

LET

UDRUGA ZA  
UNAPREĐENJE  
KVALITETE ŽIVLJENJA



JOINT ACTION ON HIV AND CO-INFECTION  
PREVENTION AND HARM REDUCTION

## Practical scenario on HR

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# Issues

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**Human Resources**  
**Financial Resources**  
**Impact- reach to clients**



# Outreach with PWUD in numbers



Intravenozni ovisnici drop in i outreach	Siječanj	Veljača	Ožujak	Travanj	Svibanj	Lipanj	Srpanj	Kolovoz	Rujan	Listopad	Studeni	Prosinac	S
# korisnika/ca (različitih)	682	684	685	688	689	694	696	697	699	704	706	708	
novi korisnici/ce	2	1	3	1	5	2	1	2	5	2	2	3	29
# podijeljenih igala	7210	7719	8114	7319	8331	7509	7102	6643	7890	7104	6990	8029	89960
# podjeljenih šprica	4890	4628	5210	4482	5446	4914	4319	4082	4915	4233	4093	4932	56144
# prikupljenih igala	1093	1373	1192	1082	1211	1328	1111	1318	1219	1119	950	1113	14109
# prikupljenih šprica	879	1050	990	918	993	1101	917	1082	970	902	812	940	11554
# podijeljenih kondoma	505	645	440	703	402	500	420	205	408	280	418	295	5221
# ampula dest. vode	1830	2315	2425	2190	2080	2390	2750	2110	2765	2346	2180	2455	27836
# alkoholnih tupfera	8150	7775	8380	7570	8490	7885	8220	7355	8680	8210	7140	8032	95887
podjeljeni materijali (letci i brošure)	22	20	11	31	20	28	32	29	14	25	22	18	272
# očišćene lokacije	1	3	2	2	3	1	1	2	3	2	1	1	22
# broj prikupljenog pribora na lokacijama	30	170	120	105	140	70	60	110	170	80	105	50	1210



# Outreach with sex workers in numbers ▶▶▶

CSW	Siječanj	Veljača	Ožujak	Travanj	Svibanj	Lipanj	Srpanj	Kolovoz	Rujan	Listopad	Studeni	Prosinac	S
# korisnika/ca (različitih)	222	222	223	224	227	227	229	229	229	229	231	231	
novi korisnici/ce	0	1	1	3	0	2	0	0	0	2	0	2	11
# podijeljenih kondoma	3470	4245	3940	4202	3803	4108	4700	4010	4600	3700	3900	3550	48228
# podijeljenih lubrikananta	795	880	1005	1220	941	1055	944	609	772	640	878	654	10393
podjeljeni materijali (letci i brošure)	9	8	20	16	9	8	13	12	8	14	20	11	148
# ginekoloških pregleda													



# FLIGHT mobile units schedule

Vrijeme	PON	UTO	SRI	ČET	PET
12:00 – 13:00	Dubrava	Podsused	Dubrava	Podsused	Dubrava
13:30 – 14:30	Travno	Vrapče	Travno	Vrapče	Travno
15:00 – 16:00	Borovje	NSB	Borovje	NSB	Borovje
17:00 – 18:00	Sopot		Sopot		Sopot
18:30 – 19:30	Špansko		Špansko		Špansko
20:00 – 21:00	Savica		Savica		Savica



# ZAGREB zovi/ Zagreb calling



Call us at **091 7244 744** or **091 9555 549** and we will bring you the needles and syringes.



# FLIGHT mobile unit card and coding

- Basic information
- Information on HIV and HCV and HBV testing
- First use
- First injections

Code for each client: 2nd and 3rd letter of the first name; 2nd and 3rd letter of the surname, last two digits of year of birth and place/site client came for the first time

**MARKO PERIĆ**, born 1990, came to site in Špansko:  
ARER90ŠP



# Human resources

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## Active Listening Skills:

Outreach Workers have to be great listeners. They call upon their Active Listening skills to understand the specific situation of each potential client, and to recall this information in a follow-up conversation. It is a key skill for building relationships.



# Human resources

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## **Social Perceptiveness:**

Outreach Workers are employed by programs that deal with people who live in a dangerous environment.

They must be socially aware of the socio-economic situation of their area and how it affects their targeted group.



# Human resources

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## Interpersonal Skills:

Interpersonal skills include things like compassion, positivity and patience.

All three of these skills are used daily by Outreach Workers.

They call upon their Interpersonal Skills to build authentic relationships with program participants.



# Human resources

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Usually outreach workers have just a high school diploma.

Importance of continued non-formal education.

Importance of supervision for outreach workers.

Protection and safety of outreach workers;  
from violence to communicable diseases



# Link to other services

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- health and social welfare system
- therapeutic communities
- early warning system
- picking up used needles and syringes



# Link to other services



- advocacy
- publications
- presentations and workshops
- research



# Empowerment in the context of HR ...

The most effective empowerment strategies are those that build on and reinforce authentic participation ensuring autonomy in decision-making, sense of community and bonding, and psychological empowerment of the community members themselves

Empowerment strategies, including community-wide participation, need to be integrated into local, regional and national policies and economic, legal, and human rights initiatives.



