


# Knock Out Opioid Abuse Day

October 6, 2019





# Knock Out Opioid Abuse Day

A project of the Partnership for a Drug-Free New Jersey and The Community Coalition for a Safe and Healthy Morris, in cooperation with the New Jersey Department of Human Services, and Governor's Council on Alcoholism and Drug Abuse



# What is it?

- October 6, 2019 has been designated Knock Out Opioid Abuse Day in New Jersey.
- The statewide single-day initiative will mobilize the prevention and treatment communities, community leaders, and concerned citizens to raise awareness of the potential for dependency on prescribed pain medicine and its link to heroin abuse rates in our state.
- The mobilization will have a dual focus: educating physicians and raising awareness among New Jersey citizens and families.

Governor Murphy Signs Legislation to Combat Opioid Crisis

07/15/2019

**TRENTON** – Governor Phil Murphy today signed three pieces of legislation addressing the opioid crisis. A3292, A4744, and SJR35 will strengthen opioid prescription label requirements, ensure greater access to Medicated-Assisted Treatment (MAT) benefits for Medicaid recipients, and spread awareness of opioid abuse through the designation of October 6<sup>th</sup> as “Knock Out Opioid Abuse Day”.

# Raising Awareness

OCTOBER 6, 2019

## KNOCK OUT OPIOID ABUSE DAY

BRING THIS LIFE-SAVING MESSAGE TO YOUR COMMUNITY



One of these 3 will be  
addicted to  
opioids within a year...  
just by taking their  
prescribed opioid for  
30 days.



DrugFreeNJ.org

Partnership for a Drug-Free New Jersey  
in Cooperation with the Governor's Council on Alcoholism and Drug Abuse  
and the NJ Dept. of Human Services

 Partnership for a Drug-Free New Jersey  
in Cooperation with the Governor's Council on Alcoholism and Drug Abuse  
and the NJ Dept. of Human Services  
All names, tag lines, artwork and other content are the Intellectual Property of Partnership for a Drug-Free  
New Jersey. © 2019 Partnership for a Drug-Free New Jersey

### VOLUNTEER TODAY

to spread the word to prescribers and  
families in your community.

For additional information  
and to sign-up visit

[www.DrugFreeNJ.org/KnockOutVolunteers](http://www.DrugFreeNJ.org/KnockOutVolunteers)



¿Le daría a su hijo  
**HEROÍNA**  
por un brazo roto  
o dolor de muelas?

ANTES QUE ELLOS RECETAN  
-- USTED DECIDE --



Pregúntele a su médico si necesita  
cómo los medicamentos recetados  
pueden conducir al abuso de heroína.

Partnership for a Drug-Free New Jersey  
DrugFreeNJ.org



**Sugar**

The amount of  
Fentanyl  
that can fit in this  
packet can kill  
hundreds of  
people.

DrugFreeNJ.org

Partnership for a Drug-Free New Jersey  
DrugFreeNJ.org

**46 Americans Overdose on Painkillers Everyday!**



# Building on Success...

## Outreach to Prescribers and Families

New CDC Opioid Prescribing Guidelines  
Improving the Way Opioids are Prescribed  
for Safer Chronic Pain Treatment



- Resource Guides
- Turn The Tide Pocket Cards

### The problem:

Existing guidelines vary in recommendations, and primary care providers say they receive insufficient training in prescribing opioid pain relievers. It is important that patients receive appropriate pain treatment, and that the benefits and risks of treatment options are carefully considered.



**259 million**

In 2012, health care providers wrote 259 million prescriptions for opioid pain relievers – enough for every American adult to have a bottle of pills!



**300% increase**

Prescription opioid sales in the United States have increased by 300% since 1999, but there has not been an overall change in the amount of pain Americans report<sup>11</sup>.



