

COVID-19 GUIDANCE FOR PEOPLE WHO USE DRUGS AND HARM REDUCTION PROGRAMS

Written by: [National Harm Reduction Coalition](#) | Published: March 11, 2020

COVID-19, an illness caused by a newly identified type of coronavirus, can cause a respiratory infection and lead to health problems. It's usually mild and most people recover quickly if they have it, but it can be very serious for people with stressed immune systems or underlying conditions or older adults, so it's important to stay informed.

It's always good to be prepared and knowing what to do will help you. Even if you don't see a widespread COVID-19 outbreak in your area, the hand-washing and other prevention actions described here are good practices for fighting off bugs like the cold or the flu.

National Harm Reduction Coalition teamed up with [Higher Ground Harm Reduction](#), [Reynolds Health Strategies](#), and [Vital Strategies](#) to create a series of guides for people who use drugs and harm reduction providers. You can [find these resources here](#).

How do people get infected with COVID-19?

COVID-19 is spread from person-to-person by coughing or sneezing and getting exposed to droplets that have the virus in them. There are no known

risk factors that appear to make a person more or less vulnerable to getting infected with the virus. The main risk is close contact with someone who has it.

What are the symptoms of COVID-19?

The main symptoms feel like the flu or a really bad cold:

- Fever
- Cough
- Shortness of breath/difficulty breathing
- Fatigue

These symptoms show up between 2 and 14 days after you've been exposed to the virus. People who are considered at increased risk include those with underlying health conditions, including heart disease, lung disease such as asthma/COPD, diabetes, or HIV, or people who are immunocompromised, or over age 60.

How can I prevent COVID-19?

- Wash your hands often with soap and water for at least 20 seconds. Using an alcohol-based hand sanitizer—it must have at least 60% alcohol in it—can also kill the virus.
- Avoid close contact with people who are sick.

- Cover your cough and sneeze with a tissue and throw it away in a lined trash can, or if you don't have a tissue, cough into the bend in your elbow. Wash hands with soap and water afterwards.
- Keep your hands away from your eyes, nose, and mouth.
- Get a flu shot. It won't prevent COVID-19 but it will prevent the flu and keep you out of clinics, pharmacies, or emergency departments and minimize your risk of contact with others who may be sick.
- When helping someone who is sick, wear gloves and a safe mask to minimize the risk of body fluids that may have COVID-19 from getting into you. Wash your hands before you put on gloves and after you take them off.

If I'm feeling sick, what should I do?

- Stay home if you are sick, and if you don't have a place to stay, try to minimize your close contact with other people. Monitor your fever at home and avoid others for at least 24 hours after the last fever. If you have to be around other people, this is the time to wear a safe mask if you have one, so that you don't cough on them and transmit a virus. If you self-quarantine, attend to your mental health and ensure you have as much support as you can get (emotional support, food, hygiene, medications, finances).
- Call or contact a medical provider if you can to ask about your symptoms and see if you need to even come in. Tell them your symptoms and that you are concerned about COVID-19.

- If you feel like your symptoms have become severe call or contact a medical provider or go to urgent care or the emergency department.
- Right now, there is no vaccine to prevent COVID-19 and no specific medicine to treat it. There are still good things a medical provider can do for you and it's important to check you out if you're sick and not getting better.

SAFER DRUG USE DURING THE COVID-19 OUTBREAK

Harm Reduction Tips

Some of these are easier to do than others, and some may seem impossible depending on your current situation. Do the best you can. Reach out to friends, harm reduction, syringe service providers (SSP), and other health or social service providers to plan for what to do to so you can stay safe and take care of one another.

Practice Safer Drug Use

- **MINIMIZE THE NEED TO SHARE YOUR SUPPLIES.** Don't share e-cigs/cigarettes, pipes, bongs or joints, or nasal tubes such as straws. If you have to share, practice harm reduction with your supplies (wipe down the mouthpieces with an alcohol swab before sharing or use separate mouthpieces). Put used smoking, snorting, and injecting equipment in a bio-bucket so people know they are used.

- **MINIMIZE CONTACT.** If you are having sex or doing sex work, COVID-19 can be transmitted by close contact like coughing, kissing, or direct contact with bodily fluids. Try to minimize close contact and ensure condom use.
- **PREPARE YOUR DRUGS YOURSELF.** Wash your hands thoroughly for 20 seconds with soap and water and prepare your own drugs. Keep your surfaces clean and wipe them down before and after use, with microbial wipes, alcohol (at least 70%), or bleach. If you can't prepare your own drugs, stay with the person who is. Get them to wash their hands thoroughly, and to clean up before and after.
- **PLAN & PREPARE FOR OVERDOSE.** Emergency services might be stretched in a COVID-19 outbreak, and slow to respond to 911 calls. Load up on naloxone and fentanyl testing strips. If you are alone, experiment with using less to lower your risk of OD, and go slowly. If you are using with others, make an OD plan with them and stagger use if possible. Store a breathing mask for use in case rescue breathing is needed.

Keep Clean & Practice Hygiene

- **KEEP YOUR SPACE CLEAN.** Wipe down surfaces where you prepare drugs, before and after use, with antimicrobial wipes, alcohol (at least 70%), or bleach. Before and after handling drugs, wash your hands with soap and water, or use alcohol-based hand sanitizer, including after you purchase the drugs. Wipe down drug packages. Wipe down

countertops, sinks, doorknobs, and any other surfaces that hands can touch.

