



National Harm Reduction Coalition

# **HARM REDUCTION BEST PRACTICES FOR SERVING PEOPLE EXPERIENCING HOMELESSNESS**

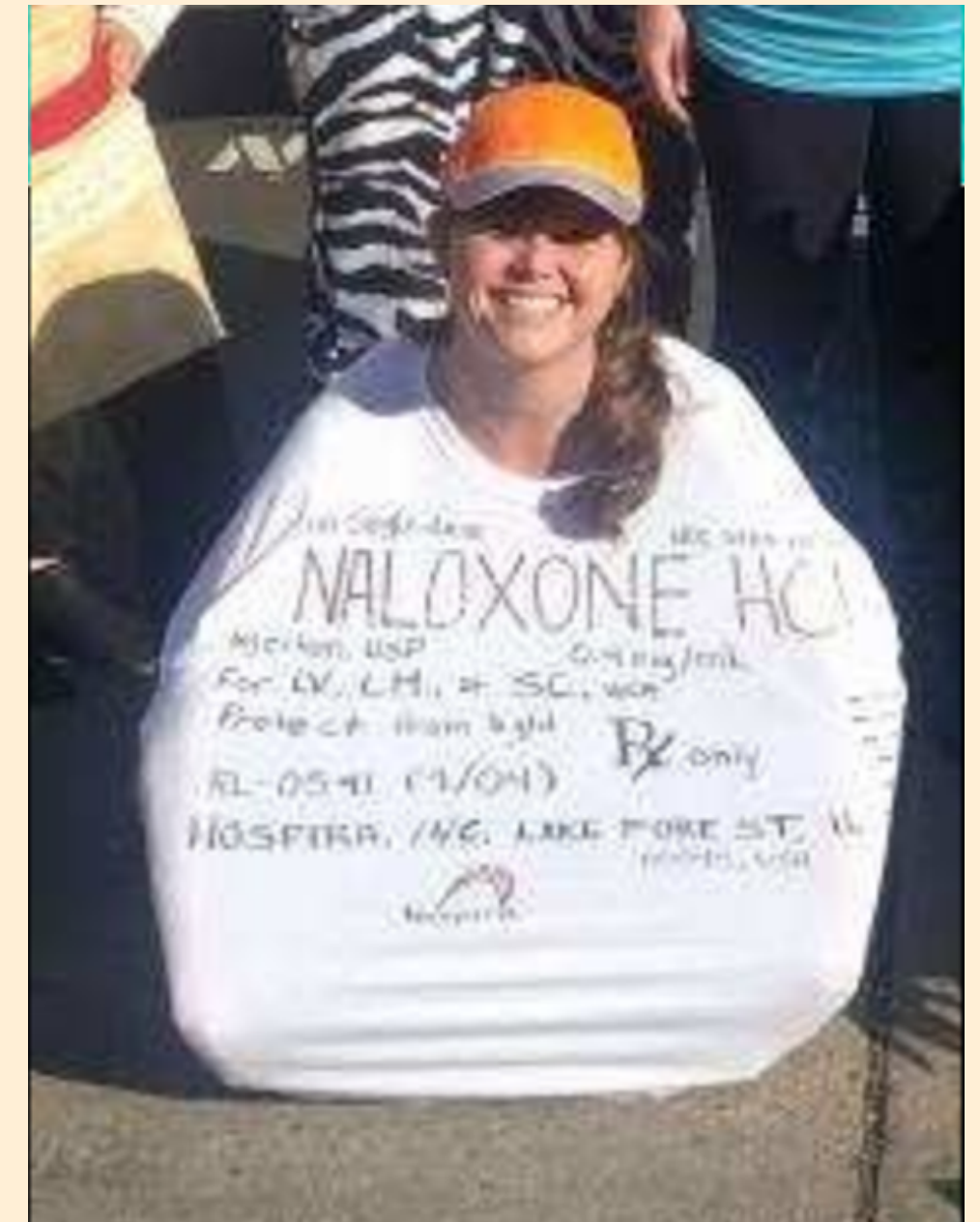
Sam Bourdon, she/her

Harm Reduction Grant Fund Manager

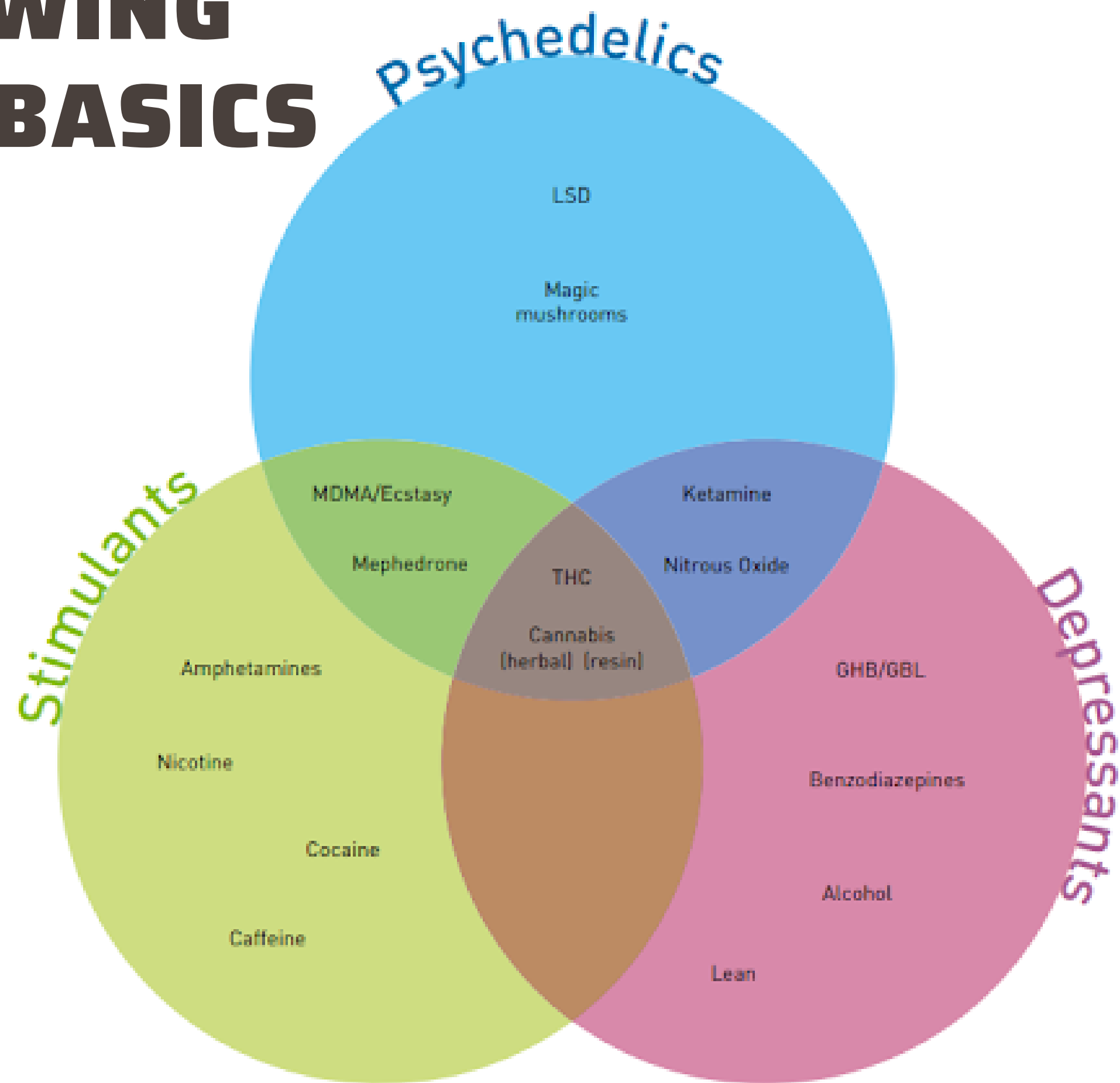
Overdose Prevention Unit- CDPHE

# PRESENTATION FRAMEWORK

- The Overdose Epidemic
- Drug Use Basics
- Understanding Harm Reduction
- Practical Strategies
- Responding to Emergencies



# KNOWING THE BASICS



## Polysubstance Use is common

Polysubstance use (of both licit and illicit substance) can increase risk

## Route of Administration Matters

Injection, smoking, snorting, eating, drinking, vaporizing, booty bumping

## Tolerance can change rapidly

After brief periods of abstinence due to incarceration, cessation of use, OD risk is high

