



Department of
**Mental Health &
Substance Abuse Services**

**Substance Use and Overdose
Prevention:
Programs, Data and Getting Involved
2023**

TDMHSAS Mission and Vision

OUR MISSION:

Creating

***COLLABORATIVE
PATHWAYS TO
RESILIENCY,
RECOVERY, and
INDEPENDENCE***

for Tennesseans living with mental illness and
substance use disorders

OUR VISION:

A STATE
of resiliency, recovery,
and independence
IN WHICH
TENNESSEANS
living with mental illness
and substance use disorders
THRIVE

Session info

- Review state and local substance use trends
- Discover how TDMHSAS is utilizing data trends to advance prevention initiatives at the state and local levels
- Learn about the annual prevention activities hosted around the state that you and your organization can become involved with

Prevention

*“Many factors influence a person’s chance of developing a mental and/or substance use disorder. **Effective prevention focuses on reducing those risk factors and strengthening protective factors...**”*

-Substance Abuse and Mental Health Services Administration

Risk factors

Characteristics that precede and are associated with higher likelihood of negative outcomes.

Protective Factors

Characteristics associated with lower likelihood of negative outcomes; positive countering events

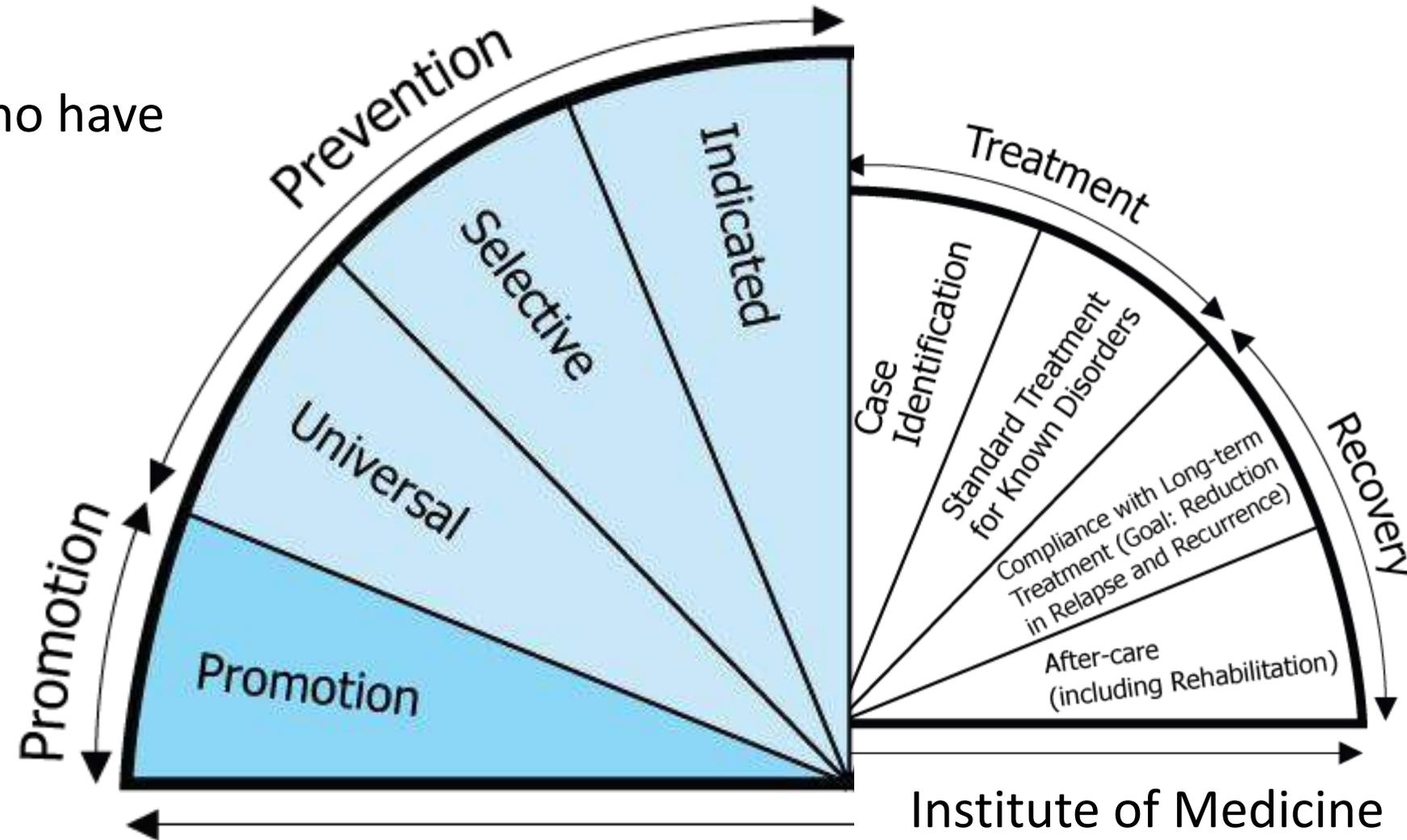
Prevention and Continuum of Care

Indicated Prevention: Targets individuals who have exhibited behaviors

Selective Prevention: Target individuals who have a higher –than-average vulnerability to a behavioral conditions

Universal Prevention: Prevent or reduce the vulnerability of developing behavioral health conditions

Promotion strategies: creating environmental conditions for behavioral health



Harm Reduction as Prevention

...emphasizes engaging directly with people who use drugs to prevent overdose and infectious disease transmission, improve the physical, mental, and social wellbeing of those served, and offer low-threshold options to treatment and healthcare (SAMSHA)

Meeting people where they are, without judgment, stigma, discrimination
(Overdose Prevention Strategy-Health and Human Services)

Harm Reduction is a way of **preventing disease** and **promoting health** that *meets people where they are.*

Not everyone is **ready or able to stop substance use**; therefore, **scientifically proven** ways of decreasing risks are *essential.*



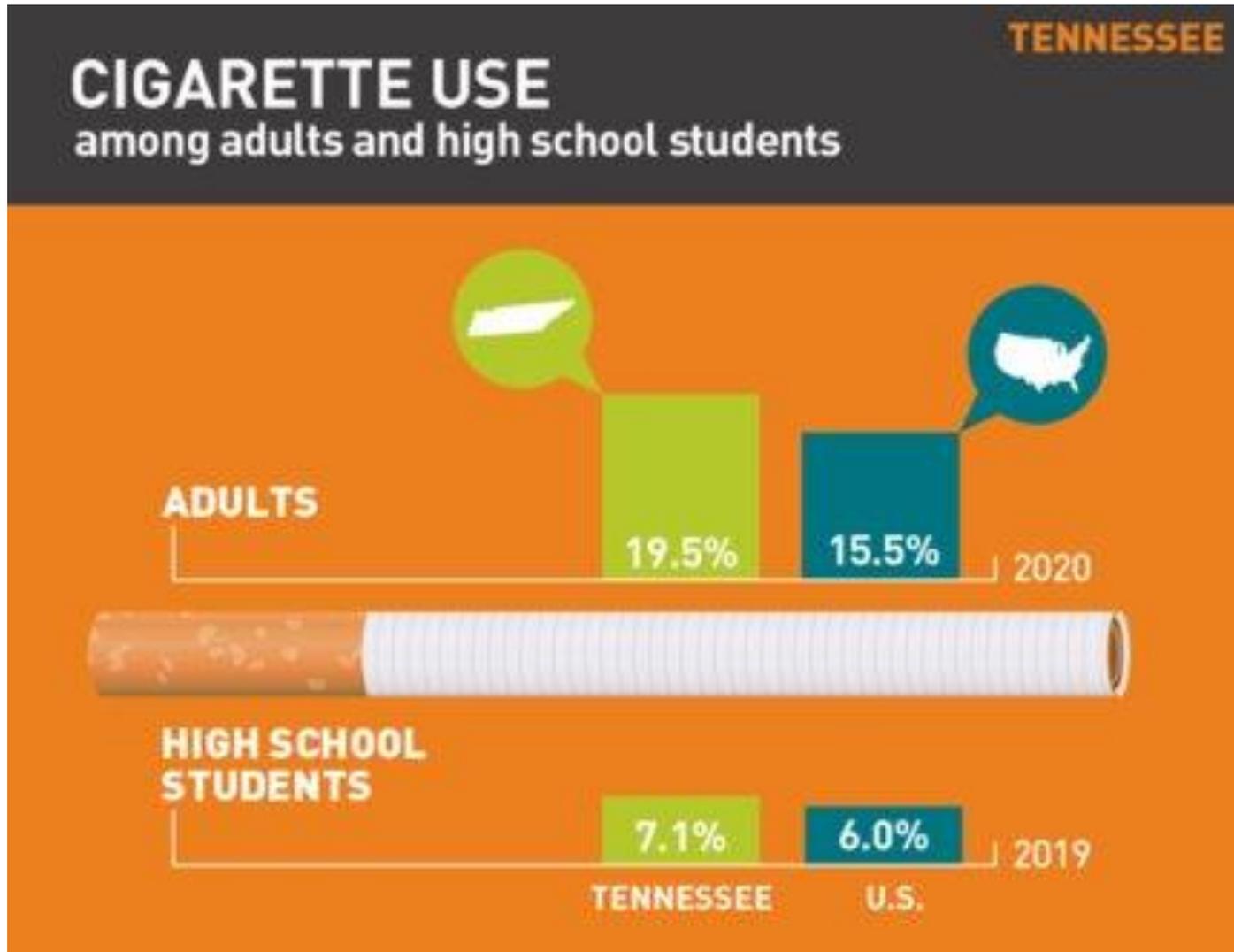
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Substance Use Trends in Tennessee

Alcohol

- In 2019, nearly **1,300** Shelby County youth reported having their first drink before age 13.
- Almost **1,200** Shelby County youth reported currently using alcohol and more than **1,250** currently engage in binge drinking.
- **16.90%** of Shelby County traffic deaths involved alcohol Impairment.

