

PHYSICAL SETTING



There is an enormous variation in where people inject drugs, from the dining room table in their home to behind a dumpster or in a public bathroom. Because the drugs they inject are illegal, clients

often have little control over where they shoot up, especially if they are homeless, living in a shelter or halfway house, or trying to hide their drug use from housemates. Safety and comfort are critical factors for harm reduction: Someone who is scared, in a



rush, or without access to clean water is going to have a difficult time putting harm reduction options to work.

HARM REDUCTION FOR PHYSICAL SETTING

Find a safer location for injecting.

Some characteristics to look for:

- The space is clean, dry, warm, and well lit
- The chances of getting caught by the police are minimal
- The chances of being interrupted by unwanted observers are low
- You can take as much time as you need
- There is enough space for you and your equipment
- There is access to soap and a sink

Wash surfaces and hands with soap and water before making a shot.

Wipe in one direction or in an outward moving spiral. Otherwise, you just end up spreading dirt and germs around.

Prepare for injection on a clean section of a newspaper or a center page of a pad of paper.

If soap and water aren't available, using a relatively clean surface is better than a dirty one.

SOCIAL SETTING



The social setting is an important factor for harm reduction. Injecting with other people can provide a safety net, and is especially important to reduce the risk of overdose. However, the social setting can increase the risk of HIV and hepatitis C transmission.

Some questions to consider: Does the client inject alone or in a group that remains fairly constant over time? What is the HIV and hepatitis C status of members of the group? Is the client dependent on someone else to do the injecting?



Is there a power dynamic involved? For example, is a woman client dependent on a male partner who controls the drugs and injects her?

HARM REDUCTION FOR SOCIAL SETTING

- Learn how to prepare and safely inject drugs on your own. Having to rely on someone else makes you vulnerable.
- Assess your mood. It can be hard to make good decisions if you are feeling panicked or sick. Take a few deep breaths, reconsider your plan, or try sniffing or smoking a little of your drug first.
- Keep your own works, and expect other people to do the same.
- Talk about HIV and hepatitis with people you know.
- Watch out for other people and try to choose fellow injectors who will watch out for you.



WORKS

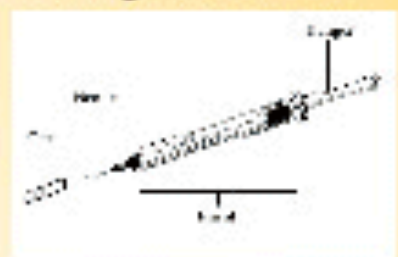


The equipment used to inject drugs is often called “works.” It usually includes following:

- A tourniquet (also called a “tie”) to enlarge veins and bring them to the surface of the skin
- Water to dissolve solid drugs so they can be injected
- A spoon or bottle cap (also called a “cooker”) to hold the water and drug mixture
- Ascorbic acid—vitamin C powder—to break down crack, and some kinds of heroin, into a form that will mix with water
- A source of heat—a lighter, candle, or match—to cook the drugs in water, which helps dissolve solid drugs into a liquid
- A cotton filter or some other material to filter lumps and impurities out of the liquefied drug before injecting it
- Alcohol swabs to clean hands and injection sites
- A needle and syringe to draw the dissolved drug up from the cooker and inject it
- Gauze or cloth to stop the bleeding after injection

HARM REDUCTION FOR WORKS

- **Use your own works.** Any part of the equipment could come in contact with blood during injection, and even a small, invisible amount of blood can transmit hepatitis B, hepatitis C, and HIV.



- **If you inject in a group, clearly label equipment** and keep it within reach to prevent sharing by mistake. One way to keep everything labeled is to buy color-coded equipment or to mark equipment with a name, a piece of tape, or a distinctive scratch mark.
- **If there is a needle exchange in your area, all of these supplies should be available there.** Call the AIDS Hotline at 1-800-367-AIDS or go to www.aidshotline.org to locate the closest needle exchange.
- **If you must share or reuse works, rinse syringes and cookers in cold water, fill with bleach and leave at least two minutes, then rinse with water again.** This process prevents HIV and hepatitis B transmission, but be aware: It will not necessarily kill hepatitis C. Filters cannot be cleaned.



SYRINGES AND NEEDLES



Needle size is described by "gauge": the higher the gauge number, the thinner the needle. For example, a 30-gauge needle is as thin as a thread, while a 16-gauge needle is as thick as the wire of a

large paperclip. The right needle size depends on the drug being used, where on the body a person is injecting, and how the shot is prepared.



