

He Aka Hui: Addiction Harm Reduction Initiatives

Whāriki webinar

20 August 2025

Ben Birks Ang, Deputy Executive Director, Programmes



Te Puna Whakaiti Pāmamae Kai Whakapiri
New Zealand Drug Foundation

Picture that you're not big into physical activity, but you want to learn how to do more.

You're keen for a professional trainer to help out. All of the people you contact enthusiastically tell you...



YOU

**will run a marathon
in one month**



**These are skills for your
career and your hāpori.**

**Keeping your skills up-to-
date, helps you to work in
many settings.**



Harm reduction



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Harm reduction practices don't turn a blind eye to risks or harm. Harm reduction kaimahi talk honestly with people about risks and harm, and provide them with all the available options so people can choose.

There are different levels

- Policies and legislation
- Programmes, practices, and approaches
- Information, tools, and support that reduce the risk of harm

Exploring harm reduction on these levels involves investigating where our knowledge, attitudes, and paradigms have come from across generations. This can be tough.

Today

**Aotearoa's
Harm
Reduction
Practice
Values**

**Quick harm
reduction
update**

**Tips for harm
reduction
conversations**

**Ethical harm
reduction
practice**



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Aotearoa's Harm Reduction Practice Values

**Values
Practice
Reduction**



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A world first – they are the first harm reduction practice values created from an indigenous perspective.

Hundreds of people who use drugs in Aotearoa, their whānau, and kaimahi who support them were involved in creating these.

Created through a series of Wānanga, Fono, workshops, and online consultation with different communities. Guided and refined by a group of Tikanga and Te Reo experts.

Launched at Oraka Ararau in Waitangi in 2024 by Whare Tukutuku and Te Puna Whakaiti Pāmamae Kai Whakapiri (NZ Drug Foundation) who act as kaitiaki for these values on behalf of our community.

Manaaki

Harm reduction puts people first. Everyone has mana and everyone is entitled to be treated with respect and dignity. We meet people where they are at, without coercion, judgement, or discrimination.

Tika

We are pragmatic and do the right thing for the right reason. We look for evidence from the people we are supporting that our work is having the intended impact.

Pono

We behave with honesty and integrity. This includes knowing ourselves so we can be present with people without judgement.

Aroha

We have an absolute focus on the person, their whānau, and their hapori, respecting their mana, autonomy, and human rights.

Mana takitahi

We understand and support positive changes that the people we're working with want to make that minimise health, social, and legal impacts without requiring them to commit to stopping or reducing use.

Ka noho matatapu

We know our role and relationship with the people we support. We are clear with boundaries (including confidentiality) and when we may or may not need to take further action (e.g., If there is imminent and serious danger).

Kotahitanga

We are connected with others who use harm reduction approaches and stand up against coercion, judgement, and discrimination of people who use substances.

Wawata

We value whānau, hapū, and iwi aspirations for pae ora (healthy futures), their strengths, and ways of working. We understand the impacts of colonisation and protect space for whānau, hapū, and iwi to set and reach their own aspirations.



