LET’S TALK
OPIOIDS
INCLUDING FENTANYL

A PARENT’S GUIDE TO
UNDERSTANDING OPIOID USE BY YOUTH
Introduction

Fueled by drugs like heroin, fentanyl and the use of prescription opioids (sometimes known as painkillers), the opioid crisis in our country has impacted countless families. In the present complex landscape of youth and substance use, we all have much to learn.

We created this guide because we believe that parents and families like yours need to know what opioids are and understand the risks associated with their use. We want to help prepare you with the knowledge and strategies you need to prevent your child from using opioids problematically, to spot problematic use by recognizing the signs and symptoms and to take action effectively to prevent an accidental overdose.

If your son or daughter is using opioids problematically, this guide suggests several steps you can take to help protect them from harm.

We hope that the information provided here will help to answer some of your questions about opioids and move you and your child in the direction of greater health and overall well-being.
# What's Inside

## ABOUT OPIOIDS
- What are opioids? .......................... 3
- What effect do they have on the body? ........................................... 5

## THE OPIOID CRISIS
- How does it impact my family? ........................................... 6
- What do I need to know about stigma? ........................................... 7

## YOUTH AND OPIOIDS
- Why do some youth take opioids? ..................... 8
- When does opioid use become problematic? ........................................... 9
- Fentanyl and fentanyl analogues ........................................... 10

## IDENTIFYING RISK
- What are the risk factors for opioid use? ........................................... 12
- What are the signs of opioid use by young people? ........................................... 13

## THE PARENT CONNECTION
- Protective factors and resilience – how they help ........................................... 15
- How do I talk to my kids about opioids? ........................................... 15
- What if my child is using opioids problematically? ........................................... 17

## REDUCING HARM
- How do I reduce the risk of harm? ........................................... 18
- A Message of Hope ........................................... 19
- What ‘next steps’ can I take? ........................................... 20
- Treatment options ........................................... 20

## OPIOID OVERDOSE
- What are the signs? ........................................... 22
- What do I do if I suspect an overdose? ........................................... 23
- What is Naloxone and how do I use it? ........................................... 23

## KEY MESSAGES ........................................... 25

## RESOURCES ........................................... 26
What are opioids?

Opioids are medications that relieve pain. These drugs act on opioid receptors located in the spinal cord, brain and other parts of the body to reduce the body’s perception of pain.

When used properly, they can help. Opioids affect your mind, mood, and mental processes and they can create a feeling of euphoria, often referred to as being “high.” This creates the potential for them to be used improperly, and problematic use can cause dependence, overdose and death.

Legal opioids are medications prescribed by a health care professional most often to treat pain from medical conditions such as injuries, surgery, dental procedures, cancer or long-term chronic pain. (see table below)

Prescription opioids are available in various forms in Canada, including tablets, capsules, syrups, solutions, liquid form for injection, skin patches, transmucosal preparations, suppositories and nasal sprays.

When taken as prescribed by a doctor and for a short period of time, opioid pain relievers are generally safe for most people. Some people increase their dosage or take opioids for longer periods of time to relieve their pain, which may lead to opioid dependence. Ongoing conversations with a health care provider about the risks and benefits of continued opioid use are recommended, as well as careful monitoring.
Illegal opioids are any opioids that are made, shared or sold illegally.

Illegal opioids include:

- street drugs from a drug dealer
- opioids given to you by someone who is not your health care provider
- opioids that are not prescribed to you but are taken from someone else

It is illegal to have opioids without a prescription or to share them with someone – even if you give them away.¹

