

INPUD



International Network of People who Use Drugs



Annual
Report 2020

“ ... self-empowerment, self-representation, and the need for the meaningful input of people who use drugs into the decisions that affect our lives.”

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In Loving Memory of Jude Byrne



INPUD's 2020 Annual Report is a celebration of the incredible accomplishments our network has achieved this past year. The groundwork for this work was laid down fifteen years ago by the original founders of INPUD, including Jude Byrne, who represented the passion and drive for this vision as well as anyone and to whom INPUD dedicates this Annual Report.

Jude was a fearless advocate for people who use drugs over a career spanning decades, holding numerous roles with the Australian Injecting and Illicit Drug Users League (AIVL) and serving as a board member of the International Network on Health and Hepatitis in Substance Users. As an activist she was determined and authentic, always one to hold others accountable and never one to stay silent if something needed to be said. The impact of Jude's work cannot be understated; lives were saved both through her direct action and her advocacy work. Her legendary work in Australia was recently celebrated in INPUD's *Taking Back What's Ours* documentary series.

Globally, Jude served as a community representative for people who inject drugs on international forums and was acting Chair of the INPUD Board for close to a decade. Jude had a way of cutting right to the heart of any issue and was unafraid to be direct to the people who stood in the way of her advocacy work. She was fearless in demanding a seat at the table for people who use drugs in the decisions which affect their lives and was particularly determined to advocate on behalf of women who use drugs in these settings. Outside of activism Jude was an extraordinary woman, mother, grandmother, partner and friend. Anyone who has met Jude could tell a positive story about her. While strongly opinionated, Jude was also a great listener committed to understanding diverse perspectives. The sheer amount of tributes to Jude shared over the last few months from all over the world are an incredible testament to how many people she impacted.

All of INPUD's work, including the accomplishments listed in this Annual Report, emulates Jude's vision for a global movement of drug user activists which unites our diverse communities through a shared lived experience. We pledge to carry on the work which Jude has left for us, fighting for the future she dreamed of where people who use drugs are respected and free to live our lives in dignity.

Rest in peace, Jude

About Us

The International Network of People who Use Drugs (INPUD) is the international organisation representing issues of global significance for people who use drugs.

INPUD was first conceived at the International Harm Reduction Conference (IHRC) in Belfast in 2005. At the IHRC in Vancouver in 2006, drug user activists developed the founding statement of INPUD – the Vancouver Declaration, which emphasises self-empowerment, self-representation, and the need for the meaningful input of people who use drugs into the decisions that affect our lives. In 2015, a review recommended a shift to a membership and governance structure based on regional organisations and networks, and this change was formally adopted the same year at INPUD's Annual General Meeting.

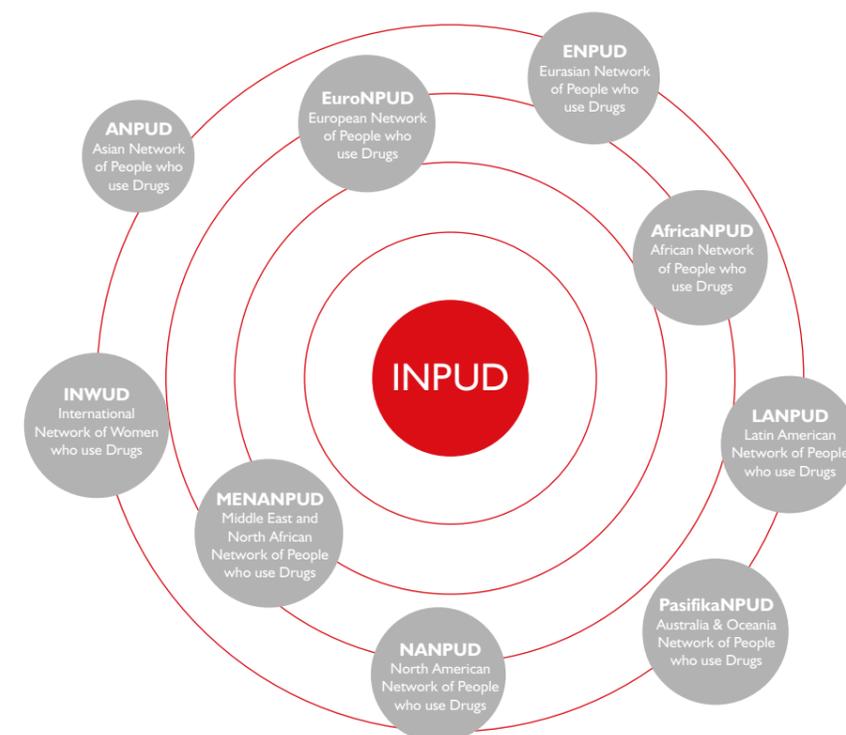
INPUD now works with and through regional networks and the International Network of Women who Use Drugs (INWUD) to achieve common aims and objectives. All member organisations are required to endorse and support the values and principles within the Vancouver Declaration and our Consensus Statement on Drug Use under Prohibition – Health, Human Rights and the Law.

Alongside INWUD, INPUD's current members are the Asian Network of People who use Drugs (ANPUD), European Network of People who use Drugs (EuroNPUD), Eurasian Network of People who use Drugs (ENPUD), African Network of People who use Drugs (AfricaNPUD), Latin American Network of People who use Drugs (LANPUD), Australia & Oceania Network of People who use Drugs (PasifikaNPUD), North American Network of People who use Drugs (NANPUD), and the Middle East and North African Network of People who use Drugs (MENANPUD).

The Secretariat, which is registered in the United Kingdom, works on policy and advocacy, programmes, finance and administration, and management.

INPUD is governed by its Board of Directors, which represents the eight regional member networks and INWUD. These Directors are elected by the regions, are responsible for the stewardship of INPUD, and accountable to the Boards or Steering Committees of their respective networks.

Fig. 1 Visualization of INPUD's structure



“...people who use drugs have the right to be treated with dignity and respect.”



INPUD's Vision

A world where people who use drugs are free to live their lives with dignity.



INPUD's Mission

INPUD is a global peer-based organisation that seeks to promote the health and defend the rights of people who use drugs by highlighting and challenging stigma, discrimination, and the criminalisation of people who use drugs through processes of empowerment and advocacy at the international level, while supporting empowerment and advocacy at community, national, and regional levels.



INPUD's Principles

- **Pro drug user rights:** people who use drugs have the right to be treated with dignity and respect and to live their lives free from discrimination, stigma and health and human rights violations.
- **Pro self-determination and self-organising:** people who use drugs are best placed to represent their own interests and the network will champion the prioritisation of people who use drugs in consultation and advocacy processes.
- **Pro harm reduction and safer drug use:** Harm reduction services should be available and accessible to all people who use drugs, which includes information on safer drug use strategies.
- **Respecting the right of people to take drugs:** We take a non-judgemental, rights-affirming approach to drug use, and believe people who use drugs have the right to be treated with dignity and respect.
- **Anti-prohibitionist:** We are committed to achieving fundamental drug policy reform, including the full decriminalisation of drugs without sanctions as an intermediate reform on the path to INPUD's goal of legalisation of all drugs.
- **Pro equality:** INPUD's organisational philosophy is based on the principles of self-determination, equity, and social justice.



INPUD's Goals:

An end to drug prohibition, the legalisation of drugs, and the protection of the human rights of people who use drugs.

Effective prevention, treatment, care and support for people who use drugs who are living with or affected by HIV, viral hepatitis, TB and other relevant health issues.

Universally available, low-threshold harm reduction to support safer drug use and reduce drug-related harm among people who use drugs.

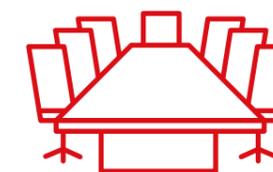
Self-determining networks of people who use drugs that advocate for their own health, citizenship and human rights.

