

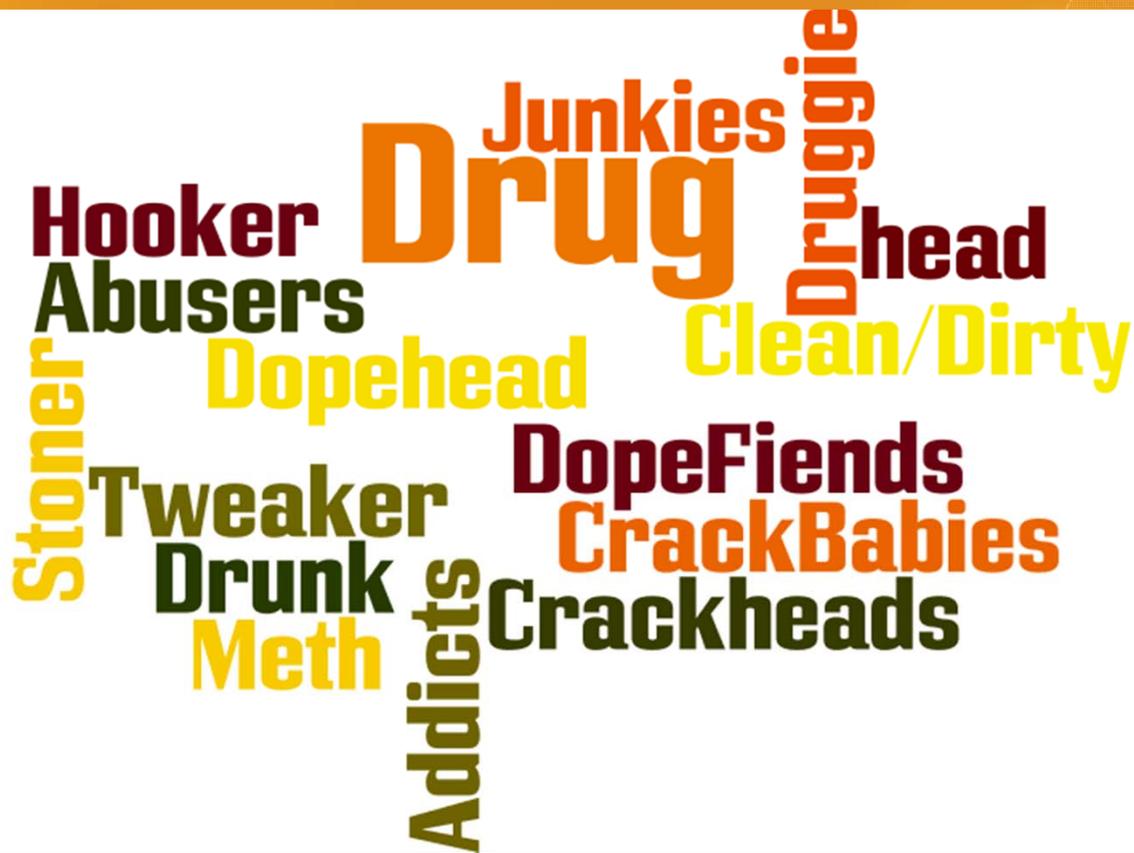
# Just Say Know

Safer Substance Use Strategies and Resources

## Assumptions & frameworks

- A good relationships with drugs (any drug) is possible
- If it sounds a little dramatic, it probably is
- “Illegal substance use” IS NOT interchangeable with “problem substance use”- just ask the DSM!
- Asking people to disclose/catalogue drug use puts them in a vulnerable position
- The dose makes the poison
- Maximizing pleasure is just as important as reducing harm

Language, media, culture



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## Adoptalk & Publications

# Child Welfare's Next Challenge: Parenting Meth's Young Victims

from Fall 2006 *Adoptalk*

by Diane Riggs

How seriously is methamphetamine (meth) use affecting child welfare? The answer varies by state and region, but Congress, when it reauthorized the Safe and Stable Families Program in September, agreed to spend \$40 million on the problem in fiscal year 2007. That's how much states—through \$500,000 to \$1 million grants—will have to address child welfare problems caused by addiction to meth and other drugs.

