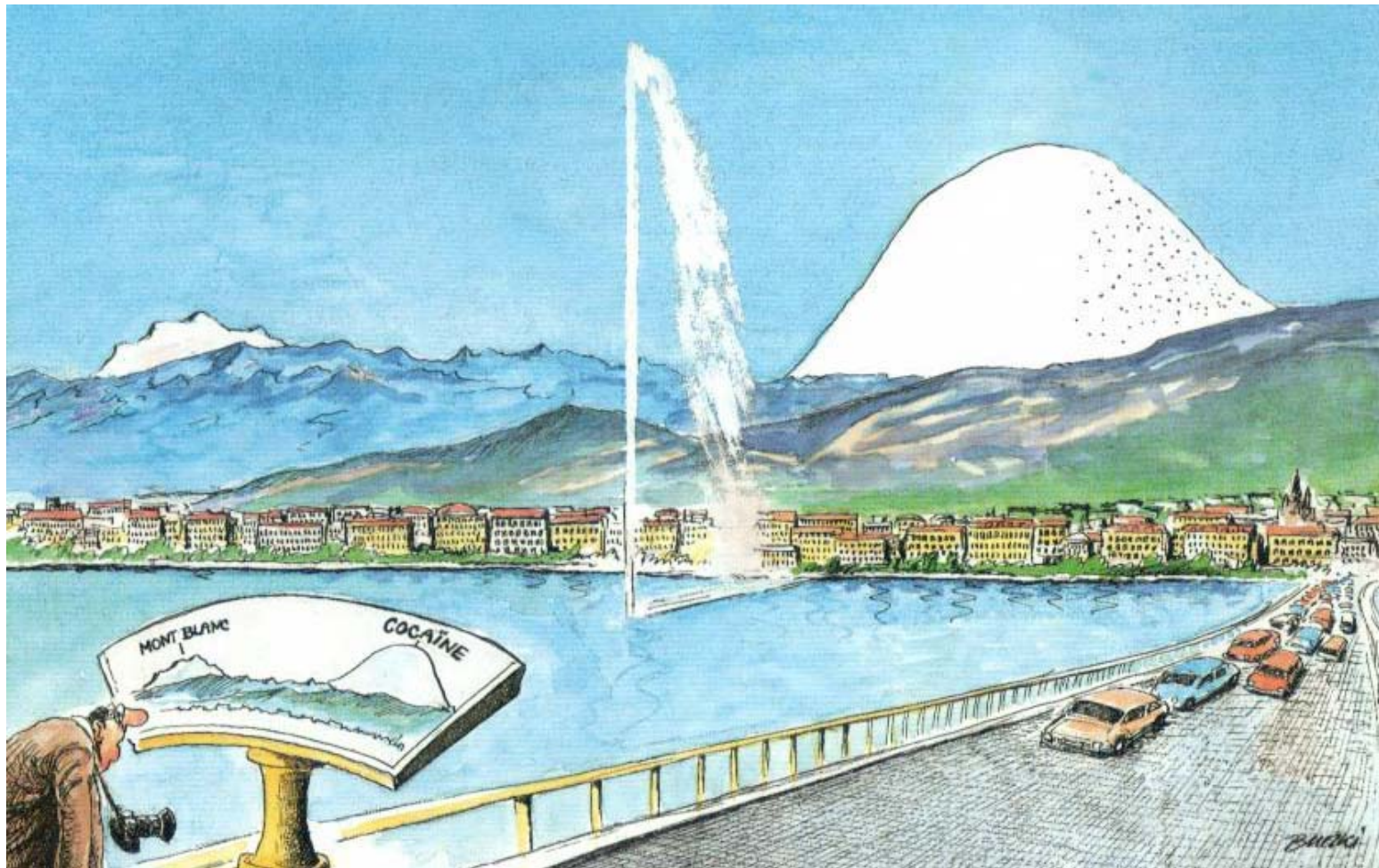




'Harm Reduction' at work



Definition Harm Reduction

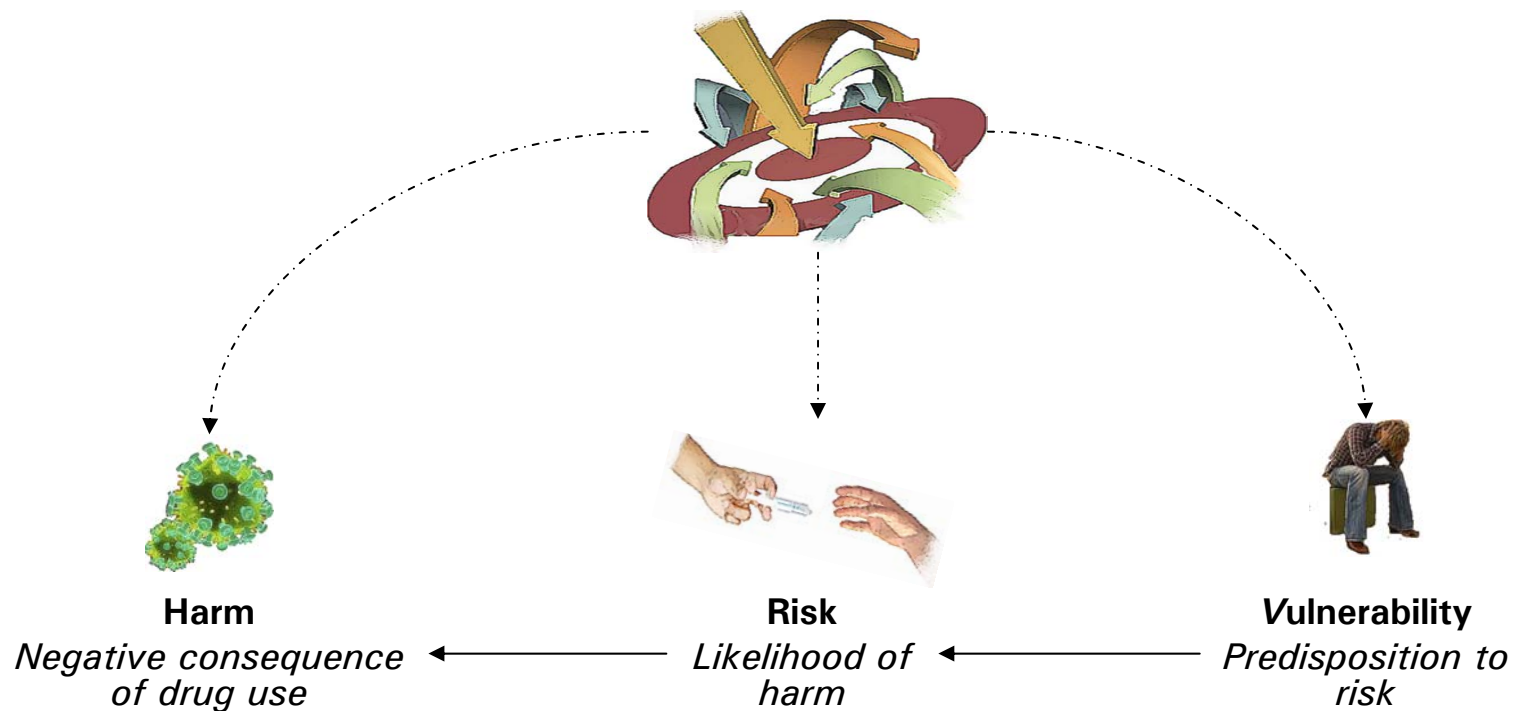
1. An objective

- To ↓ harm

2. An approach/strategy = 'Harm Reduction'

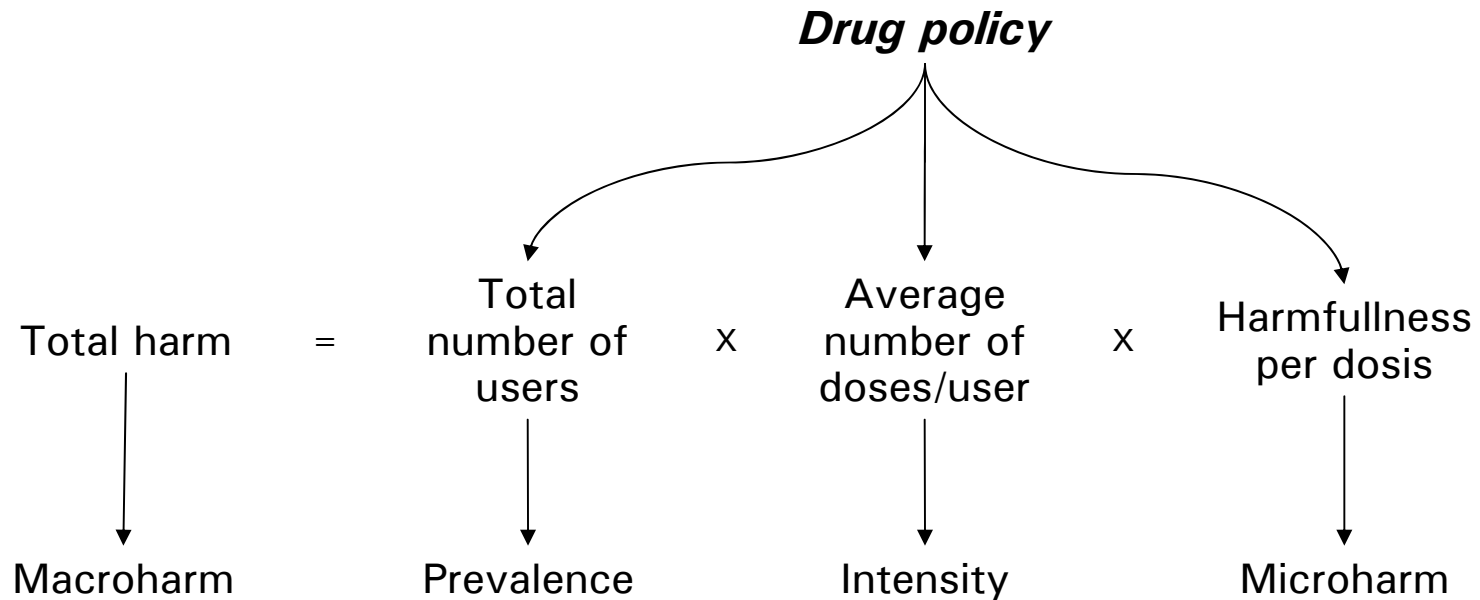
- Set of general principles
 - focus on ↓ harm rather than ↓ drug use per se
- Specific types of intervention

Possible targets of 'Harm Reduction'

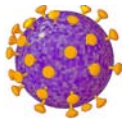


Evaluating harm

McCoun, 1996; McCoun, 1998



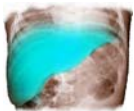
Drug related harms



HIV/AIDS



Accidents and aggression



Viral Hepatitis



Public nuisance



Overdose



Crime



Addiction



Other physical and mental health problems



Harms caused by criminalization

Levels of intervention

Macro-level
Legislation
Policy Frameworks



Meso-level
Organization of Health Care and
Treatment Systems



Micro-level
Services, Treatment Protocols
Patient-Provider Interaction



Needle and syringe programs (NSP)



Needle and syringe programs (NSP)

- Since 1984 in Amsterdam
- Main objective: ↓ transmission of blood borne-viruses
- Means
 - ↑ number syringes in circulation
 - encourage return and safe disposal
 - also distribution other equipment (sterile wipes, 'cookers', filters, sterile water etc.)

Diversity of NSP: Services

