



Implementing Harm Reduction Intervention in the Unhoused Population

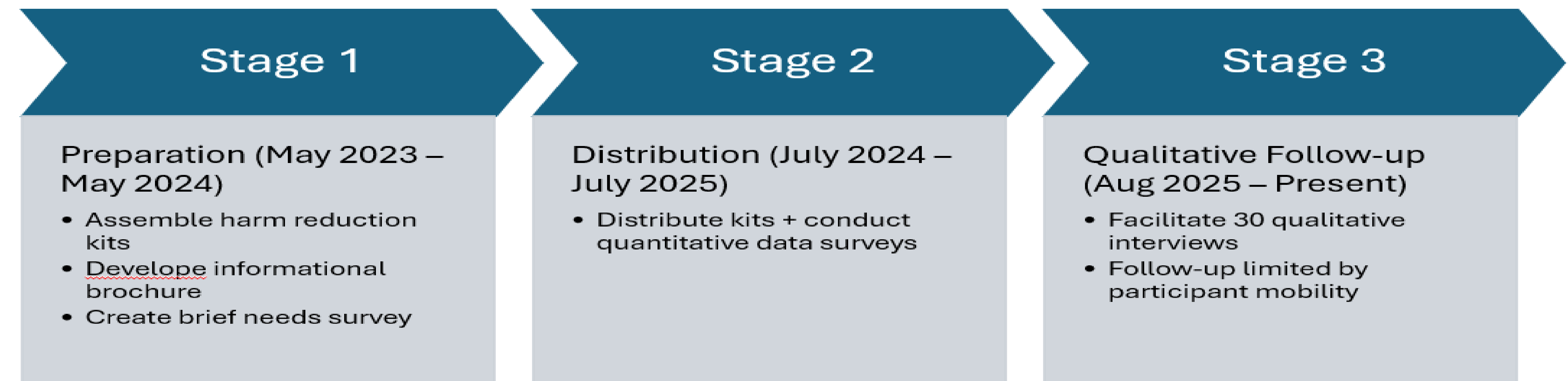


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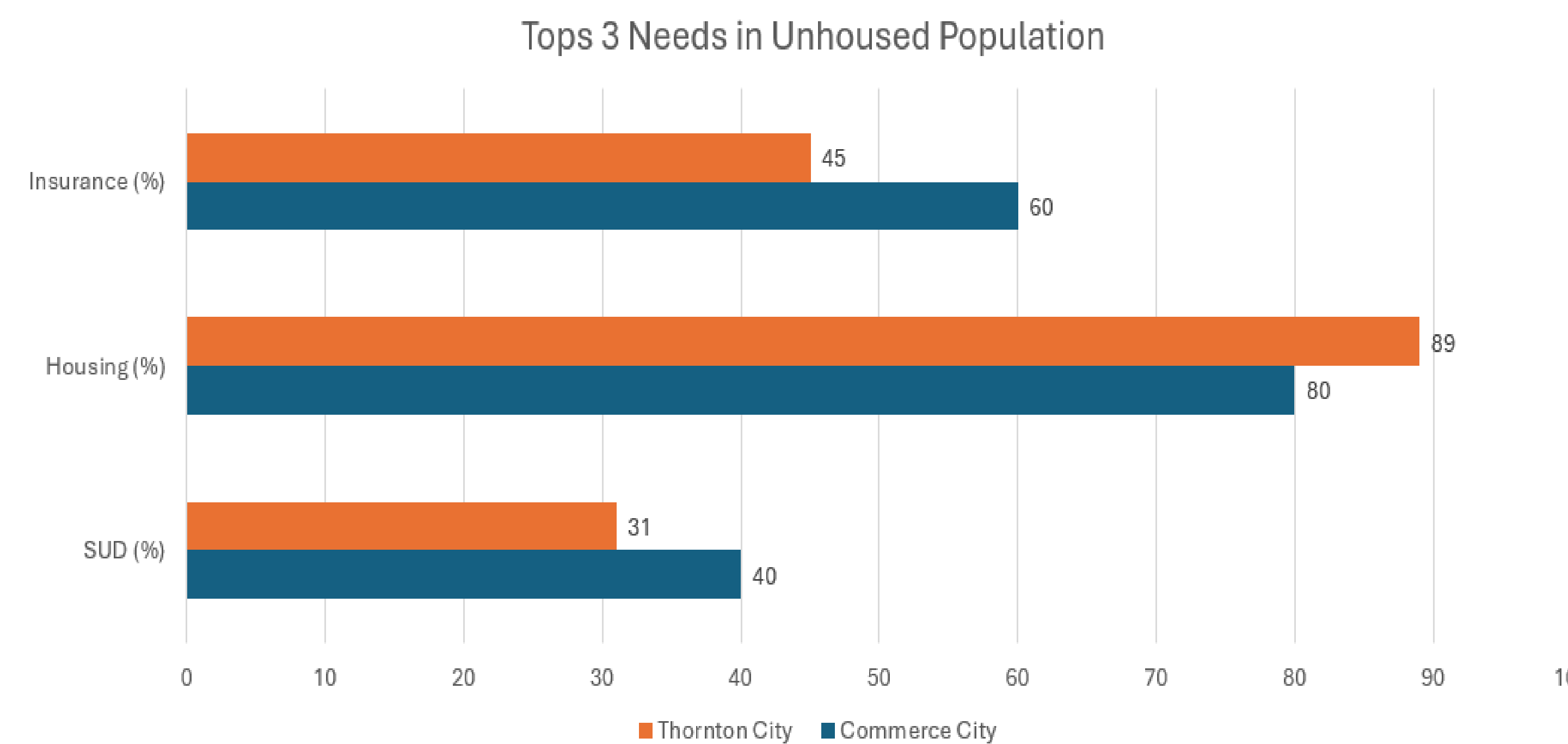
Background

