

[Insert Organization]
Harm Reduction & Substance Use Policy

Policy #:		Effective Date:	
Reviewed Date:		Next Review Date:	

STATEMENT OF COMMITMENT¹

Harm reduction is a philosophy, set of values, and practical client-centred strategies that aim to meet people “where they are at” to assist them achieve positive health outcomes and reduce the stigma, discrimination and harms that may result from risk taking behaviour, such as drug use. Harm reduction seeks to empower people by providing information and strategies to minimize potentially negative impacts of risk taking behaviours. Harm reduction accepts the reality that people can and do use substances, both legal and illicit, and will engage in other activities that can cause them harm. Harm reduction proactively works to provide support to reduce the harmful effects of these behaviours rather than ignore, condemn, or focus on ending the behaviour.

Harm reduction is a core value of [insert organization] and we are dedicated to ensuring that the principles of harm reduction and the rights of people who use drugs, as outlined by the [Ontario Human Rights Commission](#), are integrated in all aspects of our services. As a shelter provider working from a harm reduction framework, our role is to:

- Provide services that are non-judgmental, non-coercive, and based in the best available evidence.
- Recognize that substance use is a complex phenomenon that encompasses a continuum of behaviors ranging from dependence to abstinence, with an understanding that some ways of using are safer than others.
- Incorporate the voices and suggestions of people who access and use our services, their lived experiences, and knowledge in order to enable us to provide more effective services and programs.
- Respect the autonomy and choices of people we support and work with them to find the best strategies and supports to improve their wellbeing.
- Engage all individuals who access our services with respect and empathy.

[insert organization] affirms that people who engage in risk taking behaviour have as equal a right to our services and programs as people who do not. People engaging with [insert organization] will be treated with dignity and respect, and services will be offered in a non-judgmental, non-coercive, and equitable manner. We recognize that substance use and other risk taking behaviour may, at times, be a barrier to a person benefiting fully from [insert organization]'s programs and services. [insert organization]'s response will remain person-centered and we will engage and involve individuals in these situations to deliver services that support their overall health and well-being. [insert organization] will ensure to uphold human rights and address any potential issues using a client-centered, harm reduction approach, with the aim of supporting residents holistically. [insert organization] will not discharge service users based on substance use alone. Behavioural issues that pose a danger or threat: physical health and safety, abuse, mistreatment of staff or others taking part in services of [insert organization], will still be addressed as outlined in agency policies. However, substance use cannot be the sole reason for disciplinary actions to be taken.

¹ Adapted from CAYR Community Connections, Harm Reduction Policy. May 2019

[Insert Organization] Harm Reduction & Substance Use Policy

[insert organization] acknowledges the contribution of people or individuals with lived experience in the development of Harm Reduction Practices, including overdose prevention. As such [insert organization] will seek the input of those with lived experience in the development of policies, programs, and services to enrich the quality of services offered to the clients we serve.

[insert organization] will support ongoing training on harm reduction practices for all staff, volunteers and board members in order to ensure that harm reduction is consistently and effectively implemented within the agency. [insert organization] will create an environment where access to training programs and up to date information on harm reduction practices and ensure they are easily accessible.

PURPOSE

The purpose of this policy is to outline the ways in which [insert organization] will support harm reduction practices, which acknowledge the reality that people can and do use substances, both legal and illicit, and will engage in other activities that can cause them harm. This policy will outline how [insert organization] can reduce the potential harms of substance use and other related activities and support our service users.

APPLICATION

This policy applies to all programs, practices, communications, use of facilities, and provision of all [insert organization] services, and the staff, students, and third party providers/contractors (e.g. security, cleaning, food services, etc.), supporting individuals experiencing homelessness within [insert organization]. This policy supports Toronto Shelter Standards and a Housing First approach.

DEFINITIONS

For the purpose of this policy, the following definitions apply:

Abstinence-Based Shelter: A shelter that prohibits the use of alcohol and illicit substances as part of their service model, usually in order to support the goals of clients who choose not to use or be exposed to alcohol or illicit substance use (related term: Harm Reduction).

Client: Any individual who is in receipt of any kind of support services provided by a shelter.