- **WASH YOUR HANDS.** If you have access to clean water, wash your hands with soap for 20 seconds. (Sing the “Happy Birthday” song twice or the “ABC Song” once.) If you don’t have soap and water, use an alcohol-based hand sanitizer (at least 60%). Wash after every time you are around other people, such as on public transportation, after purchasing drug packages, etc.
- **STAY CLEAR IF YOU’RE SICK.** If you have symptoms or think you’re getting sick, don’t go to your local SSP. Hopefully you have enough of a stash to get through, but if not, does your SSP deliver? Are there secondary exchangers who can come by? If you have symptoms of COVID-19, get checked out by a doctor. If you have HIV or have a weakened immune system, it is particularly critical to remember to take all your medications daily.

Stock up on Supplies

- **STOCK UP ON SUPPLIES.** Work with your local SSP to get enough syringes and injecting equipment to last you 2 to 4 weeks. Note: Your local SSP may have syringe and supply shortages, so they may not be able to do this.
- **STOCK UP ON DRUGS.** If possible, try to stock up on your drug of choice. Be safe: Having larger amounts of drugs can be dangerous if

you are stopped by police or someone desperate enough to target you for them

- **STOCK UP ON MEDICATIONS.** Access to prescription meds may be limited in an outbreak. Ask your medical provider about getting a full month's supply if possible. If you take methadone/buprenorphine, ask your clinic or doctor to make a plan to prevent disruptions to your dose. Ask about their emergency plans for patients (refills over the phone, telehealth visits, etc.).
- **PREPARE FOR A DRUG SHORTAGE.** You might lose access to your drug of choice in an outbreak. Consider alternative drugs or medications that could help take the edge off. If facing potential opioid withdrawal, consider buying over the counter medications to make it less difficult (ibuprofen, Pepto-Bismol, Imodium). For opioid dependence, you can work with your local SSP to enroll with a local provider for buprenorphine or methadone.

SYRINGE SERVICES AND HARM REDUCTION PROVIDER OPERATIONS DURING THE COVID-19 OUTBREAK

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TIPS FOR COMMUNITY-BASED SYRINGE SERVICES AND HARM REDUCTION PROVIDERS

Prioritize & Prepare Your People

- **PRIORITIZE STAFF & PARTICIPANT SAFETY.** Provide ample supplies for participant preparedness whenever possible. Send sick employees home (yourself included!), and be mindful of the work

done by peers. Provide access to vaccinations to prevent immune systems from becoming more compromised—consider flu, hepatitis A, and hepatitis B vaccines, and partnering with your local pharmacy or health department. Encourage and promote hand washing/sanitizing, and coughing/sneezing into tissues or elbow. Consider limiting program access for non-essential visitors.

- **SANITIZE SURFACES.** Regularly clean commonly touched surfaces in all service delivery spaces before, during, and after services are being provided. Clean with household cleaners, bleach, and other microbicides.
- **OFFER EXTRA SUPPLIES.** As possible, offer extra and ample supplies for participants in case of service closures, including syringes and harm reduction equipment for safer smoking, snorting, and injecting drug use. Take inventory of your stock and discuss with all staff what is the maximum allowance for each item. If you are not already giving out harm reduction supplies for safer smoking and snorting, make arrangements to do so. Whenever possible, stock up on latex gloves, safe masks, and hand sanitizer for distribution to participants, including instructions for how and when to use them. Remind your staff to equip participants with ample supplies of naloxone kits including breathing masks. Discuss if you have capacity to deliver supplies.

Plan Ahead

- **TAKE STOCK OF YOUR ESSENTIAL SERVICES.** Which program services are essential and must be provided even at reduced operations? Which activities can be postponed or canceled (including groups)? When are those services delivered, how and by whom, and could they incorporate creative flexibility?
- **REVIEW/CREATE COMMUNICATION PLAN.** Make and revisit the plan for communicating upcoming or ongoing service disruption information with staff and participants. Consider and plan for overcoming barriers – such as language, cultural, technological, disability—to reach the people you serve with timely and accurate service disruption information, such as through social media, email, word-of-mouth, text, etc. Ensure all staff/volunteers understand the communication plan and their roles.
- **STAY INFORMED AND CONNECTED.** Monitor your state and local health department website and the CDC COVID-19 website for the latest information. Communicate and cooperate with your local health department in the case of suspected exposure.
- **PLAN FOR EMPLOYEE ABSENCE.** At the height of the outbreak, anticipate 10% to 20% staff absence. Prepare for absence by cross-training staff, and planning for skeleton operations. Allow for flexible work attendance and sick leave wherever possible. Track flu-related absences. Use phone, video, and app technology to replace in-person meetings. Review and/or create service/program and organizational

contingency plans, including with staff. Ensure all staff have access to and understand organizational contingency plans.

- **MEDICATION CONTINUITY.** Access to prescription medicines could be limited in a COVID-19 outbreak. Ensure the medical providers serving participants have emergency plans in place, and clear processes and criteria for patients to receive extra refills / doses of their HIV, HCV, psychiatric, and other chronic condition medications. Ensure methadone and buprenorphine providers have emergency plans to preserve low-threshold continuity for participants, including extra take-home doses. Consider one-month scripts of buprenorphine, with possibilities for telehealth or refills by phone as needed.

STAND AGAINST RACISM

There have been reports of anti-Chinese or anti-Asian racism and discrimination, including avoidance of Asian American folks, as a shameful byproduct of the COVID-19 outbreak. The first known cases of COVID-19 were reported from China, and the largest burden remains there. It is critical to fight this simultaneously lazy and aggressive racism and stigma in our communities. There is a long history in the United States of targeting and demonizing specific populations, including Chinese and Chinese-Americans.

Original article: <https://harmreduction.org/blog/covid-19-guidance-for-people-who-use-drugs-and-harm-reduction-programs/>