Common names for prescription opioids

Table 1. Common generic, trade and street names for opioids²

<table>
<thead>
<tr>
<th>GENERIC NAME</th>
<th>TRADE NAME (EXAMPLES)</th>
<th>STREET NAMES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Buprenorphine</td>
<td>BuTrans®</td>
<td>Bupe, bute</td>
</tr>
<tr>
<td>Buprenorphine-naloxone</td>
<td>Suboxone®</td>
<td>Subby, bupe, sobos</td>
</tr>
<tr>
<td>Codine</td>
<td>Tylenol®2,3,4 (codeine + acetaminophen)</td>
<td>Cody, captain cody, T1, T2, T3, T4</td>
</tr>
<tr>
<td>Fentanyl</td>
<td>Abstral®, Duragesic®, Onsolis®</td>
<td>Patch, sticky, sticker</td>
</tr>
<tr>
<td>Hydrocodone</td>
<td>Tussionex®, Vicoprofen®</td>
<td>Hydro, vike</td>
</tr>
<tr>
<td>Hydromorphone</td>
<td>Dilaudid®</td>
<td>Juice, Dillies, dust</td>
</tr>
<tr>
<td>Meperidine</td>
<td>Demerol®</td>
<td>Demmies</td>
</tr>
<tr>
<td>Methadone</td>
<td>Methadose®, Metadol®</td>
<td>Meth, drink, done</td>
</tr>
<tr>
<td>Morphine</td>
<td>Dororal®, Statex®, M.O.S.®</td>
<td>M, morph, red rockets</td>
</tr>
<tr>
<td>Oxycodone</td>
<td>OxyNEO®, Percocet®, Oxycoct®, Percodan®</td>
<td>Oxy, hillbilly heroin, percs</td>
</tr>
<tr>
<td>Pentazocine</td>
<td>Talwin®</td>
<td>Ts</td>
</tr>
<tr>
<td>Tapentadol</td>
<td>Nucynta®</td>
<td>Unknown</td>
</tr>
<tr>
<td>Tramadol</td>
<td>Ultram® Tramacet® Tridural® Durela®</td>
<td>Chill pills, ultras</td>
</tr>
</tbody>
</table>

Table reproduced with permission from the Canadian Centre on Substance Use and Addiction.

**Note:** OxyContin® is no longer marketed in Canada and was replaced with OxyNEO®. Generic controlled-release oxycodone was approved by Health Canada. Oxymorphone (Opana®) has been approved by Health Canada, but is currently not marketed in Canada.

People who do use prescription opioids are encouraged to safeguard their prescriptions at home and safely dispose of any expired or unused medications by taking them to their pharmacies.

It’s important to remember there are several pain management options available that do not include opioids. Ask your health care provider for alternatives to opioids.

¹ Government of Canada: Opioids What Are They? Fact sheet, 2019-04-09
² Canadian Centre on Substance Use and Addiction, Canadian Drug Summary Prescription Opioids
What effect do they have on the body?

Even when they are prescribed to treat a specific condition or pain, there can be short and long term side effects to using opioids.3

Short term side effects of using opioids may include:

- Drowsiness
- Constipation
- Impotence in men
- Nausea and vomiting
- Euphoria
- Difficulty breathing
- Headaches, dizziness and confusion, which can lead to falls and fractures

Long term side effects of using opioids may include:

- Increased tolerance
- Substance use disorder or dependence
- Liver damage
- Infertility in women
- Worsening pain (known as “opioid-induced hyperalgesia”)
- Life-threatening withdrawal symptoms in babies born to mothers taking opioids

Tolerance:

- Over time, a person using opioids can develop a high tolerance for them, and may need to take them just to feel normal. They may feel they have to use opioids even though they may no longer get any pleasure from doing so and worse, they may experience withdrawal when they don’t use them.

- In cases where an individual has stopped using opioids for a period of time due to withdrawal management, treatment, incarceration or other reasons resulting in abstinence, tolerance will be much lower. If the person resumes taking opioids at the level they were accustomed to, he or she will be at higher risk for an overdose.

Substance use disorders:

- According to the Diagnostic and Statistical Manual of Mental Disorders, 5th edition (DSM-V), substance use disorders are patterns of symptoms resulting from the use of a substance that you continue to take, despite experiencing problems as a result.

Withdrawal:

- Withdrawal means feeling sick from lack of opioids if the body is dependent on them. Symptoms can include diarrhea, vomiting, fatigue, cramping, anxiety and severe sweating. Some people describe it as similar to having a severe case of the flu.

3 Health Canada, About Opioids 2019-09-05
The current opioid crisis is a result of multiple, complex factors that include:

- A misunderstanding of the addictive risk of prescription opioids;
- Psychological, social and biological risk factors like genetics, mental health, early life experiences, trauma, poverty, lack of secure housing and other social determinants of health;
- Stigma towards substance use disorders;
- Frequent opioid prescribing and high amounts being prescribed for pain relief;
- Lack of awareness or access to alternative treatments for pain;
- Use of prescription opioids by individuals to whom they are not prescribed, such as friends and family members;
- Lack of access to prescription opioids leading to illicit opioid use;
- Illegal drugs that are laced with fentanyl and its analogues; and
- A lack of comprehensive care to respond to all the mental and physical health needs of an individual.

---

4 Canadian Centre on Substance Use and Addiction, Focus on Opioids Report, 2018
How does it impact my family?

Across Canada, the opioid crisis is having devastating effects on families and communities.

