"A powerful, important book and a compelling read." -BRUCE PERRY, MD, PhD, New York Times bestselling coauthor of What Happened to You? with Oprah Winfrey

# Undoing Drugs

How Harm Reduction Is Changing the Future of Drugs and Addiction

### Maia Szalavitz

Author of New York Times Bestseller Unbroken Brain



Photo by Daniel Root



# RARE CANCER SEEN In 41 Homosexuals

L

A20

Outbreak Occurs Among Men in New York and California —8 Died Inside 2 Years

#### By LAWRENCE K. ALTMAN

Doctors in New York and California have diagnosed among homosexual men 41 cases of a rare and often rapidly fatal, form of cancer. Eight of the victims died less than 24 months after the diagnosis was made.



A 1988 BleachMan advertisement created by the San Francisco AIDS Foundation. Courtesy of UCSF Archives and Special Collections. BleachMan poster, San Francisco AIDS Foundation, 1988, AIDS History Project Ephemera Collection, MSS 2000-31.



## AIDS Group Opposes Bleach Giveaway

#### By William Bunch

Mayor David N. Dinkins' position against giving drug addicts bleach to disinfect needles was endorsed yesterday by a major AIDS prevention group that questions the effectiveness of bleach in the fight against AIDS.

The Black Leadership Commission on AIDS yesterday urged city officials to uphold Health Commissioner Dr. Woodrow Myers' decision not to distribute the bleach, which was planned as part of an \$861,000 city contract with the Association for Drug Abuse Prevention and Treatment. The City Council is expected to vote on the contract next week.

In the past, the commission has agreed with Myers and Dinkins in expressing concern that programs that distribute clean needles or bleach to addicts do more to encourage drug addiction than in preventing AIDS.

But yesterday's statement went further, arguing that there are serious medical questions concerning whether the use of bleach to disinfect needles

Please see AIDS on Page 10

Pewsday / Christopher Hatch

Mayor David N. Dinkins Commissioner Woodr

gent than whites. And because tek males is likely to commit a whites are morally justified in teks. He adds that police could cause to question any black pecific crime.

Iff. These views have about as e to ethics as leeches have to ine. What we have here is an arden-variety racial prejudice. Id countenance such bilge.

was not necessarily wrong to its conference. We may safely does not bear this malignant ne. It's better to put such er odious — on the table for bate than to let them fester shelter of secrecy. The act of campus doesn't automatically ker's message. (It's not as if yere offering him tenure.)

build colleges deal with such he problem of heightened ran some of the nation's camer two other incidents this mbia University, a black stustir when he launched into a c on Jews and other minorities wards banquet. ("This is not ident," said a campus rabbi.) leiphia's Temple University,

## **Pointless Move**

First Mayor David Dinkins killed a program that gave drug addicts clean syringes so they could avoid contracting the AIDS virus through dirty needles. Now his health commissioner, Woodrow Myers, has said that no city

money can be used to teach addicts how to sterilize the needles they already have. The reason? Dinkins says cleaning needles encourages drug use. But can he offer drug treatment to every user who wants it? Hardly. City Hall does say it will fund 3,300 treatment slots (for the first time in years) — but it will use money that should have been spent *last* year on drug treatment. The National Commission on AIDS supports needle-cleaning programs for people who can't get into treatment programs or who intend to keep using drugs. To fail to tell the 200,000 IV-drug users how they might

Myers

the groundwater and waterways daily from the world's largest landfill.

In theory, this new order — with its seemingly impressive set of leachate-containment deadlines and fines for missing them — could put the city on the road to environmental righteousness. (Other new orders commit the city and state to share the cost of a \$400-million cleanup at four defunct city landfills.) The Fresh Kills order cancels Jorling's threat to collect \$81 million in fines and to close Staten Island's Fresh Kills by '91. So much for theory. The track record here doesn't inspire confidence. Building a containment system to collect and treat leachate was the '85 goal.

The new order gives the city until mid-1994 to file a leachate containment plan and till late '96 to finish building the containment system. That smells like a generous timetable for handling a problem that's at least a decade old. After all, this isn't particle physics. And do the provisions that spell out circumstances under which the city can be exempt from consentorder standards amount to a tacit admission that much of Fresh Kills can't be operated in an environmentally sound fashion?

