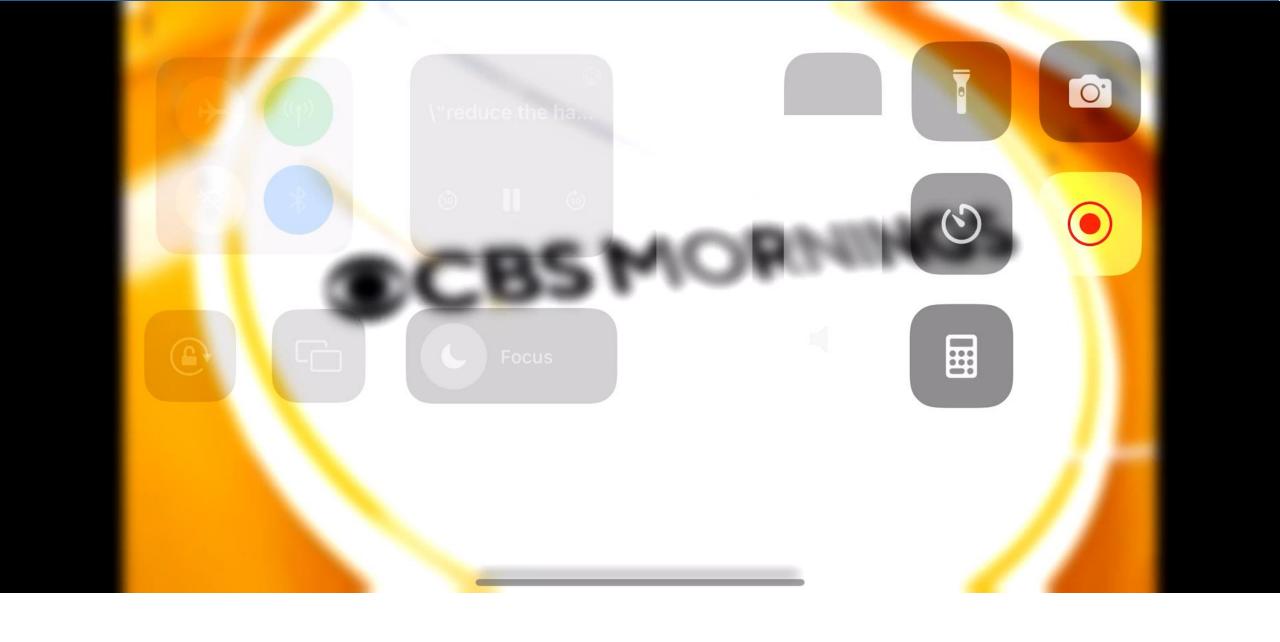


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MS Regional Director, Business Development
Alliance Health Center, Brentwood Behavioral, Diamond Grove, & Gulfport Behavioral