- The growing number of overdoses and deaths caused by opioids, particularly fentanyl and fentanyl analogues, has been declared a public health crisis by Health Canada.
- There were 12,800 Canadians who died of an apparent opioid-related overdose between January 2016 and March 2019.
- 4588 people died in 2018 in Canada - one death every 2 hours or 12 people per day.
- Young Canadians aged 15 to 24 are the fastest-growing population requiring hospital care from opioid overdoses.
- 94% of opioid overdose deaths happen by accident - many because Canada’s street drugs have become tainted with powerful opioids, such as fentanyl.
- Opioids don’t discriminate. All socio demographic and socioeconomic groups are affected in Canada. 5

It’s important to know that the emergence of strong synthetic opioids in the illegal drug supply has created an unsafe, potentially fatal environment for anyone who uses drugs - those with substance use disorders and first time experimenters alike. Street drugs like ecstasy, meth and cocaine are now commonly laced with fentanyl and carfentanil, which contributes greatly to what we call the opioid crisis.

Anyone who uses drugs can be at risk of an overdose, including those who: 6

- Are struggling with problematic substance use
- Use drugs occasionally in a recreational context
- Are trying an illegal drug for the first time
- Are not strictly following their health care professionals’ instructions

What do I need to know about stigma? 7

Stigma refers to negative beliefs or attitudes about something or someone. It includes discrimination, prejudice, judging, labeling, isolating and stereotyping. Unfortunately stigma can have a major impact on the quality of life for people who use opioids, people who are in recovery, and their friends and families.

Stigma can make people feel ashamed of their drug use which can prevent them from receiving help if they need or want it. This often leads people to use drugs alone, which can in turn lead to overdosing and dying alone.

“Stigma is at the heart of what’s keeping people from stepping forward and getting help, and practicing harm reduction. It’s pervasive. The stigma surrounding opioid and other drug use problems eclipses anything we’ve seen in terms of the stigma associated with mental illness.”

– Stephanie Knaak, Ph.D., Mental Health Commission of Canada

Even small changes can help reduce the cycle of stigma, such as using people-first language and taking the time to listen with compassion and without judgment. It is important for us as adult influencers to share this information with our young people. By opening up the conversation about stigma, it will help to empower all of us to think about how we treat those who suffer from some form of problematic drug use.

For more information, please read Health Canada’s ‘Stigma around substance use’.

5 Canada’s Opioid Crisis Fact Sheet, Date Modified 2019-04-09
6 Health Canada’s Federal Action on Opioids, 2019-06-13
7 Government of Canada Stigma Around Substance Use 2019-05-08
Why do Some Youth Take Opioids?

Teens and young adults may begin using opioids for several reasons, including:

1. A prescription from a doctor

   Opioids may be prescribed to young people to treat certain illnesses and severe pain — such as pain from dental surgery or serious sports injuries. Some teens that improperly use prescription opioids first received the medications from a doctor to address a medical issue.

---

*Chief Public Health Officer’s Report on the state of public health in Canada 2018*
2. **To self-medicate in order to escape painful emotions or problems**

   There are several factors why a teen might choose to self medicate with opioids. It can be to escape from adverse childhood events, to help with overwhelming feelings of anxiety or isolation, or even to help cope with the emotional toll of adolescence. Some teens believe that since opioids are prescribed medications they must be safe to take without a prescription. It’s important to note that there are many short and long term consequences of taking opioids non-medically without a doctor’s supervision - in particular, developing an opioid dependence and risking overdose.

3. **For recreation**

   Once young people experiment with a drug, and it makes them feel good, they may then decide to use it more often, sometimes in a social setting with other young people who are using. 14% of Canadian teens or around 375,000 teens have taken prescription drugs that were not prescribed to them. Some young people share prescription medicines among themselves by handing out or selling their own pills or those they’ve acquired or taken, usually from their own homes.

   Opioid use can interfere with a child’s success in school, sports and in relationships with friends and family. They can take a toll on physical and mental health, creating even more problems. Research indicates that consuming drugs and alcohol during adolescence can also lead to problems in adulthood, including chronic disease, addiction and mental health disorders.

---

**When does opioid use become problematic?**

The non-medical use of prescription opioids has traditionally been defined as use by people other than those to whom the medication is prescribed or use in a manner or for a purpose contrary to what is intended.

Opioid medications can be used problematically in several ways:

- Taken without a doctor’s prescription
- Taken in larger quantities or administered in a way other than prescribed (i.e. snorted or injected)
- Combined with other medications – Taking opioids with central nervous system depressants like alcohol, sleeping pills or benzodiazepines (i.e. Xanax®, Klonopin®), can depress breathing and increase the risk of an overdose and death.

**When opioid medications are used problematically, the risk of overdose increases because they can depress the body’s respiratory system to dangerous levels.**

Problematic opioid use doesn’t happen in a vacuum – young people who take drugs do so because they often address a need, whether it’s to fit in socially, escape problems, help with sleep, address boredom, or perhaps just for thrill-seeking.

