

10-10-10
80-60-30

The new UNAIDS Global AIDS Strategy is an ambitious commitment to address systemic barriers faced by key populations in the global HIV/AIDS response. The ‘10-10-10’ societal enabler targets are firm mechanisms for advocates to monitor and hold governments accountable. The ‘80-60-30’ targets relate to increasing funding commitments to community-led and key population-led organisations and responses.

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Letter from the Executive Director



We live in difficult times. Across the world people who use drugs continue to see our human rights ignored, our health needs disregarded and our communities harmed by drug criminalisation, stigma and discrimination. The COVID-19 pandemic continues to impact an already scarce funding landscape for drug user-led networks, at a time where harm reduction & health services led by people who use drugs are more necessary than ever. Despite some positive movements towards decriminalisation the enforcement of drug prohibition remains the norm throughout the world, continuing to drive decision making at local, national and international levels without meaningful input from our community.

And yet, none of this is new to our community. As captured in the [Taking Back What's Ours](#) documentary series, people who use drugs have always been resilient in the face of adversity, and we continue to succeed despite the challenges thrown at us every year. From the beginning INPUD has set out to be a global voice for people who use drugs everywhere, and in 2021 it is safe to say that this voice is only growing louder and harder to ignore. This past year was one of our most successful yet, which speaks not only to the growing impact of our global advocacy but the unyielding resolve of our global network which forms the backbone of everything we do.

In our 2021 Annual Report you will read about our advocacy victories getting committed societal enabler and funding targets for key population-led organisations included in both the Global AIDS Strategy 2021 – 2026 and the 2021 Political Declaration on HIV/AIDS; our new publications and videos covering stories of success from people who use drugs around the world; our technical support given to drug user networks regarding Global Fund mechanisms; the growth and achievements of our global network; and much, much more.

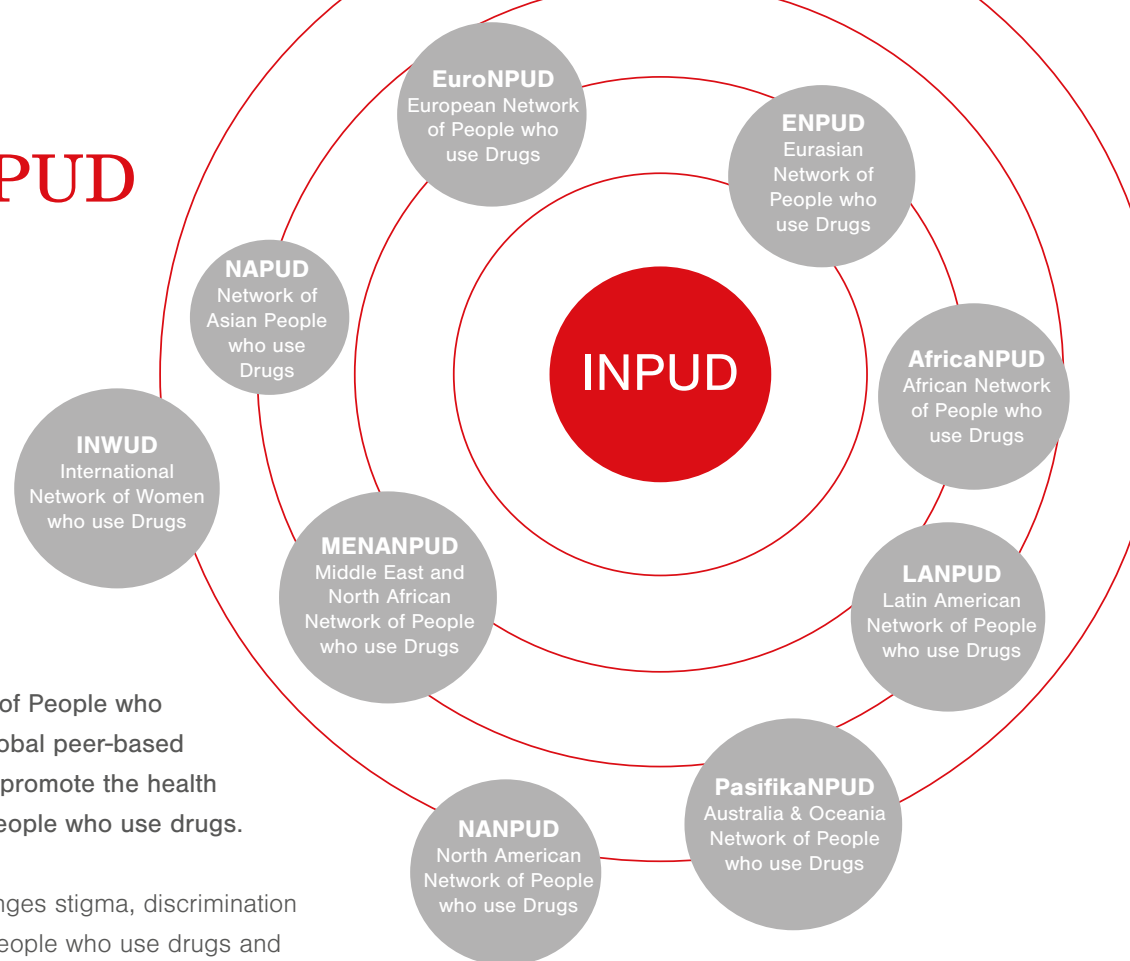
None of this work would be possible without the hard work and dedication of our Secretariat and Board of Directors, as well as the support of our donors. We dedicate this Annual Report to you, as well as all people who use drugs worldwide who continue to give us the strength to move forward. Our work will not be over until all people who use drugs are liberated from oppression.

Thank you for supporting INPUD,

Judy Chang

Executive Director

About INPUD



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 exposes and challenges stigma, discrimination and the criminalisation of people who use drugs and its impact on the drug-using community's health and rights. We achieve this through processes of empowerment and advocacy at the international level, while supporting empowerment and advocacy at community, national and regional levels. INPUD's founding document is the [Vancouver Declaration](#), which was developed at the 2006 International Hard Reduction Conference in Vancouver. The Vancouver Declaration sets out the demands of people who use drugs and emphasises that our human rights must be respected, and our health and wellbeing prioritised.

INPUD believes that people who use drugs should be meaningfully represented in decision-making processes that affect our lives. We seek to represent people who use drugs in international agencies, such as the United Nations and those undertaking international development work, to demonstrate that the unique insight of people who use drugs can deliver better results in health, harm reduction, and HIV treatment/prevention for individuals and the wider community. We are asking the international community to stop always framing us as the problem and instead recognise that we are part of the solution when it comes to addressing problems associated with drugs and drug policy around the world.

INPUD 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 Australia & Oceania Network of People who use Drugs (PasifikaNPUD), the African Network of People who use Drugs (AfricaNPUD), the Eurasian Network of People who use Drugs (ENPUD), the European Network of People who use Drugs (EuroNPUD), the Latin American Network of People who use Drugs (LANPUD), the Middle East and North African Network of People who use Drugs (MENANPUD), the Network of Asian People who Use Drugs (NAPUD), and the North American Network of People who use Drugs (NANPUD).

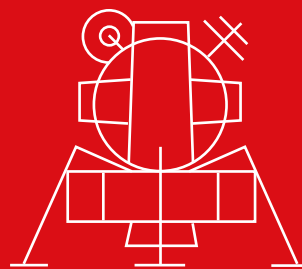
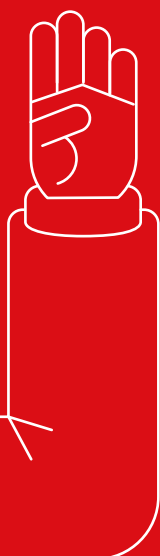
The Secretariat, which is registered in the United Kingdom, works on policy and advocacy, programmes, finance and administration, and management.

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.



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.

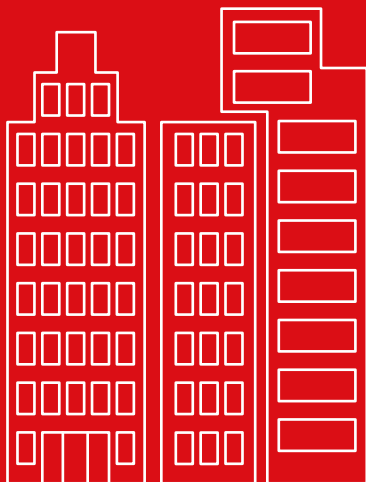
Anti-prohibitionist: We are committed to achieving fundamental drug policy reform, including the full decriminalisation of drugs without sanctions as an intermediate reform on the path to INPUD's goal of legalisation of all drugs.

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

INPUD's Goals

1. To maintain an organization that is effective, transparent and accountable to its membership.
2. To promote effective prevention, treatment, care and support for people who use drugs who are living with and affected by HIV, 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.
3. To advocate for intermediate reforms to drug laws in order to reduce the criminalization and stigmatization of people who use drugs while striving in the longer term to an end to prohibition.
4. To support and seed the development of self-determining networks of drug users that advocate for the health, citizenship and human rights of people who use drugs.
5. To promote and advocate for harm reduction as a means of supporting safer drug use and reducing drug related harm among people who use drugs.
6. To build alliances with like-minded organizations and broader civil society to further the aims of INPUD.

