HARM REDUCTION MOVES TO THE MAINSTREAM
EU drugs agency publishes major work on harm reduction: past, present and future

(21.4.2010, LISBON) Harm reduction is now an integral part of contemporary drug policies and plays an important role in responding to drug use in Europe. But this has not always been the case, say the experts. In a major new scientific work on the subject published today by the EU drugs agency (EMCDDA), leading European and international specialists chart how harm reduction shifted from controversy to mainstream.

In this latest EMCDDA monograph — *Harm reduction: evidence, impacts and challenges* — over 50 authors examine two decades of harm reduction research and practice in Europe and beyond (1). They also wrestle with how the concept may broaden and evolve as patterns of drug use change.

‘Harm reduction is generally used as an umbrella term to cover interventions, programmes and policies that seek to reduce the health, social and economic harms of drug use to individuals, communities and societies’, says the agency. While its underlying principles can be traced back to the early 1900s, it became prominent in the 1980s in response to HIV epidemics among injecting drug users and the threat this posed to public health.

On account of its primary goal to reduce risk, harm reduction soon sparked controversy, particularly among those promoting more traditional, abstinence-oriented care. Despite this, today it stands alongside prevention, treatment, social rehabilitation and supply reduction as part of the ‘comprehensive approach’ to drug policy, endorsed by the European Union (2).

‘Since the mid-1980s, harm reduction has transformed from a peer-driven, grassroots approach to an accepted part of the European drug policy landscape’, says EMCDDA Director Wolfgang Götz. ‘European countries were among the earlier adopters of harm reduction and are now among the forerunners of innovations in harm reduction practice and technology. The EU drug strategies and action plans have been a strong influence in consolidating harm reduction in many countries as an important element of drug policy’.

Harm reduction is often referred to as a ‘combination intervention’, offered as a pragmatic package of responses adapted to local need and setting. Of these, the best known are needle and syringe exchange programmes (NSPs) and opioid substitution treatment (OST).

By 2009, all 27 EU Member States supported harm reduction in policy or practice, all providing NSPs and OST. But although the general European trend is one of growth and consolidation of harm reduction measures, says the EMCDDA, a closer look at the current situation reveals a more qualified picture. ‘EU Member States do employ a combination of some of the main harm reduction measures…but considerable differences exist in the range and levels of service provision’.

Evidence, impacts and challenges

- Part I of the monograph — ‘Background’ — looks back at the emergence of harm reduction approaches and their diffusion as part of the new public health movement of the mid-1980s. It explores the concept from several perspectives (e.g. international organisations, academic researchers and drug users).
Part II of the monograph — ‘Evidence and impacts’ — illustrates how harm reduction has broadened to cover a wide range of behaviours and harms, including those related to alcohol, tobacco and recreational drug use. It provides a state-of-the-art reflection on the development of harm reduction services in Europe and considers what is known about their effectiveness.

‘Challenges and innovations’ of harm reduction are addressed in Part III. This explores the role of the still contentious drug consumption rooms; the involvement of drug users in developing the services that affect their lives; responses to young people’s recreational drug use; criminal justice approaches to harm reduction and the implications of varied problem drug use patterns in Europe today.

‘Over the last 20 years, harm reduction has changed the way we think about and respond to drug problems in Europe, and has been influential in addressing the risks posed by drug injecting’, says Dr Michael Farrell, Chairman of the EMCDDA Scientific Committee. ‘Its development into a mainstream concept in Europe illustrates how, over time, evidence-based argument can lead to the adoption of policy options initially viewed as controversial. With this monograph, the EMCDDA provides us with an authoritative reference work on harm reduction research and practice in Europe. Charting how a concept once synonymous with opioid use came to cover a broader range of harms, the publication offers a timely and valuable contribution to the ongoing debate on how to respond to today’s more diverse drug problems’.

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