NEW YORK STATE | Department of Health

OVERDOSE PREVENTION DIGITAL TOOLKIT.

For partners preparing for the FIFA World Cup, America 250, and other 2026 mass gatherings in New York State.

PREPARED BY
New York State Department of Health
2026 Mass Gatherings Strategic Planning Committee
Overdose Prevention Workgroup

Version 1.0 · June 2026

June 10, 2026

Dear Colleague,

This summer marks one of the most significant convenings of visitors in New York's history. From June through July 2026, the NY/NJ area will host eight FIFA World Cup matches at MetLife Stadium in the New York/New Jersey metropolitan region, alongside official fan festivals, watch parties, and nightlife activity statewide. At the same time, we will commemorate the 250th anniversary of American independence with the nation's largest semiquincentennial events. These overlapping mass gatherings will bring millions of visitors, workers, and fans into our venues, neighborhoods, and entertainment districts.

Mass gatherings of this scale create unique overdose risks. According to the most recent intelligence assessments and New York's drug checking program, the unregulated supply continues to contain fentanyl, xylazine, and medetomidine — a newer veterinary sedative — adulterants that many international visitors will be unfamiliar with. Counterfeit pills, novel substances such as TUSI ("pink cocaine"), and unpredictable polysubstance combinations further elevate the risk of accidental overdose. New York's overdose death rate of 21.0 per 100,000 in 2023 (Spencer et al., NCHS Data Brief 522, 2024), combined with the surge of out-of-state and international visitors expected this summer, makes coordinated, non-stigmatizing public health communication essential.

As trusted partners, you are uniquely positioned to share life-saving information with the communities, workers, and visitors you serve. The New York State Department of Health Office of Drug User Health and the Overdose Prevention Workgroup have assembled this digital toolkit to support your education, communication, and operational planning efforts in the months ahead.

What you can do.

The toolkit on the following pages provides ready-to-use messaging, creative assets, and a curated resource library. To get the most out of it:

- **Share key messages and assets.** Post the included social media tiles, distribute the posters at venues and watch parties, and link to the resources from your websites, intranets, and newsletters.
- **Make naloxone visible and accessible.** Stock naloxone where alcohol is served and where workers and patrons gather. Train staff on how to recognize and respond to overdose.
- **Promote drug checking and safer-use messages.** Encourage attendees and clients to **check their drugs**, especially cocaine, using free fentanyl, xylazine, and medetomidine test strips and New York's publicly funded drug checking services. Pair every "don't mix" message with "**start low, go slow**" guidance for any polysubstance use, and remind people to **never use alone** — the Never Use Alone hotline (1-800-484-3731) and SafeSpot (1-800-972-0590) stay on the line and dispatch help if someone stops responding.

- **Communicate the 911 Good Samaritan Law clearly.** Many overdose deaths happen because witnesses fear arrest. New York law protects callers and victims from charges and prosecutions for: (1) possessing controlled substances up to and including A2 felony offenses (anything under 8 ounces); (2) possessing alcohol where underage drinking is involved; (3) possessing marijuana (any quantity); (4) possessing drug paraphernalia; and (5) sharing drugs.
- **Coordinate with local and state partners.** Maintain communication with public health authorities, harm reduction providers, and state offices for the latest drug-supply alerts, naloxone supply, and resource sharing.
- **Order additional NYSDOH publications.** The Resource Library in this toolkit highlights frequently used materials, but NYSDOH publishes many more print-ready resources beyond what is included here. All NYSDOH publications are available for print and can be ordered free of charge through the NYSDOH Distribution Center using this order form.

Our collective work this summer can prevent overdoses, save lives, and demonstrate what coordinated, non-stigmatizing, evidence-based public health practice looks like at scale. Thank you for your partnership and for the trust your communities place in you.

Sincerely,

Overdose Prevention Workgroup

2026 Mass Gatherings Strategic Planning Committee

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INSIDE THIS TOOLKIT

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FEATURED · NYSDOH Overdose Free Generation

The Department of Health recently launched **Overdose Free Generation**, a public-facing hub for New Yorkers and partners to find naloxone, drug checking, the Good Samaritan Law, current drug-supply alerts, and the full Office of Drug User Health resource library in one place. It is the single best entry point for anyone you talk to this summer who wants to learn more or take action. **Bookmark it, link to it, and share it widely:** https://www.health.ny.gov/community/drug_use/.

