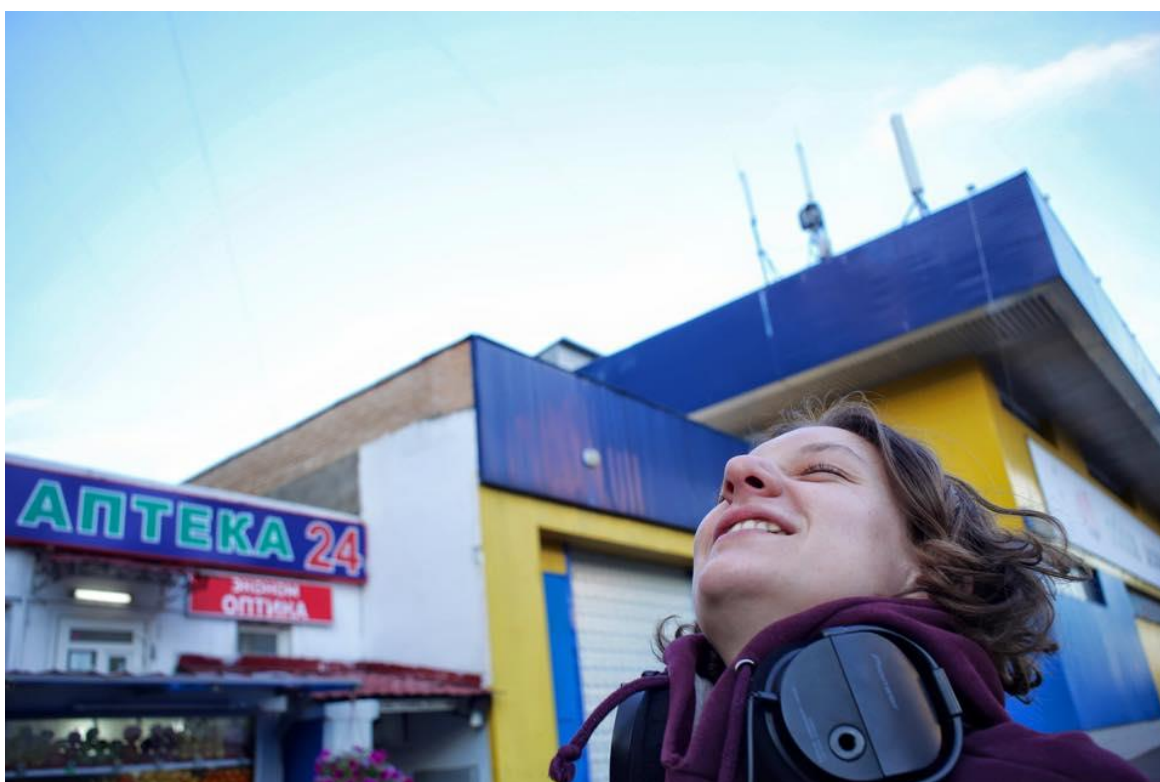


*Dedicated to the memory of our friend and colleague Dalja
who did so much for others but left us too soon*

2015 – 2016: Two More Years of Saving Lives.



**A Report by the Andrey Rylkov Foundation for Health and Social
Justice**

2017

Since the Andrey Rylkov Foundation (ARF) was founded in 2009, we have been on a mission to ***achieve Health and Social Justice by promoting and developing humane drug policy based on tolerance, protection of health, dignity and human rights***. We owe our inspiration and name to Andrey Rylkov, a Russian harm reduction activist and an outstanding human being, whom we lost in 2006.

Our work is based on the following five strategies:

- Advocating for humane drug policies at the domestic and international levels;
- Defending the rights of people who use drugs, including through strategic litigation;
- Providing direct services to people who use drugs to protect their health and rights (Harm Reduction – Moscow);
- Supporting and building the capacity of the community of people who use drugs;
- Information and education, including the promotion of public debates on drug policy issues through working with mass media and building alliances with social, art and political activists.

We work with people from all walks of life who use drugs and suffer from drug dependency – the main group affected by HIV and stigma in Russia. Many of us are drug users ourselves, some of us live with HIV and hepatitis C. All of us have lost our friends in the battles of the War on Drugs. We are professionals and social workers, lawyers, and advocates for human rights and humane drug policy. All of us are equally invested in the organization and love what we do.

We believe in the precedence of human rights over repressive policies. We contribute to building a compassionate, non-discriminatory and tolerant society. Faced with the Russian government's opposition to harm reduction, we lead efforts to advocate for introducing evidence-based and internationally recognized opioid substitution treatment (OST) and provide lifesaving services to drug users. We educate, empower, and support people who use drugs to help them protect their rights. We would not be able to do without our awesome, dedicated team members.

This report presents the Foundation's work in 2015 - 2016.

About Us

The ARF operates in a complex social and epidemiological environment. As of December 31, 2016, the number of HIV positive people in Russia reached 1,114,815 (official data from the Federal AIDS Center; most experts agree the real number is likely much higher). According to the same data, in the past few years HIV incidence has been growing at 10% per year. Sharing of unsterile syringes still fuels the epidemic (52.8% of all new cases in 2016). In spite of the grim statistics, the Russian government vigorously opposes harm reduction programs and creates obstacles to NGOs doing HIV prevention among key affected populations. Prevention is almost entirely funded by international donors and the current HIV strategy does not envision any activities with people who inject drugs.



