

OPIOID AND HEROIN AWARENESS GUIDE

RACINE COUNTY 2019



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LETTER FROM THE HEALTH OFFICER

Over the past 20 years, Racine County has experienced a dramatic increase in the prevalence of opioid use in our communities. The number of drug-related overdose deaths has risen by over 400% since 2000. Currently, there are many organizations in the County working on harm reduction programs and increasing awareness and access to treatment for those struggling with substance use disorder. In addition, Central Racine County Health Department is leading a multidisciplinary team to review overdose deaths and identify opportunities for prevention. While progress is being made, there is still work to be done.

What can you as a member of the community do? First, remember that addiction is a disease affecting the brain and does not discriminate. Anyone can become addicted - friends, neighbors, coworkers - and it is important to remember to treat them with the same love and support you would give anyone else battling a disease. It is imperative that we change the narrative around substance abuse, reduce the stigma around addiction, and support the individuals who need treatment. We hope that you will use this guide to help yourself, your loved ones, and your community and join us in the effort to reverse the opioid epidemic.



MARGARET GESNER, MS

HEALTH OFFICER

QUICK REFERENCE

I am...

SEEKING
TREATMENT

- Treatment Options - Pg. 34
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PARENT

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EMPLOYER

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ADVOCATE

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OVERVIEW

WHAT IS ADDICTION?

SIGNS OF ADDICTION AND SUBSTANCE ABUSE

WHAT ARE OPIOIDS?

OVERDOSE STATISTICS

LOCAL, STATE, AND NATIONAL DATA

MYTH VS. FACT

WHAT CAN WE DO?

WHAT IS ADDICTION?

According to the National Institute on Drug Abuse, people with addiction consistently and compulsively seek drugs and/or alcohol despite the risks and consequences associated with use. Addiction disrupts the normal functions of the brain by changing the circuits responsible for reward, stress, and self-control.¹

Many factors contribute to a person's risk of addiction including biological factors such as genetics, gender, stages of development and environmental factors such as home and school environments. **Because the brain continues to grow and develop until age 25, teens are particularly at risk of developing addiction and facing long-lasting consequences even after treatment.**

According to the CDC, as many as 1 in 4 patients receiving long-term opioid therapy in a primary care setting struggles with opioid addiction. Opioids are highly addictive regardless of whether they are prescribed by a doctor or obtained illegally. Luckily, there are many ways to prevent opioid addiction and resources for those who are already struggling.³



Addiction (n): the compulsive need for and use of a habit-forming substance (such as heroin, nicotine, or alcohol) characterized by tolerance and by well-defined physiological symptoms upon withdrawal.²

SIGNS OF ADDICTION AND SUBSTANCE ABUSE

Oftentimes, people struggling with substance abuse will attempt to hide their symptoms. There are several common warning signs to look for if you are concerned that a loved one, friend, or co-worker is struggling with addiction.

Physical Signs:

- Bloodshot eyes
- Dilated or enlarged pupils
- Changes in appetite or weight
- Decreased grooming habits
- Change in physical appearance

Behavioral Signs:

- Strained relationships
- Secretive or suspicious behavior
- Neglecting responsibilities
- Financial burden or need for money
- Sudden change in friends or hobbies

Psychological Signs:

- Feelings of unexplained anxiety/paranoia
- Lack of motivation
- Fatigue
- Increased energy or nervousness
- Feelings of instability
- Mood swings or outbursts of anger
- Unexplained change in personality



WHAT ARE OPIOIDS?

Opioids are a class of drugs used to reduce pain and include prescription opioids, synthetic opioids, and heroin.

Prescription opioids have been widely accepted as the standard for pain management despite the risk of addiction and lack of evidence supporting their long-term effectiveness.⁵

COMMONLY PRESCRIBED OPIOIDS

- Codeine
- Morphine
- Methadone
- Fentanyl
- Tramadol
- Oxycodone
- Bitartrate
- Hydrocodone
- Hydromorphone
- Oxymorphone
- Meperidine
- Propoxyphene³



PRESCRIPTION OPIOIDS

- Can be **prescribed for moderate-to-severe pain**, after **surgery** or **injury**, or pain from health conditions like **cancer**.
- Includes drugs like hydrocodone, oxycodone, codeine, and morphine.
- **Risks include misuse, addiction, overdose, and death**, especially with long term use.⁵



SYNTHETIC OPIOIDS

- **Highly potent, man-made** drugs that mimic naturally occurring opioids like morphine and codeine.
- **Fentanyl** and **tramadol** are legally prescribed by doctors for moderate-to-severe pain.
- **Methadone** is also a prescription synthetic opioid.
- Also includes **illegally-made** synthetic opioids like illicitly manufactured fentanyl.⁶



FENTANYL

- A **synthetic** (man-made) opioid **50x** more potent than heroin and **100x** more potent than morphine.
- **Prescribed** in the form of transdermal patches, tablets, lozenges, or nasal sprays.
- Can also be **illegally made (illicitly manufactured fentanyl)** and mixed into other drugs like heroin or cocaine.⁷



HEROIN

- An **illegal** drug often combined with other drugs and alcohol, increasing the risk of overdose.
- **Semi-synthetic** drug and **highly addictive** opioid.
- Typically **injected**, but is also smoked and snorted.
- A heroin **overdose** can cause slow and shallow breathing, coma, and death.⁸



OVERDOSE STATISTICS

The rates of overdose deaths have sharply increased over the past 17 years. The following data has been sourced from the Centers for Disease Control and Prevention (CDC) and the Wisconsin Department of Health Services.

35%

**OF ALL OPIOID OVERDOSE DEATHS
IN THE U.S. INVOLVED
PRESCRIPTION OPIOIDS IN 2017**

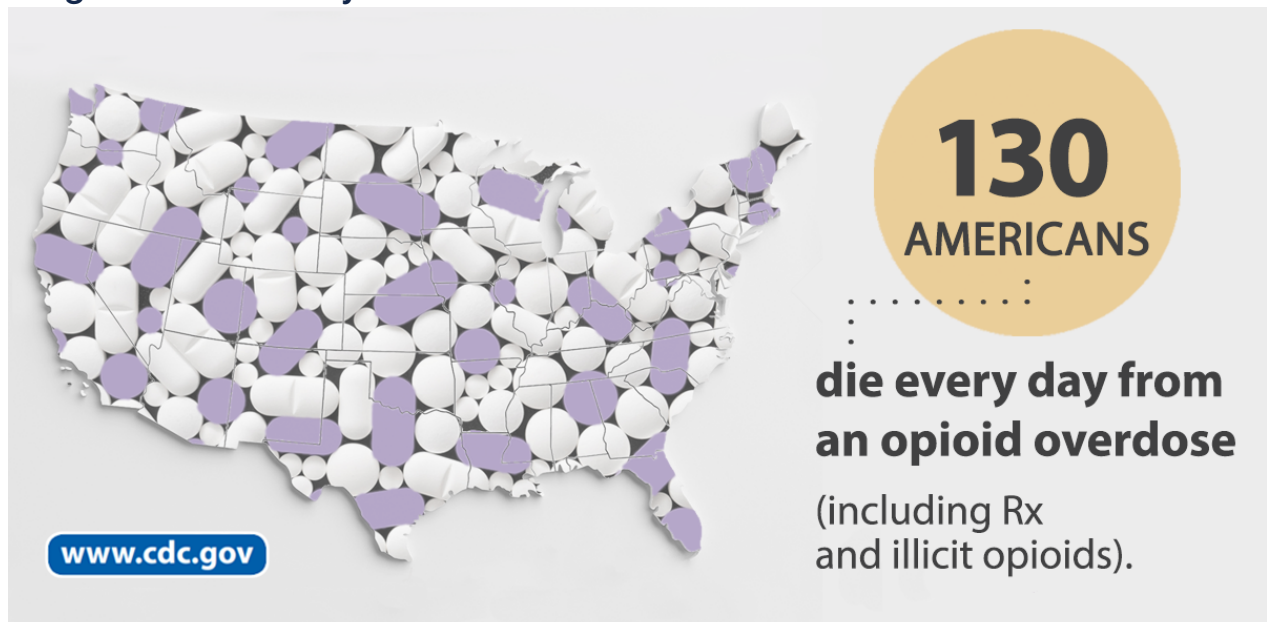
Prescription opioids include natural opioids, semi-synthetic opioids and methadone that are prescribed as pain medication or to help treat opioid use disorders.⁹

218,000

**PEOPLE DIED IN THE U.S. FROM
PRESCRIPTION OPIOID-RELATED
OVERDOSES FROM 1999-2017**

Methadone, oxycodone, and hydrocodone are the most common drugs involved in prescription opioid overdose.⁹

