

# 1

# PROVIDE INFORMATION

*Educational presentations, workshops or seminars and data or media presentations (e.g., public service announcements, brochures, billboard campaigns, community meetings, town halls, forums and Web-based communication).*

**These interventions are ideally suited for communities with limited knowledge of Rx abuse or those that are in denial that a problem exists. Providing information places prescription drug abuse on a community's radar screen. Strategy 1 targets everyone, from teens and parents to police officers, healthcare providers and educators. Many of the activities in this strategy can be launched during National Medicine Abuse Awareness Month, held every October.**

- Place articles and opinion editorials into community bulletins, local newspapers and other publications (paper and virtual).
- Create a core group of community leaders to assist with efforts, including healthcare professionals, faith-based, law enforcement officers, educators, parents (grandparents), legislators, etc.
- Pitch your local Rx abuse prevention story to radio, television talk shows and local newspapers.
- Post flyers and posters in stores and other frequented locations.
- Produce and disseminate public service announcements for radio, print, TV and social media sites. Placement should include traditional media outlets, doctors' offices, clinics and websites.
- Submit personalized, hard-copy letters (not just e-mails) to politicians about the importance of prescription drug abuse prevention legislation.
- Create slides and other visuals and place them in locations that are frequented by young people such as movie theaters, community access and gas station television stations and video game stores.

- For urban communities, produce billboards, and gain support from the private sector to ensure placement in key areas. For rural communities, enlist the support of private land owners who will allow billboards to be placed on their property. Switch out environmental messages that:
  - Alert the community to the problem of teen Rx abuse.
  - Define how to properly dispose of prescription medications.
  - Clarify how to store medications to ensure that teens and family members are kept safe.

**“We had eight Rx abuse deaths in our area in less than a year. These were preventable tragedies due in part to a lack of awareness. Now we’re keeping this problem in front and center. Our annual Community Drug Awareness Walk keeps the passion alive; the local police departments have agreed to be drop-off points for unused prescription and over the counter meds—people can drop their medications off each and every day. We’ve also had four Dump the Drugs events with a total of 380 pounds of medication collected. This problem will never take us by surprise again.”**

**Lucy Gomez**

*Coordinator, Copper Basin Coalition  
Arizona Youth Partnership, Globe, AZ*

- Generate and distribute stickers and warning labels that healthcare providers, pharmacists and others can creatively use to reinforce Rx abuse prevention messages. These can be placed on clinic scales, prescription bottles and medicine cabinets.
- Collaborate with senior citizen organizations, pharmacists, healthcare providers and other agencies to do targeted outreach and communication, educating their constituency about proper storage and drug disposal strategies.
- Incorporate the use of blogs, Facebook and Twitter in your Rx abuse prevention campaigns.
- Incorporate training and awareness activities into community health fairs, senior center events and hospital open houses.
- Involve youth in creating viral videos about the dangers of Rx abuse. Promote widely through social media sites, such as YouTube and Facebook.
- Initiate briefings that encourage programmatic buy-in from politicians, healthcare providers, pharmacists, law enforcement personnel and employers.
- Post and disseminate Rx abuse prevention guidelines and proper disposal methods at pharmacies, nursing homes, business infirmaries, hospital ERs and recreation centers as distribution outlets. Also distribute this information through utility bills, payroll stuffers and hospital promotional material.
- Host Rx abuse prevention conferences and seminars with coalitions in bordering states to place the spotlight on how laws in different states impact the flow of prescription meds across state lines.
- Confirm if prevention messages can be placed on pharmacy HIPPA sign-off machines so that when consumers sign for their medications, they are reminded to, “protect their meds.”
- Implement community-wide events such as walk-a-thons, town hall meetings and parades that engage large segments of the community. These events provide excellent opportunities to raise Rx abuse visibility and educate the public.



seven  
strategies  
to affect  
**COMMUNITY  
CHANGE**

## 2

# ENHANCE SKILLS

*Workshops, seminars or activities designed to increase the skills of participants, members and staff (e.g., training, technical assistance, distance learning, strategic planning retreats, parenting classes and model programs in schools).*

**These interventions enhance the skills of those who can prevent, identify and treat Rx abuse—including healthcare providers and pharmacists, parents and adult care givers, educators, law enforcement, businesses and teens.**