## Mindset and Setting

Environmental factors can have a large impact on drug experience

STIM	PSY	DEP
<b>Speedy</b> , increased energy, increased heart rate, euphoria, dilated pupils, paranoia, anxiety, sexual arousal, sexual impotence, comedowns	<b>Tripping</b> , spiritual connection, heightened senses, loss of control, visual or auditory hallucinations, nausea, anxiety, panic	<b>Buzzing</b> , euphoric, confident, relaxed, risk-taking, withdrawal, unconsciousness, coma, disinhibition, vomiting, death

STIM+PSY	DEP+PSY	STIM+DEP+PSY
<b>Loved up</b> , connection, understanding, sweating, dehydration, facial flushing, mood swings, serotonin syndrome	<b>Out of body</b> , euphoric, floaty, scared, disconnected, relaxed, numb, unable to move, visual or auditory hallucinations, pain-free, in a 'hole'	<b>Stoned</b> , calm, hypersensual, visual or auditory hallucinations, unresponsive, paranoid, aggressive, dry mouth, risk of mental ill health

Alcohol and Drug Foundation

# Fentanyl and Emerging Synthetic Opioids

## Window for Bystander Response



\*Times are estimates intended to illustrate magnitude of difference



Feldman © 2022 Prehospital and Disaster Medicine  
**Figure 1. Hand and Wrist Visibly Soiled with Fentanyl.**  
Note: Larger liquid volumes appear more visible, however nearly full surface area was exposed. Arrow shows 0.5cm abrasion.