Coffin, 2000; Miller, Tyndall, Spittal, Li, Palepu, & Schechter, 2002; Moatti, Vlahov, Feroni, Perrin, & Obadia, 2001; Riley et al., 2000

Primary outlets



e.g. pharmacies,
vending machines

More comprehensive programs



education
information

referral



drug treatment
services

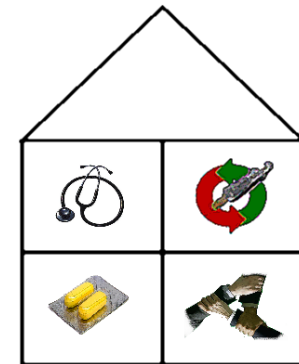


HIV counselling
and testing



social and
welfare services

Run in association with treatment services



Diversity of NSP



Free or charge or fees for the equipment ?



Collection of used equipment ?



Strict exchange (1 for 1), other rates, or freely available equipment and in unlimited quantities

NSP in Prisons



- First in Switzerland in 1992
 - since 1998 possibility of automatic syringe dispensers
 - ↓ sharing rates, incidence HIV, HBV or HCV
- Currently available within prisons in Switzerland, Germany and Spain

Consumption rooms



Cave confusion



Shooting galleries

↓
Illegally acquired drugs

↓
Operate for profit



Drug consumption rooms

↓
Illegally acquired drugs

↓
Legal and supervised



Heroin prescription programs

↓
Prescribed medication

↓
Medical facility

Drug consumption rooms



Response to open drug scenes



Aimed to ↓ harm



for drug user

- ↓ overdose
- Needle sharing/reuse
- ↓ HIV, HBV and HCV
- ↓ venous damage
- ↑ access to treatment
- Social support and reintegration

