

Virtual Learning Together Series Huddle Recap

Infrastructure for Harm Reduction – Responding to Multiple Public Health Emergencies

Thursday, November 4, 2021

Takeaways

Harm reduction is multifaceted and often implemented in contexts facing multiple emergencies. Organizational frameworks and guidance can inform harm reduction implementation.

Safe and effective harm reduction services should be co-designed and co-delivered by those with lived and living experience.

Speaker

Dr. Bernie Pauly is a Professor in Nursing at the University of Victoria and a Scientist at the Canadian institute for Substance Use Research. Her research focuses on the implementation of harm reduction interventions in a variety of settings with attention to the organizational factors necessary for effective implementation.

Recap

- Harm reduction is a philosophy, culture, policy, program and practice. It is often
 implemented in contexts facing multiple emergencies simultaneously (i.e.,
 homelessness, increased overdose-related deaths, COVID-19), which are driven by
 health inequities.
- The following seven-step organizational framework for harm reduction implementation is proposed:
 - 1. Create a shared understanding of the structural determinants of substance use harms (i.e., housing, income, community supports)
 - 2. Ensure meaningful inclusion of experiential voices in policies, programs and services
 - 3. Promote a culture of harm reduction
 - 4. Align harm reduction and substance abuse policies with internationally accepted principles of harm reduction (i.e., tolerance of substance use)
 - 5. Adequately resource harm reduction programs and services
 - 6. Base HR programs and services on needs of people who use substances rather than a crisis response

- 7. Ensure equitable and accessible HR programs and services to reach a broad range of people who use substances
- To ensure that clients are well-supported, the knowledge of those with lived and living experiences should be leveraged to design and deliver, safe and effective harm reduction services.
- The following serves as guidance on implementing harm reduction programs, primarily in residential and hotel settings:
 - 1. Harm reduction supplies to be available at front desk or from another designated staff person on site
 - 2. Resident peer harm reduction workers to assist with distribution, education and witnessed injection
 - 3. Nursing support to assist with safe supply (including opioids, benzos, stimulants and managed alcohol)
 - 4. Overdose Prevention Service offered in a dedicated space for supply distribution, witnessed injection, overdose response and connection to safer supply
 - 5. Witnessed inhalation services
 - 6. Virtual services and support
 - 7. Wellness checks
 - 8. Mobile services and support
 - 9. Coordination with services providing alcohol delivery and support
 - 10. Harm reduction training including overdose response for staff and residents

Resources for Further Learning

- Evidence Brief: Harm Reduction Implementation Framework
- Peer Payment Standards
- Paying Peers in Community Based Work
- Peer Engagement Principles and Best Practices
- Best Practice Manual: Supporting Peers/ Experiential Workers in Overdose Response Settings
- PEEP (Peer Engagement and Evaluation Project and Peer 2 Peer Project)
- Practice Brief: Infrastructure for Harm Reduction in Residential and Hotel Settings
- Collaborative Community Laboratory on Substance Use and Harm Reduction

• Homeless Hub

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