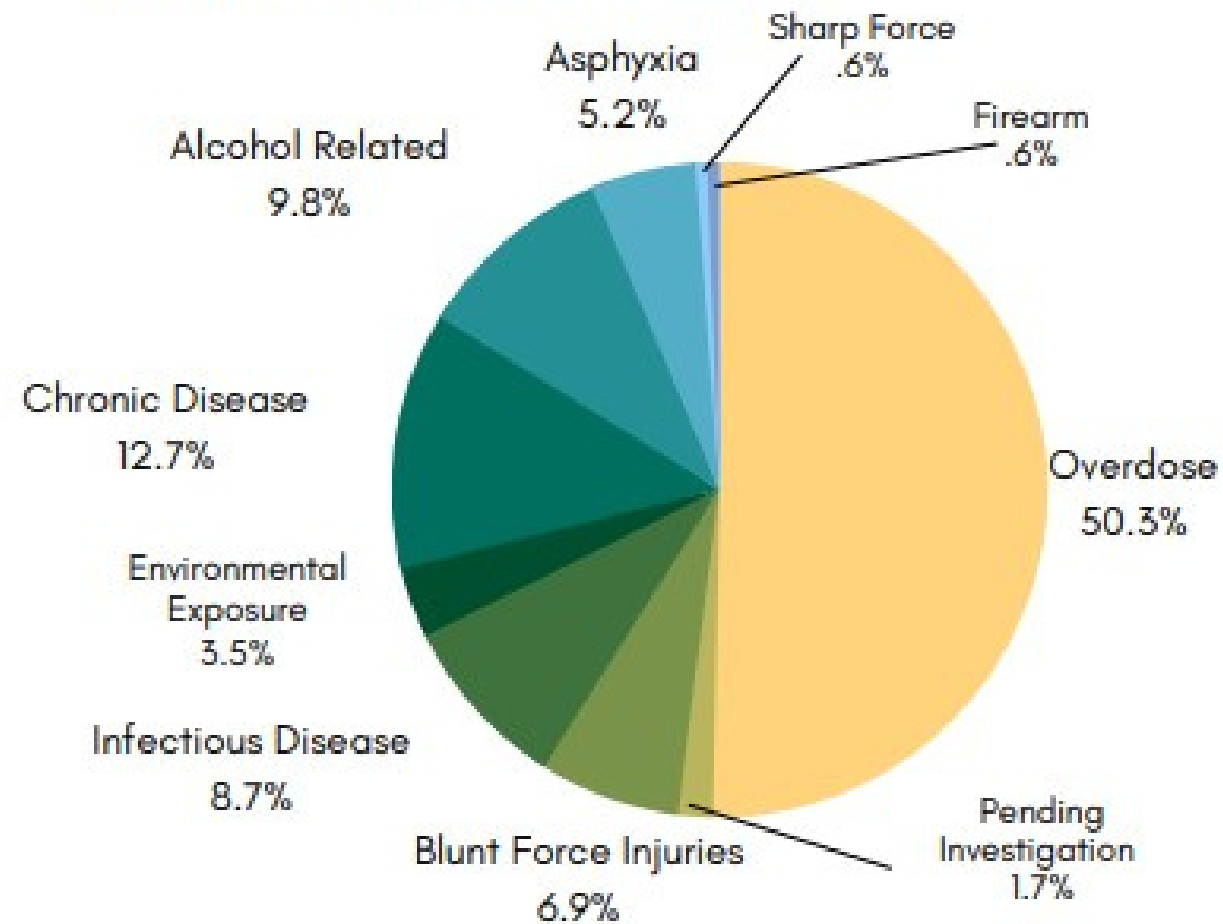
## Busting common myths

- Fentanyl is not naloxone resistant
- Overdoses are not caused by incidental contact
- Fentanyl isn't in every drug
- Some people use fentanyl knowingly

# The Overdose Epidemic

- 1,258 overdose deaths involving opioids including heroin
- 749 overdose deaths due to methamphetamine or other psychostimulant
- 60 overdose deaths due to alcohol poisoning

FIGURE 3. CAUSE OF DEATH



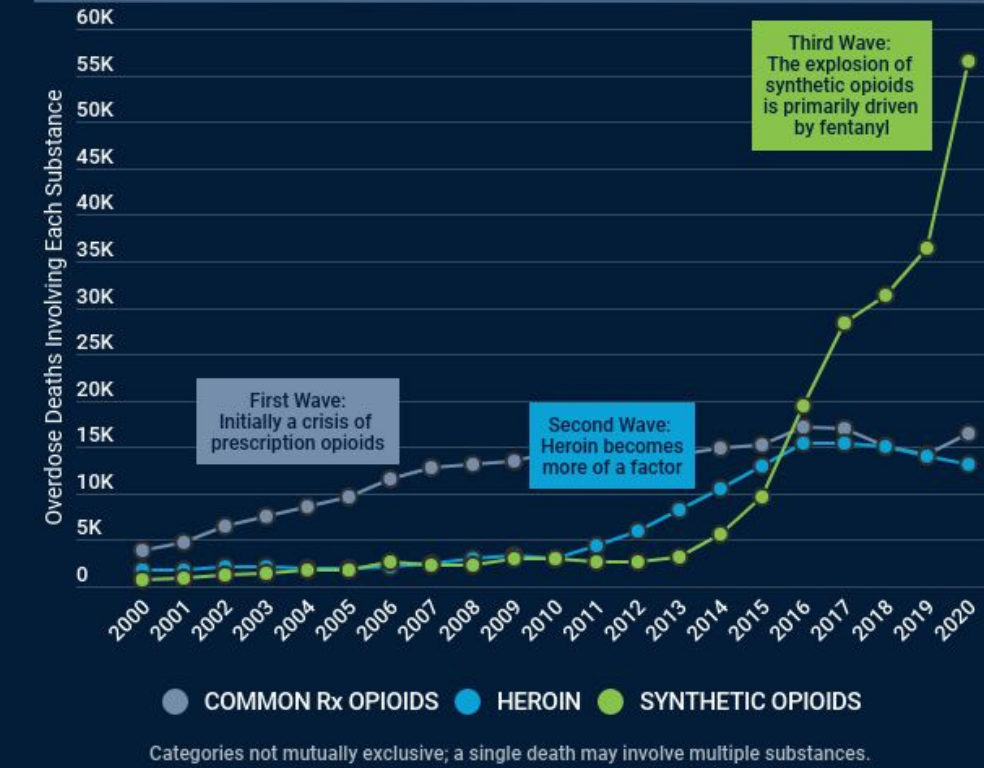
Colorado Coalition for the Homeless, 2022



Photo by Ariana Drehler

## Third wave still going strong:

Synthetic opioid deaths climbing rapidly; uptick in deaths from common Rx Opioids in 2020



