



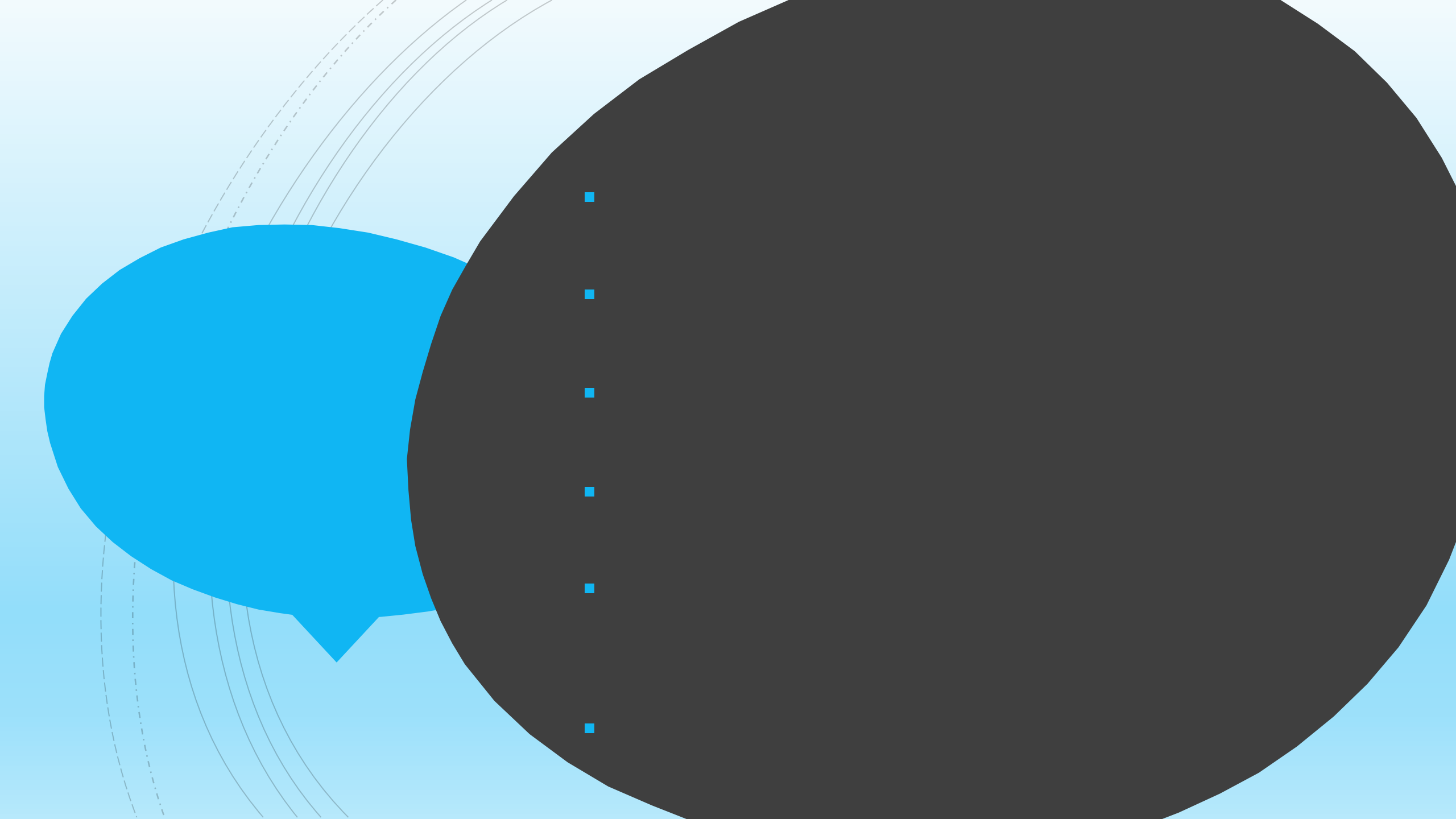
John Burke BS, CPRS

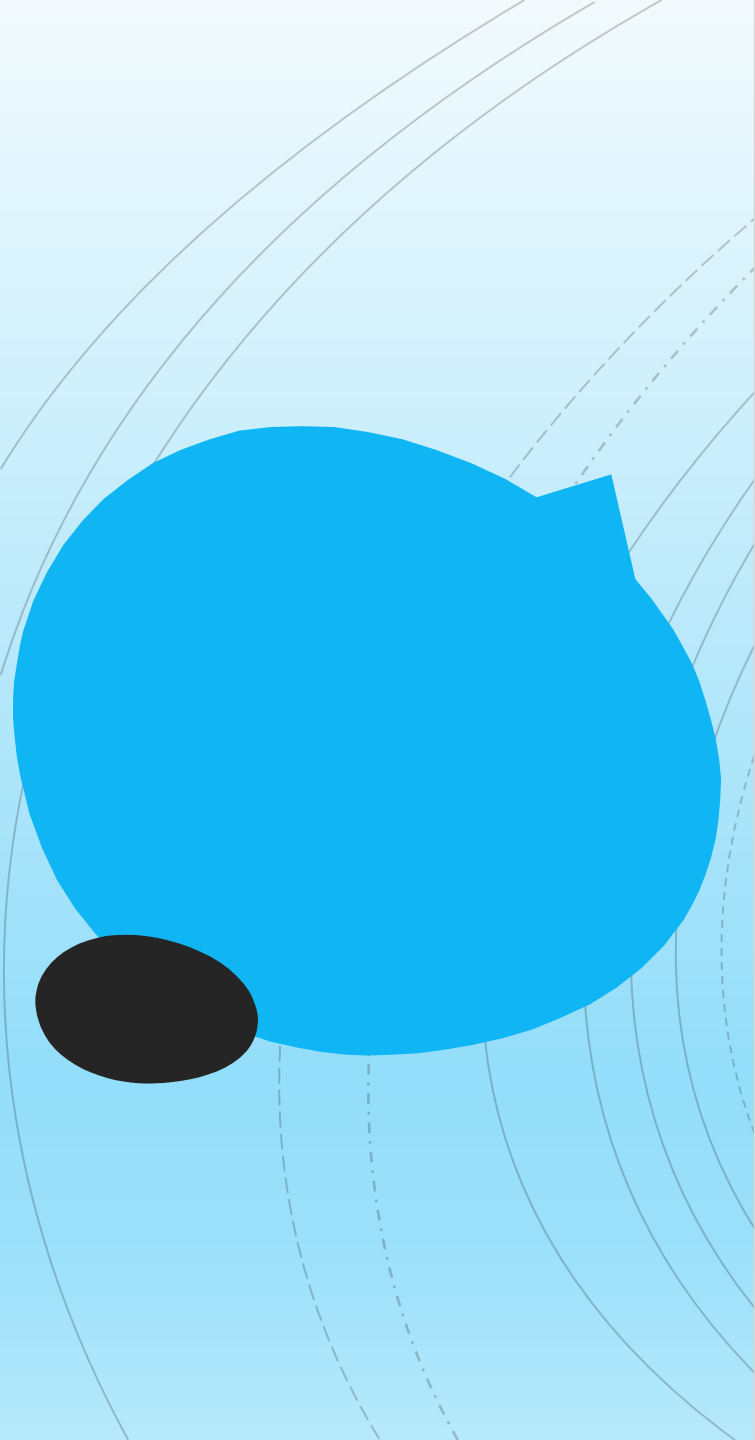
&

Christopher Moore

MSW, LADAC II,

CPRS





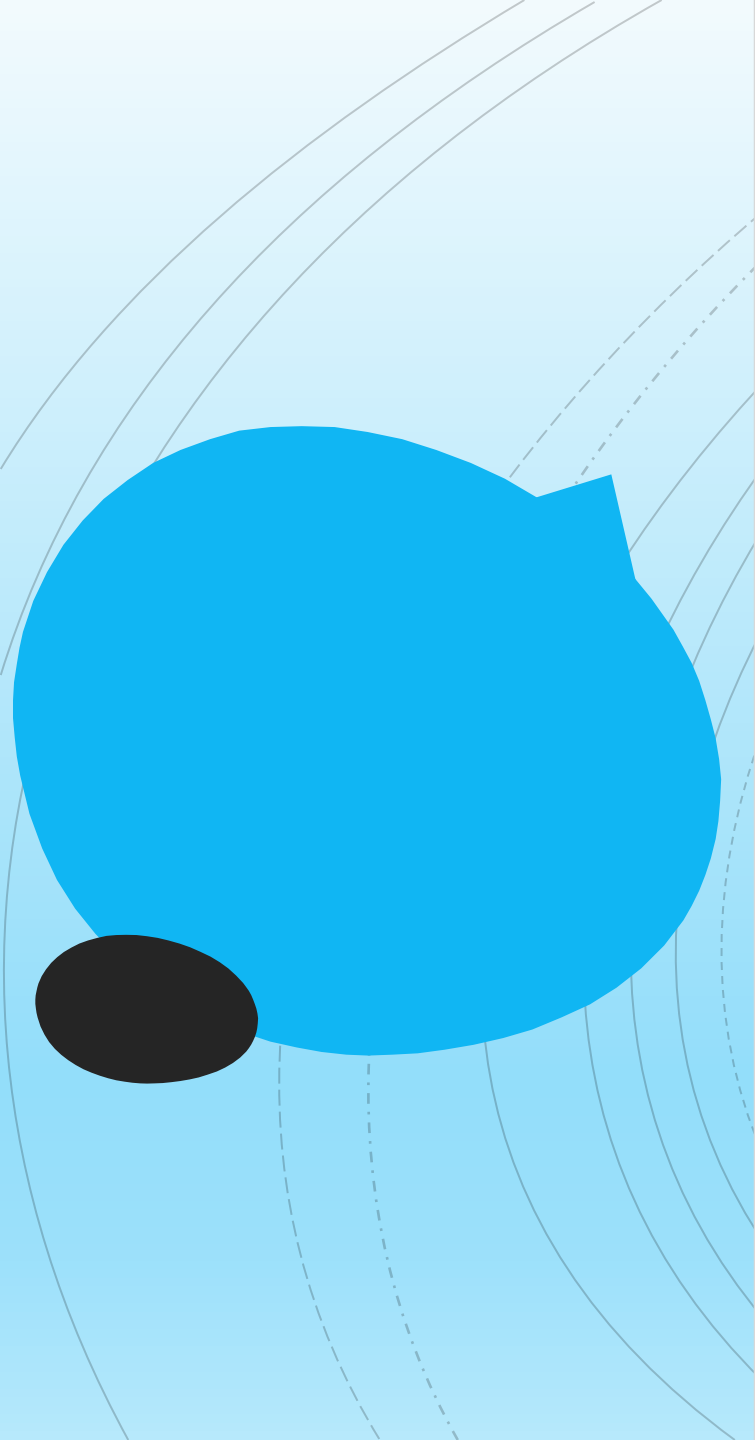
Trajectory of Crisis

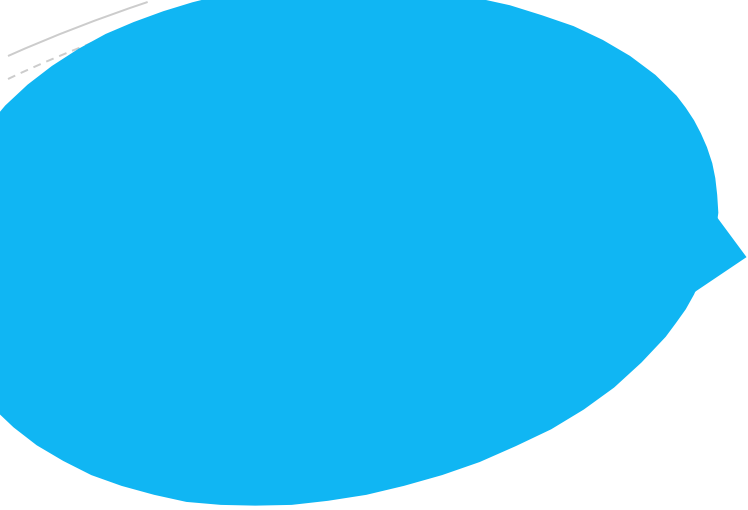
first wave

second wave

third wave

fourth

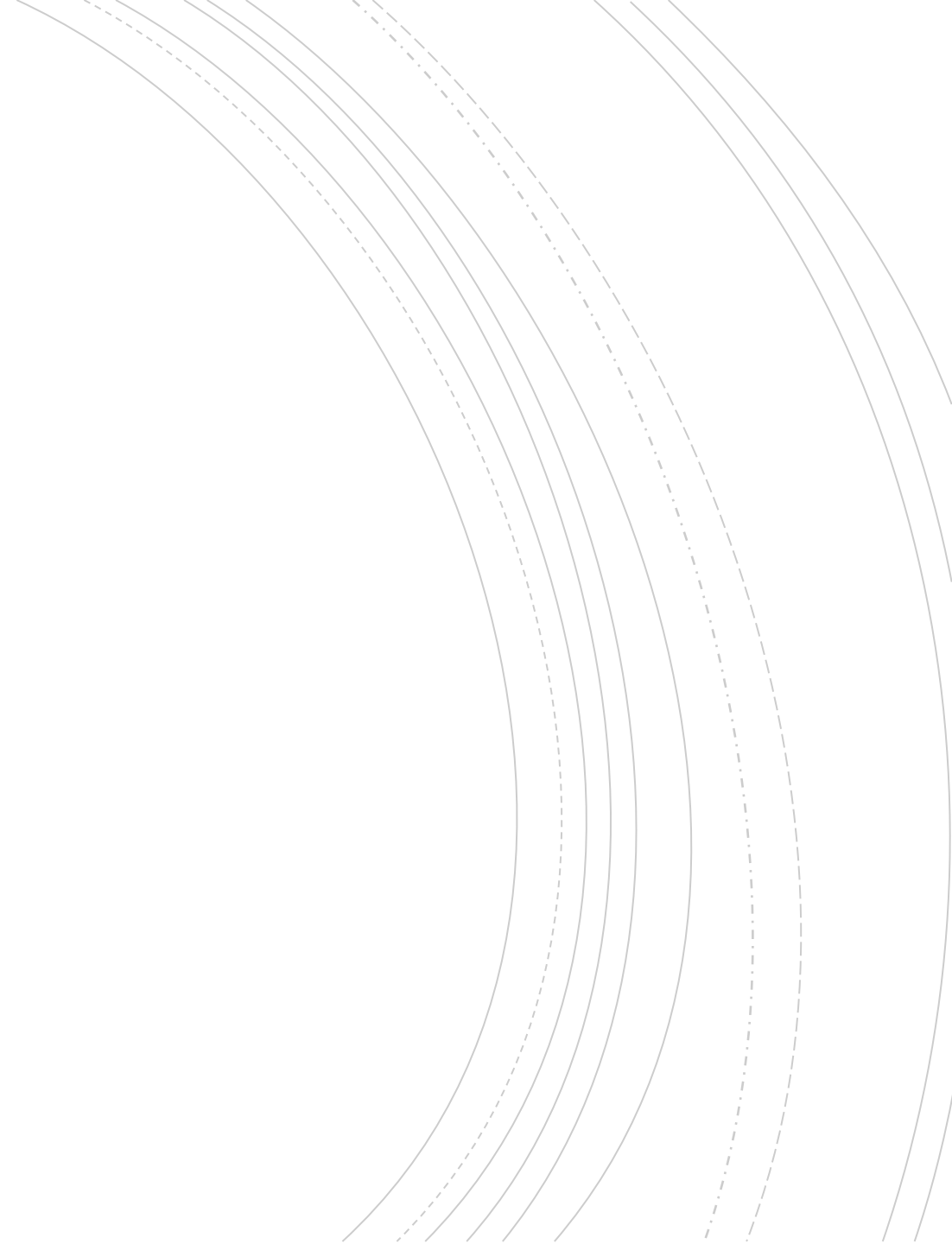


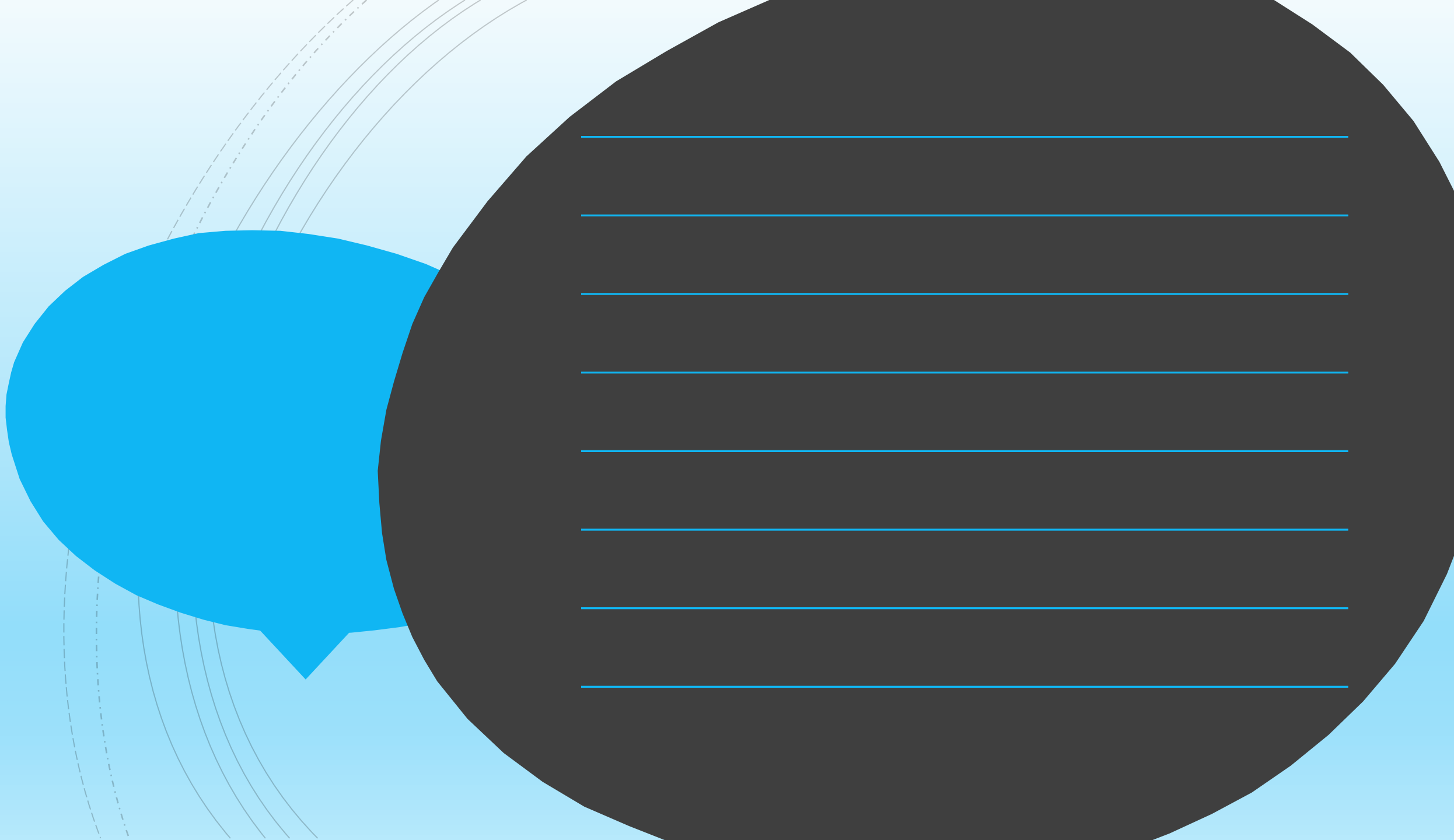


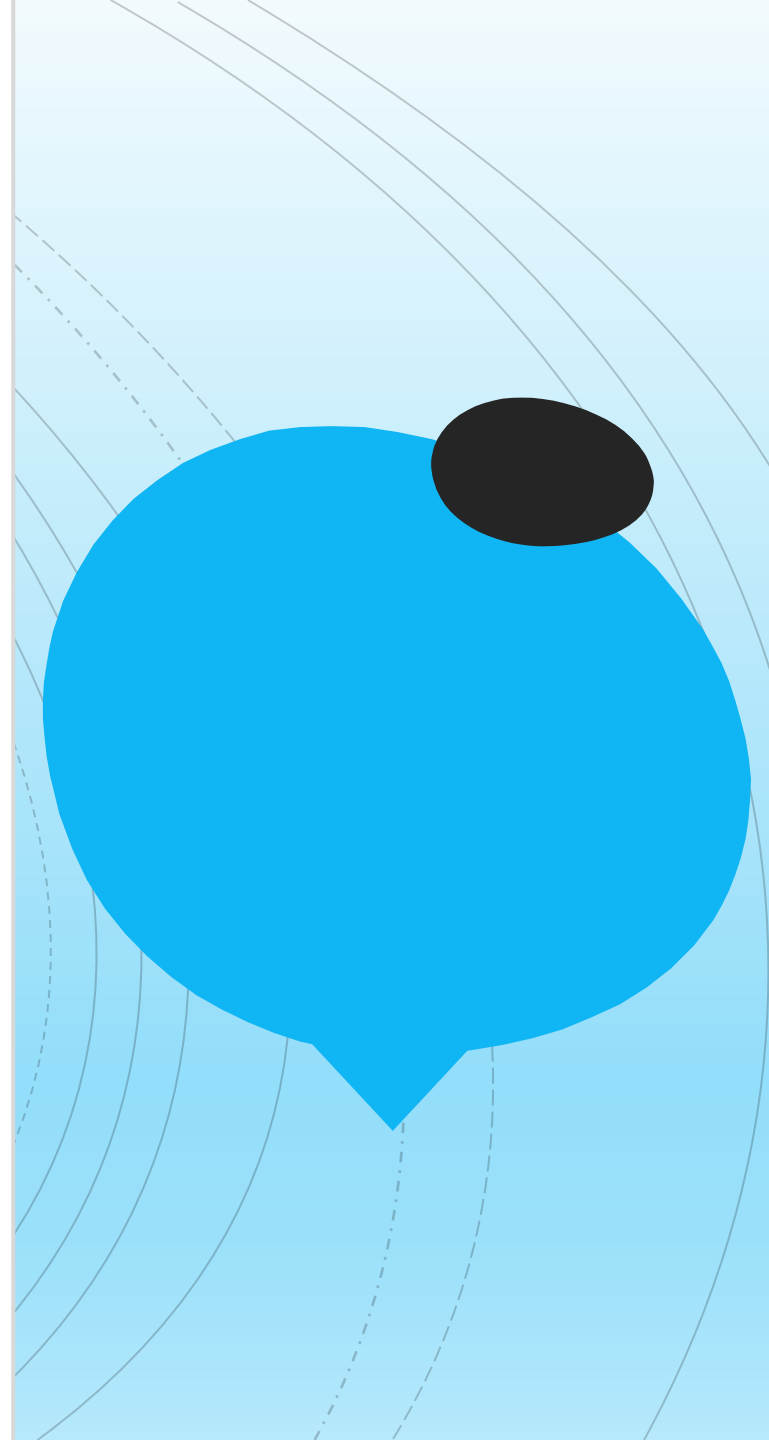
Traditionally



Now