**2 million**

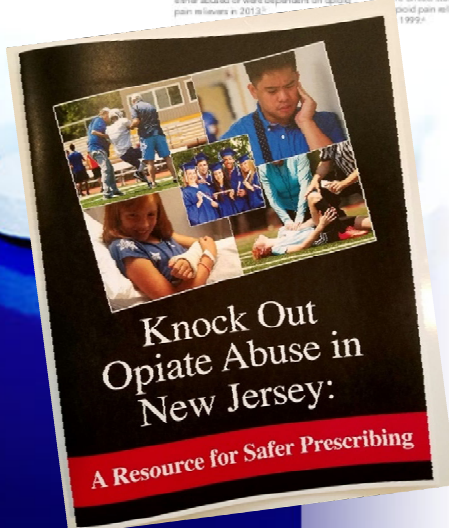
Almost 2 million Americans, age 12 or older, either abused or were dependent on opioid pain relievers in 2012.<sup>12</sup>



**16 thousand**

In 2012, more than 16,000 people died in the United States from overdoses related to opioid pain relievers, four times the number in 1992.<sup>13</sup>

An estimated **1 out of 5** patients with non-cancer pain or pain-related diagnoses are prescribed opioids.



**PRESCRIBE RESPONSIBLY.  
REDUCE OVERDOSE.**

[www.cdc.gov](http://www.cdc.gov)

**GUIDELINE FOR PRESCRIBING  
OPIOIDS FOR CHRONIC PAIN**



# Building on Success... More than 10,000 Volunteers Across NJ

The Courier-News

## Aiming a punch at opioid abuse

Communities, churches,  
hospitals plan programs

SUSANNE RUSSILL

NEW JERSEY — Efforts to curb  
opioid abuse are being launched across the state  
this week.

As part of the statewide Knock Out  
Opioid Abuse campaign, community  
groups and hospitals have planned  
services and programs aimed at at-  
tacking the problem. Several are  
planned for Friday, but other events  
will be held throughout the month.

Statewide, as of May 2017, there  
were 5,209 substance abuse treatment  
admissions and 14,291 discharges in  
2016 reported to the New Jersey De-  
partment of Human Services.

An estimated 2,000 people in New  
Jersey died from an opioid overdose in  
2016, an average of 164 people a day,  
the U.S. die daily from opioid over-  
doses, according to the Partnership for a  
Drug-Free New Jersey.

THE NEW JERSEY Drug and Alcohol  
Abuse Treatment Subgroup, Opioid  
Overview 2016 published in June 2017.

By the state Department of Human Services indicates  
that Somerset, Bridgewater, Elizabeth, Morristown  
and Bound Brook were the top five Somerset County  
municipalities for substance abuse treatment admis-  
sions.

In Middlesex County, the top five were Wood-  
bridge, Perth Amboy, New Brunswick, Middlesex (So-  
with and Edison).

In Hudson County, the top five were Flemington,  
Staten, Glen Gardner, Clinton, Millard and Hightstown.

In Union County, the top five were Elizabeth, Plain  
Field, Union, Lodi and Rahway.

PHOTO BY E. LEA FOR THE COURIER-NEWS  
(R.N.J. 7th District), will be working with Community  
in Crisis volunteers in the area of Pleasant Hill Road in  
the Rancocas Ridge section of Bernardsville, to talk to res-

idents and deliver information about opioid abuse.

At noon Friday in New Brunswick, the Saint Peter's  
Healthcare System will host "The Opioid Epidemic: A  
Perspective on Addiction" in the Saint Peter's de Pueri  
Conference Center on the ground floor of Saint Peter's  
University building, 224 Lamb Ave.

The program is part of the Saint Peter's Healthcare  
system's community effort to reverse the ex-  
istence of opioid drug abuse and deaths through educa-  
tion, community engagement, non-medical alterna-  
tives to pain management and resources.

Superior Public Health Officer, Jean Sten-  
vickson — mother of a young woman who died of an  
opioid overdose — and Margot Frost, Saint Peter's di-  
rector of community health services, are scheduled to  
speak.

Saint Peter's and partners also will address opioid  
abuse starting 7 a.m. Oct. 25 during a day-long series  
of talks for students, parents and faculty in South  
Plainsfield public schools.

