

# Harm Reduction

## *“The Zero Death Dilemma”*



Kyle Platt

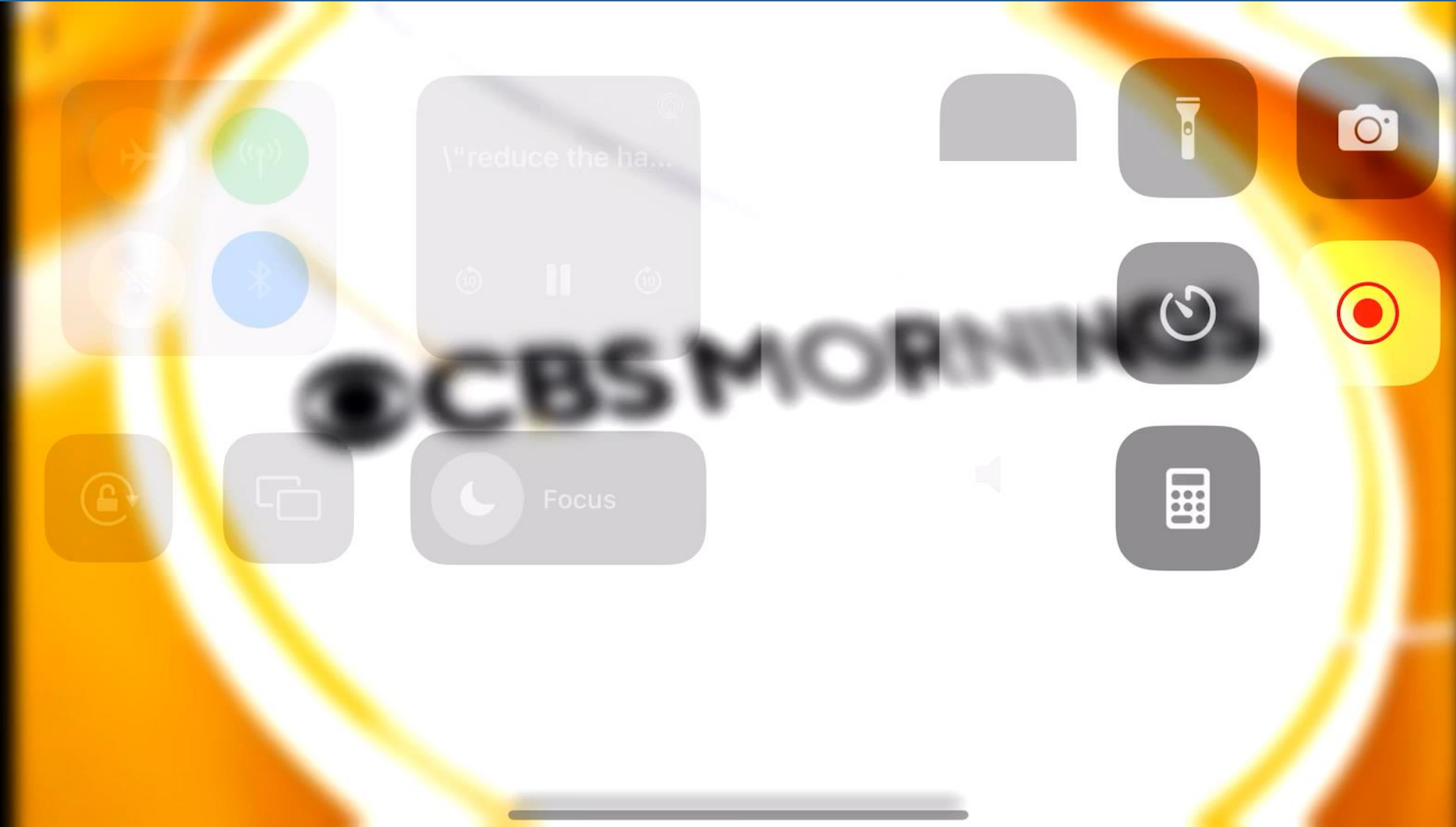
MS Regional Director, Business Development