GRANTS

STR Grants
FY2017 & FY2018

SOR Grants
FY2018-present

**SINGLE STATE
AGENCY**



**PROGRAMS AND
PROVIDERS**

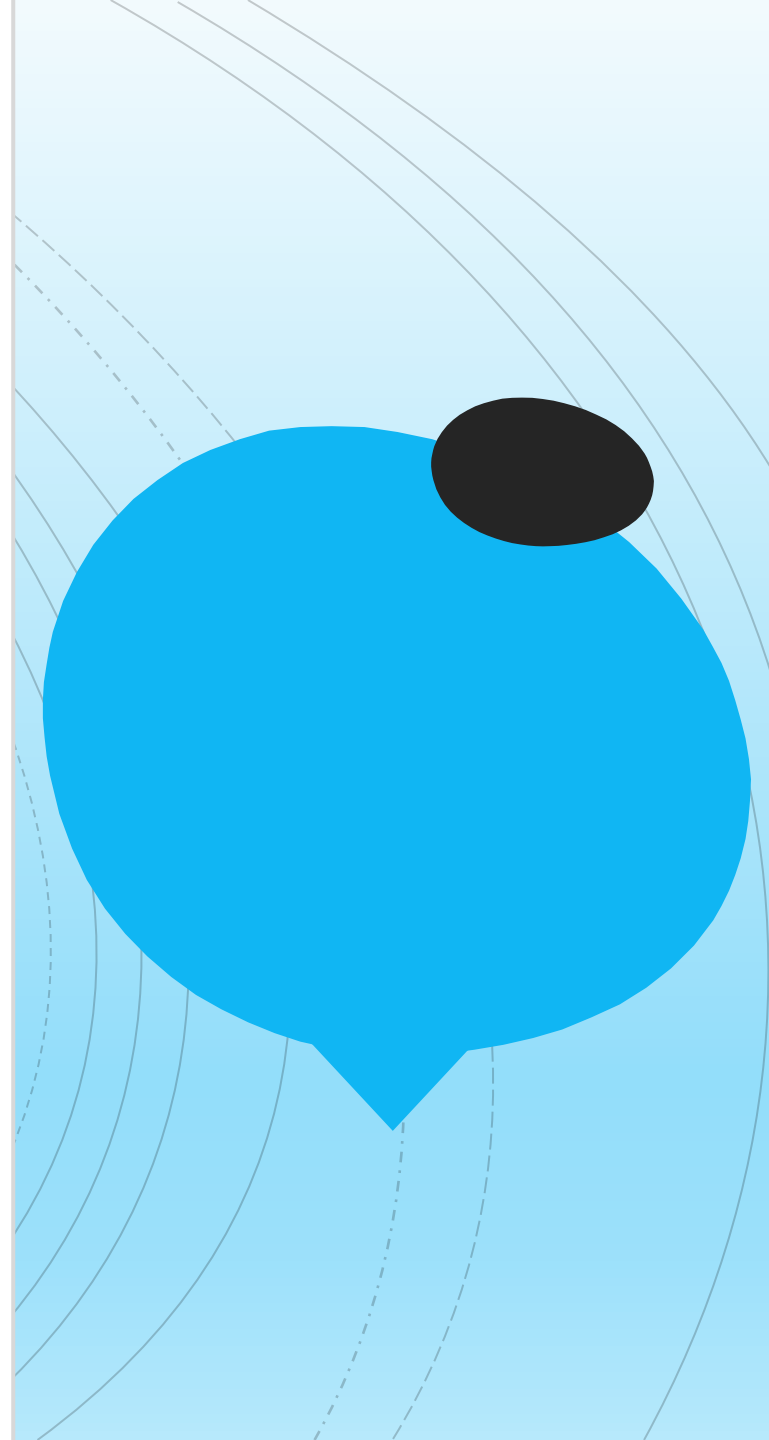


SUD treatment providers,
OTPs, peer recovery
networks, etc.

■

■

■





Harm Reduction Defined

- *Harm Reduction is a set of practical strategies and ideas aimed at reducing negative consequences associated with drug use and other high-risk behaviors (National Harm Reduction Coalition, 2023).*
- *Harm reduction is an evidence-based approach that is critical to engaging with people who use drugs and equipping them with life-saving tools and information to create positive change in their lives and potentially save their lives (SAMHSA, 2023).*
- *Harm reduction is a practical and transformative approach that incorporates community-driven public health strategies — including prevention, risk reduction, and health promotion — to empower people who use drugs (and their families) with the choice to live healthy, self-directed, and purpose-filled lives (Recovery Research Institute).*
- *Harm reduction emphasizes engaging directly with people who use drugs to prevent overdose and infectious disease transmission; improve physical, mental, and social wellbeing; and offer low barrier options for accessing health care services, including substance use and mental health disorder treatment.*