A note on hyperlinks and the forthcoming NYSDOH landing page

Every URL in this toolkit is clickable — click any title, publication, or resource to open the canonical NYSDOH, CDC, or partner page. This toolkit and its companion resources will also live on a dedicated landing page on the NYSDOH website. **Updates coming soon.**

SECTION 02

How to use this toolkit.

This toolkit is designed to be used three ways:

01. READ IT

Skim the key messages and the drug-supply context so you have the same baseline of information as other partners across the state.

02. SHARE IT

Use the ready-made social media copy, posters, and palm cards. The sample collateral in Section 05 includes copy you can use as-is, or make them your own with your own logo and branding. Link to the live resources in Section 07 from your website, newsletter, or staff training materials.

03. ACT ON IT

Be prepared, stay engaged. Stock naloxone, train your staff, post the materials, and keep communication open with local and state partners. Watch for drug-supply alerts throughout the summer and update your messaging when the supply shifts. Small, consistent actions — a poster by the bar, a palm card in the welcome packet, a brief overdose drill at staff huddle — add up to a more prepared community.

Accessibility & language

All NYSDOH publications referenced in this toolkit are available in English and Spanish; many are also available in additional languages on request. Partners can contact druguserhealth@health.ny.gov for the original design files, alternate formats (508-compliant, large print, audio), and translated assets.

SECTION 03

Why this matters.

Mass gatherings and the 2026 drug environment.

The U.S. Centers for Disease Control and Prevention defines mass gatherings as events at which the number of people in attendance is sufficient to strain local planning and response resources (CDC, 2024). The 2026 FIFA World Cup is among the largest international mass gatherings of the year, with approximately three million attendees expected across host cities in the United States, Mexico, and Canada. New York will host eight matches at MetLife Stadium — more than any other host venue — in addition to commemorative America 250 events throughout the summer.

Festival and large-event substance-use research has consistently documented elevated overdose risk in these settings. A retrospective investigation of an electronic dance music festival in New York City identified 22 attendees who sought emergency care for substance-related toxicity, including nine with severe presentations and two deaths (CDC, 2014). More recent wastewater analyses at U.S. music festivals confirm that polysubstance consumption and the presence of synthetic adulterants are routine, not exceptional (Adetunji et al., 2025).

The drug-supply backdrop.

Three intersecting trends shape risk this summer: fentanyl saturation of the unregulated supply, the rise of non-opioid adulterants such as xylazine and medetomidine, and counterfeit pills and novel substances marketed in nightlife settings across the NY/NJ area.

Key drug-supply findings for 2026

Unfamiliar fentanyl exposure. International visitors may be unfamiliar with the presence of fentanyl in the U.S. drug supply, including in cocaine, counterfeit/fake pain pills and other prescription pills, MDMA (Ecstasy, Molly), and heroin (dope, smack, H). Recreational users with little or no opioid tolerance may unknowingly consume fentanyl-laced substances, increasing the likelihood of overdose.

Non-opioid adulterants complicate response. The increasing presence of xylazine and medetomidine as adulterants can complicate emergency treatment because naloxone does not reverse their non-opioid effects (Trecki et al., NEJM Evidence, 2025).

Counterfeit pills and nightlife-associated drugs. Counterfeit pills and drugs such as TUSI (pink cocaine) further increase overdose risk, as users do not know the true content of what they purchase. Plant-based products such as kratom and synthetic cannabinoids (K2/Spice) are also circulating and carry their own toxicity profiles.

The Three Most Common Adulterants in New York's Drug Supply.

The unregulated drug supply circulating in New York in 2026 is dominated by three adulterants: fentanyl, xylazine, and medetomidine. Each shows up across drug classes — including cocaine, MDMA, and counterfeit prescription pills — and each changes how overdose presents and how it should be treated. Order below reflects the relative prevalence reported by NYSDOH's drug checking program (drug checking data dashboard).

Fentanyl.