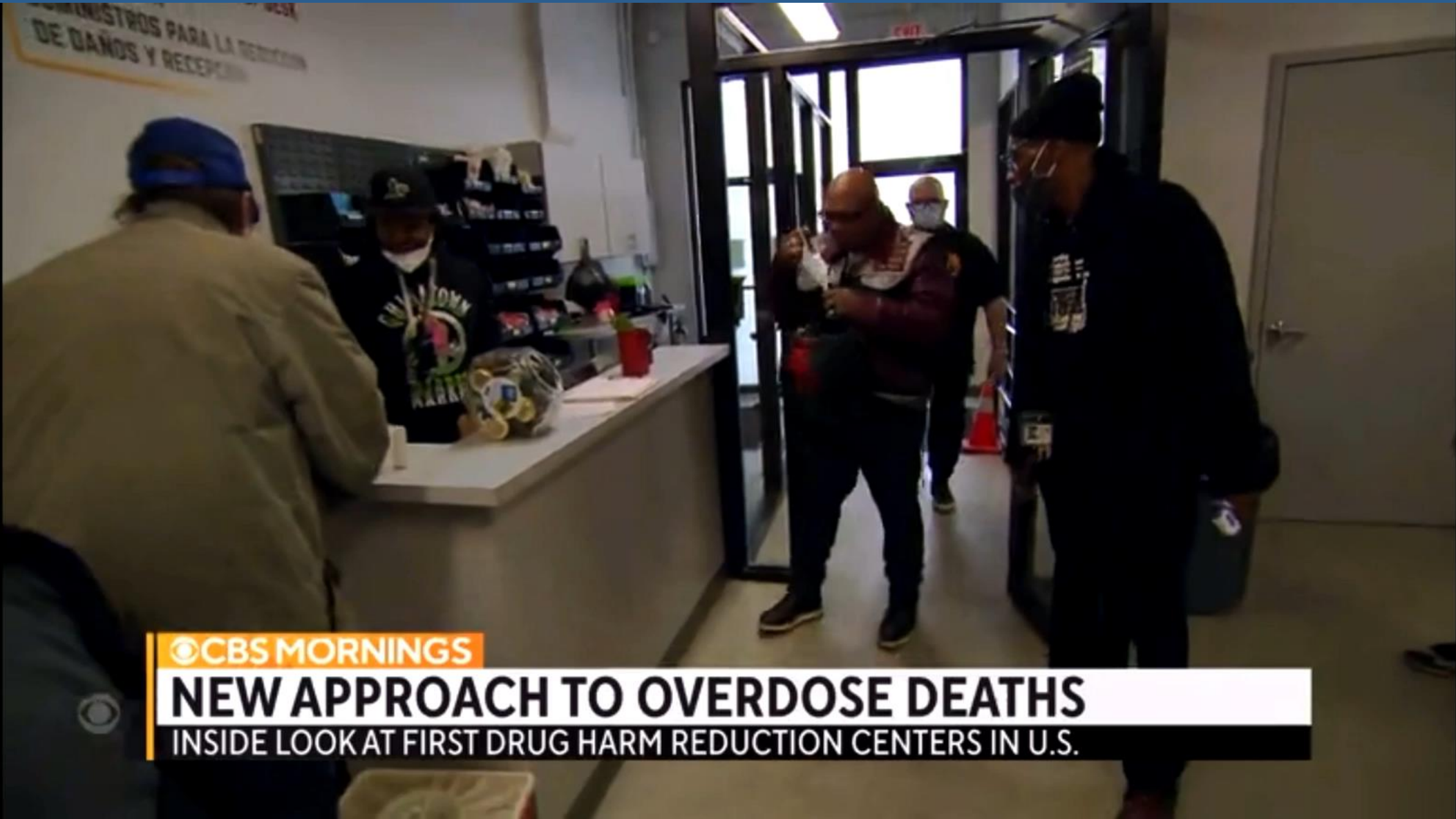
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# Harm Reduction: The Zero Death Dilemma



- ***Professionals disagree vastly with treatment models***
- ***Patient-centered care is more capable with expanded treatment methodologies***
- ***Alignment & Access of appropriate care for individuals broadens with expanded treatment methodologies***





