

# Harm Reduction in the Philippines

*Protecting lives, reducing harm, safely for a better future*



# Abstract

This briefing note is a resource that is advocating for the increased awareness and implementation of harm reduction strategies in the Philippines. Harm Reduction is a holistic and evidence-based approach to public health aimed at reducing the negative outcomes of drug use on individuals, groups, and communities. This briefing note acknowledges the colonial legacies that have influenced the current approach to drug use and provide a summary of the evolution of drug use and public opinion towards it. This note also critically evaluates the successes and challenges associated with harm reduction in the Philippines and makes recommendations for future efforts. The briefing note serves as a resource for individuals and organizations interested in understanding the role of harm reduction in addressing drug use and related issues in the Philippines.



## Purpose of Briefing Note

The central focus of harm reduction is to alleviate drug use's negative consequences for individuals, groups, and communities in a way that is backed by science. This briefing note advocates for increased awareness and implementation of harm reduction strategies in the Philippines, this holistic approach to public health has proven effective in reducing the transmission of HIV. The briefing note will also provide a critical evaluation of the successes and challenges of harm reduction in the Philippines, including its history as a colonial state, and make recommendations for future efforts. This briefing note is intended to serve as a resource for individuals and organizations interested in understanding the role of harm reduction in addressing drug use and related issues in the Philippines.

## Definition of Harm Reduction

Harm Reduction is an evidence-based approach that aims to reduce the health and social harms associated with addiction and substance use. Specifically, the harm reduction strategy to substance use provides people who use drugs a choice on how they will minimize harm to their selves so that they can live a safer and healthier life. Harm reduction acknowledges the scientific fact that many people coping with addiction may not be able to remain abstinent. It recognizes that the reasons why people start using drugs are complex and often links to inequities [1]. This approach supports people who use drugs to engage with peers, medical, and social services to meet their needs, and as a result of accessing these services, people are more likely to engage in ongoing treatment [2]. Evidence proves that harm reduction services directly benefit people who use drugs, their families, and the community as a whole [3]. Harm reduction is a holistic public health approach that seeks to reduce the negative consequences of drug use, rather than focusing solely on eliminating drug use itself. This approach is based on the recognition that drug use is a complex issue that affects individuals, families, and communities, and that a comprehensive and compassionate response is necessary to address it.

Last, but not least – billions of dollars spent each year on efforts to reduce the supply of and demand for illicit drugs have not resulted in a reduction in the overall number of people who use drugs. Injecting drugs carries a high risk of HIV and viral hepatitis transmission if sterile injecting equipment is not easily accessible or if it is shared among people who inject drugs [4]. Access to health and social services under the umbrella of a harm reduction approach for people who inject drugs is a human right and a necessary condition to stop AIDS [5].



## Harm reduction services & overdose prevention sites

Overdose prevention sites (drug consumption rooms) are health services aimed at reducing harms related to the use of substances, particularly opioid drugs. These facilities provide a hygienic environment for people to inject substances under the supervision of medical professionals. Sterile syringes are provided to prevent the transmission of disease through blood. Needle and syringe programs are considered one of the most cost-effective public health interventions. Within the continuum of harm reduction services, individuals are provided with education on safer drug use, overdose prevention and reversal, medical and counseling services, and referrals to drug treatment, housing, income support, and other services.

## Overview of Drug Use & Related Issues in Asia

Drug use is a significant issue in the Philippines, with an estimated 4.8 million people using illegal drugs in 2019. The high prevalence of drug use has led to various negative consequences, including increased rates of drug-related crime, infectious diseases such as HIV/AIDS, and overdose deaths[3,4,6,7]. In general, unsafe drug injection has been the main contributor to HIV transmission in Asia, and HIV infection amongst injection drug users accounts for nearly half of all new infections on the continent [6]. Many original national medium-term AIDS plans from countries in the Asian region did not mention injecting drug use as a component of the national epidemic, despite evidence from early in the course of the epidemic of explosive spread, high prevalences, and the central role of epidemics of HIV among people who inject drugs (PWID) in driving national epidemics [7]. According to Katie Stone's report from the HR Global State of Harm Reduction survey in 2014, 17 out of 23 countries in south and southeast Asia have needle and syringe program (NSP) provision and 15 opioid substitution therapy (OST); coverage, however, remained low [7].

## Overview of Drug Use & Related Issues

Drug use is a significant issue in the Philippines, with an estimated 4.8 million people using illegal drugs in 2019. The high prevalence of drug use has led to various negative consequences, including increased rates of drug-related crime, infectious diseases such as HIV/AIDS, and overdose deaths. Billions of dollars spent each year on efforts to reduce the supply of and demand for illicit drugs have not resulted in a reduction of the overall number of people who use drugs. Injecting drugs carries a high risk of HIV and viral hepatitis transmission if sterile injecting equipment is not easily accessible or if it is shared among people who inject drugs [4]. The access to health and social services under the umbrella of a harm reduction approach for people who inject drugs is a human right and a necessary condition to stop AIDS [5].



