

Opioid Overdose Prevention: Developing Harm Reduction in a University Setting

Rachel Knopf Shey & Tamara Oyola-Santiago
Wellness and Health Promotion
Student Health & Support Services
The New School
New York, New York

The logo for The New School, featuring the text "THE NEW SCHOOL" in white, bold, sans-serif capital letters on a red square background. Below the text are three horizontal white lines.

**THE
NEW
SCHOOL**

NO Conflicts of Interest

- **“I have NO actual or potential conflict of interest in relation to this educational activity or presentation.”**

Learning Objectives

Identify the various harm reduction services that are possibilities within a university setting, focusing on New England and NY

Describe a multi-year strategic plan for harm reduction in a university setting, considering development and implementation of wellness programs for students that combine mindfulness practices and group-level interventions

Properly identify and respond to an opioid overdose using intranasal Naloxone

Harm Reduction: What is it?

“Harm reduction is a set of practical strategies and ideas aimed at reducing negative consequences associated with drug use. Harm Reduction is also a movement for social justice built on a belief in, and respect for, the rights of people who use drugs.”



Harm Reduction: Guiding Principles

- Acceptance
- Respect
- Collaboration
- Empowerment
- Compassion



Harm Reduction Language

Preferred language

- Use (drug use, drug user, substance use)
- Dependency
- Recovery
- Abstinence

More stigmatized language

- Addict (addiction)
- Junkie, druggie
- Clean (dirty)

Harm Reduction: Why practice it?

- **Humans use!**
- **Substance use spectrum:** Harms across the continuum of tobacco, marijuana, alcohol, and polydrug use
- **Empowered Bystander/Upstander:** community responsibility for each other
- **We can't afford not to:** In NYC, drug overdose is the third leading cause of premature death, after cancer and heart disease¹

Context of Opioid Overdose

- The majority of overdoses are witnessed, which provides an opportunity for intervention.
- Fear of police may prevent calling 911 who can administer naloxone.
- Witnesses instead may try ineffectual things
 - Myths and lack of proper training
 - Abandonment is the worst response

Laws and Access

Good Samaritan Laws

Naloxone Access - key questions from Drug Policy Alliance:

1. Does the jurisdiction have a naloxone access law?
2. Do prescribers have immunity from criminal prosecution for prescribing, dispensing or distributing naloxone to a layperson?
3. Do prescribers have immunity from civil liability for prescribing, dispensing or distributing naloxone to a layperson?

Naloxone Access - 2

4. Do prescribers have immunity from professional sanctions for prescribing, dispensing, or distributing naloxone to a layperson?

5. Do dispensers have immunity from criminal prosecution for prescribing, dispensing or distributing naloxone to a layperson?

6. Do dispensers have immunity from civil liability for prescribing, dispensing or distributing naloxone to a layperson?

7. Do dispensers have immunity from professional sanctions for prescribing, dispensing, or distributing naloxone to a layperson?