Structure and Governance



Secretariat

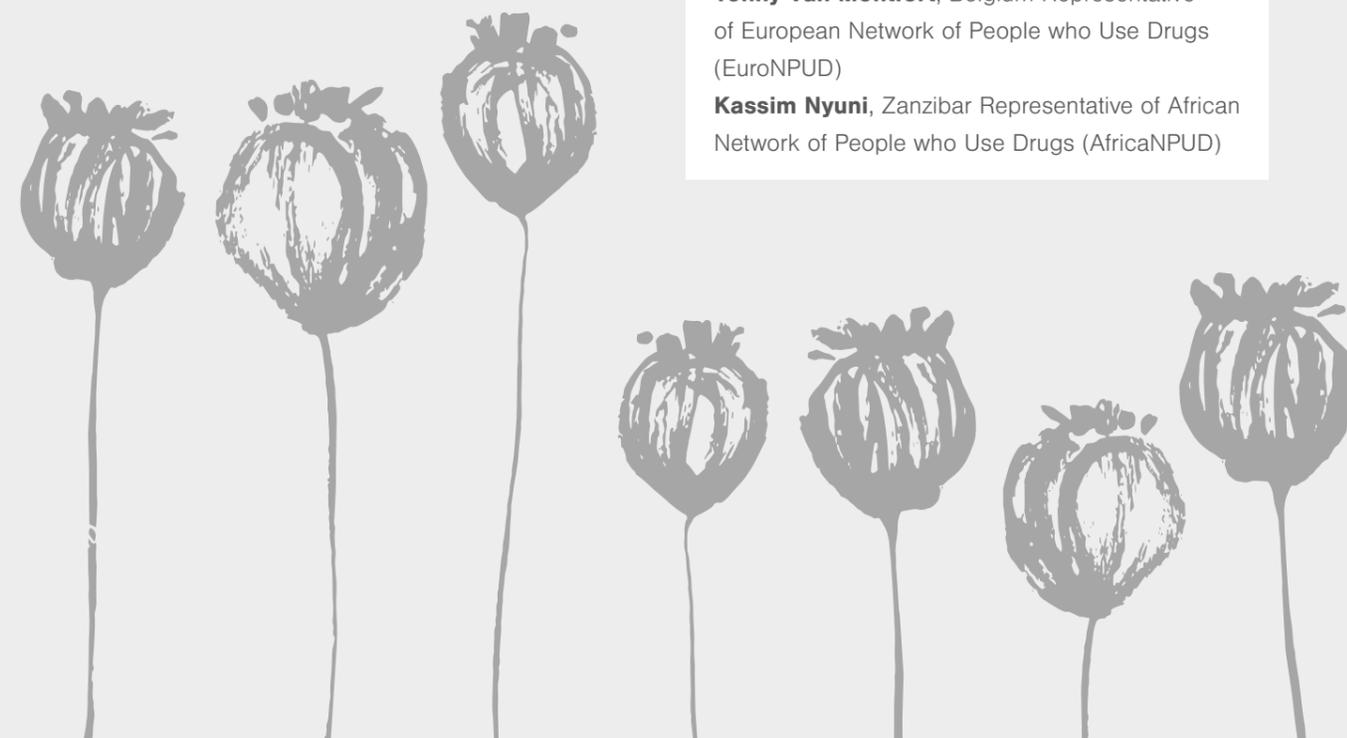
- Judy Chang**, Executive Director
- Taiwo Ademola**, Admin Programme Officer
- Jake Agliata**, Policy and Communications Officer
- Tina Chkhaidze**, Finance Officer
- Mauro Guarinieri**, RCF Consortium Coordinator
- Kim Jackson**, Office Manager
- Mick Matthews**, Technical Consultant
- Valentin Simionov**, Programmes Coordinator



Board of Directors

- Geoffrey Ward**, Australia (Chair) Representative of Pasifika Network of People who Use Drugs (PasifikaNPUD)
- Louise Beale Vincent (Vice Chair)**, United States Representative of North American Network of People who Use Drugs (NANPUD)
- Hasan Taraif (Treasurer)**, Bahrain Representative of Middle East and North African Network of People who Use Drugs (MENANPUD)
- Happy Assan**, Tanzania Representative of International Network of Women who Use Drugs (AfricaNPUD)
- Binod Gurung**, Nepal Representative of Asian Network of People who Use Drugs (ANPUD)
- Anton Basenko**, Ukraine Representative of Eurasian Network of People who Use Drugs (ENPUD)
- Jane Marie Dicka**, Australia Representative of Pasifika Network of People who Use Drugs (PasifikaNPUD)
- Tonny Van Montfort**, Belgium Representative of European Network of People who Use Drugs (EuroNPUD)
- Kassim Nyuni**, Zanzibar Representative of African Network of People who Use Drugs (AfricaNPUD)

“INPUD's organisational philosophy is based on the principles of self-determination, equity, and social justice.”



COVID-19 RESPONSE

In 2020 the COVID-19 pandemic disrupted life as we know it, forcing us to adjust to new realities under lockdown conditions that all too often left people who use drugs behind and at increased risk of harm.

The pandemic exposed the brittleness of our health and support systems, while many of the services and programmes which people who use drugs have come to rely on were closed, defunded or made inaccessible. Peers faced an increased threat of criminalisation under lockdowns and were too often forced into situation which left them with a high risk of exposure to the virus.

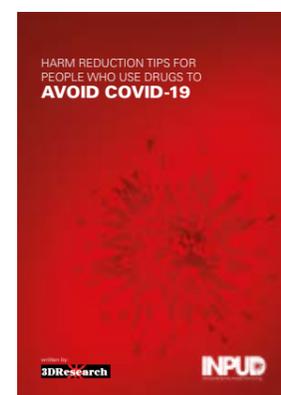
Despite these incredible challenges, peers stepped up in unprecedented ways during the pandemic by providing essential care and services to meet the needs of communities where the state was absent and continuing to run service delivery and programmes despite the enhanced risks. Drug user led advocacy resulted to reforms long championed by the community, such as take-home OAT doses and even decriminalisation of drug use.

INPUD's immediate response to the pandemic was to form a working group of peers across the world to advise us on the situation on the ground in their countries and to help us formulate a plan to address COVID-19 at a global scale. The COVID-19 working group determined the best things INPUD could do are monitoring and reporting on the health and rights of people who use drugs under lockdown environments, providing harm reduction resources to peers and service providers, engaging in global advocacy to demand people who use drugs were not left behind and overall amplifying the voices of people who use drugs during this crisis.

Harm Reduction Resources for People who Use Drugs

Once the seriousness of the pandemic became evident, INPUD collaborated with the UN Office on Drugs and Crime (UNODC) to [issue guidance to countries on COVID-19 and harm reduction](#). This technical guidance was important in providing early advice on how harm reduction policies programmes should adapt to protect to health of people who use drugs during the pandemic.

INPUD also worked with regional and country level partners along with the COVID-19 working group to ensure peers had access to harm reduction guidance which would be critical during lockdowns. We collated any information we could find on using drugs safely during lockdown on a [hub page on the INPUD website](#), with a section both for people who use drugs and another for harm reduction service providers. This page included harm reduction tips to follow in lockdown situations as well as news on COVID-19 specific funding opportunities.



In partnership with 3D Research, we [developed several leaflets](#) containing comprehensive harm reduction tips for people who use drugs during COVID-19. These four sets of guidelines covered: tips for drug users to avoid COVID-19, advice for heroin/opioid users, tips for people selling drugs and tips for people buying drugs. We also developed a [similar leaflet in collaboration with EuroNPUD](#) which could be customised to include national or local information on the availability of harm reduction services during the pandemic. Both sets of leaflets were translated into multiple languages.

Health & Rights of People who Use Drugs in a Pandemic Environment

During the pandemic INPUD committed to supporting the community by collecting and reporting on information detailing the experiences of people who use drugs. [This peer-driven research](#) sought to understand how people who use drugs experience from COVID-19 induced disruptions, document and monitor human rights violations experienced by people who use drugs and to capture the adoption of responses which addressed the needs of people who use drugs in order to inform advocacy and protect these gains in a post-pandemic environment. To collect this information INPUD ran an open survey translated into English, Russian, Italian, French, Spanish, Hindi and Portuguese. The survey questions were developed in collaboration with the COVID-19 working group, who suggested questions and metrics which would be important to capture in this research. The survey ran through two phases



Peers stepped up to provide their communities which much needed supplies during the pandemic.

of data collection – one in May and another from June through July - to examine whether any changes occurred in the time between responses. A total of 290 respondents from 52 countries completed one or both surveys.

Our reports found troubling responses by peers regarding how the pandemic has disrupted their lives:

- Due to lockdown measures many harm reduction and health services were forced to close or halt service delivery, leaving peers without access to safe injecting equipment, naloxone and other critical harm reduction supplies.
- Peers reported lack of access to personal protective equipment (PPE), stemming from a weak state response to keeping communities informed on where to acquire materials.
- Lockdown measures increased the threat of police violence in many communities.
- Many countries saw an increase in overdoses due to disruptions in supply chains further decreasing safe supply of drugs, lack of access to naloxone and increases in people using alone.

The reports were not without optimism, however. Peers reported feeling inspired by seeing how others have banded together and mobilised to help others in their community. Additionally, a few communities saw decreased policing, including *de facto* decriminalisation of drug use in some jurisdictions, and efforts to release people who were incarcerated from prison settings. Countries such as Nepal and Ukraine adopted take-home opioid agonist treatment (OAT) policies in recognition that the previous rules were not working or suitable in a pandemic environment, while in Canada local ordinances declared harm reduction services as essential and worked with providers to ensure people who use drugs still had access to harm reduction resources. Additionally, the city of Vancouver, Canada and the US state of Oregon both passed legislation decriminalising drug use. In Vancouver, advocacy efforts drew on points raised in our 2018 report on decriminalisation in Portugal.

Facilitating the exchange of experiences between communities in different countries coping with the COVID-19 pandemic is a key piece of INPUD's pandemic response, informing much of our advocacy throughout the rest of the year and continuing into 2021. Our survey reports were cited by UN and other international institutions, along with civil society, during the pandemic. Notably, UNAIDS drew on data from our research in a [report on COVID-19 and key populations-focused HIV programming](#).

INPUD would like to recognize the work of Annie Madden, who authored both reports, and the other members of our COVID-19 working group who were instrumental in designing, disseminating, translating and analyzing the survey.

COVID-19 Small Grants

INPUD received reports from all over our member networks of how the pandemic and subsequent lockdown measures have immensely disrupted the ability of peer-led networks to continue providing essential harm reduction or health services to people who use drugs. With government responses largely overlooking or ignoring people who use drugs, ensuring these networks had resources and funding to carry out their work became critical. In response to this problem, INPUD reprogrammed existing funds and launched a small grant program, under the support from the Robert Carr Fund, to help communities and peers at the grassroots level. Applicants were eligible for a grant of up to \$5000 (USD) and were identified in close collaboration with our regional partners.

