



Community-Driven Harm Reduction Innovation and Adaptation

June 29, 2022 from 3-4pm ET

Housekeeping

- You will be muted automatically upon entry and for the duration of the webinar.
- This webinar is being recorded and will be archived for future viewing on the National Council's website.
- Please submit your questions using the Q&A box at the bottom of the screen.

This webinar was made possible by grant number 6 NU38OT000318-02-02 from the Centers for Disease Control and Prevention (CDC) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$750,000 with 100% funded by CDC/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement by, CDC/HHS or the U.S. Government.



Today's Presenters

Alexander/a Bradley, MPH, HIPS, Outreach and Community Engagement Manager (He/him/his ~ She/her/hers ~ They/them/theirs)

Tamara Oyola-Santiago, MA, MPH, MCHES, Bronx Móvil, Program Leader (She/her/hers/ella)





NATIONAL COUNCIL for Mental Wellbeing

Polls: Getting to Know Our Audience

Poll 1: Who's here? (select all that apply)

- Government agency
- Nonprofit organization
- Mutual aid collective
- Grassroots organization
- Substance use or mental health care provider
- Medical care provider

Poll 2: Are you doing mobile harm reduction?

- Yes
- No





Polls (cont.)

Poll 3: Who do you serve in your mobile harm reduction?

- Trans and gender nonconforming folks
- Sex workers
- Spanish-speaking (Latinx)
- Stimulant users (crack, meth)
- Opioid users
- People who inject drugs
- People who smoke drugs
- Youth (younger than 24 years)
- Migrants
- People who are unhoused/housing insecure

Others not included in this list? Please type in the chat!

national council for Mental Wellbeing

REDEFINED.

NATCON22 APRIL 11-13, 2022

NATIONAL HARBOR, WASHINGTON, DC METRO AREA

council for Mental Wellbeing

NatCon22.org

#NatCon22

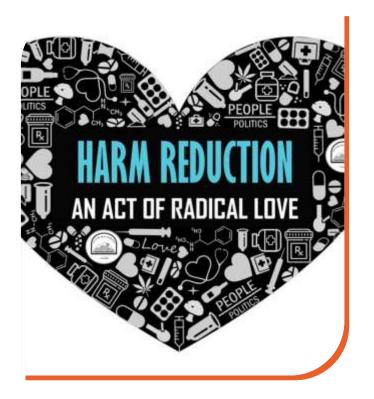
Abstract

The COVID-19 pandemic has exacerbated the underlying social, economic and environmental factors that lead to worsened health outcomes among people who use drugs and people with substance use disorders, including increases in overdose. Despite these challenges, harm reduction organizations rapidly implemented innovative and adaptive strategies to continue to serve their communities.

This panel will highlight the ways harm reduction services have changed since the onset of the pandemic, best and promising practices for caring for people who use drugs and recommendations for how to support and partner with community-based harm reduction providers in your area.

NATIONAL COUNCIL for Mental Wellbeing

Learning Objectives



- Discuss innovative and adaptive ways community-based harm reduction organizations improve the health of people who use drugs.
- Understand best and promising practices to support people who use drugs during the pandemic and during times of heightened overdose risk.
- Identify opportunities to support and partner with harm reduction organizations in their communities.
- Describe ways to implement culturally centered harm reduction strategies and practices.

Bronx Móvil

Active since 2018, Bronx Móvil provides street-based bilingual (Spanish/English) harm reduction services to people who use drugs in The Bronx and connecting counties when the rest of the city sleeps.

A Bronx Móvil session includes a multi-pronged approach of:

- Service provision (distribution of water, nutritional support, naloxone, syringes, personal fitpacks, wound care kits, safer injection, smoking & sex kits, urban living supplies, and fentanyl test strips); and
- Community mapping (geomapping and ethnographic notes); and
- Health promotion & engagement that centers the humanity of folks.

In the city that never sleeps, harm reduction must be 24/7 – and culturally and linguistically centered.

for Mental
Wellbeing

Bronx Móvil: Why health on the streets?

