Harm Reduction, Ecosocial Epidemiology, and Syndemics

Three productive ways of thinking about risk

Mark Nichter UC Santa Barbara Oct 2003
Early modernity

- A hallmark of modernity is risk calculation
- Measuring ‘risk’ transformed a radically indeterminate cosmos into a manageable one, through the myth of calculability.
The calculable becomes the governable

Risk
Biopower

- Through knowledge production: power is exercised
- Once you know: compelled to monitor and do
- Two poles:
  - Anatomo-politics directed at individual bodies
  - Manipulation and control of populations
- Knowledge about risk makes social institutions as well as individuals accountable.
Issues with biopower

- How do we deal with agency when studying a range of responses to risk
  - Improvisation
  - Negotiating responsibility
- How do we deal with the issue of trust in an era marked by risk?
Reflexive Modernization
(Beck, Giddens)

The world is characterized by:

- A growing sense of uncertainty and ambivalence.
- Distrust of rapidly changing and contradictory expert knowledge.
- The globalization of doubt.
Late Modernity

- Risk is not easily calculable
- “Scientific” - skepticism turns inwards
- Risk factors are contested
- The politics of responsibility are becoming more, not less complex.
- Progress is being questioned in the wake of experiments in modernity gone awry.
Risk Society Today: Beck

- We are left with a population which increasingly questions authority and engages in searches for alternative explanations.
- A condition of chronic doubt and insecurity.
- Who do you trust?
- What information do you trust?
Up Side to Risk Society

- We are compelled to engage in reflexive biographies in which we exercise agency.
- Often by choosing courses of action according to the “facts” we choose to accept at any given time.
Up Side to Risk Society

- We question the authority and the relevance of oppressive structures and institutions.
- We recognize the need to think critically about science.
Down Side to Risk Society

- We are left with a growing sense of precariousness and threat.
- Feel the need to protect ourselves, hedge bets, reduce harm, improve chances.
Self Doubt: Giddens

- In Risk Society internal self doubt increases.
- Expert opinion looks attractive: authoritative voices
- Consider the rise in filter newsletters stamped with the names of Harvard, Johns Hopkins etc.
Response to Doubt

- Rise in appeal of harm reduction fixes.
- Rise in alternative health care modalities.
Harm Reduction
In
Risk Society
Harm reduction as both an expression of agency and a form of manipulation.
Harm Reduction

An Exercise of Agency

And Coping Strategy in An
Uncertain World
Agency

- As an expression of agency, harm reduction practices are undertaken to reduce a sense of vulnerability and enhance a sense of self control.
Manipulation

- As a form of manipulation, harm reduction practices are fostered at the site of the individual body by parties that wish to deflect attention away from risk factors affecting a population’s health.
Responsibility for maintaining health under adverse conditions may be placed onto individuals who are expected to monitor their health and adopt a healthy lifestyle.

- Occupational and environmental health risks may be glossed over or deflected.
A harm reduction industry capitalizes off of feelings of vulnerability fostered by information about risk. Such information is generated by:

- health professionals - the health prevention promotion intervention industry
- the media – harm reduction sells
- private sector - the proliferation of harm reduction products and advertisements
Vulnerability
and
Risk
Vulnerability

Vulnerability refers to the actual feeling of susceptibility to illness or misfortune. It is a state of weakness, fear and worry.
What leads people to feel vulnerable

To a particular health problem or ill health as a state of weakness
Vulnerability

Five common frames
1. Trait-based Vulnerability

- People may feel they have a weak constitution or predisposition to illness on the basis of:
  - physical signs and symptoms interpreted as traces of some underlying truth about the person
  - a past history of illness or poor health that leads them to be labeled as weak or susceptible
Trait-based Vulnerability

- Some association with a hereditary predisposition which indexes familial (or ethnic group) histories of illness (addiction, etc.) which in today’s world extends to popular interpretations of genetics.
2. State-based Vulnerability
Multiple Dimensions

- Environmental factors
- Climatic conditions thought to have a negative impact on constitutional proclivities triggering humoral imbalances.
  - Different seasons associated with particular illnesses
State-based Vulnerability

- Contact with spaces considered dangerous.
- Negative attributes accrue to spaces for several reasons
  - association with dangerous spirits, forms of impurity and pollution (including environmental toxins), endemic or epidemic diseases,
  - memories of violence or misfortune (toxic memories) embedded in landscapes
3. Vulnerability To Illness
Transformation

- Preexisting and latent health problems can re-emerge, flare up and become worse.

