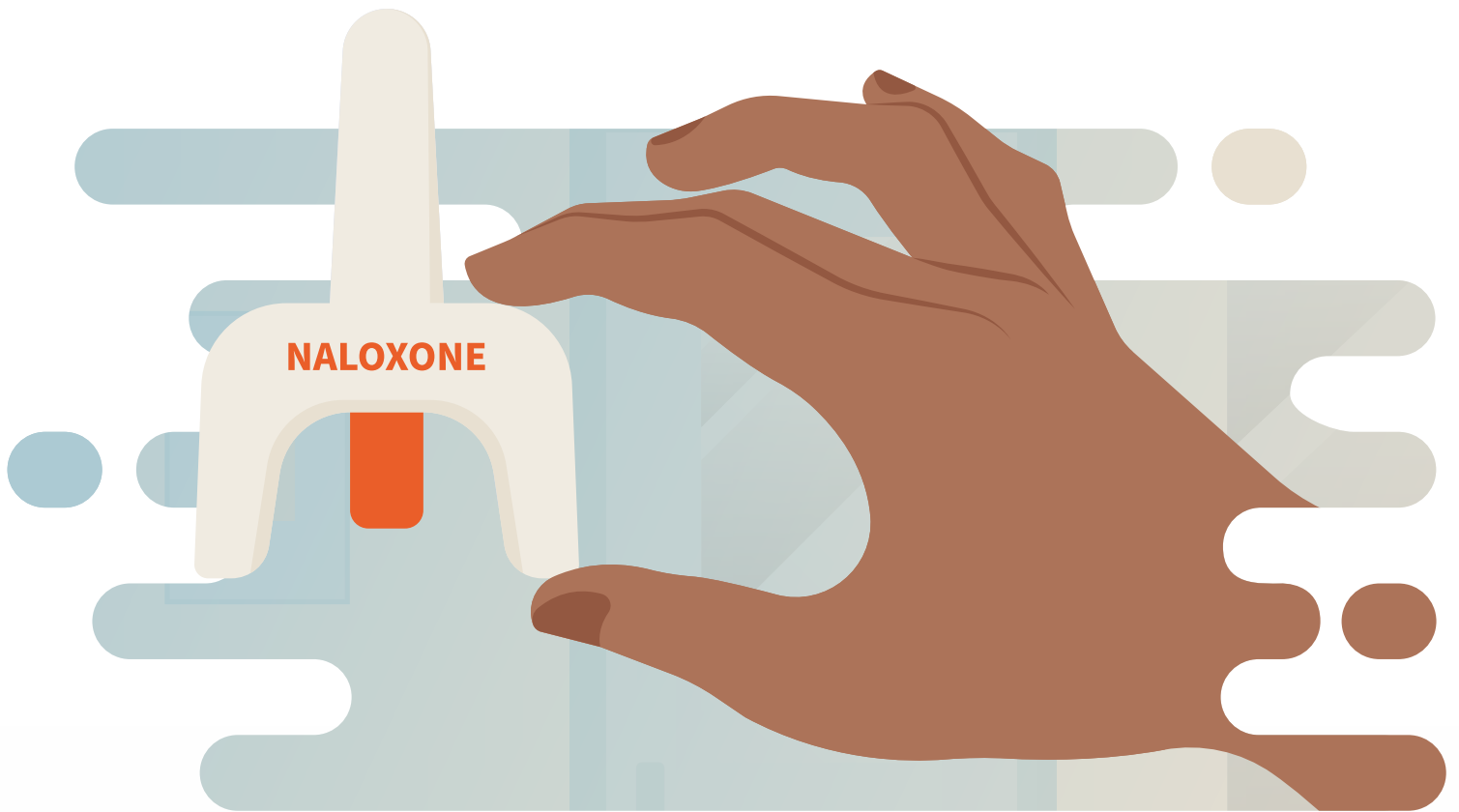


Over-the-Counter Naloxone

Messaging Guide



The Over-the-Counter Naloxone Messaging Guide provides community behavioral health organizations with the tools and strategies to educate their communities on the importance of carrying naloxone to save the life of someone experiencing an overdose.

