



HARM REDUCTION
INTERNATIONAL

Annual Report 2020

At the intersection of
drug policy, public health
and human rights



CONTENTS

PAGE 03

Who We Are and What We Do

PAGE 04

Letter from the Executive Director

PAGE 05

Our Work

1

COVID-19: Harm
Reduction During a
Global Pandemic

2

Public Health and
Social Policy

3

Human Rights and
Justice

4

Sustainable
Financing

5

International
Conference

PAGE 22

Our Board of Trustees

PAGE 23

Our Donors

Who We Are and What We Do

*We work at the intersection of drug policy,
public health and human rights.*

Harm Reduction International (HRI) is a leading non-governmental organisation (NGO) dedicated to reducing the negative health, social and legal impacts of drug use and drug policy. We promote the rights of people who use drugs and their communities through research and advocacy, to help achieve a world where drug laws and policies contribute to healthier, safer societies.

We:

- Monitor the availability of health and social services for people who use drugs;
- Ensure that human rights are not violated in the name of drug control;
- Advocate for the funding of lifesaving harm reduction interventions;
- Convene the harm reduction community at our international conference.

Our biennial international conference, is the main global forum for the exchange of information and best practices at the intersection of drug policy, public health and human rights.

We are an NGO with Special Consultative Status with the Economic and Social Council of the United Nations.

We actively participate in international and regional fora and initiatives, to build and strengthen harm reduction advocacy around the world. These activities advance our work towards our strategic objectives.

To advance our UN level advocacy, HRI participates in the UNAIDS Programme Coordinating Board meetings, the UN Commission on Narcotic Drugs and the meetings of the Brandenburg Forum on Drugs and Development Policies; we contribute to the Vienna NGO Committee on Drugs, and the World Health Organization Working Group on Hepatitis and Substance Use. HRI is an invited, expert member of the Strategic Advisory Group to the UN on HIV and Drug Use (SAG). We also contribute to the European Union (EU) Civil Society Forum on Drugs, the EU Civil Society Forum on HIV/AIDS, viral hepatitis and tuberculosis; the UK Harm Reduction Working Group and the Safe Injection Facility Working Group (UK).

HRI is proud to collaborate with the Eurasian Harm Reduction Network (EHRA) and the Middle East and North Africa Harm Reduction Association (MENAHR).

In 2020, HRI succeeded in its application to become a technical assistance provider to the Global Fund to Fight AIDS, Tuberculosis and Malaria under the Community Rights and Gender Strategic Initiative.

We are members of the World Coalition Against the Death Penalty, STOPAIDS, Action for Global Health UK, the Global Fund Advocates Network (GFAN) and the Robert Carr Fund Harm Reduction Consortium.



Letter from the Executive Director

Public health and justice were front and centre in 2020, as the world grappled with the COVID-19 pandemic and was galvanised to protest against structural racism and police brutality.

The pandemic has exposed and exacerbated existing inequities in society. It has highlighted not only the critical importance of investing in public health, but in responses that are grounded in evidence, are rights-based, and that reach the most marginalised and vulnerable among us. It has shown us that until we can ensure the right to health for all, we cannot be a healthy or just society.

I am proud of the work of our staff and board members, in adapting to unprecedented circumstances and supporting each other as well as our partners around the world. We found new ways to work together to advocate for the health, rights and dignity of people who use drugs, while ensuring that we used our expertise in tracking developments in harm reduction to map the impact of COVID-19 in our sector.

We studied the impact of COVID-19 on harm reduction services around the world, as part of our flagship publication, the [Global State of Harm Reduction 2020](#). In this edition of our global harm reduction tracking report, we increased our engagement with, and reliance on, regional experts. We also examined more closely the interaction between harm reduction, drug use, hepatitis C and tuberculosis.

In the early days of the COVID-19 pandemic, noting the unique risks faced by people who use drugs and their communities, we spearheaded advocacy with the [United Nations Special Rapporteur on the Right to Health](#). This resulted in a strong statement from the Special Rapporteur guiding national governments on protecting the rights of people who use drugs,

supported by a number of other UN human rights mechanisms and mandates.

We continued our work to advocate for adequate funding for harm reduction in low- and middle-income countries, both via global funding infrastructure and in support of national budget advocacy. In particular, [we worked to ensure that funding for harm reduction and the rights of people who use drugs were priorities in the development of the new Global AIDS Strategy \(2021-2025\)](#), and highlighted the ongoing and dire need for harm reduction funding in our advocacy with the Global Fund for AIDS, Tuberculosis and Malaria (the Global Fund).