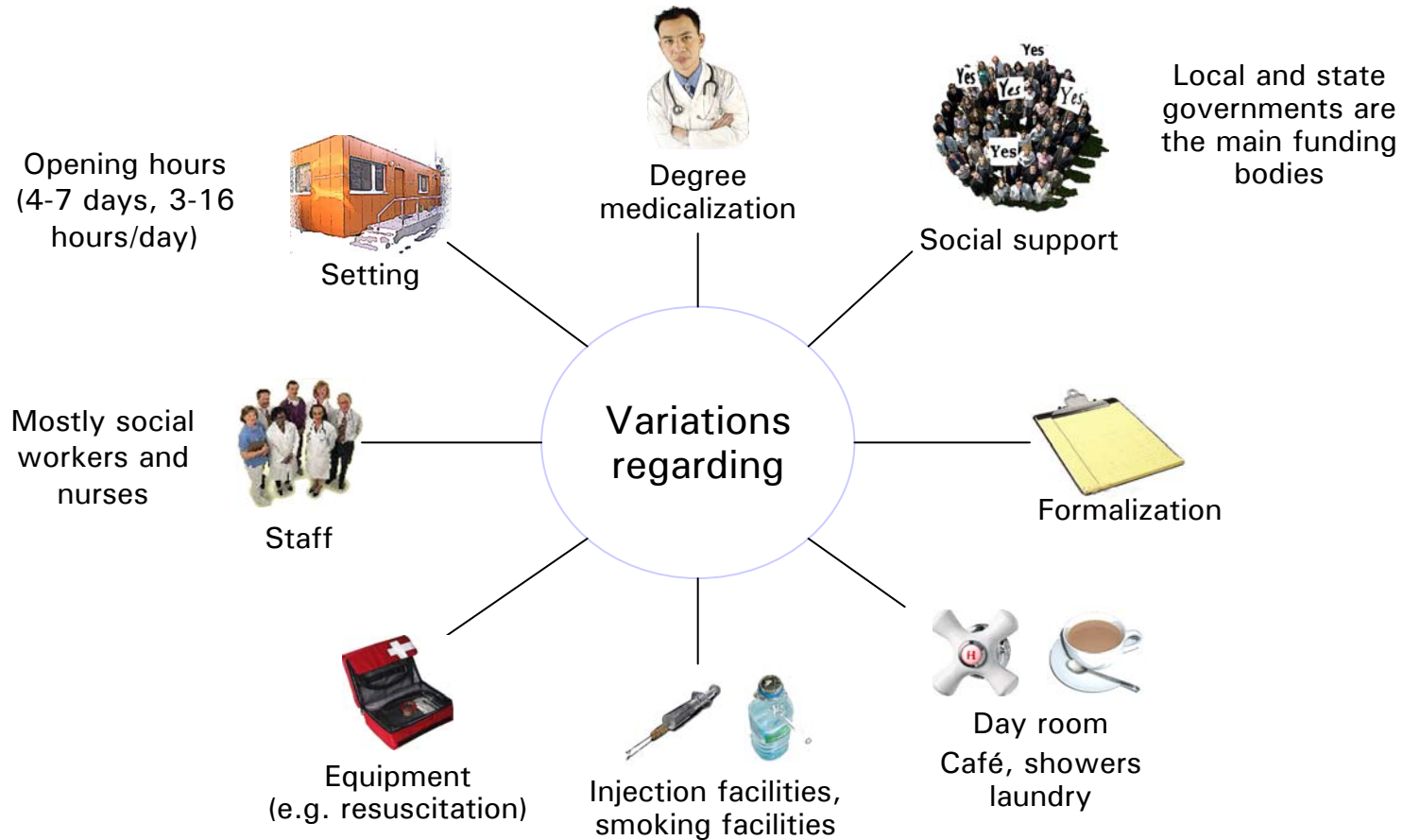


for wider community

- ↓ open drug scenes & public injecting
- ↓ discarded needles and syringes and other drug related litter

Drug consumption rooms

Kimber 2001



Drug consumption rooms

Kimber 2001

- Core set of onsite services and programs
 - Safer injecting advice and overdose management
 - NSP
 - Counseling
 - primary medical care
- Accessory
 - legal advice, opening times for women only, case management, parenting skills, art materials, recreational trips, mobile outreach resuscitation units

Functioning of Consumption Rooms

Kimber 2001

- Injecting places: 3 to 12
- Time limit: 15 - 30 minutes
- Average number of visits/d: 25 – 400
- Minimum age : usually 18 (except Basel and Bern: 16)
- Ongoing consultation with police and local government
- Extensive consultation with community stakeholders pre and post commencing operation.
- Dealing of drugs not permitted
 - However, Rotterdam SIC : approved 'house dealers'
 - attempt to regulate the quality and price of drugs for their clients

Functioning of Consumption Rooms

Kimber 2001

Some centers

- Intoxicated clients not allowed to inject
- Place restrictions on some injecting sites (eye, face, neck, groin, genitals, chest and abdomen)
- Clients may assist each other when injecting
- Sometimes residency restrictions

Effectiveness of consumption rooms

- Contacting hard to reach or vulnerable drug users
 - Incl. HIV, HCV, homeless etc.
- ↑ access to health care
- ↓ syringe sharing, ↑ safer injecting, ↓ HIV infections
- ↓ overdose risks
- ↓ public drug use
- ↓ discarded paraphernalia in public areas
- = ↓ crime

Nadelmann et al., 1999; Kimber 2001; MSIC Evaluation Committee, 2003; Wood, Tyndall, Montaner, & Kerr, 2006

HIV testing

↓ AIDS risk behaviors

Meta-analysis 27 published studies

- HIV counselling and testing
 - effective means of secondary prevention for HIV-positive individuals
 - not an effective primary prevention strategy for uninfected participants



*Casdonte et al. 1990, Roggenburg et al. , 1990;
Rugg & McGowan 1990; Weinhardt et al., 1999*

Vein maintenance



- Aims: ↓ risk cellulitis, abscesses, skin breakdown, endocarditis etc.

- Teaching priorities
 - ↑ cleanliness injection technique
 - proper vein maintenance (vein preparation, `saving' one vein, avoiding arteries, proper site selection)
 - use strategies (i.e. decreasing the number of injections, changing to less irritating drugs).

