They can do that by establishing and enforcing national laws and policies and programmes that:

- Recognize the evolving capacity of adolescents to make decisions about their well-being
- Promote access to services based on need, including harm reduction and overdose prevention
- Establish and disseminate clear guidance for health workers to understand their legal and professional obligations
- Support young people who inject drugs and their organizations through capacity-building and leadership to enhance community empowerment
- Ensure that young people are not subject to compulsory detention for drug dependence treatment or rehabilitation purposes

All other countries in Asia and the Pacific region either have no NSP and OST programmes, no provision for independent consent to access these programmes for under 18s, unclear or conflicting laws or policies, or no information is available.

GOVERNMENTS SHOULD REMOVE AGE RESTRICTIONS AND PARENTAL CONSENT REQUIREMENTS THAT IMPEDE YOUNG PEOPLE’S ACCESS TO HARM REDUCTION SERVICES.

13 countries are known to have laws and policies enabling independent consent for young people to access needle and syringe programmes (NSPs) and/or opiate substitution therapy (OST) programmes.

This poster is based on information gathered through country specific research conducted between June and September 2015. The partners thank DLA Piper for their pro bono assistance. Reasonable steps have been taken to validate the information.