



Promoting Public Health Through Harm Reduction

*A compassionate approach to prevent
overdose and equip communities to confront
the opioid crisis*

Annual League of Municipalities Conference

Atlantic City, New Jersey

November 16, 2021



Objectives

- 1) *Identify components statewide strategy to end the opioid epidemic*
- 2) *Define harm reduction*
- 3) *Build knowledge of effectiveness of syringe access programs*
- 4) *Equip leaders to expand access to harm reduction in their communities*





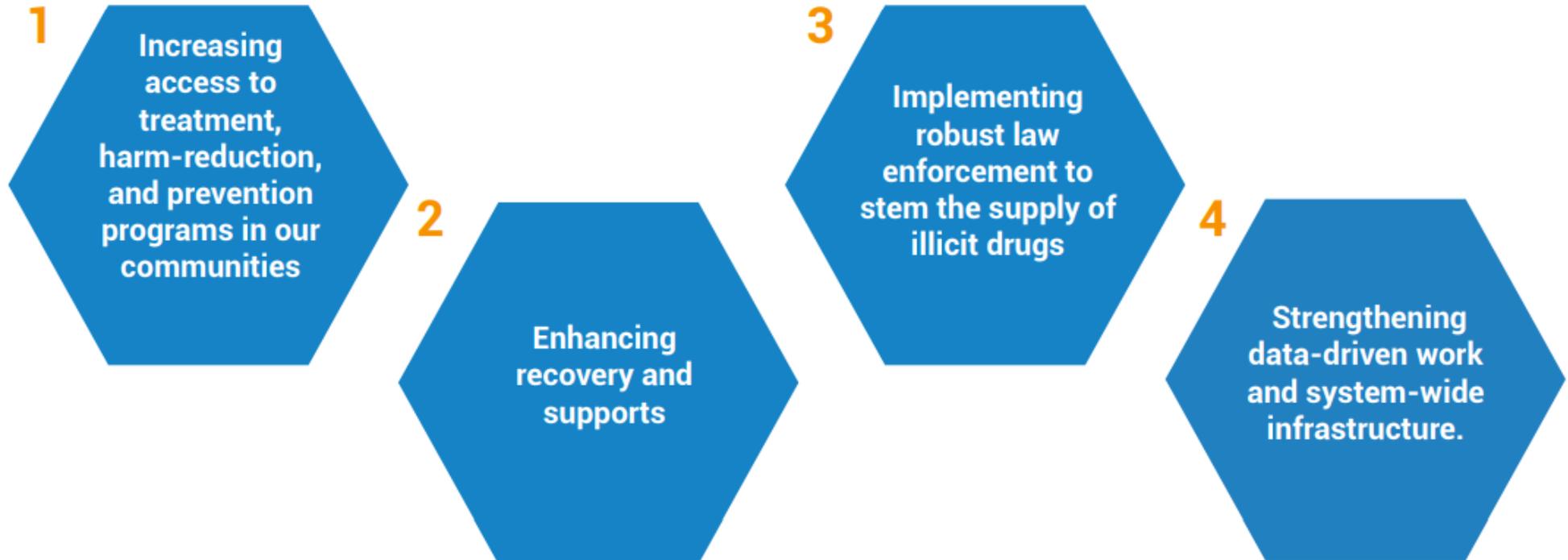
Driving Principles of Statewide Strategic Opioid Response

- 1) Compassion*
- 2) Public health*
- 3) Data- and evidence-based*



Key Strategies

The Murphy Administration is focusing on four key strategies to address the overdose epidemic:





Impact of Opioid Crisis in New Jersey

Suspected Drug-Related Deaths

2018: 3,101 New Jerseyans

2019: 2,995 New Jerseyans

2020: 3,051 New Jerseyans

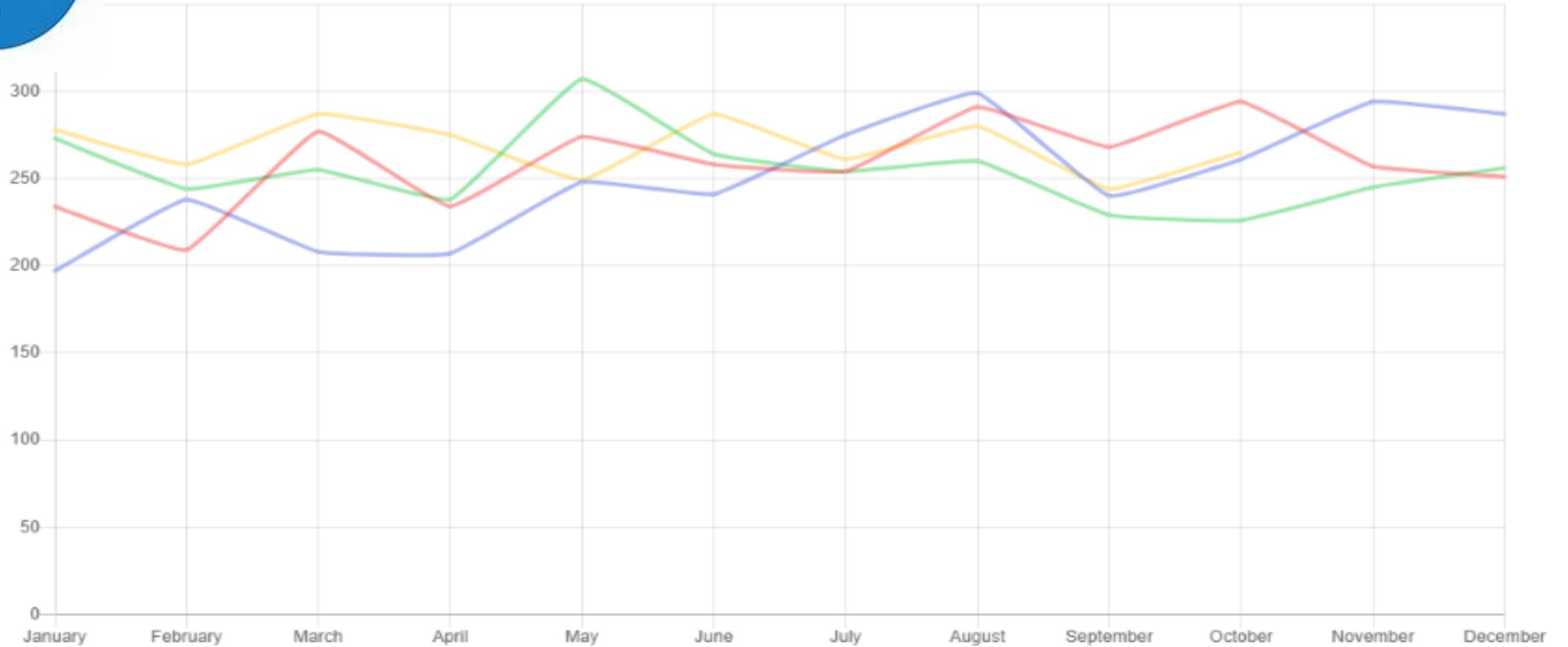
2021: 2,739 New Jerseyans



COVID-19 and the Overdose Epidemic

Annual Suspected Drug Deaths by Month

2018 2019 2020 2021



