









Learning Objectives

- Examine how personal beliefs about people who use drugs may affect service delivery
- Define the components of Harm Reduction
- Describe what a Needle/Syringe Exchange Program is and how it relates to Harm Reduction
- Discuss the components of Patient Centered Care
- Identify 5 Harm Reduction 'tips and tricks'



Statement #1

People who share needles with other people clearly do not care about their health.

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Statement #2 People who have sex while high are crazy and stupid.





Statement #5

Doctors should prescribe Naloxone to all patients on opioids.

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Statement #6

People who use drugs deserve the same medical care as people who do not use drugs.

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Stigma Activity Discussion

What is Harm Reduction?¹

"Harm reduction can be defined as any practice that reduces the risk of injury even though the person in question is unable to abstain from unsafe behaviors that are the basis for likely damaging outcomes."¹

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Harm Reduction Cont'd

- Harm Reduction understands drug use as a complex, multifaceted phenomenon that encompasses a continuum of behaviors from severe abuse to total abstinence. It also acknowledges safer drug practices compared to others.
- Harm Reduction affirms drug users as primary agents of reducing the harms of their drug use. It further seeks to empower users to share information and support each other in strategies which meet their actual conditions of use.

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Principles of Harm Reduction

- Understanding drug use as a complex, multi faceted phenomenon that encompasses a continuum of behaviors from severe abuse to total abstinence and acknowledges that some ways of using drugs are clearly safer than others.
- Non-judgmental or coercive
- Affirmation of drug users themselves as the primary agents of reducing the harms of their drug use, and seek to empower users to share information and support each other in strategies which meet their actual conditions of use.

Harm Reduction Cont'd

- Although Harm reduction suggests that interventions and policies be designed to serve drug users and reflect specific individual and community needs, there is no universal formula for implementing harm reduction interventions.
- However the following are core principles that are important for the fidelity of harm reduction interventions.

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While NEP might be considered a controversial solution to a tough problem, there are several reasons that suggest looking at evidence supporting their efficacy.
While providing syringes to PWID, NEPs provide a platform for health and social service networks to engage with, perform assessments on drug using behaviors and provide resources to PWID.
The NEPs platform create opportunities for access to PWID.

The Role of Harm Reduction

- People who inject drugs come in all shapes and sizes and some can hold jobs and responsible positions in society most persons who have started to inject illicit drugs attract several physical, psychological, and social problems.
- These problems tend to isolate these persons and restrict the network of persons with whom they interact, making them hard to reach through typical health and social service information channels.

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NEP's Cont'd²

- NEPs serve as a portal to primary medical care, mental health
 and medically assisted treatment (MAT) for PWID.
- NEPs reduce the likelihood of sharing of needles among PWID.
- As a bridge to treatment, NEPs also offer comprehensive onsite services including HIV and HCV testing, case management, medical and mental health treatment, medically assisted treatment (MAT), support groups, and food programs.

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NEP's Cont'd²

- Needle Exchange Programs are most effective at reducing HIV/Hepatitis transmission and harm related to drug use when delivered as a part of a continuum of care.
- Successful NEPs regularly and repeatedly engage individual PWID's over time to provide on-going opportunities to link them into an array of services to improve their health.

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Impact of Needle Exchange Programs³

- Needle Exchange Programs are most effective at reducing HIV/Hepatitis transmission and harm related to drug use when delivered as a part of a continuum of care.
- Successful NEX programs regularly and repeatedly engage individual PWID's over time to provide on-going opportunities to link them into an array of services to improve their health

Centers for Disease Control⁴

The CDC suggests reducing infection rates among people who inject drugs (PWID) by using a comprehensive approach including increasing access to sterile syringes and addressing high-risk sexual behavior.

According to the CDC PWID's who continue to inject can substantially reduce their risks of acquiring HIV and other bloodborne infections by using a new sterile syringe for every drug injection.

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Patient-Centered Care

Should be designed to:

- Improve integration.
- Cooperate and focus on outreach among an extensive provider network.
- Incorporate early intervention, prevention, counseling and testing, and care for people who use drugs.
- Programs must be an integral part of a broader system that recognizes the importance of every link in the chain. HealthHIV DC|HEALTH

Patient-Centered Care

While the primary goal of any patient-centered care plan is to improve individual health outcomes, healthcare providers also stand to benefit through improved patient satisfaction scores, higher staff productivity and morale, reductions in the overall cost of care, and more. This makes patient- or family-centered care an approach worth exploring in almost any healthcare delivery setting.



























Safer Injecting: Filters/Cookers/Tourniquets⁷

Filters	Cookers	Tourniquets
 Dental cottons (best) Clean cotton material Tampon Cotton swab with tightly wound fibers 	 Metal bottle cap (best) Spoon Bottom of a soda can, cleaned 	 Latex or non-latex tourniquet (best) Elastic (from underwear) Innertube (cut into strips) Belt
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