

OPIATE & HEROIN AWARENESS TOOLKIT  
A Prevention Guide for Families



**BAY COUNTY**  
**HOPE**  
**TASK FORCE**



sponsored by



**Bay County  
Prevention Network**  
at the Neighborhood Resource Center  
*Putting Prevention into Practice*



## OPIATE & HEROIN AWARENESS TOOLKIT

A Prevention Guide for Families

*As parents and family members, we are concerned about problems that may affect our children or loved ones. We seek out information for ways to address our concerns around opiate and heroin drug abuse. The Bay County Heroin, Opiates, Prevention and Elimination Taskforce (Bay County HOPE) realizes the value in having a local resource available to assist parents and family members who are seeking resources to address their concerns.*

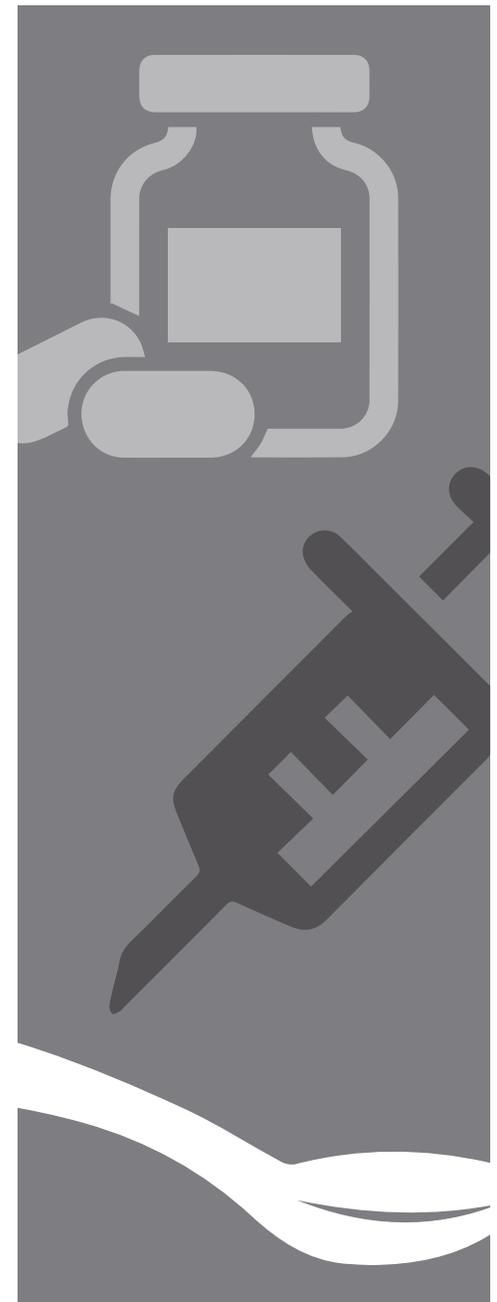
— Bay County HOPE Taskforce





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## Commonly Abused Prescription Medications

**Pain Medications** – a class of the most abused prescription medications among adults and teens. Opiates can be ingested in various ways. Prescription opiates are typically taken in pill form and sometimes with alcohol to intensify the effects. They can be crushed to sniff, snort or injected as well, such as heroin. Some commonly abused medications include:

- Codeine [Promethazine Syrup with Codeine; Tylenol w/Codeine]
- Hydrocodone [Vicodin, Lorcet, Lortab, Norco]
- Hydromorphone [Dilaudid]
- Meperidine [Demerol]
- Methadone
- Morphine [MS Contin]
- Oxycodone [Oxycontin, Roxicodone, Percocet, Endocet, Percodan]
- Buprenorphine [Suboxone/Subutex]
- Fentanyl [Sublimaze]



Percocet  
5 mg



Percodan  
4.5 mg



OxyContin  
20 mg



OxyContin  
80 mg



OxyContin  
160 mg

**Sedatives** – most commonly refer to anti-anxiety medications, the most abused include:

- Alprazolam [Xanax]
- Clonazepam [Valium, Diazepam]
- Lorazepam [Ativan]
- Temazepam [Restoril]
- Zolpidem [Ambien]
- Temazepam [Restoril]

**Stimulants** – abused medications to treat ADHD/ADD include:

- Amphetamine [Adderall]
- Methylphenidate [Ritalin, Concerta]

**Steroids** – are prescribed and also abused:

- Anabolic steroids [Anadrol, Durabolin, Depo-Testosterone]

Please visit these sites for detailed information about prescription medications:

[www.theantidrug.com](http://www.theantidrug.com)  
[www.drugfree.org](http://www.drugfree.org)  
[www.nida.nih.gov](http://www.nida.nih.gov)



## Commonly Abused Street Drugs

- Marijuana
- Cocaine
- Solvents/Aerosols
- Bath Salts
- Heroin
- LSD





## Steps We Can Take to Prevent Prescription Drug Abuse



What's in your medicine cabinet? On your nightstand? On the kitchen counter? In your purse? Naturally, you keep prescription medicines and cold and cough remedies handy for you to take when needed...they are also handy for everyone else to take without you knowing it.

**LOCK YOUR MEDS** Only 4.7% of individuals who abuse prescription drugs, say they get the medication from a stranger, drug dealer, or the internet. Prevent your children from abusing your medications by securing them in places they cannot access. Lock them up or take them out of your house. [www.walmart.com/ip/sentrysafe-electronic-security-box/14644653](http://www.walmart.com/ip/sentrysafe-electronic-security-box/14644653)



**TAKE INVENTORY** Use a home medication inventory card to track the amount of medications you currently have. Check regularly to make sure none are missing. For a printable home medication inventory card, visit [www.trumbullmhrb.org/pdfs/Inventory-Card.pdf](http://www.trumbullmhrb.org/pdfs/Inventory-Card.pdf)

**EDUCATE YOURSELF AND YOUR CHILD** Learn about the most commonly abused types of medications (pain relievers, sedatives, stimulants, and tranquilizers). Then communicate the dangers of abusing these medications to your child regularly; ONCE IS NOT ENOUGH.

**SET CLEAR RULES AND MONITOR BEHAVIOR** Do not allow your child to take prescription drugs without a prescription. Monitor your child's behaviors to ensure that rules are being followed. Lead by example!

**PASS IT ON** Share your knowledge, experiences, and support with the parents of your child's friends. Work together to ensure that your children are safe and healthy.

**DISPOSE OF OLD AND UNUSED MEDICATIONS** Medications can be disposed of at no charge at many pharmacies and law enforcement offices around Bay County. See page 29 for specific locations.

**Over 6.2 million people age 12 and older report abusing prescription drugs.** Due to the fact that prescription drugs improve health when used as prescribed, many teens believe they are a safe way to get high.