Resuscitation

Hargreaves & Lenton, 2003;
Hargreaves & Lenton, 2001



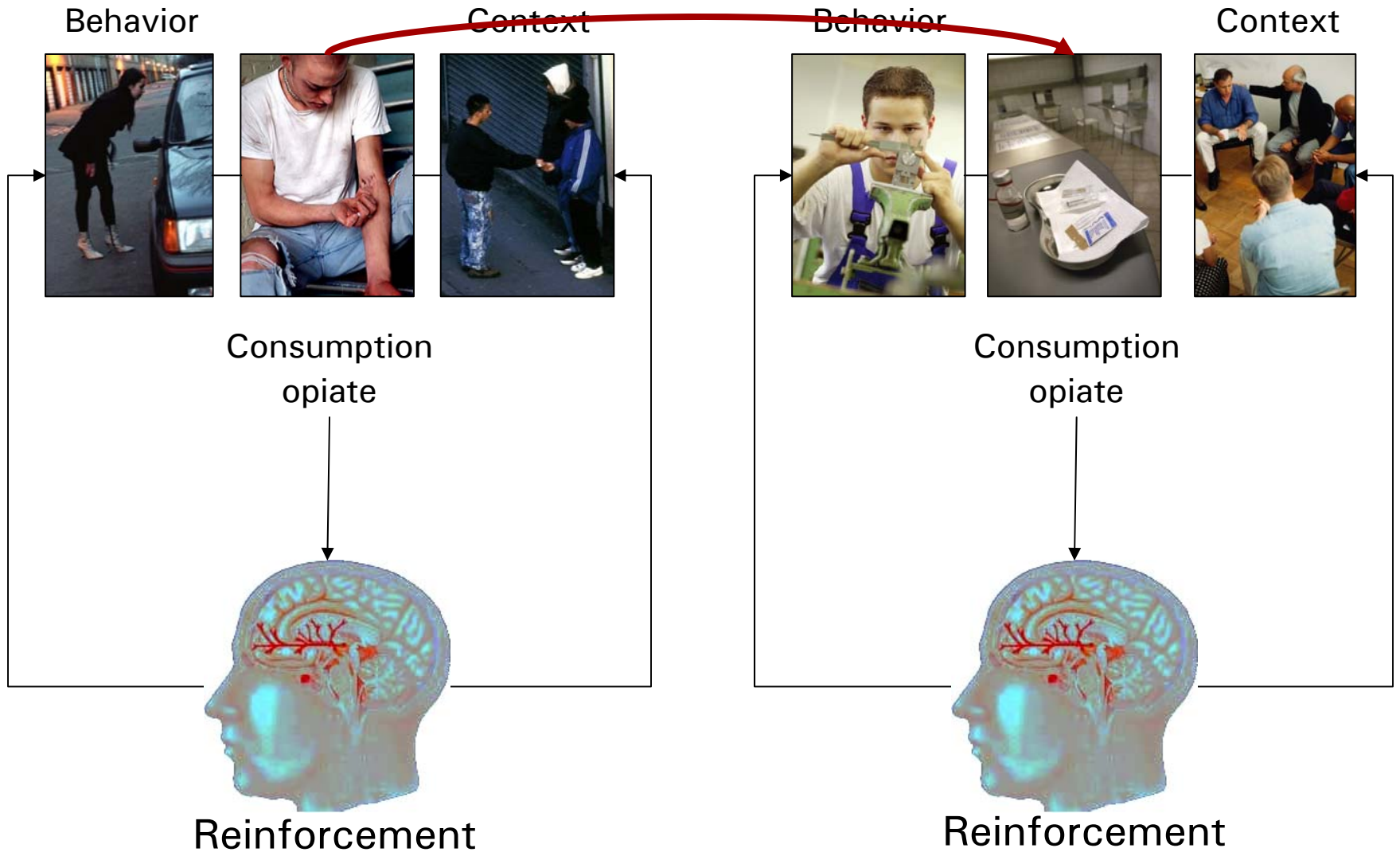
- Training of peers in first aid and CPR
 - Mostly part of an overall approach
- Provision of naloxone to
 - drug users
 - family members
 - friends
- Combining with resuscitation training essential !

