

# A HARM REDUCTION APPROACH

TO CARING FOR PEOPLE  
WHO USE STIMULANTS

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**CARE Case Conference**  
**8/25/2022**

# LEARNING OBJECTIVES



Describe rate of stimulant-involved OD deaths and recognize inequities based on race and ethnicity.



Identify challenges of implementing harm reduction strategies into healthcare settings and importance of involving community-based harm reductionists.



Summarize harm reduction strategies for people who use stimulants.



**MEET M.**



Image Courtesy Ashley Stevenson

"She grabs her guitar before coming inside the van and plays it upside down and over her shoulder, plucking the strings. Mid-visit she pulls out her harmonica and plays us a song... Before the visit ends, she starts to sing Shawn Mendes, 'Treat you better'. We all sing along."

1/14/22 - Shattuck Cottages  
42 yo F w HIV on HAART, from South Africa, cocaine use d/o, alcohol use d/o, & recent purulent cellulitis of @ knee. who needs wound care. Per NHC records, wound @ MSA & Staph. pyogenes. We helped clean wound today, healing well. Pt has HIV on Bictarvy, takes about 50% of days. No recent labs. She is not fully convinced that meds will cure her HIV. Says it is in God's hands & hoping to not need lifelong meds. Spoke @ Sullivan's pharmacy to have Rx of Bictarvy sent to cottages. Pt is worried about possible seizure in her crack cocaine supply. She had never listed her supply, so we gave her a tentacle kit. Showed her how to use it. Isabel, our harm reductionist, case manager also gave pt a clean smoking kit & little glass pipe. The pt is animated, talkative, & a lot of fun. She grabs her guitar before coming inside the van & plays it upside down & over her shoulder, plucking the strings. Mid-visit she pulls out her harmonica & plays us a song. We continue to discuss her alcohol use. She is open & me. She lacks insight into her drinking & seems to love the way alcohol makes her feel. Gives her energy. Before the visit ends, we tell her we'll be back next week. She starts to sing Shawn Mendes's song, "Treat you better". We all sing along.



# HISTORY

42 yo F  
Cisgender (she/her)  
Immigrated from South Africa in 2013

- HIV on HART
  - VL 35 1/22
  - CD4 377 2/22
- Dx 2013 prior to moving to USA
- Started HIV meds in South Africa

Biktarvy 1 tab PO qd  
(~50% adherence)

- Severe cocaine use d/o
- Severe alcohol use d/o
- Tobacco dependence

- Denies psychiatric hx
- Bipolar 1 d/o per chart

- Stays at Shattuck Cottages (low-thresh transitional housing)
- \$\$ performing music

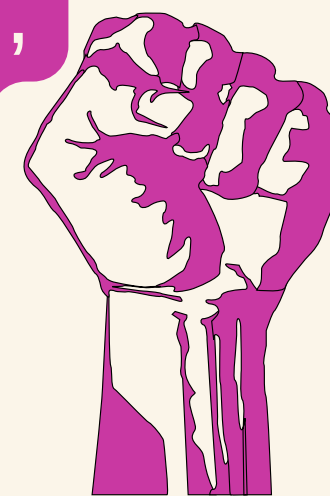
- Immune HAV & HBV
- HCV ab NR 2/2022
- Syphilis IgG NR 2/22
- COVID Moderna x1 3/22

NKDA

- Nulligravida
- Not sexually active, last time 3 yrs ago
- Moved from Chicago due to problems with ex-husband

No family hx of SUD or med problems

Creative, musical (harmonica, guitar), humorous, insightful, spiritual, charming, cat lover



# SUBSTANCE USE HISTORY

## COCAINE

- Smokes crack cocaine daily (\$40-60) since 23 yrs old
- Provides "closeness to God"
- Primary SUD (forgets about liquor if she has cocaine)
- No IV use. Does not share pipe
- No hx of OD. Feels body is immune
- Few friends she uses with
- Never tested cocaine for fentanyl. Concerned about "dirty supply" in Boston
- No hx of meds for CUD

## ALCOHOL

- Drinks 1 pint of vodka and 2-3 beers most days of the week
- Enjoys "rush of energy"
- Helps with her music and entertaining (source of \$\$)
- No hx of withdrawal seizures. No withdrawal after 4 days at COVID hotel
- Not interested in cutting down, doesn't view as problem
- No hx of meds for AUD