**It is illegal to use someone else's prescription.**



## Health Consequences of Prescription Medication Abuse

The potential for physical and psychological Addiction is very real! Drug use and abuse, including the illegal use of prescription medication is associated with strong cravings for the drug, making it difficult to stop using. Most drugs alter a person's thinking and judgment, which can increase the risk of injury or death from drugged driving or infectious diseases , such as:

- HIV/AIDS
- HEPATITIS B & C
- CHLAMYDIA
- GONORRHEA
- HIGH RISK HPV
- GENITAL WARTS
- HERPES AND SYPHILIS

Unfortunately, all these diseases can occur from unsafe sex practice or needle sharing.

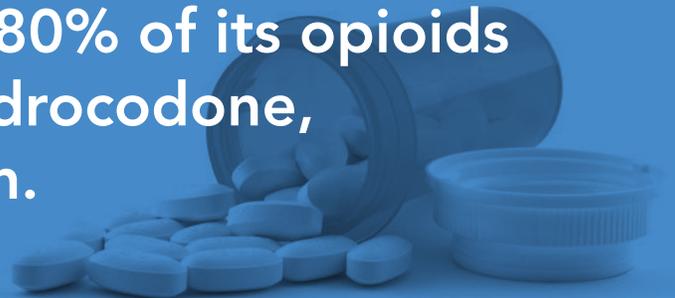
In addition, drug use during pregnancy can lead to neonatal abstinence syndrome, a condition in which a baby can suffer from dependence and withdrawal symptoms after birth.



**Be aware: Drug use and Abuse also weakens the immune system. [www.drugabuse.gov](http://www.drugabuse.gov)**

**The U.S. makes up only 4.6% of the worlds population but consumes 80% of its opioids and 99% of the worlds hydrocodone, the opiate that's in Vicodin.**

ABC News





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## Effects During Pregnancy

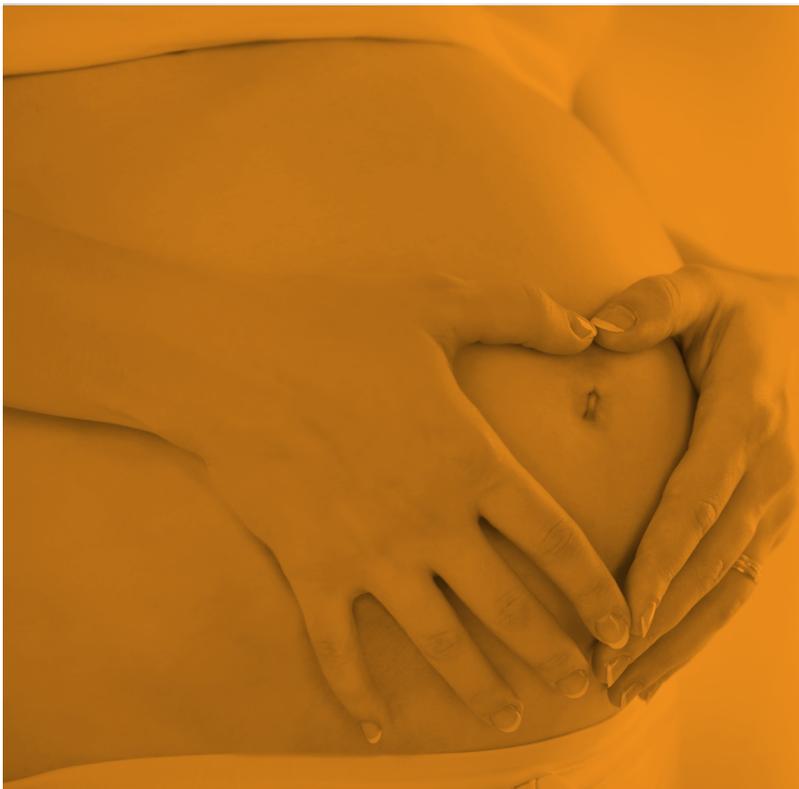
**Neonatal Abstinence Syndrome (newborn withdrawal)** - A group of signs and symptoms that a baby can have when a mother takes certain medications or other drugs during her pregnancy. These substances may include methadone, suboxone, heroin and other prescription medications such as Oxycontin and Vicodin. Babies exposed to these drugs have an 80% chance of developing withdrawal symptoms.

### SYMPTOMS OF WITHDRAWAL INCLUDE:

- High-Pitched Crying or Difficult to Console
- Poor Feeding/ Spitting/ Vomiting/ Diarrhea
- Difficulty Sleeping
- Overly Vigorous Suck or Uncoordinated Suck
- Tremors/ Jitteriness
- Occasionally Seizures Can Occur
- Frequent Hiccups and/or Sneezing
- Mild Fever
- Sweating



If these symptoms occur, your newborn baby may spend more time in the hospital than other newborns. The exact length of time it takes to wean these substances differs from baby to baby. It is not unusual for babies to be in the hospital for 2-16 weeks.

A photograph of a pregnant woman's hands gently cradling her belly, overlaid with a semi-transparent orange filter.

**A Pregnant Woman**  
never takes pills alone.

A white icon on an orange background showing two hands cupping a heart, symbolizing care and support.



# Drug Exposed Children: What Caregivers and Educators Should Know

**What is a Drug Exposed Child?** A drug exposed child can be identified as any child whose brain and/or body has been affected because his/her parents used drugs or alcohol during pregnancy, and/or who is living in a home where drugs are abused and/or illegally made, traded or given away.

## **EMOTIONAL:**

- Seems sad or does not enjoy activities
- Takes on a lot of guilt and blame themselves for what goes wrong
- Feels their life will always be bad
- May attach to strangers too easily, but have difficulty trusting caregivers

## **COGNITIVE:**

- Difficulty talking and listening
- Difficulty remembering a list of things
- Difficulty remembering what they were just told
- Often do not learn from mistakes or experiences

## **BEHAVIORAL:**

- Likes to be alone
- Finds change difficult
- Doesn't get along well with other people
- Doesn't seem to care about what happens to them
- More interested in sex and drugs or may know more about sex and drug related topics than most children their age
- Tells detailed stories involving drug use, drug deals or other indications of illegal activity, such as suspicious adult behavior. (Mom sometimes takes medicine and sleeps all day).
- Has a strong distrust of authority figures and the police

## Understand the Behaviors



**Helping a Drug Endangered Child that you care for:** Prenatal drug exposure can cause damage to the developing brain. What you think is "odd" or difficult behavior might be something the child cannot control. Try to understand that the "behaviors" you see might be the only way that child can express their feelings. You can help by...