Illicitly manufactured fentanyl remains the single greatest driver of overdose mortality in the United States and is present throughout New York's unregulated supply. It is roughly 50 times more potent than heroin and 100 times more potent than morphine, and is now routinely detected in cocaine, MDMA, methamphetamine, heroin, and counterfeit prescription pills pressed to look like oxycodone, Xanax, or Adderall (CDC, 2024; NYSDOH — Fentanyl: The 411). Many international visitors and *tolerance-naive* recreational users — people who do not regularly use opioids and so have no built-up tolerance to them — will be unfamiliar with the presence of fentanyl in non-opioid drugs, which is the highest-risk scenario for accidental overdose. Naloxone reverses fentanyl overdose; multiple doses may be needed.

Xylazine.

Xylazine ("tranq") is a non-opioid veterinary sedative now widespread in the U.S. drug supply, usually mixed with fentanyl. Because xylazine is not an opioid, naloxone will not reverse its sedative effects — but naloxone should still be given first for any suspected opioid overdose, since fentanyl is almost always present alongside it. Xylazine is also associated with severe skin and soft-tissue wounds independent of injection site (CDC, 2024; HHS, 2023). After naloxone, rescue breathing, the recovery position, and 911 are the right next steps.

Medetomidine.

Medetomidine causes prolonged sedation. It is described to slow the heart rate, lower blood pressure, and cause blood vessels in the arms and legs to narrow — which can make the skin appear bluish and may cause pulse oximeters to show falsely low oxygen levels, even when breathing is adequate. Other reported effects include muscle twitching, feeling unusually cold, and slowed breathing, especially when medetomidine is taken with opioids. In the unregulated drug supply, because the effect from fentanyl lasts about half as long as heroin, medetomidine and xylazine are added to fentanyl to extend the drug's effect (Lynch et al., 2025; NYSDOH, 2025). Administer naloxone. Naloxone works to revive a person who has consumed an opioid, even when medetomidine is present. After naloxone, rescue breathing, the recovery position, and 911 are the right next steps.

What the evidence says about prevention at mass gatherings.

A growing body of grey and scholarly literature supports a coordinated, welfare-first approach to harm reduction at large events. The themes that follow are the same ones woven through this toolkit's five key messages: naloxone access, drug checking, polysubstance awareness, the Good Samaritan Law, and current drug-supply alerts.

Visible, low-barrier naloxone access

Distributing naloxone to staff, vendors, security, and attendees — including via vending machines and venue-stationed kiosks — has been associated with measurable increases in successful community reversals. A statewide evaluation of harm-reduction vending machines documented uptake from populations not reached by in-person services (Hughto et al., 2025). Locate the nearest harm reduction vending machine **HERE**.

Drug checking and supply alerts

On-site drug-checking services at festivals have been shown to change behavioral intentions and reduce consumption of unexpectedly contaminated substances (Day et al., 2022). Encourage attendees and clients to **check their drugs** using free fentanyl, xylazine, and medetomidine test strips and New York's publicly funded drug-checking services.

Polysubstance and “start low, go slow” guidance

The most dangerous combinations at large events are alcohol + opioids, benzodiazepines + opioids, and stimulants + opioids. Pair every “don't mix” message with practical “start low, go slow” guidance, since visitors and tolerance-naive users are the highest-risk group when fentanyl is present in stimulants and counterfeits.

Non-stigmatizing, person-first communication

Messaging that uses person-first language, avoids fear-based framing, and provides actionable next steps is more likely to be shared, retained, and acted upon (Collins et al., 2018). CDC's Plain Language and Health Literacy guidance and SAMHSA's “Words Matter” resource support this approach.

Good Samaritan Law promotion

Most fatal overdoses occur in the presence of others, but bystanders often hesitate to call 911 for fear of arrest. State Good Samaritan laws are associated with increased calling behavior when the public is aware of them; awareness, not the law itself, is the active ingredient (Davis et al., 2018).

Staff training and on-site protocols

Programs that train bartenders, bouncers, vendors, and venue managers in overdose recognition and naloxone administration — including NYC's "Narcan Behind Every Bar" initiative — extend response capacity beyond medical staff and shorten time to first dose.

Coordinated EMS and harm reduction integration

Welfare-first models integrate medical, welfare, and harm reduction services into a single "culture of care," rather than treating drug response as a security or enforcement matter (Hughes et al., 2025).

Never use alone

Mortality data from drug-checking and overdose response programs consistently show that fatal overdoses cluster among people using alone. Promote the **Never Use Alone** hotline (1-800-484-3731) and **SafeSpot** (toll-free 1-800-972-0590) as practical, evidence-aligned alternatives for people who would otherwise use without anyone present.

