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REDUCING DRUG RELATED HARM TO HEALTH

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BIOGRAPHY

Gerry Stimson, PhD, is Executive Director of the International Harm Reduction Association. IHRA is a global advocacy organisation which promotes a harm reduction approach to the use of legal and illegal psychoactive drugs. He is also Emeritus Professor of Sociology at Imperial College London.

He has nearly 40 years of research on drug and alcohol issues. He directed the Centre for Research on Drugs and Health Behaviour from 1990 until 2004, with a programme of research on reducing harms from drug and alcohol use including the evaluation of methadone and heroin prescribing, syringe exchange, surveillance of HIV and other blood borne infections, drugs in prisons, and prevalence of drug use.

He has over 200 academic publications. He has advised the UK government, the World Health Organization, UNAIDS, and the United Nations Office on Drugs and Crime, on drugs and HIV/AIDS. He is editor-in-chief of the International Journal of Drug Policy.

ABSTRACT

The prevention of HIV transmission through sharing syringes has been a key policy issue since HIV epidemics among injection drug users first emerged in the 1980s. Globally, there is in excess of 13million regular injectors, 80% of them in developing and transitional countries. Uncontrolled HIV epidemics have occurred in many places, with the proportion of injectors with HIV reaching in excess of 50% in the two years after the virus first appears in that population. However, in the past 20 years there is also evidence that many countries have been able to prevent, curtail or reverse HIV epidemics among drug injectors.

There is substantial evidence for the effectiveness of the various components of a comprehensive HIV prevention response - including the distribution of sterile needles and syringes, substitution treatment for injectors dependent on opiates, outreach, and voluntary counselling and testing - collectively known as harm reduction. There are major global inequities in harm reduction coverage, with few resources going to those countries where they are most needed. The UN has actively supported harm reduction, but during the past

15 months the consensus about effective intervention has come under attack from the US, starting with pressure on UNODC, and then on UNAIDS. Despite (or because of) this, there are now many countries that openly support harm reduction, and UNAIDS agreed an explicit harm reduction approach to HIV prevention for IDUs this year.

Important lessons have been learned about the role of NGOs in influencing global health policy for IDUs. Issues for the future concern how to take forward this re-affirmed mandate for HIV prevention, including next steps for UNAIDS and UNODC (as the lead UN agency for IDUs); donor resources to make up for the refusal of the US to fund needle exchange, and the need for the Commission on Narcotic Drugs in 2006 to explicitly support harm reduction and call on UNODC to support its implementation.

The presentation will draw on Beckley Briefing paper 9, *UNAIDS & the Prevention of HIV Infection through Injecting Drug Use*, and Beckley Report 4, *Reducing Drug Related Harms to Health: a Review of the Global Evidence*.