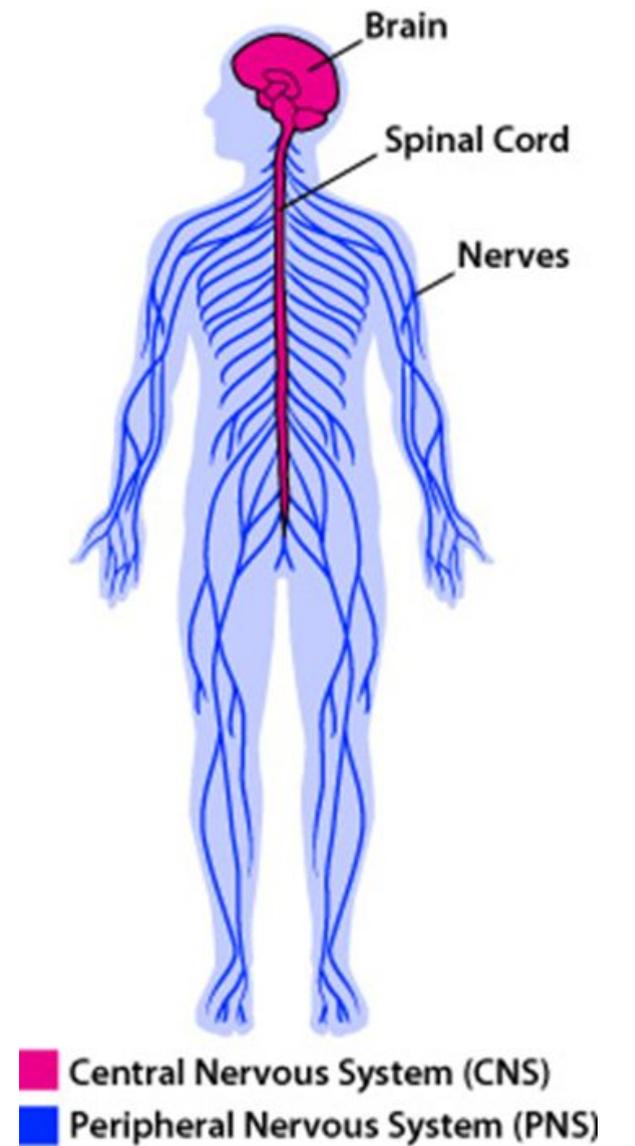
Tobacco



- 1,308 Shelby County youth have tried smoking before age 13 in 2019
- 17.5% of Shelby County high school youth currently used a tobacco product in 2019
- \$2,672,824,085 in TN healthcare costs due to smoking

Stimulants

- Stimulants are a type of substance that speed up the messages travelling between the brain and body, elevating mood and increasing feelings of wellbeing, energy, and alertness.
 - Over the counter: Caffeine, nicotine, pseudoephedrine
 - Prescription: ADD/ADHD medications (Adderall, Vyvanse, Concerta, Focalin), Weight loss (phentermine)
 - Illicit: Cocaine, Methamphetamine, Ecstasy



Prescription Stimulants

- Adderall causes the brain to release more dopamine and norepinephrine
- The release of these chemicals in the brain increases attention and concentration
- Help people with ADD/ADHD to develop better work habits and skills
- These habits and skill help to be more equipped for socially, academically, and professionally success

Myth Busting

- Long term use of prescription stimulants (as prescribed) does NOT increase vulnerability to a substance use disorder
- Research shows no clinically significant increase in overall academic performance when prescribed stimulants are used by people who do not need them

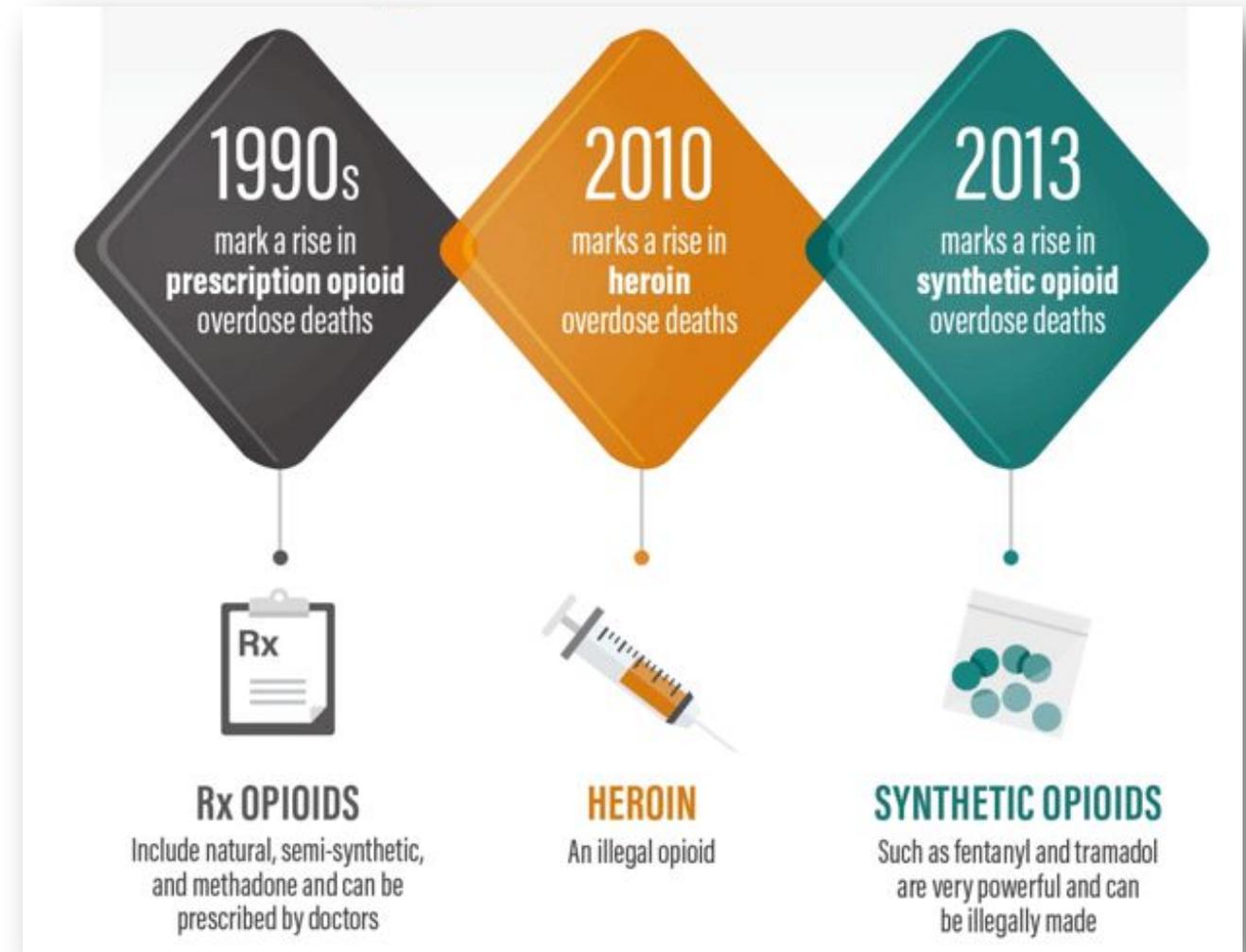
Illicit Stimulant Use in Tennessee

- Methamphetamine
 - Crystals, powders, pills
 - Ingested, smoked, snorted, injected
 - Past year use (12+): 103,000/1.5%
- Cocaine
 - Powder, crack, bricks
 - Injection (cocaine)/smoked (crack cocaine)
 - Past year use (12+): 86,000/1.2%

Understanding the Overdose Epidemic

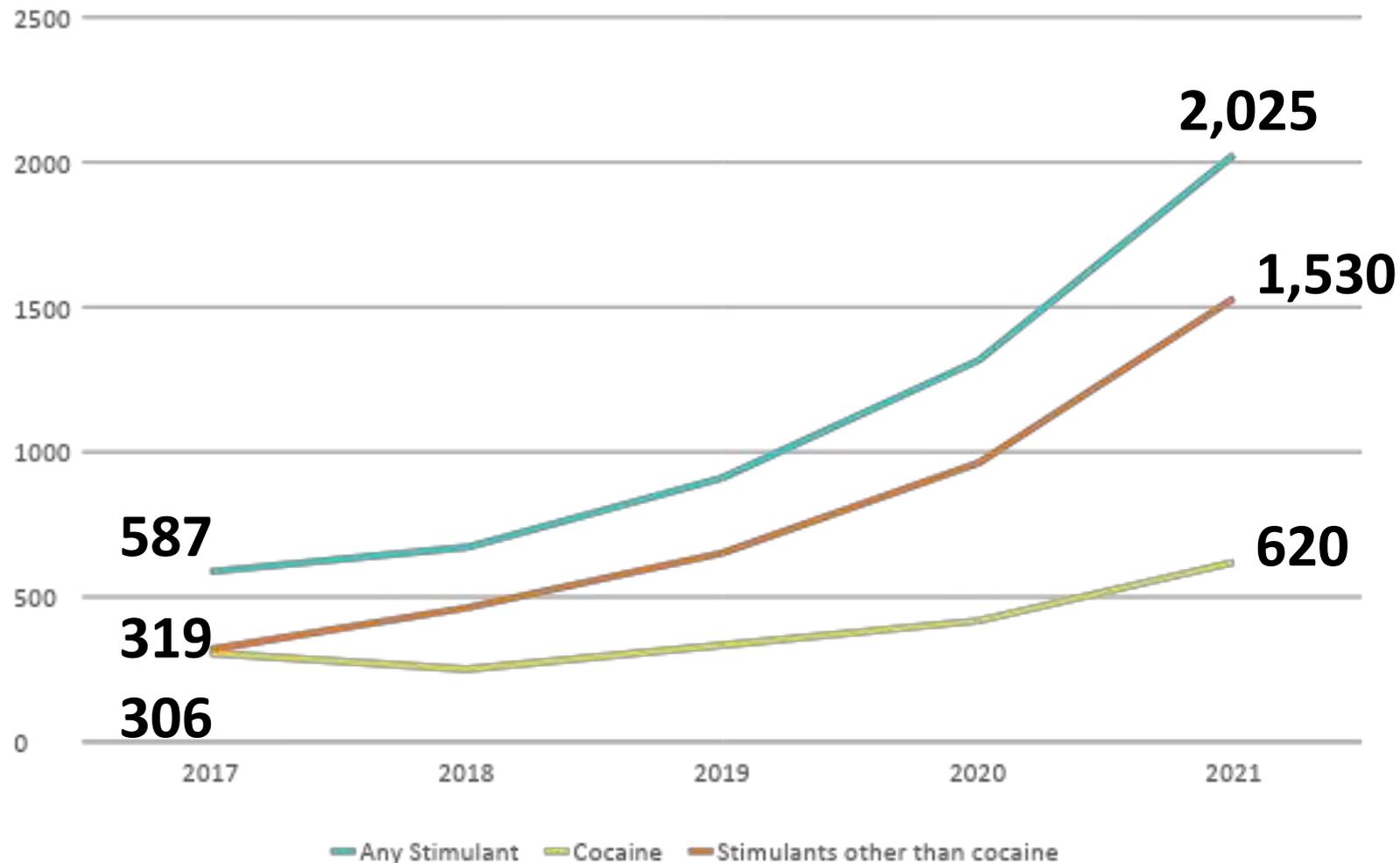
Tennessee continues to face an epidemic of substance use.

