

harm reduction

THIS PAMPHLET DOES NOT CONDONE OR CONDEMN THE INJECTION OF ILLICIT DRUGS.

MTRO

A harm reduction approach is based on science, compassion, health and human rights.

Substance use has affected nearly every family in Appalachia. Harm reduction works to mitigate harms that come from drug use and the criminalization of drug use. Harm reduction keeps our families alive through naloxone distribution, and protects their health with sterile supplies to prevent HIV, hepatitis C, and other infections.

Benefits of Harm reduction

- Reduce overdose deaths
- Reduce HIV infection and Hepatitis C infections
- Reduce the sharing of needles

More than 75 studies and decades of research prove that Harm reduction DOES NOT $\,$

- Increase drug use
- Increase drug trafficking
- Increase crime



SYRINGE SERVICES PROGRAMS (SPP)

SSP's provide harm reduction services that include:

- Naloxone / Narcan nasal spray
- Safe disposal containers for syringes
- HIV and hepatitis C (HCV) testing
- Overdose prevention education
- Fentanyl test strips
- Condoms and emergency contraception
- Wound care
- Sterile syringes
- Referrals to treatment centers (including medication for opioid use disorder - MOAD)
- Referral information for mental health providers, local food pantries, housing support, legal services and medical care.

To find a SSP near you please visit the following resources.

NASEN – North America Syringe Exchange network location Map www.nasen.org

Harm Reduction Coalition Sterile Syringe Locations Map harmreduction.org/resource-center/harm-reduction-near-you

Tennessee

www.tn.gov/health/health-program-areas/std/std/syringe-services-program.html



Kentucky

chfs.ky.gov/agencies/dph/dehp/hab/Pages/kyseps.aspx

Virginia

www.vdh.virginia.gov/disease-prevention/chr/

West Virginia

oeps.wv.gov/harm_reduction/pages/default.aspx



SYRINGE DISPOSAL

- If you are unable to access an SSP use a Sharps Container (a single-use container that is filled with used medical needles) and then dispose of the container safely.
- Sharps Containers can be purchased at pharmacies, medical supply stores or ordered through the mail from companies like ULINE.
- If you do not have access to a sharps container, place sharps in a puncture resistant container such as an empty liquid detergent bottle or coffee can with a secure cap. Wrap lid in duct tape and label container "Biohazard".
- DO NOT Put sharps in recycling bins.
- Protect yourself, your community, your environment, family and friends.
- Put used syringes in sharps container immediately.
- Keep needles away from children and pets.
- DO NOT Flush sharps down the toilet or drop into storm drains.
- Bring a sharps container when traveling.
- DO NO<mark>T C</mark>lip, bend or recap needles.

SARE SYRINGE USE

- Use a new needle every time you inject to reduce your risk of blood-borne diseases like hepatitis and HIV/AIDS and endocarditis (a circularly staph infection)
- Rotate where you shoot
- Clean the injection site with soap and water or rubbing alcohol. Only use alcohol pad in one direction. DO NOT make circles.
- DO NOT share your works (syringes, cookers, cottons rubbing alcohol etc.) even with your partner. HIV and hepatitus C can be spread these tools.
- Get tested for HIV and hepatitis C every three months. Ask about PREP a daily medication that can prevent HIV infections.
- If you must reuse them, clean your sharps with bleach if you must reuse them. (NOTE: Bleach does not always kill the hepatitis virus)

OVERDOSE

RISK FACTORS

- Using substances alone, when there is nobody available to help.
- Changes in quality or purity of street heroin and fentanyl.
- Mixing opioids with other substances such as alcohol or benzodiazepines, (Klonopin, Xanax, Ativan, Valium, Librium)
- Poor nutrition
- A weak immune system
- Heart problems, unhealthy lungs from smoking, having HIV, Hepatitis C or liver damage from drinking.
- Surviving a past overdose(s).
- Recent discharge from hospital, jail or a detox program
- Recent period of low or no use.