- Consult with coalition healthcare partners to provide Rx abuse training that targets teens, parents, educators, guidance counselors, crisis telephone workers, faith-and community-based organizational leaders and employers. The training should include:
  - The identification of Rx abuse
  - Overdose warning signs and what to do in case of such emergencies
  - How to educate teens about this problem without giving them too much information (integrate information from the U.S. Drug Enforcement Agency's *Good Medicine, Bad Behavior* exhibit in the training).
- Rx abuse in the workplace and what to do in case of an emergency
- Strategies on how to retain employees while they are undergoing treatment
- Offer this training in a variety of venues—in person and/or webinars—as formal training outside of office hours, during coffee breaks or as brown bag lunch presentations.
- Collaborate with the local medical schools and other healthcare training institutions, law enforcement and emergency response departments and hospitals and clinics to ensure that Rx abuse prevention is on their radar. If requested, craft and deliver targeted, train-the-trainer, Rx prevention/intervention modules. In particular, promote physician training on proper prescribing and disposal strategies.

- Offer continuing education credits for professionals who participate in Rx abuse prevention training activities.
- Create an Rx abuse prevention module that could be placed into elementary, middle and high school health curricula. Focus on proper use and misuse, enhancing refusal skills and what to do if a friend has an Rx abuse or addiction problem. The training could include simulations, games and other class activities.
- Create and offer a five-minute prevention/intervention pitch to be inserted into regular hospital doctor and law enforcement briefings, other in-service training activities and local board of pharmacists and medical association meetings.
- Encourage the implementation of drug manufacturers' rep training and support the development of manufacturers' mentoring programs. The training should acknowledge the abuse potential of prescription medications and offer strategies on how to prevent it.
- In the spirit of being a, "good neighbor," encourage drug manufacturers to provide doctors with sample patient assessments, fool-proof prescription pads and other tools that are designed to prevent Rx abuse.
- Support the development of an Rx abuse hotline, and if a substance abuse hotline already exists, ensure that the latest information about current Rx drugs of abuse is made available to the counselors.
- Create a speakers' bureau and resource library that professionals can tap when preparing presentations.

**“As the Northshore Recovery High School Director, we know that our students’ success at achieving and maintaining recovery from Rx abuse and addiction heavily depends on raising the bar from awareness to action. Providing information is just the beginning. We make sure that our students are equipped with refusal skills—they learn how to gracefully say, ‘no’ and feel proud of it. We also teach our families that they are part of the solution—it takes every family member to ensure that teens remain drug-free.”**

**Michelle Lipinski**

*Director, Northshore Recovery High School, Beverly, MA*

- Engage unlikely target populations to promote Rx abuse prevention messages. Professionals such as veterinarians, dentists and realtors come in contact with prescription medications and could unwittingly participate in their abuse if the issue is not on their radar screen. For example, realtors can alert sellers to “protect their meds” against theft by telling them to lock up their medications before they leave the house.
- Create and disseminate medicine-specific issue briefs that describe abuse potential, if teens are abusing these drugs and how they are abused. The documents would be designed to inform educators, law enforcement officers and healthcare providers.

# 3

## PROVIDE SUPPORT

*Opportunities to support people for participation in activities that reduce risk or enhance protection (e.g., providing alternative activities, mentoring, referrals for services, support groups, youth clubs, parenting groups, Alcoholics or Narcotics Anonymous).*

**These interventions provide reinforcement and encouragement for participation in activities that prevent Rx abuse. Targeting teens and those who support them, the strategies are designed to stop Rx abuse before it starts, as well as help those in recovery.**

- Create and support mentoring peer group initiatives and activities, including Rx abuse recovery programs. Consider creating a support group for youth whose parents abuse drugs or are in recovery from addiction.
- Support and promote the initiation of drug-free sports activities (bowling parties, running races, etc.), commemorating the power of living drug-free.
- Establish relationships with treatment programs that address teen Rx abuse, and identify strategies on how to work together, including concrete referral strategies.