In total we were able to assist 13 grantees across 12 countries (Russia, India, Sweden, Nigeria, Slovenia, Italy, Spain, Greece and Indonesia) and regions (Middle East and North Africa, North America). Some of what was made possible because of this funding include:

- Approximately 758 people received personal protective equipment (PPE), food bags and harm reduction equipment.
- Assistance - Siberia was able to provide 65 people with food packages and transport to locations where they could receive treatment for AIDS.
- Brukarforeningen Stockholm provided 50 food packages to members of the community.
- Organisations in Russia collectively provided over 90 community members with continuous therapy for HIV infections, PPE, food packages and educational resources and support.
- The Italian Network of People who Use Drugs (ItaNPUD) provided 18 communities with education and provisions of methadone.
- In Nigeria around 1550 people benefitted from PPE and education on COVID-19.

This grant program has helped people who use drugs left behind by the pandemic response receive concrete tools and resources to survive in a COVID-19 environment in spite of inadequate and insufficient funding from local and national institutions. Through these activities, grantees were able to fulfill their core objectives to provide aid and care for the communities they serve.

Publications and Advocacy during COVID-19

During the pandemic INPUD secretariat members authored peer-reviewed articles in academic journals discussing the impact of the pandemic on people who use drugs. We also co-authored and signed onto advocacy statements calling on international agencies and decision makers to not let the needs of people who use drugs during the pandemic be forgotten.

In the time of COVID-19: Civil society statement on COVID-19 and people who use drugs

This statement directed at global decision-making bodies and UN member states, endorsed by over 300 organisations and individuals, was developed by INPUD in collaboration with the International Drug Policy Consortium and Harm Reduction International. Available in English, Russian, French and Spanish. As a result of this advocacy the UNODC released [global guidance on COVID-19 and people who use drugs](#) and the UN Expert on the Right to Health [released a statement](#) detailing guidance to member states on how to effectively protect the health of people who use drugs during the pandemic.

COVID-19: Enacting a 'New Normal' for People who Use Drugs

This commentary in the International Journal of Drug Policy presents a set of recommendations to UN agencies, governments, donor agencies, academics, researchers and civil society, challenging these actors to work alongside people who use drugs to enact a new reality based on solidarity and cooperation, protection of health, restoration of rights and dignity and most importantly to mobilise to win the peace. The commentary, authored by three members of the INPUD secretariat, was the most downloaded IJDP article for consecutive months in 2020 and was listed as required reading for the John Hopkins Master of Social Work postgraduate program.

COVID-19, HIV and key populations: cross-cutting issues and the need for population-specific responses

Key populations at elevated risk to contract or transmit HIV may also be at risk of COVID-19 complications and adverse outcomes associated with public health prevention protocols. This commentary, written in collaboration with other Key Population Networks, identifies

common vulnerabilities and cross-cutting themes in terms of the impacts of COVID-19 on key populations. It explains human-rights approaches to COVID-19 emergency laws and public health prevention measures that are population-specific are key to ensuring no one is left behind.

Joint letter to the Special Rapporteur on the right to the highest attainable standard of physical and mental health on protecting and promoting the health of people who use drugs during COVID-19

In collaboration with peer-led networks and other civil society organisations engaged in global harm reduction advocacy, we developed this letter to the Special Rapporteur on the Right to Health to provide guidance to states on how to promote and protect the right to health of people who use drugs in responding to the COVID-19 pandemic. The letter elicited a [response by the Office of the High Commissioner on Human Rights](#), who released a statement written by the UN Special Rapporteur on the right to health and endorsed by several other UN Special Rapporteurs and treaty mandate holders.

Joint Civil Society Letter on 2021 UN Treaty Bodies Reviews in the Context of COVID-19

INPUD joined over 500 civil society organisations in expressing our demand to maintain the function of UN Treaty Bodies during the COVID-19 pandemic. We urged the Treaty Bodies and their Secretariats to schedule State reviews no later than 2021, and OHCHR to prioritise resources and tools for this.

Information Note for Communities on the Global Fund COVID-19 Response Mechanism

When the Global Fund announced they had authorized \$500 million for a COVID-19 Response Mechanism (C19RM), INPUD developed an information note, sample letters and other resources to help communities demand a piece of the budget. While communities were generally shut out of C19RM, one success story was in India where advocacy by communities led to \$10 million in dedicated funding for key populations.



#PeersInThePandemic Campaign

At the end of 2020, INPUD ran a [five-week, online campaign](#) built around advocating for five key policy reforms informed by our peer-led research on the effects of the pandemic on peers around the world. These demands were:

1. Declare Harm Reduction as Essential
2. Expand & Maintain OAT Take-Home Doses
3. Prioritise Peer-led Responses
4. NO to Punitive Measures in Harm Reduction
5. Act on Decriminalisation

#PeersInThePandemic amplified advocacy around each of these demands primarily using social media, each week of the campaign highlighting a different ask. Calls for action by members of the community and examples of peer-led advocacy on each issue were shared over social media with the goal of influencing advocacy for these peer-driven demands by the broader drug policy and harm reduction communities.

The campaign was a terrific way to end 2020 as it allowed us to act on many of the core issues faced by people who use drugs during the pandemic. INPUD was also able to exponentially grow our social media and online presence on Facebook, Twitter and Instagram, helping us reach new audiences and establishing external communication platforms which can be utilized in future advocacy work.

“ #PeersInThePandemic amplified advocacy around each of these demands primarily using social media...”

Highlights and Achievements

Community Mobilisation and Empowerment



When the International AIDS Society (IAS) decided to host their 2020 conference in the United States, it created a dilemma for key populations as the US continues a travel ban against people who use drugs and sex workers and under the then Trump Administration maintained many discriminatory immigration bans against Black and Brown communities. Tired of having the concerns and inputs of key populations repeatedly dismissed, an international group of stakeholders representing communities and key populations came together to organize an alternative event: HIV2020. This conference would be key population-led, inter-disciplinary and sex positive. INPUD was one of the core conference organisers along with the Global Network of People Living with HIV (GNP+), Mpact Global Action for Gay Men's Health and Rights (MPact), and the Global network of Sex Work Projects (NSWP).

Originally scheduled to be held in person in Mexico City, the COVID-19 pandemic forced a pivot to a virtual format which took place from July through October 2020. This ambitious, unprecedented plan for a virtual conference proved global conferences can be inclusive, diverse and impactful when run under the leadership of key populations. HIV2020 was the first conference which placed the experiences and voices of the people most affected by HIV at the center of the agenda, reaffirming the leading

role of communities in the global HIV response. People who use drugs were highly represented throughout the conference, organising and speaking on numerous panels, presenting works of art, and generally contributing to the overall conference discourse. In addition to INPUD, both LANPUD and ENPUD co-hosted virtual panel sessions while representatives from AfricaNPUD, NANPUD and SANPUD participated as speakers. In conjunction with Rights Reporter Foundation we also released our new documentary series, *Taking Back What's Ours*, as a 10 part series throughout the conference.

7,397
participants

132
countries represented

33
sessions in:
**English, Spanish, French,
Russian and Portuguese**

In total HIV2020 Online had a total of 7,397 participants from 132 countries who joined together for 33 sessions, all offered with simultaneous translation in English, Spanish, French, Russian, and Portuguese. All sessions were recorded as well for future audiences. The conference concluded with a plenary celebration on World AIDS Day in December 2020, where community members shared what they had learned and shared strategic recommendations for strengthening the engagement and leadership of key populations and communities in the global response to HIV and AIDS.

HIV2020 Online was one of the brightest highlights within such a difficult year. To all the core conference organisers, key population network partners and all who participated in the conference, we cannot thank you enough for being a part of this powerful and historic event.



Taking Back What's Ours! An Oral History of the Movement of People who Use Drugs

Throughout the world drug user-led advocacy has achieved exponential growth over the last four decades, pushing to protect and defend the health and human rights of the drug using community and other people facing marginalisation in society. *Taking Back What's Ours: An Oral History of the Movement of People who Use Drugs* is a ten-part film series which captures the genesis and history of the global movement of people who use drugs, featuring interviews with peers and advocates undertaking critical work in their own communities. The series explores how they navigate this work within the context of criminalisation, stigmatisation and oppression. Each episode covers a different country or set of countries and are all free to view online. Released as part of HIV2020 Online and in collaboration with the Rights Reporter Foundation, this series is intended to be both a celebration of our history as well as a lesson for external audiences to better understand the richness and resiliency of this movement. During the end of 2020 several virtual screenings were organised at the University of Manchester, University College London, Central European University and West Virginia University. More screenings are expected to occur throughout 2021.

Countries and regions covered in the series include: Afghanistan, Asia, Belgium, Canada, Denmark,

Germany, Georgia, France, Mexico, The Netherlands, Norway, Russia, South Africa, Tanzania, Ukraine, United Kingdom and United States. The final episode also featured INPUD to show how all of this work ties together in global advocacy.

