

Welcome!

In the chat box please:

- Type your **name & pronouns**
- How **familiar** are you with harm reduction (none, somewhat, a ton)
- What **#** on the scale of Prince you are **feeling** like today

On a scale of **PRINCE**
how are you feeling today?





FOUNDATIONS OF HARM REDUCTION

Metro Dallas Homeless Alliance | 4.22.2022

Tanagra M. Melgarejo Pulido, National Learning and Engagement
Strategist

NATIONAL
HARM REDUCTION
COALITION

National Harm Reduction Coalition creates spaces for **dialogue and action** that help heal the harms caused by racialized drug policies.



Policy &
Advocacy



National &
Regional
Conferences



Trainings &
Technical
Assistance



Overdose
Prevention



Resources &
Publications



Accessibility

**If you have any accessibility needs,
please direct message the
facilitator.**

**We will be using closed captions
through this training.**

ONLINE 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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COALITION

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GROUP AGREEMENTS

Take Space, Make Space

Use "I" Statements

WAIST (Why Am I Still Talking)

Vegas Rule

Say It Rough!



DEFINING HARM REDUCTION

GROUP EXERCISE:

"WHY..."

**Why do people
drugs**

USE

Why don't people
STOP using drugs?

People will have **different reasons** for using drugs.

Considering factors surrounding these behaviors will be useful when **brainstorming options** to reduce risk for disease or fatal episodes.



WHAT IS HARM REDUCTION?

THE HARM REDUCTION **APPROACH**

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

Public Health
=
Social Justice

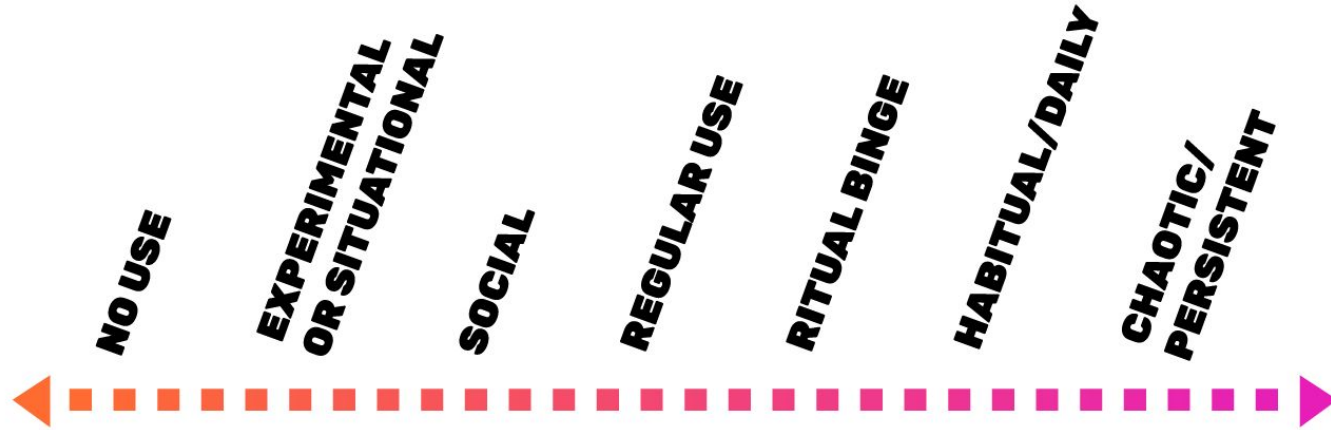
Racism, stigma, and
criminalization
cause harm

Ending inequality and
oppression, fostering
health and liberation

Leadership of the most
impacted is key to
transformative change.