NATIONAL COUNCIL
for Mental Wellbeing

About the Project

In March 2023, the National Council for Mental Wellbeing, with support from the Centers for Disease Control and Prevention (CDC), launched [Building Capacity Through Community Behavioral Health Organizations to Prevent Overdose](#). This initiative provided support to 25 community behavioral health organizations engaged in overdose prevention efforts. The organizations presented robust responses to the ongoing opioid epidemic, including evidence-based strategies for overdose prevention and linkage to care.

The National Council provided funding, training and technical assistance to enhance and expand critical services that reduce the risk of overdose. As a part of this effort, the National Council has created this Over-the-Counter Naloxone Messaging Guide. The guide supports community behavioral health organizations in communicating with their communities about the availability of over-the-counter naloxone and the importance of carrying it and knowing how to use it.

Acknowledgements

The National Council for Mental Wellbeing developed this message guide with support from the Centers for Disease Control and Prevention. The project team would like to thank the key informants who devoted their time, expertise and resources to inform this guide. A complete list of key informants can be found in [Appendix B. Key Informants](#)

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This publication was supported by the Centers for Disease Control and Prevention (CDC) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$3 million with 100% funded by CDC/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement by, CDC/HHS or the U.S. government.

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Introduction

Naloxone is a lifesaving opioid overdose reversal medication that restores normal breathing by blocking the effects of opioids in a person who has overdosed (Centers for Disease Control and Prevention [CDC], 2024). In the past, naloxone was only available by prescription, preventing widespread access. In March 2023, the Food and Drug Administration (FDA) approved Narcan, a naloxone nasal spray, to be sold over the counter (OTC), the first naloxone product to be sold without a prescription (FDA, 2023a). In late 2023, the FDA approved OTC sales of a second naloxone nasal spray product, RiVive, as well as a generic naloxone nasal spray (FDA, 2023b).

Making naloxone available OTC was intended to increase its availability to the public, thereby increasing the likelihood of timely administration during an overdose. That removed one of several barriers to access. Other barriers include a lack of public awareness about OTC availability, the high cost of the medication, lack of access to locations that sell OTC naloxone, and continued stigmatization of those who seek naloxone. Also, the lack of linkages to care and secondary prevention services when naloxone is purchased in a retail environment continues to be a downside for CBHOs looking to inform people about the availability of OTC naloxone.

This resource provides CBHO staff with guidance and resources for communicating with people in their communities about the availability and usefulness of OTC naloxone. The topics covered include how to address stigma against naloxone through community education, strategies for developing effective messages about OTC naloxone, approaches to partnering with community stakeholders for message dissemination, and methods for evaluating and measuring the impact of messaging.



Important Messages About Naloxone

Despite its lifesaving potential, the use of naloxone is often stigmatized.

There are many sources of stigma about OTC naloxone that may affect its sale, purchase, or use. There are also effective ways you can address this stigma, mainly by educating the community about naloxone and dispelling common myths.

Stigma is a complex phenomenon affected by lived experiences, sociocultural practices and values, and influences such as federal, state and local policies. The World Health Organization (WHO) defines social stigma in the context of health as, “the negative association between a person or group of people who share certain characteristics and a specific disease” (WHO, 2020).

Naloxone Is First Aid

People may be wary of buying and carrying naloxone because they believe that it will signal to others that they use opioids or other drugs. To combat this perception, normalize naloxone as a standard first aid intervention. With so many people dying of opioid overdoses every year, health officials are advising the public to keep naloxone in their first aid kits at home and in the workplace (Chencharik, 2023). Promoting naloxone as a part of basic first aid can decrease the stigma around it.



