

MAINline

THE CONTINUUM OF CARE

Harm reduction as a people-centred, human rights approach

Harm reduction

Following the definition of the International Harm Reduction Association (IHRA) harm reduction refers to ‘policies, programmes and practices that aim primarily to reduce the adverse health, social and economic consequences of the use of legal and illegal psychoactive drugs without necessarily reducing drug consumption’.

The World Health Organisation (WHO), UNAIDS and UNODC have developed a ‘comprehensive harm reduction package’ containing interventions that have proven their effectiveness in combating HIV and other infectious diseases among people who inject drugs (PWID). Those interventions are:

1. Needle and syringe programmes (NSPs)
2. Opioid substitution therapy (OST) and other drug dependence treatment
3. Voluntary and confidential HIV counselling and testing (VCCT)
4. Antiretroviral therapy (ART)
5. Prevention and treatment of sexually transmitted infections (STIs)
6. Condom programmes for injecting drug users (IDUs) and their sexual partners
7. Targeted information, education and communication (IEC) for IDUs and their sexual partners
8. Vaccination, diagnosis and treatment of viral hepatitis
9. Prevention, diagnosis and treatment of tuberculosis (TB)

The WHO released a new consolidated guideline in 2014 for HIV prevention, treatment and care for key populations. In this guideline overdose prevention and outreach methodology are added to the package as effective and essential ingredients to improve the health of (injecting) drug users.

More than health

The consolidated guideline of the WHO addresses another issue that is very important when working to improve the health of key populations such as PWID. It promotes the idea that the structural factors that cause drug users to be more vulnerable for infectious diseases should be improved too. This is something that Mainline whole-heartedly supports. We have seen in our work that it is not useful to solely support substance users in reducing harm to their health. As long as drug users are caught in poverty, a chaotic, street-based life-style and are criminalised by the laws in their country that should protect them, they will not be able to take care of themselves and their health.

This is why Mainline and our partners always strive towards a continuum of care. This concept has proven indispensable in developing countries and countries in transition, where state institutions not only tend to ignore substance users, but often also exert repression on them, forcing them to go underground and keeping them away from services – if these exist at all.

The continuum of care

The continuum of care is a strategic approach to working with substance users that acknowledges the sociopolitical context in which substance users generally find themselves.

Our approach takes into account the following factors:

1. Poverty and marginalisation faced by substance users
2. The diversity of substance users' choices and needs at various points in their lives
3. Health and human rights of substance users
4. Their place within their families and communities

Providing a continuum of care is a comprehensive concept that focuses on the specific social, economic and health needs of substance users. It is based on the harm reduction principle, which means it is always unprejudiced, pragmatic and empowering. Seen in this light, harm reduction is more a people-centred and a human rights approach to Mainline, than just a public health strategy to prevent the spread of infectious diseases like HIV, hepatitis or TB.

Services

The continuum of care provides a range of services. The idea is to support substance users in every phase of their drug use, including in a possible desire to leave their substance use behind.

This means the concept includes but exceeds the comprehensive harm reduction package as formulated by WHO, UNAIDS and UNODC, since it also involves the following interventions:

- Outreach work as a way to reach substance users (adopted by the WHO in 2014)
- Drop-in centres where trained staff offers harm reduction services and basic medical care
- Night shelters

- Support in adherence to HIV-treatment
- Services to partners and families of substance users
- Socio-economic rehabilitation through training and support leading to (self-) employment
- Lobby and advocacy against criminalisation of drug users and in favour of access to basic human rights

By working from a broad, socio-political perspective, we hope to ensure that the rights and needs of substance users are met. At the same time we take the interests of local communities and society at large into account by protecting public health and reducing possible public nuisance and other forms of societal damage caused by substance use.

Methods

Mainline supports local organisations in a variety of countries to develop a comprehensive continuum of care as an example for countrywide strategies. Mainline facilitates technical support to fulfil this commitment through exchange of information and technical capacity (often south-to-south) and through support of regional and national advocacy and dissemination of good practice among parliamentarians, government and local communities.

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