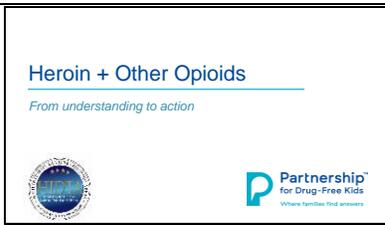
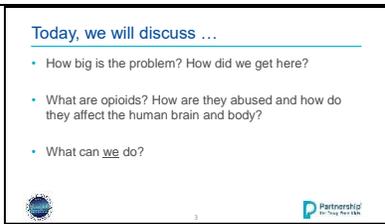
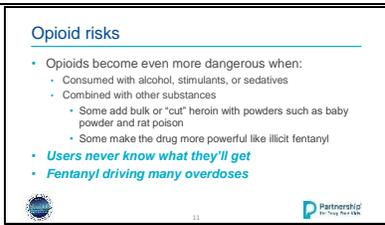
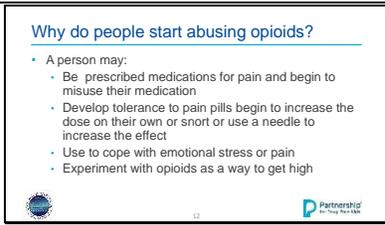


<p>Slide 1</p>		<p>[Introduce presenters]</p> <p>Thank you for coming. Our reason for being here today is simple and clear -- we want to increase understanding of the issue of heroin and other opioids so that we can come together to take action for our community.</p>
<p>Slide 2</p>		<p>This is a quote from Dr. Tom Frieden, Director of the Centers for Disease Control and Prevention:</p> <p><i>“The opioid epidemic is devastating American families and communities. To curb these trends and <b>save lives</b>, we must help prevent addiction and provide support and treatment to those who suffer from opioid use disorders.”</i></p> <p>The CDC does not declare epidemics lightly and does not recommend actions without good reason.</p>
<p>Slide 3</p>		<p>Today, we will talk about three aspects of this issue ...</p> <p>First, we'll talk about the problem ... how big is it and how did we get here?</p> <p>Second, what are opioids? How are they abused and how do they affect the brain and body?</p> <p>Finally, what can we do? As family members and as members of a community.</p> <p>To be clear, there are no easy answers, or immediate solutions to the problem. However, there is important work we can do toward save lives and reduce use and addiction.</p>
<p>Slide 4</p>		<p>Some of you may have been personally affected by heroin or other opioid use. For others the “opioid epidemic” is something you've heard about on the news.</p> <p>We're going to start by sharing a video that starts to communicate the scope of this problem ...</p> <p>[CLICK TO START VIDEO]</p>