Finally, we are proud to have begun hosting a global network of lawyers who work with people who use drugs and other vulnerable populations, called 'Lawyering on the Margins.' We are inspired by the engagement and achievements of this group over the past 10 years, and are committed to finding new ways to support them in their fight against discrimination, punitive policies and the policing of poverty.

In 2020, amidst global upheaval, there have been significant gains in harm reduction and human rights. Communities and civil society have found new and innovative ways to reach people where they are at, creating important momentum for the permanent acceptance of health interventions which place human dignity, agency and lived expertise. Through the challenges of our diverse global experiences of lockdown, people who use drugs have led with courage and compassion, demonstrating the case for community leadership – yet again.

Naomi Burke-Shyne
Executive Director

Our Work

1

COVID-19: Harm Reduction in a Global Pandemic

Our Work

Harm Reduction in a Global Pandemic

COVID-19 & Harm Reduction

We tracked the impact of COVID-19 on harm reduction services and policy as part of our data collection for our biennial global mapping, the *Global State of Harm Reduction 2020*. We found that the pandemic and related lockdowns disrupted health and harm reduction services worldwide but it also pushed many governments innovate in implementing or creating space for harm reduction as part of their emergency COVID-19 responses. We published the results of this tracking in the 2020 edition of our report.

We built on our research to create focused briefings on the impact of COVID-19 on harm reduction services, including for example a briefing on the benefits of providing integrated services, and the role of community-led and mental health services in reaching people who use drugs during the pandemic.

COVID-19 & Harm Reduction Services

Along with Medecins du Monde, the United Nations Office on Drugs and Crime, the World Health Organization, the European Network of People who Use Drugs and the International Network of People who Use Drugs, we organised a series of webinars on the impact of COVID-19 on harm reduction programme implementation in countries around the world from April to July of 2020. The series allowed us to hold in-depth discussions on COVID-19 adaptations specific to women who use drugs, housing and shelter for vulnerable people, harm reduction for non-injecting drug use during the pandemic, and OAT adaptations and overdose responses.

COVID-19 & Prisons

Early in the pandemic, governments around the world started to announce their plans to release people from prisons, which are high risk environments for the spread of infectious diseases, as a measure to contain the transmission of COVID-19. We monitored prison decongestion measures adopted around the world in response to COVID-19 between March and June of 2020. Our findings revealed the use of drug control as a justification for rights violations.

Despite a scarcity of official information, we found that around a quarter of the countries implementing decongestion schemes explicitly excluded people incarcerated for drug offences, thereby continuing to prioritise punitive approaches to drug control over public health.

We found that despite the significant political commitments and all of the public attention these schemes received, they benefitted a sliver of the global prison population (less than 6%).

Despite a few isolated examples of efforts to reduce arrest and detention, we found that most countries continued to arrest people, including for drug offences. Many also used the pandemic as an excuse to roll back democracy, limit civic rights, and/or further criminalise marginalised groups.

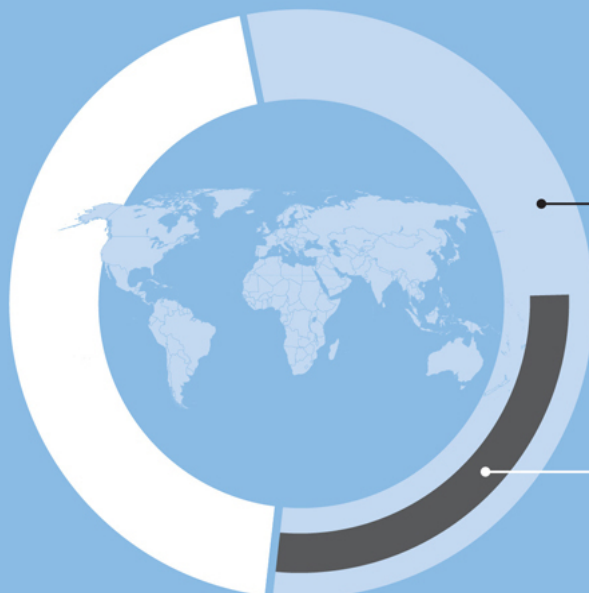
COVID-19 & Harm Reduction Funding

Cognisant of the fact that understanding the impact of COVID-19 on harm reduction funding and services is urgently needed to inform donor and government action, we worked with partners across Asia to document challenges and changes. We looked at evidence from Cambodia, India, Indonesia, Nepal, Thailand, the Philippines and Vietnam during the pandemic and found that to a large extent, NGOs and services providers drew on flexibilities under existing grant budgets or met needs through support from volunteers and the broader social ecosystem.

