



WELCOME TO

HARM REDUCTION AS A PATHWAY OF RECOVERY

Jim Wuelving (with assistance from Dean
LeMire, and Justin McNeal)

ARE IN THE MIDDLE
N OVERDOSE CRISIS

FOR THE ONES WE'VE LOST

Dedication: Dean Lemire



I wish to dedicate this presentation to the memory of Dean LeMire.

Dean and I were the original creators of the curriculum that much of this presentation comes from. We were in the process of making a few revisions when he passed away. We asked many of his friends for suggestions on how we should all remember him. Here are just a few of the many responses as to how to remember Dean:

- Full of love
- Having a heart of gold
- Always willing to go the extra mile to help others
- A wonderful and devoted father
- Impishly hilarious
- Brilliant
- Poetic
- An icon in the recovery field.

I will miss him forever and promise to pay him forward.

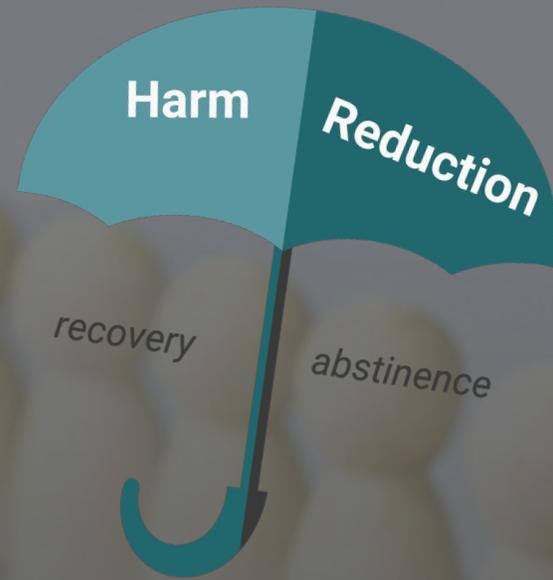
Why Harm Reduction

- Helps us to come from a place of compassion and empathy, looking beyond the substance or “label” that is given to people who use drugs or experience problems with gambling.
- It teaches us to meet people where they’re at and support their immediate needs.
- Harm Reduction gives people options, when people are given options or choice in a matter, people will likely choose an option that gives them a more positive end result.
- Some people are going to use drugs and/or gamble regardless of if we help them or not. If an individual is not ready to quit using substances and/or gambling, or cannot, we can give them resources and support to help them use differently; safely.
- It has a positive impact on our communities as well as the individual utilizing the strategies.

HARM REDUCTION DEFINED

Harm reduction is a set of practical strategies and ideas aimed at reducing negative consequences associated with drug use. Harm Reduction is also a movement for social justice built on a belief in, and respect for, the rights of people who use drugs.





HARM REDUCTION DEFINED

"Harm reduction is a way of life...It's a way of reducing harm or risk in any practice in which you're involved."

Edith Springer

Former member, 1993 Harm Reduction Working Group,
Clinical Director, NY Peer AIDS Education Coalition

HARM REDUCTION DEFINED

Harm reduction is an approach that promotes health in a way that *meets people where they are at*, accepting that not everyone is ready or capable of stopping their substance use at a given time. Instead of making judgments about where individuals suffering from addiction should be with regards to their health and behavior, harm reduction focuses on promoting evidence-based methods for reducing associated health risks in the current moment (e.g., preventing HIV transmission).



HARM
REDUCTION
DEFINED

“Any positive change as a person defines it
for him/herself.”

John Szyler

Co-founder, Chicago Recovery Alliance



A row of white chess pawns is shown in a shallow depth of field, with one red pawn standing out prominently in the center foreground. The background is a soft, out-of-focus grey.

HARM REDUCTION DEFINED

**"Meeting people where they are at.... and not
leaving them there"**

Adapted Harm Reduction Motto
Source Unknown

HARM REDUCTION DEFINED

A practical and transformative approach that incorporates community driven public health strategies - including prevention, risk reduction, and health promotion - to empower PWUD and their families with the choice to live healthy, self-directed, and purpose-filled lives. Harm reduction centers the lived and living experience of PWUD, especially those in underserved communities, in these strategies and the practices that flow from them.

SAMHSA
Substance Abuse and Mental Health
Services Administration

RECOVERY
DEFINED
(COMPARE)

A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.

SAMHSA
Substance Abuse and Mental Health
Services Administration

HARM REDUCTION IN HISTORY

Morphine Maintenance Clinics: In late 19th/Early 20th Century, morphine maintenance clinics and office-based morphine prescribing are used to treat opiate addictions. An industry of detoxification-based ‘cures’ emerged to end narcotics addictions suddenly with and without therapies addressing detox symptoms. This industry’s self-reported and faulty success rates convinced U.S. government to restrict prescription-based maintenance programs. The 1914 Harrison Anti-Narcotics Act outlawed narcotics such as morphine and cocaine except for ‘legitimate’ medical purposes; the Supreme Court’s 1919 *Webb V. United States* decision effectively outlawed the practice of narcotics-based addiction treatment.



