PROPOSAL FOR THE THEMES AND OBJECTIVES OF ICASA 2021, UGANDA: ENSURING A STRONG FOCUS ON HARM REDUCTION IN AFRICA

To whom it may concern,

In response to the open <u>call for proposals for a conference theme and objectives for ICASA 2021</u>, the 69 undersigned organisations request to work in collaboration with the ICASA secretariat and committees to ensure high-level advocacy for harm reduction at ICASA 2021.

The undersigned organisations – from, or working in, Africa – wish to formally submit a proposal for one of the five objectives of the conference to specifically focus on, and promote discussion on, the urgent need for harm reduction services in Africa to reduce HIV and other harms among people who use drugs:

Proposed Objective:

To raise the profile of evidence-based harm reduction programs and promote integrated rightsbased and stigma free interventions and policies for Africans who use drugs

This objective comfortably sits alongside others that focus on human rights and key populations and provides a specific focus on people who use drugs in Africa at this important event.

RATIONALE:

The International Conference on AIDS and Sexually Transmitted Infections in Africa (ICASA) is the headline conference in the region, and an important opportunity to advance the HIV response. However, people who use drugs and the harm reduction community have been consistently marginalised and under-represented at these events.

Despite the 2019 conference (in Kigali, Rwanda) having more than 8,500 delegates and an objective to "Rethink gender norms, human rights-based approaches and inclusion towards equitable and accessible HIV and AIDS services including key populations", there was once again <u>very little focus on harm reduction</u>, and poor visibility for people who inject drugs. This crucial aspect of the HIV response was restricted to only two satellite events and around five poster presentations.

We are calling on ICASA to proactively address this imbalance, starting with preparations for the 2021 conference.

It is <u>estimated</u> that there may be as many as 2 million people who inject drugs in Africa, of whom more than 11 percent are living with HIV. Yet services remain woefully unavailable, and only a few African countries have adopted this approach – most often with external funding, and through NGOs rather than state provision. According to <u>UNAIDS</u>, people who inject drugs account for 8 percent of all new HIV infections in Sub-Saharan Africa, and 37 percent of all new infections in the Middle East and North Africa. This is a population that cannot be overlooked if we are to end AIDS in Africa.

Furthermore, the conference in Uganda is an opportune moment for this conversation – the host country itself has begun to embrace the harm reduction approach in response to its own domestic drug use challenges.

OTHER IMPORTANT ELEMENTS TO CONSIDER:

Having a specific objective on harm reduction, as outlined above, would ensure a heightened focus on this issue – with clear benefits to the harm reduction movement and the ICASA event itself.

In order to ensure a strong focus on harm reduction in Africa, this objective could then be fulfilled by, among other things:

- A strong commitment from ICASA to better representation and participation of people who use drugs who should be included as experts, as committee members, and as abstract reviewers, etc. This should include the provision of more scholarships for community members to attend the conference.
- A high-level plenary at the conference dedicated to the perspectives and needs of the key affected populations, including people who use drugs. This would be delivered alongside UNAIDS and other key partners.
- Subsequent ring-fenced space in the main conference programme for sessions dedicated to issues relating to harm reduction and people who use drugs. A mix of abstract- and non-abstract-driven sessions should seek to cover a wide range of important and relevant topics:
 - Access to services for people who use drugs, and the barriers which exist.
 - Reproductive sexual health services for women who use drugs, including pre- and post-natal care.
 - The need for naloxone provision to reduce fatal overdoses.
 - \circ $\;$ The important role of peer-led service delivery models.
 - Access to digital information about harm reduction for people who use drugs.
 - $\circ\,$ Funding for harm reduction in Africa, and the need for greater domestic commitments.
 - The lived experiences of people who use drugs, especially from those living HIV, HCV, TB, or impacted by COVID-19.
 - Open discussions about the reality of police violence against people who use drugs.
 - \circ $\,$ Open discussions about the need for policy reforms and decriminalisation in Africa.
- The provision of essential harm reduction services to conference participants themselves including sterile paraphernalia, methadone and peer support.
- A strong, visible presence of people who use drugs in the community village and across all elements of the event.
- **Direct financial support and commitments from ICASA to enable all of the above.** This could be captured in a Memorandum of Understanding between ICASA and AfricaNPUD and other partners.