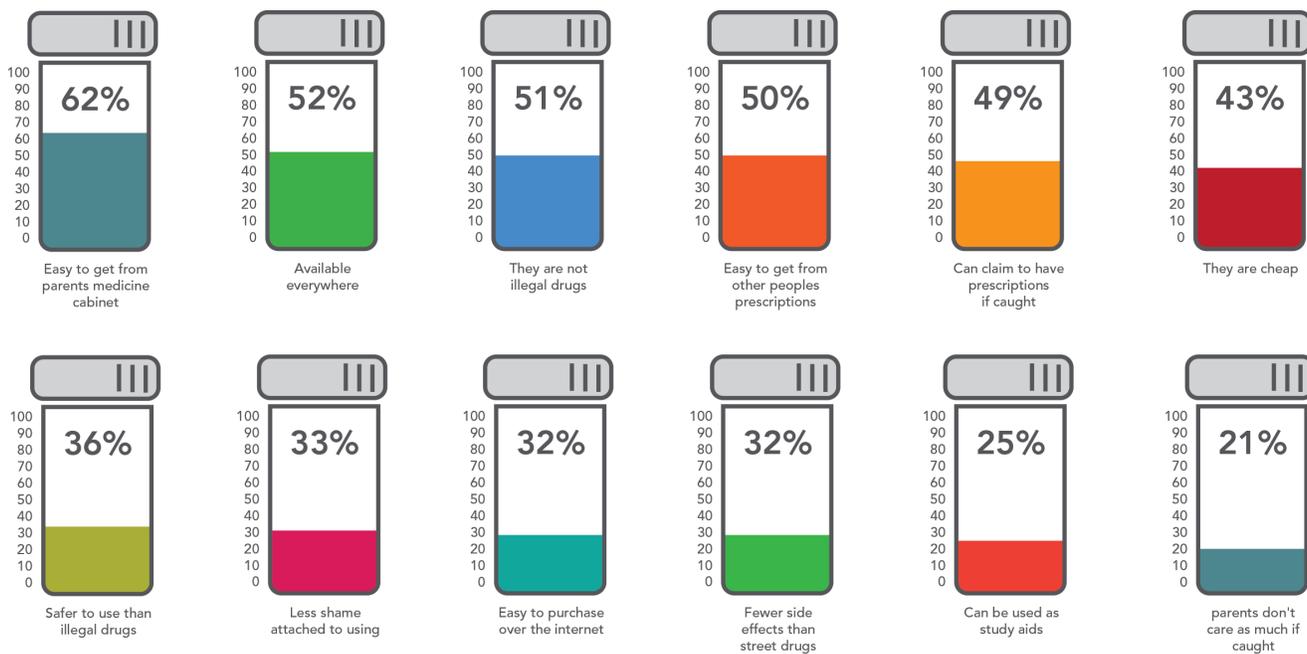
- Be repetitive, do things the same way, every time, over and over again
- Keep things quiet and calm
- Be realistic about what you expect, and understand that drug exposed children may not act their age
- Give support and encouragement
- Help them feel safe
- Help them separate the parent from the substance abuse
- Allow them periods of grief
- Teach them empathy by showing understanding, sympathy and compassion

**Remember:** Not every behavior indicates a specific concern

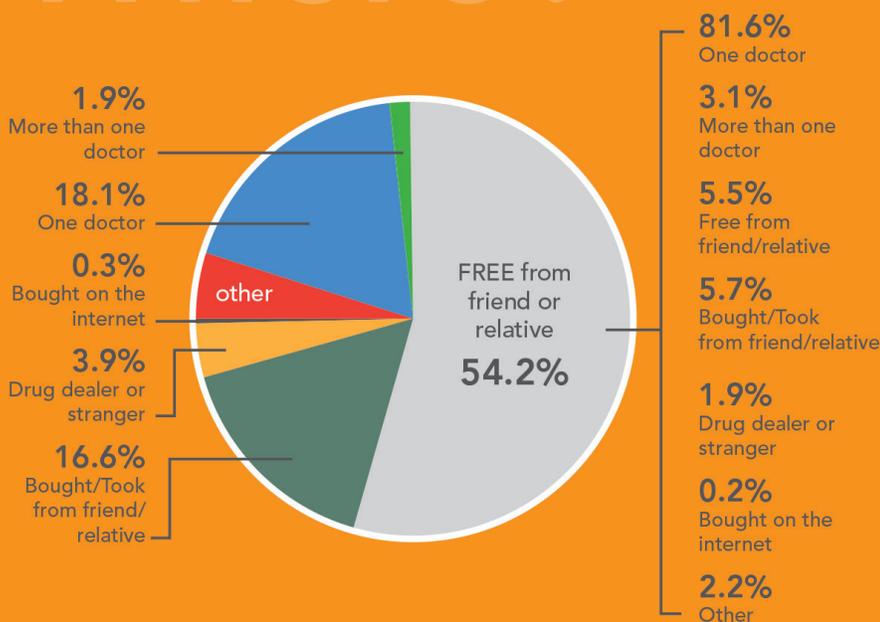


## Student Concerns: Number of Bay County 7th graders that reported ever using a needle to inject any illegal drug into their body: **58** Source: 2015-16 MiPHY Survey

### 12 Reasons teens use prescription drugs



### Where are prescription drugs obtained?



### Students who abuse prescription stimulants

(e.g. ADHD medication Adderall & Ritalin) reported higher levels of: cigarette smoking, heavy drinking, risky driving, abuse of marijuana, abuse MDMA (Ecstasy), abuse of cocaine.

Source: Harvard School of Public Health, College Health Study, 2001 Survey



## Access to Medication

**What Are Your Kids Being Prescribed?** Think before you fill and give a pain prescription to your child. Do they really need such a strong medication or will something else do? Pain medications, like Vicodin, Oxycontin, and other versions are super strong. We live in a high prescribing region of the state. Youth are not an exception. They are being prescribed large quantities of very strong medications for things such as simple sports injuries and dental procedures. Be an advocate while you can and look into all options. Pain is no fun, but it's better than starting an addiction in your child.

### Questions to ask your physician before filling a prescription...

- What are some alternatives for pain management?
- Can you prescribe a non-opioid pain medication?
- If my child must take opioids for pain relief, how can I minimize risks of dependency?
- If you must prescribe an opioid, limit the quantities.



According to the Center for Disease Control (CDC), enough painkillers will be prescribed this year to medicate every American adult around the clock for a month.





## Factors That Can Increase the Chance of Addiction

### Home and Family

- Influence during childhood, is a very important factor
- Parents or older family members who abuse drugs or engage in criminal behavior, can increase children's risks of developing their own drug problems.

### Peers and School

- Drug-using peers can sway even those without risk factors to try drugs
- Academic failure
- Poor social skills can put a child at further risk for using drugs

### Biological Factors

- Genetic factors account for 40%-60% of a person's vulnerability to addiction
- Effects of environmental factors on the function and expression of a person's genes
- A person's stage of development and other medical conditions
- Adolescents and people with mental disorders are at greater risk of drug abuse and addiction than the general population.