**“I used Rx drugs to make me feel invisible and they only made me sick. I used Rx drugs to make me feel like a villain and they only made me look and act like a criminal. I use recovery to make me feel invincible and I am still today nine months later. I use recovery to make me feel like a superhero and I am still flying high today.”**

### **Student**

*Northshore Recovery High School, Beverly, MA*

- Collaborate with mentoring and other support groups to present at conferences, health fairs and other community events.
- Create, post and disseminate regularly-updated support group meeting listings.

# 4

## ENHANCE OR REDUCE ACCESS & BARRIERS

*Improving systems and processes to increase the ease, ability and opportunity to utilize systems and services (e.g., access to treatment, childcare, transportation, housing, education, special needs and cultural and language sensitivity).*

**These interventions utilize the systems and services that reduce illegal access to Rx medications while protecting access for those who need Rx medications to relieve pain. This strategy targets healthcare providers, pharmacists, law enforcement officials, educators and public health officials while engaging entire communities to take action.**

- Create and implement ongoing drug disposal/take-back programs. Provide information to consumers about how to safely dispose of medications when drug disposals programs are not available or accessible.
- Collaborate with law enforcement personnel and healthcare providers on creating community-specific drug disposal programs. If your coalition is in a rural community, help ensure that drug disposal events are scheduled in a variety of locations. Be sure to launch these events in locations that are frequented by community residents, e.g., the city park, local farmers market, library, etc.
- Create strategies that support better coordination and training among healthcare providers and pharmacists that will help ensure safe dosages prescribing practices and tracking of drug interactions.
- Collaborate with delivery companies such as UPS or FedEx to ensure that medications reach the customers that order them.
- To prevent diversion, ensure that realtors and sellers prevent access to their prescription medicines when they are holding open houses. For example, remind them to lock their medicine cabinet or to hide their prescription medicine bottles.
- Make sure homeowners prevent access to their prescription medicines when cleaning people or other workers are in and around their homes.

- Consider new ways to collect unused or expired medicines, such as through the postal service, UPS or FedEx.
- Recruit new partners to become collection sites; provide training on proper storage and liability, and help promote the new collection sites. Create linkages between these new partners and drug disposal companies. Partners can include: veterinarians, dentists, physicians, emergency walk-in clinics, hospitals—particularly emergency rooms—and community centers.

**“Who ever thought that the EPA, the Drug Enforcement Administration and the U.S. Postal Service would make such incredible partners? Here in Maine, we just concluded a successful, two-year grant from the EPA to run a statewide, Rx mail-back program that allowed for disposal of controlled substances. Citizen response was overwhelming. We disposed of more than 2,300 pounds of drugs—a 42 percent mail-back success rate. Over 380,000 pills were cataloged via the drug inventory process and 250 pounds of controlled drugs were destroyed. The Estimate Average Wholesale Price of medicine collected was \$572,772.35. Our efforts also influenced a Medicaid policy change at the state level. Only 15-day prescriptions are now allowed for some controlled substances.”**

**Dr. Stevan Gressitt**

*State Medical Director, Office of Adult Mental Health Services,  
Maine Department of Health and Human Services*

# 5

## CHANGE CONSEQUENCES INCENTIVES/DISINCENTIVES

*Increasing or decreasing the probability of a specific behavior that reduces risk or enhances protection by altering the consequences for performing that behavior (e.g., increasing public recognition for deserved behavior, individual and business rewards, taxes, citations, fines, revocations and loss of privileges).*

**These interventions applaud the efforts of those actively engaged in Rx abuse prevention and intervention, recognizing that the power of positive influence is contagious. This strategy's target audiences include: hospitals, pharmacists, doctors, law enforcement officials, politicians, educators and employers.**

- Recruit businesses, local government agencies, medical centers and non-profits to participate in Rx prevention and intervention activities. These entities have the power to change policies, monitor for potential Rx medicine abuse and promote patient and consumer education on proper use and disposal strategies. Entities include:
  - Local suburban sanitary commissions, water boards and the environmental protection agencies
  - Plumbers' unions
  - Pharmacies, hospitals and doctors' offices
  - Chambers of Commerce
- Local health and human services departments
- Police and sheriffs' departments
- Schools
- Boys & Girls Clubs/other youth-related organizations
- Media outlets
- Recognize these entities for being active partners in preventing Rx abuse through special breakfasts, lunches or press conferences:
  - Distribute commemorative plaques, ribbons, certificates, slides and other items.
  - Coordinate these activities in conjunction with National Medicine Abuse Awareness Month.
- Create signage that identifies employers, pharmacies, hospitals and other venues as Rx Abuse Prevention Partners.