If anything, fresh efforts to contain the environmental damage done by Fresh Kills only underscore the greater challenge before Mayor David Dinkins: drafting a solid waste disnosal plan with the proper mix of recycling.



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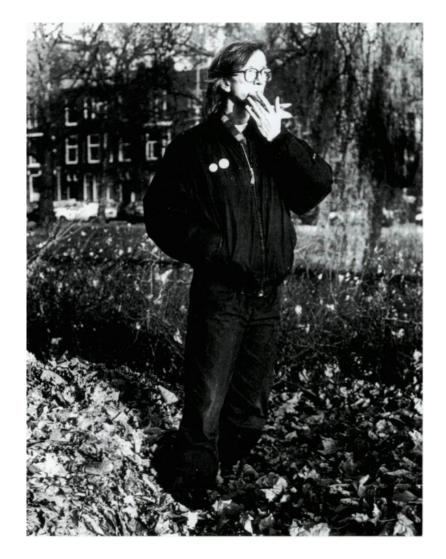


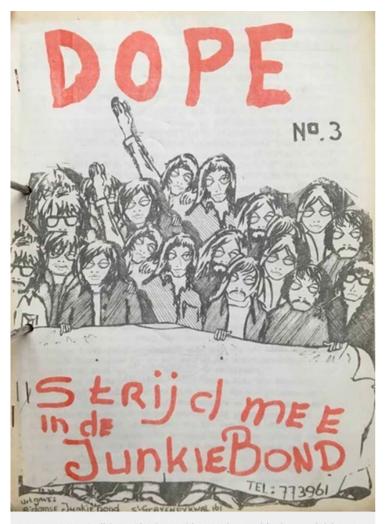
# Harm Reduction

- Focuses on Reducing Harms, Not Highs
- Evidence-based: If a practice is shown not to reduce harm, it's not harm reduction
- "Meets people where they are"
- A social movement that recognizes that drug laws are not based on science & people who use drugs have the right to life and health
- Compassionate & nonjudgmental



### Nico Adriaans





Dope No.3: »Strijd mee in de Junkie Bond«. Archival material from the Rotterdam Junkie Union.









Muirhouse Medical Group, Dr Robertson's surgery, was stigmatised in the 1980s due to his work with drug users - Copyright Courtesy of Dr Roy Robertson

# World Aids Day | How did Edinburgh become the 'Aids capital of Europe' in the 1980s?

Updated: 03/12/2019

## Scottish HIV Committee, 1987 50% of injectors in Edinburgh HIV+

"Prevention of the spread of the human immunodeficiency virus (HIV) must take priority over any perceived risk of increasing drug misuse,"



## There's No Preaching, Just the Clean Needles

#### By STEVE LODER

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Last manual fore took then fought authorities, rewriting at differ tand, doction to allow fore forth City to begin an experimential pro-



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#### Dissources U.S. Flats

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Allan Parry, director of to Hope Street elinic in Livespool, England.

The fear of ADS brings the program global attention.

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To parcend, a clean sende program must have the support of the polles, "the one would come have it the police-were hanging ersemi and rocking people up for having transmit

### Webb v. United States, 249 U.S. 96 (1919)

Opinions

Syllabus Case

Opinions			
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### **U.S. Supreme Court**

Webb v. United States, 249 U.S. 96 (1919)