Heroin prescription



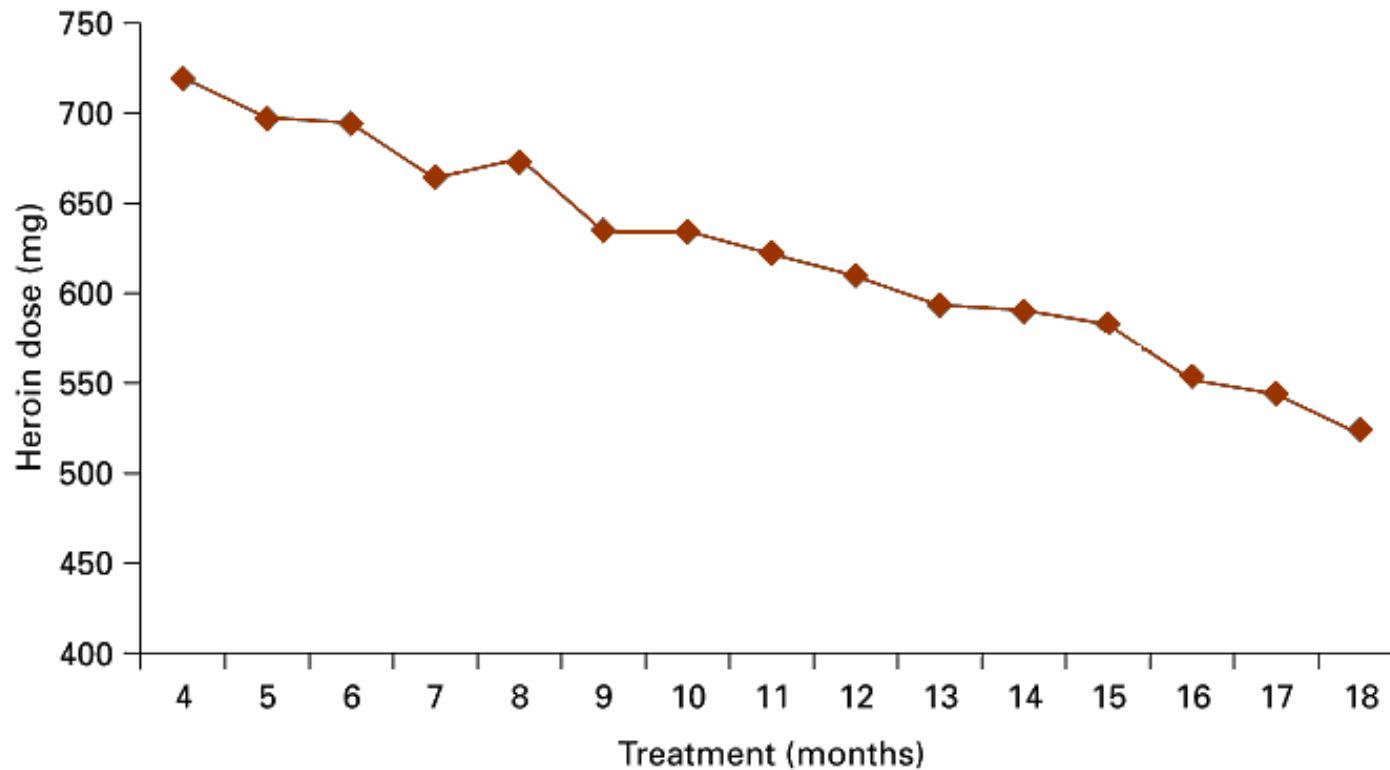
Scene

Therapy



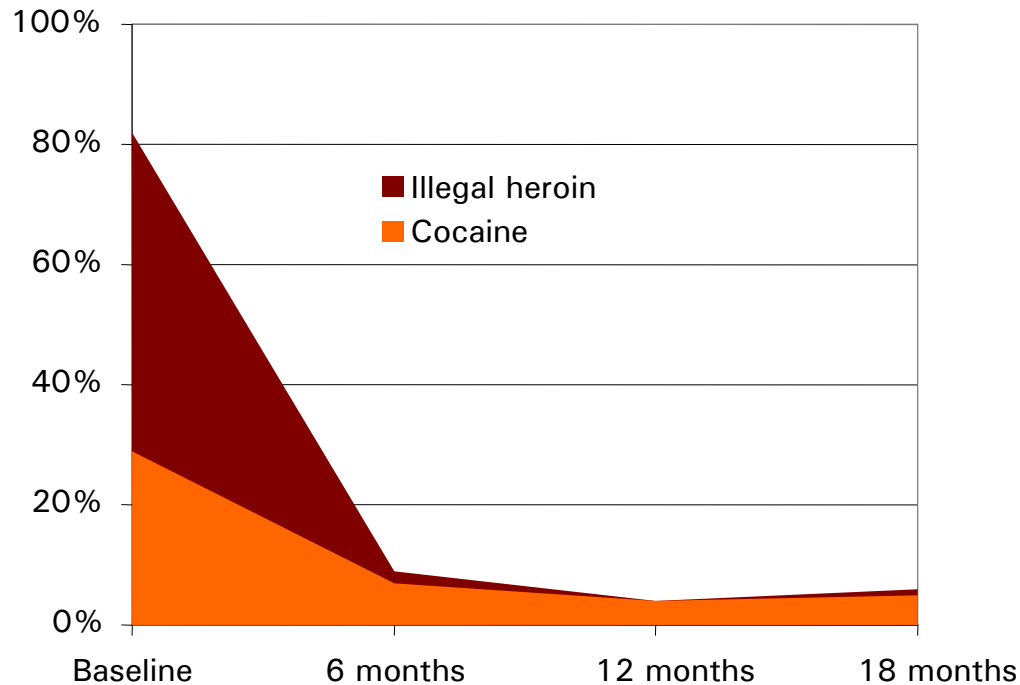
Evolution of doses HAT

Rehm et al., 2001; Gschwend et al., 2004



Follow-up PROVE

N = 237

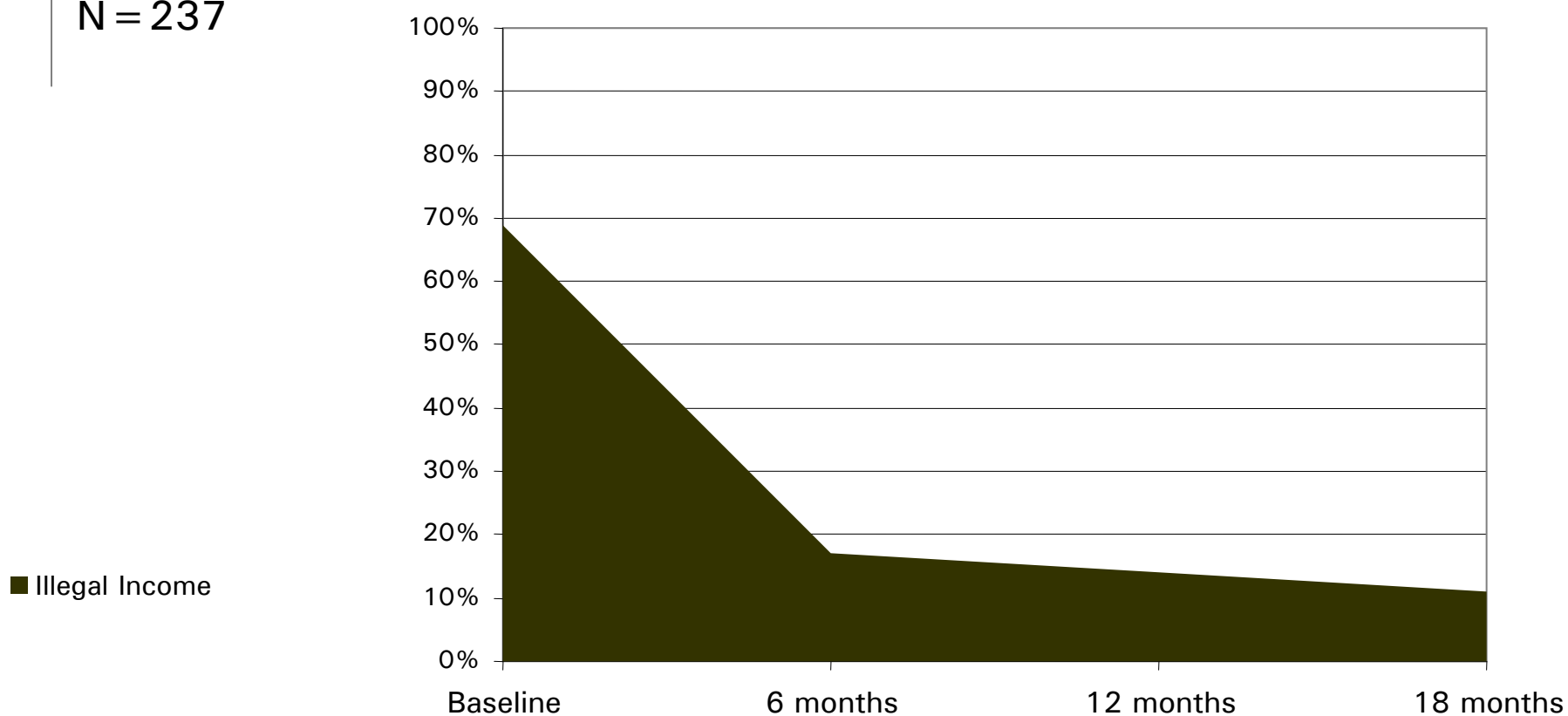


Rehm et al., 2001

Follow-up PROVE

Rehm et al., 2001

N = 237



Follow-up PROVE

Rehm et al., 2001

N = 237



Are Heroin Programs 'Harm Reduction' ?

Yes

- Prescription opioids = no abstinence

No

- Prescription opioids → abstinence of illegal drugs

Other addictions



Safer crack pipes

→ ↓ mouth injuries → ↓ risk transmittable diseases



Smokeless systems of nicotine delivery

Vaporizers, patches ...



