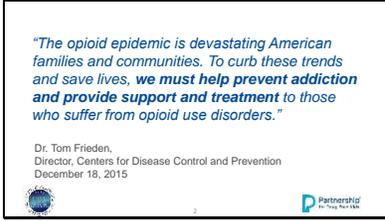
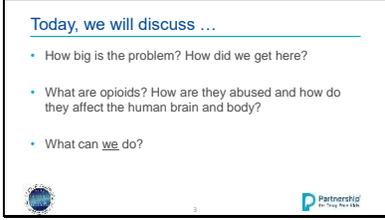
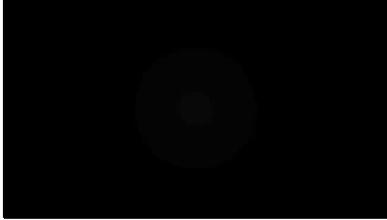
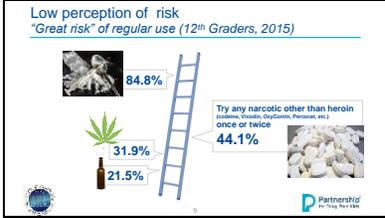
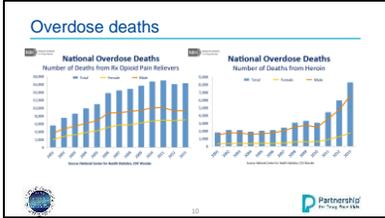
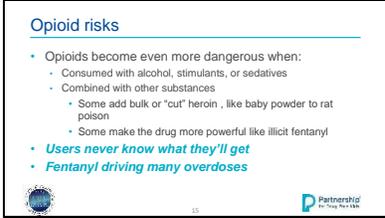
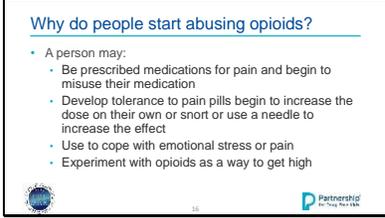


<p>Slide 1</p>		<p>[Introduce presenters]</p> <p>Thank you for coming. Our reason for being here today is simple and clear -- we want to increase understanding of the issue of heroin and other opioids so that we can come together to take action for our community.</p>
<p>Slide 2</p>		<p>This is a quote 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 save lives, 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>

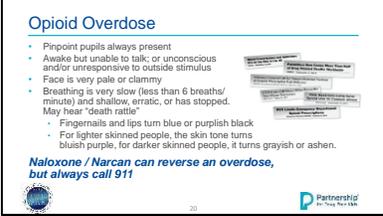
<p>Slide 5</p>		
<p>Slide 6</p>	<p><b>The Crisis</b></p> <ul style="list-style-type: none"> <li>• Drug overdoses now the leading cause of accidental death in the US, <b>exceeding deaths from automobile accidents</b></li> <li>• More than 47,000 overdose deaths in 2014</li> <li>• More than six out of 10 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>  	<p>So, faced with these problems, the questions you may be asking are “how did we get here?”, “how did this happen?”</p> <p>There is a pretty simple formula that drives substance use ... When availability of a drug increases and the perception of risk is low, use tends to increase.</p>
<p>Slide 8</p>	<p><b>High availability</b></p>  <p>Figure 2 - Opioid Prescriptions Dispensed by US Retail Pharmacies (DHS Health, Vector One; National, years 1991-1996; Data Extracted 2011; DHS Health, National Prescription Audit, years 1997-2011; Data Extracted 2014.</p>  	<p>The main driver in the past decade's spike in opioid abuse and overdose is the greater availability of prescription pain relievers.</p>