2018 Total: 3101

2019 Total: 2995

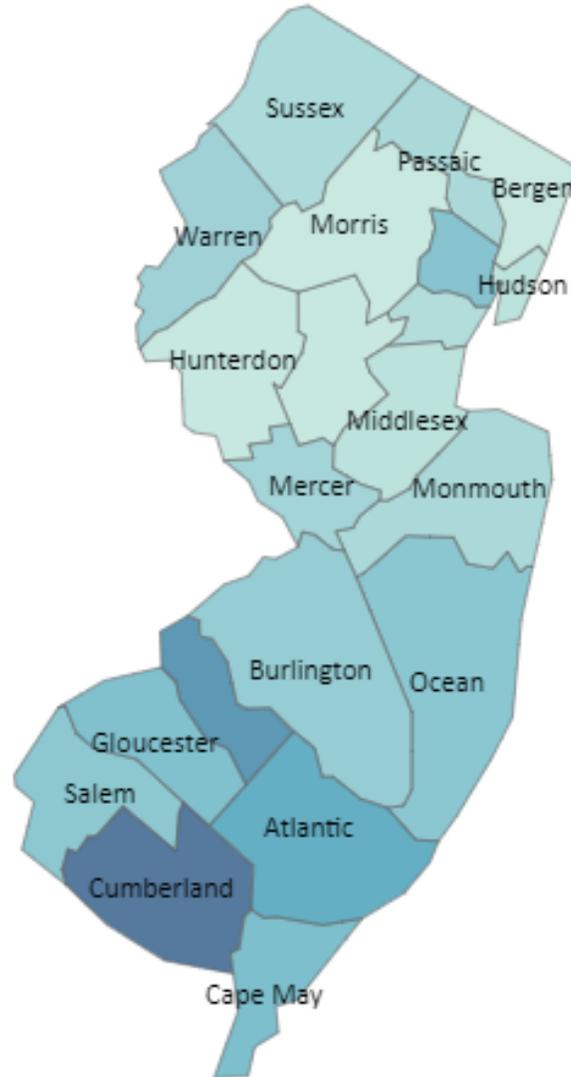
2020 Total: 3051

2021 Total: 2739



Impact of Opioid Crisis in New Jersey 2019

Age-Adjusted County Rate per 100,000 Residents



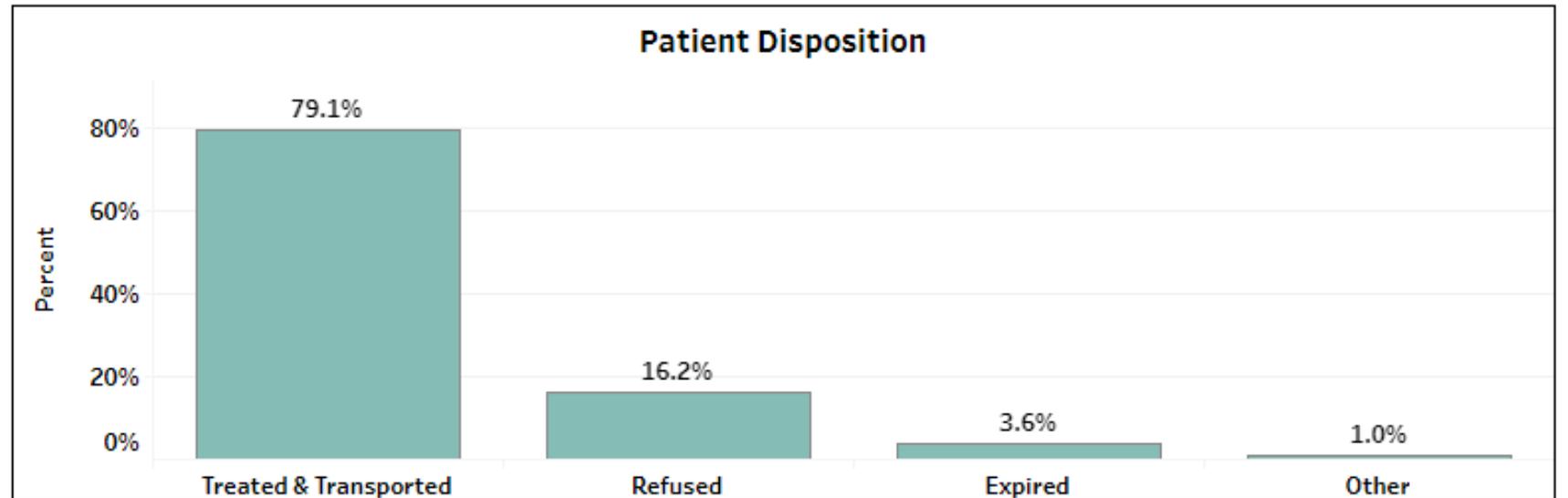
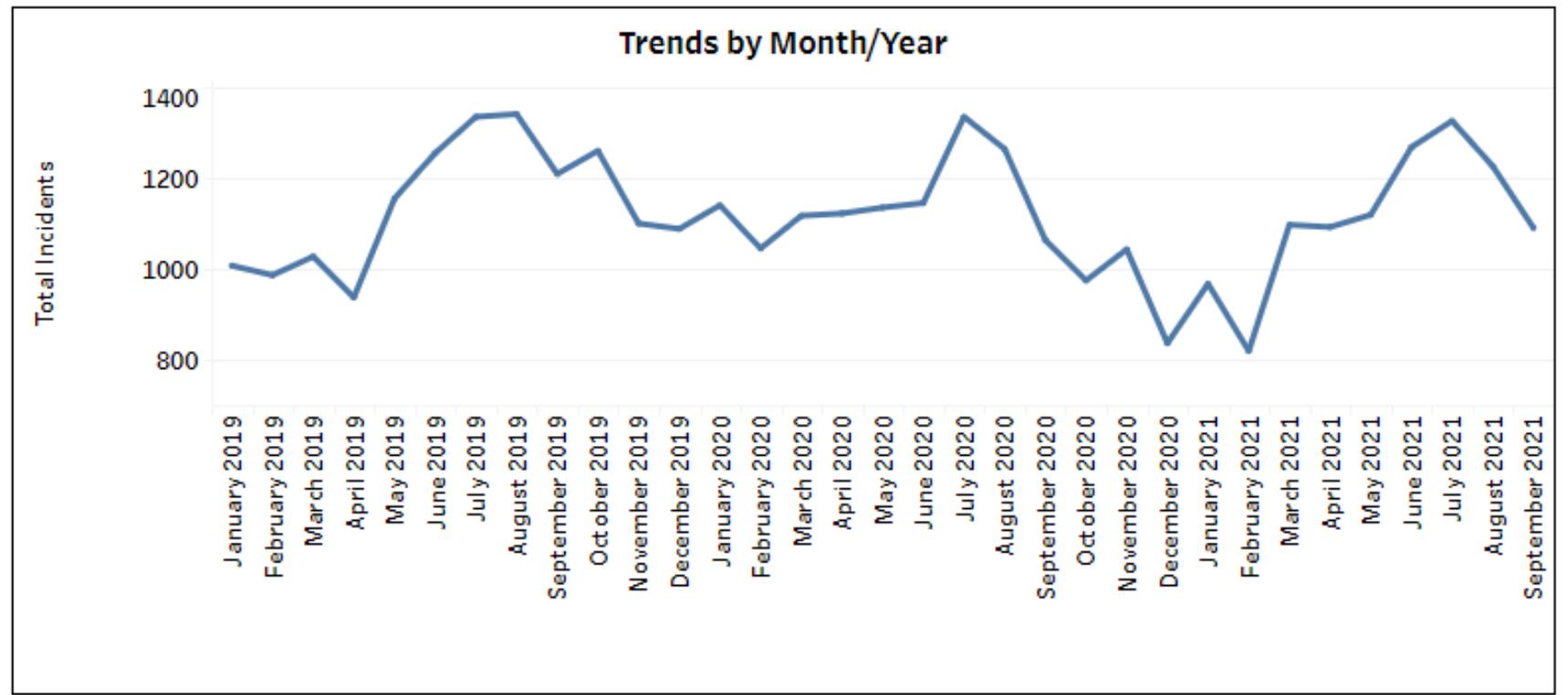
Statewide Rate by Age Groups: Any drug