Safe alcohol use

“Wet” homeless shelters (Seaton House, Toronto)

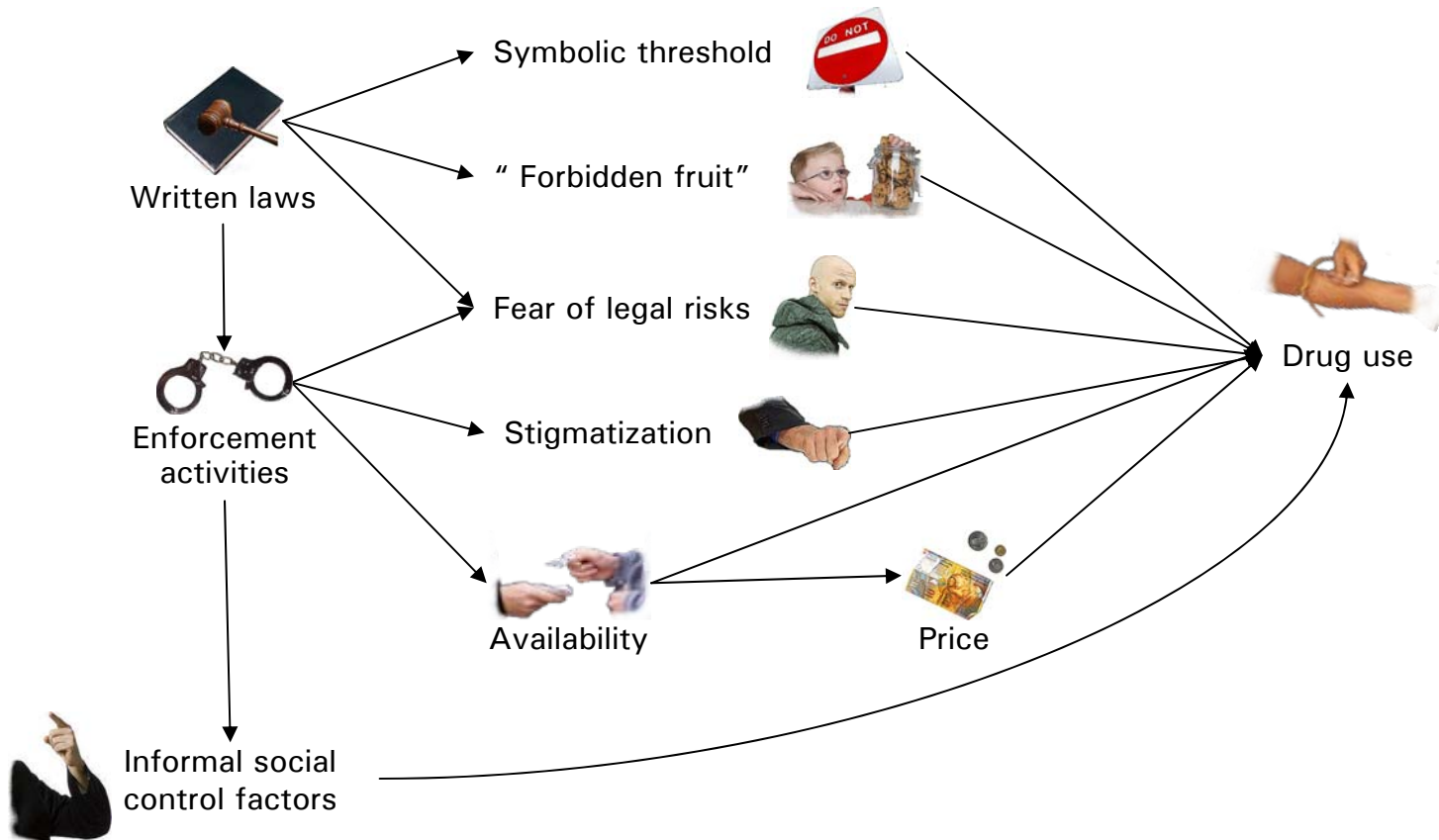


Electronic gambling machines

Rate of near-wins, messages on screen ...