Moreover, in 2016 the ARF became one of the Russian NGOs slapped with the highly stigmatizing “foreign agent” designation, which usually results in significant difficulties and additional paperwork. Although we [won a court case against the Ministry of Justice](#) which tried to fine us for not being self-registered as a foreign agent to avoid paying related penalties the risks of financial penalties are still high. However, our victory in court was the first successful case of its kind in legal practice in Russia and it inspired many NGOs to continue their work. We tried to pursue in court our exclusion from the list of foreign agents, we lost. We are still on that list.

Currently our team consists of 6 permanent staff and 38 temporary staff, including social workers, case managers, lawyers, as well as psychologists and health specialists and volunteers. Our volunteers are an important part of the organization. We are constantly working on advancing our knowledge and professionalism.

After seven years of gathering in cafes, apartments, parks or spaces provided by friendly organizations, in 2016 we obtained a small office thanks to a grant from the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM). We use this office for staff meetings, training events and storage of materials. Also in 2016 and also thanks to the support from GFATM we obtained a minivan. Having the van enables us to work longer hours, serve more people, bring more prevention materials and provide better counseling.

Advocating for humane drug policies

"I have no hesitation in endorsing the work of the Andrey Rylkov Foundation. It is vastly important that there is an organization like this working in Moscow to reduce HIV among people who use drugs in Russia often in very difficult circumstances. ARF brings help to people who are in real need and who rely on them. It is crucial that their work which I have seen in Russia should continue and develop."

Lord Norman Fowler, UK Politician responsible for the first-ever HIV/AIDS campaign in the UK

Advocating for humane drug policies, evidence-based treatment and human rights is a key area of our work. This work includes domestic strategic litigation (discussed below), protests aimed at attracting public attention to the need to change inadequate policies and practices, and communication with the government agencies.



Support. Don't Punish campaign 2016

We carry out campaigns focused at specific issues, for example a campaign to make a live-saving medication Naloxone that averts death of opiate overdose accessible to everyone who needs it. Our efforts to distribute and promote naloxone as a cost-effective tool to address opioid overdoses helped save over 520 lives just in two years. In spite of evidence of the effectiveness of naloxone, as a prescription drug it remains largely inaccessible to people who use drugs. We advocate for making naloxone available over-the-counter (OTC) and accessible to people who use drugs. For two years we have carried out correspondence with the Ministry of Health (MoH), the Russian Chief Narcologist and the local pharmaceutical producers discussing the possibility to reschedule Naloxone as an OTC medication. We have [organized a](#)

[series of pickets](#) near the MoH and the Central Drug Treatment Scientific Research Centre to demand OTC naloxone. On August 31, the International Overdose Awareness Day, we carry out protests and communicate with the drug user community and mass media in order to bring the issue of opiate death higher on the agenda of the public debates.

Another key issue of our advocacy and litigation efforts is the ban on opioid substitution treatment (OST) in Russia. The case on access to OST submitted by 3 Russian activists is currently under the consideration of the European Court on Human Rights. In addition, we work with various UN human rights bodies in order to bring their attention to the violation by Russia of its obligations under international human rights treaties. In 2016, we followed up on our 2011 open letter to President Medvedev regarding the need to introduce harm reduction and OST programs in Russia in accordance with the recommendations of the International Committee on Economic, Social and Cultural Rights (the letter was forwarded to the Ministry of Health who refused to fulfill the ICESCR recommendations). In 2015, the UN Human Rights Committee published its concluding observations on Russia, in relation to Russia's implementation of the International Covenant on Civil and Political Rights, including recommendations concerning systematic torture of Russian drug users in custody by not providing access to OST. These observations were influenced by our shadow report prepared jointly by ARF and the Canadian HIV/AIDS Legal Network. In 2015, the UN Committee on the Elimination of Discrimination against Women (CEDAW) published its concluding recommendations to Russia specifically related to the need to provide access to OST for women. The observations would not have been possible without the preparatory work done by Russian NGOs, including Silver Rose, Project April, the ARF, and others that developed the shadow reports.

Another important issue for our advocacy and litigation is decriminalization of drug use. Each year since 2013, on June 26 our participants and staff participate in the international action "Support. Don't Punish" to bring attention to the negative consequences of the war on drugs on the International Day Against Drug Abuse and Illicit Trafficking and the International Day in Support of Victims of Torture. In 2015 and 2016, we picketed the Ministry of Health to protest the OST ban in Russia. We mobilized activists from several cities and created [a Facebook group](#), and produced a video clip in support of people who are in prison for minor drug offences. We have also facilitated a number of strategic litigation cases in order to address the issue of criminalization of drug users. We partner with a number of activist groups in Russia in order to address this issue.



