

WHAT IS HARM REDUCTION?

A New Discussion Paper from the
International Harm Reduction Association

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WHAT IS IHRA?

- 'Leading Organisation Promoting Harm Reduction on a Global Basis'
- UK-Based NGO and Registered Charity
- Formed in 1996 (7th International Conference)
- Eight Staff (London and Melbourne)
- Advocate at UN / International Level
- Events / Projects / Campaigns / Communications
- Focus = All Drugs, Human Rights, Public Health



HARM REDUCTION: AN UNDEFINED HISTORY

- Term became popular in 1980s (IDU & HIV)
- Approach can be traced back much further:
 - USA 'Narcotic Maintenance Clinics'
 - UK 'Rolleston Committee' (prescribing opiates)
 - 'Controlled Drinking' approach for alcohol users
 - Seatbelts?
- Ideas emerged in several places at once
- ... 'organically' from grassroots services
- ... in response to public health emergencies
- Therefore, no-one stopped to agree definition!



WHY A DEFINITION NOW?

- Over two decades of experience
- New generations of 'harm reductionists'
- Concerns about 'hijacking' of term
- Concerns about misunderstanding of term
- Move forward = needed solid foundation
- Move forward = relevant definition for all drugs
- Long consultation process (staff, board, experts, UN)
- Translation into 8 languages (more to come...)



WHAT IS HARM REDUCTION?

'Harm Reduction' refers to policies, programmes and practices that aim primarily to reduce the adverse health, social and economic consequences of the use of legal and illegal psychoactive drugs without necessarily reducing drug consumption. Harm reduction benefits people who use drugs, their families and the community.

www.ihra.net/Whatisharmreduction



PRINCIPLES OF HARM REDUCTION (1)

1. TARGETED AT RISKS & HARMS

- Focus on causes of risks and harms
- HIV, Hepatitis, Overdose, Groin Injecting, Public Drunkenness, Drink Driving...

2. EVIDENCE BASED & COST EFFECTIVE

- Wealth of evidence: 'scientific debate has been won'
- Often inexpensive and high impact
- Huge savings versus no harm reduction



PRINCIPLES OF HARM REDUCTION (2)

3. INCREMENTAL

- ‘People are much more likely to take multiple tiny steps rather than one or two huge steps’
- Pragmatic short-term goals based on individual need

4. DIGNITY & COMPASSION

- Non-judgemental, non-moralistic, respectful
- Anti-discrimination and anti-stigmatisation



PRINCIPLES OF HARM REDUCTION (3)

5. UNIVERSALITY & INTERDEPENDENCE OF RIGHTS

- People who use drugs do not forfeit human rights
- Health / Work / Freedom / Inhumane Treatment

6. CHALLENGING POLICIES & PRACTICES THAT MAXIMISE HARM

- From local practices to international laws

7. TRANSPARENCY, ACCOUNTABILITY & PARTICIPATION



WHAT IS HARM REDUCTION?

- Needle and Syringe Programmes (NSPs)
- Substitute Drug Prescribing (Opiates, Nicotine)
- Overdose Prevention (Naloxone)
- Drug Consumption Rooms
- Route Transition Interventions
- Outreach and Peer Education
- Smokeless Tobacco
- Safer Nightlife Programmes



... and many more

WHAT IS IT NOT?

- Promoting drug use
- Promoting legalisation
- Incompatible with abstinence-based programmes
- Incompatible with a 'recovery' agenda
- Forcing treatment or services on people
- Locking people away
- Violating human rights in the name of 'drug control'

THE 'GLOBAL STATE'

84 countries support harm reduction in policy or practice

77 countries have needle and syringe programmes
(10 countries have it in prisons too)

65 countries have opioid substitution therapy
(37 countries have it in prisons too)



www.ihra.net/GlobalStateofHarmReduction

THERE IS MUCH STILL TO DO!



**GLOBAL DISTRIBUTION OF
INJECTING DRUG USE**

-  Reported IDU
-  Not reported



What is Harm Reduction?

A position statement from the International Harm Reduction Association

Harm reduction refers to policies, programmes and practices that aim to reduce the harms associated with the use of psychoactive drugs in people unable or unwilling to stop. The defining features are the focus on the prevention of harm, rather than on the prevention of drug use itself, and the focus on people who continue to use drugs.