*"Meth has emerged as nothing short of a weapon of mass destruction," declared Marion County Oregon's district attorney*



“When Heroin hits the white suburbs suddenly it’s not a crime problem, it’s a health problem”



## A Good Relationship with Drugs

- You know the substance is a drug and what it does to your body
- You experience a useful effect over time
- You can take it or leave it
- You are free from adverse effects on health or behavior

(Weil, 2004)

Harm Reduction is *NOT* the easier, softer way

- It requires more **work**
- It requires more **thought**
- It requires more **patience**
- It requires more **creativity**
- It requires more **support**
- It requires more **experimentation**
- It requires more **discipline**

# Drug, Set and Setting

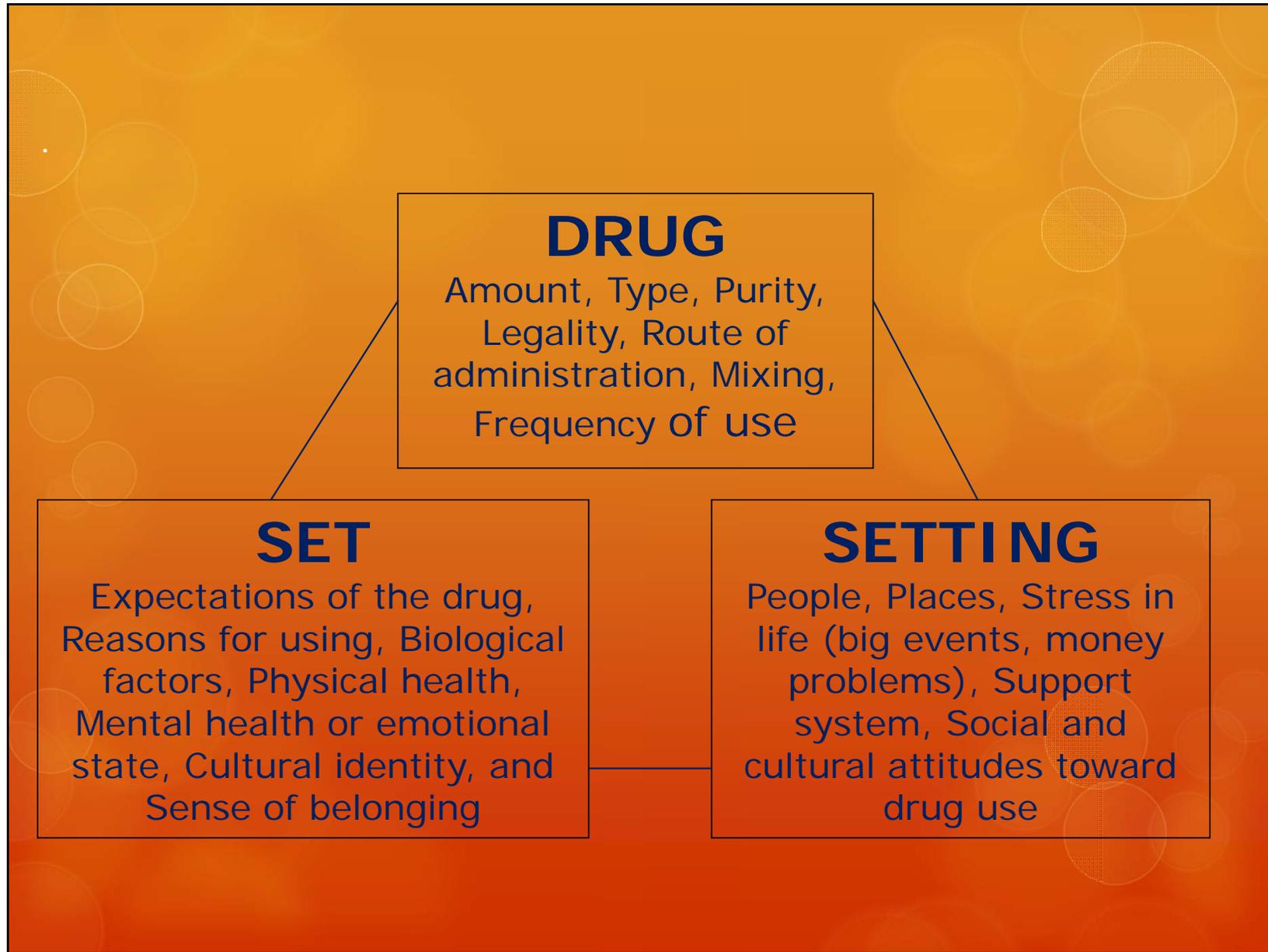
- Zinberg studied individuals who used heroin but avoided developing physical dependence
- Recreational users made sensible decisions
- The user—*not the drug*—sets the parameters of the person-substance relationship

