## harm reduction

## Policing harm

For as long as street drugs remain illegal, the police will always have a massive impact on drug-related harm. Jamie Bridge takes a global look at the good, the bad and the ugly of the sensitive realm of harm reduction policing

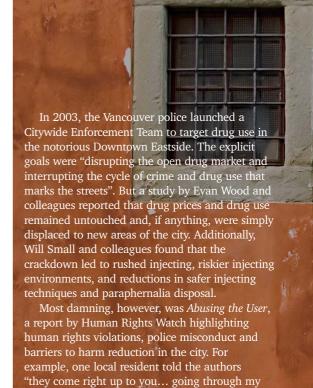
> olice are front-line workers in the drugs world, both as a result of drug-related crime and the criminalisation of drug use itself. They often have contact with drug users when they are at their most vulnerable and, as such, have a key role to play in harm reduction around the world.

Over time, many cities have been the subject of targeted 'crackdowns' - localised zero-tolerance strategies which are often undertaken amidst political rhetoric about the evils of drugs. In many cases, however, these periods of intensified prohibition can do more harm than good.

## **CRACKDOWNS**

In New York, for example, Tactical Narcotic Teams delivered crackdowns in specific precincts across the city in the late 1990s. Despite widely acclaimed reductions in crime over this period, dubbed the 'New York Miracle', researcher Hannah Cooper and colleagues found that there were serious side-affects. Due to increases in police searches, drug users were less likely to carry sterile injecting equipment and homeless injectors were often rushed or distracted by increased surveillance of public spaces. The authors concluded that the crackdown was "imperilling injectors' health".

In a separate paper, David Dixon and Lisa Maher discuss how this crackdown is "held out as an exemplar of crime control" and directly effects worldwide policing strategies, including those in the UK. However, the fall in crime could have been due to a range of confounding factors, such as socioeconomic and schooling improvements, and was achieved at significant health, social and economic costs.



## SUPPORT

In countless studies, police crackdowns fail to reduce injecting or drug use. For example, a USAwide survey by Friedman et al found no statistical pattern between 'legal repressiveness' and drug use. Instead, crackdowns merely impinge harm reduction services. One of the first to feel the pinch are needle exchanges. Even though exchanges are often legal, they still rely heavily on the co-operation of police, who, theoretically, could permanently target needle exchanges

pockets... I'm not even being arrested, they're not

even reading me my rights... What did I do wrong, other than living in the poorest zip code in Canada?" The report recommends the immediate

cessation of the Vancouver crackdown.

arresting everybody on suspicion of drug use.

In 1997, Ricky Bluthenthal and colleagues compared two US needle exchange schemes - one with police support and one without, even though both were technically illegal at the time. The researchers concluded that without police engagement, a needle exchange faces fewer clients, reluctant staff and reduced coverage, and the authors concluded that such pressure is a barrier that must be removed "if preventing HIV infections is truly a priority". Elsewhere, Corey Davis and colleagues analysed the use of needle exchange schemes before and after crackdowns, and found that service utilisation fell across the board, especially for male and black drug users, once the police raised the stakes.

To confound the problem, even once legal barriers have been removed, the attitudes of police personnel are crucial for needle exchanges. In the USA, Leo Beletsky and colleagues found that officers were generally poorly trained and unaware of the changing legal status of needle exchanges. As a result, the "law on the streets" remained unchanged - with drug users viewed



operation and support from police at every level. Overall, they have been well accepted by police on the ground and have helped to bridge a considerable gap between law enforcement and harm reduction in terms of communication, shared goals and mutual understandings. Inevitably, it can sometimes be tricky for arrest referral workers, especially when facing the old school attitudes of 'lock 'em up and throw away the key'. However, against a national backdrop of over-populated prisons and reports calling for cuts in incarceration rates, these schemes represent an excellent example of how the police can fulfil their potential as a unique and potent harm reduction force.

It is important to educate, train and sensitise law enforcers about drug-related issues and the benefits of harm reduction approaches. In the USA, an online resource from The Centre for Innovative Public Policies explicitly attempts to do just this, and asks "What's in it for the police?" – such as a reduced risk of infection from needlestick injuries or publicly discarded paraphernalia.

Perhaps the best example, however, comes

from Vietnam and China, where the Asia Regional HIV/AIDS Project held two-day seminars for senior police officers. These well-attended meetings outlined the rationale and evidence for harm reduction, the potential interventions and the support that these require from law enforcers. In the seminar evaluations, the vast majority of attendees reported that the meetings had increased "the possibilities of... implementing harm reduction approaches with [their] law enforcement agency".

The International Harm Reduction Association (IHRA) has identified the 50 best examples of documents studying police involvement in harm reduction. All of the reports and studies mentioned in this article are featured in the collection. The entire IHRA series of "50 Best Collections" on a variety of subjects can be viewed at www.ihra.net. •

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