



(SHORT COMMUNICATION)



Harm Reduction as a Human Right: Shifting the Narrative: A Commentary

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Abstract

This commentary examines harm reduction as a critical yet frequently misunderstood public health approach and argues for its recognition as a fundamental human right grounded in the right to health. It explores how misinformation and punitive drug policies have limited the adoption of evidence-based interventions despite strong global support from international health and human rights bodies. It highlights the effectiveness of harm reduction strategies, including needle and syringe programs, opioid agonist therapy, naloxone distribution, and safer consumption services, in reducing overdose deaths, preventing HIV and hepatitis C transmission, and improving engagement with healthcare systems. By reframing harm reduction as a rights-based obligation rather than a moral debate, this commentary highlights the ethical and legal responsibility of governments to ensure equitable access to lifesaving services. It concludes that integrating harm reduction into national health policies can strengthen public health systems, reduce healthcare costs, and promote dignity and social inclusion for people who use drugs.

Keywords: Harm reduction; Human rights; Right to health; Substance use; Health policy; Harm reduction services

1. Introduction

Harm reduction remains one of the most misunderstood public health initiatives globally. Often framed as a strategy that enables or encourages substance use, harm reduction interventions are frequently met with resistance from policymakers and the general public. This misconception obscures the fundamental goal of harm reduction: to reduce preventable morbidity and mortality associated with substance use while prioritizing dignity, autonomy, and health. As substance use remains a significant public health concern, reframing harm reduction as a human rights obligation rather than a moral or political choice is both timely and necessary.

2. Human Rights Basis

At its core, harm reduction is grounded in the right to health, a principle rooted in international human rights law. Every individual, without exception, has the right to access lifesaving, evidence-based health services, including harm reduction interventions.

Framing harm reduction as a human right fundamentally shifts the narrative from punishment to protection. Rather than criminalizing individuals for substance use, a rights-based approach recognizes people who use drugs as rights-holders entitled to dignity, non-discrimination, accurate information, and access to essential health services. This perspective aligns with international guidance from bodies such as the Office of the High Commissioner for Human Rights, Amnesty International, and the World Health Organization, all of which emphasize harm reduction as a core component of the right to health [1].

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The UN Special Rapporteur on the right to health has affirmed that access to harm reduction and other evidence-based drug responses is essential for protecting the health of people who use drugs

Just as access to food, clean water, shelter, and healthcare are recognized as fundamental rights, access to harm reduction services should be treated with the same urgency and legitimacy. Harm reduction meets individuals where they are in their substance use journey, prioritizing safety and wellbeing without coercion or judgment, an approach that lies at the heart of human rights-based public health practice.

3. Harm Reduction Services and Their Effectiveness

The legitimacy of harm reduction as a human right is reinforced by its strong evidence base. Harm reduction interventions, including needle and syringe programs, opioid agonist therapy, naloxone distribution, overdose prevention education, drug testing, and safer consumption spaces, have consistently demonstrated effectiveness in reducing overdose deaths, preventing the transmission of HIV and hepatitis C, and increasing engagement with healthcare and social services.

These interventions do not increase substance use; rather, they reduce the harms associated with it while often serving as critical entry points into treatment and recovery services. Countries and regions that have implemented comprehensive harm reduction strategies report significant improvements in population-level health outcomes, reduced healthcare costs, and decreased strain on emergency and criminal justice systems, and recognized the effectiveness of harm reduction interventions, urging governments to expand these programs, including within prisons, while removing legal and structural barriers that limit service provision. [2]. The demonstrated effectiveness of these services suggests that ongoing opposition to harm reduction is less reflective of the evidence base and more influenced by stigma, misinformation, and long-standing punitive approaches to drug control.

4. Conclusion

There remains an urgent need to advocate for the expansion of harm reduction services, particularly in settings where they are nonexistent, underfunded, or actively opposed. Equally important is sustained public education that reframes substance use as a public health issue rather than a moral failing or criminal act. Recognizing harm reduction as a human right compels governments and institutions to move beyond the failed “war on drugs” and toward policies centered on health, equity, and compassion.

Harm reduction is not a privilege reserved for a few but a right that belongs to everyone. The true global challenge is not eliminating drugs, but ensuring that people who use them are protected, supported, and empowered to live healthy and dignified lives.

References

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