

Improving Health Outcomes through Harm Reduction Strategies in Red Lake

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Disclosures

- I have no conflict of interest to disclose.

Objectives

- Describe the harm reduction program in Red Lake and the planning strategies used for development

Where we Started

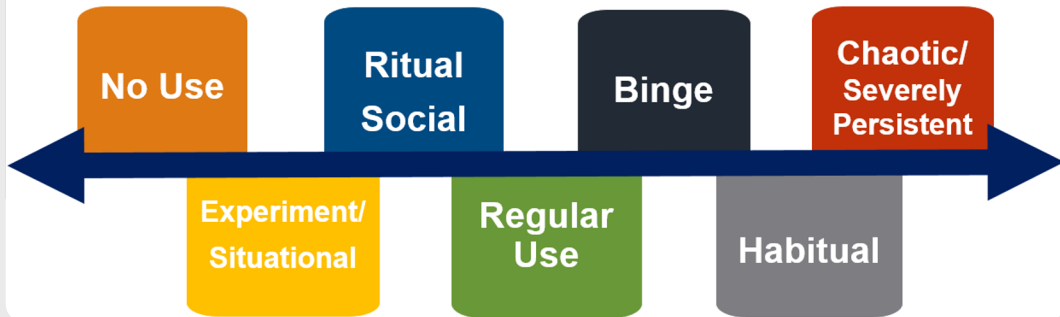
Community needs assessment

- Were programs in place to support people throughout Continuum of Drug Use?
 - Complete assessment of potential gaps included collaborative discussion.

Stakeholder Assessment:

- Who would support harm reduction strategies within the community?
 - Substance users, family members, healthcare providers
- Who **NEEDED to be on board** to develop a sustainable program?
 - Tribal administration, law enforcement, community members, hospital administration (if supported by IHS staff)
 - Tribal Code in tribal areas
 - Support from all of the above received in Red Lake

Continuum of Drug Use



Where we
Started

Assessing Readiness for Change

- Reinforcement vs. Enforcement
 - Increased messaging on **reinforcement of positive behaviors instead of enforcement of abstinence**
- Consideration of current community approaches and opportunities for collaboration
 - Identified reasons to make this form of public health outreach apply to everyone needed for program success and sustainability

**Use education and empathy to
change the community narrative!**

Education for Everyone

- Provision of outreach activities for staff, healthcare providers, law enforcement, and the community on:
 - **Soft skills**
 - To meet people where they're at
 - These skills VITAL for program staff
 - **Safe Injection Practices**
 - **Vein care**
 - Where to inject
 - Rotate sites
 - Move downstream
 - **Hierarchy of water supply**
 - **Clean needle every time**
 - **Healthy Behavior Promotion**
 - Through motivation interviewing and Screening, Brief Intervention, Referral to Treatment (SBIRT)
 - **Care Coordination**
 - Identify resources for additional services (i.e. mental wellness, housing, suicide prevention, etc.) and ensure everyone involved is aware of referral mechanisms



Putting it Together...

ASSEMBLE A TEAM

- Identified those with the time, resources, and community connection needed to reach those in need
- In Red Lake this includes:
Comprehensive Health Nursing, Outpatient Nursing, Pharmacy, and Lab

DEVELOP A PROGRAM

- Created comprehensive policies/procedures and identify staff training topics
- Secured space for services with funding identified for all program components
 - Grants vs Federal
- Tribal support used to purchase some materials at low cost, federal funds for others

COLLABORATE

- **Internal**
 - Resources within
- **External**
 - Tribal collaboration for program development, staffing, funding
 - State supported trainings, product recommendations,
 - Midwest AIDS Teaching and Education Center (MATEC) and MN Dept of Health great resources in Red Lake

DESIGN A SPACE

- Muted, calming colors with soft music
- Family friendly— areas for coloring, reading, remembering those lost to overdose
- Created clear representation of 'rules' for staff and participants posted
- Identified space that is easily accessible within community

Our Challenges

- **Education**
 - Stakeholder understanding of program benefits is vital
- **Staffing**
 - Who will support the program?
 - Tribal vs federal employees
 - How many people will you need?
- **Comprehensive Services in the Field**
 - CLIA waiver needed for POC HIV/HCV testing
 - Train the trainer naloxone program required for staff to dispense to participants
- **Advertising**
 - Flyers posted in community being taken down
- **Funding**
 - How do you pay for supplies (and what are they)?

When everything
aligns...



The Doors Open!



Users of SSPs were **three times more likely** to stop injecting drugs.



Preliminary Success Story



*Helping promote
safe syringe use and disposal
to reduce the spread of
Hepatitis C and HIV.*

For more information call (218)679-2825.

999

Participant ID

Our success comes
through this mantra..



Questions?



Thank you!