



International
Network of People
who Use Drugs

Strategic Plan 2021-2024



Acknowledgements

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. As an organisation, INPUD is focused on exposing and challenging stigma, discrimination, and the criminalisation of people who use drugs, and their impact on the drug-using community's health and rights. INPUD works to achieve its key aims and objectives through processes of empowerment and advocacy at the international level; and by supporting empowerment and advocacy at community, national, and regional levels. www.inpud.net

INPUD is grateful for financial support from: Robert Carr Fund and the Love Alliance (funded under the Dutch Ministry of Foreign Affairs).

Love Alliance



Written by: James Baer
Designed by: Mike Stonelake
April 2021



This work is licensed under a Creative Commons Attribution-NonCommercial-NoDerivs 3.0 Unported License

First published in 2021 by
INPUD Secretariat
Unit 2B15, South Bank Technopark
90 London Road, London SE1 6LN
www.inpud.net

Introduction

INPUD's Strategy for 2021-2024 outlines how the organisation will build on past achievements and lessons learned to take the global network forward into the next phase of its development. It sets out how the network will be strengthened to respond to the changing environment and to confront new political challenges.

The Strategy was developed following consultation with key stakeholders from INPUD members, key population networks and funding organisations. INPUD's Board and Secretariat participated in a virtual workshop held over three days in March 2021 (a face-to-face meeting being impossible because of the COVID-19 pandemic) to review progress under the 2017-2020 strategic plan and to define INPUD's strategic priorities and pathways for 2021 to 2024.

INPUD: Who we are

INPUD is the international organisation representing issues of global significance for people who use drugs. INPUD was conceived at the International Harm Reduction Conference (IHRC) in Belfast in 2005. At the IHRC in Vancouver in 2006, drug user activists developed INPUD's founding statement – 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 Network of Asian People who use Drugs (NAPUD), 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.

Vision

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

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.

“... highlighting and challenging stigma, discrimination, and the criminalisation of people who use drugs ...”

Principles

INPUD's work is underpinned by the following key 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 individuals 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
- **Pro legalisation** – We are committed to achieving fundamental drug policy reform, including the full-scale decriminalisation of drug use and drug possession 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.

Goals

1. An end to drug prohibition, the legalisation of drugs, and the protection of the human rights of people who use drugs
2. 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
3. Universally available, low-threshold harm reduction to support safer drug use and reduce drug-related harm among people who use drugs
4. Self-determining networks of people who use drugs that advocate for their own health, citizenship and human rights.



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

Achievements

During the period of the 2017-2020 Strategic Plan, INPUD has continued to:

- Increase the public understanding of drug use and to raise the visibility of people who use drugs and the issues they face, in national and international policy forums and events. Examples include:
 - UNAIDS Steering Committee for 2025 Target-Setting on Impact and Resource Needs, where targets on social enablers (including decriminalisation, stigma and discrimination) were included for the first time, as well as increased targets for harm reduction
 - UNAIDS Programme Coordinating Board
 - UNODC Civil Society Organisations Group
 - Global Fund Community, Rights and Gender Advisory Group
 - Strategic Advisory Group to the UN on HIV and Drug Use (SAG)
 - HIV2020 Conference, held to protest the decision to hold the AIDS2020 conference in the USA, and to reaffirm the role of communities in the global HIV response
- Support the strategic development of regional drug user-led networks and the strengthening of national networks. Examples include:
 - Drug user-led networks have increased funding through the Robert Carr Fund, Global Fund and Dutch government
 - Regional and national networks have strengthened core and organisational functions, with greater membership accountability and transparency
 - Networks have lobbied successfully for the introduction of opioid agonist treatment (OAT) and needle and syringe programmes (Zanzibar), for the expansion and continuation of OAT (Belarus and Kazakhstan), and against the use of biometrics for data collection (Kenya)
 - Regional and national networks have increased their representation within global and national mechanisms, e.g. the Burundi and Senegal Community Coordinating Mechanisms (CCMs) now include representatives of people who use drugs.
- Published a wide range of advocacy tools, technical briefs, guides and case studies. Key examples include:
 - [The IDUIT Brief Guide for People who Use Drugs and IDUIT Training Manual](#)
 - [What Does Universal Health Coverage Mean for People who Use Drugs: A Technical Brief](#)
 - [The Impact of Stigma and Discrimination on Key Populations and their Families: Policy Brief and Community Guide \(developed with MPact and NSWP\)](#)
 - [COVID-19: Enacting a 'New Normal' for People who Use Drugs](#)
 - [Is Decriminalisation Enough? Drug User Community Voices from Portugal](#)
 - [Out in the Cold: Community-led Services Abandoned as Donor Funding Declines in Kyrgyzstan](#)
 - [Words Matter! Language Statement and Reference Guide](#)
 - Over the next three years, INPUD will continue to develop and build the capacity of its Secretariat, Board, and network of advocates to deliver INPUD's complex and challenging advocacy, partnership, programming, and network development agenda.