Drawing on this evidence, we urged donors and governments to urgently support harm reduction service providers to adapt to the 'new normal' of the COVID-19 era, to recognise the task shifting and formalise peer involvement in harm reduction service provision; and accept the pandemic innovations that have worked and should be maintained – for example greater flexibility in OAT administration.

COVID-19

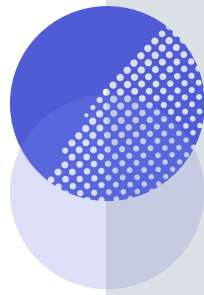
OPIOID AGONIST THERAPY (OAT)



84 COUNTRIES WORLDWIDE PROVIDE OAT

47 COUNTRIES (WITH AT LEAST ONE COUNTRY IN EVERY REGION) EXPANDED TAKE-HOME CAPACITIES PROVIDING FOR LONGER TAKE-HOME PERIODS

23 COUNTRIES MADE DISTRIBUTION MORE ACCESSIBLE WITH HOME DELIVERY OF OAT MEDICATION, OFFERING DOSING AT COMMUNITY PHARMACIES, OR DISTRIBUTING OAT IN OUTREACH SETTINGS



VOCAL-KE Jikingo project

We supported our partners, Voices of Community Action and Leadership, Kenya (VOCAL-KE) in their work to extend hygiene, harm reduction and HIV prevention services to women in the informal settlement areas of Kibera and Kawangware in Nairobi during the early stages of the pandemic. This emergency response included public education, linking people who use drugs with health and harm reduction services, providing handwashing stations and engagement with community health volunteers. It also included public art created by communities of people who use drugs, which amplified the public health messages of the Jikingo project.

Photos by Voices of Community Action and Leadership, Kenya (VOCAL-KE)



Our Work

2

Public Health and Social Policy

Our Work

Public Health and Social Policy



The Global State of Harm Reduction 2020

Our report, the Global State of Harm Reduction, remains the only independent analysis on harm reduction developments worldwide, in terms of policy and service provision. It is a leading resource for people who use drugs, academics, advocates and UN agencies. Our continual monitoring of trends in harm reduction helps to inform the evidence-base in this area, and serves as a resource for people working in the fields of public health, human rights and drug use. Now in its seventh edition, the Global State of Harm Reduction 2020 is the most comprehensive global mapping of harm reduction responses to drug use, HIV and viral hepatitis.



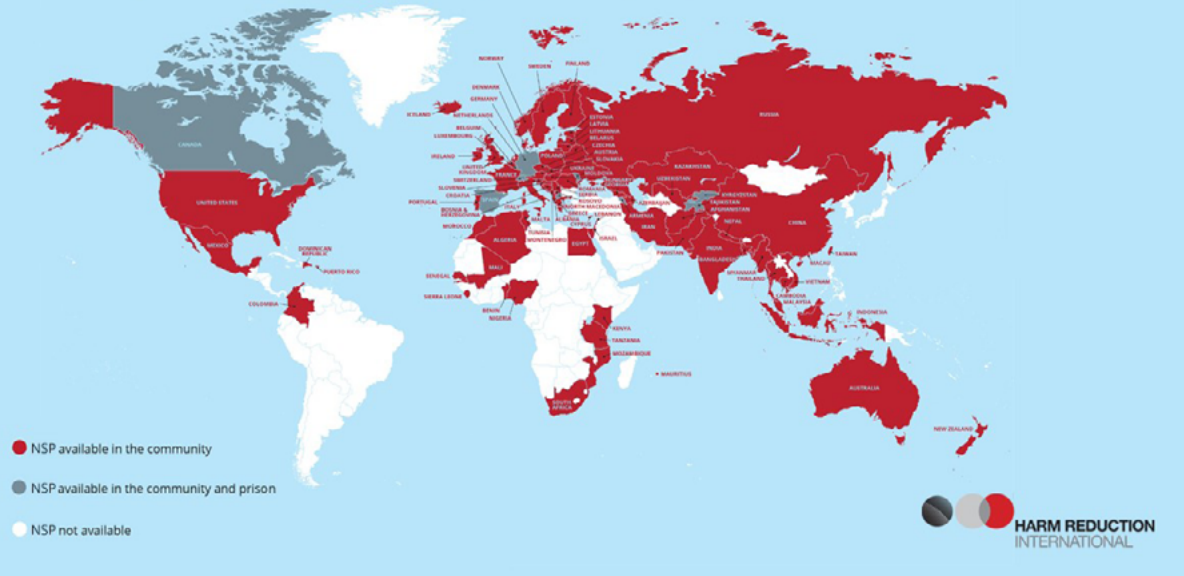
Now in its seventh edition, the Global State of Harm Reduction 2020 is the most comprehensive global mapping of harm reduction responses to drug use, HIV and viral hepatitis.