Webb v. United States

No. 370

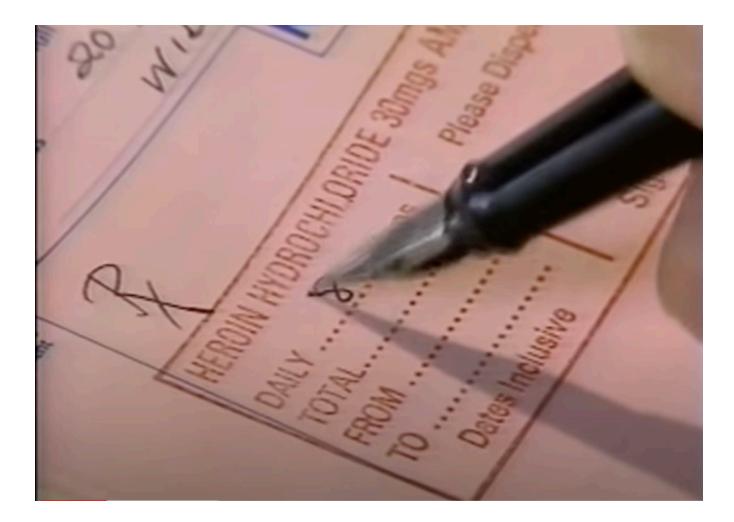
Argued January 1, 1919

Decided March 3, 1919

249 U.S. 96

Syllabus

The first sentence of § 2 of the Narcotic Drug Act of December 17, 1914, c. 1, 38 Stat. 785, prohibits retail sales of morphine by druggist to persons who have no physician's prescription, who have no order blank therefor, and who cannot obtain an order blank because not of the class to which such blanks are allowed to be issued under the act. P. 249 U. S. 99.



#### COMMENT

## THE PARADOX $\mathbf{OF}$ PROHIBITION



John Marks, Consultant Psychiatrist, Hope Street Clinic. Liverpool. Director Mersey Regional Drug Dependency Service.

Has the prohibition of certain drugs led Britain down the same path taken by the USA in the 1920's? Dr. John Marks argues that prohibition has not only failed - but is actually counterproductive in the "war against drugs".

If you deliberately contrived so to do, it would be difficult to imagine a more unhealthy, more dangerous, more criminalizing, more socially destructive, more expensive, more efficient way of making heroin available than we do now under prohibition. The United States spent seven thousand million dollars in the year 1983/84 enforcing the most rigorous prohibition that country has seen,

including a little navy in the Gulf of Mexico.What has been the result? Mr. Mellor reported to the House of Commons in 1985 that for its enormous outlay, the US was reaping a return of 5,000 new users every day!(1). This should not be a surprise. US domestic heroin consumption has risen every year since 1923 when the prohibition was applied. Alcohol consumption in Chicago at the height of the prohibition was 600% up on pre-prohibition levels. As Willis has said: "repressive anti-drug legislation in the United States has contributed to one of the major social disasters of that country's development ... Such a situation as has developed in the States should be avoided in other countries at all costs." (2)

Two questions immediately arise: "Why does prohibition fail?", indeed not only fail, but is counterproductive; and: "Why is the policy of prohibition pursued in the face of such overwhelming evidence against 1+7

intoxicants throughout history to thole the vicissitudes of life, and no society is without its social drug. Either that, or there is a harsh, fanatically imposed, psychological opium such as Christianity in Guatemala, Mohammedanism in Iran or Marxism in Ethiopia. In a free society, reducing the supply of a commodity with a continued demand leads to a rise in price. The more rigorously this is pursued the higher the price is inflated until smuggling and black markets flourish. A phenomenon of "natural selection of gangsters" occurs with the cleverest, richest, most ruthless and most violent gangsters surviving until little wars are waged with vicious "armies", and vast sums of money are "laundered" efficiently through obscure banks. I call this mechanism the Darwinian effect of prohibition. This occurs whatever the means of repression. MERSEY DRUGS JOURNAL

HISTORICAL DEMAND There has always been a demand for

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### HIGH TIME FOR HAIM REDUCTION THOUGH ILLICIT dog say his not per

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Programmes could include instruction on the purchase good and physical effects of

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and alternative (new-drag) rationics of controlling montal states.

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Cantent

Conservation of the

of agenation which deal with prevident drug.

became typical among most likeliho youths, it has become "normalised" in the sense that the majority of 15 to 20 year slids in urbas areas such as London, Edisburgh and Meneymide are likely to have one or more tricadi who take drigs, and a salistiation minority will be taking drugs such as cannabis and solvents on an experimental or recording that, A same p is Word in 1966.5 Excedided up to 1 in 10 manaple pel make school inspects on some orderer were known to be using heavier or similar drugs.