Structure and Governance



Secretariat

Judy Chang, Executive Director

Jake Agliata, Policy and Communications Officer

Gayane Arustamyan, Program Officer

Tina Chkhaidze, Finance Manager

Rico Gustav, Senior Technical Advisor

Kim Jackson, Office Manager

Annie Madden, RCF Exceptional
Opportunity Project Lead

Aditia Taslim, Advocacy Officer

Nandini Thapa, Gender Focal Point, INWUD



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)

Hassan Turaif (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)

Anton Basenko, Ukraine Representative of Eurasian
Network of People who Use Drugs (ENPUD)

Laura Blanco, Uruguay Representative of Latin
American Network of People who Use Drugs (LANPUD)

Jane Marie Dicka, Australia Representative of Pasifika
Network of People who Use Drugs (PasifikaNPUD)

Binod Gurung, Nepal Representative of Network of
Asian People who Use Drugs (NAPUD)

Tonny Van Montfoort, Belgium Representative
of European Network of People who Use Drugs
(EuroNPUD)

Kassim Nyuni, Zanzibar Representative of African
Network of People who Use Drugs (AfricaNPUD)

Sania Zehra, Pakistan Representative of Network of
Asian People who Use Drugs (NAPUD)

Highlights and Achievements

Community Mobilisation and Empowerment

International Drug Users Remembrance Day 2021

On 21st July INPUD marks [International Drug Users Remembrance Day](#), a day for our global community to commemorate those who are no longer with us due to the War on Drugs. This year's day was planned and conducted in partnership with GNP+, UNAIDS and the Global Partnership to Eliminate All Forms of HIV-related Stigma and Discrimination. Our #MoreThan social media campaign honoured and humanised people who use drugs by encouraging peers to share photos which highlighted the positive attributes and characteristics, as well as dreams and ambitions, of people whose lives were prematurely lost in the failed pursuit of a drug free world. Infographics that highlight stigma and discrimination against people who use drugs within health and justice settings were also produced and disseminated. The day was highlighted by a webinar, [No More Loss](#), held alongside the Global Partnership

which discussed the tragic loss of life perpetuated by the criminalisation and stigmatisation of people who use drugs. The webinar featured speakers from community, UN agencies and government officials.

International Drug Users Day 2021

International Drug Users Day (IDUD) is held annually on the 1st of November. Every year on International Drug Users Day, people who use drugs all over the world celebrate our history and affirm our rights. This year's celebration of International Drug Users Day was marked by a social media campaign, [#PowerOfPeers](#), as well as a statement demanding that the community of people who use drugs are fully resourced and funded and provided with the space to participate in decision-making process, and a call for full decriminalisation of drugs with no sanctions. Additionally, INPUD worked with UNAIDS on launching a [press statement](#) calling for action against the criminalisation of people who use drugs and for community-led harm reduction programmes, linked to the Global AIDS Strategy and 2021 Political Declaration. This statement, the first of its kind since Ms. Winnie Byanyima began as Executive Director, provides a basis for future advocacy both within UNAIDS and externally for pushing the 10-10-10 societal enablers.



#MoreThan Video Competition

The #MoreThan video Competition, launched in September 2021 in collaboration with Rights Reporter Foundation, was a continuation of the #MoreThan campaign from International Drug Users' Remembrance Day highlighting that people who use drugs are more than the sum of all labels attached to us by broader society. The contest was supported through the Robert Carr Fund.

In total we received an incredible 22 submissions from 17 countries. It was not easy, but an independent board of community activists ultimately selected five winners among the submissions:

1. *Delirium a Choice*, by Sania Zehra & Aisha Kasiri (Pakistan)
2. *6 women 1 seed*, by Larissa Lewandovski (Portugal)

3. *Living with Stigma*, by Dhojo Wahengbam (India)
4. *Confession*, by Tengku Raka (Indonesia)
5. *Should I say that I use other drugs?*, by Raul Lescano Mendez and Dana Bonilla (Peru)

Congratulations to all the winners!

European Harm Reduction Conference

In November, four members of the INPUD secretariat traveled to Prague to attend the 5th European Harm Reduction Conference, joining members of EuroNPUD and ENPUD as well. It was the first time many of us were able to meet in person since the beginning of the COVID-19 pandemic, and served as a fantastic opportunity to reconnect, advocate and build new partnerships. During the conference INPUD members spoke on panels discussing mental health and drug use, person-centred choice in treatment options, and decriminalisation.



Programming and Technical Assistance

INPUD Strategic Plan 2021 – 2025

In early 2021 INPUD undertook the drafting and adoption of a [new Strategic Plan](#) that outlines how our organization will build on past achievements and lessons learned to strengthen our response to an ever changing environment with new political challenges. The Strategic Plan was developed following consultation with key stakeholders among INPUD members, key population networks and funding organisations. Drawing from this analysis, INPUD's Board and Secretariat participated in a virtual workshop held over three days in March 2021 to review progress under the 2017-2020 strategic plan and to define INPUD's strategic priorities and pathways for 2021 to 2024.

Founding of the Network of Asian People who Use Drugs

In 2021 ANPUD was formally dissolved, and in response, INPUD oversaw a scoping assessment funded under the Robert Carr Fund which reviewed lessons learned and provided recommendations for a new regional drug user network in the Asia-Pacific region. The results of this scoping assessment assisted drug user activists in the region to form a new network, the Network of Asian People who Use Drugs (NAPUD). Already NAPUD has grown substantially with a newly elected Board reflecting a diverse governing body comprised of representatives from the 11 national drug user networks which joined NAPUD through a formal MOU, with a stronger focus on the previously neglected Southeast Asia region. NAPUD has also hired a program officer to help stabilise management of the network. Along with the other networks in the Consortium of Networks of People who Use Drugs, INPUD continues to meet monthly with NAPUD to promote financial accountability and stronger internal financial controls, and to provide advice on project implementation.

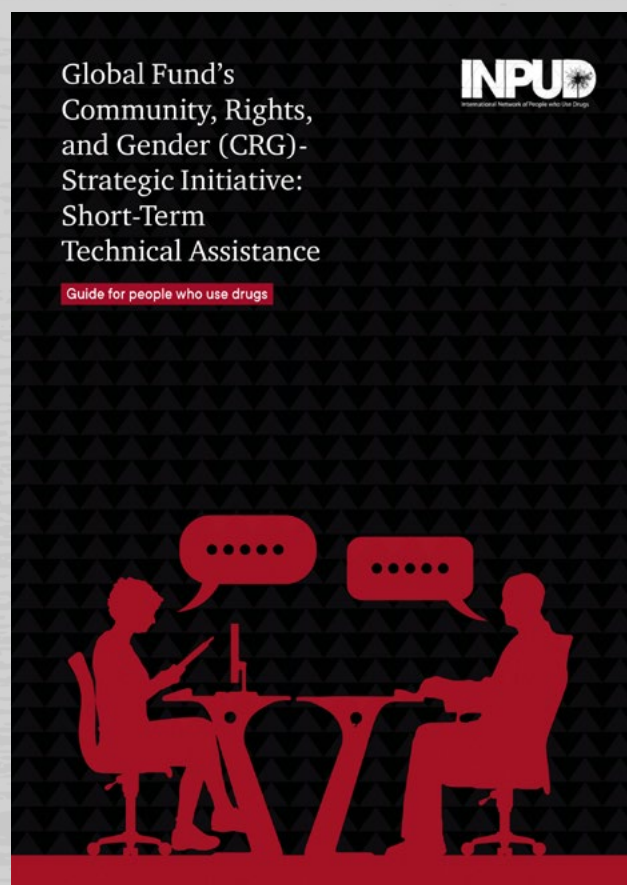
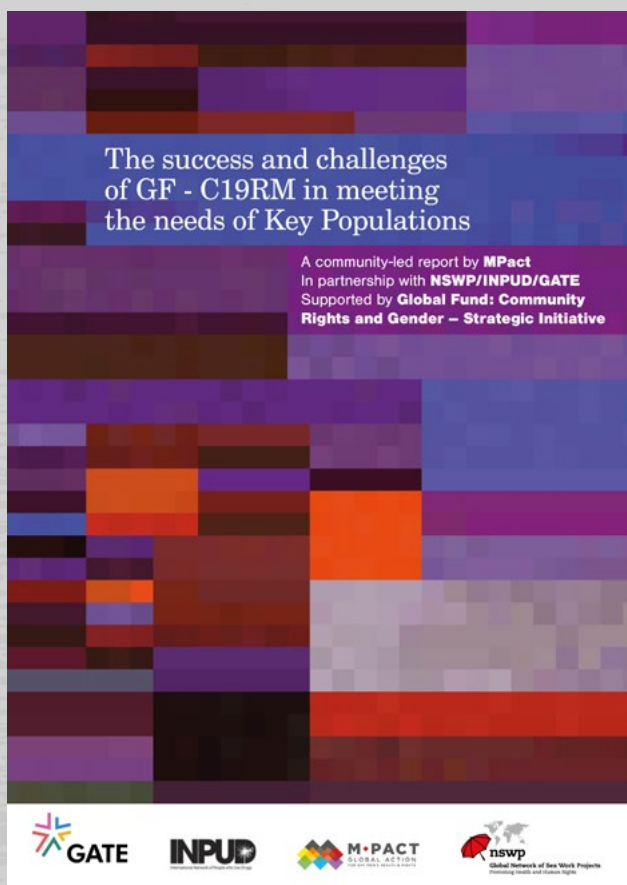
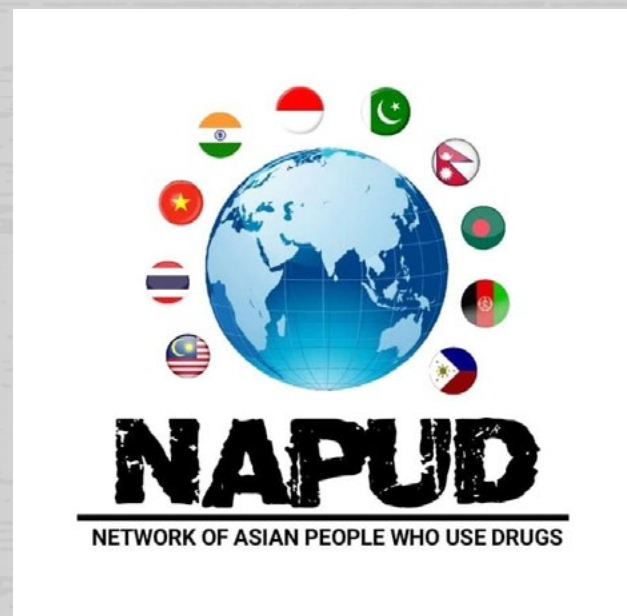
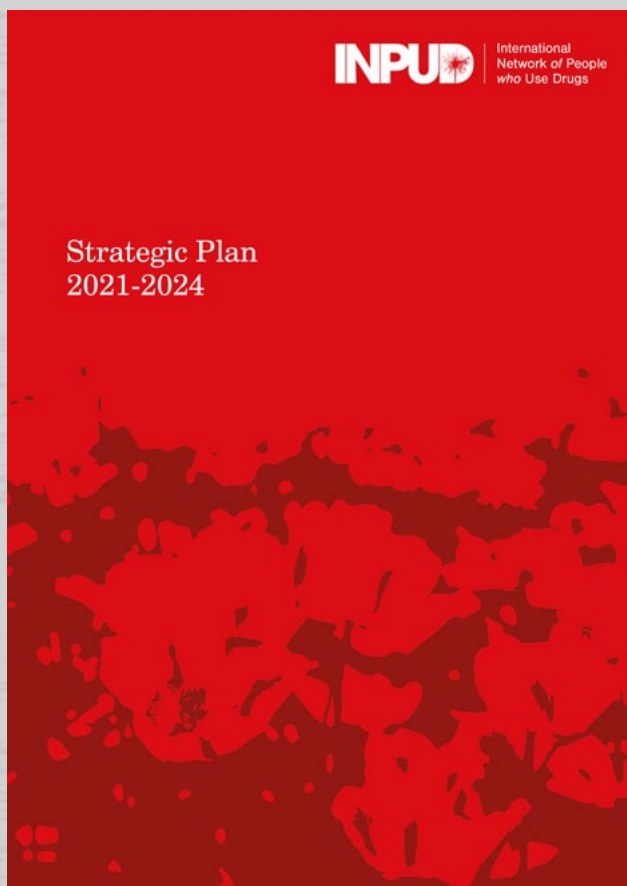
Global Fund COVID-19 Response Mechanism (C19RM) Community Support