Community of Christ and PRIME initiatives will  
benefit from a 9K run and 5 mile run at 10:30 a.m. Sun-  
day at the Liberty Center Presbyterian Church in the  
Liberty Center section of Bernardsville. Check-in begins  
at 8 a.m. and the race start is scheduled for 10:30.

At 7 p.m. Tuesday, Somerset County residents are  
invited to join a conversation on the national opioid  
epidemic in a Knock Out Opioid Abuse Town Hall at  
the Bernardsville High School Performing Arts Center, 25  
Olcott Ave., Bernardsville. Doors open at 6:30 p.m.

Somerset County Prosecutor Michael Robertson,  
Judge J. Agostini, Community in Crisis founder and  
chair, George Rosini, of St. Michael's Community and  
Training Services, Michael Pirozzi, Lodi High School  
Recovery Centers outreach coordinator, Dr. Mi-  
chael Cerveri of Emergency Medical Associates, and  
Assemblyman Jack Ciattarelli (R-28th District) are  
the scheduled speakers.

The Partnership for a Drug-Free New Jersey  
event, organized with the Horizon Foundation for  
New Jersey, will focus on the link between prescrip-  
tion drug dependency and heroin abuse.

On Oct. 15, St. Mark's Episcopal Church in Basking  
Ridge will celebrate Recovery Sunday by recog-  
nizing, supporting and praying for those in recovery  
from substance abuse. Michael Pirozzi of Bernardsville  
will share the journey of recovery at 8 a.m.

On Oct. 28, conversation will be asked to safely dis-  
pose of any unwanted medication and give a Medick  
box as part of the Drug Enforcement Agency's Take  
Back Day to help reduce access and availability of  
medicines in the home.

Other events can be found at [www.drugfree.org](http://www.drugfree.org).  
Staff Writer Suzanne Russell: 732-365-1333; sus-  
anne@couriernews.com

An estimated 2,000 people in New  
Jersey died from an opioid overdose in  
2016, and an average of 164 people in  
the U.S. die daily from opioid

## The Press OF ATLANTIC CITY

## Knock knock. Who's there? DON'T DO DRUGS

Volunteers comb

LATYEN CARROLL

Staff Writer

Two thousand volunteers  
across New Jersey scoured local  
neighborhoods Friday talking to  
residents during the second  
annual Knock Out Opioid Abuse  
Day organized by the Part-  
nership for a Drug-Free New Jersey.  
Christina Smith was one of  
them. At 10 a.m. she stood in a  
Ventnor neighborhood, flyers in  
hand.

Smith, a substance abuse  
attorneys advocate and an out-  
reach manager with Elements  
Behavioral Health in Somers  
Point, walked through her for-  
mer neighborhood, where she  
knew many of the residents and  
business owners. Her plan was  
to walk through the Downbeach  
community, placing flyers on  
windshields, as well as talking to  
local business owners about  
ways they can help the commu-  
nity.

The Absecon resident said she  
would be stopping at a dentist or  
chiropractor offices, places  
where pain medication may be  
prescribed, but also at realty  
offices to alert real estate agents  
of recent scams and dangers that  
can occur when homeowners let  
people in their houses.  
"When you're doing open  
houses, you don't really think a  
take your medications with  
you," said Smith. "People may  
think to put their jewelry away  
but when you're letting

See KNOCK OUT, A6



Christina Smith, of Absecon, delivers information on the dangers of opioid addiction in Ventnor on Friday during the second annual statewide Knock Out Opioid Abuse Day.



Edward Lea / Staff Photographer  
Christina Smith, of Absecon, spots Friday in Ventnor putting  
flyers on cars warning of the dangers of opioid addiction.

