

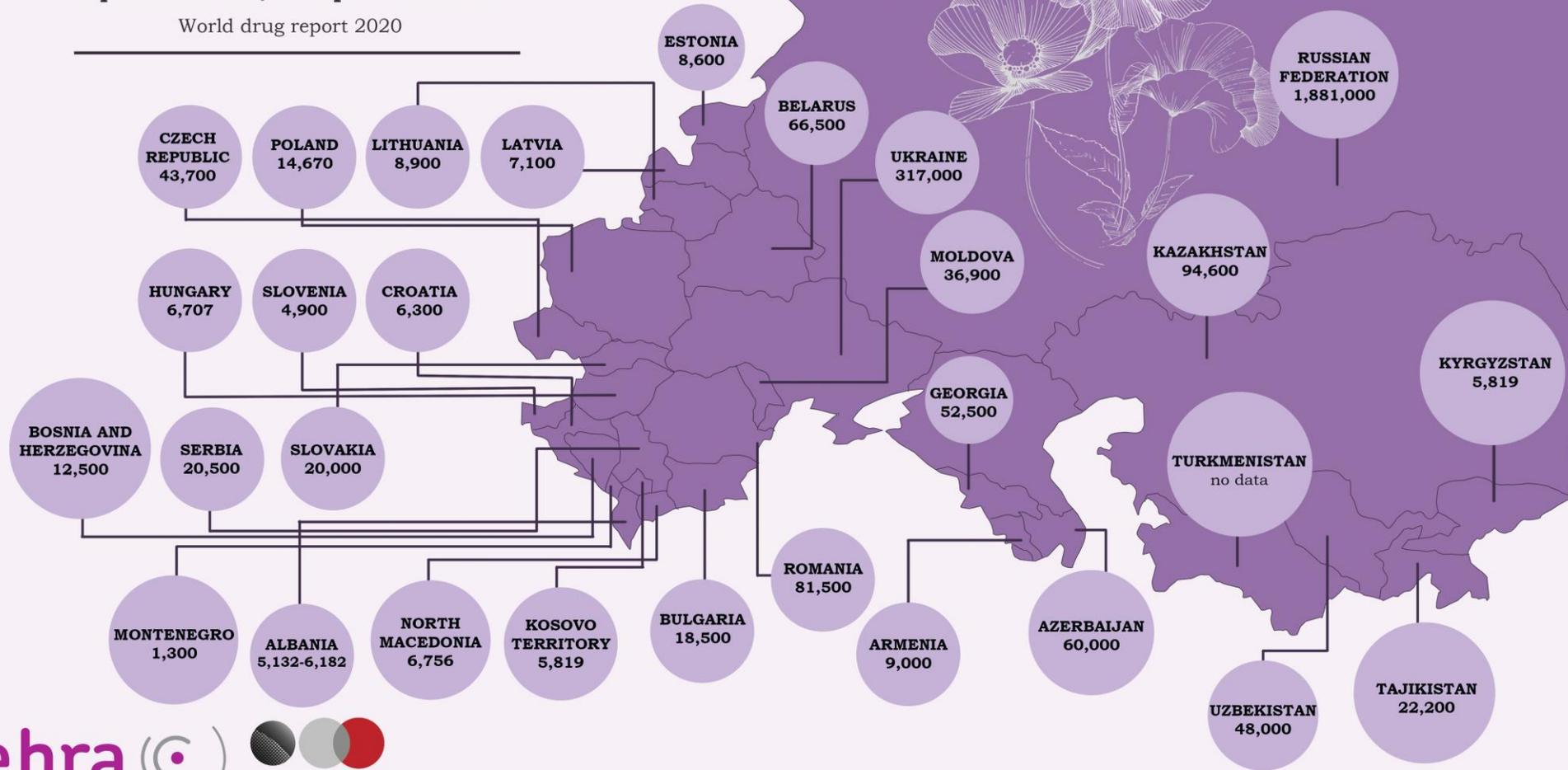
# Regional overview on barriers in access to HCV treatment and care for people using drugs in EECA

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# The number of people who inject drugs

Globally, between 7% and 19% people who use drugs are estimated to suffer from drug use disorders, meaning that their pattern of drug use is harmful, or they may experience drug dependence and/or require treatment.