<p>Slide 5</p>					
<p>Slide 6</p>	<p><b>The Crisis</b></p> <ul style="list-style-type: none"> <li>• Drug overdoses now the leading cause of accidental death in the US, <b>exceeding deaths from automobile accidents</b></li> <li>• More than 47,000 overdose deaths in 2014</li> <li>• More than six out of 10 drug overdose deaths in 2014 involved opioids, including opioid pain relievers and heroin ... that is 81 deaths a day</li> </ul>  	<p>Drug overdoses now the leading cause of accidental death in the US, exceeding deaths from automobile accidents</p> <p>From across the nation, people – many of them young people – are losing their lives to opioid overdoses.</p> <p>There are many ways to look at the numbers, but imagine if a 737 crashed every three days in America? We would shut down airports and demand an overhaul of the airline industry. We'll that is the equivalent of the level of death and destruction that we are seeing.</p>			
<p>Slide 7</p>	<p><b>How did this happen?</b></p> <table border="1"> <tr> <td data-bbox="228 919 370 1087"> <p><b>HIGH AVAILABILITY</b></p> <p>407 million prescriptions for opioid medications</p> <p>218% increase 1999-2011</p> </td> <td data-bbox="370 919 511 1087"> <p><b>LOW SENSE OF RISK</b></p> <p>Less than 1% of teens see trying Rx as risky</p> <p>Higher heroin purity, first snorted not injected</p> </td> <td data-bbox="511 919 615 1087"> <p><b>INCREASED USE</b></p> <p>Heroin use doubled among those 18-25 and tripled among adults 25+</p> <p>Heroin deaths increased &gt;400%</p> </td> </tr> </table>  	<p><b>HIGH AVAILABILITY</b></p> <p>407 million prescriptions for opioid medications</p> <p>218% increase 1999-2011</p>	<p><b>LOW SENSE OF RISK</b></p> <p>Less than 1% of teens see trying Rx as risky</p> <p>Higher heroin purity, first snorted not injected</p>	<p><b>INCREASED USE</b></p> <p>Heroin use doubled among those 18-25 and tripled among adults 25+</p> <p>Heroin deaths increased &gt;400%</p>	<p>So how did we get here?</p> <p>There is a pretty simple and consistent formula when it comes to substance use ...</p> <p>High availability plus a low sense of risk yields increased use.</p> <p>That's what happened with opioids ... the sheer quantity of painkillers increased.</p> <p>There was a low sense of risk among youth <i>and</i> adults. Too many parents and teens had the attitude "it's just pills." Too many people thought – I'm not using a needle, so it's ok.</p> <p>The effect: Increased use and increase deaths. From 2004 to 2014, the number of heroin deaths increased from less than 2,000 to more than 10,000.</p>
<p><b>HIGH AVAILABILITY</b></p> <p>407 million prescriptions for opioid medications</p> <p>218% increase 1999-2011</p>	<p><b>LOW SENSE OF RISK</b></p> <p>Less than 1% of teens see trying Rx as risky</p> <p>Higher heroin purity, first snorted not injected</p>	<p><b>INCREASED USE</b></p> <p>Heroin use doubled among those 18-25 and tripled among adults 25+</p> <p>Heroin deaths increased &gt;400%</p>			
<p>Slide 8</p>	<p><b>What do we need to know?</b></p> <hr/> <p>What are opioids?</p>  	<p>So, we have been talking about opioids, but what are they?</p>			

<p>Slide 9</p>	 <p><b>What are opioids?</b> Opioids are made from the opium poppy plant or artificially produced to have similar effects.</p> <p>Codine refers to synthetic and organic drugs. Oxycotin and organic oils.</p> <p>Codine Oxycotin Woods Fentanyl Powder Heroin Black Tar Heroin</p> <p>Partnership for the New York State</p>	<p>Opioids are chemicals that are either produced from the opium poppy plant or created in a lab to have the same effects. And not all labs are legal ones – the picture on the top right shows a bust of an illicit fentanyl lab in Canada.</p> <p>Some opioids are medicines. Some are medicines that are produced illicitly. Some are illegal drugs.</p> <p>What is important to know is that they are all very similar at the molecular level.</p>
<p>Slide 10</p>	 <p><b>How are opioids abused?</b></p> <p>Swallowed Snorted Smoked Injected</p> <p>Injection especially risky</p> <ul style="list-style-type: none"> <li>• Spread of HIV/AIDS and Hepatitis C</li> <li>• Damage veins and cause abscesses</li> <li>• Can lead to bacterial infection of the blood and heart problems</li> </ul> <p>Partnership for the New York State</p>	<p>Opioids are used and abused in a number of different ways. They can be:</p> <p>Swallowed -- broken down by the stomach and take longer to reach brain.</p> <p>Snorted – powdered heroin or pills can inhaled through the nose</p> <p>Smoked -- Heroin can be heated and the vapor is inhaled through the mouth</p> <p>Or injected with a needle: Heroin can be added to a liquid, heated, and then shot directly into the blood stream</p> <p>This form of use is especially risky for a number of reasons:</p> <ul style="list-style-type: none"> <li>* Shared needles leads to the spread of HIV/AIDS and Hepatitis C;</li> <li>* Needles can damage veins and cause abscesses; and lead to bacterial infection of the blood and heart problems</li> </ul> <p>People use needles because it delivers the drug to the brain much more quickly than other ways of using.</p>

