

Over-the-Counter Medicine Safety Guide

Building Health Literacy in the Community

Supported by Kenvue



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OVER-THE-COUNTER MEDICINE SAFETY Program Tip Sheet

Over-the-Counter (OTC) Medicine Safety Program is a free, evidence-based, comprehensive Common Core-ready educational program on the safe use of over-the-counter (OTC) medicines, with a rich online hub at YMIClassroom.com/OTCMedSafety.

Research shows that students begin to self-medicate around age 11, yet only 54% of tweens know that OTC medicines can be dangerous when misused. If not equipped with the knowledge and training to make safe choices, mistakes can happen. In 2021, America's poison control centers managed 137 million cases of exposure for children 19 and younger. In the same year, there were more than 295,000 cases involving medicine errors. This tip sheet suggests best practices for prevention leaders to implement the OTC Medicine Safety program to educate our nation's youth with the knowledge they need to make good choices.

<p>1 Engage Public and Private School Superintendents, Principals and School Healthcare Staff</p> <p>Start your efforts with private schools, which may have fewer approval layers to go through.</p> <p>HOW-TO STEPS</p> <ul style="list-style-type: none"> Educate yourself and the coalition on the approval process for substance misuse education in your local schools. Develop an OTC action plan with specific goals for everyone involved. Attend meetings and build working relationships with school officials. Reach homeschool families through local chapters of Home School Associations and home education coalitions. 	<p>2 Check Current Substance Prevention Education Curriculum Requirements</p> <p>If your state Department of Education or local school system has a prevention education curriculum requirement, propose OTC to help fulfill the requirement.</p> <p>HOW-TO STEPS</p> <ul style="list-style-type: none"> Search the state and local Departments of Health and Education for required substance misuse education in schools. Example: tinyurl.com/OhioDrugUsePrevention Review requirements to assess if Common Core-ready curricula require a separate state / local review process before implementation. Certify the program to meet the substance misuse education requirements for school-aged children.
<p>3 Add to the Statewide Teachers' Online Instructional Resource Library</p> <p>Getting approval at the state level and sharing the resources through a common library may assist teachers' implementation of the program at their individual schools. Example: tinyurl.com/healthSmartVA</p> <p>HOW-TO STEPS</p> <ul style="list-style-type: none"> Research approval process to add the OTC Medicine Safety program content to the resource library. Develop an action plan to get the necessary support from administrators and teachers. Get approval. Develop implementation plan. 	<p>4 Add OTC Video Tutorials and Print Materials to Individual School Resource Libraries</p> <p>Many schools have a resource library of approved prevention resources. Ask to add videos and materials from the OTC Medicine Safety program (CADCA.org/OTC) to their library.</p> <p>HOW-TO STEPS</p> <ul style="list-style-type: none"> Ask school administrators or teachers if they have a prevention resource library for teachers. Explain how the OTC Medicine Safety program is evidence-based and aligns with common core curriculum standards. Learn the approval process for the program to be added and implement the steps.

Read the Over-the-Counter Medicine Safety Program Tip Sheet



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A Message from the President & CEO

MORE THAN TWENTY THOUSAND YOUTH PER YEAR need medical help due to medicine mistakes or misuse, according to the American Association of Poison Control Centers.¹ In recent years, substance use prevention coalitions across the country have made remarkable progress in educating communities and encouraging them to adopt best medicine safety practices with prescription drugs, though we continue to face a prescient challenge. Today, in our country, many people understand that there is government regulation on whether a medicine is available to be purchased in stores at the consumers' discretion—that it is available “over-the-counter” (OTC)—or if, instead, the medicine is only available to those who have a written order from a licensed prescriber to be dispensed by a pharmacist. Yet this understanding can create the misperception that OTC medicines are *always* safe and that they don't deserve to be treated with any specific caution.

There are several groups in the community that are at elevated risk for medicine misuse contributing to adverse health outcomes, and two that we will discuss in this toolkit include youth and mature adults.² OTC medications will usually include age-specific guidelines on the Drug Facts Label (e.g., not to use in children under two years of age, a specific dose for youth between the ages of 12 and 18, etc.), and safe medicine dosing is often dependent on the child's bodyweight. Mature adults, on the other hand, may face specific challenges with how common medications will interact with other drugs, pre-existing conditions, or potentially weakening organ systems. While mature adults and youth need specific guidance from medical professionals on medicine selection and dosage, all community members unclear about medicine safety should have access to pharmacists and healthcare providers for these important discussions. While CADCA's work on OTC medicine safety originally focused on youth, CADCA coalitions have implemented wide-ranging strategies that reach all ages, including mature adults, and our strategies have adapted accordingly to meet the needs of these audiences nationally, based on feedback from our coalitions in the field.

1 American Association of Poison Control Centers. National Poison Data System query parameters: 2011–2016 annual average, ages 0-19, all unintentional and intentional misuse reasons for pharmaceutical exposure, cases en route to a healthcare facility or treatment recommended by a specialist in poison information, all outcomes.

2 Alshammari TM. Drug safety: The concept, inception and its importance in patients' health. Saudi Pharmaceutical Journal. 2016;24(4):405-412. doi:10.1016/j.jsps.2014.04.008 Available: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4908051>

CADCA has been at the forefront of OTC medicine safety work for many years, both through training youth to make change in their communities and by working with key coalition leaders and preventionists who can spread the message of OTC medicine safety widely. Implementing medicine safety initiatives is a huge step towards promoting health literacy and wellness to all people in the communities we serve. This toolkit is meant to make this challenging, yet meaningful, work more accessible to all community coalitions.

Sincerely,



Barrye L. Price, Ph.D.

Major General, U.S. Army Retired

President and CEO, CADCA



Support for the Development of this Toolkit

CADCA and Kenvue have partnered since 2014 to educate communities on the dangers of over-the-counter (OTC) medicine misuse and help youth make responsible, informed, and healthy choices when taking common household medications.

Central to our work on this partnership, Kenvue has created the OTC Medicine Safety program. The OTC Medicine Safety program, available at YMIClassroom.com/OTCMedSafety, is a free and evidence-based program with Common Core-ready lesson plans and classroom activities, posters and visual aids, and tools for online engagement.

The materials in this toolkit were supported by Kenvue and are the product of many years of creative partnership with CADCA coalitions, prevention network leaders, and the OTC safety partner projects led by Kenvue's Scientific Education and Patient Advocacy team.



DEAR EDUCATOR,

Research shows that young people begin to self-administer over-the-counter (OTC) and prescription (Rx) medication around age 11! Unfortunately, kids often take on this new responsibility with little knowledge about medicine safety. According to the American Association of Poison Control Centers (AAPCC), more than 85,000 children, ages 19 and under, require medical attention each year due to medicine mistakes or misuse.²

The National Association of School Nurses recommends adding medicine safety lessons to the middle school curriculum. To help you act on this recommendation, Kenvue Inc., with support from the education specialists at Young Minds Inspired, have created **OTC Medicine Safety**, a free health education program with lesson plan units, student activities, and engaging digital learning tools to help your students use medicine safely and responsibly. The lessons supplement health, science, and English language arts curricula, and are available at www.ymiclassroom.com/otcmedsafety.

To get you started, this poster guide features activities that introduce the topic of over-the-counter medicine safety and will familiarize students with how to read the **Drug Facts** label. It also includes a family letter with OTC medicine safety tips to extend the learning to the home.

Please share this program with other teachers in grades 5-8. And let us know your thoughts by visiting www.ymiclassroom.com/feedback-otcmedsafety. We look forward to your comments.

Sincerely,
Dominic Kinsley, PhD
Editor in Chief
Young Minds Inspired



Questions? Contact YMI toll-free at 1-800-959-8005, or by email at feedback@ymiclassroom.com.



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1. Derry, Neil, Kerri Johnson, Dustin Walker, Maha Jaballa, and Corral Ann W. Goldsmith. Nonprescription medication use and literacy among New Hampshire eighth graders. *Journal of the American Pharmacists Association*. 2012. 77: 192.
2. American Association of Poison Control Centers' National Poison Data System. Data covers 2011-2021 annual average, ages 6-19.

ABOUT OVER-THE-COUNTER (OTC) MEDICINE SAFETY

This free, multimedia educational program is designed to inform young people in grades 5-8 and their families about how to use, store, and dispose of OTC medicines safely, as well as how to avoid medicine mistakes and misuse. The program's goal is to build youth's knowledge about OTC medicine safety and encourage responsible behavior *before* they start self-medicating. Throughout the program, an emphasis is placed on reminding young people that they should only take or use medication under adult supervision.



TARGET AUDIENCE

Students in grades 5-6 and grades 7-8

EDUCATIONAL OBJECTIVES

- Introduce students to how to read and use the **Drug Facts** label
- Build critical thinking about how to recognize unsafe behaviors and apply information to make informed decisions about safe medicine use
- Inspire students to use what they've learned to educate their family and community about medicine safety
- Support health, science, and English language arts skills



Importance of OTC Medicine Safety


Youth and self-administering OTCs

Research shows that a large proportion of youth begin to take medicine without supervision around age 11, yet only 54% of tweens know that over-the-counter (OTC) medicines can be dangerous when misused. By the age of 16, 90% of youth report self-administering OTC medications. If young people are not equipped with the knowledge and training to make safe choices, mistakes can happen. In 2021, America's poison control centers managed 1.17 million cases of exposure for children 19 and younger. In the same year, there were more than 295,000 cases involving medicine

errors.³ The OTC Medicine Safety Program's first aim is to keep our youth safe and healthy.

