



HARM REDUCTION OVERVIEW & PRACTICES

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OVERVIEW

- What is Harm Reduction?
- Substance Use
- Harm Reduction & Housing
- How does Harm Reduction look at GMHC
- Key Takeaway & Next Steps

WHAT IS HARM REDUCTION?

“A harm reduction approach aims to reduce the negative consequences of using psychoactive substances, without necessarily reducing substance use itself”

KEY PRINCIPLES

- Non-judgmental approach
- Accepting behavior change as an incremental process
- Inclusion of individuals in active use, recovery and within the community to shape policies and practices
- Focus on quality life improvements
- Empowerment of the individual as the primary agent responsible for reducing the harms related to their substance use.

HARM REDUCTION APPROACHES

- Community based naloxone programs
- Peer support programs
- Supply distribution and recovery programs
- Supervised consumption services
- Opioid dependency treatments
- Person centered approach

EXAMPLES OF HARM REDUCTION IN OTHER AREAS



SUN
SCREEN



SEAT
BELTS



SPEED
LIMITS



BIRTH
CONTROL



CIGARETTE
FILTERS

SUBSTANCE USE

SUBSTANCE USE

Risk factors to developing substance use :

- Using substances to alleviate stresses, and deal with problems
- No access or inadequate access to resources for social determinants of health
- Co-occurring physical health conditions
- Untreated mental health illness
- A lack of social support
- Social acceptance

SUBSTANCE USE RISK FACTORS & REDUCING RISK

Common Risk Factors

- Changes in Tolerance
- Mixing Drugs
- Drug Quality
- Previous Non-fatal Overdose
- Using Alone

STATISTICS ON SUBSTANCE USE IN THE UNITED STATES

- Most commonly used substances, including alcohol, tobacco, and illicit drugs based on 2021 National Survey on Drug Use and Health (age 12+, past year)
 - Tobacco products (26%)
 - Alcohol (62%)
 - Marijuana (18%)
 - Misuse of Prescription psychotherapeutics (5%) (i.e. pain relievers, tranquilizers, stimulants)
 - Opioids (3.3%)

STATISTICS ON SUBSTANCE USE IN NY

- Every three hours, someone dies of a drug overdose in New York City.
- More New Yorkers die of drug overdoses than homicides, suicides, and motor vehicle crashes combined.
- Fentanyl, a highly potent opioid, is involved in more than 76% of all overdose deaths.
- Opioids are involved in more than 80% of all overdose deaths.

SUBSTANCE USE AND HOMELESSNESS

Prevalence:

- “Research shows that, compared to homeless families, homeless single adults have higher rates of serious mental illness, addiction disorders, and other severe health problems.”
- Based on 2010 SAHMSA report, “34.7% of all sheltered adults who were homeless had chronic substance use issues”
- Most research shows that around 1/3 of people who are homeless have problems with alcohol and/or drugs, and around 2/3 of these people have lifetime histories of drug or alcohol use disorders.

STIGMA AND BARRIERS TO TREATMENT

Significant issues that prevent individuals from seeking and receiving the help they need. It is important to understand the impact of stigma and barriers to treatment to develop effective strategies and interventions to address these challenges.

Barriers to treatment for substance use include financial, logistical, and systemic challenges.

- Financial barriers
- Logistical barriers
- Systemic barriers

HARM REDUCTION & HOUSING

BENEFITS OF HARM REDUCTION IN HOUSING

When applied to housing, harm reduction strategies seek to create safe and supportive environments.

- Improved Health Outcomes
- Reduced Public Health Costs
- Increased Housing Stability
- Improved Community Safety

BEST PRACTICES FOR HARM REDUCTION IN HOUSING

- Provide education and trainings on harm reduction principles and practices
- Implement policies and procedures that prioritize safety
- Offer a range of harm reduction services
- Foster a supportive and non-judgmental environment
- Provide access to affordable and stable housing
- Engage in ongoing evaluation and quality improvement efforts

BEST PRACTICES FOR HARM REDUCTION IN HOUSING

- Engage in ongoing evaluation and quality improvement efforts
- Connecting to a day program (support w. occupying day + developing independent living skills/vocational support/money management)
- Peer model (peer support groups)
- Narcan training for all
- Resource library with information about substance use, harm reduction
- The words we use matter

**HOW DOES HARM
REDUCTION LOOK AT
GMHC ?**

Harm Reduction in GMHC HOPWA and HUD Housing:

- All case managers are trained on use of Narcan and have a kit in case of emergency.
- In weekly 1:1 check-ins, case managers assess supportive needs

GMHC Overall

- All employees are trained on how to administer Narcan
- Narcan trainings and kits available for all clients and community
- Syringe dispense wall mounts are docked in all restrooms.
- Expanded Syringe Access Program
- Fentanyl test strips
- Access to PrEP and PEP services
- Harm reduction individual and group counseling

KEY TAKEAWAYS & NEXT STEPS

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- Recognize the importance of harm reduction as a critical component of housing programs for vulnerable individuals. Housing programs needs to address needs of individuals beyond housing
- Develop comprehensive harm reduction strategy that includes harm reduction education and access to resources and services.
- Address stigma associated with substance use and mental health issues within program
- Foster partnerships with community organizations and service providers to offer a range of support services to program members.

KEY TAKEAWAYS AND NEXT STEPS

Recommended Next Steps

- Conduct needs assessment to identify the needs of residents and gaps in services
- Developing a harm reduction policy and procedures
- Providing training to staff on harm reduction principles and practices
- Conduct regular evaluations of harm reduction services to identify areas for improvements

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