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Whare Tukutuku



TE RAU ORA

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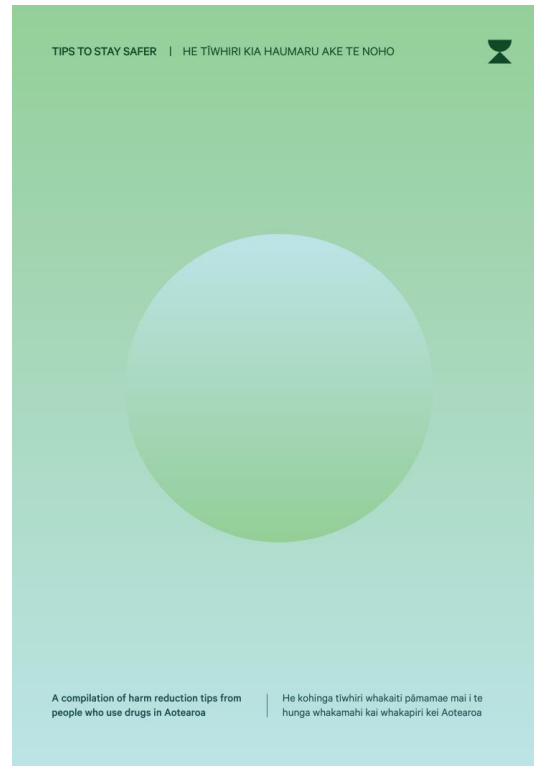
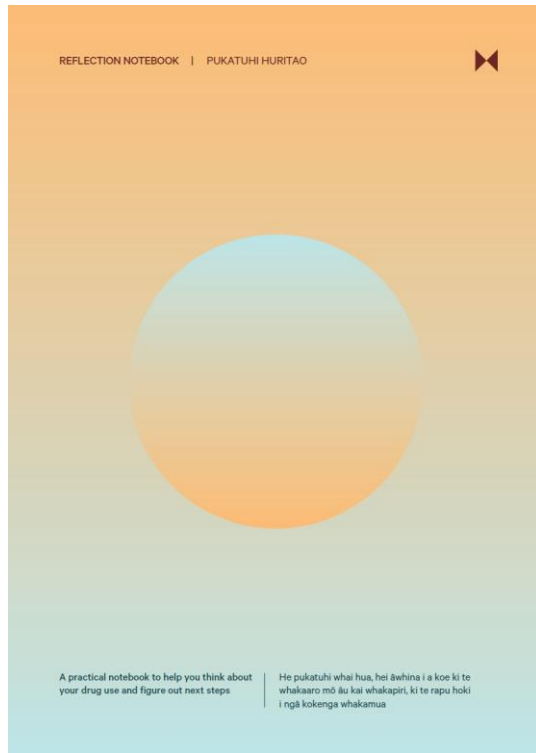
Quick harm reduction update



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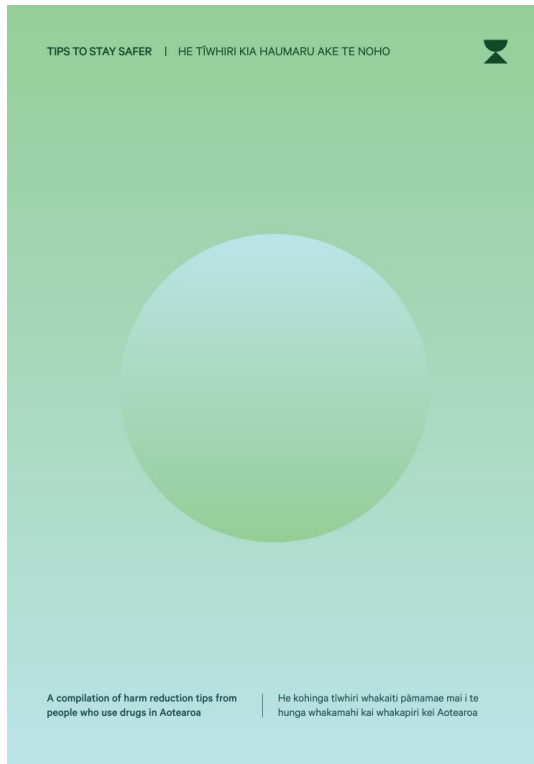
- A booklet compiling the most common harm reduction tips shared by thousands of people who use drugs in Aotearoa is ready for you to use.
- Current statistics on misrepresentation and adulteration.
- Increase in nitazenes being misrepresented as other substances.
- G-type substances are being used more commonly. These are easy to overdose on.
- HIV crisis declared in Fiji

Tips to be safer compilation



- The Level's workbook series has expanded.
- Tips to be safer is a selection of tips from thousands of people who use drugs in Aotearoa.
 - General harm reduction tips
 - Tips for specific drugs
 - Tips for different methods of taking drugs
 - Tips for preventing overdose

Tips to be safer compilation



You can use this to help your harm reduction conversations – even if the person wants to work towards abstinence.

