

QUICK TAKE

HARM REDUCTION IS ESSENTIAL TO U.S. DRUG POLICY

MANY AMERICANS ARE UNCOMFORTABLE THINKING ABOUT SUBSTANCE USE AND ITS IMPACT ON SOCIETY. While there are many issues that divide the American public, drug policy need not be one of them. The idea that all people have inherent worth is central to every major religion and the story we tell ourselves about being American. This includes people who use drugs, especially when recognizing that addiction is a medical impairment characterized by recurrent use of substances causing clinically significant impacts. While there is no question that the societal problems associated with substance use disorders are real and difficult, research demonstrates that a punitive approach to addiction only exacerbates the conditions that can lead to substance use and related harms.

This approach has criminalized whole generations of people, most especially Black Americans and other racial and ethnic groups, and has destabilized families and communities. Today, we are left with entrenched stigma toward people who use drugs and communities affected by substance use, which stymies effective policies and action. As a result, overdose deaths in the United States are rising at an alarming rate and have contributed to decreased life expectancy. Adopting effective, evidence-based policies such as harm reduction is needed to prevent overdose deaths and it is also critically important to our collective work to end the HIV epidemic and eliminate viral hepatitis as a public health threat in the U.S.

individuals and communities affected by substance use disorders, it meets them where they are and aims to reduce the harmful effects that can accompany drug use. In contrast to approaches that punish people for using drugs, harm reduction supports individuals to take responsibility for their own health and the health of their communities to reduce their substance use and/or minimize the negative consequences of this use on themselves and the people around them. It is often a critical first step in engaging people who use drugs in healthcare and treatment services and must be the anchor for effective national drug policy.

WHAT IS HARM REDUCTION?

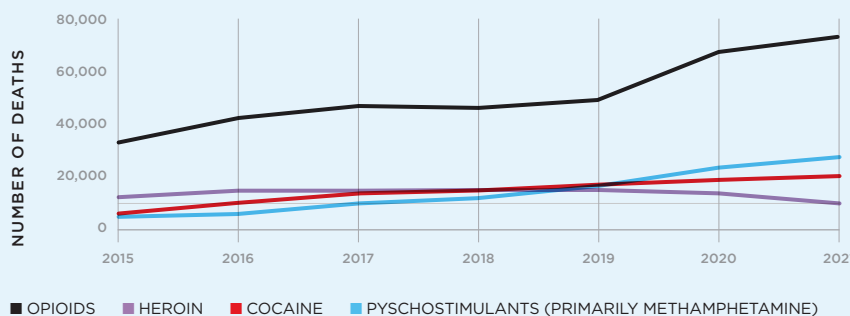
Harm reduction is a philosophy that recognizes the humanity and rights of people. Instead of ignoring or condemning

HARM REDUCTION DOES NOT PROMOTE DRUG USE

Since the earliest days of the U.S. HIV epidemic when advocates were seeking to distribute sterile syringes as a way to prevent HIV transmission, opponents have asserted

100,000 AMERICANS DIE DUE TO OVERDOSE EACH YEAR AND DEATHS ARE RISING

NUMBER OF DRUG OVERDOSE DEATHS BY DRUG: UNITED STATES



OVERDOSE DEATHS INCREASED DURING THE COVID-19 PANDEMIC*

PSYCHOSTIMULANT DEATHS UP (PRIMARILY METHAMPHETAMINE)

82%

OPIOID DEATHS UP

50%

COCAINE DEATHS UP

36%

Data from National Center for Health Statistics, 2021 data are provisional. (<https://www.cdc.gov/nchs/nvss/vsrr/drug-overdose-data.htm>)

*Data from 2020-2021, 2021 data are provisional.

that this and other harm reduction interventions “promote” drug use. This question has been extensively studied, and a consensus among medical researchers, provider organizations such as the American Medical Association, and various federal agencies have concluded that harm reduction services such as syringe services programs (SSPs) do not encourage increased drug use or initiate new users. Instead, harm reduction services reduce the transmission of HIV and viral hepatitis, facilitate access to substance use disorder treatment, and reduce cost burdens on the health system. (Centers for Disease Control and Prevention). Indeed, the Biden Administration’s support for SSPs is a continuation of the last Administration’s support for these evidence-based interventions, demonstrating bipartisan support for these programs.

WHAT ARE HARM REDUCTION SERVICES?

Harm reduction refers to a range of evidence-based health promotion strategies and is a way to engage with people who use drugs, creating pathways to substance use disorder treatment. It may include various services such as:

Syringe Services Programs (SSPs): SSPs are community-based programs that provide services including linkage to health care; access to and disposal of sterile syringes and injection equipment; and vaccination, testing, and linkage to care and treatment for infectious diseases.

Safe Smoking Kits: Analogous to SSPs for people who smoke as a way of consuming drugs, they provide supplies that can reduce the risk of infectious disease transmission and prevent burns or other injuries. Smoking can have fewer health risks compared to injecting.

Fentanyl Test Strips: A leading cause of overdose is from illicitly manufactured fentanyl. Test strips can indicate the presence of fentanyl so that users can adjust their use.

Naloxone: Naloxone is an opioid antagonist that reverses an overdose and saves lives.

Overdose Prevention Services: Overdose prevention services provide spaces for people to use previously-obtained illicit substances with sterile equipment, in settings where they can be observed and others can quickly intervene in the event of an overdose.

Contingency Management: This behavioral therapy uses motivational incentives to reward people when they reduce their drug use or achieve other health goals. It has been found to be an effective intervention for people who use methamphetamine.

FOLLOW BEST PRACTICES AND LISTEN TO COMMUNITIES IMPACTED BY DRUG USE

Partnerships with the communities most impacted by drug use is a necessary component of an effective drug policy response (see *Big Ideas: Improving the Health of People Who Use Drugs and People in Recovery is Essential for Ending the HIV Epidemic*, March 2021 at our website below). More efforts and funding are needed to involve and support people who use drugs or who are in recovery in developing and implementing policies, programs, and services.

LET’S REMEMBER OUR SHARED VALUES

All people deserve to be treated with dignity and are worthy of the opportunity to live healthy lives and receive social support. By embracing a common goal of strengthening our communities, we can bridge many of our divides. It is time for an unwavering commitment to loving our neighbors and saving lives.

TO LEARN MORE

The O’Neill Institute’s **Addiction and Public Policy Initiative** works alongside the **Infectious Diseases Initiative** and offers a depth of expertise related to policy reform at the national, state, and local levels. More information can be found at <https://oneill.law.georgetown.edu/initiatives/addiction-public-policy/>.

The **National Harm Reduction Coalition** is a leading voice for the perspectives and expertise of people who use drugs and allies working to expand access to harm reduction. More information is available at <https://harmreduction.org>.

Various federal agencies support prevention and treatment programs, and conduct research and surveillance on issues related to substance use and substance use disorders. The White House **Office of National Drug Control Policy (ONDCP)** coordinates the government’s response (<https://www.whitehouse.gov/ondcp/>); the **Substance Abuse and Mental Health Services Administration (SAMHSA)** is the lead federal agency operating programs to support public health approaches to substance use disorders (<https://www.samhsa.gov>); and the **Centers for Disease Control and Prevention (CDC)** conducts surveillance and supports state and local health departments to prevent overdose death and infectious disease transmission (https://www.cdc.gov/injury/features/prescription-drug-overdose/index.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Ffeatures%2Fprescription-drug-overdose%2Findex.html).