

# HARM REDUCTION IN HEALING TO WELLNESS COURT

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# What is Harm Reduction?

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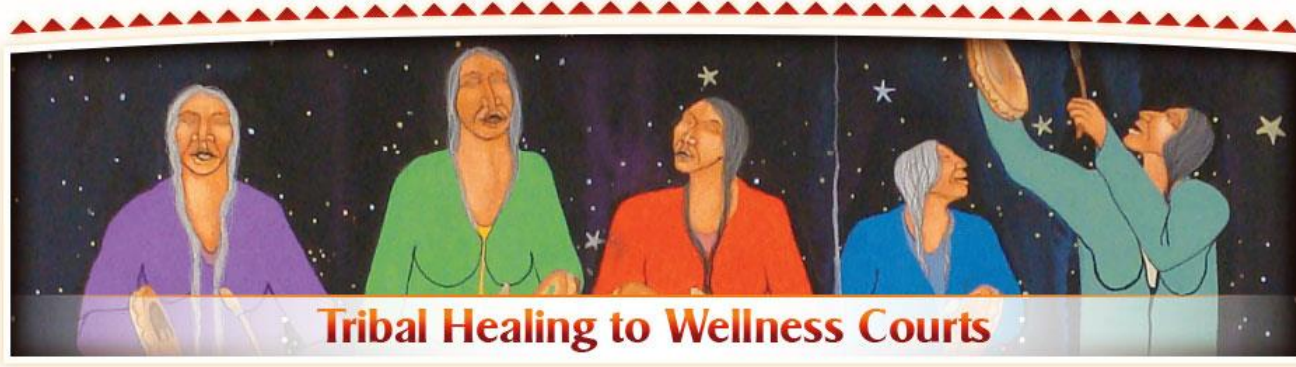
## TYPICAL "HOUSING READINESS"



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## HOUSING FIRST





## Tribal Healing to Wellness Courts





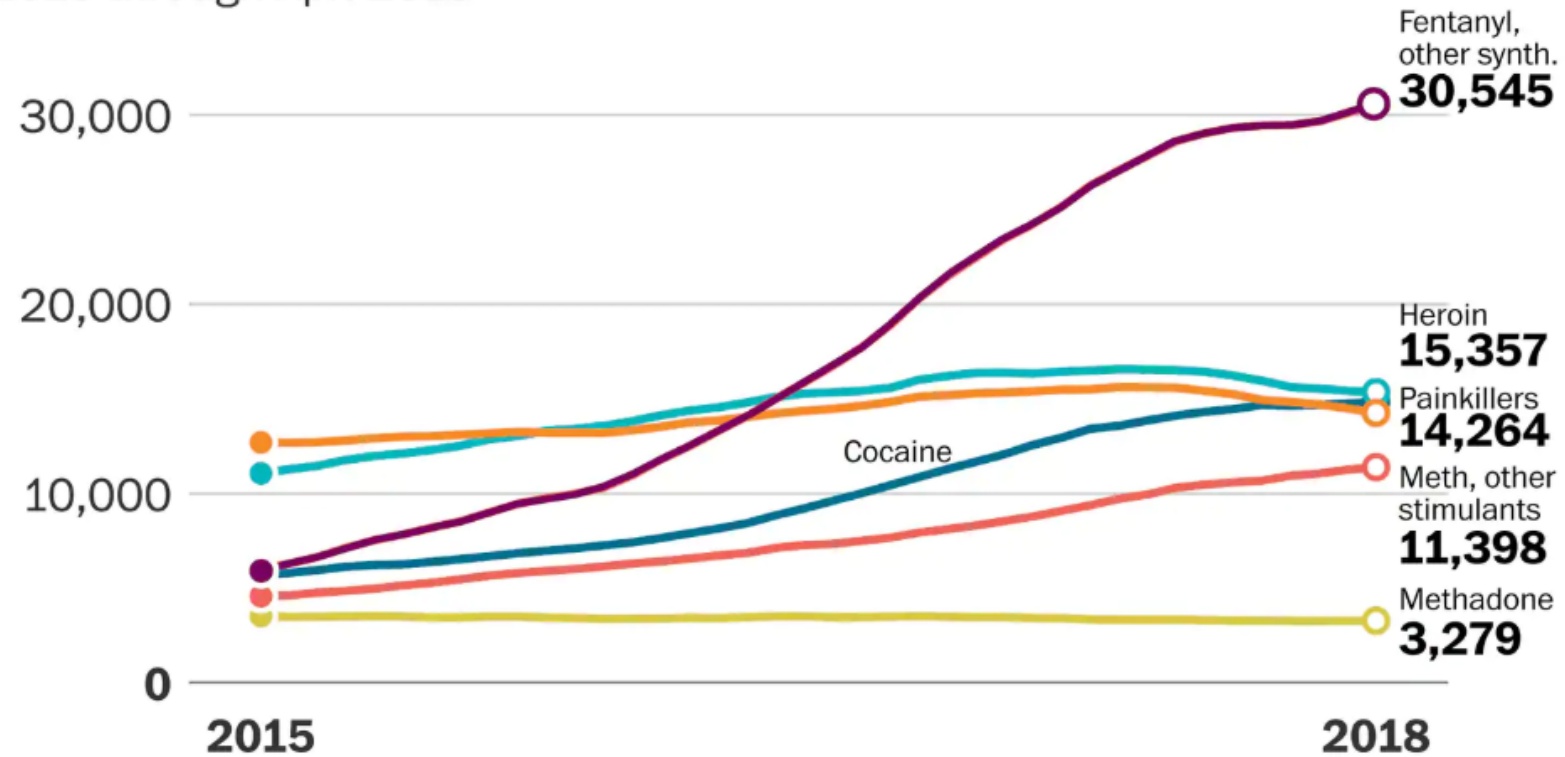


Why Harm  
Reduction?



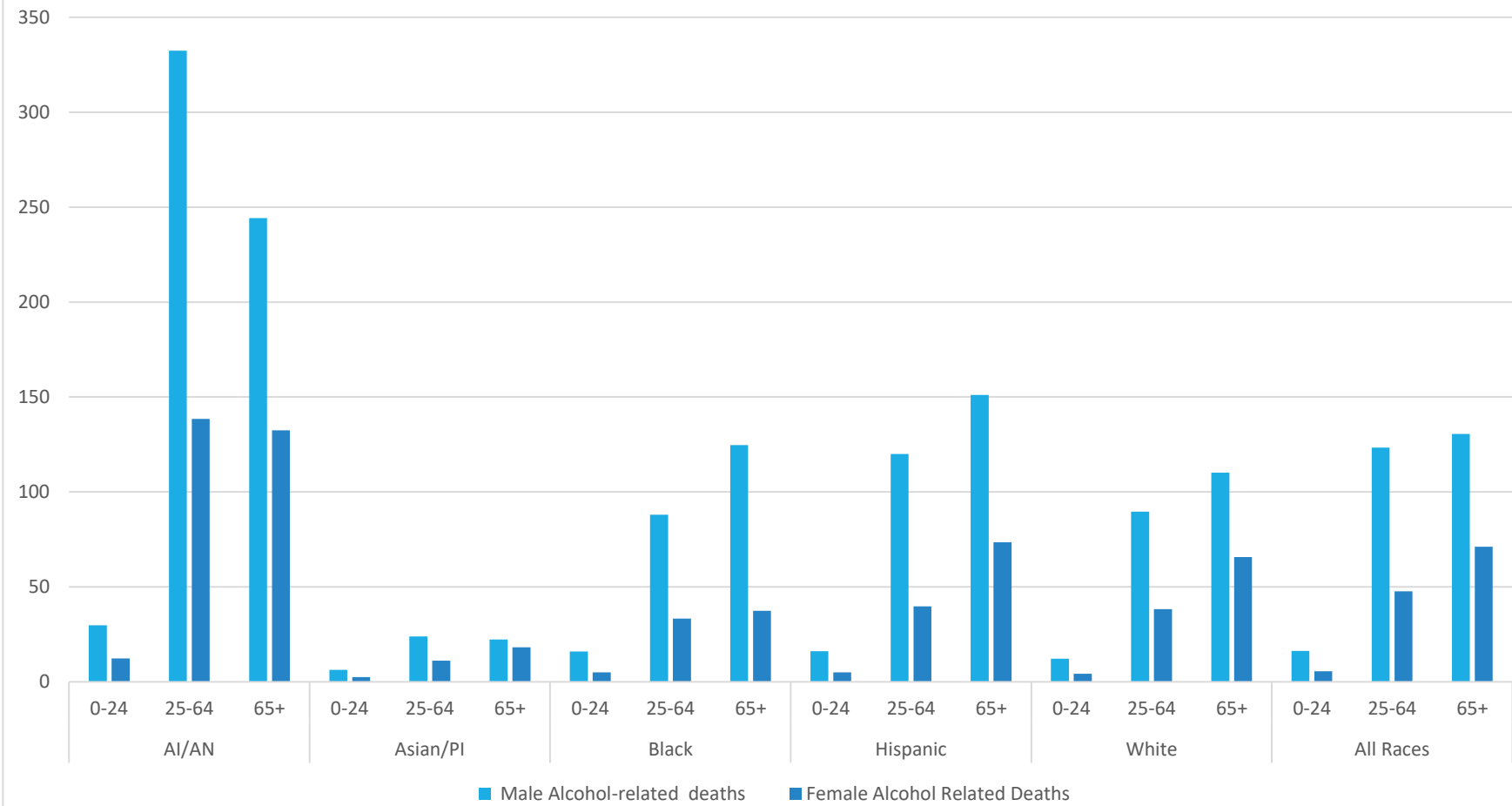
## Fentanyl deaths continue to rise, but heroin, prescription painkillers on the decline