Primary percention inducation which sizes to deter youths from trying daugs) is two late for the present generation of drug users and has been found to be ineffective. and compliants counter-productive. Hed-ings non-widely recognized.<sup>1</sup> However, our of the most earchilly designed studies frend that effection can dow the day ment of more problematic forms of drug one, but may simultaneously increase the

Unit research reveals an effective priceore prevention programme, it would be prediced to direct some of our offents toward maximizing the barm that drug many might do to thermelves or others "assessment prevention", "harm-rollaction on 'edd emissionization'). The present peralterational to inceptionate primary per-volution programmers, our to the many pervortable problems (og. overdose, infortions, organic domage, incidente) that can center because of lack of knowledge about rafe and procedures. This paper looks of the four main com-

persents of a horm-reduction strategy! the rationale, context, implementation and colution.

#### Rationale

Primary provention approaches assume thereby use of illicit drags is morally wrong because it is illigal, and/or because it is utuality. Threefare, sindnesser in the altimate goal, and secons is measured by a reduction in the incidence of drug and The rationile of secondary provention on on three different imights about the mittare of drug use.

· incodes prevention approaches recagains the hospitestly associational for disregarded) for that must people like to get high - to change finite meeted states and processes by chemical or other mean-- and that in this regard humanized is wellbely to change its ways. Rather than storing drug on simply in a 'declation' to be rectified, the assessing percention

Dr Newcombe is at the Missare of Droga Research Project at the Dekonaly of Liverpool, and or achieve of the project sport on dag minute in Wired. He can connected at the University, place \$70.797 \$500, cat. 2676

**Russell Revcembe** 

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Harn-reduition programmes raight the reduce the adaptivity high trademos of evolved overheit, is die aus tonen, man, andre samt had a region by named I polyting men very give a reoperant dags mit ar unitier er op sup - it is reperted that one-third of all Elect drug consistent in the UK in 1985 prograd in conduction with chefted

#### Implementation

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For many promysters, the "just say or" compaign has some too late or failed: in genetics and methods of met. none after areas, boote and other illigit drugs have become a "samual" part - rotes: the rate of beauty or dependent el fanage experience, la seus like Dens, fannel Revtoube report l'hormanyter; l'agt time for harn-reduction?

parkets of a capitup. Often agar that, gives antials conditions log, adomping-ment, hadominic values, virtually all young people are susceptible to appencardinal with chapt, to here reduction programmer should be given to rectained oppositing the age of fine drug use." These is no deals that it would be advisible to loss from push michaels he towing contenty in the first stages of implementing a terra-sociaries program-

re. Our solution is a labeling program reduction education only in young progra disarily in ag drags at most likely to our drags in the labors. The mining limit has been how to idenbly the young paralle most at this of using drags, holders they actually must likewoor, from locald sails. Request and heavy-result deviation distance, planning to by design or having proving articular, and being large surfaces of the site who service or delet, have been loand to be strong indicators of least ideal drug as."

Accordingly, goings of young people found in to searching or dealing outline or reactions by the others multille segured taking with person month for a flam-reduction programme. Repairs manage of the childring and spectrag half its of young people from the age of should be fill young wall be appeled However, these may be problems in

code fig programme with different experies within the converticed or prosp of possible. Vocagains are likely to with the clob other about any "special closes" specialing harm-unflation information to the low-risk group. If imputed worthbecause service they are thought to be presented drug more, this may have the effect of a 'yell-hilling prophery', hence trackets and potents may report separing to methical. Long, Konthing the major abank maths may ball out to be

difficult in practice. One way of averaging some of these definition would be or muget larger groups, other then specific individuals. Since dicit daug we appears to be more vicepted oney young people is sense of second depresention, of the young people a term wheels and treadings might the hilly be regarded as 'nd risk' of diag ase. It may be advisable to transfer response with its form-reduction programmer.

some basic training in the medical and social adenses. Alternatively, teachers with appropriate experience could be trained encounter of about the months' test pour information. The months is a program nearmy be better reparated from industsuprated and the sameday school particular, a charge is approach in one-but with the nion of most contemporary

health principlication. binduties of hernoclation case. target and rand with string opposition from many parameters tradient, most workers and remaining groups. It would like to

here he produce to conduct a series of monthing and chemisters with expressible-tions of these groups, whose conjugation and exed will is executed to the effective of my dwg observe programme Medly, secondary prevented programma for young people should be conducted in tanders with programmes for adults, allow ing adults to make more informed indeeards about the approach the posible compromise between

targeting high-risk young people for harm-reduction pergenatures and the objections



#### An experimental harm-reduction leaflet being evaluated in the Sattord area.

to such programmer, would be to split the maked into her phone. Confidential yeswon of young people throughout the action provide knowly could know by actual and potential accis, but only an isoning achieve scaled time identified to given have reduction and so him.

