Regional overview on barriers in access to HCV treatment and care for people using drugs in EECA

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Overall, there are approximately 3 million people who inject drugs who live in the region. 66% of them are in Russia, 77% in Russia and Ukraine.

State of harm reduction report 2020

На русском

In English
In 18 out of 29 countries Hepatitis C spreads more than 50%
Key challenges and barriers

Barriers in access to health and social care
✓ Criminalization of people using drugs
✓ Drug registry
✓ Decrease in funding for harm reduction
✓ Low coverage of harm reduction services and poor quality of programs
✓ Increased use of new psychoactive substances
✓ Lack of political support to comprehensive support for people using drugs
✓ Pressure on civil society

Barriers to access to HCV care:
• Low access to diagnosis and treatment
• No specific targeted programs
• Low awareness
• The high cost of therapy
26 of 29 countries in the region, except Russia, Uzbekistan and Turkmenistan

Barriers:
- Difficulty in accessing
- No take-home OAT
- Difficult to comply with the program inclusion and exclusion criteria
- Simultaneous use of several substances
- Drug user registry
- Lack of psychosocial support
27 of 29 countries in the region, except Turkmenistan and Bulgaria

**Barriers:**
- Difficulty in accessing
- Poor quality of services
- Mismatching customer needs
- Lack of psychosocial support
Eurasian Harm Reduction Association

STRATEGY 2020-2024

MISSION
Actively unite and support communities and civil societies to ensure the rights and freedoms, health, and well-being of people who use psychoactive substances in the CEECA region.

VISION
We envision each CEECA country to have an active movement that advocates for humane policies and access to evidence-based and needs-based harm reduction services for people who use psychoactive substances.

THEORY OF CHANGE
Mobilize supporters and movement. Movement means the collective and coordinated actions of alliances that work to deliver our common agreed-on advocacy goals.

Strive to ensure the voice of the community is heard and influences decisions.

Attract and develop resources, expertise, information and tools.

Change public opinion through communication and campaigns.

STRAATEGIC GOALS
1. Develop and support national movements of allies advocating for legal regulations aimed at decriminalization, depenalization, and protection of the rights of people who use psychoactive substances.
   - impact on national governments
   - documenting cases
   - reporting on human rights violations
   - humanization of drug policies
   - community capacity development
   - effective legal regulations and practices
   - advocacy against drug propaganda laws

2. Strengthen advocacy for access to high-quality, evidence-based, gender-transformative, non-discriminatory harm reduction services in freedom and in closed settings that have proven to be effective and are based on people’s needs and human rights.
   - quality and comprehensiveness of harm reduction services
   - new psychoactive substances (NPS)
   - changes in the drug scene
   - innovative services
   - access to quality OST

3. Ensure sustainability of harm reduction services as part of the transition from donor support to national funding.
   - state’s sustainability of quality harm reduction services
   - international donor investments
   - effective transition to domestic funding
   - monitoring of quality harm reduction services

4. Ensure efficiency and sustainability of EHRA.
   - regional partnerships
   - regional and global reputation
   - capacity of EHRA members
   - sustainability of EHRA and EHRA members

322 individual and organisational members from 29 countries of CEECA

https://harmreductioneurasia.org/