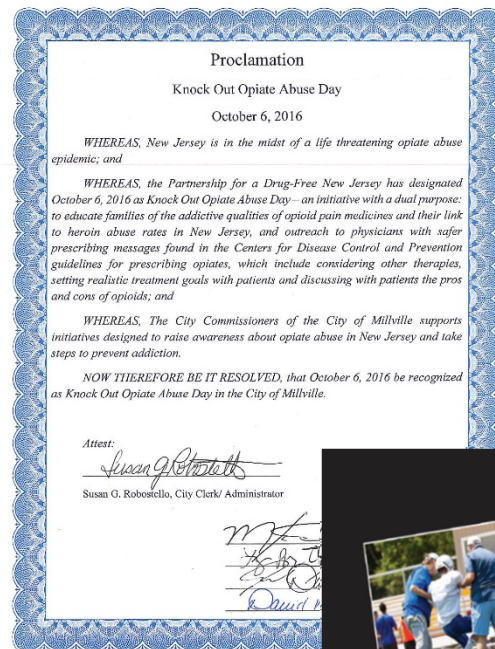
Garfield  
Roselle  
South Amboy  
Vineland..

Just to Name a few!

Send your success story to [PDFNJ@drugfreenj.org](mailto:PDFNJ@drugfreenj.org) to be shared as a best practice!



# Building on Success...

A collage of four images: a person in a blue shirt being helped by others, a group of people in blue shirts, a young girl holding a baby, and a person lying down being attended to by medical staff.

**Knock Out  
Opiate Abuse in  
New Jersey:**

**A Resource for Safer Prescribing**

Opportunity to  
provide 1 Hour Safe  
Prescribing Webinar

# Prevention and Education: A Vital Piece of the Puzzle in NJ.





# 2019 New Door Hangers

The opioid crisis impacts every community in New Jersey.

Learn how to be part of the solution.

**KNOCK OUT  
OPIOID ABUSE**



[KnockOutOpioidAbuse.DrugFreeNJ.org](http://KnockOutOpioidAbuse.DrugFreeNJ.org)

¿Le daría a su hijo  
**HEROÍNA**  
por un brazo roto  
o dolor de muelas?

ANTES QUE ELLOS RECETAN  
- USTED DECIDE.™



Pregúntele a su médico o dentista  
cómo los medicamentos recetados  
pueden conducir al abuso de heroína.



One of these 7  
will be addicted  
to opioids within  
a year...

just by taking a prescribed  
opioid for seven days.

[DrugFreeNJ.org](http://DrugFreeNJ.org)



Americans are now  
more likely to  
die of an opioid  
overdose than in  
a car crash



It's Time to  
Consider Opioid  
Alternatives

[DrugFreeNJ.org](http://DrugFreeNJ.org)



The amount of  
Fentanyl  
that can fit in this  
packet can kill  
hundreds of  
people.

[DrugFreeNJ.org](http://DrugFreeNJ.org)



Thank you!

**UP** United for Prevention  
in Passaic County

# Outreach to Residents and Families

## What are opioids?

Opioids are medications that relieve pain.

New Jersey has the sixth highest rate of visits to the emergency

room  
and  
over





# Outreach to Prescribers: Physicians/Dentists



Knock Out  
Opioid Abuse in  
New Jersey:

A Resource for Safer Prescribing

New CDC Opioid Prescribing Guidelines  
Improving the Way Opioids are Prescribed  
for Safer Chronic Pain Treatment



#### The problem:

Existing guidelines vary in recommendations, and primary care providers say they receive insufficient training in prescribing opioid pain relievers. It is important that patients receive appropriate pain treatment, and that the benefits and risks of treatment options are carefully considered.

 **259 million**

In 2012, health care providers wrote 259 million prescriptions for opioid pain relievers - enough for every American adult to have a bottle of pills.<sup>1</sup>

 **300% increase**

Prescription opioid sales in the United States have increased by 300% since 1999<sup>2</sup>, but there has not been an overall change in the amount of pain Americans report.<sup>3</sup>

 **2 million**

Almost 2 million Americans, age 12 or older, either abused or were dependent on opioid pain relievers in 2013.<sup>4</sup>

 **16 thousand**

In 2013, more than 16,000 people died in the United States from overdoses related to opioid pain relievers, four times the number in 1999.<sup>5</sup>



**PRESCRIBE RESPONSIBLY.  
REDUCE OVERDOSE.**

[www.cdc.gov](http://www.cdc.gov)

**GUIDELINE FOR PRESCRIBING  
OPIOIDS FOR CHRONIC PAIN**

An estimated **1 out of 5** patients  
with non-cancer pain or  
pain-related diagnoses are  
prescribed opioids.