SYMPTOMS

A person experiencing an overdose may have some or all of the following symptoms:

- Can't be woken up
- Slow or shallow breath
- Pinpoint Pupils. The black circle in the center of their eye is very small.
- Limp body (Floppy arms or legs), won't wake up
- Gurgling or choking noises
- Blue or gray lips / nails
- Faint heartbeat

INSTRUCTIONS

Even if you're not sure if someone is overdosing Call 911, administer naloxone, and perform rescue breathing. DO NOT Leave the person alone. DONOT give the person anything to eat or drink or try to induce vomiting

It is important to call 911 even if the person becomes conscious and resumes breathing. The person needs to be assessed by a medical professional. They may need additional doses of Naloxone.





NALOXONE / NARCAN INSTRUCTIONS

Naloxone is a drug that reverses the effects of opioids. It is given to any person with symptoms of an opioid overdose. You can safely administer naloxone even if you are unsure what drugs the person has taken. Naloxone does not cause any harm but it will only reverse the effects of opioids (heroin, methadone, morphine, opium, codeine or hydrocodone, Fentanyl)

- Naloxone can be administered by anyone.
- Naloxone is not addictive and has no potential for abuse.
- Naloxone has been used for more than 40 years.
- Naloxone is safe and has little to no side effects.
- Individuals who regularly use
 opioids may experience withdrawal symptoms if given naloxone. This is rarely life-threatening.



NARCAN







OVERDOSE GOOD SAMARITAN LAWS

These laws protect someone calling 911 during a drug overdose from prosecution for low-level drug offenses, like sale or use of a controlled substance or paraphernalia, for the person seeking medical assistance as well as the person who overdosed.

The laws vary from state to state so be sure to know the Good Samaritan Law in your state. In order for Good Samaritan laws to protect you, you must follow these rules.

- 1. You must call 911 to report the overdose
- 2. You must remain at the scene with the person overdosing until emergency personnel arrive.
- 3. You must identify yourself to the authorities that respond to the overdose.

Tennessee

Good Samaritan Law - TCA 63-6-218

Overdose Prosecution Immunity TCA 63-1-156

This ONLY applies to the person's first overdose involving 911 or emergency services.

Provides immunity for administering naloxone to those acting in good faith that someone is experiencing an overdose. The law grants immunity from civil suit to a patient, family member, friend or other person in a position to assist giving the medicine naloxone. You are granted civil immunity for administering the medicine to someone you reasonably believe is overdosing on an opioid. The law provides immunity from being arrested, charged, or prosecuted for drug-related violations if you experience an overdose or call 911 about someone experiencing an overdose.

The Tennessee Addiction Treatment Act also protects you from Penalties for a violation of a protective order or restraining order; or Sanctions for a violation of pretrial release, condition of probation, or condition of parole based on a drug violation.

Virginia 18.2-250

No individual shall be subject to arrest or prosecution for the unlawful purchase, possession, or consumption of a controlled

substance pursuant if Such individual acts in good faith, seeks or obtains emergency medical attention (a) for him/her self, if he/ she is experiencing an overdose, or (b) for another individual, if the other individual is experiencing an overdose, or (ii) is experiencing an overdose and another individual, in good faith, seeks or obtains emergency If someone calls for medical attention in the case of an overdose, and wants protection from prosecution, they must follow these requirements.

- 1. Report the overdose directly to a 911 dispatcher, firefighter, EMT or police officer.
- 2. Remain at the scene with the person overdosing until emergency personnel arrive.
- 3. Identify themselves to the authorities.
- 4. Cooperate with any investigation "reasonably related" to the overdose.

As long as you fulfill all of these requirements you can generally avoid charges for:

Possession of a controlled substance.

Possession of marijuana.

Public intoxication.

Possession of drug paraphernalia.

Unlawful purchase, possession or consumption of alcohol.

The law protects the person who calls for help. It DOES NOT protect the overdosed person from drug use and/or possession charges. The Good Samaritan law DOES NOT protect the dealer or distributor who gave the overdosed individual the drugs. In cases such as these, it's up to the officers who respond to decide on whether or not to pursue an arrest. Be aware that If they respond to a call and find large amounts of drugs, they might still make an arrest on distribution charges.