Estimated overdose deaths in preceding 12 months, Jan. 2015 through Apr. 2018



CDC provisional data November 2018

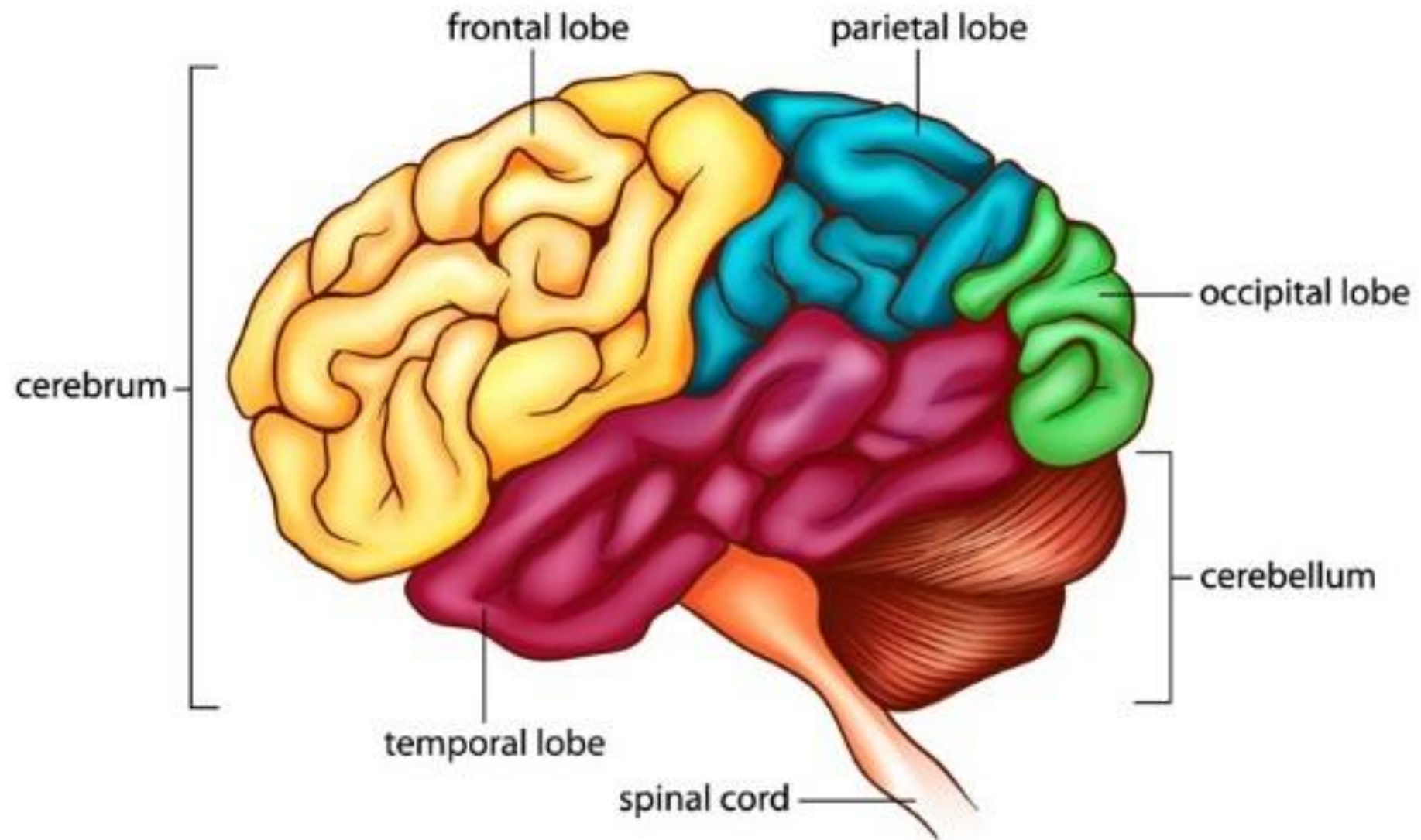
Alcohol-related Deaths NM 2012-2016  
By Gender, Age, and Race/Ethnicity