**CBS MORNINGS**  
**NEW APPROACH TO OVERDOSE DEATHS**  
INSIDE LOOK AT FIRST DRUG HARM REDUCTION CENTERS IN U.S.

*Harm Reduction: The Zero Death Dilemma*



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# The Zero Death Dilemma



# Zero Death Dilemma: Stigmas of Harm Reduction

## The BROAD SPECTRUMS of Harm Reduction

Disagree

Agree



# Zero Death Dilemma: Stigmas of Harm Reduction

## The BROAD SPECTRUMS of Harm Reduction

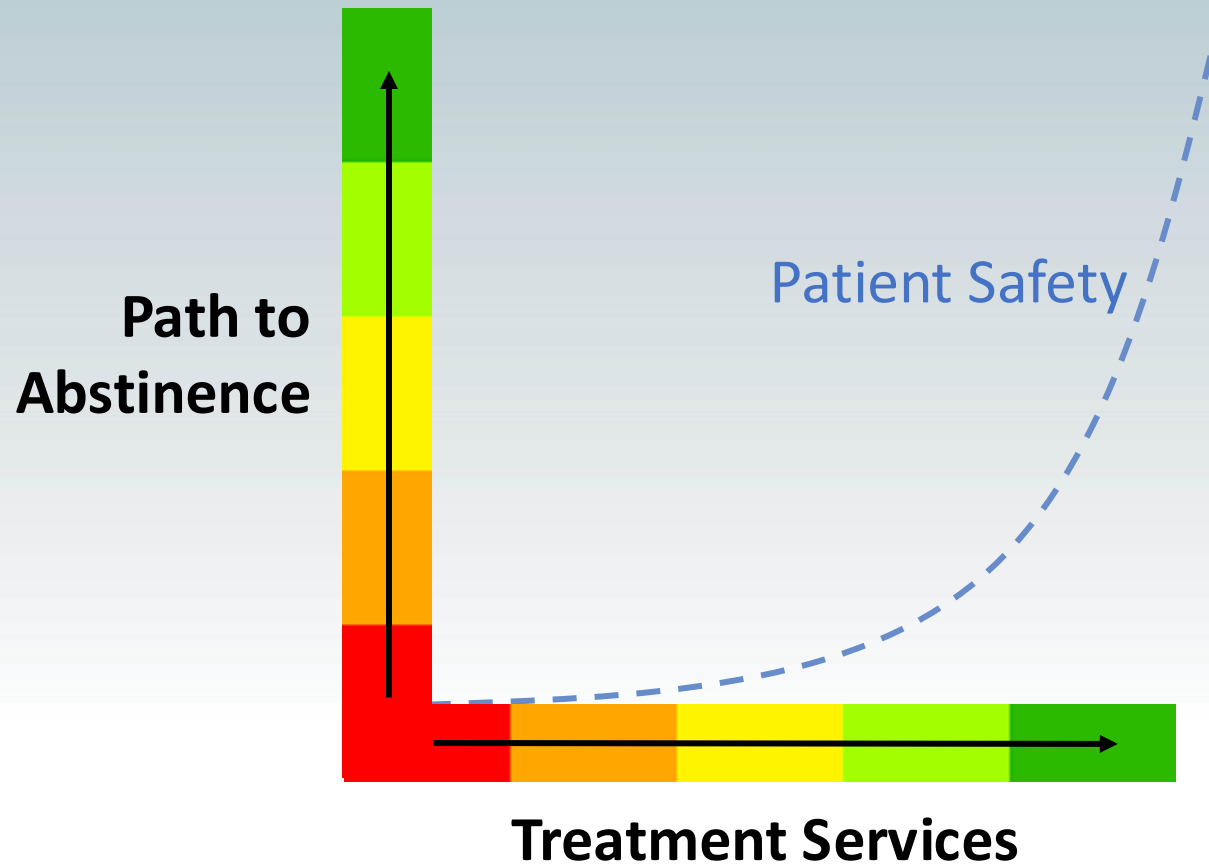
Radical

Traditional

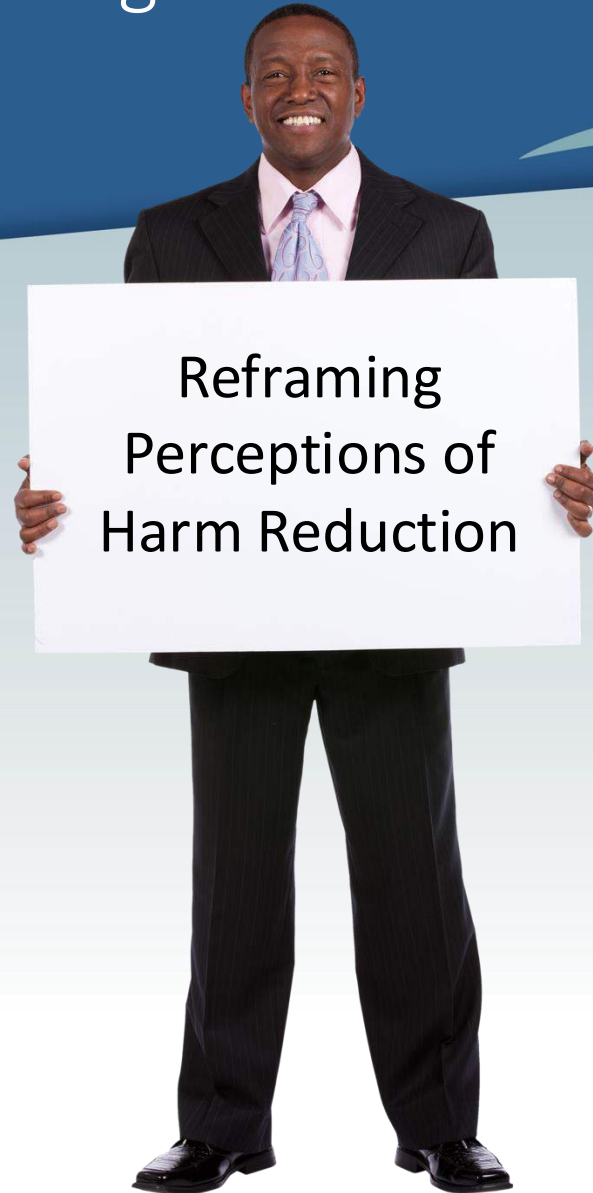




# Zero Death Dilemma: Reframing Perceptions



# Zero Death Dilemma: Agenda



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# Harm Reduction: Reframing Perceptions



**Harm Reduction**: *any set* of strategies aimed at reducing the negative consequences associated with certain behaviors or conditions.

# Harm Reduction: Reframing Perceptions



Harm reduction recognizes that individuals may engage in high-risk behaviors for various reasons...

Rather than condemning or stigmatizing these behaviors, harm reduction aims to provide practical support to individuals...

... with the goal of improving their overall well-being.

# Zero Death Dilemma: Stigmas of Harm Reduction

## The BROAD SPECTRUMS of Harm Reduction

Risky Behaviors

Abstinence



# Harm Reduction: The Zero Death Dilemma



**Harm Reduction acknowledges that complete abstinence may not be immediately achievable or realistic for everyone and focuses on reducing the negative consequences**

# The Zero Death Dilemma: Agenda



# Patient-Centered Care Better Enabled



The choice between abstinence only based treatment and harm reduction methodologies should be made based on individual needs, preferences, and the recommendations of healthcare professionals.