This program trains youth to recognize a medication's uses, active ingredients, directions, and warnings. Youth participants are challenged to think critically about safety and risk and build an aptitude for health literacy that will benefit them throughout life. Students

3 Gummin DD, Mowry JB, Beuhler MC, Spyker DA, Rivers LJ, et al. 2021 Annual Report of the American Association of Poison Control Centers' National Poison Data System (NPDS): 39th Annual Report. Clin Toxicol (Phila). 2022 Dec; 60(12):1381-1643. DOI: 10.1080/15563650.2022.2132768. Available: <https://aapcc.org/annual-reports>

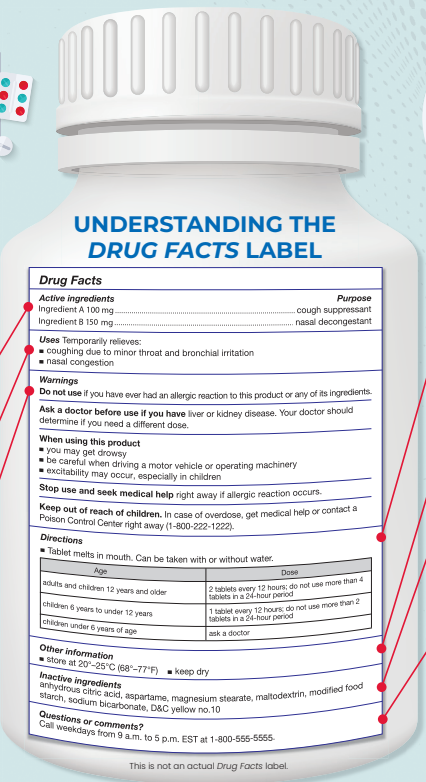


The Drug Facts label helps you understand how medicines can help you and how to take them safely.

Active Ingredients
Lists the ingredients in the medicine that make it work.

Uses
Describes the symptoms that the medicine treats.

Warnings
Provides important safety information, including side effects, questions you should ask a doctor before taking the medicine, and medicines to avoid using at the same time.



UNDERSTANDING THE DRUG FACTS LABEL

Drug Facts

Active ingredients	Purpose
Ingredient A 100 mg	cough suppressant
Ingredient B 150 mg	nasal decongestant

Uses Temporarily relieves:

- coughing due to minor throat and bronchial irritation
- nasal congestion

Warnings

- Do not use if you have ever had an allergic reaction to this product or any of its ingredients.
- Ask a doctor before use if you have liver or kidney disease. Your doctor should determine if you need a different dose.

When using this product

- you may get drowsy
- be careful when driving a motor vehicle or operating machinery
- excitability may occur, especially in children

Stop use and seek medical help right away if allergic reaction occurs.

Keep out of reach of children. In case of overdose, get medical help or contact a Poison Control Center right away (1-800-222-1222).

Directions

- Tablet melts in mouth. Can be taken with or without water.

Age	Dose
adults and children 12 years and older	2 tablets every 12 hours; do not use more than 4 tablets in a 24-hour period
children 6 years to under 12 years	1 tablet every 12 hours; do not use more than 2 tablets in a 24-hour period
children under 6 years of age	ask a doctor

Other information

- store at 20°-25°C (68°-77°F) ■ keep dry

Inactive ingredients

aspartame, citric acid, aspartame, magnesium stearate, maltodextrin, modified food starch, sodium bicarbonate, D&C yellow no. 10

Questions or comments?

Call weekdays from 9 a.m. to 5 p.m. EST at 1-800-555-5555.

This is not an actual Drug Facts label.

All medicines — OTC medicines and prescriptions — should always be taken with the approval and supervision of a parent or trusted adult.

Directions

Tells the amount or "dose" of medicine to take, how often to take it, and how much you can take in one day.

Other Information

Tells how to store the medicine.

Inactive Ingredients

Lists ingredients not intended to treat your symptoms, like preservatives and flavorings.





Questions or Comments?

Tells how to call the manufacturer if you have questions about the medicine.

MEASURE IT CORRECTLY

To get an exact measurement, it is important to only use the dosing device that is provided with the medicine. The Drug Facts label tells you how much medicine you should take based on your weight and/or age. Take only one medicine with the same kind of active ingredient at a time.


Fact: Household spoons come in various shapes and sizes, which means they hold different amounts of liquid.


vs.

X

X


dosage cup measuring spoon flatware spoon plastic spoon

SAFETY TIPS

- Always read the entire Drug Facts label before using an OTC medicine.
- Never take medicines with the same active ingredient at the same time!
- Call the **Poison Control Center** number (also called Poison Help Line) at **1-800-222-1222** if you have **any** medicine questions or concerns.

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“Becoming an OTC Trainer helped me – and my coalition – have the confidence to lead youth in efficient and impactful ways.”

– Ava Stephens, Drug Free Cecil Youth Coalition, Rising Sun HS

are additionally asked to think critically about the similarities and differences between over-the-counter and prescription medications. As they learn about the safe storage and disposal of OTC medicines, they acquire the knowledge that is central to prescription medicine safety.

The OTC medicine safety curriculum lends to development in all facets of language arts, as well as next generation science standards. The curriculum is designed to address Common

Core standards with activities designed for 5th- and 6th- graders,⁴ and for 7th- and 8th-graders.⁵ It contains full, turn-key lesson plans for teachers that generally do not require significant adaptation for different student groups, and includes recent additions for digital interactivity and remote learning, such as the OTC Medicine Safety *Kahoot!* Quiz,⁶ which debuted in 2021. CADCA Youth Leadership and many of the coalitions we have worked with in recent years have also had great success in leading youth through train-the-trainer programs. Youth trainers amplify the reach of medicine safety messaging through near-peer training and personally benefit from valuable experience as instructors, mentors, and public speakers.

4 Visit the OTC Medicine Safety Program website on YMIClassroom.com to see the 5th- and 6th-grade Common Core education standards. https://ymiclassroom.com/otcmedsafety-teachers_5-6

5 https://ymiclassroom.com/otcmedsafety-teachers_7-8

6 <https://ymiclassroom.com/otcmedsafety-multimedia>



Considerations for Mature Adults

The importance of over-the-counter medicine safety extends beyond reaching youth. It is vital to reach parents and caregivers with important information, such as storing medicine “Up and Away”⁷ from the reach of young children, knowing how to select appropriate OTC medications for others and when to seek medical advice, and being aware of dangerous trends in intentional misuse of over-the-counter medicines, such as those fueled by social media challenges. Though these core tenets of OTC medicine safety messaging reach adults for the sake of youth medicine safety, coalitions have additionally increased efforts to teach mature adults how they can make informed decisions about OTC medicine safety for their own personal wellness.

One misconception of OTC medicines is that they are inherently safer than prescription medications because they do not require a prescription. While it is true that OTC medicines are safe and effective for the general public without seeking advice from a healthcare professional, everyday people experiencing severe allergies or acute pain, for example, may feel that they are “saving a trip to the doctor” by exceeding the OTC dosing guideline to match the drug’s prescription counterpart. In reality, this could lead to a potentially dangerous misuse of medications when not supervised by a physician. Additional complications arise when a person takes multiple medications that contain the same active ingredients. This is a common problem with drugs like acetaminophen,⁸ which is a safe and effective ingredient when used as directed, but can be harmful to the liver when the 4000 mg maximum daily dose is exceeded.

7 Learn about the “Up and Away” campaign from the Consumer Healthcare Product Association, find educational materials on safe storage, targeted to a range of community groups, available at UpAndAway.org

8 The Acetaminophen Awareness Coalition, under the guidance of the American Academy of Pediatrics, CDC and FDA, maintains a website to help identify the over-600 medications containing acetaminophen, four steps for individuals to follow to ensure they take the medication at a safe dose, and additional guidance for safe dosing of children. Visit KnowYourDose.org

Acetaminophen:
Do you know how to take it safely?

The infographic features a 4x3 grid of images showing various forms of acetaminophen: bottles of Tylenol, Tylenol Extra Strength, and Tylenol PM; blister packs; individual tablets and capsules; and a syringe. The text on the right provides safety instructions and a table for identifying acetaminophen in prescription drugs.

Acetaminophen is found in more than 600 different prescription (Rx) and over-the-counter (OTC) medicines. These include pain relievers, fever reducers, cough, cold, and allergy medicines, as well as sleep aids. Acetaminophen is the most common drug ingredient in America.

When you take acetaminophen as directed, it is safe and effective. But there is a limit to how much you can take in one day. The U.S. Food and Drug Administration (FDA) has set a maximum daily limit of 4,000 milligrams (mg) in a 24-hour period. **Taking more acetaminophen than directed is an overdose and can lead to liver damage.**

Follow these three steps to help you take acetaminophen safely:

- ▶ **Always read and follow the label.**
Always read the label before taking any medicine. Never take more acetaminophen than directed.
- ▶ **Know if your medicines contain acetaminophen.**
You need to know if acetaminophen is in the medicines you take so you can avoid taking too much. Here's how to find out:

If you're taking an OTC medicine, look for the word "acetaminophen" on the front of the package or highlighted in yellow on the **Drug Facts** label.

Drug Facts	
Active ingredient (in each capsule)	Purpose
Acetaminophen 500 mg	Pain reliever/fever reducer

For prescription medicine, look for the word "acetaminophen" or a shorter version such as "APAP" or "acetam" on the label.

- ▶ **Only take one medicine with acetaminophen at a time.**
Don't take two or more medicines that contain acetaminophen at the same time. Taking too much acetaminophen can cause liver damage.

For more information, talk to your healthcare provider or visit:

KnowYourDose.org
Acetaminophen Awareness Coalition

It's important for everyone to read and follow the OTC Drug Facts Label and note that there are also warnings and precautions for individuals such as mature adults, pregnant women, and children. As with all community members, these individuals should consider:

- **How pre-existing conditions should inform OTC medicine selection**
- **Potentially inaccurate self-diagnosis leading to poor medicine selection**
- **Lack of discussion of OTC medicines with one's family doctor**
- **OTC interactions with an individual's prescription medications**
- **Some OTC medications have directions for duration of use**
- **Monitoring medications' expiry date**
- **Understanding safe disposal practices, including drop boxes and environmentally sound at-home disposal methods**

The Alliance for Aging Research has created an engaging set of resources to reach mature adults on the topic of OTC medicine safety,⁹ including readily shareable YouTube videos. Additionally, NeedyMeds' BeMedWise.org offers a collection of research, reports, and resources for patient education around OTC and prescription medications which may be appealing to mature audiences, and the site serves as a repository for the work produced by the National Council on Patient Information and Education's many years of leadership in the area. The team at CADCA is continuing to work with community coalitions and prevention leaders to identify and implement the most impactful practices in mature adult OTC misuse prevention.

⁹ See the Alliance for Aging Research's medicine safety resources, targeted to mature adults, at <https://www.agingresearch.org/campaign/safe-medicine-use-storage-disposal>; similar messaging and a handout on the topic is available from AAPCC at: <https://aapcc.org/prevention/older-adults-medicine-safety>

Resources in this Toolkit

This toolkit is principally organized into four sections:

Addressing Medicine Safety through Strategic Prevention offers an introduction of the Strategic Prevention Framework to ensure that community coalitions align their efforts with community resources and needs, and this section discusses implementation considerations specific to medicine safety and misuse prevention.