- Negotiate with pharmaceutical companies, the press and government agencies to provide incentives for participation in Rx abuse prevention and intervention activities. Acknowledgement could include cash awards, free advertising and promotion, event sponsorship and in-kind services.
- Collaborate with healthcare associations on:
  - Recognizing healthcare providers who follow appropriate prescribing practices.
  - Promoting the use of disincentives (such as a prescriber losing his/her license) for doctors and other healthcare providers who carry out improper prescribing practices.

**“There is always a need for continuing guidance on appropriately prescribing medications, especially those that have abuse potential. As a family physician, I always have my patients’ best interests at heart, but sometimes you have to say no to a requested drug that is addictive.”**

**Kevin M. Gil, MD**

*Family Practitioner Specializing in Elder Care  
Washingtonian Magazine Top Doctors 2010,  
Rockville, MD*



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# 6

## CHANGE PHYSICAL DESIGN

*Changing the physical design or structure of the environment to reduce risk or enhance protection (e.g., parks, landscapes, signage, lighting and outlet density).*

**These interventions focus on safeguarding Rx medications to help ensure that they will not be abused. Similar to Strategy 1, the target audience is “everyone.”**

- Launch, support and encourage Lock Your Meds™ campaigns, take-back programs and other related initiatives, and consider disseminating free Rx medication lock boxes.
- Collaborate with local builders on creating “Rx safe boxes” in homes as they are built so residents have the option of safeguarding their prescription medicines.
- To prevent teens from ordering Rx prescriptions over the Internet, encourage parents to locate family computers in main living areas so teen Internet usage can be monitored.
- Encourage parents and adult caregivers to prohibit computer access to online pharmacies through the use of parental blocks.

**“We lock up our guns because they are dangerous in the hands of someone that has no experience. Why aren’t we locking up our alcohol and prescription medication? They are killing our children and affecting our community every day.”**

**Travis Bruyer**

*Deputy Sheriff, Flathead County Sheriff’s Office  
Kallispell, MT*

- Ensure that there aren’t too many pain clinics in your community relative to the number of residents, and that these facilities are legitimate pain clinics and not “pill mills.” If you’re not sure, talk to your local medical association and/or local hospital. They are most likely aware of the pain clinics in your community.

# 7

## MODIFY & CHANGE POLICIES

*Formal change in written procedures, bylaws, proclamations, rules or laws with written documentation and/or voting procedures (e.g., workplace initiatives, law enforcement procedures and practices, public policy actions and systems change within government, communities and organizations).*

**These interventions focus on changing policies, laws and procedures aimed at preventing current and future Rx abuse. The target audience includes lawmakers, state and local public officials, employers and others involved in setting rules and regulations.**

- Support the passage and utilization of:
  - Prescription drug monitoring (PMP) programs and model state drug laws.
  - Drug take-back and disposal legislation.
  - Legislation that prohibits e-prescribing of narcotics and other Rx drugs of abuse.
  - Statutes that support increased penalties against doctors who practice unscrupulous prescribing procedures.
  - Laws that increase prosecution of those involved in doctor shopping. This is particularly relevant for states with fluid borders, such as Virginia, Maryland and Washington, DC; Connecticut, Massachusetts and New York; Ohio and West Virginia; and Kansas and Missouri.
- Laws and practices that reward healthcare providers for being willing and eager partners in preventing Rx abuse.
- Become engaged in educating pharmacies and healthcare providers about the value of these initiatives and encourage them to collaborate with neighboring pharmacies and doctors' offices in and outside of your community. Supporting such communication across communities and even across state lines will help prevent doctor shopping and other abuses.
- Encourage pharmaceutical companies to participate in Rx disposal efforts—in some states, the role of pharmaceuticals is written into law—and ensure the consistent presence of take-back programs so they are not just once-a-year events.