Similar to national trends, Tennessee has seen a shift in the primary cause of the overdose epidemic from prescription pain relievers to illicit substances.



Introduction to Stimulant Data

Fatal Drug Overdoses in Tennessee, 2017-2021



- Most fatal stimulant overdose deaths are not due to prescription stimulants, but rather **illicit stimulants** like cocaine or methamphetamine.
- Drug overdose deaths involving stimulants are on the rise in Tennessee, **increasing 245%** from 2017 to 2021

Stimulant Overdose Trends-State

- Rates of fatal overdose involving cocaine are 5x higher for Black Tennesseans than White Tennesseans.
- Rates of fatal overdoses involving psychostimulants with abuse potential (most commonly methamphetamine) are 2x as high for White Tennesseans as Black Tennesseans.
- Overdose deaths have been most common among Whites and men, although we see that trend changing over the last couple of years.
- Overdose deaths are most common in 25-44 years olds.

Fatal Drug Overdoses Involving Stimulants (2021)

	All drug overdose deaths	Involving ALL Stimulants	Involving Cocaine	Involving Psychostimulant with Abuse Potential*	Involving Opioid and Stimulant
Tennessee	3,814	2,025	620	1,530	1,555
Shelby County	549 (15%)	320 (16%)	217 (35%)	143 (9%)	275 (15%)

Notes:

An overdose death may involve multiple substances. Individual categories may not add up to total.

Shelby County has approx 10% of the state's population

*This category includes/most commonly captures methamphetamine



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TN Together Survey

Tennessee Together Survey

- Administered every 2 years
 - First administration: 2018-2019 SY
 - Second administration: 2020-2021 SY
- Surveys 8th, 10th and 12th graders
- 2020-2021 administration
 - 184 schools in 34 counties participated
 - 18,416 students were in the final analytical sample



Survey Measures

- The TN Together student survey captures students' responses in the following areas of measurement:
 - Lifetime and past month substance use;
 - Age of initiation;
 - Ease of access;
 - Peer substance use;
 - Riding in a car with someone who is intoxicated;
 - Personal, peer, and parental approval of substance use;
 - Perceived risk associated with substance use;
 - Family communication about substance use; and
 - Exposure to prevention messaging.
- Responding to feedback from the 2018-19 administration, we updated the vaping questions to be more expansive, and teased out vaping marijuana, vaping nicotine, and vaping flavoring (only).

Crowd Question

- Raise your hand if you think the most reported substance used on the TN Together survey was:

Vaping

Methamphetamines

Alcohol

Prescription Drugs

TN Youth Substance Use Data

Substance	Reported Lifetime Use	Age of Initiation (years)
Prescription Drugs	6.4%	13.1
Alcohol	33.4%	13.8
Binge Drinking	14.5%	14.7
Cigarettes	13.3%	13.3
Vaping (any)	30.8%	14
Smokeless Tobacco	6.9%	13.4
Marijuana	14.2%	14.2
Methamphetamines	1.0%	12.7
Other Illegal Drugs	2.3%	13.9

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Data-informed Strategies

Why is data important?

Understanding our community better

Data can illuminate trends that can inform us of how our community is unique and different

Improve Education

When you know how your community is unique, education materials can be tailored to those in your community

Starts a conversation

When its hard to talk about a topic, data acts as a bridge

Geography

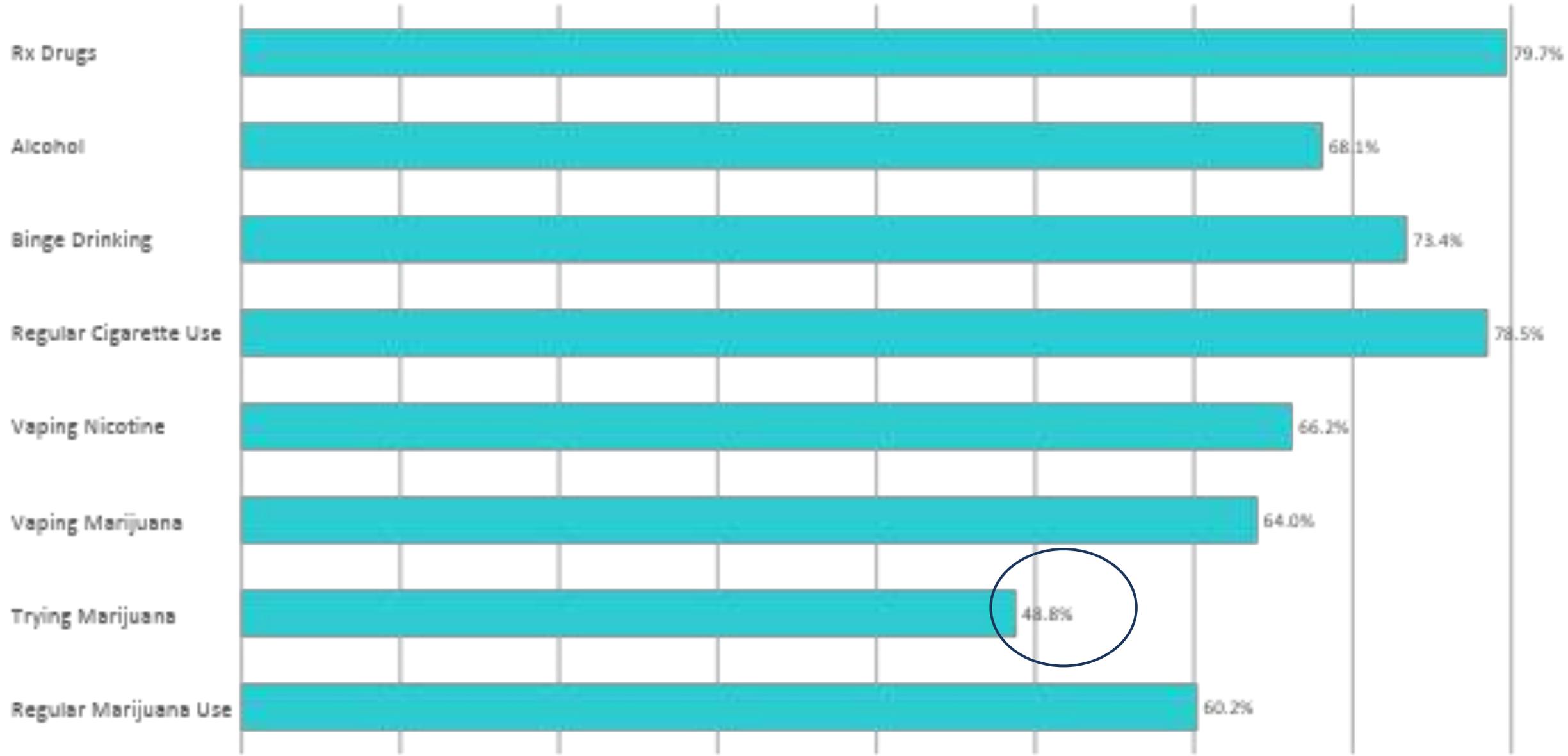
Data can tell us where in our community people are at the highest risk for a health condition

Evaluation

Over time data can tell us how impactful our prevention or intervention efforts have been and how they can improve

Perceived Risk of Using Substances (2020-21)

Percent of Students Reporting Substance Use Associated with Moderate Risk or Great Risk



Increasing Perception of Risk

Billboards, newspaper, radio and other ads campaigns

Illicit substances don't come with an ingredient list.
Many contain deadly doses of fentanyl.

Visit roaneantidrug.org for more information




This project is funded under a grant contract with the State of Tennessee Department of Mental Health and Substance Abuse Services

LEARN ABOUT CURRENT DRUG TRENDS

MAY 21ST 2-7PM
HIGH ON THE HOG
 1561 Phillip Fulmer Pkwy, Winchester

- TN Lifeline Recovery Support Services**
Featuring Allen Burnette
- Regional Overdose Prevention Specialist**
Dustin Ritchie
Naloxone Training
- STASHED AWAY**
STASHED AWAY educates parents and teachers on the warning signs of drugs, violence and crime behaviors and lifestyle choices and how to intervene on behalf of at-risk pre-teen and teenagers. The mobile display is designed to simulate a "typical" teenagers bedroom, to learn the meanings of signs, symbols and clothing, common hiding spots and other precursors to help educate parents.





JUST THE FACTS
 The effects of prescription stimulant misuse on health.

WHAT IS MISUSE?
 Using your own prescription in ways or amounts different than prescribed, using anyone else's prescription drug (even infrequently), or taking a medication to feel awake/to get "high" is misuse.