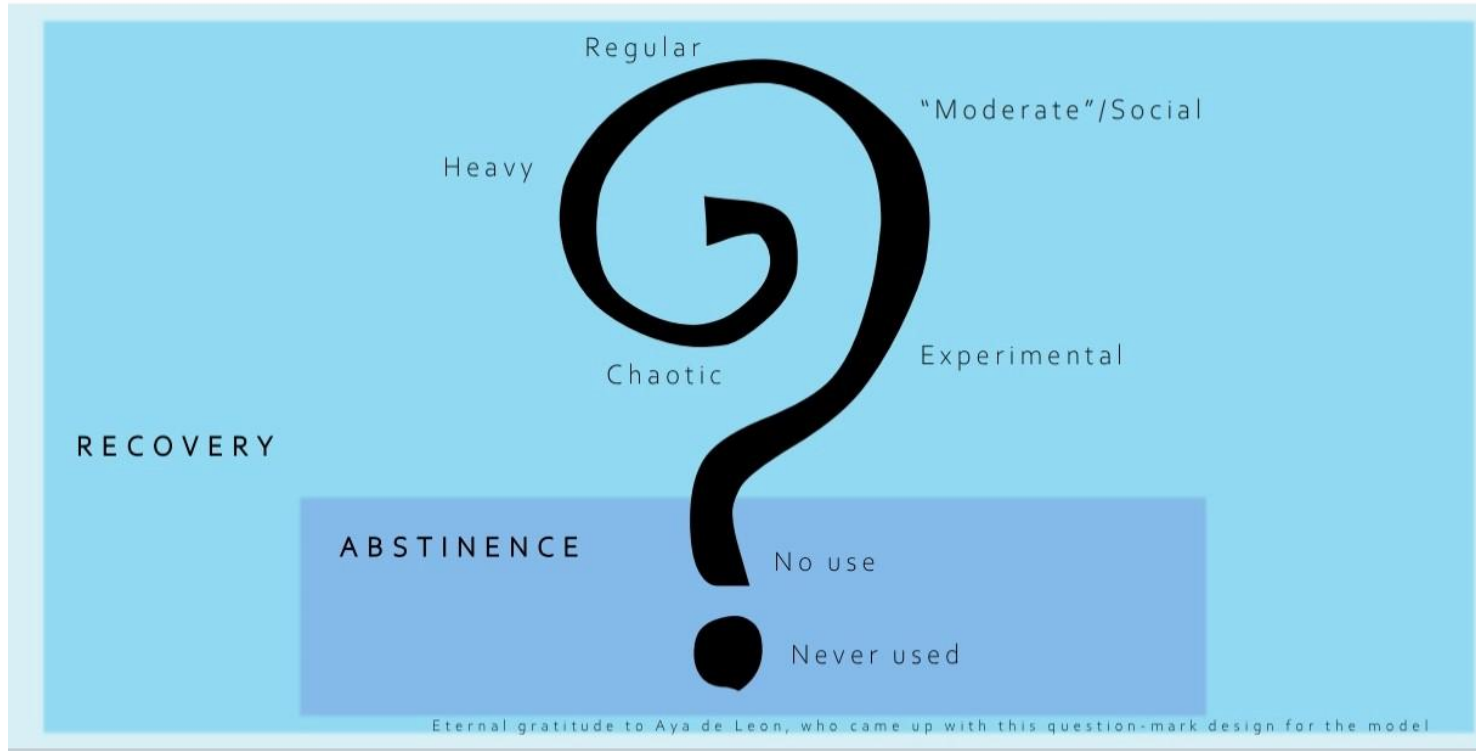
**NATIONAL
HARM REDUCTION
COALITION**

CONTINUUM OF DRUG USE



NATIONAL
HARM REDUCTION
COALITION

... or The Continuum of Use



Courtesy of Dr. Jamie Lavender and Aya de Leon



PRINCIPLES OF HARM REDUCTION

PRINCIPLES OF HARM REDUCTION

**Health and
Dignity**