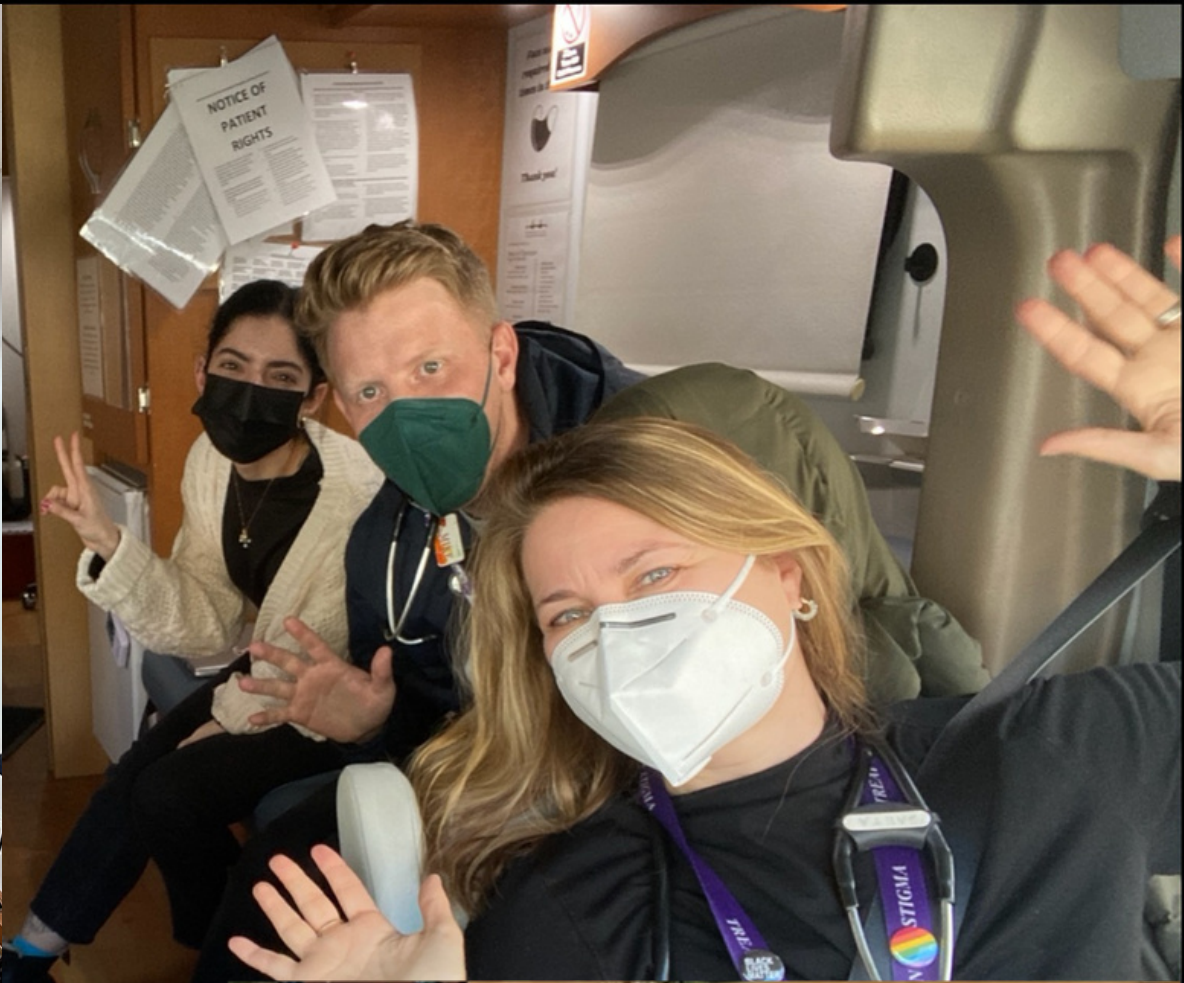
## TOBACCO

- Smokes 1 pack cigs/wk
- Vapes daily to cut back cig use
- Never been on NRT

## CANNABIS

- Smokes cannabis intermittently

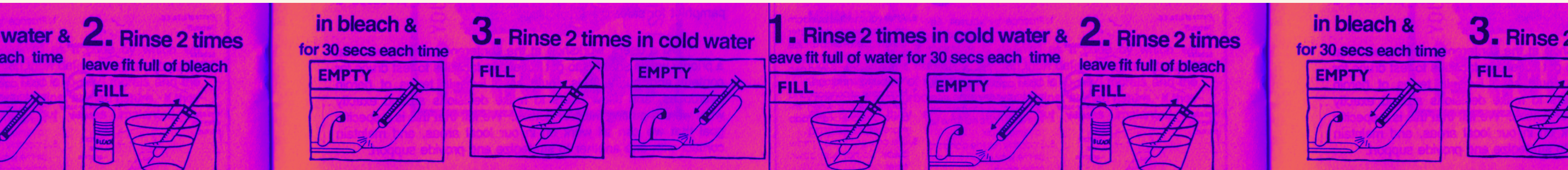






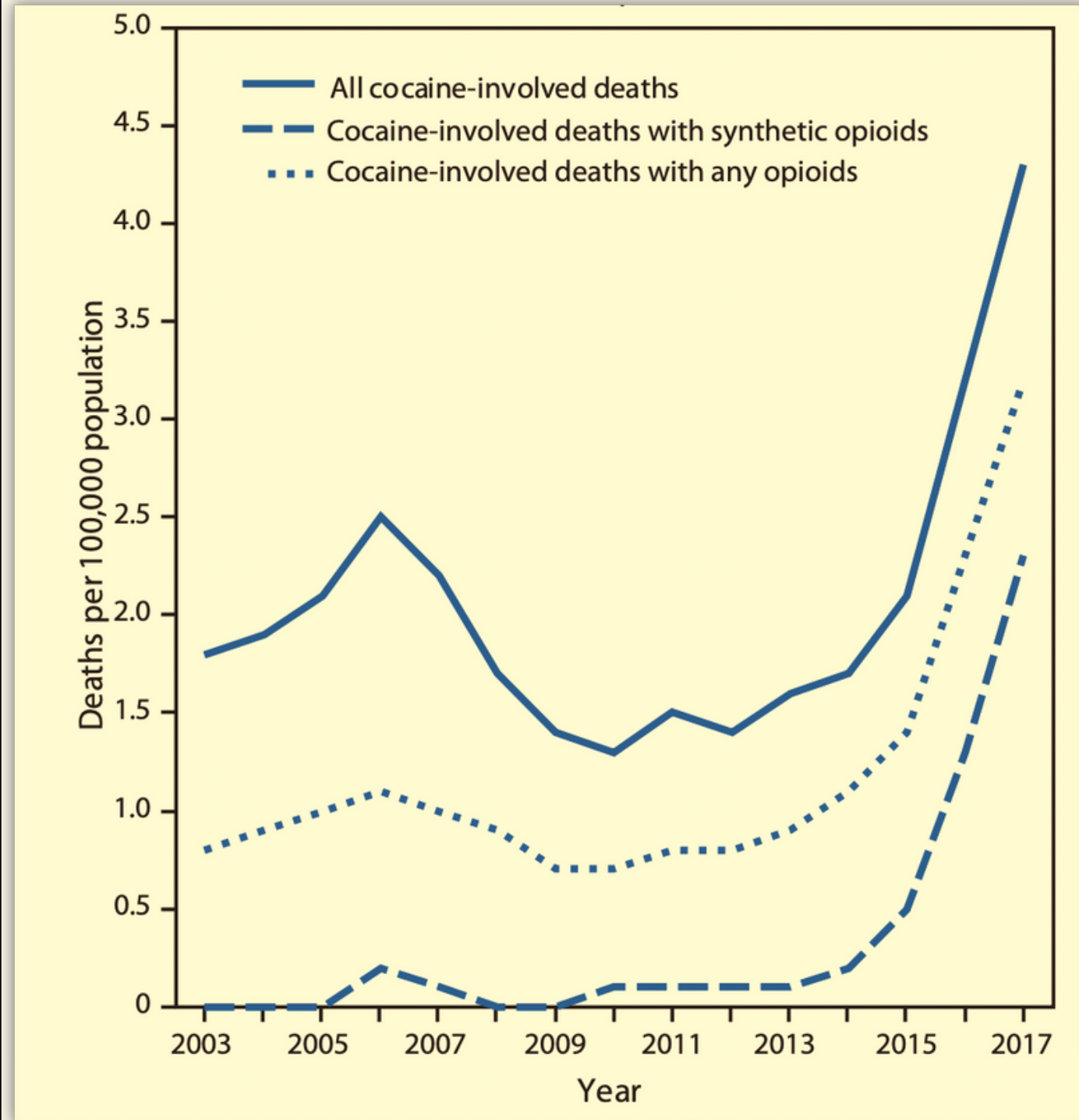
# LEARNING OBJECTIVE #1

Describe rate of stimulant-involved OD deaths and recognize inequities based on race and ethnicity.

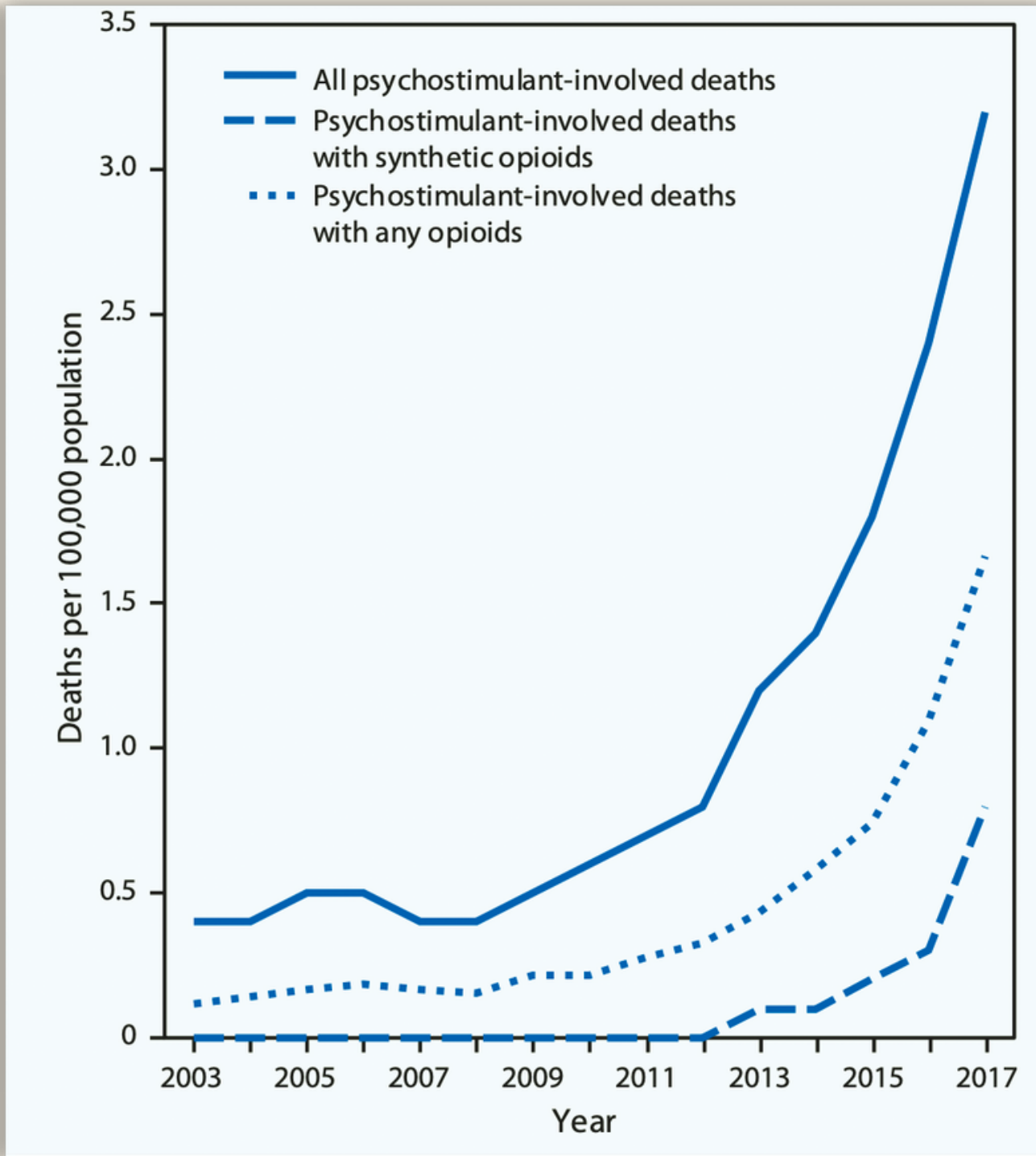


**STIMULANT-RELATED OVERDOSE DEATHS ARE INCREASING IN THE US.**

### COCAINE + FENTANYL



### PSYCHOSTIMS + FENTANYL





# HIGHEST RATE OF COCAINE- INVOLVED OD DEATHS OCCURRED IN AFRICAN AMERICANS.

TABLE. Number and age-adjusted rate of drug overdose deaths\* involving cocaine<sup>†</sup> and psychostimulants with abuse potential,<sup>§,¶</sup> by opioid involvement,\*\* sex, age group, race and Hispanic origin,<sup>††</sup> U.S. Census region, urbanization level,<sup>§§</sup> and selected states<sup>¶¶</sup> — United States, 2016 and 2017

