National Office Hours: Harm Reduction Outreach, COVID-19 and People Who Use Drugs

Harm Reduction Coalition
May 6th, 2020
Harm Reduction Coalition

Policy & Advocacy

Trainings & Technical Assistance

Overdose Prevention

National & Regional Conferences

Resources & Publications
Today’s Panelists

Hill Brown  
*Steady Collective*

Ale del Pinal  
*Punks with Lunch*

Paula Santiago  
*VOCAL-NY*

Jose Martinez:  
Harm Reduction Coalition, NEXTDistro

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Meeting Topic: Success Onboarding Team's Personal Meeting
Host Name: Success Onboarding Team
Invitation URL: https://zoom.us/j/7228544372
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Participant ID: 52

Join Audio
Computer Audio Connected

Share Screen

From Amazing host to Everyone:
Thanks for joining today. Please feel free to use the chat panel to communicate.

Options:
- Everyone
- Amazing host (host)

To: Everyone
Type message here...
Housekeeping

- This webinar is being recorded
- The recording and notes will be shared afterwards
- You will receive a confirmation email (tomorrow or the following day) that you attended this webinar
  - There are no certificates
- Just a reminder, any “private messages” will be visible in the transcript later
- We will not have all the answers
  - We will follow-up afterwards if we get them
Outreach related Resources

- HRC’s Previous and upcoming Office Hours: https://harmreduction.org/blog/covid-19-virtual-office-hours/
  - Sex Work and COVID-19
  - POC Community Care
- National Alliance to End Homeless also has COVID specific resources for outreach: endhomeless.org
OUTREACH DURING COVID
SUPPLIES FOR A STAYING SAFER WHILE PROVIDING STREET-BASED OUTREACH

GLOVES

COVID can live on surfaces such as gloves for a prolonged period of time. When on outreach, try to bring multiple pairs of gloves in case of wear and tear. Be mindful not to touch your face (especially your mouth, eyes and nose) while wearing the gloves. When removing gloves make sure not to touch your skin.

Here is a video demonstrating how to remove your gloves:
- Remove the first glove by pinching the palm section with your other hand, and pulling it off.
- Roll that glove up in the hand with the glove still on.
- Then, slide the fingers of the gloveless hand under the glove in order to pull your covered hand out of the glove.
- Both of your gloves should be balled into one.
- Be sure to throw your gloves away in a garbage can and wash your hands with soap and water.

HAND WASHING

Wash your hands as often as possible, especially between interactions where you're exchanging supplies or having other kinds of physical contact. Soap and water are especially helpful because they create a layer that helps to keep germs from staying on your skin. While you're on outreach and for folks who do not have access to soap and water, hand sanitizer is a good substitute. Alcohol based sanitizer is recommended.

Like soap, hand sanitizer is not always available to us. For these situations alcohol pads are a good option. Try to use one pad per hand, and dispose of them after each use.

FACE MASKS

Since face masks are being reserved for medical professionals working with COVID patients, face masks are very limited. Other options for protecting yourself are using homemade masks, or covering your face with something such as a scarf or bandana. Although face masks don't provide 100% protection against COVID, it reduces risk.

OUTREACH DURING COVID
TIPS FOR YOUR OUTREACH METHOD

STANDING SITE

Do your best to maintain six feet between any staff or participants. If you have a table, consider pre-packaging your materials and placing them on the table. This can help to prevent long wait times, and reduces touching the materials. Staff/volunteers can stand 6 feet from the table and one participant at a time can approach and take their supplies.

Minor steps such as these can be taken to have a safer experience. If a van is an option, service and outreach can be done from the vehicle.

PDSE

If possible, avoid groups of people and try to speak with people one-on-one. If that is not possible, try to maintain a 6ft distance and limit transactions (give everyone their supplies at one time). If you are completing paperwork, complete it after you are finished with the transaction and more than 6 ft away.

Be sure to wash hands, sanitize or alcohol swab hands after every transaction/contact.

WASTE PICK-UP

Be sure to always have gloves on, and also be sure to check regularly for tears in gloves. Maintain distance from crowds and avoid physical contact with other people, including co-workers. DO NOT touch anything with your bare hands. Be sure to wash hands thoroughly after handling Haz-Mat Equipment.
COVID-19 and Harms to People Who Use Drugs

- War on Drugs policies fueled by racism, xenophobia
- Many ppl have chronic medical conditions unaddressed that are risk factors for COVID
- Stigma, distrust, fear and alienation from healthcare system
- Criminalization of people who use drugs and/or live in poverty
- Housing insecurity/homelessness (sleep, nutrition)
- Lack of means to enact COVID-19 prevention measures
- Living in everyday state of emergency and structural violence
What’s changed in recent weeks?

- The CDC is now recommending that we all wear masks when leaving our homes
  - Cloth masks are fine for lay people -- please leave N-95 respirators and surgical for frontline medical workers (including harm reduction staff!) who need them.

- COVID-19 is disproportionately impacting Black and Brown communities
  - About 33% of people hospitalized in the U.S. are Black according to NPR
  - This number may be higher in actuality, as many states are not releasing data that includes racial breakdowns
In the Chat Box: Community Share

- How has your agency/program/community adapted during this time?

These responses will be shared with the group at the end on a later slide.
Notes from the field:

Hill Brown
*Steady Collective*

Ale del Pinal
*Punks with Lunch*

Jose Martinez
*Harm Reduction Coalition, NextDistro*

Paula Santiago
*VOCAL-NY*
Bringing HR practices to other communities - Like when working with the homeless

Sending small team mobile units to remote location, with buffet style distribution.

Crowdsourcing for outreach supplies and doing car outreach

We are trying to plan for what a secondary spike in cases might mean for our participants.

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Looking into plexiglass barriers to resume testing

Meeting participants in fixed locations at fixed times with no contact pick up of prepacked supplies

Mobile street based distribution and exchange; now 4 days a week instead of 7

Drive by intercom messages methods to spread the word in the community

Providing COVID 19 safe kits by preparing kits on a clean surface, wearing gloves and placing kits in sealed zip lock gallon storage bags to lessen contact while doing outreach. However, we are unfunded so deliveries are at cost.

Providing Health Home Services remotely as well

Telehealth options and delivery options; Zoom Facebook/IG

Limiting hours and educating staff on PPE

Using Social Media and pop ups

Donating masks to participants

Mailing and dropping off naloxone upon request supply emergency shelters with naloxone and training, and making sure peer naloxone distributors are stocked up and aware of safe guidelines

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peer interns paid but making engagement and wellness calls

HIV testing is conducted using an oral swab instead of a blood sample (INSTI), and individuals swab themselves.

we're mailing out naloxone kits and creating pick up spots instead of handing them out

We are operating our needle exchange from our mobile van in our office parking lot utilizing all social distancing protocols.

Use extra table for social distancing, distribute bandanas for participants to use as masks

More Outreach! Focus on building community

Sending small team mobile units to remote location, with buffet style distribution.

we're working on legislative changes with the DOH to be able to widely mail syringes and works.
Q&A

● What are questions you have for the panelists and other webinar attendees?
QUESTIONS?

Send us Resources for a COVID SSP support Document!!

COVID19@
HARMREDUCTION.ORG