There is economic and mobility privilege when we assume people can travel to a building.

There is also an assumption that building services are required for the provision of effective, comprehensive and adequate care.

Go beyond the walls of a building and meet people where they live, sleep, rest, work...

This is true always. AND the pandemic proved that mobile harm reduction is life saving. The fragility of the nonprofit industrial sector & related services was laid bare with COVID-19.



Bronx Móvil: Why 24/7?

Harm Reduction needs of people are 24/7. Provision of naloxone, syringes & wound care kits, and referral to services need to happen at all times. We can't wait until Monday morning to save a life.

Systems-impacted folks have experienced chaotic and inconsistent health care, limited access to safe and secure housing, and are vulnerable because of the -isms (racism, sexism, homo- and transphobia, ableism). Hence, the social determinants of health.

Our response is a mutual aid anti-racist collective. Ours is a cooperative model where lived experiences are as valued as credentials.

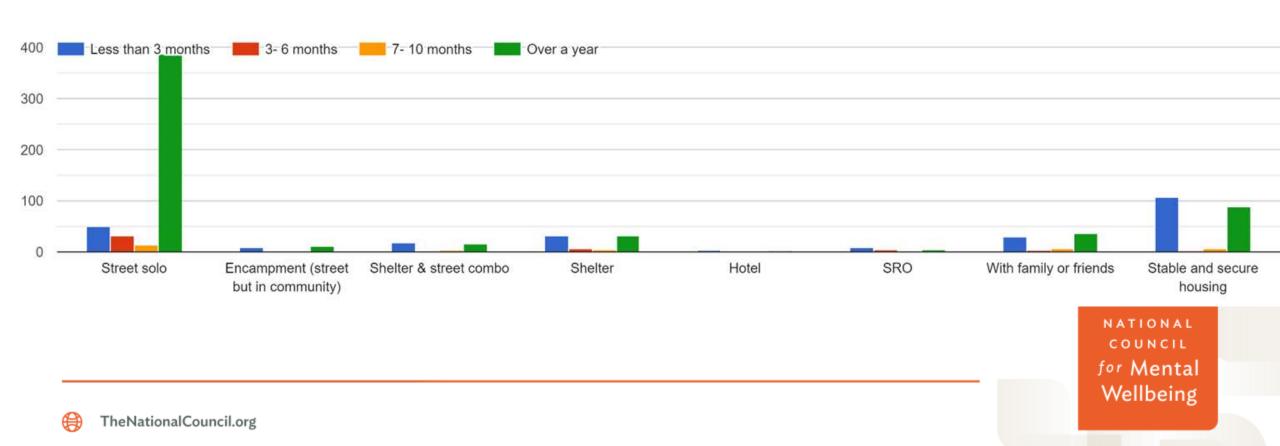






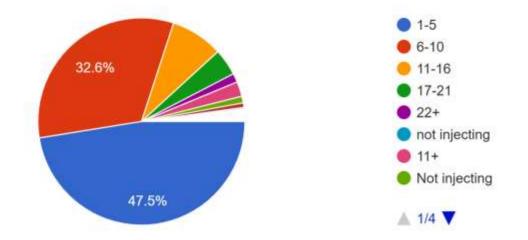
Bronx Móvil: The urgency of our work – Data Highlights: What do you see?

Housing situation

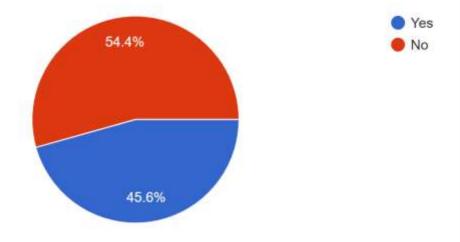


Bronx Móvil: The urgency of our work – Data Highlights: What do you see?