# New Jersey's New Prescribing Law

On February 15, 2017, P.L. 2017, c. 28, was signed into law, imposing certain restrictions on how opioids and other Schedule II controlled dangerous substances may be prescribed. The law went into effect on May 16, 2017 and applies to physicians, dentists, optometrists, podiatrists, physician assistants, certified nurse midwives and advance practice nurses authorized to prescribe controlled substances

With regard to prescriptions for opioid drugs, practitioners are not permitted to issue an initial prescription for an opioid drug for treatment of acute pain in a quantity exceeding a 5 day supply. The amendments also require the prescribing practitioner to discuss with the patient or the patient's parent or guardian the reasons why the medication is being prescribed, the possible alternative treatments, and the risks associated with the medication.

Physicians, physician assistants, dentists and optometrists must complete one CME credit on topics that include responsible prescribing practices, alternatives to opioids for managing and treating pain and the risks and signs of opioid abuse, addiction and diversion.

Information about those rules, as well as guidance for prescribers and patients on safe pain medication prescribing practices is available at [www.njconsumeraffairs.gov/prescribing-for-pain](http://www.njconsumeraffairs.gov/prescribing-for-pain).

## TURN THE TIDE PREScribing OPIOIDS FOR CHRONIC PAIN

### ADAPTED FROM CDC GUIDELINE

Opioids can provide short-term benefits for moderate to severe pain. Scientific evidence is lacking for the benefits to treat chronic pain.

**IN GENERAL, DO NOT PRESCRIBE OPIOIDS AS THE FIRST-LINE TREATMENT FOR CHRONIC PAIN** (for adults 18+ with chronic pain > 3 months excluding active cancer, palliative, or end-of-life care).

### BEFORE PRESCRIBING

#### 1. ASSESS PAIN & FUNCTION

Use a validated pain scale. Example: PEG scale where the score = average 3 individual question scores (30% improvement from baseline is clinically meaningful).

Q1: What number from 0 – 10 best describes your PAIN in the past week?

(0 = "no pain", 10 = "worst you can imagine")

Q2: What number from 0 – 10 describes how, during the past week, pain has interfered with your ENJOYMENT OF LIFE? (0 = "not at all", 10 = "complete interference")

Q3: What number from 0 – 10 describes how, during the past week, pain has interfered with your GENERAL ACTIVITY? (0 = "not at all", 10 = "complete interference")

Such as: NSAIDs, TCAs, SNRIs, anti-convulsants, exercise or physical therapy, cognitive behavioral therapy.

#### 2. CONSIDER IF NON-OPIOID THERAPIES ARE APPROPRIATE

Such as: NSAIDs, TCAs, SNRIs, anti-convulsants, exercise or physical therapy, cognitive behavioral therapy.

#### 3. TALK TO PATIENTS ABOUT TREATMENT PLAN

• Set realistic goals for pain and function based on diagnosis.

• Discuss benefits, side effects, and risks (e.g., addiction, overdose).

• Check patient understanding about treatment plan.

#### 4. EVALUATE RISK OF HARM OR MISUSE, CHECK:

• Known risk factors: illegal drug use, prescription drug use for nonmedical reasons, history of substance use disorder or overdose, mental health conditions, sleep-disordered breathing.

• Prescription drug monitoring program data (if available) for opioids or benzodiazepines from other sources.

• Urine drug screen to confirm presence of prescribed substances and for undisclosed prescription drug or illicit substance use.

• Medication interactions. AVOID CONCURRENT OPIOID AND BENZODIAZEPINE USE WHENEVER POSSIBLE.

### WHEN YOU PRESCRIBE

#### START LOW AND GO SLOW. IN GENERAL:

• Start with immediate-release (IR) opioids at the lowest dose for the shortest therapeutic duration. IR opioids are recommended over ER/LA products when starting opioids.

• Avoid a 90 MME/day, consider specialist to support management of higher doses.

• If prescribing a 50 MME/day, increase follow-up frequency, consider offering naloxone for overdose risk.