- Create an Rx abuse law state report card that compares your state's activities with other jurisdictions. Use it to educate state and local legislators.
- Support formalized reporting policies and practices between healthcare providers and law enforcement officers.
- Promote the use of drug courts, as well as appropriate sentencing for those under 21 years of age.
- Promote the use of screening and brief intervention (SBIRT) for teens and also increased access to treatment for Rx addiction.
- Engage the local zoning office to help ensure citizen oversight on how land is used in the community. This is particularly relevant with the increasing presence of "pill mills" in communities that are poor and disfranchised.
- Collaborate with the local healthcare associations in supporting the use of tamper-proof prescription pads.
- Organize and launch a March to the State Capitol to promote the passage of Rx abuse prevention legislation.
- Consider supporting drug testing policies and practices within the school setting.

**“Local, state and federal policies and regulations have not kept pace with the challenging prescription drug environment and the serious threat of diversion. Conceived with good intentions, they can be manipulated into gross abuse and profiteering that damage communities across the spectrum. Through the Prescription Drug Caucus, we’re working to affect change in the ways these drugs are prescribed, close accessibility loopholes, promote educational awareness about treatment and take-back programs, and ensure prescription data is shared for good medicine.”**

**Congressman Hal Rogers**

*(R-KY)*

**“Prescription drug abuse across America can only be described as an epidemic. Between 2002 and 2007, my home state of Massachusetts lost 42 times as many residents to opioid-related overdoses than in the Iraq and Afghanistan wars and the Commonwealth is currently seeing 2 deaths per day. I am proud to have joined with my colleagues in forming the bipartisan Prescription Drug Caucus which makes addressing this crisis a national priority.”**

**Congressman Bill Delahunt**

*(D-MA)*

# resources

## GENERAL

**Community Anti-Drug Coalitions of America**  
[www.cadca.org](http://www.cadca.org)

**National Institutes of Health, Medline, Prescription Drug Abuse**  
[www.nlm.nih.gov/medlineplus/prescriptiondrugabuse.html](http://www.nlm.nih.gov/medlineplus/prescriptiondrugabuse.html)

**Office of National Drug Control Policy, Prescription Drugs**  
[www.whitehousedrugpolicy.gov/drugfact/prescrptn\\_drgs/index.html](http://www.whitehousedrugpolicy.gov/drugfact/prescrptn_drgs/index.html)

**Parents, The Anti-Drug**  
[www.theantidrug.com](http://www.theantidrug.com)

**PrescriptionDrugAbuse.org**  
[www.prescription-drug-abuse.org](http://www.prescription-drug-abuse.org)

**Stop Medicine Abuse.org**  
[www.stopmedicineabuse.org](http://www.stopmedicineabuse.org)

**Substance Abuse and Mental Health Services Administration, Division of Workplace Programs**  
[www.drugfreeworkplace.gov](http://www.drugfreeworkplace.gov)

**U.S. Drug Enforcement Agency, Good Medicine. Bad Behavior: Drug Diversion in America**  
[www.goodmedicinebadbehavior.org](http://www.goodmedicinebadbehavior.org)

**Ohio State University College of Pharmacy Generation Rx Initiative**  
[www.pharmacy.osu.edu/outreach/generation-rx](http://www.pharmacy.osu.edu/outreach/generation-rx)

## TRAINING

**American Pain Society**  
[www.ampainsoc.org](http://www.ampainsoc.org)

**American Society for Pain Management Nursing**  
[www.aspmn.org](http://www.aspmn.org)

**American Society of Addiction Medicine**  
[www.asam.org](http://www.asam.org)

**National Council on Patient Information and Education**  
[www.talkaboutrx.org](http://www.talkaboutrx.org)

**National School Nurses Association, Smart Moves, Smart Choices**  
[www.nasn.org/Default.aspx?tabid=509](http://www.nasn.org/Default.aspx?tabid=509)

**Office of National Drug Control Policy, Prescription for Danger: A Report on the Troubling Trend of Prescription and Over-the-Counter Drug Abuse Among the Nation's Teen**  
[www.theantidrug.com/pdfs/prescription\\_report.pdf](http://www.theantidrug.com/pdfs/prescription_report.pdf)