EXAMPLES OF HARM REDUCTION IN OTHER AREAS



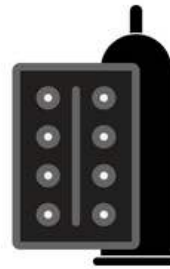
SUN
SCREEN



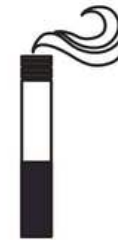
SEAT
BELTS



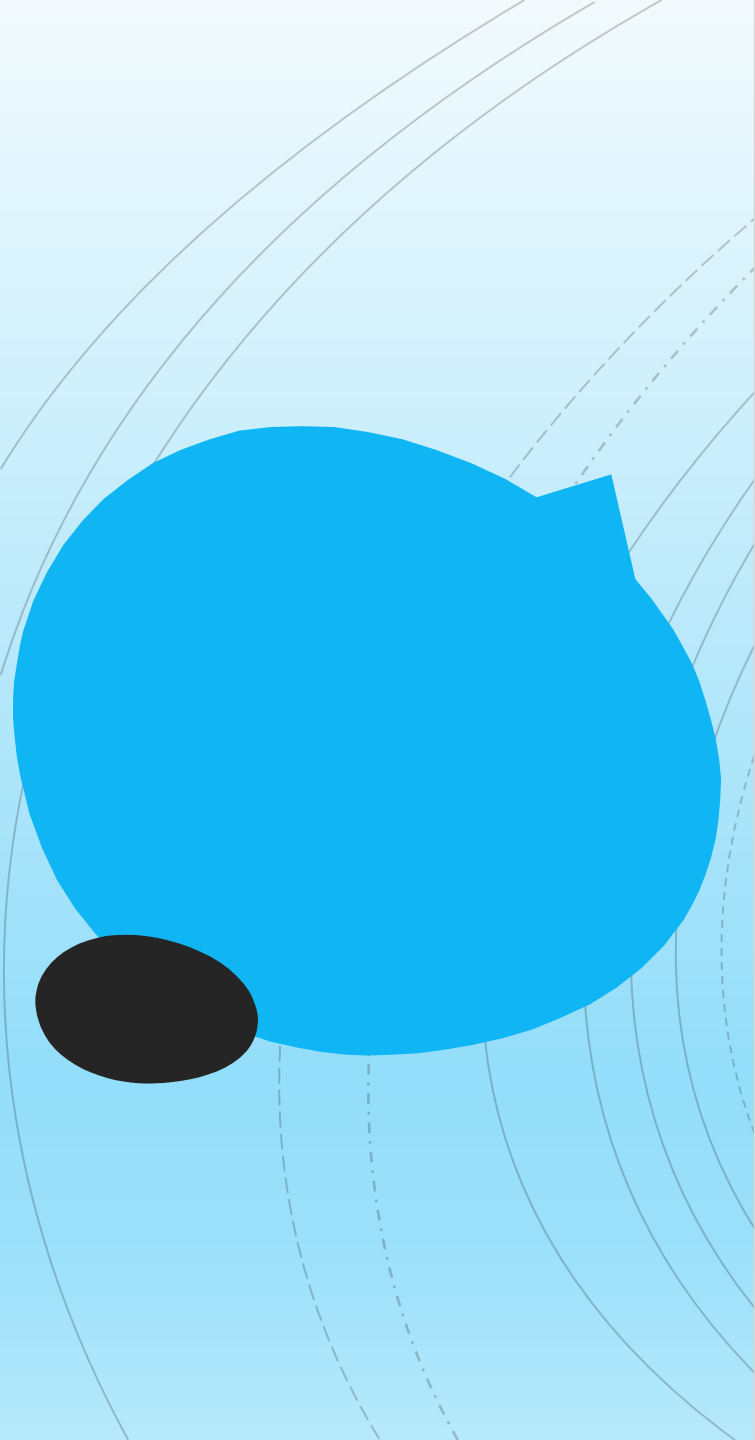
SPEED
LIMITS



BIRTH
CONTROL



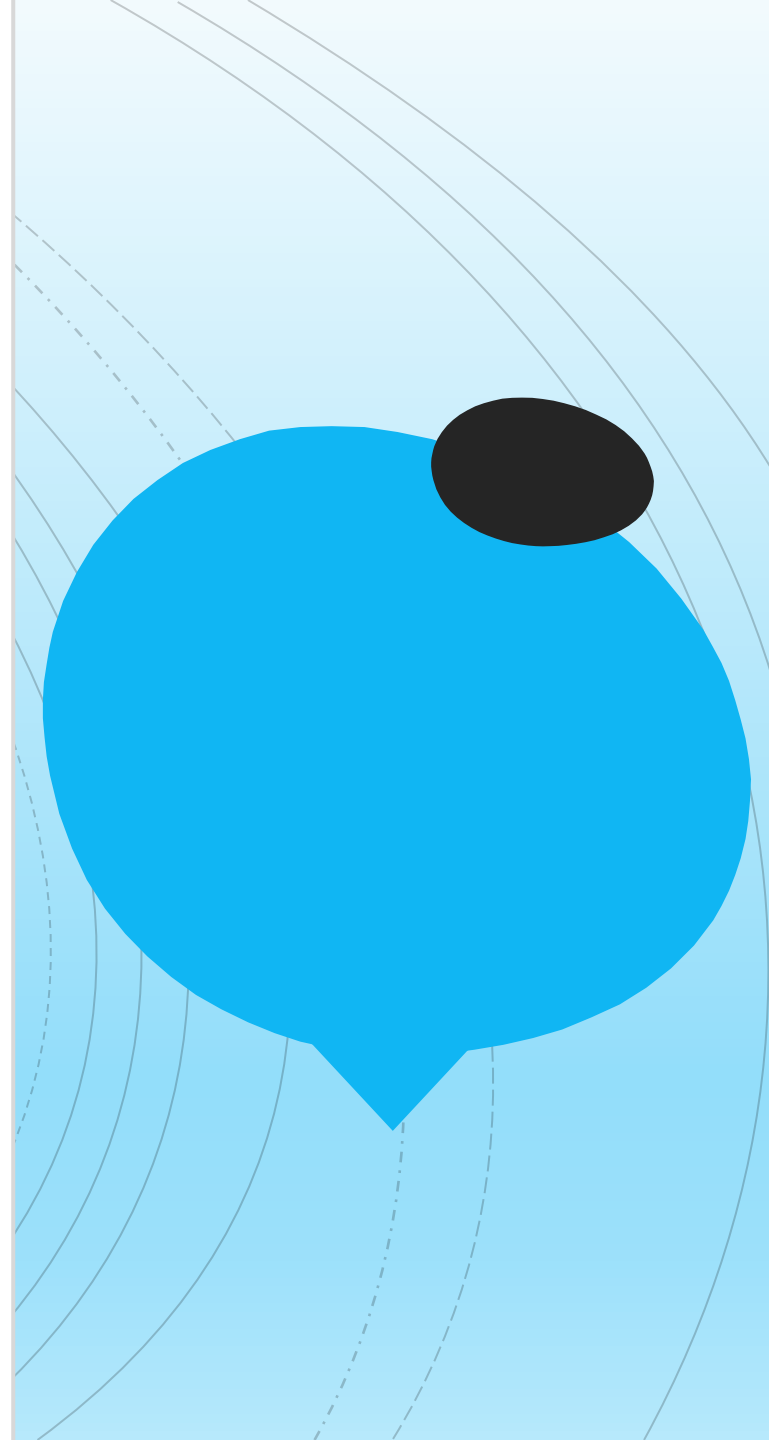
CIGARETTE
FILTERS



- **School based programs** – harm reduction methods proven to be more effective at reducing substance use in the short-term than abstinence-based programs.
- **College Students** – dozens of controlled studies conclude harm reduction has long term benefits among alcohol-using college students (even those who met criteria for SUD) . Pragmatic goals and nonjudgmental attitudes.
- **Workplace Programs** - brief interventions proven to decrease drinking, reduce consequences, and improve attitudes towards changing use.
- **Housing First Initiative** – established findings related to noncontingent housing – decreased drinking, less intoxication, and avoided monthly medical/social services costs.