From April to October 2021, with the COVID-19 pandemic threatening an already shrinking funding space for key populations, INPUD joined with global key population networks to support engagement with the Global Fund C19RM process. INPUD was funded

through the Global Fund Community, Rights and Gender Department (CRG) to support the engagement of people who use drugs in C19RM 2.0 and advocate for increased funding allocations for community needs and priorities in the context of COVID-19 related disruptions to HIV, TB, and malaria programming. We produced [technical guidance for communities on C19RM 2.0](#), as well as community-relevant guidance on running community consultations. These were further supported through a joint webinar with other key population networks. Consultations were supported across 11 countries, with several countries reporting either increased funding allocations towards community priorities (South Africa, Ukraine, and Nepal) or reported strengthened relationships with Global Fund stakeholders in-country as a result.

Global Fund Community, Rights and Gender Strategic Initiative (CRG SI)

There remains a considerable amount of resistance and lack of political will to meaningfully involve people who use drugs in Global Fund-related processes, with people who use drugs often excluded from key decision-making processes. In 2021, as part of the Community, Rights and Gender Strategic Initiative (CRG SI), INPUD provided support to drug user-led networks in Nigeria, Pakistan and Ukraine to increase their representation and capacity to advocate and influence Global Fund decision-making processes, particularly within Country Coordinating Mechanisms (CCM). INPUD strengthened linkages between the community of people who use drugs and the Global Fund Secretariat, including the CRG, CCM Hub and respective Country Teams. In Ukraine and Pakistan, INPUD supported drug user-led networks to engage more effectively with their respective national health bodies and participate in national-level technical working groups, studies, and committees on opiate agonist treatment OAT, as well as national OAT guidelines in Nigeria. In recognition that the issues and priorities of people who use drugs and key populations are often side-lined within the CCM, INPUD has organized online exchanges between the networks and the GF. INPUD also provided technical advice through dialogues and exchanges with drug user-led networks to develop country-specific approaches to community-led data generation and monitoring. We have begun the development of a Community-Led Monitoring (CLM)

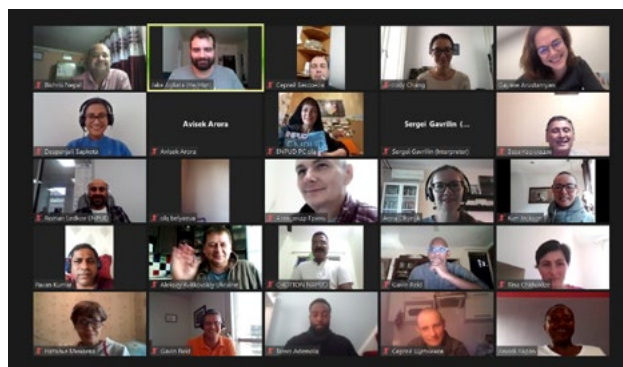


guide for people who use drugs, aimed to provide the community with simple guidance to collect and analyse data, and apply its outcomes in improving the scale of quality, evidence, and rights-based programmatic responses. The guide is planned to be finalised and launched in 2022.

Though much work still needs to be done, among the three focus countries all have strengthened the participation of people who use drugs in Global Fund decision-making processes. In total 26 people who use drugs were selected as representatives in regional and municipal CCM's of Ukraine; 19 people from the Ukrainian Network of People who Use Drugs (PUD.HA) and 7 representatives from the Ukrainian Network of Women who use Drugs (UNWUD). In Nigeria, the Executive Director of the community-led network DHARN is a member of the GF Communities Delegation to the Board, which provides the organisation with additional leverage to advocate for community priorities in high-level decision-making fora. Through CRG SI engagement DUNE and APLHIV have successfully advocated for several key priorities of the community of people who use drugs in Pakistan to be included in the GF C19RM, including waivers of ID documents to access social support, increased rate of COVID-19 vaccination, increased coverage of nutritional support and expanded coverage testing and treatment services.

This increased engagement has already led to progress influencing program funding and design. In Nigeria this was made possible through the engagement of DHRAN in the development of the Guidelines and Standard Operating Procedure (SOP) for the implementation of Medically Assisted Therapy (MAT), which provided an opportunity for DHRAN to contribute, discuss synergies and set priorities for more effective implementation of harm reduction services in Nigeria. In Ukraine the two networks (PUD.UA and UNWUD) worked jointly on advocating for increased OAT coverage across the country. Through a series of engagements with the national Centre for Public Health, and linked to the increased leverage of people who use drugs and women who use drugs in regional and municipal CCMs, the coverage of OAT programmes increased by 6.3% compared to the total number of OAT patients in 2020. Additionally, UNWUD successfully advocated for data to be disaggregated by gender in the Global Fund's

proposal for C19RM which was made possible due to the joined efforts of PUD.UA and UNWUD in successfully advocating for women who use drugs to be officially recognized as a separate key population group within the GF grant.



Global Fund Peer Technical Support Hubs

As part of the Global Fund Community, Rights and Gender Strategic Initiative (CRG SI), INPUD successfully organized three peer technical support hubs on CCM engagement, CCM Evolution and CRG SI Short-term Technical Assistance. These thematic areas were decided upon in consultation with community representatives. Around 100 participants were registered across the webinars, with 52 unique individuals reached. Along with ongoing mentoring support, we hope these webinars will result in improved meaningful engagement of drug user-led organisations in CCM processes, increased uptake of CRG short-term TA, as well as better understanding of GF-related processes and enhanced ability to navigate such processes to increase the scale and quality of harm reduction and rights-based programming for people who use drugs. More work needs to be done in each project country to develop and formalize community-endorsed agendas for use and advocacy in Global Fund-related decision-making processes. Following the webinars, INPUD began producing technical briefs on CCM Evolution and Short-term TA which are being translated into Russian, French and Spanish. The briefs will be published in Q1 2022 and distributed across the regional and national drug user-led networks.

Advocacy and Campaigning

Engaging in Cross-sector Partnerships

During 2021 INPUD continued 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)

And forums on HIV and global health :

- Global Fund Community Rights and Gender (CRG) Advisory Group
- Joint Evaluation of the UN Joint Programme on AIDS work with key populations
- International Network on Hepatitis in Substance Users (INHSU) - International Core Committee and Community Committee
- UNAIDS Global HIV Prevention Coalition – Working Group
- UNAIDS Programme Coordinating Board (PCB)
- WHO Working Group on Viral Hepatitis and Drug Use
- WHO Working Group on Viral Hepatitis in Prisons
- WHO Guidelines Development Group
- Interagency Working Group on Key Populations

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 Eurasian Network of People who Use Drugs, and the International Network of Women who Use Drugs also have seats on the SAG.

Accelerating Engagement with Human Rights Mechanisms

The human rights dimensions of drug prohibition have been insufficiently addressed and elevated within human rights bodies and mechanisms, including within

the Special Procedures. In 2021, INPUD accelerated our engagement within human rights mechanisms in response to this lack of action. INPUD joined online consultations with the UN Working Group on Arbitrary Detention, emphasising the imperative for the Working Group to make a strong call for full decriminalisation and highlighted the arbitrary detention of people who use drugs in the name of treatment (i.e. compulsory drug detention and rehabilitation centers). Both recommendations were included in [the final report](#). We also presented at the EECA regional dialogue for the roll-out of the [International Guidelines on Human Rights and Drug Policy](#) and engaged with the first ever Joint Programme on Human Rights in the Philippines.

INPUD plans to extend our engagement with human rights mechanisms to the CEDAW and CESCRC committees in 2022.