IS IT ADDICTIVE?
 Continued misuse of prescription stimulants such as Adderall, Ritalin, and Concerta can lead to increased tolerance, dependence, and/or addiction.

CAN IT AFFECT MY MENTAL HEALTH?
 Misusing prescription stimulants can lead to anxiety, paranoia, irritability, hallucinations, and hostile behavior. Symptoms of withdrawal from prescription stimulants may include depression and/or sleep problems.

ARE THERE ANY SIDE EFFECTS?
 Headache and insomnia are a possible side effects of counterfeit prescription stimulant use. High doses of stimulants can also cause irregular heartbeat, dangerously high blood pressure, and/or seizures.

TN Department of Mental Health & Substance Abuse Services
TN REDLINE 1.800.889.9789
POWER/PUTNAM Working for a Drug-Free Community

Fentanyl training

FACTS ABOUT FENTANYL

PRESENTED BY THE OFFICE OF PREVENTION,
 TN DEPARTMENT OF MENTAL HEALTH AND
 SUBSTANCE ABUSE

WEDNESDAY, MAY 18
 9:30-11:00 CT/10:30-12:00 ET

TOPICS INCLUDE:

- WHAT IS FENTANYL
- WHAT IS HAPPENING IN TENNESSEE
- WHAT ARE THE RISKS
- WHAT ARE BASIC PRECAUTIONS TO TAKE

PRESENTER:
DR. BRIAN WINBIGLER
 ASSOCIATE PROFESSOR
 UT-HEALTH SCIENCES
 CENTER




Tabling at events

Presentations and town halls



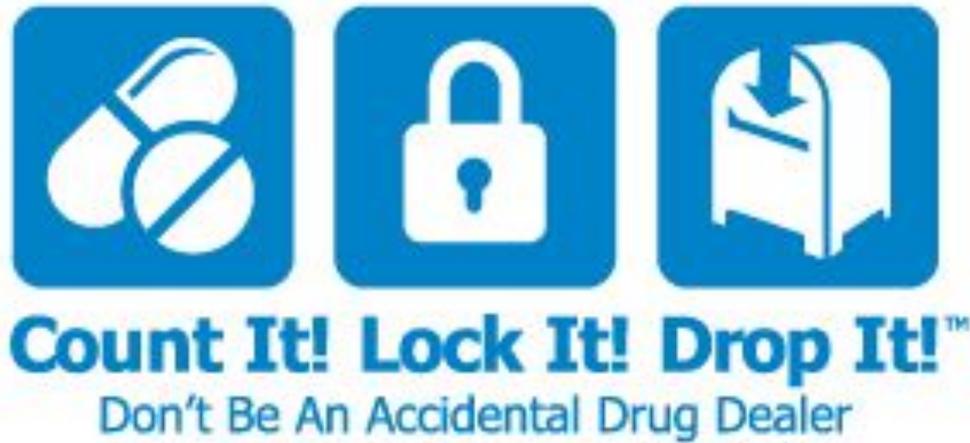
Informational materials

Perceived Access to Substances (2020-21)

Percent of Students Reporting Substance Fairly Difficult or Very Difficult to Obtain



Examples of Strategies to Reduce Access



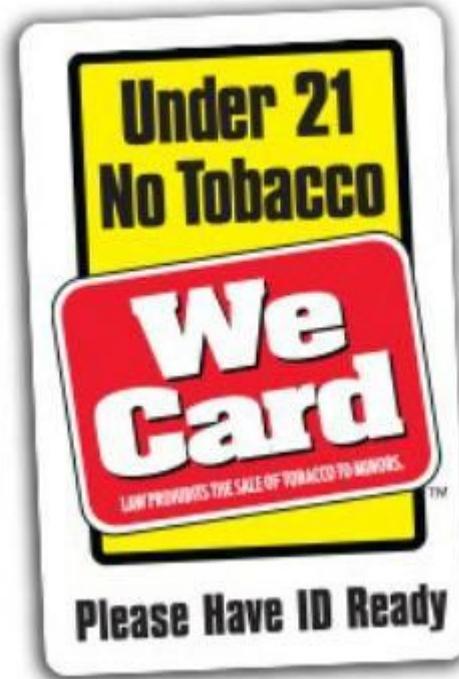
Medication Disposal Packets



Medication Lockboxes

NO ALCOHOL WILL BE SERVED TO PATRONS UNDER 21 YEARS OF AGE

ID VERIFICATION REQUIRED



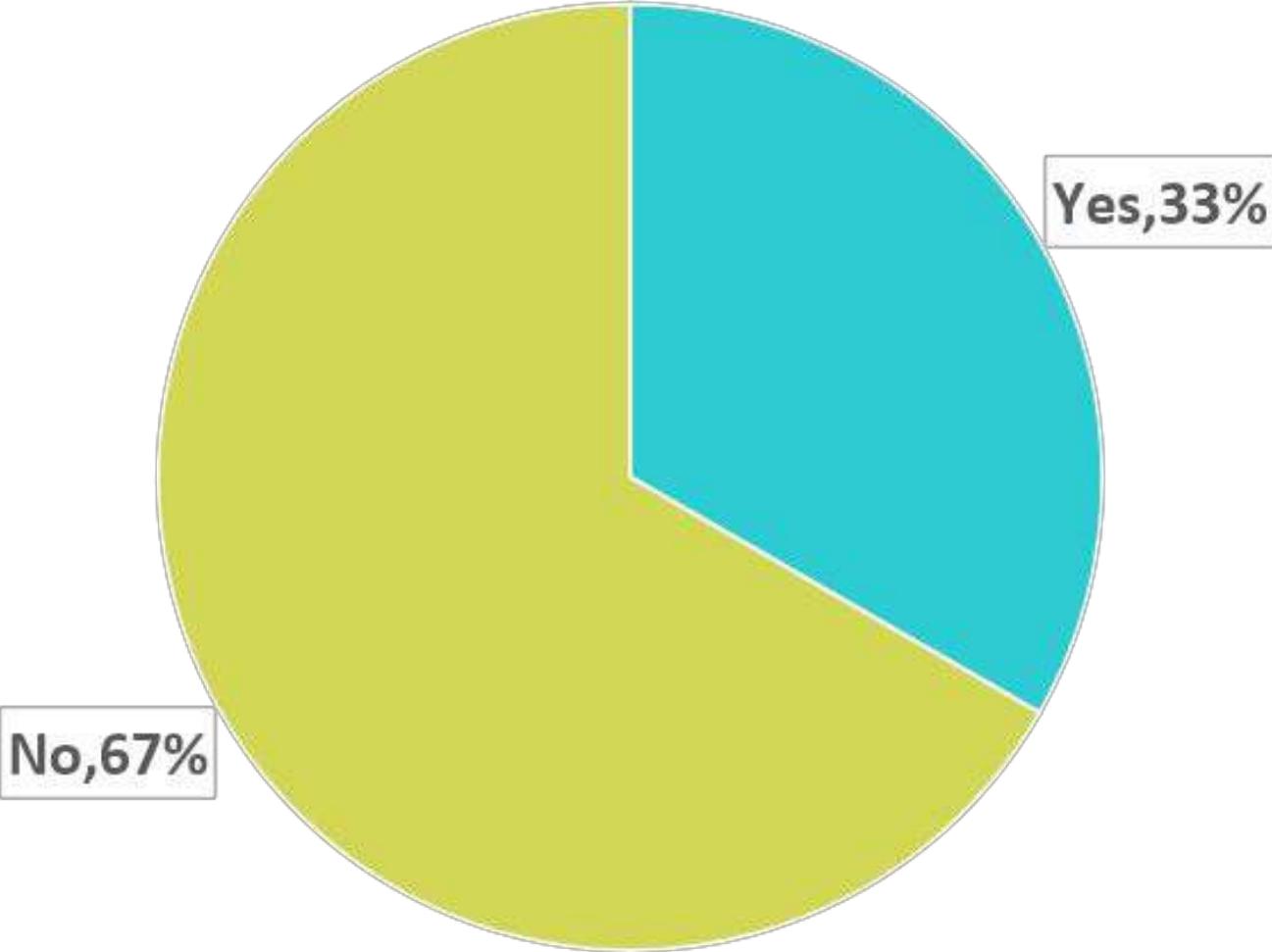
Partnering with law enforcement/Dept of Agriculture for compliance checks