- EX. what causes malaria to flare up, reemerge, or become more serious?
4. **Cumulative Sources of Negativity**

- Some negative entity may accumulate within the body over time; impurities, residues, toxins, and germs.
- A common perception is that one can withstand some level of negative load, but that once a threshold level has been superseded, illness manifests.
- Thresholds are generally thought to vary by person.
5. Risk Information may lead to Vulnerability

- Headlines can cause worry lines
- Diagnostic tests can open up a Pandora's box
- More on this in a moment
Risk

- Risk has broad set of meanings.
  - In general parlance, it indexes hazard, chance, and uncertainty.
  - In epidemiology, risk refers to a calculated probability that something will occur more often to a population exposed to specific risk factors when compared to a reference population.
Being at risk

- Members of a "risk group" may not see themselves as equally vulnerable to illness by way of:
  - comparative reasoning
  - consideration of cultural and personal factors outside the purview of those calculating the risk.
Risk distancing

- When information about risk is presented to members of a "group at risk," some members
- **Downplay the danger**: they see others in their group as less diligent or more lax when it comes to factors that predispose or cause illness (e.g., diet, cleanliness, ritual protection, drinking, excessive sexual behavior).
Risk role

- For other members of a "risk group," exposure to risk data may trigger a sense of vulnerability, which then becomes a risk factor in its own right.

- A seemingly "objective" population-based risk calculation may become a social fact that leads some people to assume a "risk role" that is unhealthy.

- The risk afflicted
Varied Response to the Same Risk Information

- The same information about risk can just as easily lead people to become:
  - fatalistic or dispassionate about a health issue
  - motivate them to engage in primary prevention or some form of harm reduction
Harm Reduction is a Special Category of Prevention

- Behavior undertaken by members of a population to reduce their sense of vulnerability
  - Upstream: before the act/fact
  - Midstream: during the course
  - Downstream: after the act/fact
Continuum of harm reduction

- Prevent harm from occurring
- Prevent harm from being overwhelming – minimize harm
- Postpone harm
- Undo harm
- Counterbalance harm
Harm Reduction

- Often spoken about in terms such as
  - Insurance
  - Just in case behavior
  - Hedging your bets
  - Back-up
- Often triggered by subjunctive “what if” thinking
Examples

Reflect on your own experience
Compensation Reasoning and Concern About Deficiencies in a World Where Lack is Feared Junk foods : megavitamins
Excess

Also feared
Harm reduction

- We live at a time when food advertisements focus as much on what products don’t have in them -- as what is in the product.
  - Caffeine
  - Calories
  - Fat, cholesterol
  - Chemicals (?), pesticides,
  - Synthetic or hybrid genes, etc.
Paying The Price For Pushing It To The Max

Postponing Negative Impacts

Buying Time
Wash Outs

From Laxatives
to
Anti-oxidants
What’s one to do?

Something!
You can’t do everything
Choose your preoccupation
Token Gestures

- The psychological value of token gestures
- Moral identity is associated with token gestures
Token gestures

- I consume 2% milk
- I eat low fat potato chips
- I take herbs, vitamins, eat organic foods, drink water from a pure place
- I use sunscreen – well on my face
Moral Identity

- I engage in the low end form of whatever harmful behavior I engage in
- I am being responsible while I am being irresponsible
- Why am I knowingly engaging in risk—because it is exciting (arousal)
Preoccupation with all things microscopic

Thank God for Strong Soap
The world is full of viruses and bacteria and people who spread disease

- “It’s a form of bioterrorism, well like that anyway ....there are so many of these unwashed and dirty people everywhere nowadays....that is what we get for opening up the country to anyone. That’s what that SARS thing was all about wasn’t it? Now days you can’t be too careful.”
“You just have to do your best... to protect yourself... like use antibacterial soap and carry those towelette things... I hear they work pretty good and they are convenient to travel with..... so why not be on the safe side and reduce your chances of meeting a nasty bug”.
Voluntary Medical Tests

- As Harm reduction:
  - Using tests for personal surveillance
CT scans for the public

- Rising popularity
- Prices are tumbling
- There are specials on full body and body part scans
- Mobile units are pulling up at malls near you
“Best to be safe”

“My physicals have been rushed, haven’t seemed very complete”

“Best care means best technology, and this is the best…. “I can afford it”

Being responsible – “I owe this to my family, hell I owe this to me, I want to be healthy enough to enjoy my retirement”
“I have insurance now, if they (those performing scan) find something now even if small it will get paid for by insurance”

“Do you think my HMO wants my doctor to look that hard for something down the road. They hope someone else will pay for it latter”

“This is my insurance against that not happening”.
Welcome to the “At Risk” Generation

- Information about risk is increasing exponentially
  - Genetic receptors and hereditary predispositions
  - Environmental risks
  - Lifestyle risks
  - Unsafe products
Developing countries

- Harm reduction is becoming more and more a way of life in environments that are increasingly suspect.