Harm Reduction: Harm reduction is both a philosophy and set of practical strategies aimed at reducing the adverse health, social and economic consequences associated with substance use (both legal and illegal) in ways that are non-judgmental and non-coercive. Harm reduction may include abstinence-based shelter programs providing a client with the choice to participate or seek other forms of treatment or support. Harm reduction strategies are person-driven, flexible in design, and ensure that people who use substances are treated with dignity and respect, and as full members of society. It is based on a commitment to respect and uphold human rights. A harm reduction approach applies not only to harm due to substance use, but also social harms that impact health and well-being. Harm reduction acknowledges that people who use drugs are the best source for information about their own drug use, and need to be empowered to join service providers to determine the best interventions to reduce harms from drug use. Harm reduction recognizes the competency of individuals who use substances to make choices and

change their own lives. The active participation of people who use substances is at the heart of harm reduction.- We believe that all people, regardless of their situation or choices, are worthy and deserving of our support. (Related terms: Abstinence-based Shelter, Safer Crack Smoking Equipment, and Safer Injection Equipment).

Housing First: A service approach that focuses on quickly moving people experiencing homelessness into permanent housing, without preconditions, and then connecting them to supports and services as needed in order to stabilize their housing.

Lived and Living Experience: means in the context of this policy, the person(s) who has personal and direct experience of substance use, either their own or someone close to them. They may have been marginalized because of a complex mix of substance use, life conditions, and other factors related to their age, gender, sexual orientation, ethnicity, race, socioeconomic status, housing and homelessness status, life experiences, violence and trauma, or health conditions. They may also have experience and knowledge with different methods of using substances and the impact of stigma and discrimination.

Recovery: means when a person reaches their recovery goal. Recovery is self-defined and looks different from one person to the next. Recovery may not necessarily mean abstaining from substance use.

Recovery-Oriented Approach: means an approach to empower people experiencing substance use and mental health challenges to use their strengths and skills to live the life they choose. Empowering a person often includes a harm reduction approach, where their choices are supported and they are treated with dignity and respect.

Social Determinants of Health: means the circumstances in which people are born, grow up, live, work, and play, including the quality of the health care they receive over their lifetime that influence the health outcomes and quality of life of populations. Some examples include income and income distribution; education; employment, job security, and working conditions; early childhood development; food security; housing; built and natural environments; social inclusion/exclusion; social safety network; health services; Indigenous status; gender; ethnicity; race; and disability.

Stigma: refers to negative attitudes (prejudice) and negative behaviour (discrimination). These attitudes and judgments can affect how we think about, behave, and provide care to clients.

Safer Crack Smoking Equipment: Equipment used to help people who smoke crack cocaine to reduce the potential harm to themselves (e.g., to prevent the transmission of communicable diseases). Safer crack smoking equipment may include Pyrex stems, brass screens, chop sticks and mouthpieces (related term: Harm Reduction).

Safer Injection Equipment: Equipment used to help people who inject drugs to reduce the potential harm to themselves (e.g., to prevent the transmission of blood-borne diseases). Safer injection equipment may include syringes in various sizes and brands, sterile water, alcohol swabs, tourniquets, filters, acidifiers and cookers (related term: Harm Reduction).

[Insert Organization] Harm Reduction & Substance Use Policy

GOALS

1. To empower people who use drugs to make informed decisions about their health, including decisions regarding safer drug use;
2. To reduce incidences of substance-related health and social harms, such as overdose, and discharges or service restrictions related to substance use;
3. To provide opportunities for people who use drugs to access stigma-free and non-judgemental services, programming, and harm reduction supplies, including new needles/syringes and other drug use equipment;
4. To build the harm reduction capacity of our staff by providing access to evidence-based trainings, resources, and tools to best support people who use drugs;
5. To ensure that our services are defined by the ongoing participation, input, and expressed needs of people who use drugs and those who may benefit from abstinence-based programming, using an intersectional approach;
6. To promote and facilitate appropriate, responsive, and timely referrals to public health services, primary health care, mental health, and substance use services;
7. To reduce instances of stigma and discrimination against people who use drugs within the service setting as well as raise awareness about the risk of drug overdose/poisoning and strategies for mitigation.