Age Group: 25-34 4,779 diagnoses 416.1 per 100,000 Residents	Age Group: 35-44 3,488 diagnoses 304.9 per 100,000 Residents	Age Group: 45-54 3,515 diagnoses 292.9 per 100,000 Residents
Age Group: 15-24 3,170 diagnoses 290.5 per 100,000 Residents	Age Group: 85 and Over 344 diagnoses 177.3 per 100,000 Residents	Age Group: 65-74 1,178 diagnoses 140.7 per 100,000 Residents
Age Group: 55-64 2,987 diagnoses 244.1 per 100,000 Residents	Age Group: 75-84 624 diagnoses 140.5 per 100,000 Residents	Age Group: Under 15



Naloxone Incidents

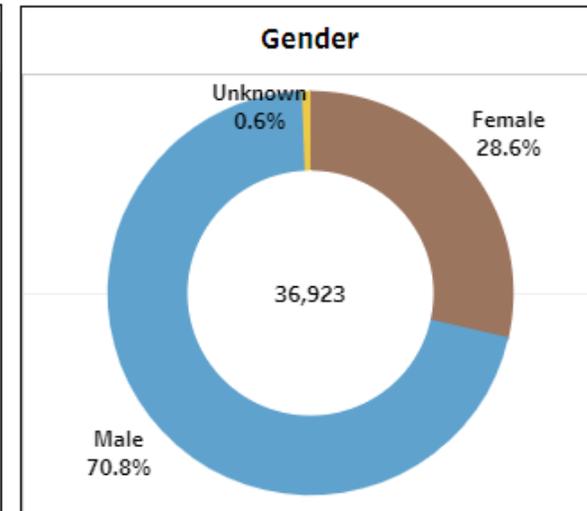
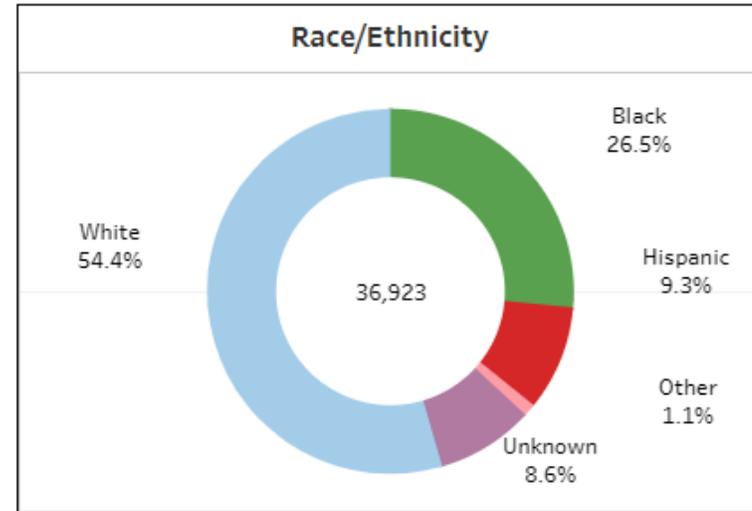
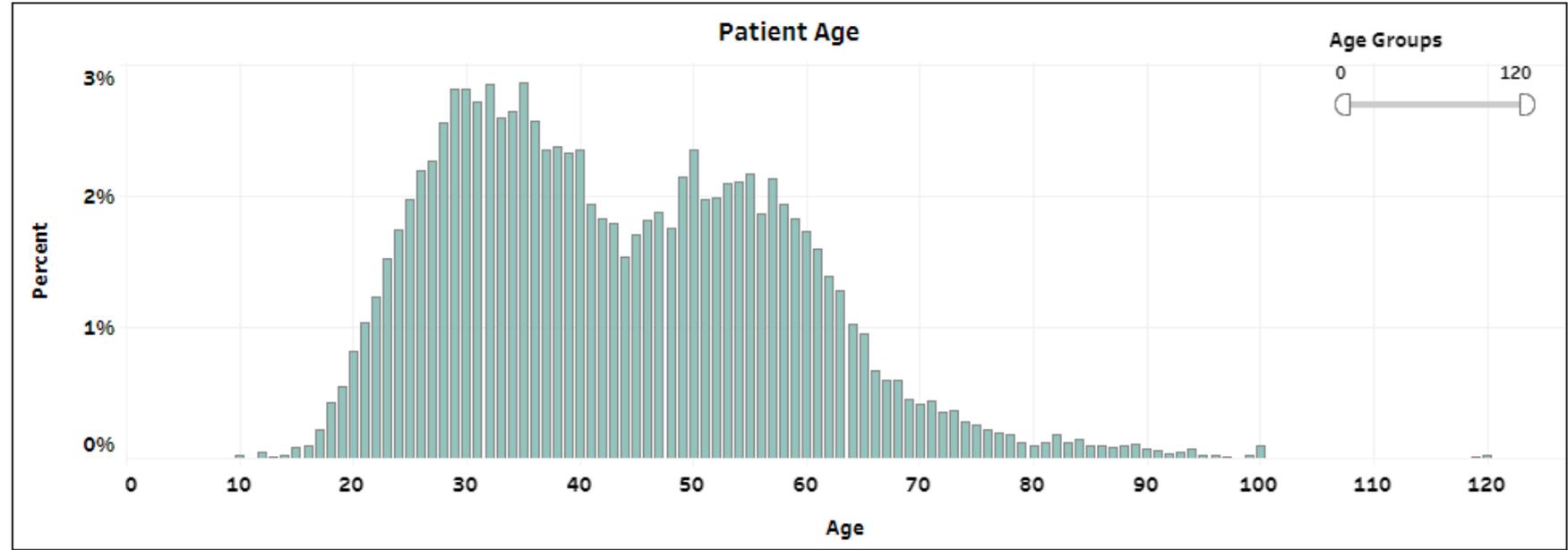
January 2019-
August 2021