### Early Use

- Research shows that the earlier a person begins to use drugs, the more likely he or she is to develop serious problems.
- This reflects the harmful effect that drugs can have on the developing brain
- It remains that early use is a strong indicator of problems ahead, including addiction

### Method of Administration

- Smoking a drug or injecting it into a vein increases its addictive potential
- Both smoked and injected drugs enter the brain within seconds
- This intense "high" can fade within a few minutes, taking the abuser down to lower, more normal levels.



Check out this great resource:  
[http://archives.drugabuse.gov/  
NIDA\\_Notes/NN05index.html](http://archives.drugabuse.gov/NIDA_Notes/NN05index.html)

As with any other disease, the capacity to become addicted differs from person to person. In general, the more risk factors a person has, the greater that chance that taking drugs will lead to abuse and addiction. (Excerpted from *Drugs, Brains, and Behavior: The Science of Addiction* by NIDA)



## Why Would My Child Use Drugs?

In general, people begin taking drugs for a variety of reasons:

**To feel good.** Most abused drugs produce intense feelings of pleasure. This initial sensation of euphoria is followed by other effects, which differ with the type of drug used. For example, with stimulants such as cocaine, the “high” is followed by feelings of power, self-confidence, and increased energy. In contrast, the euphoria caused by opiates such as heroin is followed by feelings of relaxation and satisfaction.

**To feel better.** Some people who suffer from social anxiety, stress-related disorders, and depression begin abusing drugs in an attempt to lessen feelings of distress. Stress can play a major role in beginning drug use, continuing drug abuse, or relapse in patients recovering from addiction.

**To do better.** Some people feel pressure to chemically enhance or improve their cognitive or athletic performance, which can play a role in initial experimentation and continued abuse of drugs such as prescription stimulants or anabolic/androgenic steroids.

**Curiosity and “because others are doing it.”** In this respect adolescents are particularly vulnerable because of the strong influence of peer pressure. Teens are more likely than adults to engage in risky or daring behaviors to impress their friends and express their independence from parental and social rules.

(Excerpted from *Drugs, Brains, and Behavior: The Science of Addiction* by NIDA)

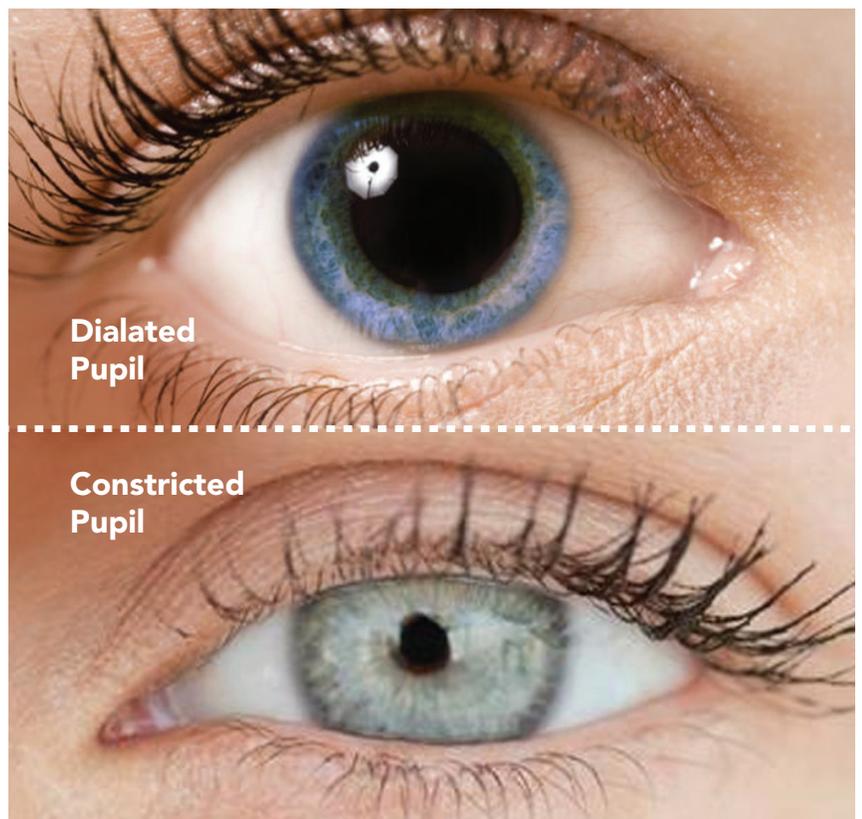




## Signs to Look For

The duration of a dose of Heroin can last 3-6 hours and be detected up to 2 days.  
Physical and Behavioral signs & symptoms of opiate intoxication:

- Constricted/pinpoint pupils
- Sweating
- Clouded mental function
- Lower body temperature
- Euphoria followed by drowsiness
- Flushed skin
- Decreased appetite
- Dry mouth/thirsty
- Itching/scratching
- Slurred speech
- Slowed reflexes
- Depressed breathing
- Asthma attacks in asthmatic individuals that inhale the drug
- Decreased heart rate
- Decreased blood pressure
- Suppressed pain
- Mood swings
- Apathy
- Euphoria
- Depression
- Feeling of heavy limbs
- Track Marks
- Impaired coordination



### Lifestyle changes that can be related to opiate addiction:

- A change in peer group
- Missing classes, skipping school or work
- Loss of interest in favorite activities
- Trouble in school or with the law
- Changes in appetite or sleep patterns
- Lose touch with family member and friends
- Money loss, asking for money loans or missing items from family/friends



## Things to Know...

### Opiate/Heroin Paraphernalia Heroin can be:

- Snorted, Injected, Swallowed and Inhaled
- Crushed pills are snorted and inhaled using short straws, rolled dollar bills and other small tubing
- Mirrors, razors or credit cards might be used in preparing the drug
- Syringes, rubber tubes, syringe caps, droppers and spoons are used when preparing or injecting the drug
- To inhale the drug, pipes or pieces of rectangular aluminum foil (3x17cm) are used.
- Empty packaging such as corner ties and tin foil squares

## Slang

### Heroin:

Black, Black Eagle, Black Pearl, Black Stuff, Boy, Brown, Brown Crystal, Brown Rhine, Brown Sugar, Brown Tape, Chiba, China, China White, Chiva, Dope, Dragon, H, Junk, Mexican Brown, Mexican Horse, Mexican Mud, Number 3, Number 4, Number 8, Sack, Scat, Skag, Smack, Snow, Snowball, White, White Boy, White Girl, White Horse, White Lady, White Nurse and White Stuff

### Using Heroin:

Channel swimmer, Chasing the Dragon, Daytime (being high), Dip and Dab, Do up, Evening (Coming off the high) Firing the Ack Ack Gun, Give Wings, Jolly Pop and Paper Boy.