• For acute pain, prescribe a 3-day supply; more than 7 days will rarely be required.

• Counsel patients about safe storage and disposal of unused opioids.

See below for MME comparisons. For MME conversion factors and calculator, go to [turnthetide.org/treatment](http://turnthetide.org/treatment)

#### 50 MORPHINE MILLIGRAM EQUIVALENTS (MME) DAY:

• 50 mg of hydrocodone (10 tablets of hydrocodone/acetaminophen 5/300)

• 33 mg of oxycodone (~2 tablets of oxycodone sustained-release 15mg)

#### 90 MORPHINE MILLIGRAM EQUIVALENTS (MME) DAY:

• 90 mg of hydrocodone (18 tablets of hydrocodone/acetaminophen 5/300)

• 50 mg of oxycodone (4 tablets of oxycodone sustained-release 15mg)

### AFTER INITIATION OF OPIOID THERAPY

#### ASSESS, TAILOR & TAPER

• Reassess benefits/risks within 1-4 weeks after initial assessment.

• Assess pain and function and compare results to baseline. Schedule reassessment at regular intervals (e.g., 3 months).

• Continue opioids only after confirming clinically meaningful improvements in pain and function without significant risks or harms.

• If new addiction or overdose risk, then taper. Example taper plan: 10% decrease in original dose per week or month. Consider psychological support.

• Tailor taper rates individually to patients and monitor for withdrawal symptoms.

### TREATING OVERDOSE & ADDICTION

#### Screen for opioid use disorder

(e.g., difficulty controlling use; see DSM-5 criteria). If yes, treat with medication-assisted treatment (MAT). MAT combines behavioral therapy with medications like methadone, buprenorphine, and naltrexone. Refer to [turnthetide.org/treatment](http://turnthetide.org/treatment) and [www.hhs.gov/oduid](http://www.hhs.gov/oduid).

• Learn about medication-assisted treatment (MAT) and apply to be a MAT provider at [www.samhsa.gov/mat7](http://www.samhsa.gov/mat7).

• Consider offering naloxone if high risk for overdose. History of overdose or substance use disorder, higher opioid dosage (> 50 MME/day), concurrent benzodiazepine use.

### ADDITIONAL RESOURCES

CDC GUIDELINE FOR PRESCRIBING OPIOIDS FOR CHRONIC PAIN:

[www.cdc.gov/drugopinions/data/assets/Document1/000001.pdf](http://www.cdc.gov/drugopinions/data/assets/Document1/000001.pdf)

SAMHSA POCKET GUIDE FOR MEDICATION-ASSISTED TREATMENT (MAT):

[www.samhsa.gov/MATguide](http://www.samhsa.gov/MATguide)

NDAIME ID: [www.drugabuse.gov/related-medical-health-professionals](http://www.drugabuse.gov/related-medical-health-professionals)

ENROLL IN MEDICARE: [go.cmr.gov/enroll](http://go.cmr.gov/enroll)

Most prescribers will be required to enroll or verify opt out of Medicare for their prescriptions for Medicare patients to be covered. Only may prevent patient access to medications.

### JOIN THE MOVEMENT

and commit to ending the opioid crisis at [turnthetide.org](http://turnthetide.org)

TURN THE TIDE





# Collaborating for Success

- GCADA
- DMHAS



# Additional Resources..

## Ask Questions



### ***Before Taking Opioids***

**When your prescriber recommends treating your pain with a prescription opioid** such as hydrocodone, oxycodone, codeine, or morphine, **ask if it is right for you and about alternatives.** Additionally you may ask:

#### **How long should I take this medication?**

Ask that your prescriber provide you with the lowest dose and the smallest quantity needed to treat your pain. Ask about a plan for the gradual reduction of opioid use during your prescription.

#### **How can I reduce the risk of potential side effects from this medication?**

Take your medicine exactly as prescribed. Learn about side effects (such as excessive sleepiness or a feeling of craving more of the medication) and when to call your prescriber or go to the hospital.

