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HARM REDUCTION

Drug misuse in New York is a leading cause of premature morbidity and mortality and one of the state's most intractable public health problems.^{1,2} To reduce the harm of illicit drug misuse on our families and communities, we need a comprehensive and integrated public health approach that includes prevention, treatment, harm reduction, and public safety. We need the cooperation and participation of all sectors of society to reorient our policies towards new measures of success -- improvements in the health of individuals, families, and communities. Reductions in overdose and other drug-related deaths; decreases in incidence of blood-borne diseases, like HIV and hepatitis; drops in drug-related injuries and emergency room visits; increases in the proportion of those needing treatment who receive it; fewer disruptions in families caused by incarceration, child abuse and neglect, and domestic violence -- these should become the metrics by which we judge the effectiveness of our policies.

Harm reduction is a public health philosophy that takes an individual from where they are and works to reduce the risk and negative consequences associated with a particular activity. Originally developed in the context of reducing risk attendant to drug use, this concept can be adapted to other contexts. For example, increased enforcement of drunk-driving laws is a harm reduction strategy to address excessive drinking. Drug-related harm reduction policies and programs provide people with the tools and education to help reduce the negative effects of drug use until individuals are willing and able to stop using drugs. Harm reduction approaches range from policies, like smoking bans, to specific programs, like distributing Narcan to prevent overdose deaths.

Syringe Availability

Experts understand addiction as a chronic, relapsing condition and acknowledge the need to provide care and services to active users to improve their health and the health of the communities in which they live. Syringe exchange programs reduce the sharing and re-use of syringes^{3,4} without increasing the number of people who use drugs or the number of drug injections.^{5,6,7} Moreover, syringe exchange programs have proven effective at providing hard-to-reach populations with important public health services, such as referrals to drug treatment and medical services and provision of TB and sexually transmitted disease testing. In a review of the literature by National Institutes of Health Consensus Panel on HIV Prevention, experts concluded that syringe exchange programs show reductions in risk behavior as high as 80 percent and reduce HIV among injection drug users by as much as 30 percent.⁸

New York has several syringe exchange programs and has also changed its laws to allow persons 18 years and older to purchase or possess a small number of syringes with a prescription and without being liable for arrest.⁹ Research shows that community-level interventions to educate community members and pharmacists about syringe access leads to increased pharmacy use by injection drug users and decreased syringe reuse,¹⁰ without increasing the number of discarded syringes or increasing transmission of HIV.¹¹ Programs, providers, and pharmacies that provide access to sterile syringes can also help educate drug users about risk reduction and link them to needed services, like medical care and drug treatment. Increased access to sterile syringes must be accompanied by laws that make syringe possession legal and by training for police on how to respond to situations where syringes are discovered.

Overdose Death Prevention

Between 1990 and 2000, almost 9,000 people died from drug overdoses in New York City alone. Overdose death is the 4th leading cause of death among adults in New York City, and the odds of dying from an overdose are higher among Black and Hispanic males.^{12,13} Narcan programs, which distribute life-saving medication for use by drug users in cases of accidental overdose have the support of many medical providers.¹⁴ Such programs are both feasible to implement^{15,16} and effective in preventing overdose deaths.¹⁷ Fear of police intervention was cited as the number one reason people do not call or delay calling for help when someone overdoses.¹⁸ Other strategies for preventing overdose deaths are laws which prohibit criminal sanctions against those seeking or receiving medical care in the case of overdose.

Promoting Access to Health and Mental Health Services for Active Users

Insuring that substance users have access to high quality medical and social services is also a form of harm reduction that improves both the lives of active users and the health of communities. Substance users are at risk for a host of medical problems, including increased rates of HIV and other blood borne diseases as well as abscesses, tuberculosis, liver disease, injury, and pulmonary disease.^{19,20,21,22} Identification and treatment of infectious disease are especially important for preventing further transmission. Hepatitis B vaccines, for example, are both safe and effective but have been slow to reach substance users despite their increased risk.²³ Regular outpatient medical care also has important benefits; drug users who get regular medical care are able to stop minor problems from becoming worse and have fewer hospitalizations.²⁴ In addition, medical care facilities are important sites for identifying and intervening early with people who may not know they have a substance use problem. Screening and brief interventions in medical facilities have proven effective in reducing substance use by as much as 67 percent at six months.²⁵ Psychiatric issues, like depression, are also common among people who use drugs and PLWH/A.^{26,27} Unfortunately, despite these special medical needs, substance users are less likely than non-users to be insured, have a regular source of care, or receive required medical services even after adjusting for demographics and ability to pay.^{28,29}

Strengthening Communities

Healthy and safe communities are important in helping reduce the harm that drug use causes because research increasingly suggests that social factors -- like income inequality, poverty, unemployment, community norms, literacy issues, deteriorating housing -- affect alcohol and drug use behavior, the health of drug users, and the differential morbidity among drug users from different racial and ethnic groups.^{30,31,32,33,34,35} Civic leaders, social service providers, community residents, police and other law enforcement officials all play a critical role in fostering neighborhoods where residents can safely go to school, work, play, and participate fully in community life. Safety, employment opportunities, good education, literacy, and prevention are all harm reduction strategies.

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⁸ National Institutes of Health. 1997. [Consensus Development Statement. Interventions to prevent HIV risk behaviors](#), February 11-13, 1997:7-8.

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