

How do you define harm reduction? Have this month's readings altered your definition at all?

This month's readings focus on the history of harm reduction. As we are learning the history of a practice in which we participate, reflection runs two timelines: one piecing together the lineage of this movement, and one piecing together our own personal history as practitioners of harm reduction ourselves.

In her interview with Mariame Kaba (pg 306,) Shira begins with a question, which I now pose to you all:

Do you remember where you first heard about harm reduction?

In her chapter "People, Power and The Original Harm Reductionists," Monique Tula refers to an essay written by Imani Woods. Woods is a social worker and substance use counselor who came to believe in the harm reduction movement after a period of being singularly supportive of abstinence. She writes, "As a person who has followed the teachings of Malcom X, one of the things I've learned is that it's okay to be wrong... my job was really about healing, not curing, not about changing, and not about determining what other people's paths should be" (pg 46.)

Woods states that the arrival of HIV disease "turned her around." If you were not always a supporter/ practitioner of harm reduction, what turned you around?

In your history with the practice/movement of harm reduction, what are some things you have been wrong about?

Tula writes, "Many of the nationally known harm reduction leaders were white and primarily cis men, some of whom were exceptionally polarizing in the way they preached (and practiced) harm reduction" (pg 46.)

How have you seen the discussion and the practice of harm reduction be polarizing?

How does this polarization get in the way of the healing Woods referenced in the previous quote? Is there a way in which polarization itself can be healing? Do you feel like this depends of the practitioner or their distance from the served population at all?

Tula refers to the cultural shift of harm reduction as stemming from being "tired of waiting to be saved" (pg 45.)

Is this relatable to anyone who works in student affairs? Are there ways in which we are tired of waiting with regard to the well-being of students? If so, what aspects of harm reduction efforts may need to be tailored to higher education?