Supporting Engagement of Asteria in the CEDAW

Following on from work started in 2019, INPUD continued to support the engagement of Kyrgyzstan organisation “Asteria”, led by women who use drugs, in the Committee on the Elimination of Discrimination against Women (CEDAW). Asteria partnered with a coalition of NGOs to develop and submit a shadow report documenting and visibilising rights violations against women from key populations. The shadow report also included recommendations for concrete actions that the committee can recommend to the State concerning problems for women key populations.

In November 2021 the shadow report was presented to CEDAW, with community representatives presenting their inputs virtually and lobbying CEDAW committee members. Most recommendations from Asteria were incorporated in the [Committee’s official recommendations](#) to the State as part of their regular review. Specifically for women who use drugs, CEDAW

recommended that Kyrgyzstan decriminalise drug possession, ensure national law addresses all forms of gender-based violence and takes into account the special needs of disadvantaged and marginalized groups of women, combat corruption in the health-care system and gender-based violence and discrimination by health-care personnel, and amend laws which call for the automatic loss of child custody based on parental drug dependence

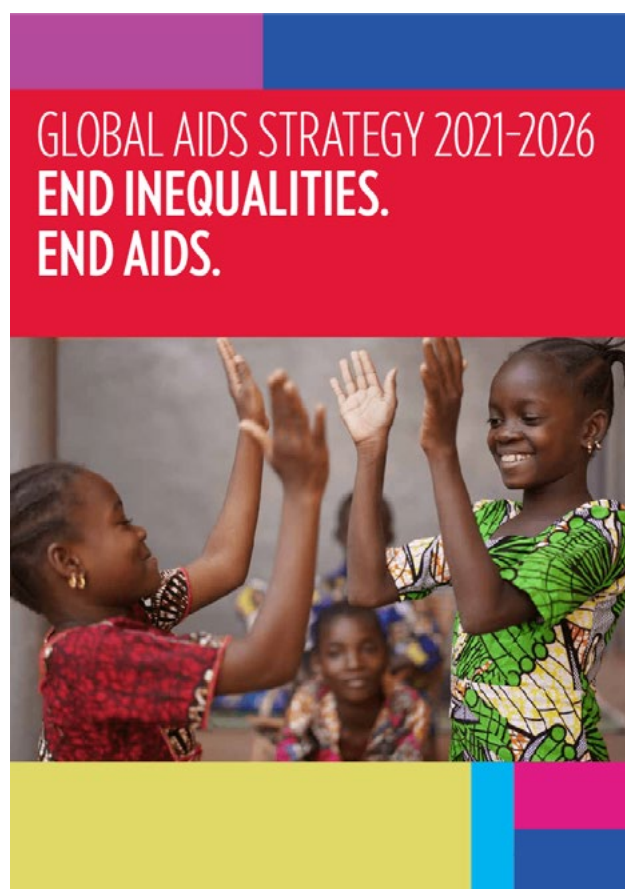
Thanks to the CEDAW recommendations, many existing problems which were previously possible for the State to brush aside must now be addressed over the next two year period. The recommendations also created opportunities to strengthen argumentation and advocate for community priorities among the key decision-makers, in particular with the Ministry of Justice and Ministry of Internal Affairs, to ensure that discriminatory and stereotypical expressions and terminology are excluded from articles and reports. These joint priorities have further led to plans for a landmark book on Narcofeminism, which INPUD has been invited to contribute to as an author.



The Global Partnership to Eliminate All Forms of HIV-related Stigma and Discrimination

The Global Partnership is an alliance co-convened in 2018 by UNAIDS, UN Women, UNDP, GNP+, the PCB NGO Delegation and the Global Fund. The purpose of the partnership is to accelerate the implementation of interventions at the country level to end HIV-related stigma and discrimination. There are currently 29 countries which have formally joined the Global partnership. As previously mentioned, in 2021 INPUD partnered with the Global Partnership on the #MoreThan campaign and webinar on International Drug Users'

Remembrance Day. Additionally, we supported both LANPUD and KeNPUD as they organised national consultations with people who use drugs in Kenya, Costa Rica, Peru and Ecuador to identify the priority areas and necessary interventions for eliminating stigma and discrimination faced by the community in the six settings of the Global Partnership. Following these consultations INPUD will continue this work in 2022 by supporting three focal points to develop advocacy plans tackling stigma and discrimination within Kenya, Costa Rica and the Philippines.



Global AIDS Strategy 2021 – 2026

The new [UNAIDS Global AIDS Strategy](#) represents one of the most ambitious commitments yet towards addressing systemic barriers faced by key populations in the global HIV/AIDS response, including criminalisation, stigma, discrimination and gender-based violence. The Strategy was developed through a consultative process that INPUD, representing people who use drugs, and other key population networks were involved in over the course of several years. This process began in 2018, when INPUD and other global key population networks in the UNAIDS 2025 Target Steering Committee initially

drafted the '10-10-10' societal enabler targets. These targets are groundbreaking as for the first time there are firm mechanisms which can be used by advocates to monitor and hold governments accountable for removing legal, social, and cultural barriers that continue to stymie a successful and effective HIV response. The targets are:

1. Less than 10% of countries have punitive legal and policy environments that deny or limit access to services
2. Less than 10% of people living with HIV and key populations experience stigma and discrimination
3. Less than 10% of women, girls, people living with HIV and key populations experience gender inequality and violence

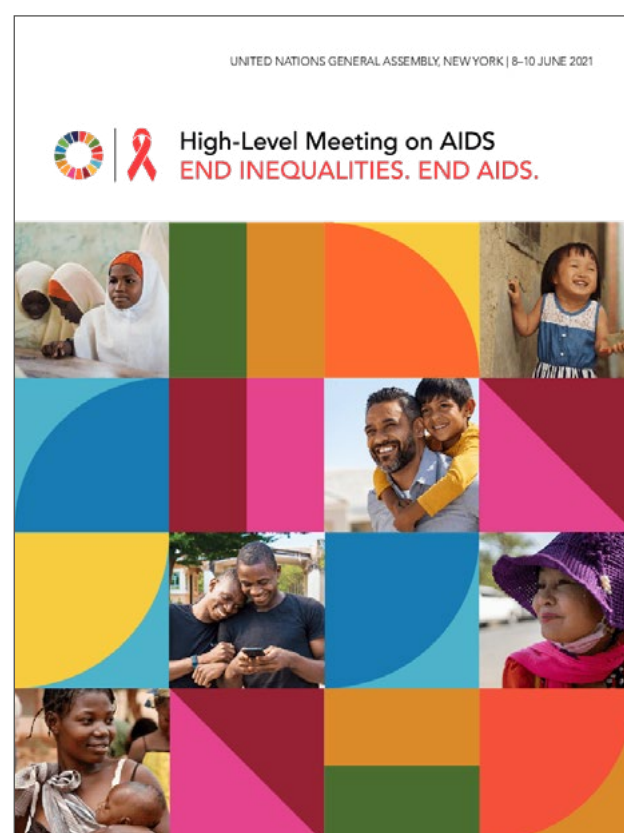
Also of note are the '80-60-30' targets related to increasing funding commitments towards key populations. These targets commit Member States to ensure that by 2025 community-led organisations deliver:

1. 30% of testing and treatment services
2. 80% of HIV prevention services
3. 60% of programmes to support the achievement of societal enablers

Setting these targets took a great deal of advocacy by INPUD and other key population networks over the last three years, and their inclusion in the Global AIDS Strategy was never guaranteed. We spent a lot of time lobbying for the importance of these targets at UNAIDS Programme Coordinating Board (PCB) meetings, UN sessions, the Global Fund, and other forums. At times it felt as if we were running into dead ends, but persisted in our insistence that the targets were of central importance to a successful global HIV response. Ultimately this work paid off in 2021 as the 10-10-10- and 80-60-30 targets were both adopted in the final Strategy approved by the UNAIDS Programme Coordinating Board. This would not have happened without the strong community engagement on the Strategy development over the last three years.

Moving forward INPUD will continue to work with the community and national drug user networks to monitor progress towards these targets and to ensure that they are reflected in the strategy and policy at the country

level. National Strategy and Policy should adopt the new targets, particularly the 10-10-10- and 80-60-30 targets by emphasising the key role of community-led and key population-led responses and by ensuring legislation or interventions which move towards these goals, while communities can keep government accountable through community-led monitoring on stigma, discrimination, gender inequality and violence stemming from national policies and practices. [A briefing note developed by INPUD](#) details how the Strategy can be helpful and useful for people who use drugs and our organisations.



2021 UN General Assembly High Level Meeting on HIV and AIDS (HLM)

As mentioned, INPUD has been laying the groundwork for global commitments towards decriminalisation and funding commitments for key population-led responses in the global HIV response. This work was not limited to just the Global AIDS Strategy but to the international community as a whole, as we have spent years mobilising drug user networks, cultivating relationships with supportive Member States as well as UN agencies and advocating in every forum possible so that we could





never be ignored. A big part of this work included crafting firm definitions for what constitutes community-led and key population-led responses, and ever after these definitions were agreed to, we had to work towards ensuring they were used.

In 2021 an opportunity emerged to codify our demands into global commitments with the convening of a UN General Assembly High-Level Meeting on HIV and AIDS (HLM) in June 2021, which intended to review the progress made in the 2016 Political Declaration on HIV/AIDS. Our goal was to ensure the [2021 Political Declaration](#) reflected commitments towards reducing societal enablers and increasing key population funding, as captured in the 10-10-10 and 80-60-30 targets in the new Global AIDS Strategy adopted earlier in the year.