- Housing is a powerful social determinant of health that affects mortality, morbidity, and healthcare utilization.
- People experiencing homelessness (PEH) have a markedly reduced life expectancy of roughly 30 years and limited access to healthcare, with only 10% having a primary care physician¹.
- From 2012-2017, factors such as crowding, unsanitary conditions, malnutrition, and limited healthcare access have contributed to the increase in the prevalence of HIV and Hepatitis C in PEH³.
- In 2023, the national Point-in-Time count estimated that 14,439 people in Colorado were experiencing homelessness⁴.
- PEH were significantly more likely to report alcohol misuse (44.4% vs. 30.5%), any drug use (40.8% vs. 18.8%), heroin use (16.7% vs. 3.8%), prescription opioid misuse (12.5% vs. 4.4%), and a history of opioid overdose (15.8% vs. 3.7%)⁶.
- Harm reduction is a community-driven public health strategy that includes prevention, risk reduction, and health promotion to reverse opioid overdoses and reduce deaths.
- Opioid education and naloxone/Narcan distribution (OEND) initiatives showed that a “single distribution site can decrease overdose deaths by 8.3%,” especially when sites are located in communities that have a higher risk for opioid overdose¹².
- CU Street Medicine (CUSM)** is an interdisciplinary student-run group that aim to enhance education around healthcare for PEH and brings social and medical outreach services to people experiencing homelessness in the Denver Metro Area via street and pop-up outreaches.

Methodology



Result



Conclusions

- Homelessness has steadily increased over the years, driven primarily by rising housing costs, growing income inequality, and more competition for employment opportunities.
- SUD, along with insurance and housing, were the top 3 needs of PEH identified during CUSM outreaches.
- This project provided a foundation for a centralized system that assessed a snapshot of the needs for PEH, where future interventions can continue to build upon.
- Future directions should aim to employ a larger and more representative samples in better sustained, community-engaged designs to better reflect the complexity of the unhoused population.

Research Purpose

- PEH are unaware and/or lack access to harm reduction interventions.
- While Narcan is highly effective, users fear legal repercussions despite rare arrests, limiting resource utilization.
- Homelessness and racial stigma increase psychological distress, worsen health, and decrease community engagement, underscoring the necessity of trauma-informed, culturally sensitive interventions.
- This project aims to:
 - Assess the current needs of PEH in the Denver Metro Area
 - Expand upon the current CUSM program to incorporate distributing harm reduction kits during outreaches
 - Provide informational brochure about community resources

Discussion

- Of the -- responses collected, --% of individuals from the Commerce City site and --% from the Thornton site identified SUD as one of their top 3 needs.
- Paper-based surveys promoted immediate engagement and reduced barriers such as having access to a mobile device/Internet/or technological proficiency.
- However, it remained difficult to facilitate qualitative interviews due to many factors, including the high mobility of this population and lack of willingness to engage due to existing mistrust.
- Additionally, recruitment and informational brochures were limited to English-speaking participants, restricting inclusion of linguistically diverse populations and potentially narrowing the representativeness of the findings.

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