PRINCIPLES

[Insert Organization] upholds the following principles as central to our harm reduction practice:

- **Service User-Centred**
 - Meet each service user who uses drugs "where they are at." Support their most pressing needs, without judgment, while encouraging any small change in their drug use that supports their goals.
 - Ensure that people who use substances are treated with dignity and respect, using a compassionate, non-judgmental and non-punitive approach.
- **Service User Involvement**
 - Recognize that people who use drugs have, and continue to play a critical role in leading, developing, and implementing harm reduction programming.
 - Ensure services are defined by the ongoing participation, input, and expressed needs of people who use drugs, using an intersectional approach.
- **Autonomy**
 - Acknowledge and respect the decisions people make about their drug use, even if those decisions may cause them harm. Empower and affirm service users as the primary agents of change by providing information, supports and guidance.

[Insert Organization] Harm Reduction & Substance Use Policy

- **Anti-Oppressive & Human Rights**
 - People who use substances have the right to receive equitable, nonjudgmental, and evidence-based shelter services, regardless of whether the substances they use are legal or illegal.
 - The Ontario Human Rights Code prohibits discrimination against people based on protected grounds such as mental health disabilities and addictions (TSS 4).
- **Continuum of Intervention Options**
 - People who use drugs may benefit from a variety of different prevention and intervention approaches. Individuals and communities affected by drug use need to be involved in developing harm reduction strategies and programming.
 - Where service users need support beyond our capacity, we will make referrals and partner with agencies that can meet service users' identified needs.
- **Pragmatic**
 - Recognize not everyone is ready to stop using drugs and may engage in risk-taking behaviours. Being pragmatic means taking steps to reduce harm when a person continues to use substances and recognizing that substance use will occur regardless of a shelter provider's wishes.
 - Recognize that drug use is a complex and multi-faceted that encompasses a continuum of behaviors from abstinence to dependence and produces varying degrees of social harm.

ROLES AND RESPONSIBILITIES

All Staff:

Staff are responsible for:

- Applying a harm reduction and client centered approach to all aspects of service delivery
- Completing harm reduction safety plans with clients
- Attending provided trainings in harm reduction principles and practices (Naloxone administration, safe use kits, trauma informed care etc.)
- Following updates on evolving policies and procedures
- Providing feedback and input on policies and procedures.

Supervisors & Managers:

Supervisors & Managers are responsible for:

- Training staff regarding the implementation of harm reduction principles
- Interpreting the policy and procedures for staff
- Providing support trainings, and education for staff when required
- Ensuring all employee practices are in alignment with Toronto Shelter Standards and incorporate a harm reduction lens
- Following up with clients, staff and partner agencies on how to improve protocols and procedures

[Insert Organization]

Harm Reduction & Substance Use Policy

PROCEDURE

[Insert organization]'s staff will:

1. Ensure all clients are aware and informed of this policy and of the harm reduction supports available, including harm reduction supplies and naloxone, during admission.
2. Ensure clients who disclose substance use or are known to use drugs are encouraged to develop a safety plan, inform someone if they will be using, and arrange post-drug use safety checks.
3. Ensure that safer harm reduction supplies and kits are available on site and/or support is offered to shelter users to access appropriate harm reduction services.
4. Ensure that all people who access the shelter will receive regular health promotional education and services.
5. Assist clients to create individualized case plans and support client led goal-setting.
6. Staff will utilize a client-centred and Housing First approach, regardless of a people's substance use.
7. Ensure that agency partners and contractors utilize a harm reduction approach.
8. Ensure that clients are never discharged solely for their drug use, possession, or for entering the shelter while under the influence of drugs or alcohol.

SUBSTANCE USE ONSITE

[Insert organization] staff will follow the steps listed below when a client is found using onsite:

1. Staff will engage in a conversation with the client and remind them that they are not permitted to use onsite and any legal substances will be held in the shift leader office until they are ready for offsite use. Staff will not confiscate any legal or illegal substances in the client's possession.
2. When needed, staff will assist clients to their room or another space and monitor regularly to ensure their safety.
3. Staff will provide education, options and resources for safe using (this conversation may happen at a later time).
4. Staff will notify the client's counsellor for follow up and continued harm reduction support.

APPENDICES:

[SSHA Harm Reduction Framework](#)

[Toronto Shelter Standards: Section 10.2.1 Harm Reduction](#)