

Overcoming barriers in access to HIV and drug services

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What barriers are we talking about?

- Legislations criminalising drug use, harm reduction services, sex work, etc.
- Law enforcement practices targeting people who use drugs and harm reduction service providers
- Legal and regulatory barriers in access to naloxone, drug checking services, drop-in centres
- Lack of drug services in prisons and other closed settings
- Lack of funding – or non-developed mechanisms for funding – for harm reduction and treatment services
- Stigma and discrimination from healthcare providers, from the general public, from public authorities

Legislations on criminalisation

- Action 1: Lack of common voice of progressive states on the issue of criminalisation, so focus on identifying countries that have decriminalised drug use in law or in practice and ask them to make a statement on decriminalisation in the Parliament, Commission on Social Affairs – draft a joint CSF statement on decriminalisation
- Action 2: Repository/summary of arguments used in courts on the decriminalisation of sex work, drug use and other key populations (PLHIV, LGBT+, migrants, etc.) to assess which ones were the most effective
- NOTE: Key message: criminalisation in a of itself is a barrier to health services

Funding for harm reduction

- Action 1: Focus on EU candidate countries – bring our message to those responsible within the Commission on negotiations around the admission of candidate countries to bring attention to funding for drug/HIV/hep/TB services
- Action 2: Address EMCDDA and ECDC to ask if they have any indicators to track funding for services in the Drug Strategy and Action Plan & programmes on HIV, hep, TB. If there is no such monitoring, we can call for such a mechanism to be created
- Action 3: Collate best practice examples of countries that have a funding mechanism (e.g. Portugal, Netherlands). This could be used by the EC, when providing funding, to ensure that good practice can be transferred and adapted in these countries

Health services in prisons and detention centres

- Action 1: Advocate for equal rights to health services at the annual meeting of the Prison Administration (institution under the Council of Europe) – with a joint CSF paper and ask to be invited to attend their next meeting
- Action 2: Advocate for the adoption of Council Conclusions on harm reduction in prisons after the elections have taken place (still need to discuss how to achieve this)
- KEY DOCUMENTS:
 - ECDC/EMCDDA policy paper on 'Health services in prison'
 - 'Health in prisons' project within WHO (meeting twice a year)
 - Statement by the European Parliament on prison overcrowding
 - Council Conclusions on alternatives to coercive sanctions for drug offenders