- **Syringe Services Programs** – effective in reducing transmission of hepatitis/HIV/other infectious disease, increase likelihood – 5x more likely to enter treatment and 3.5x more likely to stop injecting drugs, does not increase illegal drug use and/or crime.

***Examples of services available to prevent
substance use related harms***

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*Established challenges negotiating demands
of highly structured programs*

Unmet needs

Skill deficits

Low retention rates

Lack of environmental supports

Controversial Views

Paradigm Shift

Operating in “shades of gray”

Opponents of harm reduction

Stigma in recovery communities



1

- Value, care, respect, and dignity for patients as people
- Acknowledging non-blaming reasons for behavior
- Genuine connection/understanding

2

- None of us are capable of perfection
- Practical solutions
- Usefulness/Effectiveness

4

- Client is agent of change
- Patient driven care
- Shared decision making
- Reciprocal learning

3

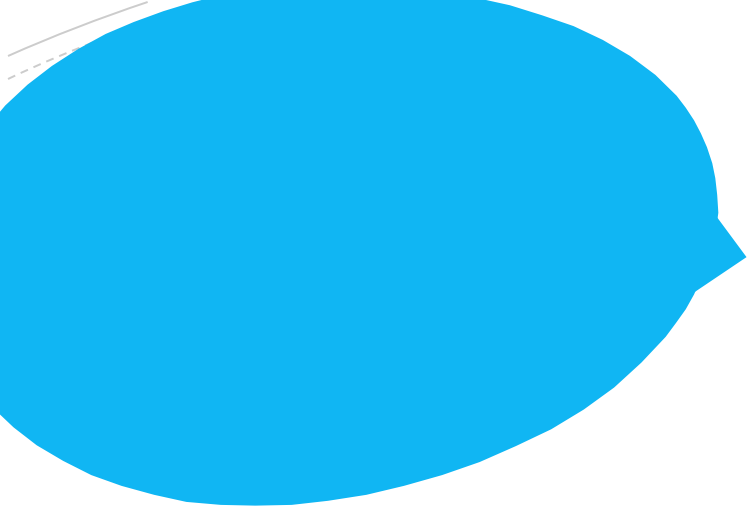
- People are unique (needs/strengths)
- Wide spectrum of harm and receptivity (no answer for all)
- Individualized care

