

Harm Reduction = Common Sense

(Or, Harm Reduction for Skeptics!)

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What This Workshop Is About

- Why is everybody talking about harm reduction all of a sudden?
- What is harm reduction?
- What are the basic ingredients in harm reduction?
- What are the basic principles in harm reduction?
- Popular (and wrong) harm reduction myths
- Benefits of harm reduction
- Harm reduction troubleshooting tips
- Tools for supportive housing
- Examples/case studies

Why Is Everybody Suddenly Talking About HR?

- *Housing First* approach of federal and NYS gov't says must providing housing to all before addressing complex issues
- Mounds of *evidence* shows its efficacy in working with drug users

So now there are lots of organizations (and people) that are coming to harm reduction because of contractual requirements ...

What Is Harm Reduction?

- Public health approach (like immunization policies or cigarette regulations)
- Set of strategies
- Set of principles and approaches
- Social justice movement

What Are Its Basic Ingredients?

- Dignity and respect for people who use drugs
 - Difference between seeing people as “addicts” and people who are using drugs, among many other identities
 - Recognizing that our clients are adults, who will make up their own minds, in the best way they can at any given moment, that they have the right to do so

What Are Its Basic Ingredients?

- Social justice
 - Acknowledges the racialized nature of the War on Drugs as a systemic effort to institutionalize people of color, particularly black men
 - Research shows that drug use among racial and ethnic groups is approximately the same
 - Only youth use drugs more, but at equal rates among race/ethnicity

What Are Its Basic Ingredients?

Making sure people have a voice not just as consumers of services but also as designers of services

- Acknowledged as the experts of their own needs
- Acknowledged as having wide and useful knowledge and understanding around drug use

What Are Its Basic Ingredients?

Shared values of many evidence-based approaches

- Self-determination
- Nonjudgmental
- Positive outlook/hopeful
- Recovery as journey not destination
- Uses stages of change model (change is not linear)
- Culturally competent and contextual
- Strengths-based
- Trauma-informed

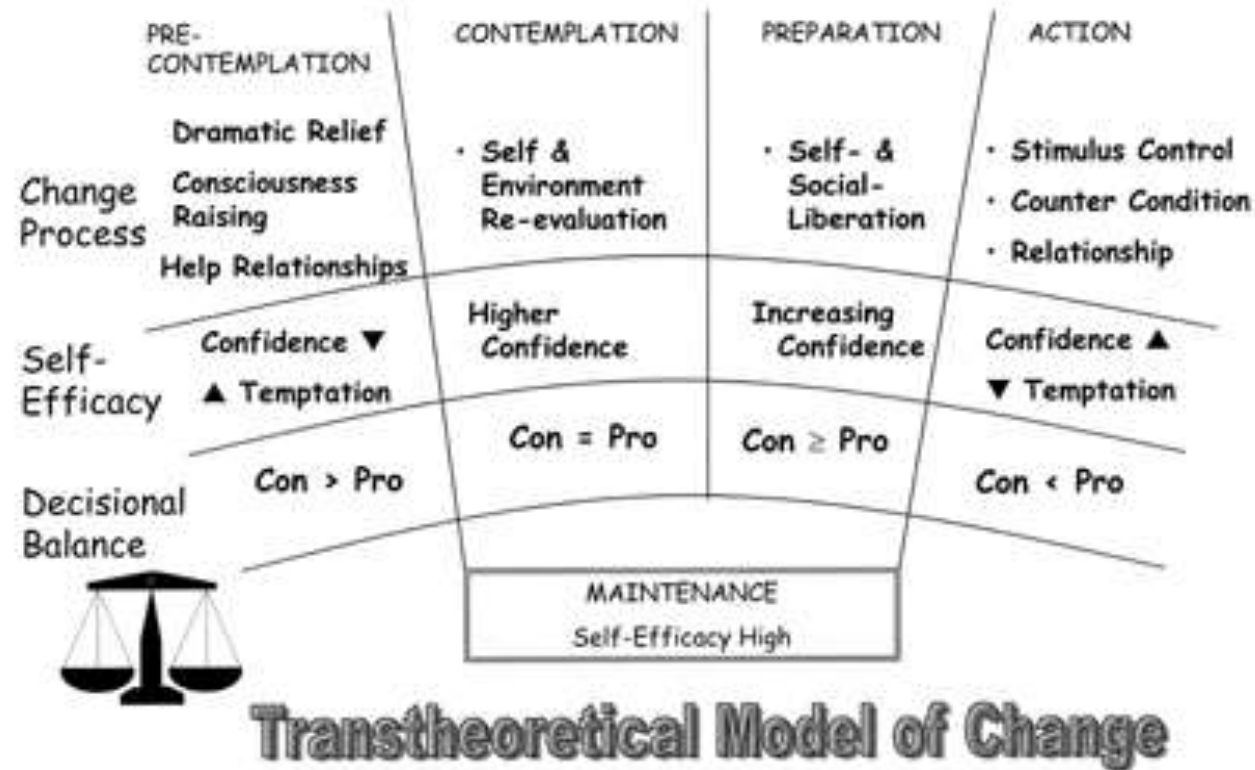
Evidence-based Practice Principles: Recovery