---

9 Drug Free Kids Canada estimate based on CAMH 2017 OSDUHS
10 CCSA Substance Abuse in Canada: Youth in Focus, 2007
11 CCSA Canadian Drug Summary, Prescription Opioids 2017
The opioid overdose crisis in Canada is alarming. It may be shortening our national life expectancy, for the first time in decades” – Chief Public Health Officer’s Report on the state of Public Health in Canada 2018

Fentanyl and fentanyl analogues

Of particular concern is the rising use of prescription and illegal fentanyl by youth in Canada.

Fentanyl is an opioid that is 50 – 100 times more potent than morphine and its improper use can be fatal. In fact, 2 milligrams of pure fentanyl (the size of a few grains of salt) is enough to kill the average-sized adult.

Fentanyl, whether it is prescription grade or produced illegally, can be relatively inexpensive. Because it is odourless and tasteless, fentanyl is hard to detect, and many overdoses have occurred where individuals were not aware they were consuming fentanyl.

The risk of fentanyl being mixed with other illegal drugs is higher than ever.12

Fentanyl and fentanyl analogues are commonly mixed in with illegal drugs like heroin, cocaine, ecstasy and methamphetamine. Fentanyl and its analogues may also be pressed into pills that look like prescription opioids, and sold on the street under the name of a common painkiller, like Oxycodone for example.13

Fentanyl analogs are drugs that are developed to imitate a particular drug, but they are not identical. One of the fentanyl analogs, carfentanil, has begun appearing in street drugs, and is particularly dangerous. Never intended for human use, carfentanil, a sedative for elephants is said to be 10,000 times more powerful than morphine.

Because illicit drugs, by their nature, are unregulated, it is practically impossible for anyone to know if the drugs they purchase from a dealer contain fentanyl or a fentanyl analogue.

The rise in the inadvertent use of fentanyl has led to a number of people dying from opioid overdoses who never thought they were at risk because they did not knowingly take opioids.

“I really do think this drug is going to claim the lives of many more. And it’s devastating. This drug took Conner’s future, dreams and goals, all gone forever, as well as family trips, dinners and family conversations. I will never see my Conner as a father or a husband. I will always see him as 21.” – Nope to Dope co-founder Yvonne’s son Conner, 21, died in 2013 after suffering from an OxyContin addiction for almost two years. An overdose from a single fentanyl tablet killed him.

12 The Fentanyl Crisis: How Fentanyl Analogs and Derivatives Play a Role in the Epidemic By Elizabeth Hartney, PhD  I Reviewed by a board-certified physician Updated June 12, 2018
13 Health Canada: Fentanyl, Modified, 2019-04-18
“We can’t arrest our way out of this problem. Opioid misuse needs to be treated as a disease, not a crime.” – Dr. Mark Yarema, Emergency - Physician and Medical Toxicologist, Medical Director of Alberta’s Poison and Drug Information Service (PADIS)

You may be asking how can you protect your child?

First, talk to them. Let your son or daughter know that you care about them and that is why you want to learn more about opioids. Then have an open conversation with them about the risks of prescription opioids and the dangers of experimenting with or problematically using illegal street drugs like cocaine, ecstasy, meth, and illegal opioids.
What are the risk factors associated with opioid use?

Risk Factors are factors that increase the likelihood of individuals using substances problematically and/or developing health problems associated with their use.

Here are certain factors to watch out for that may put your child at a greater risk for opioid dependence or addiction.¹⁴

- Personal history of substance use issues involving any substance, including alcohol
- Family history of substance use problems or addiction
- History of pre-adolescent sexual abuse or childhood trauma
- Personal history of psychiatric problems

It is important to keep in mind that risk factors do not determine a child’s destiny – instead, they provide a general gauge as to the likelihood of drug use or susceptibility to addiction.

Understanding risk factors is very important as young people who may have already experimented with substances such as alcohol and cannabis may be at greater risk for experimenting with other drugs, including opioids.

“Every day, Christian struggled with wanting to be the son and brother that we raised and wanting to be with his friends. There was a conflict between the love of his family and the dark side of addiction. My son never hit bottom. His bottom was death.” – Nope to Dope co-founder Sharon’s son, Christian, died from an overdose on prescription drugs when he was 20, on the same day his parents planned to confront him in the hopes of persuading him to get help.

¹⁴ CAMH Opioid Addiction, 2018
What are the signs of opioid use by young people?

Figuring out if your child is using opioids or other drugs can be challenging, as some of the signs and symptoms may look like typical teen or young-adult behaviour or they may look like mental health issues. However, there are physical and behavioural signs to look for in addition to recognizing actual drug use.