<p>Slide 9</p>	<p>Low perception of risk "Great risk" of regular use (12<sup>th</sup> Graders, 2015)</p> 	<p>There has also been a process where the use of pills drove increased use of drugs like heroin.</p> <p>Think of a ladder. At the bottom of the ladder there are drugs like alcohol and marijuana.</p> <p>Among high school seniors, the perception of risk of regular use of alcohol [CLICK] is about 20 percent and the regular use of marijuana [CLICK] is about 30 percent. The perception of risk of heroin [CLICK] is over 80 percent.</p> <p>It was once fairly uncommon for young people to make the jump from alcohol and pot to heroin.</p> <p>[CLICK]</p> <p>Opioid pills added the missing rungs to the ladder. With risk level at about 44 percent, young people made the transition from using drinking and smoking to popping some pills and then to using heroin.</p>
<p>Slide 10</p>	<p>Overdose deaths</p> 	<p>And here you can see the result ... An increase in prescription opioid deaths followed by an even sharper increase in heroin opioid deaths.</p>
<p>Slide 11</p>	<p>The Need</p> <ul style="list-style-type: none"> <li>All of us must make use of the <i>solutions</i> that are available to us – effective tools that are available to families, healthcare professionals, educators, community leaders and law enforcement             <ul style="list-style-type: none"> <li>Prevention</li> <li>Screening and intervention</li> <li>Overdose prevention</li> <li>Effective treatment and continuing care</li> </ul> </li> </ul> 	<p>As we have stated, there is no single, simple answer, but there are solutions available that we can implement ...</p> <p>Through prevention; by identifying people struggling with substance abuse and taking action early; by preventing overdoses and by providing effective treatment and continuing care.</p>
<p>Slide 12</p>	<p>What do we need to know</p> <p>What are opioids?</p> 	<p>So, we have been talking about opioids, but what are they?</p>

<p>Slide 13</p>	 <p><b>What are opioids?</b> Opioids are made from the opium poppy plant or artificially produced to have similar effects.</p> <p><b>Some are natural opiates and organic drugs. Others are synthetic.</b></p> <p>Coughs, Oxycotin, Vicodin, Fentanyl, Powder Heroin, Black Tar Heroin</p> <p>Partnership IN THE TRIANGLE</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>They are all very similar at the molecular level.</p>
<p>Slide 14</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; and</li> <li>• Can lead to bacterial infection of the blood and heart problems</li> </ul> <p>Partnership IN THE TRIANGLE</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 15</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 16</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 17</p>	<p><u>Why do people keep using opioids?</u></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><small>17</small></p> <p><small>Partnership for the Americas</small></p>	<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 18</p>	<p><u>The cycle of abuse and withdrawal</u></p>  <p><small>18</small></p> <p><small>Partnership for the Americas</small></p>	<p>In this video, a young man, Nacho, discusses the ways in which substance use affected his life.</p> <p>[CLICK TO PLAY VIDEO]</p>
<p>Slide 19</p>		

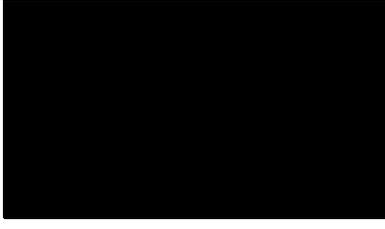
<p>Slide 20</p>	 <p><b>Opioid Overdose</b></p> <ul style="list-style-type: none"> <li>Pinpoint pupils always present</li> <li>Awake but unable to talk; or unconscious and/or unresponsive to outside stimulus</li> <li>Face is very pale or clammy.</li> <li>Breathing is very slow (less than 6 breaths/minute) and shallow, erratic, or has stopped. May hear "death rattle"</li> <li>Fingernails and lips turn blue or purplish black             <ul style="list-style-type: none"> <li>For lighter skinned people, the skin tone turns bluish purple, for darker skinned people, it turns grayish or ashen.</li> </ul> </li> </ul> <p><b>Naloxone / Narcan can reverse an overdose, but always call 911</b></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 21</p>	 <p><b>Long term effects of opioid abuse</b></p> <p>39-year-old brain no opioid abuse</p> <p>39-year-old brain 25 year history of heroin use, marked overall decreased activity</p>	<p>Studies have shown that long-term opioid abuse can affect the brain, which may affect decision-making abilities, the ability to regulate behavior, and responses to stressful situations.</p> <p>These images of the brain are obtained using single-photon emission computed tomography, or "SPECT."</p> <p>In the same way that x-rays show the hard substances within the body, SPECT gives a 3D image of activity within organs.</p> <p>The image on the left shows a 39 year old with a healthy brain ... the image on the right shows the brain of a person who has used heroin for 25 years. It is important to note that those are not physical holes in the brain, they are areas where brain activity is reduced.</p>
<p>Slide 22</p>	 <p><b>What we need to do</b></p> <p><b>The tools we can use</b></p>	<p>So, we have been talking about opioids, but what are they?</p>