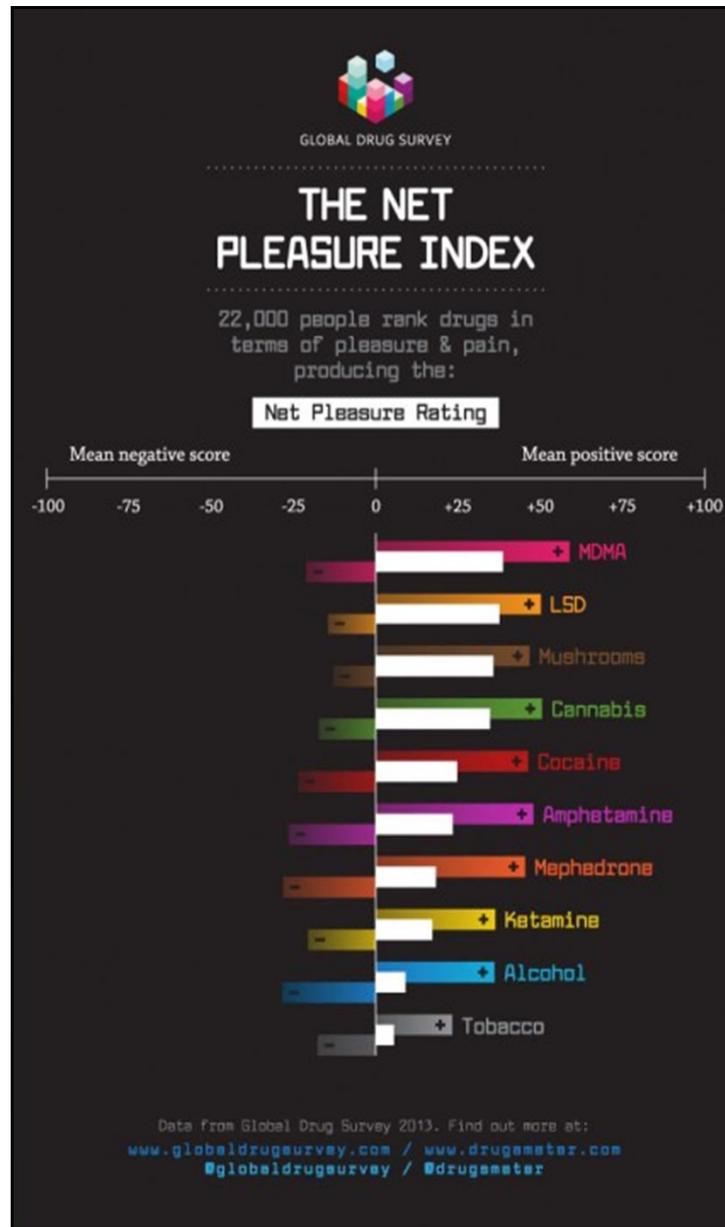
**Drug:** pharmacology

**Set:** individual drug user

**Setting:** contexts of drug use

(Zinberg, 1984)





*"Aw man, not another "and here's another way you can get sick and die" infomercial. You know we hear this shit all the time, right? Don't you think we already know that just doing this is bad for us? That's the main reason that I shoot dope in the first place. The thrill. Don't be a Dr. Killjoy, man. There's enough of them kind of doctors already in our faces. Why don't you try somethin' else for a change – tell me how I can get more good, not how I'm gonna feel more bad."*

*-Scott, HRC, 2011*

# Breakout!

- Injecting
- Smoking
- Designer/research chemicals/MDMA
  
- 12 min at each station
- Rotate clockwise around the room

## Discussion

- If all this good info and resources are available, why don't people do it perfectly?
- How can we envision implementing this in our own practice, milieu?

## Did we cover:

### Routes of Administration

- Swallowing
- Popping/  
parachuting
- Plugging
- Snorting
- Smoking
- Injecting  
(IM/IV/SC)

### Modifications

- Cheeking patches
- Breaking down ER/XR/SR
- Beating abuse deterrent formulations

### Unique pill injection problems

- Particulates
  - Chalk lung
  - Kidney damage
  - Vision changes
- Sugars, dyes

## Practicing Substance Use Management (SUM)

- Harm Reduction & SUM in particular are an exercise in specificity
- Harm Reduction & SUM can expand our understanding of potential harms (It should not ignore any of them)
- You will need to know a lot about drugs & drug use *AND* you may/will need to get this knowledge from your clients (and the internet, but trust real people!)