In the lead up to the HLM, INPUD joined the Multi-Stakeholder Task Force (MTSF) on civil society engagement. In this space INPUD's Executive Director worked with other MTSF's members convened by AIDSFOODS and GNP+ to advocate and lobby on decriminalisation, human rights and funding for communities as key inclusions into the HLM Political Declaration, reflecting the 10-10-10 and 80-60-30 targets. Due to this engagement the voices and inputs of people who use drugs were included within both the Multi-Stakeholder Hearing and the HLM itself. We co-produced the MTSF sign-on statement in the lead up to the HLM and both strategised and coordinated with the MTSF in lobbying member states, including Australia as co-Chairs with Namibia, during the negotiation of the 2021 Political Declaration itself.

During the HLM itself INPUD also hosted a virtual side event titled [The Right to Rights: How do we get there for People who Use Drugs](#) in partnership with the UNODC HIV/AIDS section, WHO, UNDP, OHCHR, UNAIDS and the International AIDS Society. This side event discussed human rights barriers faced by people who use drugs and policy initiatives aimed at reforming the legal and policy frameworks currently criminalising drug use. The event was watched by over 170 people both live and via a livestream on INPUD's Facebook page.

Our advocacy on the Political Declaration was, like much of our advocacy work the last several years, met with pushback as several Member States expressed hostile views towards key population demands. For

the first time at a High Level Meeting a resolution was adopted by voting, at the request of Russia, raising the alarm that some States were actively pushing back on the inclusion of language regarding human rights, overturning punitive laws, gender equality, stigma and discrimination. Ultimately these attempts failed and the 10-10-10 and 80-60-30 targets were included in the final Political Declaration, though concerns with the manner in which Russia and others pushed back remain. Upon the adoption of the 2021 Political Declaration on HIV/AIDS, INPUD along with MTSF members released a [response statement](#) expressing these concerns as well as our approval that other Member States did not cave into these demands.

The inclusion of the 10-10-10 and 80-60-30 targets in the 2021 Political Declaration is a significant victory that reflects the immense advocacy effort by key population and community advocates. Previous Political Declarations reflected some commitments on social enablers and key population-led funding, but there was never any agreement on what constitutes social enablers and took years to agree upon definitions for key population-led responses. The absence of dedicated targets also meant it was impossible to track progress. Setting the targets in the 2021 Political Declaration will enable community-led monitoring and accountability to make sure Member States follow through on their commitments with subsequent national responses.

INPUD will continue to work with the community and national network to monitor the progress towards these high-level commitments through the global reporting system such as the Global AIDS Monitoring and the Global Fund Reporting Mechanisms, by ensuring that relevant indicators are included within the monitoring framework, building the capacity of the community and national network to develop advocacy strategy to monitor progress and hold government accountable, and ensuring that perspectives and data gathered by and generated from the community of people who use drugs are taken into account and used to complement the national reporting systems. Through these efforts, we will enable the community and national network to advocate for changes relevant to the global targets and commitments, including policy and law reform, recognition of people who use drugs leadership in the HIV response, and investment for people who use drugs-led network and organisations.



Global Fund Strategy Development

In 2021 INPUD continued to lobby and advocate for a dedicated funding stream for key populations within the context of development for the new Global Fund Strategy 2023-2028. INPUD was among over 100 community and civil society organisations who convened for a series of [three civil society pre-Partnership forum virtual gatherings](#) held in January 2021. We submitted inputs to the Global Fund CRG Advisory Group, where INPUD holds a seat, as well as the Global Fund Board on the [Global Fund Strategic Framework](#) as well as the [narrative development process](#). Along with a dedicated funding stream for key populations, we called for the Strategy to put communities truly at the centre of the global AIDS response by establishing a dedicated funding stream for key populations, to recognize communities for their technical expertise and to emphasise and fund human rights, and community-led advocacy on decriminalisation. INPUD will continue to engage in ongoing discussions and advocacy.

Concurrent to the strategy finalisation, INPUD was also part of the Global Fund Measurement Team working groups on Community Leadership and Engagement and Equity, Human Rights and Gender Equality. These groups define indicators to measure the performance of the Global Fund at all levels relevant to their new strategy. The consultations will continue towards 2022 and new indicators will be finalised at the Board meeting of the Global Fund on the second half of the year.

64th Commission on Narcotic Drugs

Due to the COVID-19 pandemic the 64th Commission on Narcotic Drugs (CND) occurred exclusively online. While this limited our ability to engage in more direct advocacy, INPUD still had a great presence at CND this year. Of note was our side event [We Are the Evidence – Community-led Responses on Decriminalisation](#),



[COVID-19 and Harm Reduction](#) which launched our groundbreaking peer-led report on drug decriminalisation. Speakers from the community, civil society, UNAIDS and the Norwegian government discussed why people who use drugs can and should be leaders on developing and implementing decriminalisation policies, based on examples of peer leadership during the COVID-19 pandemic. The side event was co-sponsored by the HIV Legal Network, UNAIDS and the Norwegian Ministry of Health and Care Services, and with the virtual format opening up access of the side event to the general republic, we had an incredible 179 people in attendance with additional viewers watching a live-stream from INPUD's Facebook page.

During the 64th CND we also delivered a virtual intervention to the plenary on agenda item 9, regarding the sustainable development agenda. Our intervention called on the international community to commit to decriminalisation and an overall response to drug policy which centers the human rights, health and dignity of people who use drugs.

WHO Consolidated Key Population Guidelines

In 2021 INPUD was one of four key population networks who collaborated with the World Health Organization (WHO) on a global qualitative study examining the values and preferences of key populations, including people who inject drugs, for HIV, Hepatitis and STIs services. The findings of this study will inform the update of the WHO 2016 Consolidated Guidelines for HIV prevention, diagnosis, treatment and care for key populations, which are used to inform countries on the design and implementation of health packages for key populations (people who inject drugs, gay and bisexual men and other men who have sex with men, female, male and trans sex workers and trans people).

Under the instruction of Principal Investigators Annie Madden and Judy Chang, INPUD conducted eight regional focus group discussions and ten semi-structured interviews with people who use drugs from 27 total countries, all held online using Zoom. Participants were recruited via INPUD's global network and the Regional Focal Points for the study. During the focus group discussions and interviews, participants were asked a series of questions designed to gauge the values and preferences of their community regarding the delivery of HIV, Hepatitis and STI services.

The results of these consultations were published in both a [long report](#) and a [summary report](#), both subsequently translated into Russian, French and Spanish. Notable findings from the research include:

- Leadership from people who use drugs is fundamental to ensuring that the design, development and delivery of health interventions align with community and individual needs.
- Structural barriers such as criminalisation, stigma and discrimination are constantly reinforced through harmful, punitive and repressive laws and policies.
- Appropriate funding and scale-up of community-led interventions and services is necessary to properly recognise the value of peer-led interventions among people who inject drugs.
- People who inject drugs want immediate, fast and affordable access to DAA HCV treatment with minimal barriers, including removal of abstinence from drug use as a treatment criterion and recognition of harm reduction as an integral part of HCV treatment services.
- 'Chemsex' should be re-contextualised as 'sexualised drug use' to encourage safe, supportive cultures of care that enable people who inject drugs to 'plan to be safe'.
- There is a need for more targeted research and discussion into best practice approaches to PrEP among people who inject drugs. PrEP should never be seen as a bio-medical 'silver bullet' or be provided in place of existing, evidence-based harm reduction approaches.

We would like to thank the Regional Focal Points who helped recruit and facilitate the involvement of people who inject drugs into the study: Olga Belyaeva, Matthew

Bonn, Angela McBride, Charity Monareng, Richard Nininahazwe, Kassim Nyuni, and Louise Vincent.

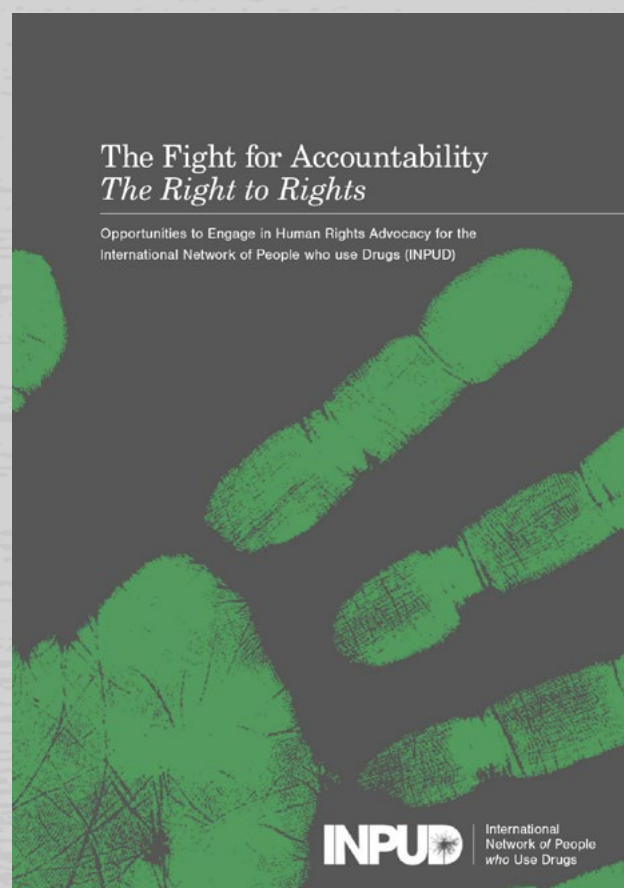
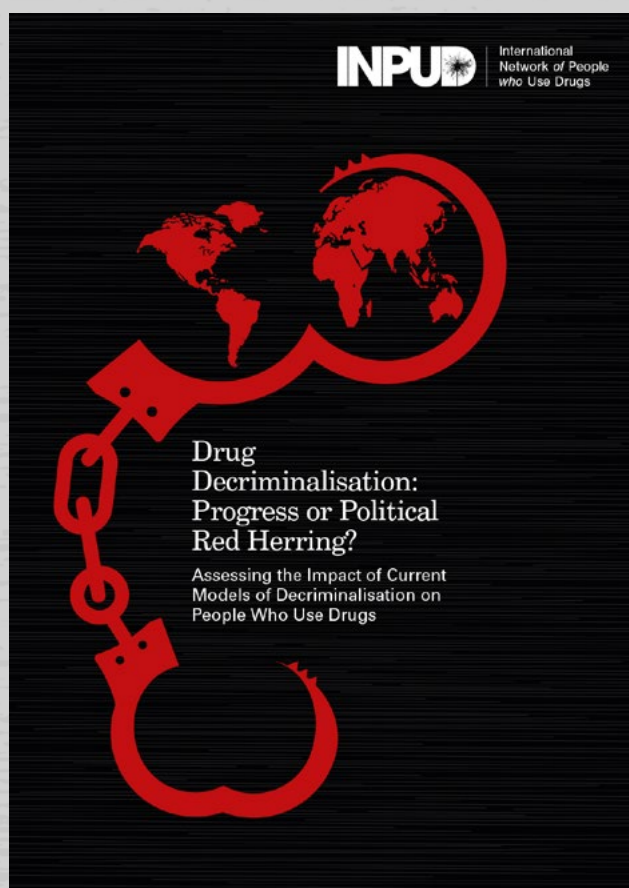