Picketing the office of the Federal Drug Control Services requesting for introduction of OST in Russia. 2015

Documenting and reporting on human rights abuses is an important part of ARF’s work. In 2015 the UN High Commissioner for Human Rights requested Russian civil society’s input in developing the agenda of the UN General Assembly Special Session on Drugs (UNGASS 2016). Responding to this request members of the Russian Civil Society Mechanism for Monitoring of Drug Policy Reforms in Russia, with technical assistance provided by the Andrey Rylkov Foundation and the Canadian HIV/AIDS Legal Network, developed a submission document *"Russian Drug Policy as a Distorting Reflection of the UN Drug Conventions: Stigmatizing Language, Overreliance on Punitive Restrictions, Indifference to Human Rights, and Obliteration of Science"*, highlighting factors that prevent positive changes in the Russian drug policy, including state promotion of stigma and non-scientific drug treatment methods, restriction of scientific and human rights information under the guise of fighting “drug propaganda”, overreliance on punitive restrictions, and indifference to human rights.

In 2016, we participated in a submission to the UK Foreign Affairs Committee’s inquiry into the UK’s relations with Russia, aiming to draw attention to the need to prioritize the health and human rights of people who use drugs and to the violations of human rights in the name of drug control in Russia.

Also in 2016, jointly with the Canadian HIV/AIDS Legal Network, we prepared a leaflet “Just Say Nyet” for UNGASS 2016 participants to draw international attention to Russia’s efforts to promote its vision of drug demand and drug supply reduction to influence the outcomes of the UNGASS.

Defending the rights of people who use drugs

“Most of all I'm proud of those moments when our project participants demonstrate their strength and patience when defending their rights. Our project participants often realize that their rights were violated, and they feel that an injustice was done to them, but they don't know exactly how to fight it. So, I think the most important thing is to help someone understand that in 90% of cases legal defense isn't complicated and to help them make use of this mechanism.”

Timur Madatov, ARF lawyer

Our team of 4 lawyers and about 20 social workers and volunteers works to help people who use drugs address denial of treatment access, the right to fair trial, and the widespread problems of drug planting and torture by the police, problems that drug users face on a regular basis. We document these violations and provide necessary legal support. Any such legal case can become strategic from the perspective of access to good-quality drug treatment, decriminalization of drug users and similar issues. Currently ARF lawyers manage 23 strategic cases which are under review by various courts, from district courts to the European Court of Human Rights. Some cases are described below, and more information can be found [on our website](#).

Irina Teplinskaya

Irina from Kaliningrad Oblast has been a drug user for most of her life; she is living with HIV and Hepatitis C and spent 16 years in prison for drug related offences. Given her numerous unsuccessful attempts at drug treatment, in 2011 Irina asked the Russian government to provide access to opioid substitution therapy. Her request was denied and Irina complained. Irina's case was one of several Russian OST advocacy cases that gained international prominence.

Dmitry Polushkin

Dmitry from Lesosibirsk is living with HIV and Hepatitis C. As a long-term drug user, Dmitry has had several unsuccessful drug treatment attempts. In 2012 he was arrested and received a 5-year-sentence for drug possession. With support from the ARF, Dmitry was released after 8 months and recently, also with our support, he claimed a compensation for unlawful persecution.

Ivan Anoshkin

Ivan is living with HIV and Hepatitis C, has had numerous drug treatment attempts, and has been prosecuted five times for drug related offences. He asked the Russian government to provide OST, but his request was rejected. Instead, he was sent to a compulsory drug treatment program where he was subjected to cruel treatment, including physical violence. Ivan appealed in his district court and to an

appellate court with no success. In 2013, with our support he appealed in the European Court of Human Rights, in relation to the OST ban and to his cruel treatment in state drug treatment facilities.

Evgeny Konyshev

Evgeny publicly accused Ekaterinburg NGO "City Without Drugs" (a notorious organization with alleged ties to both police and organized crime) of abduction and torture of drug users. A while later, his friend asked him to buy heroin; Evgeny was detained and had police plant heroin on him. He was then sentenced to 4 years although his friend testified in court that he had been pressured into helping frame Evgeny. 3 years later, after an early release, with our help Evgeny submitted a complaint to the European Court of Human Rights. In 2016, the Russian government admitted its responsibility and awarded a modest monetary compensation to Evgeny.

Denis Matveyev

Denis is a human rights activist from Naberezhnye Chelny. In 2009, he successfully campaigned against police and government corruption, after which he was arrested and sentenced to 7 years for an offence he did not commit. With help from the ARF, Denis wrote a complaint to the UN Working Group on Arbitrary Detention which concluded that he had been framed by police. Denis then complained to the Russian Constitutional Court and to the European Court of Human Rights. He was released in 2015.

Oksana Schpagina

When she was pregnant Oksana was under pressure from doctors to abort her baby (although she had quit drugs, she had HIV and Hepatitis C). As a result of this pressure, she relapsed into drug use. A drug treatment center refused to take her. In 2011, she gave birth to a healthy baby. She then stopped using drugs. In 2013, Oksana complained to several UN Special Rapporteurs: on Torture, on Violence Against Women, and on the Right to Health. The Russian government refused to acknowledge any violations, and with our help Oksana complained to the European Court of Human Rights. Unfortunately, her complaint was rejected. After Oksana resumed her drug use, she was arrested based on falsified evidence. In 2016, she was sentenced to 3 years in prison.

