

January 29, 2024

The Honorable Tammy Baldwin
The Honorable Shelley Moore Capito
Subcommittee on Labor-Health and Human Services Appropriations
Subcommittee on Labor-Health and Human Services-Education
Senate Appropriations Committee
Senate Appropriations Committee
U.S. Senate
U.S. Senate
Washington, DC 20510
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Dear Chairwoman Baldwin and Ranking Member Capito:

We are writing to respectfully request that you oppose the addition of language prohibiting the National Institute on Drug Abuse from funding any research related to harm reduction to the Statement of Managers accompanying the Conference Agreement on the Fiscal 2024 Labor, Health and Human Services, Education and Related Agencies Appropriations bill.

As representatives of professional societies representing researchers on substance use disorders and organizations representing major substance use disorder programs, we are concerned that the House language would prohibit National Institute on Drug Abuse (NIDA)-funded research focused on preventing deaths from overdoses, transmission of infectious diseases among people who use drugs and the larger community, and other harms associated with drug use. Decades of research support individual and public health benefits of harm reduction services. NIDA currently supports research on how to best implement proven harm reduction strategies and to explore the effectiveness of new and emerging approaches, particularly in resource-challenged settings. For example, NIDA's harm reduction research portfolio is intended to identify more science-based methods to reduce emergency department visits and costly healthcare services, while in some cases offering people who use drugs opportunities to connect to substance use treatment and other healthcare services in settings relatively free of stigma. NIDA currently supports research on how to best implement proven harm reduction strategies and to explore the effectiveness of new and emerging approaches, particularly in resource-challenged settings.

Specifically, harm reduction approaches help reduce certain health and safety issues associated with drug use. As a model of substance use care distinct from treatment or recovery support, harm reduction was created by and for people who use drugs to improve health and well-being, including during active drug use. Well-studied harm reduction strategies include syringe services and naloxone distribution programs.

Harm reduction is a critical part of our national strategy to address the addiction and overdose crises. Previous research has demonstrated that overdose education and naloxone distribution programs and provision of naloxone to people who take drugs and to first responders saves lives. Further, there's more than three decade of evidence showing that access to syringes and other injection equipment helps reduce the spread of diseases like HIV and hepatitis C. Further, people who encounter harm reduction services during active use are often more likely to take steps toward treatment and recovery. Other harm reduction techniques such as fentanyl test strips have shown promise.

A critical component of harm reduction is the use of naloxone and providing training to those who administer naloxone. Naloxone distribution has been found to be effective in preventing overdose deaths. Through the NIH Helping to End Addiction Long-term (HEAL) Initiative, NIDA funds the large-scale HEALing Communities Study to implement and test integrated evidence-based practices—including the distribution of naloxone—across healthcare, behavioral health, justice and other community settings. NIDA-funded studies are addressing key barriers and facilitators to naloxone access.

“Getting people into treatment for substance use disorders is critical, but first, people need to survive to have that choice,” said NIDA Director Dr. Nora Volkow. “Harm reduction services acknowledge this reality by aiming to meet people where they are to improve health, prevent overdoses, save lives and provide treatment options to individuals. Research to better understand how different harm reduction models may work in communities across the country is therefore crucial to address the overdose crisis strategically and effectively.”

Again, we appreciate your leadership in support of funding for the National Institutes of Health, and NIDA in particular, and emphasize our strong support for continued NIDA funding of harm reduction research.

Sincerely,

College on Problems of Drug Dependence
American Academy of Addiction Psychiatry
American Psychological Association
American Psychiatric Association
American Society of Addiction Medicine
Addiction Policy Forum
Faces and Voices of Recovery
Young People in Recovery