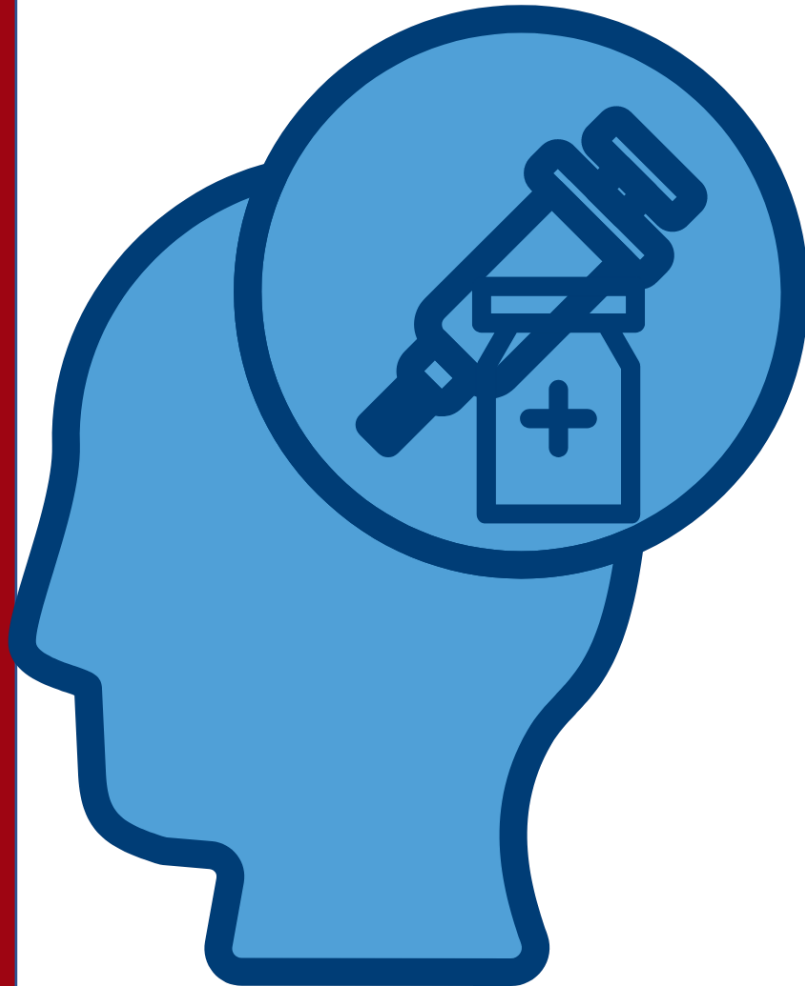


Brain Injury, Overdose & Harm Reduction

May 17, 2023
2:30-3:30 pm ET

2023 Webinar Series



NASHIA

Welcome!

Maria Crowley, MA, CRC

Director, Professional Development
NASHIA
Organizer

Anastasia Edmonston, MS, CRC

TBI Partner Grant Coordinator
Maryland Behavioral Health Administration
Moderator



NASHIA

Webinar Information

- Problems?
 - Send a chat to the moderator
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 - Please use the Q and A feature
- Closed Captioning
 - Available at the bottom of the viewing window

About NASHIA

Nonprofit organization created to assist State government in promoting partnerships and building systems to meet the needs of individuals with brain injury and their families.





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- Person-Centered Thinking
- Public Policy

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Today's Webinar

- Handouts and CEs/Certificate of Attendance:
 - Available on NASHIA's site after the webinar
 - Member needing Certificate of Attendance,
Contact: hcushen@nashia.org
- Archived Recording:
 - nashia.org > Training U > Trainings On Demand

Today's Presenter:

Laura Bartolomei-Hill
LCSW-C, Social Worker
Maryland Behavioral
Health Administration



NASHIA



Overdose, Brain Injury, and Harm Reducton

NASHIA 05/17/2023

Laura Bartolomei-Hill, LCSW-C



About me – Laura (she/her)