Decedent characteristic	Involving cocaine				Involving psychostimulants with abuse potential			
	2016	2017	Change from 2016 to 2017***		2016	2017	Change from 2016 to 2017***	
	No. (Rate)	No. (Rate)	Absolute rate change	% Change in rate	No. (Rate)	No. (Rate)	Absolute rate change	% Change in rate
Overall	10,375 (3.2)	13,942 (4.3)	1.1 <sup>†††</sup>	34.4 <sup>†††</sup>	7,542 (2.4)	10,333 (3.2)	0.8 <sup>†††</sup>	33.3 <sup>†††</sup>
With any opioid**	7,263 (2.3)	10,131 (3.2)	0.9 <sup>†††</sup>	39.1 <sup>†††</sup>	3,416 (1.1)	5,203 (1.7)	0.6 <sup>†††</sup>	54.5 <sup>†††</sup>
<b>Sex</b>								
Male	7,493 (4.7)	10,021 (6.2)	1.5 <sup>†††</sup>	31.9 <sup>†††</sup>	5,348 (3.4)	7,240 (4.5)	1.1 <sup>†††</sup>	32.4 <sup>†††</sup>
Female	2,882 (1.8)	3,921 (2.5)	0.7 <sup>†††</sup>	38.9 <sup>†††</sup>	2,194 (1.4)	3,093 (1.9)	0.5 <sup>†††</sup>	35.7 <sup>†††</sup>
<b>Race and Hispanic origin<sup>††</sup></b>								
White, non-Hispanic	6,443 (3.4)	8,614 (4.6)	1.2 <sup>†††</sup>	35.3 <sup>†††</sup>	5,777 (3.0)	7,995 (4.2)	1.2 <sup>†††</sup>	40.0 <sup>†††</sup>
<b>Black, non-Hispanic</b>	<b>2,599 (6.1)</b>	<b>3,554 (8.3)</b>	<b>2.2<sup>†††</sup></b>	<b>36.1<sup>†††</sup></b>	<b>477 (1.2)</b>	<b>663 (1.6)</b>	<b>0.4<sup>†††</sup></b>	<b>33.3<sup>†††</sup></b>
Hispanic	1,097 (2.0)	1,438 (2.5)	0.5 <sup>†††</sup>	25.0 <sup>†††</sup>	846 (1.5)	1,125 (2.0)	0.5 <sup>†††</sup>	33.3 <sup>†††</sup>
American Indian/Alaska Native, non-Hispanic	56 (2.1)	65 (2.4)	0.3	14.3	181 (6.9)	222 (8.5)	1.6 <sup>†††</sup>	23.2 <sup>†††</sup>
Asian/Pacific Islander, non-Hispanic	85 (0.4)	129 (0.6)	0.2	50.0	171 (0.8)	218 (1.0)	0.2 <sup>†††</sup>	25.0 <sup>†††</sup>



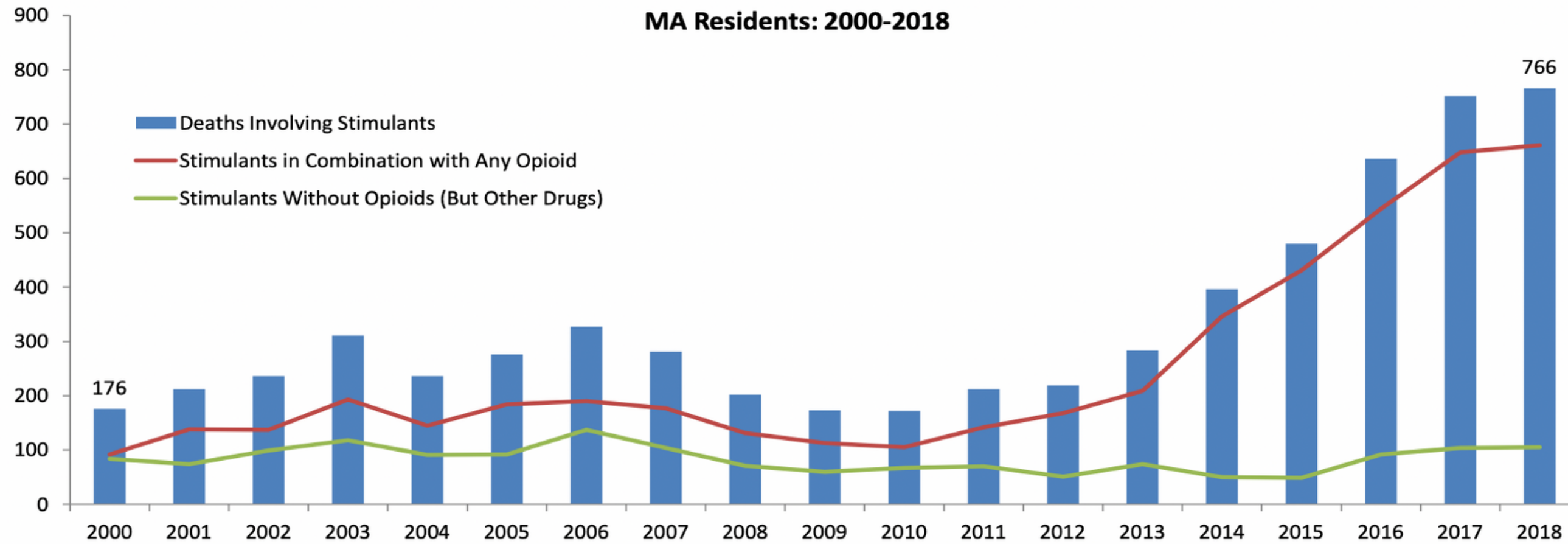
# HIGHEST RATE OF PSYCHOSTIM-INVOLVED OD DEATHS OCCURRED IN AI/AN.

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# MASSACHUSETTS

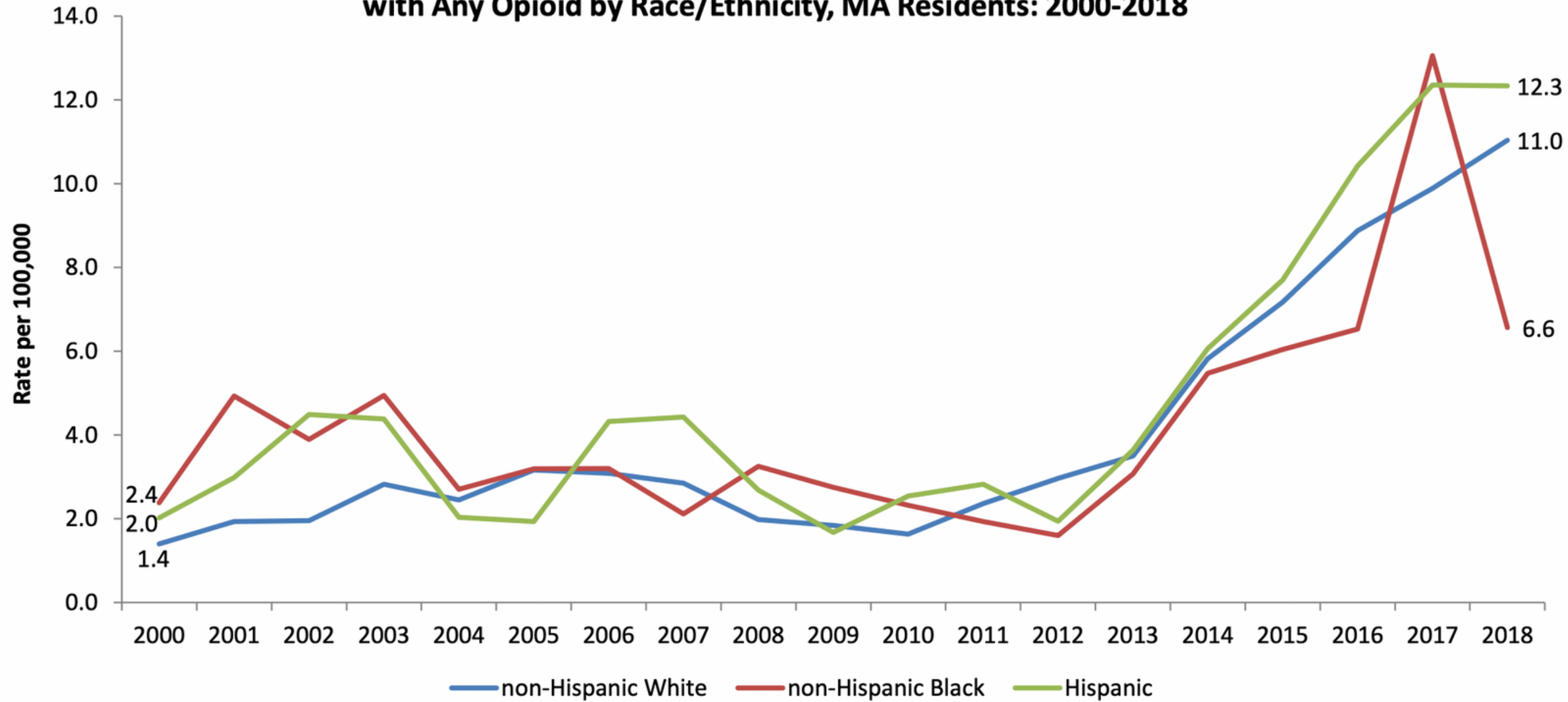
Count of Stimulant-Related Deaths  
MA Residents: 2000-2018