Substance misuse,  
trauma, and the Brain





# Substance Use Disorders (SUD)

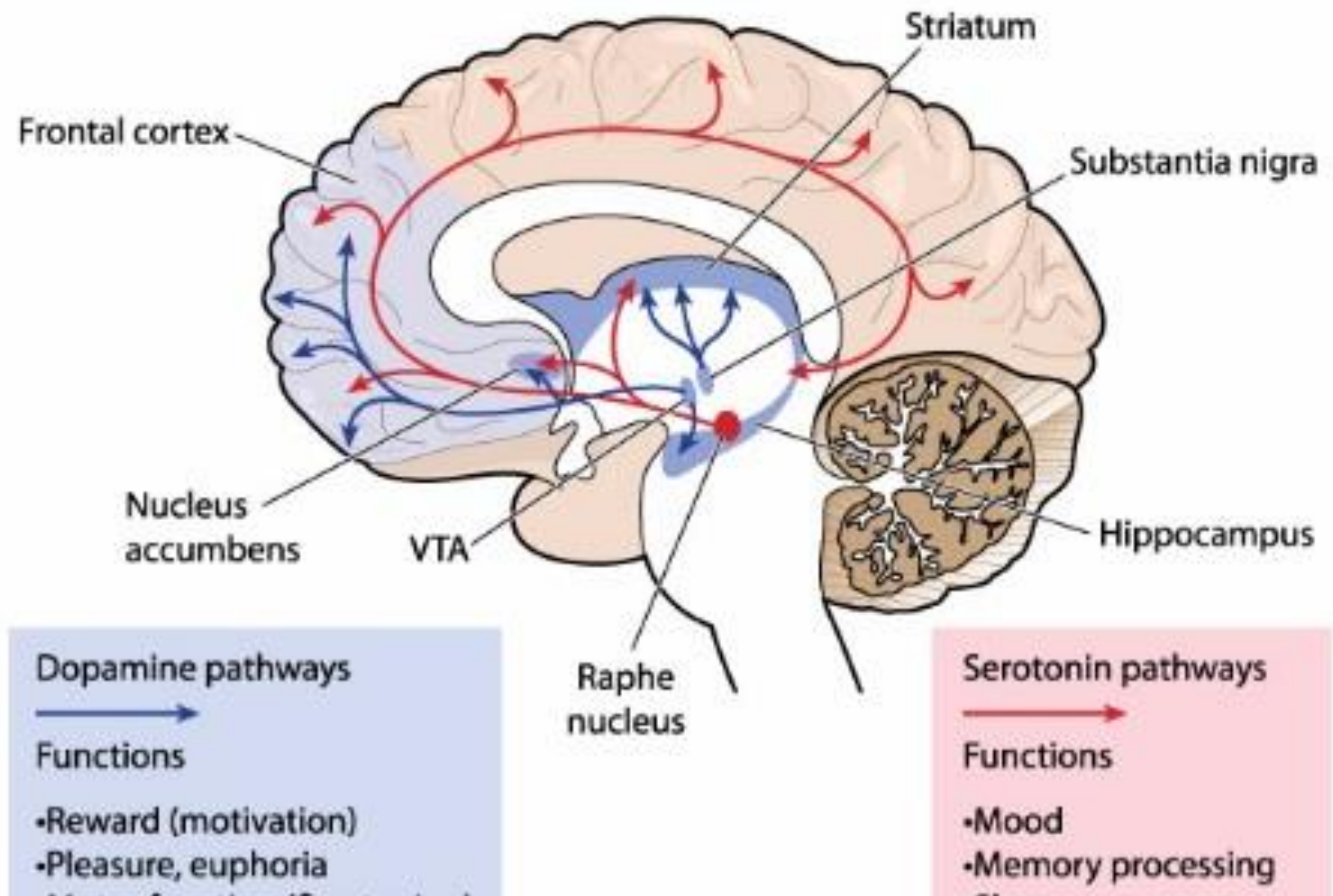


1. Impaired Self-control
2. Social Impairment
3. Risky Use
4. Pharmacologic dependence

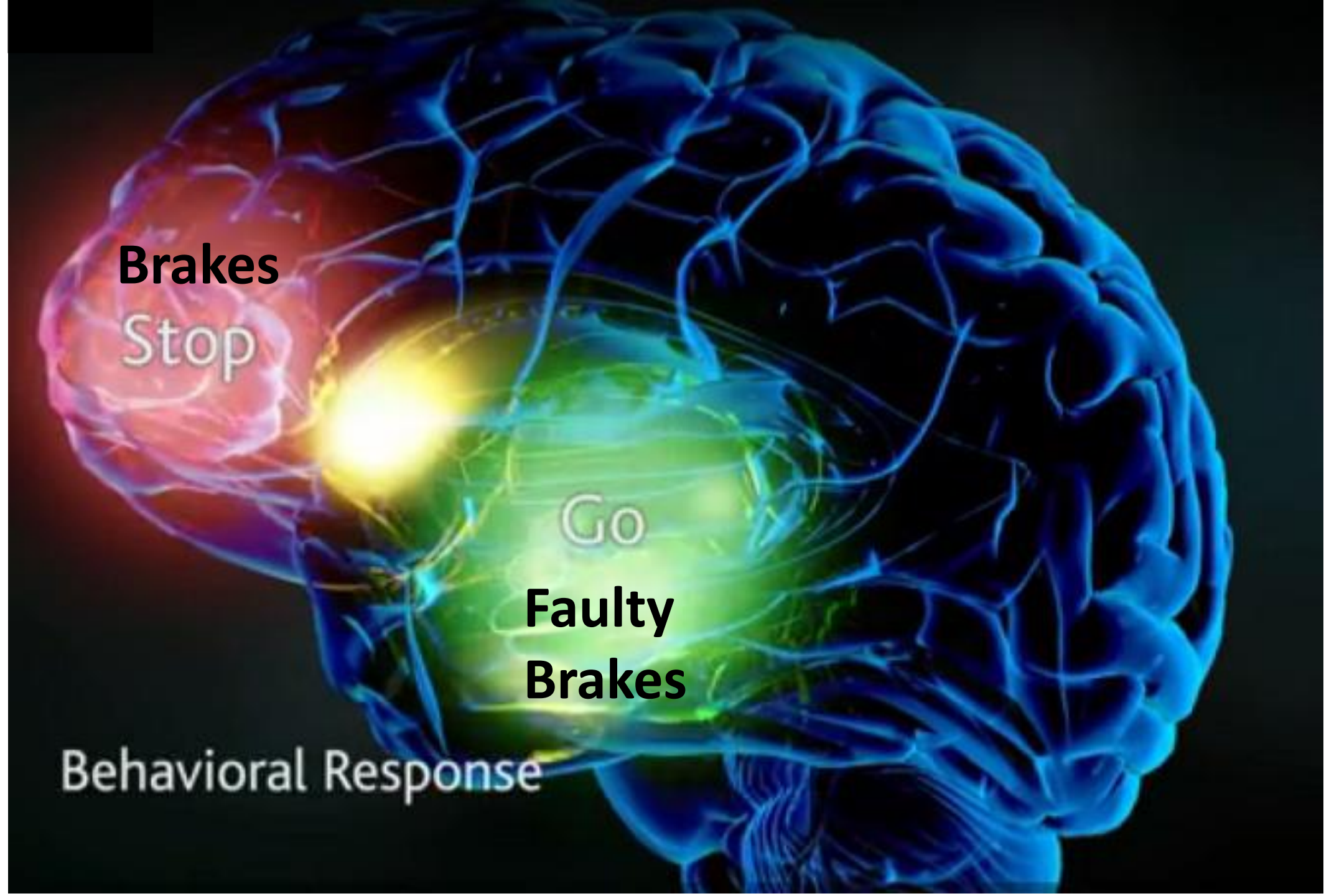
Mild, Moderate, Severe

(Illicit drugs and paraphernalia confiscated from Pojoaque Sober Living)

# Reward Pathway







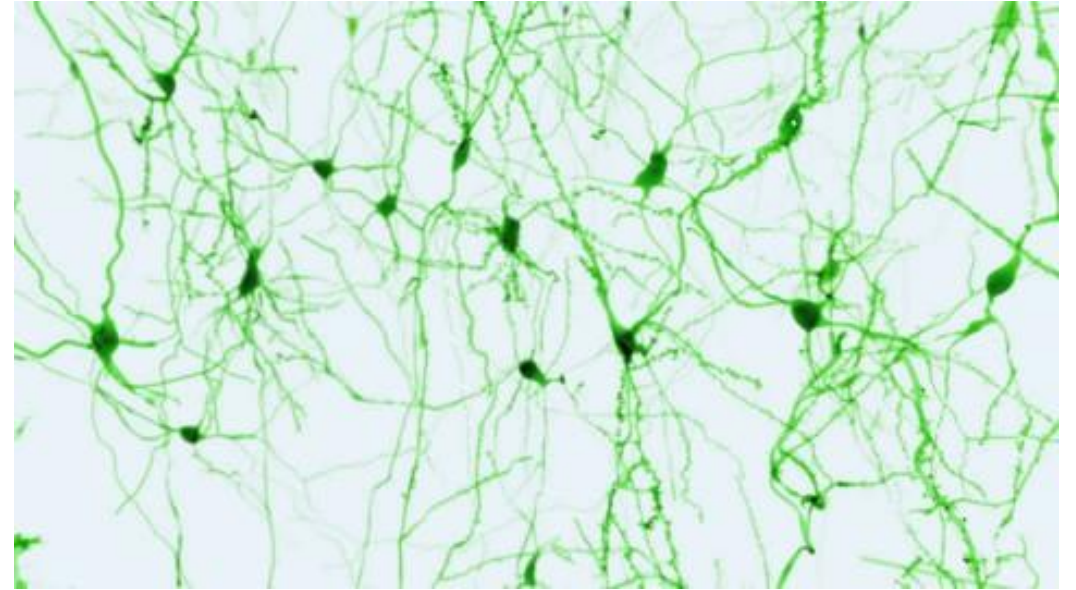
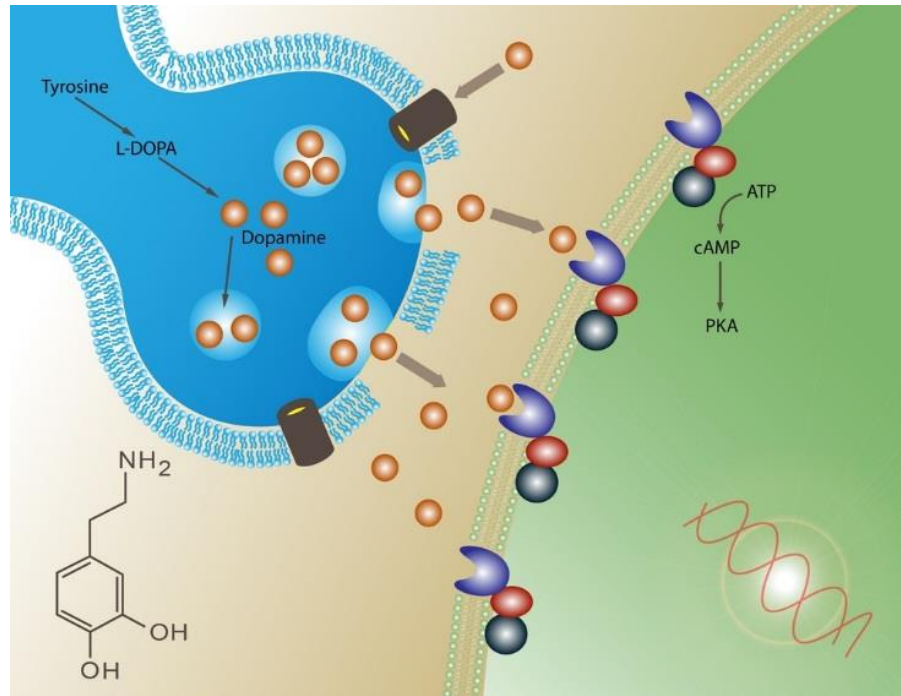
**Brakes**

