as government agencies to provide residents with safe, convenient access to proper medicine disposal. Take Back Meds includes many local pharmacies and law enforcement agencies accepting your unwanted medications. Disposing of your medicines at one of these locations will ensure that your medicines will not be stolen from the garbage, will not enter our environment and deters abuse and overdoses at home.



## www.takebackmeds.org



#### RESOURCES FOR COMMUNITIES

#### LOCAL

## Community Mental Health Authority of Clinton, Eaton, and Ingham Counties Central Access

If you need behavioral health services, call Central Access 24 hours, 7 days a week.

812 East Jolly Road, Lansing, MI 48911

Toll Free: 1-888-800-1559 Local: 517-346-8318 http://ceicmh.org/

## Community Mental Health Authority of Clinton, Eaton, and Ingham Counties Substance Abuse Services

Local: (517)-676-4905

http://ceicmh.org/services/sas

#### **Ingham Health Department**

Achieving optimum health by advocating for the health and well-being of the community.

**Ingham Opioid Abuse Prevention Initiative** 

5303 South Cedar Street, Lansing, MI 48911

(517)-887-4311

http://www.hd.ingham.org/records,datareporting/inghamopioidabuseprevention.aspx

#### Capital Area Take Back Meds

Opioids can be disposed of properly.

Find your location here!

http://www.takebackmeds.org/

#### **Families Against Narcotics (FAN)**

Raising awareness of the prescription opiate drug abuse epidemic

Ingham: Monthly meetings held at 1020 S. Harrison Rd, East Lansing MI

(517)-898-3236

Eaton: 1848 S. Cochran Ave, Charlotte, MI 48813

https://www.familiesagainstnarcotics.org/ingham-okemos



#### **STATE**

#### Michigan Department of Health and Human Services

*Provides helpful information regarding substance use disorders and what you can do to help.* 333 South Grand Avenue, Lansing, MI 48909 | (517)-373-3740

Behavioral Health and Developmental Disabilities Administration

https://www.michigan.gov/mdhhs/0,5885,7-339-71550\_2941\_4871\_79584---,00.html

#### **NATIONAL**

#### Substance Abuse and Mental Health Services Administration (SAMHSA)

A confidential and anonymous source of information for persons seeking treatment in the United States for substance abuse and addiction/ mental illness.

5600 Fishers Lane, Rockville, MD 20857 | (800)-662-4357

**Behavioral Health Services Treatment Locator** 

https://findtreatment.samhsa.gov/

Buprenorphine Treatment Practitioner Locator <a href="https://www.samhsa.gov/medication-assistedtreatment/physician-program-data/treatment-physician-locator">https://www.samhsa.gov/medication-assistedtreatment/physician-program-data/treatment-physician-locator</a>

Single State Agencies for Substance Abuse Services

https://www.samhsa.gov/sites/default/files/ssa-directory.pdf

**State Opioid Treatment Authorities** 

https://dpt2.samhsa.gov/regulations/smalist.aspx

#### **Association of State and Territorial Health Officials**

Aims to organize resources to identify the gaps to coordinate the planning of strategic conversations.

Preventing opioid misuse in the states and territories.

http://my.astho.org/opioids/home

#### **Centers for Disease Control and Prevention**

"Works to protect America from health, safety, and security threats."

1600 Clifton Road, Atlanta, Ga 30329 | (800)-232-4636

Poisoning - http://www.cdc.gov/homeandrecreationalsafety/poisoning

Understanding the epidemic - http://www.cdc.gov/drugoverdose/epidemic



#### **FACEBOOK POSTS**

- In need of assistance with a mental illness or substance use disorder? Call 1-888-800-1559 today or go to <a href="http://ceicmh.org">http://ceicmh.org</a> to seek additional resources.
- 24 hours a day, 7 days a week Central Access at CMHA-CEI is open. Get help now! http://ceicmh.org