5

- Redefining success and how we measure change
- Celebrate small victories
- Understanding and planning for backwards movement



unconditionally



Trading Addictions



Hinders Recovery Process



Abstinence is Better

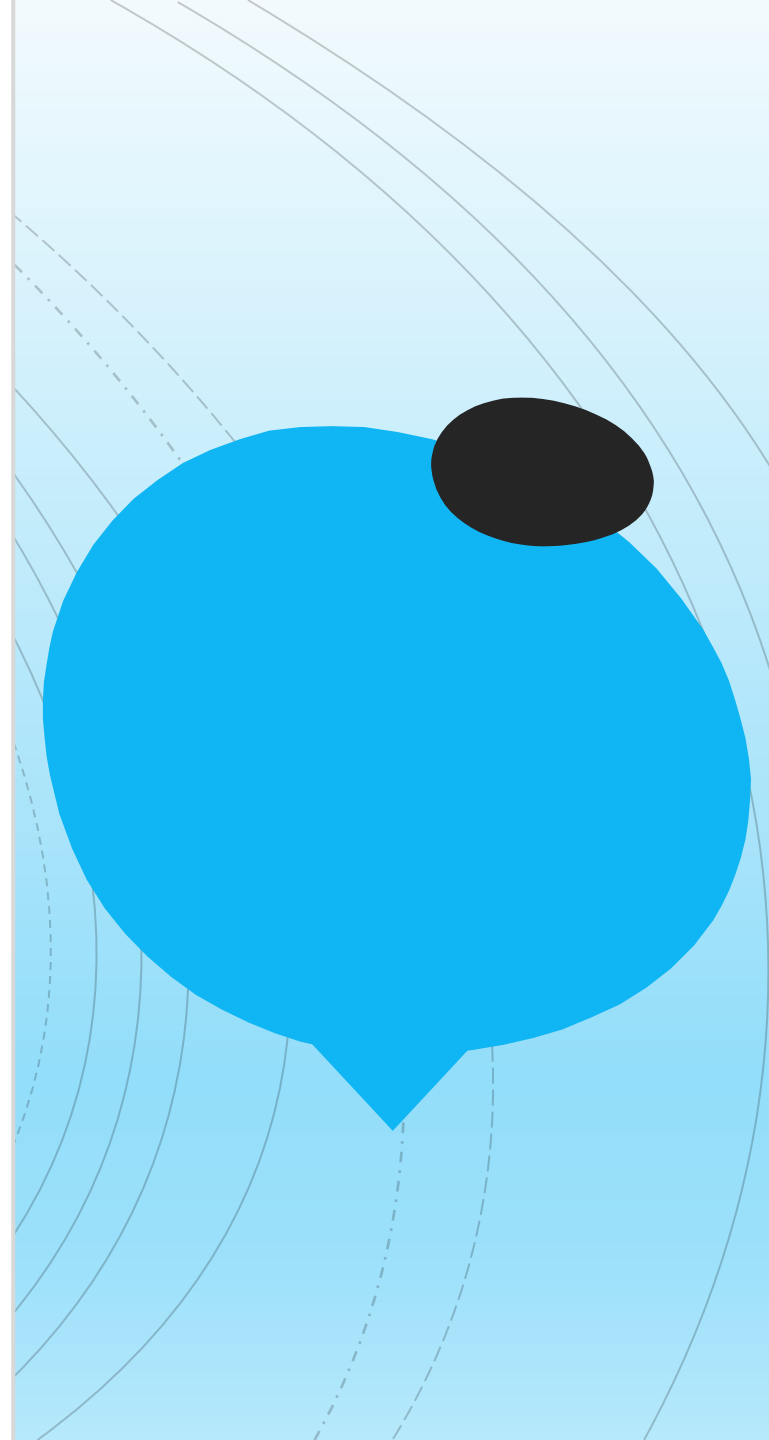




TN State Opioid Response (2018-2021)



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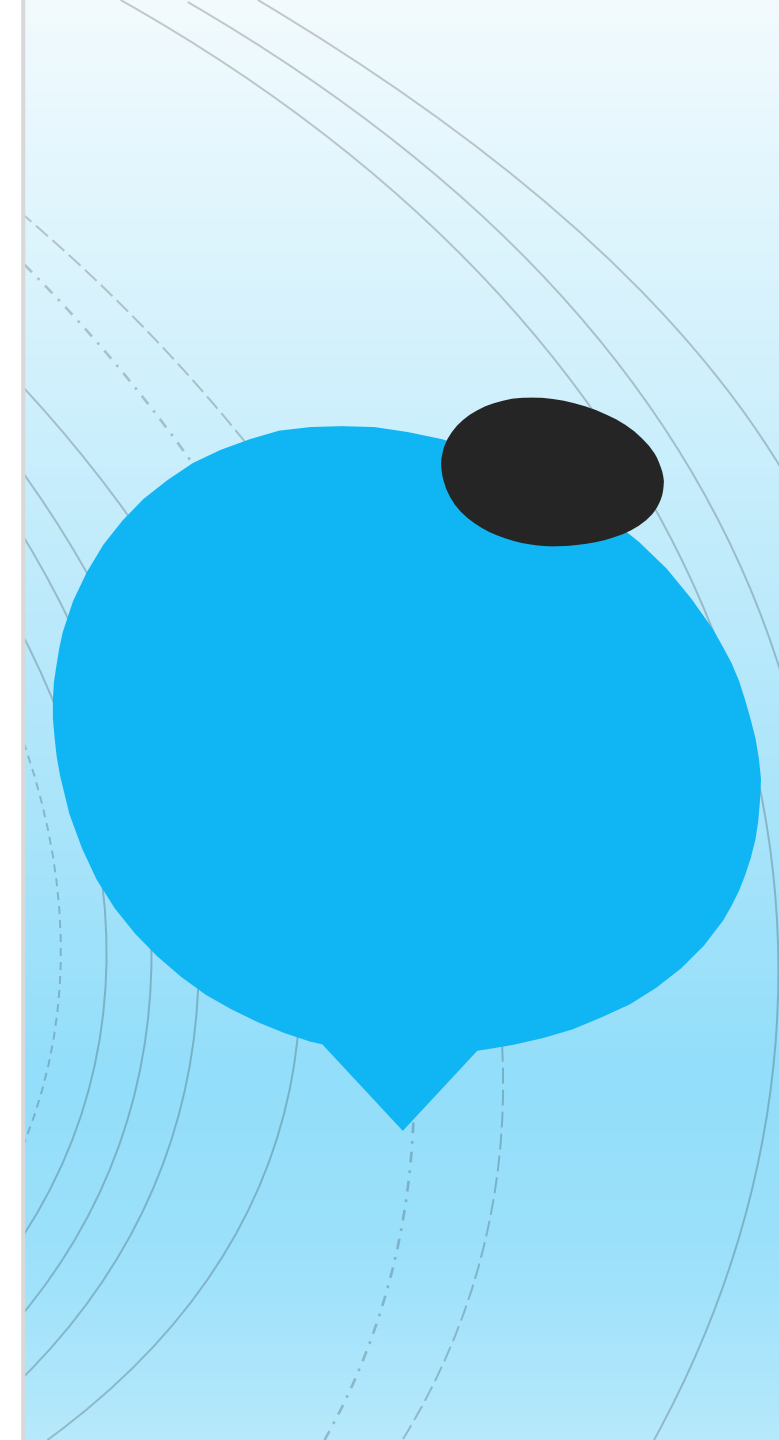