HARM REDUCTION FOR SYRINGES AND NEEDLES

- **Use a new, sterile syringe for each shot to avoid sharing HIV, hepatitis B, hepatitis C, and other diseases.** Also, needles may become blunt after just one use, and blunt needles can damage your veins.
- **Find a reliable source for syringes.** If there is a needle exchange in your area, take advantage of it. You can locate the closest needle exchange by contacting the AIDS Hotline at 1-800-367-AIDS or www.aidshotline.org. If there is no needle exchange, see if you can purchase sterile syringes at drugstores in your area. If you must buy syringes on the street, clean them before using: Sometimes used syringes are repackaged and sold as "new."
- **If you must share works, bleach your equipment.** Rinse syringes and cookers in cold water, fill with bleach and leave at least two minutes, then rinse with water again. This process prevents HIV and hepatitis B transmission, but be aware: It will not necessarily kill hepatitis C.



SPLITTING DRUGS TO SHARE

Drugs are often shared by two or more people. Frequently, the powder or solid is dissolved in water and heated in the cooker first; then individuals take turns drawing up their portion into their syringe. Unless the cooker, cotton, and all syringes are sterile, splitting wet drugs is very likely to transmit HIV, hepatitis B, and hepatitis C.



HARM REDUCTION FOR SPLITTING DRUGS TO SHARE

- **Split drugs when they're dry, not wet.** Divide the powder (cocaine), rock (crack cocaine), or tar (heroin) into separate cookers. Then each person can prepare their own drugs with their own water and equipment.
- **If you only have one set of sterile works, you can backload.** Cook the drug in a sterile cooker. Then use a sterile cotton and a sterile syringe—the designated “splitter”—to draw up equal amounts of the drug and carefully squirt it into the back of each person's syringe after the plunger has been removed.

BACKLOADING (PIGGYBACKING)



Remove the plungers from two syringes. Using a third, sterile syringe, draw up the hit and empty half into each of the syringes.

Carefully replace both plungers.

WATER

The availability of clean water is central to the safety of an injection. Water is used to:

- Clean the work surface before the drug is prepared
- Wash hands before preparing the drug, and before and after injecting
- Dissolve powdered and solid drugs so they can be injected



- Clean the skin at injection sites if alcohol is not available
- Rinse injection equipment if it is going to be reused or shared

HARM REDUCTION FOR WATER

- **Don't reuse water.** Water can transmit viruses. If you have one container of clean water, divide the water before it touches anyone's equipment.
- **Use sterile water.** You can get it at a needle exchange or buy it at a drugstore. As a next best option, boil water for 10 minutes. If sterile or boiled water is not an option, use cold tap water or other bottled water. As a last resort, use the water from a toilet tank, but never from the bowl.



COOKING DRUGS



Applying heat helps some drugs dissolve, which reduces the likelihood of injecting undissolved particles. Heat also kills some bacteria and helps prevent infections that can cause abscesses.

Liquid drugs, like hormones and injectable morphine, don't need to be "cooked." Cocaine and methamphetamines need only to be combined with water. Crack and brown heroin need, in addition to heat, to be "acidified" with ascorbic acid in order to dissolve well.

HARM REDUCTION FOR COOKING DRUGS

- Use your own cooker and be sure that every syringe and cotton coming in contact with the cooker is sterile. Shared cookers can transmit HIV and hepatitis C and B.
- If you must use someone else's cooker, bleach it. First, rinse it with water. Then fill it with bleach and let the bleach sit for at least two minutes. Then rinse with water again. This process prevents HIV and hepatitis B transmission, but be aware: It will not necessarily kill hepatitis C.
- Use powdered ascorbic acid to help dissolve heroin or crack. Don't use lemon juice, which can cause serious eye infections.