Naloxone Incidents

January 2019-
August 2021

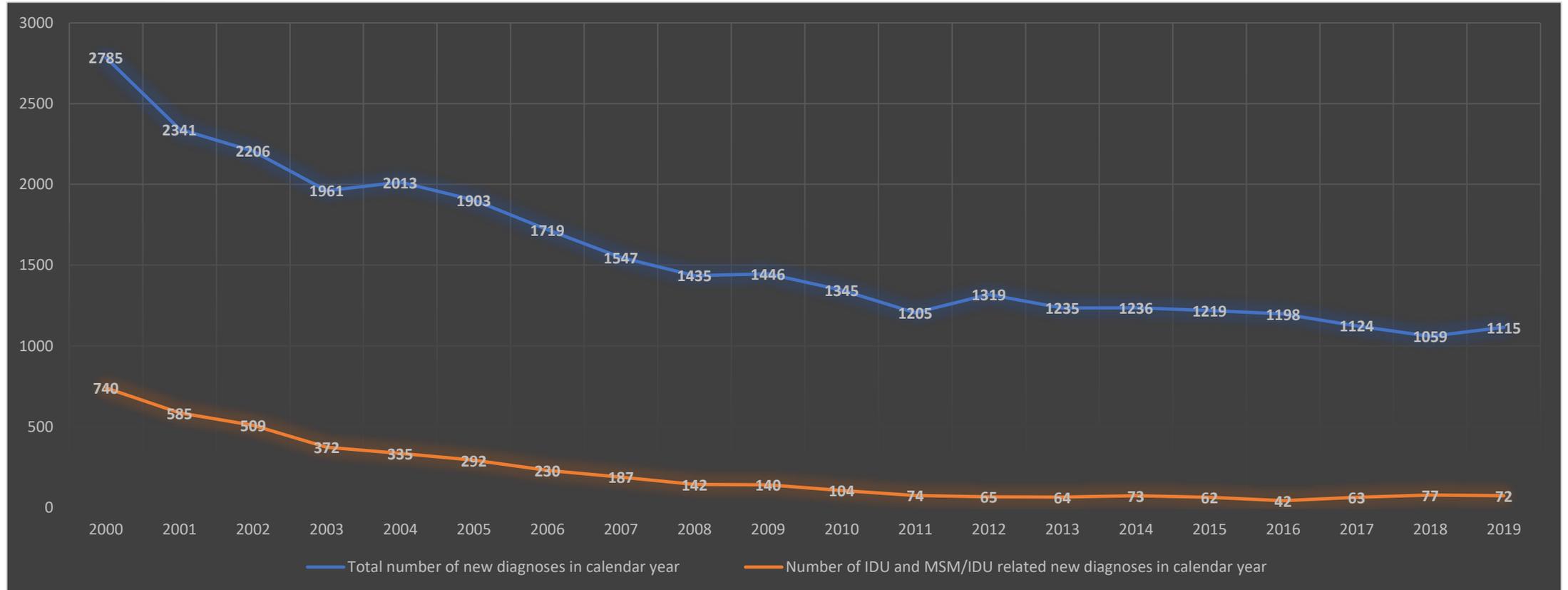


Average Age

43

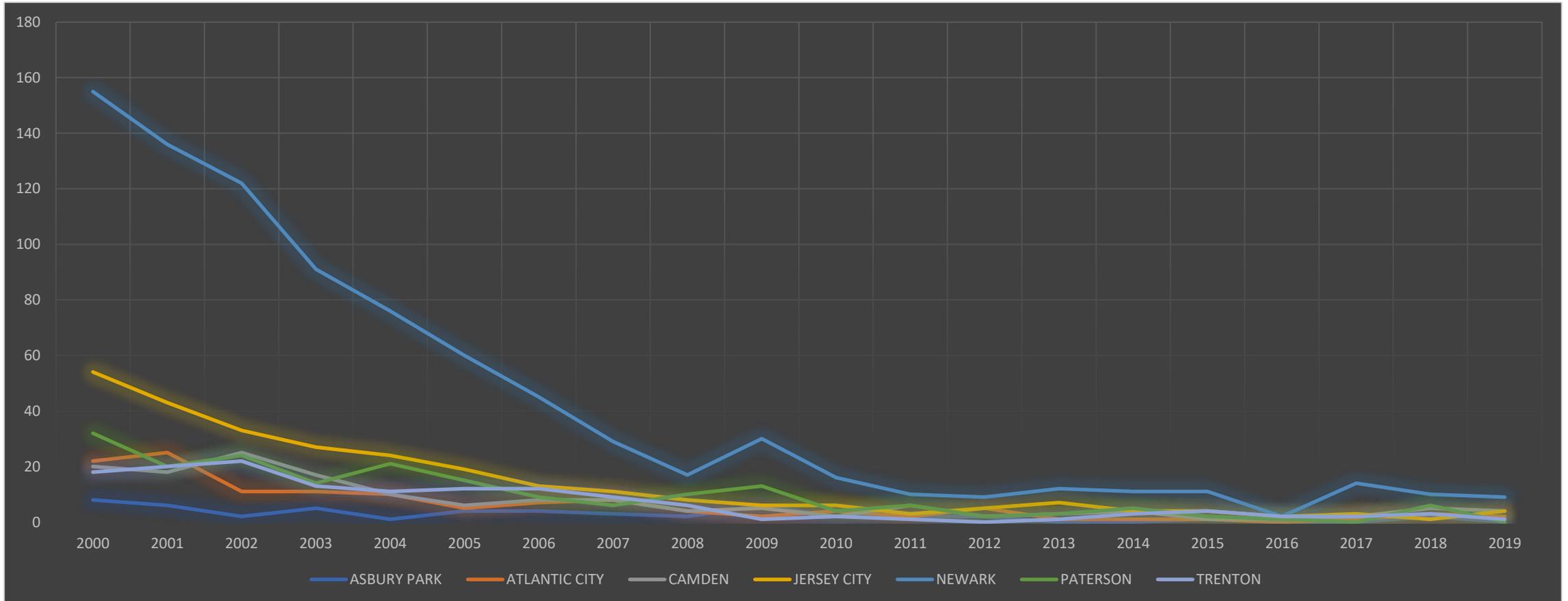


