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realities; e.g., how will the output of their analyses be implemented given the power differentials across drug producer, transporter and consumer countries' borders? Can the self-determination and self-preservation rules of the Harm Reduction movement make the jump from person to country, from demand- to supply-side policies? They propose realism over radicalism (taking off from this author's historical critique), but do they really suspect that global change, in a policy field so contentious, is going to be won by written argument and flowchart analyses? History is a bit hotter than that, and the epochal forces of globalisation have and will continue to spark fires, both progressive and regressive. Perhaps this force coupled with the proposed rational evidence can make beneficial change. We will see. Metaphorically speaking, time will tell...

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Measuring drug law enforcement—From process to outcomes

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Greenfield and Paoli's article in this edition of *IJDP* (2012) looks at the utility of the concept of harm reduction when applied to drug law enforcement and supply reduction activities. Attention to this issue is very welcome, as it expands consideration of the concept of harm reduction beyond its traditional focus on public health issues.

I find the [International Harm Reduction Association \(now Harm Reduction International\)](#) (2010) definition of harm reduction to be the most useful and straightforward – '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.' It is easy to see why this last element of the definition is controversial with those who believe that reducing drug consumption is the only or primary policy objective, and in the international debate on public health and HIV prevention in relation to drug users, we have seen how these sensitivities have inhibited the search for effective policies and programmes.

However, it seems to me that a broader and explicit harm reduction approach to all drug control activities is what is needed, now that most analysts and authorities accept that the eradication or significant reduction in the scale of markets is an unrealistic aim. Our challenge now is to find a range of policies and programmes that manage the reality of drug markets in the best way to minimise harm.

So what does this mean in terms of drug law enforcement and supply reduction? The first challenge is to articulate what harms it is that we are trying to reduce. Currently, drug law enforcement is almost exclusively assessed on *process* measures – the area of crops eradicated, the amount of drugs seized, or the number of users arrested. Even if the reduction of the market remained a primary

objective, then success should be measured in terms of *outcomes* – has overall market scale been reduced, or have drugs become less available to the potential end user?

There may be some logic for using market scale as a proxy indicator for some of the harms we should be concerned with, but that are difficult to measure independently – for example, the impact of drug use on school performance, or the level of addiction in a particular community, but this logic only holds if the level of the harm fluctuates broadly in proportion with increases or decreases in the scale of the market.

It has become clear in the field of HIV prevention, on the other hand, that the level of IDU transmission is not closely correlated with market scale, being mainly associated with levels of risk behaviour, and the policy and service environment. This would seem to be true also in the drug law enforcement field. The level of the harms to individuals and societies that we should be concerned about – the power and reach of organised crime, the violence and intimidation associated with drug markets, and the corruption of legitimate authority – do not increase or decrease in close correlation with the overall scale of the market, but are more affected by other factors, such as the dynamics of the market, the policies and law enforcement tactics employed to respond, and the strength of public institutions.

The objectives of drug law enforcement should therefore be framed explicitly in terms of the reduction of these harms, and methods of measurement developed that move beyond the currently utilised proxy and process measures. As with public health harm reduction in the 1980s, the process of definition of these measures, and the development of effective strategies to achieve them, is in its infancy. However, there are encouraging signs that policy makers are beginning to think in these terms, and will be open to the proposals of new measures and tactics proposed by the academic and advocacy community.

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Harm reduction is not enough for supply side policy: A human rights-based approach offers more

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At the International Harm Reduction Association's 21st international conference in Liverpool in 2010 I organised (with the Transnational Institute and the Institute for Policy Studies) a major session entitled "*Harm reduction for producer nations? Farmers' perspectives on the war on drugs*". In the run up to the conference and as the discussions unfolded I struggled with the question posed in the title. Can harm reduction be applied to supply side issues? Is it a useful paradigm for this? Does this discussion in fact expose the limits of harm reduction? Reading [Greenfield and Paoli's commentary \(2012\)](#), which sets out their vision of the application of harm reduction to supply-oriented policy, has helped me to clarify my thinking. It can, in a nutshell, be summed up in four broad statements. Each, of course, open to debate.

Harm reduction may be applied to supply oriented policy only if stretched beyond any meaningful definition of 'harm reduction' as understood in the drug policy field. Greenfield and Paoli treat harm reduction as a goal, rather than a set of interventions. This is inevitable because harm reduction as we understand it does not directly translate to supply side issues. It must be modified. On the one hand, as the authors say, this necessary expansion 'offers breadth'. On the other, however, with such breadth comes a loss of meaning. This now may be any area of policy – as the authors themselves note. Reducing the harms of drug use, and policies relating to drug use, are certainly the goals of harm reduction – but it is also a set of interventions and, crucially, a way of working based on principles of public health and human rights. Only when this is understood do the interventions and goals make sense.

Focusing on the harms of activities and policies is crucial, but using 'harm reduction' is not necessary to explain this. Aiming to reduce the harm of an activity or of a policy intervention is a standard function of policy makers and regulators. There is nothing new to this and nothing new offered by harm reduction, as the authors appear to suggest. As the definition of harm reduction expands in the authors' discussion we come to models of risk assessment and policy augmentation based on identified risks set against specified goals. This is vital, of course, and should be standard practice, so I can only wholeheartedly agree with the call for this by Greenfield and Paoli. But 'harm reduction' is no longer necessary at this stage. It is simply a formulation of words.

There is political and practical benefit in maintaining a narrow understanding of harm reduction and much to be lost in allowing it to become too diffuse. Meanwhile, we must take into account what we lose by allowing such diffusion of the term 'harm reduction'. Taking the authors' formulation, Russia may legitimately adopt the term and apply it to promoting 'healthy lifestyles' whilst banning opioid substitution therapy until 2020. On balance, they may claim, they are reducing harm. Iran or Singapore or numerous other States may make the same claim in executing drug offenders, or China by doing the same and locking up hundreds of thousands of drug users without trial. And Colombia and the US may say that aerial fumigation of coca reduces more harm than it causes. They too are engaged in 'harm reduction'. All of these claims may be disputed on many grounds, but today we do not need to argue. These are not harm reduction policies. All the while the struggle for harm reduction related to drug use, HIV and the policies that surround them continues, but abstinence based programmes may too legitimately claim the term. In the midst of this the strength of harm reduction as a way of working and as a political movement is weakened, and still with so far to go.

Harm reduction alone is not enough for either the demand or supply side. Harm reduction is increasingly being seen as a key component of a human rights-based approach to drug policy. Harm reduction is acknowledged by international monitors and in political fora as a requirement of the right to health and the right to benefit from scientific progress for people who use drugs – both legal obligations under international law. Most recently, the UN Committee on Economic Social and Cultural Rights (CESCR) pointedly criticised Russia's anti-harm reduction policies as interfering with the right to health ([UN Committee on Economic Social and Cultural Rights, 2011](#)).

Here I find an important gap in Greenfield and Paoli's analysis. There is no mention of the need for international normative and legal counterweights to the international drug conventions ([Barrett, 2010](#); [Barrett & Nowak, 2009](#); [Elliot, Csete, Kerr, & Wood, 2005](#)). Under the 1988 trafficking convention, States parties *have* to eradicate the crops controlled under the treaties. Human rights law tempers, by law, the ways in which this can happen (something in fact referred to in the 1988 agreement at article 14). But it also provides legal and normative arguments to challenge whether such measures are appropriate at all (In the context of traditional uses of coca, indigenous rights and the 1961 Single Convention on Narcotic Drugs, see [Barrett, 2011](#)). The CESCR also raised concerns about aerial fumigation in Colombia last year ([UN Committee](#)

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