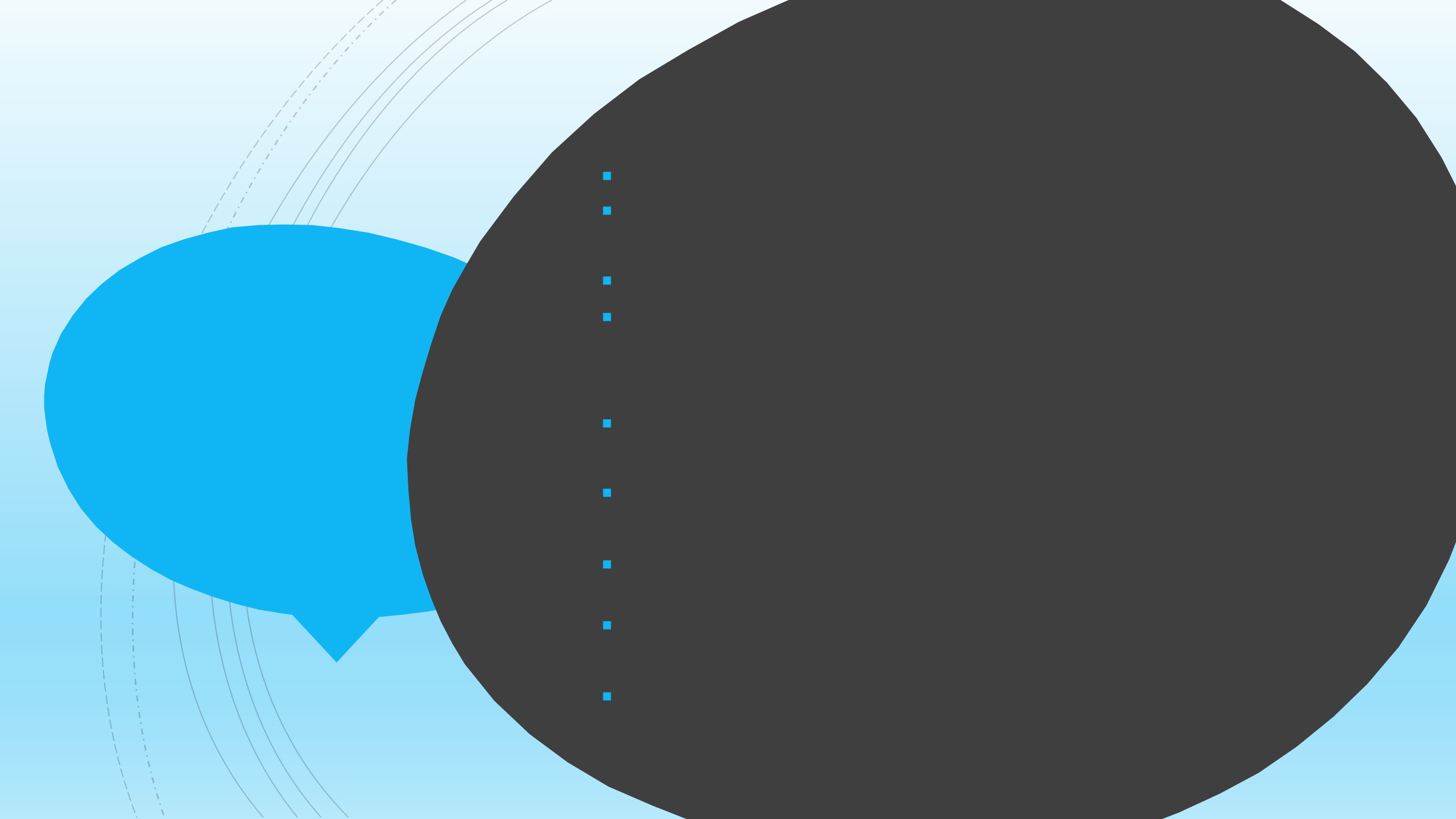


Director of the National Institute on Drug Abuse

“Treatment programs for substance use disorders inherited a dichotomous working definition of recovery from the 12-step world of past generations, where being completely “drug free” was not merely the gold standard but the only standard. Short of which an addicted individual was regarded as having failed or not considered to be “recovering”. Yet evidence indicates that abstinence is not the only clinically relevant outcome for every individual and that alternative endpoints can contribute to recovery even when abstinence is not completely achieved.”

- Era of demonization/witchcraft (1400's-1600's)
- Asylums – periods of isolation (1700's)
- Prohibition (1920's) – Banning substances
- Lobotomy – surgically cutting connections between prefrontal cortex and frontal lobes (won Nobel Prize in Physiology and Medicine 1949)
- War on Drugs (1980's-1990's) – criminalization of substance use/users
- Narco Farms/Lexington Cure/Free treatment – allowed research on human subjects.
- Mental health issues and substance abuse were treated exclusively instead of simultaneously
- Failure to acknowledge and address trauma in treatment
- System of scapegoating and victim blaming





No hero starts with an awareness of what they'll become, but simply emerges from a refusal of ignoring need, and a courage to act on the behalf of something or someone other than themselves...

What could you become in this obvious time of need if you simply became unwilling to accept the way that things are and realized your power of doing something to make it better?



2019 NSDUH Annual national report

friendly review of Research

Harm reduction therapy: A practice-

Implementing the Harm Reduction Approach

Challenges to

continuum of substance use disorder treatment: Nonabstinence approaches

Expanding the

The Challenge of Harm Reduction

Personalizing the Treatment of Substance Use Disorders