How many times a day do you inject? / ¿Cuántas veces al día te inyectas? 866 respuestas



Do you have difficulty injecting? / ¿Tienes problemas inyectándote? 850 respuestas



NATIONAL
COUNCIL
for Mental
Wellbeing



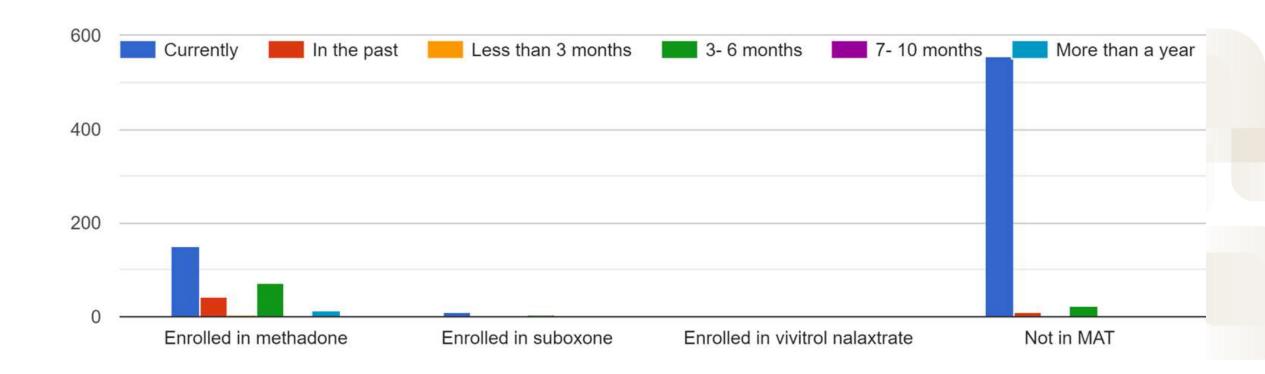
Bronx Móvil: The urgency of our work – Data Highlights: What do you see?

Copiar Drugs used / Drogas usadas Daily Weekly Monthly If available Smoke Inject Drink 60 20 Crack Cocaine Fentanyl (as preferred opiate) ATIONAL COUNCIL for Mental Wellbeing



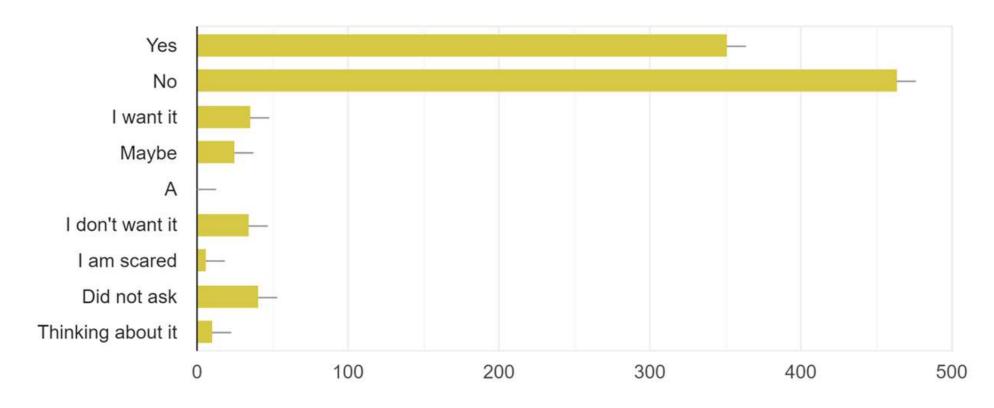
Bronx Móvil: The urgency of our work – Data Highlights: What do you see?

Medical Assisted Treatment / Programa de Alternativas a Drogas



Bronx Móvil: The urgency of our work – Data Highlights: What do you see?

