

Understanding harm reduction as a public health strategy

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Harm reduction is a public health strategy, which aims to mitigate the dangers or harms associated with an action or condition. A criticism of harm reduction as a concept has been that it allows individuals to pursue harmful behaviour. But, this is not so. According to the National Health Care for the Homeless Council (2010), *“harm reduction is not at odds with abstinence; instead it includes it as one possible goal across a continuum of possibilities... Harm reduction neither condones nor condemns any behaviour. Instead, it evaluates the consequences of behaviours and tries to reduce the harms that those behaviours pose for individuals, families and communities”*.

Harm reduction, to begin with, was used as an alternative to abstinence-only focused interventions in cases of adults with substance abuse problems, who were unwilling to accept abstinence to avoid negative consequence of substance abuse. Since then, it has found other applications such as sexual health education to reduce teen pregnancies as well as to reduce transmission of sexually transmitted diseases, including HIV.

It has also been used as needle and syringe exchange programmes to prevent HIV and hepatitis C among injecting drug users. Areas that have introduced needle-exchange programs have shown mean annual decreases in HIV seroprevalence compared with those areas that have not introduced needle-exchange programs (*Addiction*. 2006;101:911–2)

Harm reduction can also be applied to diet and weight loss. People often find it difficult to adhere to harsh changes in their diets along with exercise regimen to lose weight. So they stop and restart resulting in cyclical loss and gain of weight ‘yo-yo dieting’ or weight cycling is harmful to health in the long run. A harm reduction approach to weight management means awareness about various options available and recognising that moderate, individualized changes in eating or exercise habits can be beneficial, which can be in the form of either reducing the frequency of eating a particular food item, or reducing the quantity of a food item or adding exercise to the diet to manage weight.

Perhaps, the most recognized use of harm reduction has been with regard to tobacco use, where the aim is to reduce the harmful consequences of tobacco use. Tobacco harm reduction measures include cutting down on the number of cigarettes smoked or switching to non-tobacco nicotine containing products, such as pharmaceutical nicotine replacement therapies such as nicotine patch, nicotine gum or switching to smokeless tobacco products such as snus and electronic cigarettes that deliver a vapor rather than smoke.

Just as clean needles help drug users to avoid infections, vaping can help cigarette smokers to steer clear of health risks such as cancer by reducing how much they smoke.

Therefore, harm reduction accepts that some individuals are unwilling or averse to the idea of quitting risky health behaviors such as smoking or use of drugs and so takes the view, as an alternative strategy, that it is better to reduce the associated harm rather than pressurizing these individual to abide by total abstinence.

The emphasis here is not on the use itself, but on the negative outcomes of use.

