



Advances & Opportunities for Harm Reduction in Europe

In 2015 AVERT reported that 5.1 million individuals that live in Western & Central Europe and North America are living with HIV, from this total 44% live in Western & Central Europe. Modes of transmission vary greatly between countries. For example, in 2014, MSM accounted for 44% of new HIV diagnoses in Western Europe and 28% in Central Europe. By comparison, PWID accounted for 5% of new HIV infections in Central Europe and 3% in Western Europe (Surveillance Report: HIV/AIDS Surveillance in Europe 2014). Prevalence has remained fairly stable and this is due to the significant scale up of harm reduction programmes in these regions however in countries where Harm Reduction is not promoted we see that between 2010 and 2013, HIV prevalence among PWID in Romania increased from 3% to 29% (**UNGASS 2013 Romania Country Progress Report on AIDS**).

The purpose of my presentation therefore is to identify the advances and opportunities to scale up harm reduction in Europe today because where prevalence remains stable it is neither decreasing and where prevalence is increasing attention needs to be paid rapidly. This presentation will attempt to include the promotion of inclusive collaborative working relationships with drug user networks and professional bodies interested in endorsing the Harm Reduction Agenda in their countries and committing themselves towards supporting breaking down the inherent stigma towards our drug using populations to effectively further promote innovative and forward thinking Harm Reduction policy & practice across Europe today (<http://www.aidsmap.com/Peer-led-network-intervention-substantially-lowers-HIV-infections-in-people-who-use-drugs-in-Ukraine/page/2987841/>)

I chose to carry out this presentation firstly because EuroNPUD are committed towards protecting the health and promoting the rights of people who use drugs and secondly because although never published a study that was carried out in the UK 5 years ago (COACT) were able to quantify that 80% of a cohort of drug users interviewed in the study stated that they were more honest about their drug use when working with drug users thereby validating the fact that by including the voice of the experts we can push for more realistic, robust and appropriate drug policy reforms (**Nothing About Us Without Us - 2008 Canadian HIV/AIDS Legal Network, International HIV/AIDS Alliance, Open Society Institute**).

The methods used to conclude some of my findings comprised of visiting 4 countries across Southern Europe and visiting their drug user networks, meeting the members, visiting the local harm reduction services where collaborative working relationships had been established and the Peer To Peer Model implemented, discussing the current harm reduction interventions and treatment available locally with PWUD's, paying specific attention to trends, women & children, those working in the sex industry, dealers and NPS's. I also attended drug user network meetings and discussed gaps in service provision, identified where the networks have been able to make positive contributions towards prevention, education, policy reform, collaboration, advocacy and campaigning, we also spoke at length about the role of EuroNPUD in bringing "*the voice of drug users*" to Civil Society Forums (**Civil Society**

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Forum on Drugs - Proposal to the EU Member States and the European Commission for Inclusion in the new EU Drugs Strategy and Action Plan: https://efus.eu/files/2012/05/CSF-drugs_recommendations_final_March2012-1.pdf), the UN and EMCDDA as there is a general feeling that Europe has been forgotten about (“The role of peer drug users’ social networks and harm reduction programs in changing the dynamics of life for people who use drugs in the downtown eastside of Vancouver, Canada”. [Jozaghi, Ehsan](#), (Dissertation) Ph.D.).

I also met with numerous professionals during these visits and discussed stigma and the real adverse role that it continues to play in many European countries, the effects of the Decriminalisation Model, career development pathways for PWUD’s, a critical overview of harm reduction policy & practice in Europe as a mapping exercise to push for pan European reforms and the interesting results still to be accrued when the Transnational Activity that the Southern Countries are engaged in will be completed. This activity includes interviewing a cohort of 30 PWUD’s in each country and will collect their local views on current harm reduction practice.

This presentation will aim to provide an overview of the general harm reduction approaches implemented, an outline of advances being made in harm reduction, opportunities that still need to be embraced, areas for drug policy reform and the role of advocacy in promoting the harm reduction agenda.

The presentation will then conclude describing the results found which include the role of stigma and its adverse effects on PWUD’s, the fact that the lack of funding is inhibiting advancements in harm reduction which has wider public issues that need to be considered, the important role of peer support, psycho/social interventions must not be overlooked and replaced with medication, and then the important role of collaborative working relations.

My research has led me to the conclusion that any opportunities or advancements in harm reduction will not be successful without engaging drug user networks and establishing collaborative working relationships that support the community from a public health perspective and support innovative harm reduction advances that will benefit the drug using communities “Peers are instrumental in not only increasing health care services for a very marginalized population who normally do not try to get access to health care services and prevention programs. But these peers are also increasing the voice of marginalized peoples in the DTES. It’s a very effective method of health care delivery for this community.” (<https://www.sfu.ca/criminology/newsandevents/criminology-news/ehsan-jozaghi-successfully-defends-dissertation.html>)