DEA Photo

# What is Harm Reduction?

David Wojnarowicz, 1988

## What is Harm Reduction?

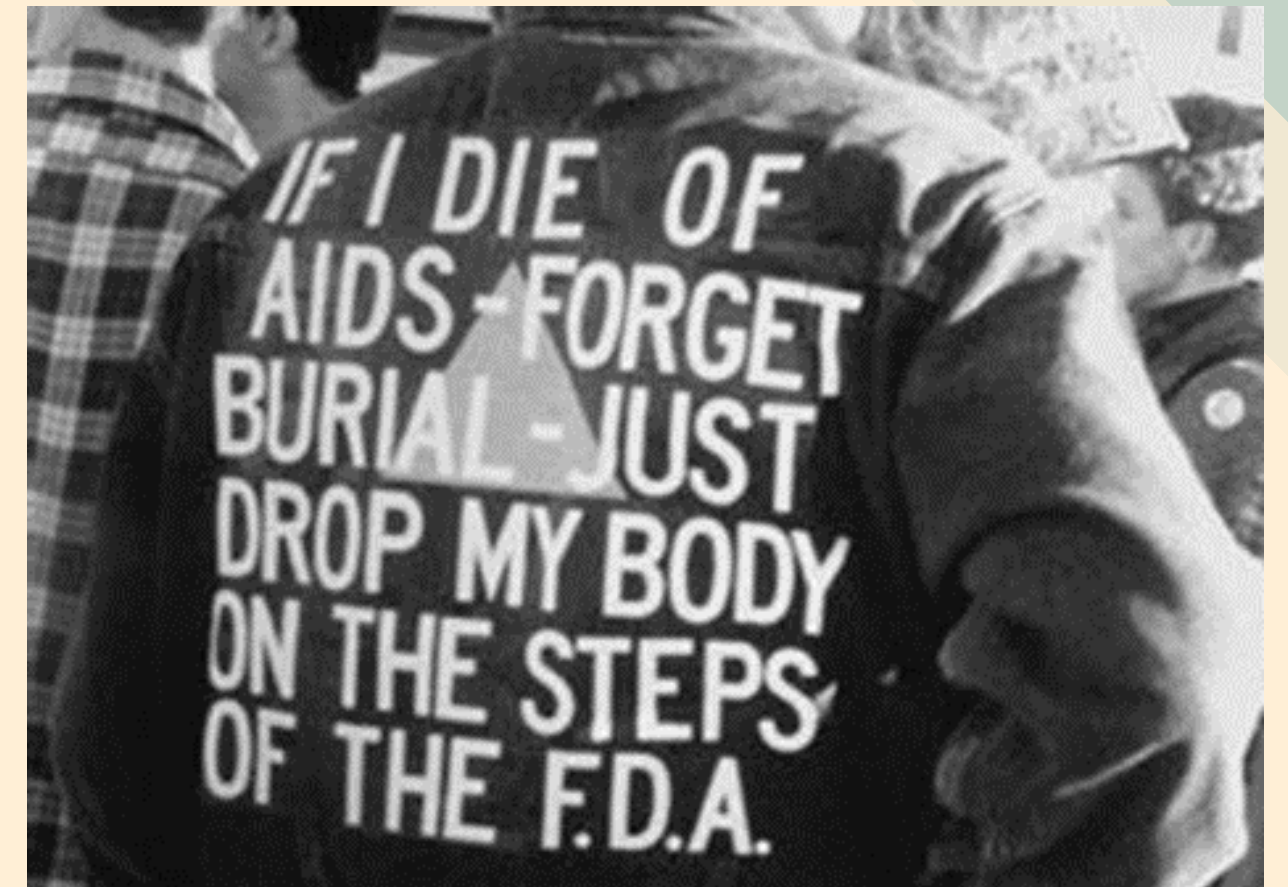
- Incorporating a spectrum of strategies including safer techniques, managed use, and abstinence to promote the dignity and wellbeing of people who use drugs
- A framework for understanding structural inequalities like poverty, racism, homophobia, classism, etc.
- Meeting people “where they are,” but not leaving them there

## We Use People First Language:

- A person is a person first, and a behavior is something that can change — terms like “drug addict” or “user” imply someone is “something” instead of someone
- Stigma is a barrier to care and we want people to feel comfortable when accessing services
- People are more than their drug use and harm reduction focuses on the whole person

**Harm reduction was created by people who are most affected!**

*"Homelessness and Harm Reduction" National Harm Reduction Coalition*



ELAINE THOMPSON/AP

**Health & Dignity:**

Establishes quality of individual and community life and wellbeing as the criteria for successful interventions and policies.