**SINCE 2014,  
ALMOST NINE OUT  
OF EVERY TEN  
DEATHS  
INVOLVING  
STIMULANTS  
ALSO INVOLVE  
OPIOIDS.**

# MASSACHUSETTS

Rate of Stimulant-Related Overdose Deaths in Combination with Any Opioid by Race/Ethnicity, MA Residents: 2000-2018

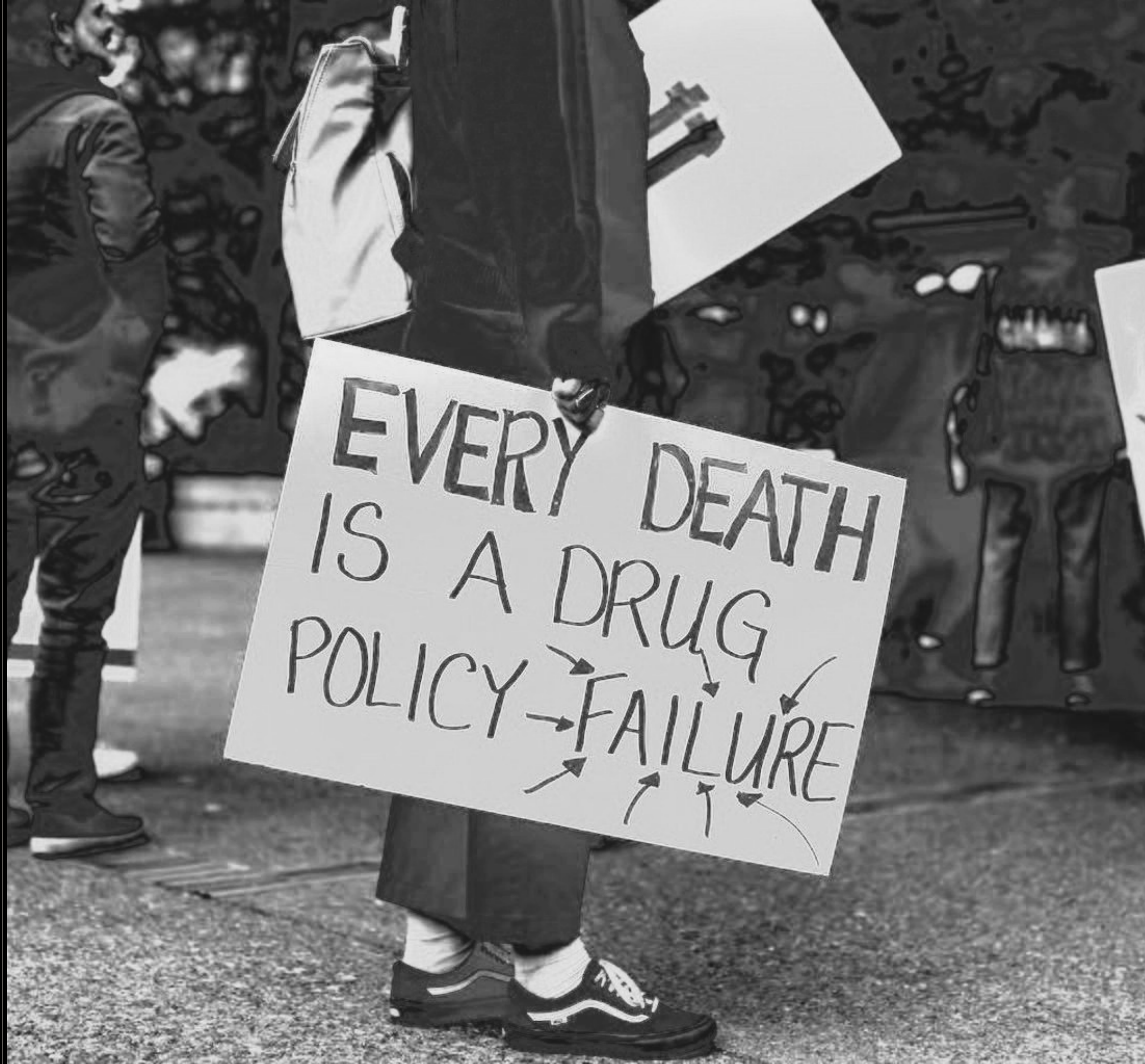


**THE RATE OF  
STIMULANT-  
RELATED  
OVERDOSE DEATH  
IS HIGHEST  
AMONG HISPANIC  
RESIDENTS.**



“The Nixon campaign in 1968, and the Nixon White House after that, had two enemies: the antiwar left and black people. You understand what I’m saying? We knew we couldn’t make it illegal to be either against the war or black, but by getting the public to associate the hippies with marijuana and blacks with heroin, and then criminalizing both heavily, we could disrupt those communities. We could arrest their leaders, raid their homes, break up their meetings, and vilify them night after night on the evening news. Did we know we were lying about the drugs? Of course we did.”

- John Ehrlichman, White House  
Domestic Affairs Advisor,  
Nixon Administration





# CRACK THE STIGMA



SOMETHING'S WRONG WITH THE MATH

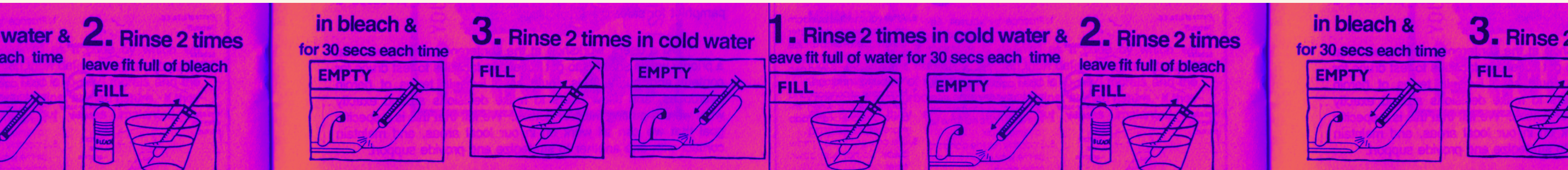
$$\left( \frac{5 \text{ grams} = 5 \text{ years}}{\text{Crack Cocaine}} \right) \neq \left( \frac{500 \text{ grams} = 5 \text{ years}}{\text{Powder Cocaine}} \right)$$

**EXPERT DISCUSSION:**  
In what ways does stigma affect access to treatment and harm reduction services?



# LEARNING OBJECTIVE #2

Identify **challenges** of implementing harm reduction strategies into healthcare settings and the **importance** of involving **community-based harm reductionists**.





# WHAT IS HARM REDUCTION?



- A set of practical strategies and ideas aimed at reducing negative consequences of substance use.
- Also a movement for social justice built on respect for rights of people who use substances.





# WHAT IS HARM REDUCTION?



*"Not all people are ready for treatment. **When they are ready to stop using drugs, as many will, they will have their whole lives ahead of them, not just a series of painful, expensive illnesses ending in death.**"*

-Dawn Day, Ph.D. (1995)

#THEMOSSPROJECT  
BPHC.ORG/AHOPE




There's always  
hope.





Interested in Treatment?  
Ask Staff for Referrals!

Not Interested?  
That's OK!




WE WELCOME  
ALL DOPE SHOOTERS  
ALL METH USERS  
ALL MUSCLERS & SKIN POPPERS  
ALL CRACK SMOKERS  
ALL PILL POPPERS  
WE STAND WITH YOU  
YOU ARE SAFE HERE



WE ♥  
DRUG USERS

HIGH OR DRUNK  
SOBER OR NOT



# HARM REDUCTION VS. MEDICINE


An unfair dichotomy?





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# HARM REDUCTION AND MEDICINE

An unfair dichotomy?



# BARRIERS TO IMPLEMENTING HR IN HEALTHCARE SETTINGS



We bring a moralistic & puritanical viewpoint to substance use.

We criminalize substance use, perpetuating the War on Drugs.

Patients have different goals & priorities.

Hierarchies in clinical environment feel unwelcoming.

Need for centralized consult process.

Lack of institutional support.

Miscommunication 2/2 larger care team.

Extends hospital stay.

HR specialists not treated as professionals with expertise and valuable skill set.