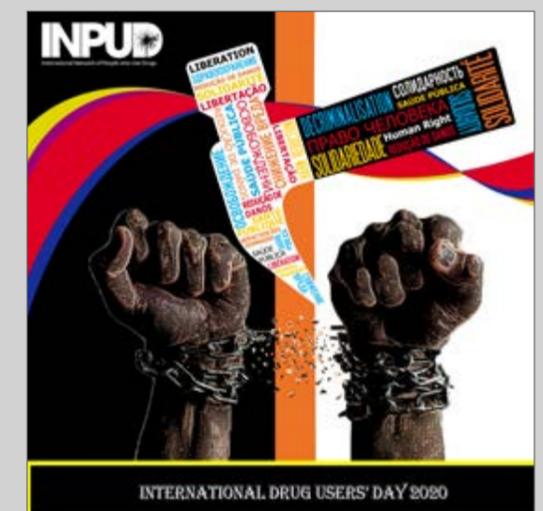


An accompanying research project titled *Taking Back What's Ours!* A documented history of the movement of people who use drugs was also published after all episodes of the series aired. This publication draws on accounts from 34 activists across the world to document the meanings that

people who use drugs attribute to the movement, the challenges and tensions they perceive working within and outside the movement, and strategies for affecting positive change. The report seeks to celebrate the movement's strength and resilience overcoming incredible challenges, and consider the lessons learned from a generation of pioneering activists that may inspire a newer generation to build upon their success.

International Drug Users' Day 2020

On 1 November INPUD and networks of people who use drugs around the world celebrated International Drug Users' Day, a moment for our communities to celebrate our history and affirm our rights. This year's day featured storytelling and recognition of the incredible work peers have done over the course of the COVID-19 pandemic to keep their communities safe, particularly where the government response has been inadequate. Our celebration was captured in a poster designed by Issac Ogunkola, a young drug user activist from Nigeria and winner of this year's poster contest.



Programming and Technical Assistance

Bridging the Gaps II 2016 - 2020

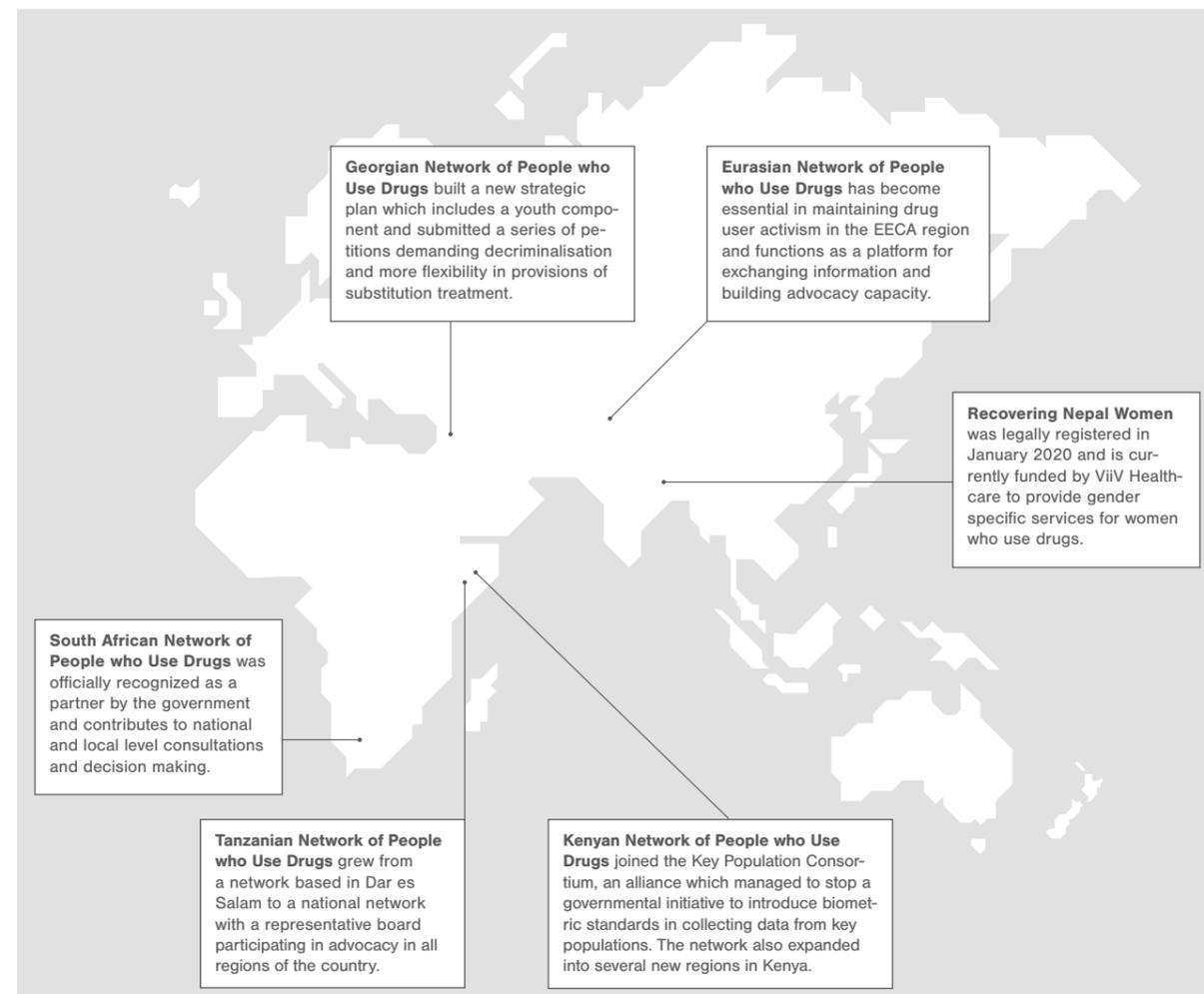
After five years the Bridging the Gaps II programme, funded by the Dutch Ministry of Foreign Affairs, came to a close in 2020. Funding from Bridging the Gaps allowed INPUD to facilitate the participations of peers in global level events and consultations while also increasing our capacity to provide technical assistance to regional and national network of people who use drugs. This took the form of in person and virtual trainings, small grants, and monitoring and evaluation visits which enhanced the visibility of drug-user advocacy and increased drug user representation in global decision-making mechanisms, such as the Commission on Narcotic Drugs and the Global Fund.

With assistance from INPUD some of the achievements of these networks are shown on the map below.

Global Fund CRG Strategic Initiative Project 2017 – 2020

INPUD engaged in a three-year project to build the capacity of people who use drugs at regional and national levels to meaningfully engage in Global Fund processes. We also aimed to build the capacity of people who use drugs to advocate on normative guidance such as the IDUIT in the development of Global Fund grants, as well as strengthen partnerships with other key population led networks.

INPUD's approach was to facilitate and maximise opportunities for people who use drugs to increase their engagement, knowledge and influence on Global Fund decisions. The project was implemented through a variety of methods including small grants, face-to-face and virtual technical support provided by INPUD's secretariat, developing briefing notes and country profiles which provided advice and guidance for submitting funding applications to the Global Fund.



Some of the achievements made by national and regional networks through this initiative include:

- ANPUD developed a guide to support people who use drugs engaging in Country Coordinating Mechanisms (CCM). They also supported the Indian Drug User Forum in gaining a seat on the India CCM and in advocating for a Key Affected Population Committee as a formal part of the Indian CCM structure.
- LANPUD gained recognition, strengthened their governance and financial management systems and are now partners in a Global Fund regional grant.
- ENPUD have members on CCMs in Kyrgyzstan, Kazakhstan, Belarus and Ukraine. In Ukraine, people who use drugs have been involved in the development of the Ukraine Transition Plan and in Belarus and Kazakhstan, they have been able to advocate for continuation of OAT. ENPUD also successfully launched their own small grants programme funded by the INPUD project.
- SANPUD have been successful in lobbying for increased funding for people who use drugs within the South African Global Fund grant and have been successful in becoming sub recipients of a Global Fund grant themselves.
- KeNPUD have gained a seat for people who use drugs on the Kenyan CCM. They held a community consultation on the use of Biometrics for data collections and were able to persuade the Kenyan Government to seek other ways to collect data.
- Empower Cameroon is a Global Fund Sub-Sub-Recipient and alternate member of the Cameroon CCM. They are also partners in the PEPFAR Continuum of Prevention, Care and Treatment of HIV/AIDS with Most-at-risk-Populations in Cameroon (CHAMP) project delivering services to people who use drugs.
- Burundi and Senegal have people who use drugs represented on their respective CCMs.

Through this project we have significantly raised the profile and visibility of people who use drugs within Global Fund processes at national, regional and global levels. While the project has come to an end, a new three year CRG-SI programme will begin in January 2021. We intend to build on the progress of the last three years during this next three year phase.

NGOInABox



NGOInABox contains a series of open access resources intended to assist community and civil society networks establish good governance systems and practices which can be freely downloaded and adapted as needed. These resources cover a range of topics such as setting up Board & staff policies, articles of association, risk management, codes of conduct and many other materials necessary to help a new organization or network get started. We hope this resource can help facilitate the development and growth of more networks of people who use drugs all over the world. The project was undertaken with the support of the Robert Carr Fund and done alongside the People who Use Drugs Consortium (INPUD, AfricaNPUD, ANPUD, ENPUD and SANPUD), the Harm Reduction Consortium and Graham Shaw Consulting Ltd.

“NGOInABox contains a series of open access resources intended to assist community and civil society networks establish good governance systems and practices...”