HARM REDUCTION IN HISTORY

Sex Work: Sex Work and harm reduction have a complex, intertwined history. Historically, sex work has been stigmatized and criminalized, pushing sex workers to the margins of society and increasing their vulnerability to violence, exploitation, and health risks. These approaches recognize the reality of sex work and seek to improve the health, safety, and rights of sex workers through health measures rather than moralistic or punitive ones. Initiatives such as bad date cards, needle exchange programs, access to condoms, STI testing, and legal advocacy have been central to harm reduction efforts. By focusing on health and human rights, harm reduction has helped to shift the conversation around sex work from one of criminality and stigma to one of dignity, safety, and support.



MEAN STREETS. Advocates of sex workers say street sweeps are dehumanizing — and counterproductive. (John Crossen illustration)

HARM REDUCTION IN HISTORY

Syringe Access Programs: Emerging bloodborne virus crises worldwide led to a controversial prevention tactic – syringe access programs (SAP). In 1984, people who injected drugs in the Netherlands started the first SAP in Amsterdam to address the spread of Hepatitis B. Two years later, small underground networks of drug users, researchers, and AIDS activists began distributing sterile injection drug equipment in the United States. In 1988, the first legally sanctioned SAP in the U.S. was established in Tacoma, Washington after Dave Purchase, a drug counselor, challenged state and city laws and operated an SAP in plain view. There are over 571 syringe access programs active in the U.S. as of 2025 (see: nasen.org/map)



Needle Exchange for Addicts Wins Foothold Against AIDS in Tacoma

By JANE GROSS

Special to The New York Times

TACOMA, Wash. Jan. 20 — On a rain-swept street corner in this grimy mill town, just steps from a heroin shooting gallery, David Purchase gives out clean syringes in exchange for dirty ones — 13,000 needles is all since he set up his folding table five months ago.

"How does this work?" a toothless addict asked this week, suspicion in his eyes, as he approached the table heaped with condoms, bottles of bleach and alcohol swabs, some of the other tools of AIDS prevention.

"You give me an old one, I give you a sterile one, and it keeps your butt alive," said Mr. Purchase, who also offered a fistful of condoms and a bit of bilingual advice on avoiding sexual transmission of acquired immune deficiency syndrome.

"No guante, no amarte; no glove, no love," Mr. Purchase called out as the man headed down Commerce Street, past rescue missions, pawn shops and the places where the poor sell their blood.

A Pioneer Program

Mr. Purchase's one-man war against AIDS was the nation's only needle-exchange program when it began here in August, in the community south of Seattle that has 63 AIDS cases and 3,000 intravenous drug users. New York City, home to 18,000 AIDS cases and 200,000 addicts, now also dispenses uncontaminated syringes, but the Tacoma exchange remains more successful and less contentious.

The more modest exchange in New York City, which began in November, has been hobbled by the outcry of law-enforcement officials and some politicians, who say it promotes drug abuse, and by neighborhood groups that succeeded in confining the project to a Government office in Lower Manhattan. The New York program has dispensed 76 needles to 55 addicts, compared with hundreds served here each week.

"It's not user-friendly," Mr. Purchase said of the New York program.



David Purchase handing out clean syringes for dirty ones on a street corner in Tacoma, Wash. His one-man war against AIDS was the nation's only needle-exchange program when it began here in August.



Participant: "How does this work?"

Dave Purchase: "You give me an old one, I give you a sterile one, and it keeps your butt alive."

Article & photo left: The New York Times
Photo above: The News Tribune

HARM REDUCTION IN HISTORY

Housing First is premised on the notion of housing as a basic human right that cannot be denied, even for those who continue to use alcohol and other substances and/or refuse to participate in prescribed services. Housing First programs usually incorporate ‘wraparound’ services addressing residents’ global health and offer permanent, independent housing for free or for up to 30% of a resident’s income. The Housing First model was popularized by Sam Tsemberis and the NYC-based Pathways to Housing program launched in 1992. Similar programs have since been implemented in most U.S. cities and European countries, Australia, and Canada.



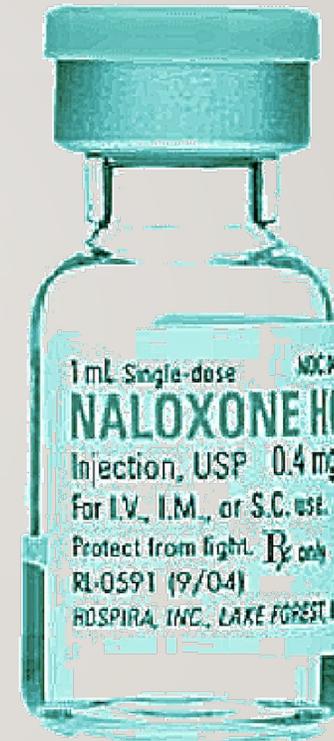
HARM REDUCTION IN HISTORY

Supervised Consumption Spaces are medically supervised facilities designed to provide hygienic and comfortable environments in which individuals are able to consume illicit drugs and access treatment and other health services and education. The SCS concept is an outgrowth of low-barrier drop-in centers offering sanctuary, peer support, a range of health and social services, and sterile drug equipment for homeless and drug-using populations. The first SCS opened in Berne, Switzerland in 1986. InSite, the first SCS in North America, opened in Vancouver, British Columbia, Canada in 2003. There are currently over 200 SCS's operating worldwide; there are currently 2 sanctioned SCS's in the United States in, New York City.