✓ Health ramifications of some harm reduction practices are significant.
Example: Medicines

- May be taken to cure disease
- Manage symptoms
- Reduce risk which “comes with the territory”
- Harm reduction
Vitamins for The Lungs

- Taking INH as a vitamin for weak lungs and to prevent respiratory illness from becoming TB
  - Philippines
  - South India
- Harm reduction: preventing less serious types of illness from transforming into more serious types of illness
Antibiotic Prophylaxis

- If the medicine cures when you are sick, maybe it can prevent the same disease from developing
- Killing the germ when it is weak
Antibiotic Prophylaxis for STIs

- Common in S.E. Asia: Philippines and Thailand
  - Frequent use by commercial sex workers especially freelancers
    - 40% routine use, 23% occasional use in one Filipino study
  - Used by male customers of CSWs
    - 50% of all males interviewed at an STI clinic in one Thai study
Antibiotic Prophylaxis for STIs

- Some believe antibiotics protect against AIDS!
Keeping latent illness in check
Tetracycline use in N.E. Thailand

- Tetracycline is used to reduce pain and to prevent the wound inside the “uterus” [mot luuk] from becoming worse
  - My illness is latent: it returns again and again
  - It could become cervical cancer (maling) if it progresses, I must do something
  - Taking medicine for symptomatic relief as well as prophylaxis and setting ones mind at ease
Medications are being marketed to reduce the harm of taking other stronger medications.
Harm reduction

May be used as a marketing ploy
Welcome to the tar and nicotine

Numbers game
Harm Reduction and The Illusion of Safe Smoking

- Filter tips
- Menthol
- Reduced tar and nicotine
- Organic - “no bull” cigarettes, beedies are natural
Harm reduction

Creating a sense of order in a chaotic world
Restoring Rhythm as Harm Reduction

- Exercise/body work routines
- Eating - dietary routines
- Consumption of herbal medicines to regulate bodily processes, reduce stress
- Prayer: Islam as exemplar
Self Help is as American as Apple Pie

- We have a self help Jacksonian ethic
- USA has more self help books on everything from home repairs and exercise routines and diets to books on treating illness
- This fits a harm reduction mentality
- It gives us a sense of individual as well as collective self efficacy
- This is capitalized off of by a harm reduction industry that is alive and doing very well.
Ecosocial Epidemiology

An Emerging Paradigm
Ecosocial Epidemiology
Examines

- Who and what is responsible for disease distribution in a population
- Population based patterns of health and disease are seen as biological expressions of social relations
- Attention is directed to the cumulative interplay between exposure: susceptibility: resistance
To Address Health Disparities

- It is important to move from an examination of groups at risk: where the victim(s) may unintentionally be blamed
  - As if traits of the group are responsible for the problem
- To a consideration of risky behaviors: those behaviors placing members of a group at risk
Risk reconsidered

- To environments of risk: the places where risky behaviors occur more commonly
  - What factors contribute to the proliferation of such environments
  - Who spends time in these environments and why
  - Who exploits these environments: who sets up shop to make a profit
Pathways Through Which Racism Harms Health

- Economic and social deprivation
- Exposure to toxic substances and dangerous conditions within environment
- Socially inflicted trauma: from verbal threats and perceived lack of safety to acts of violence
- Targeted marketing of unhealthy commodities and activities
- Inadequate, poor quality medical care
Example: Hypertension in African Americans

Identified are linkages between (Kreiger 2001)

- Economic and social deprivation: less access to good food at an affordable price = high fat, high salt diet
- Exposure to toxic substances: older houses and crowded urban housing = more exposure to lead paint and car exhaust
- Socially inflicted trauma: discrimination, fear, anger = increase of allostatic load
- Targeting marketing of commodities: high alcohol beverages, menthol cigarettes
- Inadequate health care: poor detection of disease and poor clinical management
- Positive side: social capital, resistance to racism, community based programs which are accepted, new laws
Look for Syndemic patterns

Not just individual health problems
Syndemics occur when multiple “health related problems cluster by person, place, or time.”

They refer to the set of synergistic or intertwined and mutual enhancing health and social problems facing a population.

Preventing syndemics requires both control of the component afflictions and recognition of the relationships that tie those afflictions together and synergistically amplify their negative consequences.
Syndemics

- A syndemic orientation elevates public health inquiry beyond its many individual categories to examine directly the conditions that create and sustain overall community health.

- The notion of a syndemic shows that at the community level there is more to prevention science than the study of isolated health problems.