All and IDU-related new HIV/AIDS diagnoses in New Jersey 2000-2019





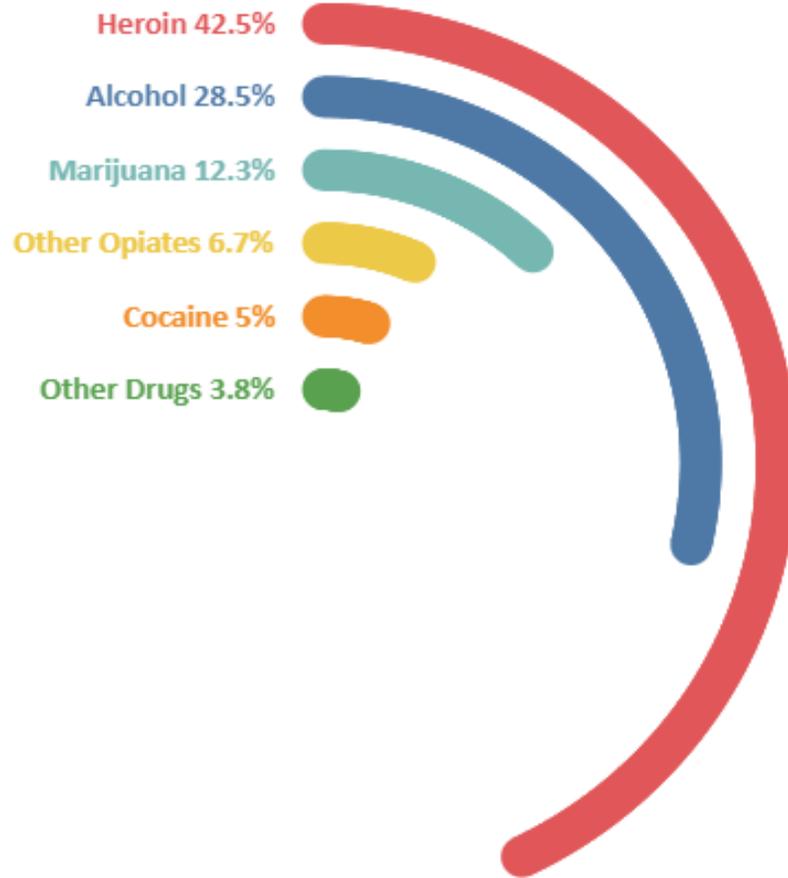
IDU-related Diagnoses in Harm Reduction New Jersey Cities 2000 - 2019