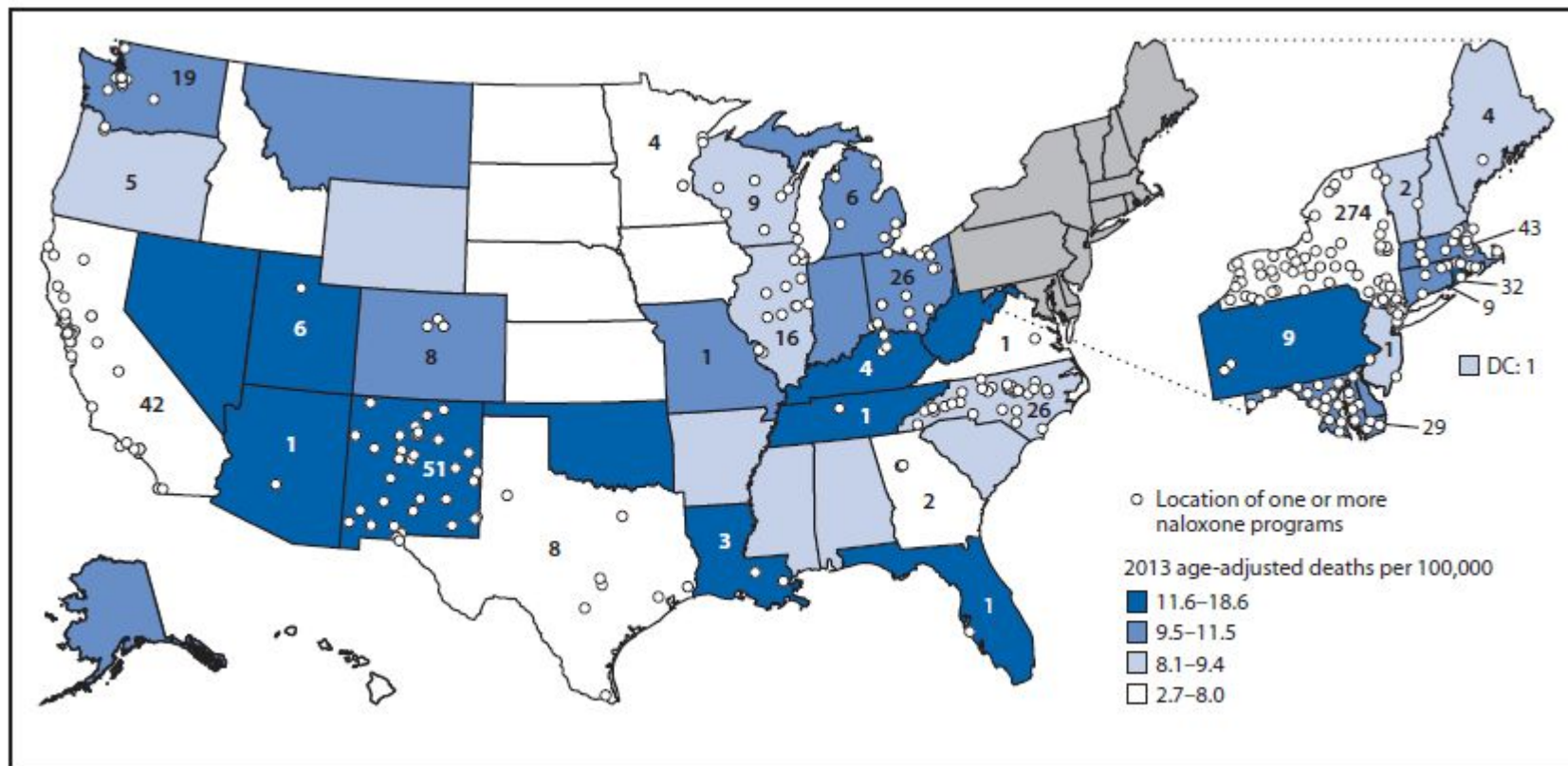
Naloxone Access - 3

8. Are prescriptions of naloxone authorized to third parties?
9. Are pharmacists allowed to dispense or distribute naloxone without a patient-specific prescription from another medical professional?
10. Is a layperson immune from criminal liability when administering naloxone?
11. Is a layperson immune from civil liability when administering naloxone?
12. Does the law remove criminal liability for possession of naloxone without a prescription?

NY and NE State laws related to OOP

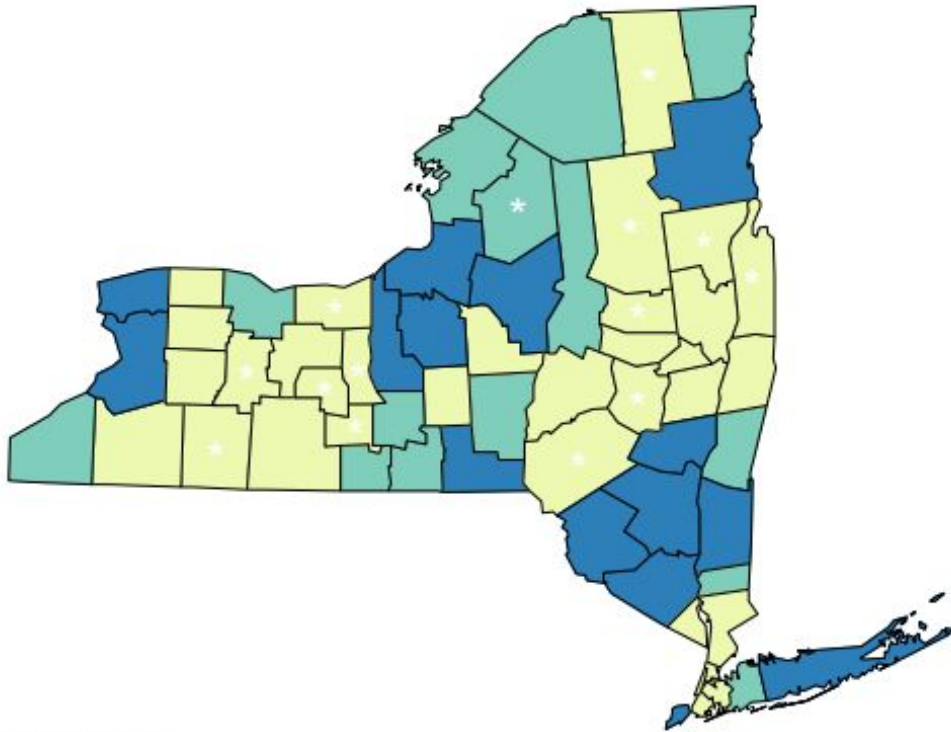
State	Good Samaritan Law	Naloxone Access Law
New York	Yes	Yes
Connecticut	Yes	Yes
Rhode Island	Yes	Yes
Massachusetts	Yes	Yes
Vermont	Yes	Yes
New Hampshire	Yes	Yes
Maine	No	Yes