# POTENTIAL BENEFITS OF HR IN HEALTHCARE SETTINGS



**More welcoming hospital/clinical environment.**

**A more patient-centered approach.**

**Improved clinical outcomes.**

**Interrupt the cycle of stigma.**

**Safer hospital discharges.**

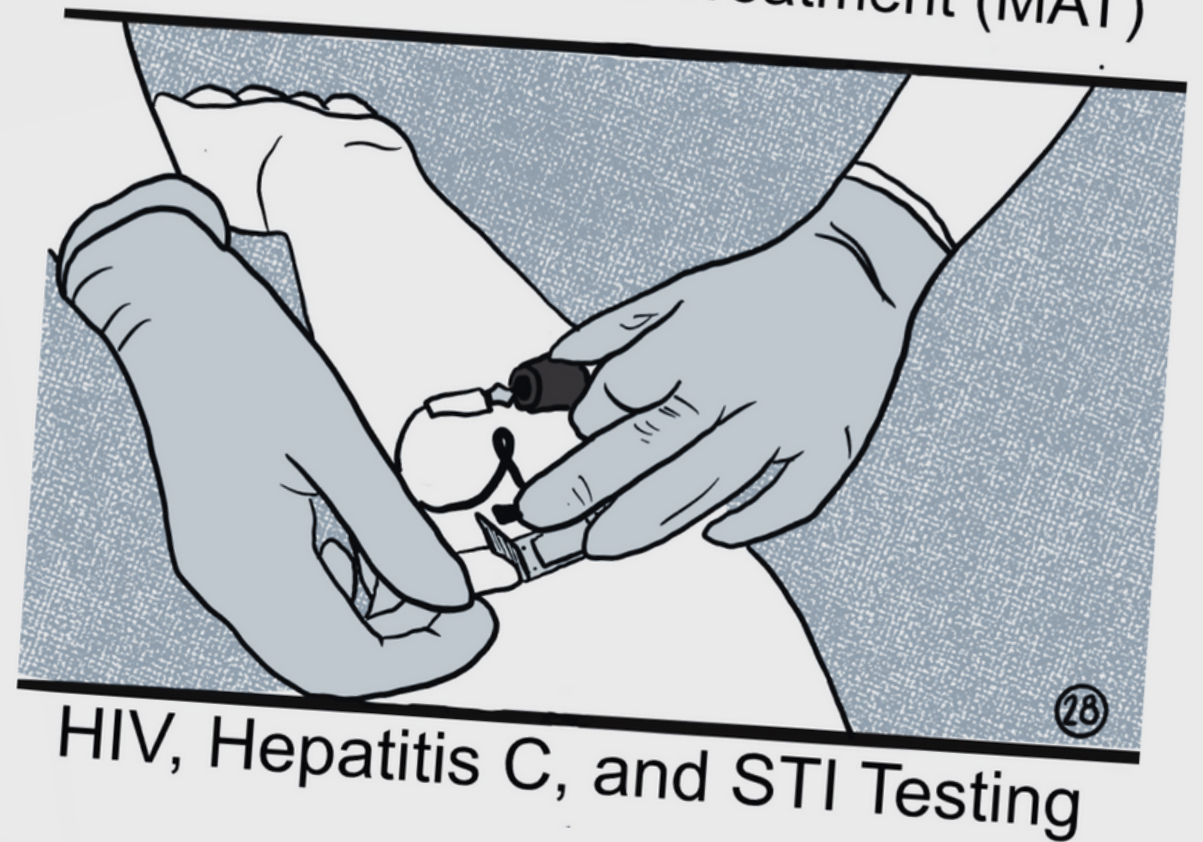
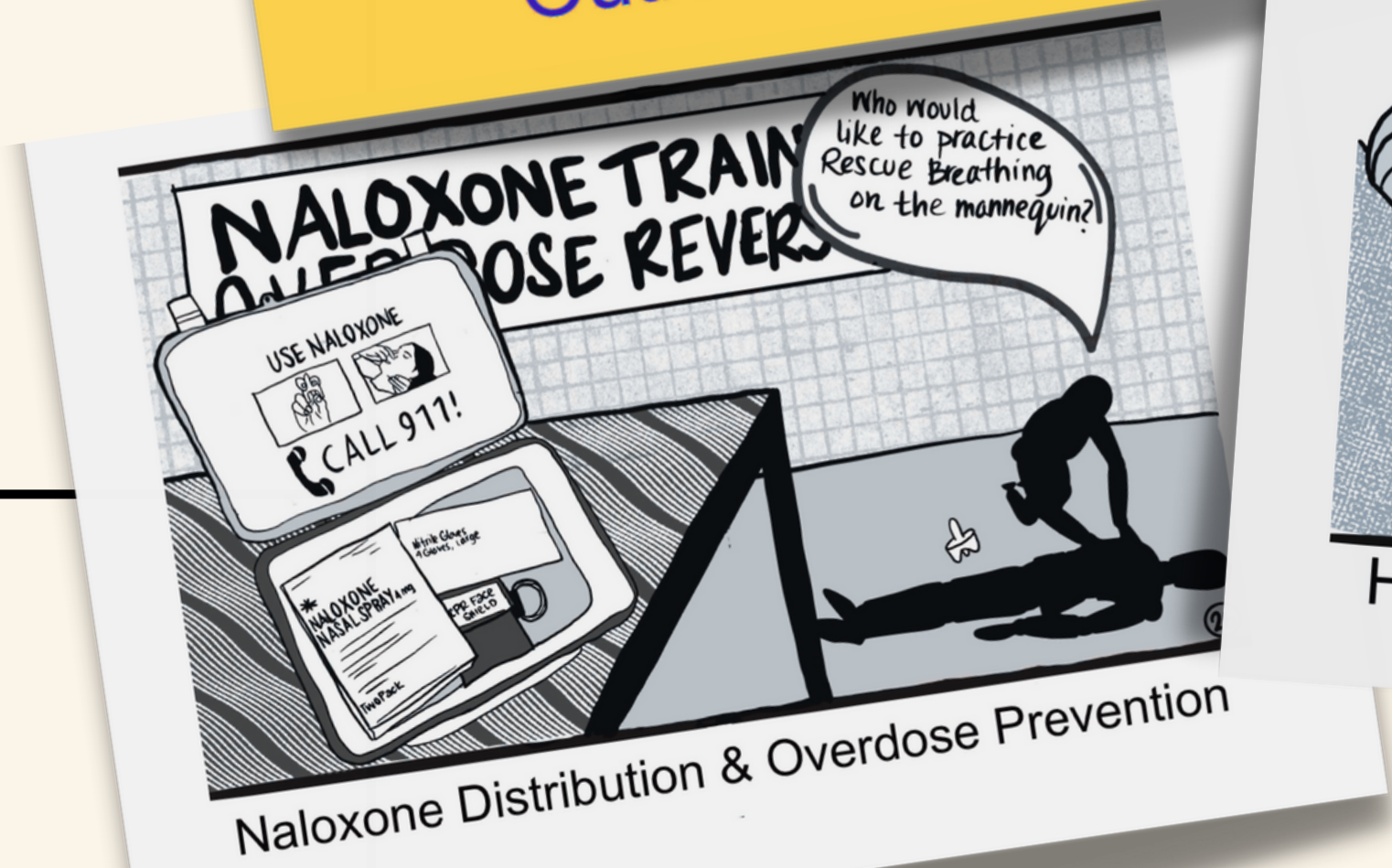
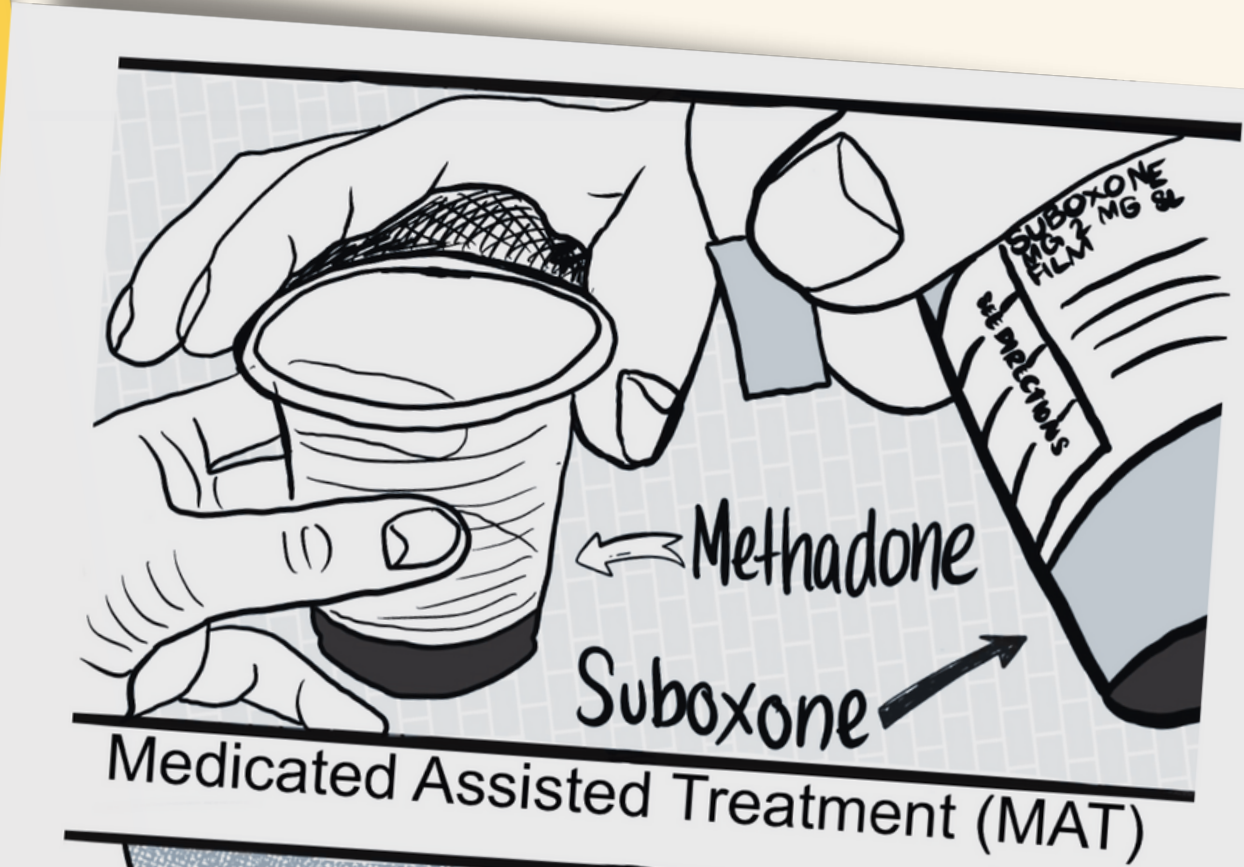
**Reflect the patient populations they serve.**

