



ST. MARY'S COUNTY
HEALTH DEPARTMENT

Harm Reduction Program

“Meeting people where they are, but not leaving them there.”

Who are we?

- The staff here at the harm reduction facility are people who have a passion in the substance use field, love helping others, and some of us have had experience with substance use ourselves.
- We are here to break the stigma associated with drug addiction and to meet people where they are.

Current Staff:

HRP Supervisor: Amanda Walton, RN

HRP Administrative Specialist: Amy Higgins

2 Peer Recovery Specialists: Zuriel Savoy and Brandy Robinson

In the process of adding to the team:

Direct Care Assistant, Another Peer and Peer Supervisor

Why are we here?

Did you know?

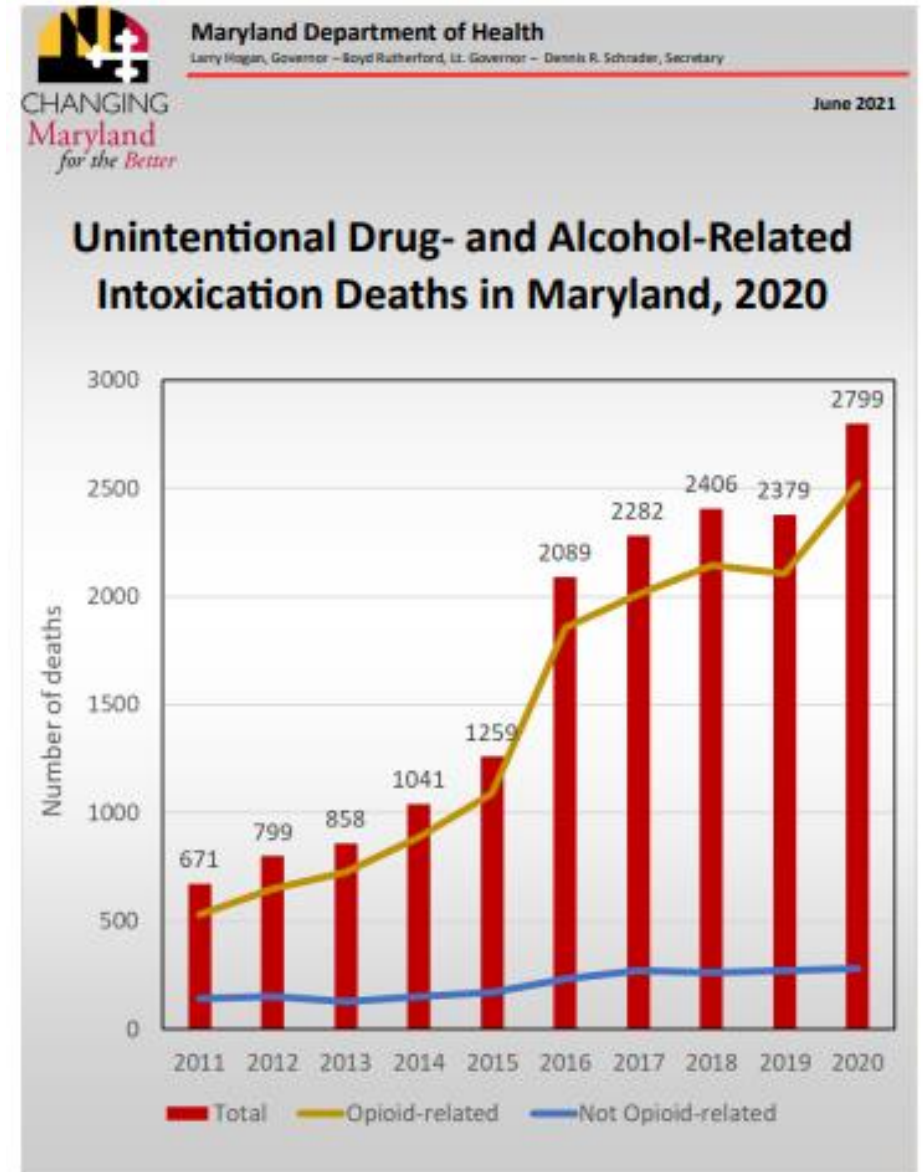
-In 2019, over 70,000 people in the United States died from drug overdoses.

