



13-15 October 2024 | Maison de la Mutualité, Paris

Forming a PWUD sector, lessons learnt, barriers and overcoming- how SA activists are working towards inclusive platforms for needs of PWUD and harm reduction budget advocacy

Klaas Mtshweni National PWUD Sector Leader







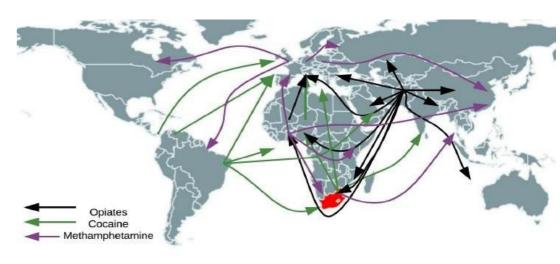




Epidemiological data

People who use drugs, HIV and viral hepatitis

- The estimated HIV prevalence rate in South Africa is approximately 13.9% which is around 8.45 million PLHIV in the country.
- There are an estimated 82,000 people who inject drugs in the country (as of 2022).
- There are estimated to be 400,000 people who use heroin, 350,000 who use cocaine, and 290,000 use methamphetamines.
- HIV prevalence among people who inject drugs is 21% (as of 2017)
 which is considerably higher than among the general population.
- One in every four people who injects drugs is living with HIV.
- The HIV prevalence amongst people in prisons is estimated to be 17.5% (as of 2020).
- The prevalence of hepatitis C (HCV) among people who inject drugs is estimated to be 43%, compared with 0.47% among the general population.



Adapted from World Drug Report 20:



National Context on Harm Reduction in South Africa

- Harm reduction in South Africa is underpinned by conflicting laws and policies that hinder the effective implementation of harm reduction programs.
- The Drugs and Drug Trafficking Act 140 (1992) focuses on policing of substances; while the Prevention of and Treatment for Substance Abuse Act 70 of 2008 guides drug treatment and specifically supports harm reduction-based strategies and projects in the country.
- The Minimum Norms and Standards that accompany Act 70 of 2008 are focused on abstinence-based approaches.
- South Africa adopted the 2022 High Level Political Declaration on HIV/AIDS and the 2025 Global AIDS Strategy Targets, which include the scale-up of harm reduction.
- South Africa's National Strategic Plan for HIV, TB and STIs (2023 2028) includes people who use drugs as a key population, and thus require a coordinated approach to mitigate the risk and spread of HIV and other infection diseases.



Harm Reduction Financing in South Africa

- The South African country submission to the Global Fund in September of 2021 reported a 96% funding gap for HIV interventions for people who use drugs.
- The major harm reduction service delivery funders have been CDC/PEPFAR and the Global the only domestic funding is from the City of Tshwane Municipality
- The National Government does not fund any harm reduction services or commodities in South Africa.
- Despite the Global Fund being the largest harm reduction funder, the allocation for people who use drugs in 2022-2025 was less than 3% of the total HIV allocation for the country and only 14% of the total allocation for people who use drugs - is allocated to methadone (OST).

Impactful investment. Overall, there's a 96% funding gap for HIV interventions for people who use drugs in South Africa, which is alarming given high HIV prevalence amongst people who inject drugs. While South Africa has endorsed global commitments to harm reduction scale-up, these have not yet translated into domestic financial and programmatic accountability.



Forming the PWUD sector within the South African National Aids Council (SANAC) Civil Society Forum (CSF)









Fast-Track Cities 2024 • October 13-15, 2024

- In 2019 the South African Network of People who Use Drugs (SANPUD) and organisations working in harm reduction engaged with various stakeholders in the planning and establishment process of the PWUD sector:
 - civil society organizations
 - · health professionals
 - policymakers
 - People Who Use Drugs (PWUD) themselves
- In 2022 a Technical Working Group was established from Four provinces in South Africa - Western Cape, Gauteng, KwaZulu Natal and Mpumalanga with the purpose of advocating for the establishment of a formalised "People Who Use Drugs" Sector.



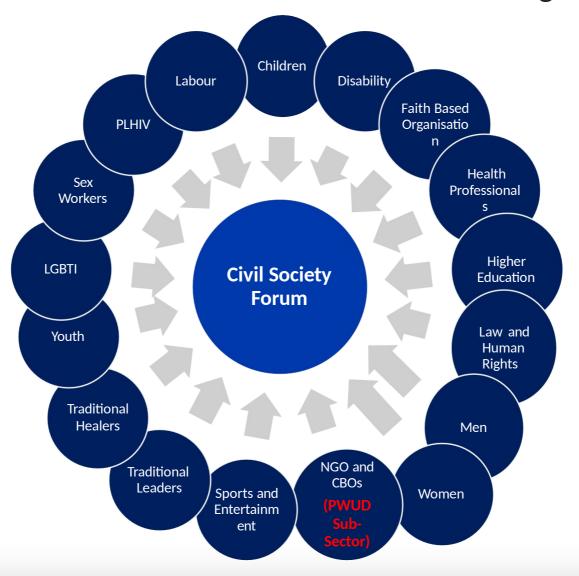


Purpose of the PWUD sector

- The main purpose of formalising the PWUD sector was to provide a formally structured platform that will advocate for the rights and health needs of PWUDs.
- To influence national policies and strategies related to drug use, harm reduction, and public health.
- To create a more supportive and effective framework addressing the needs of PWUDs, enhance the delivery of harm reduction services and support the implementation of evidence-based interventions.
- It also seeks to promote research that gathers data on drug use patterns, health outcomes, and the effectiveness of harm reduction programs to inform policy and best practice.