World drug report 2020



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

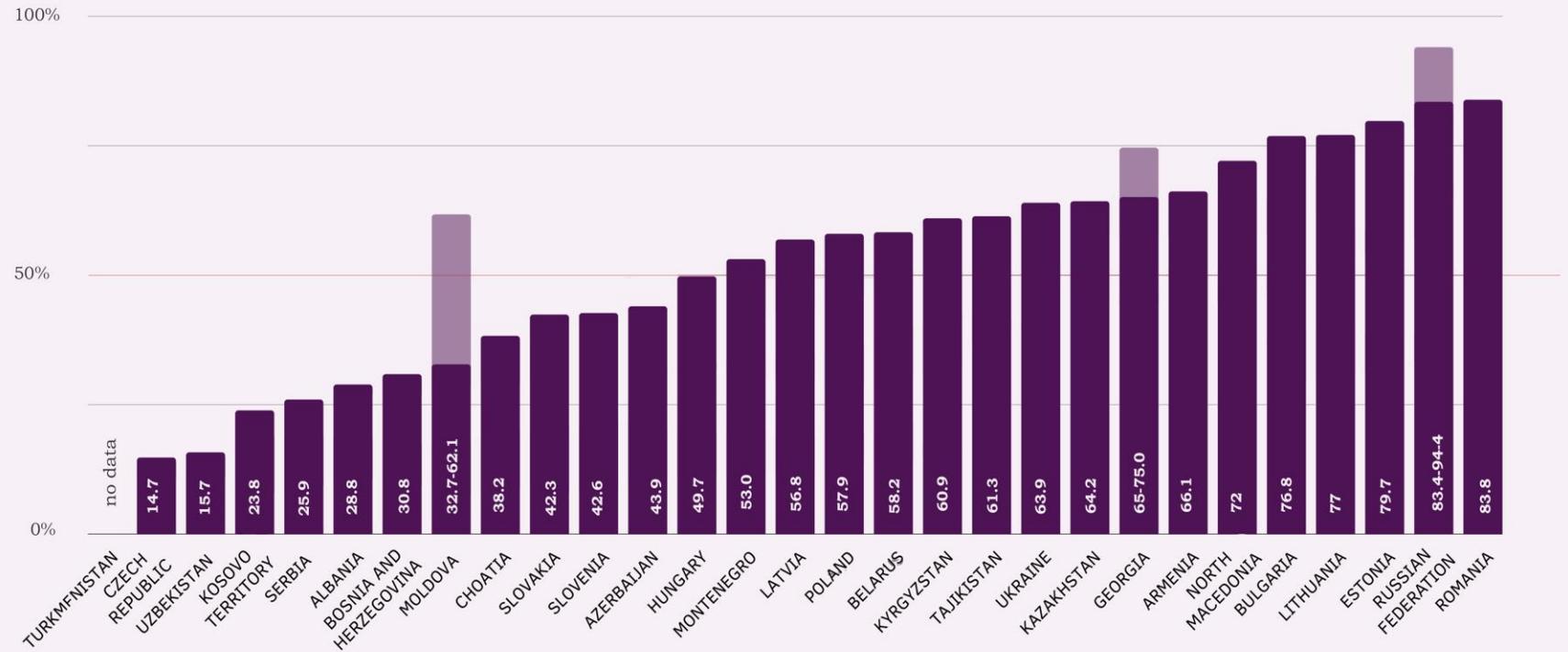
[State of harm reduction report 2020](#)

[На русском](#)  
[In English](#)

# Hepatitis C among people who inject drugs

Hepatitis C prevalence among people who inject drugs exceeds 50% in 18 out of 29 countries