Advocacy and Campaigning

Engaging in Cross-sector Partnerships

INPUD continues to hold seats in global advocacy forums, working groups and committees where we amplify the voices and advocacy of people who use drugs. These can be roughly divided into two categories:

Forums on drug policy, human rights and harm reduction:

- UN Office on Drugs and Crime – Civil Society Working Group on Drug Use and HIV (UNODC-CSO)
- Strategic Advisory Group to the United Nations on HIV and Drug Use (SAG)
- UN Working Group on Arbitrary Detention

And forums on HIV and other key populations:

- UNAIDS Global HIV Prevention Coalition
- Global Fund Community Rights and Gender (CRG) Advisory Group
- International Network on Hepatitis in Substance Users - International Program Committee (INHSU)
- UNAIDS Steering Committee for 2025 Target Setting, Impact and Resource Needs
- WHO Working Group on Viral Hepatitis and Drug Use

Not only does our presence allow us more access to the decision-making process of these forums but allows us to be a conduit for regional and national networks of people who use drugs to raise points and participate in these groups. For example, the UNODC-CSO has made seats available for nearly all of our regional networks. Additionally, the Asian Network of People who Use Drugs, Eurasian Network of People who Use Drugs, and the International Network of Women who Use Drugs also have seats on the SAG.

WHO International Standards on the Treatment of Drug Use Disorders

Over the last three years INPUD has been submitting propositions to improve the International Treatment Standards to the WHO and UNODC, including meeting with heads of department in each agency. Much progress has been made to improve the Standards during this time, including recognition that harm reduction is necessary in any treatment model, that drug treatment should be voluntary and consensual, and that peers play a critical role in programme design and delivery. We have also succeeded in removing all references

to the 'brain disease' model, stigmatising language and assumptions about people who use drugs and provisions around expulsion of people from treatment programmes for continued drug use.

During the 63rd Commission on Narcotic Drugs we participated on a WHO side event launching the Standards, represented by Angela McBride from SANPUD. We also participated in a meeting with the UNODC organised by, and attended by, community representatives who continued to advocate for improvements to the Standards. There remains work to be done as the Standards continue to insist on an abstinence-only approach and still employs some stigmatising language. However, we believe limited progress made on these Standards is better than none.

63rd Commission on Narcotic Drugs

Despite travel limitations, and the usual barriers to granting UN access to people who use drugs, we were proud to have a strong peer presence at the 63rd Commission on Narcotic Drugs (CND). Nearly twenty representatives from our partner networks joined three members of INPUD's secretariat at CND this year, making it one of our strongest years in terms of drug user representation to date.

As with last year we held a day long capacity building training for peer representatives before CND. This was an opportunity to strategise for the week ahead by reviewing the CND schedule, picking out opportunities for engagement, mapping out country delegations we could influence, and aligning our message to most effectively advocate for the needs of our community. This meeting helped set the tone for our delegation over



Above: INPUD held a pre-CND consultation for community representatives

“ ... INPUD was able to provide support for 13 people who use drugs to attend the 62nd Commission on Narcotic Drugs...”

the rest of the week, as we resolved to get recognition from member states about the importance of including people who use drugs in harm reduction interventions and overall drug policy discourse.

One of the major highlights of CND for us this year was the side event, “Communities At the Centre: Barriers and Opportunities for Community-Led Interventions” organised alongside Switzerland, the UNODC HIV/AIDS Section, the Office of the High Commissioner for Human Rights, and the International Drug Policy Consortium. The panel provided an opportunity for members of our delegation to state the importance of our involvement and leadership in harm reduction interventions as well as drug policy reform and decriminalisation. Mick Matthews of INPUD and Happy Assam of TaNPUD both spoke during the event, demanding an end to the stigma and discrimination which gets in the way of designing effective community-led health and harm reduction programs. Their statements can be read on the CND blog.

Additional peer contributions to CND this year included:

- Angela McBride of SANPUD sharing criticisms on the WHO International Standards for the Treatment of Drug Use Disorders during a side event.
- David Subeliani of ENPUD discussing new psychoactive substances in Eastern Europe and Central Asia, sharing a research project undertaken by peers in Georgia to better understand how harm reduction services can be adapted to the needs of people who use drugs.
- INPUD's Executive Director, Judy Chang, speaking on a side event discussing gender equality in HIV prevention and the lack of health services for women who do not feel comfortable disclosing their drug using status.
- Kassim Nyuni of AfricaNPUD speaking on a side event on East African regional policy on prevention, management and control of substances, using the opportunity to emphasise the importance of meaningfully engaging nation drug user networks.

Finally, INPUD and many of our peer delegation members attended an all-day meeting on the final day of CND with the UNODC Civil Society Organisation group, an opportunity for INPUD and regional networks to obtain updates on the annual workplan of UNODC HIV/AIDS Section (HAS) and provide inputs.

Global AIDS Strategy 2021 - 2026

The new Global AIDS Strategy developed by UNAIDS will have significant impacts on the global HIV/AIDS response, including funding for peer-led programming. As part of the consultative process for the strategy, INPUD held a focus group for people who use drugs in August 2020 to collect suggestions from the community on how to most effectively make the strategy work for key populations. During the consultation peers shared grassroots experiences from working in HIV prevention and advocacy, and made clear that the next Global AIDS Strategy must place the people most harmed by HIV/AIDS at the centre of the response. Our key inputs into the strategy were:

- Act on decriminalisation as a necessary step towards addressing stigma, discrimination and limited access to services.
- Work to break down the social and structural barriers to health for people who use drugs and other key populations.
- Ensure people most affected by HIV/AIDS, including people who use drugs, are meaningfully involved in the response.
- Direct funding towards community- and key population- led programming.

Utilising our seat on the UNAIDS Steering Committee on 2025 Target Setting, INPUD also advocated for the inclusion of targets related to social enablers of HIV in the new strategy. The inclusion of such targets would mean, for the first time, that countries will have to report against the extent they moved towards decriminalisation, reduced stigma and discrimination and gender equality.

“The inclusion of such targets would mean ... countries will have to report against the extent they moved towards decriminalisation, reduced stigma and discrimination and gender equality.”

Despite strong resistance from some member states, we are pleased that the new strategy reflects our key advocacy points and includes these strong social enabler targets:

- Less than 10% of countries have punitive laws and policies
- Less than 10% of people experience stigma and discrimination
- Less than 10% of people experience gender inequality and violence

The Strategy also targets that 95% of people living with HIV will have access to treatment, 90% of people who inject drugs will have access to needle and syringe programmes and 75% of people who inject drugs will have access to harm reduction services. It also raises the targets on OAT access for people who inject drugs up to 50%. The Strategy further emphasises the importance of funding community-led responses, with new targets of 30% of testing and treatment services and 80% of service delivery programmes to be delivered by community-led organisations.

We feel the new Global AIDS Strategy is the strongest strategic plan ever conceived by a UN body, and believe it can serve as a useful advocacy and monitoring tool for national and regional networks of people who use drugs moving forward.

Global Fund Strategy Development

In 2020 The Global Fund launched an open consultation for input into their new strategy, providing an opportunity for people who use drugs to contribute to the development. The new strategy will take the Global Fund beyond 2023 and will align with the 2030 Sustainable Development Goals. To help as many people as possible contribute to the consultation, INPUD developed resources for peers to submit inputs to the Global Fund based on the structure of their consultation. This helped us give a coordinated response from multiple regional and national perspectives. Some of the key points we emphasised include:

- Strengthening community-led responses and rights-based programming for people who use drugs.
- Addressing the structural barriers, such as criminalisation, which prevent access to health and the fulfilment of human rights.
- Addressing health inequalities around the world and across key populations.
- Ensuring the meaningful involvement of people who use drugs in development, implementation, management and evaluations of policies and programming.
- Funding community-led responses through directly entering into multi-year service agreements with community-led organization.

The Global Fund strategy development process will continue through 2021, and INPUD will continue to bring our community together to influence this important process.