Unsafe drug injection has been the main contributor to HIV transmission in Asia, and HIV infection amongst injection drug users accounts for nearly half of all new infections on the continent [6]. Many original national medium-term AIDS plans from countries in the Asian region did not even mention injecting drug use as a component of the national epidemic, despite evidence from early in the course of the epidemic of explosive spread, high prevalences and the central role of epidemics of HIV among people who inject drugs (PWID) in driving national epidemics [7]. According to Katie Stone's report from the HR Global State of Harm Reduction survey in 2014, 17 out of 23 countries in south and southeast Asia have needle and syringe program (NSP) provision and 15 opioid substitution therapy (OST); coverage, however, remained low [7].

## Evolution of the Public Opinion on Drug Use in the Philippines

In the Philippines harm reduction strategies are thought of as a “western-minded way of thinking” to quote the direct words of Philippine Senator Vincente Sotto III in a speech that he gave in 2015 [14]. Senator Sotto not alone in this way of thinking in politics with former President Rodrigo Duterte also taking a harshly punitive stance on drug use during his term [14]. However, just as these strategies are thought of as “western” the punitive stance towards drug use is also a construct of colonial influence. Jose Rizal a prolific Philippine nationalist, writer, and polymath is recognized as a national hero but today, in alignment with current drug laws, would be severely punished for carrying “hashish” which at the time was dispensed from a drugstore [13]. The public perspective on drug use is not as deeply ingrained into “Asian perspective” or an “Eastern way of doing” as current political detractors would have one believe.

## Impediments for harm reduction approach

### **Prioritizing treatment over prevention**

In Asia, the priority has shifted to the treatment of diseases. This in itself will further cut back prevention programs. And even if diseases are to be prioritized, hepatitis C will remain untouched—though there are an estimated 170–200 million HCV-infected individuals worldwide—because of the prohibitive cost of treatment. According to 2015 data, treatment for hepatitis C, sofosbuvir, costs about US\$100,000 per course amounting to about US\$1,000 a day, a sum that far exceeds what the average Asian can afford [9].



## **Lack of financing for research**

The political nature of harm reduction has rendered research funding for such programs highly unreliable, further hindering effective and long-term evaluation studies that could otherwise justify their cost-effectiveness [6].

## **Work precariousness for harm reduction outreach workers**

Arguably the biggest challenge for outreach workers, engaged in the provision of harm reduction services, is uncertainty as to whether the needle and syringe exchange program (NSEP) will survive in the coming years. Many of them have seen their colleagues laid off. As government-funded initiatives, they fear the loss of their jobs while questioning the rationale for cutting staff when it is apparent that an increasing number of young people are using drugs [10]. Many original national medium-term AIDS plans from countries in the Asian region did not even mention injecting drug use as a component of the national epidemic, despite evidence from early in the course of the epidemic of explosive spread, high prevalences, and the central role of epidemics of HIV among people who inject drugs (PWID) in driving national epidemics [7].

## **Evolution of the Public Opinion on Drug Use in the Philippines**

In the Philippines harm reduction strategies is thought of as a “western-minded way of thinking” to quote the direct words of Philippine Senator Vincente Sotto III in a speech that he gave in 2015 [14]. Senator Sotto is not alone in this way of thinking in politics with former President Rodrigo Duterte also taking a harshly punitive stance on drug use during his term [14]. However, just as these strategies are thought of as “western” the punitive stance towards drug use is also a construct of colonial influence. Jose Rizal a prolific Philippino nationalist, writer, and polymath is recognized as a national hero but today, in alignment with current drug laws, would be severely punished for carrying “hashish” which at the time was dispensed from a drugstore [13]. The public perspective on drug use is not as deeply grained in to “Asian perspective” or an “Eastern way of doing” as current political detractors would have one belief.

## **Global health policy support for harm reduction**

Approaches and programming are supported internationally by global institutions such as The Joint United Nations Programme on HIV/AIDS (UNAIDS), United Nations Office on Drugs and Crime (UNODC), and the World Health Organization (WHO), and it is seen as a best practice for engaging with individuals with addiction and substance use issues [2]. The Global Fund to Fight AIDS, TB, and Malaria (The Global Fund) considers harm reduction a critical part of a country’s comprehensive HIV response. Countries that receive the Global Fund financial support to accelerate their HIV response from the Global Fund are requested to address and scale up a harm reduction approach as an effective and evidence-based intervention [8].