**Cost-savings.**

**Support inpatient addiction teams.**

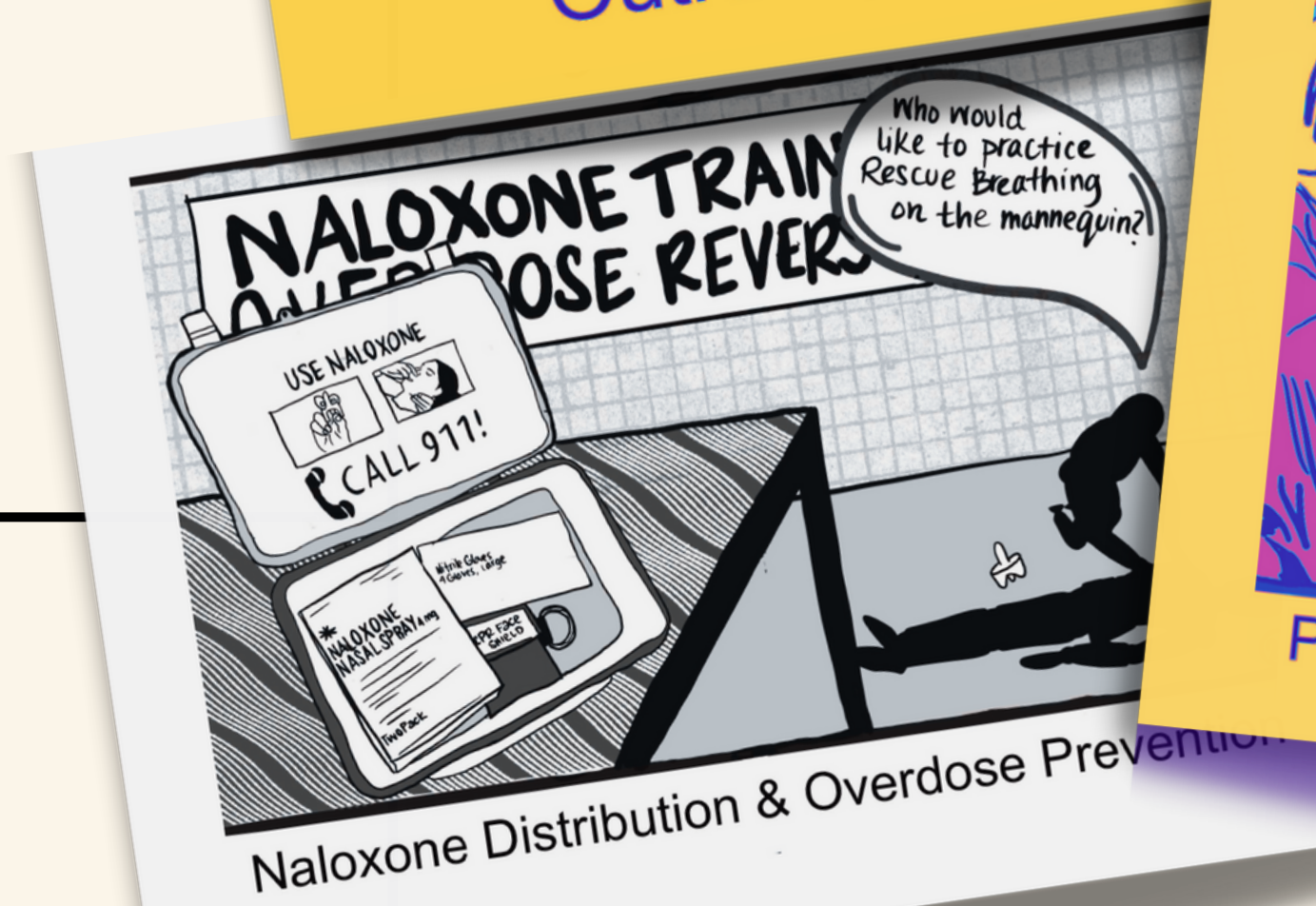


# HARM REDUCTION LOOKS LIKE:



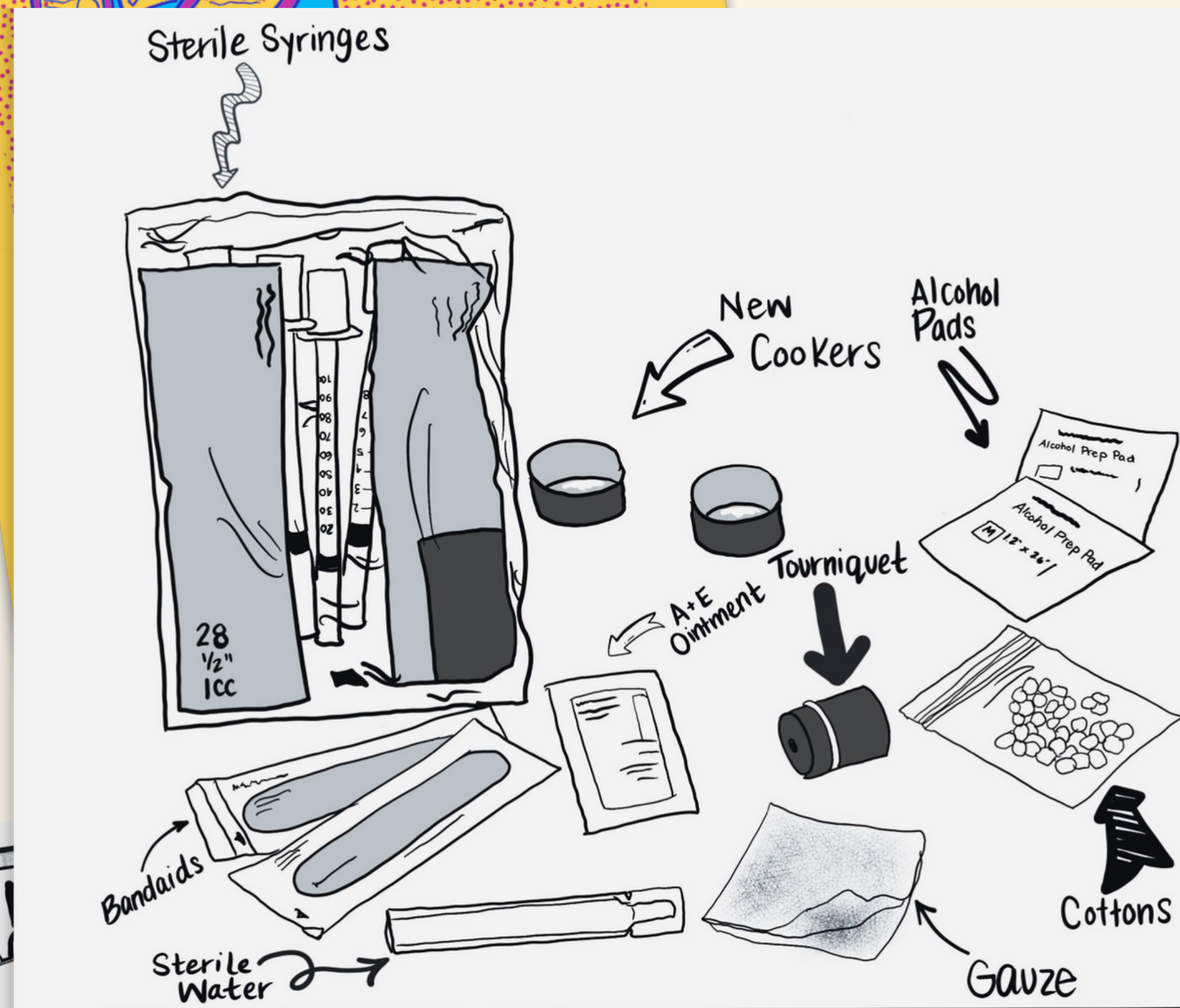


# HARM REDUCTION LOOKS LIKE:





# HARM REDUCTION LOOKS LIKE:



CALL  
NALOXONE  
NASAL SPRAY  
Five Pack  
With Glass  
Covers, Large  
EPN, FOSC  
04/12/10