Image 1: National Daily Overdose Rate¹⁰



420

of deaths related to synthetic opioids*

407

of deaths related to heroin overdose*

362

of deaths related to prescription opioids*

*In 2017 in Wisconsin¹¹

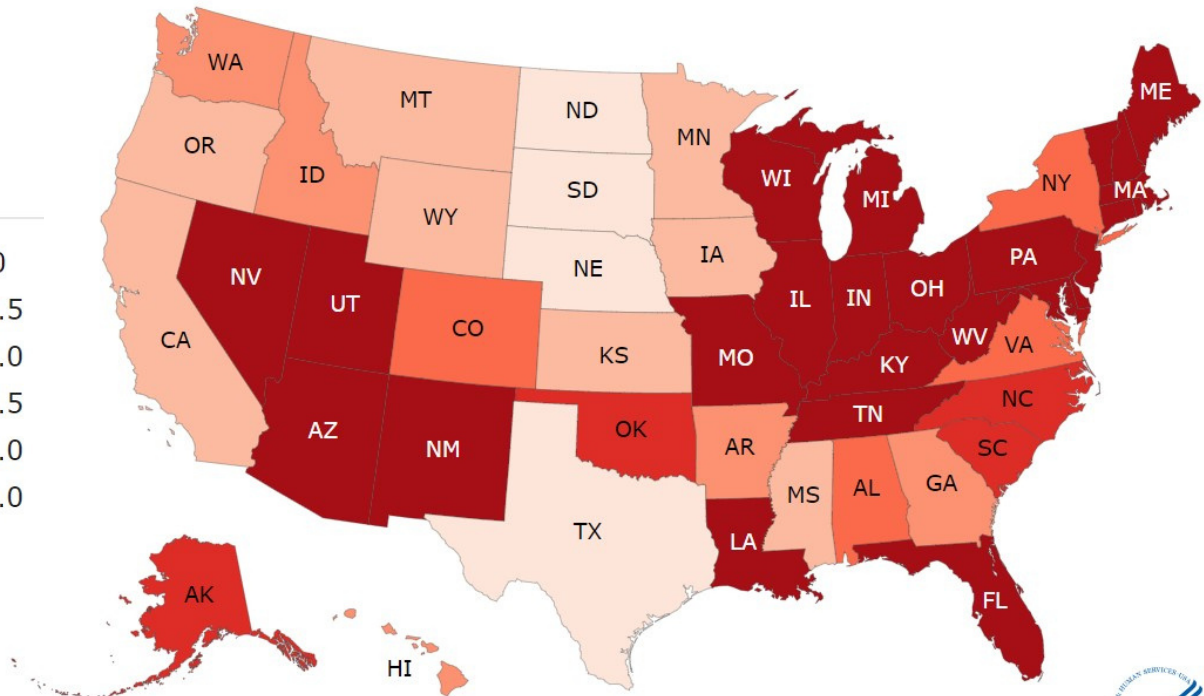
Wisconsin ranked 20th

for highest number of drug overdose deaths with 1,177 in 2017 alone.¹²

Number and age-adjusted rates of drug overdose deaths by state, US 2017¹²

Legend

- 6.9 to 11.0
- 11.1 to 13.5
- 13.6 to 16.0
- 16.1 to 18.5
- 18.6 to 21.0
- 21.1 to 57.0



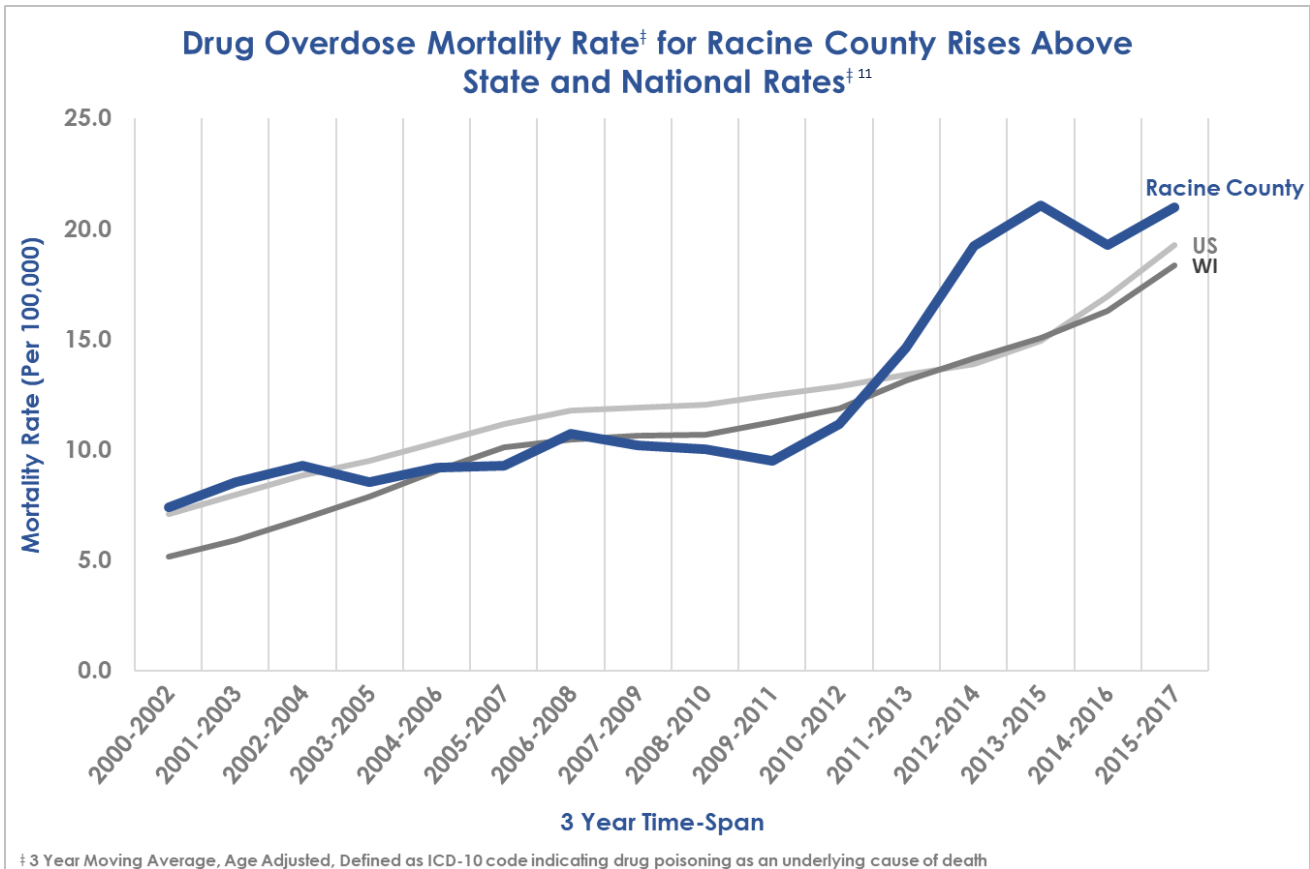
Compared to the state and nation,

Racine County has seen a more dramatic increase in the drug overdose mortality rate over the last several years.



183%

increase in the Racine County overdose mortality rate between 2000 and 2017¹¹





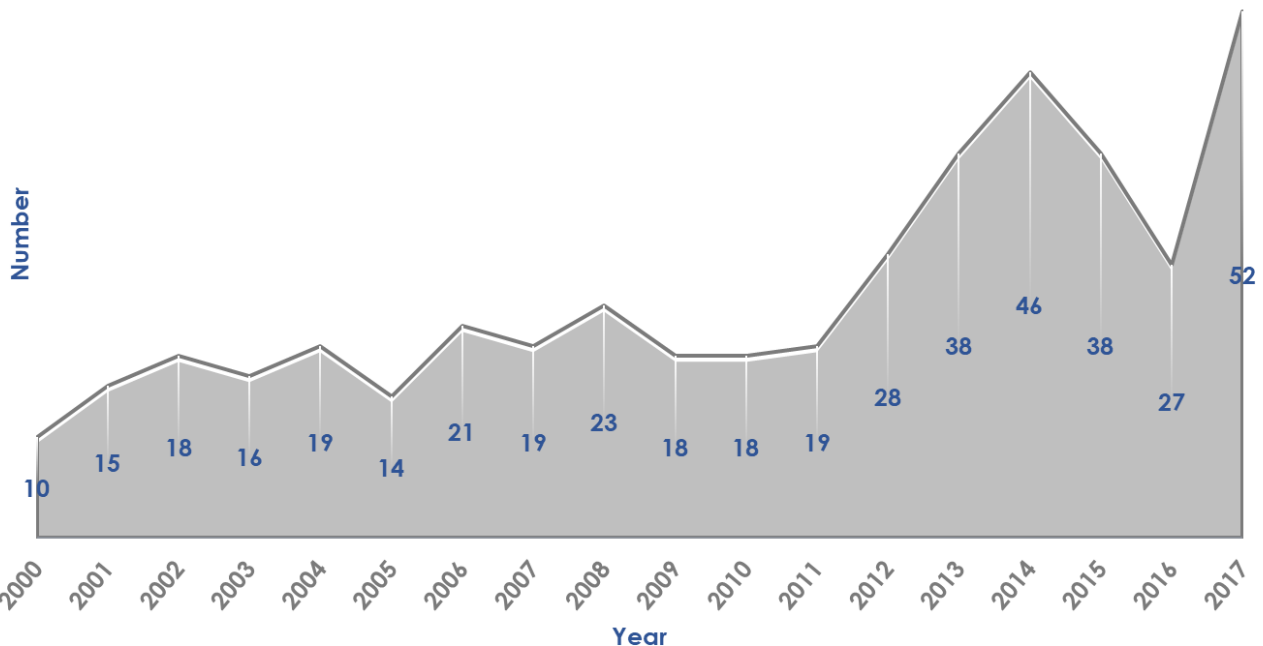
Overdose deaths have increased

dramatically in Racine County over the past 17 years due in large part to the opioid epidemic.

