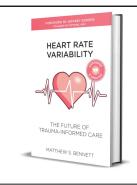
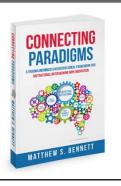
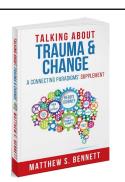


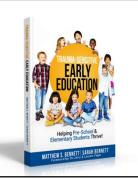
Matt Bennett, MA, MBA

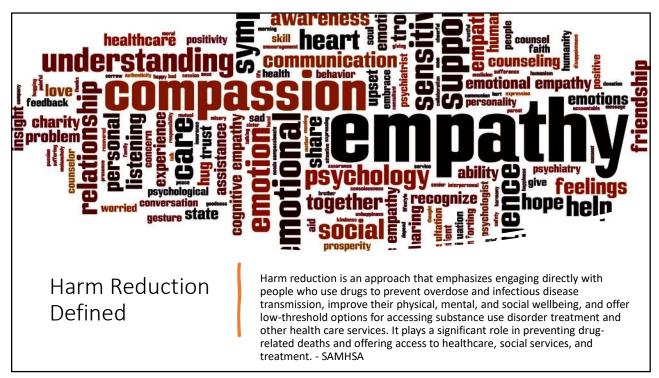
- matt@optimalhrv.com
- Before our journey
 - Harm reduction can be challenging
 - The state of the world
 - A story of hope and healing









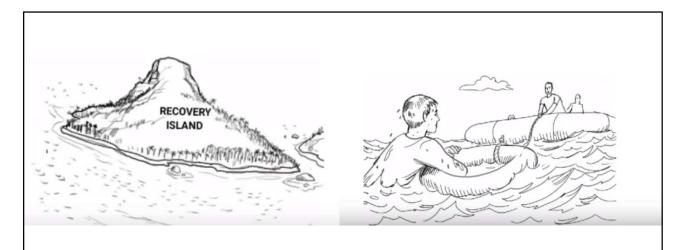


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Historical Context for Harm Reduction

- Arose in response to the AIDS crisis of the '80s
- Foundation set by the Dutch in response to new approaches to certain behaviors
- First conference held in Liverpool in 1990
 - English "medicalized" drug programs were then introduced in certain areas
- Canada brought the idea to America's heavy contracting the US policy
- Australia was the first county to introduce harm reduction into its national drug policy in 1992

Δ



Harm Reduction is a Lifeboat

Van Asher

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Assumptions

Goal

Methods

- 1) Public health alternatives to moral/criminal and disease drug use and addiction models.
- Recognizes abstinence as an ideal outcome and accepts other alternatives.
- 3) Harmful consequences of drug use can be placed on a continuum.

To move along this continuum by taking steps to reduce harm (and increase safety).

- 1) Safer route of drug administration.
- 2) Alternative, safer substances.
- 3) Reduce the frequency of drug use.
- 4) Reduce the intensity of drug use.
- Reduce harmful consequences of drug use.

Joe Caldwell & Biz McChesney



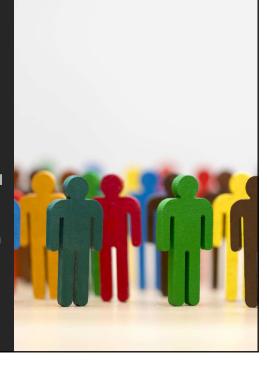
Low-threshold access to services

- High threshold contains requirements of preconditions
- Low threshold focus on moderation allows more access to a larger population
 - Meet the person on their own terms (where they are, not where society thinks they should be)
 - Work with a variety of other behaviors associated with sex or drug use
 - · Reducing the stigma associated with receiving help
 - Providing integrative and normalized approach to highrisk behaviors

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Compassionate Pragmatism vs. Moralistic Idealism

- Harmful behaviors have always and will always happen
- Doesn't mean we condone or promote harmful behaviors
- Just because a person participates in a behavior does not make them good or bad as a person
- Compassionate pragmatism
 - How can we reduce harm to the individual and society?
 - How can we increase safety for the individual and society?





Harm Reduction: (In)Direct Approaches

DIRECT

- Safer sex
 - Risk behavior cascade
 - Reducing sex-based violence
 - e.g. Sex work
- · Safer drug use
 - Sterile equipment access
 - Pragmatic drug education
 - Understanding overdose risks
 Trauma-informed
- Prioritizing infectious disease prevention
- Housing First

INDIRECT

- Low-barrier treatment adherence
- Building trust and healthy partnerships
- · Setting realistic expectations of support systems
- Systemic harm reduction

Joe Caldwell & Biz McChesney

SUBSTANCE

- Frequency
- Amount
- How used?
- Legality of use
- Type / quality of substance

SET

- Individual health
- Trauma
- Culture
- Stage of change
- History of use
- Why using?

SETTING

- Where using?
- With whom?
- Stress levels
- Quality of support system
- Interpretation of use

Reduce Risk/Increase Safety

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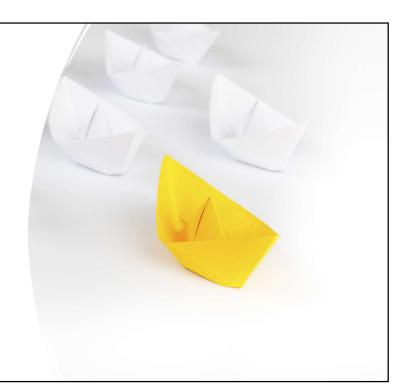


Harm Reduction Program Goals

- Increase awareness and understanding of high-risk behaviors and their helpful and harmful consequences
- Coping skills training to deal with highrisk situations
- Promoting moderation through training in risk-reducing and healthpromoting behaviors

Common Elements of Harm Reduction Programs

- Input from participants
- Use of peers
- Active discussion format (MI)
- Use of role play to practice highrisk situation
- Emphasis placed on personal choice and responsibility



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Shifting in Intervention

- Attempt to stabilize a person's harmful behavior
- Focus on maintenance and keeping the problem from getting worse
- Encourage the reduction of harmful consequences
- Utilize other methodology
 - Group and/or individual therapies (primarily cognitive and behavioralbased)
 - Pharmacotherapies naltrexone, methadone, etc.
- Stay client-centered and utilize client and group input



Increasing Environmental Availability

- If there is no safe opportunity to practice harm reduction or safer behaviors, it will not happen
- Often linked to public policy think needle exchange!
- Help person identify not only lower-risk behaviors but safe places to practice these behaviors



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Keep Learning

Trauma-Informed Lens Podcast www.traumainformedlens.org

Optimal HRV www.optimalhrv.com

- Heart Rate Variability Podcast
- Free books!