Other host states are publishing similar guidance

Rhode Island (health.ri.gov/soccer2026) and Missouri (Department of Health & Senior Services Health Advisory, 2026) have both issued public-facing FIFA preparedness pages that emphasize free naloxone access, fentanyl awareness, and surveillance scale-up. New York's toolkit complements these regional efforts and aligns with CDC Yellow Book guidance for mass-gathering substance-use risk.

SECTION 04

Five key messages.

Each message below pairs an audience-ready topic with talking points, the campaign taglines that the marketing and communications team is rolling out across social channels, and a primary call to action. Use them in any combination across newsletters, websites, signage, and staff briefings. **All of the resources that support these messages are organized in the Resource Library (Section 07), so this section stays focused on the messages themselves.**

01 How to use Naloxone and where to obtain it

Naloxone is a medication that reverses opioid overdose. It is safe, easy to use, and available **free of charge** through pharmacies, community-based Opioid Overdose Prevention Programs (OOPPs), and harm reduction vending machines across New York State. No prescription is needed.

CAMPAIGN TAGLINES · **"Naloxone saves lives." "Make naloxone visible and accessible."**

CALL TO ACTION

Carry naloxone. Train your staff. Stock it where alcohol is served.

02 Access to drug checking and other harm reduction services

New York's Drug Checking Service offers people who use drugs timely and detailed information on the contents of their drugs. Knowing what is in your product can help you make more informed decisions. Find where you can check your drugs at specified Drug User Health Hubs. Free test strips, syringe service programs, and overdose prevention centers are also available statewide.

CAMPAIGN TAGLINES · **"Check your drugs." "Test your supply." "Access free harm reduction supplies."**

CALL TO ACTION

Check your drugs. Encourage clients and attendees to use drug checking.

03 Risks of polysubstance use and mixing — and safer-use strategies

Mix with caution. When in doubt, don't mix. Combining substances dramatically raises overdose risk. The most dangerous combinations at large events are alcohol + opioids, benzodiazepines + opioids, stimulants + opioids (cocaine in NY frequently contains fentanyl), and counterfeit pills (often pressed with fentanyl).

Never use alone. Stay with friends. Most fatal overdoses happen when no one is there to respond. If someone is going to use, the safest options are to use with a trusted person nearby, or to call **Never Use Alone (1-800-484-3731)**, which stays on the line and dispatches help if you stop responding.

CAMPAIGN TAGLINES · "Mix with caution." "When in doubt, don't mix." "Never use alone." "Stay with friends." "Start low, go slow."

CALL TO ACTION

Start low, go slow. Don't mix. Never use alone: 1-800-484-3731.

04 Communicate New York's 911 Good Samaritan Law clearly

Overdoses happen because witnesses fear arrest — New York law protects callers and victims. If you call 911 to report an overdose, New York law protects you and the person who overdosed from arrest, charge, or prosecution for most drug possession, paraphernalia, underage drinking, and shared-use offenses. It does not protect against drug sales, intent to distribute, or unrelated warrants. **Don't hesitate — call.**

CAMPAIGN TAGLINES · "Call 911 — you're protected."

CALL TO ACTION

Call 911. You're protected. Stay until help arrives.

05 Drug supply trends and alerts

Fentanyl, xylazine, and medetomidine are most commonly present in New York's unregulated drug supply, including in cocaine, counterfeit/fake pain pills and other prescription pills, MDMA (Ecstasy, Molly), and heroin (dope, smack, H). Naloxone is still the right first action for any suspected overdose —

give it until breathing is restored. Non-opioid adulterants may require additional supportive medical care.

CAMPAIGN TAGLINES · **“Know the supply.” “Naloxone first. Then 911. Stay.”**

CALL TO ACTION

Treat every suspected overdose seriously. Naloxone first. Then 911. Stay.

SECTION 05

Sample collateral.

Use the assets as-is, or make them your own with your own logo and branding. Print posters at 8.5" × 11" or larger; use social tiles at native 1080 × 1080 resolution on Instagram, Facebook, and X. Higher-resolution source files are available on request from druguserhealth@health.ny.gov.