Common physical signs to look for:

- Fatigue and drowsiness, changes in sleep patterns
- Pinpoint pupils, dark circles under the eyes
- Rapid weight loss
- Deterioration of hygiene or personal appearance
- Health complaints such as being constipated or experiencing nausea

Have you noticed?

- Missing prescription medications
- Empty pill bottles
- Prescriptions filled at the pharmacy that you weren’t aware of
- Small unmarked plastic bags or folds marked with names like “Crazy Horse” or “Superman”
- Paraphernalia used to prepare opioids for consumption including: Syringes or hypodermic needles, shoelaces, pieces of rubber hose or string, bottle caps and kitchen spoons, cotton balls, cigarette filters, aluminum foil, lighters, candles or straws.

Other things to watch for:

- Isolating from family and friends and/or change in friends
- Skipping school or work, drop in grades or performance
- Lack of interest in hobbies and recreational activities
- Mood changes such as agitation or anxiety, fidgeting, crying, depression, lying in bed more often or sleeping more than usual.
- Asking for more money for questionable reasons or missing money or valuables
- Wearing long-sleeved shirts in warm weather (associated with IV use)

“Olivia died from an Accidental Hydromorphone Intoxication. At just 15 years old, she had such a bright future. She was a Grade 9 High Honour student who had a part-time job. As a typical teen, I knew she would experiment and make some mistakes. Not once did I think she would die from her mistakes.”

– Dale Jollota, Olivia’s mother and founder of the Olivia Jollota Memorial Trust.
Did you know that you are one of the most powerful influences in your child’s life?

Talking to your children early and often about important issues such as drug use can not only raise their awareness and educate them – it can also remind them how much you care.
Protective factors and resilience - how they can help

**Protective factors** are factors that decrease the likelihood of an individual developing problematic substance use or health problems associated with substance use. There is growing evidence that protective factors, such as a strong parent-child bond can reduce risk and boost resilience in children.

**Resilience** is commonly recognized as a protective factor against problematic substance use among youth. Resilience refers to the capacity to bounce back from adversity. Resilient individuals, families and communities are more able to cope with difficulties and adversities than those with less resilience.  

Building resilience involves developing skills such as problem solving and coping as well as improving self-confidence.

Connectedness to school, positive relationships with caring adults and supportive peers, can all enhance a young person’s ability to be resilient and cope with everyday responsibilities and challenges they face navigating their way through the teenage years - including the choices they make about substance use.

How do I talk to my kids about opioids?

Having meaningful, ongoing conversations about substance use, including opioids, is an essential part of helping to keep your son or daughter healthy and safe. Here are a few tips on how to foster mutual understanding and break through communication barriers so that you and your child can feel more connected to one another.

Get ready to talk to your child with these suggestions

Find out what your children know (or think they know) about opioids. Ask questions such as:

- What have you heard about opioids?
- What do you know about them and how addictive they are compared to other substances? Where did you get this information?
- Does anyone in your school take or sell pills? Do any of your friends?
- Have you ever been offered a pill? If so, what did you say? If not, what would you say?
- What are the signs of an overdose? What would you do if you witnessed someone overdosing?

---

15 CPHO Report on the Health Status of Canadians 2018
Use open-ended questions like: “What do you think motivates kids to take prescription pills recreationally?” or “What do you think causes people to overdose?”

Use active listening. Be curious as to what your teen or young adult thinks about substance use.

Establish eye contact. Reflect back what you hear to let your child know you heard what was said. Reflections do not mean that you necessarily agree, but that you understand what your child was trying to convey. (Example: “You’re concerned that some of the guys at your school are drinking and taking pain pills.”)

Choose a good time and place. Look for opportunities to talk when both you and your child are most receptive. While it may be tempting to start a conversation when your child is rushing off to school or work, it is not ideal. Some parents find taking a walk, going for a drive or working on chores together are good times for conversations.

Talk about the short - and long-term effects drugs can have on his or her mental and physical health, safety and ability to make good decisions.

Talk about their future plans. Ask your child what might happen if they make a choice to experiment with opioids. This gets your child to think about the future, and what their personal boundaries are around substance use.

Offer empathy & support. Let your child know you understand the teen years can be tough. Acknowledge that everyone struggles sometimes, but substances are not a useful or healthy way to cope with problems, no matter how normalized they may seem. Remind them that you are always there for support and guidance and that it’s important to you that they are healthy, happy and making smart and safe choices.