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



Harm Reduction: The Zero Death Dilemma





The Zero Death Dilemma



Harm Reduction: The Zero Death Dilemma

Zero Death Dilemma: Stigmas of Harm Reduction



The BROAD SPECTRUMS of Harm Reduction

Disagree

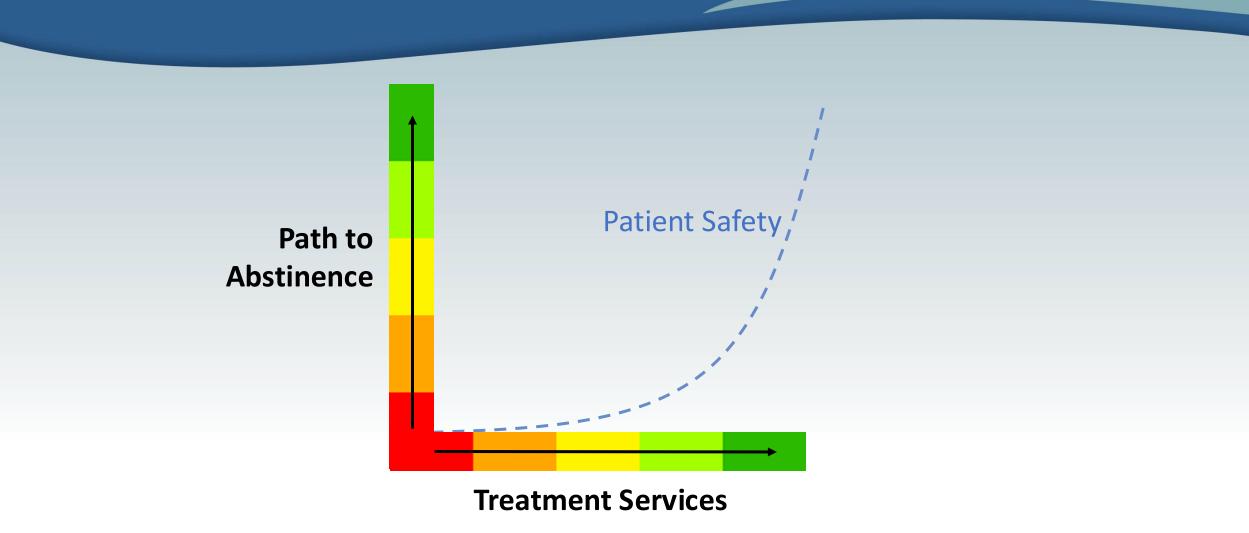
Zero Death Dilemma: Stigmas of Harm Reduction



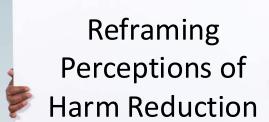
The BROAD SPECTRUMS of Harm Reduction

Radical Traditional

Zero Death Dilemma: Reframing Perceptions



Zero Death Dilemma: Agenda





Harm Reduction: The Zero Death Dilemma

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 highrisk 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

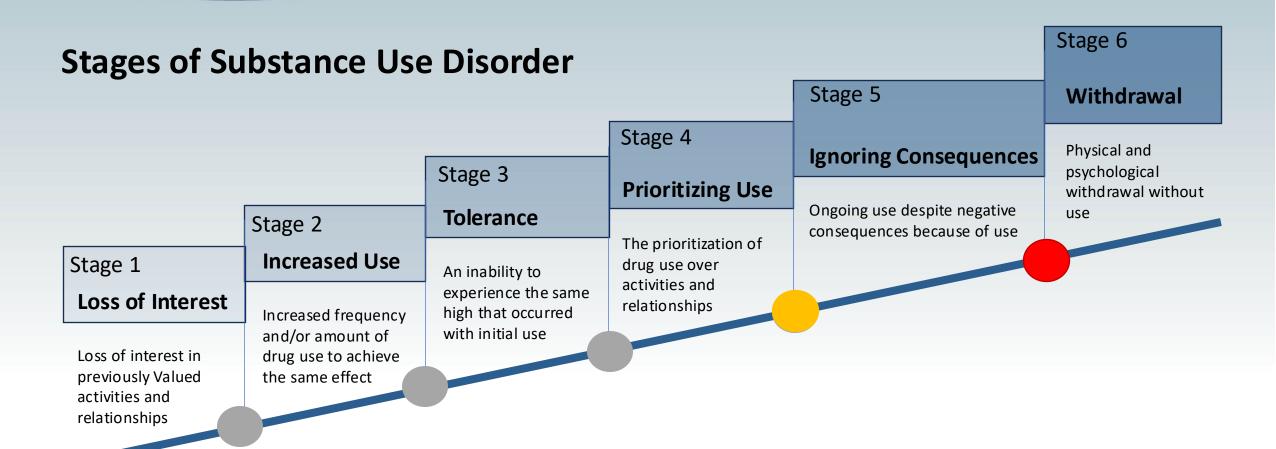


The choice between abstinence only based treatment and harm reduction methodologies should be made based on individual needs, preferences, and the recommendations of healthcare professionals.