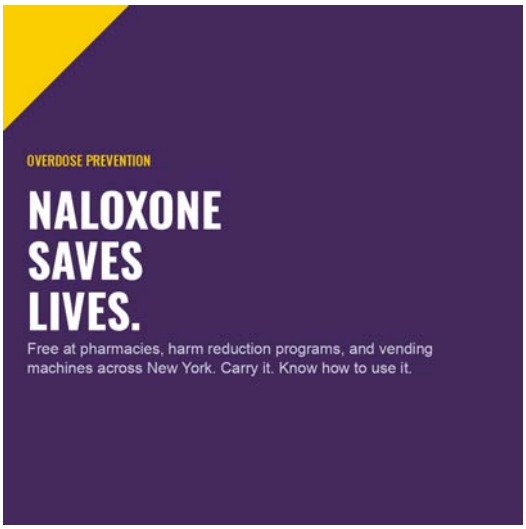
Posters (8.5" × 11")

Know Before You Go
General overdose prevention overview. Best for: watch parties, transit hubs, retail venues.

Mix With Caution
Polysubstance risk awareness. Best for: bars, nightlife venues, fan festivals.

Social media tiles (1080 × 1080)

Designed for square placements on Instagram, Facebook, and X. Each tile pairs with the sample copy in Section 06.



Naloxone Saves Lives

Check Your Drugs

Call 911. You're Protected.

You Matter. Don't Use Alone.

Videos

Short, ready-to-share videos from NYSDOH — link directly from social, embed in partner sites, or play before/during events. English and Spanish-language versions are available for every video below. Click any title to open the video in your browser.

Safer Choices — NYSDOH campaign

A campaign of short videos on safer drug use practices, fentanyl awareness, drug checking, naloxone, and never using alone. Hosted on the NYSDOH Office of Drug User Health site.

- **Watch Safer Choices videos (English & Spanish)**
- 30-second spot (English): play
- 30-second spot (Spanish): play

How to Use Naloxone — NYSDOH training video

A step-by-step training video from NYSDOH demonstrating how to recognize an overdose and administer naloxone. Suitable for community trainings, venue staff orientation, and individual learning.

- **How to Use Naloxone (English) — NYSDOH training video**
- **Cómo usar Naloxona (Spanish) — 7 min**

New York 911 Good Samaritan Law

The two official NYSDOH publications below are reproduced here for direct partner use. Their existing NYSDOH branding has been preserved; print or share without modification.

NY's 911 Good Samaritan Law Protects YOU

AIDS INSTITUTE
Opioid Overdose Prevention

www.health.ny.gov/overdose

NEW YORK STATE | Department of Health

New York State's 911 Good Samaritan Law Protects YOU

The New York State 911 Good Samaritan Law allows people to call 911 without fear of arrest if they are having a drug or alcohol overdose that requires emergency medical care or if they witness someone overdosing.

The following are signs of an overdose. CALL 911 if the person:

- Is passed out and cannot be woken up;
- Is not breathing, breathing very slowly, or making gurgling sounds;
- Has lips that are blue or grayish color.

Why should you care about the 911 Good Samaritan Law?

- The law empowers YOU to save a person's life.
- The law encourages anyone to call 911 when they see or experience a drug or alcohol overdose.

Who is protected by the 911 Good Samaritan Law?

- Everyone — regardless of age — who seeks medical help for themselves or someone else during an overdose.
- The person who has overdosed.

The law DOES NOT protect YOU from the following:	The law DOES protect YOU from the following:
• A1 felony possession of a controlled substance (8 ounces or more); • Sale or intent to sell controlled substances; • Open warrants for your arrest; and • Violation of probation or parole.	• Possessing controlled substances up to and including A2 felony offenses (anything under 8 ounces); • Possessing alcohol, where underage drinking is involved; • Possessing marijuana (any quantity); • Possessing drug paraphernalia; and • Sharing drugs

What if I am accused of selling drugs?

- Calling 911 can be used in your defense when the charge is less than an A2 felony — as long as you don't have a prior conviction for an A1, A2, or B drug felony sales or attempted sales offense.
- Calling 911 can be a factor in reducing the length of a prison sentence for A1 and A2 felony convictions.

What if I am under the age of 21 years, will this law protect me?

Yes. Nothing should stop YOU from calling 911 in a life-or-death situation.

New York State Department of Health, AIDS Institute, Opioid Overdose Prevention · www.health.ny.gov/overdose

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See an Overdose? Call 911.

