

Harm Reduction Learning Resources

The following is a list of core resources that help educate about harm reduction and we suggest reviewing. Many of the resources such as the webpages have links to other resources, which you are welcome to explore. The resources are split into 6 sections: the history of the war on drugs, opioids, harm reduction principles, medications for opioid use disorder, naloxone, and anti-stigmatizing language. Each resource has a learning goal associated with it that you should feel you have accomplished after reviewing that resource. In addition, each section has a list of questions that you may answer after reviewing the resources. The answers are listed in the key at the bottom of the document. While the goal is to review all the listed resources, this is not an exhaustive list and can also serve as a starting point as you continue to learn and explore other topics and resources.

Topic and Source	Resource Links	Learning Goal	Review Questions
History of the War on Drugs			
Source: Drug Policy Alliance	What is the Drug War?	Understand the origins of the War on Drugs in the US, and impact on Black and brown communities today	(1) True or false: The prison population increased by 100% due to the War on Drugs. (2) True or false: The War on Drugs helped to reduce drug use in the US
Opioids			
Source: CDC	CDC Opioid Basics (Webpage) *Review each tab on the left sidebar under Opioid Basics	Learn basic terminology of opioids, including their use and purpose	(3) List two common street names for opioids that you were familiar with previously, and two that were new to you.
Source: National Institute of Health (NIH)	Opioid Names List (Webpage)	Learn various names for opioids	
Source: National Harm Reduction Coalition (NHRC)	Fentanyl Fact Sheet (Webpage)	Learn more about fentanyl and how it affected the drug supply	(4) Is the following statement true or false? Fentanyl is at least 50 times stronger than heroin and 80-100 times stronger than morphine. (5) In your own words, describe the importance of using appropriate and meaningful language to communities, when discussing opioids.
Source: SHOOTERS (media skills program for carceral impacted individuals)	Overdose Crisis in Black Communities (Video)	Learn how opioids are affecting Black communities (Philadelphia)	
Harm Reduction Principles			
Source: NHRC	Foundations of Harm Reduction (PDF)	Learn the basic principles of harm reduction	(6) True or false: Harm reduction is all about

Source: Vital Strategies	Harm Reduction Strategies (Webpage)	Learn about what harm reduction is and what can be done	meeting people “where they are” but not leaving them there.
Source: Jefferson Health/Vital Strategies	Fentanyl Test Strips (Video)	Learn about how fentanyl test strips can be used	(7) Fill in the blank: Understanding ____, ____, and ____ can give clinicians, harm reductionists, outreach workers, and other service providers more tools to support risk and harm reduction for participants. (8) In your own words, why is it important to use fentanyl test strips (FTS) even if fentanyl is not your drug of choice?
Medication for Opioid Use Disorder (MOUD)			
Source: NHRC	MOUD Overview (Webpage)	Learn the basics of MOUD	(9) Name the three types of medications for Opioid Use Disorder (OUD). (10) Why is Naltrexone not recommended by the NHRC?
Source: NIH	Medications for Opioid Use Disorder (Video)	Learn about all the medications that can be used for opioid use disorder	
Naloxone/Narcan			
Source: NIH	Naloxone Overview (Webpage)	Learn about naloxone and its use	(11) True or false: Even if you’re not sure what drugs a person took, it is safe to administer Narcan.
Source: Wisconsin Department of Health Services (WI DHS)	Dose of Reality: Safer Use Wisconsin Department of Health Services (Video)	Training on how to use Narcan	
Anti-stigmatizing language			
Source: Shatterproof	Words Matter (Video)	Learn why the words we use surrounding substance use matter with examples	(12) Replace the following words with stigma-free, person-first language instead: (a) Addict (b) Drug abuser (c) Abuse
Source: NIH	Words to Avoid When Talking About Substance Use and Possible Replacements (Webpage/List)	Learn terms to avoid and potential replacements	

Review Questions Answer Key

1. False – the prison population increased by 900% due to the War on Drugs.
2. False – rates of drug use are about the same as when Nixon declared the Drug War in 1971.
3. Review [this list](#) to compare the names you came up with.
4. This statement is true. Fentanyl is much more potent than heroin, which is why taking the same dose of a drug laced with fentanyl can be lethal. Similarly, it is even stronger than morphine, which is often used to manage pain in medical settings.
5. Responses will vary, but potential responses may include:
 - a. Language matters – Black community members in Philadelphia use specific words to talk about opioids, but might not know that the drugs they are using are opioids, and therefore may be unaware of the risks. Examples of the words that are most common include: Percocet/percs and lean.
 - b. These drugs are common and normalized due to their mention in many rap/hip hop songs, which may also inaccurately depict the risks and impact of using percs/lean.
 - c. Community members may be embarrassed to share their struggles with substance use disorders.
 - d. “As a society we can’t start talking about solutions if we’re not using the same language”
6. True. Other principles include:
 - a. Incorporating a spectrum of strategies including safer techniques, managed use, and abstinence to promote the dignity and wellbeing of people who use drugs
 - b. A framework for understanding structural inequalities like poverty, racism, homophobia, classism, etc.
7. Risk; set; setting.
 - a. Risk = the risk itself (e.g. related to drug use or sex work) that you’re discussing
 - b. Set = the “mindset” that someone brings to the situation, including thoughts, mood and expectations
 - c. Setting = the physical and social environment of where the person is, and their perception of how that can promote/reduce risk
8. Responses may vary, but may include: Fentanyl is laced in almost all drugs, both in other opioids and in stimulants. For that reason, it is important for PWUD to carry FTS on hand to have a better idea of what they are using and to be able to implement safeguards if they decide to proceed with use after receiving a positive result on their FTS. Safeguards may include: using with a trusted friend, calling someone while using, using with someone who has Naloxone on hand, using less or more slowly, and others.
9. Methadone, buprenorphine, and naltrexone
10. Naltrexone has been shown to be less effective than buprenorphine and methadone, and has even been shown to *increase* overdose risk for people, particularly those leaving prisons/jails.
11. True. It is completely safe to administer Narcan even if someone did not take an opioid. However, if no opioid is present in the person’s system, the Narcan will not have an effect.
12. Instead of Addict → Person with substance use disorder
Instead of Drug abuser → Patient
Instead of Abuse → Substance use, misuse, or used other than prescribed