#### **What if I have a history of addiction?**

Tell your prescriber about any history you or a family member may have had with substance misuse or addiction to drugs or alcohol.

#### **Can I share this medication?**

**No.** What's safe for you might lead to an overdose for someone else.

*more...*



## Ask Questions *Before Taking Opioids*

### **What about the other medications I'm taking?**

Tell your prescriber about all of the medicines you are taking, especially those prescribed to treat anxiety, sleeping problems, or seizure and ask about possible interactions.

### **How should I store my opioid medicine?**

If you have children at home – from a toddler to a teenager – consider a lockbox to secure your medications. Even one accidental dose of opioid medicine meant for an adult can cause a fatal overdose in a child. And people who you'd never expect may look for a chance to steal these medicines.

### **What should I do with unused medicine?**

Safely dispose of unused medications – especially opioids – by taking advantage of **Project Medicine Drop** or other take-back programs. New Jersey's **Project Medicine Drop** makes it easy to safely and securely dispose of your unused medications and is available 24/7/365. Call **973-504-6263** or visit **[www.njconsumeraffairs.gov/meddrops](http://www.njconsumeraffairs.gov/meddrops)**.



## Ask Questions *Before Taking Opioids*

[www.njconsumeraffairs.gov/prescribing-for-pain](http://www.njconsumeraffairs.gov/prescribing-for-pain)

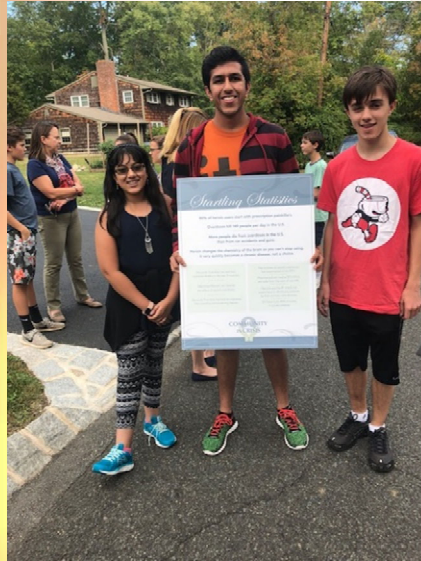
# Coordination and Trainings



- County Teams
- Outreach: Media and Prescriber List
- In Person Trainings and Material Distribution:
  - September 16<sup>th</sup>: Morris County
  - September 17<sup>th</sup> GCADA Volunteer of the Year
- Do you want to be a distribution location in your community?



# Past Supporters





# Success Strategies





# High School Sports



## The Record

Date: Friday, October 06, 2017  
Location: HACKENSACK, NJ  
Circulation (DMA): 127,987 (1)  
Type (Frequency): Newspaper (D)  
Page: S8  
Section: Sports  
Keyword: Angela M. Valente

### HIGH SCHOOL ATHLETICS

## Athletes being warned about opiate dangers



**LOCAL SPORTS**  
DARREN COOPER

A sprained ankle. A broken finger. A separated shoulder. A twisted knee.

These injuries are all relatively common for high school athletes in 2017. Treatment often begins with a visit to the school's athletic trainer, maybe X-rays and a visit to a doctor.

What the Partnership for Drug Free New Jersey hopes is that these injuries never lead to opioid addiction.

"We have a statistic that shows that male athletes are twice as likely as non-athletes to become addicted to opiates and heroin," said Angelo Valente, the Executive Director at the Partnership for a Drug Free New Jersey. "Children prescribed opiates before the age of 18 are 33 percent more likely to get hooked."

Seeing the link between pain relieving medication and high school athletics, there is a push to raise awareness about the severe issues that can result. Northern Highlands is one of almost 30 schools in North Jersey bringing the issue directly to its student population, starting with announcements in school, and culminating with an information table at the home football game next Friday against Mahwah.

"We have all been touched by issues of addiction both personally and professionally," said Northern Highlands athletic director Bob Williams. "We want to do whatever we can to educate people."

Williams said the aim among Bergen County athletic directors is to have this initiative go statewide.