CADCA's Seven Strategies for Community Change and Medicine Safety includes an overview of individual- and environmental-level strategies for substance misuse prevention, keeping a special eye on specific recommendations for OTC Medicine Safety.

Practical Examples includes a focused list of successful model interventions that have been implemented across targeted states.

OTC Medicine Safety Resources connects toolkit users with sites where they can find data and more information about certain aspects of medicine safety and conducting strategic, community-based prevention.

Addressing Medicine Safety through Strategic Prevention

Overview of the Strategic Prevention Framework

CADCA utilizes the Strategic Prevention Framework (SPF) to assist community coalitions in developing the processes and infrastructure necessary for leading community-based public health approaches that can contribute to effective and sustainable reductions in substance misuse. The SPF includes the following elements:

Assessment: Collect data to define problems, root causes, local conditions, and resources within a geographic area.

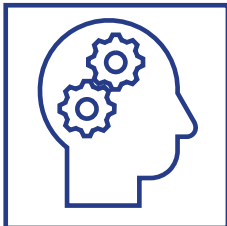
Capacity: Build capacity within a coalition and the community served to address needs.

Planning: Develop a comprehensive strategic approach that includes policies, programs, and practices creating a data-driven plan to address problems identified in the assessment.

Implementation: Implement and monitor evidence-based prevention strategies.

Evaluation: Measure the impact of the strategies implemented.

The elements of **Sustainability** and **Cultural Competence**, which are central to community-based approaches, are shown in the center of the graphic, indicating their interplay with each of the other elements. To be successful, coalitions' leaders and members need to conduct an array of activities for each of the SPF elements in their community, drawing from the knowledge, skills, and abilities of their coalition members. The figure displays the key skills and processes that CADCA has identified as essential for a coalition to be successful.



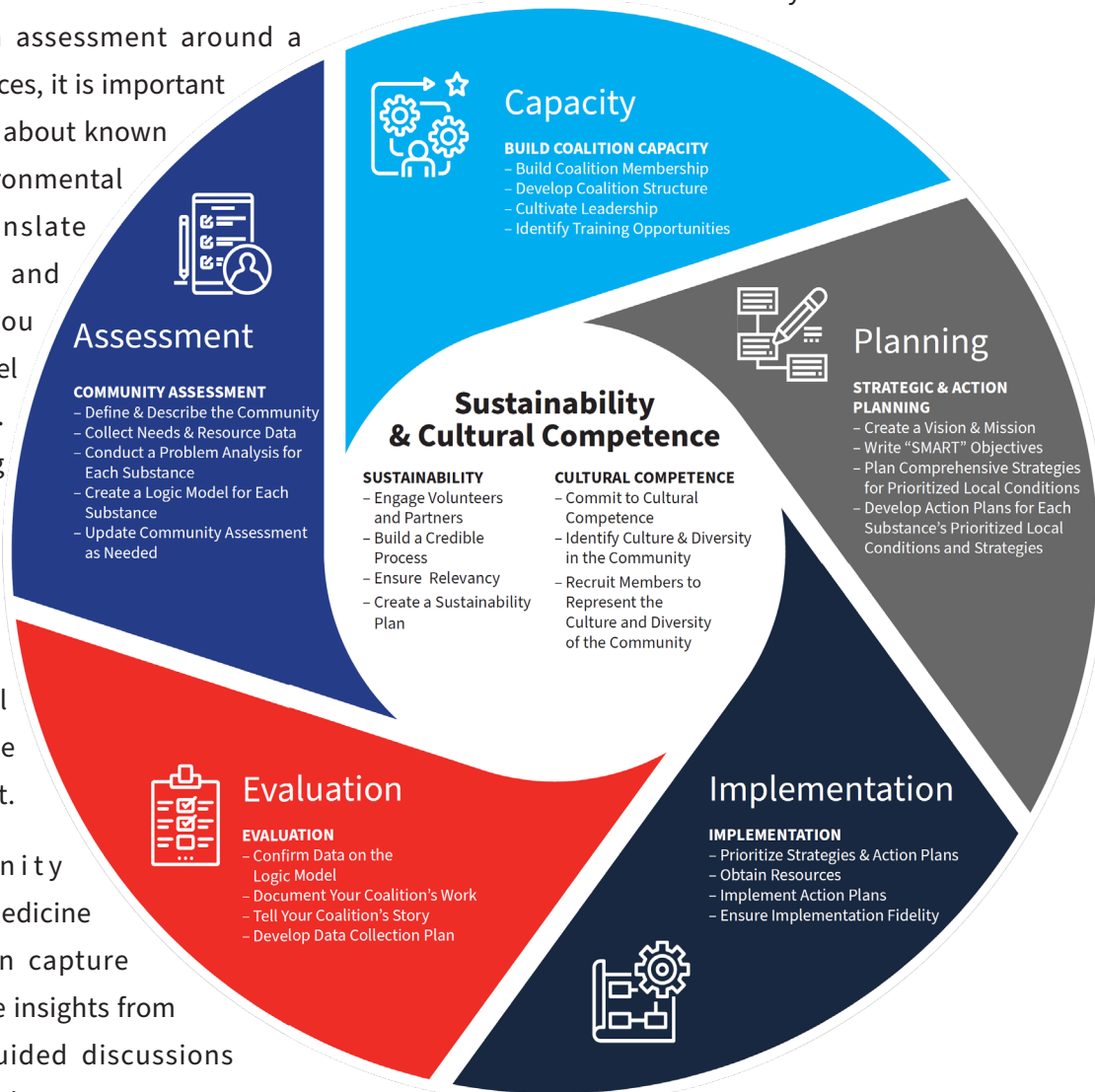
In this section, each of the SPF elements will be described in relation to how OTC medicine safety strategies will be identified, planned, implemented, and evaluated. For a complete description of each of these SPF elements, please refer to the CADCA Primer Series, which explains each element in greater detail, at www.cadca.org.

Community Assessment

Community assessment is a comprehensive survey and summary of your target community or the service region of your organization. The assessment process is a systematic gathering and analysis of information about the community for the purpose of identifying and addressing local substance use problems. A sound assessment will help your coalition target efforts to at-risk communities, as well as understand various root causes and their baseline indicators in your area.

When conducting an assessment around a specific set of substances, it is important to collect information about known risk factors and environmental influences that translate to your root causes and local conditions as you construct a logic model for OTC interventions. Additionally, gathering information on service gaps and available resources can help the coalition identify which strategies will most likely translate into community impact.

During community assessment for OTC medicine safety, coalitions can capture particularly actionable insights from focus groups and guided discussions with community members. Focus groups are a key means for eliciting everyday residents' at-home environment, child behaviors, community attitudes (including perception of risk and acceptability), and additional sites where OTC medicines may be accessed by family members. Reviewing local drug disposal infrastructure, safe storage resources (such as lock boxes), as well as school system and local youth-serving organizations' policies on medicines will all be critical information in your coalition's OTC safety environmental scan.



Building Coalition Capacity

Coalition capacity building enhances the ability of coalition members and member organizations to address the causes and prevalence of substance misuse in the community, including the ability to respond to shifting needs in the community as they arise. This means that when we build coalition capacity, we are also building coalition sustainability to continue the work over the long-term. While some may think of capacity as a zero-sum game—that spending energy and resources in one avenue diverts them from another—highly effective coalitions understand that each project brings a new set of potential community partners to the table; each time the table grows, there are more partner resources to be shared with other coalition members.

To maintain clear roles and responsibilities, a Medicine Safety Workgroup should be created within the coalition, with members solicited or appointed by the community sector representatives most directly affected by OTC safety and misuse. Medicine Safety Workgroup representatives will have the specific knowledge and information that will be useful during assessment, planning, and implementation. Members of the Workgroup are likely to be uniquely positioned to train other coalition members and partners in responsible retail practices, essential health education, and family communication. As with other workgroups and leadership bodies within the coalition, it is essential for organizational capacity and peer-learning that each workgroup share progress, challenges, and priorities with other teams on a regular, though not cumbersome, basis.

Strategic and Action Planning

A strategic and action plan covers a three- to five-year period. It describes the coalition's expectations for the future that may include problems in the community that can be addressed with current funds, as well as problems the coalition plans to address as it secures additional resources.

The development of the coalition's strategic and action plans is based on the coalition's logic models, which identify the problem statements (e.g., youth don't often know how to follow medicine instructions such as dosing), root causes (commonly low perception of harm in the community, high availability), and local conditions (parents not monitoring medicines, low levels of health literacy). The logic models facilitate concise and clear communication about the

conditions in the community which the coalition seeks to change. As with other substances, coalitions should develop a logic model and action plan specific to medicine safety, which will aid in implementation, monitoring, and evaluation.

The strategic and action plans describe how the coalition will achieve change, based around Specific, Measurable, Achievable, Relevant and Timed (“SMART”) objectives.¹⁰ As coalitions draw from information gathered in their community assessment, they should consider which evidence-based strategies align with their community’s needs and capacity. The following sections and the OTC Medicine Safety Tip Sheet¹¹ contain a range of comprehensive strategies which may align with the needs and readiness the coalition identifies in your community.

Implementation

Implementation involves the actual delivery of the plans and strategies developed during the strategic and action planning phase of the SPF. It is not the coalition’s role to personally conduct all the work involved with each strategy. Rather, the role of the coalition is to work with partners, stakeholders, community leaders, and members to implement the strategies. A key aspect of implementation is ensuring the strategies and programs are put into action with **fidelity**, that is, executed in a manner that will achieve the desired community changes. While somewhat juxtaposed to fidelity, successful implementation also involves **adaptation** to the target community, audience, and local conditions.

Implementation effort for OTC medicine safety should build on momentum for the coalition’s other priorities. Parent education and town hall meetings can integrate medicine safety messaging into related health education and substance use prevention topics, ensuring that parents of younger children, for example, are included in the conversation of drug prevention every bit as much as parents of teenagers. The OTC Medicine Safety program resources give coalitions, school systems, and health educators all the data and tools they need to easily adapt medicine safety messaging, folding it into other ongoing campaigns and rounding out their impact.