Submission of Feedback from INPUD to the Draft overview of PEPFAR Strategy: Vision 2025

As part of INPUD's ongoing advocacy to influence the new PEPFAR Strategy, we have provided recommendations for consideration into the latest draft of the strategy document. While we commend the introduction of community-led monitoring in the draft, it is critical for PEPFAR to align its definition of community-led and key population-led with the UNAIDS definitions, and to specifically allocate funding for community-led services and responses, particularly in addressing societal enablers and structural barriers. [Our recommendations address this gap](#) and suggest specific language and objectives for PEPFAR to consider in the updated strategy draft.

Following PEPFAR's innovative funding stream, the Key Population Investment Fund (KPIF) has come to an end. [INPUD joined with other Global Key Population Networks](#), to urge then newly appointed Secretary of the United States Department of State, Anthony Blinken, in maintaining the U.S' commitment in providing dedicated funding stream for key populations, taking lessons learned from the problematic implementation of the KPIF and recommendations to better tailor the realities of key populations networks and organisations.

INPUD will continue to work with PEPFAR at the global level through its Strategy development process, the Country Operational Plan, and our advocacy for funding for key populations.



Publications

Drug Decriminalisation: Progress or Political Red Herring?

In April 2021, INPUD launched ‘[Drug Decriminalisation: Progress or Political Red Herring](#)’ at our CND side-event. This report, based on interviews conducted with people who use drugs in countries which have implemented various approaches to decriminalisation, aimed to disrupt the misconception that decriminalisation unquestionably represent progress when policies have been developed with little or no consultation with people who use drugs. We sought to answer critical questions on how progress is being defined and measured, whose interests are being served around current definitions of progress and if there really has been progress in countries that have purportedly shifted to decriminalisation or more public health-oriented approaches.

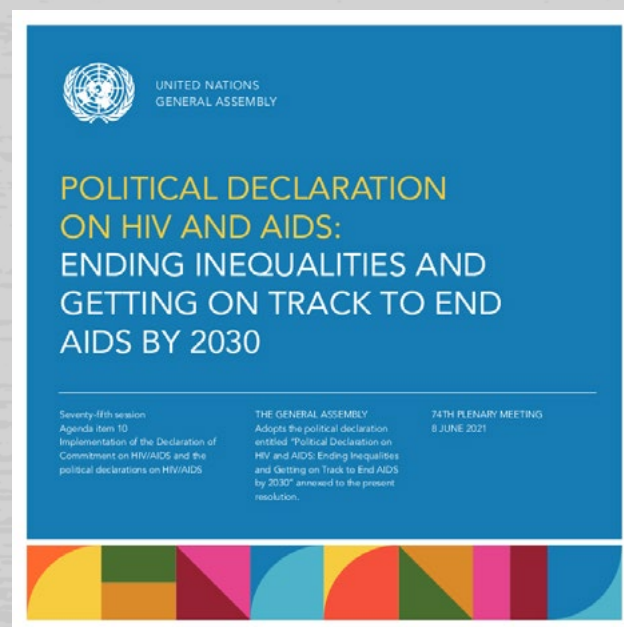
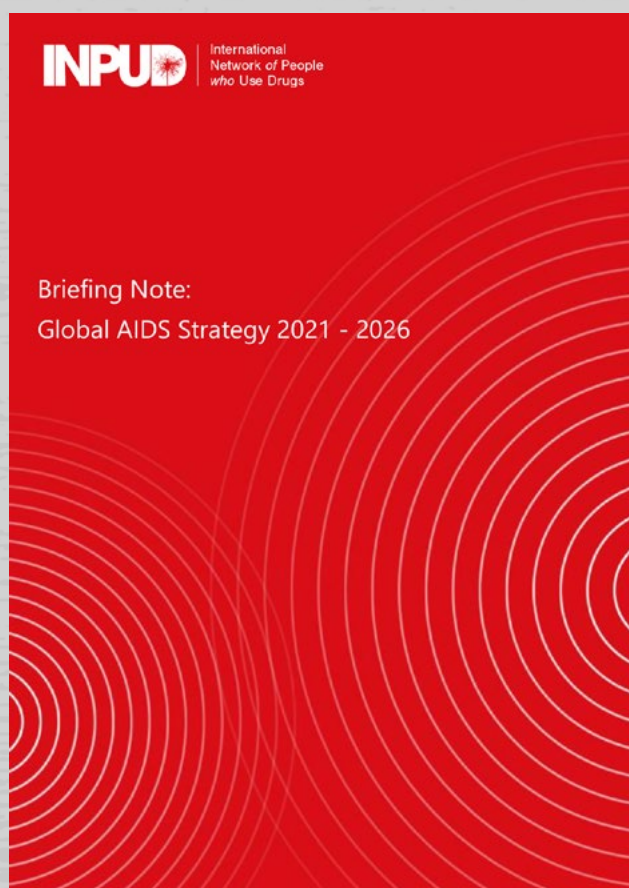
Based on interviews with peers living in jurisdictions that claim to have liberalised drug policies, we found current metrics on decriminalisation often include countries that have decriminalised cannabis only or include alternative measures such as compulsory treatment or other punitive regulatory or administrative

measures. The report concludes with a call for the full decriminalisation of drug use and possession and for the meaningful involvement of people who use drugs in all reform processes.

Over the last year our report has been disseminated widely, including within UN agencies and leading legal academics. Since publication, we have engaged in discussions with UNAIDS to shape their definition and metrics of decriminalisation and incorporated our inputs into consultations on the National Commitments and Policy Instruments survey (NCPI), as part of Global AIDS Monitoring (GAM). Our reports on decriminalisation models have also been [used by civil society advocates in British Columbia](#) to push for meaningful involvement of people who use drugs in drug law reform processes to design appropriate models.

The Fight for Accountability, the Right to Rights: Opportunities to Engage in Human Rights Advocacy for INPUD

Human rights violations against people who use drugs have been widely documented, including abuses by police; abuses in detention; discrimination by schools,



employers and health care workers; and in some countries, extrajudicial killings. However, there remains a questions of how resource-limited local, regional and global drug user networks should engage in advocacy with UN human rights mechanisms, and where this advocacy has the most effect. To explore this question, INPUD [commissioned a report evaluating how different UN human rights mechanisms](#) (the International Criminal Court, Human Rights Council, Universal Periodic Review, Human Rights treaty bodies and regional mechanisms) have weighed in on human rights issues relevant to people who use drugs, citing specific cases to review the effect or impact they had. The report concludes with recommendations for areas of focus as part of the work of INPUD with the Love Alliance.

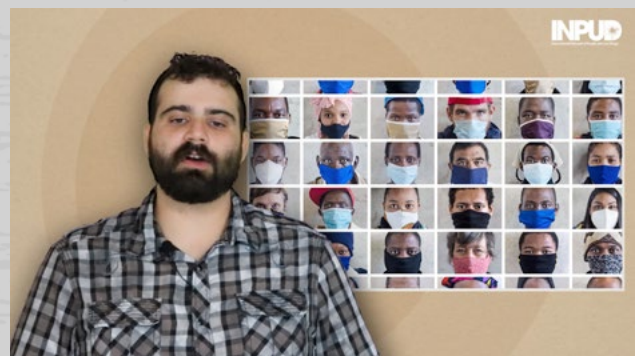
Briefing Note: Global AIDS Strategy 2021-2026

The UNAIDS Global AIDS Strategy 2021-2026 will serve as a road map for guiding key stakeholders to ensure an effective global AIDS response which centres key populations and communities. Since the adoption of the Strategy, INPUD and other key population advocates have been analysing it to identify how it can be

used to advance advocacy priorities. [This briefing note outlines](#) some of the targets set by the strategy – chiefly the ‘10-10-10’ social enabler targets – which can be useful for peer-led organisations in their work moving forward. The briefing note was translated into French, Spanish and Russian as well.

Technical Brief: 2021 Political Declaration on HIV and AIDS

Following the adoption of the 2021 Political Declaration at the UN High-Level Meeting on HIV and AIDS (HLM), INPUD developed [a technical brief](#) intended to give people who use drugs a better understanding of the Political Declaration and its relevancy to the work of peer-led networks at global, regional, country and local levels. The brief is intended to be read in parallel with our briefing note on the Global AIDS Strategy, and was translated into French, Spanish and Russian.



