



The Injecting Drug User Implementation Tool (IDUIT)

Photo: UNODC

## CHANGE STORY 2:

# USING NORMATIVE GUIDANCE AND COMMUNITY EMPOWERMENT TO IMPROVE CAPACITY AND COORDINATION IN RESPONSE TO DRUG POLICY IN THE EECA REGION

### PROBLEM

Vulnerability to HIV is well-known to be exacerbated by stigmatisation, which is also increasing in the region, informed by growing populism and right-wing extremism. These narratives and discourses have not only exacerbated vulnerability but has also led to the enforcing of tougher drug laws and further reduction access to HIV prevention services. In Kyrgyzstan the government have ostensibly worked to “humanise” the national drug laws. Yet the Kyrgyz community of people who use drugs have very real concerns that this narrative hides the genuine political intention of implementing an increasingly repressive drug policy. Belarus similarly employs very repressive drug policies. The minimum age for sentencing for drug offences is 14 years old, and since 2014, doctors have been required to report to the police *all* instances of suspected drug use.

In the context of the above repressive national policies and legal frameworks, this change story aims to show the link between the regional work done by INPUD and its partner the Eurasian Network of People who Use Drugs (ENPUD) and concrete, national level changes – in Belarus and Kyrgyzstan.

### ACTIVITIES

In coordination with INPUD's partners ENPUD, the Eurasian Harm Reduction Association (EHRA) and BtG alliance partner AFEW International, INPUD empowers and builds the capacity of drug user communities in the EECA region to meaningfully participate in national mechanisms with the aim to create a more enabling social, legal and policy environment for eliminating HIV by 2030. In February 2018, INPUD delivered a five-day training on the Injecting Drug User Implementation Tool (IDUIT) and the Global Fund for ENPUD members, in Bishkek, Kyrgyzstan. The training built the capacity of networks of people who use drugs to engage effectively in Global Fund processes, and specifically on how to engage with the processes of the Global Fund's Country Coordinating Mechanisms (CCM). Such capacity building is with a view to address repressive and rights-violating legislation and policy, allowing drug user activists to meaningfully participate in national decision-making mechanisms, especially in CCMs. Following this training, the attendees disseminated the information and their acquired skills among their respective national networks and groups.

Bridging the Gaps is an international HIV programme with a focus on the health and rights for LGBT people, sex workers and people who use drugs, currently operating in fifteen countries. For more information on the programme, visit [www.hivgaps.org](http://www.hivgaps.org).

**BRIDGING THE GAPS**  
Health and rights  for key populations

## THE CHANGE

Following the Bishkek training, the drug user community in Kyrgyzstan is increasingly mobilised to monitor the impact – and to challenge and participate in the formation – of new drug legislation, specifically in the context of inflated punitive interventions and fines. This means that there are now increasing mechanisms to systematically gather, use, and make available data with regard to drug policy and human rights violations that have been developed by the community. Representatives of the drug user community are now actively engaged in advocating against current legislation. Using the IDUIT, new proposals including community-led interventions have now been submitted for Global Fund funding, and a monitoring mechanism that documents the impacts of emergent drug legislation and policy has been implemented.

CCM representatives in Belarus were empowered to advocate for the diversification of substitution treatment, the provision of which allows for more comprehensive access to service provision and harm reduction for people who use drugs: advocacy that took place during and following the training (discussed further below, resulted in the Ministry of Health review of OST treatment protocols reintroducing provisions allowing for take-home self-administration of methadone. Due also to this sustained advocacy and greater capacity within the community, buprenorphine is also expected to be purchased under the Global Fund in Belarus in 2019.

In addition, key advocacy collaborations in the region have continued. This has meant that key population organisations have been able to build alliances with other organisations and partners who share the same advocacy agendas: through the Kyrgyzstani Key Populations Platform, the Kyrgyz Harm Reduction Network have, following February 2018, mobilised other key population groups, including communities of people living with HIV, LGBTQ communities and prisoner groups to join in their advocacy to reverse the new provisions enforced through the new criminal codes. These communities face common challenges of social exclusion, stigmatisation, and endemic discrimination, coupled with oppressive legislative frameworks and challenges. Their enhanced collaboration is a very positive step in challenging and addressing these obstacles.

These changes resulted from:

- A strong ENPUD membership base formed by activists who were able to mobilise their national communities;
- The collaboration between INPUD and AFEW International, as part of the BtG Alliance, and additionally our collaboration with EHRA, a key stakeholder and advocate promoting harm reduction in the region;
- The connections and fruitful relationships with other key population groups in Kyrgyzstan, which allowed for general mobilisation against the new legislation on drugs;
- The existence of a huge social movement fighting for drug policy reform in the region.

INPUD's change story gives cause for optimism, given that the drug user rights networks have been able to meaningfully and tangibly advocate for reform and progressive policy change even in contexts where there are on-going attacks and subjugation of key populations and people who use drugs. This story illustrates that mobilisation and resilience can have a substantive and tangible impact, if adequate support is provided. In the EECA region, where the state is traditionally inclined to ignore marginalised communities' demands, communities of people who use drugs have managed to make their voice heard and their demands met. This is work that has resulted in a greater capacity and resilience of marginalised communities of people who use drugs considerably impacted by punitive prohibition and by a growing HIV/AIDS pandemic, that they are better equipped to survive and halt oppressive processes and policies.

## LESSONS LEARNED

Looking forward, it is very important to ensure that our work is sustainable and is marked by long-term support and technical assistance. Further support for ENPUD and for the national level network and community will therefore be key focus areas in our work through the 2019 BtG2 sub-grant. This work will include a component focussing on safety, wellbeing, and security of ENPUD activists.