Understand your influence as a parent. Teens say that when it comes to making choices about whether to use alcohol and other drugs, their parents are the most important influencers. Clearly communicate that you do not want them to use illegal drugs of any kind, or anyone else’s medications. Talk about how this can be dangerous because they were prescribed to an individual for a specific purpose, and they could be harmful if taken incorrectly.

Consider Non-Opioid Alternatives for Managing Pain from Injury

If you take your son or daughter to the emergency room for a broken bone or other injury or for dental surgery, they may receive a prescription for an opioid painkiller. Ask your healthcare provider whether there are any alternatives to ease the pain that don’t involve opioids. Communicate your concern to the medical professional and don’t be afraid to speak up on behalf of your teen or young adult.
What if my child is using opioids problematically?

The following information has been provided by the Center for Addiction and Mental Health (CAMH):

If you think your teen may be improperly using opioids:

- **Pick a good time to raise the issue** – when people are calm and there are no distractions. Raising the issue when you are angry or when the young person is under the influence of painkillers is not a good idea.

- **Let your teen know you care**, and that is why you are raising the issue.

- **Refer to specific events.** Talk about the problematic behaviour in a factual, honest, but tactful way. For example, “I’m really concerned about you – you didn’t seem to be yourself when you came home last night” is better than “I think you’ve been using Dad’s painkillers to get high.”

- **If you are unsure whether your teen is using painkillers, check it out in a concerned way.** Accusations can lead the person to deny a problem, even if one exists. Ask questions that encourage your teen to talk rather than give yes or no answers.

- **Focus your comments** on the effects the teen’s use of painkillers has on you, on others in the family and on your teen.

- **Offer support.** Let your teen know that you are prepared to help change the things that may be contributing to his or her use of opioids.

- **Get support** from someone you trust, such as a family member, a friend, a counsellor, your doctor or a religious leader.

- **Learn as much as you can** about prescription painkillers and look for the help that may be available in your community.
REDUCE HARM

“It has been proven that those who engage in harm reduction services are more likely to engage in ongoing treatment as a result of accessing these services”[17]

How do I reduce the risk of harm?

While your goal is to help your child stop using opioids, there are techniques you should know about to reduce the risk of harm if she or he is still using them.

Ensure Safety First

Warn your child about combining opioids with other substances.

People who use opioids may do so in combination with other substances such as stimulants (i.e. Adderall®, cocaine, meth) and depressants (i.e. benzodiazepines, alcohol, sleep medications). The majority of opioid related overdose deaths are now being caused by fentanyl or fentanyl analogues such as carfentanil.

Have a Safety Plan.

- While not endorsing the use of substances, it’s important to accept the reality of it and focus on reducing harmful consequences. Discussing a safety plan with your son or daughter as a precautionary measure can help reduce those opportunities for accidental overdose, for example, only consuming drugs at supervised consumption or overdose prevention sites. A safety plan can help reduce the risks, as well as letting your child know that you care and you want to stay involved in their life in a positive way.

- Be certain that your son or daughter understands that the **Good Samaritan Drug Overdose Act** protects anyone who seeks help for someone experiencing an overdose. It applies to anyone seeking emergency support during an overdose, including the person experiencing an overdose.

- Ensure you have access to Naloxone (known by the brand name Narcan®) as an additional safety precaution. Naloxone is a medication that reverses an overdose. It’s important to know the signs of an overdose and how to administer Naloxone in the event of an emergency.

---

“Ausing opioids, whether heroin or prescription drugs has always been problematic for youth. Rates of addiction and harms such as overdose are very high with these drugs. Now that these drugs can be cut with adulterants such as fentanyl and carfentanil, the risks have never been higher. If a person does choose to use these drugs, it is really important that you and your loved ones carry a naloxone (Narcan) kit - this could be lifesaving.” – Tony P. George, MD FRCPC

---

A Message of Hope

First and foremost, as parents and caregivers, it is important to understand that there are many options to help your child if they are demonstrating signs of problematic opioid use. By engaging with professionals who know what to look for, and what course of action would be best for your child, you are helping to move your teen along the continuum of wellness.

We understand how difficult it might be to stay positive through this process, but both you and your child need to know there is light at the end of that tunnel. This is a journey - one that you, your child and your family take together.

Keep listening, keep moving forward and keep up that hope that your child will return to a place of health and overall wellbeing.
What ‘next steps’ can I take?

Problematic opioid use is a complex issue, and seeking the most helpful next steps can be complicated. As with any drug, the spectrum of care goes from prevention, to identification, to intervention, to treatment and to follow up.

Getting an Evaluation

An evaluation can determine what kind of care your child needs.

To determine the best course of action for you and your child, an evaluation with a Certified Addictions Professional is the first step. Your child’s primary care physician or pediatrician may be able to suggest a reliable professional to conduct evaluations.