Short Documentaries and Info Videos

With the support of the Robert Carr Fund and in partnership with Rights Reporter Foundation, we published several short documentaries and videos summarising key issues from our community:

Why Should We Engage in the 2021 UN High-Level Meeting on HIV/AIDS (HLM): In preparation for the HLM, this video reviewed key advocacy points and opportunities for engagement to ensure the policies people who use drugs have been pushing for were included in the Political Declaration.

Drug Decriminalisation: Progress or Political Red Herring?: A compliment to our peer-led report on decriminalisation, this video shares the key areas where decriminalisation impacts the lives of people who use drugs along with recommendations for ensuring decriminalisation represents true progress.

Peers in the Pandemic: How Networks of People who Use Drugs Responded to the COVID-19 Pandemic:

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. This video gives an overview of this work and the drug user-led advocacy that resulted in reforms long championed by the community.

METZINERES: Environments of Shelter for Womxn who Use Drugs Surviving Violence:

METZINERES is a community-based organisation that organises communities of womxn who use drugs in Barcelona to provide safe environments for survivors of violence. This video introduces the incredible work done by METZINERES and features some of the people at the heart of the community.

National and Regional Network Updates

SANPUD Launches Bellhaven Harm Reduction Centre in Durban

During the COVID-19 pandemic South Africa saw 40-60% of people experiencing homelessness go into sudden and forced withdrawal after losing access to drugs or OAT. In response, the South African Network of People who Use Drugs (SANPUD) joined with collaborators in civil society and the Durban city government to informally provide short-term OAT in a parking lot which eventually grew into a temporary shelter during lockdown. People were offered HIV and TB testing, re-initiated on antiretroviral therapy and other medications, and linked with public clinics. From this programme was borne the idea for the Bellhaven Harm Reduction Centre, which SANPUD advocated for as well as serving as the fiscal agent and being involved in its governance. Bellhaven provides comprehensive peer-led services for people who use drugs, with peer support workers playing the lead role in the day-to-day running of the programme with nurses and social workers giving back-up support.

Bellhaven has become a national and global example of a successful crisis response by people who use

drugs. The Centre has been widely recognised and praised by the Department of Social Development, a notable achievement considering South Africa still employs a heavily prohibitionist approach to drugs. Though Bellhaven still faces challenges with funding and sustainability, there are plans for future expansion of the programme to include an overdose prevention room.

For those looking to replicate the programme Angela McBride, Executive Director of SANPUD, suggests “start small and aim high; with a small team, a few people who can give, and who are clear about what they can bring to the table. Ensure that people who use drugs are involved in each of these discussions and that we guide it every step of the way; we should be the ones implementing whenever possible. Start in a welcoming space where you can stay and build. If you want to start Bellhaven, or something like Bellhaven, do it because you love it and do it because you want to make a difference; do it slowly, like one human at a time, not when it just becomes about the money, the numbers, and the targets.”

Below: Members of the Bellhaven team.



North Carolina Urban Survivors Union Conducts NarcoFeminism Storyshare Project

The North Carolina Urban Survivors Union (NCSU) in the United States is challenging the male-dominated narrative of drug use and harm reduction through their NarcoFeminism Storyshare Project, which brings groups of women, transgender and non-binary people who use drugs together to tell their stories and develop new narratives about their lives that place intersectionality at the front. Trained facilitators – all women, transgender and non-binary people who use drugs – lead these sessions of up to 15 people who share stories on topics such as overdose, reproductive harm reduction, HIV and more.

As Caty Simon, a NarcoFeminism Storyshare facilitator and USU leadership team member, explained: “The storytelling process revealed, for so many of us, there had not been space for these stories. NarcoFeminism StoryShare actually goes beyond a simplified politicised analysis into the kind of messy, nitty-gritty, nuanced and complex pieces.”

Storytelling can build momentum towards collective action by building trust and accountability within and across movements. Inspired by the Narcofeminism StoryShare Project, NCSU joined an ongoing campaign

to defeat proposed legislation in North Carolina which would have expedited loss of child custody following a positive drug test and defined fetal substance exposure as child abuse. Eventually North Carolina’s governor vetoed the proposed law; the Governor’s remarks announcing the veto, referencing racially disparate impact among other possible consequences, were a clear nod toward the messaging from NCSU and partner organizations which originated in storytelling sessions.

AfricaNPUD Documents Human Rights Violations related to COVID-19

In 2021 AfricaNPUD conducted research to document human rights violations experienced by people who use drugs from 16 countries: Kenya, Burundi, Rwanda, Uganda, Zanzibar, Tanzania, Nigeria, Cameroon, Senegal, Cote d’Ivoire, Mali, Seychelles, Mauritius, South Africa, Mozambique and Mozambique. This was conducted through surveys distributed amongst the drug using community in these countries. The report will be completed in 2022 and dissemination is planned for May 2022. The launch will involve other regional networks of people who use drugs along with INPUD, IDPC, RCF, the UNAIDS regional office, and the Global Fund CRG. It will be shared with the Special Rapporteur on the Right to Health, and the African Commission on Human Rights.

Below: A narcofeminist story sharing session of NCUSU.



Bellhaven Harm Reduction Centre

BEGINNINGS

"[Durban's Bellhaven Harm Reduction Centre was] ...birthed from one of the most traumatic experiences in all of our lives - COVID," *Angela Mc Bride, Executive Director SANPUD*



COVID-19 pandemic measures left 40 to 60% of homeless people going into withdrawal, without access to drugs or OAT. People felt unsafe on the streets (including people who use drugs).

"Lockdown was ... an opportunity ... to shift the narrative in Durban, from a very prohibitionist stance to one that is much more understanding and supportive of harm reduction." *Michael Wilson, Executive Director of Advance Delivery and Access South Africa*



"We could run this program from a tent, we could run it from an underground parking lot - which is what we did, for the first 10 weeks of lockdown." *Monique Marks, Director, Urban Futures Centre, Durban Institute of Technology*



"... the municipality did something astonishing: that was to say, 'Here is the building, we want you to run a full-time harm reduction centre.' ... it sort of sprang out of nowhere ... from a municipality which had previously been very abstinence-based, and is now very supportive..." *Monique Marks*



WHAT BELLHAVEN DOES

Meeting the needs of people who use drugs and creating partnerships between the community and the city they live in.



The **eThekweni Municipality** provides the building, utilities, and 24-hour security

Advance Access and Delivery provides staffing

TB/HIV Care provides the needle/syringe programme and psychosocial support

SANPUD is the fiscal agent and is involved in its governance



Bellhaven runs a home-based care programme, delivering psychosocial support, methadone, and other medications to beneficiaries who are unable or unwilling to access services at the Centre.

"At the forefront, at the core of it, we as people who use drugs are leading it," *Angela Mc Bride.*



SUCCESSES



"... this is really a model not just for South Africa, but probably for the continent... it's been recognised as such ... by the Department of Social Development, who are really wanting to promote Bellhaven as a model for harm reduction ..." *Monique Marks*



Bellhaven has won a number of awards ... including *Inaugural Team Award* from the University of South Africa's Human Science Research Council and Universities South Africa for standout interventions during COVID-19, *2020 Community Engagement Project Award* and recognition as a top "Good Hood" initiative by the South African Cities Network.



NarcoFeminist Story Sharing

Developing Alternative Narratives, Producing New Knowledge, and Ensuring More Responsive Advocacy

Women, transgender and non-binary people who use drugs often face stigma and/or neglect from the general population, including other people who use drugs. Many drug users don't fit the White male narrative of drug use; this is what we talk about a lot.



These stories are so complex that they manage to touch people... [in] the places where people have carefully hidden what remaining stigma they have.

Caty Simon, Urban Survivors Union



These are the stories we have to tell if you want your freedom, if you want your kids, if you want your methadone. Unfortunately, when we tell them so often, they become the stories we believe.

Embracing the term "NarcoFeminist" announces, unflinchingly, that "I am a woman – and I use drugs" – with all the nuance and complexity implied therein.



In 2021, NCSU members joined an ongoing campaign, successfully defeating proposed legislation that would have had devastating impacts on pregnant people and new parents who use drugs.





Above: Representatives of the ECT come from eight countries in Eurasia.

BAPUD Engages the Burundi Minister of Health on Harm Reduction

With support from AfricaNPUD, the Burundi Association of People who Use Drugs (BAPUD) engaged in methadone and needle and syringe programme (NSP) advocacy for broader access and scale-up in Burundi. The network engaged in a roadmap on harm reduction with the Minister of Health, starting with facilitating trainings for health services providers and pushing for new facilities to host Burundi's methadone program. The roadmap, which is still an internal document not yet published by the Ministry of Health, will be implemented in June 2022. This will increase access to rights-based, quality services for people who use drugs in Burundi and is part of broader advocacy by AfricaNPUD for the introduction and scale up of harm reduction services in the region, where people who use drugs experience severe lack of access to harm reduction services due to political and religious conservatism and overall denial of the existence of drug use.

ENPUD Maps Procedures for OAT Registration, Quality Control

The ENPUD Expert Council on Treatment (ECT) is a group of the ENPUD Community Advisory Board which meets weekly to brainstorm solutions to the problems people who use drugs in the region face accessing OAT in their countries. The ECT has representatives from eight countries: Belarus, Georgia, Kazakhstan, Kyrgyzstan, Moldova, Russia, Ukraine, and Tajikistan. Several ECT members sit on decision-making bodies

in their countries, such as Global Fund Country Coordinating Mechanisms.

In 2021 the ECT began mapping the procedures for drug registration in all of their countries, including mechanisms for quality control and tendering. They created compiled an internal index of registered medicines and formulations (i.e. liquid, tablet, etc.), narcotics regulators, the procurement process, and what information is public. This information has helped ECT members to identify specific bottlenecks that impede OAT access and help informs productive conversations with government stakeholders, pharmaceutical companies, and healthcare providers. The presence of a paid coordinator enabled the group to make connections with one another and ensured the follow-up steps which the group identified were realised.