Have you received the COVID vaccine? / ¿Recibió la vacuna de COVID? 866 respuestas



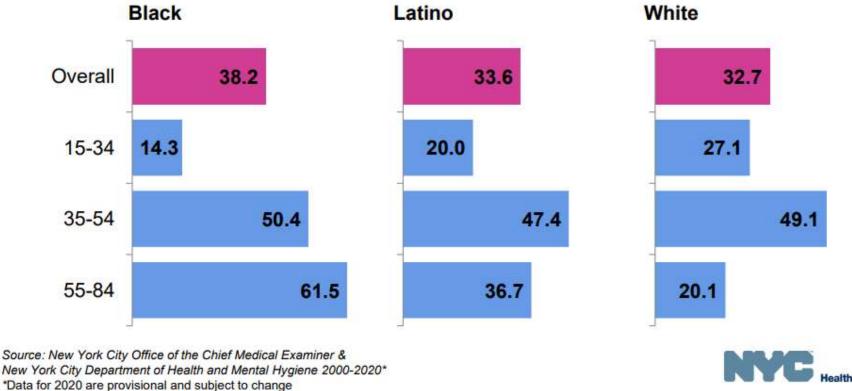
Bronx Móvil: Why culturally and linguistically centered?

The vast majority of participants are Black & Puerto Rican; many are migrants to NYC. Gancheros and Community Leaders drive our outreach and mobilize knowledge and harm reduction health promotion.



Age-specific rates of drug overdose death vary by race/ethnicity

Rate of unintentional overdose deaths, by race/ethnicity and age group, New York City, 2020

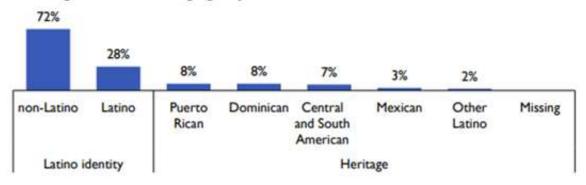




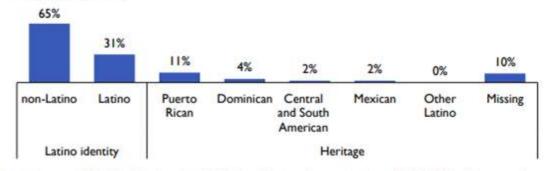
NYCDOHMH Overdose Deaths Among Latino New Yorkers, 2020

Latino New Yorkers account for 28% of NYC's population.

The largest Latino heritage groups in NYC are Puerto Ricans and Dominicans.



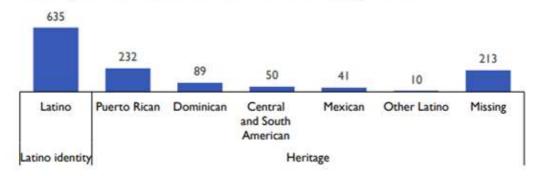
Latino New Yorkers account for 31% of overdose deaths. Compared with population estimates, Puerto Rican New Yorkers had a higher proportion of overdose deaths.



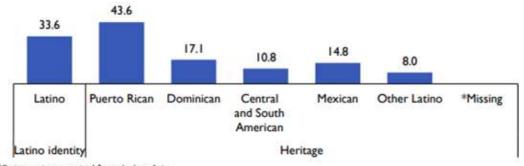
Source: Integrated Public Use Microdata Series, U.S. Census American Community Survey, 2015-2019. Total Latino population count from: NYC DOHMH Population Estimates, modified from US Census Bureau interpolated intercensal population estimates, 2000 - 2019. Updated October 2020. Data were limited to individuals ages 15 to 84. NYC Office of the Chief Medical Examiner and NYC Health Department's Bureau of Vital Statistics, 2020. Analysis by Bureau of Alcohol, Drug Use, Prevention, Care and Treatment. Data for 2020 are provisional and subject to change.

Heritage is defined by how someone identifies their Latino heritage regardless of where they were born.

Among Latino New Yorkers, Puerto Rican New Yorkers had the largest number of overdose deaths. Heritage information was missing from the death certificates of one out of every three Latino New Yorkers who died of a drug overdose.