“Increase the public understanding of drug use and to raise the visibility of people who use drugs and the issues they face....”

Challenges

The INPUD 2021-2024 Strategy responds to the problems experienced by people who use drugs around the world. Globally, oppressive legal environments against drug use are upheld and mandated under the three UN drug control treaties. Under the current prohibitionist system, punitive laws, policies, and practices lead to the systematic violation of the human rights of people who use drugs. Despite the promotion of harm reduction and rights-based approaches in some countries, in 2017-2020 there was a fierce escalation of the drug war set against the backdrop of the rise of populism and social conservatism, and this looks set to continue.

Stigma, violence, and discrimination continue to be endemic experiences in the lives of people who use drugs, who often lack access to comprehensive and evidence-based health and social support services. The consequences are far-reaching, and for many, devastating: compulsory drug detention, disproportionate rates of incarceration, the death penalty, extrajudicial killings, an epidemic of overdose deaths, and a vastly disproportionate risk of HIV infection for people who inject drugs.

The increasing medicalisation and pathologisation of drug use is problematic, and it may be used to distract from the more fundamental policy and advocacy question of the right to use drugs as a matter of individual autonomy. At the same time, resistance to these models must not be at the expense of advocacy for access to needed health services.

The complex policy and political environment within which INPUD must operate is changing rapidly. Internationally agreed targets to reduce HIV among people who inject drugs – such as Target 6 of the Millennium Development Goals – have been missed, but despite further commitments to improve the response, commensurate funding has not been forthcoming, and Global Fund funding of harm reduction in low- and middle-income countries continues to be reduced. The ongoing

COVID-19 pandemic has created challenges in access to drugs, and service provision and access for people who use drugs, but it has also accelerated a debate about broadening global health funding to pandemic security. A reduced focus on HIV by the Global Fund and other funding bodies could limit potential resources for INPUD and its member networks.

It remains important to resist claims of organisations that are not drug-user led, or individuals who are not drug users, to represent people who use drugs, even if they are allied with our goals. As the work of activism and advocacy, and the systemic oppression of people who use drugs, take their toll in terms of burnout, illness, and death, we must bring new people into the movement and promote their leadership. This includes connecting with younger people and emerging leaders who use and inject drugs, whose experiences and culture may be quite different from those who are older, and ensuring that community memory and learnings are preserved and passed on, and that the particular needs of both younger and older people who use drugs are addressed.

“Stigma, violence, and discrimination continue to be endemic experiences in the lives of people who use drugs ...”

Our Strengths

Despite the challenges facing INPUD, people who use drugs offer crucial resources in response.

Drug user networks and organisations are made up of dynamic and committed activists who bring their diverse voices and lived experience, as well as knowledge about drug use, harm reduction, drug policy, and human rights.

INPUD's Secretariat is skilled in coordination, organisation, and sophisticated global advocacy. In addition to supporting regional networks, INPUD has strengthened relations with some country networks. Regional networks are themselves becoming increasingly visible and forming stronger connections with national networks. People who use drugs are becoming better represented on national Community Coordinating Mechanisms, and gaining skills in how to advocate for programming that reflects the needs of people who use drugs and other key populations. At global, regional and national levels, partnerships with organisations and networks of other key populations are strengthening advocacy, and also contribute to community skills-building.

INPUD will continue to benefit from donors that are willing to invest in community-led advocacy and programmes, as well as high-level political commitment in some quarters, including UN and multilateral agencies, in respecting and promoting policies and conventions that uphold the rights and the meaningful involvement of people who use drugs.

Achieving Impact

INPUD's Strategy 2021-2024 is expected to impact the lives of people who use drugs in the following ways:

- Greater recognition of the negative impacts of prohibition, increased protection of the human rights of people who use drugs, and fewer incidents of violence, stigma and discrimination against them
- Better drug laws, policies and practices that are evidence-based and rights-based
- Enhanced access of people who use drugs to quality, comprehensive, and affordable services and programmes, including for HIV, viral hepatitis, and harm reduction
- Greater meaningful involvement of people who use drugs in all areas of decision-making that affect their lives, and better outcomes for their health, equity, social inclusion, and wellbeing
- Greater financial, political, and social resources and investments in the lives of and issues facing people who use drugs

In 2020-2024, INPUD aims to achieve these impacts by channelling its work in four strategic directions. These provide a broad framework under which INPUD, as a global network, will advocate for the rights and needs of people who use drugs.