Some examples:

- In the last few minutes of a session to explore how to be safer while working towards long-term changes.
- While a person is waiting to come into a residential programme.
- If someone leaves a residential programme early.

General tips



Know what to expect from the drug you are planning to take

This includes during the experience and while you're coming down.



Start low and go slow

Wait at least an hour for the drug to kick in and see how you feel before deciding whether you want to take more.



Take care if you're choosing to mix drugs (including alcohol, medication and supplements)

If you decide to mix drugs, know what to expect from the combination and take a smaller dose of each.

Websites such as tripsit.me show how different drugs can interact with each other.



Measure how much you want to use before taking it

Visit thelevel.org.nz to find out how much people commonly take, and weigh your doses.



Only take with you what you plan to use

This can prevent you from taking more than intended once you're high or intoxicated.



Drink water regularly

Dehydration can be dangerous and can also make a comedown or hangover much worse.



Have someone around who can help if something goes wrong

Let them know what you are taking. This is important information for paramedics and hospitals.



Plan beforehand to stay safer

E.g., organising a ride home or bringing condoms for safe sex.



Know how a substance affects your sex drive and put boundaries in place before you use

Keep checking in about consent, boundaries and pleasure with sexual partners.



Avoid driving, operating machinery or doing things that may cause an accident (e.g., swimming).



Have the opioid overdose reversal drug naloxone with you

Get naloxone from a needle exchange or pharmacy. Tell people you're carrying it and how to use it.



Take breaks during and between sessions

Take breaks to give your brain and body time to recover, and reduce the chance of developing an addiction.



Use drug checking services

It's not possible to tell what's in your drug just by looking at it.

Drug checking is free, confidential, legal and will let you know what you have and how you can be safer.



Take care around children

Store drugs safely and be aware that alcohol and other drugs can remain in breastmilk. Follow safe sleep guidelines and be aware that you may not wake up as easily as usual after taking drugs.

For more information and advice, see 'Pregnancy and Substance Use: A Harm Reduction Toolkit' from harmreduction.org

Is this substance what you think it is?

Find drug checking clinics at thelevel.org.nz



Subscribe to High Alert highalert.org.nz



Drug Information and Alerts
Aotearoa New Zealand

Follow both on social media

**Quick harm
reduction update**

Is this substance what you think it is?

Substance	Proportion not as expected	
Amphetamine (speed)	76%	January 2024 – July 2025
GHB, GBL, 1,4BD	40%	May – July 2025
Cocaine	33%	
Methamphetamine	15%	
MDMA	9%	
Ketamine	3%	

Figures are from samples tested in Drug Foundation drug checking services from May to July 2025 unless specified

Nitazenes


- Very potent synthetic opioids.
- Some nitazenes are active at microgram levels.
- They have been linked to deaths in New Zealand and overseas.
- Naloxone can temporarily reverse an opioid overdose.

Free test strips are back in stock!

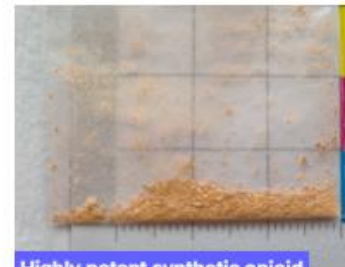
Our free test strips are back in stock so you can check your drugs for fentanyl and nitazenes at home.

