



Staff Guide to Having Harm Reduction Conversations with Clients

Purpose

This guide provides staff with strategies and tools to engage clients in respectful, non-judgmental conversations about their drug use. The aim is to reduce harms associated with substance use, support client autonomy, and build trust that can open the door to further support.

Core Principles of Harm Reduction Conversations

- **Respect and Dignity:** Treat clients as the experts of their own lives. Avoid judgmental language; use person-first language.
- **Client Autonomy:** Recognize that clients make choices about their drug use. Your role is to support safer practices, not to pressure change.
- **Non-Judgmental Curiosity:** Ask open questions with genuine curiosity. Listen actively to understand—not to correct or convince.
- **Safety First:** Focus on reducing immediate risks of harm (e.g., overdose, unsafe supply, infections). Provide practical resources (e.g., naloxone, safer use supplies, referrals).

Steps for Having Harm Reduction Conversations

1. **Build Rapport:** Start with everyday check-in questions. Show empathy and interest in wellbeing beyond substance use.
2. **Create a Safe Space:** Have conversations in private where clients feel comfortable. Be mindful of tone and body language.
3. **Ask Open-Ended Questions:** Examples: 'Can you tell me about your use?' 'What worries you when you use?' 'What helps you stay safe?'
4. **Listen and Validate:** Reflect back what you hear and validate feelings without endorsing unsafe practices.
5. **Share Information, Not Orders:** Offer harm reduction strategies as options. Use phrases like: 'Some people find it safer when...'
6. **Explore Safety Strategies Together:** Discuss safer use practices, access to clean supplies, overdose prevention.
7. **Offer Resources and Referrals:** Provide information on harm reduction services, health supports, housing, and social supports.

Helpful Communication Tips

- **Do:**
 - Use 'I' statements and neutral tone.
 - Ask permission before offering advice.
 - Focus on what the client wants.
- **Avoid:**
 - Lecturing, shaming, or pushing abstinence.
 - Making assumptions about client's use.
 - Using stigmatizing terms (junkie, dirty, clean).

Example Conversation

Staff: How's your day going? Have you been able to stay safe when using lately?

Client: Not really, I've been using whatever I can find.

Staff: That sounds stressful. Do you usually use alone?

Client: Yeah, most of the time. I don't like being around people when I use.

Staff: Thank you for sharing that with me. If you do use alone, please let us know and staff can check in on you to help keep you safe.

Client: I didn't know you would do that. That would make me feel better.

Staff: Absolutely—we just want to make sure you're safe.

When Conversations Are Difficult

If a client is resistant: Respect their decision and leave the door open.

If emotions run high: Stay calm, avoid arguing, and revisit later.

If disclosure indicates immediate danger: Focus on safety and call emergency services if needed.

Quick Reference Phrases

- How can I support you right now?
- What helps you feel safer when you use?
- Would it be okay if I shared something I know that might reduce risk?
- I respect your choices—you know what works best for you.

Reminder for Staff: The goal is not to stop drug use but to reduce harm, build trust, and keep clients alive and safe. Every respectful conversation is an opportunity for connection.