<p>Slide 11</p>		<p>There are many risks of opioid use, but a few to focus on are:</p> <p>The fact that a user never knows what they are going to get. As we'll discuss, drugs that are sold as "heroin" may be fentanyl or something else.</p> <p>And fentanyl – which is 25-40 times as powerful as heroin – is driving overdoses from users who think that they are buying and using heroin, but actually getting something much more potent.</p> <p>Opioids are even more dangerous when they are consumed with other drugs. Alcohol and sedatives compound the depressive effect of opioids. Stimulants – such as methamphetamines and cocaine – do not "balance out" the heart and lungs, they throw them into chaos.</p> <p>Underscoring the point that people don't know what they're getting ...</p> <p>Drugs sold as "heroin" are sometimes "cut" with other products to add bulk, which lets a drug trafficker get more value out a kilo of heroin.</p> <p>Alternatively, drug dealers may try to get a competitive advantage by increasing the potency of their "product." The risk for users is they may get a dose that is much stronger than they expect.</p>
<p>Slide 12</p>		<p>There are a number of reasons why a person may start using opioids. Every person's story is different and these reasons overlap.</p> <p>They may get a prescription and then misuse their medication by taking more than they should or taking it in a way they shouldn't. For example, with alcohol or more frequently than prescribed.</p> <p>They may start using pain pills – either through a prescription or recreationally – then develop a tolerance and increase the amount that they're using or start using pills in a different way.</p> <p>Many use to cope with emotional stress, pain or an untreated mental health issue. The short-hand for this is "self-medicating."</p> <p>And for others, opioids may simply be the "next drug on the table." It may be a teen who drinks and smokes pot and has heard good things about pills, so they try them and like them.</p>

<p>Slide 13</p>	<p><b>Why do people keep using opioids?</b></p> <ul style="list-style-type: none"> <li>• The body develops "tolerance" and opioids are less likely to get a user "high"</li> <li>• But stopping use can result in withdrawal:             <ul style="list-style-type: none"> <li>• Muscle aches; restlessness; anxiety</li> <li>• Diarrhea; abdominal cramping; nausea and vomiting; rapid heartbeat; high blood pressure</li> </ul> </li> <li>• Emotional withdrawal can last for months and there is a high risk of relapse during first months of stopping</li> </ul>   	<p>In the same way that people start using for a number of different reasons, there are many factors that drive continued use. Again, everyone is different: genetics and a person's physiology play a major role. Two people can try the same opioid at the same time: one never touches them again, another develops a substance use disorder.</p> <p>For opioids and other drugs, the body develops a tolerance to use – they have to use more and more of a drug to get high, and eventually they don't even get high when they used because their body has adjusted to having excess opioids in their system.</p> <p>What keeps them using is fear of withdrawal. Withdrawal has been described as the worst flu you've ever had times 100. A user will feel physical aches, restlessness and anxiety for the first 24 hours. One effect of opioids is constipation – during withdrawal the intestinal system opens up and an opioid user will have diarrhea, cramping and nausea. They may also have a rapid heartbeat and high blood pressure.</p> <p>At a very basic level, withdrawal undoes everything that opioid intoxication does – and when the pendulum swings back it can be very painful.</p> <p>If a user gets through physical withdrawal they may then experience emotional withdrawal: missing the feeling of being high. This can result in relapse, which means that a user starts using again.</p> <p>Relapse is dangerous because a user may go back to using the same dosage they did prior to stop using, but their body is not ready for it. Relapse can result in overdose and death.</p>
<p>Slide 14</p>	<p><b>The cycle of abuse and withdrawal</b></p>   	
<p>Slide 15</p>		<p>In this video, a young man, Nacho, discusses the ways in which substance abuse affected his life.</p> <p>[CLICK TO PLAY VIDEO]</p>