Stop

Go

**Faulty  
Brakes**

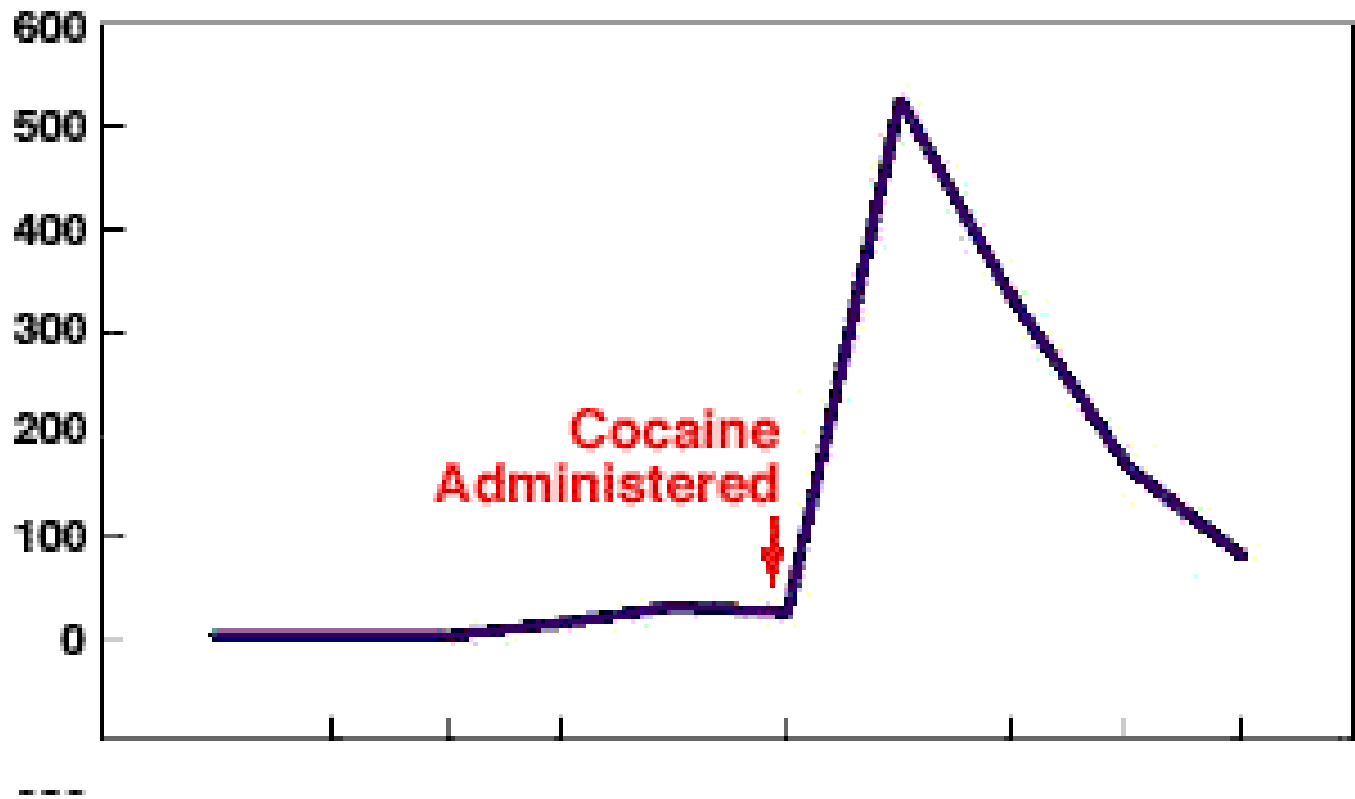
Behavioral Response



# Synapses

# Dopamine Spike

Percent increase in DA  
outside Neurons



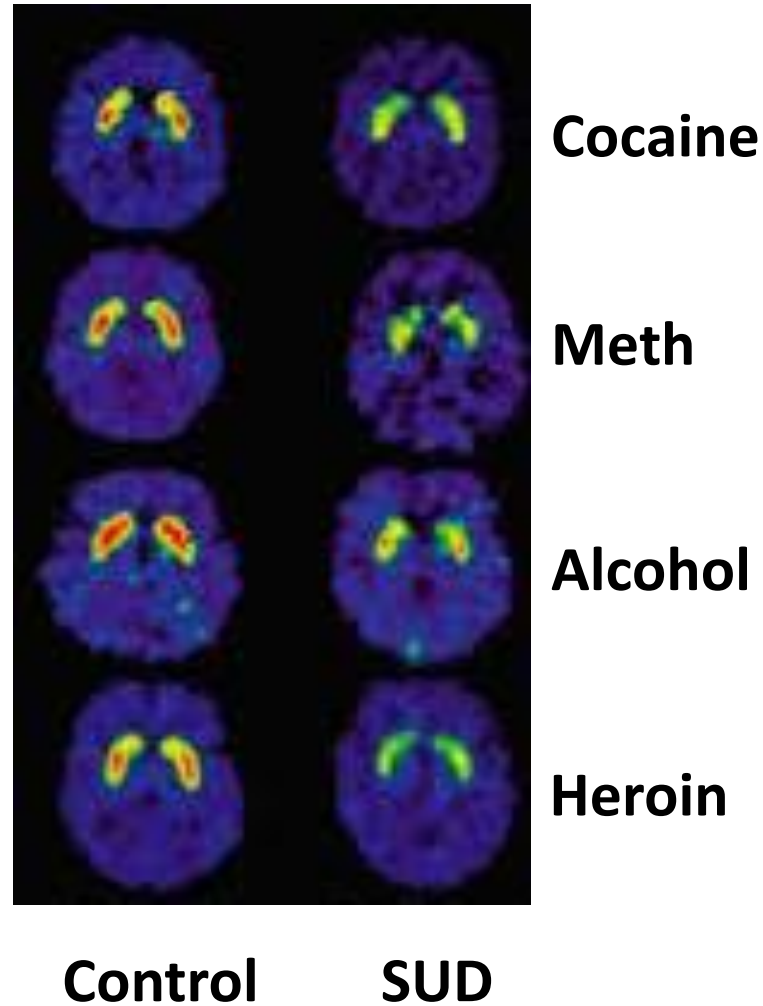