<p>Slide 23</p>	<p><b>We are all part of the solution ...</b></p> <p><i>"It's not somebody else's kids; it's our kids. It's not somebody else's neighborhood; it's our neighborhood. ... We've got to make sure that we're doing right by them, we're taking this seriously. And the goal today is to ... make sure that we walk away out of here, all of us committed to doing something about it. Whether we are a faith leader, whether we are an elected official, whether we're in law enforcement, whether we're a private citizen, a business, we've all got a role to play."</i></p> <p>President Barack Obama, addressing heroin &amp; opioid abuse at a community panel discussion, Charleston, WV 10/21/2015</p>  	<p>This quote from President Obama says it all – we all have a role to play to address this epidemic.</p>
<p>Slide 24</p>	<p><b>Tools for health care providers</b></p> <ul style="list-style-type: none"> <li>• Education in addiction medicine and pain management in medical school and in continuing medical education</li> <li>• Appropriate prescribing             <ul style="list-style-type: none"> <li>• CDC guidelines</li> <li>• Prescription Drug Monitoring Programs (PDMP)</li> <li>• Abuse deterrent formulations</li> <li>• Consider non-opioid therapies where appropriate</li> </ul> </li> </ul> 	<p>The first set of tools are for health care providers.</p> <p>They start in school. Many medical professionals get little training in addiction medicine and pain management. Understanding of these issues is critical at this time when we, as a society, turn more and more to medications for solutions.</p> <p>Doctors, dentists and other professionals also have a range of resources they can use, which include:</p> <ul style="list-style-type: none"> <li>• Guidelines from the CDC</li> <li>• Access to Prescription Drug Monitor Programs, which can help identify individuals who may be seeking medications inappropriately</li> <li>• Use of versions of opioids that are more difficult to abuse</li> <li>• And by considering non-opioid therapies, such as physical therapy, where appropriate</li> <li>•</li> </ul>
<p>Slide 25</p>	<p><b>Tools for health care providers</b></p> <ul style="list-style-type: none"> <li>• Screen for medicine abuse, and refer to treatment where appropriate (Screening, Brief Intervention and Referral to Treatment – or SBIRT)</li> <li>• Medication Assisted Treatment (MAT)             <ul style="list-style-type: none"> <li>• Effective in combination with behavioral therapy</li> <li>• Expand access to MAT via licensed prescribers</li> </ul> </li> </ul> 	<p>Health care providers can also identify individuals – especially young people – who may be going down a dangerous path with alcohol or other drugs. Medical professionals have a lot of credibility, and have tools like SBIRT they can use to identify and help individuals who may be struggling with their use.</p> <p>Doctors can also play a significant role by offering Medication Assisted Treatment, which can reduce withdrawals and cravings, which make behavioral therapy all the more effective.</p> <p>As a community we can work to expand access to MAT via licensed prescribers.</p>

<p>Slide 26</p>		<p>The Partnership is proud to offer educators the Above the Influence program, which includes the teen-targeted video “Not Prescribed” and a Toolkit of resources that can be used.</p> <p>The National Education Association has developed Rx for Understanding and the National Association of School Nurses has developed “Smart Moves, Smart Choices.”</p> <p>All of these resources can be used in schools to increase young people’s understanding of the risks of opioid misuse.</p>
<p>Slide 27</p>		<p>Community and law enforcement also have a number of resources:</p> <p>Community members can be educated through programs like this one, and other programs such as the Partnership’s Out of Reach video and toolkit.</p> <p>The Partnership has developed a guide to help communities dispose of unwanted prescriptions safely.</p> <p>Community leaders can advocate for expanded access to Naloxone, and adoption of effective “Good Samaritan” laws that protect those who act to save the life of a person ... even in they are using themselves.</p>
<p>Slide 28</p>		<p>Some of the greatest impact can come from families.</p> <p>And – please note that wherever we say “parents” in this presentation we mean anyone who cares for a child.</p>

<p>Slide 29</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 30</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 31</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 32</p>	<p><b>Monitor prescription drugs in your home</b></p> <ul style="list-style-type: none"> <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> <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> </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 33</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 34</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>In this video you will see Aaron’s parents talk about how they did not know what he was using.</p>
<p>Slide 35</p>		

Slide  
36

Save a life

- Naloxone, also known by the brand name Narcan, can save the life of a person experiencing an overdose
- Naloxone counteracts opioids and can restore breathing and heart rate
- If someone you love uses opioids get a kit and get trained to use it
- Always call 911
- Good Samaritan laws provide protection



Seeing that story makes you wish that there

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.