What community members need to know

- **Naloxone is an effective OTC medication that helps reverse an opioid overdose.** It does not promote or condone drug use: It prevents death. Knowing how to use naloxone should be a part of your first-aid toolkit in the same way that you may know CPR, the Heimlich maneuver, how to use an AED, or how to use an EpiPen. Like having a fire extinguisher or carbon monoxide alarm in your home or workplace, having naloxone available can save lives.
- **Naloxone is a legal medication.** All states have access laws that allow naloxone to be dispensed without a patient-specific prescription (i.e., a standing order), prescribing to a person other than the one at risk of overdose, and pharmacists to dispense naloxone.
- **There are laws that protect individuals who respond to an overdose by administering naloxone.** In 48 states and Washington, D.C., there are Good Samaritan laws that protect people who respond to overdose and call 911 from liability, arrest or prosecution. Only Kansas and Wyoming do not have Good Samaritan laws (Legislative Analysis and Public Policy Association, 2024). However, Good Samaritan laws vary greatly from state to state, so it is important for people to know the laws of their state. People may still be arrested, or even charged, depending on the jurisdiction. For example, in California, the Good Samaritan law does not protect you if you are on probation or parole.



Where to Find Free Naloxone

While naloxone is now available OTC without associated costs for medical visits, it can cost up to \$50 for two doses. If you cannot afford the over-the-counter price, naloxone is often available at low or no cost from clinics, by mail, through secondary prevention organizations, at public health vending machines, and even some local libraries. [The National Harm Reduction Coalition's naloxone finder](#) and [NEXT Distro's naloxone locator](#) are useful online resources for accessing free or low-cost naloxone.

Anyone Can Recognize Overdose and Administer Naloxone

Community members may have limited or incorrect knowledge about how to identify an overdose and how to administer naloxone to reverse it. Providing brief and direct information helps them understand what to look for and what to do during an overdose event.



What community members need to know

- Signs of an overdose include:
 - Shallow breathing
 - Gurgling and snoring sounds
 - Cold skin
 - Fingernails and extremities turning blue
 - Pinpoint pupils
 - Nonresponse to stimuli
- When these signs are present, administer naloxone to reverse the overdose.
- After giving someone naloxone, let them know that they were overdosing and that you gave them naloxone. The person should not use opioids again for several hours or for as long as possible.



Naloxone Is the First Step — Other Steps Are Needed After Overdose

Naloxone has a shorter half-life than opioids, and it will wear off in 30 to 90 minutes. This means that a person could potentially go back into the overdose state even if they do not use more opioids. If they do use more opioids while the naloxone is in their system, the opioids will have no effect but will increase the total amount of opioids in their system, making it more likely that an overdose will occur again when the naloxone wears off.



What community members need to know

- The person will experience withdrawal symptoms that can be mitigated by medical professionals at a hospital. If they refuse to go to the hospital, they should not be left alone in case overdose symptoms reoccur when the naloxone wears off. All individuals should be monitored for six to 12 hours to make sure that the effects of longer-acting opioids are not causing harm.

Naloxone Works by Targeting Opioids in the Bloodstream

Many people have misconceptions about how overdose reversal medication works, because they don't understand that opioids are in the person's bloodstream and are acting on the lungs rather than the heart. These misconceptions can lead to inappropriate overdose reversal strategies.



What community members need to know

The following actions can be harmful and should not be attempted when responding to an overdose:

- **Do not induce vomiting in a person who is overdosing.**
 - A person cannot vomit the opioids that they have ingested, because the opioids are in the person's bloodstream, not their stomach. Vomiting can also increase the risk of aspiration and asphyxiation.
- **Do not give a stimulant to the person who is overdosing.**
 - Stimulants can make the situation worse by causing the heart to beat faster and use what little oxygen is left in the body. The overdosing person's heart is beating normally, and their heart rate does not need to be sped up.



What community members need to know (*continued*)

Do not cause pain or shock in an attempt to reverse an overdose.

- Slapping the person who is overdosing or placing them in a bathtub with ice will cause more harm. While these methods can wake the person up from a sedated state or a deep sleep, they will not reverse an overdose. In fact, placing the person in a cold bath can cause them to drown or become hypothermic.

Naloxone Does Not Lead to More Drug Use

Many people mistakenly believe that providing naloxone enables continued drug use, that first responders must keep giving naloxone to the same people repeatedly, or that individuals who require naloxone are not deserving of medical intervention. This can prevent people from seeking out naloxone, both for themselves and for others, and can also increase stigma toward naloxone in the community.