# Delivery methods

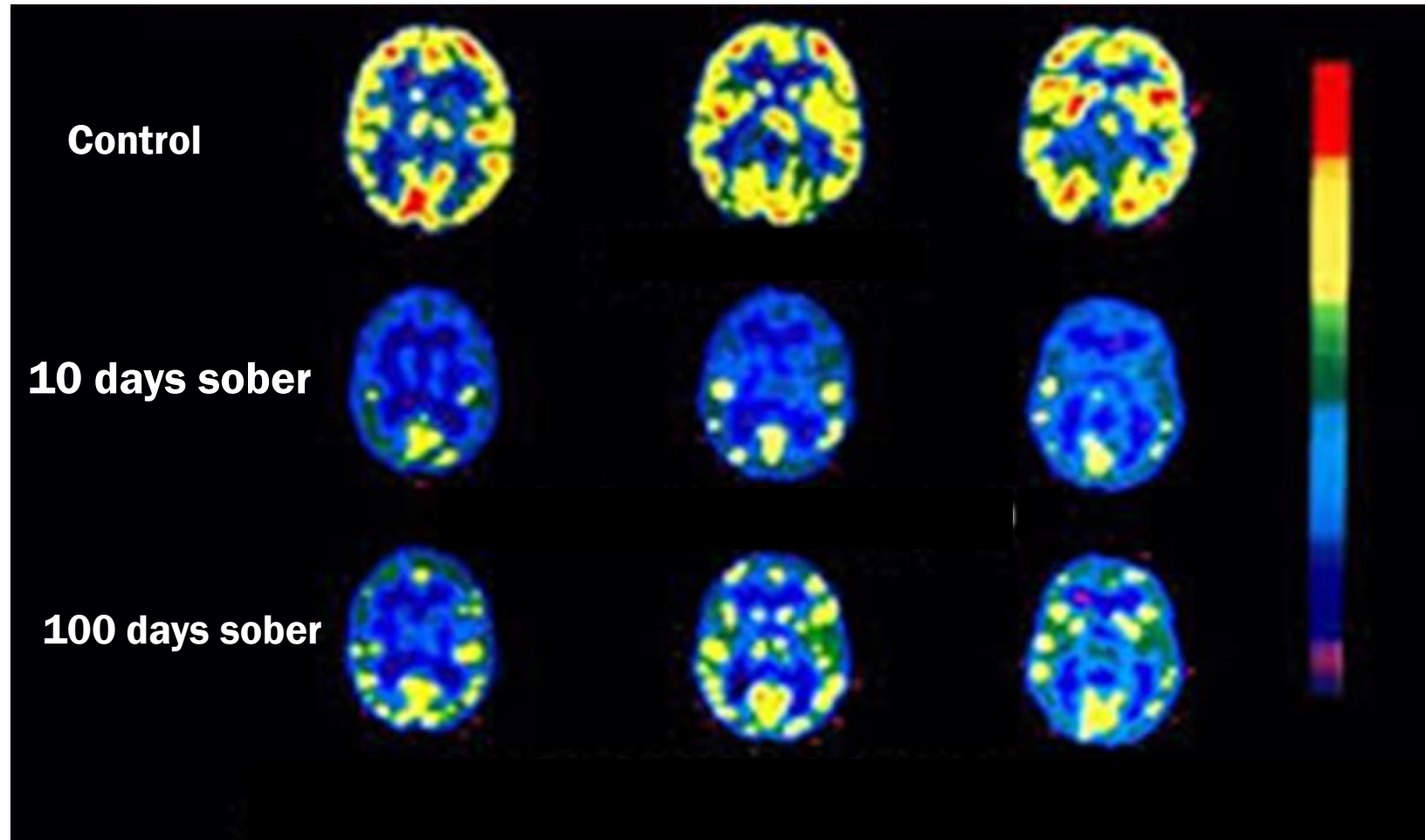
- Smoke
- Inject
- Snort
- Ingest



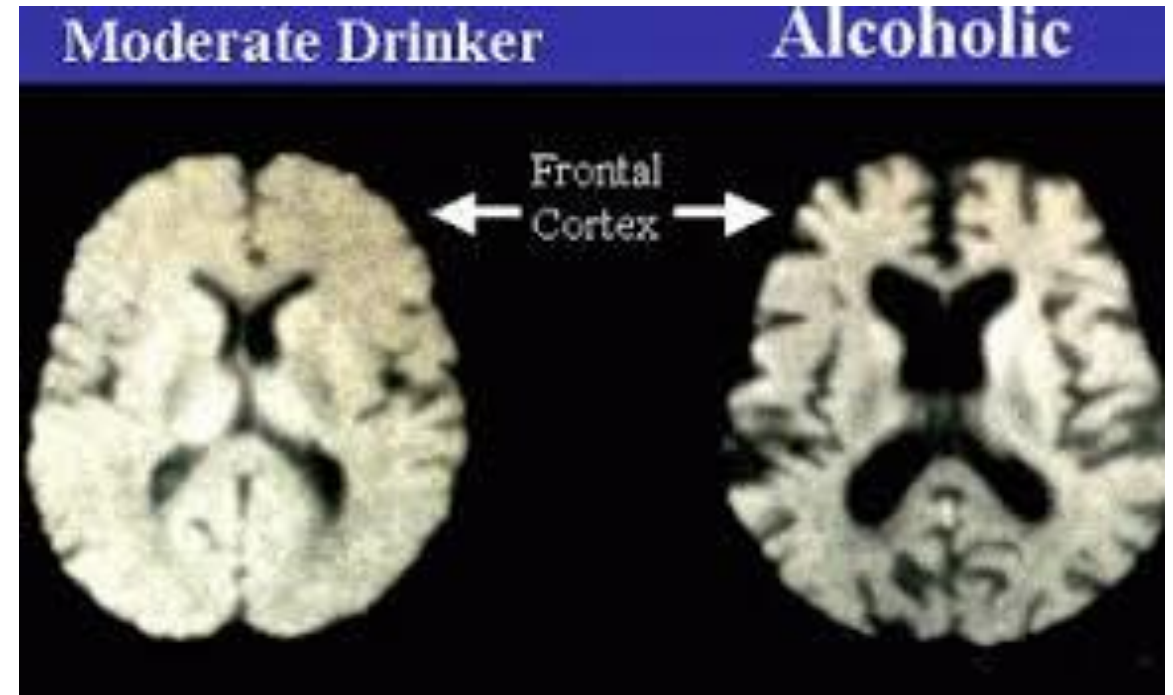
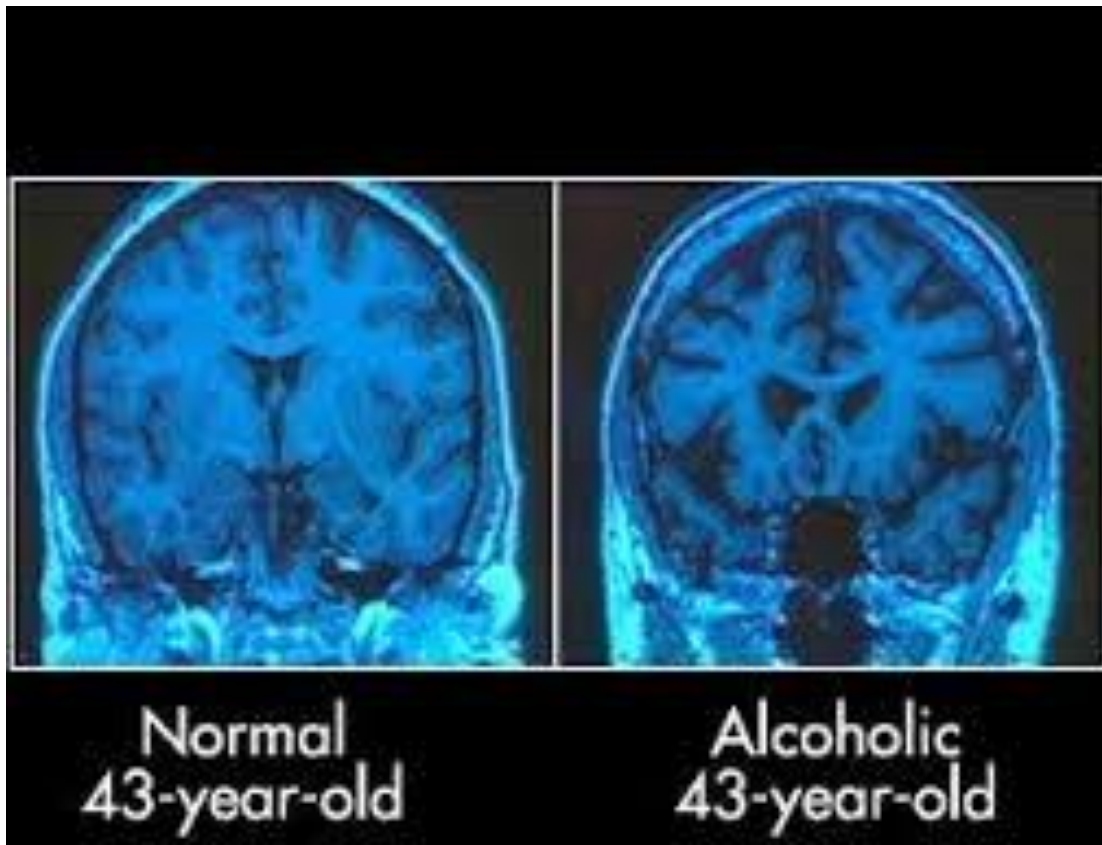
# D2 Receptors down regulate