- Social Worker in Baltimore City: Assertive Community Treatment (ACT), substance use services, harm reduction outreach and syringe services, and emergency department psychiatric assessments
- Trainer/consultant on the Behavioral Health Administration's Federal Traumatic Brain Injury Partner Grant
- On the Advisory Board for the Baltimore Harm Reduction Coalition
- Personal history of brain injury and outpatient TBI treatment

Agenda

- Define and connect overdose, opioids, and brain injury.
- Introduce harm reduction strategies and principles.
- Introduce OPS intervention and consider supervised drug consumption as evidence-based practice. Make connections between overdose prevention and brain injury prevention.
- Discuss impact of stigma and criminalization

Getting on the same page

Overdose and Brain Injury Definitions

Opioid Overdose

- A negative health event directly caused by taking too much of an amount of an opioid or opioids, alone or in combination with other substances.
- Opioids can suppress breathe.
- Suppressed respiration can lead to to unconsciousness, coma, brain injury, and death
- Surviving an overdose depends on restoring respiratory function and getting enough oxygen (naloxone, rescue breathing)

Naloxone

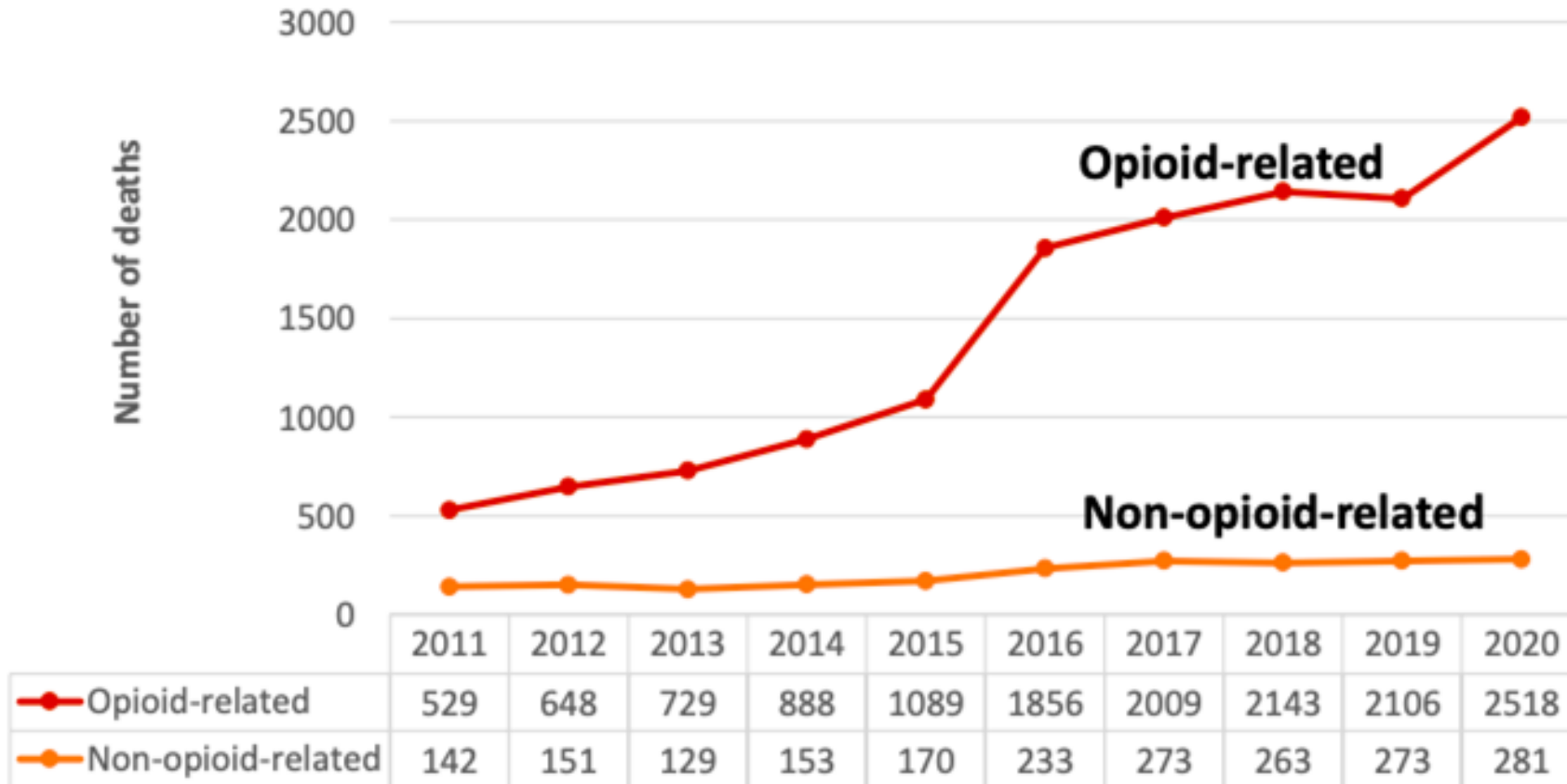
- Safe medication used to reverse opioid overdoses
- Available in intramuscular, intranasal, and intravenous formulations.
- Available to community members, individuals who use drugs, family members, health care providers, etc through pharmacies and through Overdose Response Programs (ORPs).
- Most effective when individuals who use drugs are prioritized in outreach efforts