Extreme Heat and People Who Use Drugs

Summer mass gatherings can mean prolonged heat exposure for fans and attendees. People who use drugs face elevated risk of hyperthermia, dehydration, and overdose during heat events. The two NYSDOH advisories below — one for clinicians, one for local health departments and partners — are reproduced for direct use. Print and share without modification.

Extreme Heat and People Who Use Drugs — Guidance for Clinicians

Extreme Heat and People Who Use Drugs

What Clinicians Can Do

Climate change has contributed to rising temperatures and extreme heat in the U.S. The average temperature is projected to rise another 2.7°F by 2050.

Extreme heat is the leading weather-related cause of death in the United States.

Warmer temperatures and extreme heat pose additional health risks for people who use drugs and those living with substance use disorder.

This guide provides information to clinicians on the prevention and treatment of heat-related illnesses. Since people who use drugs may not be familiar with all the symptoms of heat stress, clinicians should discuss heat illness symptoms and prevention with patients who are at risk.

Table 1. Types of Heat Illness and Their Symptoms

Heat Stress	Heat Exhaustion	Heat Cramps	Heatstroke
• Feeling of discomfort • Physiologic strain – indicated by increases in core temperature and heart rate in response to strain	• Rapid heartbeat • Heavy sweating • Extreme weakness or fatigue • Dizziness • Nausea, vomiting • Irritability • Fast, shallow breathing • Slightly elevated body temperature	• Muscle cramps, pain, or spasms in the abdomen, arms, or legs	• High body temperature • Confusion • Loss of coordination – ataxia • Hot, dry skin or profuse sweating • Throbbing headache • Seizures, coma

Sources: Jardine DS. Heat illness and heat stroke. Pediatr Rev. 2007 Jul;28(7):249-58. doi: 10.1542/pir.28-7-249. Erratum in: Pediatr Rev. 2007 Dec;28(12):469 and National Institute for Occupational Safety and Health. (2010). NIOSH Fast Facts: Protecting Yourself from Heat Stress. *(DHHS (NIOSH) Publication No. 2010–114). http://www.cdc.gov/niosh/docs/2010-114/pdfs/2010-114.pdf.*

The Impact of Rising Temperatures on People Who Use Drugs

Our cardiovascular system works harder to cool our body during hot weather. This can cause heat illness – hyperthermia.

Higher temperatures and more frequent heat waves pose major health risks to people who use drugs:

- Increased risk of heat-related illness.
- Increased risk of accidental overamping in people using cocaine. Overamping occurs when a person experiences adverse reactions from using one or more stimulant drugs – i.e., cocaine, crack, methamphetamine.

Increased Risk of Overamping in People Using Cocaine

Overamping occurs when a person experiences adverse reactions from using one or more stimulant drugs – i.e., cocaine, crack, methamphetamine. There is an increase in overamping resulting in accidental death during temperatures 75°F and above.[1]

Death and serious injury from extreme heat is a serious public health concern, especially for some high-risk groups, like people who use cocaine.

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Extreme Heat and People Who Use Drugs — Guidance for Local Health Departments & Partners

NEW YORK STATE | Department of Health

Extreme Heat and People Who Use Drugs

A Harm Reduction Resource for Local Health Departments

Background

1,220 people in the United States are killed by extreme heat per year.[1] Extreme heat-related illnesses can be fatal and they are preventable. While all communities are impacted by extreme heat, not everyone is equally at risk. People who use drugs are disproportionately impacted by heat-related illness, injury, and death. Knowing the signs and symptoms of heat illness, how to reduce risk, and when to intervene, can save lives.

Extreme Heat and Rising Temperatures

The impact of heat varies depending on time of exposure, personal characteristics, and personal circumstances. For example, how long a person has been exposed to heat, how much water they have ingested, and if they may have used any substances. With temperatures rising each year, it only takes a 5°F temperature increase to double a New Yorker's risk of heat-related illness. Higher temperatures and frequent heat waves pose major health risks to people who use drugs. This is due to the physiological effects different drugs can have on a person's body, especially when consumed in the heat.[2]

The Impact of Rising Temperatures on People Who Use Drugs

Higher temperatures and frequent heat waves pose these major risks to people who use drugs:

- Increased risk of heat-related illness.
- Increased risk of accidental overamping in people using stimulants. Overamping occurs when a person experiences adverse reactions from using one or more stimulant drugs, i.e., cocaine, crack, methamphetamine.
- Death and serious injury from extreme heat is a serious public health concern. This is especially true for some high-risk groups, like people who use cocaine.