Heroin + Alprazolam (Xanax)= Bars

Heroin + Cocaine=Belushi, Boy-Girl, He-She, Dynamite, Goofball, H&C, Primo, Snowball

Heroin + Cold Medicine=Cheese

Heroin + Crack=Chocolate Rock, Dragon Rock, Moonrock

Heroin + Ecstasy=Chocolate Chip Cookies, H Bomb

Heroin + LSD=Beast, LBJ

Heroin + Marijuana (THC)=Atom Bomb, Canade, Woola, Wookie, Woo-Woo

### OxyContin, Percocet, Vicodin and other painkillers:

Big Boys, Cotton, Kicker, Morph, Tuss, Vike, Watson-387

### Using Prescription Drug Use and Abuse:

Pharming, Pharm Parties, Recipe (mixing with alcohol), and Trail Mix

**Check out this great resource:** [www.casapalmera.com/nicknames-street-names-and-slang-for-heroin/](http://www.casapalmera.com/nicknames-street-names-and-slang-for-heroin/)



## If You Suspect Your Loved One May Be Using...

While it may be necessary at some point, harsh confrontation, accusing, and/or searching their room or personal belongings can be disastrous. The first step is an honest conversation.

### 5 Tips for talking with kids about drugs and alcohol:

1. Be open
2. Be non-judgmental
3. Treat them as individuals
4. Don't make assumptions
5. Don't move too fast

Research shows that the earlier a person begins to use drugs the more likely they are to progress to more serious abuse.

### Some suggested things to tell your loved one:

- You LOVE him/her and you are worried that he/she might be using drugs or alcohol.
- You KNOW that drugs may seem like the thing to do, but doing drugs can have serious consequences.
- It makes you FEEL worried and concerned about him/her when he/she does drugs.
- You are there to LISTEN to him/her.
- You WANT him/her to be a part of the solution.
- You tell him/her what you WILL do to help him/her.
- Know that you will have this discussion many, many times. Talking to your child about drugs and alcohol is not a onetime event.



Did you know the average age of person who becomes addicted to prescription drugs is 36.2



If you are concerned about your child's use,  
call the Access Center at  
1-800-448-5498 or the 24/7  
Crisis Line at 1-800-327-4693



## If You Suspect An Overdose...

**An opioid overdose requires immediate medical attention.**

An essential first step is to get help from someone with medical expertise as soon as possible.

**Call 911 immediately** if you or someone you know exhibits any of the symptoms listed below. All you have to say: "Someone is unresponsive and not breathing." Give a clear address and/or description of your location.

### Signs of an OVERDOSE, which is a life-threatening emergency, include:

- Face is extremely pale and/or clammy to the touch
- Body is limp
- Fingernails or lips have a blue or purple cast
- The individual is vomiting or making gurgling noises
- He/she cannot be awakened from sleep or is unable to speak
- Breathing is very slow or stopped
- Heartbeat is very slow or stopped

### Signs of OVER MEDICATION, which may progress to overdose, include:

- Unusual sleepiness or drowsiness
- Mental confusion, slurred speech, intoxicated behavior
- Slow or shallow breathing
- Pinpoint pupils
- Slow heartbeat, low blood pressure





## Good Samaritans

### Dos and Don'ts in Responding to Opioid Overdose

Call for Help Dial 911. AN OPIOID OVERDOSE NEEDS IMMEDIATE MEDICAL ATTENTION.

All you have to say is: **"Someone is not breathing."**

Be sure to give a clear address and/or description of your location.

- **DO** support the person's breathing by administering oxygen or performing rescue breathing.
- **DO** administer naloxone (NARCAN)
- **DO** stay with the person and keep him/her warm
- **DON'T** slap or try to forcefully stimulate the person—it will only cause further injury. If you are unable to wake the person by shouting, rubbing your knuckles on the sternum, or light pinching, he or she may be unconscious.
- **DON'T** put the person in a cold bath or shower. This increases the risk of falling, drowning or going into shock.
- **DON'T** inject the person with any substance (salt water, milk, "speed," heroin, etc). The only safe and appropriate treatment is naloxone.
- **DON'T** try to make the person vomit drugs that he or she may have swallowed. Choking or inhaling vomit into the lungs can cause a fatal injury. [www.samhsa.org](http://www.samhsa.org)

**OVERDOSE?**  
**Call 911 immediately, even if you**  
**have administered Narcan!**





## Drugs in the Workplace

- Estimated 10 to 12 percent of employees use alcohol or illegal drugs while at work (SAMHSA). This number doesn't include people who abuse opiate drugs, under a physician's prescription, at work
- The American Council for Drug Education (ACDE) reports that 70% of substance abusers hold jobs
- Certain industries tend to have a higher number of substance users: construction jobs, trucking, retail sales clerks, and assembly and manufacturing workers
- Employees struggling with addiction are more likely to have an accident, lower productivity, raise insurance costs, and reduce profits
- The following statistics provided by ACDE show how drug abuse affects employees and employers because using employees are:
  - 10 times more likely to miss work
  - 3.6 times more likely to be involved in on-the-job accidents
  - 5 times more likely to file a worker's compensation claim
  - 33% less productive
  - Responsible for 40% of all industrial fatalities
  - Responsible for health care costs nearly 3 times that of their non using peers
- National Council on Alcoholism and Drug Dependence, Inc. estimates that drug abuse costs employers \$81 billion annually

### Job Performance and workplace behaviors may be signs that indicate possible work place drug problems:

#### Job Performance

- Inconsistent work quality
- Poor concentration and lack of focus
- Lowered productivity or erratic work patterns
- Increased absenteeism or on the job "presenteeism"
- Unexplained disappearances from the jobsite
- Carelessness, mistakes, or errors in judgment
- Needless risk taking
- Disregard for safety of self and others on the job and off the job accidents
- Extended lunch periods and early departures

#### Workplace Behavior

- Frequent financial problems
- Avoidance of friends and colleagues
- Blaming others for own problems and short comings
- Complaints about problems at home
- Deterioration in personal appearance or personal hygiene
- Complaints, excuses and time off for vaguely defined illnesses or family problems



## Michigan Possession Laws

### Possession of Schedule I or II Substances

#### Michigan Compiled Law (MCL) Section 333.7403

Between 25 and 50 grams (felony) - Fines of up to \$25,000 and 4 years in prison.

Between 50 and 450 grams (felony) - Fines of up to \$250,000 and a maximum of 20 years in prison.

Between 450 and 1,000 grams (felony) - Fines of up to \$500,000 and a maximum of 30 years in prison.

More than 1,000 grams (felony) - Fines of up to \$1,000,000 and up to life in prison.