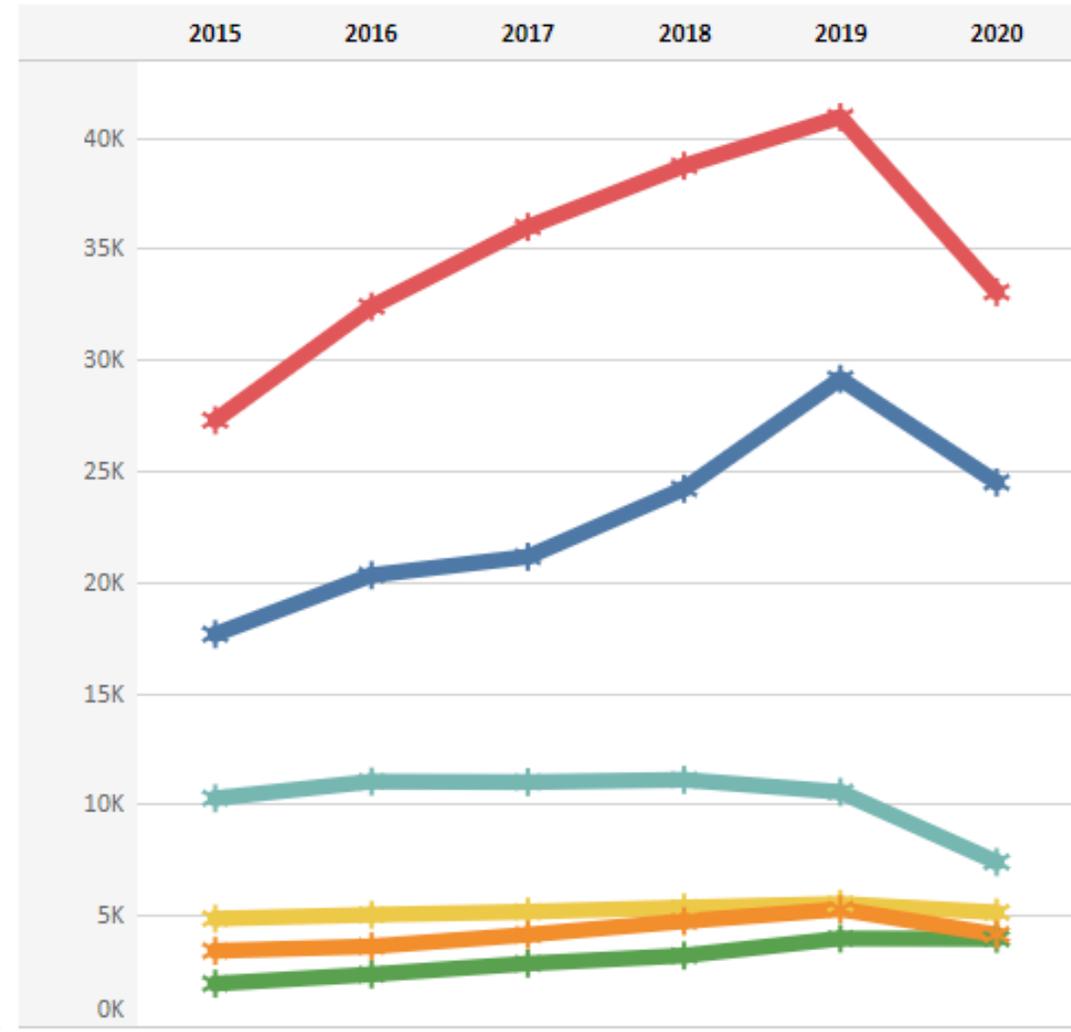


Treatment Trends

6-year Average Percentage by Drug Type



Number of Substance Use Admissions





Expanding Access to Treatment

- 1) Low Threshold Buprenorphine at Harm Reduction Centers
 - *pilots started in Atlantic City and Asbury Park*
 - *same-day treatment entry*
 - *medication is provided regardless of insurance or income*
 - *remove traditional barriers, such as abstinence or ongoing counseling*
 - *expanding to additional 5 HRCs*
- 2) Open Access/Extended Hour Opioid Treatment Program
- 3) Paramedicine Low Threshold Initiative
- 4) Expand Mobile Medication Unit Access



Naloxone Distribution

- 1) Recent standing orders allowing pharmacists to dispense naloxone
- 2) Medicaid and state-regulated health insurers required to cover naloxone without prior authorization

3) Free naloxone distribution and trainings to:

- First responders (police, fire, EMS)
- Pharmacies
- Homeless shelters, libraries
- Re-entry organizations

NJ DHS has distributed over 160,000 free naloxone kits



Medication Assisted Treatment (MAT) Media Campaign





What is Harm Reduction?

- Harm reduction refers to policies, programs, and practices that aim to reduce the harms associated with the use of drugs.
- Harm reduction interventions focus on **the prevention of harm**, rather than on the prevention of drug use itself, and the focus on people who continue to use drugs.
- Research shows that **nine out of ten** New Jerseyans living with a substance use disorder (SUD) are not interested in treatment at any given time and, for those who are, **return to use** is an expected symptom of an SUD.



Effectiveness of Harm Reduction Interventions

Syringe access is essential health care service for people living with a substance use disorder. According to the federal Centers for Disease Control and Prevention (CDC), people with access to a syringe access program are:

- **Less likely** to die from an opioid-related overdose
- **Five times** more likely to stop substance use that causes them problems
- **Three times** more likely to stop substance use altogether
- **50 percent less** likely to acquire HIV or Hepatitis C



Services Provided at Harm Reduction Centers

- HIV, STD, and viral hepatitis testing and counseling with linkage to treatment
- Condom distribution
- Referral and linkage to medical care, mental health and social services, including drug treatment
- Overdose prevention education and access to naloxone and fentanyl test strips
- Innovative service provision-low threshold treatment
- Education on safe disposal of injection equipment
- Safe injection education and wound care
- ARCH nurses
- Access to showers, laundry, kitchen



HRCs are safe, non-stigmatizing spaces for people who use drugs (PWUD) to access sterile syringes and injection supplies, and to dispose of used syringes.



