Harm Reduction A Harm Reduction Approach

Using a kind and compassionate harm reduction approach opens the door to support and guidance for people who use substances

What is a harm reduction approach?

A harm reduction approach aims to reduce the negative consequences of using psychoactive substances, without necessarily reducing substance use itself.

Through policies, programs, and practices, a harm reduction approach:

- Accepts that abstinence may not be a realistic or desirable goal for a person
- Emphasizes that stopping substance use is not required to access health or social services

Psychoactive substances

are commonly known as drugs. These are legal and illegal substances that affect mental processes. Examples include:

- Caffeine
- Alcohol
- Tobacco
- Prescription drugs •
- Cannabis
- Cocaine
- Ecstasy
- Opioids

Key principles of harm reduction

Harm reduction is founded on kindness, compassion, and caring, and is underpinned by several key principles. These principles are consistent with the concept of social justice, as well as healthcare professionals' foundational responsibilities, values, code of ethics, code of conduct, and standards of practice.

Pragmatism

- Non-medical use of psychoactive substances is a universal cultural phenomenon.
- Despite the risks, drug use may also provide people and society with benefits that must be taken into account.

Human rights

- Respect the person's right to receive care and services, and to make choices for their own lives.
- Suspend moral judgment and focus instead on the person's right to human dignity.

Focus on harms

- The person's drug use is secondary to the harm associated with that use.
- The priority is to decrease the negative effects of drug use, rather than decreasing drug use itself.

• Strategies to reduce harm must be identified in all settings (at the leadership and front-line levels), and across the continuum of care.

Priority of immediate goals

- Harm reduction focuses on "meeting the person where they are at" and their immediate needs for care and services.
- Small gains lead towards wellness and a safer, healthier community.

For more information, visit <u>www.ahs.ca/harmreduction</u> or contact the Harm Reduction Services Team at <u>harm.reduction@ahs.ca</u>

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What does harm reduction look like?

Interventions may be targeted at the person, family, community, or society. They can target the health, social, or economic consequences of substance use.

Harm reduction interventions may include:

- Community-based naloxone programs
- Peer support programs
- Supply distribution and recovery programs
- Supervised consumption services
- Opioid dependency treatments

Healthcare providers

interact with a person who uses substances without judgment, or stigmatizing language or actions, regardless of personal beliefs.

People who use substances

have a right to a patient-centered care approach that includes informed choice, and to be an active, full partner in care.

How does a harm reduction approach help?

Harm reduction has many benefits for people who use substances, their families, and communities. Research shows harm reduction activities can:

- Reduce HIV infection and hepatitis
- Reduce overdose deaths and other early deaths among people who use substances
- Reduce injection substance use in public places, and reduce the number of used needles in public
- Reduce the sharing of needles and other substance use equipment
- Educate about safer injecting and reduce injecting frequency
- Educate about safer sex and sexual health and increase condom use
- Reduce crime and increase employment among people who use substances
- Increase referrals to treatment programs and health and social services

BC Centre for Disease Control, Harm Reduction Services

Supervised Consumption Services

also known as SCS, provide care and support for people to use drugs they have previously obtained. SCS also serves as an access point for the many services required by people impacted by substance use. They may not typically access these services due to lack of trust, structural or institutional barriers, and stigma.

For example, SCS provide:

- Sterile supplies for consumption, collection of used supplies for safe disposal, and education for safer consumption practices
- A hygienic environment to reduce harm, including overdose or poisoning death, caused by substance use
- Opioid dependency treatment
- Counseling and social work support and referrals
- Access to basic healthcare, supports to address social determinants of health, and resources for community transitions (either onsite or through referrals)

• Opportunities for people to work towards desired changes or goals that can be slow and incremental

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