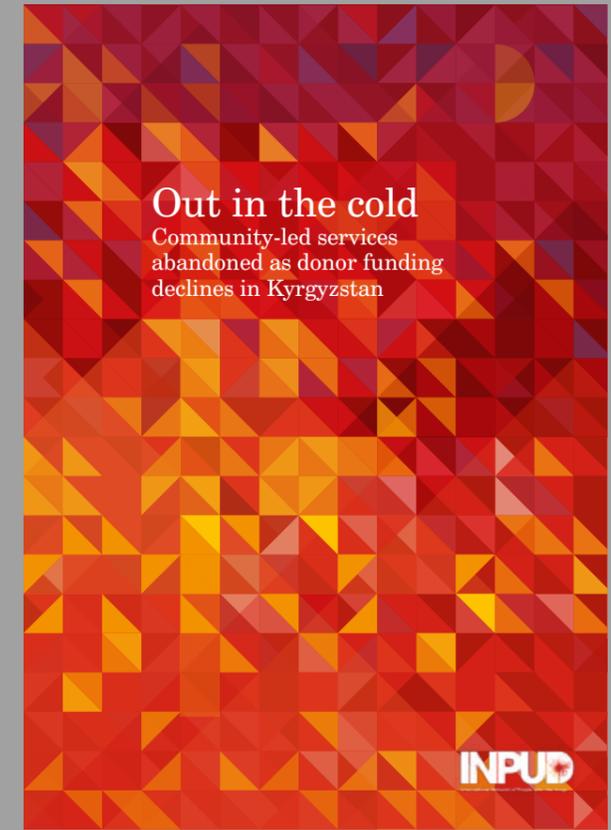
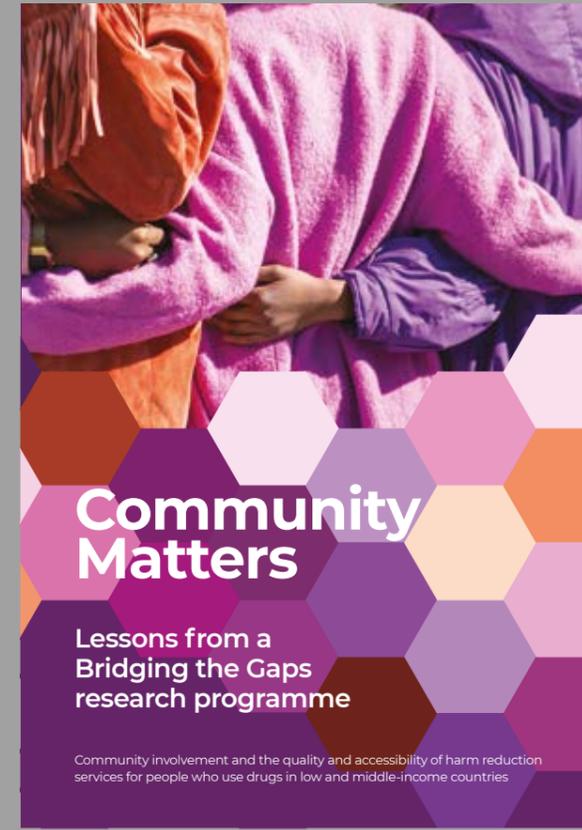
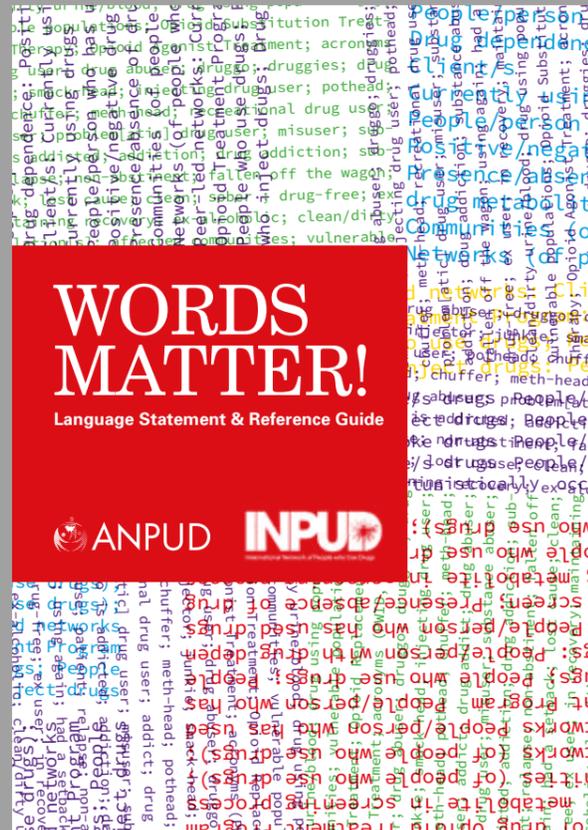
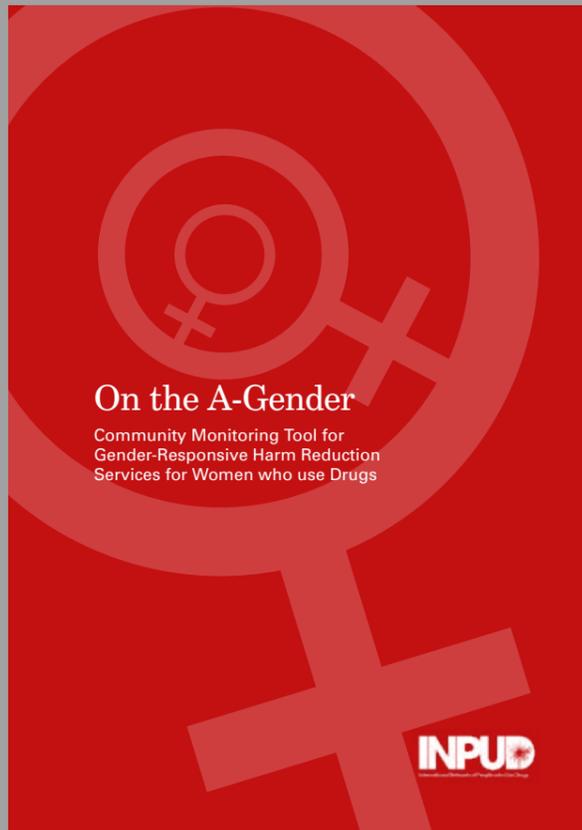


Community Values and Preferences Study on HCV Self Testing

Hepatitis C self-testing (HCVST) is among the innovative strategies which can be utilized by people who are unreached by conventional testing approaches, including people who use drugs in low- and middle-income countries. INPUD co-led a global values and preferences study which collected research that supports the implementations of HCVST as an acceptable and feasible approach to HCV testing. The study involved 11 community-led organisations in 10 countries (Brazil, Costa Rica, India, Indonesia, Kyrgyzstan, Philippines, Rwanda, South Africa, Thailand, Ukraine) who participated in the study through individual and group interviews as well as participatory action research activities. A total of 920 individuals participated in the study. The results showed that because HCVST respects privacy and autonomy of people undergoing testing, it motivates users to seek out testing and treatment more frequently. When tailored to a local context and accompanied by easily understood information to diagnose the testing results, HCVST can be a valuable tool. Using INPUD's position on the WHO HCV Working Group, we hope to further amplify HCVST as a respected delivery method which can help dismantle barriers to access HCV testing and treatment.

“INPUD co-led a global values and preferences study which collected research that supports the implementations of HCVST as an acceptable and feasible approach to HCV testing.”





Key Publications

On the A-Gender: Community Monitoring Tool for Gender-Responsive Harm Reduction Services for Women who Use Drugs

Women who use drugs are vastly underserved within health services and programmes. As harm reduction services are primarily tailored to men, women who use drugs often find their specific needs unacknowledged and unaddressed, leading to non-gender-responsive harm reduction services. The *On the A-Gender: Community Monitoring Tool for Gender-Responsive Harm Reduction Services for Women who use Drugs* aims to be a resource for community advocates to begin documenting, evidencing, and addressing this state of play. By doing so, community advocates can begin to identify areas and locales where gender-responsive services are severely lacking or identify services and programmes that can provide examples of good practice and be scaled up. We hope this resource can be a useful and a practical first step towards scaling up

gender-responsive harm reduction services. This tool was developed in collaboration with the International Network of Women who Use Drugs (INWUD), the UNODC HIV/AIDS section and Koalisi Satu Hati, a community advocacy group in Indonesia.

Words Matter! Language Statement and Reference Guide

The need to change our language in relation to people who use drugs has become an increasing topic of discussion, but there is still a long way to go. Compiled by INPUD and the Asian Network of People who Use Drugs (ANPUD), this guide aims to explain our current position on the use of language and to provide clear advice on what is acceptable to us as communities of people who use drugs. We want to encourage all people to be thoughtful about the language and words they use and have provided a reference guide that identifies stigmatising language and gives non-judgemental, strengths-based, and respectful alternatives.

Community Matters: Lessons from a Bridging the Gaps Research Programme

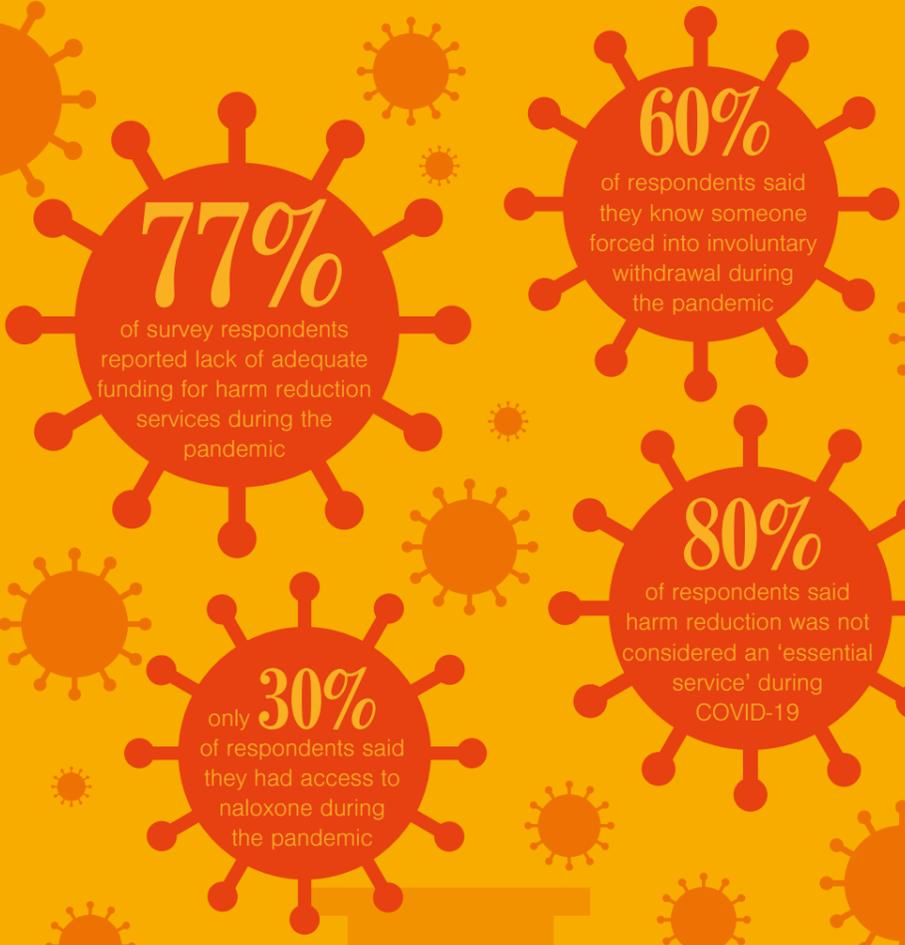
Supported through the Bridging the Gaps II programme, this report details the results of three years of research between 2018 and 2020 exploring how community involvement impacts the quality and accessibility of harm reduction services for people who use drugs. Evidence from our report shows how different forms of community involvement across Indonesia, Kyrgyzstan and South Africa impact harm reduction access and quality, especially in low- and middle-income settings. We hope this evidence base can guide the scaling-up of community involvement efforts globally in support of harm reduction targets. This research was carried out by INPUD alongside the South African Network of People who Use Drugs, Mainline, King's College London, AFEW International, AFEW Kyrgyzstan and Rumah Cemarrah.