The CDC and WHO recommend HRCs as a critical strategy to prevent HIV, Hepatitis C, and overdoses among PWUD.



HRC staff offer services in a person-centered, trauma-informed manner and build relationships and trust with PWUD.



Trust and relationships =

- ❑ higher likelihood of service utilization
- ❑ decreased risk of CD spread and overdose
- ❑ higher likelihood of survival and entry into treatment

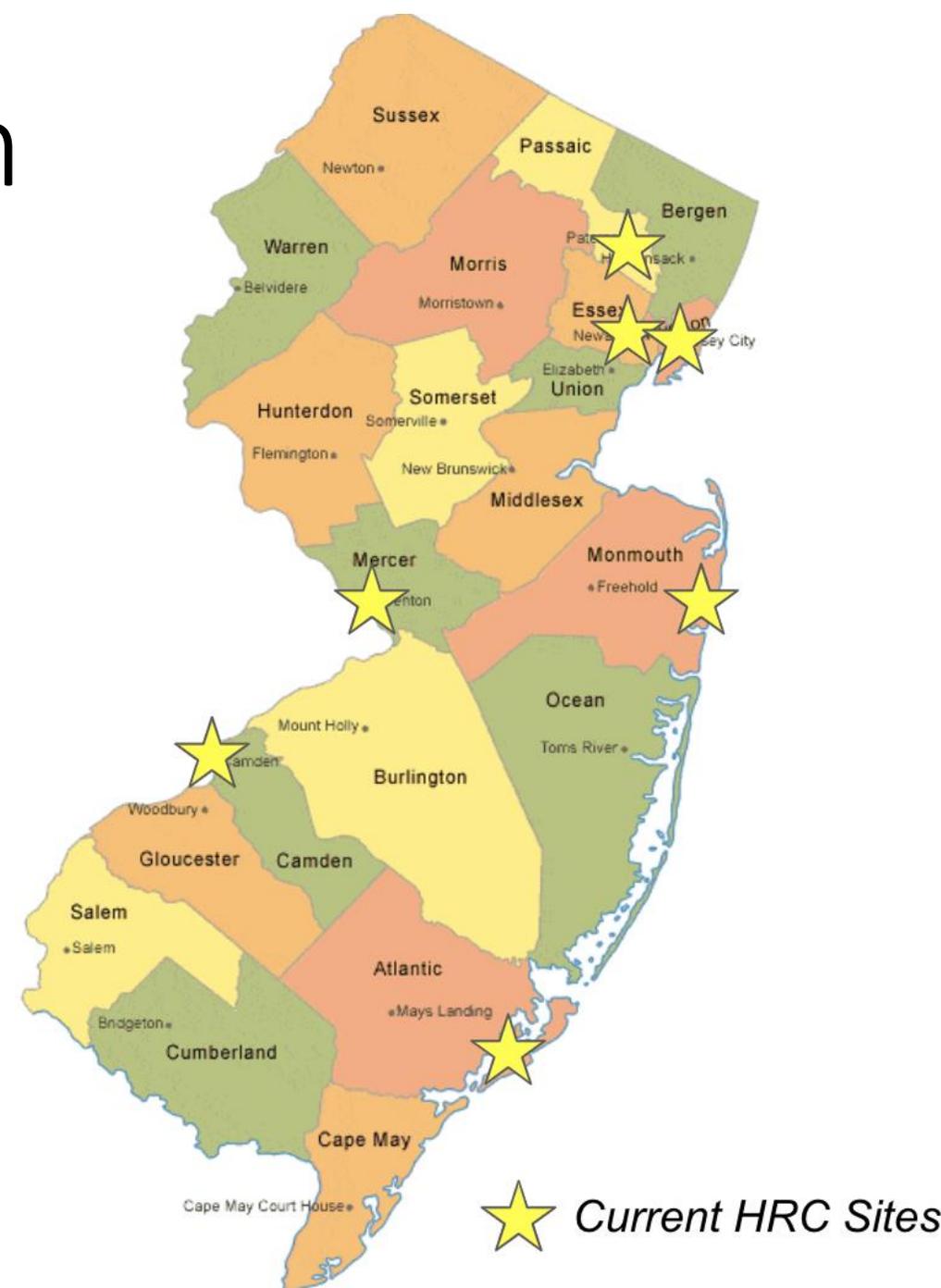


Access to Harm Reduction

- Camden Area Health Education Center, Camden
- Hyacinth AIDS Foundation, Jersey City*
- Hyacinth AIDS Foundation, Paterson
- Hyacinth AIDS Foundation, Trenton
- North Jersey Community Research Initiative, Newark*
- South Jersey AIDS Alliance, Atlantic City*
- Visiting Nurse Association of Central Jersey, Asbury Park



**Sites with Drop-In Centers*





Call to Action:

Bring harm reduction access to

your community