What Are Its Basic Ingredients?

- *Respect, trust and a nonjudgmental stance* as the essential components of an effective therapeutic relationship.
- A basic assumption is that *clients want to make positive changes* and the clinician uses strategies to help clients move along the change continuum.

Stages of Change: Prochaska, DiClemente



What Are the Basic Principles of HR?

- Understands drug use as a complex, multi-faceted phenomenon (biopsychosocial model)
- Includes a continuum of behaviors from severe abuse to total abstinence
- Acknowledges that some ways of using drugs are clearly safer than others.

Hierarchy of Harm reduction



What Are the Basic Principles of HR?

Establishes *quality of individual and community life and well-being* – not necessarily cessation of all drug use – as the criteria for successful interventions and policies.

What Are the Basic Principles of HR?

Recognizes that the people's experiences (of poverty, class, racism, social isolation, past trauma, sex-based discrimination and other social inequalities) **affect both people's *vulnerability to and capacity for effectively dealing with drug-related harm.***

What Are the Basic Principles of HR?

Does not attempt to minimize or ignore the real and tragic harm and danger associated with licit and illicit drug use.

Myths

Harm reduction is "pro drug use."

(Actually: Harm reduction takes no position on drug use, but acknowledges its existence in society, and recognizes the real harm and danger associated with drug use.)

Myths

Harm reduction takes responsibility off the drug user.

(Actually: Just the opposite, drug users are central and seen as the experts and authors of their services and programs.)

Myths

Harm reduction encourages drug use.

(Actually: Research shows that harm reduction does not encourage drug use.)

What Are the Benefits of Harm Reduction?

- Reduces spread of HIV, Hep-C and other infections
- Cost effective
- Engages drug users, making it easy for them to get help at any stage of drug use
- Requires we provide drug users with access to factual information about drugs and their effects, not just that they're bad – coffee example
- SAVES LIVES: needle exchange, methadone, Narcan overdose reversal, fentanyl strips

What Are the Benefits of Harm Reduction?

- *Builds honest, trusting relationships, which are the foundation of all healing*
- Opens up space of working with people who are still working *toward* their goals
- Enables us to work with those who are unable or unwilling to stop using drugs, and keep them and their families and communities safer and healthier

HR Troubleshooting Tips

Do your best to keep your judgements to yourself

- People can tell when they're being judged
- Makes residents less likely to be honest about their drug use, which makes your relationship ineffective
- And since we all judge, don't beat yourself up, just notice it, and get back to your client's needs

HR Troubleshooting Tips

Localize, don't globalize!

- Look at the actual behavior
- Frame the behavior as objectively and specifically as you can
- Example of pot smoke bothering neighbor:
 - You can focus on the fact that the tenant is smoking pot or you can isolate that the actual problem is the *pot smoke*

HR Troubleshooting Tips

Localize, don't globalize!

- It's the difference between shame and guilt
- "I did something bad" can be addressed with specifics
- "I am bad" is deeper and more intrinsic
- I am an addict versus I am using drugs.

HR Troubleshooting Tips

Help residents regain a sense of agency over their use

- Individual behaviors are easier to address than difficult patterns
- Set small, achievable goals
- Begin to shift their relationship with their drug use
- “I am bad” is deeper and more intrinsic
- I am an addict versus I am using drugs.