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.

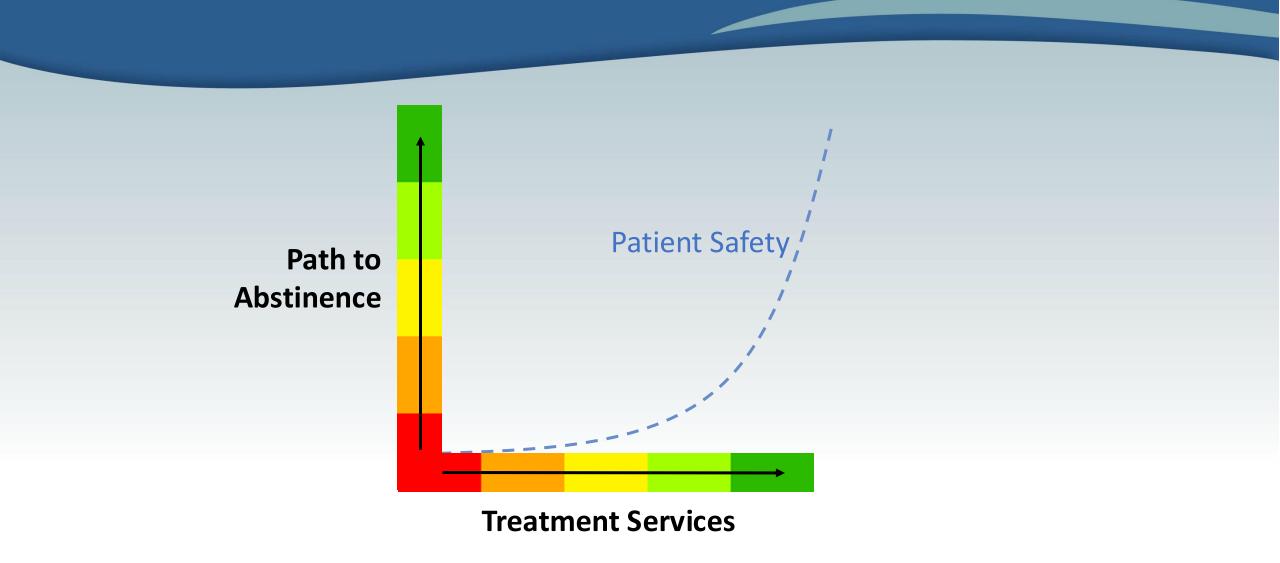
Zero Death Dilemma: Patient-Centric Care



Zero Death Dilemma: Patient-Centric Care



Zero Death Dilemma: Patient Centric Care



Harm Reduction: Patient-Centric Care



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



Harm Reduction: The Zero Death Dilemma

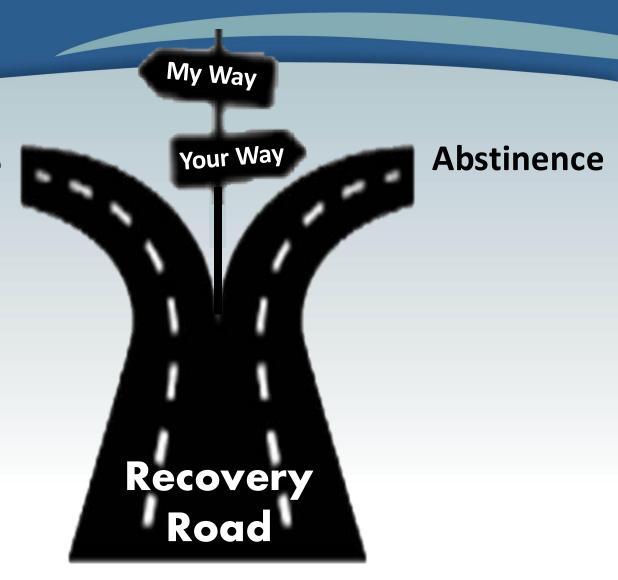


Zero Death Dilemma: Patient-Centric Care

Abstinence

Care Categories according to SAMHSA:

