FOUNDATIONS OF HARM REDUCTION

SFDPH Harm Reduction Training Institute | 9.17.2020

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National Harm Reduction Coalition creates spaces for dialogue and action that help heal the harms caused by racialized drug policies.
Accessibility
If you have any accessibility needs, please direct message one of the facilitators.

We will be using closed captions through this training.
ZOOM HOUSEKEEPING

+ Add your **pronouns** to your name
  + Desktop-click on hamburger icon “...” on your image and click “Rename”
  + Mobile-click ‘Participants’ and your name, click ‘Rename’ to add pronouns
+ Please **mute your mic** unless you are speaking
+ Click the “chat” menu to comment and see people’s responses to questions
+ Feel free to use the hand clap and thumbs-up emojis to **let us know** how you are feeling
+ **Tech issues happen**, let’s just roll with them!
+ DM us with any accessibility needs!
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DEFINING HARM REDUCTION
WHY DO PEOPLE USE DRUGS?
WHY DON’T PEOPLE STOP USING DRUGS?
WHAT IS HARM REDUCTION?
Harm reduction utilizes a spectrum of strategies to reduce the negative consequences associated with drug use, sex work, and other behaviors.

- SAFER TECHNIQUES
- MANAGED USE
- ABSTINENCE
THE HARM REDUCTION MOVEMENT

• Pursues a model of public health as social justice

• Combats the forms of racism, stigma, marginalization, and criminalization that place people in harm’s way

• Understands the interlocking struggles against inequality and oppression central to both health and liberation

• Affirms the wisdom, dignity, and leadership of those most impacted by these harms as the keys to transformative change.
PRINCIPLES OF HARM REDUCTION
PRINCIPLES OF HARM REDUCTION

- Health and Dignity
- Participant Centered Services
- Participant Involvement
- Participant Autonomy
- Sociocultural Factors
- Pragmatism and Realism
HEALTH AND DIGNITY

Establishes quality of individual and community life and well-being as the criteria for successful interventions and policies.
PARTICIPANT-CENTERED SERVICES

Calls for the non-judgmental, non-coercive provision of services and resources to people who use drugs and the communities in which they live in order to assist them in reducing attendant harm.
PARTICIPANT INVOLVEMENT

Ensures participants and communities impacted have a real voice in the creation of programs and policies designed to serve them.
PARTICIPANT AUTONOMY

Affirms participants themselves 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.
PRAGMATIC AND REALISTIC

Does not attempt to minimize or ignore the real and tragic harm and danger associated with licit and illicit drug use or other risk behaviors.
BREAKOUT GROUP ACTIVITY: 

Resonate and Challenge
Which principle resonates with you the most? Why?

Which principle challenges you the most? Why?
WHAT ARE SOME HAZARDS THAT CAN COME FROM USING DRUGS?
**DRUG, SET, SETTING MODEL**

Drug - The drug itself you’re discussing - how it is used, how frequently, prescribed or street...

SET - The “mindset” someone brings to the situation, including thoughts, mood, and expectations

SETTING - The physical and social environment where the person is, and their perception of how that can promote or reduce risk
HARM REDUCTION SERVICES

- Syringe Access and Disposal
- Safer Drug Use Supplies
- Overdose Prevention
- Safer Sex Materials
- Medication for Opioid Use Disorder
- Safer Consumption Services
- Drop-in Centers
- Housing
- First Referrals
PRINCIPLES OF HARM REDUCTION
+
TOOLS AND SERVICES
=
PRACTICING HARM REDUCTION
BREAKOUT GROUP ACTIVITY: Principles in Action
How do you apply the principle of **pragmatic and realistic** when helping someone apply for food assistance?

How do you apply the principle of **health and dignity** when providing safer sex education?

How do you apply the principle of **participant autonomy** when providing supportive housing?
EXIT ACTIVITY

- What are **3 tools or services** your organization provides that you would consider harm reduction?

- What is one **barrier** to implementing the Principles of Harm Reduction into your work?

- What is one **opportunity** you have to implement the Principles of Harm Reduction into your work?
THANK YOU FOR ATTENDING THIS WORKSHOP

Please fill out the evaluation.

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INTERCONNECTION
IS OUR STRENGTH