# Glucose Metabolism and Cocaine



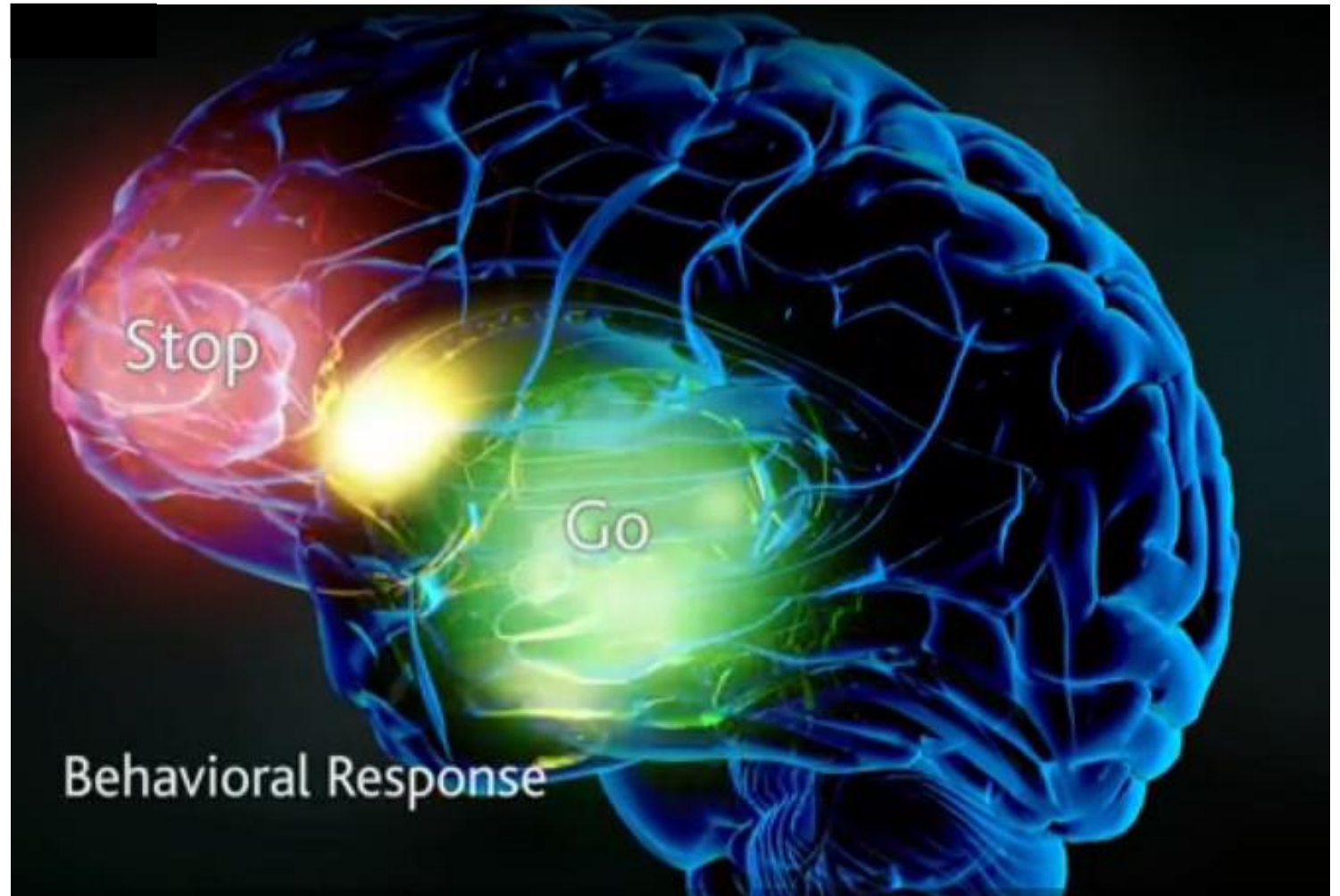




# Volume loss

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# Thought versus Emotion

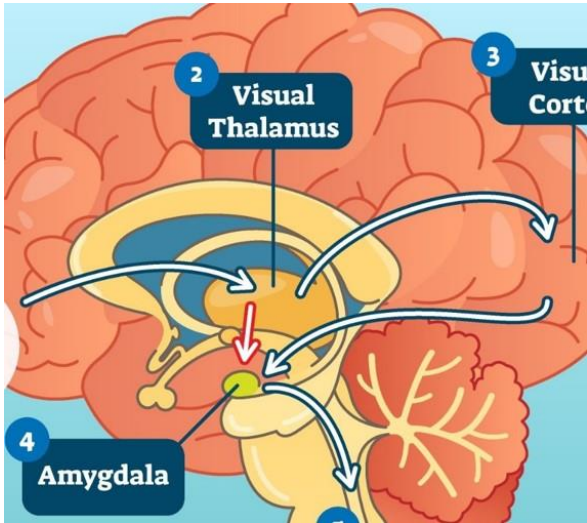


People are usually highly stressed when they come to court/seek services

- Withdrawing/thinking about drug
- Lack sleep
- Lots of anxiety about case
- Limbic system hyper-activated
- Frustrating behaviors/bad decisions
- Trauma response



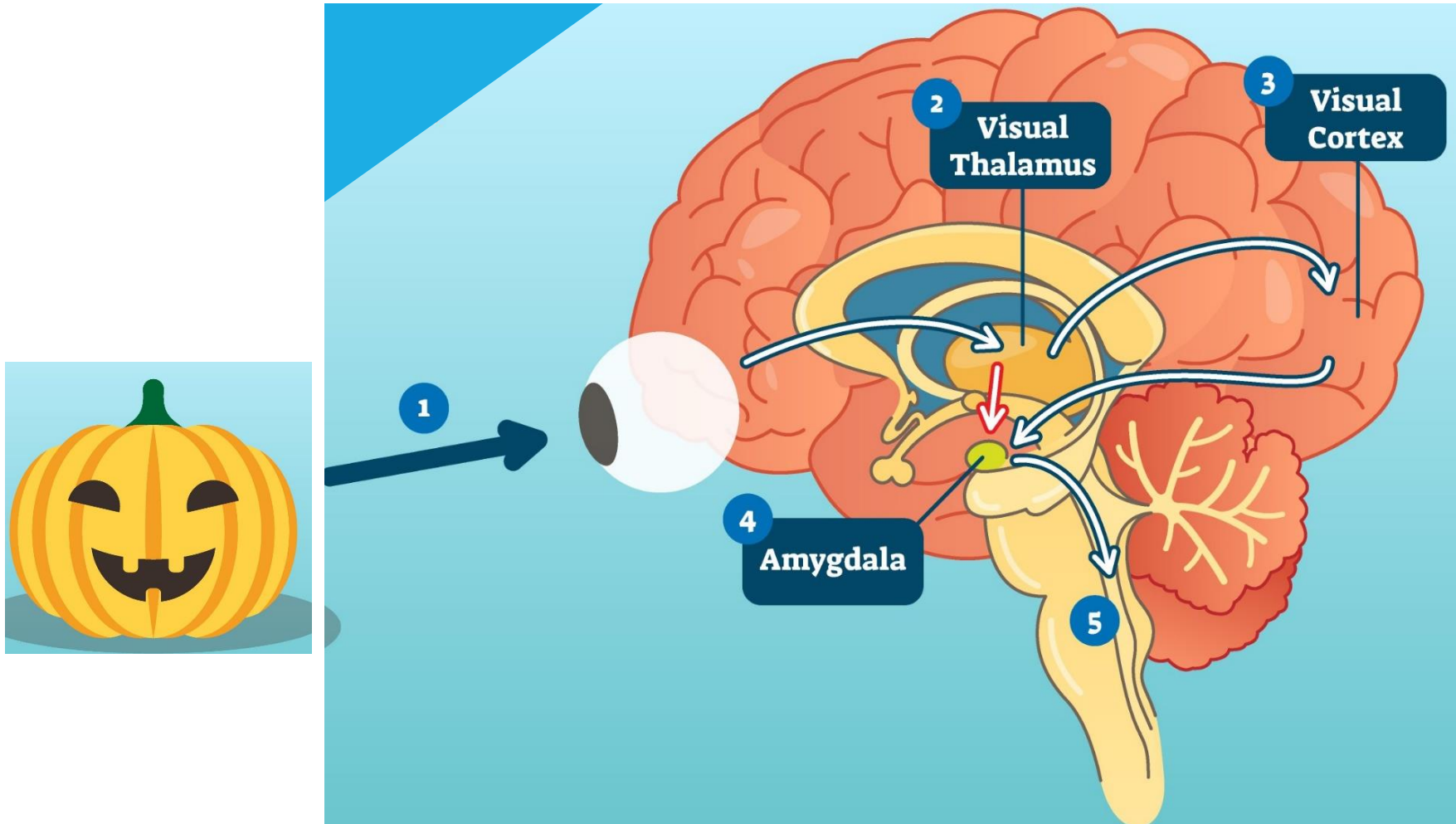




# Trauma

- A natural response to an unnatural circumstance
- Brain survival mode/self preservation
- Hypervigilance
- May cause people to act in unexpected ways