Extreme Heat-Related Illnesses

Heatstroke and dehydration are the most common illnesses to present when ingesting commonly used substances. These include: alcohol, opioids, antidepressant or antipsychotic medications, stimulants, and MDMA (3,4-Methylenedioxymethamphetamine), commonly known as Ecstasy or Molly. Heatstroke is considered a medical emergency and requires fast action to prevent permanent damage or death. Know the symptoms of each extreme heat-related illness, and monitor for symptoms among people who are using alcohol and/or other drugs.

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SECTION 06

Sample social media copy.

Cut, paste, schedule. Each post pairs with a social tile from Section 05. Hashtags are suggestions — use what fits your channel.

Instagram / Facebook — Naloxone awareness

> Heading to a watch party or fan zone this summer? Carry naloxone.
>
> Naloxone reverses opioid overdose in minutes. It's safe, easy to use, and FREE at pharmacies, harm reduction programs, and vending machines across New York.
>
> Find it near you: https://www.health.ny.gov/community/drug_use/
>
> #OverdosePrevention #Naloxone #HarmReduction #NewYorkState #FIFAWorldCup2026

X / Twitter — Naloxone

> Naloxone saves lives — and it's FREE in NY. Pick some up before that watch party.
> https://www.health.ny.gov/community/drug_use/
> #OverdosePrevention #Naloxone

Instagram / Facebook — Drug supply

> Most overdoses today happen because people don't know what they're taking. Fentanyl is in cocaine, counterfeit pills, and other drugs that didn't used to contain it.
>
> Free fentanyl test strips, drug-checking services, and naloxone are available statewide.
>
> Learn more: https://www.health.ny.gov/community/drug_use/
>
> #FentanylAwareness #HarmReduction #NYSDOH

X / Twitter — Drug supply

> Check your drugs. Free fentanyl test strips & drug checking are available across NY.
> https://www.health.ny.gov/community/drug_use/

Instagram / Facebook — Polysubstance use

Mixing substances? Start low, go slow. Don't mix when you can help it. Never use alone.

Alcohol + opioids, benzodiazepines + opioids, and stimulants + opioids are the highest-risk combinations at large events. If you choose to use, take the smallest amount first, wait, and stay with someone who can call 911.

Never Use Alone: 1-800-484-3731 (free, anonymous, 24/7).

#StartLowGoSlow #DontMix #HarmReduction

Instagram / Facebook — Good Samaritan Law

If you see an overdose, CALL 911. Don't hesitate.

New York's 911 Good Samaritan Law protects YOU and the person who overdosed from arrest for most drug possession, paraphernalia, and underage drinking offenses.

1. Call 911
2. Give naloxone if you have it
3. Stay until help arrives

https://www.health.ny.gov/community/drug_use/

#GoodSamaritanLaw #OverdosePrevention

X / Twitter — Good Samaritan

See an overdose? CALL 911. You're protected by NY's Good Samaritan Law. #YourCallSavesLives

Instagram / Facebook — Never Use Alone

You matter. Don't use alone.

If you're going to use, the safest options are with a trusted person nearby, or call Never Use Alone: 1-800-484-3731. They stay on the line and dispatch help if needed. Free, anonymous, 24/7.

#NeverUseAlone #HarmReduction #YouMatter

LinkedIn — partner organizations

Ahead of the 2026 FIFA World Cup matches at MetLife Stadium and America 250 commemorations across New York, the NYS Department of Health Office of Drug User Health, in partnership with the Overdose Prevention Workgroup, has released a digital toolkit for partners — county health departments, hospitals, venues, nightlife operators, and watch-party hosts.

Five key messages, ready-to-use creative assets, and a curated resource library — all in one place.

Download and share with your network.

Resource library.

Purpose. This library curates the materials referenced throughout the toolkit and the broader set that partners may need when planning overdose prevention activities this summer. It is organized into seven sections so you can find what you need quickly: NYSDOH foundations, drug-supply landscape, safer choices for people who use drugs, New York's 911 Good Samaritan Law, harm reduction information and locators, CDC mass-gatherings and traveler health, and extreme heat and people who use drugs.