72%

of all overdose deaths in Racine County from 2000 to 2017 were associated with opioid use¹¹

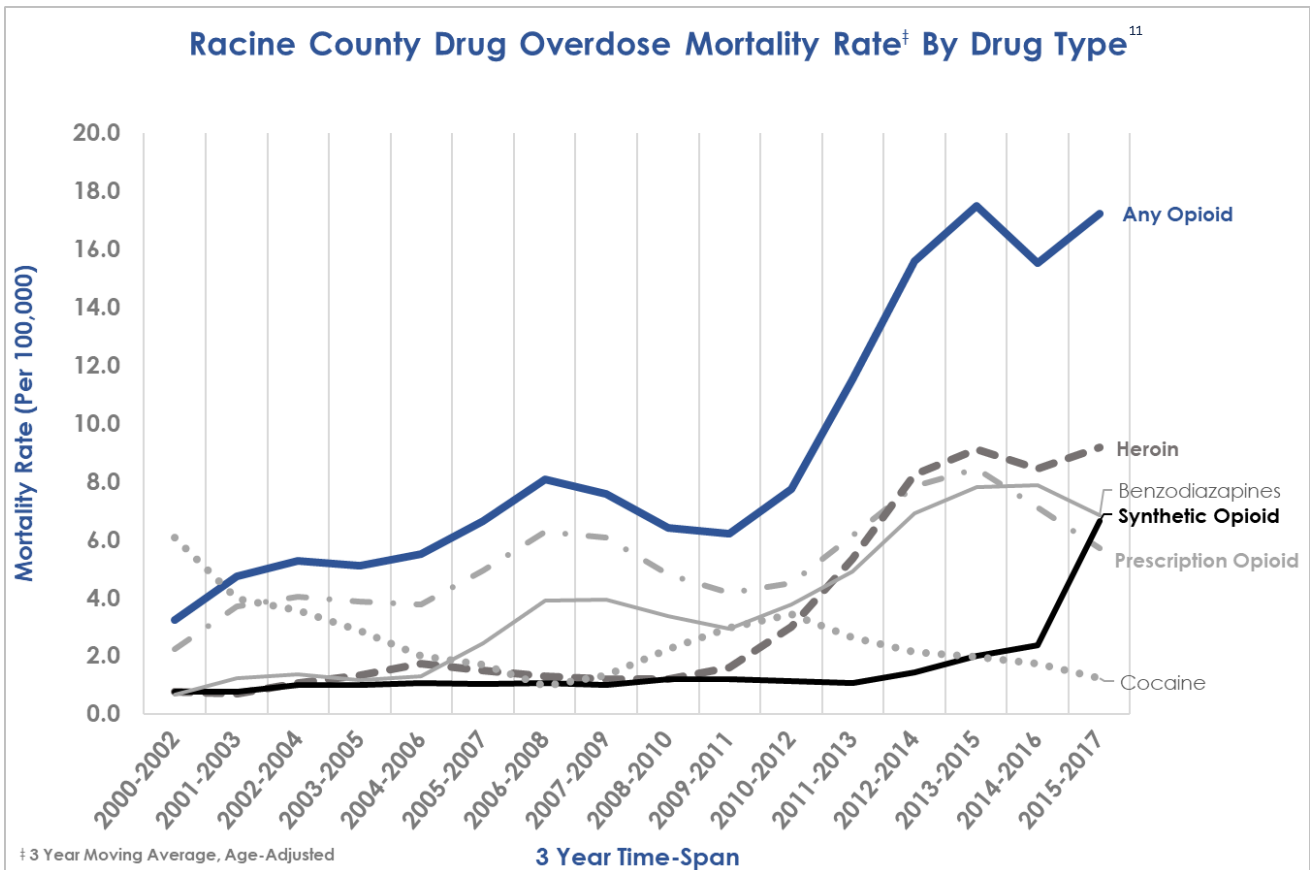
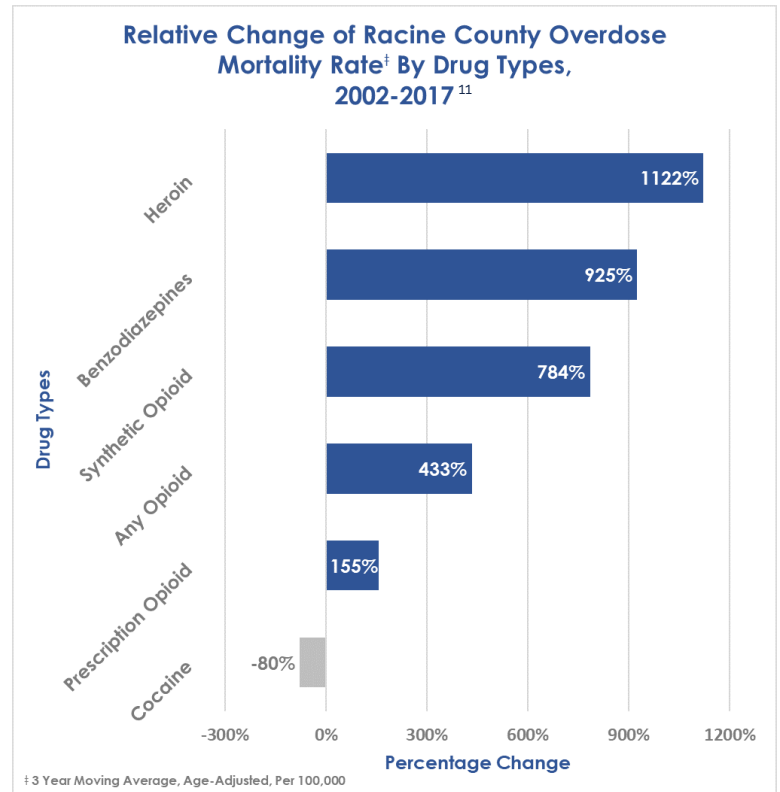
From 2000 to 2017, the Number of Drug Overdose Deaths[‡] in Racine County Increased by 420%¹¹



[‡] Defined as ICD-10 code indicating drug poisoning as an underlying cause of death

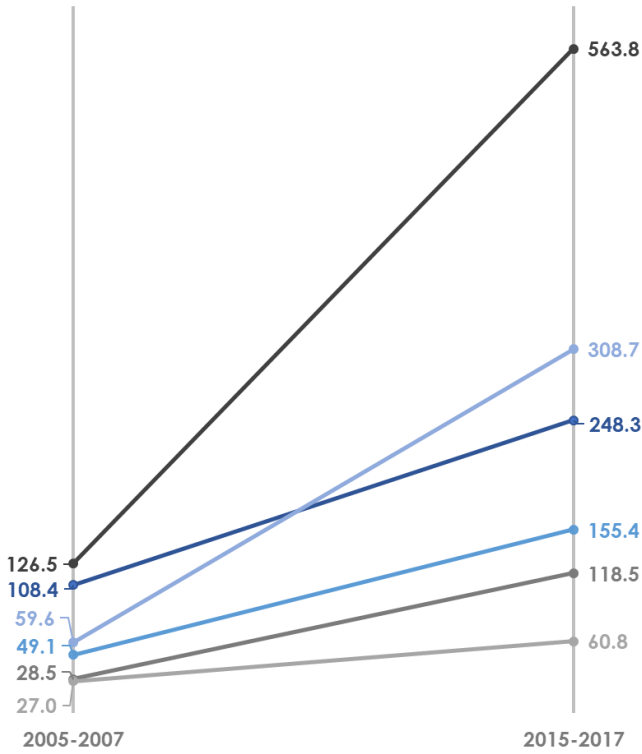
Synthetic opioids and heroin

have two of the sharpest increases, while prescription opioids have decreased due to prescription drug monitoring programs and awareness campaigns.



Racine County Drug Overdose Emergency Department Visit Rate[†] By Age Group¹³

15-24 25-34 35-44 45-54 55-64 65+



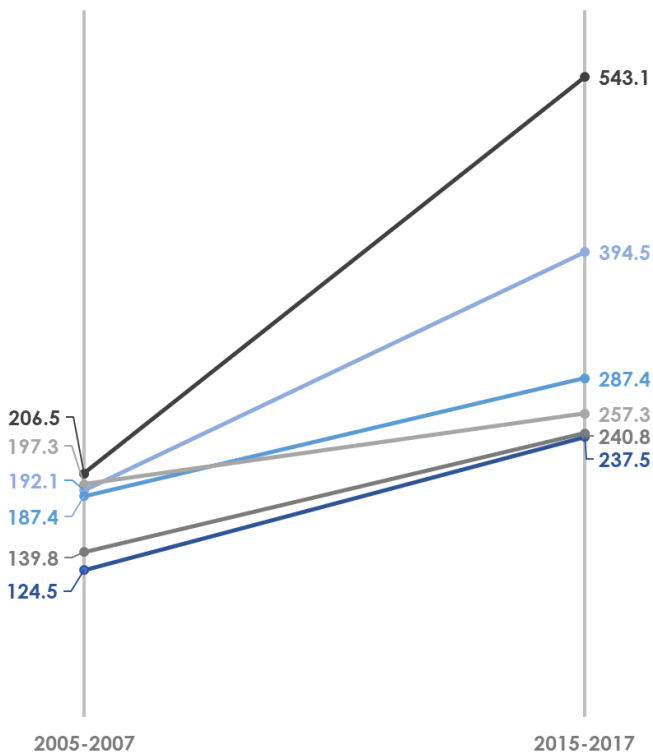
† 3 Year Moving Average, Per 100,000, Defined as ICD-10 code indicating drug poisoning as an underlying cause of death

25-34 year olds

account for the highest rates of overdose-related emergency department visits, hospitalizations, and deaths in Racine County.