Though such an approach may be more acceptable to some proga of parata and teachers. Bu obvious observemings are that large mandees of poutles will already have been using various drags for several years while at school, out, after then leave, many of those most at risk will be fault to overlact through youth work agencies.

#### Evaluation

Hern-reduction programmes are only worthwhile if the officit on young people are evaluated by carefully designed Technel and alloy' statles and by long-town follow up chales using combil groups. Such programmes are, by definition, contacted by the type and member of period in an output problems clean more (1). operiesse threaders. or (2) case others experience.

For instance, in the first case - webiana experienced by the usor - program-- reduce the prevalence of unsale fre-

solver experimentation with chara-

most likely to came medical problem-ical tabaccel at social problems ical, horning improve abilities to morgane and respond to drag-reliated problems.

Examination of any of these variable requires that acheols and other reath geneirs develop drug politics which cresis an attraction in which young people can talk touthfully about their use of dram Robatics is have caused to the own mity resuld be mendered through

the manuface of acquisitive offeraces care. mitted by drag ments. - the local incidence of democratical dis-

an ing. AIDS, hose concert. - the matcher of everyloses and accidents involving drugs recorded by local accident

and emergency departments and consum-

DRUG EDUCATION palles-makers and practitioners should be giving serious conthere store to here the making of drag and in Wh is host tacillad. The question they should and thereadyes to would it by elevable to reduce the incidence of illicit drug me while not promoting oder form of drug one, or would it be more realistic to give generat priority to the realistican of harm from drug and? The emerging AIDS epidemic has repidly brought this question to the freebunk of the debate. It is not view, and increasingly the view of others who work with drag users or young people, that it is high time for horm endaption.

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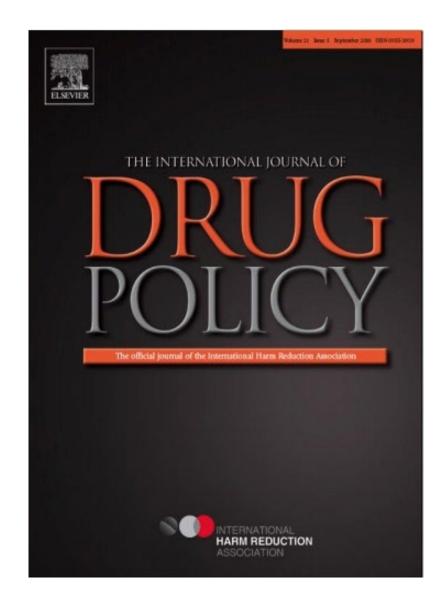
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Parker II., Verscente B.D. & Bale K. Aladad. Indexe and dirit dag an along roug proje a Wirel Lorgard. The University, 198.

PLATFORM

Advisory Committee on the Misuse of Drugs, 1988 ".... the spread of HIV is a greater danger to individual and public health than drug misuse. Accordingly, services which aim to minimize HIV risk behavior by all available means should take precedence..."

"We must therefore be prepared to work with those who continue to misuse drugs to help them reduce the risks involved involved...above all, the risk of acquiring or spreading HIV."







At left, Geraldo Rivera accompanies health educator Yolanda Serrano into a New York "shooting gallery" where addicts are educated about how to sterilize their needles to protect themselves from the AIDS virus. On the right, addicts are seen assisting each other in administering the drug. This segment will be included in "Modern Love," a two-hour live special to air December 1, 1987 from 8:00 to 10:00 p.m. (EST).

