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| Dimension: Substance Use | Implement Harm Reduction Principles for Healthcare Settings |
| This Interventions Links to the Following Secondary Driver: <ul style="list-style-type: none">Judgement-free clinic environment using harm-reduction principles | |
| Level of Evidence: Well-Defined Interventions with an evidence-base | |

Summary:

Harm reduction refers to interventions aimed at reducing the negative effects of health behaviors without necessarily extinguishing the problematic health behaviors completely. Harm reduction strategies within HIV clinics have been associated with better patient outcomes.

Core Components

Harm Reduction in Healthcare Settings, includes 6 core principles that are defined in the table below¹:

1. Humanism
2. Pragmatism
3. Individualism
4. Autonomy
5. Incrementalism
6. Accountability without termination.

In addition, each of the principles is described in greater detail in the Harm reduction principles for healthcare settings Article in the Additional Resources section below.

¹ Hawk, M., Coulter, R.W.S., Egan, J.E. *et al.* Harm reduction principles for healthcare settings. *Harm Reduct J* 14, 70 (2017). <https://doi.org/10.1186/s12954-017-0196-4>

| Principle | Definition |
|---------------------------------------|---|
| 1. Humanism | <ul style="list-style-type: none"> • Providers value, care for, respect, and dignify patients as individuals. • It is important to recognize that people do things for a reason; harmful health behaviors provide some benefit to the individual and those benefits must be assessed and acknowledged to understand the balance between harms and benefits. • Understanding why patients make decisions is empowering for providers. |
| 2. Pragmatism | <ul style="list-style-type: none"> • None of us will ever achieve perfect health behaviors. • Health behaviors and the ability to change them are influenced by social and community norms; behaviors do not occur within a vacuum. |
| 3. Individualism | <ul style="list-style-type: none"> • Every person presents with his/her own needs and strengths. • People present with spectrums of harm and receptivity and therefore require a spectrum of intervention options. |
| 4. Autonomy | <ul style="list-style-type: none"> • Though providers offer suggestions and education regarding patients' medications and treatment options, individuals ultimately make their own choices about medications, treatment, and health behaviors to the best of their abilities, beliefs, and priorities. |
| 5. Incrementalism | <ul style="list-style-type: none"> • Any positive change is a step toward improved health, and positive change can take years. • It is important to understand and plan for backward movements. |
| 6. Accountability without termination | <ul style="list-style-type: none"> • Patients are responsible for their choices and health behaviors. • Patients are not "fired" for not achieving goals. • Individuals have the right to make harmful health decisions, and providers can still help them to understand that the consequences are their own. |

Tips and Tricks:

- The definitions and approaches outlined in the Harm Reduction Principles for Healthcare Settings could be used to develop assessments for both providers and patients to better understand the extent to which each principle has been successfully applied within the clinic.
- Implementing these harm reduction principles effectively takes time, testing and refining before going to scale, using continuous improvement methods.
- Effective implementation often involves culture change at the clinic and helping providers identify and address their own bias.

Additional Resources (Existing Guides, Case Studies, etc.):

- [Harm Reduction Principles for Healthcare Settings](#)²
- ECHO Collaborative [Video Presentation on Harm Reduction Principles](#)

Suggested Measures:

Process Measures

- % of patients that agree or strongly agree that providers at the clinic value, care for, respect, and dignify me as an individual
- % of patients that agree or strongly agree that at this clinic abstinence is neither prioritized nor assumed to be the goal of each patient
- % of patients that agree or strongly agree that at this clinic providers recognize my unique needs and strengths
- % of patients that agree or strongly agree that at this clinic I am able to make my own choices about medications, treatment, and health behaviors based on my abilities, beliefs, and priorities.
- % of patients that agree or strongly agree that at this clinic providers make me feel that any positive change is a step toward improved health, and positive change can take years.
- % of patients that agree or strongly agree that at this clinic I am responsible for my choices and health behaviors and I will not be “fired” for not achieving my goals.

Outcome Measures

- % of patients that are active substance users with improved viral suppression rates within 6 months
- % of patients that are active substance users that achieve viral suppression (percentage of patients with a HIV viral load less than 200 copies/ml at last viral load test during the measurement year)

Citations and Acknowledgements:

Hawk, M., Coulter, R.W.S., Egan, J.E. *et al.* Harm reduction principles for healthcare settings. *Harm Reduct J* **14**, 70 (2017). <https://doi.org/10.1186/s12954-017-0196-4>

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