Racine County Drug Overdose Hospitalization Rate[†] By Age Group¹³

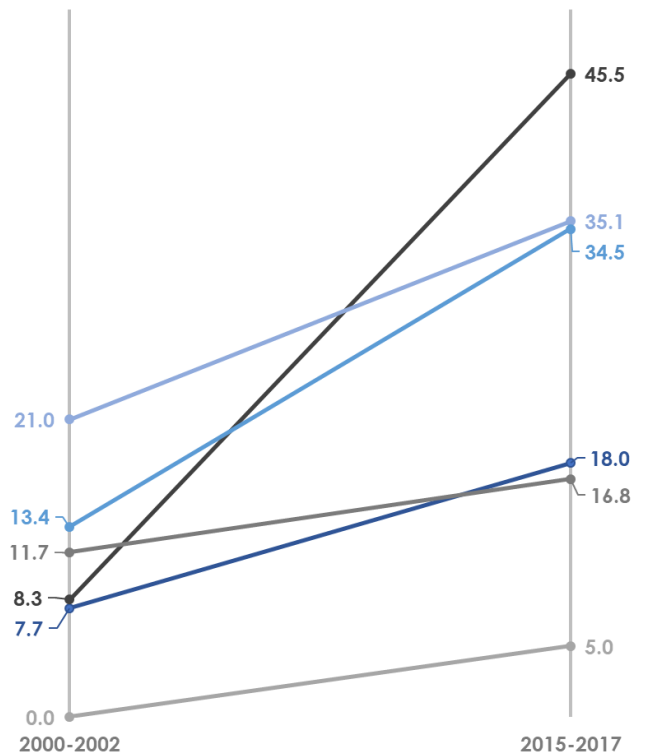
15-24 25-34 35-44 45-54 55-64 65+



† 3 Year Moving Average, Per 100,000, Defined as ICD-10 code indicating drug poisoning as an underlying cause of death

Racine County Drug Overdose Mortality Rate[†] By Age Group¹¹

15-24 25-34 35-44 45-54 55-64 65+



† 3 Year Moving Average, Per 100,000, Defined as ICD-10 code indicating drug poisoning as an underlying cause of death

MYTH VS. FACT

MYTH

Prescription medications are not addictive.

FACT

Prescription medications can be addictive when they are not used responsibly. Both the physician and the patient must consider the risks associated with prescription opioid use.

MYTH

My doctor prescribed it, so it must be safe.

FACT

Even opioids that are prescribed by a licensed physician carry risks. Always use your prescription as directed and ask your doctor about alternative pain management options.

MYTH

Addiction is a choice.

FACT

Addiction is a disease, and while individuals can make a choice to seek treatment, they often require professional support to address the physical and psychological impacts of substance use disorder.

MYTH

I can get in legal trouble for seeking treatment.

FACT

Addiction in itself is not a crime and seeking treatment will not land you in trouble. It is important to know what resources are available to you and where to find them. See page 35 for more details.

MYTH

Only illegal drugs lead to overdose.

FACT

Prescription opioids can also lead to overdose when they are not used as directed. Always follow the guidance of your doctor and never take a larger or more frequent dose than what is prescribed to you.

WHAT CAN WE DO?

We must improve the way we treat pain in order to reverse the opioid epidemic, according to the CDC. Preventing substance abuse, addiction, and overdose before they occur is key to this process. In addition, increasing access to harm-reduction programs and a variety of treatment options will work to reduce the rates of addiction and overdose fatalities.¹⁴

The remainder of this guide provides recommendations using the prevent, reduce, reverse framework from the CDC.



RESPONDING TO THE OPIOID EPIDEMIC¹⁵



PREVENT People From Starting Opioids

Reduce prescription opioid painkiller abuse, improve opioid painkiller prescribing practices, and identify high-risk individuals early.



REDUCE Opioid Addiction

Ensure access to medication assisted treatment (MAT) which combines the use of medications with counseling and behavioral therapies.



REVERSE Opioid Overdose

Expand the use of Narcan (naloxone), a life-saving drug that can reverse the effects of an opioid overdose when administered in time.

PREVENT

MEDICATION MANAGEMENT
MEDICATION SAFE STORAGE AND DISPOSAL
PARENT RESOURCES
CONVERSATION GUIDES
COMMONLY ASKED QUESTIONS
WHAT TO LOOK FOR IN YOUR TEEN'S ROOM
ACTIVITIES FOR PREVENTION
DATA FOR 15-24 YEAR OLDS
IT TAKES A VILLAGE

MEDICATION MANAGEMENT





4,062,133

of opioids prescribed in Wisconsin in 2017¹⁶

IF YOU ARE PRESCRIBED OPIOIDS:

- Talk with your doctor to fully understand the risks and benefits of prescription opioids before taking them.
- Make sure you're getting care that is safe, effective, and right for you. Talk with your doctor about setting goals for management of your pain.
- Ask your doctor about non-opioid options for treating pain including other medications and nonpharmacologic options, like exercise.
- Always tell your doctor about any side effects or concerns you may have.¹⁷

PRACTICE RESPONSIBLE USE:

- Never take opioids in greater amounts or more often than prescribed.
- Always let your doctor know about any side effects or concerns you may have about using opioids.
- Avoid taking opioids with alcohol and other substances or medications. It is very dangerous to combine opioids with other drugs, especially those that cause drowsiness.
- Do not share or sell your prescription opioids.
- Safely store your medications and dispose of any unused medications responsibly.¹⁷

ALTERNATIVES TO OPIOIDS FOR PAIN:

Medication

- Ibuprofen or Naproxen
- Celecoxib or Meloxicam
- Flector & Lidoderm patches
- Voltaren gel
- Tizanidine
- Gabapentin
- Cymbalta

Non-pharmacologic

- Physical Therapy
- Chiropractic
- Epidural Injections
- Facet Injections
- Nerve Blocks
- Botox Injections
- Radiofrequency Ablation (RFA)
- Platelet Rich Plasma¹⁸

MEDICATION SAFE STORAGE



If you are prescribed opioids, there are ways to protect yourself and your loved ones. Practice these safe storage tips to avoid medication falling into the wrong hands.

Use a lock box to secure prescriptions.

A lock box is a safe alternative to a medicine cabinet and is used to prevent others from purposefully taking medications as well as preventing children from accidentally ingesting them.

Keep track of your medications.

Know the medications you have on hand, including the number of pills in each bottle. Use your prescriptions as directed for both your safety and to avoid any confusion about missing medications.

Dispose of unused medications.

Expired or unused medications should be properly disposed of as soon as possible. Leaving unused medications in the home creates more opportunity for misuse.

Talk to your family about your medications.

Explain to children and teens that you work closely with your doctor to ensure that your medications are safe and effective. Discuss the risks of taking medications that are not prescribed for you and that you are closely monitoring your medications at home.

MEDICATION DISPOSAL

DROP BOX LOCATIONS:



Caledonia Police Dept

6900 Nicholson Rd
Caledonia, WI 53108



Town of Burlington Police Dept

32288 Bushnell Rd
Burlington, WI 53105



City of Burlington Police Dept

224 E Jefferson St
Burlington, WI 53105



Union Grove Village Hall

925 15th Avenue
Union Grove, WI 53182



City of Racine Police Dept

730 Center St
Racine, WI 53403



Town of Waterford Police Dept

415 N Milwaukee Street
Waterford, WI 53185



Mt Pleasant Police Dept

8811 Campus Drive
Mt Pleasant, WI 53406



Wind Point Village Office

215 E Four Mile Road
Racine, WI 53402



Racine Sheriff Patrol Station

14116 Washington Ave
Sturtevant, WI 53177



Lakeview Pharmacy

516 Monument Square
Racine, WI 53403



Sturtevant Police Dept

2801 89th Street
Sturtevant, WI 53177



Walgreens Pharmacy

4810 Washington Ave
Racine, WI 53406

CANNOT MAKE IT TO A DROP BOX?

Please call your pharmacy, physician, or local police department to inquire about purchasing a mail back package to send in unused or expired medications.

Cortney's Story

My first prescription opioid pill came from a girlfriend, who told me that it was safe and harmless because it came from her doctor. But that pill flipped a switch inside me that took away my emotional pain and made me numb. I knew hard drugs were illegal and taboo, but I didn't think that these pills were dangerous. I had no idea that I could actually get addicted—I just knew that I felt sick when I stopped taking them.