**Participant
Centered
Services**

**Participant
Involvement**

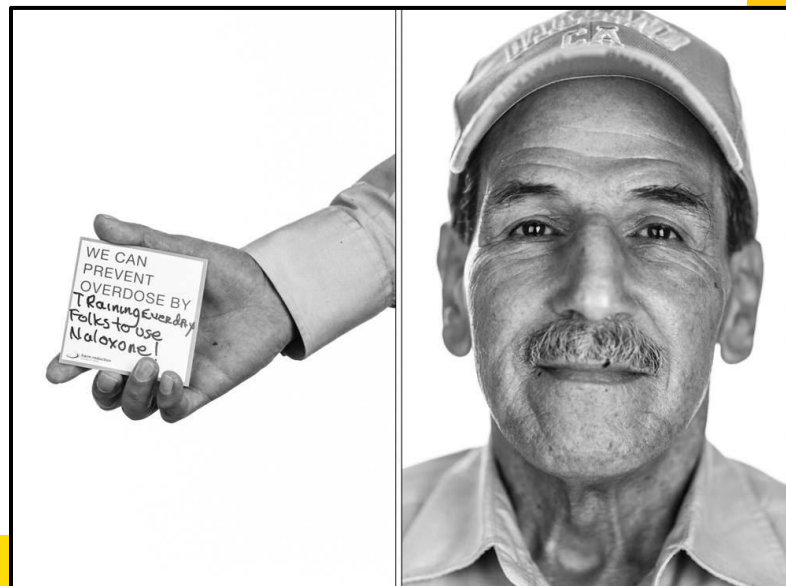
**Participant
Autonomy**

**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.



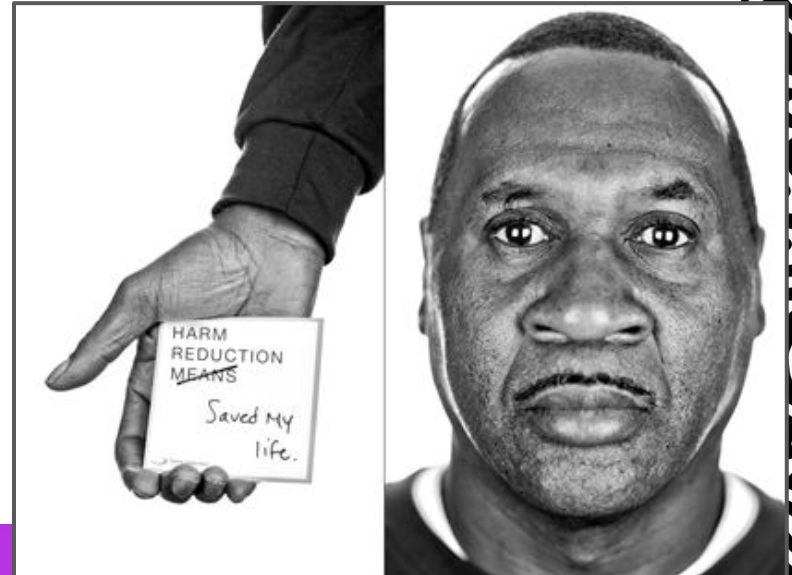
PARTICIPANT INVOLVEMENT

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.