Schedule I drugs include marijuana, LSD, ecstasy, peyote, GHB, Heroin

Schedule II drugs include Oxycodone, methadone, morphine, cocaine, hydrocodone, methamphetamines

### Schedule I or II Possession with Intent to Deliver Michigan Compiled Law (MCL) Section 333.7401

Less than 50 grams - Fine of up to \$25,000 and up to 20 years in prison, or both.

50 grams to 449 grams - Fine of up to \$250,000 and up to 20 years in prison, or both.

450 grams to 999 grams - Fine of up to \$500,000 and up to 30 years in prison, or both.

1,000 grams or more - Fine of up to \$1,000,000 and possible life in prison, or both.

### Possession of Drug Paraphernalia

#### Michigan Compiled Law (MCL) Section 333.7451 & 333.7455(1)

While considered a misdemeanor offense, those convicted are subject to punishment which includes incarceration of up to 90 days, a fine of up to \$5,000, or both.

You can be charged with possession of drug paraphernalia if found with materials or equipment intended for use with a controlled substance, but it does not have to be physically on your person for you to be arrested. When paraphernalia is in a location you have control over, you may be charged. This may be your vehicle, your home, even your workplace or office.

***Increased penalties can occur if you are caught in a public park or school zone, or have previous drug charges.***



## Legal Consequences of Prescription Drug Abuse

### Michigan Penalties

In Michigan, simple possession of Heroin or a Schedule I or II Substance (prescription pills) is a 4 year FELONY. Delivery or Possession with Intent to Deliver starts at up to a 20 year felony and \$250,000 fine and increases depending on the number of grams in possession.

**FOUR YEARS IN JAIL.**

**\$25,000 BUCKS.**

**Heroin possession is a felony in Michigan. And the penalties if you get caught can be pretty fierce.**

## What Happens When You Are a Convicted Felon?

**If you are convicted of a felony in Michigan you cannot:**

- Vote while imprisoned
- Serve on a jury
- Possess a firearm

In addition, you must disclose you are a felon on all applications—university and employment. It is then per university or employer policy as to whether you are eligible for admittance or employment. Any future felony sentences will be more severe than if it was your first.

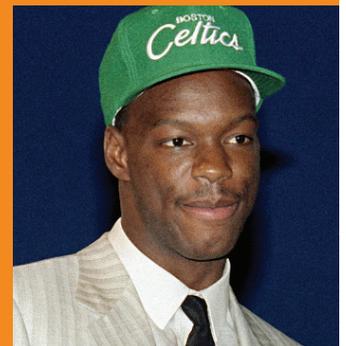
## Len Bias Law

Leonard Kevin “Len” Bias was a first-team All-American college basketball forward at the University of Maryland. He was selected by the Boston Celtics as the second overall pick in the 1986 NBA Draft on June 17, and died two days later from cardiac arrhythmia induced by a cocaine overdose. He is considered by some sportswriters to be one of the greatest players not to play at the professional level.

In 1988, the U.S. Congress passed a stricter Anti-Drug Act that is known as “The Len Bias Law.” It was backed by both parties and reinforced the War on Drugs with stiffer penalties and expanded the DARE program. Specifically, this law allows the District Attorney to charge the supplier of a drug with homicide when the user dies.

Overdose deaths are treated as homicides and law enforcement responds accordingly.

This is important because it sends a strong message to drug dealers: consequences for dealing are stiff.





## A Local Story

I am a person in long term recovery. What that means for me is I have not used any mind or mood altering chemicals including alcohol since September 4, 1997. That transformation has allowed me to live a life of self respect, be of good service to others, function well as a father and husband, pay taxes, vote in elections, be a reliable and valued employee, and a physical fitness role model. In short, I live fully and productively in society.

Arriving to that moment in time where I got the ability to stay clean required intention and purposeful action that began in 1984. Over that 13 year span, I entered at least 13 separate detox, inpatient and outpatient treatment modalities, and a countless number of entry and re-entries into community based recovery support groups. I needed a lot of help to get clean and learn how to stay clean.

Over three decades beginning at age 12 my so-called drugs of choice have been alcohol, heroin and cocaine (including crack), with alcohol always involved. In fact, the last drug I consumed in the early morning of that September 4th was alcohol.

In one respect my recovery journey actually began in 1974 when I made the choice to stop using heroin after 7 years beginning at age fourteen. I did not understand the nature of addiction so the idea of total abstinence never entered my mind at that time. But, it was clear my future had no hope if I kept shooting heroin. At the time I was entering my junior year at Michigan State University, fortunate enough to not have flunked out or gotten kicked out (I was at risk for both at varying times). The vast majority of my heroin using friends both at MSU and back in Detroit were being hospitalized, going to jail, dying, becoming homeless, etc. I was able to compare their destruction to the opportunity in front of me at MSU and just decided I had to stop. I stopped by starting to drink alcohol exclusively, stayed away from Detroit and all the people I knew at MSU that were using heroin. With a few exceptions over the next year, my heroin days were behind me, but destruction with alcohol and cocaine were ahead of me. Still to this day I am grateful for my personal "harm reduction" choice to get off heroin. It allowed me to complete my undergraduate degree with honors, and I ultimately achieved a Master's Degree in Public Administration.

Of course , during those decades of active addiction I engaged in all kinds of behavior that I consider despicable and just flat out wrong. Things that at times I have a hard time believing it was actually me doing them and that I know I would never have done if drugs were not in control of my decision making. Those choices in the pursuit of drugs turned me into a physically sick, skinny, homeless, alley dweller searching through garbage to find bottles and cans, stealing from stores all day every day to get high. More times than I'd like to admit I went without eating, showering or a roof over my head at night. In my life today, I accept the ugliness of that past, but I refuse to let it define me. Rather I use those memories to fire up my commitment to staying clean, bettering myself, and sowing better seeds throughout my sphere of influence.

There is so much more I could say about my experiences, but it is a long story to tell. So in closing, I want to express my gratitude for not having given up on myself, for professional treatment services being available for me time and time again when I reached out for them, and for the power and love that exists in the recovery community that never turned away from me as I kept "coming back." Finally, I am grateful that today I can honestly claim, and proudly state, that "I am a person in long term recovery", living a rich and purposeful existence consistently for more than 19 years.

- Ricardo



## Addiction is a Medical Condition

### Addiction is a brain disease that affects the priorities, physiology and thought process

Opioid drugs work by binding to opioid receptors in the brain, thereby reducing the intensity of pain signals that reach the brain. However, frequent use of opioids can physically change the brain to the point where it needs opioids to function normally. [www.outthemonster.com](http://www.outthemonster.com)

When a drug user can't stop taking a drug even if he wants to, it's called addiction. The urge is too strong to control, even if you know the drug is causing harm.