Yury Yesin

In 2010, several patients with HIV, TB and drug dependency, including Yury Yesin, complained about the conditions in the TB clinic No. 2 (Yekaterinburg), including low food quality, lack of qualified experts, heating and even medications. Drug users were routinely thrown out from the hospital. ARF and local NGOs complained to domestic and international agencies, which resulted in some international attention to the situation in the clinic. The conditions improved somewhat, but 2 years later it became clear that the positive changes had been cosmetic. In 2013, the ARF and NGO Chance Plus complained to the UN Special Rapporteur on the Right to Health and to relevant Russian and regional government agencies. In 2014, following media coverage of this story, the clinic staff successfully sued media and Yury in a local court. The ARF submitted another complaint to the UN. In 2015, Yury submitted a complaint to the European Court of Human Rights alleging that the court had restricted his freedom of expression.

Firdavs

Firdavs is a citizen of Tajikistan and a person living with HIV. In 2013, the Russian government called his presence in Russia undesirable only because of his HIV status and he had to leave, although he has a Russian wife and daughter. In 2016, Firdavs asked the Russian government to reconsider his deportation but his request was rejected in spite of the fact that the government had acknowledged that the existing norms could not be used to split families. In 2016, with our help Firdavs appealed in a Moscow district court. As a result, the Russian government canceled the deportation and Firdavs and his family can now return to Russia.

These are just a few examples of the cases that we manage. But besides strategic litigation we also help people to increase their legal knowledge and protect their legal rights on a day-to-day basis through our Street Lawyers project supported by the Levi Strauss Foundation.

In 2015 – 2016, our social workers and lawyers conducted almost 260 legal consultations, participated in 45 court hearings, prepared almost 300 legal documents and over 30 court appeals.

	2015	2016
Legal counseling	87	172
Court hearings	20	25
Legal documents prepared	167	125
Court appeals prepared	20	12

"I went out with ARF's activists twice, in 2015 and 2016. The activists looked very experienced and knew what they were doing... Rather than attract people's attention or promote their serves, they gave out bandages, ointments, syringes, naloxone and literature to those who were interested, and that did it quickly and without much fuss... These great activists are doing very important work!"

Alec Luhn, Journalist

The main aim of the Street Lawyers project is to integrate legal aid with health services for people who use drugs. Its main idea is that people can learn to protect their rights with support from professionals, without the need to hire expensive lawyers. We educate our social workers to help drug users protect their rights in courts, in police stations or while not being able to receive health services. Our social workers have gained skills and experience in preparing legal documents (complaints, statements, letters of attorney and solicitations) using the experience they had accumulated while implementing this project. Our work with drug users has become more efficient, and our legal services are even more accessible now.



Working at ARF office

Since the participants' first contact with Street Lawyers occurs on the streets, it is very important for us to maintain and establish links between outreach work, health and legal counseling. Street lawyers generally provide legal assistance in drug-related criminal cases and in those cases related to the right to health (access to HIV treatment and hepatitis C treatment, protecting people who use drugs and live with HIV and hepatitis C and experience discrimination). We also receive requests for assistance from people in the penitentiary system, most of whom are detained or charged because of minor non-violent drug offences. We have helped to write solicitation letters based on these complaints. For example, in 2015 our social worker solicited the court to change a woman's pretrial restriction from detention to house arrest. As a result, the woman was released from detention. Later the court gave her a sentence with probation and she was able to avoid prison. More cases are described in this report and in the [ARF Street Lawyers report](#).

Direct Services: Harm Reduction Moscow

"In a country where the epidemic is aided by marginalization and fear of arrest; where repressive approaches to drug use and drug policy prevail; where there is no access to harm reduction beyond a few programs... [ARF] are doing great work... However, the program cannot continue just based on the enthusiasm of these committed people working in adverse conditions. Harm reduction for people who use injecting drugs must become a solution for Russia's public health emergency."

Michel Kazatchkine, Special Envoy of the UN Secretary General on HIV/AIDS in Eastern Europe and Central Asia



Michel Kazatchkine, United Nations Special Envoy for HIV/AIDS in Eastern Europe and Central Asia, visits the night outreach

Since 2009, we have provided harm reduction services to people who use drugs in Moscow. We call them project participants rather than clients, because we communicate on an equal footing and the information exchange that ensues always benefits both sides. Our project participants may have a family and a job or be alone and unemployed. They may be living at home or be homeless. They are usually in their 30s, but some are much younger or older. About 30% of them are women. All our participants have something in common: they are criminalized and marginalized. Facing stigma and discrimination, they shy away from healthcare and social services. They have little to no knowledge about their rights. They are people in dire straits.

ARF is the only organization in Moscow that provides direct harm reduction services to people who use drugs (officially, about 30,000 people). The Moscow drug scene is closed – drugs are not sold out in the open. ARF outreach workers make new contacts near pharmacies, where people who use drugs come to buy medications and syringes. To ensure predictability and build trust, we visit these sites regularly at the same time in the evening when more people who use drugs come to the pharmacies.

Mostly [our communication with the participants] was "from heart to heart", and they told us about a few cases when our Naloxone saved people's lives. For example, a girl - our first contact - told how she herself had been saved [with Naloxone] and since then she has been saving other people. (ARF Report).

Our work helps our project participants prevent overdoses, address HIV, hepatitis, and other health issues, and offer social and legal assistance to those who need it. In 2015 – 2016, our harm reduction services had over 10,300 contacts with people who use drugs.