## **Gatekeepers:**

Importance of gatekeepers as an entry point to the population.

## **IEC materials:**

- Prevention of diseases and use of condoms
- Promotion of sites
- Overdose
- What to do in case of finding an used needle



# Practical issues

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- Quality outreach workers
- Finances
- Procurement
- Warehouse
- Disposal of needles and syringes
- Monitoring and evaluation
- Proof of users to donors



# BASIC OF HARM REDUCTION

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The film is meant for IDUs, their relatives and NGOs working with them.

Warning! This informational and educational film contains scenes of violence and offenses.

<https://www.youtube.com/watch?v=j0DkkxPzq>

[Og](#)



...every cent invested in prevention services and harm reduction will pay off in spades and, what is the most important, it will pay off in citizens' health...

<https://www.youtube.com/watch?v=CMUdU-e9dQ#action=share>



# Standards for service provision ...

**1 Accessibility:** location and opening hours (services have to match the needs of their clients; costs should never be a barrier to a service)

**2 Staff qualification:** minimal qualification (staff has to be qualified and the staff qualification has to be made transparent)

**3 Indication criteria:** age limits

1. Services have to be age appropriate and staff has to be trained to meet age appropriate clients' needs

2. There should be no age limits in harm reduction services- minimum age for harm reduction services is 18 for peer education 15



# Standards for service provision ...

**4 Assessment procedures:** risk behavior assessment (client's/patient's risk behavior is assessed)

*Exception: drug checking, testing and counselling, vaccination, and sheltered housing*

**5 Assessment procedures:** complete needs assessment and prioritization

- 1. Harm reduction of intravenous drug use and
- 2. Reduction of used syringes in public spaces etc

*Exceptions: valid only for needle-syringe exchange, and supervised injection Rooms*



# Standards for service provision ...

**6 Assessment procedures:** client/patient status (the client's/patient's health status is assessed)

*Exceptions: valid only for needle-syringe exchange, testing and counselling, and vaccination*

**7 Informed consent:** (Clients/patients must receive information on available service options and agree with a proposed regime or plan before starting an intervention. Interventions should not be based on written informed consent, but rather on a transparently information about all the offers by a service.)



# Standards for service provision ...

**8 Confidentiality of client data:** (client/patient records are confidential and exclusively accessible to staff involved in a client's/patient's intervention or regime)

*Exception: drug checking*

**9 Individualized treatment planning:** (intervention regime and intervention plans, if applicable, are tailored individually to the needs of the client/patient)

*High consensus for referrals*

**10 Routine cooperation with other agencies:** (whenever a service is not equipped to deal with all needs of a given client/patient, an appropriate other service is at hand for referral)

*Exception: drug checking*



# Standards for service provision ...

**11 Continued staff training:** (staff is regularly updated on relevant new knowledge in their field of action)

*Exception: drug checking*

**12 Neighborhood/community consultation:** (avoiding nuisance and conflict with other people around the service)

*Exceptions: valid only for needle-syringe exchange, supervised injection rooms, and sheltered housing*



# Standards for service provision ...

**13 Goal:** reduced risk behavior (reducing unsafe injections, unsafe drug use and unprotected sex)

**14 Goal:**

referrals (treatment services must be prepared to refer clients/patients to other health/social/treatment/legal services if needed and agreed)

*Exception: drug checking*

**15 Internal evaluation:** (services must regularly perform an internal evaluation of their activities and outcomes)

*Exception: drug checking*

**16 External evaluation:** (services must regularly allow an evaluation of their activities and outcomes by an independent external evaluator)

*Exception: drug checking, referrals, and sheltered housing .The external evaluation should not be obligatory based on written record keeping, and that external evaluation is often not feasibly due to insufficient funding.*





# **Understanding Harm Reduction: Correcting Misconceptions**



**HR is Anti-Abstinence:** The most prominent of misconceptions is that HR is anti-abstinence. Nothing could be further from the truth! While non-use is a highly effective way of reducing the harms associated with substance use, abstinence lies at one end of a continuum of use that results in harm, with the other end being highly harmful use. Those who practice HR are very happy when their clients choose abstinence as a means of addressing issues related to their substance use.



**HR Enable Substance Use:** A second misconception is a belief that HR enables substance use by their clients.



**Are HR Assumptions Ethical?:** Whether or not HR is ethical in assuming that clients are capable of making effective choices about their substance use. Traditional thinking insists that addicts, by virtue of the actions of substances in their brains, somehow lose the capacity to make effective decisions about their lives. If this is true, then ethically to allow such impaired clients to choose their own substance use goals could be considered unethical.



Offering **Supervised Consumption Services** will encourage people to experiment with and use drugs.



People with drug addictions should just access **mainstream health services** that are available to everyone.



Instead of spending taxpayers' money on HR, we should put all our resources into **police prevention, mandatory treatment and law enforcement.**



OVERDOSE:

<https://www.youtube.com/watch?v=g85Ik0Y2Scs>

LET:

<https://www.dropbox.com/s/wx7dyospr3d024l/Video%208.mp4?dl=0>

HELP:

<https://www.youtube.com/watch?v=XQ031blyKts>

