Harm Reduction

Harm Reduction is an evidence-based, client-centred approach that seeks to reduce the health and social harms associated with addiction and substance use, without necessarily requiring people who use substances from abstaining or stopping.i Included in the harm reduction approach to substance use is a series of programs, services and practices. Essential to a harm reduction approach is that it provides people who use substances a choice of how they will minimize harms through non-judgemental and non-coercive strategies in order to enhance skills and knowledge to live safer and healthier lives.

Harm reduction acknowledges that many individuals coping with addiction and problematic substance use may not be in a position to remain abstinent from their substance of choice. The harm reduction approach provides an option for users to engage with peers, medical and social services in a non-judgemental way that will ‘meet them where they are.’ ii This allows for a health oriented response to substance use, and it has been proven that those who engage in harm reduction services are more likely to engage in ongoing treatment as a result of accessing these services. Some harm reduction initiatives have also reduced blood borne illnesses such as HIV/AIDS and Hepatitis C, and have decreased the rates of deaths due to drug overdoses.iii

**What are some examples of harm reduction?**

Some practices that take a harm reduction approach include: using a nicotine patch instead of smoking, consuming water while drinking alcohol, using substances in a safe environment with someone they trust, and needle exchange programs for people who inject drugs. Harm reduction doesn’t just apply to the use of substances. We engage in harm reduction in our everyday lives to minimize a risk, such as wearing a helmet when riding a bike or enforcing seatbelts when driving in a car.

Overdose Prevention Sites (which are also referred to as supervised injection services or safe consumption sites) are facilities that fall under the umbrella of harm reduction. These facilities are health services that provide a hygienic environment for people to consume substances under the supervision of medical professionals. In addition to supervised injection, individuals are provided with sterile supplies, education on safer consumption, overdose prevention and intervention, medical and counselling services, and referrals to drug treatment, housing, income support and other services. Overdose prevention sites have been known to [reduce costs for the health care system,](https://www.ncbi.nlm.nih.gov/pubmed/20653622) [prevent blood borne illnesses such as HIV or Hepatitis C](http://www.stmichaelshospital.com/pdf/research/SMH-TOSCA-report.pdf), [helps individuals access support](https://www.ncbi.nlm.nih.gov/pubmed/17523986)services and [prevent overdose deaths.](http://www.bccdc.ca/resource-gallery/Documents/Educational%20Materials/Epid/Other/Public%20Surveillance%20Report_2017_03_17.pdf) In addition, research shows that the existence of an overdose prevention site in a community [does not lead to increased crime](https://www.bccsu.ca/wp-content/uploads/2016/10/insite_report-eng.pdf), and works to [decrease public substance consumption](http://www.communityinsite.ca/Petraretal2006.pdf). These facilities are helpful in reducing the harms related to substances, particularly opioids. Overdose prevention sites are an evidence-based component to a comprehensive treatment response.

In order to further understand the philosophy behind Harm Reduction, it is important to discuss the main features, which include:

* *Pragmatism:* Harm Reduction recognizes that substance use is inevitable in a society and that it is necessary to take a public health-oriented response to minimize potential harms.
* *Humane Values:* Individual choice is considered, and judgement is not placed on people who use substances. The dignity of people who use substances is respected.
* *Focus on Harms:* An individual’s substance use is secondary to the potential harms that may result in that use. iv

**What are the goals of harm reduction?**

The overarching goal of the harm reduction approach is to prevent the negative consequences of substance use and to improve health. Harm reduction approaches and programming are supported internationally by global institutions such as UNAIDS, United Nations office on Drugs and Crime, and the World Health Organization , and it is seen as a best practice for engaging with individuals with addiction and substance use issues[v].

A frequent misconception of harm reduction is that it supports, or encourages, illicit substance use and does not consider the role of abstinence in addiction treatment. However, harm reduction approaches do not presume a specific outcome, which means that abstinence based interventions can also fall within the spectrum of harm reduction goals. Essentially, harm reduction supports the idea that those with addiction or substance use issues should be treated with dignity and respect and have a wide selection of treatment options in order to make an informed decision about their individual needs and what would be the most effective for them, while also reducing the harms.

**References**

i Thomas, G. (2005) *Harm Reduction Policies and Programs Involved for Persons Involved in the Criminal Justice System.* Ottawa: Canadian Centre on Substance Use.

ii Erickson et. al. (2002) Center for Addiction and Mental Health and Harm Reduction. A Background Paper on its Meaning and Application for Substance use Issues. Retrieved from: <http://www.camh.ca/en/hospital/about_camh/influencing_public_policy/public_policy_submissions/harm>

iii Pires, R. et. Al. (2007).*Engaging users, Reducing Harms. Collaborative Research Exploring the Practices and Results of Harm Reduction.* United Way Report. Retrieved from:<http://ekonomos.com/wp-content/uploads/2014/03/Harm-Reduction-Report.pdf>

iv Bierness, D. (2008) Harm Reduction: *What’s in a name? Canadian Center on Substance Abuse National Policy Working Group.* Retrieved from: <http://www.ccsa.ca/Resource%20Library/ccsa0115302008e.pdf>

v Marlatt, A. (2011). Integrating Harm Reduction Therapy and Traditional Addiction And Traditional Substance Use Treatment. *Journal of Psychoactive Drugs*. 331:1