Out in the Cold: Community-led Services Abandoned as Donor Funding Declines in Kyrgyzstan

In January of 2019 Kyrgyzstan, already facing declining

donor funding for the HIV response, had the services of their three community-led NGOs put to an end due to the cease of funding from the country's Global Fund programme. This sudden change left the community of people who inject drugs and people living with HIV with interrupted access to services and changes in service quality. INPUD, with support from the Global Fund Community Rights and Gender Technical Assistance Programme (CRG), investigated the situation to identify measures that might be taken to ensure access to needed services and to learn any lessons relevant to Kyrgyzstan and other middle-income countries facing similar reductions in donor funding. As a result of our intervention CRG emergency funding was released to make up for the loss of funding to communities in Kyrgyzstan. Furthermore, changes to the transition policies of the Principal Recipient were made to ensure such an abrupt change does not happen again. Our case study on Kyrgyzstan has been well received by the Global Fund as a whole, and we believe it can serve as a model for how to avoid such situations in the future.

The Global Impact of COVID-19 on People who Use Drugs
A summary based on INPUD's peer-driven research



Key issues:

- Accessing health and harm reduction services was more difficult due to lockdown restrictions
- Violence towards women who use drugs, particularly among female sex workers who use drugs
- Heavy burden on peer-run services under lockdown
- Increased risk of overdose due to more using alone and unsafe drug supply

Loss of funding for peer-led harm reduction programming



Peer Achievements:

- Community empowerment which built global solidarity through online events and advocacy.
- Take home OAT doses were adopted as policy in 47 countries. Several countries, such as Nepal and Ukraine, have now adopted this as permanent policy.
- Innovative peer-led initiatives to provide supplies, food, shelter and other acts of community in the absence of adequate state responses.
- Increased police presence on people who use drugs and their communities during lockdown

National and Regional Network Updates

AfricaNPUD Moves Closer to Official Recognition

The African Network of People who Use Drugs (AfricaNPUD) continued their progress from 2019 by opening an office in Nairobi and starting the process of registering as an official organization in Kenya. Had it not been for COVID-19 shutting down government offices this likely would have been completed already, and AfricaNPUD will look forward to official recognition in 2021. AfricaNPUD also translated the IDUIT into Swahili, ensuring it reaches new communities. In addition, AfricaNPUD has begun to connect with pan-African institutions such as the African Union, and now hold a seat in steering committees such as the ICASA 2021 conference.

ANPUD: Facilitating the Meaningful Engagement of People who Use Drugs in Country Coordinating Mechanisms

The Asian Network of People who Use Drugs (ANPUD) has published a [new guide assessing the meaningful engagement of people who use drugs in Global Fund Country Coordinating Mechanisms \(CCM\)](#). The CCM is one of the most important Global Fund structures, responsible for developing country funding proposals to the Global Fund, selecting the Principal Recipient and having oversight of grant implementation. It is a platform where communities can have a seat and be part of the process of deciding how and on what funding is targeted. Also included are the [research protocols](#) followed in preparing the guide and the results of the [desk review](#) assessing participation of people who use drugs in CCMs. This guide serves as an important tool for people who use drugs to maximise their engagement and amplify their voices and influence in this important mechanism.

ENPUD Advocates for Take Home Doses and Registers in Georgia

During the pandemic the Eurasian Network of People who Use Drugs (ENPUD) made it an advocacy priority to demand take home doses for OAT and other medications. Community-led campaigns in Ukraine and Georgia were able to successfully secure uninterrupted distribution of OAT by switching to take-home models of operation. ENPUD worked to ensure these policies are not temporary and will continue even after lockdown measures are

lifted, securing a key victory which people who use drugs in the region have been advocating on for a long time.

ENPUD also achieved a major step in their development by formally registering in Georgia. Previous attempts at registration using the full name of the network were unsuccessful due to state opposition to the phrase 'people who use drugs'. They got around this barrier by registering just under the acronym ENPUD in lieu of the full name. Looking forward ENPUD is considering an advocacy campaign directed at the Georgia government to enable the use of the full name of the organization in registration.

SANPUD Formally Launches and Increases Advocacy

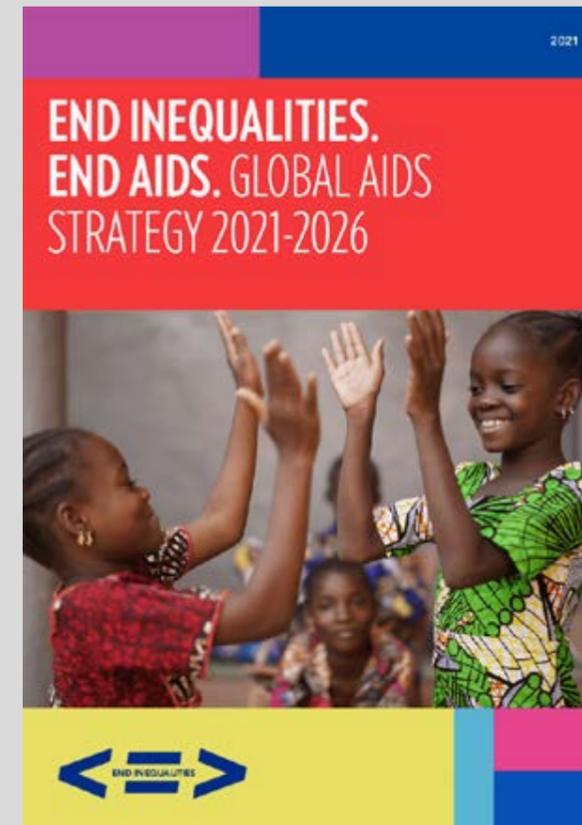
Though they formally registered in 2019, the South African Network of People who Use Drugs (SANPUD) held their formal launch as a national organization in partnership with the Department of Social Development. A launch event was held in October 2020 featuring speakers from SANPUD, the South African government and representatives from UN agencies. This formal recognition has positioned SANPUD as one of the strongest and loudest voices in sub-Saharan Africa.

SANPUD was already heavily engaged in advocacy around the WHO International Standards for the Treatment of Drug Use Disorders. Working with INPUD, this advocacy resulted in key changes made to the standards which will make them a more effective monitoring tool for keeping treatment centres in South Africa accountable to human rights. COVID-19 made it difficult to fully implement the standards in 2020, but SANPUD will be working on this in 2021.



Above: SANPUD held a formal launch event alongside the South African Department of Social Development

Looking Forward to 2021 and Beyond



United Nations General Assembly High Level Meeting on HIV and AIDS (HLM)

From 8-10 June 2021, as the world marks 40 years since the first case of AIDS was reported, the General Assembly of the United Nations will convene for a [High-Level Meeting on HIV/AIDS \(HLM\)](#). This meeting will review progress made in reducing the impact of HIV since the last high-level meeting in 2016 and the General Assembly is further expected to adopt a new Political Declaration on HIV/AIDS. This kind of meeting only happens once every five years and will have major global implications for communities and people affected by HIV/AIDS.



Above: A panel meeting at the United Nations General Assembly high-level meeting on ending AIDS held in June 2016. New York. Credit: UNAIDS

INPUD has joined the Multi Stakeholders Taskforce for the HLM and are working to ensure communities and networks of people who use drugs will not only have access to the HLM, but also receive opportunities to directly engage in the process through national and international advocacy. We hope to build on the success of our work with the Global AIDS Strategy to insert similar commitments and targets in the 2021 Political Declaration on AIDS which make it clear that the best way to respond to the AIDS epidemic is to support the communities of people most affected by HIV and AIDS who are already doing the work.

Advocacy on PEPFAR Funding for Communities

Under the new administration of President Joe Biden, the United States has taken steps to rejoin the global health arena by returning to the WHO, restoring funding to the UNDP and ending the Global Gag Rule. The administration has also made supporting harm reduction interventions, including syringe exchange programmes, a priority in their new national drug control strategy. These are welcome changes that can potentially open up new funding streams for peer-led harm reduction programming in countries most impacted by HIV.