My family tried to get me into treatment programs, but as soon as I started feeling the symptoms of withdrawal, I would sign myself out. Finally, things changed right after my 19th birthday. I was living with a gang, had warrants out for my arrest in four counties, and had destroyed almost every meaningful relationship. My absolute lowest point was when I drove to a rural town and tried to intentionally overdose on multiple drugs. I had resigned myself to the idea that I was going to die addicted to drugs. There was no hope or fight left in me. That night I should have died, but instead, I woke up cold and confused in my car the next morning. It was then that I decided to stop running. I went home to my mother where she hugged me tight, told me she loved me, and called the cops. I was arrested in my kitchen and taken to jail.

After months of withdrawal symptoms while incarcerated, I finally felt like my mind was clearing up. Thanks to recovery resources and wonderful support from peers and counselors, I realized that I didn't have to live that way anymore; I realized recovery really was possible for me. This was not the end of my journey; I had to climb out of a really big hole. With the burden of legal expenses, lack of education, strain on the relationships in my life – I had a lot to heal and repair as I moved forward with my life.²¹



PARENT RESOURCES



IT IS NEVER TOO EARLY TO SET THE FOUNDATION FOR HEALTHY BEHAVIOR

It is important to begin healthy communication habits with your child at an early age. Listening closely and acknowledging their feelings helps to establish trust and open communication, which makes discussing difficult topics, such as substance abuse, easier.



TIPS TO REMEMBER

- Be a good role model.
- Encourage healthy relationships.
- Be prepared to have several conversations.
- Be clear about your expectations and rules.
- Ask questions to understand your child's point of view.
- Educate yourself and be equipped with facts.
- Be involved in your child's life and share their interests.
- Recognize good behavior consistently and immediately.^{22, 23}

TALKING TO YOUR TEEN

1 PROVIDE STRUCTURE

Your teen is likely seeking more independence and trying to push boundaries. While it is important to let them learn how to be independent adults, it is equally important to provide a stable, structured home environment. Encourage your teen to contribute to the household's structure through setting routines, chores/responsibilities, and curfews.

2 BE CLEAR ABOUT YOUR EXPECTATIONS AND RULES

While your teen is probably trying to test their boundaries, it is important to establish rules and be up front and clear about your expectations of them. Leaving your teen guessing about what is expected of them can create ambiguity about what is acceptable behavior and lead to unhealthy behaviors. It can be helpful to explain the "why" behind your rules and include teens in conversations to develop house rules so that they feel heard and respected.

3 DEVELOP AN "ESCAPE PLAN"

Take time to develop a plan for them to remove themselves from risky situations. This could be a code word they can text you that prompts you to ask them to come home or go pick them up.

4 DELIVER A CONSISTENT MESSAGE

Ensure that all of your teen's caregivers are consistently delivering a message to promote healthy behaviors and prevent substance abuse. Inconsistencies in this message could confuse your teen or encourage risky behavior.

5 EXPECT QUESTIONS

Be prepared to answer questions about drug abuse, addiction, and various "what if" scenarios. If you do not know the answer to their question, offer to find the answer together and use the opportunity to teach your teen how to find accurate information from reputable sources.

6 GET PERSONAL

Your teen may ask questions about your past experiences with alcohol and drugs. It is up to you to examine your relationship with your teen and determine what is appropriate to share. Sometimes being open about your experiences and the consequences or lessons you learned can be a powerful learning tool.

SCHOOL AGE STRATEGIES

1 FOSTER HEALTHY FRIENDSHIPS

Encouraging healthy friendships is important both for development of social skills and for creating a safe and healthy group to rely on when they are away from home. Get to know your child's friends and discuss with them what qualities they value in good friends.

2 CLARITY AND CONSISTENCY ARE KEY

When setting rules and expectations for your child, it is important to be clear and consistent with your message. Changing the rules without notice creates confusion and instability. Also, be sure that all of your child's caregivers are consistent with the rules and messages being provided to your child.

3 CREATE A CODE WORD

Come up with a plan for your child to notify you if they find themselves faced with the opportunity to try drugs or alcohol. Finding a code word that they can send via text or use in a phone call is an easy way for them to get out of a difficult situation. If they have to use their code word, follow up with a conversation and be sure to praise them for making a good decision under pressure.

4

PRACTICE FOR PEER PRESSURE

Another way to help your child navigate difficult situations is to practice what they will say when faced with peer pressure. Come up with a few phrases together that they feel comfortable using and practice role playing so they feel confident putting them to use.

5

ANSWER THE "WHY"

"Why?" is a common question for school age children as they are curious to learn more about the world around them. Try not to dismiss them or answer with "because I said so." Rather, encourage them to think critically and find the answer together. This helps them build problem solving skills they can apply in other situations as well.

6

SHOW AN INTEREST IN THEIR INTERESTS

Encouraging your child to follow their passions is a great way to promote healthy growth and development. It is also important to participate and learn about those interests yourself. This will build more trust and a stronger bond with your child.

7

CONNECT WITH OTHER PARENTS

Get to know the parents of your child's friends and have conversations about what they are doing to prevent their child from experimenting with drugs and alcohol. These relationships could help you learn tips for prevention or simply help you to identify safe places to allow your child to play.

GREAT FOUNDATIONS FOR YOUR CHILD

1 INCLUDE YOUR CHILD IN CONVERSATIONS

Including your child in your everyday conversations shows them that they are valued and respected. Take time to listen to their ideas and ask for input on simple things such as what to have for dinner or what activities to do on the weekend.

2 MAKE TIME FOR ACTIVITIES

Spend at least 15 minutes a day engaging in a fun activity that your child loves. This shows them that you care about their interests and helps to build trust. Use this time to ask questions and actively listen to their ideas.

3 RECOGNIZE AND REWARD GOOD BEHAVIOR

Recognizing your child for good behavior helps to reinforce their positive choices and encourage them to continue in that direction. Try to acknowledge good choices and reward positive behavior as soon as possible.

4 TALK OPENLY ABOUT FEELINGS

If your child is feeling frustrated, angry, or sad, ask them how they are feeling and guide them to cope with emotions in a healthy way (i.e. if they feel sad talk about why and offer to do a comforting activity or simply a hug). Learning to manage emotions at a young age can help your child avoid turning to drugs or alcohol to cope with challenging feelings later on in life.

5 FOSTER HEALTHY FRIENDSHIPS

Teaching your child how to make friends and navigate relationships with their peers helps them develop socially and prepares them to handle conflict when they are older. These skills will help them better handle situations with peer pressure.

6 PROMOTE HEALTHY BEHAVIORS

Teach your child to care for and respect his or her body. Eating healthy foods, staying active, and getting enough rest are all great ways to introduce the promotion of physical and mental health to your child.

7 CREATE ROUTINES

Children crave structure and thrive when they know what to expect. Having consistent routines in the morning and before bed helps your child to engage in positive behaviors and establishes a foundation for long term success.



COMMONLY ASKED QUESTIONS

HOW TO ANSWER YOUR CHILD'S QUESTIONS ABOUT OPIOIDS

✓ **THINGS TO REMEMBER:**

- ✓ Be prepared with facts and resources
- ✓ Ask open-ended questions
- ✓ Listen, don't lecture
- ✓ Make your expectations clear

"EVERYONE DOES IT."

"It may seem like everyone does it because of what you see online or in school, but the reality is that most teens don't use drugs. It might be popular, but that doesn't mean it's safe."

"YOU TAKE MEDICATION, WHY CAN'T I?"

"You're right. I work closely with my doctor to make sure it is the best option for my pain and that I am taking them safely and responsibly."

"I DON'T KNOW WHAT TO SAY WHEN MY FRIENDS ASK ME TO USE DRUGS."

"Let's figure out a response you're comfortable with together. It's best to be direct and assertive about your choices."

"ISN'T IT SAFE IF IT IS A PRESCRIPTION?"

"Opioids are only safe if taken as prescribed by a doctor. If it wasn't prescribed for you, don't take it."

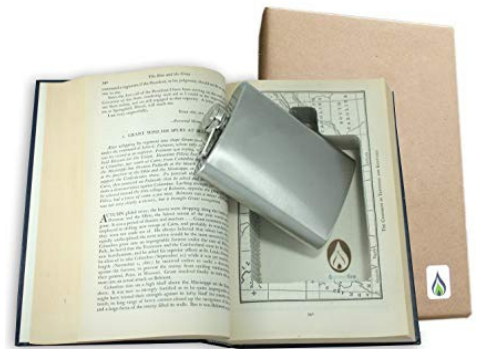
"IT'S MEDICINE, SO WHY WORRY?"

"Opioids are prescribed for those who need them for severe pain. Any medication (even over the counter) is dangerous if misused."

WHAT TO LOOK FOR IN YOUR TEEN'S ROOM

Kids come up with creative places to conceal alcohol, drugs, and drug paraphernalia. Some possible hiding spots include:

- Dresser drawers beneath or between clothes
- Desk drawers
- CD/DVD cases
- Small boxes - jewelry, pencil, etc.
- Backpacks/duffel bags
- Under a bed
- In a plant, buried in the dirt
- In between books on a bookshelf
- Inside books with pages cut out
- Makeup cases - inside fake lipstick tubes or compacts
- Under a loose plank in floor boards
- Inside over-the-counter medicine containers (Tylenol, Advil, etc.)
- Inside empty candy bags such as M&Ms or Skittles
- Inside empty soda cans or cans with false bottoms



ACTIVITIES FOR PREVENTION

GET INVOLVED IN YOUR COMMUNITY

Encouraging your child to participate in community programs and groups shows them that they have support both at home and in their neighborhood.