This person will inquire about your child’s medical; psychological and family history; substances used; patterns of use; impact on functioning in school, work and/or in other important relationships; treatment history, if any; etc. Various assessments may be used including a urine screen.

If you live in a remote or rural area, finding professional help may be more challenging.

You can find a list of regional resources on the Drug Free Kids Canada website.

Health Canada also provides a list of regional health services: Get help with problematic substance use

Treatment Options

What options are available?

For those who do need more help, treatment occurs in a variety of settings, in different forms and for different lengths of time. An Addictions Professional will recommend the best level of care to meet your child’s needs. They will guide you through available treatment options, taking into consideration other important factors like location and cost. Whether in an outpatient or inpatient setting, treatment programs usually address an individual’s physical, psychological, emotional and social issues in addition to substance use.

For information about the different treatment options available in Canada, consult the CCSA resource Finding Quality Addiction Care in Canada: Drug and Alcohol Treatment Guide.

Note that if your child has mental health issues, such as depression, anxiety, ADHD or bipolar disorder, it’s important to find treatment that addresses both simultaneously.
Every young person is different and you and your health care providers will be able to select the best plan for your child.

In addition to specialized care professionals, don’t forget that there are other support systems in place to help you. Consider family and peer support groups, workplace supported counseling, school guidance counselors, and spiritual support.

---

### CONTINUUM OF CARE

<p>| | | | | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>HARM REDUCTION</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Screening</td>
<td>Assessment</td>
<td>Brief Interventions</td>
<td>Rapid Access Clinics</td>
<td>Community Outreach</td>
<td>Withdrawal Management</td>
<td>Pharmacological Interventions</td>
<td>Psychosocial Interventions</td>
<td>Recovery, Sustaining Wellness &amp; Ongoing Care</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The Canadian Centre on Substance Use and Addiction has prepared the chart above to explain the full range of services that provide a continuum of care.

Not every young person will need all of these services, but the components sometimes overlap and are usually most effective when used together.

To learn more, consult the CCSA’s **Best Practices for the Treatment of Opioid Use Disorder**

It’s important to note that not everyone needs formal treatment as some people do quite well making lifestyle changes.

---

“Problematic opioid use is also very treatable – and effective medications like Suboxone, Methadone and Naltrexone as well as talk therapies are available to combat these problems”

– Tony P. George, MD FRCPC
What are the signs?

An overdose can happen when opioid use suppresses breathing in a way that oxygen can’t reach vital organs, and the body begins to shut down. It’s important to note that an overdose can occur anywhere from 20 minutes to 2 full hours after drug use. Signs of an overdose include:

- Blue lips or nails
- Dizziness and confusion
- Can’t be woken up
- Choking, gurgling or snoring sounds
- Slow, weak or no breathing
- Drowsiness or difficulty staying awake
WHAT DO I DO IF I SUSPECT AN OVERDOSE?

Call 911 or your local emergency number
Administer Naloxone if you have it
Stay with the person until help arrives

What is Naloxone (NARCAN®)?

Naloxone is a safe, fast acting and non-dependent drug used to temporarily reverse the effects of opioid overdoses. It is available at pharmacies, often for no cost, depending on the jurisdiction.

Does Naloxone work?

If your teen is overdosing you can administer Naloxone regardless of their age and it may save their life. It only works if there are opioids in the system and can do no harm.

What types of Naloxone kits are available?

In Canada, two types of take-home kits are available. NARCAN® is the brand that produces the Naxalone kits for home use.

Naloxone nasal spray is sprayed directly into the nose, where it is absorbed. It starts to take effect in 2 to 3 minutes. Learn how to give naloxone spray (video).

Naloxone injectable is injected into any muscle in the body, such as the arm or thigh. It starts to take effect in 3 to 5 minutes. Learn how to give a naloxone injection (video).18

The Harm Reduction Coalition offers more detailed information on both ways you can administer Naloxone as an overdose response.

---

18 Health Canada 2018-10-24
1. Call 911
If you suspect an overdose and your loved one is unresponsive, call 911. If you must leave the person alone to make the call, put them in the recovery position: **on their side with the bottom arm under the head and top leg crossed over the body to avoid aspiration – vomit that blocks their airway.** (See visual below) Give the address or location and as much information as you can (i.e., unconscious, not breathing, drugs used, etc.).

2. Administer Naloxone
Note that Naloxone is only effective in the case of an opioid overdose. However, if you are unsure of the substance(s) involved, it’s best to err on the side of caution and administer it. Naloxone is not known to cause any harm in the case of a non-opioid overdose. Be aware that recovery may be short lived, so the victim may wake up and then crash again. If this occurs, administer the Naloxone again and repeat until help arrives.