FREE

Order now from drugfoundation.org.nz



Latest Alerts & Notifications

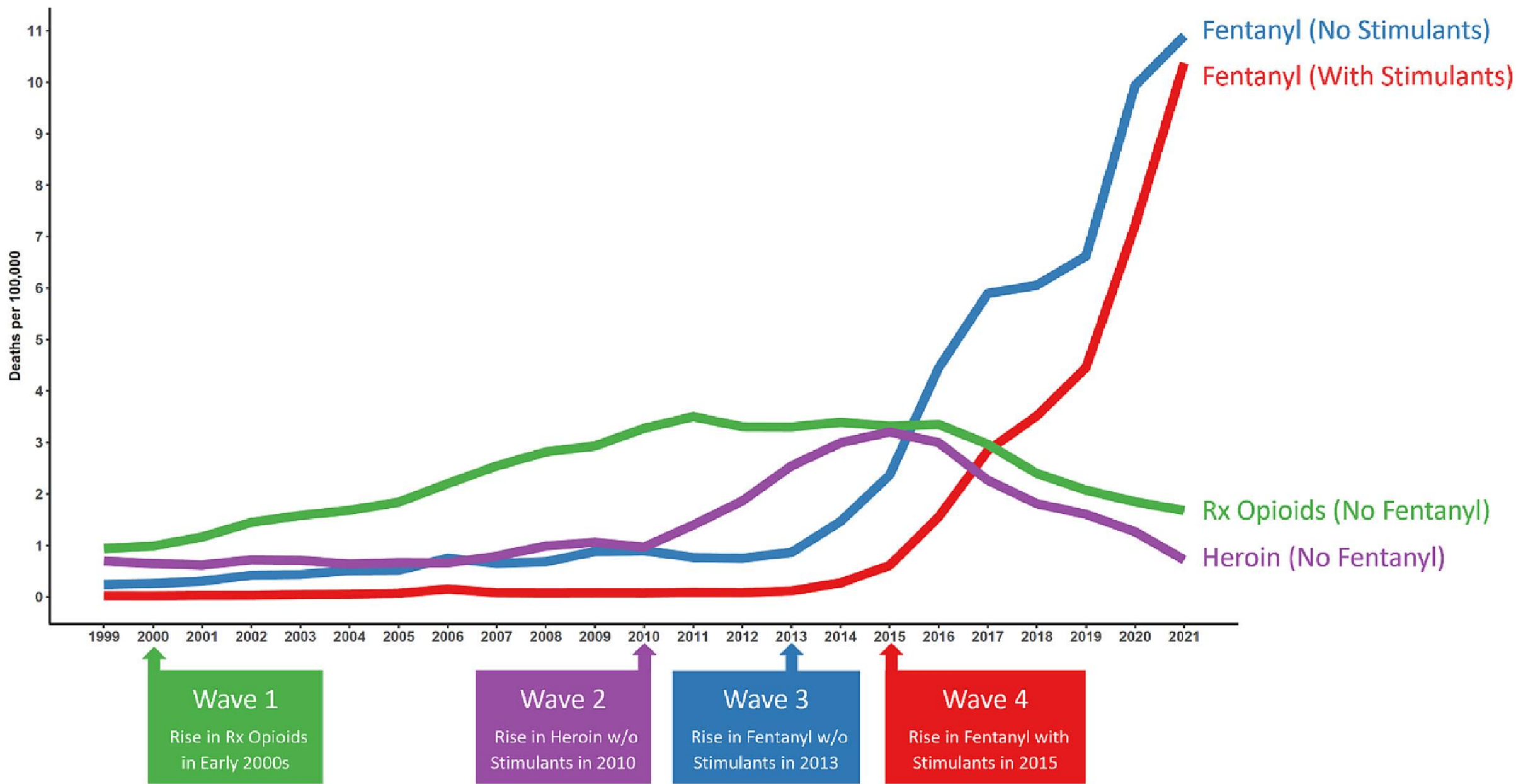


Highly potent synthetic opioid misrepresented as heroin

Notification | 6 Jun 2025

Subscribe to High Alert to receive notifications
highalert.org.nz

Quick harm reduction update



GHB, GBL, 1,4BD

- Different dosages. They may all just be sold as 'G'.
- Can cause overdoses that make you lose consciousness or stop breathing.
- Avoid using at the same time as other depressant drugs, like alcohol.

