

Impact of Harm Reduction Services in South Carolina: What's the harm in harm reduction?

Samantha Brummer, BS¹, Margie L. Stevens, PhD¹, CRC, Marc Burrows, BSW, CPSS²

 School of Medicine
Greenville

University of South Carolina School of Medicine Greenville¹, Challenges, Inc.², Greenville, South Carolina



INTRODUCTION

In South Carolina in 2017, there were 6,724 reported cases of newly confirmed or probable chronic hepatitis C virus (HCV), which is potentially an undercount¹. An example of harm reduction services is syringe exchange programs (SEPs), which help to reduce the spread of HIV and HCV infections among people who inject drugs². SEPs also typically provide other harm reduction services including but not limited to HIV/HCV testing, naloxone distribution and training, overdose education, condom distribution, and referrals for healthcare and addiction treatment services³.

The goal of harm reduction is to reduce any negative outcomes associated with drug use while employing the idea of “meeting people who use drugs ‘where they’re at’”⁴.

METHODS

Researchers will collect observational data as they observe harm reductionists in public spaces where supplies and services are offered to the general public. In the same space, survey data will be collected from consumers receiving harm reduction services. Additionally, this study will use Photovoice methodology, a participatory photographic research method that represents individual perspectives and lived experiences.

Author Email: sbrummer@email.sc.edu

Through gathering the anticipated results, the goal is to **discuss the findings with community leaders and healthcare providers and to educate the general public** as appropriate.



RESULTS

Anticipated results include determining the importance of harm reduction in South Carolina, the needs of the consumers receiving harm reduction services, and how harm reduction services impact the health of consumers.



DISCUSSION

By identifying the harm reduction and healthcare services that are not being provided but are needed by people who use drugs, this will help to implement better care and support for a vulnerable population in the Upstate of South Carolina and surrounding areas.

IRB Protocol #00112864

Funding provided by University of South Carolina School of Medicine Greenville

REFERENCES

1. South Carolina Institute of Medicine and Public Health. (2019). Addressing the Opioid Epidemic and Preventing the Spread of Infectious Disease Through the Provision of Syringe Services Programs.
2. McGinty, E. E., Barry, C. L., Stone, E. M., Niederdeppe, J., Kennedy-Hendricks, A., Linden, S., & Sherman, S. G. (2018). Public support for safe consumption sites and syringe services programs to combat the opioid epidemic. *Preventive medicine*, 111, 73-77.
3. Baker, L. S., Smith, W., Gulley, T., & Tomann, M. M. (2019). Community perceptions of comprehensive harm reduction programs and stigma towards people who inject drugs in rural Virginia. *Journal of community health*, 1-6.
4. National Harm Reduction Coalition. (n.d.). Principles of Harm Reduction. Retrieved June 22, 2021, from <https://harmreduction.org/about-us/principles-of-harm-reduction/>.