Kentucky 218A.133

A person shall not be charged with or prosecuted for a criminal offense prohibiting the possession of a controlled substance or the possession of drug paraphernalia if:

1. In good faith, medical assistance with a drug overdose is sought from emergency medical services, a law enforcement officer, or a health practitioner because the person: Requests emergency medical assistance for himself or herself or another person.

This DOES NOT extend to the investigation and prosecution of any other crimes committed by a person who otherwise qualifies.

2. The person must remain with, or is, the individual who appears to be experiencing a drug overdose until the requested assistance is provided; and the evidence for the charge or prosecution is obtained as a result of the drug overdose.

West Virginia - 55-7-15

The West Virginia Overdose Prevention Act (Alcohol and Drug Overdose Prevention and Clemency Act.) grants immunity from arrest and prosecution to individuals seeking medical attention for themselves or another. Under this bill, individuals cannot be cited for public intoxication, underage drinking, or possession or delivery of a controlled substance.

Those seeking medical care for another have to provide their name to law enforcement and cooperate with officials. They must remain with the person who reasonably appears to be in need of emergency medical assistance due to an overdose until such assistance is provided; They must Identify himself or herself, if requested by emergency medical assistance personnel or law-enforcement officers; and Cooperates with and provide any relevant information requested by emergency medical assistance personnel or law-enforcement officers needed to treat the person reasonably believed to be experiencing an overdose.

This bill does not grant amnesty based on information gained from another source or as part of a separate investigation.



VEIN CARE

Rotate spot of injection. It's best to alternate veins. A vein takes at least a couple of days to heal. More time is better. You can keep your veins in good shape if you let the spot heal before you hit on it again. Sticking a needle through a hole that isn't healed can push a blot clot into your blood stream. This clot could get stuck somewhere else in your body and become dangerous. If you don't let your veins heal you are at risk of Collapsed Veins, Infections, Leaky Veins and Abscesses from Leaks.

WOUND CARE

If ignored small skin infections can turn into systemic or blood infections quickly and cause serious health problems. Avoid picking or squeezing. It is much easier to deal with a skin wound when it is small and not yet infected than later when it is an emergency

1. Wash hands.

- 2. Clean wound with wound wash, pat dry with clean gauze.
- 3. Apply antibiotic ointment and a clean bandage.
- 4. Change daily.
- **5.** Elevate when possible.

If you do not have access to wound wash or antibiotic ointment: Wash hands. Put 1 drop of bleach in 32 oz. (4 Cups) clean water and wash wound. Pat dry. Swab wound with iodine swab, do not wipe off extra iodine. Apply petroleum jelly over iodine and cover with a clean bandage. Change daily.

Seek out treatment when:

- The wound is Not-healing after 2 weeks
- There is expanding redness around wound
- Limb swelling
- Odor from wound
- Red streak from wound
- Soaking through a bandage in less than 6 hours
- Fever

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You can tell a wound is infected when the area around your wound is:

- Shiny
- Pink and puffy
- Hot or tender to touch
- Swelling (finger leaves a lasting fingerprint pitted/ edema)
- Hard and warm (induration)
- Red (outline with permanent marker and monitor for increase in size)
- The area inside your wound Tunnels or tracts
- Tissue is tan grey or black
- Smelly thick green or yellow drainage
- Continuous bleeding

ABSCESSES

The biggest problem with abscesses is that people may not tend to them. Abscesses are contiguous areas of the flesh which exhibit swelling, inflammation, heat, and pain. Abscesses can impair blood flow to neighboring areas which can cause a gangrenous condition which can result in the loss of a limb or even death.

The best way to avoid abscesses is to use sterile injection procedures (specifically clean syringes) and always clean the area in which you are injecting with alcohol. Make sure your syringe registers (draws back a bit of blood) before injecting. Abscesses can come from 'misses' that go into the tissue.

If an abscess is treated early on, it poses no real threat. Left untreated, abscesses can cause negative health outcomes, injury and death.