Refresh your knowledge on G-type substances and how to prevent harm on thelevel.org.nz

How much GHB/GBL/1,4BD people use in a typical session

Drug (swallowed)	Light	Common	Strong	Heavy
GHB	0.5 – 1 mL	1 – 2.5 mL	2.5 – 4 mL	4 mL+ Risk of death above 10mL
GBL	0.3 – 0.9 mL	0.9 – 1.5 mL	1.5 – 3 mL More than 2mL can induce heavy sleep	3 mL+
1,4BD	0.5 – 1 mL	1 – 2.5 mL	2.5 – 4 mL	4 mL+ More than 4mL can induce heavy sleep and more than 6mL can lead to poisoning

We have an HIV crisis on our doorstep

From the 16th Pacific Heads of Health Meeting April 2025:

- *Fiji declared an HIV outbreak in January 2025 after 1,093 new cases were reported from January-September 2024 – three times the cases in 2023, marking a nine-fold increase over five years.”*
- *“Over half of people diagnosed are not on treatment, and about 50% of newly diagnosed cases were linked to injecting drug use”*

PACIFIC / FIJI

'Entire Pacific region at risk' - UNAIDS on Fiji HIV outbreak

11:34 am on 24 January 2025

Share this



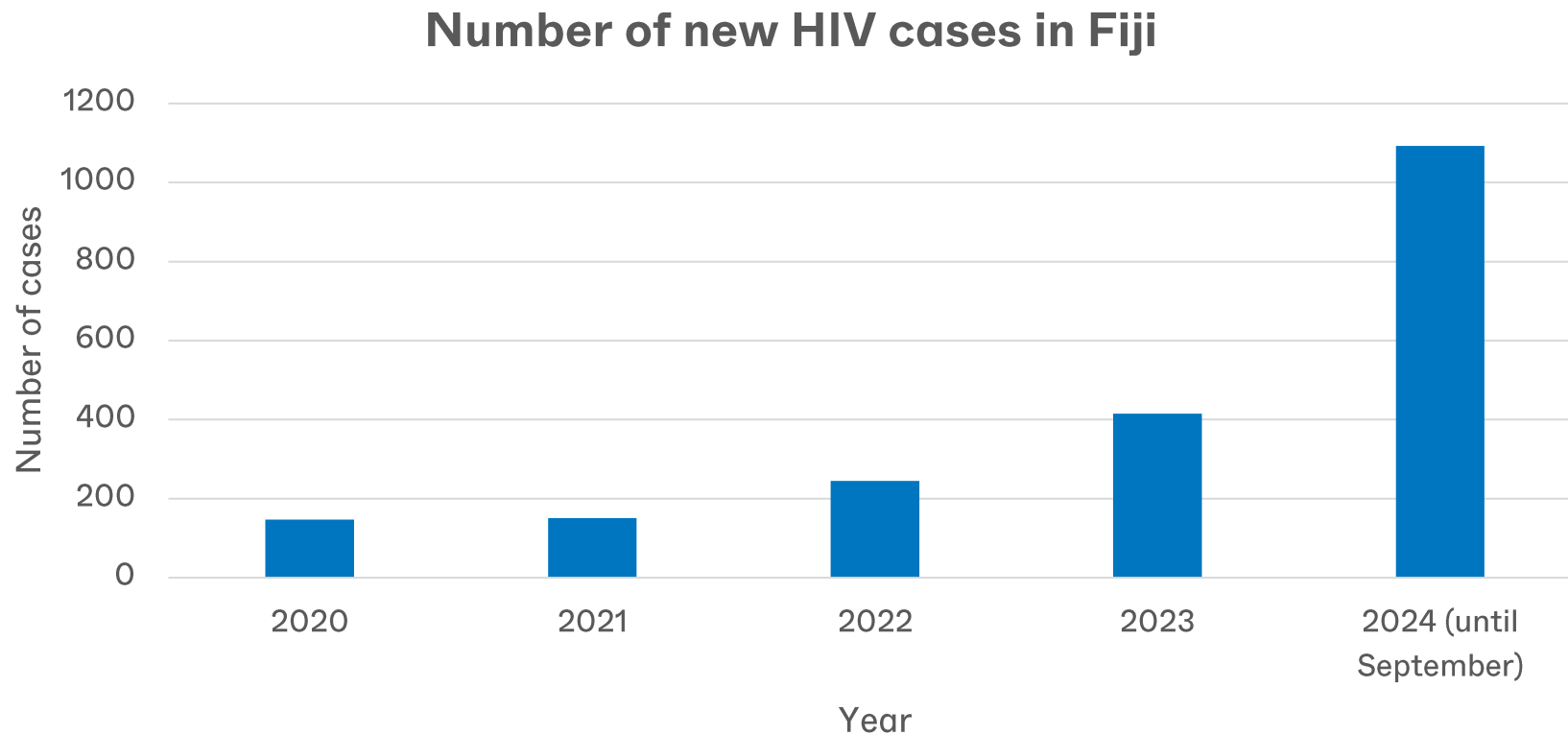
RNZ Pacific

@RNZPacific pacificnews@rnz.co.nz



**Quick harm
reduction update**

We have an HIV crisis on our doorstep

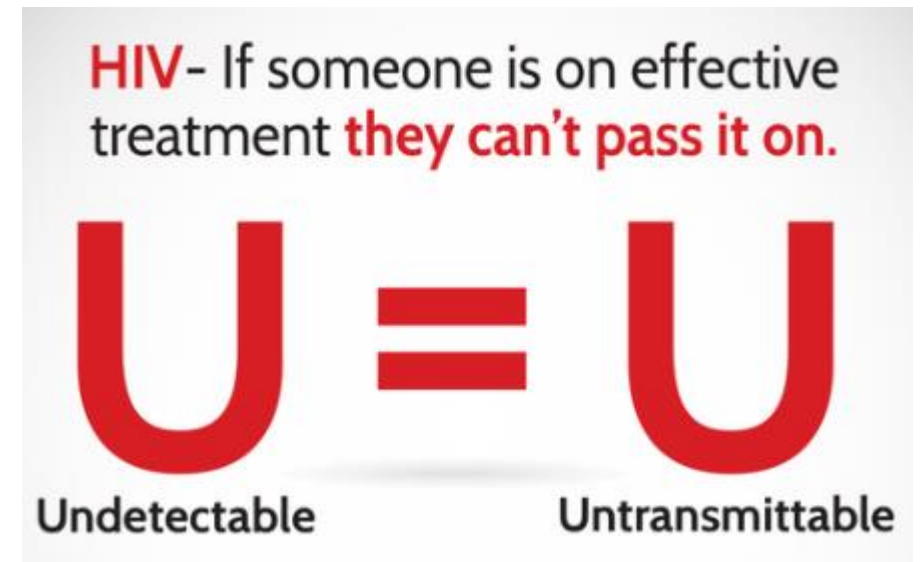


Early detection of HIV and treatment is crucial – we need to talk about it with our tāngata whai ora.

2024 statistics for AIDS diagnoses show that Māori (25% of diagnoses) and Pasifika (25% of diagnoses) have a higher proportion of AIDS diagnoses than their proportion of the population.

Early detection of HIV and treatment prevents the progression of HIV to AIDS, and prevents further transmission.

PrEP and PEP are available as HIV prevention medications.



Visit our website for more information about harm reduction practice

A massive thanks to the organisations who ran Wānanga/Fono/workshops and co-wrote sections with us. And also to the hundreds of people who use drugs who shared their experiences and advice.

There is also information about:

- Ethical harm reduction practice
- A service reflection and action planning tool
- Harm reduction conversation frameworks

drugfoundation.org.nz/topics/policy-and-advocacy/harm-reduction

What is harm reduction?

Harm reduction reduces potential health, social, or legal harms from substance use, without requiring a commitment to stopping or reducing use.



Harm reduction practice values

Values to inform harm reduction sector practice in Aotearoa.



Harm reduction initiatives and programmes

Examples of specific harm reduction initiatives, and how harm reduction has been integrated within other services.



Working with different communities

Things to consider when using a harm reduction approach with different communities.



Tools and resources for harm reduction

Tools for health services to strengthen their harm reduction practice and support staff to have harm reduction conversations.