What community members need to know

- Overdose reversal with naloxone does not lead to more drug use or riskier drug use behaviors.
- Research shows that participating in take-home naloxone training can lead to a decrease in drug use (Jones et al. 2017; Wagner et al., 2010).
- Other research shows that most individuals who overdose do not have repeated overdoses (Laroche et al., 2016; Suffoletto & Zeigler, 2020).

Naloxone Does Not Make People Violent

There is a common misconception that administering naloxone makes people violent. This can add to the stigma against naloxone and make people reluctant to carry or administer it.



What community members need to know

- People are often disoriented and confused after being administered naloxone. Therefore, it is important to inform the person that they have just been revived from a potential overdose.
- It is rare that a person wakes up combative after being given naloxone, and it is extremely unlikely that they will be combative if they are given the naloxone by someone that they know and trust (Buajordet et al., 2004; Fisher et al., 2016).
- The National Council's [Naloxone Training Video](#) explains how to recognize the signs of an overdose, administer naloxone, and provide post-naloxone revival care. This resource can be shared with community members to educate them on how to use naloxone to revive an individual from an overdose.



Creating and Tailoring Your Messages

In creating messaging to encourage the acceptance of naloxone as a tool for first aid, consider the “five Ws and one H” (5W1H): who, what, why, when, where and how. This 5W1H method can be an effective tool for developing a comprehensive public health communications campaign for naloxone.

Who

Determine whom the campaign is aimed at and identify the target audience of messages. This could include specific demographic categories such as age groups, geographic locations or communities at higher risk.

Access to and use of naloxone saves lives when there are empowered upstanders – people prepared to step in and potentially save a life – who use it. The more people who know about naloxone, where to find it and how to use it, the more lives can be saved. When crafting messages, think about who in your community can step up.

Target your messaging campaigns toward these segments of your community.



Consider these questions:

- Who is most impacted by opioid overdose?
 - Are there specific neighborhoods or groups of people at greater risk of an overdose?
- Who needs access to naloxone?
- Who needs to know how to correctly use naloxone?
- Who are the people and the organizations that provide care in your community?
- Who are or can be your partners in promoting naloxone as a lifesaving medication?

What

Clearly describe the public health issue the campaign will address. To tailor the content, or what the messaging will say, start by gathering data about overdoses in your community.



Consider:

- What does the local data say about overdoses and overdose deaths?
- What are the best strategies to reach the people who need access to naloxone?

What you learn from local data will inform the messaging, language used, and methods for encouraging access to OTC naloxone. For example, if the population at risk is young people who are non-English speakers, the messaging could be tailored to social media and high schools and use appropriate language and vocabulary.