**Participant Centered Services:**

Calls for nonjudgmental, non-coercive provision of services and resources to people who use drugs to assist them in reducing attendant harm.

**Participant Involvement:**

Ensures participants and communities impacted have a real voice.

**Participant Autonomy:**

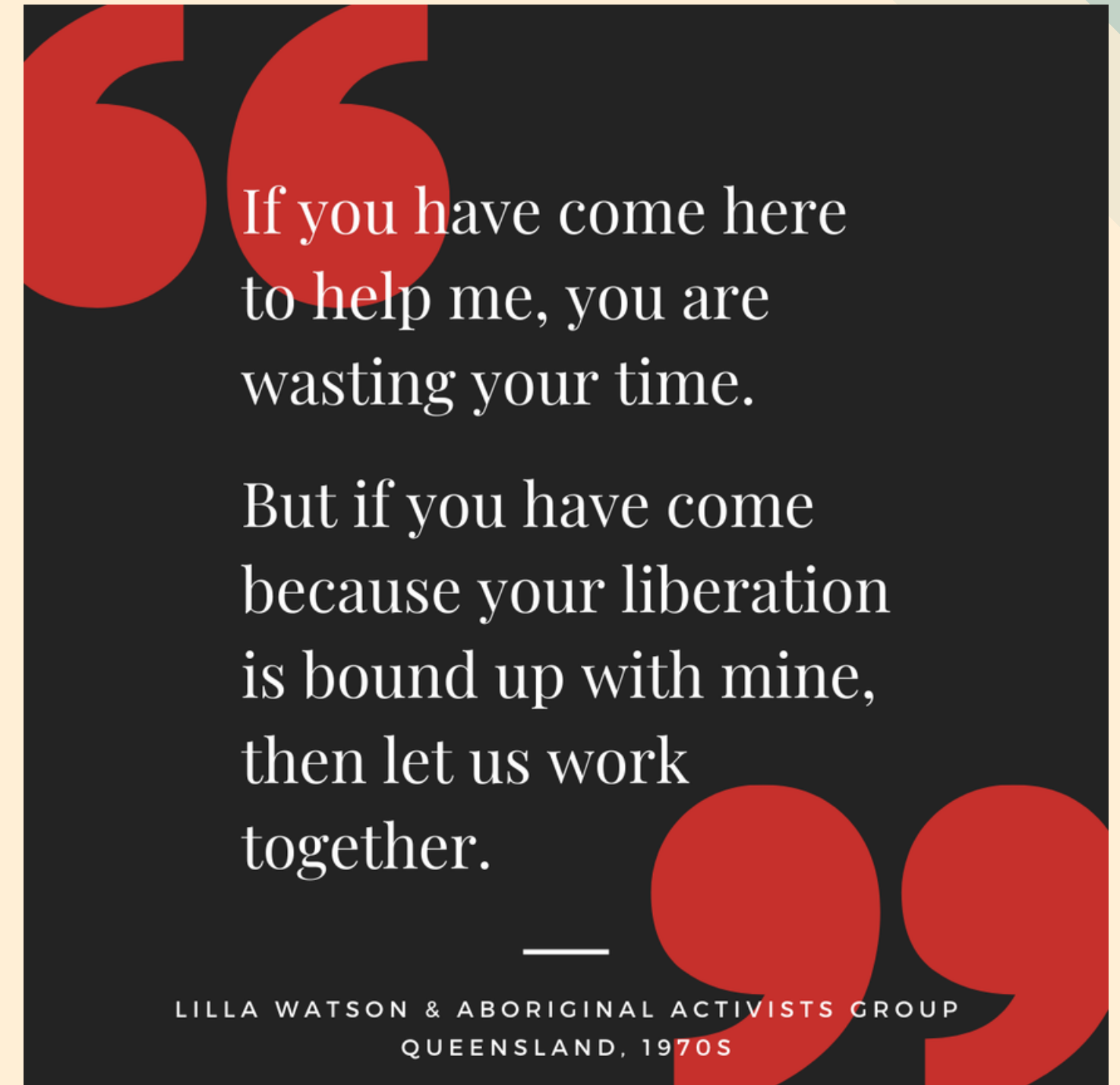
Affirms participants as the primary agents of change, and seeks to empower participants to share information and support each other in strategies which meet their actual conditions of harm.