# The internet is a total frenemy



- Bluelight.org
- Erowid.org
- Globaldrugsurvey.com
- EcstasyData.org
- DrugCocktails.ca
- StreetRx.com

## ***Avoid:***

- "SWIM", etc.
- Not moderated
- Allows sourcing





**Robert Glatter, MD**  
Contributor

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# Flakka: The New Designer Drug You Need To Know About

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A man rushes out of his house in Miami last month, ripping his clothes off in a rage, screaming violently, after smoking a crystal-like drug. Five police officers are required to take him down as he exhibits superhuman strength. He is sweating, paranoid, delusional and hallucinating about seeing objects in front of him.

The behavior described above, known as “excited delirium”, is the result of emerging use of a new synthetic amphetamine-like stimulant that is similar to the compound contained in bath salts, also known as cathinones.

The drug is called “Flakka”, and if you are the parent of a teen, it’s important to educate yourself about this new designer drug.

Use of the drug have been reported primarily in Florida,

We are

# Flakka Strikes Again: Naked Florida Man Arrested Trying To Have Sex With A Tree

By Barbara Herman [@Parfumaniac](#) on April 15 2015 4:20 PM EDT

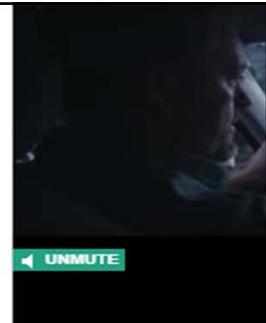
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Bath salt drugs have a similar chemical structure to Flakka. The primary ingredient in bath salts -- but not Flakka -- has been banned. [DEA](#)

Men are arrested every day for the mundane crimes of resisting arrest or even assaulting police. But an increase in Florida of the sorts of crimes 41-year-old Kenneth Crowder of Melbourne was arrested for on Friday -- being naked, proclaiming he was God and attempting to have sex with a tree -- can be traced to a growing South Florida phenomenon. Crowder was high on Flakka, also known as "gravel" or "\$5 insanity," a new synthetic street drug that's taken the place of so-called bath salts, to which it's chemically similar. (Bath salt drugs got the name because of their resemblance to Epsom salts.)



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## How can I provide SUM choices?

- *Ask the Participant*: “What do you think would be most useful or helpful at this point?”
- *Ask permission* to provide options: “Some people who have been in a similar situation have found a couple of things helpful – would you like to hear what they are?”
- Always let the participant know that they have the **final choice**



# USER FRIENDLY

**WE KNOW OUR PATIENTS WHO USE ALCOHOL, DRUGS, AND CIGARETTES VALUE THEIR HEALTH**  
**OUR GOAL IS TO PROVIDE EVERY PATIENT THE BEST MEDICAL CARE WE CAN**  
**WE'RE HERE TO HELP YOU, NOT JUDGE YOU**



This poster was supported by Centers for Disease Control (CDC) grant funding through the New York City Department of Health and Mental Hygiene to the Medical and Health Research Association, Inc. Its contents are solely the responsibility of the Harm Reduction Coalition and do not necessarily represent the official view of the funders.

Harm Reduction Coalition

Design: Better World Advertising

# Substance Use Management

(Bigg, 2001)

## SET (INDIVIDUAL) RELATED:

- Considering the personal benefits/purposes of use
- Exploring person's hopes/expectations about use and how this relates to the drug experience
- Considering alternatives to accomplishing the same ends desired through drug use
- Developing constructive personal rituals around drug use
- Exploring, discussing a persons experience of shame about drug use

# Substance Use Management

(Bigg, 2001)

## DRUG RELATED:

- Abstinence from one or more drugs and for a limited or open period of time
- Switching routes of administration
- Decreasing amount of drug used (heroin vs. crack cocaine)
- Decreasing frequency of use (crack cocaine vs. heroin)
- Decreasing concentration of drugs used
- Formal and informal drug substitution
- Considering risks and benefits of combining drugs
- Learning drug purification and drug purity testing measures
- Education and tools for safer drug use

# Substance Use Management

(Bigg, 2001)

## SETTING (ENVIRONMENT) RELATED:

- Separating drug use from other important tasks
- Creating a safer use environment by considering where, with whom, and when it occurs, reducing outside responsibilities when using, initiating safer purchase/possession practices
- Working to address affordability of use
- Considering mediation with others regarding drug-related problems
- Consider utility of sobriety support groups
- Learning about overdose prevention
- Developing a relationship with a respectful, knowledgeable health care provider
- Learning about legal issues/risks related to drug use

# Substance Use Management

(Bigg, 2001)

## OTHER:

- Share and discuss alternative models of addiction
- Share and discuss short- and long-term benefits and negative effects of drug use
- Share and discuss all forms and types of abstinence
- Be mindful and attentive to nutritional health
- Share and discuss Responsible Drug Use...