"We want to focus on athletes and prescription drugs and get that out to people to maybe think twice before having their kids take a strong medication, because there's a direct correlation to long-term prescription drug use



Part of the promotional materials from a Partnership for a Drug Free New Jersey.

SPECIAL TO NORTHERNJ.COM

and addiction," said Williams.

That's exactly the message that Valente is hoping to get across. He said the goal is to try to change the entire culture of how pain and injuries are treated in athletics.

"I think in many cases, up until recently, both the prescriber and the patient and families weren't aware at how dangerous these drugs can be," said Valente. "I think that's changing."

It all seems to start innocently enough. A player gets hurt. He/she wants to still play. One way to make that possible is by taking an opiate drug. That drug, like Oxycontin or a Percocet, reduces the pain and provides a strong feeling—a high, let's just say—to the athlete.

It becomes a vicious cycle. First the athlete takes the drug so he/she can play. Then the athlete turns to the drug for the high alone.

"Unless there is pain that was unbearable and no other way to remedy it, you should always opt out [of opiates] for a child," said Valente. "If so, one or two days maximum."

Valente said studies have shown, especially in young people, an opiate can change brain chemistry in less than a week. He said in extreme cases, further down the road, the athlete becomes addicted to heroin, which provides the same kind of high.

"What we have learned is that over the last several years, we need to look at alternatives to opioids, and if they are prescribed, it should be on a limited ba-

# KOOAD Throughout The Month..

- Friday Night Lights
- Faith Interaction Throughout the Month
- Conferences and Meetings
- Website Messaging
- YMCA

A Journey Of Recovery  
**IT'S TIME!**  
Things I Must Express

CCM  
COUNTY COLLEGE OF MORRIS

LIFE  
CENTER STAGE

MORRIS COUNTY

Community Coalition  
FOR A SAFE & HEALTHY MORRIS

Partnership for a  
Drug-Free New Jersey

**Knock Out Opioid Abuse  
Live Musical Performance  
October 4th | 6pm to 9pm**

Dragonetti Auditorium 214 Center Grove Rd. Randolph, Nj

HELP US MAKE A DIFFERENCE! Become a sponsor or take out an ad in our event program.  
Contact Barbara Kauffman at 973-625-1998 or Vicky Mulligan at 973-985-7548



# Media Outreach and Social Media









- Media Toolkit:

<http://drugfreenj.org/knockoutvolunteers/>

Suggestions for Information Distribution

- Having a pizzeria put the handouts on pizza boxes
- Putting door hangers on cars in the train station
- Hanging information on doors
- Not physically able to go out? You can take a picture of the door hangers and share on social media with #KnockOutOpiateAbuse
- Hand them out to people passing by

Search files

 <p><b>Knock Out Opiate Abuse - Post Event Press Release (to be localized).docx</b> Post event press release to be used post-Knock Out Opiate Abuse Day</p>	 <p><b>Instructions for Physician and Community Outreach.pdf</b> Helpful information when discussing opioids and addiction</p>	 <p><b>County Coordinator List.pdf</b> If you have any questions about this list or do not see your county coordinator, please contact Angela Conover at conover@drugfreenj.org</p>	 <p><b>Digital Door Knocker.pdf</b> Use this PDF as an email on October 6th (day of) to share with all your contacts to help knock out opiate abuse in NJ</p>
 <p><b>Knock Out Opiate Abuse Day Media Advisory.docx</b> Media advisory for Knock Out Opiate</p>	 <p><b>Digital Door Knocker_SPANISH.pdf</b> 18" x 24" poster - SPANISH</p>	 <p><b>Draft Proclamation for Knock Out Opiate Abuse Day.docx</b></p>	 <p><b>Knock Out Opiate Abuse Day Presentation.pptx</b> Knock Out Opiate Abuse Presentation</p>





# Media Outreach and Social Media

- Sample advisories/press releases  
<http://drugfreenj.org/knockoutvolunteers/>
- Social media: Spread the word before/during/after the event
  - Tag us @DrugFreeNJ
    - Facebook/Twitter/Instagram
- Hashtag: #KnockOutOpioidAbuse



# Questions?