**Sociocultural Factors:**

Recognizes that the realities of various social inequalities affect both people's vulnerability to and capacity for effectively dealing with potential harm.

**Pragmatism & Realism:**

Does not attempt to minimize or ignore the real and tragic harm and danger associated with drug use or other risk behaviors.





**What harm  
reduction strategies  
or de-escalation  
tactics do you  
already use?**

**When should you  
draw the line?**

"Black and white" scenarios

"Grey" scenarios

Service ban vs. Service  
pause

# PRACTICAL STRATEGIES

- Understanding your environment
- Recognizing personal bias
- Recognizing vicarious trauma
- Asking for participant feedback
- Establishing healthy boundaries



INCLUSIVE

ACCEPTING

WELCOMING

SAFE SPACE

# Psychostimulants

Shorter acting than most depressants, re-dosing is common

## Potential Escalation

Euphoria, paranoia, fear

## Overdose risk "Overramping"

Rapid heartrate, overheating, dehydration, impulsive behavior

## Set clear expectations

- " Try another day"
- Agreed upon times to de-stimulate
- Redosing plan

## Tactics for De-escalation

- Empty, cool, neutral spaces
- One-on-one
- Trusted staff
- Remain calm

## Safety

- Aware of exits, never alone
- Sleep, water, nutritional drinks
- Indoors vs. outdoors

# Depressants

Longer acting

## Potential Escalation

Confusion, Unconsciousness, respiratory depression

## Overdose risk

system depression, vomiting, dehydration, unconsciousness, no respiration

## Set clear expectations

- How can staff support
- When will staff engage
- Monitoring (front desk staff, others)

**THE FOLLOWING SIGNS AND SYMPTOMS MAY INDICATE AN OPIOID OVERDOSE EMERGENCY:**



**UNUSUAL SLEEPINESS OR NOT ABLE TO AWAKEN**



**BREATHING WILL BE SLOW OR ABSENT**



**SLOW HEARTBEAT OR LOW BLOOD PRESSURE**



**SKIN FEELS COLD AND CLAMMY**



**PUPILS ARE TINY**



**NAILS AND LIPS ARE BLUE**

## Safety

- Implementation of bathroom checks
- Sharps container on site
- Naloxone on site
- Withdrawal management

## Health & Dignity

- Affirming messages and materials
- Accessible bathrooms

## Participant Autonomy

- Having supplies and resources accessible without staff permission
- Allowing individuals to come and leave freely

## Participant Centered Services

- Offering what participants say is most important (e.g. access to chargers, phones, computers)

## Sociocultural Factors

- Multilingual resources
- Posters that explicitly state that all people are welcome
- Variety of images in the space

## Participant Involvement

- Creating message boards for participants to contribute feedback or share resources with others
- Elections for services and space changes
- Opportunities to get involved

## Pragmatism & Realism

- Consider posting community agreements in public
- Creating alternative spaces for people who need to move/be alone/pace

**How can you apply harm reduction to your space?**

# Funding Resources

## Colorado Department of Local Affairs- Office of Homelessness Initiatives

- Current Funding Opportunities

### Daniels Fund

Applications accepted on an as-submitted basis

Grant Announcements through the Behavioral Health Administration

Funding Supportive Housing Services for People with Behavioral Health Needs: Federal Resources

Colorado Department of Public Health and Environment- Funding Opportunities

Colorado Consortium for Prescription Drug Abuse Prevention Grant Writing Assistance

# Additional Resources

[SAMHSA- Mental and Substance Use Disorders  
and Homelessness Resources](#)

[Housing First and Harm Reduction-HOPWA](#)

[Homelessness Learning Hub- Harm Reduction  
Training](#)

[Colorado Coalition for the Homeless- We Will  
Remember 2022](#)

[National Harm Reduction Coalition: Homelessness  
and Harm Reduction](#)

[National Health Care for the Homeless Council-  
Harm Reduction](#)

# QUESTIONS?



**THANK YOU!**  
**SAM.BOURDON@STATE.CO.US**