Program fidelity can additionally be ensured by the wealth of turn-key medicine safety curricula and presentations that can be used as deep-dive sessions. Integrating an implementation

10 Learn more about “SMART” Objectives on CDC.gov through the Adolescent and School Health division at <https://www.cdc.gov/healthyyouth/yac/smart-framework.htm>

11 CADCA’s OTC Medicine Safety Tip Sheet is available at <https://www.CADCA.org/OTC>

timeline into the coalition’s action plan will help the coalitions’ coordinators and Medicine Safety Workgroup ensure that each priority substance is receiving needed, regular attention in the community, and that momentum is sustained towards the coalition’s vision as it works towards ambitious, SMART goals.

Early on, the Medicine Safety Workgroup should identify priority policy changes for how community organizations and businesses can support medicine safety, as well as build partnerships for providing appropriate community education programs as identified in the community assessment. Partnerships, such as with pharmacists, school nurses, and athletics departments, allow the coalition to share responsibility and authority, while preserving resources. Monitoring the development of and response to health education partnership efforts and organizational policies can provide early evaluation inputs and key community indicators into the developing landscape of medicine safety and misuse prevention from a range of community groups.

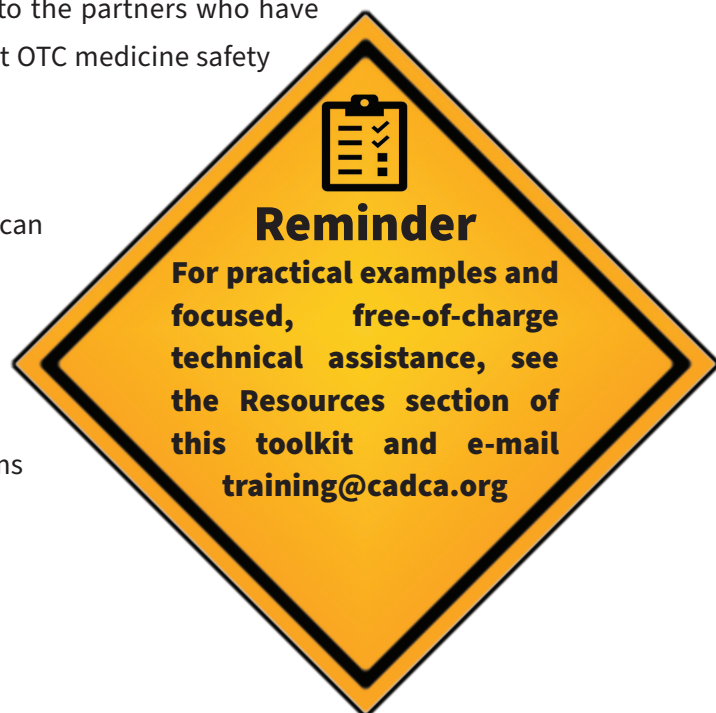
Evaluation

Coalition evaluation describes a coalition’s planned, accurate collection and synthesis of information related to their efforts and community impact, to be used in process improvement and appropriate reporting to stakeholders and partners. Documenting coalition partner and member activities and the community evaluation measures of strategies the coalition has implemented are cornerstones to crafting the story of how the coalition contributed to changes in substance misuse and the promotion of healthy behaviors. The coalition can use this story to attract future support and give meaningful recognition to the partners who have invested in the coalition’s efforts. Key indicators to collect OTC medicine safety data include:

Data from Community Surveys:

- Ability to identify ways that community members can participate in medicine safety promotion
- Attitudes on medicine safety
- Reported at-home medicine storage practices
- Knowledge of drug disposal resources
- How individuals use at-home drug disposal systems

Data from Training and Meeting Evaluations:



- Number of people trained, and the number of community members that those trainees are anticipated to impact with what they've learned
- Ability to explain health risks associated with medicine misuse and environmental factors that may contribute to medicine misuse (e.g., unsupervised youth, unnecessary bulk purchase of medicines, mature adults taking OTC medicines without discussing with their physicians, etc.)
- Changes in correct / incorrect answers from pre-, post-, and follow-up surveys
- Number of best practices identified in multiple choice or open-ended items
- Ability to describe commonly misused medicines and reasons for misuse (e.g., dosing error, off-label use, medicines with overlapping active ingredients, etc.)
- Ability to list signs and symptoms for certain common, intentionally misused medications

The more detailed information your coalition is able to gather at every step of community assessment and implementation, the greater ability you will have to draw connections between the efforts of coalition partners and members and the effects that have been observed in the community. For example, collecting detailed demographics allows the coalition to portray their impact at the sub-population and neighborhood level, which may correlate to specific trainings and practices implemented in the action plan. However, effective evaluation must also balance the coalition's desire to collect information with the community's motivation to share this information. Surveys and evaluation instruments should be designed in a way that they are not onerous for potential respondents, and should be integrated into training / community meeting preparation, implementation, and follow-up in ways that make it natural for respondents to offer feedback. While some coalitions have identified resources to reward survey completion through incentives or raffles, all coalitions should make it clear to potential respondents:

- How their response is unique and important, and why the coalition needs to understand how common certain responses are.
- How their input will be used, including how it will instruct the coalitions' ongoing strategies (how their input will help the community).
- How and when they will be able to see community-wide evaluation results, including the community impact they have contributed to.

Additionally, coalitions should ensure that they collect multiple data perspectives on any community dynamics they are investigating. Just as assessment, planning, and implementation rely on the sound use of individual-level and environmental strategies, evaluation plans should anticipate how community change might be observed.

- Can your coalition create MOUs with pharmacies, convenience stores, and supermarkets to collect OTC sales reports or summaries?
- Can clinics, medical practices, and hospital systems share certain aggregate data on reported OTC use and conditions for your community while preserving patient privacy?
- Can publicly-shared drug disposal sites sort information about OTC medicines collected?
- What level of detail and frequency of reporting can coalitions expect from their local poison control center?
- Will school systems or youth-serving organizations conduct an independent evaluation of OTC Medicine Safety program implementation? If so, how will it be similar to or different from the coalition's planned instrument?



While there can be a tendency for those learning the SPF to think of evaluation as the “last step” of five in the SPF cycle, having a sense of the coalition’s evaluation plan can affect how even an initial community assessment is designed. Additionally, as can be seen in the potential complexity of collecting environmental-level, community-wide OTC medicine indicators, it is essential to have a sound evaluation plan prepared before the medicine safety action plan is implemented, with strategies and practices consistently adapting to new information that is collected by coalition partners and members.

Sustainability

A sustainable coalition has enough resources to effectively create targeted change and can maintain these resources long enough to see population-level outcomes. Coalition sustainability entails maintaining and continually developing the human, social, and material resources needed to achieve the community’s long-term goals for community change. Attention to sustainability guarantees that a coalition can have ongoing vitality in its internal structure and processes while ensuring the long-term viability of its strategies in the community.

OTC Medicine Safety efforts are most sustainable when the Medicine Safety Workgroup representatives:

- Have a pre-existing, vested interest in issues related to medicine safety in the population.
- Contribute resources needed for the implementation of medicine safety strategies from their other activities and partnerships.
- Are authorized and empowered to work synergistically with other drug prevention efforts across the coalition.

While OTC Medicine Safety strategies should be integrated into the coalitions’ overall sustainability plan, coalitions can understand specifics about medicine safety sustainability by identifying:

- Priority resources needed to support partner organizations’ continued efforts in implementing strategies.
- When current resource providers’ participation may sunset, and processes for renewing their participation / contribution.
- Regular project milestones and other opportunities for synthesizing and celebrating partner contributions and community impact.

As an overarching principle of the SPF, sustainability is integral to each of the other steps. Sustainability deals directly with the resources and needs identified in assessment and the opportunities of capacity building. Planning and implementation, in turn, expose the coalition's strengths and opportunities connected to medium- and long-term sustainability. Consistent evaluation not only captures shifting community needs, but also proof of the coalition's credible process for continued partner engagement and investment, portraying the relevance of medicine safety efforts to improving the health of community members.

Cultural Competence

The U.S. Department of Health and Human Services promotes a definition of cultural competence first put forward by the Georgetown University Child Development Center¹² as, "A set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals and enable the system, agency, or professionals to work effectively in cross-cultural situations." Cultural competence is a set of policies and practices at the organizational level, as well as the attitudes, beliefs, values, and behaviors at the individual level, which enable that organization or individual to interact effectively in a culturally diverse environment. Organizations that promote cultural diversity and seek out a wide range of perspectives are more agile in forming teams that can address specific audience needs. These organizations, in turn, are better able to see challenges from multiple angles, as well as identify opportunities and service gaps in the community.

Coalitions promote cultural competence through having an explicit commitment to incorporating culturally diverse stakeholders—ones that reflect their service region—in leadership positions. Coalitions can collect data that will ensure they understand the needs of specific subpopulations. These local insights help coalitions build partnerships and personnel, adopt sound policies, and guide strategic priorities in a way that garners community engagement and support. A coalition that projects diverse stakeholders and leadership to the community it serves will find it easier to maintain consistent buy-in from diverse audiences.

12 Cross TL, Bazron BJ, Dennis KW, and Isaacs MR. Towards a Culturally Competent System of Care: A Monograph on Effective Services for Minority Children who are Severely Emotionally Disturbed. Washington, DC: Georgetown University Center for Child and Human Development, CASSP Technical Assistance Center. 1989. Available: <https://files.eric.ed.gov/fulltext/ED330171.pdf>

Cultural competency can be thought of, in simple terms, as similar to other professional competencies, though it can also be envisioned as cultural currency, which may cause your coalition partners and members to prioritize it in a unique way:

Cultural Competency	Cultural Currency
<ul style="list-style-type: none"> • A skill that can be built between staff members; more personal interactions and professional experience make individuals more competent. • Self-assessment and feedback help one be aware of their own cultural perspective and assumptions. • Individuals become generally aware of uniting forces that can engage audiences across cultural divisions, as well as proven strategies to appeal to specific subpopulations. 	<ul style="list-style-type: none"> • An organizational attribute that can be developed through strategic partnerships, as with other elements of capacity building and sustainability. • A resource or “capital” that can be gainfully applied in novel ways as the organization is called into action. • Culturally current organizations help subpopulations understand their commonality with neighbors and consistently identify opportunities and means for collaboration.

