Drug abuse management strategies

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How can we reduce drug related harms?

*Let's discuss the strategies one by one*
Strategy 1: Reduce availability of illicit drugs

**Control**
- Manufacture and distribution of certain substances - to prevent diversion to use for recreational purposes
  - Psychotropic substances with medicinal properties

**Restrict**
- Or regulate the availability of substances
  - Increase tax on alcohol
  - Decrease number of stores that sell alcohol
  - Observe dry days and enforce minimum drinking age
  - Regulations on smoking in public places, sale of tobacco products to minors

**Eliminate**
- Or prohibit use certain substances
  - Disrupt drug trafficking, eradicate marijuana
Supply reduction Strategies

Aim to disrupt the supply and availability of drugs.

Supply Reduction Strategies

- Regulated supply of legal drugs
  - Alcohol only for certain people, in certain settings
  - Medications available only through prescriptions

- Total prohibition of illegal drugs
  - Seizures of drug(s); punishment to drug dealers
Problems with Supply reduction “only”

However well-applied, reliance on only this approach

- Unlikely to be effective in preventing all harms
- None of the countries in the world been able to eliminate illicit drug use
- Drug use remains a part of human civilization

Over-zealous supply-reduction approach

increase the harms by forcing drug users to go underground and making drug availability scarce and hence unsafe

People branded as ‘criminals’ may find it difficult to access various services.
Strategy 2: Reduce consumption of drugs in the society

- Ensure that people who have not started drug use do not get into drugs
  - Create positive mental attitudes, values, behaviors, and social skills
  - Develop skills in decision-making, coping with stress and interpersonal communication

- Those who have started drug use, give up their habit
  - Counsel and motivate drug users to give up
  - Provide effective treatment for drug dependence
Approaches to demand reduction

Demand Reduction Strategies

Aim to reduce the desire to use drugs and to prevent, reduce or delay the initiation of drug use

Primary
- Aimed at young people to discourage initiation of drug use
- DARE, Just say ‘NO’

Secondary
- Early stages of drug use & abuse
- Identification of drug users; providing effective treatment for them

Tertiary
- Advanced stages of drug abuse
- Return to normal life – need emotional, financial, and job training support
Logistic issues with demand reduction

➢ If all drug users stop drugs at the same time
  ▪ Enormous load at treatment centers: non-availability of staff and resources to deal with such numbers ➔ some drug users will be left untreated

➢ Drug treatment may not be acceptable, available or effective for everyone ➔ some drug users may relapse or be left out

However well-applied, reliance on only this approach: not likely to be effective in preventing all the harms associated with drug use
DRUG ABUSE MANAGEMENT STRATEGIES

**Demand Reduction Strategies**
aim to reduce the desire to use drugs and to prevent, reduce or delay the initiation of drug use.

**Supply Reduction Strategies**
to disrupt the supply and availability of drugs.

**Harm Reduction Strategies**
aim to reduce the negative impact of drug use and drug-related activities on individuals and communities.
What is ‘Harm Reduction’?

“policies and programs that are aimed at reducing the harms from drugs, but not drug use per se”

Means ‘reducing harm from drugs even more important than reducing drug consumption’

More effective:
- Seeks to achieve realistic, sub-optimal objectives rather than setting, fail-to-reach, utopian goals
- ‘80% of something > 100% of nothing’
• QUIZ
  – Answer – None of the above
Why Harm Reduction?

Why not eliminate all forms of drug use from the society?

*Let's discuss*...
Why can’t drugs be eliminated?

- Substance use has been part of human society from the very beginning.
- ‘Zero Tolerance’ based strategies such as
  - legal prohibition of substances and
  - abstinence-oriented treatment
- have not been able to eliminate substance use.
- Making a drug illegal may even increase the harms associated with its use through marginalization and criminalization of drug users.