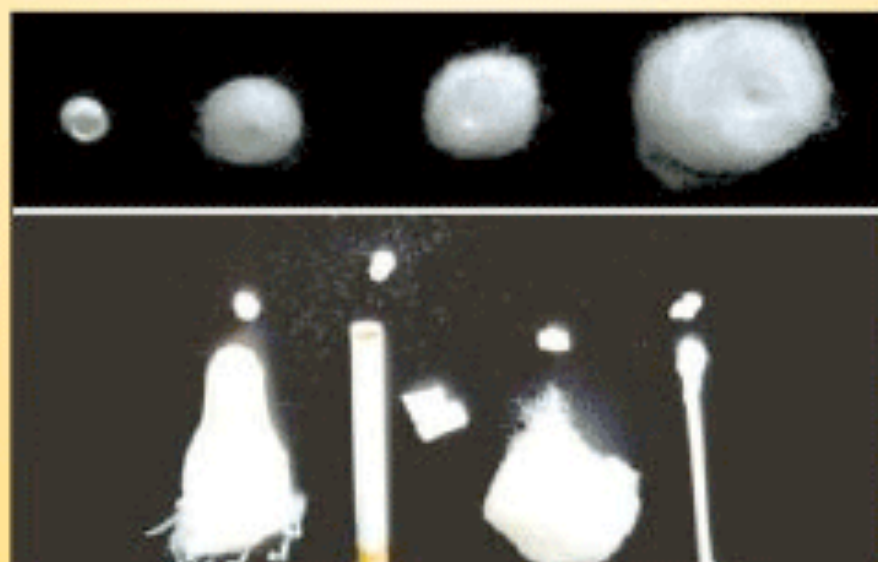
FILTERING

Liquefied drugs must be filtered before drawing them into the syringe to keep solid particles from clogging the needle and entering the body. The ideal filter is sterile, requires no manipulation to get it to be the right size, and has fibers that do not easily break off or carry poisons. The best filters are cotton pellets, typically available at needle exchanges. Since they are pre-sized, they don't need to be shaped by hand.



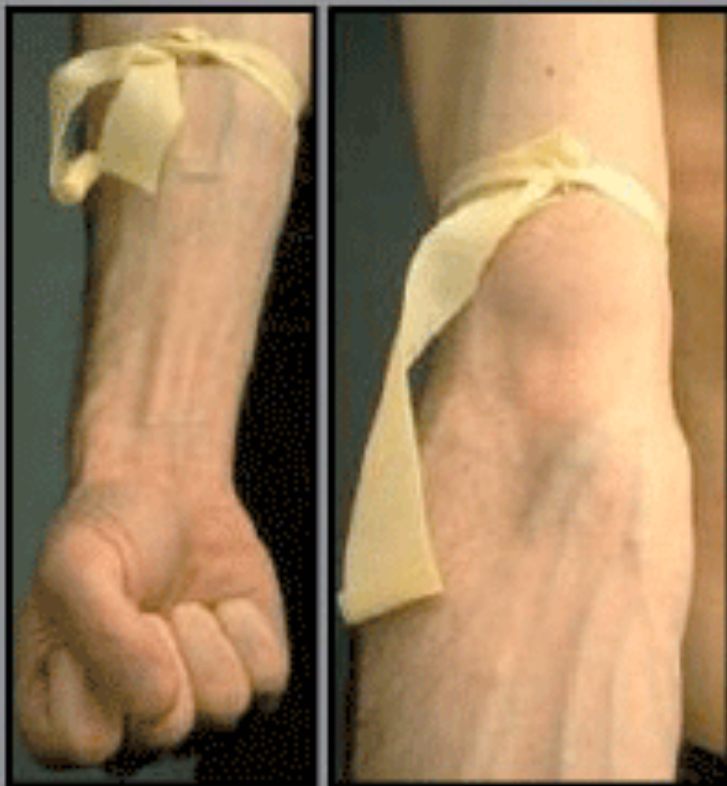
HARM REDUCTION FOR PREPARING FILTERS

- **Never share a filter or reuse an old one.** Hepatitis C can live in filters for up to four days, and bacteria can quickly grow in filters. Instead, get and keep new, clean filters in a plastic zip bag, and throw out filters immediately after using them.
- **Use filters that don't need shaping.** The filters in the bottom row of the image—a tampon, a cigarette filter, a cotton ball, and a Q-tip—all need handling to make them the right size and shape. The pre-sized filters in the top row are from a needle exchange and are ready to go. If you must shape your filter, wash your hands with soap and water before handling.
- **Don't use cigarette filters or tampons,** which may be the most dangerous of all potential filters. The fibers break off, carry small particles and poisons into the body, and can cause infections and obstructions.