NAPUD Joins UNAIDS Regional Community Forum

NAPUD was founded in 2021 and has already grown substantially. A newly elected Board reflects a diverse governing body with representatives from 11 national drug user networks. NAPUD has also hired a program officer to help stabilise management of the network. As part of their work seeking technical expertise for drug user networks in the region, NAPUD joined the Regional Community Forum chaired by UNAIDS as a representative of people who use drugs. NAPUD's Regional Coordinator also joined the Technical Support Committee in the UNODC Pilot program on Community Led PrEP services amongst people who use drugs and their partners. This Pilot is currently being implemented in Thailand.

Looking Forward to 2022 and Beyond

Balancing the Scales – Workshop Addressing Self-Stigma in our Community

In early 2022 INPUD will partner with KeNPUD, VOCAL, Frontline AIDS and Alkimia Counselling on a workshop held in Kenya built around the 'Looking In, Looking Out' (LILO) approach, which was first developed in South Africa to explore identity and sexual orientation. The purpose of the workshop is to address self-stigma amongst our community of people who use drugs and help process some of the traumas we experience due to harmful drug laws and policies.

Rarely have we been given tools to address self-stigma, or been given the space to practice self-care. With this project we aim to start viewing self-care as a political practice, encouraging community leaders and members to promote a positive drug user identity and articulate the strengths of that identity. We also want to show how individual power can build resilience within our communities, confronting the very real problems of burnout and unique stressors from conducting our importance advocacy work.

Our Rights, Every Body's Rights: Drug Policy and Human Rights Technical Assistance Programme

In 2022, with the support of UNAIDS, the Robert Carr Fund and the Love Alliance, INPUD will conduct a new project aimed at promoting and advancing community-led decriminalisation agendas regarding people who use drugs and work towards addressing the punitive legal and policy environments that lead to the denial or limitation of access to services. The project will build the technical capacity of people who use drugs and women who use drugs to effectively advocate for decriminalisation and drug law reform in their respective countries, particularly by utilising the 10-10-10 targets on decriminalisation and the 80-60-30 targets on community-led responses included in the Global AIDS Strategy and 2021 Political Declaration

Currently, technical assistance forums are being planned in 2022 for Indonesia, Nigeria and South Africa in partnership with local drug user organisations in each

country. These will be guided by a technical assistance module which will serve as a resource for conducting the trainings and strengthening the capacity of people who use drugs in each national network to effectively advocate for the 10-10-10 and 80-60-30 targets, particularly in regard to decriminalisation.



Above: Jude Byrne, a fearless advocate for people who use drugs.

Jude Byrne Emerging Female Leader Award

INHSU and INPUD are proud to honour the memory of a legendary drug user advocate with the new Jude Byrne Emerging Female Leader Award. Jude Byrne was an extraordinary person and 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) as well as serving as a board member of INHSU. Jude was also a founding member of INPUD and acting Chair of the Board for close to a decade. Few people have left such a lasting impact on our movement.

The Jude Byrne Emerging Female Leader Award will be provided to two recipients who identify as female in recognition of their contributions to the community of people who use drugs. The Award includes a mentorship program that serves as a professional development opportunity for emerging female leaders. The mentorship program will be delivered by INPUD and tailored to the



Above: The Scottish Event Conference Centre, venue of INHSU 2022

awardees. There will also be \$10,000 (USD) per awardee allocated to supporting participation in the program. Awardees will also receive a full scholarship to attend the INHSU 2022 conference.

INHSU 2022

INPUD is a co-convenor of the 10th International Conference on Health and Hepatitis Care in Substance Users (INHSU2022), which will take place from 19-21 October, 2022 in Glasgow. In this capacity we are part of planning on the conference core committee and the community committee. The conference exists to unite researchers, clinicians, people with lived experience, policymakers, and community organisations to improve the health and wellbeing of people who use drugs. We are excited to reconnect with many people in our community, for some the first time since the onset of the COVID-19 pandemic, and have been working to get community speakers platforms throughout the programme.

Digital Security Training

Over the past few years, and particularly due to the COVID-19 pandemic, our community has significantly adapted the ways we communicate and work towards

more online advocacy. While we have done a good job adapting overall this shift has been difficult due to the ongoing impacts of criminalisation, poor access to technology and the digital divides our members and communities face. These developments have created greater flexibilities and opportunities, but they have also brought additional security risks for these networks and organisations. These security risks include concerns about privacy and confidentiality, disclosure, surveillance, theft of personal data/documents, hacking of emails and software, wiretapping, and more. There are also increasing concerns about the potential for public accusations and reprisals against organisations and individual activists especially in socially and politically repressive environments where human rights and freedom of expression and information are under attack.

With support from the Robert Carr Fund, in 2022 INPUD will be conducting a new project to develop and deliver an online security training module which will equip people who use drugs with the skills and information to operate safely amidst increasing concerns more safely regarding online advocacy. The training will consider the main risks associated with online peer-based advocacy and communication on issues such as harm reduction, reform of repressive drug policies, and protection of the health, human rights and dignity of people who use drugs. The information and materials developed as part of the training module will also account for the unique advocacy context of our community.



Above: INPUD are conducting training on online security

Financial Summary 2021

INCOME 2021

Total income received in 2021 £1,035,233.48

INCOME 2020

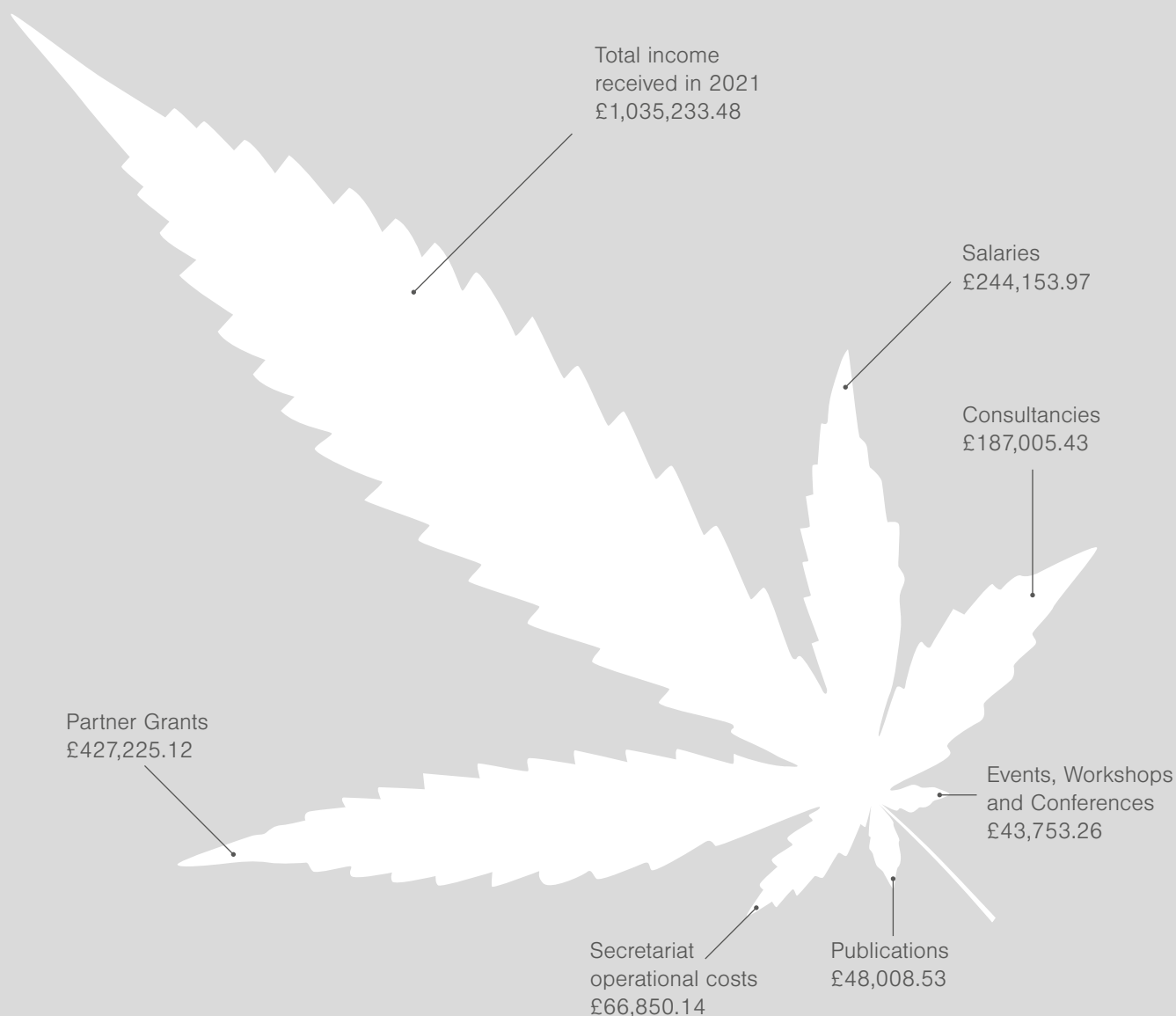
Total income received in 2020 £913,933.51

EXPENDITURE 2021

Secretariat operational costs	£66,850.14
Salaries	£244,153.97
Consultancies	£187,005.43
Events, Workshops and Conferences	£43,753.26
Partner Grants	£427,225.12
Publications	£48,008.53

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



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 very grateful for financial support from the Global Fund to Fight AIDS, Tuberculosis and Malaria, Community Rights and Gender – Strategic Initiative; the Love Alliance; the Robert Carr Fund for Civil Society Networks; and UNAIDS. INPUD would also like to thank all of the organisations and individuals who contributed to our work over the last year and to this document.

Written by: Jake Agliata

With contributions from: Judy Chang and Aditia Taslim

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