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Reducing harm

The shift towards the policy of 'harm reduction' in controlling drug addiction problems may be more effective in curbing the drug problem.

By **FIFA RAHMAN** and
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MALAYSIAN drug policy has been, and still is, predominantly enforcement-based, and is loosely related to the moral "social evils" model. This means that our approach so far has been to ostracise and incarcerate persons who use drugs.

However, in the past 10 years, there has been a policy shift towards a concept called "harm reduction" due to high levels of HIV infections, predominantly among injecting drug users.

Harm reduction is an ideology that seeks to mitigate the harm done to individuals who consume drugs, their

families, and society at large. Via harm reduction, certain actions are taken to ensure that HIV does not spread, and drug users are given a chance to reintegrate into society without resorting to acquisitive crimes, and are not removed from positive influences in society.

Harm reduction is the principle opposite of prohibition and punitive sanctions for drug use – more popularly known as the War on Drugs. In their 2002 book, Alex Wodak and Timothy Moore address the failure of prohibition and describe it as being an "expensive way of making a bad problem worse". They also say: "... a modern drug policy for the 21st century requires that mood-altering drugs are considered to be primarily health and social issues rather than a problem to be solved predominantly by law enforcement".

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A colleague in Australia once told me that harm reduction is not a practice solely confined to drugs. Harm reduction is practised regularly throughout our lives, in relation to many things. That colleague told me of the day his son told him that he wanted to buy a motorcycle.

"You can't stop the kid, Fifa, he's going to ride the motorbike anyway." Subsequently, my colleague knew he had to buy his son the very best protective gear to reduce the harm that could possibly be inflicted upon his son. So he bought the helmet, the leather riding suit, and the best protective boots.

Sure enough, his son got into an accident, and because of the harm reduction measures practised by my colleague, his son was safe, and heartbreak to his family was avoided.

Decades of punitive law enforcement has done nothing to reduce drug use, or the supply and demand of drugs. In fact, statistics from the Royal Malaysian Police show that arrests for consumption of drugs alone under Section 15(1)(a) of the Dangerous Drugs Act 1952 rose from 42,304 arrests in 2009

to 56,725 arrests in 2010.

The time has come when we must accept that no matter how much we prohibit and jail people, the problem will probably persist, and it is prudent for us to take action to reduce as much harm as possible resulting from drug use. These harms may include HIV infection, co-morbid psychiatric and substance dependency, increase in petty crimes, broken families, and last but not least, broken hearts.

One such specific harm reduction measure is the needle-and-syringe exchange programme (NSEP). Needle-and-syringe exchange programmes involve the drug user bringing his or her contaminated syringes to NSEP sites in exchange for sterile needles and syringes.

As a result, when clean needles are available, the sharing of contaminated needles is greatly reduced, and this helps reduce HIV infection.

Malaysia first introduced needle-and-syringe exchange programmes in 2006 as a response to high infection rates among intravenous drug users. In 2007, it was seen that there were 2,601 new cases of HIV infection,

reduced from 3,127 infections in the previous year in the injecting drug user population.

This reduction may also have been complemented by an increasing openness towards treatment-based solutions for drug users.

"Gentler" measures have been proven to reduce HIV infection. In fact, drug policies in Portugal have been proven to reduce not only HIV infections, but also drug-related crimes, addiction and recidivism. This is because law enforcement officials make less arrests, and drug users come into increased contact with social workers, health professionals, and other positive influences.

Portuguese drug policy understands that all incarceration does is increase the risk of transmission of HIV, remove positive influences from the drug user's social circle, increase the chances of the drug user getting a psychiatric co-morbidity, and stigmatises them by permanently branding them as criminals.

As a result of this, persons who have been incarcerated as a result of their drug use find it difficult to get normal jobs once they leave prison. Eventually,

these persons are forced to turn to petty crime.

Furthermore, prison does not address the chemical dependency that the person has on drugs. Chemical dependency is something that MUST be solved via medical treatment and behavioural therapy, NOT incarceration.

■ Next week, we will describe policies in Portugal, Germany, Switzerland and other countries, explore how they have reduced dangers associated with drug use, and also examine the viability of adopting such policies in Malaysia. The writers are from the Malaysian AIDS Council. The views expressed are those of the writer. The Star does not give any warranty on accuracy, completeness, functionality, usefulness or other assurances as to the content appearing in this column. The Star disclaims all responsibility for any losses, damage to property or personal injury suffered directly or indirectly from reliance on such information.



The needle exchange programme aims to eliminate the sharing of contaminated needles, and this helps reduce HIV infection. - AP