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You, Them, Me, Responsibility

This conversation flow can help is a useful framework for harm reduction.

You What does the person you're speaking to think of the situation?

Them What do the people around them think or experience (partner, friends, whānau)

Me What is your perspective of the situation?

Responsibility Hand responsibility back to the person

Pae Tata Pae Tawhiti

By Dr Andre McLachlan
and Dr Whaikaremoana
Waitoki

Brief and early
intervention for mental
health and substance
use concerns applying
Māori principles and
practices.



Mauri Noho, Mauri Tau, Mauri Oho



A phase of resting and refilling our energy and health. This is an important part of creativity, remembering new things and being able to learn new things. You might feel aumoe (relaxed), settled, thoughtful or loving.



An active state of engaging in action, mahi or fun. At these times we be focused on a big job or move between lots of jobs. We may feel hihiko (energetic), māia (confident) and/or tūkaha (fearless). Sometimes we may feel aurere (upset, out of control).



Mauri is travelling within its natural cycle and is in tune with our internal world (our ngākau) and external world (things we have to do). This is a phase of awareness of mauri noho and mauri oho. You may feel tūoho (aware), aukaha (strong), manawaroa (resilient), ready, connected and sociable.

Waitoki, W., & McLachlan, A., (2022). Mauriora toko: Remembering the essence of wellbeing for Māori. In L. Pihama and L.T. Smith. (Eds). Healing ourselves. Huia Publishers: Wellington. pp. 179-200

Tips for harm reduction conversations

Drug, set, and setting



What if someone wants to do something, but doesn't want to commit to stopping drug use.

Here are some suggestions to get started:

- Imagine your future and work backwards.
- Create a 'personal code' to live by (e.g. I am a good parent).
- Identify why you use drugs and find other ways to meet those needs (e.g. high adrenaline sports or other pleasurable activities).
- Try a new pattern for a while (e.g. going to the gym two times a week).
- Try something dramatically different (e.g. a 'trial separation', change of environment, immersion in a new activity).

How you approach the conversation matters

These are useful things to explore with your supervisor (swap out drugs for other parts of harm reduction, such as sex, offending, relationships, culture)

- How comfortable are you asking about someone else's drug use?
- How do you feel when someone talks to you about their drug use?
- How do you react when you're unfamiliar with the ways of using drugs that someone is describing? (e.g. curiosity, empathy, disgust)
- How could your approach impact on your interactions with people?
- What cues could indicate to your tāngata whai ora whether it is ok or not ok to talk about drugs with you?
- How do you feel when talking with someone about the pleasurable and risky aspects of their drug use? Some situations can be both pleasurable and harmful at the same time.

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Ethical harm reduction practice

practice



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In Aotearoa, health services are obligated under the Code of Health and Disability Services Consumers' Rights to, among other things:

- Fully inform people about all options available to them.
- Provide services in a manner that minimises the potential harm to, and optimises the quality of life of, that person.

We need to provide access to harm reduction information and support, or let a person know where they can get that information from.

Some things to consider

- Refer to ethical frameworks
- Work as a team
- Explore how your service supports peers and other staff who have experience using substances
- Check the language you use (e.g. positive change, recovery)
- Reflect on your practice

Tikanga Matatika

The Code of Ethics includes a decision making process to navigate ethical dilemmas against three pou:

- Manaaki (care)
- Pono (integrity)
- Pukenga Ahurea (skilfulness).

Questions to explore as a team or with your supervisor

- How might you describe all the options and approaches a person has access to?
- Who decides what positive changes a whaiora works on?
- What do you base your perceptions of risk on? How do you handle differences of opinion?
- What could be potential ethical tensions when your kaimahi are from the same community as the people they support?
- How do you determine whether your own self-disclosure is for the benefit of the person you're supporting or not?
- How might you raise when you have concerns but the person does not?
- How might you deal with a situation where the person's whānau wants them to be abstinent from all substances, but they do not want to be?

More reflection questions from harm reduction kaimahi and their supervisors are on our website.