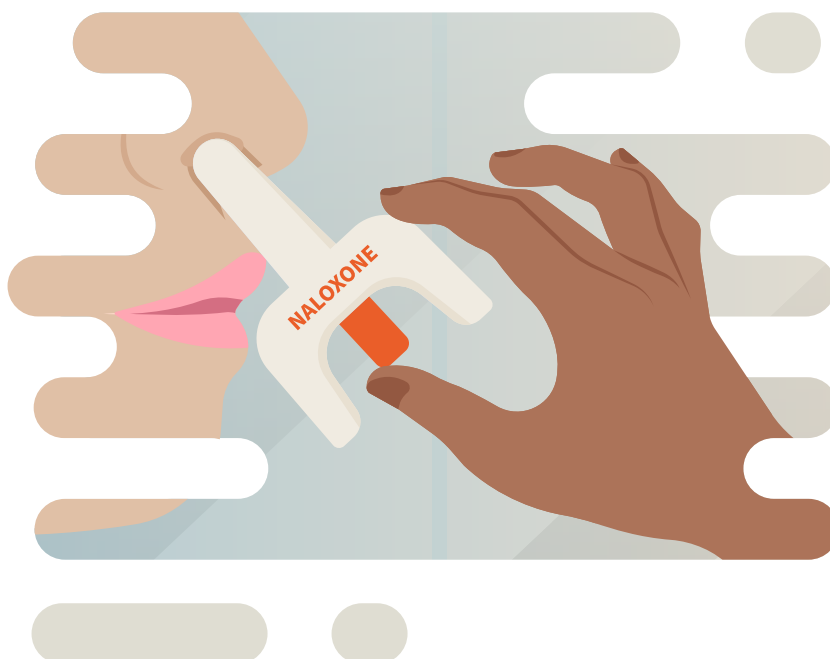


Person-first Language

The secondary prevention movement encourages the use of person-centered language. Using person-centered language empowers and expresses care for the person in a strengths-based, affirmative way. People are more than their health condition; using person-centered language in messaging can combat stigma.

Examples of person-first language include “person who uses drugs” instead of “fiend,” “junkie” or “addict,” and “person who is formerly incarcerated” instead of “felon.”

Messaging should include empowering statements about upstanders who step in with naloxone when needed, and how upstanders can help save the lives of family members, loved ones, and others in the community. It should prepare people with knowledge of how to use naloxone and provide information about its OTC availability.



Sample messaging strategies

Below are some sample messaging strategies:

- **Focus on empowerment and secondary prevention.** Highlight how naloxone can be a critical tool for safety.
- **Emphasize the lifesaving potential of naloxone and the importance of being prepared for emergencies.** Use compassionate and supportive language.
- **Collaborate with community leaders to develop culturally sensitive messages.** Address specific concerns and barriers that may exist within these communities.
- **Provide materials in multiple languages.** Use clear, simple language and visuals to convey the message effectively.
- **Frame the messaging around compassion, community support and the moral imperative to save lives.** Engage faith leaders to endorse and disseminate information.

Why

Messages should communicate a compelling reason for using naloxone to become an upstander for overdose reversal. This involves describing how carrying and using naloxone can save lives in the event of an overdose.

Consider:

- Why is naloxone first aid?
- Why is naloxone access important in your community?
- Why is it important to be an upstander?



Naloxone is not used by the person who is overdosing, but by those who are present at the scene. Messaging should emphasize that to save lives, people should purchase and carry naloxone and keep it in their first aid kit

When

When messaging is shared can be critical to its success. Establish a campaign timeline that includes key milestones, launch dates and duration.



Consider:

- When will you disseminate messages about OTC naloxone?
- Does your naloxone messaging campaign have a start or end date?
- Can the campaign coincide with other events or initiatives within the community related to naloxone education and distribution?

Where

The locations where messaging is placed affect who can access them and how they are accessed. Decide where the campaign will be implemented, such as specific regions, cities or communities. Other potential venues include physical locations (e.g., clinics, schools) and virtual spaces (e.g., social media, websites).

Tailor messaging locations to places the target audience will visit frequently. For example, if your local data shows that older adults are at a greater risk of overdose, messaging could be placed at adults' day health centers or local faith communities with in-person programming and workshops.



Consider:

- Where will your messaging appear (e.g., billboards, social media, local health care settings, faith community settings, barbershops, nail salons, libraries, workplace settings)?
- Which individuals or organizations will distribute the messaging in the community?

How

Outline strategies and specific actions to achieve the campaign's objectives. This could include educational programs, media campaigns, policy advocacy and community events about OTC naloxone.



Consider:

- Who can develop and test communication concepts, messages, and materials with the main stakeholders?
- Who are credible messengers for the target audience?
- What funding, personnel, materials or technology are needed for the campaign?

Resource: Strategic Communications Worksheet

See [Appendix A](#) for a Strategic Communications Worksheet you can use to plan your OTC naloxone messaging campaign. For each target audience (who), use the questions and columns to the right to plan the what, why, where, when and how.



Partnering With Community Resources

Building partnerships with local organizations and connecting to other community resources can help make messaging campaigns about OTC naloxone more successful within the community.