A drug free society is impossible to achieve.
There will always be some people using drugs

Among these users:
- Some may not be willing to give up drug use altogether
- Many others may have tried but failed

All such drug using individuals are at continued risk of drug-related harms

Harm reduction provides an alternative to deal with these individuals
TO SUMMARIZE...

- Harm reduction
- Supply reduction
- Demand reduction
How should you approach an individual in community who continues to use drugs?

- Wait till he develops certain complications, then he may be more amenable to reason
- Discuss with the person about which harmful behaviours can he reduce even with continued drug use
- Involve religious leaders in the community and put pressure on him to abstain
- Ask the police to arrest him
Strategies for Drug-related Harms

- Educational Interventions
  - How to reduce risk
  - Safer methods of drug use

- Needle syringe exchange programmes

- Substitution e.g. methadone, buprenorphine

- Other strategies

This entire package = ‘harm reduction’
EDUCATIONAL INTERVENTIONS

- information given:
  - simple,
  - explicit,
  - peer-based,
  - factual
IDU Risk Reduction through education

Reduce number of sharers

Continue injecting with cleaned needles

Continue injecting with sterile needles

Substitution – agonist medicines (OST)

Stop drug use
Education on risky sexual behaviors

No sex till marriage!

One faithful Partner

Minimum number of partners

Consistent condom use

STD / HIV testing and treatment
Needle Syringe Exchange Programs
Needle Syringe Exchange Programmes

More readily associated with the harm reduction approach than any other type of intervention

Involves supplying new, clean needles and syringes to IDUs, in exchange of old used, needles and syringes.

Incorporate a variety of other preventive strategies such as outreach, risk reduction education, referrals to other health and social services, etc.
Philosophy of NSEP

Used Needles
- Unclean
- Infected
- Previously used by others
- Risk of HIV transmission

New Needles
- Clean
- Uninfected
- For use by patient only (expected)
- No risk of HIV transmission

Replaced with
Needle Syringe Exchange Programmes

Myths

• It does not reduce HIV
• It leads to an increase in drug use
• It does not reduce risky injection practices
• It discourages drug-abuse treatment
• It is costly
Needle Syringe Exchange Programmes

Evidence regarding Benefits

- Positive impact on HIV risk behaviors and HIV infection.
- Limit sexual transmission of HIV between IDUs as well as to their non-injecting sexual partners.
- Reach out to more marginalized drug users than any other intervention.
- Some of the IDUs move on to maintenance treatment and even abstinence.
- Does not increase drug use.
Other Interventions
Other strategies

- **Outreach Services**
  - Strategy to reach out to the hidden drug users
  - Reaches to people within their own communities or closer to door steps

- Finding drug users
- Observing them
- Establishing contact and rapport with them in their natural environments
- Providing information about risk behaviors
- Promoting and supporting safe behaviors
Other strategies

Safe injection facilities

- Also known as ‘injection rooms’
- Provide
  - not only the clean syringes or needles, but – a safe injection facility
  - opportunities to IDUs to inject pre-obtained illicit drugs under the supervision of and/or by the medical staff
- Could also include various other services e.g.
  - interventions for overdose
  - Risk reduction education
  - Condom distribution
  - Referral for medical complications

Extremely controversial strategy, used in few countries till date
OPIOID SUBSTITUTION TREATMENT

Coming soon ....
Conclusions

Harms associated with drug use can be dealt with in a number of ways

Harm reduction strategy provides the most practical and flexible approach to reduce these harms

Focus is on immediate and easily preventable harms rather than setting unrealistic goals such as complete abstinence

Agonist substitution treatment and NSEPs are the most common and effective strategies

Combination of strategies and individualization of intervention are important aspects of a harm reduction approach
Which of the following communities is in need of harm reduction services?

- Community A: less IDU, increasing number of wine shops in residential areas and alcohol using adults
- Community B: large number of IDUs, high prevalence of HIV/AIDS amongst IDUs
- Community C: recent trend of adolescents getting into smoking and occasional cannabis (ganja) use
- All of the above

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