The Public Health and Social Policy team at HRI conducts original research and analysis to track developments in harm reduction and ensure that people who use drugs have the health and social services they need.

In this edition of the publication, we:

- partnered with regional experts to research and draft chapters on their respective regions;
- included studies highlighting racism as a structural determinant of health affecting Black, Brown and Indigenous people around the world;
- explored the impact of punitive drug policies on harm reduction uptake and service provision;
- examined the interaction between harm reduction, hepatitis C and tuberculosis more closely, included in the focused chapters on hepatitis C and tuberculosis;
- dedicated a chapter to the impact of COVID-19 on harm reduction;
- and disseminated research findings at the UN Commission on Narcotic Drugs and the 2020 International Lung Union conference.

Global availability of needle and syringe programmes (NSPs) in the community and in prisons



HARM REDUCTION IMPLEMENTATION HAS WORSENERD SINCE OUR LAST REPORT IN 2018, AFTER HAVING STALLED SINCE 2014.



Hepatitis C
PEOPLE WHO INJECT DRUGS



MORE THAN HALF OF ALL PEOPLE WHO INJECT DRUGS ARE ESTIMATED TO CARRY HEPATITIS C ANTIBODIES, MEANING THAT THEY HAVE BEEN INFECTED WITH THE HEPATITIS C VIRUS AT SOME POINT IN THEIR LIFETIMES.



COCAINE

IN LATIN AMERICA APPROXIMATELY 40% OF PEOPLE IN CONTACT WITH THE CRIMINAL JUSTICE SYSTEM HAVE BEEN ARRESTED ON THE BASIS OF COCAINE-RELATED OFFENCES



Harm reduction in Western Europe
FUNDING DEVELOPMENTS FOR HARM REDUCTION



26% DECREASE
OF FUNDING FOR DRUG SERVICES OVER THE LAST FIVE YEARS IN THE UNITED KINGDOM.

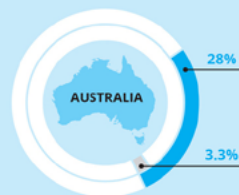


Harm reduction in the Middle East and North Africa



AN ESTIMATED
200,000
PEOPLE

WHO INJECT DRUGS LIVE WITH CHRONIC HEPATITIS C IN THE MENA REGION



IN AUSTRALIA ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLE REPRESENTED 28% OF THE PRISONER POPULATION IN 2019

ACCOUNTING FOR 3.3% OF THE GENERAL POPULATION.



IN NEW ZEALAND IN 2019, 52% OF THE PRISON POPULATION WAS MĀORI PEOPLE.

THEY REPRESENTED 16.5% OF THE GENERAL POPULATION.



Harm Reduction and Women

We continued our work to advocate for harm reduction services which are tailored to the unique needs of women. Building on research from the previous year, our Public Health and Social Policy team, in conjunction with our Barcelona-based partner, Metzineres, published research in the Harm Reduction Journal on the barriers women face when trying to access harm reduction services.

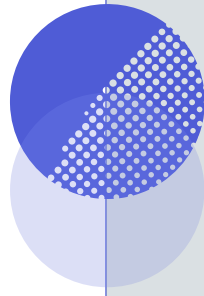
We worked with Women4GlobalFund to increase awareness of the need for tailored services for women who use drugs under Global Fund programmes in low- and middle-income countries. We partnered with Merchants Quay Ireland and University College Dublin to foster dialogue and increase political will to provide services for women who use drugs in Ireland.

Our Work

3

Human Rights and Justice

Our Work Human Rights and Justice



Lawyers on the Margins

Lawyering on the Margins is a global network of lawyers and community paralegals working on the advancement of human rights and access to justice for marginalised groups, including people who use drugs, people living with HIV, LGBTI individuals, and sex workers. The network serves as a platform to share best practices, knowledge and challenges among the members. We began hosting the Lawyering on the Margins network in late 2020. As hosts, we will be responsible for supporting the network's development, joint initiatives, as well as capacity building for the network members.