When building partnerships with community stakeholders, establishing trust and demonstrating respect for their expertise is crucial. CBHOs and Certified Community Behavioral Health Clinics (CCBHCs) can strengthen relationships by participating in regular meetings, hosting trainings and collaborative activities and maintaining open channels of communication. CBHOs can also provide capacity building and training to partners on naloxone use and secondary prevention strategies to break down stereotypes and stigma.

It's also important to be flexible and respond to partners' needs and suggestions. This could mean adjusting a messaging campaign based on partner feedback. Finally, develop strategies to sustain the partnership, plan for long-term engagement with partner organizations and secure funding to continue it.

The following are some potential partners and strategies for engaging them to broaden the reach of your OTC naloxone messaging campaign:

- **Health care providers:** Health care providers can focus on distributing messages related to improving public and personal health through the widespread use of OTC naloxone. Work with hospitals, clinics and pharmacies to integrate messaging campaign materials into their services.
- **Local health departments:** Local health departments can provide messaging and education about OTC naloxone through their community outreach efforts and existing overdose prevention trainings and programming.
- **Schools and parent groups:** Collaborate with educational institutions and parent-teacher associations to educate youth and parents about OTC naloxone. Schools and parent groups can focus on raising awareness and advocating for OTC naloxone use, as well as providing education and support within their communities.
- **Community groups:** Partner with local nonprofits, support groups and service organizations to leverage their networks and trust within the community in disseminating campaign messages. Community group partners can help ensure that the campaign is accessible by supporting you in tailoring messages to the populations they serve.
- **Faith-based organizations:** Faith-based organizations can support the messaging campaign by reducing stigma and promoting OTC naloxone use and secondary prevention within their congregations.
- **Law enforcement and first responders:** Engage with police departments and emergency medical services to ensure they are equipped with information about OTC naloxone. Law enforcement and first responders can be a resource for spreading the message about OTC naloxone when they encounter PWUD or friends and family of PWUD.

Evaluating the Impact of Messaging

As you distribute education and messaging related to OTC naloxone, it is important to evaluate the impact of your outreach efforts. Evaluating the effectiveness of messaging strategies allows your CBHO to adapt and improve current approaches for continued success. The following are some strategies for assessing the effectiveness of OTC naloxone messaging to promote continuous improvement:

- **Surveys and feedback:** Collect feedback from the target audience through surveys and focus groups to understand the impact of messaging and identify areas for improvement. These direct communications can indicate whether the audience is receiving the messaging as intended. Data collected from the target audience should reflect key messages, such as knowledge about overdose and overdose reversal, willingness to purchase and carry naloxone, and whether naloxone is readily available and accessible.
- **Data analysis:** Successful messaging and education campaigns can have a direct impact on overdose and overdose reversal trends, which can be seen through data. Monitor key metrics, such as the number of overdose reversals reported and changes in community attitudes toward naloxone. You can access data about overdoses and overdose reversals in the community through partners such as health departments, first responders and secondary prevention organizations.
- **Community engagement:** Maintain open lines of communication with community partners and stakeholders to gather qualitative insights and success stories. Connect with them frequently for their suggestions and feedback on how to improve messaging for populations they serve.
- **Iterative improvement:** Use the data and feedback collected to refine and enhance your messaging strategy continuously. Messaging campaigns to educate and combat stigma against naloxone are most effective when they are sustained rather than being a single occurrence. Continued monitoring and evaluation of the impact of messaging will help you ensure that messages achieve the intended outcomes.

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Appendix A.

Strategic Communications Worksheet

Target Audience(s)	Communication Objectives	Audience Readiness	Key Messages	Trusted Messengers	Communication Channels
Who do we need to reach?	What do we want our messages to help them to do?	What is the audience's perspective on our issue? What do they need to know to move in our direction?	What does the audience care about? What do they need to hear?	Who are the trusted messengers for this audience?	Which are the best methods or channels to reach this audience?*

*Consider channels such as annual reports, billboards, community forums, contests/award programs, direct mail, editorials, email, endorsements, feature stories, letters to the editor, media tours, news conferences, newsletters, position papers, posters, presentations, public hearings, social media, talk/public affairs shows, public service announcements and websites.

Appendix B. Key Informants

Name	Title	Organization	State
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