When people start taking drugs, they don't plan to get addicted. They like how the drug makes them feel. They believe they can control how much and how often they take the drug. However, drugs change the brain. Drug users start to need the drug just to feel normal. That is addiction, and it can quickly take over a person's life.

### Addiction is a brain disease.

- Drugs change how the brain works.
- These brain changes can last for a long time.
- They can cause problems like mood swings, memory loss, even trouble thinking and making decisions.

Addiction is a disease, just as diabetes and cancer are diseases. Addiction is not simply a weakness. People from all backgrounds, rich or poor, can get an addiction. Addiction can happen at any age, but it usually starts when a person is young. [www.drugabuse.gov](http://www.drugabuse.gov)

## What's Relapse

Sometimes people quit their drug use for a while, but start using again no matter how hard they try not to. This return to drug use is called a relapse. People recovering from addiction often have one or more relapses along the way.

Drug addiction is a chronic (long-lasting) disease. That means it stays with the person for a long time, sometimes for life. It doesn't go away like a cold. A person with an addiction can get treatment and stop using drugs. But if he started using again, he would:

- Feel a strong need to keep taking the drug.
- Want to take more and more of it.
- Need to get back into treatment as soon as possible.
- He could be just as hooked on the drug and out of control as before.

Recovery from addiction means you have to stop using drugs AND learn new ways of thinking, feeling, and dealing with problems. Drug addiction makes it hard to function in daily life. It affects how you act with your family, at work, and in the community. It is hard to change so many things at once and not fall back into old habits.

Recovery from addiction is a lifelong effort. [www.drugabuse.gov](http://www.drugabuse.gov)



## When Someone You Love is Addicted

- 1. Educate yourself about addiction;** search credible online resources such as government, university, medical and research-based sites for the most updated information on addiction. Look to local resources for information and steps to take to stay involved.
- 2. Be aware of “Doctor Shopping”** the practice of requesting care from multiple physicians or medical practitioners at the same time without coordinating care between the practitioners for the purpose of obtaining narcotic prescription medications from more than one practitioner at the same time.
- 3. Attend family support groups** such as Al-Anon, Ala-Teen and Nar-Anon to provide support for yourself as well as find ideas and resources from other individuals that are faced with similar challenges. Attend an Al-Anon meeting if you cannot locate/attend a Nar-Anon meeting.
- 4. Set boundaries and limits.** It’s a fine line between enabling and support. Do not provide money or access to money and other valuables. Consider providing food and other life necessities as an alternative. Do not accept unacceptable behavior such as violence or abuse, drugs in your home and drugs around children. Call local law enforcement if needed.
- 5. Focus conversations toward recovery, not blame.** Do not threaten or shame your loved one. Reinforce that the addiction is an illness and that you are there to assist in the recovery process.
- 6. Offer to attend therapy and be part of the recovery process.** Clinicians and treatment providers cannot legally talk to you unless your loved one asks them to and then signs a written consent form allowing you to communicate with the treatment provider. Ask that your loved one take care of this.
- 7. Take care of yourself!** Loving someone with an addiction can take a major toll on your physical and mental well being. You need to take care of yourself to continue to be the best support that you can. Take care of basic needs such as sleep, healthy eating and exercise. Engage in pleasurable activities regularly and seek support for yourself.





## Harm Reduction | Keeping Them Safe and Alive

Harm reduction is a set of practical strategies and ideas aimed at reducing negative consequences associated with drug use.



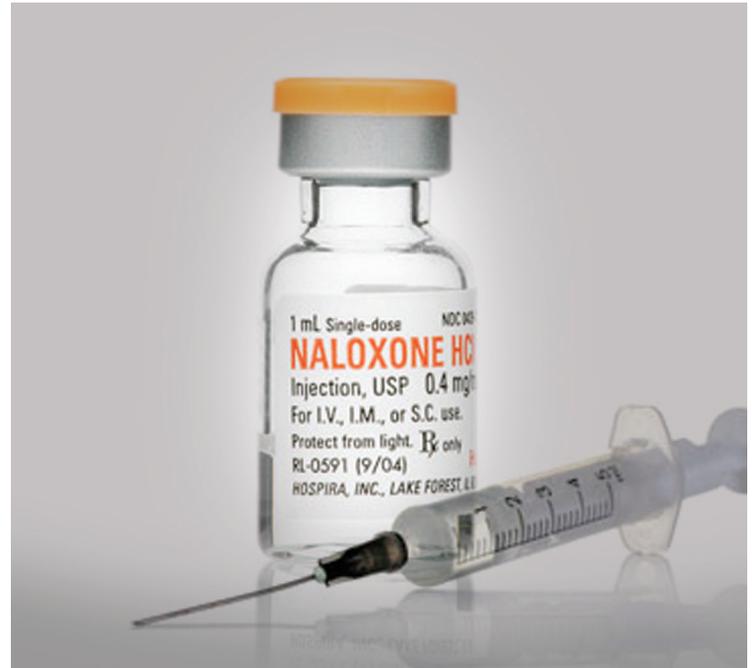
### **IF YOU ARE WITH SOMEONE WHO IS OVERDOSING, CALL 911 WITHOUT RISK .**

House Bill 5650, signed by Governor Snyder in 2016, gives immunity for use penalties to people who seek or require medical assistance as the result of a controlled substance overdose. House Bill 5649 gives immunity to people for possession penalties in similar instances.

### **CLEAN NEEDLES TO PREVENT HEPATITIS C**

The use of unclean needles is very dangerous. Drug users that are injecting are at risk of contracting Hepatitis C. This is a contagious liver disease that ranges in severity from a mild illness lasting a few weeks to a serious, lifelong illness that attacks the liver. It results from infection with the Hepatitis C virus which is spread primarily through contact with the blood of an infected person. This can easily be spread to anyone who comes in contact with an infected person, which means it is a health threat to the entire community.

For local Hepatitis C testing, contact Sacred Heart at 989-894-2991.



### **HAVE NARCAN ON HAND**

Narcan can be given by intramuscular injection into the muscle of the arm, thigh or buttocks or with a nasal spray device (into the nose). Don't wait for help if you are with someone who is overdosing. With basic training friends and family members can recognize when an overdose is occurring and give Narcan.

**Call Recovery Pathways at 989-928-3566 for more information on how to obtain Narcan.**

### **OVERDOSE NALOXONE (NARCAN)**

Many first responders such as ambulance personnel and police departments in Bay County are equipped with Naloxone kits so they are able to quickly help people experiencing an overdose.