Partnering with National Guard Counter Drug Taskforce

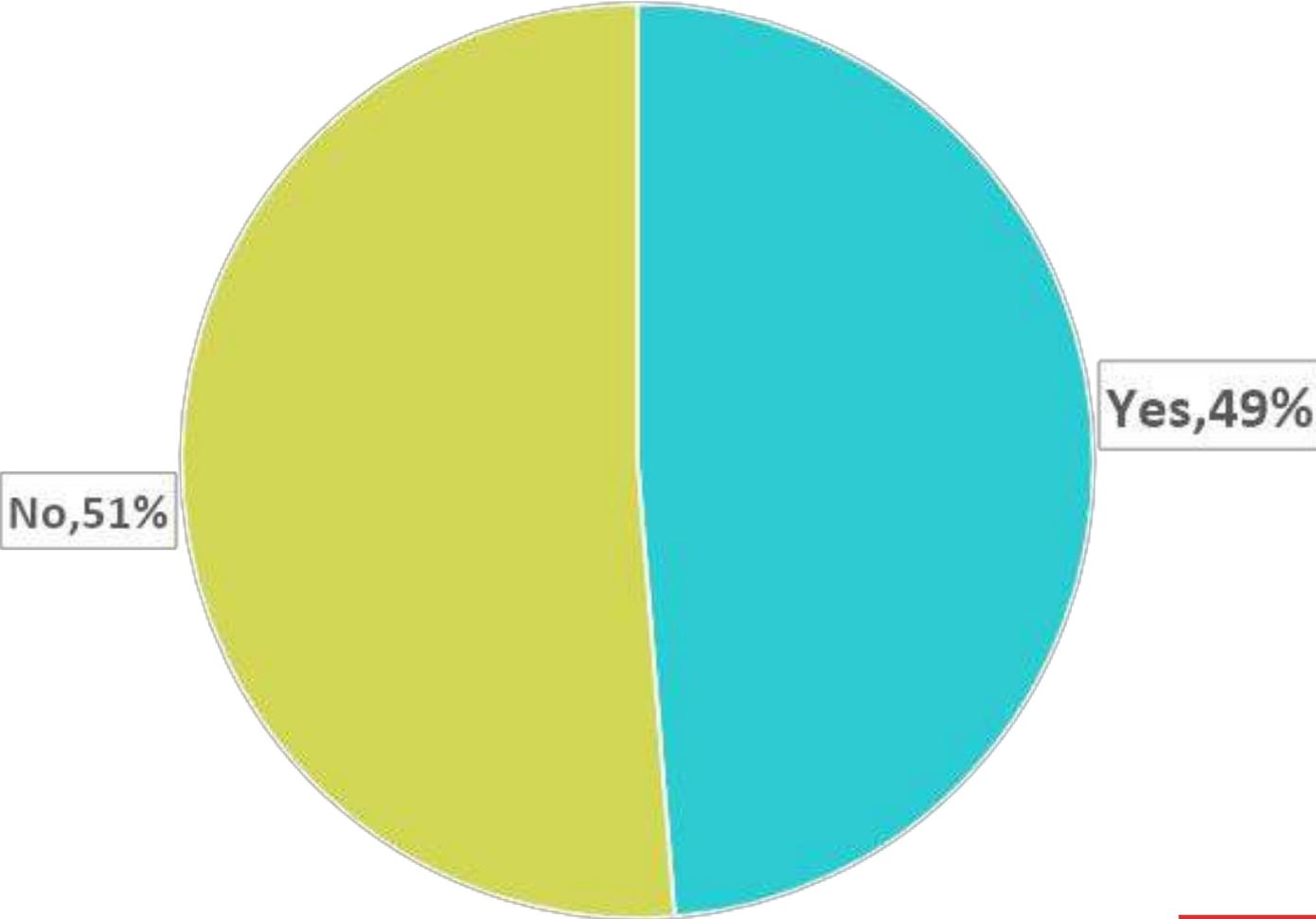


Communication about the Dangers of Substance Misuse

Family Communicated about the Dangers of Rx Drug Misuse (at least once)



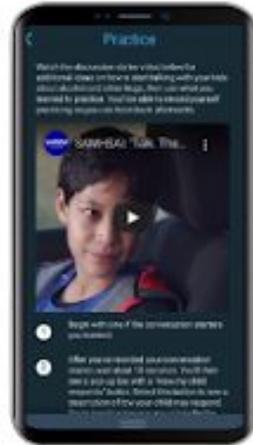
Family Communicated about the Dangers of Alcohol, Tobacco, and Other Drug Use (at least once)



“Talk. They Hear You” Campaign

Features of the new app include:

- Sample conversation starters
- Ways to keep the conversation going
- An interactive practice simulation section
- The opportunity to earn badges for practicing and having real-life conversations
- A resources section with informative and useful videos, fact sheets, brochures, infographics, guides/toolkits, and more



Toolkits for hosting parent events



"Parents' Night Out"

Please submit the following information to get download links for the new "Parents' Night Out" educational session toolkits.

For more information on the materials currently available for download, please continue reading below.



Download the App Today!

Parents and caregivers can **download the app today** to see how easy it can be to talk with their kids about underage drinking and other drug use. The app is **available for free** on the App Store, Google Play, and the Microsoft Store.

Scan the QR code or visit <https://www.samhsa.gov/talk-they-hear-you/mobile-application> to:



- Watch the app's promo video.
- Learn more about the app and see how it works.
- Find out how to download the app.

App with tips, activities and support for parents and other adults

Conversation guides and conversation starters

Talking with Teens About Alcohol and Other Drugs: 5 Conversation Goals

It's never too late to start talking with your teen about the risks of underage drinking and other substance use. As teens get older, they make more decisions on their own, and also face more temptation and peer pressure. Though it may not seem like it, teens really do hear your concerns. It's important you show that you care and continue having conversations with them about the dangers of alcohol and other drugs, and why they shouldn't use them.

1 Show you disapprove of underage drinking and other drug misuse.

Over 80 percent of young people ages 10–18 say their parents are the leading influence on their decision whether to drink or not. Don't assume they know how you feel about drinking and substance use. Send a clear and strong message that you disapprove of underage drinking and use or misuse of other drugs.

2 Show you care about your teen's health, wellness, and success.

Young people are more likely to listen when they know you're on their side. Reinforce why you don't want your child to drink or use other drugs—because you want them to be happy and safe. The conversation will go a lot better if you're open and show your concern for their well-being.

3 Show you're a good source of information about alcohol and other drugs.

4 Show you're paying attention and you will discourage risky behaviors.

5 Build your teen's skills and strategies for avoiding drinking and drug use.

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Individual and Community Based Programming

Which population should be the focus of prevention?

- Half of all lifetime cases of mental and substance use disorders begin by age 14, and three-fourths begin by age 24.
- People usually make decisions about substance use (alcohol, drugs, and tobacco) before the age of 18, and 18-25 year olds have the highest rate of use.
- Because perception of risk decreases with age, prevention efforts targeting children from elementary to middle school are most effective.

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Tennessee Prevention Network

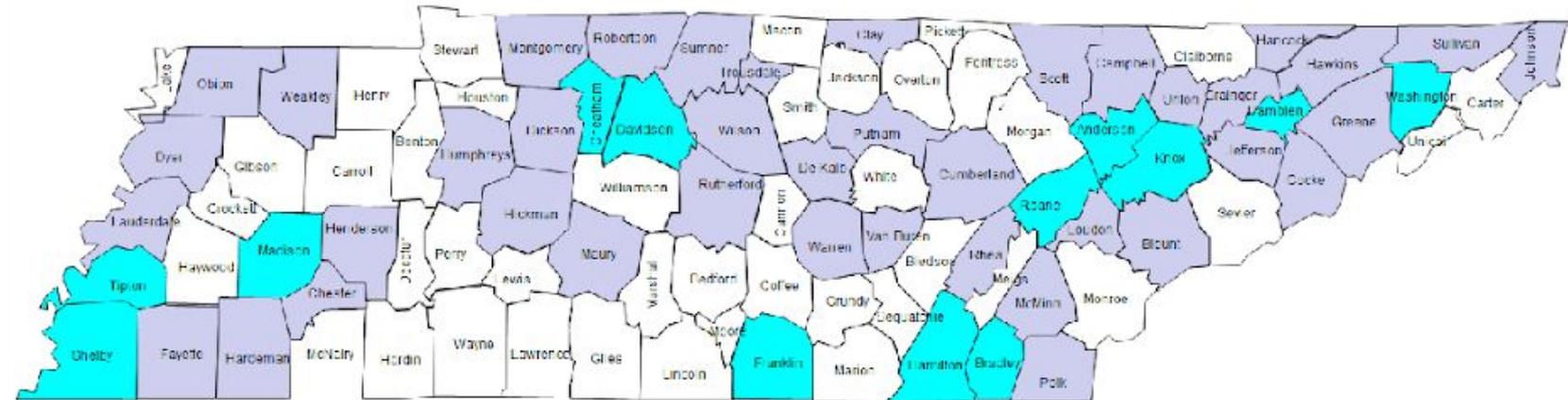
Individual Program Overview

- Prevention programs for individuals are evidence-based programs targeting selective and indicated populations.
- Programs include:
 - Tennessee Prevention Network (TPN)
 - Comprehensive Alcohol, Tobacco, and Other Drugs (Comprehensive ATOD)
 - In-Home Services for infants of At-Risk Pregnant and Post-Partum Women's Program (Nurses for Newborns)
 - Other session-based evidence-based programming

Counties Served by Individual Based Programs

Goals of these programs may be

- Increasing knowledge of consequence of substance use
- Promote positive community relationships
- Strengthen communication in families
- Develop positive thoughts and behaviors
- Connect youth with mentors and other caring adults
- Foster teamwork and problem solving



■ Home Office Locations
■ Covered County

FY 2021: 6,300+ individuals served in 45 Counties

Examples of Evidence-Based Curriculums Used:

Botvin Life Skills Too Good for Drugs SPORT Prevention & Wellness Strengthening Families

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**Substance Use
Prevention Coalitions**

Coalitions: Overview

- **Coalitions** are partnerships of the many sectors of a community which gather together collaboratively to solve the community's problems and guide the community's future.
- **Substance Use Prevention Coalitions (SUPCs)** work to prevent dependence and addiction to harmful and potentially lethal substances such as prescription drugs, alcohol, and tobacco, using the Strategic Prevention Framework (SPF).