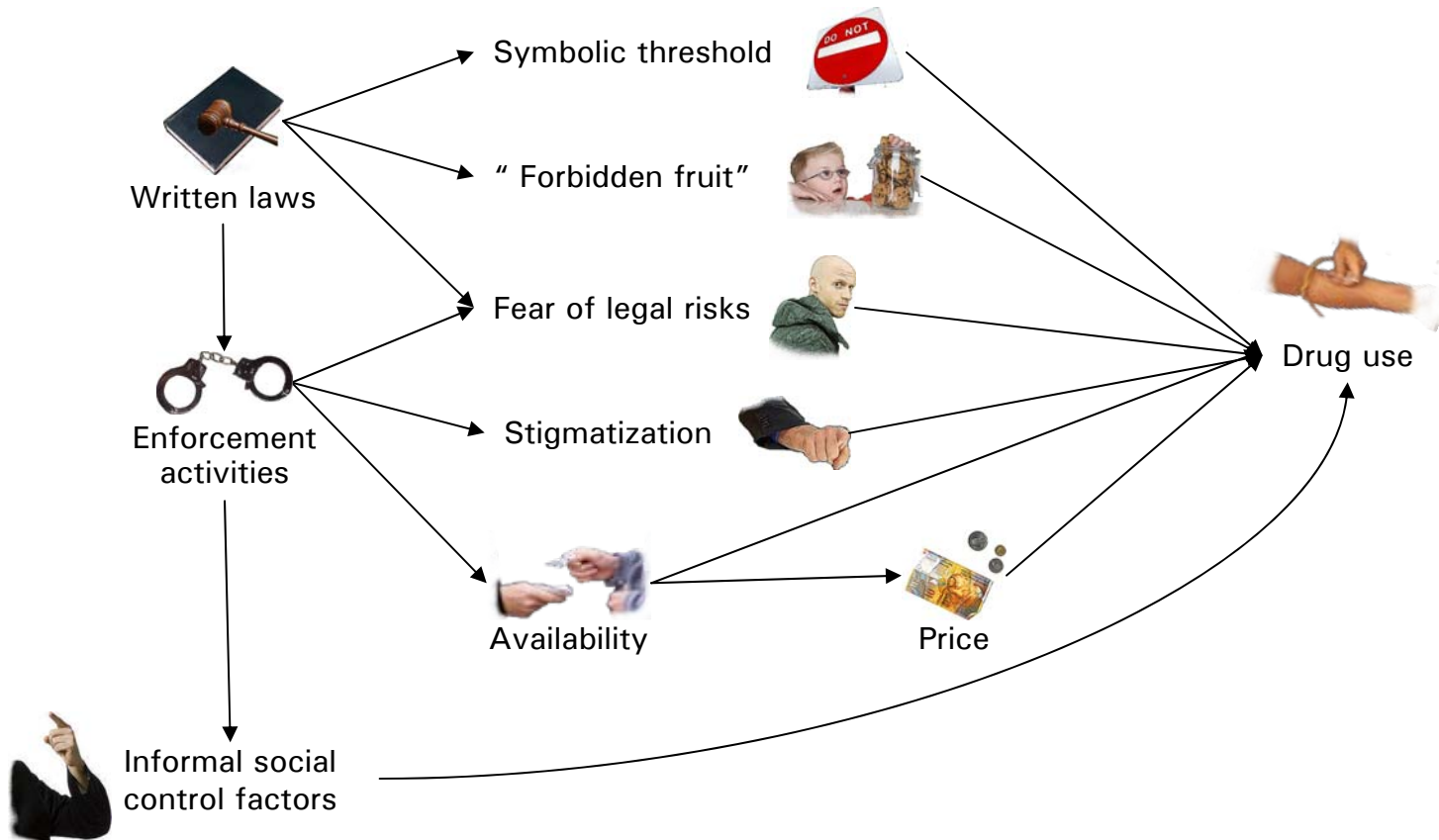
Potential impact of legal system

McCoun, 1993



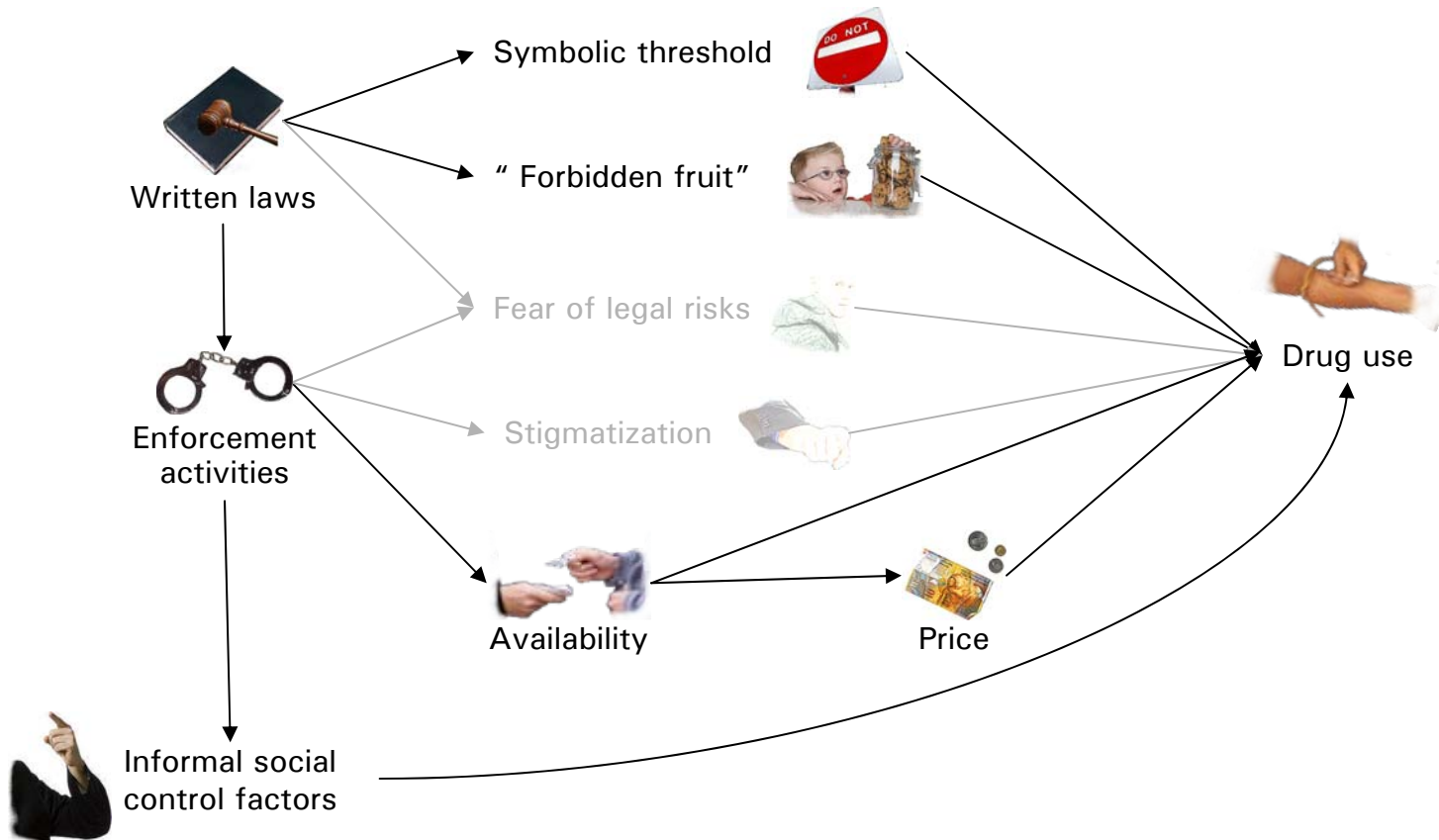
Decriminalization

McCoun, 1993



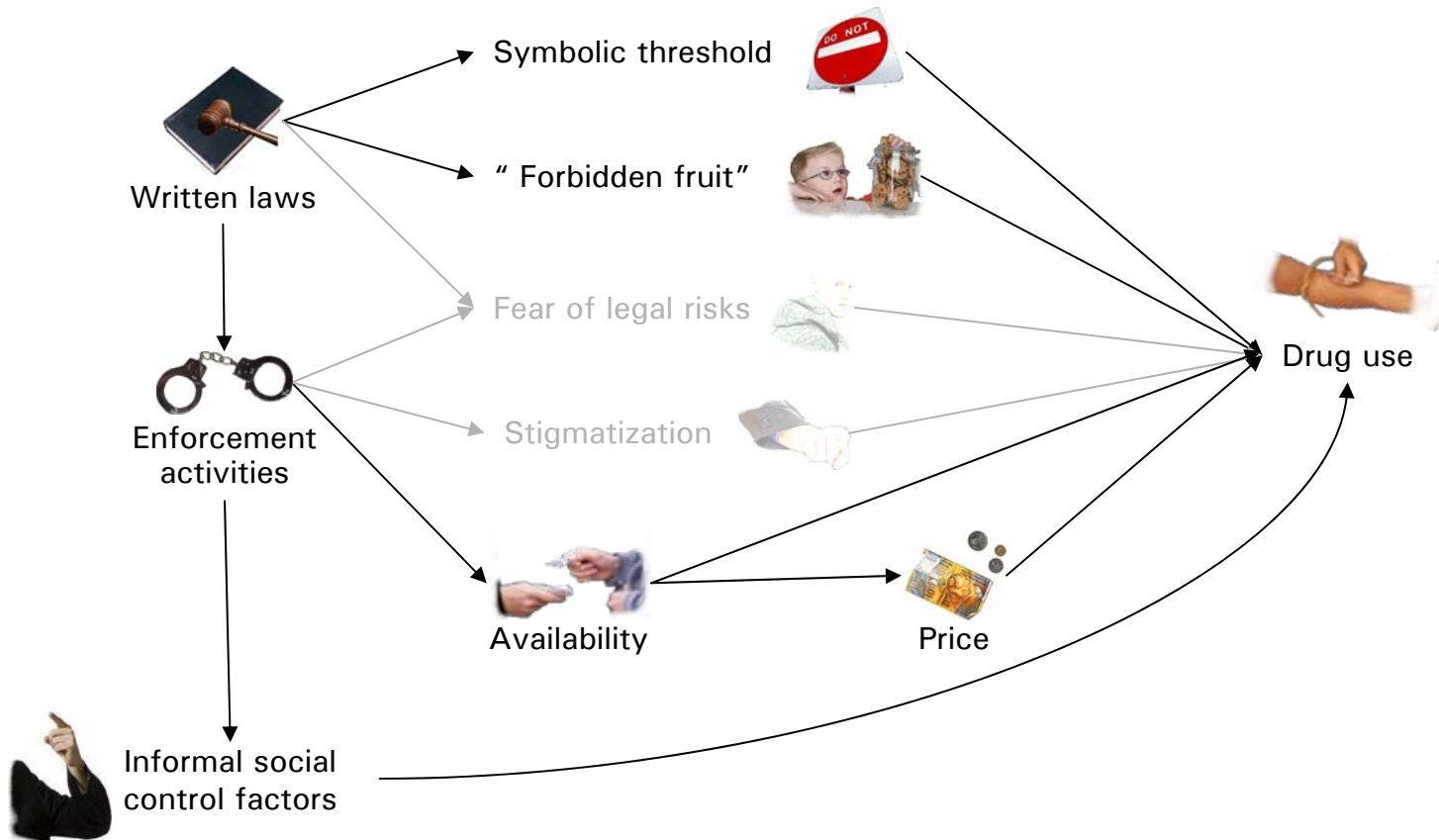
Decriminalization

McCoun, 1993



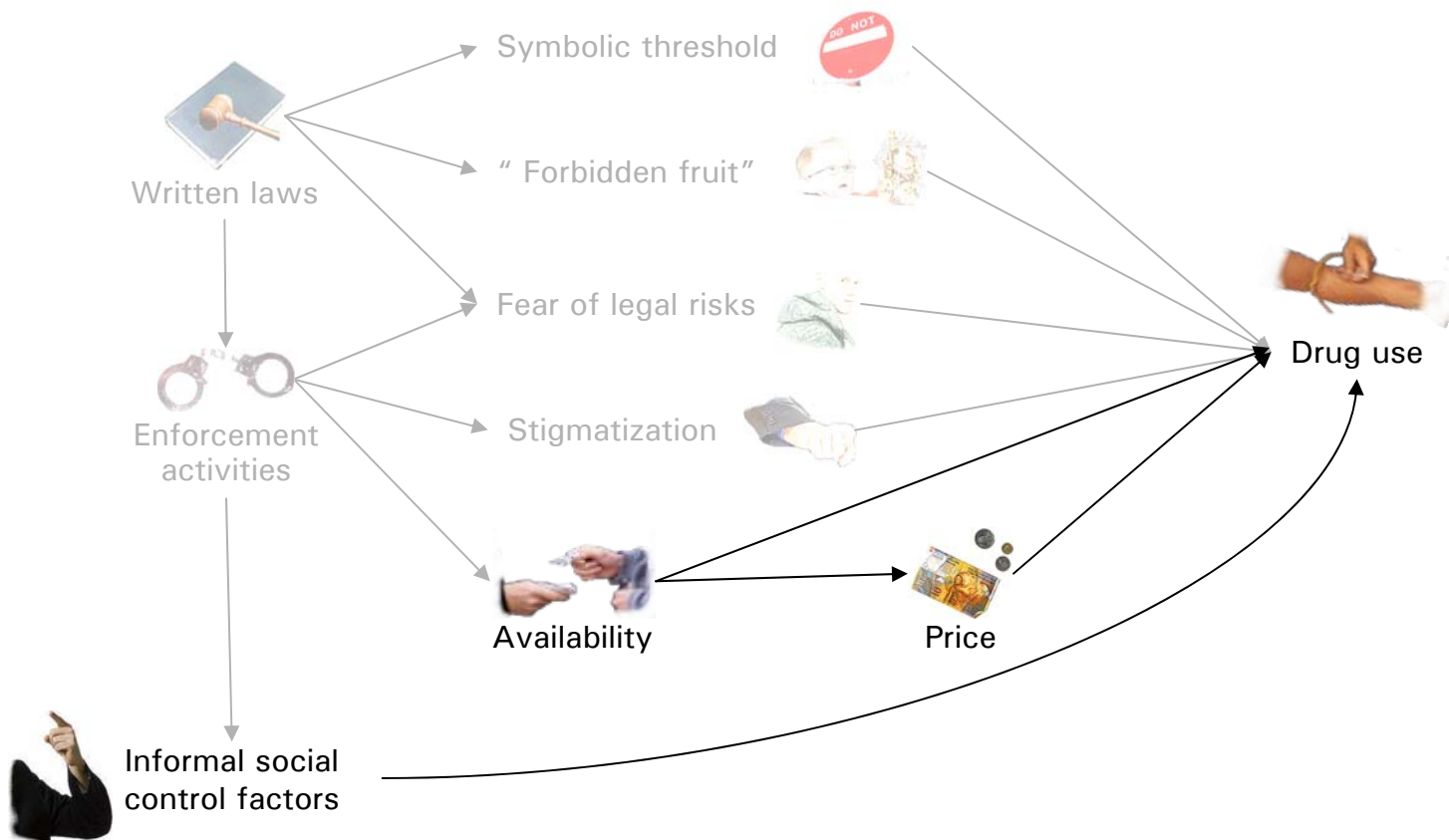
Legalization

McCoun, 1993



Legalization

McCoun, 1993



Tolerance areas

- Platzspitz (*Needle Park*), Letten-Station, Zurich
- Agreed area of space (usually public space)
 - police apprehends dealers
 - but follows discretion in relation to drug users (ie. tolerance policy regarding injecting and drug use)
- Sites had been usually associated with provision of NSP and outreach-based primary health and welfare services

'Harm Reduction' or Abstinence ?



'Harm reduction' for whom ?

Kellog, 2003



unable to stop at the present time ?
('Harm reduction' of despair)



unwilling to stop using at the present time ?



rationally choosing to use substances ?

Abstinence in 'Harm reduction'?

- Where most feasible way to reduce harm → abstinence a valid and legitimate goal
- Interventions to promote abstinence are “a special subset of harm reduction”

IHRA, 2002; Heather, 1993

Gradualism

Seeks to create continuum



Utilizes best of both HR and abstinence based paradigms

Kellog, 2003; Marlatt, 1996, 1998a, 1998b; Marlatt & Kilmer, 1998; Marlatt, Larimer, et al., 1993; Marlatt, Somers, & Tapert, 1993; Marlatt et al., 2001

Gradualism

Seeks to create continuum



Emphasis:

- positive change
- transformation as therapeutic goals

—————> Change-focused system

Kellog, 2003; Marlatt, 1996, 1998a, 1998b; Marlatt & Kilmer, 1998; Marlatt, Larimer, et al., 1993; Marlatt, Somers, & Tapert, 1993; Marlatt et al., 2001

Gradualism

- Refuses pessimism about ability of addicts to stop addictive behaviors ("soft bigotry of low expectations")
- abstinence when windows of opportunity open

Integrating the approaches

Integration HR in
abstinence-
oriented settings



Integrating
abstinence into HR
endeavors



Building-up an
integrative
system



Progressive objectives

Kellogg, 2003



Time frame



immediate



long term

Approach based on...



distribution of paraphernalia and dissemination of knowledge



Therapist-patient relationship





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Service d'addictologie



Centre collaborateur OMS
pour l'enseignement et la recherche sur les addictions