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ISSN: 2167-0358

Journal of Socialomics

**The International Open Access
Journal of Socialomics**

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Digital Object Identifier: <http://dx.doi.org/10.4172/2167-0358.1000e123>

Application of Harm Reduction Interventions to Recreational Drug Use

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Harm reduction programs are strategies aimed to minimize harm associated with a given circumstance. One of these circumstances is drug consumption, where intervention under this approach is designed to minimize the potential risks associated with drug use rather than eliminate it [1,2]. Harm reduction aims to empower drug users to make informed and responsible decisions that help them to reduce the risk associated with their drug use.

Harm reduction arose during the 80s in the Netherlands and United Kingdom to reduce the negative consequences of drug injection [3]. Since then, it has been expanded worldwide and nowadays it represents a normalized and accepted intervention with drug users who have established a problematic relationship with the substance (mainly with opiates). Its activities include: methadone maintenance treatment, needle exchange programs or drug consumption rooms [4]. Moreover, in the 90s harm reduction started to be applied in recreational contexts and nightlife. In these contexts, risks are more linked to the acute effects of drugs (overdose) than substance use disorders and related problems. Among its strategies, it can be found: outreach activities, peer-education interventions or on-site drug checking [5]. Like many authors have shown [6,7] these interventions are well accepted and appreciated by recreational drug users.

Nevertheless, harm reduction interventions in recreational settings are less common than those aimed to problematic drug user, and are not accepted and normalized as an option for dealing with possible drug problems. Keeping in mind that most drug users do not develop Substance Use Disorders [8], this seems to be contradictory. That is, paradoxically, most drug users (recreational) are less likely to receive interventions aimed to mitigate the potential harms they expose to.

This difference in the application and acceptance of harm reduction strategies is rooted in the abstentionist/prohibitionist discourse on drugs, which is ideologically and culturally dominant [9]. The idea that emerges from this discourse is “drug user” as an addict or a person with problems, the idea that the use of drugs necessarily implies having problems, or developing them in the future (mechanic vision of drug use). From this point of view, harm reduction is accepted as an intervention approach with marginal drug users who have developed a problematic relationship with drugs. However, when it comes to

normalized and socially integrated users, the most common strategy is to separate them from consumption to prevent them from developing Substance Use Disorders.

In conclusion, harm reduction strategies are recommended for those recreational drug users that do not wish to give up their substance use. This approach is presented as a public health option grounded more in pragmatism and cost-benefit analysis than on moral issues. In this sense, harm reduction still has a long way to go, making its discourse and strategies visible [9]. Only then, could such strategies be placed as a normalized intervention within the different options for drug users’ assistance.

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Received February 24, 2014; Accepted February 26, 2014; Published February 28, 2014

Citation: Fermin FC (2014) Application of Harm Reduction Interventions to Recreational Drug Use. *J Socialomics* 3: e123. doi:[10.4172/2167-0358.1000e123](https://doi.org/10.4172/2167-0358.1000e123)

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