When viewed as a professional competency, successful coalitions members understand that cultural competency is less a quantitative measure of how many things they “know” about the subpopulations they serve, and more an interest in and openness to other people, including a relative ability to assimilate new perspectives.

While no one individual can speak for the various opinions and attitudes of an entire group, successful coalitions balance strategic partnerships with multiple organizations that increase the coalition’s reach to their intended audience. Coalitions implementing OTC Medicine Safety program and strategies can self-assess in key areas of cultural competence, as well as request specific, informed community leaders to provide their own independent assessment:

- Are medicine safety resources provided in the languages spoken by significant segments of our community? What about medicine safety and misuse prevention trainings and educational opportunities?
- Do we have sufficient input from and partnerships with medical and health education providers utilized by non-English speakers in the community?

- Do different cultural groups in our community tend to participate in different youth-serving organizations, faith-based communities, support groups and civic organizations? Would these organizations be amenable to resource-sharing?
- Do the strategies implemented by the coalition come with unintended consequences for or disproportionately affect specific subpopulations? Are there added barriers to implementation to reach some community members?
- Who are the respected leaders of each community sector for the subpopulations we're trying to reach? Is the coalition making the most of these stakeholders' input?



Learn more:

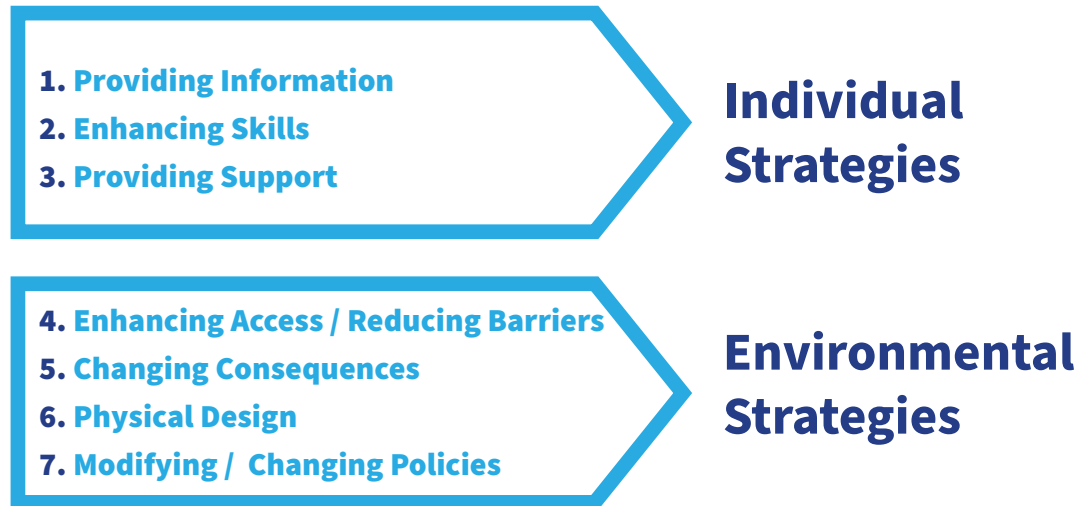
Visit [CADCA.org/resources-center](https://www.cadca.org/resources-center) for our series of **Primers** in each of the SPF elements, available in English and Spanish.

Refer to SAMHSA's **Prevention Core Competencies** to consider where your coalition members may want to develop their own knowledge, skills and abilities related to the SPF processes.

Explore **SAMHSA TIP 59: Improving Cultural Competence**.

A highly accessible resource for preliminary community assessments is Colorado State University **Tri-Ethnic Center for Prevention Research's Community Readiness for Community Change**. This foundational resource on defining and assessing community readiness will help coalitions align levels of prevention work that fit the community's needs and current investment / knowledge level.

CADCA's Seven Strategies for Community Change



The Seven Strategies for Community Change are designed to help coalitions develop and implement comprehensive strategies, which include both the environmental and individual level, for each root cause that is identified in a coalition's substance-specific logic model.

As coalition leaders, you know that:

- There is no one silver bullet or single strategy to prevent OTC medicine misuse.
- No one policy change will magically increase youth's perception of harm of OTC medicine.
- No single curriculum or program can eliminate substance misuse in your community.
- It takes many coordinated strategies to change specific behaviors.

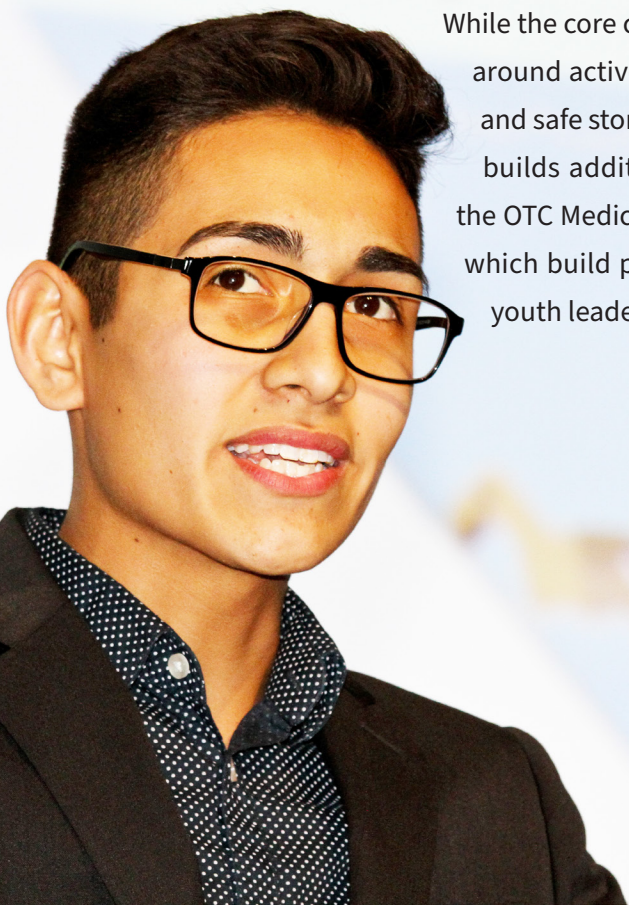
Coalitions and communities can be more successful in achieving community-level change related to preventing over-the-counter medicine misuse when their strategies are part of a comprehensive plan that both targets specific challenges in high-risk sub-populations and can have the degree of enduring impact that alters the shared community environment. The seven strategies are used by coalitions to change individual behaviors and community conditions.

Providing Information includes ways that community members learn about the incidence of substance use, the risk of substance use and what they need to know to lead or participate in prevention efforts. Common approaches across substance use prevention work include educational presentations, workshops, seminars, or other presentations of data (e.g., public announcements, brochures, billboards, community meetings, forums, web-based communication). The Virginia Department of Behavioral Health and Developmental Services, spotlighted in the following section, has led a particularly impactful information campaign, including street-side billboards, pamphlets in doctor's offices, OTC safety booklets distributed through youth-serving organizations, and print PSAs in newspapers. When coalitions focus on providing information, they should consider the most appropriate medium and the most effective spokesperson:

- Is the audience more receptive to taking in this information in a town hall setting?
- Will more youth see your campaign on social media or on billboards?
- Would peers be more persuasive than medical authorities or traditional community leaders?

Enhancing Skills allows the target audience to make information actionable. While workshops, seminars, and other common training sites remain common sites for enhancing skills, population-level outcomes are achieved when community members have a motivating call-to-action, the resources to act, and when coalition members and partners are empowered with the authority to perform in new ways.

While the core curriculum of the OTC Medicine Safety program enhances skills around actively reading the Drug Facts Label, accurately measuring doses, and safe storage and disposal of medications, implementing OTC programs builds additional critical skills. CADCA and our state leaders have used the OTC Medicine Safety program as a model for Train-the-Trainer programs, which build presentation, training and substance use prevention skills for youth leaders, teachers, and attendees of prevention conferences.



“One thing I can say with certainty is that both being trained in the OTC Train-the-Trainer and actually delivering the program to the young members of my community enhanced my overall knowledge and enthusiasm for substance abuse prevention. Addiction doesn’t discriminate when it comes to age and that is why the work done by the OTC trainers is so wildly important.”

**— Robin Martinez, CADCA Youth Leadership Trainer,
Arizona State University**

Providing Support can take many forms and, in essence, is centered around appropriate modeling and providing a venue for the behaviors the coalition intends to see in the target population. It is vital to support alternatives to the behavior that the other strategies aim to minimize (e.g., supporting extracurricular clubs and hobbies while minimizing unstructured and unsupervised time alone). When providing support, social interaction is vital—whether that be in the form of mentoring or healthy interest groups. One powerful way to impact outcomes for youth is to afford them an opportunity to participate with community change efforts. Weaving young people into networks of supportive and responsible peers and allowing them to work with a variety of professionals who are invested in their well-being can have an immeasurable impact in their lives and in their interactions with the wider community.

Enhancing Access / Reducing Barriers focus on the systems and services in the community that may influence certain behaviors. As applied to OTC medicine safety, coalitions should consider:

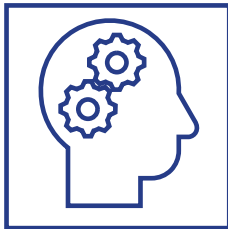
- Do all community members have information that is culturally and linguistically sensitive to their needs?
- Are Drug Facts Labels clear to community members? Do community members have healthcare professionals with whom they can discuss appropriate use of common medicines?
- Do all families in the community have a means for ensuring their children are supervised at appropriate ages?
- Are all people in the community aware of what to do in case of poison exposure?
- Do all community members have convenient access to drug disposal services?
- Do individuals feel that medicine will be accessible and affordable when they need it, or do they feel they need to keep a large reserve?

Changing Consequences (Incentives / Disincentives) focuses on rewarding desired actions and structuring natural motivators to curtail problem behavior. Youth who are involved in the pro-social activities described above can be recognized and celebrated in a way that is meaningful to them. Partners who promote coalition messaging and assist in reaching certain sectors in the community can be rewarded for their efforts or supported in furthering their own messaging within the coalition network. Coalitions can reward and promote companies that employ pharmacists of the cultural and linguistic background of the community they serve. Changing consequences affects the probability of a specific behavior occurring that reduces risk or enhances protection by making the natural result of those behaviors transparent and known.