-This makes drug overdoses the leading cause of injury-related death in the US.

-This is significantly more deaths than the amount of overdose deaths reported in 2018 (approximately 67,000).

-According to the Washington Post, “overdose deaths in Maryland climbed by 2.6 percent during the first three months of 2020 compared with the same period last year” (11).

-In Maryland, there was a 17% increase in unintentional drug and alcohol related deaths from 2019 to 2020 (4).



(4)

What is Harm Reduction?

Harm reduction is a set of practical strategies and ideas aimed at reducing negative consequences associated with drug use. Harm Reduction is also a movement for social justice built on a belief in, and respect for, the rights of people who use drugs. (3)

Current Harm Reduction Initiatives

- ✓ Improving the quality of life for people who use drugs and people who inject drugs.
- ✓ Providing a safe and judgement free place for people to receive services.
- ✓ Destigmatizing and educating the community about Harm Reduction and Syringe Services.
 - If you provide the resources for people take the proper precautions when injecting drugs, they will use them.
- ✓ Developing a working alliance with providers to create a low barrier into care if a person asks for resources.
 - For example: we are collaborating with Johns Hopkins to provide low-barrier treatment for Hepatitis C as well as medication-assisted treatment for our participants who are interested.

Harm Reduction Principles

- ✓ **Accepts**, for better and for worse, that licit and illicit drug use is part of our world and chooses to work to minimize its harmful effects rather than simply ignore or condemn them.
- ✓ **Understands** drug use as a complex, multi-faceted phenomenon that encompasses a continuum of behaviors from severe abuse to total abstinence, and acknowledges that some ways of using drugs are clearly safer than others.
- ✓ **Establishes** quality of individual and community life and well-being—not necessarily cessation of all drug use—as the criteria for successful interventions and policies.
- ✓ **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.
- ✓ **Ensures** that drug users and those with a history of drug use routinely have a real voice in the creation of programs and policies designed to serve them.
- ✓ **Affirms** drugs users themselves as the primary agents of reducing the harms of their drug use, and seeks to empower users to share information and support each other in strategies which meet their actual conditions of use.
- ✓ **Recognizes** that the realities of poverty, class, racism, social isolation, past trauma, sex-based discrimination and other social inequalities affect both people's vulnerability to and capacity for effectively dealing with drug-related harm.
- ✓ **Does not attempt** to minimize or ignore the real and tragic harm and danger associated with licit and illicit drug use.

Harm Reduction: Fact or Fiction?



MYTH

FACT

“Doesn’t giving drug users clean needles encourage them to use more drugs? Aren’t we just enabling?”

People will use drugs if they want to use drugs, and we are just trying to provide them with the knowledge and tools (safe injection equipment) they need to be safe and healthy.

Syringe access programs have been proven to reduce the risk of infectious disease as well as overdose and do NOT increase overall drug use. (2)

Harm Reduction: Fact or Fiction?



MYTH

Harm reduction programs **only** serve people who **use drugs**.

FACT

We serve all community members by providing a safe space to turn in medical sharps equipment (syringes, needles, and/or lancets) used for themselves or for their animals. We also provide reproductive health education, free condoms, HIV and HepC screenings, and much more!

What services do we provide?

- Access to Peer Support specialists
- HIV and Hepatitis C antibody screenings
- Hepatitis C treatment as well as Buprenorphine medication-assisted treatment (in collaboration with Johns Hopkins University)
- Overdose response training
- Naloxone (Narcan) use training and distribution
- Minor wound care and referral for major wound care
- Distribution of condoms to support safe sex/minimize disease transmission
- Provide education on safe injection as well as provide sterile/safe injection equipment
- Safe disposal/collection of used syringes
- Linkage to treatment, recovery, and community resources as needed/requested

What does a Peer Support Specialist do?