CHOOSING A VEIN: INJECTION SITES

Intravenous injection (“mainlining”)—injecting a drug directly into a vein—is one of the fastest ways to deliver a drug into the bloodstream. It is also the method most likely to cause an overdose. Heroin, cocaine, and amphetamines are commonly mainlined.



Usually, a tourniquet (tie) is used to make veins bigger and easier to access. People who inject drugs often have one or two favorite places to inject: veins that are easy to find and where they get

a clean “hit” on the first try. But veins that are used repeatedly can become seriously infected, collapse, or scar if they don’t have time to heal.

People also inject drugs into muscle (“muscling”) or just beneath the skin (“skin-popping”).

HARM REDUCTION FOR CHOOSING A VEIN: INJECTION SITES

- **Learn how to safely inject drugs on your own.** Having to rely on someone else makes you vulnerable. Experienced injectors are often positive for hepatitis C (and sometimes HIV as well) and “hit doctors” frequently inject one person after another with the same works.
- **Change injection sites frequently and give your veins a chance to heal.**
- **Once you choose an injection site, clean the skin in one direction or in a spiral.** Rubbing in a circle just pushes the dirt around; it does not remove it from the injection site.
- **Clean off an alternative patch of skin in case your first choice doesn't work.**
- **Don't muscle or skin-pop speed.** Speed (meth, methamphetamine, crank) is often cut with chemicals that are particularly hard for the body to absorb if the shot misses a vein. Muscling or skin-popping speed is extremely painful and may cause an abscess.