Altering Physical Design targets the structure of the environment to reduce risk or enhance protection. Community coalitions can promote OTC medicine safety through physical design by keeping medicines out of the reach of children who have not yet demonstrated knowledge of responsible medicine behavior, similar to prescription drug safety strategies. Physical design works in conjunction with other strategies, such as modifying and changing policies, when national or state-wide laws require that a specific OTC medicine, such as pseudoephedrine, receive treatment that is similar to prescription medicines.¹³

Modifying / Changing Policies focuses on formal change in written procedures, by-laws, proclamations, or rules with written documentation and/or voting procedures. Policy strategies may include school system and workplace initiatives, law enforcement procedures and practices, public policy actions, and systems change within government and organizations. Several state leaders have successfully advocated for the inclusion of the OTC Medicine Safety program in statewide prevention and health education resource libraries, and it has been included in after-school programs and youth-serving organizations.

13 The Combat Methamphetamine Epidemic Act of 2005 effectively created a third class of drugs—the once-controversial “Behind The Counter” approach—which requires pharmacist approval and record-keeping for medicines containing pseudoephedrine. <https://www.uspharmacist.com/article/behind-the-counter-products-a-third-class-of-drugs>. Select states now require that medicines containing dextromethorphan are available for sale only to people who are above the age of 18 with government-issued photoidentification, while a few states may be required to post physical signage explaining why consumers must show ID, an example of Physical Design strategies.



Learn more:

Read CADCA's **The Coalition Impact: Environmental Prevention Strategies** to see especially how the Seven Strategies apply to community-level impact.

Read CADCA's **Planning Primer: Developing a Theory of Change, Logic Models and Strategic and Action Plans** for a concise introduction to the Seven Strategies and how to integrate them into your coalition's Strategic and Action Plan.



Practical Examples

The practical examples below represent some of the leading strategies that our cohort of state prevention leaders have implemented to educate youth on the dangers of over-the-counter misuse. These strategies have mainly been selected with the intention of impacting statewide and regional capacity to address OTC Medicine Safety, focusing mainly on:

- Raising broad public awareness on the importance of medicine safety and potential risks;
- Training large numbers of people to serve as thought leaders in medicine safety; and
- Ensuring as many people as possible have access to and awareness of resources to engage in medicine safety education activities.

Promote Awareness at Conferences and Large-Scale Trainings

Conferences provide an opportunity to access larger groups of focused, like-minded professionals who often represent diverse networks and communities that may complement or neighbor your current programmatic reach. Developing the coalition's network at key convenings can lead to important resource and opportunity sharing, as well as provide opportunity for shared problem-solving and inspiration for coalition strategies and implementation approaches. While presenting OTC misuse risks and strategic responses for medicine safety at conferences can help spread awareness, and training others to become trainers themselves offers direct regional capacity building, the unique audience at a conference can pose questions that inspire you to view your efforts in a new light, and follow-up discussions can explore exciting new avenues.

Coalition leaders should probe their existing network to identify a diverse range of conferences, including professional association meetings, professional development symposia and workshops, and conventions connected with state and local government departments. Understanding the size and typical audience at each of these meetings, as well as their specific focus, which may change annually, will help prioritize between a selection of meetings, as well as pair the coalition's presentations and initiatives with the correct venue. Coalition leaders everywhere are always welcome to request CADCA's assistance in delivering the presentations.

Leaders in medicine safety have found receptive and engaged audiences at a range of meetings:

Coalition Meetings: Coalitions with healthy representation from many community sectors, including those with partnered coalitions within those sectors (i.e., coalitions with a youth-led coalition representing their youth sector, or a faith-based coalition representing that sector) will benefit from more formal presentations and trainings offered by the Medicine Safety Workgroup. In large and multi-faceted organizations, keeping all coalition members abreast of the full range of coalition activities and best practices in a wider range of subject matters requires regularly revisiting what each workgroup is doing.



Drug Free Cecil Coalition meeting January 28, 2020

In Maryland, Drug Free Cecil and Youth Empowerment Source have held annual meetings to update their “coalition of coalitions” on OTC Medicine Safety networks. These official meetings draw as many as 70 participants for focused training and information-sharing, including their local DFC representatives, robust representation of local government partners, local substance misuse task forces and councils, neighboring members of their statewide networks, and other participants and sector representatives.

 **CADCA** @CADCA · Jun 24, 2019
 CADCA was honored to be invited to the 2019 Ohio Prevention Conference. Here, SPF Rx Consultant Tessa Miracle presents the Over the Counter Medication Safety Session. [#WhereInTheWorldIsCADCA](#)



Prevention network conferences: Many states have conferences specifically for those leading substance use prevention efforts locally, as well as those who may be interested in prevention in connection to their professional roles. While many coalitions may already be aware of their nearby state-level or regional conference, it is worth discussing with neighboring coalition leaders and counterparts on grant projects, as these meetings may be hosted by a number of organizations,

6 15

RENEW RECOVER RESILIENCE

21ST ANNUAL NJPN ADDICTION CONFERENCE



Influencers & Followers: Creating a Culture of OTC Medicine Safety and Connecting Communities with Resources



DOUGLAS RICE

Senior Manager & Sales Operator
CADCA



LIZ PANDYA

Director
Scientific Education & Patient Advocacy (SEPA)

Common over-the-counter (OTC) medications remain a source for potential misuse that is underestimated by youths, parents, and older adults alike, and is often poorly understood by community partners. Recent research suggests youths and older adults have a low perception of harm for OTC medications, highlighting the need for increased awareness on medicine safety and the potential harm of misuse. Increased time at home over the past year has led to self-managed healthcare and has made the coalition's role in OTC Medicine Safety education of primary importance.

The OTC Medicine Safety Program has been proven to deliver high retention of learning objectives, which can help serve as a foundation for youths and other populations making healthy decisions related to medication. Coalitions can take simple, evidence-based actions to significantly impact individuals' health behaviors in their communities. Join us to gain background on some startling OTC misuse trends and learn how to help the most vulnerable members of our community.

such as different government agencies (i.e., the Department of Health vs. the Governor's office), colleges and universities, independent non-profits, charitable foundations, and even socially engaged local corporations.

OTC Medicine Safety state leaders have presented at several such conferences, including train-the-trainer presentations at the Ohio Prevention Conference and New Jersey Prevention Network conference, discussing how local health authorities across a state can use OTC Medicine Safety resources during a special meeting.

State and local government agencies: While it may be tempting to simply identify the conference offered by your state Behavioral Health / Addiction Services agency, your assessment of your community's key stakeholders in OTC Medicine Safety may offer clues to other government agency convenings that will be highly receptive.

Paired with granting all teachers in the state access to the Medicine Safety curriculum (described below), leaders in Alabama also secured a regular opportunity to present at the State Department of Education's MEGA Conference. This convention of thousands of teachers from across Alabama affords the OTC Medicine Safety team an opportunity to not only remind teachers of the availability of the curriculum, but to train and offer skill-building in delivering the program and discuss the process in a professional setting.

A Professional Development Enhancement Opportunity Co-sponsored by the Alabama State Department of Education and Conference Exhibitors.



MEGA CONFERENCE 2019

July 15-19, 2019 · Mobile, AL

Renaissance Riverview Plaza Hotel
Renaissance Battle House Hotel
Mobile Convention Center

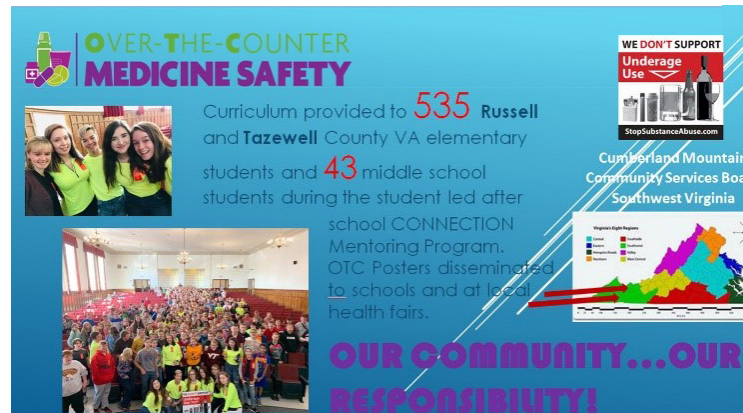
Targeted populations

Coalition leaders regularly experience how effectively reaching a community sub-population requires specific stakeholders, spokespeople, messaging, and media for that messaging. In the broad implementation of OTC Medicine Safety, CADCA leaders have identified mature adults and young people as the most critical groups for medicine safety interventions, due to their risk and the ability to make real, measurable impact in preventing misuse.

Youth

When the OTC Medicine Safety program initially launched, CADCA's strategy was to identify and collaborate with coalition leaders that were partnered with a robust youth sector, including those youth who had shown particular promise after engaging in CADCA Youth Leadership training. In this pilot project, CADCA trained coalition leaders to build their youth sector representatives into OTC Medicine Safety trainers and supported coalition leaders as those youth, in turn, engaged in near-peer training. These youth train-the-trainer activities continue to be a cornerstone of CADCA's medicine safety efforts and are conducted by the CADCA Youth Leadership team at flagship events. While CADCA Youth Leadership always engages youth through social media, CADCA additionally developed shareable video tutorials to virtually train teen coalition leaders interested in implementing the program in their local communities and expand the reach of medicine safety messaging. This series, available through CADCA.org and our YouTube channel (link in the following section), reviews the materials needed for every lesson, as well as best practices for teaching 5th- and 6th-graders.

As CADCA's strategy on medicine safety has evolved to working with state leaders, the Drug Free Cecil team in Maryland has provided an inspiring model



OVER-THE-COUNTER MEDICINE SAFETY

Curriculum provided to **535** Russell and **Tazewell** County VA elementary students and **43** middle school students during the student led after school CONNECTION Mentoring Program. OTC Posters disseminated to schools and at local health fairs.

OUR COMMUNITY...OUR RESPONSIBILITY!

