



HARM REDUCTION INTERNATIONAL

Dear friends of harm reduction.

Harm Reduction International has examined the draft UNGASS outcome document and has serious concerns surrounding the harm reduction/HIV language that we want to bring to your attention.

If adopted in its present form, the current language represents a significant step backwards both from previously agreed commitments and language, within CND (such as resolution 56/6), HIV fora (in particular the 2011 Political Declaration on HIV) and the recently adopted Sustainable Development Goals (Goal 3, targets 3.3 and 3.5).

It is important to protect the gains previously made on our core issues, and ensure they are not undermined as a result of the UNGASS process. This is especially true as the harm reduction sector seeks to establish new targets in HIV prevention among people who use drugs at the upcoming High Level Meeting on HIV, held only a few weeks after the UNGASS.

Specific concerns we want to highlight include:

- The lack of any explicit language supporting harm reduction or acknowledgement of the concept or programmes as a whole
- An absence of language around meaningful participation of civil society organisations (especially drug user-led) in designing and implementing services and advocacy programmes for people who use drugs or people who inject drugs
- Weak language asking to promote, but not implement, the WHO/UNODC/UNAIDS 'Technical guide for countries to set targets for universal access to HIV prevention, treatment and care for injecting drug users' – a significant step back from previously agreed commitments both at CND and HIV fora
- A lack of recognition of previously agreed commitments to reduce HIV among people who use drugs and a lack of recognition that these global goals have been missed
- The lack of recognition of the need to scale up HIV treatment, prevention and care in order to end HIV epidemics.
- No mention at all of access to HIV anti-retroviral therapy for people who inject drugs

In this context, and building upon existing agreed UN language, HRI has drafted the following that we propose be the basis for strengthening the currently weak draft.

Proposed preambular text:

Recalling resolution 53/9 of 12 March 2010, on achieving universal access to prevention, treatment, care and support for drug users and people living with or affected by HIV,

Recalling also resolution 54/13 of 25 March 2011, on achieving zero new infections of HIV among injecting and other drug users,

Recalling also Resolution 56/6 Intensifying the efforts to achieve the targets of the 2011 Political Declaration on HIV and AIDS among people who use drugs, in particular the target to reduce HIV transmission among people who inject drugs by 50 per cent by 2015

Urges Member States to strengthen their efforts to ensure continued political commitment to combating HIV/AIDS among people who use drugs, in particular people who inject drugs, and to acknowledge the target set in the Political Declaration on HIV and AIDS: Intensifying Our Efforts to Eliminate HIV and AIDS to reduce HIV transmission among people who inject drugs by 50 per cent by 2015 has been missed; redouble our efforts to combat HIV among people who use drugs, in particular people who inject drugs

Requests Member States to ensure, that adequate access for people who use drugs, in particular people who inject drugs, to the nine interventions mentioned in the Technical Guide referred to above is provided, as appropriate, without stigma or discrimination and while ensuring gender equality

We would also encourage the following operational recommendations to be pushed.

- Acknowledge that the provision of harm reduction and evidence-based drug treatment (including in prisons and places of detention) cannot be seen as a policy option at the discretion of States, but must be recognised as a core obligation of States to meet their international legal obligations under the right to health;
- Recalling the HIV Political Declaration of 2011, acknowledge the target of reducing HIV infection among people who inject drugs has been missed, redouble efforts to address HIV among people who inject drugs through implementation of harm reduction programmes, including but not limited to, the package of core interventions outlined in the WHO/UNODC/UNAIDS 'Technical guide for countries to set targets for universal access to HIV prevention, treatment and care for injecting drug users';
- Acknowledge the need for appropriate, voluntary, evidence based services for those stimulant users in need of services, as the WHO/UNODC/UNAIDS technical guide does not address this group;
- Acknowledge the global deficit for sustainable funding of harm reduction programmes and support a reconfiguration of resourcing away from punitive responses towards proven harm reduction interventions;
- Intensify meaningful participation of, and provide support, training and funding to, community-based organisations and civil society organisations (including drug user organisations) in designing and implementing services and advocacy programmes for people who use drugs/people who inject drugs.