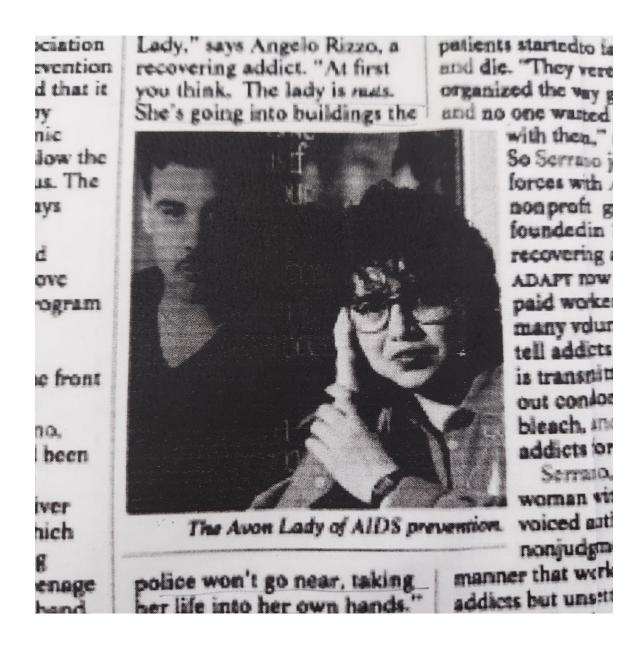
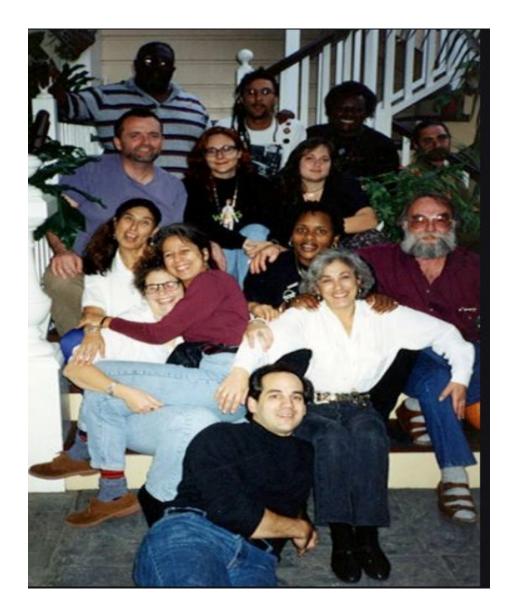


Photo of Jon Parker doing illegal needle exchange by David Binder



Arrest of the Needle Eight Photo by Allan Clear





## IMANI WOODS

"It occurred to me that since Black folks catch the most hell because of the way America reacts to drug use, I ought to be right up front in the struggle to institute harm reduction practices in the USA."