BE CREATIVE

Art and music are great ways to bond with your child while teaching them healthy coping skills.

BE ACTIVE TOGETHER

Build healthy habits as a family and use these activities as an opportunity to talk about other health choices, such as how to avoid drugs and peer pressure.

HOST A PLAYDATE

Being the host for play dates supports your child in building healthy friendships while reinforcing that home is a safe space for them to build relationships.

KID'S CHOICE

Allowing your child to choose an activity shows them that you care about their interests and opinions.



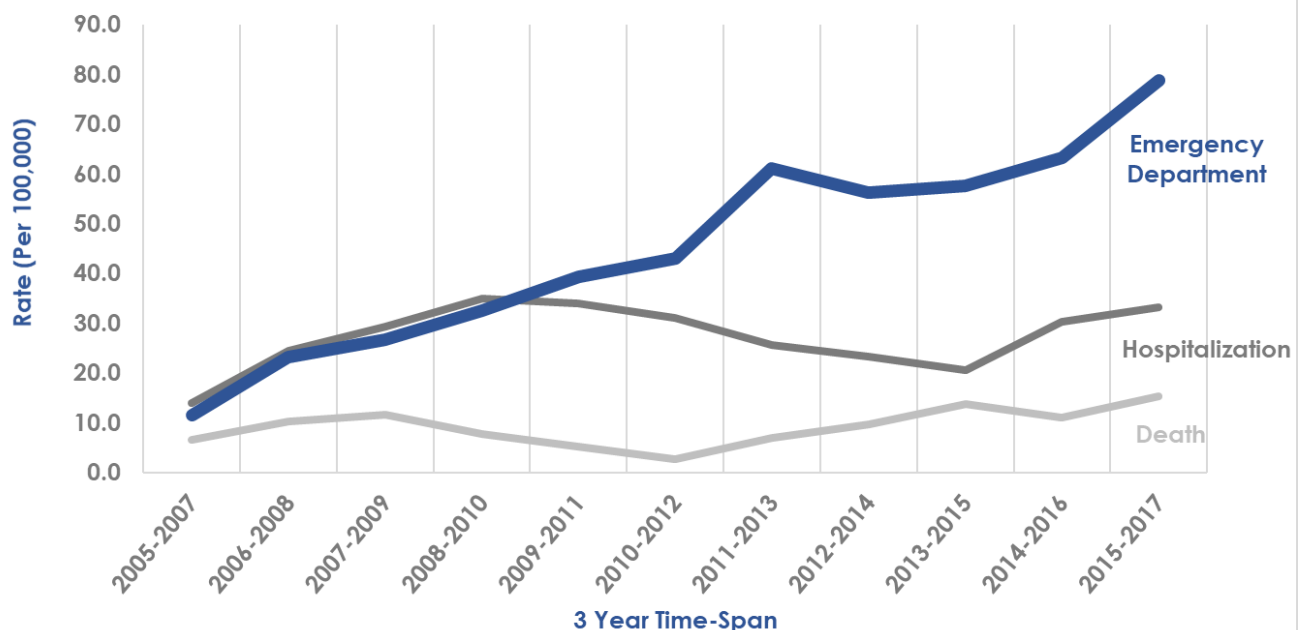
15-24 year olds

consistently have a higher incidence of overdose-related emergency department visits compared to deaths. While they are experiencing overdose, we have the opportunity to reverse the overdose and get them into treatment.

30%

of all opioid-related emergency department visits in Racine County are by 15-24 year olds.¹³

In Racine County, the Opioid-Related Rate[‡] of Emergency Department Visits for the 15-24 Age Group is Increasing^{11, 13}



[‡] 3 Year Moving Average

IT TAKES A VILLAGE



Parents often struggle with the balance between providing love and support for their child and helping them get treatment. Parents instinctively want to protect their child, which can lead to inadvertently enabling addictive behaviors. It is important to enlist the help of professional and community support. Addiction affects the entire family and it is not a battle that you have to fight alone.



TIPS TO REMEMBER

- **Build a community of support for yourself and your child.** As much as your child needs help with recovery, you also need support from peers who have been in your shoes.
- **Be honest and transparent with your child about your needs** ("I am afraid that you will use the money I give you to buy drugs and I cannot deal with the guilt of supporting your addiction").
- **Know your resources.** Do some research on treatment facilities near you and determine what might be a good fit for your child.
- **Remember, you do not have to fix this alone.** Your child has to be ready to accept treatment and address the underlying psychological and behavioral issues that support their addiction.
- **Enlist the help of an intervention specialist.** Do not take on an intervention alone. An intervention specialist can help to plan and implement the intervention effectively as someone who is not personally involved in your child's life.

Devin's Story

Devin had his wisdom teeth removed when he was 16. After the surgery, he received a 30-day prescription for opioid pain medication and liked the way the pills made him feel. After three days, he had used the entire prescription. He soon realized it was easy to obtain prescription opioids from people's bathrooms, from friends, or from people on the street. Throughout college, he used prescription opioids and heroin. He woke up one day, at age 24, and found himself in a hospital with his mother and a drug counselor at his side. They said to him, "Devin, you overdosed. You need to get help." It was then that he realized he was on his way to losing everything and needed to make a change.

With the support of his family, he started rehabilitation at a treatment center for 90 days. After successfully completing treatment, he entered a transitional living house. Today, Devin has been in recovery for 10 years. He has a wife, a daughter, a home, a master's degree, and a career that he has dedicated to helping others recover from substance use. Devin reminds his clients that opioid use disorder is a brain disease, not a moral failing. When he goes to the doctor or dentist now, he always talks with them about his history of substance use and makes it clear that he does not want an opioid prescription.²¹



REDUCE

WHAT ARE YOUR TREATMENT OPTIONS?
WHERE TO FIND HELP
OPIOIDS IN THE WORKPLACE
PREVENTION AT WORK
RECOVERY FRIENDLY WORKPLACES
STIGMA

WHAT ARE YOUR TREATMENT OPTIONS?

There are many pathways to recovery and it may take a combination of therapies to reach sobriety. The first step is getting in touch with a recovery specialist who can connect you to local treatment centers and resources that are the best fit for you.

Medication Assisted Treatment (MAT)

Medications such as methadone, buprenorphine, and naltrexone are used to treat addiction and prevent relapse. Methadone and buprenorphine suppress withdrawal symptoms and reduce cravings, while naltrexone blocks the effects of opioids in the brain. MAT is usually combined with behavioral therapy to yield the most effective results.

Behavioral Therapies

Behavioral therapy helps patients address their attitudes and behaviors in relation to drug use. Behavioral therapy can be used alone or in conjunction with MAT. Treatment can take place in many different settings including inpatient and outpatient options.

Inpatient Treatment

Inpatient treatment takes place in a treatment facility and can vary in duration. Treatment can include detoxification, clinical care, and counseling in a highly structured setting. Recovery housing or sober living communities are also inpatient options that help a person transition from treatment to independent life.

Outpatient Treatment

Outpatient treatment typically consists of individual or group counseling on a regular basis. Sometimes frequency of visits can be higher at first and then taper off to less frequent, but still consistent visits.



WHERE TO FIND HELP

Wisconsin Addiction Recovery Helpline

This free and confidential service helps you find local treatment and recovery services. You can call, text, or chat online with a resource specialist 24/7.

1-833-944-4673
www.addictionhelpwi.org²⁷

SAMHSA

Substance Abuse and Mental Health Services Administration (SAMHSA) offers treatment directories via their online platform and phone hotline.

1-800-662-HELP (4357)
TTY: 1-800-487-4889
www.samhsa.gov/find-help/national-helpline²⁸

WISHOPE

Find local treatment resources, naloxone pharmacies, and drug drop boxes. Call their peer to peer recovery resource and support line to get connected with services in your area.

Call 1-844-WIS-HOPE
<https://www.wishope.org/>²⁹

Veteran's Crisis Line

The Veteran's Crisis Line offers veterans and their families assistance through their hotline, online chat, or text.

1-800-273-TALK (8255)
TTY: 1-800-799-4889
www.veteranscrisisline.net³⁰

Racine County Human Services

Behavioral Health Services provides a comprehensive array of mental health and substance abuse services including outpatient evaluations, psychotherapy, and counseling. BHS is available Monday - Friday, 8am-5pm.

Call 1-262-638-6744

Crisis Services provides emergency mental health services 24/7 to assist in developing response plans to provide information and resources to meet an individual's service need.