Harm reduction began to be discussed frequently after the threat of HIV spreading among and from injecting drug users was first recognised. However, similar approaches have long been used in many other contexts for a wide range of drugs.

Harm reduction complements approaches that seek to prevent or reduce the overall level of drug consumption. It is based on the recognition that many people throughout the world continue to use psychoactive drugs despite even the strongest efforts to prevent the initiation or continued use of drugs. Harm reduction accepts that many people who use drugs are unable or unwilling to stop using drugs at any given time. Access to good treatment is important for people with drug problems, but many people with drug problems are unable or unwilling to get treatment. Furthermore, the majority of people who use drugs do not need treatment. There is a need to provide people who use drugs with options that help to minimise risks from continuing to use drugs, and of harming themselves or others. It is therefore essential that harm reduction information, services and other interventions exist to help keep people healthy and safe. Allowing people to suffer or die from preventable causes is not an option. Many people who use drugs prefer to use informal and non-clinical methods to reduce their drug consumption or reduce the risks associated with their drug use.

This short statement sets out the main characteristics of harm reduction. This statement is designed to be relevant to all psychoactive drugs including controlled drugs, alcohol, tobacco and pharmaceutical drugs. The specific harm reduction interventions may differ for different drugs. Readers can refer to the IHRA website (www.ihra.net) for more detailed guidance on harm reduction interventions.

Definition

'Harm Reduction' refers to policies, programmes and practices that aim primarily to reduce the adverse health, social and economic consequences of the use of legal and illegal psychoactive drugs without necessarily reducing drug consumption. Harm reduction benefits people who use drugs, their families and the community.

Principles

The harm reduction approach to drugs is based on a strong commitment to public health and human rights.

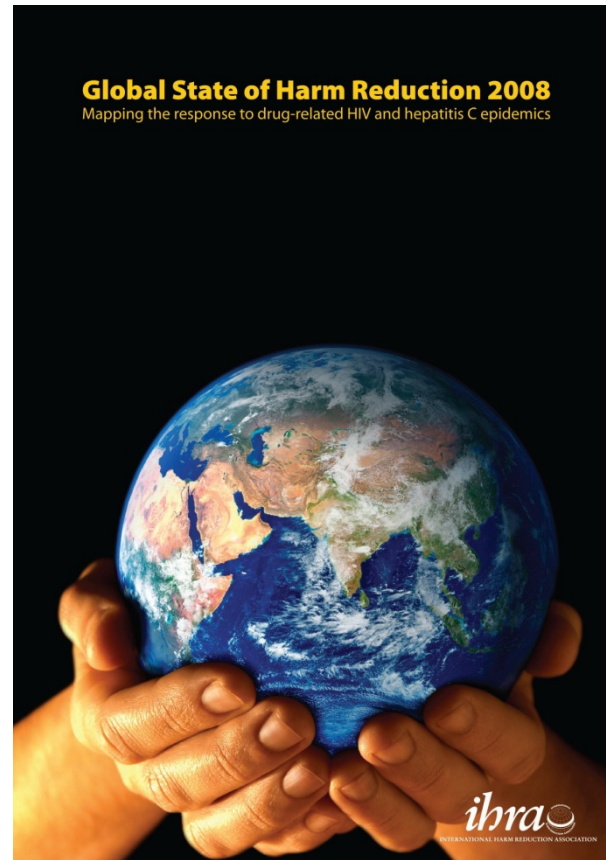
Targeted at risks and harms

Harm reduction is a targeted approach that focuses on specific risks and harms. Politicians, policymakers, communities, researchers, frontline workers and people who use drugs should ascertain:

- What are the specific risks and harms associated with the use of specific psychoactive drugs?
- What causes those risks and harms?
- What can be done to reduce these risks and harms?

Harm reduction targets the causes of risks and harms. The identification of specific harms, their causes, and decisions about appropriate interventions requires proper assessment of the problem and the actions needed. The tailoring of harm reduction interventions to address the specific risks and harms must also take into account factors which may render people who use drugs particularly vulnerable, such as age, gender and incarceration.

THANK YOU!



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www.ihra.net