The Human Rights and Justice team at Harm Reduction International (HRI) monitors rights abuses committed globally in the name of drug control, and advocates to promote the human rights of people who use drugs and their communities.

HRI has monitored use of the death penalty for drug offences worldwide since our first ground-breaking publication on this issue in 2007. We provide regular updates on legislative and practical developments related to the use of capital punishment for drug offences.

We released the *Death Penalty for Drug Offences: Global Overview 2019* in March 2020, in which we highlighted some of the most common violations of fair trial standards reported in capital drug cases across a range of jurisdictions. We held a side event at the Commission on Narcotic Drugs in Vienna, which was co-sponsored by the European Union, Australia, Austria, Canada, France, Mexico, New Zealand, UK and the UN Office

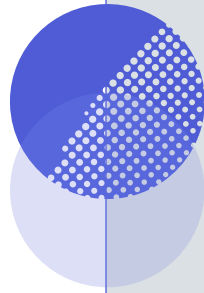
of the High Commission on Human Rights, where the Mexico Ambassador and the Australian Deputy Head of Mission provided remarks.

In 2020 we partnered with academics at:

- the **Oxford Centre for Criminology** to establish their Death Penalty Research Unit (DPRU), as part of a research project on the impact of the death penalty on foreign nationals;
- the **Cornell Center on the Death Penalty Worldwide** to strengthen research and advocacy around women on death row and their specific vulnerabilities; and
- **Monash University** in Malaysia on new research on the death penalty for drug offences, national case law and reforms, in a rapidly changing political environment.

Our Work

Human Rights and Justice



Collaborative video campaign for Merri Utami's clemency

We created a video campaign in collaboration with our partners in Indonesia, LBH Masyarakat, to bring attention to the case of Merri Utami, a grandmother who has been on death row for a drug offence for nearly two decades.

Merri Utami was sentenced to death after airport authorities found drugs in her handbag. In 2016, Merri waited to be led before a firing squad. She listened to the execution of four other people from her cell, then unexpectedly her execution was halted at the last moment. Four years later, Merri remains on death row and her petition for clemency has gone unanswered by Indonesian President Joko Widodo.



Our Work

4

Sustainable Financing

Our Work

Sustainable Financing

The Sustainable Financing team at HRI provides tools, strategic analysis and evidence to advocate for the funding of harm reduction. We support advocacy for increased investment in harm reduction, including campaigning for the redirection of funds from ineffective and punitive drug law enforcement to harm reduction and we work with national partners to gather evidence to inform budget advocacy. **We are the only NGO tracking global harm reduction funding trends, including support provided by international donors and domestic governments, and their impact on the global response to HIV and services for people who use drugs.**

In 2020, we supported local advocates build the case for funding for harm reduction by:

- collating evidence from around the world to demonstrate the cost effectiveness of harm reduction, and support advocates to make the case for investing in harm reduction;



We are the only NGO tracking global harm reduction funding trends, including support provided by international donors and domestic governments, and their impact on the global response to HIV and services for people who use drugs.

- working with partners to **test new tools for assessing investment in harm reduction** and expenditure on law enforcement at the national level;
- developing a **pioneering guide on how to advocate for harm reduction** within national level budget processes;
- and **reporting on the impact of funding** for civil society advocacy and documenting the significant changes in policy and practice achieved in seven Asian countries.

Our research reveals that the Global Fund remains the largest donor for harm reduction in low- and middle-income countries, and for this reason, is a key point of engagement for the Sustainable Financing team.

Our Work

Sustainable Financing



Redirecting funds to harm reduction

We have long advocated for a redirection of funds from punitive drug control to health and harm reduction programmes. **Our research shows that if we redirect just 7.5% of the funds currently spent on drug law enforcement towards health-based responses to drug use such as opioid agonist therapy, needle and syringe programmes, we could almost entirely end AIDS among people who inject drugs, prevent viral hepatitis among**

people who use drugs, and much more.

Following the global uprising against racism and police brutality in 2020, calls to 'defund the police' have grown in the US and around the world. As our 'redirection' message finds new relevance, we continue to support national advocates build evidence in support of redirecting funds from drug law enforcement to harm reduction.