<p>Slide 16</p>		<p>This is list of signs that can indicate an overdose.</p> <p>Most are from the effect of opioids on the heart and lungs ... As they slow down and weaken, the entire body can be affected.</p> <p>Blood carries less oxygen, which affects everything from skin color to responsiveness.</p> <p>Erratic breathing leads to choking sounds which are appropriately called a “death rattle” that can sound like snoring or choking.</p> <p>If you encounter a person who is experiencing these effects the first thing to do is call 911. Most naloxone kits contain two doses, but in some instances two doses may not be enough to revive a person from an overdose.</p> <p>It is important to note that Naloxone – also known as Narcan – can reverse an overdose. However, reversing an overdose should be the first step in getting a loved one into treatment.</p>
<p>Slide 17</p>		<p>Now that we have a sense of what opioids are and how they affect users, let’s talk about what we can do, as families, to prevent and respond to opioid use.</p>
<p>Slide 18</p>		<p>This quote from President Obama says it all – we all have a role to play to address this epidemic.</p>

<p>Slide 19</p>	<p><b>Know the risks of early use</b></p> <ul style="list-style-type: none"> <li>A person who starts using alcohol or other drugs before the age of 15 is five times as likely to develop a substance use disorder as person who starts at 21</li> <li>Self-medication can start with alcohol and other drugs and lead to opioids</li> </ul>  	<p>And that work starts at home ...</p> <p>If you are a parent or a grandparent, or anyone who cares about a young person, I encourage you to get serious about substance use.</p> <p>A person who starts using alcohol or other drugs before the age of 15 is five times as likely to develop a substance use disorder as person who starts at 21.</p> <p>There are biological reasons for this ... The human brain is not fully developed until the age of 24 or 25 and it is judgement that develops last. That's the part of the brain that says "no, this is a bad idea" – which becomes further impaired by substance use.</p> <p>Most kids who use drugs or alcohol will not develop an addiction, but all kids who use are putting themselves at risk – short term risk of accidents, injury, overdose, or simply bad decisions – and long term risk of a substance use disorder.</p>
<p>Slide 20</p>	<p><b>Parents have power</b></p> <ul style="list-style-type: none"> <li>Kids who learn about the risks of drugs at home are significantly less likely to use as those who don't</li> <li>One of the biggest reasons kids give for not using is that they don't want to disappoint their parents</li> <li>But ... most teens say that their parents have not talked with them about prescription drug abuse</li> </ul>  	<p>While it seems like kids don't listen, parents can have the power to affect their kids' attitudes and behaviors around substance use.</p> <p>Kids who learn about the risks of drugs at home are significantly less likely to use alcohol and other drugs than kids who don't – 42 percent less likely when it comes to prescription drug abuse.</p> <p>And when kids are asked why they don't use the answer is that they don't want to disappoint their parents.</p> <p>However, only 14 percent of teens say that their parents have talked with about prescription drug abuse. This is critical, because parents could be playing a much larger role to increase teens' perception of risk.</p>

<p>Slide 21</p>	<p><b>Talk early, talk often</b></p> <ul style="list-style-type: none"> <li>• Offer advice and guidance</li> <li>• Set limits you can live with</li> <li>• Show concern rather than anger</li> <li>• Ask open-ended questions</li> <li>• Work to understand your teen's point of view</li> </ul> <p>Keep talking, no matter what</p>   	<p>You can protect your family by talking with your kids who you care about – from a young age to young adulthood.</p> <p>You can be clear about your expectations and boundaries, but still have a positive conversation that keeps the door open to further discussion. Some of the ways to do this are by:</p> <ul style="list-style-type: none"> <li>* Offering advice and guidance rather than simply giving it. The phrase “can I make a suggestion” – followed up by asking for their feedback – can go a long way.</li> <li>* Teens can be frustrating – in many ways – but what you probably feel most for your teen is love and concern. Let them know that.</li> <li>* Ask open ended questions. “Tell me about your night” vs. “Where were you”</li> <li>* Again, it can be hard, but work to understand your teen’s point of view. Let’s say that your teen wants to go to a concert, but you don’t want them to go. You can say “help me understand ... why is this so important to you?” It doesn’t mean that you will do what they want, but there is a better chance that they will feel heard.</li> <li>* Finally, keep talking, no matter what. Maintaining some connection – even when a relationship is contentious, or if use does start – is very important. If you maintain a connection, you can always pull them back to where you want them to be.</li> </ul>
<p>Slide 22</p>	<p><b>Monitor prescription drugs in your home</b></p> <ul style="list-style-type: none"> <li>• Teen prescription drug misuse can start with <b>sports injuries or dental work</b></li> <li>• If your teen has been prescribed a medicine, be sure <b>you safeguard the medicine, and monitor dosages and refills</b></li> <li>• <b>Take note</b> of how many pills are in each of your prescription bottles or pill packets</li> <li>• <b>Keep track</b> of your refills</li> </ul>   	<p>Keep track of how many pills are in each bottle and if you seem to be refilling medications more quickly than makes sense – there may be a problem.</p> <p>One way in which prescription drug misuse can start is with a sports injury or dental work. A teen is prescribed an opioid painkiller and they find that they like it and start to abuse it. Or, they may have a friend who asks them to share their medication.</p> <p>That is why it is important for you control the medicine, monitor how many are being taken.</p>