## Misconceptions of harm reduction & debunking of myths:

False	True
Harm reduction supports, or encourages, illicit substance use and does not consider the role of abstinence in addiction treatment [2].	Harm reduction does not encourage drug use, but help people make healthier choices. It acknowledges that drug addiction and substance issues are related to poverty and other structural determinants of health and require a comprehensive solution beyond enforcement and control [11].
Harm reduction attract people and bring violence into local communities, where harm reduction sites are located [11].	There is evidence to suggest that harm reduction services such as opioid antagonist therapy can reduce crime, including violent crime. There is also evidence to suggest that harm reduction services such as drug consumption rooms (also known as overdose prevention sites or supervised consumption sites) do not lead to any increase in crime in the local area [12].
Harm reductions costs is a burden on tax-payers and health system budgets.	Evidence shows that harm reduction is a high-impact and cost-effective HIV prevention for people who inject drugs in countries of all income levels [8].

## Summary of Key Points

The Harm Reduction approach emphasizes reducing the negative consequences of drug use, rather than completely eliminating drug use. This approach has been embraced by various organizations and agencies in the country, including the government, as a way to mitigate the harm caused by drugs and to improve the health and well-being of individuals who use drugs. Despite its positive impact, harm reduction remains controversial and faces challenges, including opposition from conservative groups and limited funding. Nevertheless, it continues to play an important role in addressing drug-related issues in the Philippines





## References

1. Drug-related harm reduction. World Health Organization. Available at: <https://www.emro.who.int/asd/health-topics/drug-related-harm-reduction.html#:~:text=There%20is%20no%20generally%20accepted,behaviours%20related%20to%20drug%20use>
2. Harm Reduction. CMHA Ontario. Available at: <https://ontario.cmha.ca/harm-reduction/>
3. Hawk, M. et al. (2017) Harm reduction principles for healthcare settings - harm reduction journal, BioMed Central. BioMed Central. Available at: <https://harmreductionjournal.biomedcentral.com/articles/10.1186/s12954-017-0196-4>
4. UNAIDS. Available at: [https://www.unaids.org/sites/default/files/media\\_asset/JC2954\\_UNAIDS\\_drugs\\_report\\_2019\\_en.pdf](https://www.unaids.org/sites/default/files/media_asset/JC2954_UNAIDS_drugs_report_2019_en.pdf)
5. Unaid.org (2022) Harm reduction, UNAIDS. UNAIDS. Available at: <https://www.unaids.org/en/keywords/harm-reduction>
6. Smith, K., Bartlett, N., & Wang, N. (2012). A harm reduction paradox: Comparing China's policies on needle and syringe exchange and methadone maintenance. International Journal of Drug Policy, 23(4), 327–332. <https://doi.org/10.1016/j.drugpo.2011.09.010>
7. Crofts, N., & Azim, T. (2015). Harm reduction in Asia and the Pacific: an evolving public health response. Harm Reduction Journal, 12, 47. <https://doi.org/10.1186/s12954-015-0074-x>
8. Technical brief - theglobalfund.org (no date). Available at: [https://www.theglobalfund.org/media/1279/core\\_harmreduction\\_infonote\\_en.pdf?u=636850056300000000](https://www.theglobalfund.org/media/1279/core_harmreduction_infonote_en.pdf?u=636850056300000000)
9. Gordon, J. D. (2015, February 25). Harm Reduction in Indonesia: At a Difficult Juncture. Middle East Institute. <https://www.mei.edu/publications/harm-reduction-indonesia-difficult-juncture>
10. Azman, A., & Baba, I. (2015, February 20). Outreach Workers on the Front Lines: Malaysia's Needle and Syringe Exchange Program. Middle East Institute. <https://www.mei.edu/publications/outreach-workers-front-lines-malaysias-needle-and-syringe-exchange-program>
11. Public perceptions of Harm reduction intervention (2023) The Ontario HIV Treatment Network. Available at: <https://www.ohtn.on.ca/wp-content/uploads/rapid-response/RR63-2012-Public-Perception-HR-Interventions-1.pdf>
12. What is harm reduction? (2022) Harm Reduction International. Available at: <https://hri.global/what-is-harm-reduction/>
13. Ocampo A. Rizal the user. In: Lasco G, editor. Drugs and Philippine Society. Quezon City: Ateneo de Manila University Press; 2021. p. 44–6.
14. Lasco, G. (2022) Decolonizing harm reduction - harm reduction journal, BioMed Central. BioMed Central. Available at: <https://harmreductionjournal.biomedcentral.com/articles/10.1186/s12954-022-00593-w>