WE DON'T SUPPORT Underage Use
StopSubstanceAbuse.com

Cumberland Mountain Community Services Board
Southwest Virginia

Virginia's Eight Regions

Blue	Green
Orange	Red
Yellow	Purple



DRUG FREE CECIL @DrugFreeCecil · Sep 16, 2019
Drug Free Cecil Youth Coalition members teaching county 6th graders about OTC safety! #drugfreececil #drugfreececilyouthcoalition #preventionworks #otc



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for other coalitions. Drug Free Cecil had their youth leaders trained in delivering the OTC Medicine Safety curriculum at CADCA conferences and supported their work as they returned to the community. During their first year, the youth were able to access private schools across the county and delivered training to all private school 6th-grade students. In the following year, the Maryland state project leaders used their local partnerships built by Drug Free Cecil coalition to have the OTC Medicine Safety Program included in the county-wide NorthBend Connection, Cecil County Public Schools' week-long, residential orientation for all rising 6th graders. Over the month of September 2019, more than 1,200 students participated in the OTC Medicine Safety Program at North Bay Adventure Camp. The unique venue features a ropes course, a game room, and inspiring camp counselors committed to sharing their vision of leadership and the role youth play in community impact, all on the shore of the Chesapeake Bay and surrounded by a state park.

Statewide Resources

An emerging method for disseminating the OTC Medicine Safety curriculum is to ensure it is available to entire networks of professionals and available in the resource libraries that those professionals use regularly in their work. This strategy is most effective when paired with complementary efforts—i.e., promoting the resources' availability so that people are aware they are readily accessible and training people to be successful with the resources. Leveraging resource libraries, however, makes the program easy for the audience to “discover” on their own, without having the audience separately decide to attend a training or seek-out medicine safety information.

As coalitions recruit key stakeholders for medicine safety initiatives, potential resource hubs for their profession can be discussed. Some resource libraries may require significant application and approval processes (for example, board of education approval for statewide public school curricula), and while official governing bodies may seem like many layers of gatekeepers, each is a stakeholder that can be recruited as an ally for the coalition's work. Coalitions should target less formal or smaller scale “easy win” groups to share their medicine safety resources with, such as individual school resource libraries, home schooling associations, and semi-formal teacher mentoring programs, while also pursuing large scale and systemic changes, gradually answering:

- Does the school system have specific requirements for health programs or common-core curricula that will need to be described in their application process?
- Is substance misuse prevention education required at the local or state level? Is that education required to incorporate any specific topics?
- Does your organization need state approval to share the resource widely with teachers?
- What is the process for applying for official approval or adoption of curricula?

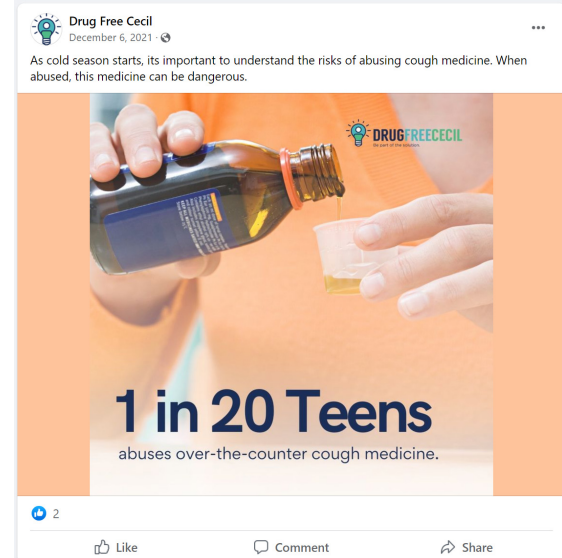
While these examples have all been discussed within the realm of education, they apply as well to publicly-supported health clinics, social work case managers, hospital systems, youth-serving organizations, and other potential medicine safety champions. State OTC Medicine Safety leaders have had great success getting the curriculum adopted into statewide public school health education resource libraries in Alabama and Virginia, with similar work undertaken in Arkansas and Nevada. Additionally, they have made the program readily accessible to networks of local preventionists across these states through separately maintained resource libraries. At the local level, Community Service Board preventionists have also had the program and resources included in several 4-H and Boys & Girls Clubs in Virginia.

Marketing and Communications

As with other strategies, marketing and communications should be targeted to reach specific community members, as identified in the coalition’s community needs and readiness assessment. Data can be collected through media sector representatives and partners about which forms of media are noticed, followed, or regularly sought out by each sub-population within the community. Even though individuals can’t always be relied on to accurately elaborate how their own opinions and behaviors are influenced by marketing campaigns, focus groups with members of the intended audience remain a gold standard for testing campaign themes and style of delivery. Focus groups can elicit insights through the ways that participants respond to each other’s ideas and offer a site for exploratory conversations that might inspire future campaign messaging.

Consider different media for your marketing and communications:

- Billboards have been very successfully employed in areas such as southern Virginia, where most community members regularly use the same major highways.
- Social media is guaranteed to reach many, though far from all, members of most communities. Coalitions can explore having content created by enthusiasts or youth leaders, as well as develop reciprocal relationships with organizations which share similar strategic objectives for the community, all of which can create a great deal of earned media exposure with relatively little effort. Local community listservs, such as Nextdoor, can also be explored as a signal boost for coalition efforts.



LOCAL

Teen advocates present dangers of drug misuse to campers

By MARION DIERKE
 A group of 10 grade girls about the dangers of misusing over-the-counter medicines at Sept. 22. Each year, Cecil County Public Schools' 10th grade students begin their middle school careers by spending a week at the camp on the Hill Neck peninsula. There, they learn about being a good environmental steward, as well as discuss their purpose in life and medicine responsible decisions.

This year, Wooten and his fellow members of the Drug Free Cecil County Coalition instructed the middle schoolers about drug safety — teaching a serious topic with interactive and engaging discussions.

Wooten taught his group about active versus inactive ingredients, how to read warning labels, proper storage of over-the-counter medications, and other information, all while asking questions and using activities to get the point across.

Throughout the presentation, Wooten asked the group, "When do you ask a parent or trusted adult to take medicine?" to which they enthusiastically responded. "Every time, all the time," participants also raised questions with the obvious intent on them.

During one activity, volunteers rolled a six-sided die, with each number corresponding to a different consequence of taking medication without a trusted adult, such as not getting to eat ice cream, or having to write a letter to the hospital.

"When you roll a die, do you know what happens?" Wooten asked, receiving



Photo: Drug Free Cecil County Coalition member Fida Wooten presents about over-the-counter medicine safety to a group of middle school students at NorthBay Adventure Camp on Sept. 17.

surprised by the expertise. "I personally did not think that I was going to be doing what I'm doing now because I'm still a very outgoing person," he said. "That I've got to say, I've had fun the last couple days teaching these kids. It's really cool."

Wooten said he and the other members of the Drug Free Cecil County Coalition are interested in teaching kids about over-the-counter medications to create young people with knowledge about drug safety and prevent them from developing unsafe behavior as they grow up.

The drug store set at this age, at the 9th grade level, but any self-respecting parent, he said, "There are, we had that priority at kids at this level, teaching them about over-the-counter medicines and how to use them. It's really cool."



- Paid marketing on social media platforms should, on the other hand, be highly attentive to which websites or social media services are used by the intended audience. The communications team should be attentive to the demeanor of content that garners the intended response in that audience. The axiom "There's no such thing as bad publicity" was certainly not coined in the Information Age!

- Local newspapers, including school newspapers and web-only community news bulletins, are a coalition staple for earned media coverage. Community leaders have not only had great success in circulating "human interest" stories, but through developing these relationships, are often additionally successful in free or discounted PSA circulation.

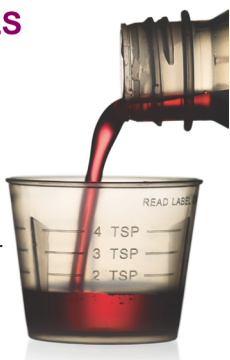
- By extension, local radio and television stations will similarly be eager to highlight examples of community leadership and engagement and are equally valuable. Coalitions should remain attentive to offering media partners—whether print or broadcast—material that is ready to publish if that is the partner's preference.

Safe Dosing

MEDICINE MEASURING TOOLS

Why do medicines come with dosing devices?

Because measurement is an exact science



- All medicines should be dosed and used *under the supervision of a parent or a trusted adult.*
- Measure carefully—accuracy is important.
- When the recommended dose is not followed, medicines can cause harm.

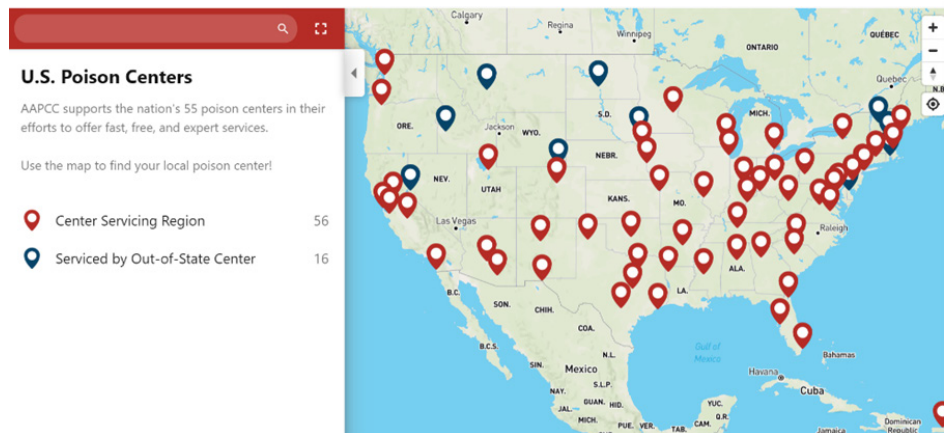
Newspaper Ad from Dickenson County Behavioral Health Services (VA)

OTC Medicine Safety Resources

The **Over-the-Counter Medicine Safety** program is a set of classroom-ready lesson plans with visual aids and interactive online content that serves as the flagship, evidence-based training program for OTC medicine safety. Coalitions can review content from [YMIClassroom.com/OTCMedSafety](https://www.ymiclassroom.com/) and coordinate Train-the-Trainer programs through CADCA. The OTC Medicine Safety program also offers a ready-to-present PowerPoint, including speaker's notes, which coalitions can use to introduce OTC medicine safety broadly.

Poison Control

All coalitions can benefit their communities by educating residents on the resources available to them through contacting their local poison control center or by simply calling the Poison Help line, 1-800-222-1222 for toll-free, 24-hour help. Poison



Control can additionally be added as a contact in your phone by texting “Poison” to 301-597-7137. Coalitions can find out when their local poison control center publishes data, identify data indicators for OTC medicine safety, receive educational materials for their community, get guidance for safety tips in different settings, and follow key Poison Control Center data analyses and publications.

