

How to Integrate Harm Reduction into Your Work*

	Strategy	Skill
Ask Open-Ended Questions	Open ended questions make conversations on a variety of issues easier. Open-ended questions also invites participants to choose the information they want to share.	Use open-ended questions in counseling and group settings to create conversation with program participants. Practice developing open-ended questions on a variety of topics.
Make Brochures & Posters Available	Posters and brochures set the stage for discussion and make a statement to program participants that “its OK to talk about drug use, HIV, STD’s, mental illness, hepatitis, sex work, harm reduction, etc.”	Use posters and brochures in counseling and inn group rooms. Let the walls “talk.” Hang posters that echo your messages. Use brochures in the office that will help break the ice on uncomfortable topics.
Make Condoms Available	Make male and female condoms available to program participants by leaving them in a basket in the lobby, reception area, or bathroom while incorporating discussion about using them in group and individual meetings. Discussing, seeing, and handling condoms will help diminish stereotypes and myths about using condoms.	Teach and demonstrate program participants how to use condoms correctly. Make and distribute “care packages” for participants when they leave a program (include condoms, directions, referrals).
Deliver Education	Providing information on drugs and alcohol helps participants better understand the benefits and risks of using. Participants can make better decisions around reducing harm when they are informed.	Use activities in counseling and in group sessions to help participants learn information and develop prevention skills. Keep in mind that people learn in different ways.
Offer Incentives	Offering incentives acknowledges the hard work associated with making behavior change.	Provide incentives in counseling and in groups. Coffee, juice, snacks, stipends, coupons, clothing, bus passes, books, meals, food, can all be effective incentives.
Use Motivational Interviewing Techniques	Integrate motivational interviewing techniques to provide counselors a variety of strategies to understand and support behavior change.	Learn more about motivational interviewing and how it can be used in counseling and group sessions. Apply motivational interviewing techniques, “DEARS”: Develop Discrepancy, Express Empathy, Avoid Argumentation, Roll with Resistance, Support Self-Efficacy.
Be Non-Judgmental	Being judgmental can stifle program participants. Conversations about drug use and related behaviors can challenge provider beliefs. Being non-judgmental allows participants to be open and honest about their behaviors.	It’s very important that providers put their beliefs aside in counseling and group sessions. It is critical to learn and distinguish one’s personal beliefs and values from client-centered support.
Create Options, Have Choices	Options allow participants to choose strategies that work best for them. It’s important to remember that the “cookie cutter” approach doesn’t work for everyone.	Develop and provide a menu of options for participants, remembering to solicit their input. Brainstorm options to engage the participant in treatment. Utilize the “ABCDE” model: Assess the Situation, Brainstorm Options, Consider Options, Decide on a Course of Action, Evaluate the Outcomes.

*SPHERE – The Statewide Partnership for HIV Education in Recovery Environments. A program of Health Care of Southeastern Massachusetts, Inc.
www.hcsm.org/sphere.htm

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Make Supportive Policies	Create “participant-friendly” policies. Program policies, procedures, and logistics can be assessed to determine if they enhance or diminish the convenience of our services. How does our program create barriers for participants? How can we welcome them? Whosoever...	Changing the hours of operation to a more non-traditional schedule, or the location of services, can increase access for potential participants. Designate walk-in hours and services to ensure access for people without appointments. “No wrong door...”
Make Active Referrals	Providers cannot be everything for everyone, nor can an agency provide all the services needed by participants. Knowledge of local resources enhances your ability to make meaningful referrals.	Help participants with the referral process. Act as a consultant: making the call, exploring barriers to follow-through, follow-up on appointments, ask how it went and if anything else needed. Don’t just hand out a phone number.
Use Self-Assessments	Create opportunities for participants to assess their risk/harms and the extent to which these are a problem in their lives. Inviting self-assessment and incorporating their results and discussions into a plan of action, demonstrates trust in the participants while supporting self-efficacy. It helps develop realistic, individualized plans.	Use participant self-assessment of their risks/harms to make a plan. Self-assessment responses can also be used to evaluate success and progress over time in making a change.
Use Stages of Change Model	Using the transtheoretical model of change allows participants to identify behaviors they want to change and understand what they may need to make the change. It provides a way for participants to measure and celebrate change as they move from stage to stage. It offers providers a way to identify strategies for particular stages to help support participants.	Provide support through each stage. Understand that stage is a slow, non-linear process. Celebrate small, incremental changes... <i>Any Positive Change</i> . Success builds success and becomes a building block for other efforts. Success can be defined in many ways.
Work Where Clients Are At or Be Client-Centered	One of the key components of harm reduction is focusing on the present needs of participants. Trusting participants and believing they are the experts of their lives helps providers maintain a client-centered approach.	Ask participants to describe their immediate needs, which may or may not be related to drug use. Use a timeline that works for the participant. Starting the conversation and offering your support where the participant is builds your relationship and trust. Individualized treatments plans are essential.