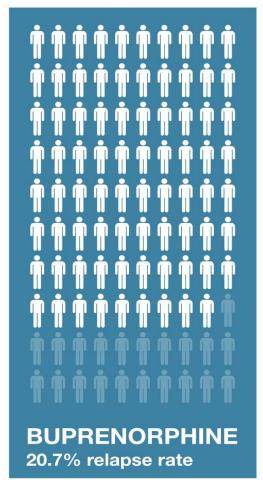
- Therapy & Counseling
- Medication Management
- Harm Reduction
- Support Groups

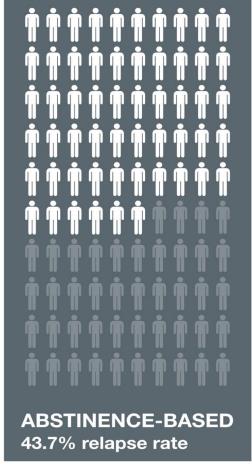




Treating Addiction

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

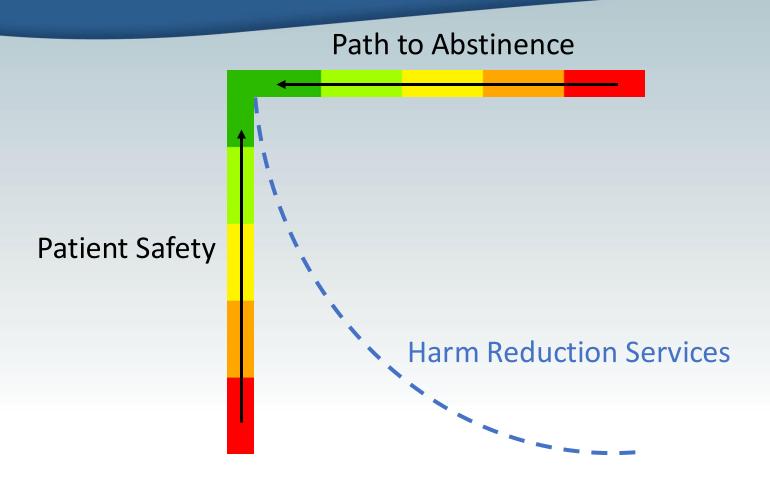


Harm Reduction: Reframing Perceptions



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

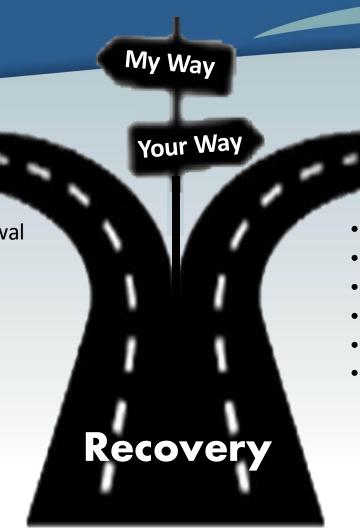
Harm Reduction: Patient-Centric "Care"



Zero Death Dilemma: Patient-Centric "Care?"