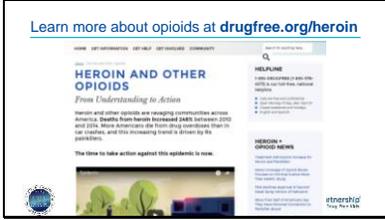
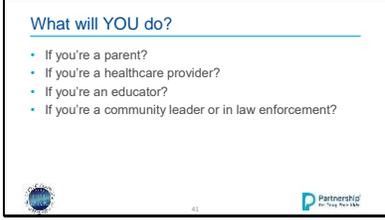
Saving a life can be the first step towards putting the user on a path to recovery.

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.

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.

[LAWS VARY STATE TO STATE – IDENTIFY THE PROTECTIONS THAT EXIST WHERE YOU ARE PRESENTING IF YOU KNOW THEM]

<p>Slide 37</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>Preventing overdose can be the first step towards getting a loved one into treatment, but there is no reason to wait that long.</p> <p>There is a myth that a person needs to hit "rock-bottom" before they will be "ready" for treatment. Early intervention and treatment have been show to be effective.</p> <p>Any stigma that exists around substance use should not prevent you from getting help for a loved one.</p> <p>Three important things to do when you are seeking treatment for a loved one are:</p> <p>To ask questions. Not all treatment providers are created equal and different programs have different approaches. The Partnership has developed a Treatment e-book that identifies questions to ask of a provider.</p> <p>Substance use disorders are chronic and recurring. It is important to provide Continuing Care and another e-book from the Partnership provides information on that topic.</p> <p>Finally, it is important for caregivers to take care of themselves. Helping a person struggling with a substance use disorder can be exhausting and overwhelming. The Partnership's Parent Support Network – which we'll talk more about – can help provide ideas in that area.</p>
<p>Slide 38</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 39</p>	 <p>Learn more about opioids at <a href="http://drugfree.org/heroin">drugfree.org/heroin</a></p> <p><b>HEROIN AND OTHER OPIOIDS</b> From Understanding to Action</p> <p>Heroin and other opioids are ravaging communities across America. Deaths from heroin increased 248% between 2000 and 2014. More Americans die from drug overdoses than car crashes, and the increasing threat is driven by the painkillers.</p> <p>The time to take action against this epidemic is now.</p> <p>Partnership for the 21st Century</p>	<p>The Partnership as 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 40</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>Partnership for the 21st Century</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 41</p>	 <p><b>What will YOU do?</b></p> <ul style="list-style-type: none"> <li>• If you're a parent?</li> <li>• If you're a healthcare provider?</li> <li>• If you're an educator?</li> <li>• If you're a community leader or in law enforcement?</li> </ul> <p>Partnership for the 21st Century</p>	<p>So, there is no lack of ways in which we can make a difference on this issue ...</p> <p>The question we ask at the end of this presentation is this ...</p> <p>What will YOU do ...</p> <p>If you are a parent? If you are a healthcare provider? If you are an educator? Or if you are a community leader or in law enforcement?</p>
<p>Slide 42</p>	 <p><b>Thank you ...</b></p> <ul style="list-style-type: none"> <li>• Add presenter contact information</li> </ul> <p>Partnership for the 21st Century</p>	<p>[THANK THE AUDIENCE AND OPEN UP FOR QUESTIONS AND COMMENTS]</p>
<p>Slide 43</p>	 <p><b>Thank you ...</b></p> <p><b>HIDTA</b> HEROIN INDEPENDENT DRUG TRADING AND DISTRIBUTION ACT Supported by the Office of National Drug Control Policy NATIONAL HEROIN PRO-GRAM</p> <p><i>Investing in partnerships to build safe and healthy communities</i></p> <p>Partnership for the 21st Century</p>	