Toll Free: 1-888-800-1559Local: 517-346-8318

- "From 2015 to 2016, opioid overdose deaths increased 27.7%." Click the article to read more!
   #OpioidOverdose
   https://www.cdc.gov/mmwr/volumes/67/wr/mm6709e1.htm?s cid=mm6709e1 w
- Read their stories! <a href="https://www.cdc.gov/rxawareness/resources/socialmedia.html">https://www.cdc.gov/rxawareness/resources/socialmedia.html</a>
- ANYONE is at risk for opioid overdose. #ItsNotJustYou <a href="https://www.ihs.gov/odm/who-is-at-risk/">https://www.ihs.gov/odm/who-is-at-risk/</a>
- The Opioid Epidemic #QuickFacts
   https://smokingcessationleadership.ucsf.edu/sites/smokingcessationleadership.ucsf.edu/files/T
   he%20OPIOID%20Epidemic%20%26%20Smoking 0.pdf
- Check out SAMHSA's Opioid Overdose Prevention Toolkit for additional information! https://store.samhsa.gov/shin/content//SMA18-4742/SMA18-4742.pdf
- What do we know? #OpioidCrisisIntervention <a href="https://www.drugabuse.gov/drugs-abuse/opioids/opioid-overdose-crisis">https://www.drugabuse.gov/drugs-abuse/opioids/opioid-overdose-crisis</a>
- "The US makes up 5 percent of the world's population and consumes approximately 80
  percent of the world's prescription opioid drugs." <a href="https://talbottcampus.com/prescription-drug-abuse-statistics/">https://talbottcampus.com/prescription-drug-abuse-statistics/</a>
- Don't know what naloxone is? Click the link and educate yourself!
   <a href="http://www.naloxoneinfo.org/get-started/about-naloxone">http://www.naloxoneinfo.org/get-started/about-naloxone</a>
- Be informed on what side effects may occur from using naloxone. https://www.drugs.com/sfx/naloxone-side-effects.html



- Your voice matters! Stand up and speak up! <a href="https://drugfree.org/article/action-plan-in-the-face-of-the-opioid-epidemic/">https://drugfree.org/article/action-plan-in-the-face-of-the-opioid-epidemic/</a>
- Look no further! Click the link and be directed to resources for heroin or opioid addiction.
   #YourLifeMatters #OpioidPrevention
   https://www.wlns.com/news/michigan/heroin-and-opioid-addiction-resources-and-substance-abuse-programs/999927144
- In case you didn't know? (attach "4.2 Million" image)
- YOU can make a difference in this world! (attach "Stop opioid addiction" image)
- Take proper steps in an opioid crisis! (attach "Save a life" image)
- CALL 9-1-1 if someone is in danger for opioid overdose/ misuse. (attach "1, 2, 3" image)
- "Men were more likely to die from overdose, but the mortality gap between men and women is closing." (attach "Opioids" image)
- Education is key! Take action and start talking! (attach "We know what works" image)
- Naloxone can save lives! #OpioidPrevention (attach "Naloxone" image)
- Life has many obstacles but with PATH, anything is possible! (attach "Path" image)
- You can make a difference with #MentalHealthFirstAid For more information or to register for a CMHA-CEI class, go to <a href="www.eventbrite.com">www.eventbrite.com</a> and search for MHFA or call 517-887-5234.
   (attach "Mental Health First Aid" image)
- It's time to start talking about mental illness or substance use disorders. #StandAgainstStigma <a href="http://ceicmh.org/stand-against-stigma">http://ceicmh.org/stand-against-stigma</a> (attach "Stand Against Stigma" image)
- How are you feeling? Take a behavioral health screening here!
   <a href="http://screening.mentalhealthscreening.org/cei">http://screening.mentalhealthscreening.org/cei</a> (attach Online Behavioral Health Screening image)
- Looking to return your unused opioids? Find your take back location here!
   <a href="http://www.takebackmeds.org/">http://www.takebackmeds.org/</a> (attach "Take Back Medications" image)

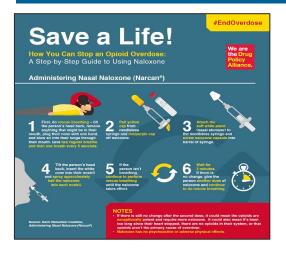


## FACEBOOK POST - IMAGES/LINKS

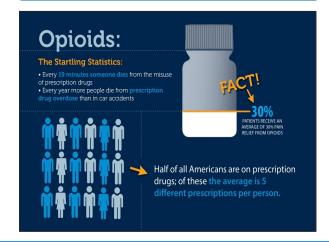
#### **4.2 MILLION**



#### **SAVE A LIFE**



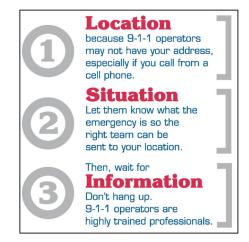
#### **OPIOIDS**



#### STOP OPIOID ADDICTION



#### 1, 2, 3

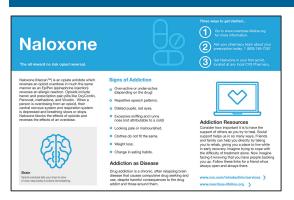


#### WE KNOW WHAT WORKS





#### **NALOXONE**



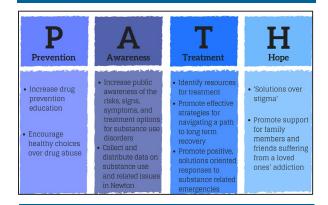
#### STAND AGAINST STIGMA



#### MENTAL HEALTH FIRST AID



#### **PATH**



ONLINE BEHAVIORAL HEALTH



#### TAKE BACK MEDICATIONS