# Threat/Trauma Trigger

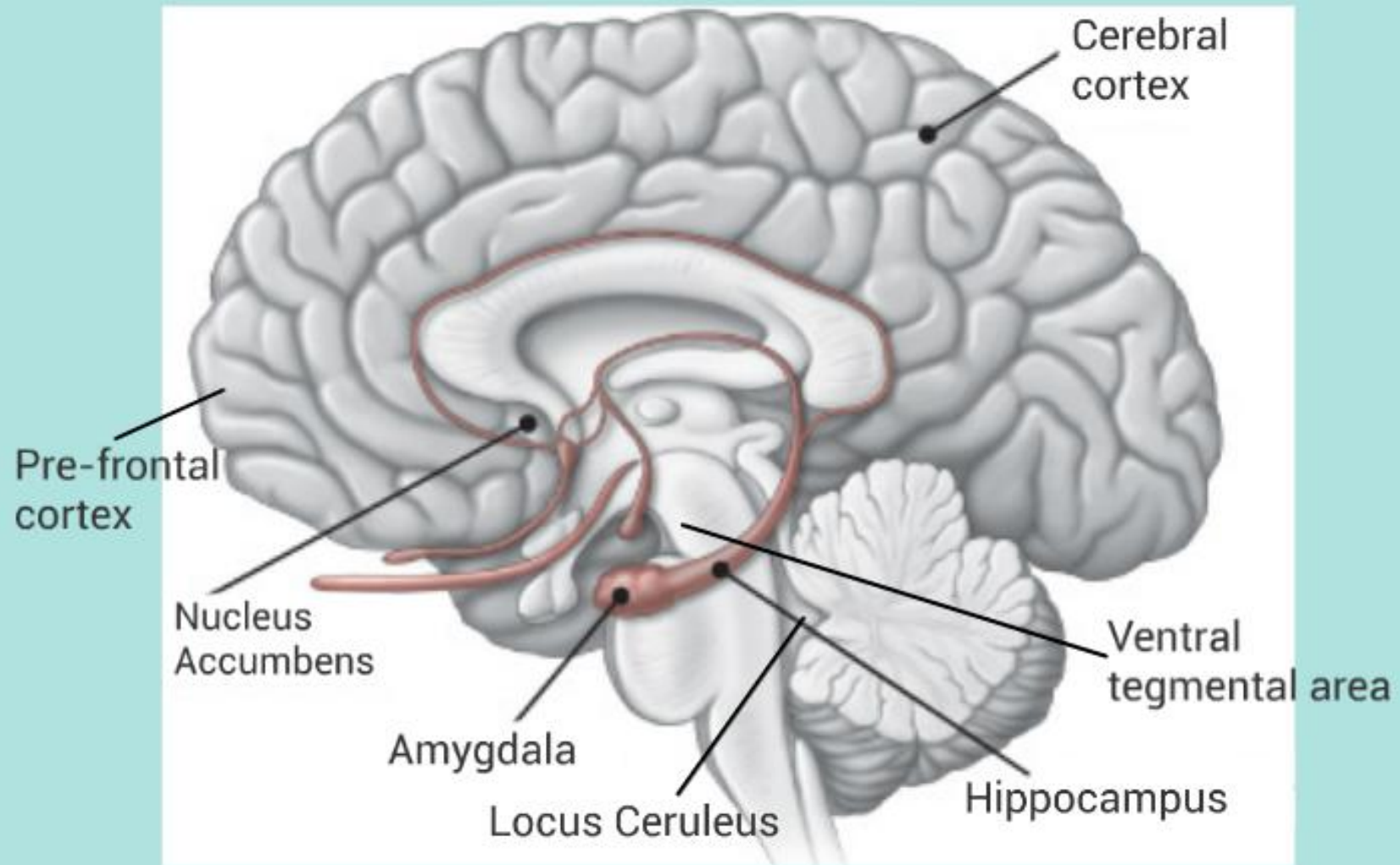


# Conditioned Response

- **Hippocampus:** memory
- **Amygdala:** emotions/conditioned response/craving
- **Pre-frontal cortex:** forethought/planning
- **Locus coeruleus:** alarm center







# Co-occurring Disorders

Common co-existing mental illness and substance-use disorder

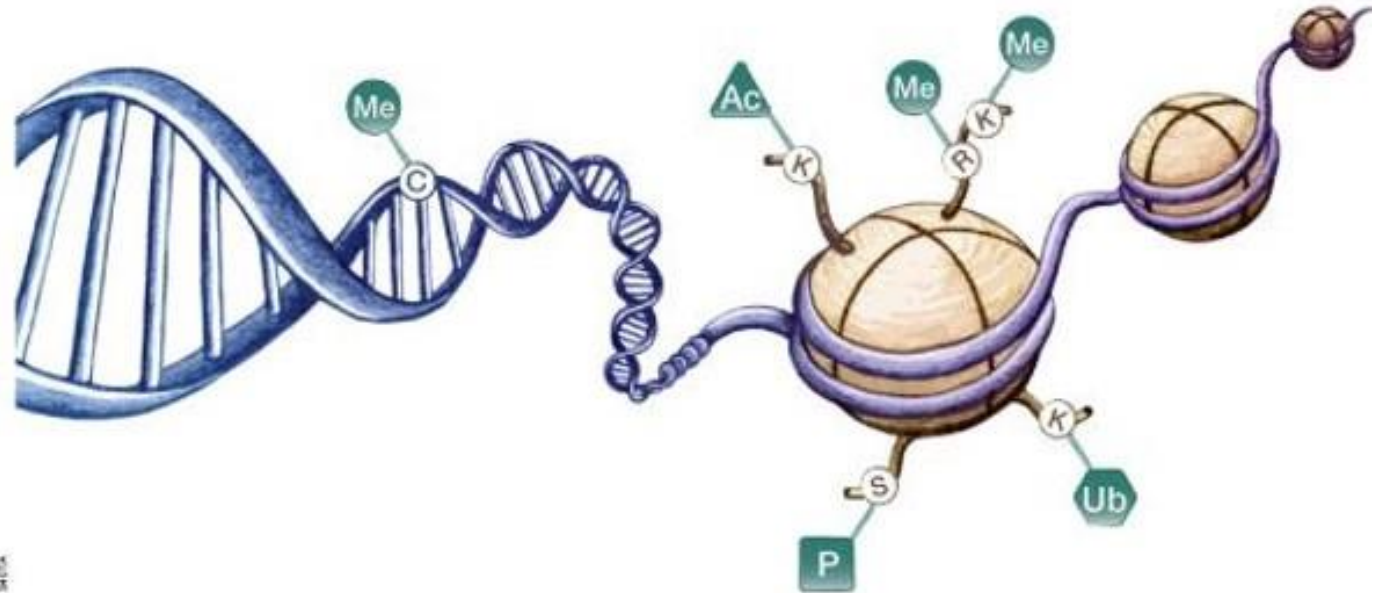
- Major depression
- PTSD
- Personality disorders
- Anxiety



# Epigenetics: Intergenerational Transfer of Risk

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Toxic/chronic stress/trauma  
remodels the brain



