

Drinking and Harm Reduction

As first appeared in the August 2012 edition of the blog *Psyched in San Francisco*:

I decided my first entry to *Psyched in SF* would be talking about how people make changes in drinking patterns from a harm reduction perspective. I was speaking to some colleagues recently about this article and the word 'addiction' came up in conversations. I was described as an 'addiction specialist'. It's true, I have been working with substance users for over 14 years. The thing is, some *have* been truly addicted, whereas others have been *labeled* as addicted (or alcoholic) by others. In contributing to *Psyched in San Francisco*, I'll be writing from a Harm Reduction perspective. In Harm reduction, no declaration or statement is made about whether you have a disease or an addiction. Harm Reduction is a compassionate, non judgmental approach that "meets clients where they are", rather than trying to move them along to a preconceived notion of what is best. Currently the DSM, which is the therapists guide for diagnosing mental disorders, has substance abuse and substance dependence listed as the substance use disorders. In the upcoming addition of the DSM, substance use will be discussed as part of a continuum rather than as *either* abuse or dependence. This is how substance use is viewed in Harm Reduction; using a continuum that describes behaviors from abstinence to use without regard. Most people looking to change their patterns of use fall somewhere in between.

So often, when people seek out therapy to help them learn more about their drinking, or perhaps to change their behavior, the first thought from the therapist is often something like "well, if you think you have a problem, you must have a problem and, therefore, you must stop." They might even add "and go to AA." The notion that if you think you have some issues with a particular substance and therefore should stop completely works for about 5% of the population that attempt to makes changes. So what happens to the other 95%?

As a harm reduction therapist, I often work with clients who want to change their pattern of drinking. Maybe they have tried AA and find the dogmatic approach unappealing or shaming. Maybe they find drinking enjoyable much of the time and want to minimize or eliminate any negative results. Perhaps clients want to work on the emotional reasons that cause them to overindulge, like depression or anxiety, or to work on dealing with human conditions like loneliness or relationship issues. I have had clients come into my office for individual couple, and group therapy that want to make changes that run the gamut from wanting to eliminate hangovers to wanting sustained periods of abstinence.

Harm Reduction therapy first accepts that drinkers can and *do* manage their drinking by a variety of methods. It does not shy away from looking at the reasons that a person might drink to excess or providing education about the negative results of drinking. It incorporates a variety of techniques to help manage drinking and overall health.

These techniques can include for example:

- Drinking water in between drinks. (Alcohol is dehydrating and dehydration is one of the main causes of hangovers.)
- Eating a full meal before a night of drinking. (see above about dehydration.)
- Practicing mindfulness before beginning to drink. Knowing how you feel before you drink can help you to decide whether or not drinking is a good idea at the time as feelings can be intensified with alcohol.
- Drinking no more than one drink (or beer or glass of wine) an hour. Physiologically, the liver has a difficult time handling more than that.
- Counting drinks as a way of increasing consciousness about your drinking patterns.
- Making sure there is a designated driver or cab money.
- Including sustained periods of abstinence as a way to 'reset' tolerance.

This list is by no means exhaustive and the techniques a person uses are tailored to what works for them. The goals should be attainable so that some success can occur. Achieving success sets in motion further success.

Harm Reduction therapy is about just that – reducing harm. This is accomplished by increasing awareness about depression, anxiety or traumatic experiences, identifying feelings, and providing education about the effects of alcohol. Treatment is individualized and decided on as part of a collaboration between therapist and client. I have witnessed Harm Reduction Therapy decrease depression and anxiety, improve relationships, and improve overall well being. It's respectful, realistic and it helps to make lasting change.

Cynthia Hoffman, MFT, is a psychotherapist in private practice with over 14 years of extensive experience in working from harm reduction, psychodynamic and cognitive behavioral perspectives. She can help you to identify what you want and what you don't want from your drug and alcohol use. She is an effective, compassionate and directive couple therapist. She sees individuals, couples and adolescents.

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