Naloxone Distribution & Overdose Prevention

Peer Support Groups & Drug User Unions





# HARM REDUCTION LOOKS LIKE:



Naloxone Distribution & Overdose Prevention

Peer Support Groups & Drug User Unions



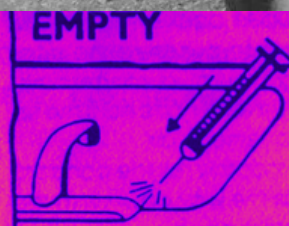
# HARM REDUCTION IS ALSO A MOVEMENT.



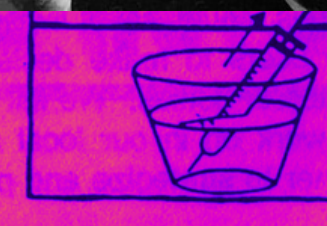
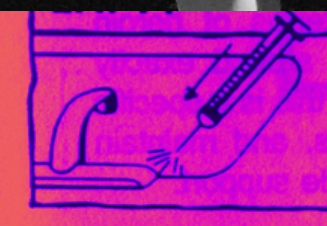
FILL



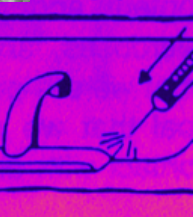
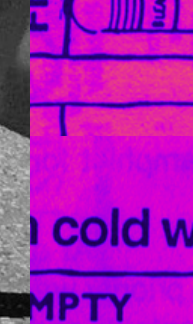
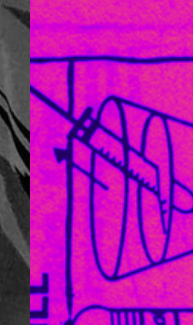
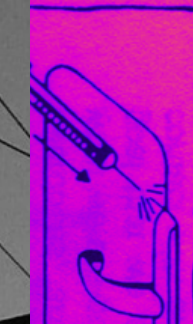
EMPTY



FILL



EMPTY







Systemic Sexism Exists

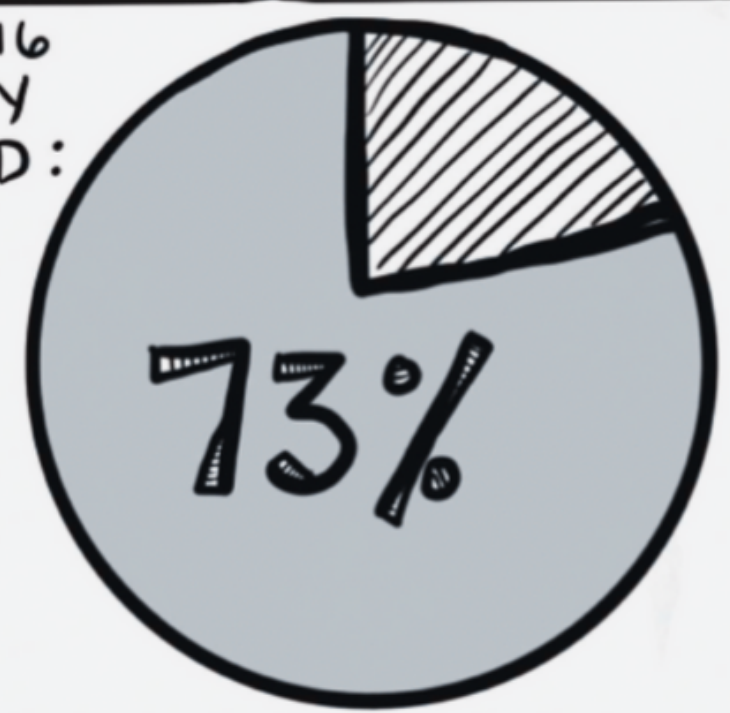
**HARM  
REDUCTION  
RECOGNIZES:**





Systemic Sexism Exists

A 2016 STUDY FOUND:



OF MEDICAL STUDENTS BELIEVED IN BIOLOGICAL DIFFERENCES BETWEEN RACES, IN THE WAYS PATIENTS EXPERIENCED PAIN. THEY BELIEVED BLACK PATIENTS FELT LESS PAIN THAN WHITE PATIENTS.

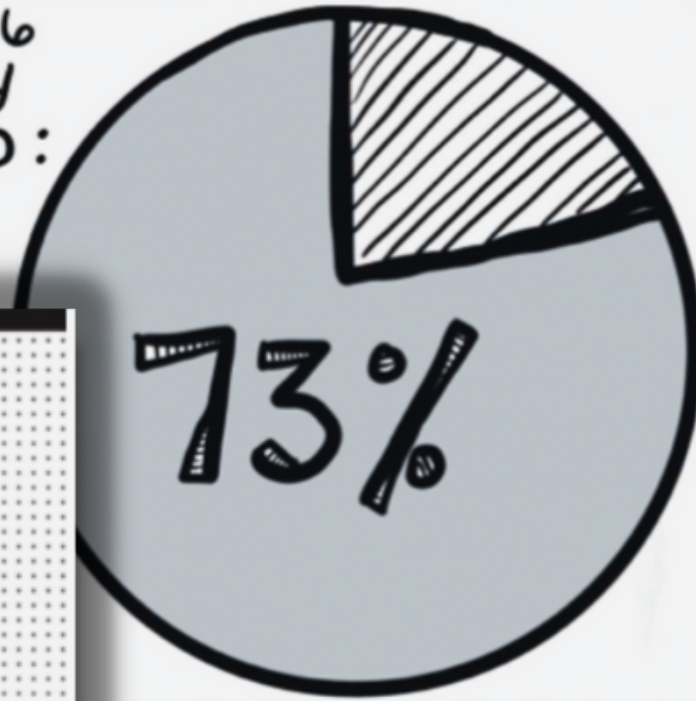
Systemic Racism Exists

**HARM  
REDUCTION  
RECOGNIZES:**

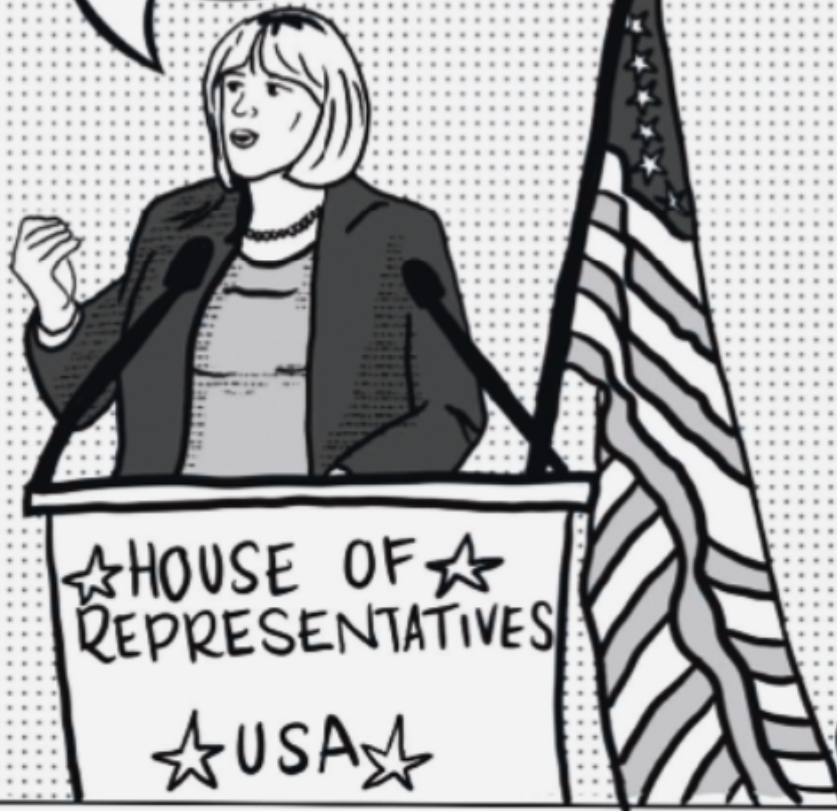


My period cramps are so bad. I need to call out of work but my boss won't accept that as

A 2016 STUDY FOUND:



We need to protect MARRIAGE!  
Marriage is between a man and a woman!  
Stand with me!



