

INPUD Speech to UNAIDS PCB

Wednesday, 24 June 2009

Thank you chair and fellow participants in this UNAIDS PCB and thank you Christian for your clear report. I have the privilege to speak on behalf of the International Network of People who Use Drugs (INPUD), a global movement of current and ex drug users.

We would like to extend our thanks to Michel Sidibe for his leadership, vision and humanity. You cannot underestimate the impact when international leaders, such as Michel and Michel Kazatchkine from Global Fund, talk with compassion and understanding about our community. We offer ourselves as partners in our collective march towards Universal Access and Human Rights.

We would like to thank DfID for providing INPUD with its first seed funding and we call on other countries to support our community at a country, regional and global level to take part in the planning and delivery of HIV prevention and treatment, and discussions about wider harm reduction strategies.

We thank the Dutch Government for organising the donors conference earlier this year and we thank UNAIDS for the interim funding that has been key to INPUD's engagement as an international partner. We thank the World AIDS Campaign, and the International AIDS Alliance, for funding our participation in this meeting, and we note the financial constraints that prevent meaningful representation of people who use drugs from the developing world.

People who use drugs, and our organisations, are part of the solution not the problem. Too often, we are blamed for the policy failures of drug control. In fact, our community has consistently developed and championed public health strategies that improve the health and welfare of our, and the wider, community. For example, the world's first needle exchange was run by a drug user organisation in Holland, back in 1982, as a response to Hepatitis B. Needle exchange is now a cornerstone of HIV prevention strategies with people who inject drugs.

We call on UN agencies to develop an integrated response to the HIV and Hepatitis C pandemics that are decimating our community. We also call for a more holistic engagement in harm reduction around drug use that recognises the need to also work with non-injecting populations, people who use stimulant drugs, and those at risk of overdosing.

We welcome the new UNODC and WHO programme that will champion Universal Access to Effective Treatment options. We welcome Dr Gerra's willingness to engage with our community and his public opposition to the use of cruel and degrading practices that occur in the name of drug treatment. We call for research into effective treatments, both psycho-social and medical, for people who use stimulant drugs.

Most people who use drugs, and live with HIV and Hepatitis C, are still unable to access treatment options due to stigma and discrimination. The absence of Opiate Substitution Therapies also makes it harder for people who use drugs to achieve the stability required to access Anti-Retro Viral and Interferon treatments.

We are clearly entering a new chapter with strong and humane leadership from UNAIDS and other key international agencies. People who use drugs must be part of the assessment of the UNAIDS Outcomes. The inclusion of our voices in the planning and review of services is likely to lead to better value for money and more effective outcomes. We believe that interventions with people who use drugs should aim to enable our community members to live full, effective and empowered lives so we can truly be part of the solution rather than being framed as the problem.

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