Our Work

5

Harm Reduction International Conference

Our Work

Harm Reduction International Conference

Harm Reduction International's history is firmly rooted in the Harm Reduction International Conference, which began in Liverpool in 1990. The conference is an integral part of our work to mobilise for reform. **Our conference is the main global forum for the exchange of information at the intersection of human rights, public health and drug policy.**

In 2020, we were delighted to announce that we will hold our next conference in Melbourne, Australia. Returning to Australia for the first time in almost two decades, the conference will be a unique opportunity to showcase Melbourne's incredible harm reduction programmes and the people who have made them possible, and also to push for further progress not just for the country, but for the region as a whole.

Hosting the Harm Reduction International Conference is a collaborative effort between HRI and our partners in the host country, who we rely on for essential local knowledge, connections and experience. This time, we will be working in partnership with the Australian Injecting and Illicit Drug Users League (AIVL) and Harm Reduction Victoria (HRVIC), which are organisations led by and for people who use drugs; together with the Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine (ASHM), and



Our conference is the main global forum for the exchange of information at the intersection of human rights, public health and drug policy.

the International Network on Health and Hepatitis in Substance Users (INHSU). Across all educational activities and policy work in the sector, AIVL, HRVIC, ASHM, and INHSU seek to advocate for safe and equitable care for people who use drugs and people with HIV and viral hepatitis, free of stigma and discrimination.

Our partnership is committed to centring the experiences of people who use drugs and elevating local, Indigenous and rural voices. We'll be working to support local, national and international harm reduction advocacy, research and learning.

The conference theme, Strength in Solidarity, will underpin conference activities and highlight the importance of our strength – as people, as a community, as a global movement – in standing together. It also reflects our partnership's combined energy, expertise and leadership in the field of harm reduction.

In the context of the ongoing impact of COVID-19, we made the difficult decision to postpone the conference until April 2023. Our tracking of the vaccine rollout across the world shows us that even if international travel is possible in 2021, the conference will not be accessible for a huge swathe of the world where rollout has been hampered by a lack of access to the vaccine and by infrastructural issues.

Our Work

Harm Reduction International Conference



Minimising the conference's climate impact

Hosting an international conference comes with a responsibility to ensure that our impact on climate change is minimised, and we take this responsibility seriously. Although a large percentage of our delegates usually come from within the host country or neighbouring countries, ultimately we are inviting people to travel from far and wide, at a cost to the environment.

We are committed to ensuring that the Harm Reduction International Conference has a reduced carbon footprint.



Our partnership is committed to centring the experiences of people who use drugs and elevating local, Indigenous and rural voices.

Accordingly, we are planning the following steps to minimise our environmental impact:

- We will point delegates to tools to help with selecting the 'greenest' airlines for your trip.
- Our venue, the Melbourne Convention Exhibition Centre, sources all of their food from within a 100-mile radius of the Centre.
- Our food will be 100% vegetarian.
- We will partner with eco-certified hotels.
- We have built in an option, within our registration system, where delegates can calculate, and then offset, their flight's carbon footprint, with 100% of the funds received going directly to one of the projects listed under Australia's Carbon Project Registry.

Governance: Our Board of Trustees

Harm Reduction International is governed by a board of trustees under a foundations model of governance, in which the directors are also the members of the organisation. Board appointments are made by resolution of the board itself.

Members of the board of directors also serve as trustees of Harm Reduction International, in compliance with the Charity Commission for England and Wales.

Our board of trustees as of 31 December 2020 were:

-
- Ms Lucy Burns ^(Chair)
 - Ms Saumya Kailasapathy ^(Vice Chair)
 - Mr Ivan Varentsov ^(Secretary; Chair for the period June – November 2020)
 - Ms Patricia Haddad ^(Treasurer)
 - Prof. Patrick O'Hare
 - Ms Olga Belyaeva
 - Prof. Alex Stevens
 - Dr. Kojo Koram

Our Donors

In 2020, Harm Reduction International benefitted from the supported of:

- Open Society Foundations
- European Commission
- The Robert Carr Fund for Civil Society Networks
- Elton John AIDS Foundation
- The Global Fund to Fight AIDS, Tuberculosis and Malaria
- The Federal Office of Public Health, Switzerland
- The Global Partnership on Drug Policies and Development implemented by the Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) on behalf of the Federal Ministry of Economic Cooperation and Development (BMZ).

This is in addition to collaboration and partnerships with UNAIDS, the World Health Organization, and the UN Office of Drugs and Crime.