**“...dynamic and committed
activists who bring their diverse
voices and lived experience...
about drug use, harm reduction,
drug policy, and human rights.”**

Strategic Directions and Outcomes

Strategic Direction One – Network

Development

Convening and strengthening drug user networks by sharing ideas, lessons, resources, and experiences in order to build a common movement that upholds and promotes the self-determination and self-representation of people who use drugs

Outcome 1: *Strong global, regional, and national drug user networks which are effectively run, accountable, participative, well-governed, and able to influence political change to realise the human rights of people who use drugs*

This outcome will be achieved through work in the following activity areas:

1.1 Membership: Provide member networks with opportunities for involvement in decision-making, facilitate and advocate for access to resources and funding opportunities, and facilitate opportunities for global advocacy/ seats on international forums, in ways that are inclusive of language and geography

1.2 Communications: Increase INPUD's visibility by ensuring that INPUD's publications and other information are available to members and external audiences, and support regional and local networks to produce translations that are sensitive to the local contexts of people who use drugs

1.3 Secretariat: Organise the work of INPUD's Secretariat effectively by maintaining robust and comprehensive systems and establishing a programme of constructive supervision, and developing individual work plans

1.4 Governance: Strengthen INPUD's Board functions through regular induction, meetings, skills- and knowledge-building, and through engagement between the Board and Secretariat, including 360-type reviews of our work

Strategic Direction Two – Partnership

Development

Developing meaningful and effective partnerships that enhance the reach and impact of INPUD's

work, and facilitate the sharing of strategic information among like-minded organisations and networks to work collaboratively and cohesively towards shared and common goals

Outcome 2: *A well-developed network of strategic alliances with organisations that understand and promote INPUD's principles and issues of relevance, collaborating on work that catalyses opportunities to achieve INPUD's goals and objectives*

This outcome will be achieved through work in the following activity areas:

2.1 Partnership Priorities: Prioritise strategic partnerships with like-minded organizations. In addition to other Key Populations networks, particularly in the field of health, human rights, harm reduction drug policy, and prison reform as long as they can help us achieve our objectives

2.2 Partnership Standards: Base all partnerships on careful assessment and defined minimum standards for roles, responsibilities, and lines of accountability, with particular attention to assisting regional/national networks in establishing relationships with regional/ national bodies.

Strategic Direction Three – Programming and Technical Support

Developing and supporting regional and national drug user networks and emerging leaders through technical support to promote and advocate for the design and development of evidence-based and rights-based policies and programming

Outcome 3a: *Regional and national networks with enhanced capacity to protect the health and human rights of people who use drugs by advocating for and implementing evidence-based and rights-based policies and programming at regional and national levels*

Outcome 3b: *Emerging leaders with improved leadership skills who are effective representatives in national, regional, and global forums*

These outcomes will be achieved through work in the following activity areas:

3.1 Peer Technical Support: INPUD will support regional and national networks by facilitating access to peer-to-peer technical expertise, access to policymakers and fora when possible, and financial resources when available.

3.2 Developing Drug User Advocates: INPUD will build and support leadership in every region by providing technical, financial, and other support to equip strong and capable drug user advocates.

Strategic Direction Four – Advocacy and Campaigning

Focusing on strategic advocacy and targeted campaigning in order to raise awareness and understanding of the rights violations that affect people who use drugs

Outcome 4a: *Improved and effective engagement in global, regional, and national policy-making dialogues*

Outcome 4b: *Policy makers, programme managers, and the wider public have a better understanding of the rights and needs of people who use drugs*

Outcome 4c: *Increased funding for drug user-led networks, including core funding and funding for advocacy and service delivery at global, regional, and national levels*

These outcomes will be achieved through work in the following activity areas:

4.1 Advocacy Planning: Run diverse and inclusive community consultations that feed into strategic advocacy and campaigning plans

4.2. High-level Advocacy: In accordance with the mandate, priorities, and principles of people who use drugs, influence the development and implementation of global policies and guidelines through global-level engagement with the UN, the Global Fund, and INGOs

4.3 Advocacy Materials: Develop policy and advocacy materials in diverse languages and formats that influence political and public attitudes and practice

4.4 Coordinated Campaigns: Coordinate effective campaigns that amplify the voice, issues, priorities, and perspectives of people who use drugs

4.5 Fundraising: Direct, promote, and fundraise for proper financing for drug user organisations on all levels



Theory of Change

This diagram represents how the INPUD will use its resources, channelled in activities through four strategic directions, to lead to outcomes that will collectively have the desired impacts.