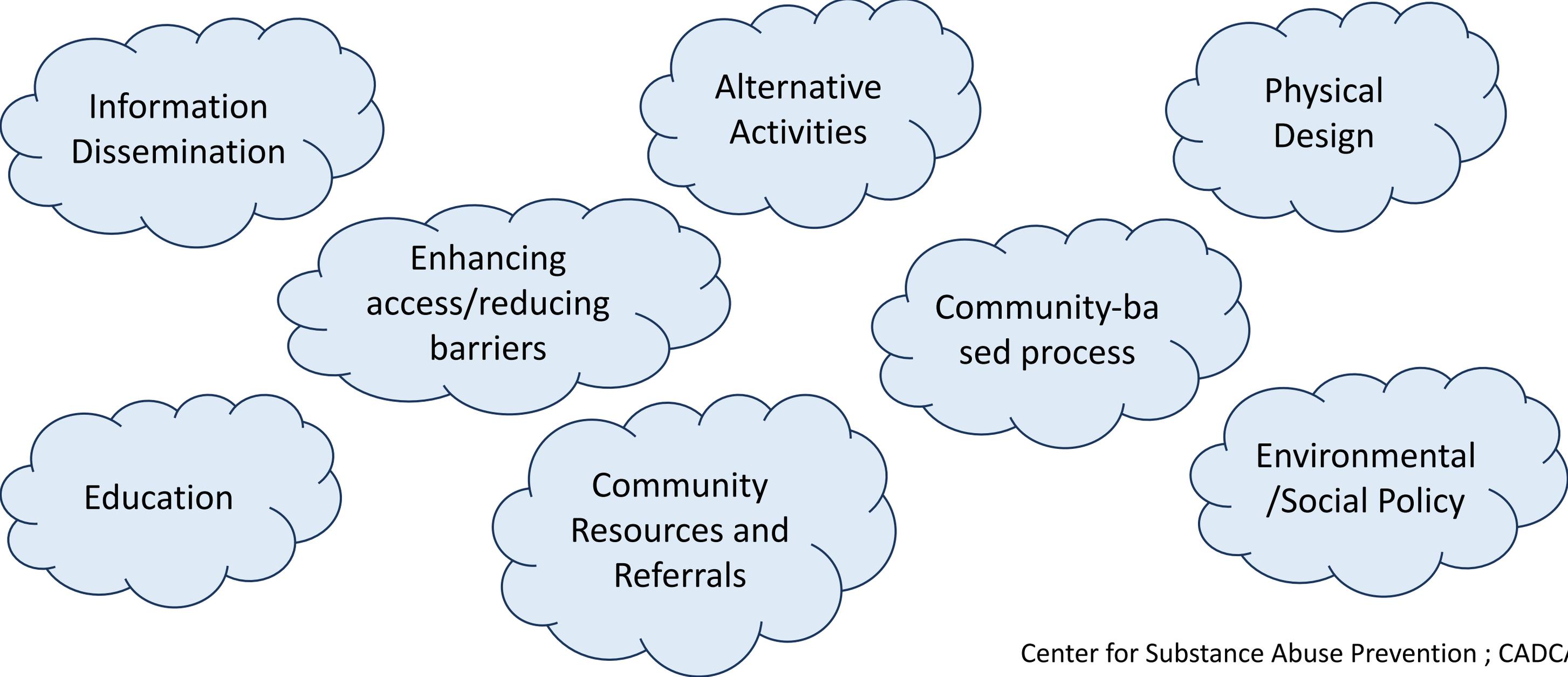
Coalitions: Program Goals

- Coordinate the implementation of substance use prevention environmental strategies within the Grantee's communities to address
 - Binge drinking
 - Tobacco use
 - Non-medical prescription drug and opioid use
 - Marijuana use
 - Stimulant use

Strategic Prevention Framework (SPF) Wheel



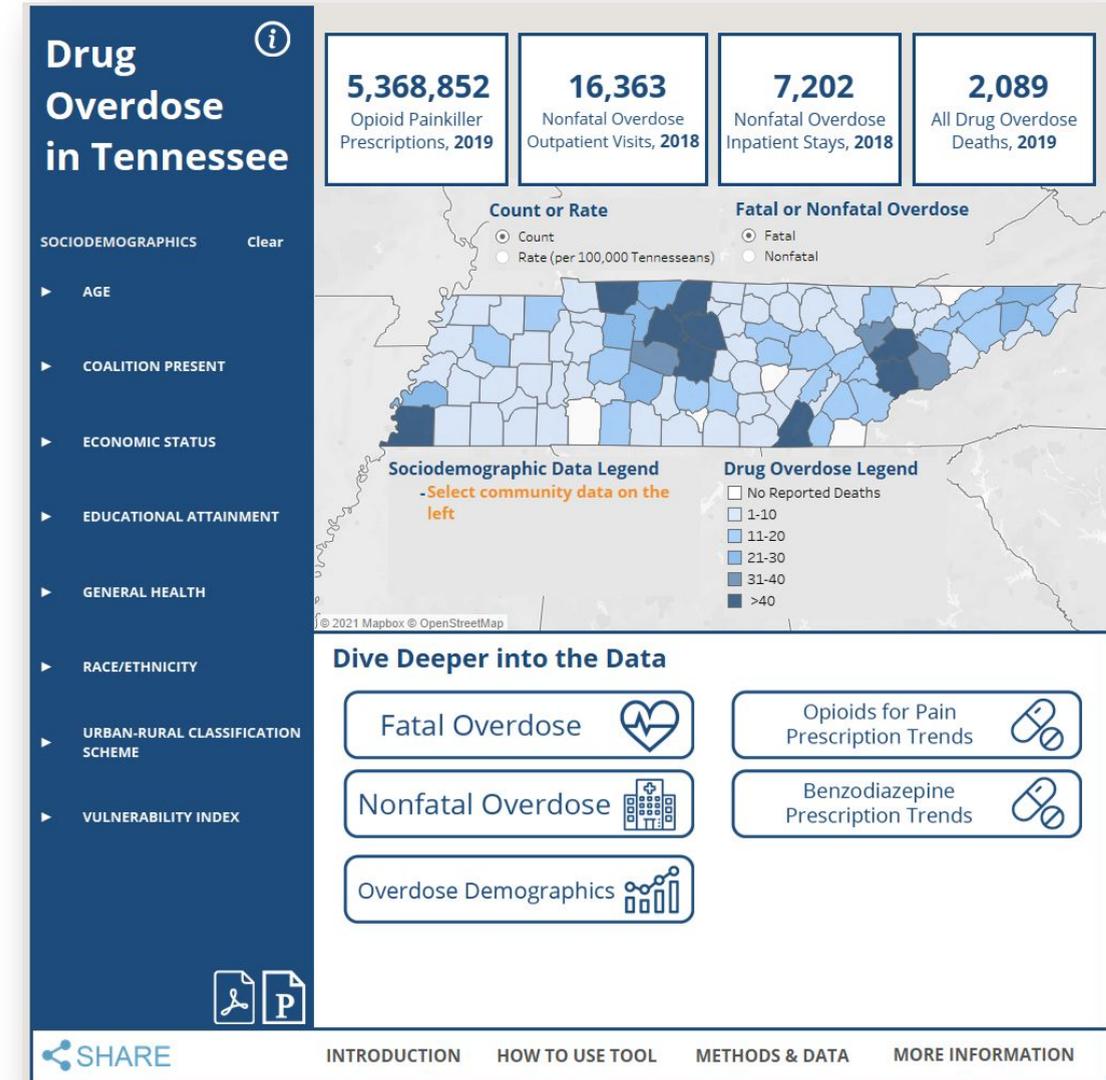
Coalition Prevention Strategies



Center for Substance Abuse Prevention ; CADCA

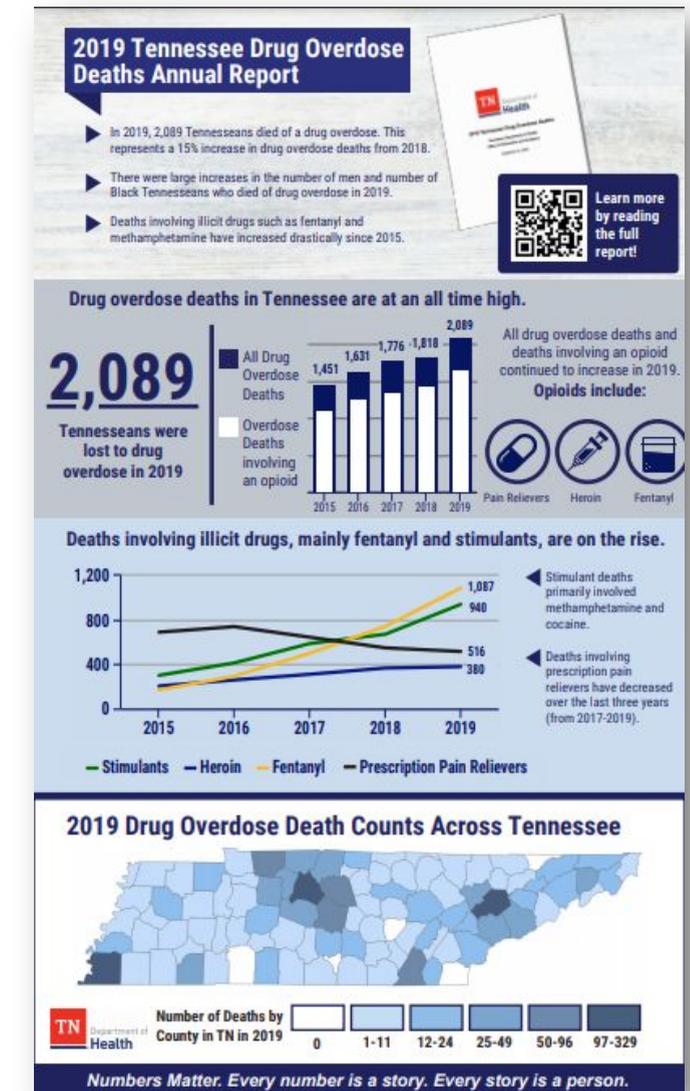
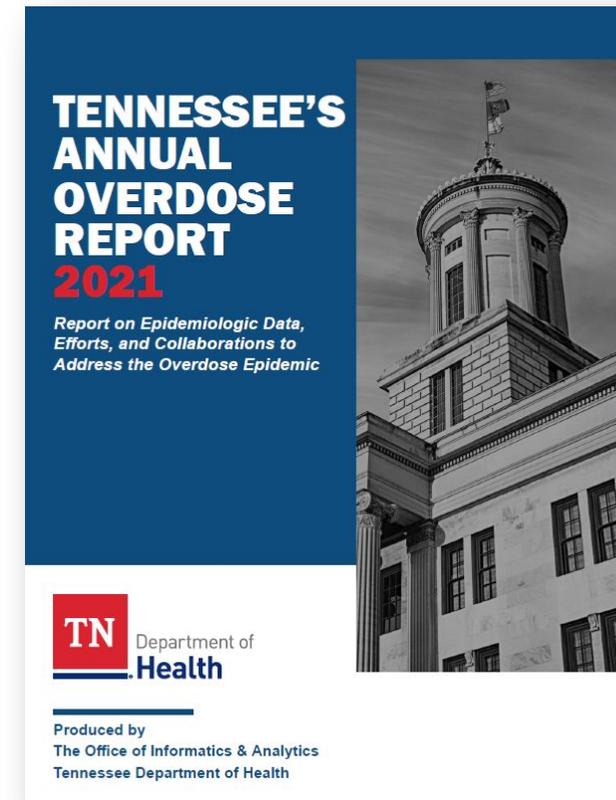
Data Drives Programming & Education