SANAC CSF has 18 CSF sectors as illustrated in the diagram below:





Role of PWUD Sector:

- The PWUD sector strives to be representative of people who use drugs in their diverse realities and contexts across South Africa.
- The sector membership is comprised of people who use drugs, service providers, human rights activists and PWUD programmatic and technical specialists.
- This sector boasts a diverse skill set which includes health, social development, legal, human rights, gender, advocacy, and research from its members.
- This diversity makes for a vibrant approach to collaboratively addressing the needs and challenges of people who use drugs, HIV, STIs, viral hepatitis, TB and other related health concerns; As well as ensuring that the human rights of PWUD are protected.







Challenges

Lack of availability for financial support and resources Poor
Representation
Lack of
understanding
of Harm
Reduction;
Complex
relationship
with Law
Enforcement;
Lack of stable
Networks in
the Province

Lack of funding for groundwork organisations including lack of IEC materials for facilitation engagements

Provincial leaders often struggle to reach / engage with their District leaders. have received concerns that district leaders are unable to reach Provincial leaders when required. This lack of communication creates many stumbling blocks in the ability to take the PWUD sector forward nationally

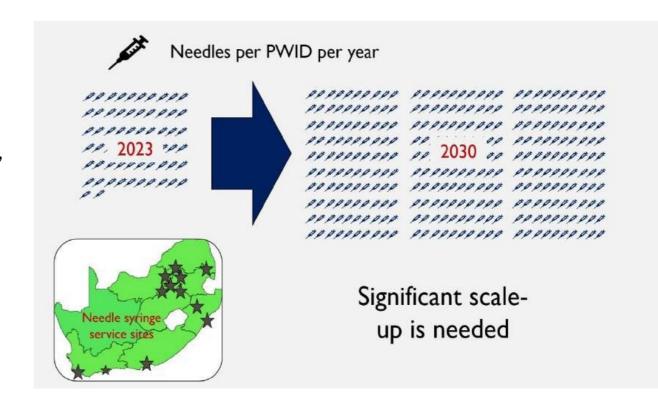
Lack of communicat ion between some provincial NGO/PWUD sector leaders in some of the provinces

Lack of regular reporting and data collection



Advocacy priorities for people who use drugs in Grant Cycle 7

- In November 2023, the PWUD sub-sector met to prepare for Grant Cycle 7 (GC7).
- This meeting identified PWUD sub-sector key advocacy priority areas for GC7. SANPUD, PWUD sub-sector leaders, the Global Fund principal recipient, sub-recipients and other stakeholders working in the field of harm reduction were consulted on identifying advocacy priority areas.
- In April 2024, the PWUD sub-sector hosted a virtual focus group discussion with 36 people who inject drugs across seven districts - to obtain their inputs in the GC7 application.





Advocacy priorities for people who use drugs in GF Grant Cycle 7

The following advocacy priorities were formulated from these meetings and are central to creating a more supportive and effective environment for people who use drugs in South Africa:

1. Healthcare Access:

- Integrated Health Services: Promoting integrated health services that address the physical and mental health needs of PWUDs, including HIV, TB, and hepatitis care.
- Training of Healthcare Providers: Educating healthcare providers on the specific needs and challenges faced by PWUDs to reduce stigma and improve care quality.

2. Legal and Policy Reform:

- Decriminalisation of Drug Use: Advocating for the decriminalisation of drug possession and use to reduce stigma and the criminal justice burden on PWUDs.
- Policy Alignment with Human Rights: Ensuring national drug policies align with human rights principles, protecting the dignity and health of PWUDs.

3. Harm Reduction Services:

- Needle and Syringe Programs (NSPs): Scaling up access to clean needles and syringes to reduce the transmission of HIV and other blood-borne infections.
- Scale-up Opioid Substitution Therapy (OST): Expanding access to medications like methadone and buprenorphine to support addiction treatment and reduce harm.

4. Funding and Resource Allocation:

- Sustainable Funding: Advocating for sustainable and adequate funding for PWUDs to ensure advocacy and support services for PWUD communities.
- Resource Allocation: Ensuring that resources are allocated efficiently and equitably to meet the needs of PWUDs across different provinces and communities.
- Establish services in 8 additional districts. Proposed districts (the reach target in these districts for NSP and OST should be no less than 1,500 people
- Continue supporting the 8 existing districts and increase the reach within those areas to match the geographic population of PWUDs; Reaching no less than 2,000 people per quarter with a comprehensive package of harm reduction services.
- Introducing "One stop shop" in West Rand which will be managed by the GF-PR This is a drop-in centre/clinic that caters for the needs of all key populations in that districts.

Conclusion

The establishment of the PWUD sector within the SANAC CSF represents a significant step towards addressing the unique needs and challenges faced by this Key Population/ community.

It is therefore against this background that the PWUD Sub-Sector made the submission to the South African National Aids Council (SANAC) to be considered as an additional stand-alone Sector within the SANAC CSF Sectors. The PWUD Sector is focused on strengthening advocacy efforts and supporting the implementation of services that work towards reaching the 95 95 95 goals laid out in our National Strategic Plans to end HIV and AIDS harms.