3. Conduct Rescue Breathing
If the person has labored breathing or is not breathing at all, it is vital to conduct rescue breathing. Tilt the head back, pinch the nose closed and give one slow breath every five seconds until the person resumes breathing on their own or until the paramedics arrive. Watch to see that their chest rises and falls with each breath.

4. Comfort and Support
Once the person is breathing on their own, place them in the recovery position until paramedics arrive. Comfort the person as he or she may be confused, upset or going through withdrawal (feeling sick from lack of opioids if their body is dependent on them). When they have been revived, do not allow them to use drugs.19

---

19 Health Canada, Opioid Overdoses, What to do Fact Sheet, 2019-04-11
As a parent or caregiver, you know your child best. You want them to be safe, happy and healthy as they navigate their way through their adolescent years.

Sometimes young people make unhealthy choices, and sometimes those choices include improperly using prescription opioids or taking risks with street drugs that contain illegal fentanyl or fentanyl analogues.

Create a supportive environment where your teen knows that they are loved and that they have opportunities to take part in meaningful activities (e.g., art, sports, cooking, community groups that are matched to their gender and sexual orientation).

By keeping the doors of communication open with your child and talking with them openly and frequently about what may be going on in their social circles, you create a positive opportunity to collaborate with your child in his or her decisions to make healthy choices.

You’ll also have the best chance of noticing when something is ‘just not right’ with their actions, behaviours or demeanor. If you are concerned your child may be improperly using opioids, or at risk of developing a problematic opioid use disorder, don’t wait, get the help you need.

“Opioids and other drugs can ruin lives. They ruined mine and cost some of my closest friends their life. Thankfully, I am now in recovery - but that is only happening because I have an amazing support system. My parents, friends and We the Parents have given me tremendous help and I wouldn’t be in recovery without them. Now it’s up to me to stay healthy.” – Chloe, age 19

TALK; TALK OFTEN & ACTIVELY LISTEN.

Please feel free to share this brochure with friends, family, school and community.
1. **Have on-going conversations** with your teen early and often about the risks of substance use, especially opioids (i.e., prescription pain medications like Percocet®, as well as street drugs like illegal fentanyl and heroin). We’ve included several suggestions on how to begin and continue a conversation with your child about opioids on page 15.

2. **Consult a medical practitioner for non-opioid alternatives to manage your child’s pain** from any injuries, dental work or other situations requiring pain management.

3. **Monitor, secure and properly dispose of any prescription pain medications in your home.** Never share your own medications with others. While it may be tempting to keep pain medications “just in case you might need them,” the safer course of action is to dispose of all expired or unused medication since family and friends are the primary source of prescription pain pills.

4. **Get an evaluation to determine your treatment options** if your child is using opioids or other medications problematically. Comprehensive, evidence-based treatment works — the earlier you intervene and take action, the better.

5. **Know the signs of problematic use of opioids** such as pinpoint pupils, fatigue, weight loss, drug paraphernalia, wearing long sleeves, etc.

6. **Know the signs of an overdose.** Knowing the signs and understanding what to do can potentially save a life.

7. **Learn how to use Naloxone (Narcan®)** as a precautionary measure if your child is problematically using opioids.
Drug Free Kids Canada wants to educate, inspire, and support parents to prevent substance use by youth. Our website, drugfreekidscanada.org provides the information parents and guardians need to understand the ever-changing drug landscape, along with evidence based resources to help you understand and deal with teen substance use.

Join our community of parents, caregivers and families helping one another with resources, mentorship and support. You can contact us at info@drugfreekidscanada.org

DONATE TO SUPPORT DFK:
Resources like this Opioid Kit are available free of charge because of generous donors. Please consider making a donation at drugfreekidscanada.org. Help us continue to help Canadian families. We appreciate your support.

ADDITIONAL RESOURCES:

Health Canada – Opioids

Health Canada’s national and provincial resources

Get Help with Problematic Substance Use

Signs of Opioid Overdose - Wallet Card

Canadian Centre on Substance Use and Addiction

Finding Quality Addiction Care in Canada Drug and Alcohol Treatment Guide

Best Practices across the Continuum of Care for the Treatment of Opioid Use Disorder

Treatment of Opioid Use Disorder for Youth
WHERE FAMILIES COME FOR HELP

drugfreekidscanada.org

Our sincere thanks to:

Center on Addiction
Partnership for Drug-Free Kids

For providing the original content and allowing us to adapt it for use in Canada.

This project has been made possible in part by the Government of Canada.