Winnebago County Board of Health
Policy on Harm Reduction

The Winnebago County Board of Health supports the concepts of *Harm Reduction* as a viable method to reduce the adverse health outcomes for persons who use non prescriptive drugs. Further, the Winnebago County Board of Health supports an integrated approach to conducting successful harm reduction programming through involvement of public health, mental health and addiction treatment services.

**Definition**

Harm reduction may be defined as a collective of policies, programs, services and actions that work to reduce the health, social and economic harms to individuals, communities and society. Harm reduction recognizes that containment and reduction of drug-related harms is a more feasible option than efforts to eliminate drug use entirely. Harm reduction responses to drug use incorporate a hierarchy of goals, with the immediate focus on proactively engaging individuals, targeting groups, and communities to address their most compelling needs. Achieving the most immediate realistic goals is viewed as an essential first step toward risk-free use, or, if appropriate, abstinence. The focus of risk reduction interventions are usually the drug taking behavior of the drug user. However, harm reduction recognizes that people’s ability to change behaviors is also influenced by the norms held in common by drug users, the attitudes and views of the wider community. Additionally, harm reduction programs have been found to decrease risky sexual behavior and prevent sexually transmitted infections. For example, recognizing that some adolescents are going to have sex, a harm reductionist approach supports a sexual education which emphasizes the use of protective devices (condoms) to protect against unwanted pregnancy and the transmission of STIs.

**Recommended Components of a Harm Reduction Program encompass**

1. Establish and maintain community partnerships for the delivery of harm reduction services
2. Eliminate syringe sharing and promote sterile needle use for each injection
3. Provide education to non-prescription needle users to eliminate inappropriately discarded injection equipment and other paraphernalia
4. Ensure non-prescription needle users have access to education and information, referrals for alcohol and other substance treatment and detoxification, access to harm reduction supplies, referrals for health care, mental health care and other community services.
Policy

Harm reduction is an integral component of the prevention, treatment and care continuum. Through client-centered approaches, effective harm reduction policy and programming can achieve positive population health outcomes and reduce stigma and discrimination for those engaged in substance abuse and/or high risk sexual practices. Populations who are served by harm reduction are diverse and often marginalized.

LHDs and community partners must work collaboratively to provide a wide scale approach to harm reduction services. Special emphasis should be focused on reducing stigma and discrimination that inhibits the distribution and recovery of harm reduction supplies.

Evidence supports the implementation of harm reduction programs to decrease blood borne pathogens transmission amongst those who participate in non-prescription needle use and their partners, families and the community at-large. [Non-prescription needle use includes needles used for tattooing and piercing as well as needles used for injecting non-prescription substances.] Harm reducing programs also increase engagement of vulnerable and marginalized populations into a system that provides for health and social services.

The cornerstones of any successful harm reduction program have components that include on-site counseling and education about alcohol and other substance use, referrals to comprehensive drug treatment and detoxification programs, psychiatric and psychosocial services, HIV and hepatitis testing and referral for medical care.