Abscess Care

- If the abscess is small (less than a half-inch across), apply a warm compress to the area for about 30 minutes 4 times daily.
- 2. Do not attempt to drain the abscess by squeezing or pressing on it. This can push the infected material into the deeper tissues.
- Do not stick a needle or other sharp instrument into the abscess.

MEDICATION FOR OPIOID USE DISORDER (MOAD)

MOAD is the use of medications in combination with counseling and therapy to help people sustain recovery.

MOAD is used for the treatment of dependence to opioids. The prescribed medication normalizes brain chemistry, relieves physiological cravings and normalizes body functions.

Buprenorphine is an opioid partial agonist. It produces effects such as euphoria or respiratory depression at low to moderate doses. With buprenorphine, however, these effects are weaker than full opioid agonists such as methodone or Heroin When taken as prescribed, buprenorphine is safe and effective. Buprenorphine will Diminish the effects of physical dependency to opioids (such as withdrawal symptoms and cravings), and Increase safety in cases of overdose.

Naltrexone is not an opioid, is not addictive, and does not cause withdrawal symptoms with stop of use. Naltrexone blocks the euphoric and sedative effects of opioids such as heroin, morphine, and codeine. Naltrexone binds and blocks opioid receptors, and reduces and suppresses opioid cravings. There is no abuse and diversion potential with naltrexone.

Methadone has been shown to be effective in treatment of opiate substance dependence. When taken orally it does not cause euphoric or sedating effects and does not result in continuing tolerance. Methadone can therefore be administered orally, once daily, at a relatively constant dose to reduce cravings for heroin and block the effects of opiate withdrawal symptoms. This is one of the most widely used medications for treating opioid addiction. It is available in several different forms, but most patients take it orally as a liquid. Methadone can cause some unpleasant side effects including nausea, constipation and sedation.

Ain't No Grave Goma

Hold My Body Down

Resources

SAMHSA – Substance Abuse and Mental Health Services

Administration
An agency within the U.S.
Department of Health and
Human Services that leads
public health efforts to reduce
the impact of substance abuse
and mental illness.
www.samhsa.gov

Centers for Disease Control & Prevention Syringe Services Programs

www.cdc.gov/ssp/index.html

HEP CONNECT

A regional initiative that focuses on the intersection of hepatitis C and drug use in Indiana, Kentucky, North Carolina, Tennessee and West Virginia. www.hepconnect.com/

National Harm Reduction Coalition

A national organization providing education, resources, and leadership on Harm Reduction and drug policy reform.

Holler Health Justice

A BIPOC- & queer-led racial, economic & reproductive justice nonprofit collective in Appalachia. www.hollerhealthjustice.org

Kentucky Harm Reduction Coalition

//kyhrc.org/



Tennessee Department of Mental Health and Substance Abuse Services Regional Overdose Prevention Specialists

The Regional Overdose
Prevention Specialists (ROPS)
are local points of contact for
the Tennessee Department of
Mental Health and Substance
Abuse Services' efforts to reduce
overdose deaths by providing
education and training on
overdoses, including use of nasal

www.tn.gov/behavioral-health/ substance-abuseservices/ prevention/rops.htmlT

Choice Health Network

Medical clinics in eastern
Tennessee that provide harm
reduction services, medical care,
mental health counseling, food
and transportation support.
//choicehealthnetwork.org/

Appalachia Substance Abuse Coalition

The vision of the coalition is to have safe, healthy, and prosperous communities with effective prevention, treatment, recovery, and support resources. It is a consortium of ten substance abuse coalitions throughout the Southwest region representing the counties of Bland, Carroll, Grayson, Lee, Russell, Scott, Smith, Tazewell, Washington, Wise, Wythe and the cities of Bristol, Galax, Norton and Wise.

//stopsubstanceabuse.com/
regional-coalitions/

National Institute of Drug Abuse

Provides information on effective treatment for people who would like to stop taking drugs. www.drugabuse.gov/publications/effective-treatments-opioid-addiction