Number* and location of local drug overdose prevention programs providing naloxone to laypersons, as of June 2014, and age-adjusted rates† of drug overdose deaths§ in 2013 — United States



NY State Department of Health

All overdose deaths involving opioids, crude rate per 100,000 population Total 2013-2015



Crude death rate
Counties are shaded based on quartile distribution
(* Fewer than 10 events in the numerator, therefore the rate is unstable)

- 0 - < 8.9 : Q1 & Q2
- 8.9 - < 12.2 : Q3
- 12.2 + : Q4

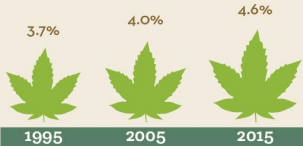
Source: 2013-2015 Vital Statistics Data as of May 2017

Harm Reduction: On Campus

Drug and Alcohol Use in College-Age Adults in 2015

2015 Monitoring the Future
College Students and Adults Survey Results

Marijuana Use Among Full-Time College Students Remains a Concern



Daily marijuana use has steadily increased among college students in the past two decades.

Heavy Alcohol Use Higher in College Students than Non-College Peers

BINGE DRINKING
Five or more drinks in a row



Past 2 Weeks

INTOXICATION
Having been drunk



Past Month

College Student Group
 Non-College Group

Cocaine Use in Full-Time College Students is Concerning



After falling steadily for 6 years, past-year cocaine use jumped above 4 percent in 2014 and remained high in 2015.

Source: Johnson LD, O'Malley PM, Bachman JG, Schulenberg JE, Miech RA. *Monitoring the Future National Survey Results on Drug Use, 1975-2014: Volume 2, College students and adults ages 19-55*. Ann Arbor, MI: Institute for Social Research, The University of Michigan; 2016.

Drug Use at The New School

Within the last 12 months, have you taken any of the following prescription drugs that were not prescribed to you: Pain killers (e.g., OxyContin, Vicodin, Codeine)? Last 30 days for heroin/smack?

TNS 2015	TNS 2017	Fall 2016 Reference
6.3%	7.6%	4.7%
3.2%	3.1%	1.2%

Drug Use Among College Students Nationwide

NS17

Reference16

Academic impact of drug use 2.6%

1.8%

Any alcohol use (in last month) 75.6%

63.6%

Any marijuana use (last month) 31.3%

18.6%

The last time you used alcohol and other drugs together, which did you use?
Choose all that apply.-Alcohol and opiates (heroin, Vicodin, Oxycontin, Percocet,
Ultracet) Yes: 12 or 1.0% in 2017

Time to Move!

What does AOD Harm Reduction look like at your college or university?

Move along the spectrum according to agreement.

How We Build Capacity and Identified Stakeholders

Social-Ecological Model (SEM)



STOP

DON'T THROW THESE ITEMS IN THE TRASH!

Protect yourself and others by properly disposing of potentially harmful items.



Hypodermic needles

Sharps container

Use the sharps containers available in public restrooms throughout campus.

FitPack

Ask an RA, Security, or SHS staff for a FitPack (a small personal sharps container that stores both new and used syringes). Follow the instructions on the FitPack for disposal.



Paint and other toxic chemicals

Staff member

Give to a building supervisor.



Blades

Yellow blade-recycling container

Put in the yellow blade-recycling bin in the art rooms in dorms and Parsons art studios.



Batteries

Blue recycling tube

Put in a blue recycling tube located in most New School lobbies.