Overdose During the Pandemic

Drug-related deaths were increasing before the pandemic. The pandemic has complicated the response and likely contributed to a worsening crisis. *Overdose deaths increased by over 15% in 2020 over 2019.*

- Disruptions in in-person treatment, Narcotics Anonymous /Alcoholics Anonymous meetings, and other medical and mental health programs
- Worsening life stressors, including housing, employment, childcare, food, access to health insurance and medical care
- Social distancing means that people are alone more often and fewer people may be around to respond to an overdose
- Restricted migration/trade patterns have made the drug supply less predictable

Figure 6. Total Number of Opioid* and Non-Opioid- Related Deaths Occurring in Maryland, 2011-2020.



*Total opioids include heroin, prescription opioids, and illicit forms of fentanyl.

Types of brain injury

Traumatic Brain Injury (TBI) - Defined

TBI is an insult to the brain caused by an external physical force, such as a: banging your head, fall, motor vehicle accident, assault, sports related incident.

Acquired Brain Injury (ABI) - Defined

ABI is an insult to the brain that has occurred after birth, such as: TBI, stroke, near suffocation, infections in the brain, anoxia, and opioid overdose(s)

Both types of brain injury can be chronic, and get worse with age.

Overdose as a brain injury

- The frontal lobe is highly susceptible to brain hypoxia (reduced oxygen)
- Frontal lobe damage leads to potential loss of executive functions which are often required to participate, engage, and thrive in treatment
- As a result of frontal lobe damage, survivors of overdose may have issues with noncompliance, poor follow through, or a lack of engagement
- Decreased ability to participate and engage in treatment puts these individuals at increased risk for relapse

Nonfatal overdose

- In the past 365 days, there were 211k reported nonfatal overdoses, according to the White House dashboard.
- This does not include the number of people who are revived in the community by neighbors/family/friends or first responders.
- Few of these individuals are screened for brain injury or referred to brain injury services.

Common Challenges After Brain Injury

COGNITIVE/THINKING	EMOTIONAL	PHYSICAL
Memory and Attention	Depression and anxiety	Unsteady gait, poor coordination
Comprehension of what is being read or heard	Reduced or lack of awareness of functional impact of injury imposed challenges	Slow or slurred speech
Communicating thoughts verbally or in writing	Disinhibition and impulsivity	Sensitivity to noise or light
Problem solving difficulties, impulse control and difficulty organizing thoughts, words and actions (aka executive skills)	Reduced frustration tolerance and irritability	Fatigue

Cumulative impact

Cumulative impact - A subsequent brain injury can take longer to resolve and the individual may experience more severe symptoms.