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mic Racism Exists

Systemic Heteronormativity  
Exists

**HARM  
REDUCTION  
RECOGNIZES:**



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Stand with me!



☆HOUSE OF☆  
REPRESENTATIVES  
☆USA☆

A 2016 STUDY FOUND:

1/3 OF AMERICANS HAVE MEDICAL DEBT

Systemic Classism Exists

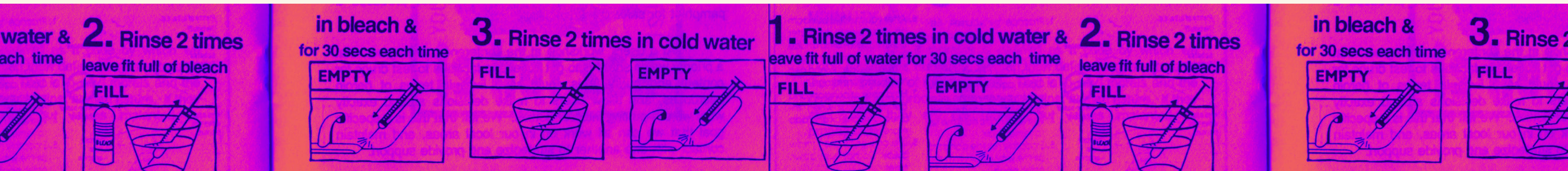
Systemic Heteronormativity Exists

**HARM  
REDUCTION  
RECOGNIZES:**



# LEARNING OBJECTIVE #3

Summarize harm reduction strategies for people who use stimulants.





# STIMULANT-SPECIFIC HARM REDUCTION STRATEGIES

Recognize sx's of  
**OVERAMPING**

Sample before  
'slamming'

**Naloxone**

**Fentanyl  
test strips**

**Drug  
checking**

**Eat, sleep,  
hydrate, repeat!**

**Sugar-free gum**

**Set timer to take meds**

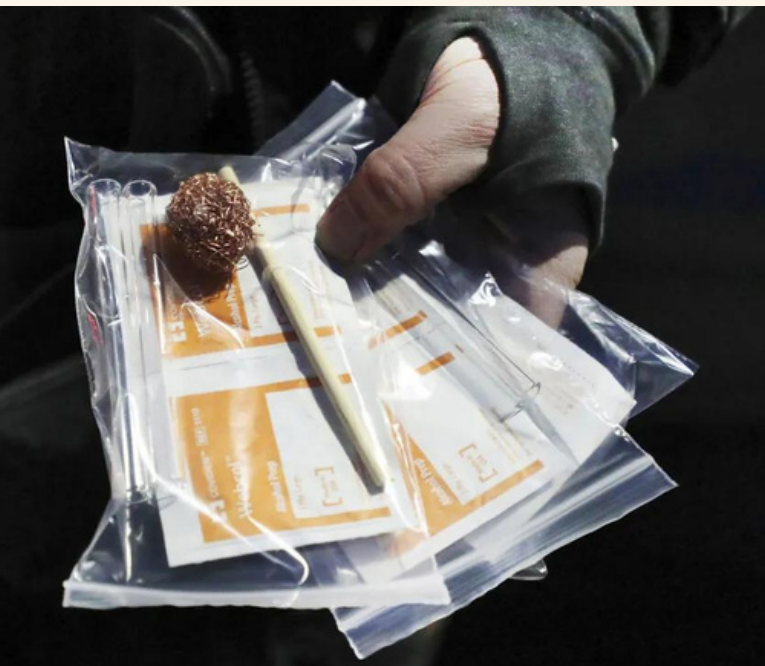
**Family  
planning**

**Safer sex**

**Avoid  
alcohol &  
mixing**



# SAFER SMOKING & SNIFFING



**SYSTEM**

recommended for rock or hot rails

**HAMMER**

recommended for powder, tar, pills, crystal and dabs

**BUBBLE**

recommended for crystal, and oil

Illustrations of a pipe, a hammer, and a key.

Safer crack smoking supplies

Safer crystal meth smoking supplies

Safetec Lip Balm Pomegranate flavored, with Vitamin E, Bees Wax, and other natural emollients 0.5 g (1/57 oz.) Safetec of America, Inc. Buffalo, NY 14215 800-456-7077



# READ UP ON HARM REDUCTION



**NATIONAL  
HARM REDUCTION  
COALITION**

**THE NATIONAL HARM REDUCTION  
CONFERENCE IS BACK IN SAN  
JUAN, PR  
OCTOBER 13-16, 2022**

**REGISTER TODAY**

CHAPTER EIGHT  
*Bringing Harm Reduction  
to the Black Community*  
There's a Fire in My House and You're  
Telling Me to Rearrange My Furniture?

✧  
IMANI P. WOODS



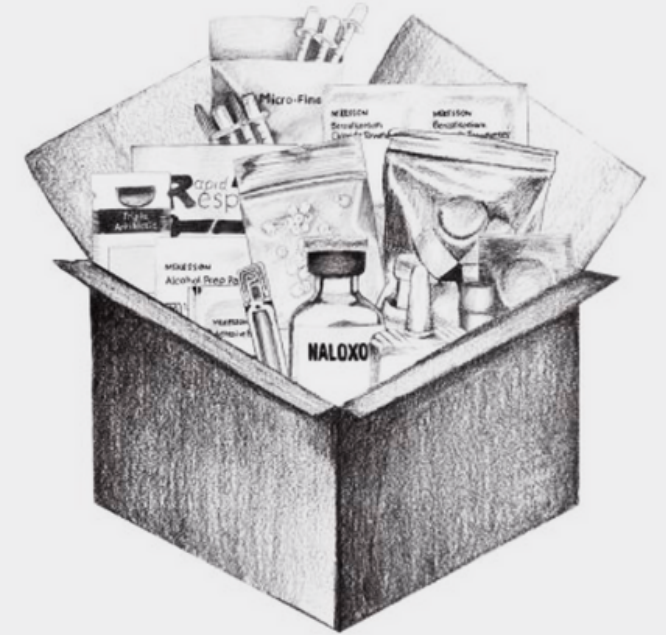
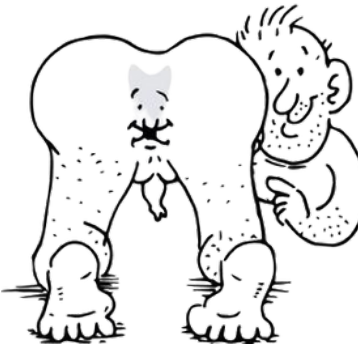
## Undoing Drugs

The Untold Story of  
Harm Reduction and the  
Future of Addiction

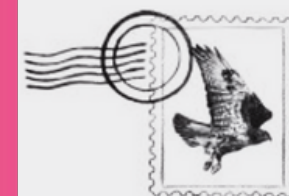
Maia Szalavitz

Author of New York Times Bestseller *Unbroken Brain*

**BOOF IT!**  
Getting high down under



**DANCESAFE**



**NEXT Distro**  
STAY ALIVE, STAY SAFE.



# HIDDEN FORMS OF RESILIENCY





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*"The value of shedding light on the resilience of individuals who work towards recovery is indispensable."*



# HIDDEN FORMS OF RESILIENCY

- **Recovery** is not the **sole form of resilience** available.
- Restricted view of resilience not surprising given **prohibitionist culture**.
- **A better definition:**  
"The process of harnessing key resources to sustain well-being"





Image Courtesy Ashley Stevenson

# CARING FOR M.

New glass pipe each visit

Brought HIV specialist on van with us & continued to follow output

Safer sniffing kit

Fentanyl test strips

Pap smear

LFTs to help understand harms of alcohol

Naloxone

- MI
- Supportive listening

- Limit amount of drinks/day
- Substitute beer for liquor
- Start drinking later in day, stop earlier

Food & water

Safer not to use alone





Image Courtesy Ashley Stevenson

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Safer no alone

## 6/2022 Update

- *Doing well with HIV meds. Misses 1-3 days every now and then.*
- *Loves new apt, setting it up, has her cat.*
- *Cutting back drinking to take care of liver. Now 2 beers & 1 nip daily. Wants to drink when playing music. Cocaine daily.*



# TAKE HOME POINTS:



Stimulant-related OD deaths are increasing inequitably for BIPOC.



There are challenges implementing harm reduction into healthcare settings.



Disrupt the dichotomy that exists between harm reduction and medicine, and **BECOME PART OF THE MOVEMENT.**



Involving community-based harm reductionists is key for success.



Important to uncover hidden forms of resilience.



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# THANK YOU



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