Bloodborne Pathogens

Safety Tips

Route of exposure

Sexual transmission



Prevention and Safety

- ▶ Always use condoms for oral, anal, and vaginal sex.
- ▶ Use dental dams for oral sex.



Route of exposure

Drug use



Prevention and Safety

- ▶ Do not share needles.
- ▶ Use a new syringe for each shot.
- ▶ Fitpacks are available to New School community members. Fitpacks are personal sharps containers that fit both used and new syringes. They are easy to carry and allow for safe and secure

Route of exposure

Tattoos and piercing



Prevention and Safety

- ▶ All needles used for tattoos and piercing should be new, sterilized for each treatment, and properly handled by the practitioner.
- ▶ Check to make sure all practitioners have been trained in bloodborne pathogens exposure and control.
- ▶ Be an educated consumer: In NYC,



These are the risks:



ADDICTION

These drugs are stimulants and have similar effects to cocaine and other amphetamines. They are highly addictive.



SIDE EFFECTS

Jitteriness, headaches, inability to sleep, increased heart rate, dizziness, tremors, changes in mood, hallucinations, and sudden confusion.



BRAIN DEVELOPMENT

Your brain is still growing. Regular use may permanently impact brain development—it can actually cause you to develop symptoms of ADD or ADHD.



STUDY DRUGS ARE ILLEGAL

Adderall and other study drugs are considered Schedule II Controlled Substances. Selling or possessing these drugs without a prescription may lead to felony drug charges.

OTHER OPTIONS

BASICS:

BASICS helps you to cultivate a non-judgmental awareness of drinking (or substance use) patterns and to develop ways to reduce risk and enhance well-being. For more info or an appointment, email: basics@newschool.edu or call 347.927.0420

New School Counseling:

If you are concerned about your use of "study drugs" make an appointment at Counseling Services for an evaluation. Counseling can be very helpful for working through study, stress and concentration problems. Please call 212-229-1671—option 1 for counseling.

Weekly stress management events: Includes weekly group meditation, which has been proven to help improve concentration. Visit: www.newschool.edu/healthevents

Info on stress, time and sleep management: web: www.newschool.edu/whp email: wellness@newschool.edu

The Learning Center:

Contact for support with your schoolwork at LearningCenter@newschool.edu

90% of New School students do NOT use Rx stimulants without a prescription.



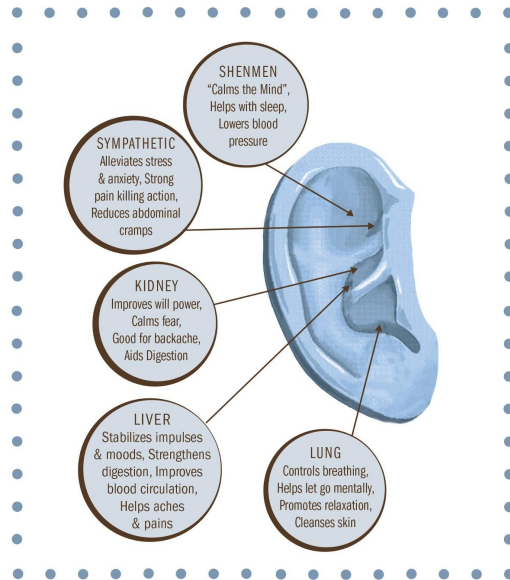
Choose Carefully

For more information:
 Visit: newschool.edu/health
 Email: wellness@newschool.edu
 Call: 212.229.1571, option 4

AURICULAR ACUPUNCTURE

Auricular acupuncture uses the ear to treat conditions that are present anywhere in the body. By stimulating points on the outer ear, the acupuncture needles send electrical impulse messages to the brain, which then stimulate targeted body areas.

The acupuncture provided at The New School is based on the protocol developed by the National Acupuncture Detoxification Association (NADA), which stimulates five points in the ear: Sympathetic nervous system, Shen Men, kidney, liver and lung. This protocol has been proven effective in helping people to relax, deal with cravings, balance their energy & stimulate detoxification of the body.

