

## **HARM REDUCTION- an intervention strategy with dual-diagnosed persons** *[by Mollie Lowery, LAMP, Inc.]*

Harm reduction is a set of practical strategies that reduce negative consequences of drug use and mental illness, incorporating methods from safer use, to managed use, to abstinence; that are voluntary, diverse, and health enhancing. Harm reduction strategies meet dual-diagnosed persons “where they’re at”, addressing *conditions* of use and treatment along with the illness or drug use itself. The following principles are central to harm reduction practice:

### **HARM REDUCTION:**

- Acknowledges that mental illness, licit and illicit drug use are part of our world and chooses to work to minimize their harmful effects rather than simply ignore or condemn them.
- Does not attempt to minimize or ignore the many severe and lasting harms and dangers associated with licit *and* illicit drug use.
- Recognizes that the realities of poverty, class, racism, social isolation, past trauma, sex-based discrimination and other social inequalities affect people’s vulnerability to and capacity for effectively dealing with mental illness and drug-related harms.
- Acknowledges that some ways of treating mental illness and using drugs are clearly safer than others.
- Establishes quality of individual and community life and well-being-- not necessarily cessation of drug use or mental health treatment- as the criteria for successful interventions and policies.
- Ensures that dual-diagnosed persons and those with a history of drug use and/or mental illness routinely have a real voice in the creation of programs and policies designed to serve them.
- Affirms dual-diagnosed persons themselves as the primary agents of reducing the harms of their illness/drug use, and seeks to empower them to share information and support each other in strategies which meet their actual conditions of use and of improved mental/physical health.
- Calls for the non-judgmental, non-coercive provision of services, housing, and resources to people who are dual-diagnosed and the communities where they live in order to assist them in reducing attendant harms.