- *What does this mean for people who overdose multiple times? Or who regularly have “near” overdoses, which can involve oxygen deprivation to the brain?*

Non-overdose health care considerations

- Injection drug use without sterile equipment/space can contribute to development of abscesses and wounds.
- Chronic wound care can require a high burden of health care management - can be complicated and long-term, with significant risks if done inadequately.
- Aduterants, such as xylazine, can also be linked to increased prevalence of ulcers and soft tissue wounds.

Getting on the same page

Harm Reduction

Harm Reduction

Harm reduction is a philosophy and set of practices applied to promote safety associated with culturally stigmatized behaviors, such as drug use and sex work.

Harm reduction is practiced on two levels: the **interpersonal**, where we change our routines, share suggestions, and gather and distribute tools for increasing safety, and the **institutional**, where we change policy and systems to support safety and decrease violence and marginalization.

Source: Baltimore Harm Reduction Coalition

Harm Reduction on the interpersonal level

Gather and distribute resources and supplies to increase individual safety. Examples include:

- Naloxone distribution
- Syringe service programs
- Safer sex kits
- Fentanyl test strips
- Overdose prevention sites



Harm Reduction on the Institutional level

Change policies and organizational practices to decrease violence and create a safer, less harmful environment. Examples include:

- Advocating for increased access to quality health care, including behavioral health, for the entire community
- Re-considering severity of punishments for individual behaviors, including drug use and sex work
- Assessing how your agency or organization may perpetuate stigma and make an action plan to change the practices and culture

Accessing health care with history of drug use

- Stigma related to history of addiction from health care providers
 - Concerns are dismissed or attributed to “drug seeking” behavior
 - Statements from providers, such as “you deserve this.”
 - Poor management of withdrawal or continuation of medication-assisted treatment
 - Feelings of being dismissed or judged
- Stigma related to drug use is held up through criminalization

Academic Detailing (adapted)

- Academic detailing is peer-to-peer outreach and support for and between physicians for the purposes of improving patient care and prescribing practices.
 - Example: Maryland's Opioid Academic Detailing project provides 1:1 personalized education to providers on opioid prescribing and overdose prevention.
- How many people have attended a training about an amazing intervention and said, “this would never work for my program.”
- Connects providers directly for peer support for the purposes of improving care, problem-solving, and sharing ideas.

Overdose Prevention Sites

Overdose Prevention Sites (OPS)

- Overdose Prevention Sites are safe and private places to consume drugs and receive life-saving interventions in case of overdose, access sterile equipment, and receive referrals for health care services, including mental health care.
- There are over 200 overdose prevention sites in 14 countries, including in the United States.
- The first public site in the US opened in December 2021 in NYC.

OPS Outcomes from literature

- Increased connection to substance use treatment programs
- Prevention of overdose deaths
- Connections to medical providers/advocates for support when seeking health care
- Reducing public drug use
- Reducing public syringe litter
- Reduce transmission of HIV and Hep C
- Increase capacity for EMS to respond to other emergencies
- Creates space for acceptance and safety

OnPoint NYC

Two locations in NYC - one in East Harlem and one in Washington Heights

3,089 participants since opening

819 overdose interventions

- microdosing naloxone
- supplemental oxygen
- immediate response
- vitals monitoring

Has improved syringe litter in public spaces, including around schools and in parks

Services at OnPoint NYC

- Expansion of existing harm reduction drop-in center
- Services include:
 - Meal service
 - Sterile syringe supply distribution
 - Referrals to substance use disorder treatment
 - Laundry and clothing distribution
 - Showers
 - Health suite with MAT and treatment for HIV/Hep C
 - Mental health counseling and case management
 - Acupuncture
 - Garden

OPS as brain injury intervention

- Staff trained to recognize and respond to overdose immediately.
- Capacity to provide immediate response to overdose reduces duration of loss of consciousness
- Reduction in occurrence of anoxic or hypoxic brain injury
- Escalation of care can happen much more quickly if needed.