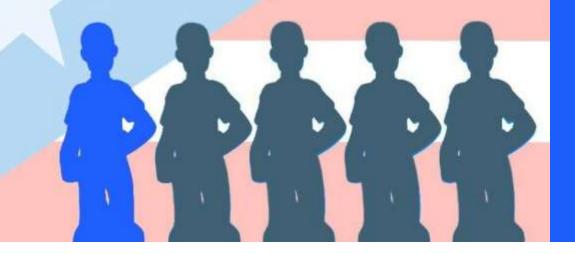
The rate of overdose death among Puerto Rican New Yorkers was higher than the rate among Latino New Yorkers overall.



*Rates not presented for missing data.

¿Sabías que...

En el 2018, uno de cada cinco
Boricuas que murieron por
sobredosis en los Estados Unidos
era de Nueva York?



Ahora que lo sabes, hay una forma de ayudar a tu comunidad. ¡Entrénate en cómo usar Narcan (Naloxona), una medicina que salva vidas y revierte la sobredosis!



Contacte a Bronx Móvil para un adiestramiento (917) 200-0358, o visite a la farmacia más cercana u organización de intercambio de jeringuillas para obtener Narcan. Cargue Narcan siempre. ¡Boricuas, vamos a salvar vidas!



Honoring Individual Power & Strength







HARM REDUCTION SAVES LIVES

Our Work

HIPS advances the health rights and dignity of people and communities impacted by sex work and drug use by providing non-judgmental harm reduction services, advocacy, and community engagement led by those with lived experience.

We envision a world where all people can use their power to live healthy and self-determined lives free from stigma, violence, criminalization, or oppression.



HIPS engages in education, advocacy, and direct services in Washington, DC with a particular focus on supporting:

- people who are engaged in sex work
- people who use drugs
- trans and gender non-conforming folks
- people living with HIV
- people with histories of incarceration
- people experiencing housing instability



We prioritize activities that are:

*Non-Judgmental *Low Threshold

*Strength-Based *Client-Directed

*Goal-Centered

What is Harm Reduction?

- Reality-based
- Evidence-based
- Street-based
- "Meeting people where people they are"
- Any positive change
- By and for the communities we serve

Daytime and Overnight Outreach Clinical Services (HIV, HCV, & Gender Affirming Care) Housing Navigation

Medication-Assisted Treatment

Drop-In Services

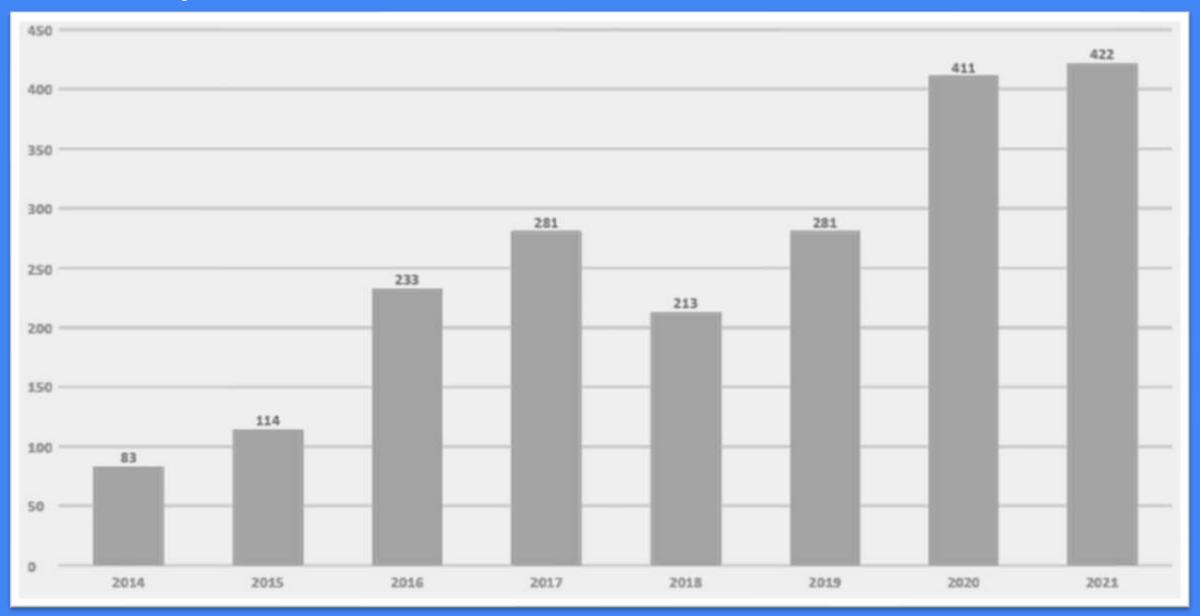
Syringe Services, Safer Use, & Overdose Prevention

