Hi - I'm Dianne. It is awesome to see so many of you here.

I wouldn't have come to a Summit like this one. I might have seen the flier with the time, date and place. I might have seen the emails, and faxes encouraging me to attend. But, I would not have come. After all, I didn't need to worry about drug abuse with my family. Why would I need to know about or carry Naloxone? Our family wasn't perfect but drugs would never be a problem. My children were raised better. We went to church. My children all wore Just Say No t-shirts. My boys were A students. John was in Beta Club. Michael attended Governor's School. Marcus was accepted at School of Science and Math in Durham. They were involved in sports and received academic awards. I was a baseball mom driving a stationwagon full of children to out of town ball games. I went to PTA meetings. I made cookies for bake sales and volunteered for school events. I knew all my children's friends and my home was the site of sleep overs and pizza parties. I was involved in my children's education. We went to the library and museums, worked on science projects and went on week end field trips when they were studying NC history. When we went on vacations my children were introduced to different cultures, religions and points of view. Nope, I didn't need to learn about drugs and the antidote Naloxone. That was for "those" people. The one's whose children were at risk. Certainly not mine.

But, here I am today – I AM one of "those" people. I am the mother of a son who died from a heroin overdose and I advocate for science based education about drugs in the school system and for Naloxone to be readily available to teachers, law enforcement, parents, friends, relatives and those who suffer from addiction. I should have attended the Town Hall meetings and Summits like this one.

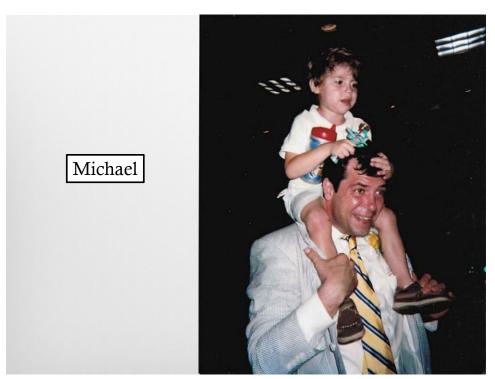
## So what DOES the face of overdose look like?



This is Jeff. His mother is a social worker whose caseload was working with clients who had contracted HIV. His father a small business owner. Jeff was their only child. He loved surfing and was an avid participant in pool tournaments with his dad. He planned to partner with his father in the family business. He was 27. Jeff was found dead in the yard of a stranger where he had lain for more than four hours. Naloxone could have saved his life.



This is Shelly. Her father a minister. Her mother a Pediatric physical therapist. Shelly was an honor student, loved to play soccer, and attended school of science and math. Her teachers said she was the complete package. She spent her summers as a missionary with her family in 3<sup>rd</sup> world countries. She especially loved Africa. She was easily accepted into the college of her choice and she aspired to be a molecular biologist. Shelly wrote "Be kind to everyone and make other people feel good about themselves". Shelly was 19. Shelly was left by her friend to die in her dorm room. Naloxone would have saved her life.



This is Michael. His mother, a single parent, worked in law enforcement and later in an alcohol and drug treatment center. Michael was the oldest child with a Master's Degree in Social Work and Substance Abuse counseling. He developed a protocol for the treatment of Hepatitis C for patients who abuse substances and was gathering data to support treatment and providing second chances to this patient population. According to his nieces and nephews he also gave the best horsey back rides. This is my son - He was 40. Naloxone could have saved his life.

If Naloxone had been accessible and successful we might find Jeff today working with his father and riding the waves. Shelly might be a scientist who may have found the cure for addiction. Michael may have been instrumental in developing a cure for Hepatitis C had he finished his research.

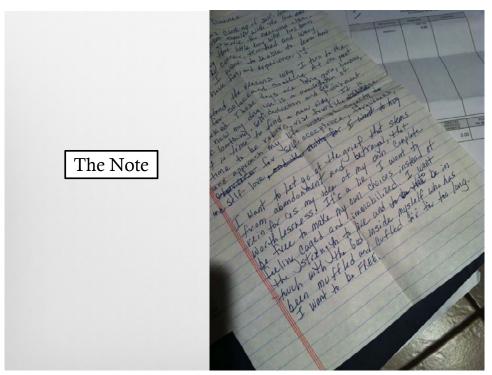
Who among us has never made a bad decision, never made a mistake. How many times have I said at some point - if I could only do it over again and know what I know now. THAT would be a second chance. I didn't have to die for my bad decisions but there are no second chances from the grave.

No intervention in medicine can more quickly, simply and easily bring someone back from the brink of death to full consciousness than Naloxone. Naloxone does not provide a high and is not toxic. NCHRC reports that they have exceeded their goal having than 332 successful overdose reversals with Naloxone. These have been given a second chance and can live out their dreams becoming valuable members of our communities.

Naloxone should be distributed across the state to schools, law enforcement, families and friends of those at risk. The need continues to increase as we see the numbers of those with addictions soar. The cost also continues to escalate with the increase in demand. At the same time resources are limited. Outreach efforts are limited because funds for manpower and this life saving drug Naloxone are provided only by donations. Current donations are not enough to meet the staffing needs or the number of Naloxone kits to be distributed to all who need them.

Today we are hearing from the professionals and experts who know and understand the unnecessary loss of life and the need for Naloxone as the rate of heroin addiction by first time users has skyrocketed. The high cost of Naloxone has prevented its widespread use. In some cases prices for the drug have increased by 50% or more.

Many, like me, talk about second chances and the immediate need for easy access to Naloxone. We speak for those who cannot. The most compelling voices are of those who have lost their battle and are unable to speak here. Many of us who have lost our children to overdose have found that they left behind their thoughts and feelings in the margins of books, on scraps of paper and on napkins. They are discovered in backpacks, dresser drawers, and the pockets of jeans and jackets never meant for us to find.



On white tablet paper my son wrote "I understand the reasons why I turn to heroin (the poppy) for solace and soothing. At one point it worked. Those days are long gone, and now my drug use is a manifestation of self-loathing, self destruction and self punishment. I want to let go of the grief that reinforces my idea of my own complete worthlessness! It is a lie. I want the strength to live and to be in touch with the God inside myself who has been muffled and cuffed for far too long. I want to be free!" Michael was writing about a second chance.

I am reminded of that woman who lives on the beach and after the tide goes out picks up the sand dollars that have been left behind – throwing them back in the ocean. She was approached by a stranger who said she was wasting her time - that some of these sand dollars would wash back up on the beach the next morning and she couldn't save them all. She quietly looked at him and raised her arm and threw the one she had in her hand back in the tide. She said "I saved that one". And we can save those afflicted with a substance disorder one at a time but only if we have the resources accessible to provide that second chance.

Thank you.