

**“NEW HARM REDUCTION” SERVICE MODELS
FOR
NON-INJECTING DRUG USERS, PEOPLE WHO USE STIMULANTS /
NEW PSYCHOACTIVE SUBSTANCES & LGBT+ COMMUNITY
PRACTICING CHEMSEX**

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CONTENT

- Context and Preconditions
- Concept of New Harm Reduction Service Models
- Package of Services
- Service Delivery Outlets and Strategies
- Expected Benefits
- Process and Progress



PRECONDITIONS - DRUG USE

- Use of Stimulants and New Psychoactive Substances
- Use of Non-Injecting Drugs, including in recreational settings
- Cases of overdose, health complications and overdose related deaths reported by media and civil society organizations
- Use of drugs among LGBT+ community, including drug use in Sexual Context and emerging Chemsex practices
- Characteristics of People who Use Drugs (younger population, use in recreational settings)
- Limited awareness, knowledge and experience in drug use, leads to increased risks of overdose



PRECONDITIONS - HARM REDUCTION

- Existing Harm Reduction programmes focused at injecting drug use
- Young / recreational users, as well as LGBT+ communities are left behind services, including harm reduction, prevention and addiction care services
- Challenges linked to high toxicity of NPS and risk of overdose remain unanswered
- Risk behaviors linked to HIV, HCV and STIs, including high risk sexual practices under influence of drugs
- Intersectionality of target communities is not considered



CONCEPT OF MODELS

- Introduce services for Non-Injecting Drug Users, including Recreational Users
- Sensitize services to recruit people who use Stimulants and NPS, including injecting drug users
- Introduce services for LGBT+ using drugs, including those practicing Chemsex
- Promote intersectionality among target communities and mainstream concept of integrated service delivery



TARGET GROUPS

- Young People who Use Drugs
- Recreational Drug Users
- Ravers who Use Drugs
- Non-Injecting Drug Users
- People who Use Stimulants and New Psychoactive Substances
- LGBT+ Community Members who Use Drugs
- LGBT+ Community Members who Use Drugs in Sexual Context and Practise Chemsex



PACKAGE OF SERVICES

Basic Traditional Services:

- HIV and HCV Testing
- STIs
- Needles, Syringes and Other Injecting Paraphernalia
- Naloxone
- Risk Reduction Counseling
- Condoms and Lubricants
- Targeted Information-Education-Communication
- PrEP (Daily and On-Demand)

Add-on Specific Services to be Piloted within the Model

- Non-Injecting Harm Reduction Paraphernalia
- Rave Recovery
- Drug Checking
- Chemsex Package



ADD-ON SERVICES

Non-Injecting HR

- Smoking Pipes
- Glass Stems
- Mouthpieces
- Foil
- Snorting Straws
- Etc.

Drug Checking

- Colorimetric Tests
- Chromatography
- On-Site and Off-Site Testing

Rave Recovery

- Magnesium
- 5-HTP
- Vitamin C
- B Vitamins
- Drinking Water
- Earplugs
- Chocolate Bars
- Bad Trip Management
- First-Aid
- Chill-Out Areas
- Etc.

Chemsex

- Package - HR paraphernalia
- Specific - Booty Bumping, etc.
- Standard - HIVST Condoms + Lubs
- Etc.



INTEGRATED SERVICE DELIVERY MODELS

LGBT+ Community

- Standard Package of HIV Prevention Services (GFATM)
- Add-On Harm Reduction / Drug Use Services / Chemsex (Pilot)
- Additional Considerations (Pilot)
 - Community Based PEP
 - HIV Testing Strategies

YPUD

- Add-On Harm Reduction / Non-Injecting / Stimulants / NPS / Drug Checking / Rave Recovery (Pilot)
- Integration with Basic Traditional Harm Reduction Services (GFATM)



SERVICE DELIVERY OUTLETS

Drop-In / Community Centers

Outreach

Night Clubs / Musical Festivals

Chemsex Parties

Postal Delivery

Online Outreach

Vending Machines



EXPECTED BENEFITS

- Reduced drug use related harms among YPUD, Stimulant/NPS users and LGBT+ Communities, including prevention of health complications and overdose.
- Recruiting and linking to care populations who are not reached by most of traditional harm reduction services and have limited perception of risks and do not seek HR, prevention or other care.
- Prevention of HIV and other STIs, through addressing high risk sexual behavior under influence of drugs
- Improved detection of HIV and STIs, through reaching-out most at risk populations
- Improved access to complex and diverse HIV and HR services through integrated and intersectional approach



PROCESS

- **Partner Organizations:** Mandala and Equality Movement
- **Elaboration of Models:** May-June 2021
- **1st Stage** - Piloting of Models: September 2021 (1 year)
- **2nd Stage:** Capitalization on Generated Experience
- **3rd Stage:** Scale-up and Integration into National Response



THANK YOU !