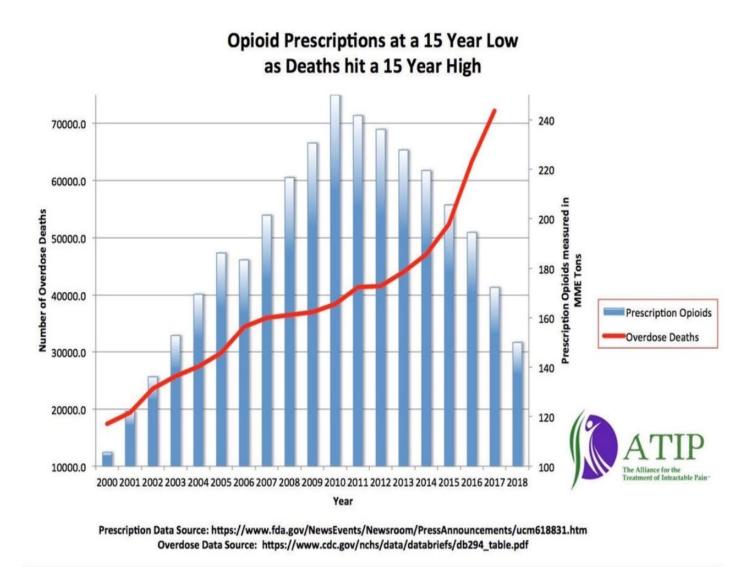




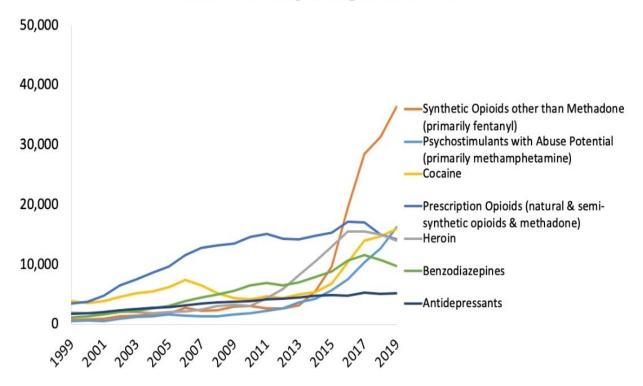


(Shirt available from Southwest Recovery Alliance @SWRalliance)





### Figure 2. National Drug-Involved Overdose Deaths\*, Number Among All Ages, 1999-2019



\*Includes deaths with underlying causes of unintentional drug poisoning (X40–X44), suicide drug poisoning (X60–X64), homicide drug poisoning (X85), or drug poisoning of undetermined intent (Y10–Y14), as coded in the International Classification of Diseases, 10th Revision. Source: Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999-2019 on CDC WONDER Online Database, released 12/2020.

Iron Law of Prohibition: Smaller Drugs Are Easier to Smuggle, So Potency Increases with Crackdowns





### General Hospital Psychiatry

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### Suicidal ideation and suicidal self-directed violence following clinicianinitiated prescription opioid discontinuation among long-term opioid users



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#### A R T I C L E I N F O

Keywords: Opioid Chronic opioid therapy Opioid discontinuation Suicide Suicidal ideation Suicidal self-directed violence

#### ABSTRACT

*Objective:* Little is known about patient outcomes following discontinuation of opioid therapy, which may include suicidal ideation (SI) and suicidal self-directed violence (SSV). The purpose of this study was to examine correlates of SI and non-fatal SSV in a sample of patients discontinued from long-term opioid therapy (LTOT). *Method:* Five hundred-nine Veterans Health Administration (VHA) patients whose clinicians discontinued them from LTOT were selected from a national cohort of VHA patients who discontinued opioids in 2012. The sample comprised patients with a substance use disorder and matched controls. Patient electronic health records were manually reviewed to identify discontinuation reasons and the presence of SI or SSV in the 12 months following discontinuation.

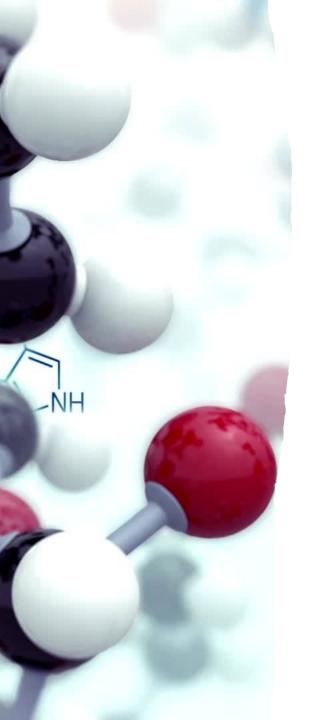
*Results:* Forty-seven patients (9.2%) had SI only, while 12 patients (2.4%) had SSV. In covariate-adjusted logistic regression models, mental health diagnoses associated with having SI/SSV included post-traumatic stress disorder (aOR = 2.56, 95% CI = 1.23-5.32) and psychotic disorders (aOR = 3.19, 95% CI = 1.14-8.89). Other medical comorbidities, substance use disorder and pain diagnoses, opioid dose, and benzodiazepine prescriptions were unrelated to SI/SSV.

*Conclusions:* Among patients with a substance use disorder and matched controls, there are high rates of SI/SSV following opioid discontinuation, suggesting that these "high risk" patients may require close monitoring and risk prevention.