Behavioral/Abstinence

- MAT sometimes offered during withdrawal management
- Relapse rate estimated 40-60%
- 30/60/90/120 day programs
- Environmental adjustments
- Inpatient & Outpatient Continuum
- Behavioral therapy



MAT/Harm Reduction

- MAT offered during withdrawal management
- Relapse rate estimated 20%
- Less Environmental adjustments
- Outpatient
- Behavioral therapy may be included
- Delayed timeline to abstinence

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

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



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Zero Death Dilemma: Reframing Perceptions



Reframing Perceptions of Harm Reduction

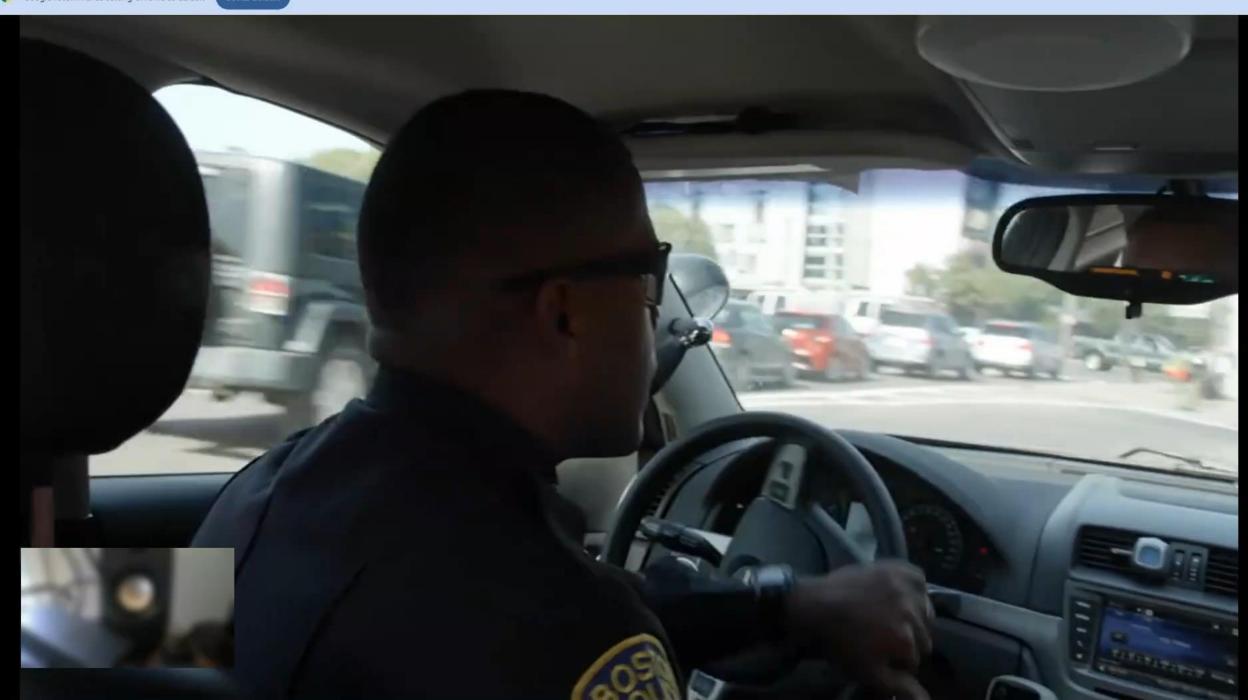


1) Early intervention services

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

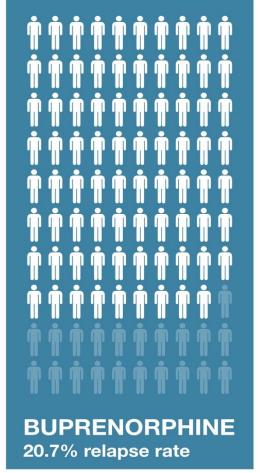


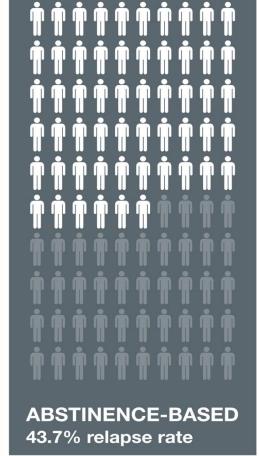
MAT Services reducing overlapses



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 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

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



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

Google recommends setting Chrome as default

Set as default





Harm Reduction QR Code for CEUs