Our outreach workers distributed almost 400,000 syringes and over 30,000 condoms. We also continued to offer counseling and self-testing kits for HIV and hepatitis C.

	2015	2016
Syringes	187,665	194,328
Condoms	9,101	21,648
HIV and HCV tests		359

We distributed informational materials on legal matters, HIV, hepatitis, etc. Some of our most popular materials include a [brochure about Naloxone](#) which discusses overdose management, as well as our newspaper for people who use drugs, [Shlyapa i Bayan](#), which provides a lot of useful tips on legal issues, human rights and harm reduction.



During the outreach work

Finally, we refer and accompany clients to health services, assist with their shelter and hospital access, and help them restore their documents. Counseling is an important part of our activities. Compared to 2015, in 2016 we saw a significant increase in counseling on HIV and hepatitis. But the main demand of our clients is for consultations on post injection complications and bacterial infections. For a few months we had a certified surgeon working with us, offering advice to our project participants during outreach. For those cases where it was impossible to address the issues onsite, we established relations with surgeons who saw our project participants individually in medical settings.

	2015 (not the full year)	2016
Counseling on overdoses	677	864
Counseling on post-injection complications	525	553
Counseling on drug treatment	376	330
Counseling on HIV and hepatitis	159	561
Counseling on STIs	41	144

When our project participants require more substantive assistance, our case managers provide accompaniment. The key principles of case management include participant centered approach, respect, equity and empowerment. We help our project participants obtain and keep receiving the medical and social assistance they are entitled to. We consider each case individually and aim to offer carefully tailored solutions.

We work a lot with people who are special to us: women and children. Our women experience family violence, stigma in medical institutions, they often have nowhere to go for protection and support and do not have sufficient information to deal with medical and social services. Due to the lack of OST service provision to pregnant women remains a challenging task. In 2015, we implemented a project for women who use drugs with support from the Eurasian Harm Reduction Network in two Russian cities: Moscow and Yekaterinburg. Over 900 women participated in the Moscow project and over 300 in Yekaterinburg. In addition to the standard harm reduction kit (materials, syringes and condoms), the women were offered pregnancy tests, ointments, Miramistin (antimicrobial medication), vitamins, received help from our case managers, and were provided training on important issues such as violence and pregnancy.

"Before, I never noticed the problem of drug dependency around me... I wasn't aware of substitution therapy and harm reduction programs. Most importantly, I didn't know about those people who, in spite of the lack of hope that even 10 percent of the program participants will recover, go to night pharmacies providing help that could possibly reduce drug related harms."

Denis Sinyakov, Photojournalist

The main difficulty with case management is the inability of medical and social institutions to adapt to the needs of people who use drugs (e.g. lack of substitution treatment, stigma and discrimination) and consequent human rights violations (e.g. denial of HIV treatment). When visiting medical facilities, drug users face restrictions of their right to health services and are subjected to moral condemnation. Recently there have been more and more such cases because the state has failed to ensure an uninterrupted supply of therapy. That is why we are helping people living with HIV obtain medical assistance and access to ARV therapy.



During the outreach work

Work with families of drug users

Caring for children from socially deprived families of people who use drugs is part of our mission. Our Children's Project started in 2015 under the slogan "Children – they are always children..." Parents who use drugs often face various difficulties. It can be lack of money to provide for their children everything they need; they often feel exhausted, have health problems and are usually biased. We help parents cope with these difficulties and build close relationships with their children so they could feel like they are "good moms and dads." Our children celebrated the New Year 2015 with the ARF's own Grandfather Frost and Snow Maiden. Being inspired by the children's positive reaction (they were smiling and whispering that they would be waiting for the Grandfather Frost next year), we decided to continue this important work.

In addition, we organize various social activities and cultural events for our children with support from organizations and individuals such as the Moscow Planetarium, the interactive museum

Experimentanium, and the Children's Musical Theater that provide free tickets for our children. In addition, getting children ready for school can be really costly in Russia and for our project participants that can turn into a little family Apocalypse. That's why we have raised funds through a crowdfunding campaign to support the parents' efforts to send their children to school. As a result, we bought a lot of useful things for the kids: several school uniforms, backpacks, cold weather boots and shoes to wear at school or indoors, and other accessories.



Happy New Year for children of drug users

Finally, we implemented a number of small “projects” helping make the lives of our project participants a tiny bit happier. These small good deeds included:

- Collecting and distributing second hand clothes among our project participants.
- Collecting books and sending them to prisons. We also sent personalized and signed New Year's Greetings cards.
- Handing out New Year's Greetings cards with chocolate bars for our project clients. Hopefully, this made their lives a bit warmer.
- Continued our Falling Leaves campaign to make our city cleaner and safer by collecting and utilizing used syringes and needles.

Supporting and building the capacity of the community of people who use drugs

Our project participants often apply the knowledge we provide, and that makes me glad. I'm proud that we have gained the trust of so many participants that they come to us for consultations and for help, and sometimes bring their friends as well. I'd like to note also that I've often heard drug users say, "You are really doing good things, thank you!" And I think that's something to be proud of.

