Harm Reduction: More than just clean needles

Harm reduction is a realistic, pragmatic and non-judgmental approach based upon openness, understanding and respect. It was initially adopted as an ‘alternative’ approach to try to engage people using banned drugs in the 1980s, partly because the dominant abstinence approach was failing, but largely because agencies were worried about the spread of HIV/AIDS to the wider community. To encourage safer sex and safer drug use governments reluctantly adopted harm reduction drug policies as a means to reach and engage the cooperation injecting drug users.

The global threat posed by AIDS in the 1990s has now subsided, by no coincidence so has the government commitment to harm reduction. However, harm reduction has proven to be effective in engaging people with drug problems into treatment, reducing the spread of infectious diseases, reducing fatal overdose, and reducing addiction. But in some countries harm reduction has stalled and failed to move much further than needle exchange schemes.

Having proved so effective harm reduction has evolved, and now harm reduction is more broadly about reducing the harm caused by prohibitionist drug policies.

Has your country moved on from a 1980s model of harm reduction which was largely confined to running needle exchanges? To check out just how far your country has progressed and evolved with it’s harm reduction philosophy here are thirty-one harm reduction policies:

1. Naloxone take home kits for users and friends
2. Naloxone available without prescription at pharmacies
3. Naloxone in public areas alongside AEDs
4. Good Samaritan laws
5. Legalisation of all injecting equipment
6. Drug Consumption Rooms/Injecting Facilities
7. Drug Consumption Rooms for those who don’t inject
8. Drug checking at Drug Consumption Rooms
9. Prescribing the drug the person is addicted to
10. Oral, inhale-able and injectable prescribing
11. Injectable heroin prescribing
12. Injectable methadone prescribing
13. Client led maintenance prescribing
14. Free Needle/syringe distribution* in cities
15. Free Needle/syringe distribution* outreach mobile units
16. Drug checking at Needle/syringe distribution centres
17. Condom distribution at all drug agencies
18. Sharps boxes in public toilets
19. Sharps boxes in all drug agencies
20. Drug checking at needle/syringe distribution centres
21. Decriminalise all drug possession for personal use
22. Decriminalise all cultivation/production for personal use
23. Drug checking at public events/festivals
24. Social media early warning system for rogue drugs
25. Substitute prescribing in prisons
26. Needle/syringe exchange in prisons
27. Wet houses for people with drink problems
28. Rehabs that support oral & ampoule maintenance prescribing
29. Injecting technique advice at DCRs
30. Injecting technique advice at Needle Exchanges
31. Basic health care (showers, laundry room & nurse) at DCRs

*Facilitating collection – not exchange only

Harm Reduction or Abstinence

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TREATING DRUGS AS THE PROBLEM WHEN PROHIBITION IS THE PROBLEM.

ORAL PRESENTATION ON NEW ZEALAND MEDICINAL CANNABIS BILL

TAGS: ADDICT, ADDICTION, DECRIMINALISATION, DRUG, DRUG POLICY, DRUG REFORM, DRUGS, HARM REDUCTION, HUMAN RIGHTS, PROBLEMATIC DRUG USE, REFORM, REGULATION, SUBSTANCE MISUSE

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