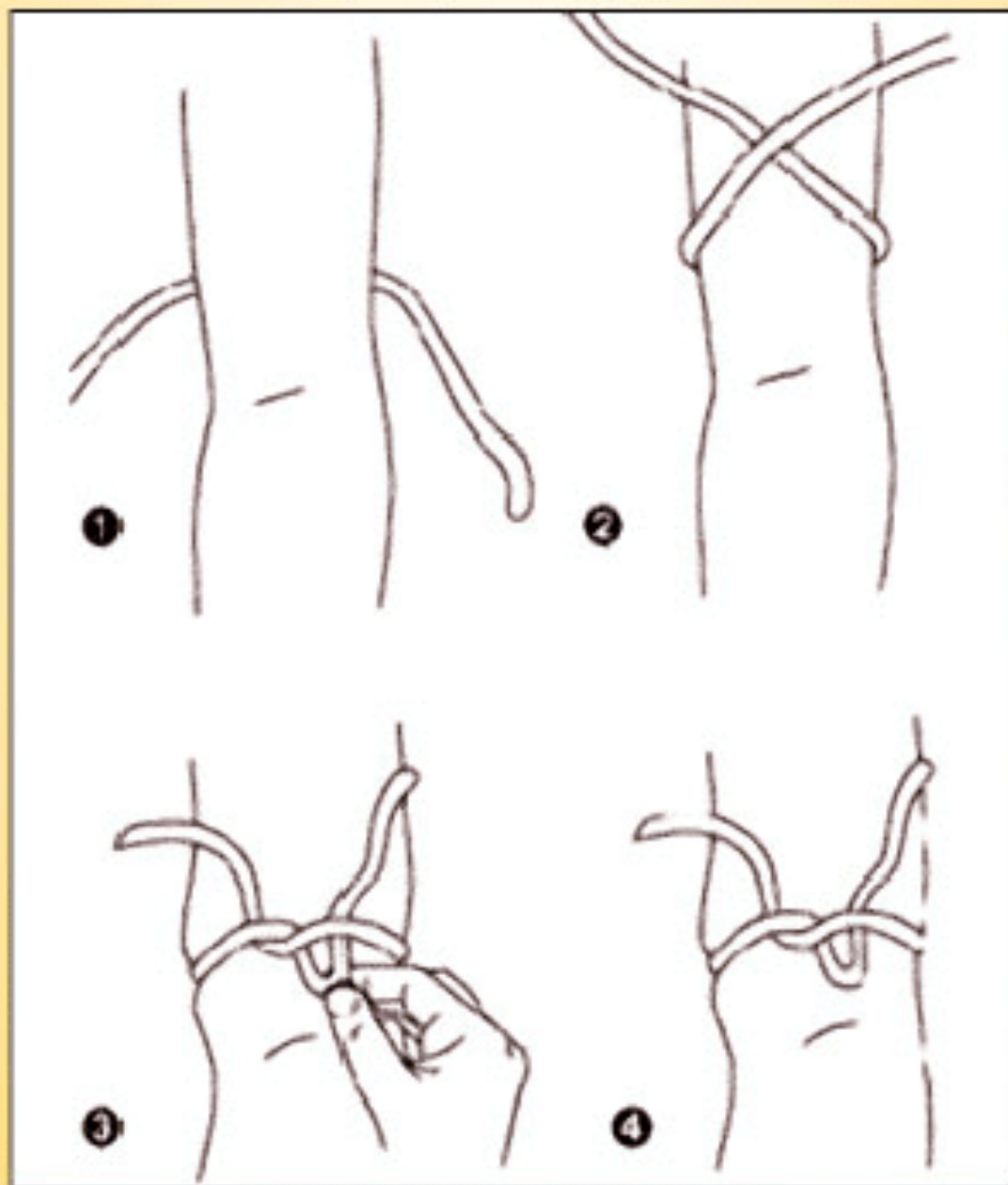
GETTING A HIT



In the picture above, the person on the left has inserted a syringe and is pulling back a little on the plunger, to see if visible blood enters the barrel. When blood appears, it indicates a register or a "hit," confirming that the needle is positioned inside a vein. On the right, the person pulls the tie with his mouth to release the tie, and then injects the drug.

HARM REDUCTION FOR GETTING A HIT

- Tie with a slipknot so you can release it with a slight tug. This reduces leakage of drug and blood outside the vein.
- “Taste” the shot. Injecting only a little bit at first enables the user to “taste” the shot—to feel its effects and stop injection or proceed based on how strong the drug is.



OVERDOSES

An overdose happens when a person takes more of a drug or a combination of drugs than the body can handle. The amount of a drug that causes an overdose varies, and it depends on the person's tolerance to that drug,



body chemistry, the purity of the drug, and whether it's combined with other drugs.

Depressant drugs, like heroin and alcohol, slow down the body's functions. Symptoms of overdose typically include slow, shallow, or no breathing, extreme drowsiness, and unconsciousness.

Stimulant drugs such as cocaine and amphetamines speed up the body's functions.

Symptoms of overdose can include cardiac arrest, seizure, disorientation, and collapse from exhaustion.

For many clients, overdose is a more pressing life threat than hepatitis C or HIV.



HARM REDUCTION FOR OVERDOSE

- If someone has symptoms of an overdose, call 9-1-1.
- Check for the person's breathing.
- If they are breathing, put the person in the recovery position (see illustration).
- If they aren't breathing, try rescue breathing. Tilt the head back, lift the chin, pinch the nose, and administer one breath every five seconds until the person starts breathing or help arrives. To learn more about rescue breathing, check out the Harm Reduction Coalition's website.
- If the person is overdosing on heroin or another opiate, administer naloxone. Some needle exchanges distribute naloxone and a quick training in how to use it. For more information about naloxone and training to administer it, contact the DOPE Project (Drug Overdose Prevention Project at the Harm Reduction Coalition).

The Recovery position is for when someone is unconscious (passed out) but otherwise unhurt, and breathing normally.



DISPOSING OF USED WORKS

All used syringes should be treated as if they are potentially contaminated and should never be thrown on the ground or in the trash, or flushed down the toilet.

Needle exchanges and pharmacies distribute sharps containers. Coffee tins and thick plastic containers such as empty laundry detergent bottles are good alternatives. Needle exchanges and some pharmacies accept these containers and properly dispose of them.



HARM REDUCTION FOR DISPOSING OF USED WORKS



- **Dispose of your works carefully.** Use a sharps container or thick plastic container with a screw-top lid. In some parts of California, people can dispose of used equipment and receive new, sterile equipment through needle exchange programs.
- **Avoid trying to recap a needle—especially a needle someone else has used.** If recapping is necessary because there isn't a sharps container, put the cap against a surface, as shown in the image below, to minimize the risk of getting stuck by it. And then label the syringe as used.
- **If you collect used needles from other people, ask them to put them in the container for you or give them to you in a puncture-proof container.**
- **Bleach equipment if you don't have access to sterile needles.** Clean needles, syringes, and cookers in cold water. Soak in bleach for at least two minutes, then rinse well with water. This process prevents HIV and hepatitis B transmission, but be aware: It will not necessarily kill hepatitis C. Cottons cannot be cleaned.