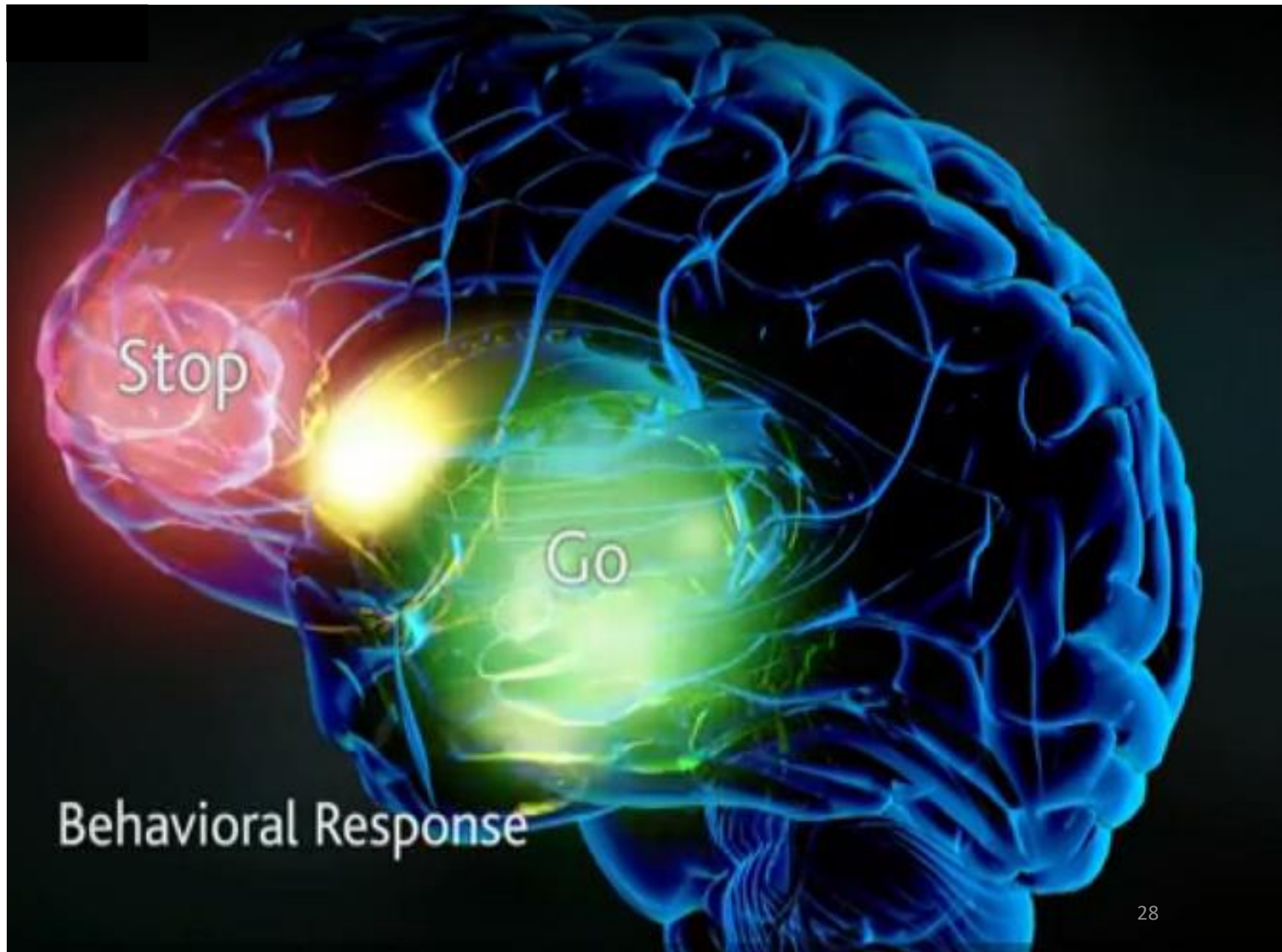


No single factor predicts whether a person will mis-use substances

- Genes
- Impulsivity
- Trauma
- Stress
- Mental Illness



# Thought versus Emotion





Risk Factors	Protective Factors
Aggressive behavior in childhood	Good self-control
Lack of parental supervision	Parental monitoring and support
Poor social skills	Positive relationships
Drug experimentation	Good grades
Availability of drugs at school	School anti-drug policies
Community poverty	Neighborhood resources

National Institute on Drug Abuse

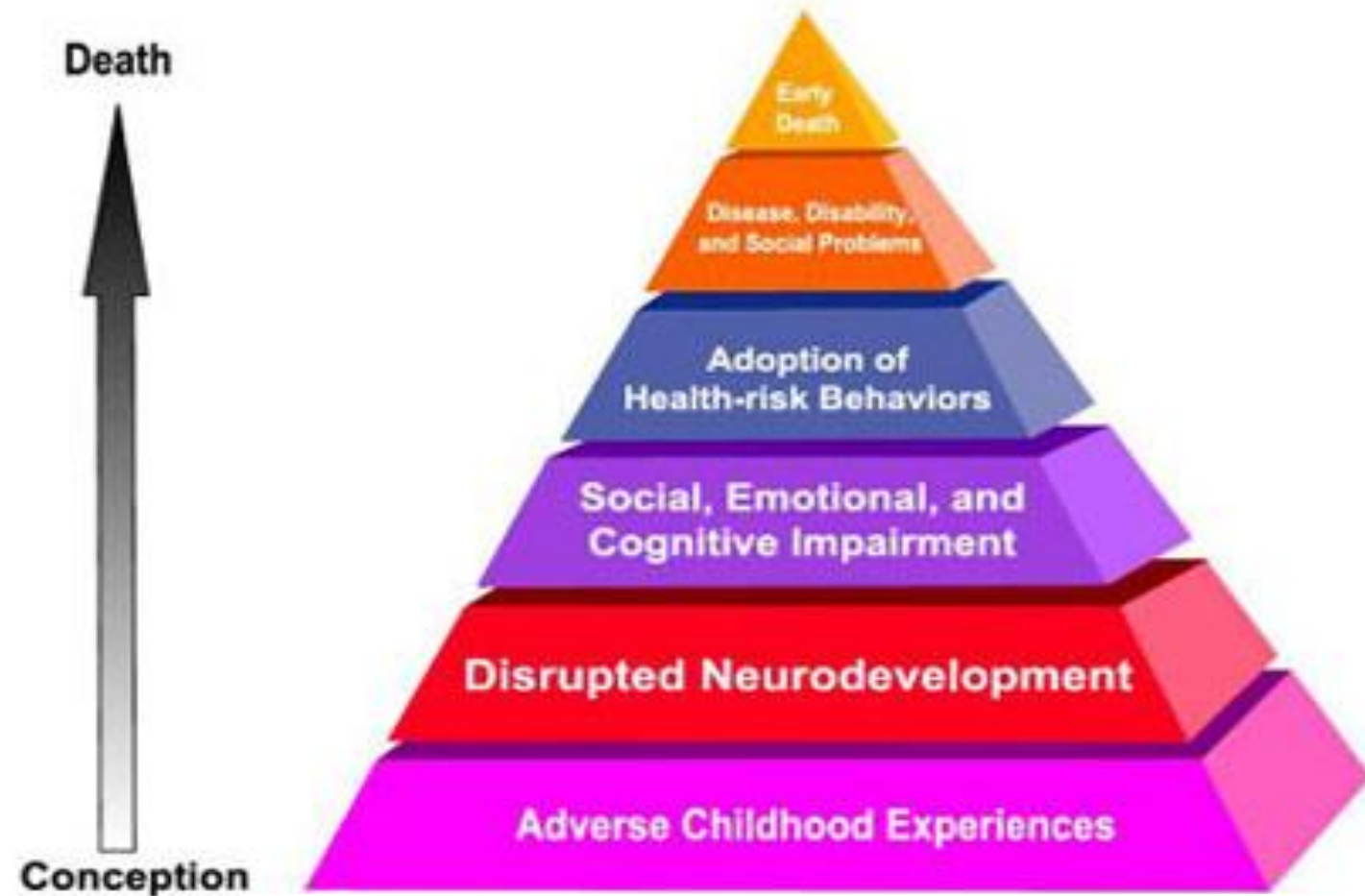






**Working with  
participants  
where they  
are at.**

Poverty, class, racism, social isolation, past trauma, sex-based trauma . . . affect both people's vulnerability to and capacity for effectively dealing with drug-related harm.



# Pojoaque SUD Programs: Guiding Principals

- Low barrier
- Trauma and healing responsive
- Non-judgmental
- Create environment of engagement







# Path to Wellness





# Pojoaque's Sober Living/Re-Entry Project

# ROAD Project

- Community Buy-In
- Low Barrier: including people who can't make it in wellness court
- Terminate participants only for violence, not for alcohol/drug use on its own





For people with opioid use disorder:  
Suboxone/methadone + counseling is standard of care





# Rat Park





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