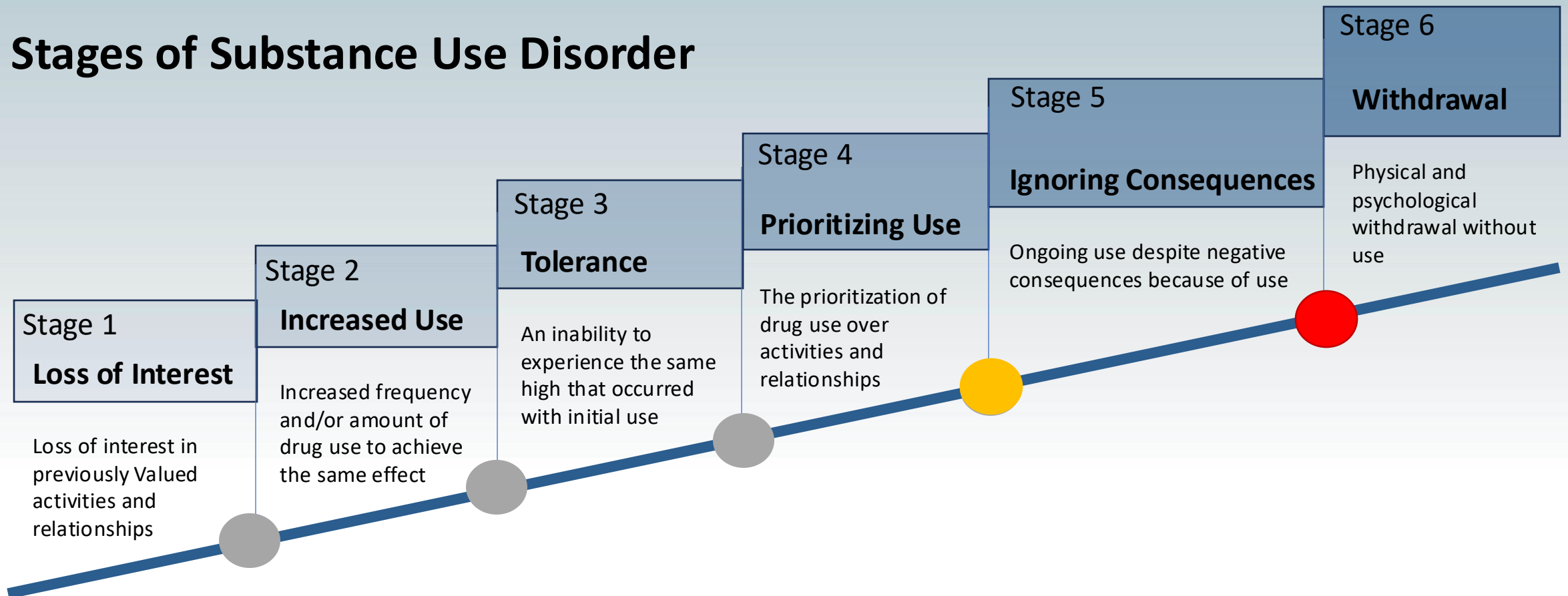
Some individuals may find success with one approach, while others may benefit from a combination of **both**.

The goal is to find a treatment plan that supports long-term recovery and addresses the specific needs of each person.



# Zero Death Dilemma: Patient-Centric Care

## Stages of Substance Use Disorder



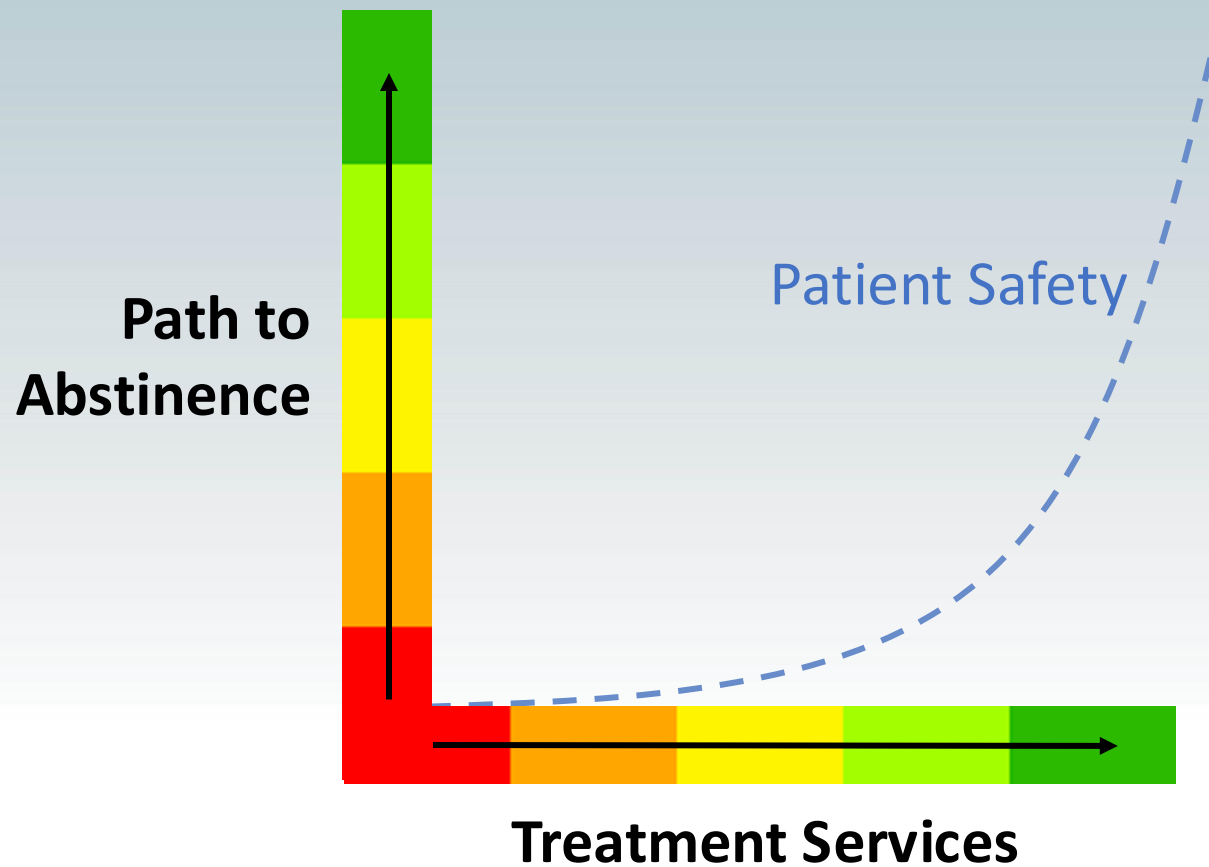
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# Zero Death Dilemma: Patient-Centric Care



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# Zero Death Dilemma: Patient Centric Care



# Harm Reduction: Patient-Centric Care



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# The Zero Death Dilemma



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# Zero Death Dilemma: Patient-Centric Care