- Coalitions often utilize public facing data to understand their communities needs and educate those in their community
- Public facing resources including:
 - Drug Overdose Data Dashboard
 - Statewide, Regional, and County-level trends in fatal overdose, nonfatal overdose, and prescriptions
 - Downloadable data sets are available



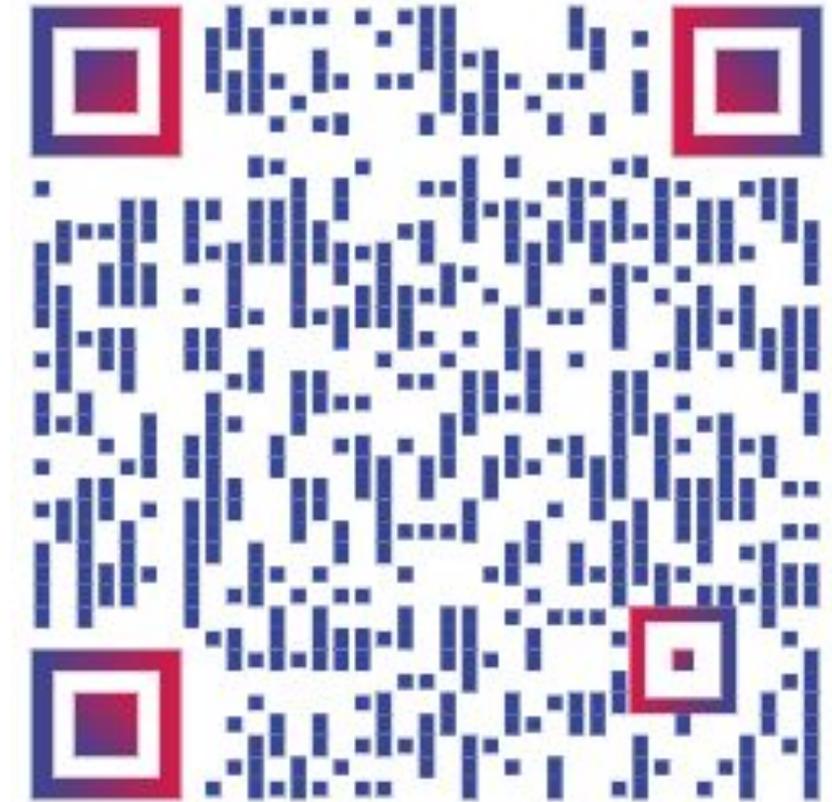
Other Public Resources

- Annual Reports
 - Mortality (Fatal) Overdose Report
 - Morbidity (Nonfatal) Overdose Report
 - Annual Overdose Report
- Special Reports
 - Buprenorphine Report
 - Emerging Trend Reports
- Infographics and Monthly Briefs



Other Public Resources

- For dashboard or data training, questions, suggestions email TDH.Analytics@tn.gov
- To access the reports and briefs, scan the QR code



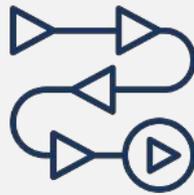


Overdose Prevention and Harm Reduction

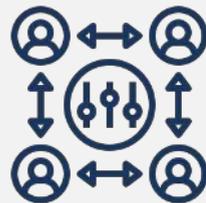
Harm Reduction Core Principles



Non-judgmental approach with a focus on **enhancing quality of life**



Behavior change is an **incremental process**



Complex social factors influence vulnerability to substance use and substance-related harm (e.g., poverty, social inequality, trauma)

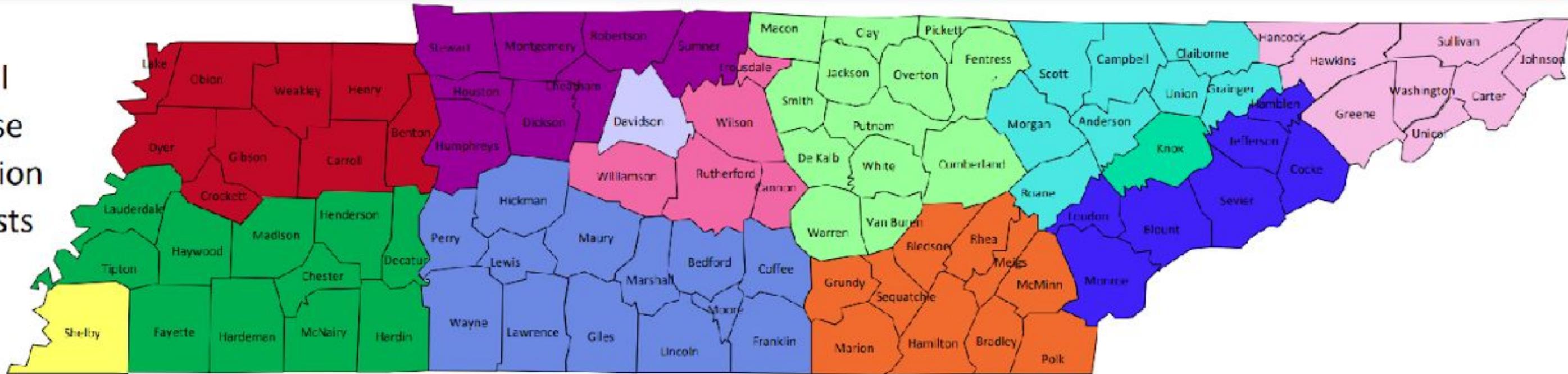


Empower those who use substances to be the primary agents in reducing the harms of their substance use

Regional Overdose Prevention Specialists

- ROPS cover 13 Regional divisions across the State

Regional
Overdose
Prevention
Specialists
(ROPS)



Role of the Regional Overdose Prevention Specialists

- Provide training and education
- Serve as point of contact for naloxone distribution
 - Naloxone (commonly called Narcan ®) is the overdose reversal medication for opioid overdose.
 - Priority populations: First responders, community resource organizations, individuals (+friends/families) at high risk without other means of access
- Respond quickly in the event of overdose spike and/or clinic closure
 - Provide on the spot naloxone training and connection to resources
- Raise awareness and reduce the stigma of the overdose epidemic and available resources
 - Including media, community events, individual outreach

ROPS Training

- Topics
 - Overdose data and trends
 - Science of Addiction
 - Reducing Stigma
 - Harm Reduction
 - Recognizing and responding to an overdose
 - Compassion Fatigue and Burnout
- Available to groups and individuals
 - Treatment agencies
 - Community service/resource agencies
 - Civic/community groups
 - Churches/religious orgs
 - Anyone that is interested!

TN Save a Life

- More than **440,000 units** of naloxone have been distributed in Tennessee since October 2017.
- More than **60,000 overdose reversals** have been documented.



(We believe that number to be even higher!)

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**Making a Difference
Through Stigma Reduction**

Why focus on stigma?

When a person experiences stigma they are seen as *less than* because of their real or perceived health status. (National Institute of Drug Abuse)

- Experiencing stigma can reduce a person's willingness to seek treatment, take other actions to reduce harm, or ask for help
- Stigma among medical and social services reduces the quality of care
- Delayed treatment can cause additional harm to an individual

Reducing Stigma

Substance use **falls on a continuum**

- Abstinence/low risk  chronic dependence
- Relapse ***does not equal*** a moral failure
 - It is a chemical response in the brain
- **40%-60%** will return to use/have a recurrence **at least** once
 - Other chronic diseases: 50%-70% with high blood pressure experience symptoms each year that require medical attention

Beware of **unintentional personal bias**

Recognize addiction is often connected to **trauma**

Language Matters

Do away with labels and use “person first” language
(Person with substance use disorder **not** Addict)

Say this...

- 
- Person with a Substance Use Disorder
 - Substance Detected/
Not Detected in toxicology
 - Sterile or used needles
 - Not using substances
 - Person living in recovery

...Not That

- 
- Not Addict or Junkie
 - Not clean or dirty screen
 - Not clean or dirty needles
 - Not clean
 - Not ex-addict

Language Resources

LANGUAGE GUIDANCE

"ALL BIG CHANGES OF THE WORLD COME FROM WORDS."
- Marianne Satrapi

Language Guide Table
quick reference of easy language fixes with big impact

GENERAL GUIDANCE	TRY THIS	INSTEAD OF THIS	LEARN WHY
	transmit or acquired	infect became infected	The word "infection" carries stigma and often invokes blame. Acquisition and transmission are simple and accurate substitutions.
	people living with _____ person living with _____	_____ infected people _____ positive(s) _____ carrier(s) people infected with _____ case(s)	Person-first language centers the person first rather than the health condition. This simple shift says, "I see you first, before your health condition".
	people with _____ person with _____		For health conditions that have a cure, such as hepatitis C, it is also acceptable to say, "people/person with _____."
	people without _____ person without _____	_____ uninfected people _____ negatives _____ unaffected	The word "infected" carries stigma. The meaning of the word "negative" is unclear. "Unaffected" is inaccurate as we are all directly or indirectly impacted by transmissible health conditions.
	new _____ diagnoses people newly diagnosed with _____ person newly diagnosed _____	new _____ case(s)	"Cases" takes away the humanity of the people impacted by a particular health condition and implies their care/diagnosis is work.



Terms to use, terms to avoid, and why

The chart below can help you choose words to reduce stigma and use person-first language when talking about addiction.