She really needed a hug
from someone who understood her.

The real question is “What don’t they do?”. Our peer support specialists are truly the hands and feet of our Harm Reduction operation. They build relationships with the people that they serve.

They provide strengths to our workplace such as:

- Compassion to others in the community and commitment to helping them.
- Experience of moving from hopelessness to hope.
- Developed skills in keeping track of their own chronic disease and have great insight due to having to manage their own lives.

They are trained to provide;

- Education on things like safe sex, safe and sterile injection of drugs
- Education on sexually transmitted disease risk and testing
- Outreach services to community members

HIV and Hepatitis C

- In our program, we strive to break the stigma of HIV/HepC and bring attention to the diseases. We encourage members of our community to be tested and we provide education on how to prevent being infected or transmitting these diseases.
- Sharing/re-using injection equipment is one of the top reasons why these diseases are transmitted, which is why it is so important to provide sterile equipment to the people who use drugs in our community.

Harm Reduction Collaborates with Johns Hopkins University

It all starts with a little paperwork!

Insurance coverage:

- Medicare A&B
- Medicaid
 - Straight medicaid/Beacon Insurance
 - Priority Partners
 - Amerigroup
 - Maryland Physicians Care
 - JAI
- Private Insurance
 - United Healthcare (through employer)
 - Blue Cross Blue Shield
 - Cigna
 - Aetna

Hepatitis C Treatment

- Offers an 8 or a 12 week option for treatment

Buprenorphine MAT

- Weekly appointments
 - Urine sample required

Current Status of Harm Reduction

- ✓ The Harm Reduction Program continues to serve as a safe option for people to safely dispose of their sharps.
- ✓ As of November 18th, 2021:
 - ✓ Total number of participants: 153
 - ✓ Total # of Sharps Distributed: 50,570
 - ✓ Total #of Sharps Collected: 152,753
 - ✓ Total # of Narcan Dispensed: 1,727

Break the STIGMA!

Personal and public shame has been shown to produce huge obstacles for anyone who uses drugs to pursue a normal life.

People avoid acknowledging that they (or even someone they know and love) have a problem due to this stigma until it is too late.

This lack of acknowledgement leaves this issue underdiagnosed, misunderstood, and undertreated in many communities.

Harm Reduction programs try to break this stigma by meeting people where they are, treating them with respect, and helping guide them SAFELY along the path they choose – whether it be to continue substance use or to seek treatment.

Stigma definition: a mark of disgrace associated with a particular circumstance, quality, or person.

“I was absolutely moved to tears by how helpful this program and the employees here were for me today. I am so glad I came in!”

“As soon as we walked in the door we were greeted with respect and kindness. The young lady who helped me answered any and all of my questions and made me feel a lot less nervous about coming in. I felt treated like a normal person and not like a drug addict. This place is wonderful and the people who work here are such great people.”

“Thank you for your services! Lexington Park needs this. God bless all of you for this.”

Harm Reduction Program

46035 Signature Lane
Lexington Park, MD 20653

301-862-1680

Fax: 240-673-6388

<https://smchd.org/harmreduction/>

amanda.walton@maryland.gov

REFERENCE LIST

- (1) <https://www.shatterproof.org/about-addiction/stigma>
- (2) <https://www.cdc.gov/ssp/>
- (3) <https://harmreduction.org/movement/>
- (4) https://health.maryland.gov/vsa/Documents/Overdose/Annual_2020_Drug_Intox_Report.pdf
- (5) <https://harmreduction.org/about-us/principles-of-harm-reduction/>
- (6) <https://www.cdc.gov/media/releases/2015/p0424-naloxone.html>
- (7) <https://www.integration.samhsa.gov/workforce/team-members/peer-providers>
- (8) <https://www.psychiatryadvisor.com/home/topics/general-psychiatry/exploring-the-value-of-peer-support-for-mental-health/>
- (9) <https://www.statnews.com/2015/11/18/fda-nasal-spray-overdose/>
- (10) <https://www.mooddorders.ca/node/1236>
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