**Abstinence**

**My Way**

**Your Way**

**Abstinence**

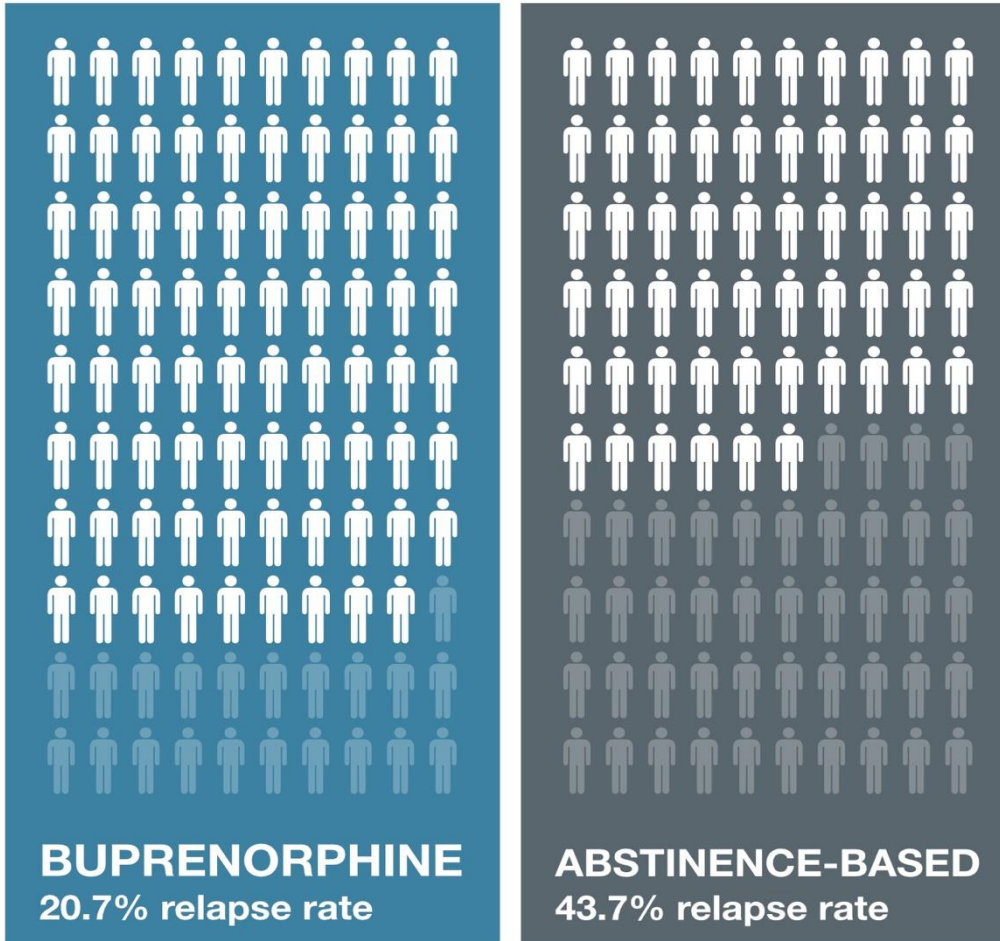
Care Categories according to SAMHSA:

- Therapy & Counseling
- Medication Management
- Harm Reduction
- Support Groups

**Recovery  
Road**

# Treating Addiction

Relapse is a common problem in addiction treatment. Studies show that treatments involving medications, like buprenorphine, are more effective in reducing relapse rates than abstinence-based treatments.



Source: *Journal of Substance Abuse Treatment, Risk Factors for Relapse and Higher Costs Among Medicaid Members with Opioid Dependence or Abuse: Opioid Agonists, Comorbidities, and Treatment History*, 2015