Anna Alimova, ARF social worker

Our project participants are creative and capable individuals. They may feel pressed or have limited social skills to navigate ordinary life situations (visiting a doctor, receiving social assistance, etc.), but many are eager to learn. They communicate with our social workers and read our materials explaining how to use naloxone to manage overdoses, how to prevent HIV/hepatitis and how to protect human rights. That helps them to take care of themselves and others. Some project participants have become ardent supporters of harm reduction and human rights since meeting our social workers. We support the development of communities and initiative groups of people who use drugs. By involving people who use drugs in human rights protection, we help build their capacity to advocate for their rights and interests and support the strengthening of community systems.

With that in mind, we have provided training on human rights and legal issues to our project participants. In 2015 - 2016, over 220 drug users, as well as social workers, psychologists and other professionals, participated in over 20 training sessions. We gave our project participants information about the tools available to defend their rights with or without help from ARF.

"I'm very happy to have an opportunity to learn from Moscow colleagues and meet great people. Every working [at the ARF] is unique. I've never seen so many cool people in one place... This certainly gives more strength and ideas helping me to work in my city. It's also nice that I obtained a large number of useful contacts."

Nikita, Social worker from Togliatti

During these 2 years, we hosted 6 [study tours for harm reduction activists and social workers](#) from 9 Russian cities, including Togliatti, Perm, Rostov, Kemerovo, and other cities. Each study tour lasted 4 days and featured a mix of field work and theory, including information on social work, client-oriented services, HIV prevention and harm reduction, and other topics. We also discussed the tools we use in our work, such as google groups, Basecamp for case management, and legal assistance tools.



Hosting a study tour for social workers from Togliatti

We also participated in 3 study tours ourselves: to St. Petersburg, Kazan and Rome. The [study tour to Rome](#) took place in November 2016. It was organized by the Eurasian Harm Reduction Network and the International Red Cross Federation for Eastern European harm reduction programs. The study tour highlighted the difference between European and Russian approaches to drug use.

In November 2016, we supported a first-ever [Forum on Client-Oriented Social Work](#). Over 60 social workers, psychologists and other interested parties from Russia and other countries participated. The many diverse topics discussed at the Forum can be grouped into theory and practice of social work, social work tools, working with communities, and knowledge exchange. The participants agreed that the Forum provided an important platform and this work need to be continued.

We are working to help de-stigmatize and humanize drug users. In 2015 – 2016, we continued to publish our newspaper for street drug users [Shlyapa I Bayan](#). Published since 2014, it is a newspaper made by and for drug users. The idea behind Shlyapa I Bayan is to help empower the community of drug users and help people fight for their rights and enact changes in their lives. The newspaper is distributed during our outreach work and can be downloaded on our website.

We also implemented the project Positive Moments. It was first organized in 2012 and by 2015 became an international project implemented with support from the Eurasian Network of People Who Use Drugs (ENPUD). Through Positive Moments, we provide people who use drugs with disposable cameras asking them to photograph their world. This results in great photos that show that drug users' lives are not

limited to drugs and include many passions and interests – just like the lives of any other people. We raise funds for this project through crowdfunding. In 2015, a Positive Moments exhibition was organized in Tbilisi, Georgia in the framework of the Regional High-Level Dialogue on Transitioning to Domestic Funding for HIV and TB programs in Eastern Europe and Central Asia.

Community systems strengthening is an important goal for ARF work. Together with representatives of other community groups, ARF participates in the National Dialogue that coordinates the GFATM funding in Russia and we are proud to have participated in this truly community-led and governed work that helped to sustain harm reduction work as well as work with other populations affected by HIV in Russia.



At the First National Forum of People Who Use Drug

In order to increase drug users role in monitoring and promoting drug policy reform in Russia, ARF provides Secretarial Support to [the National Forum of People Who Use Drugs](#) and in December 2016, we organized a first-ever in-person meeting of the Forum. It was attended by over 40 drug user activists from 20 Russian regions from across Russia. The goal of the Forum was to mobilize people who use drugs and their supporters to promote humane drug policies and HIV prevention and treatment. The forum included 4 areas of work: discrimination, decriminalization, treatment access, and HIV and harm reduction. The participants identified related legal barriers to effective health and human rights work and developed joint strategies to address them. As a result, the participants developed a roadmap for 2017.

Building public debate on drug policy

Russia's repressive drug policy builds on the public's low awareness of its consequences for the health and rights and on alternatives to repressive approaches. One of our key objectives is to draw public attention to the negative consequences of the War on Drugs. With that in mind, in 2011 together with Russian leading art and social activists we started a project Narcophobia aimed at debunking the myths about drugs and drug policy, discussing the fear of drugs and drug users, and addressing the lack of public critique of drug policy. Within this platform we created the web resource [Narcophobia](#) where we publish news and analytic materials on drug policy. As such, Narcophobia unites public figures, human rights activists, researchers.