HR Troubleshooting Tips

Don't assume someone can't do something or change something just because they haven't yet –

Be the person who doesn't give up hope or stop believing in them after everyone else has!

We all desperately need someone to believe in us!

Harm Reduction Tools in Supportive Housing

HR Tools in Supportive Housing

Contextualize drug use for tenants

- What building in NYC do you imagine you could move into that wouldn't have people using drugs in it?
- What street in America could you buy a house on where you wouldn't have neighbors who use drugs?
- *We sometimes have an unfair standard for supportive housing.*

Risk elements to consider

- Amount
- Frequency
- Route of administration
- Environment
- Others?

Hierarchy of Risk



Decisional Balancing

Decisional Balance Sheet

	Disadvantages	Advantages
No Change		
Change		

Motivational Interviewing

Motivational Interviewing

Motivational interviewing is a psychological approach, it's a model based on trust.

Here are the five steps of a motivational interview:



1. Express empathy



2. Develop discrepancies



3. Roll with resistance



4. Challenge the rationalization



5. Support self-efficacy

Budgeting

PERSONAL BUDGET WORKSHEET (Spending Plan)		
INCOME:	MONTH:	
	Budget	Actual
Salary		
Partner's Salary		
Public Assistance		
Food Stamps		
Other:		
Total Income	\$ -	\$ -
EXPENSES:		
Living/Housing:		
Rent/Mortgage		\$ -
Electric		\$ -
Water/Sewer		\$ -
Gas/Heating		\$ -
Telephone		\$ -
Cable TV		\$ -
Household/Repairs		\$ -
Other:		\$ -
Other:		\$ -
Regular Payments:		
Student Loan		\$ -
Credit Cards		\$ -
Other Loan Payments		\$ -
Health Insurance		\$ -
Car/Home Insurance		\$ -
Life Insurance		\$ -
Child Care		\$ -
Other:		\$ -
Other:		\$ -

Boundaries Are Critical

- Dotted line separation between clinical services and building management/rent collection
- Boundaries around behavior – example of smoking outside v. when peer is in apt.
- Consistency in enforcement of rules and expectations

Rely on Written Agreements/Policies: Lease and Occupancy Agreement

- The lease is your friend
- The lease is a good tool to present and highlight skills in need of strengthening
- Occupancy agreement serves as set of objective community rules

Tenant Councils

- Support a structure for residents to establish their own community governing structure
- Support their capacity to explore and set their own standards of community participation and expectations
- Ensure they have a clear voice in leading their community
- Helps to clarify that the responsibility for their building is on them, not the staff

Overdose Prevention

- Ensure all staff are properly trained
- Strive to have as many residents as possible trained

**SAVE A LIFE
CARRY NALOXONE**

PEP and PrEP

PrEP vs. PEP

PrEP and PEP are methods for preventing HIV infection that involve taking HIV medicines. When you take steps to protect yourself against a disease, like HIV, it's called prophylaxis.

PrEP and PEP are for people who don't have HIV, but are at risk of getting it.

PrEP stands for pre-exposure prophylaxis.

What's it called?

PEP stands for post-exposure prophylaxis.

Before HIV exposure.

PrEP is taken every day, before possible exposure.

When is it taken?

After HIV exposure.

In emergency situations, PEP is taken within 72 hours (3 days) after possible exposure.

PrEP is for people who don't have HIV and:

- have a sex partner with HIV
- have sex with people whose HIV status is unknown
- share injection drug equipment

Who's it for?

PEP is for people who don't have HIV but may have been exposed:

- during sex
- at work through a needlestick or other injury
- by sharing injection drug equipment
- during a sexual assault

PrEP can reduce the risk of getting HIV from sex by more than 90% and from injection drug use by more than 70%.

How effective is it?

PEP can prevent HIV infection when taken correctly, but it is not always effective.

Start PEP as soon as possible to give it the best chance of working.

Talk to your health care provider about whether a prescription for PrEP or PEP is right for you.

AIDSinfo

The
dream

...

No
more
HIV

U=U*

**UNDETECTABLE
viral load means HIV IS
UNTRANSMITTABLE**

www.i-base.info/u-equals-u

* Undetectable = Untransmittable

Examples

- Helping a Veteran who drinks heavily prepare for a job interview
- Rolling a joint during a peer group

Questions



THANK YOU, YOU WONDERFUL PEOPLE!