BREAK

10 mins



BREAKOUT GROUP ACTIVITY: ***Resonate and Challenge***



**WHICH PRINCIPLE
RESONATES WITH
YOU THE MOST?
WHY?**

**WHICH PRINCIPLE
CHALLENGES YOU
THE MOST? WHY?**

Principles of HR

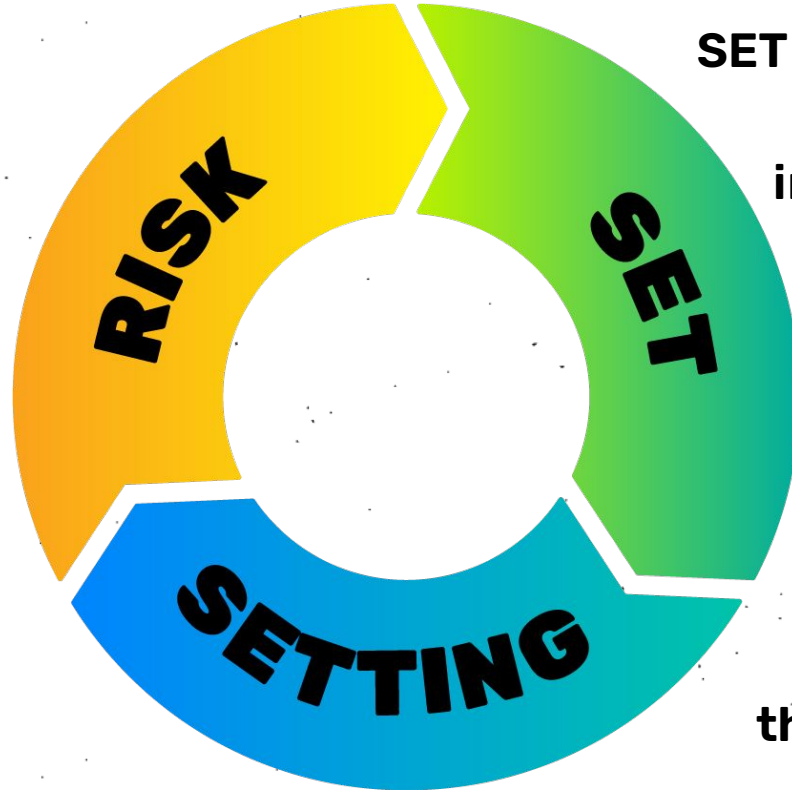
1. Health and Dignity
2. Participant Centered Services
3. Participant Involvement
4. Participant Autonomy
5. Social Cultural Factors
6. Pragmatism and Realism

WHAT ARE SOME HARMS THAT CAN COME FROM USING DRUGS?



DRUG, SET, SETTING MODEL

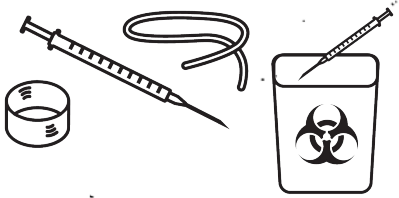
Drug - The drug itself you're discussing - how it is used, how frequently, prescribed or street...



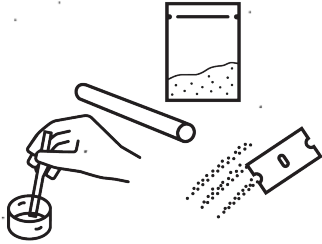
SET - The "mindset" someone brings to the situation, including thoughts, mood, and expectations

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

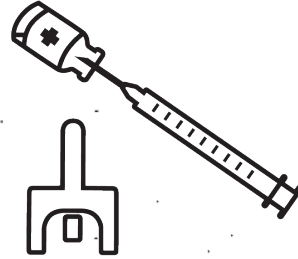
HARM REDUCTION SERVICES



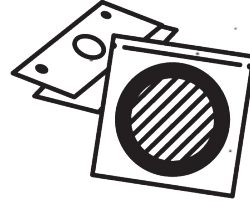
**Syringe Access
and Disposal**



**Safer Drug Use
Supplies**



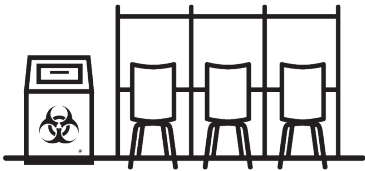
**Overdose
Prevention**



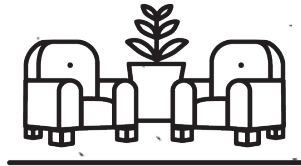
**Safer Sex
Materials**



**Medication for
Opioid Use
Disorder**



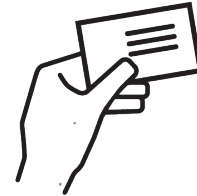
**Safer Consumption
Services**



**Drop-in
Centers**



Housing First



Referrals



ACTIVITY:
Putting into Practice



**HOW DO YOU APPLY THE PRINCIPLE
PRAGMATIC AND REALISTIC
WHEN HELPING SOMEONE APPLY FOR PERMANENT HOUSING?**

**HOW DO YOU APPLY THE PRINCIPLE
PARTICIPANT AUTONOMY
WHEN PROVIDING SUPPORTIVE HOUSING SERVICES?**



PRINCIPLES OF HARM REDUCTION

+

TOOLS AND SERVICES

=

PRACTICING HARM REDUCTION

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