Findings from the Global State of Harm Reduction 2018
Harm reduction for stimulant use

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Lisbon Addictions, October 2019
Harm reduction for stimulant use is lacking

- Trends in stimulant use worldwide:
  - Rising prevalence in North America, Asia and sub-Saharan Africa
  - An end to a long term decline in Western Europe
  - High prevalence of use of cocaine and its derivatives in Latin America and the Caribbean
- Despite this, harm reduction for stimulant use is less established than harm reduction for opioid use
A range of harm reduction interventions exist for stimulant use

- Safer smoking/sniffing kits
- Housing as harm reduction
- Drug checking
- Harm reduction in nightlife settings
- Harm reduction for stimulant use in sexual contexts
- Needle and syringe programmes
- Drug consumption rooms
- Substitution therapy
Needle and syringe programmes (NSPs)

- Stimulants widely injected in Latin America, North America and South East Asia
- Overall, fewer countries provided NSP in 2018 than in 2016
- NSP frequently perceived as focused on people who use opioids
- Need for tailored services to address specific patterns of use among people who use stimulants
  - More frequent injection
  - Use of particular equipment

Countries with needle & syringe programmes

- 2016: 90
- 2018: 86
Drug consumption rooms (DCRs)

- More than 110 DCRs exist worldwide, but all currently operating are in Western Europe, Canada and Australia.
- Where people smoke stimulants, this must be permitted in the DCR (not the case in e.g. Australia).
- Specific adaptations may be required:
  - Ventilation
  - Chill-out areas
Substitution therapies (pharmacotherapy)

- Opioid substitution therapy is a highly successful harm reduction intervention for people who use opioids

- Pilots in North America, Latin America and the Caribbean have used cannabis or coca leaves for substitution therapy for people who use crack

- Studies of pharmaceutical products have demonstrated limited evidence of effectiveness in reducing use and/or reducing negative health outcomes (e.g. modafinil and dexamphetamine)
Safer smoking kits

• Safer smoking equipment can:
  • Reduce risk of blood-borne infections
  • Reduce lung problems associated with improvised pipes

• Safer smoking kit programmes can also encourage people to switch from injecting to smoking, reducing the risk of blood-borne infections – known as “pin to pipe” programmes

• Examples of organisations distributing safer smoking kits include Karisma in Indonesia and COUNTERfit in Canada
Housing as harm reduction

• Provision of housing without any requirement to abstain from drug use enables people to establish stability, which can help reduce wider harms related to drug use

• Housing First projects – need to ensure harm reduction is included as a principle

• Atitude project, Brazil: Participants report increased self-care, strengthened relationships, protection from violence and feeling of respect
Drug checking and nightlife harm reduction

- Drug checking services reduce harm caused by high-purity and adulterated substances
  - In Zurich from 2016-2017, MDMA samples increased in strength by 27%
  - In New Zealand in 2017-2018, 20% of samples tested contained unexpected ingredients
- Include on-site, walk-in and postal services
- Consistently face legal and regulatory issues
- Should be accompanied by broader nightlife harm reduction: water points, chill out spaces, chewable sweets, safer sniffing kits.
Final thoughts

• There is a range of harm reduction interventions available to people who use stimulants, but many are under-implemented

• There is a need to understand how people use stimulants and the implications for harm reduction programmes

• While there is a range of interventions, some lack an evidence base that can foster funding and scale-up
Thank you

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