<p>Slide 23</p>	<p>Know what to look for</p> <ul style="list-style-type: none"> <li>• <b>Pinpoint pupils</b></li> <li>• Appear depressed, and/or socially withdrawn</li> <li>• <b>Track marks</b> ... arms and hands but users will inject anywhere they can find a vein.</li> <li>• Running out of pills</li> <li>• Missing and/or <b>burnt spoons or foil</b></li> <li>• Missing <b>money or valuables</b></li> </ul>   <p>23</p>	<p>In addition to the signs of use we discussed before you may also see ...</p> <p>A dirty, unkempt appearance and general neglect of hygiene, which are strong indicators of drug use</p> <p>They may appear depressed, and/or withdraw socially</p> <p>And you may see track marks – which commonly occur on hands and arms (which is why they may wear long sleeved shirts even when it's inappropriate for the weather). However, someone who has used for a while will inject anywhere they can find a vein.</p> <p>You may find missing or burnt spoons, which are used to smoke heroin, or foil or missing money or valuables – heroin and pills aren't free.</p> <p>The best advice is to trust your instincts. If something doesn't seem right, it very well may not be right. Show concern and ask questions.</p>
<p>Slide 24</p>	<p>"I didn't know"</p>  <p>24</p>	<p>The next video you will see is the story of a young man named Aaron and his family. Aaron used prescription drugs at a party at a friend's house. He had an overdose. His friend's mom waited to call 911, hoping he would come out of it. She tried to revive him and poured ice on him. That wait resulted in a loss of oxygen to Aaron's brain.</p>
<p>Slide 25</p>		

<p>Slide 26</p>	<p><b>Save a life</b></p> <ul style="list-style-type: none"> <li>Naloxone, also known by the brand name Narcan, can save the life of a person experiencing an overdose</li> <li>Naloxone counteracts opioids and can restore breathing and heart rate</li> <li>If someone you love uses opioids get a kit and get trained to use it</li> <li>Always call 911</li> <li>Good Samaritan laws provide protection</li> </ul>  <p>Partnership for the New York State</p>	<p>Seeing that story makes you wish that there</p> <p>Naloxone can save lives if a person is having an overdose. Naloxone kicks opioids off of brain receptors and can restore breathing and heart rate.</p> <p>Saving a life can be the first step towards putting the user on a path to recovery.</p> <p>It is a critical tool that is used by first responders, but the loved one of a person struggling with an addiction can also obtain a kit and learn to use it.</p> <p>Good Samaritan laws provide legal immunity to a companion of a drug user if they act to save the life of another person. This is important because previously a person who was using drugs with a person who had an overdose would be reluctant to call 911 or take their friend to the hospital because they feared arrest.</p> <p>[LAWS VARY STATE TO STATE – IDENTIFY THE PROTECTIONS THAT EXIST WHERE YOU ARE PRESENTING IF YOU KNOW THEM]</p>
<p>Slide 27</p>	<p><b>Seek treatment options</b></p> <ul style="list-style-type: none"> <li>Don't need to wait for "rock bottom"</li> <li>Don't let stigma keep you from getting help</li> <li>Ask questions</li> <li>Support recovery</li> <li>Self-care</li> </ul>  <p>Partnership for the New York State</p>	<p>As we previously discussed, one approach that has been demonstrated to be effective in treating opioid use disorders is Medication Assisted Treatment, or MAT. A number of medications have been developed that can reduce the effects of withdrawal and cravings for opioids. As with all treatment, different medications will work for different people, so these medications should be used with a treatment professional.</p> <p>It is important for families to understand these medications as well as medical professionals.</p> <p>Some of these medications can be administered at a doctor's office, which can make them more accessible to more people.</p> <p>The Partnership has developed an e-book on this topic as well.</p>

