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



## **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 <u>about risk</u> 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.

#### Manipulation

 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

#### Harm reduction industry

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:

- <u>physical signs</u> and symptoms interpreted as traces of some underlying truth about the person
- a <u>past history</u> of illness or poor health that leads them to be labeled as weak or susceptible

#### **Trait-based Vulnerability**

Some association with a <u>hereditary</u> <u>predisposition</u> 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 becoming 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," <u>exposure</u> 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 <u>harm</u> <u>reduction</u>
#### 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



#### 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 riskbecause 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 bioterroism, 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

#### Short Term Benefits Vs Long Term Costs of Medications

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 senses 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 <u>biological expressions</u> 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 <u>risky behaviors</u>: those behaviors placing members of a group at risk

#### **Risk reconsidered**

To <u>environments of risk</u>: 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

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.
 <u>http://www.cdc.gov/syndemics/overview-definition.htm</u>.

#### Syndemics

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.