In addition to OTC medicine data and safety messaging, AAPCC.org currently has focused data and messaging on other emerging trends and substances of interest to prevention coalitions, including e-cigarettes and liquid nicotine, cannabidiol (CBD) and synthetic cannabinoids, and opioid pain medications.

- The majority of callers to the Poison Help line receive the help they need without having

to visit the doctor or hospital.

- The Poison Help line offers service in more than 150 languages.
- A map of Poison Control Centers is available from the American Association of Poison Control Centers on aapcc.org.
- The Health Resources and Services Administration (HRSA) also maintains a library of resources and FAQs at poisonhelp.hrsa.gov, including a [national list of Poison Control centers organized by state](#).

National Campaigns

The Consumer Healthcare Products Association works to ensure that consumers are empowered with access to and knowledge about safely-regulated OTC medicines and dietary supplements. In addition to conducting the intricate campaigns to prevent the intentional diversion and misuse of OTCs like [dextromethorphan](#) (“DXM”, the cough suppressant commonly misused in concoctions such as “Purple Drank”, “Lean”, or “Sizzurp”) and [pseudoephedrine](#) (the decongestant that can be used to make illegal methamphetamines), the CHPA Educational Foundation maintains a number of campaign-specific websites on OTC safety which can serve as an educational resource to all community members:



Health In Hand™ HealthInHand.org discusses best practices in self-care, including common conditions and which OTC medications may be most appropriate for these conditions, offers special advice for OTC medicine uses for women who are pregnant, and offers resources and safety tips—ranging from safe use and storage to disposal and [tips for medicine safety across a number of age groups and populations](#). The [campaign's YouTube channel](#) has a wealth of educational, share-ready videos on medicine safety topics.

HRSA
Health Resources & Services Administration
Poison Help

Safe Medicine Use & Poison Prevention Tips

A Guide for Older Adults and Caregivers

PoisonHelp.HRSA.gov • 1-800-222-1222
U.S. Department of Health and Human Services Health Resources and Services Administration

4 BUSLOADS OF CHILDREN PER DAY VISIT THE EMERGENCY ROOM FOR MEDICINE POISONING = **1** EVERY 8 MINUTES

YOU WOULD DO ANYTHING TO KEEP YOUR GRANDCHILDREN SAFE. BUT DID YOU KNOW THESE STARTLING FACTS?

IN 86% OF ER VISITS, THE CHILD HAD EASY ACCESS TO THE MEDICATION

CHILDREN MOST COMMONLY FIND MEDICATIONS ON COUNTERS, NIGHT STANDS & DRESSERS; IN PURSES & BAGS; OR ON THE GROUND

HOW ARE CHILDREN GETTING THE MEDICINE?

Put your medicines **up and away** and out of sight

IN 38% OF CASES, THE MEDICINE BELONGED TO THE GRANDPARENT

EVERY MINUTE A POISON CONTROL CENTER ANSWERS A CALL ABOUT A YOUNG CHILD GETTING INTO MEDICINE **500,000** CALLS PER YEAR

ELECTRICAL OUTLETS ARE THE #1 SAFETY CONCERN OF GRANDPARENTS

BUT IT'S **36x** MORE LIKELY THAT A CHILD WILL GO TO THE ER FOR MEDICINE POISONING

TIPS FOR GRANDPARENTS ON SAFE MEDICINE STORAGE

- Store all medicines and vitamins **Up and Away** and out of sight.
- Never leave medicines or vitamins out on a table, countertop, or sink.
- Keep purses, bags, and coats that contain medicines or vitamins out of reach and sight.
- Set a daily reminder to take your medicines and vitamins since they will be out of sight.
- Always lock caps tightly and put away medicines after every use. Remember that weekly pill reminder kits often don't have child resistant closures.
- Program the national Poison Help number, 1-800-222-1222 into your phone.

Infographic data source: Safe Kids Worldwide, 2014. Keeping Families Safe Around Medicine

FOR MORE TOOLS AND INFORMATION, VISIT UPANDAWAY.ORG

CHPA EDUCATIONAL FOUNDATION | Alliance | In partnership with the Centers for Disease Control and Prevention

KnowYourDose.org
Acetaminophen Awareness Coalition

Put your medicines

up AND away
and out of sight

KnowYourDose.org contains targeted resources to acetaminophen safety, including guides on reading the medicine label, dosage information for infants, managing chronic pain, and treatment of the common cold. UpAndAway.org, the public education website of CDC's PROTECT Initiative, contains information on safe storage and dosing of medicine for homes with young children.

CHPA additionally supports initiatives such as the Institute for Safe Medication Practices' website ConsumerMedSafety.org, which has a wealth of information and articles about medicine safety, including a focused ten-page introduction to OTC medicine safety that explores common types of OTC medicines and dietary supplements, safety practices, and a discussion of intentionally-misused OTC medications. Another initiative supported by CHPA is the [Alliance for Aging Research \(AgingResearch.org\)](http://Alliance for Aging Research (AgingResearch.org)), whose [Medication Safety page](#) features engaging blogs, videos and fact sheets targeted to mature adults. Finally, drawing from the support of both CHPA and Kenvue, NeedyMeds' BeMedWise.org offers a repository of many years' resources on OTC and prescription medicine safety, targeted to different communities and age groups.

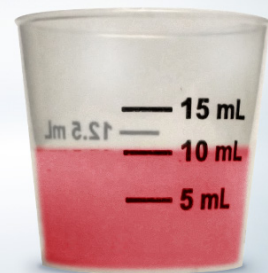
Federal Government Resources

The Food and Drug Administration is the agency directly responsible for ensuring that medicines in the USA are used safely and that consumers are aware of their risks. The [FDA's Safe Use Initiative](#) offers numerous resources connected with their current projects—including acetaminophen safety, use of NSAIDs with geriatric patients, and unintended medication overdoses in youth—and recordings and resources connected to their completed projects.

The CDC (cdc.gov/medicationsafety) additionally maintains a library of educational and public awareness resources related to medicine safety and is a valuable resource for epidemiological data on adverse drug events.

PROTECT YOUR PATIENTS.

Use mL when recommending, prescribing, or dispensing medications.



www.cdc.gov/medicationsafety



Spoons are for Soup

- Do not use household spoons to give medicines.
- Spoons come in all shapes and sizes. Using a tablespoon instead of a teaspoon can mean 3 times too much medicine for your child.



Milliliters (mL) are for Medicine

- Use the oral syringe or dosing cup that comes with your liquid medicine to make sure your child gets the right amount.
- Ask your pharmacist if you don't have one.



To learn more, visit cdc.gov/MedicationSafety

CADCA OTC Medicine Safety Resources

CADCA has produced a number of resources in recent years. Coalitions are invited to contact CADCA to arrange OTC Medicine Safety program Train-the-Trainer sessions and general presentations on the topic. Coalitions can also utilize CADCA's OTC video tutorials to introduce the topic, as well as refer to the Tip Sheet for implementing the OTC Medicine Safety program at a statewide level. Materials can also be accessed through [CADCA.org/OTC](https://www.cadca.org/OTC).

Coalitions developing logic models and strategic plans for OTC safety campaigns will also benefit from referring to CADCA's *Over-the-Counter Medicine Safety: Logic Model with Seven Strategies for Community Change*. This brief guide for how OTC medicine safety can be incorporated into a logic model and implemented through CADCA's Seven Strategies for Community Change was created for our earliest coalition efforts using the OTC Medicine Safety program, and offers a succinct, step-by-step framing of how the program fits into core coalition products.

CADCA has also produced a mini-toolkit with educational materials and shareable web assets on the danger of certain social media challenges and how they relate to OTC safety. To request a copy of the *Social Media Challenges and Over-The-Counter Medicine Safety Toolkit* or our OTC Logic Model guide, please e-mail Coalition Development Services at training@cadca.org, or any member of our team.

Finally, CADCA's website [PreventMedAbuse.org](https://www.PreventMedAbuse.org) contains strategies, tools, and share-ready media to prevent and reduce teen prescription and Over-the-Counter medicine misuse in the community. This toolkit offers additional considerations for medicine safety from the perspective of CADCA's Seven Strategies for Effective Community Change. Considering these strategies will help coalitions formulate, modify, and implement their prevention strategies. This site is also home to CADCA's activities for National Medicine Abuse Awareness Month, including our annual Dose of Prevention Challenge, which is recognized each year at CADCA's National Leadership Forum.

A Note of Appreciation to our Project Participants

The project learning distilled in this toolkit is the product of many years' work by CADCA coalitions, state prevention representatives, and inspiring young leaders across the country. We would like to thank all the coalition leaders, educators, and youth trainers who have hosted OTC Medicine Safety program trainings, and all of the youth participants who have shared their time, energy, and attention in these trainings. We would also like to share a special note of appreciation for our statewide prevention representatives, who have shared their invaluable insights to state-specific resources and opportunities, and whose results and community-level impact are reflected throughout our Practical Examples.

Our current (2024) cohort of state leaders includes:

Alabama

Beverly Johnson, MPA

Director, Prevention Services
Alabama Department of Mental Health

Maryland

Virgil Boysaw, Jr.

Drug Free Community Coordinator
Cecil County Health Department

Michigan

Grenaeé Dudley, Ph.D.

President and CEO, *The Youth Connection*

New Hampshire

Mary Forsythe-Taber, CPS

Executive Director, *Makin' It Happen Coalition for Resilient Youth*

New Jersey

Donald Hallcom, Ph.D.

Director, Prevention and Early Intervention
New Jersey Department of Human Services

Diane Litterer, MPA, CPS

CEO & Executive Director
New Jersey Prevention Network

Ohio

Tessa Miracle, Ph.D.

Research Scientist, *Pacific Institute for Research and Evaluation (PIRE)*

Virginia

Nicole Gore

Director, Office of Behavioral Health Wellness
Virginia Department of Behavioral Health and Developmental Services

In recent years, CADCA has additionally worked with a number of exceptional trailblazers who implemented OTC Medicine Safety at the state level:

Arkansas (2018-2023)

Arkansas Department of Human Services

Nevada (2017-2019)

Nevada Department of Health and Human Services

Montana (2017-2018)

Montana State Department of Public Health and Human Services