**Keeping up the energy when the
crisis seems neverending**

Burnout

- Mental and physical exhaustion that can lead to reduced accomplishment and diminished sense of identity.
- Can lead to feelings of apathy and disconnection from purpose of the work.
- “Self care” is not enough
 - Rest and leisure time are very important for the purpose of being human.
 - How do we build work environments that cause us less harm?

Discussion questions: What does “burnout” feel like for you? How do you support yourself and others when experiencing this?

Anger

“Develops in response to the unwanted actions of another person who is perceived to be disrespectful, demeaning, threatening, or neglectful.”

- Can be accompanied by a sense of powerlessness
- Anger is often considered a “secondary” emotion, meaning that it occurs in the context of other feelings.

Discussion questions: In what ways can anger be helpful or unhelpful? What role does it play in your work?

Dual Process Model of Grieving

- Developed by Stroebe and Schut
- Focus on “restoration orientation” and “loss orientation”
 - The “loss orientation” includes remembering and missing the person, separation distress, emotional processing, grief rituals
 - The “restoration orientation” considers adapting to new roles, psychosocial transitions, and new skill mastery
- Healing occurs in the oscillations between the two orientations.

Academic Detailing (adapted)

- Academic detailing is peer-to-peer outreach and support for and between physicians for the purposes of improving patient care and prescribing practices.
 - Example: Maryland's Opioid Academic Detailing project provides 1:1 personalized education to providers on opioid prescribing and overdose prevention.
- How many people have attended a training about an amazing intervention and said, “this would never work for my program.”
- Opportunity of peer-to-peer connection between providers for the purposes of improving care, problem-solving, and sharing ideas.

“What feels good is sustainable” and “know your why”

- adrienne maree brown *Pleasure Activism*
- From *The Happy Runner*: Focus on identifying and building your internal motivation and purpose. Results-based orientation and overreliance on external reinforcement can lead to burnout.
 - Why do I run at all?
 - Why do I run each day?
 - Why am I racing at all?
 - Why do I have long term goals?

Discussion questions: What “feels good” for you in your work?

What we are working towards

“And that deep and irreplaceable knowledge of my capacity for joy comes to demand from all of my life that it be lived within that knowledge that such satisfaction is possible”

- Audre Lorde

Thank you!!!

Traumatic Brain Injury Partner

Project

MD Behavioral Health Administration

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2023

Questions?

Other Training Events

**On Demand Training at
www.nashia.org**

NASHIA 2023 Webinar Series:

July 19, 2023

***Supported Decision Making and
Guardianship***

Presenter: Steve Elville, Elville and
Associates

Noon-1pm ET

October 4, 2023

***Intimate Partner Violence: A Panel
Discussion***

Panelists: Kim Gorgens, PhD,
Anne DePrince, PhD

Noon-1:15 pm ET

Workshops-2023:

July 6 and 13, 2023

1pm-4pm ET

***Inclusion Practices in the Brain Injury
Community***

Instructor: Robert Franklin

October 11 and 18, 2023

***Trauma-Informed Meditation,
Breathwork, and Psychoeducation for
Brain Injury***

Instructor: Kyla Pearce, MPH, PhD, CBIS

December 1, 2023

Noon - 3pm ET

***Leading Groups in Virtual Spaces:
Becoming a Better Facilitator: Part 2***

Instructor: Amanda Tower

Other Training Events

SOS Conference

<https://www.nashia.org/sos2023>

**Guiding Systems
Toward Change**

*34TH ANNUAL
STATE OF THE
STATES IN BRAIN
INJURY CONFERENCE*

September 11-14, 2023
Minneapolis, MN

Virtual Preconference:
September 7, 2023

support
grow
connect

 NATIONAL ASSOCIATION
OF STATE HEAD INJURY
ADMINISTRATORS

Thank you!

growing leaders.