Call 1-262-638-6741³¹



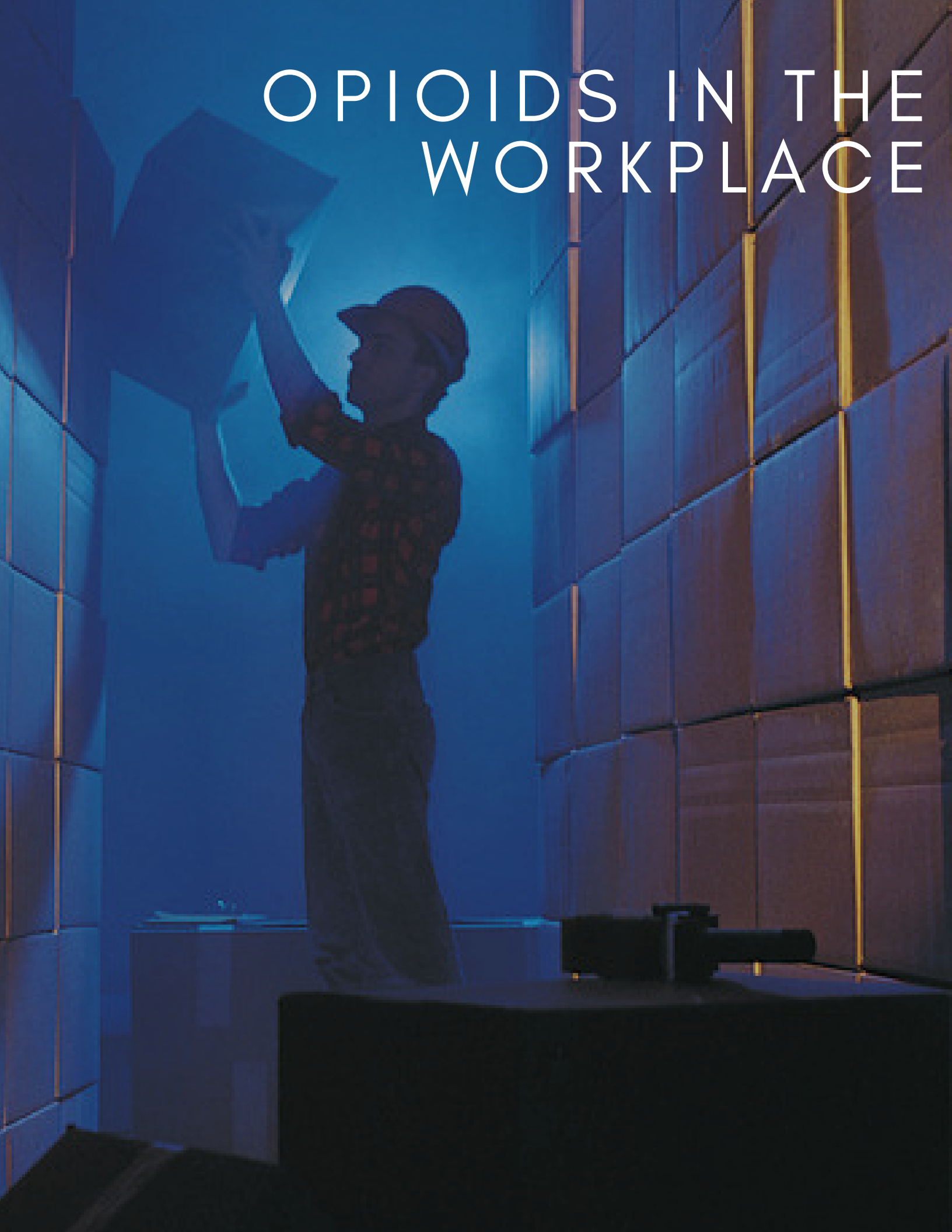


Brenda's Story

When she was 25, Brenda was in a car crash on her way to the grocery store. After the incident she needed to see numerous doctors and neurologists, and one of them gave her a prescription for opioid pain medication. Brenda doesn't remember being warned about the risks of taking prescription opioids or the dangers of misuse. One day after she filled the prescription, she doubled her dose and, from that moment on, she never again took the medication as it was prescribed. She began going to multiple doctors for pills and eventually was buying and selling them in her community. She felt lonely and isolated, and was suffering. Everything else took a backseat in her life, including her friends and family. Brenda became addicted to heroin, a point that she never thought she would reach.

When Brenda discovered she was four weeks pregnant, "Part of me wanted to keep using, but more of me wanted to stop," she said. Thanks to the help of her family, especially her stepfather, she was able to get into a treatment program for pregnant women and to detox. She entered a transitional living program and delivered a healthy baby. She has been in recovery for two years.²¹

OPIOIDS IN THE WORKPLACE



OPIOIDS IN THE WORKPLACE

According to the National Safety Council, an average of 15.6% of employees live with a substance use disorder with the highest rates of prescription pain medication disorders coming from people in the services sector. Workplaces with high on-the-job injury rates and/or rural locations tend to see increased rates of prescription drug misuse. There are many steps you can take to identify and solve substance abuse problems in the workplace.

The opioid crisis is particularly troubling for businesses due to increased health care costs and decreased productivity as a result of absenteeism. On average, people with opioid use disorders spend five times as many days in the hospital each year and are 4.5 times more likely to visit the emergency room. This translates into higher insurance premiums for employers.³²

SIGNS YOUR EMPLOYEES MAY BE STRUGGLING WITH OPIOIDS:

- Changes in attendance such as increased sick days or unplanned absences.
- High turnover rates.
- Loss in productivity.
- Increased tension between team members.³²

FOR ASSISTANCE WITH WORKPLACE OPIOID POLICIES AND PROGRAMS:

Drug Free Workplace

The Drug Free Workplace hotline assists employers and unions with establishing policies, drug testing, and employee assistance/other programs.

1-800-WORKPLACE (967-5752)

www.samhsa.gov/workplace/resources/drug-free-helpline³³

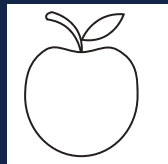


PREVENTION AT WORK



EAP Benefits

Offering an employee assistance program can help address many struggles, including substance abuse, that benefit both the employee and the employer.



Create a Wellness Culture

Encourage healthy choices across your workforce by providing opportunities and incentives for participating in healthy behaviors.



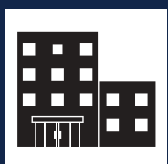
Educate and Engage

Inviting employees to attend presentations or engaging with a health coach can help with identification of a substance abuse issue as well as connection to proper care.



Encourage Routine Care

As part of your employee wellness program, encourage regular visits with a primary care provider. That relationship can help employees safely and effectively manage pain concerns.



Offer Outside Resources

Employees may not feel comfortable addressing substance abuse issues through workplace programs. Offer external resources for prevention and treatment to overcome employees' hesitations.

Recovery Friendly Workplaces

Recovery Friendly Workplaces (RFW's) support their communities by recognizing recovery from substance use disorder as a strength and by being willing to hire and work intentionally with people in recovery. RFW's encourage a healthy and safe environment where employers, employees, and communities can collaborate to create positive change and eliminate barriers for those impacted by addiction.

FOSTER a safe and recovery friendly environment.

- In order to strengthen workplace culture, Recovery Friendly Advisors (RFA's) will support interested companies in finding evidence-based practices to meet their individualized needs.
- RFA's will help you develop and sustain the RFW Initiative in your workplace. They are your Recovery Friendly Workplace partners; there are no charges for their services.

ENGAGE their employees in addiction & behavioral health education and prevention.

- RFA's will provide workplaces with information and resources to promote health, well-being, and recovery for themselves and their family members.
- RFW's will provide their employees with education and review of the company's alcohol, tobacco, and other drug policies upon hire and on an annual basis thereafter.
- RFA's will consult with employers to plan trainings related to substance misuse, behavioral health, and addiction that are tailored to the company's specific needs.

RETAIN healthy and productive employees.

- Workplaces that implement evidence-based health and safety programming retain a healthier, more productive, and more motivated workforce.

PROMOTE prevention and recovery in their local communities.

- By creating a recovery friendly environment, employers send a strong message to their communities that they understand the importance of a solution-focused approach by addressing addiction and behavioral health "head-on."
- RFA's will assist businesses with participating in public awareness and education events in their communities. These events build loyalty between the recovery community, their allies and the designated RFW.

Want to become a RFW?

Visit <https://www.wishope.org/become-a-rfw/>

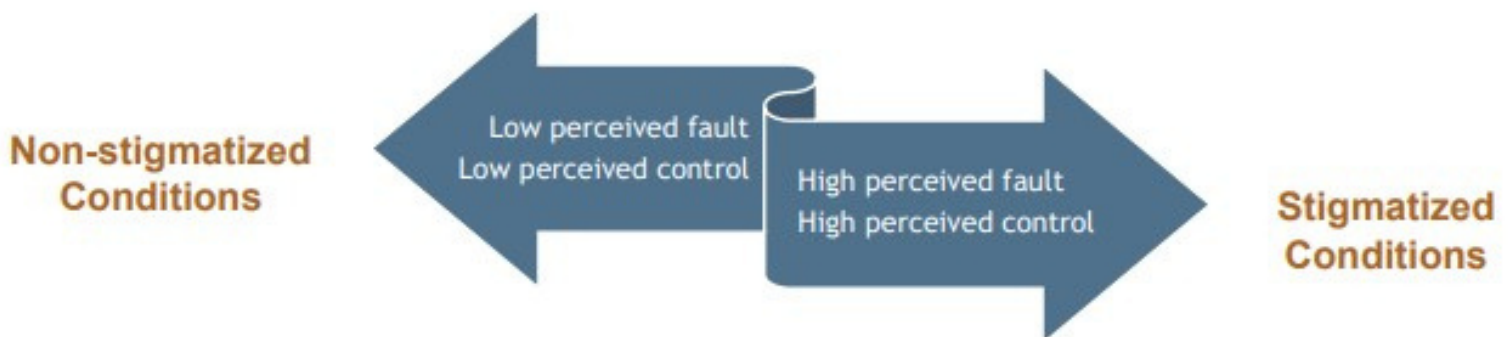
STIGMA



STIGMA

: a mark of disgrace or infamy, a stain or reproach, as on one's reputation.³⁵

While substance use disorder is a disease, it is commonly perceived that the person struggling with substance use disorder is at fault and has control over their choices. Other conditions, such as cancer, are not stigmatized because the perception is that the person is not at fault for their condition. The reality is that neither condition stems from the fault or control of the victim, and we must begin to change the narrative around addiction in order to better support those in need of treatment.³⁶



How to Reduce the Stigma Around the Opioid Epidemic

- **Use first person language.** Saying that a person has substance use disorder suggests that the person has a problem that can be addressed. Saying that someone is an addict implies that the person is the problem.
- **Use proper terminology to avoid stigma.** Saying substance use disorder instead of addiction helps to reinforce the fact that the issue is a disease that needs treatment, rather than a personal flaw.
- **Use reputable sources for finding substance abuse or treatment information.** While there are reputable sources of information online, there is also an abundance of false information or stigmatizing messages that are just as easy to find. Always check the source of your information before accepting and sharing the message.