Graphic by Alexandra Kanik

*Harm Reduction: The Zero Death Dilemma*



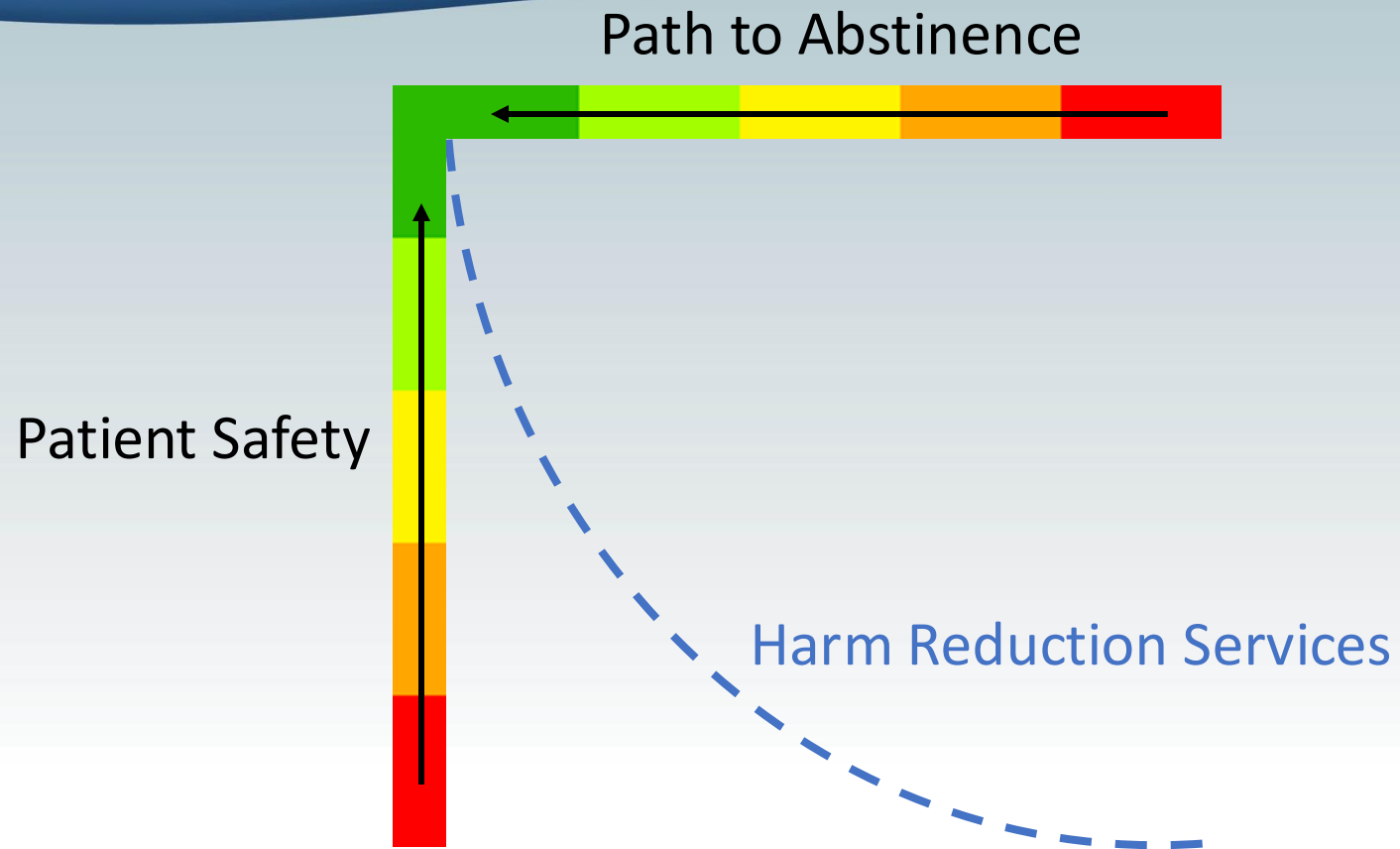


# Harm Reduction: Reframing Perceptions

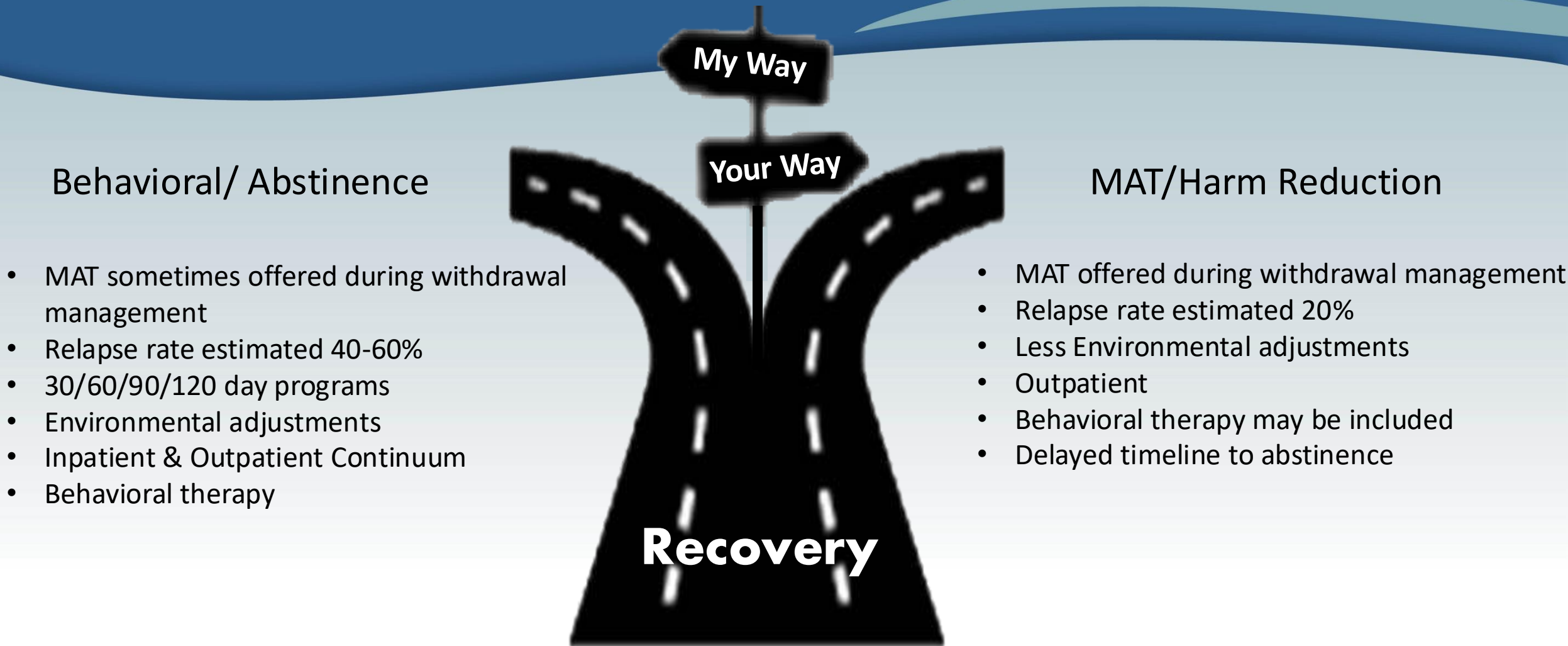


- Peer Support services
- Safe consumption sites
- Needle and syringe programs
- Free condom programs (CAPs)
- Medication-Assisted Treatment (M.A.T.)
- Access to naloxone

# Harm Reduction: Patient-Centric “Care”



# Zero Death Dilemma: Patient-Centric “Care?”



# Harm Reduction: Substance Use with M.A.T. (Medicated Assisted Treatment)



Harm Reduction acknowledges that complete abstinence may not be immediately achievable or realistic for everyone and focuses on reducing the negative consequences