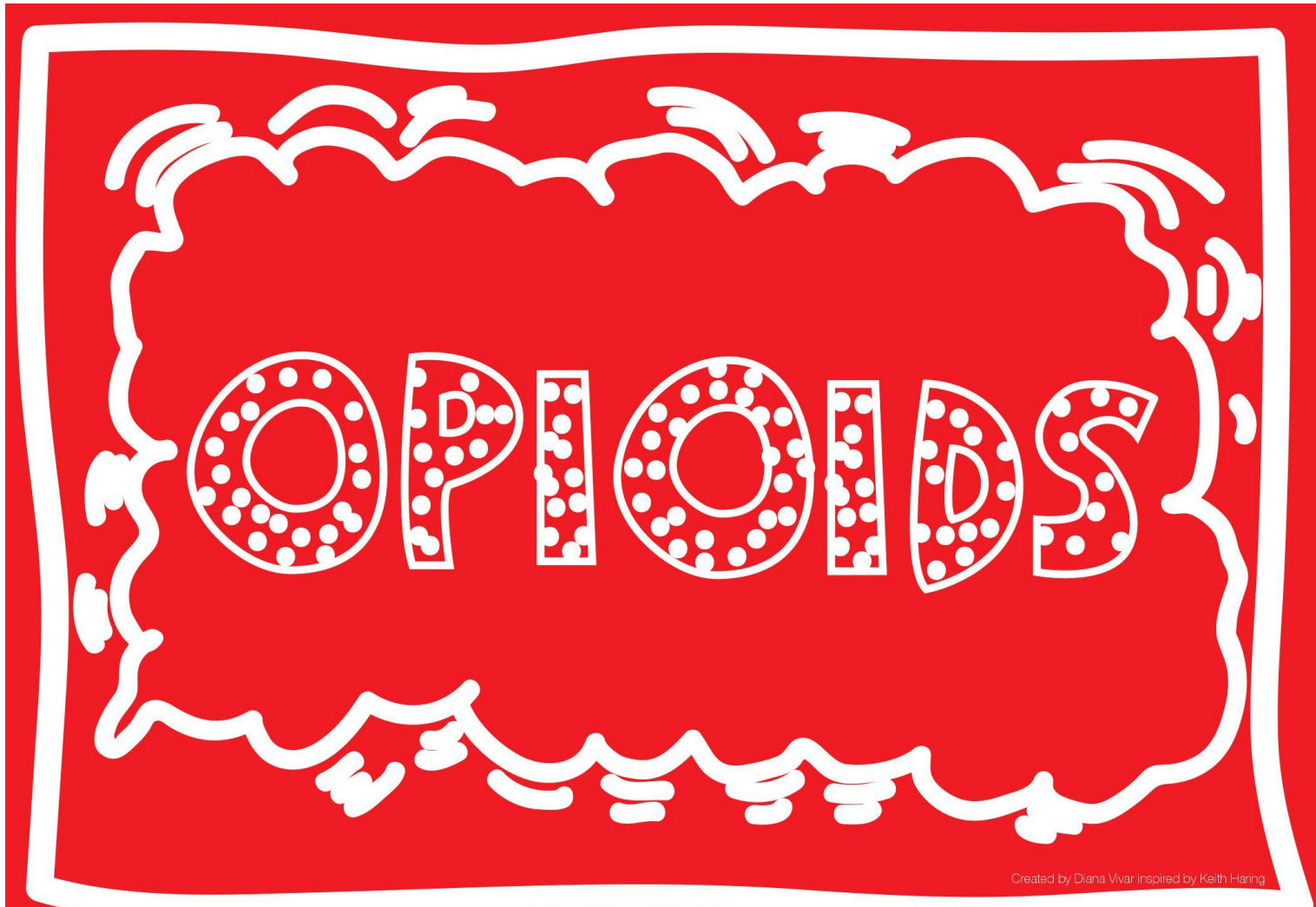


At the five designated ear points shown in the picture above, providers trained through NADA apply fine gauge, sterile, one-time use stainless steel needles just under the skin, where they remain for up to an hour while the participant relaxes quietly in a chair. Participants should allow a minimum of 30 minutes for the treatment to be effective.

Ordinarily, groups of participants sit together while undergoing the treatment. There will always be a provider in the room, and at any moment the participant can request that the needles be removed.

Drop-in auricular acupuncture happens every Tuesday, 11:30am-12:30pm, in the Student Health Services conference room, 80 Fifth Avenue, 3rd floor.

No appointment necessary. First-come, first-served.



Opioids are medications that are prescribed to relieve pain by reducing the pain signals to the brain, and can impact the areas of the brain controlling emotions. They are taken for severe or acute pain, or for pain that lasts a long time.

Typical prescribed opioids include morphine, oxycodone, hydrocodone, and codeine, Illicit opioids include any prescription medications used off label (using the medication for something or someone it was not prescribed for) as well as heroin.