<p>Slide 28</p>	 <p><b>Medication-Assisted Treatment</b></p> <ul style="list-style-type: none"> <li>Medication Assisted Treatment supports recovery from a substance use disorder</li> <li>Medications, such as methadone, buprenorphine, suboxone and Naltrexone/Vivitrol can reduce suffering from withdrawal and cravings for opioids</li> <li>Some medications can be delivered in doctor's offices</li> <li>Learn more at <a href="http://drugfree.org/heroin">drugfree.org/heroin</a></li> </ul>	<p>As we previously discussed, one approach that has been demonstrated to be effective in treating opioid use disorders is Medication Assisted Treatment, or MAT. A number of medications have been developed that can reduce the effects of withdrawal and cravings for opioids. As with all treatment, different medications will work for different people, so these medications should be used with a treatment professional.</p> <p>It is important for families to understand these medications as well as medical professionals.</p> <p>Some of these medications can be administered at a doctor's office, which can make them more accessible to more people.</p> <p>The Partnership has developed an e-book on this topic as well.</p>
<p>Slide 29</p>	 <p><b>Learn more about opioids at <a href="http://drugfree.org/heroin">drugfree.org/heroin</a></b></p> <p><b>HEROIN AND OTHER OPIOIDS</b></p> <p>From Understanding to Action</p> <p>Heroin and other opioids are sweeping communities across America. Deaths have nearly doubled since 2000 and 2014. More Americans die from drug overdoses than in car crashes, and this alarming trend is growing in the partnership.</p> <p>The time to take action against this epidemic is now.</p>	<p>The Partnership has developed a webpage where many of the resources we've discussed in this presentation can be accessed.</p> <p>This page will also contain links to other sources of information about opioids, including local information.</p>
<p>Slide 30</p>	 <p><b>The Parent Toll-Free Helpline</b></p> <p><b>HELPLINE</b> <b>1-855-DRUGFREE</b> (1-855-378-4373)</p> <ul style="list-style-type: none"> <li>Listen to your concerns, challenges, setbacks and emotional turmoil</li> <li>Help you outline a course of effective action grounded in science-based resources</li> <li>Inform you of different resources available to you nationally</li> </ul> <p><i>"Thank you so much. My eyes welled up with tears because you restored my sense of hope."</i></p>	<p>If a person you care about is using opioids or any other drugs you can also contact the Partnership's Helpline.</p> <p>The Helpline is staffed by bilingual professionals who take the time to listen to the caller's concerns and outline a course of action. Callers call for all kinds of reasons ... from a parent who's getting ready to have "the talk" with their teen to the parent of a 35 year old who is trying to support their recovery.</p> <p>The Helpline can also help identify local treatment resources and share information about finding a treatment provider that will provide the services your loved one needs.</p>

<p>Slide 31</p>		<p>So the question now is: What will YOU do?</p> <p>As we said at the outset of this presentation, there are no simple solutions to this epidemic. What we can in the short-term is take action, day by day, to save lives and prevent use by the people we care about by talking honestly and openly about this issue.</p> <p>Over the long-term we can do things like work to expand the availability of Naloxone, expand treatment, and train medical professionals to prescribe appropriately and identify people struggling with substance use disorders at the earliest possible stage.</p>
<p>Slide 32</p>		
<p>Slide 33</p>		