Support Groups & Case Management

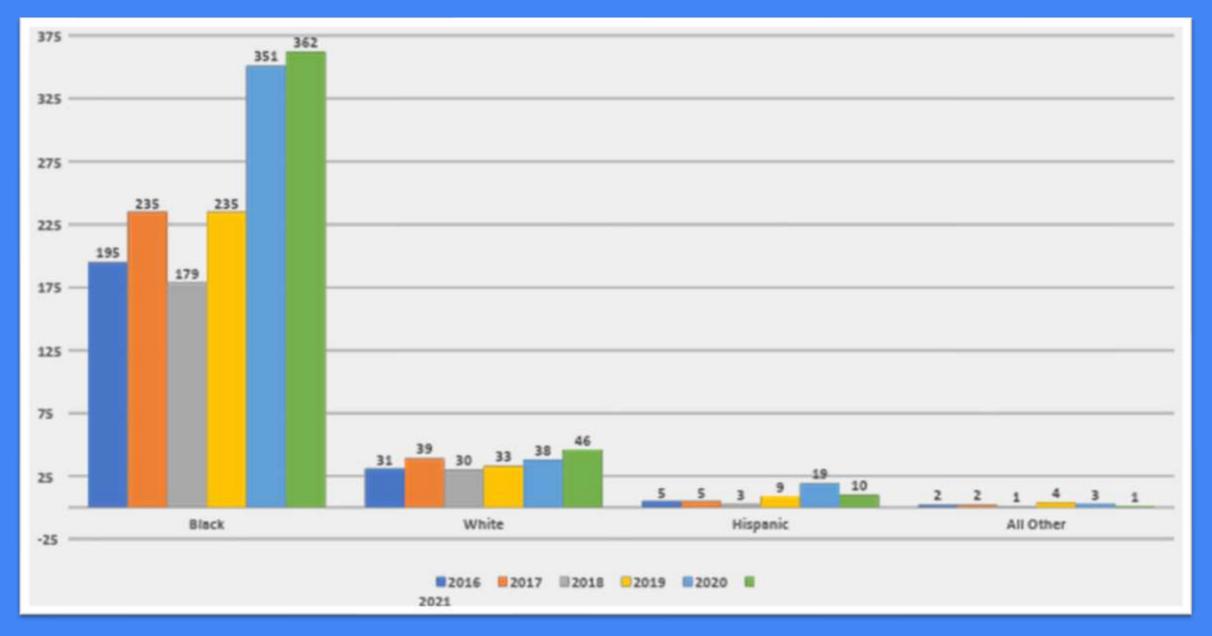
Advocacy (incl. Sex Worker & Drug User Organizing)