**PainBalance (clinician educational site)**  
[www.painbalance.org](http://www.painbalance.org)

**Regional Prevention Center of Comprehend, Inc. w/ Wyoming Drug Enforcement Task Force and Wyoming State Board of Pharmacy, Prescription Drug Abuse Toolkit Wiki Site**  
[healthcoalition.wikispaces.com/Rx+Toolkit](http://healthcoalition.wikispaces.com/Rx+Toolkit)

## RECOVERY AND OTHER SUPPORT

### 12 Steps

[www.12step.org](http://www.12step.org)

### Above the Influence

[www.abovetheinfluence.com](http://www.abovetheinfluence.com)

### Narcotics Anonymous World Services

[www.na.org](http://www.na.org)

### National Institute on Drug Abuse, Mind Over Matter—Prescription Drug Abuse

[teens.drugabuse.gov/mom/mom\\_pd1.php](http://teens.drugabuse.gov/mom/mom_pd1.php)

### Students Against Destructive Decisions

[www.sadd.org](http://www.sadd.org)

### Substance Abuse and Mental Health Services Administration, Substance Abuse Treatment Facility Locator

[dasis3.samhsa.gov](http://dasis3.samhsa.gov)

## DRUG TAKE-BACK

### Maine Benzodiazepine Study Group

[www.benzos.une.edu](http://www.benzos.une.edu)

### Northeast Recycling Council's (NERC)'s Operating Unwanted Medication Collections—A Legal & Safe Approach

[www.nerc.org/documents/operating\\_unwanted\\_medication\\_collections\\_final\\_2006.pdf](http://www.nerc.org/documents/operating_unwanted_medication_collections_final_2006.pdf)

### Office of Adult Mental Health Services, Maine Department of Health and Human Services, Executive Summary: Reducing Prescription Drug Misuse Through the Use of a Citizen Mail-Back Program in Maine

[www.epa.gov/aging/RX-report-Exe-Sum](http://www.epa.gov/aging/RX-report-Exe-Sum)

### The Drug Take-Back Network

[www.takebacknetwork.com/index.html](http://www.takebacknetwork.com/index.html)

U.S. Food and Drug Administration,  
*FDA Medication Disposal: Questions and Answers,  
Medicines Recommended for Disposal by Flushing*  
[www.fda.gov/Drugs/ResourcesForYou/  
Consumers/BuyingUsingMedicineSafely/  
EnsuringSafeUseofMedicine/SafeDisposalofMedicines/  
ucm186188.htm](http://www.fda.gov/Drugs/ResourcesForYou/Consumers/BuyingUsingMedicineSafely/EnsuringSafeUseofMedicine/SafeDisposalofMedicines/ucm186188.htm)

### U.S. Office of National Drug Control Policy, *Federal Guidelines for the Proper Disposal of Prescription Drugs*

[www.whitehousedrugpolicy.gov/publications/pdf/  
prescrip\\_disposal.pdf](http://www.whitehousedrugpolicy.gov/publications/pdf/prescrip_disposal.pdf)

## LOCK UP YOUR MEDS

### National Family Partnership's Lock Your Meds™ campaign

[www.nfp.org/default.asp?PageNum=588](http://www.nfp.org/default.asp?PageNum=588)

### Partnership for a Drug-Free America's Not in My House campaign

[www.drugfree.org/notinmyhouse](http://www.drugfree.org/notinmyhouse)

## RX ABUSE LEGISLATION

### Carnevale Associates, LLC, *Prescription Drug Monitoring Information Brief*

[www.carnevaleassociates.com/PDMP\\_Info\\_Brief.pdf](http://www.carnevaleassociates.com/PDMP_Info_Brief.pdf)

### Center for Lawful Access and Abuse Deterrence

[www.claad.org](http://www.claad.org)

### GovTrack.us

[www.govtrack.us](http://www.govtrack.us)

### Product Stewardship Institute's Pharmaceutical Laws and Legislation

[www.productstewardship.us/displaycommon.  
cfm?an=1&subarticlenbr=540](http://www.productstewardship.us/displaycommon.cfm?an=1&subarticlenbr=540)

### U.S. Drug Enforcement Agency, *Q & A, State Pre- scription Drug Monitoring Programs*

[www.deaiverison.usdoj.gov/faq/rx\\_monitor.htm](http://www.deaiverison.usdoj.gov/faq/rx_monitor.htm)