# BAY COUNTY PRESCRIPTION DRUG DISPOSAL



## Yellow Jug Old Drug Pharmacy Drop-off Locations



**Pinny Pharmacy** 704 S. Mable St. Pinconning, MI 48650  
- accepts non-controlled substances

**Country Drugs** 362 State Park Dr. Bay City, MI 48706  
- accepts non-controlled substances

**Sabourin Pharmacy** 1461 S. Huron Rd. Kawkawlin, MI 48631  
- accepts non-controlled substances

**Anderson Pharmacy** 1108 Marquette Ave. Bay City, MI 48706  
- accepts non-controlled substances

**Allen Medical Building Pharmacy** 200 S. Wenona Bay City, MI 48706  
- accepts controlled and non-controlled substances

**McLaren Retail Pharmacy** 1900 Columbus Ave. Bay City, MI 48708  
- accepts non-controlled substances

**Southside Pharmacy** 1002 Lafayette Bay City, MI 48708  
- accepts controlled substances

**La Brenz Pharmacy** 1606 Woodside Ave. Essexville, MI 48732  
- accepts non-controlled substances

## **Additional Drop-off Locations**

**Bay County Law Enforcement Center** 503 3rd St. Bay City, MI  
Accepts controlled and non-controlled substances in the red drop box Monday-Friday from 8 am—4:30 pm

**Michigan State Police** 2402 Salzburg Rd. Freeland, MI 48623  
Accepts controlled and non-controlled substances Monday-Friday 8 am-4 pm

**SVSU Public Safety** 7400 Bay Rd. University Center, MI South Campus Complex A  
Accepts controlled and non-controlled substances in the drop box 24 hours/day

**Delta College Public Safety** 1961 Delta Rd. University Center, MI 48710  
Accepts controlled and non-controlled substances in the drop box Mon-Sat from 7-11, Sun 11-7



## Treatment Options

**DETOX OR DETOXIFICATION IS THE FIRST STEP TOWARD RECOVERY.** This is when an individual will stop using heroin and begin to overcome physical dependence on the drug. Often individuals will return to use to stop the pain and adverse effects of the heroin withdrawal. The effects of withdrawal will vary from person to person depending on various factors including the frequency and dose of use as well as the length of time using. Individuals can seek assistance with the withdrawal from a local emergency room, a primary care physician or a detox provider.

**RESIDENTIAL TREATMENT** is a program in which an individual resides in a facility specific to substance abuse treatment. Individuals are immersed in treatment throughout their day.

**OUTPATIENT COUNSELING/THERAPY** is individual counseling that is held as often as the individual person needs to address any previous trauma or pain that may have led to and been a result of their drug use. Counseling can also help identify any triggers and assist in preventing relapse.

**MEDICATION ASSISTED TREATMENT** uses medications; Suboxone, Naltroxone, Methadone or Buprenorphine to alleviate the withdrawal symptoms and physical dependence on heroin. This is a long-term solution that requires years of being on the medication. Medication assisted treatment is combined with counseling and support groups to provide the best chance for a successful recovery.

**TRANSITIONAL LIVING OR RECOVERY HOUSES** are sober group living environments. There may be support groups or group therapy held in the home. It is a group of individuals living in a structured environment in efforts to maintain sobriety.

**SUPPORT GROUPS** such as a 12 step Narcotics Anonymous are usually peer driven meetings to offer social supports and connections.

Contact your insurance company to find out what providers and treatments are available to you. If you do not have insurance and are a Bay County resident contact Bay-Arenac Behavioral Health at 1-800-448-5498 and request help for treatment services.

## Free Home Drug Testing

- Visit [www.TestMyTeen.com](http://www.TestMyTeen.com) and click on "Products"
- Add the "10 Drug Home Test Kit" to your shopping basket
- Enter this special voucher code 5R8H4 when prompted, during checkout
- The cost of the kit will drop to \$0.00 and all that will remain are the shipping and handling charges.
- Note: Limit 1 per family. Subject to terms and conditions listed at <http://www.testmyteen.com/Terms.aspx>



## Resources

### EMERGENCY & ACUTE NEEDS – CALL 911

- Bay-Arenac Behavioral Health Access Center: 1-800-448-5498
- Bay-Arenac Behavioral Health 24/7 Crisis Line: 1-800-327-4693

### TREATMENT

- Bay Area Consultants 989-893-1165  
-outpatient counseling
- Bay Psychological Associates 989-686-1990  
-outpatient counseling, case management, recovery supports
- BCB Consulting, PLLC 989-233-2725  
-outpatient counseling
- DOT Caring Centers 989-790-3366  
-Suboxone, residential, outpatient counseling
- Kairos Healthcare 844-452-4767  
-residential (mens and women's with children), outpatient counseling
- List Psychological Services 989-684-7977  
-outpatient counseling, recovery supports
- McLaren Bay Psychiatric Associates 989-922-4900  
-outpatient counseling
- Recovery Pathways 989-928-3566  
-Suboxone, Narcan education, outpatient counseling, case management, recovery supports
- Sacred Heart Rehabilitation Center 989-894-2991  
-outpatient counseling
- Sandra Murray 989-295-2733  
-outpatient counseling
- Ten Sixteen Recovery Network 989-835-3466  
-residential, outpatient counseling, recovery supports
- Victory Clinical Services (Saginaw) 989-752-7867  
-methadone, outpatient counseling, case management, recovery supports

### RECOVERY SUPPORT GROUPS:

- Peer360
- AA-Alcoholics Anonymous: [www.aa.org](http://www.aa.org)
- NA-Narcotics/Heroin Anonymous: [www.na.org](http://www.na.org)
- Al-Anon/Al-Ateen: [www.al-anon.alateen.org](http://www.al-anon.alateen.org)
- NAR-Anon: [www.nar-anon.org](http://www.nar-anon.org)
- SMART Recovery: [www.smartrecovery.org](http://www.smartrecovery.org)

### RECOVERY HOUSING:

- Kairos Healthcare 844-452-4767 Men's Recovery housing in Bay City
- Ten Sixteen 989-631-0241 Men's and Women's Recovery housing in Midland

### PREVENTION

- Boys and Girls Club of Bay County 989-892-6723
- Neighborhood Resource Center/Bay County Prevention Network 989-895-3510
- Sacred Heart Rehabilitation Center 989-894-2991





A special thanks to the Bay County HOPE Task Force and their individual agency expertise that brought the resources together to provide this toolkit.

The Bay County HOPE Task Force assumes no liability for damages arising from errors, omissions, or services listed on this toolkit. The Task Force does not recommend or endorse any provider, agency, or resource listed here. The toolkit is solely for the information of individuals impacted by opiates/heroin in Bay County and is a collection of publicly listed information assembled here for the benefit of the community at the request of concerned citizens.

For more information, visit:  
[www.baycountyHOPE.org](http://www.baycountyHOPE.org)  
or  
[bcpreventionnetwork.com](http://bcpreventionnetwork.com)



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