## Evidence Base: Needle Exchange

- Reviews by World Health Organization, CDC, NIH, Institute of Medicine all show it cuts HIV spread without increasing drug use.
- CDC review finds participants five times more likely to get treatment
- 2014 New York State review called it the "gold standard" for HIV prevention. NYS prevalence in 90s was 50% or more, now less than 3% in IDUs.
- UK did needle exchange early, never had HIV epidemic in IDUs & no heterosexual, pediatric epidemic.
- Associated with reductions in HIV, Hep C, needle litter and injecting and with increased treatment admissions.





# Evidence Base: Naloxone

- Massachusetts study finds 50% reduction in OD deaths w/ high implementation (Walley, 2013)
- Systematic review supports (McDonald, 2016)
- Not associated with increased teen drug use (Bruzelius, 2023)
- Common sense suggests that having the antidote to a poison is more likely to save lives than not having it

## Evidence Base: Methadone & Buprenorphine

- WHO lists bupe & methadone as essential medicines for addiction
- Study of entire UK treatment population between 2005 and 2009 found 50% reduction in mortality compared to all types of abstinence treatment. (Pierce, 2016)
- Most recent review found 50% reduction in deaths from suicide, cancer, cardiovascular disease, alcohol and other drug-related deaths and all-cause mortality. (Santo, 2021)
- Associated with reductions in drug use, crime, HIV and hepatitis



## Evidence Base: Prescription Heroin

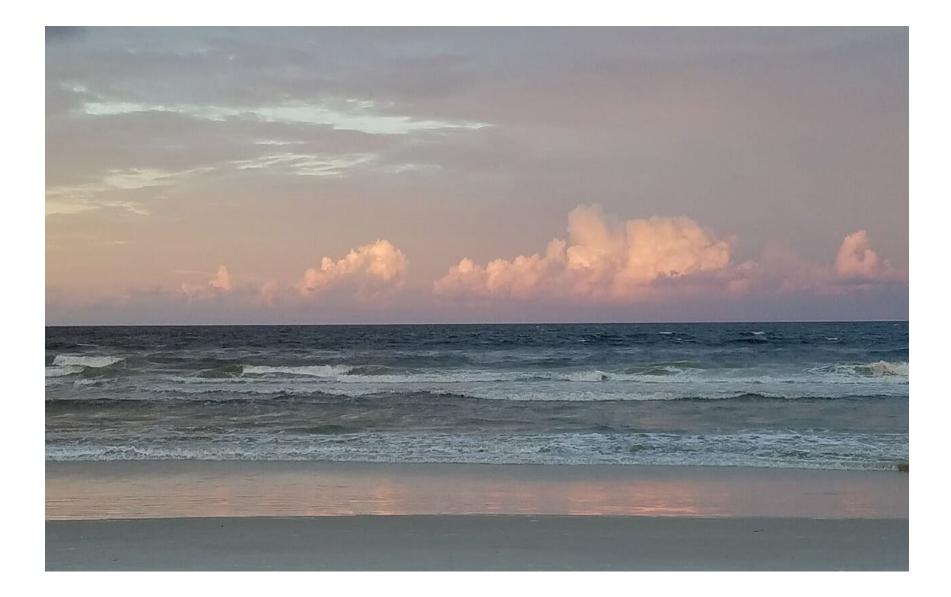
- Cochrane review finds data supports heroin prescribing when methadone & buprenorphine fail (Ferri, 2011)
- Individual studies from UK, Switzerland, Canada & the Netherlands show reductions in crime, other drug use and HIV, as well as improved health.
- Also facilitates entry into abstinence or methadone or buprenorphine treatment

## Evidence Base: Overdose Prevention Sites

- AKA / Safe Injection / Supervised Consumption Sites
  - Systematic review supports (Levengood 2021)
  - Don't Increase crime or disorder (Chalfin, 2023)
  - Cuts neighborhood overdose rate 67%, even with fentanyl (Rammohan 2024)
  - 40-50% increase in treatment admissions (Levengood)
  - Associated with reduced HIV and hepatitis, increased treatment admissions, less needle litter, less public injecting
  - Millions of injections in over 100 sites, not a single OD death







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# Undoing Drugs

How Harm Reduction Is Changing the Future of Drugs and Addiction

### Maia Szalavitz

Author of New York Times Bestseller Unbroken Brain



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