US needs harm-reduction approach to drug use, researcher says

14 January 2015

The United States' law-and-order approach to reducing the supply of drugs and punishing sellers and users has impeded the development of a public health model that views drug addiction as a disease that is preventable and treatable. A new policy paper from Rice University's Baker Institute for Public Policy advocates that a harm-reduction approach would more effectively reduce the negative individual and societal consequences of drug use.

According to the paper's author, Katharine Neill, the rate of federal inmates incarcerated for drug offenses hovered at just under 50 percent in 2011, and in 2013 the Obama administration's budget asked for $25.6 billion to fight the drug war, $15 billion of which was directed toward law enforcement. In addition, by some estimates, state and local governments spend a combined total of $51 billion per year on drug-related law enforcement efforts, which suggests they have a lot to gain by investing in treatment options, Neill said.

"That law enforcement efforts continue to dominate drug policy highlights the need to reframe the discourse on drug use and addiction," said Neill, the Baker Institute's Alfred C. Glassell III Postdoctoral Fellow in Drug Policy. "While emphasizing the cost-saving benefits of treatment is important, this should be coupled with more public conversations focusing on drug addiction as a disease requiring medical treatment, not politically based solutions. Reframing the issue in this way should increase the likelihood that a public health approach to drug policy will be adopted for the long term."

The paper, "Tough on Drugs: Law and Order Dominance and the Neglect of Public Health in U.S. Drug Policy," is published in the journal World Medical and Health Policy.

Emphasizing harm reduction is a popular public health approach to drugs, Neill said. "A harm-reduction approach recognizes the permanence of drugs in society and, instead of trying to eradicate drug use, focuses on minimizing harm associated with drug use for the individual and society," she said. "This encompasses a variety of objectives, including preventing individuals from using drugs, treating individuals who want to stop using drugs, preventing drug use where it increases the chances of negative outcomes such as driving while on drugs, and helping individuals who want to continue using drugs do so in a way that does not further compromise their health or the health of others."

This last objective is often achieved through needle-exchange programs intended to prevent the spread of HIV and hepatitis C and is more controversial than other policies, Neill said.

Harm reduction is multidimensional and can include contradictory objectives, she said. For example, some proponents wish to decriminalize drug use and focus on helping drug users get the resources they need for treatment or to continue to use drugs safely, while others accept the illegality of drug use so long as treatment is more available. Others
argue that distinctions should be made between drugs according to the risks they pose to the user and society and that policy should be based on these distinctions. "Still, most advocates of harm reduction agree on some basic tenets, including the view that addiction is a disease requiring medical assistance, the desire to minimize risky behavior without requiring abstinence and the need to protect the public from the consequences of drug use, which includes punishing individuals who commit acts that harm others," Neill said.

"Despite some debate within the public health community about how to deal with drug use, it seems clear that a multifaceted approach is necessary," Neill said. "This includes educating the public on risks associated with drugs via schools, parents, the media and public policy; addressing structural deficiencies that dispose people to drug use, including poverty, lack of education and poor housing conditions; facilitating community involvement in addressing drug addiction; providing services for diverse needs, including prevention, treatment, addiction maintenance and harm-reduction techniques; and funding research that examines the effectiveness of different types of programs and the interactions between individual and environmental factors that affect patterns of drug use."

Provided by Rice University


This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.