Each year, Narcophobia organizes a contest for journalist materials on humane drug policies and shortlists the best materials on the topic. The quality of the materials is usually very high and the contest is highly competitive. A jury that consists of prominent journalists, drug users, public figures, activists and public health specialists chooses the author of the best material who is then rewarded with a study tour abroad to a country of their choice. In 2015, Nikita Sologub (Mediazona) was awarded with a trip to Portugal for a series of articles on drugs in Russia. And in 2016, Georgiy Vanunts won a trip to the Netherlands where he studied the local approaches to harm reduction at the dance scene. Besides the journalist contest, Narcophobia reaches out to art activists through its yearly cooperation with the art activist festival MediaImpact. We organize a series of events both in Moscow and other cities in order to speak to art and social activists about the origins of repressive drug policies and discrimination of drug users, and about the intersections between art and activism. In 2015, within the MediaImpact festival we organized a Narcophobia Day in Moscow; this festival included the screening of a video about the ARF, "Giving People Hope". The activists had a discussion about the nature of the intersectional approach to society's fear of, and prosecution of drugs and drug users. ARF's Maxim Malyshev presented our newspaper Shlyapa I Bayan and talked about the project Positive Moments. Also in 2015, Narcophobia was featured at FemFrontier, a feminist festival held in Nizhny Novgorod which provided a space to discuss social and political discrimination, including drug policy issues.

Besides that, ARF carries out regular work with journalists and media outlets to inform and educate the public and promote humane and rational drug policy. We are one of the few Russian organizations that still openly criticize the government for its limited and old-fashioned response to HIV and drug related problems. In 2015 – 2016, we granted interviews and provided comments to multiple media outlets. They covered our efforts to “bridge the gap” between the health and social services and people who need them ([AP](#), December 1, 2015). We discussed Russia's prejudice against evidence-based HIV prevention approaches, denial of treatment access, human rights violations, and crackdowns on NGOs ([The Guardian](#) May 24, 2015; [The Verge](#) July 2, 2015; [The Moscow Times](#), April 15, 2015; [The Moscow Times](#), August 18, 2016; [Die Welt](#), September 7, 2016; [The New York Times](#), December 28, 2016; [Foreign Policy](#), November 25, 2016; [Spid Center](#), November 22, 2016; [The Moscow Times](#), November 22, 2016; [Gizmodo](#), November 7, 2016; [The Influence](#), October 31, 2016). We spoke about the impact of the "foreign agent" designation

on our work ([DW](#), November 23, 2016; [AgentovNet](#), October 4, 2016; [Moskovsky Komsomolets](#), September 5, 2016), our fight to have that designation removed ([HRRCenter](#), October 13, 2016), and the legal challenges experienced by the ARF ([DW](#), September 8, 2016). Our social workers shared tips on supporting people who use drugs ([Takie Dela](#), December 19, 2016). We also helped make activist voices heard. In an article by [MediaZona](#) (April 16, 2015), ARF covered the stories of six Russians who were prepared to fight for their right to health by requesting to lift the ban on substitution treatment.

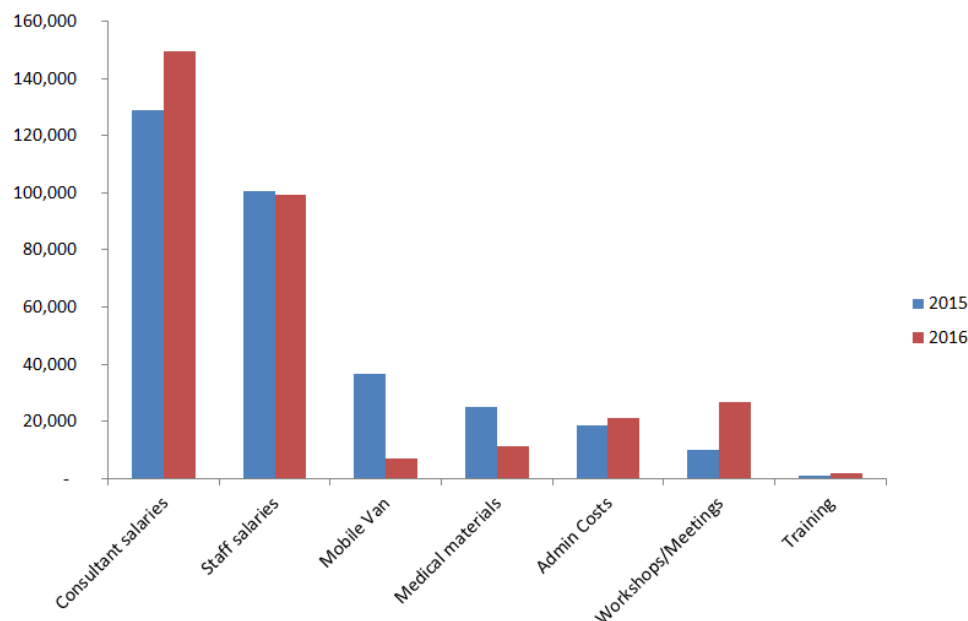
Finally, the ARF is active on social media. We share our materials and provide regular updates in Russian and English through [Facebook](#), [Twitter](#), and [Vkontakte](#), informing our followers about domestic and international developments and about our work.

Funding

"Maxim took me... to see ARF's street outreach work done using the new mobile unit bought with Global Fund money. I was happy to finally see their dream (buying a van to do harm reduction work on the streets of Moscow) become reality... I was really impressed by the heroic work of Maxim and Yelena and their communication with clients. I wish the team all the best with their work and hope that sooner or later the good work they are doing will be appreciated by the government and politicians in their country."

Nicolas Cantau, the Global Fund's Regional Manager for Eastern Europe and Central Asia

In 2015, the ARF budget was USD 358,376 (of which we spent 90 percent, or 320,600), and in 2016 it was USD 316,474. The budget presented a combination of grants and in-kind donations. Our expenditures by budget category (in absolute amounts) for each year are shown in the figure below.