Along with pain relief and euphoria, opioids slow the respiratory system (our breathing) and an accidental overdose can lead to death. The risk for overdose and death are increased when combined with alcohol or other drugs, especially depressants such as Benzodiazepines (e.g. Valium, Klonopin, Ativan, etc.).

When using opioids it is important to practice harm reduction strategies:

// Don't use alone

//Let friends, family or loved ones know that you are using

//Don't mix alcohol and benzos, among other drugs, with opioids

//Get naloxone – if you use or have friends, family or loved ones who use, get trained in opioid overdose prevention, including getting naloxone (Narcan)

// Recognize the signs of an overdose. Quickly administer naloxone and call 911

For more information, to get naloxone and discuss harm reduction strategies for all drugs, contact Student Health Services at The New School, wellness@newschool.edu 212.229.1671 x4, newschool.edu/health



SEM - What does harm reduction look like?

Our menu . . .

Safer sex and sex positivity

Mindfulness

Mental health and psychotherapy

Occupational safety

Capacity building across teams

Opioid Overdose Prevention

The New School

The New School is the first university to register with the New York State Department of Health to become an Opioid Overdose Prevention Program* (July 2015).

How did this happen?

What are Opioids/Opiates?

Opiates - One of a group of alkaloids derived from the opium poppy (heroin, morphine)

Opioids - A term applied to synthetic analogs of opiates, which interact with the same specific receptors in the brain (oxycodone, fentanyl)

Examples of most commonly used



Overdose Prevention Kit



Contains:

Gloves

Rescue Breathing Mask

Naloxone Hydrochloride

Atomizer

Let's get trained!

<https://www.youtube.com/watch?v=-t8ezZR4Xjk>

If an OD Is Happening What Should I do?

IN THIS ORDER:

- Check if the person is responsive / able to be aroused (No sternal rub, just yell at them and tap them)
- Call 911 or emergency medical personnel
- Administer naloxone (Narcan) - If you are unsure if the person is overdosing on an opioid you can still give naloxone
- If you've been trained in rescue breathing you can administer as needed (DOH is no longer emphasizing rescue breathing)
- Turn person on their side (recovery position)
- Administer 2nd dose of naloxone 2-5 minutes after 1st dose, if needed
- Monitor and support
- Follow your guidelines role for incident response and reporting
- Follow up with your institution, fill out paperwork

Building Harm Reduction Capacity @ your College/University

- **What is your goal?**
- **How palatable will this be at your university?**
- **Who are the cooks (stakeholders)?**
- **Who are the food critics (blocks)?**
- **Who are the regulars? (Allies, active partners/builders)?**

Checking -in : SEM at your university

- **What is the socio ecological model? How would you use it to build harm reduction within your university?**
- **What is on your harm reduction menu?**
- **What are your next steps post NYSCHA/NECHA conference?**
- **How can NYSCHA/NECHA support you in harm reduction capacity building? (think SEM in this too)**

Harm Reduction Resources

[Drug Policy Alliance](#)

[Clinton Foundation and Evzio initiative](#)

[Open Society Foundation](#)

[Harm Reduction Coalition](#)

Get you know your local and city departments of health - who are your potential allies there?

Implementation Resources

[NIDA-Naloxone](#) - National Institute on Drug Abuse (NIDA). Naloxone—a potential lifesaver. National Institutes of Health (NIH). 2014.

[Project DAWN](#) - Project Dawn (Deaths Avoided With Naloxone). Ohio Department of Health. 2017.

[SAMSHA-Overdose](#) - Opioid Overdose Toolkit – Updated 2016. Substance Abuse and Mental Health Services Administration (SAMSHA). 2016.

[US DOJ BJA-Naloxone](#) - US Department of Justice (US DOJ), Bureau of Justice Assistance (BJA). National Training and Technical Assistance Center. Law Enforcement Naloxone Toolkit.

[NSC-Naloxone](#) - National Safety Council (NSC). What's working in the prescription painkiller epidemic: Tackling prescription drug misuse.

[NIDA-Naloxone](#) - National Institute on Drug Abuse (NIDA). Naloxone.

Thank you!

For more information:

TAMARA OYOLA-SANTIAGO and RACHEL KNOPF SHEY

ASSISTANT DIRECTORS, WELLNESS & HEALTH PROMOTION /STUDENT HEALTH &
SUPPORT SERVICES

80 FIFTH AVE, 3 FLOOR, NEW YORK, NY 10011

WELLNESS@newschool.edu

T 212.229.1671