

Alison Chesney and Eddie Killoran Memorial Lecture

17th November 2010 (17:45), John Snow Lecture Theatre, London School of Hygiene and Tropical Medicine, Keppel Street, London WC1E 7HT

ABSTRACT

Harm reduction: the advocacy of science and the science of advocacy.

Harm reduction is a simple idea. If people use drugs, the public policy question is: what can be done to help them avoid harm to themselves or to others? Harm reduction has a long history and includes the production of safer products (alcohol, pharmaceutical psychoactive drugs, nicotine), encouraging and facilitating less risky use (drink driving, moderated consumption, needle exchange, maintenance treatment), and creating safer drug using environments (bars, nightlife, prisons). 93 countries support harm reduction for drugs. 82 countries have blood alcohol limits for driving. There is a large amount of evidence about the effectiveness of harm reduction interventions, and the science has helped reorient the way drug problems are viewed – with a greater focus on reducing specific consequences. Science helped us understand that there can be good reasons for ‘bad’ behaviour. But despite progress, many countries are cautious about harm reduction (many ban safer nicotine products) or are backing away from harm reduction (in the UK harm reduction is equated with failed Britain: recovery is thus symbolic of what the nation now needs). There have been major successes in advocating for harm reduction, but the science of advocacy is underdeveloped. Rather than focus on drug users, science now needs to focus on the ‘bad’ behaviour of policy makers who ignore the evidence and take risks with people’s lives.

Prof. Gerry Stimson