In 2015-2016 we received support from our long-term partners the Open Society Foundations (before OSF were blacklisted by the Russian government), the Levi Strauss Foundation, and the Eurasian Harm Reduction Network. We also received funding from the Russian foundation Open Health Institute in the framework of the GFATM project, allowing us to buy a mini-van and organize a mobile outreach program, and from the French Association Solidarité Sida, to enhance our harm reduction project in Moscow. We raised funds through the [crowdfunding platform Global Giving](#) and through [our website](#). These donations supported our initiatives including Positive Moments, and presents for children of people who use drugs. In 2016, we also collected an emergency fund in case we are fined by the government as a “foreign agent”.

2015	2016
Open Health Institute: HIV prevention among drug users in Moscow	
Levi Strauss Foundation: A “Street Law” project: Provide access to legal aid and health care services to populations at high risk of HIV/AIDS in Moscow	
Global Giving: Harm Reduction services for 1000 Moscow drug users	
OSI Assistance Foundation (IHRD): Improving Access to Health and Rights for People Who Use Drugs in Russia	Levi Strauss Foundation: Improving Access to Health Care and Building Community Capacities and Evidence Case for Rights and Health of People who Use Drugs in Russia
Eurasian Harm Reduction Network (EHRN): Strengthening the response of non-state actors to growing needs of women who use drugs	Open Health Institute: Public drug policy monitoring mechanism in Russia
In-kind donations: Naloxone, small good deeds: presents for children, helping people in need	Association Solidarité Sida: Moscow Harm Reduction Project

“Our work is about values not money” (By way of conclusion)

Another two years of meeting good people, helping them in challenging situations and navigating the complicated landscapes of health care and drug policy together. Another two years of demanding support for services based on evidence and human rights. Our team and our project participants have become more knowledgeable, more experienced, and hopefully better equipped to continue saving lives and fighting for human rights and humane drug policies. We would like you to know about that. Actually, what better way than to ask our team members what they think of their work. Meet Ezhi, our outreach worker and case manager:



Ezhi

“I am 30 years old and I have two kids. I started out at ARF as a participant, then a volunteer, four years ago, and I had other jobs at that time. Here’s how that happened.

I was pregnant and I got in touch with ARF because I didn't want to have an abortion. I think if not for these guys, I couldn't have kept the baby. We were all fighting the doctors that kept demanding that I leave my baby at the maternity clinic. They said I'd die of AIDS or hepatitis. After my baby was born I

decided to join the team as a volunteer outreach worker. Right now I'm a case manager and outreach worker at ARF, and it's my only job. I'd long been interested in harm reduction. As someone who used drugs, I knew very well about my friends' rights routinely violated and for me the human rights have always been an important topic. I see harm reduction as a movement for human rights. Especially for women – helping them is a priority because they're under so much pressure.

What does my work look like? Well, we deal with different people and not all of them are dependent on drugs. For example, there are some younger people who use drugs for recreation. But many of our project participants are dependent. Our contact with these people starts during outreach. First, we talk to them about their needs, about their problems we try to understand what they want to change and where we can help. People may need help with their paperwork; that's important for those who have disabilities that require medical procedures. Then there are those who go to prisons. It's really a nightmare being in a prison if you have HIV for example, because antiretrovirals are not available. One of our cases is a guy who has HIV and he refuses ARV treatment because of the ongoing ARV shortages. Working with prisoners can be really difficult because it's a closed system.

Working with active drug users is great but it can be difficult emotionally. You really want to help out but all you keep facing are walls, resistance from the system. Many of our participants are our friends, we enjoy communicating with them and we manage to achieve positive change, although slowly.

For example, more doctors are beginning to understand the problems we're dealing with. Younger doctors are more interested in the international experience and more open to dialogue. Then, of course, we've had others who just don't care. I don't really understand them. Still, we try to make our point in a friendly way. Actually, that works.

Same as when we're out collecting used syringes on the streets, we talk to local residents and explain why people discard their used syringes this way - because there are no other ways, there are no services for drug users. And we also explain why people use drugs. This makes people think. So, these changes are happening.

Drug users themselves are more ready to fight for their rights than they used to when they were afraid it would only get worse. Unfortunately, a lot of them still have self-stigma but that's also changing.

There are so many positive moments in my work! I am happy because I've had such good rapport with our project participants and I've earned their trust. I think I'm good at that. I don't position myself as someone who's different from them. And it's so great that we all believe in what we do. So, it's not about making money. Everyone really likes their work, we're always together. I don't think I'll ever return to full-time drug use (although controlled use might be an option) because I don't want problems for myself or anyone else. Basically, to use or not to use is usually a conscious decision. Of course, it would be easier for people to quit drugs if good quality treatment services were available. In any case, I had my second baby just over a year ago and I don't have time or energy to do much besides my children and my work.

So much needs to be done, and I have so many plans. If you ask me where I want to be in five years, I'd say it would be great to continue with our women's projects and our children's projects. To help build a social community of drug users. Also, I'd like to involve my friends in outreach. And I'm thinking about continuing my education, maybe getting a degree in social work or psychology. One thing is for sure: I'm not going to leave ARF."