HARM REDUCTION IN HISTORY

Naloxone was discovered by accident when the inventors Mozes J. Lewenstein, and Jack Fishman were trying to create a drug that relieved constipation from opioid use. It has since been used to reverse opioid overdoses by emergency medical personnel since the 1960s; following years of illegal dispensing and use of the opioid overdose reversal medication among people who use drugs, states began allowing use and administration by non-medical personnel in the late 2000s.



HARM REDUCTION IN HISTORY

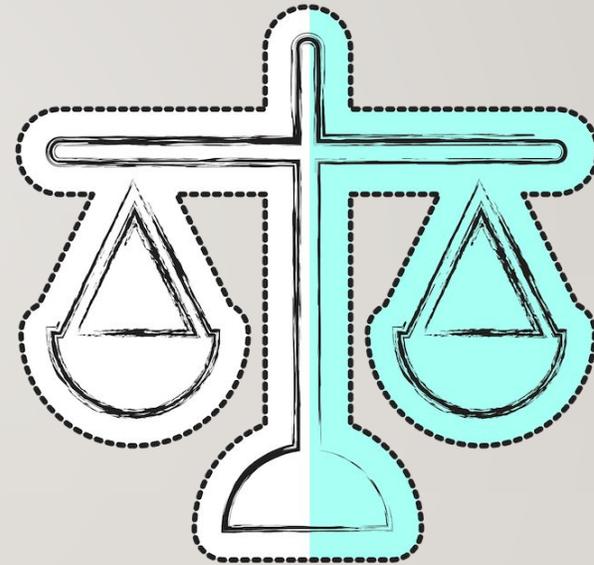
Drug User Unions have organized in the U.S. and other countries since 1988 to achieve various objectives. These organizations often develop formal and informal supports delivered by and for people who use drugs. Drug User Unions also lead policy advocacy efforts to remove barriers to drug user survival, health, and rights to employment and housing. The very existence of these organizations challenges a range of beliefs about people who use drugs.



HARM REDUCTION: A MOVEMENT

“Harm Reduction with a capital ‘H’ and ‘R’ -- this is the movement, one that shifts resources and power to the people who are most vulnerable to structural violence.” *Monique Tula, E.D., Harm Reduction Coalition*

- Addresses institutional discrimination that impacts sex workers, communities of color, people who use drugs
- Delivers services to and with these populations
- Led largely by People Who Use Drugs, people in abstinence-based recovery, current and former sex workers



PRINCIPLES OF HARM REDUCTION

- Accepts, for better and or worse, that licit and illicit drug use is part of our world and chooses to work to minimize its harmful effects rather than simply ignore or condemn them.



PRINCIPLES OF HARM REDUCTION

- Understands drug use as a complex, multi-faceted phenomenon that encompasses a continuum of behaviors from severe abuse to total abstinence, and acknowledges that some ways of using drugs are clearly safer than others.



PRINCIPLES OF HARM REDUCTION

- Establishes quality of individual and community life and well-being – not necessarily cessation of all drug use – as the criteria for successful interventions and policies.



PRINCIPLES OF HARM REDUCTION

- Calls for the non-judgmental, non-coercive provision of services and resources to people who use drugs and the communities in which they live in order to assist them in reducing attendant harm.



PRINCIPLES OF HARM REDUCTION

- Ensures that drug users and those with a history of drug use routinely have a real voice in the creation of programs and policies designed to serve them.



PRINCIPLES OF HARM REDUCTION

- Affirms drug users themselves as the primary agents of reducing the harms of their drug use and seeks to empower users to share information and support each other in strategies which meet their actual conditions of use.



PRINCIPLES OF HARM REDUCTION

- Recognizes that the realities of poverty, class, racism, social isolation, past trauma, sex-based discrimination, and other social inequalities affect both people's vulnerability to and capacity for effectively dealing with drug-related harm.



PRINCIPLES OF HARM REDUCTION

- Does not attempt to minimize or ignore the real and tragic harm and danger associated with licit and illicit drug use.





WHAT DOES
HARM
REDUCTION
MEAN TO YOU?

[VIDEO LINK](#)



THANK YOU!

“We must love them both, those whose opinions we share and those whose opinions we reject, for both have labored in the search for truth, and both have helped us in finding it.”

Thomas Aquinas