Community Education and Engagement

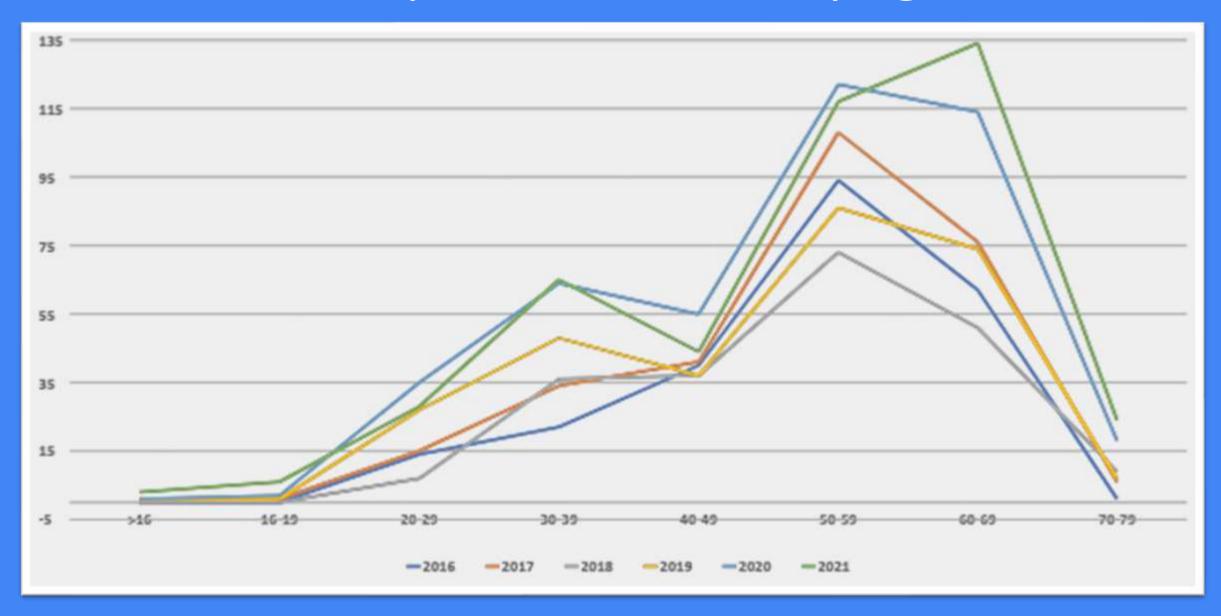
Opioid Overdose Fatalities 2014-2021



Fatal opioid overdoses by race and ethnicity



Fatal opioid overdoses by age



Get Involved in the Movement:)

www.decrimpovertydc.org

#DecrimPovertyDC #DefundMPD

Sex Work #DecrimNow



www.HIPS.org

Facebook: ilovehips

Twitter: @HIPSDC

Insta: @hips.dc

Bronx Móvil & HIPS: Lessons Learned During the Pandemic

- Flexibility in design of provision of services: we must be malleable.
- Harm reduction must be sex positive and linguistically and culturally centered.
- Harm reduction can't be siloed; it must be integrated into vaccine efforts, housing and food
 justice, primary medical care and overdose community education efforts.
- Go back to the roots of harm reduction: community-driven, participant-centered and holistic.
 It must include the decriminalization of sex work and drug use.
- In rapidly gentrifying cities, housing is critical.
- The nation's reopening has led to fierce NIMBY (not in my backyard) that, combined with gentrification, translates into more oppressive sanitation and police sweeps.



Bronx Móvil & HIPS: Reflection Question

- How can you integrate mobile harm reduction services into your organization if you are not doing so right now?
- Is your organization harm reduction-centered? How can you help build that capacity?
- What are the challenges in integrating the movement of harm reduction into your setting?
- How are you going to help support changing the narrative of harm reduction as a philosophy and practice vs. a set of services?



Questions?





Resources

- National Harm Reduction Coalition
- NASTAD (National Alliance of State and Territorial AIDS Directors)
- NEXT Distro
- Harm Reduction Legal Project (Network for Public Health Law)
- Harm Reduction Technical Assistance Center (CDC)
- National Council Harm Reduction Resources



Thank You!

Tamara Oyola-Santiago

Bronx Móvil

Bronxmovil@gmail.com

Website: https://www.bronxmovil.org

917-200-0358

Alexander/a Bradley

HIPS

Alexandra@hips.org

www.HIPS.org

Facebook.com/iloveHIPS

Instagram: @hips.dc