- Reduces drug overdose deaths
- Prevention of infections
- Increased access to treatment
- Protects the dignity of the individual
- Builds rapport and confidence

# Harm Reduction: Patient-Centric Care



Critics of harm reduction often argue that it enables or condones risky behaviors

- “M.A.T. is just replacing one drug with another”
- “Just because you make it safer doesn’t make it ok”
- “Nobody is better off until they fully change their behaviors”
- “When they are ready to make the choice to stop, I’ll be ready to help”

**Focusing on minimizing safety risks instead of only abstinence**

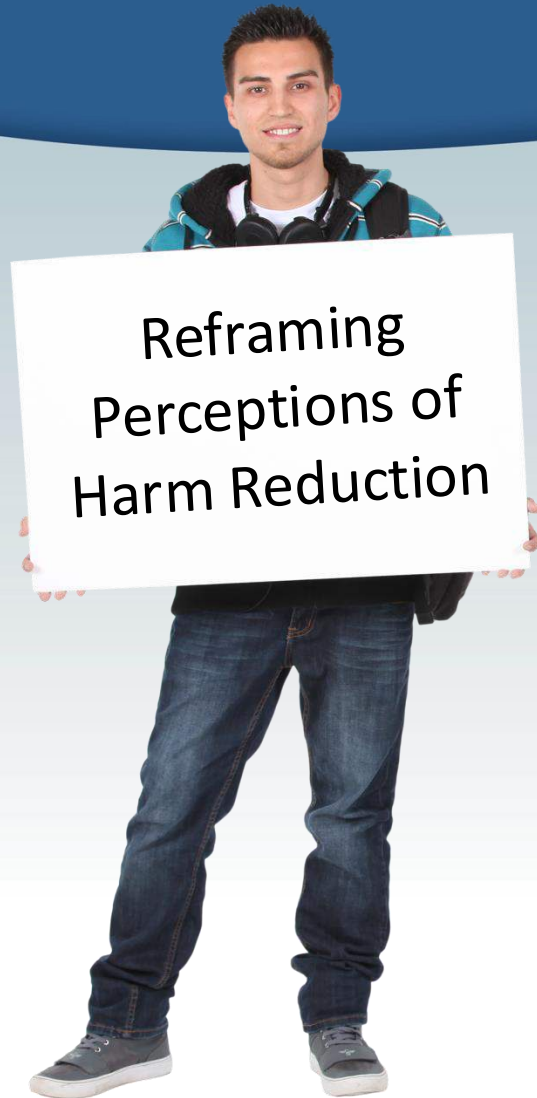
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# Zero Death Dilemma: Reframing Perceptions



- 1) Early intervention services
- 2) Expanded treatment models
- 3) Education expansion

# Patient-Centered Care Better Enabled



## Blending Harm Reduction with Abstinence Services

1. Community engagement and recruitment into services
2. More comfortable withdrawal management with MAT
3. Behavioral therapy