- **Use social media responsibly.** Similarly to the issue of finding false information online, there are plenty of false or misleading messages being spread on social media. It is all too easy to hit "share" without checking the source of the message. Social media is a great tool for reaching a large audience and garnering support for a cause. Be certain that the information you share is accurate and aim for messages that support those who struggle with substance use disorder before hitting "share."
- **Avoid sensational or fear based language.** It is easy to get pulled in by headlines about "newer" or "bigger" drug threats, however using terminology that inflates the severity of the opioid epidemic also inadvertently increases stigma by suggesting that individuals that fall victim to substance use disorder are stupid, dangerous, or illogical
- **Perform a "language audit."** Take a look at the terminology that you use on a regular basis and see if there are areas in which you could use less stigmatizing language. It takes time to make these new terms a habit, but making this effort to change the narrative will help to reduce stigma around the issue of substance use disorder.³⁶



**“The power to label is
the power to destroy.”**

— Allen Frances, *Saving Normal: An Insider's Revolt Against Out-Of-Control Psychiatric Diagnosis, DSM-5, Big Pharma, and the Medicalization of Ordinary Life*³⁷

REVERSE

WHAT IS AN OVERDOSE?
SIGNS OF OVERDOSE AND OVERMEDICATION
WHAT TO DO IN CASE OF AN OVERDOSE
DOS AND DON'TS
NARCAN
HOPE AGENDA AND GOOD SAMARITAN LAWS

NARCAN

(NALOXONE)

SAVING LIVES

"Naloxone [Narcan] is a medication designed to rapidly reverse opioid overdose. It is an opioid antagonist—meaning that it binds to opioid receptors and can reverse and block the effects of other opioids. It can very quickly restore normal respiration to a person whose breathing has slowed or stopped as a result of overdosing with heroin or prescription opioid pain medications."³⁸

Image 2: Examples of Medication to Reverse Overdose ^{39, 40, 41}



WHERE CAN I GET NARCAN?

In Wisconsin, pharmacists can sell naloxone without a written prescription. You can also receive Narcan through the needle exchange program by the Aids Resource Center of Wisconsin.⁴²

FAQs

- Is Narcan legal to carry? Yes.
- Who should carry Narcan? Anyone at risk of overdose or who might come in contact with someone at risk of overdose.
- Is Narcan harmful if given to someone who is not overdosing? Serious side effects are rare and the drug will have no effect on someone who is not overdosing on opioids.
- Will Narcan reverse overdoses caused by other drugs? No, Narcan works specifically to reverse opioid overdose only.⁴³



WHAT IS AN OVERDOSE?

According to the CDC, an opioid overdose happens when too much of the drug interrupts the brain's activity and body's natural drive to breathe. Overdose can happen to anyone using opioids, however there are certain factors that increase risk including:

- Combining opioids with alcohol or other drugs.
- Taking high daily doses or more than prescribed.
- Taking illicit or illegal opioids.
- Medical conditions such as sleep apnea or reduced kidney or liver function.
- Age greater than 65 years old.

SIGNS OF AN OVERDOSE:

- Pale, blue skin
- Slow, shallow breathing
- Constricted pupils
- Loss of consciousness
- Choking or gurgling
- Limp body

SIGNS OF OVERMEDICATION:

- Sleepiness or drowsiness
- Confusion, slurred speech
- Slow or shallow breathing
- Very small, pinpoint pupils
- Slow heartbeat or low blood pressure
- Difficulty being awakened from sleep

WHAT TO DO:

- Call 911 immediately.
- Administer Narcan, if available.
- Keep the person awake and breathing.
- Lie the person on their side.
- Stay with the person until help arrives.

DO'S AND DON'TS WHEN RESPONDING TO AN OVERDOSE

- DO attend to the person's breathing by administering oxygen or performing rescue breathing and/or chest compressions.
- DO administer Narcan and utilize a second dose, if no response to the first dose.
- DO put the person in the "recovery position" on their side, if you must leave the person unattended for any reason.
- DO stay with the person and keep them warm.
- DON'T slap or forcefully stimulate the person; it will only cause further injury. Instead, try rubbing your knuckles on the sternum or light pinching to wake them.
- DON'T put the person into a cold bath or shower. This increases the risk of falling, drowning, or going into shock.
- DON'T inject the person with any substance. The only safe and appropriate treatment is Narcan.
- DON'T try to make the person vomit drugs that may have been swallowed. Choking or inhaling vomit into the lungs can cause a fatal injury.





Noah's Story

Noah has fond memories of his childhood and the close relationship he shared with his father, Rick. His dad lived life to the fullest and he was a loved and respected member of the beauty and personal care industry. He worked hard and enjoyed his leisure time entertaining colleagues and friends. Noah describes a belt that his dad used to wear that was inscribed with the phrase, "Too fast to live, too young to die," as a way to describe his father's passion for life. Noah was aware that his father's social lifestyle involved drinking and cigarettes, but it never seemed to be in excess. Noah and his brother felt no cause for concern at first, but they began to notice pills missing from their own opioid prescriptions for their back pain and dental work. Noah and his brother weren't sure their father was to blame, and they didn't feel that they could address the missing pills with him. In addition, they didn't think that he was showing outward signs of drug abuse or addiction.

Rick also suffered from an autoimmune disease called scleroderma. He was hospitalized in his mid-fifties after suffering minor strokes, and although the doctors weren't sure what had caused his stroke and collapse, opioids were found in his system while at the hospital. He received further treatment for the autoimmune disease, which seemed to be a turning point for a healthier lifestyle. However, two years later, Rick was found unconscious in his home with opioids in his system. This time he would not recover. Rick died in the hospital at age 58. Noah regrets not challenging his father about his addiction and wishes he and his family had known about the risks of prescription opioids and had spoken up sooner.²¹



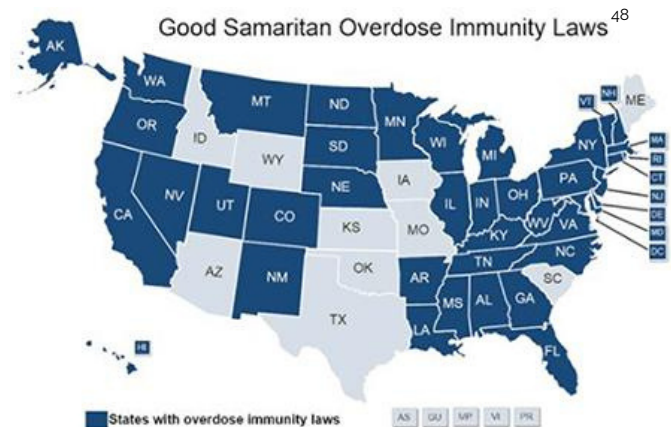
Heroin, Opioid Prevention and Education ⁴⁶

HOPE AGENDA

The HOPE Agenda (Heroin, Opioid Prevention and Education) was formed in 2014 as an effort to combat Wisconsin's heroin epidemic. It includes legislation to support first responders being trained to use naloxone, an increase in drug disposal efforts, and stricter regulations on pharmacy pickups to reduce the rates of prescription fraud and diversion. ⁴⁶

GOOD SAMARITAN LAWS

Currently, in Wisconsin, state statutes protect individuals who provide emergency care from criminal prosecution. This includes protecting individuals who call 911, deliver a person to the emergency room, or possess drug paraphernalia or controlled substances during the emergency being reported. These statutes make it more likely that in the case of an overdose, the people around the individual will be more likely to seek emergency assistance rather than leave the person in fear that they will be prosecuted. ⁴⁷



**“We don't heal in isolation,
but in community.”**

— S. Kelley Harrell, Gift of the Dreamtime - Reader's Companion ⁴⁹

ACKNOWLEDGEMENTS



Centers for Disease Control and Prevention
CDC 24/7: Saving Lives, Protecting People™

Rx Awareness



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10005 Northwestern Avenue, 2nd Floor
Franksville, WI 53126

262-898-4460
www.crchd.com