Internal and external. The library includes both NYSDOH and Office of Drug User Health (ODUH) publications and trusted external resources from CDC, harm reduction organizations, and peer-reviewed research. Each entry is hyperlinked to its canonical source.

1. NYSDOH Office of Drug User Health — Foundations

★ Drug User Health (overview & resource hub)

★ Office of Drug User Health — Consumer Resources

★ Office of Drug User Health — Health Provider Resources

★ Your Life and Health Matter — safety planning

★ Build a Safety Plan for Overdose Prevention (PDF)

2. Drug Supply Landscape

★ NYSDOH Drug Checking Data

★ Fentanyl: The 411 (PDF)

★ Kratom — Safety information for consumers (PDF)

★ K2 / Synthetic Cannabinoids — NYSDOH (PDF)

★ NYSDOH Medetomidine Advisory (December 2025, PDF)

★ Medetomidine — What Clinicians Need to Know (PDF)

★ Emergence of Medetomidine in the Illicit Drug Supply (NEJM Evidence, 2025)

★ Lynch, Pizon & Yealy — Annals of Emergency Medicine, 2025

3. Safer Choices for People Who Use Drugs

★ Safer Choices for People Who Use Drugs (hub)

★ How to Use Naloxone — NYSDOH training video (English)

★ How to Use Naloxone — training video (Spanish, 7 min)

★ Safer Choices — 30-second PSA (English)

★ Safer Choices — 15-second PSA (English)

★ Safer Choices — Short 01 (English)

★ Safer Choices — Short 02 (English)

★ Safer Choices — Short 03 (English)

★ Safer Choices — 30-second PSA (Spanish)

★ Safer Choices — 15-second PSA (Spanish)

★ Safer Choices — Short 01 (Spanish)

★ Safer Choices — Short 02 (Spanish)

★ Safer Choices — Short 03 (Spanish)

★ Facts about an Opioid Overdose

4. New York's 911 Good Samaritan Law

★ Good Samaritan Law — overview

★ Good Samaritan Law — English brochure (Publication 0139)

★ Good Samaritan Law — Spanish brochure (Publication 0139es)

★ See an Overdose? Call 911 — Poster (Publication 12027)

★ See an Overdose? Call 911 — Poster (English, Publication 12025)

★ See an Overdose? Call 911 — Poster (Spanish, Publication 12025_sp)

★ See an Overdose? Call 911 — Palm Card (English, Publication 0226)

★ See an Overdose? Call 911 — Palm Card (Spanish, Publication 0227)

★ See an Overdose? Call 911 — Brochure (English, Publication 0230)

★ See an Overdose? Call 911 — Brochure (Spanish, Publication 0231)

5. Harm Reduction Information & Locators

★ Harm Reduction Vending Machine Locator (MATTERS Network)

★ FentCheck Locator

★ Narcan Behind Every Bar (NYC Office of Nightlife)

★ Never Use Alone Hotline — 1-800-484-3731

★ SafeSpot Overdose Hotline — toll-free 1-800-972-0590

★ DanceSafe — Drug Information

★ DanceSafe — Why Did They Pass Out?

★ DanceSafe — WeLoveConsent

6. CDC — Mass Gatherings & Traveler Health

★ CDC Yellow Book — Mass Gatherings

★ CDC — Safety for Soccer Fans

★ CDC — Substance Use & SUD for Travelers

★ CDC — Traveling with Medications

★ CDC — Medication Letter Template for Travelers

★ CDC — Counterfeit Medicines

★ CDC — Overdose Resource Exchange

★ CDC — Public Health Considerations for Strategies & Partnerships

★ CDC — Drink Less, Be Your Best (campaign)

★ Drink Less, Be Your Best — video (YouTube)

★ CDC — Plain Language Materials & Resources

7. Extreme Heat & People Who Use Drugs

★ Extreme Heat and People Who Use Drugs — Guidance for Clinicians (PDF)

★ Extreme Heat and People Who Use Drugs — Guidance for Local Health Departments & Partners (PDF)

★ Extreme Heat and People Who Use Drugs — Guidance for Harm Reduction Organizations (PDF)

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Thank you for your partnership.

Your work this summer will save lives. We're grateful to be doing this alongside you. For feedback, alternate formats, and translated assets: druguserhealth@health.ny.gov. — NYSDOH Office of Drug User Health, Overdose Prevention Workgroup.