

South Asia

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The South Asia Regional Civil Society Consultation for UNGASS 2016 was held on 31st October 2015 in New Delhi. Civil Society Representatives from six countries working in the field of drug prevention and harm reduction were a part of this meeting organized by India HIV/AIDS Alliance, ADIC Sri Lanka and supported by UNODC-ROSA, New York NGO Committee on Drugs and Vienna NGO Committee on Drugs (VNGOC). The consultation included civil society & affected community representatives from Nepal, Bhutan, Bangladesh, Maldives, Sri Lanka and India. The participants represented NGOs engaged in Prevention, Treatment, Harm Reduction, Drug User Groups, People Living with HIV/AIDS as well as NGOs working with Women and Children. The consultation was based on the broad themes of Drugs & Health; Drugs & Crime; Human rights, Women and Children.



Participants in the CSTF Regional Consultation for South Asia

Best practices

While all countries implemented drug abuse prevention strategies with successes reported by Sri Lanka, it was noted that less than half countries had explicit Harm Reduction Policies being currently implemented. Countries with National AIDS Control Programs like India and Nepal attributed successful peer outreach to the fact that Ex-drug users and current drug users worked together for common outcomes. The availability of Methadone and Buprenorphine for treatment of Opioid dependence was highlighted as a good practice by Nepal and India.

Main challenges

Criminalisation of drug users and in some cases even the death penalty for drug related offences exists in almost all countries. High prevalence of HIV, TB and Hepatitis C among drug users in Nepal, India and Bangladesh. All countries reported multiple agencies engaged in law enforcement, drug control and health inadvertently created issues that impeded a comprehensive and coordinated response. However, it was also noted that this meant more options for information, education and treatment for drug users however diverse the message or methodology.

Further, we must respect the rights and personal choices of every person who uses drugs and they should not be coerced to choose any particular treatment option. Approaches to drug use must be scientific, evidence based and

socially and culturally appropriate. Addressing specific socio-economic and psycho-social determinants are imperative to achieving results through strategies like demand reduction, harm reduction and rehabilitation of drug users in the region

Action-orientated recommendations for the UNGASS roundtables:

Drugs and Health

✓ We are concerned about the rising incidence and prevalence of HIV and Hepatitis C among People Who Use Drugs in the South Asian region. Diagnostics and treatment services continue to be a public health challenge in many of our countries. We urge member states to prioritise the implementation of the WHO recommended 9 interventions that include access to treatment using drug substitution therapies for People Who Use Drugs including in prison settings. Considering that many countries in our region have more than one arm of government involved in drug control, prevention and treatment and the complexity of a unified approach to drugs notwithstanding, we recommend member states agree on a unified approach to people who use drugs that is grounded in public health.

Drugs and Crime

✓ We call on member states to abolish criminalisation of drug users and provide alternatives to sentencing and incarceration of people who use drugs. As an alternative to criminalization, drug policies that enable an environment conducive to deliver essential health services to drug users are worth investing in.

✓ We recommend the creation of a fine balance between ensuring access to and control over communities that compliment interventions in order to effectively address the drug problem.

drugs thereby ensuring the mitigation of barriers to accessing essential health services. A number of countries in our region have some very harsh drug laws and policies that not only infringe upon the right to health of individuals who use illicit drugs but have also impacted upon crime and therefore in incarceration rates. However many countries across the world are reforming their drug policies towards alternatives to sentencing and referral/diversion to treatment.

Cross-cutting issues: drugs and human rights, youth, women, children and communities

✓ Prevalent stigma surrounding drugs has disproportionately affected women and children and there is a need for a more gender sensitive and scientific approach to drug use among this highly marginalised population. Due to the nature of society in the South Asian region, stigma related to drug use coupled with the systemic discrimination of women have contributed to high levels of vulnerability. We rely on member states to develop policies and implement programs that address this issue through evidence based rights centred approach and that due attention be given to early intervention strategies among young people and women that have proven results.

✓ We believe that it is imperative to empower and engage both Recovered/Ex drug users and current drug users at the levels of policy development and program implementation. This has been the key to augmenting both the Demand Reduction and Harm Reduction programme in a number of South Asian countries. We urge member states to adopt a similar approach by investing in affected.