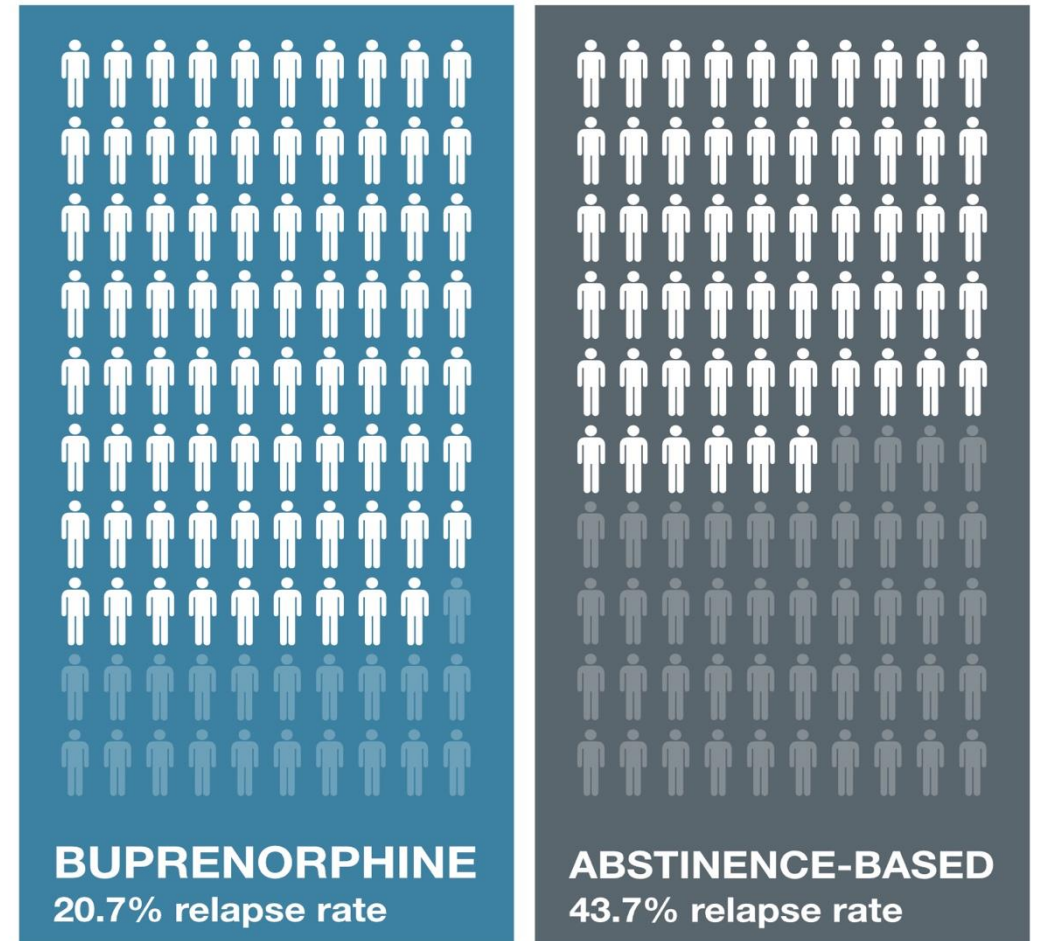


# The Zero Death Dilemma



# Treating Addiction

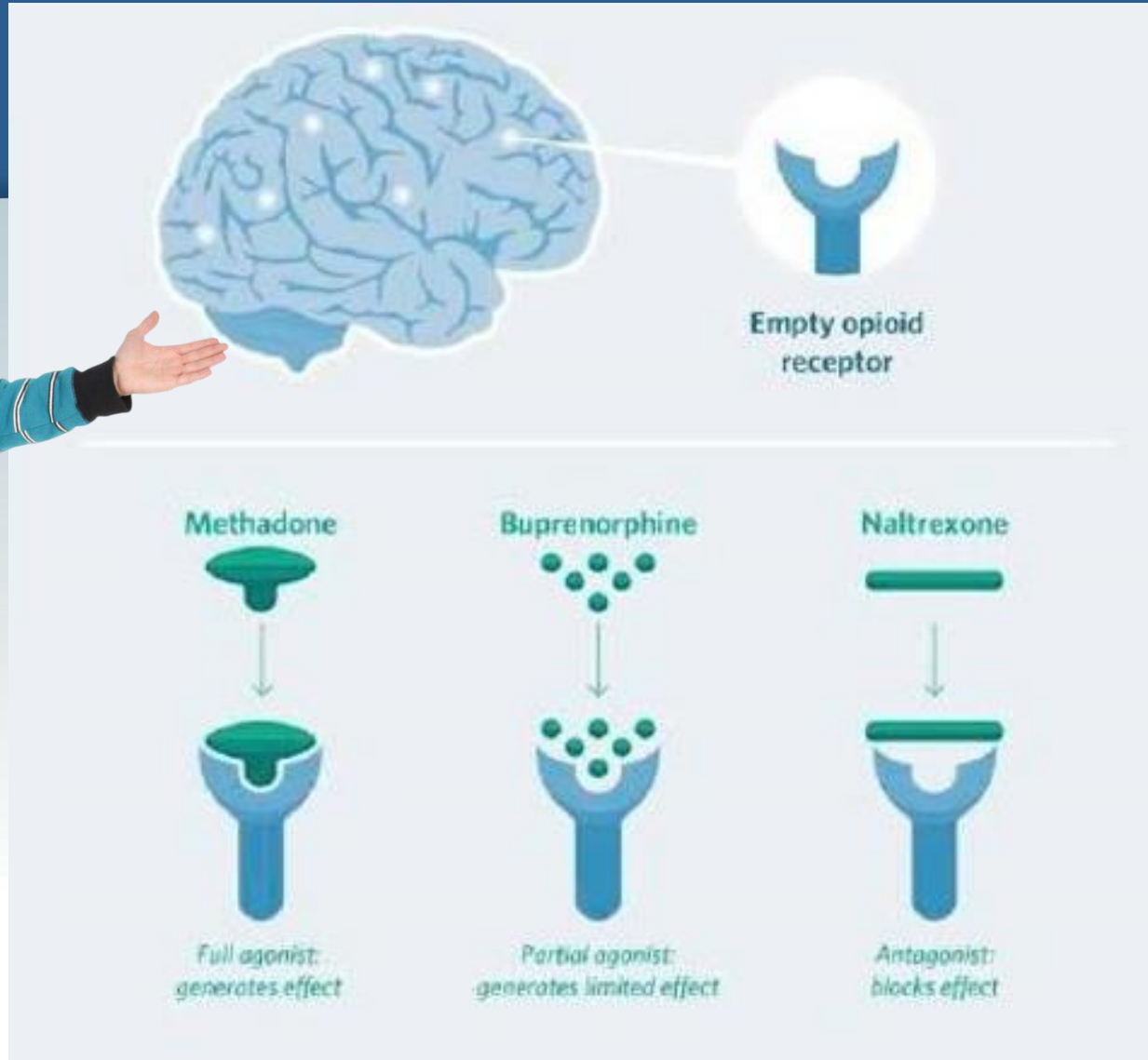
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Source: *Journal of Substance Abuse Treatment, Risk Factors for Relapse and Higher Costs Among Medicaid Members with Opioid Dependence or Abuse: Opioid Agonists, Comorbidities, and Treatment History, 2015*

Graphic by Alexandra Kanik

# Harm Reduction in Substance Use with M.A.T. (Medicated Assisted Treatment)



## Medications:

- Reduce Cravings
- Treat Withdrawals
- Block Subsequent Drugs
- Prevent Overdoses
- Return Patient to Normal Function

## Medications Do Not:

- Get Patients High
- Impair Functioning
- Exchange One Drug for Another

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# Harm Reduction: The Zero Death Dilemma



Whether or not you support the multiple facets of Harm Reduction services, the bottom line is it saves lives.

Professionals disagree vastly with treatment models

Patient-centered care is more capable with Harm Reduction

***Alignment/Access of appropriate care for individuals broadens***

# The Zero Death Dilemma

Community education  
on where to access  
Narcan and how to use  
it to save a life



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# GROUP EXERCISE – Treatment Plan



- 1) PWUD wanting help to stop using methamphetamines and cocaine.**
- 2) PWUD wanting help with alcohol use and is currently on Suboxone**