SIGNED BY:

- 1. Act for Change, Rwanda
- 2. African Law Foundation (AFRILAW), Nigeria
- 3. African Network of People who Use Drugs (AfricaNPUD), Kenya
- 4. Aide Internationale pour le Développement Durable (AIDD), Côte d'Ivoire
- 5. AIDS and Rights Alliance for Southern Africa (ARASA), Namibia
- 6. Alliance Nationale Contre le Sida (ANCS), Sénégal
- 7. Association Congolaise de Lutte contre les Risques liés aux Drogues, Democratic Republic of the Congo
- 8. Bensther Development Foundation, Nigeria
- 9. Burundi association of people who use drugs (BAPUD), Burundi
- 10. Child Space, Kenya
- 11. Coalition Plus, Global
- 12. Comité/Club Universitaire UNESCO pour la Lutte Contre la Drogue et Autres Pandémies (CLUCOD), Côte d'Ivoire
- 13. Community Intervention Network on Drugs, Nigeria
- 14. Conseil des Organisations de lutte contre l'Abus de Drogues de Côte d'Ivoire (CONAD-CI), Côte d'Ivoire
- 15. Crime Check Foundation, Ghana
- 16. Discovery and Empowerment Initiative Nigeria, Nigeria
- 17. Drug Harm Reduction Advocacy Network (DHRAN), Nigeria
- 18. Drug Policy Network, Ghana
- 19. Empower Cameroon, Cameroon
- 20. Foundation Against Illicit Drugs and Child Abuse (FADCA), Liberia
- 21. Frontline AIDS, South Africa/United Kingdom
- 22. Harm Reduction Alliance, Ghana
- 23. Health Development Initiative, Rwanda
- 24. Health Poverty Action, United Kingdom
- 25. Hope for the Addicts Initiative, Nigeria
- 26. Human Progeny, Nigeria
- 27. Institute for Drug Control and Human Security (IDCHS), Sierra Leone
- 28. International Drug Policy Consortium (IDPC), United Kingdom
- 29. Kenya Aids NGOs Consortium (KANCO), Kenya
- 30. Kenya Network of People Who Use Drugs (KeNPUD), Kenya
- 31. Life and Hope Rehabilitation Organisation, Tanzania
- 32. LVCT Health, Tanzania
- 33. Mauritius Network of People who Use Drugs (MauNPUD), Mauritius
- 34. MozPUD, Mozambique
- 35. Muslim Education and Welfare Association, Kenya
- 36. Narcotics Anonymous, Global
- 37. Noguchi Memorial Institute for Medical Research, Ghana
- 38. ONG Africa Development, Côte d'Ivoire
- 39. Paroles Autour de la Santé (PAS), Côte d'Ivoire
- 40. Partnership to Transform and Connect HIV Response (PITCH), Zimbabwe/Mozambique
- 41. Prévention Information et Lutte contre le Sida (PILS), Mauritius
- 42. Réseau d'Enseignants Engagés dans la Lutte pour la Santé (REEL), Côte d'Ivoire
- 43. REVS PLUS, Burkina Faso
- 44. Salvage Women and Children from Drug Abuse, Tanzania
- 45. Support for Addictions, prevention and treatment in Africa (SAPTA), Kenya
- 46. Society for the Improvement of Rural People, Nigeria
- 47. Streetwise Transformers, Kenya

- 48. Students for Sensible Drug Policy (SSDP), Global
- 49. Tanzania Network of People who Use Drugs, Tanzania
- 50. Tap Elderly Women's Wisdom for Youth, Tanzania
- 51. TB HIV Care, South Africa
- 52. Transgenres et Droits, Côte d'Ivoire
- 53. Uganda Harm Reduction Network (UHRN), Uganda
- 54. UNIDOS Rede Nacional sobre Drogas & HIV, Mozambique
- 55. United for a Purpose Brigade, Seychelles
- 56. Voices of a Community Action and Leadership (VOCAL), Kenya
- 57. West Africa Behavioural Health Health Addictions & Recovery Management (WABHARM), Ghana/Nigeria
- 58. West Africa Civil Society Institute (WACSI), Ghana
- 59. West Africa Drug Policy Network (Regional Secretariat)
- 60. Willing Way Recovery Centre, Kenya
- 61. Women Nest, Kenya
- 62. Women Response to AIDS and Drug Addiction (WRADA), Kenya
- 63. Youth Development and Health Initiative, Nigeria
- 64. Youth Initiative for the Promotion of Good Leadership in Nigeria, Nigeria
- 65. Youth RISE, Global
- 66. Youth RISE Nigeria, Nigeria
- 67. Youth Wings, Tanzania
- 68. Zimbabwe Network of People who Use Drugs (ZaNPUD), Tanzania/Zanzibar
- 69. Zimbabwe Civil Liberties and Drug Network, Zimbabwe