Talking About Yourself or Others with Substance Use Disorder

Use...	Instead of...	Because...
<ul style="list-style-type: none"> Person with a substance use disorder¹⁰ Person with an opioid use disorder (OUD) or person with opioid addiction 	<ul style="list-style-type: none"> Addict User Substance or drug abuser Junkie 	<ul style="list-style-type: none"> Using person-first language shows that SUD is an illness. Using these words shows that a person has a problem. "is" is not a verb. The association is not the person.
<ul style="list-style-type: none"> Person with alcohol use disorder 	<ul style="list-style-type: none"> Alcoholic 	

NIDA "Words Matter"

- Articles
- Terms list
- Free CME/CE module

Research & Training Clinical Resources Grants & Funding News & Events About NIDA

Health Professions Education / CME/CE Activities / Words Matter - Terms to Use and Avoid When Talking About Addiction: A CME/CE Activity

Words Matter - Terms to Use and Avoid When Talking About Addiction: A CME/CE Activity

Description

This CME/CE activity informs clinicians on how they can show leadership in how language can destigmatize the disease of addiction. It is focused on using person-first language, as well as terms to avoid to reduce stigma and negative bias when discussing addiction.

[Start the Activity](#)

EndTheSyndemicTN.org

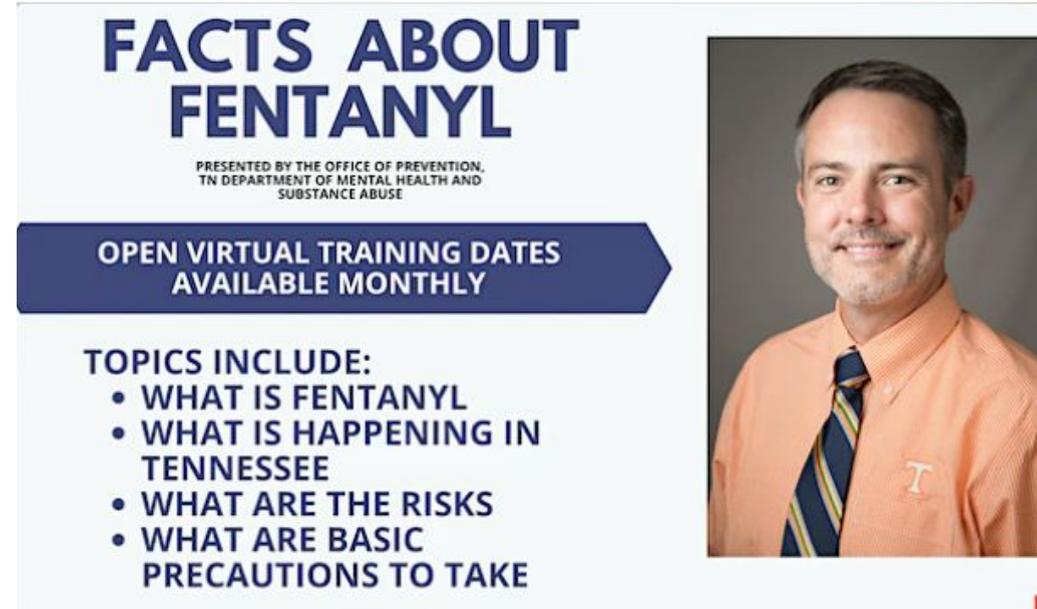


**What's next for you and
your organization?**

Free Community Resources

Trainings:

Dr. Brian Winbigler,
Pharmacist
AMR Knoxville



FACTS ABOUT FENTANYL
PRESENTED BY THE OFFICE OF PREVENTION,
TN DEPARTMENT OF MENTAL HEALTH AND
SUBSTANCE ABUSE

**OPEN VIRTUAL TRAINING DATES
AVAILABLE MONTHLY**

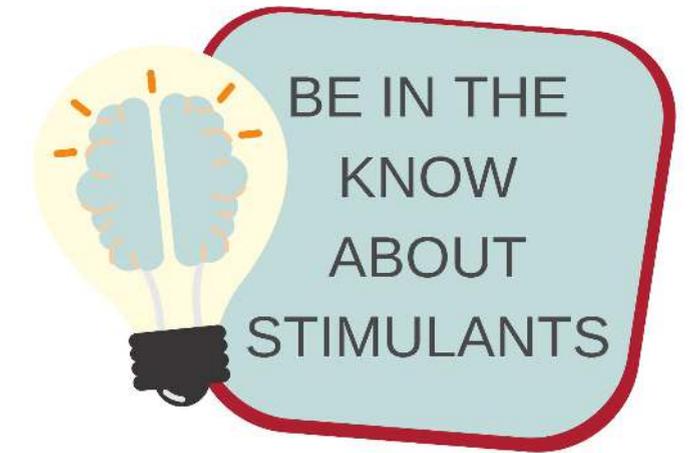
TOPICS INCLUDE:

- WHAT IS FENTANYL
- WHAT IS HAPPENING IN TENNESSEE
- WHAT ARE THE RISKS
- WHAT ARE BASIC PRECAUTIONS TO TAKE



Fentanyl: Tuesday @ 9:30c
[Bit.ly/FenTraining](https://bit.ly/FenTraining)

Stimulants: Tuesday, May 9 @9:30c
bit.ly/StimTraining



FREE VIRTUAL TRAININGS

Offered by the Office of Prevention at the Tennessee Department of Mental Health and Substance Abuse Services

TOPICS INCLUDE:

- Stimulant trends and data in Tennessee
- Over the counter, prescription and illicit stimulants
- Illicit stimulant risk, overdose and recovery

PRESENTER:

Dr. Brian Winbigler, PharmD, MBA
AMR Knoxville

REGISTRATION:

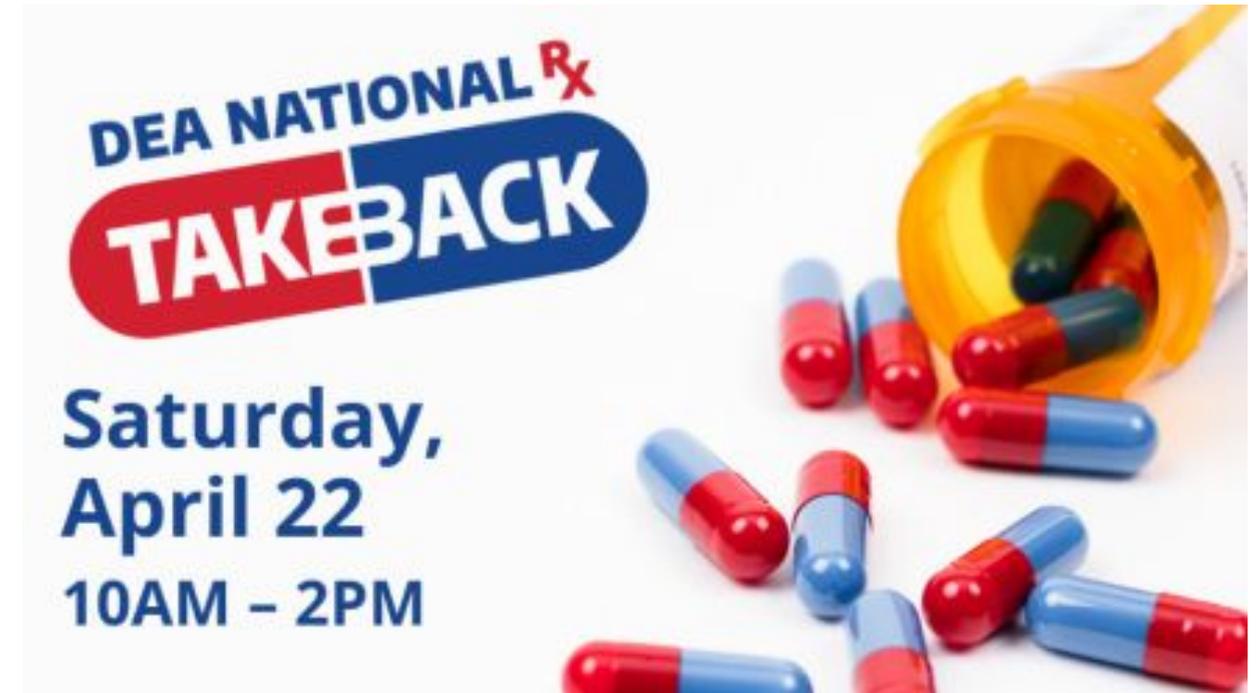


bit.ly/StimTraining

Drug Take Back Days

- Twice a year: April and October
 - Date set by DEA
- Host or collaborate on an event!

Shelby County:
Sister Reach
2805 Clarke Rd
Sat 10-2



To find a location in another county, visit:
TnTogether.com/takebackday

Other Annual Events



MAY 10
NATIONAL FENTANYL AWARENESS DAY

Opportunities for community events, vigils, education etc

Resources

TN TOGETHER

For information about activities and events you can do with your family or in your community

TnTogether.com

Substance Use Treatment & Recovery Resources



Substance Use Prevention Coalitions

Shelby County: memphisprevention.org

Search: "Prevention coalition" on Tn.gov



24/7 Call or text for suicide prevention and other crisis services

Regional Overdose Prevention Specialists

Josh Weil:

ropsmemphis@gmail.com

David Fuller:

David@memphisprevention.org

Search:

"ROPS" on Tn.gov



For locations of Pharmaceutical Take Back Boxes near you

<https://tdeconline.tn.gov/rxtakeback/>

What can YOU do?

- Lock up prescription medications
- Drop off unused medication
- Raise awareness in your community/schedule a training
- Continue learning:
 - ACEs, suicide prevention, mental health first aid
- Get involved in your drug-free/prevention coalition
- Get trained and carry naloxone to prevent fatal opioid overdose
- Know where to find treatment and recovery resources in your community
 - TN Redline: 1-800-889-9789 (call or text)
- Support loved ones in their recovery journey
- Seek out support for yourself if you have a loved one misuses substances
- Advocate for treatment and mental health supports at your workplace (EAP services, health insurance coverage)

What can your organization do?

- Get involved in your coalition
- Schedule trainings
 - Overdose prevention/awareness, fentanyl training, and others
- Partner with your coalition/ROPS for an event (presentation, town hall, health/community resource fair)
- Invite coalition/ROPS to table with you at an event
- Partner/participate in an annual event of the coalition
- Reach out to your coalition/ROPS to talk more about how you can collaborate!

Contact Information

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