

HARM REDUCTION SERVICES IN HOMELESS SERVICE ORGANIZATIONS: OPPORTUNITIES AND CULTURAL CHALLENGES

Authors:

Burk K¹, Facente S¹, Albers A¹, Serio E², Werlin S²

¹Facente Consulting, ²Downtown Evening Soup Kitchen (DESK)

Background:

In the United States (U.S), drug-related overdose causes one in three deaths among people experiencing homelessness (PEH), and strategies to address homelessness that displace PEH can exacerbate overdose risk. New Haven has the highest rate of overdose in the state of Connecticut, and Connecticut ranks 9th nationally in U.S. fatal overdose rates.

Description of model of care/intervention/program:

In the U.S. homeless service providers are generally separate entities from infectious disease prevention programs, and are largely steeped in an abstinence-based philosophy. Concerned about overdose risk among their target population, Downtown Evening Soup Kitchen (DESK) in New Haven assessed feasibility for the implementation of a drug consumption room (DCR) while simultaneously working to shift internal organizational culture to be more explicitly harm reduction aligned. This year-long process involved community engagement efforts via surveys, focus groups, and community meetings with people who drugs (PWUD) and/or are experiencing homelessness, city government, law enforcement, clergy of various denominations, DESK's business owner neighbors, drug treatment and harm reduction providers, and DESK's own staff and Board of Directors.

Effectiveness:

Preliminary data indicate near unanimous support among PEH and PWUD for DCR implementation at DESK, in contrast to varied opinions among the DESK Board of Directors. This highlights the challenge of homeless service organizations pursuing progressive harm reduction programming models like DCRs while still undertaking an internal culture shift away from a generally abstinence-based orientation. Among other stakeholder groups, concerns or complaints about visible homelessness tempered enthusiasm for DCR implementation, underscoring the inextricable mental link between the challenges of substance use and homelessness.

Conclusion and next steps:

Homeless service organizations represent important partners in overdose prevention work in the U.S., but reconciling internal cultural barriers to harm reduction is a necessary component of harm reduction program implementation and effective community engagement.

Disclosure of Interest Statement:

The authors have nothing to disclose.