Harm Reduction: A Pandemic Wellness Tool for Families with Children

As COVID-19 quarantine mandates are shifting variously across the United States, parents with children are facing not only pandemic fatigue, but likely complete and utter pandemic exhaustion.

While we navigate the challenging nexus of overwhelm and uncertainty, the truth is that we must prepare for the long-term public health reality of co-existing with Coronavirus. Many parents are finding that quarantine is becoming increasingly challenging, and have documented this with grace, poignancy and humor. The devastating – and even just challenging - mental health implications of quarantine for children and teens are becoming all too real for so many families. Our media feeds and online support groups tell us how to assess and mitigate risk, and how to weigh risk for picnics, grandparent meetings, protesting anti-Blackness and structural racism, and/or return to school or camps.

These are critical and also privileged conversations. Families with essential workers have been navigating these risks throughout the pandemic. COVID-19 is revealing the deep fractures of social oppression in our societies, including (but not limited to) racism, sexism, xenophobia, and economic disadvantage, reflected in the unacceptable fact that Blacks, Latinos, and Native Americans are dying at disproportionate rates. The twin pandemics of structural racism and COVID-19 put BIPOC at additional risk of COVID-19. As parents, we fear sickness – and possibly even death - for our parents, ourselves and our children.

We must remain vigilant in following public health quarantine mandates, and yet also cognizant that as families venture out beyond our family pods, we must empower our children to be equipped for the complexities of pandemic existence. In an era in which there are no clear or simple answers, harm reduction provides such framework that, when clearly considered, can empower our children to navigate the complexities of this time.

The framework – Harm Reduction
This piece breaks down the evidence-based, scientific framework of harm reduction for families with school-aged children as a critical skillset for navigating this new pandemic normal.

Harm reduction refers to public health approaches “aimed at reducing the negative effects of health behaviors” without eliminating these potentially risky behaviors entirely, as defined by Mary Hawk et al. (2017).

Many people effectively draw on harm reduction principles to protect their health from the involuntary risks they face every day – health care workers, people living with HIV, Black and brown people who must consider when to enter stores where they may be surveilled for shopping while Black, or when it is safest to cross the street in the presence of potentially fatal policing systems.
Harm reduction offers a framework for risk minimization that families and children can operationalize while giving us a way to think collectively; a necessity in our individually-oriented society during COVID-19.

Harm reduction principles

Below are some key principles of harm reduction relevant for families with children during COVID-19. (Note that these don’t tell you what to do how to talk with people, or rank safety of practices; they do, however, give you a framework long utilized in public health practice for understanding how to approach decision making.)

1) Stay healthy – For yourself and for others

*Harm reduction means staying healthy ourselves and protecting the health of others.*

By health, we mean all forms of health and well-being, including our social-emotional health, mental health, and physical health.

To stay healthy, we must practice basic health-promoting behaviors, including, but not limited to, frequent hand-washing, social distance, wearing masks outside the home, and staying within our family and/or school ‘bubbles.’

When we are around other people, harm reduction means reducing the risk of transmitting coronavirus between us. It means acknowledging that there may always be a risk of viral transmission if we are around others with whom we have not been in quarantine, but that we can and must take clear steps to reduce this risk.

*It is our responsibility to others, primarily those who are the most vulnerable to COVID-19, to stay healthy.*

2) Meet people where they’re at

*Harm reduction means meeting people where they are at.*

This means that spending time with people must involve a) a clear understanding of other people’s acceptable risks and behaviors, and b) meeting people where they are at.

When we are around other people, we always respect others’ bodies and behaviors, just as others must respect our own boundaries with our bodies and practices.

When – not if - these boundaries and/or behaviors differ, harm reduction in a pandemic means respecting the most cautionary practices that people have within the group. If you want to have a picnic with a friend, and you’re ok with 6 feet apart for picnic blankets, but your friend wants to be 9 feet apart, you agree to that. If they do not want to have a socially distant picnic, you do not have a picnic. You meet people where they’re at; and conversely, they meet you where you
are at. If differences cannot be negotiated, best practice is to respect the most cautionary behaviors.

3) Non-judgment

*Harm reduction means that we do not judge others. It means that we do not stigmatize people who have coronavirus, who have had it, or who have a family member who has had it or died from it.*

Further, harm reduction means that we do not shame people for their decisions. Families and the domestic sphere are notorious spaces in which sexism and gender inequities become reinforced, including in the context of COVID-19. We must not fall into the trap of critiquing those who differ from us—unless, of course, these decisions put others in harm’s way; in which case, a healthy form of clear communication and education drawing on scientific practices is likely the best way forward (see Principle #4).

4) Science-based

*Harm reduction follows the science of this virus.*

Harm reduction is a science-based set of principles that understands the evolving nature of pandemics such as COVID-19.

In an era of scientific misinformation, with the systematic undermining of and dis-investment in science, it is critical to understand that this virus is real, it exists. Coronavirus is killing people, including children with a syndrome believed to be linked to the virus. We are in a global public health crisis with over 7.2 million cases and over 411,000 deaths worldwide and the ‘incalculable loss’ of over 111,000 deaths in the United States at the time of this writing.

Part of following the science is having a clear understanding that we do not have all the scientific information yet that public health and medical researchers will generate in the months ahead. As such, we must build our practices to protect our family’s and the public’s health informed by the best available scientific information we have.

5) Equity

*Harm reduction approaches understand that equity is not equality.*

One family’s pandemic existence is not the same as another. We understand that there will be differences in our understanding of risk, as well as the contexts of people’s lives that may inform these decisions. Front line health care providers, funeral workers, grocery store clerks, the people who deliver pandemic groceries to doorsteps all need childcare to support their labor. Ours is a society of inequalities, of racialized and economic systems wherein some people have the privilege to social distance while others do not. Do not make assumptions about why people may be practicing different behaviors than you at this time.
Harm reduction maintains a non-judgmental approach to considering a spectrum of practices.

Children and the trauma of loss

We must operationalize harm reduction principles and practices with the acknowledgement that families and children are experiencing unprecedented levels of grief and loss. Children are affected by the trauma of loss of their lives as they existed pre-pandemic, as well as the loss of family members and friends who have died of COVID-19 or other conditions during quarantine.

Families can draw upon a harm-reduction framework as they consider how best to support their children’s mental health, and, further, give children tools to understand that differences are to be expected and respected (see Principle #2).

My children have lost their grandfather to the COVID-19. They have seen first-hand the grueling reality of what the virus can do; they have felt how it can rip away a loved one in a matter of days. They know all too well the stakes of lowering our health-promoting practices. Feeling the grief of his grandfather’s recent death is my 10-year old’s reality when a classmate gives a science presentation on COVID-19; perhaps the only time he will never ask a question or raise his hand in class, silenced by the pain. I can’t help but ask, would my father still be here if politicians had followed the science from the earliest days of this pandemic? Would he be here if people had diligently followed quarantine guidance and practiced science-based harm reduction rather than science denial. These are haunting questions.

They don’t, however, keep me from the denial of what a sustainable and healthy life must look like through these pandemic times. This is a marathon, not a sprint.

Harm reduction gives us a powerful framework to consider risk until and even once we have a vaccine to establish herd immunity (given a growing anti-vaccine movement in the US). As we re-configure meaning in our now-pandemic lives and dare to envision the necessity of a reconfigured post-pandemic world, harm reduction is a public health framework that has allowed for many not just to survive, but to thrive – as best possible - in pandemic times.

How will your family practice harm reduction?