In 2021 we intend to advocate for the Biden administration to double down on these commitments by investing in key populations through the President's Emergency Plan for AIDS Relief (PEPFAR), an \$85 billion investment in the global HIV response. Along with other key population network allies we have already submitted a [letter to U.S Secretary of State Antony Blinken](#) urging him to take action to maintain an unwavering focus on key population-led programming within PEPFAR investments, and to develop a new, 5-year Key Populations Strategic Initiative with robust funding support.





Above: INPUD's Board and Secretariat meet for a strategic planning workshop in early 2021

INPUD 2021 – 2024 Strategy Development

INPUD's [current strategic plan](#) is set to expire in 2021, and we will begin the year by drafting and approving a new strategy which will take us through 2024. We have started this process by commissioning a Strengths, Weaknesses, Opportunities and Threats (SWOT) analysis of INPUD based on feedback from members, donors and stakeholders in key population networks. The INPUD Board and Secretariat met in early 2021 for a virtual workshop to discuss this analysis and re-evaluate our previous strategy with an eye towards the future. We anticipate having the new strategy drafted and approved by the Board by the end of the first quarter in 2021 and are excited to share our vision for the next three years with the network.

Decriminalisation Report

In 2018 INPUD published the first community-driven evaluation of Portugal's decriminalisation model, centering the perspectives of people who use drugs who are rarely taken into account when assessing the outcomes of decriminalisation. Over the past three years this report has been instrumental in informing advocacy efforts around decriminalisation, including in Vancouver where it was cited in an influential report by [Pivot Legal Group](#) which helped lead the city council to approve decriminalisation of drug use in 2020.

As more countries have considered policy reforms INPUD has continued our evaluation of various models for decriminalisation, centering peer responses and perspectives. The results of this work will be released in 2021 as a new report which assesses the impact of the decriminalisation models implemented in Costa Rica, Estonia, Kyrgyzstan, the Netherlands, Norway, Portugal, Uruguay and Vietnam.

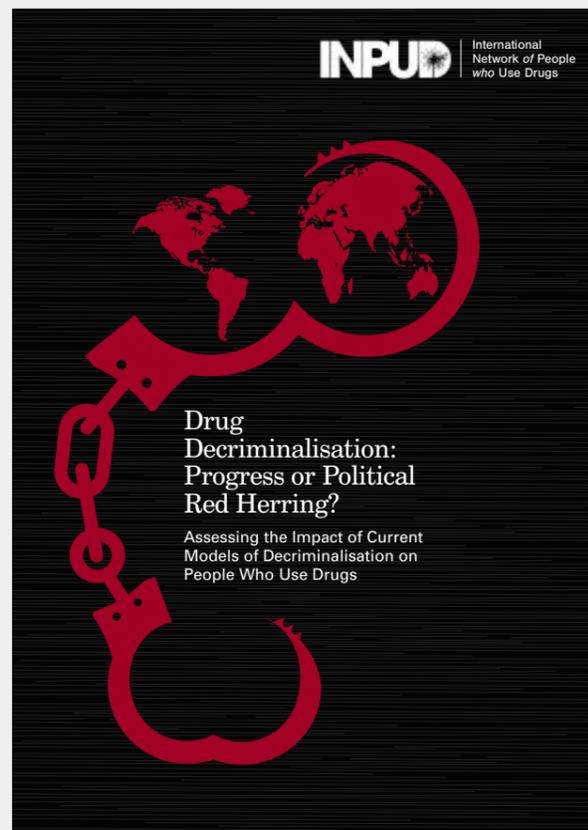
The Global Fund

Continued Development of New Global Fund Strategy

Development of the new Global Fund Strategy will continue in 2021. INPUD plans to continue our advocacy around the Strategy to ensure strong commitments

“INPUD plans to continue our advocacy around the Strategy to ensure strong commitments to funding communities and key population-led programming...”

to funding communities and key population-led programming within Global Fund mechanisms. Regional platforms across all regions of the Global Fund's work have already been scheduled for 2021 as the next step in this process.



Above: INPUD's decriminalisation report, published in 2021

Financial Summary 2020

INCOME 2020

Total income received in 2020 £ 913,933.51

INCOME 2019

Total income received in 2019 £836,620.64

EXPENDITURE 2020

Secretariat operational costs £108,185.89

Salaries £268,565.59

Consultancies £149,509.32

Events, Workshops and conferences £20,992.88

Partner Grants £306,010.51

Publications £37,874.24

EXPENDITURE 2019

Secretariat operational costs £67,237.03

Salaries £256,360.64

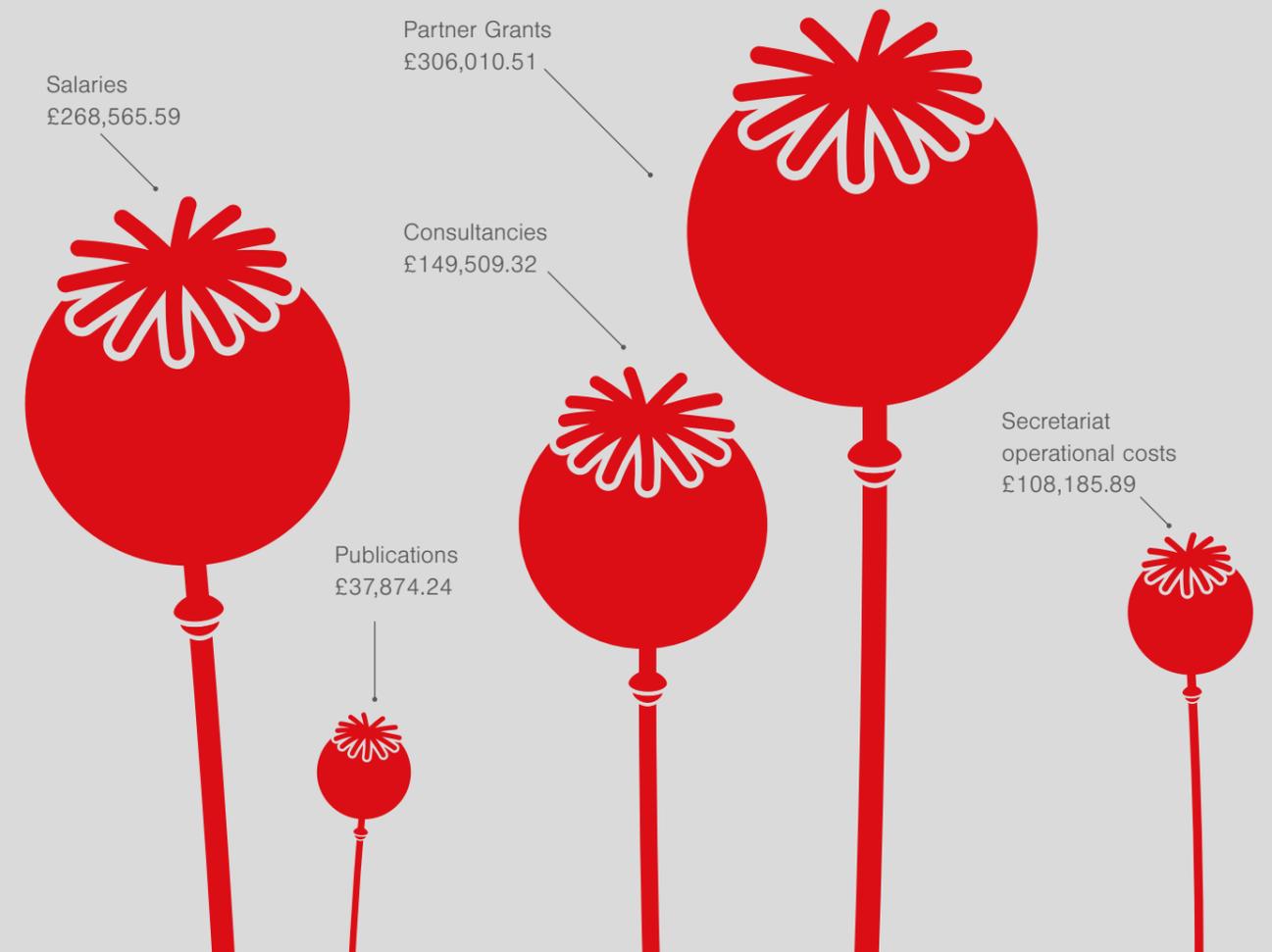
Consultancies £55,347.28

Events, Workshops and conferences £77,419.41

Partner Grants £349,331.70

Publications £7,968.47

Community-Led Research £17,081.51



The International Network of People who Use Drugs (INPUD) is a global peer-based organisation that seeks to promote the health and defend the rights of people who use drugs. INPUD will expose and challenge stigma, discrimination, and the criminalisation of people who use drugs, and their impact on the drug-using community's health and rights. INPUD will achieve this through processes of empowerment and advocacy at the international level, while supporting empowerment and advocacy at community, national and regional levels.
www.inpud.net

INPUD is part of Bridging the Gaps – health and rights for key populations. This unique programme addresses the common challenges faced by sex workers, people who use drugs and lesbian, gay, bisexual and transgender people in terms of human rights violations and accessing much-needed HIV and health services. Visit www.hivgaps.org for more information.

INPUD is very grateful for financial support from Bridging the Gaps; the Robert Carr CIVIL SOCIETY Networks Fund; the Global Fund to Fight AIDS, Tuberculosis and Malaria.

INPUD would also like to thank all of the organisations and individuals who contributed to our work over the last two years and to this document.

Written by: Jake Agliata
Designed by: mikestonelake.com

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