In 18 out of 29 countries Hepatitis C spreads **more than 50%**



## Barriers:



Low awareness



Criminalization for people who use drugs



Low access to diagnostics and treatment



Expensive treatment

# 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

# Opioid Agonist Treatment (OAT) Programmes

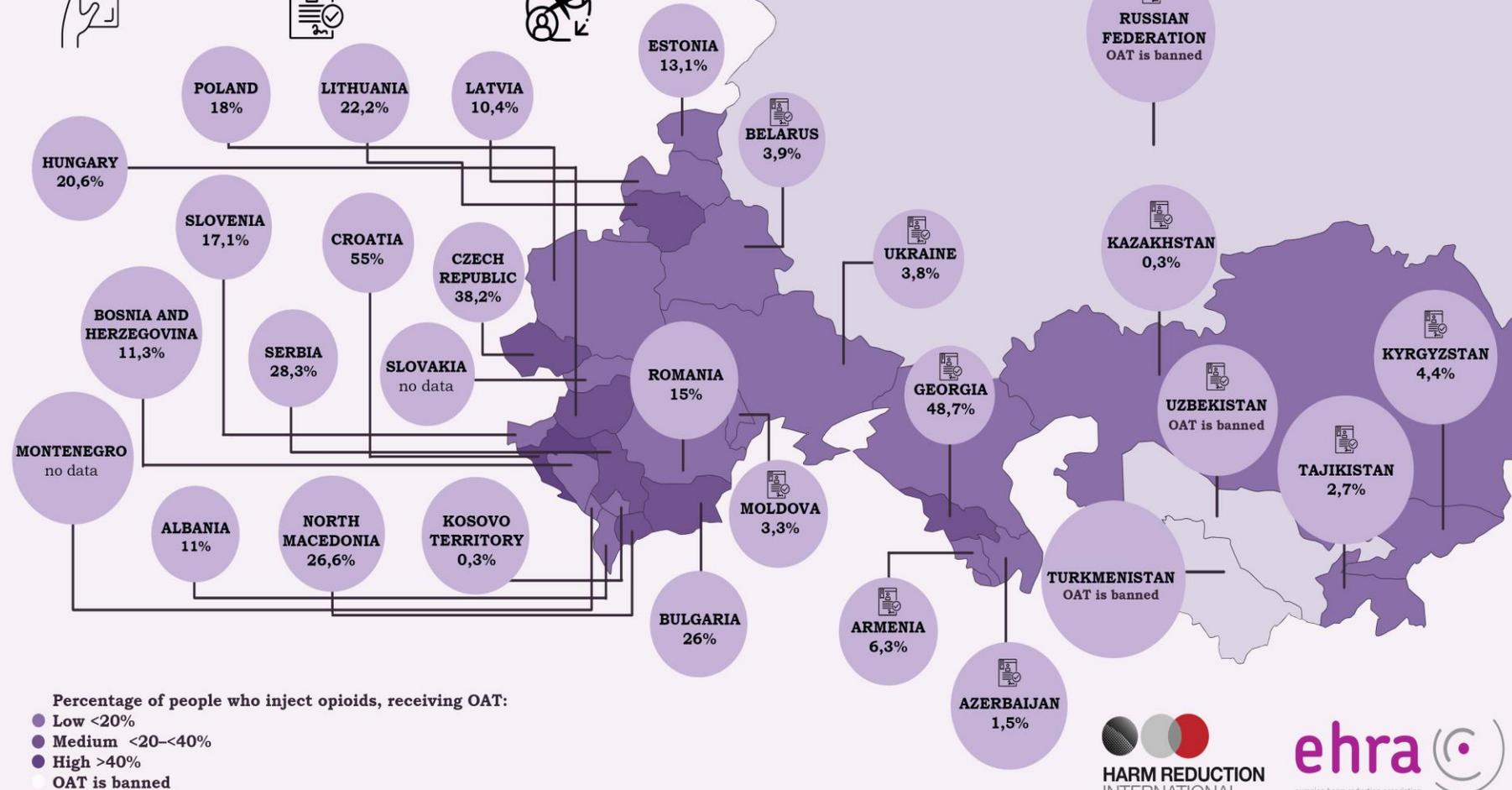
## Barriers to access services:



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

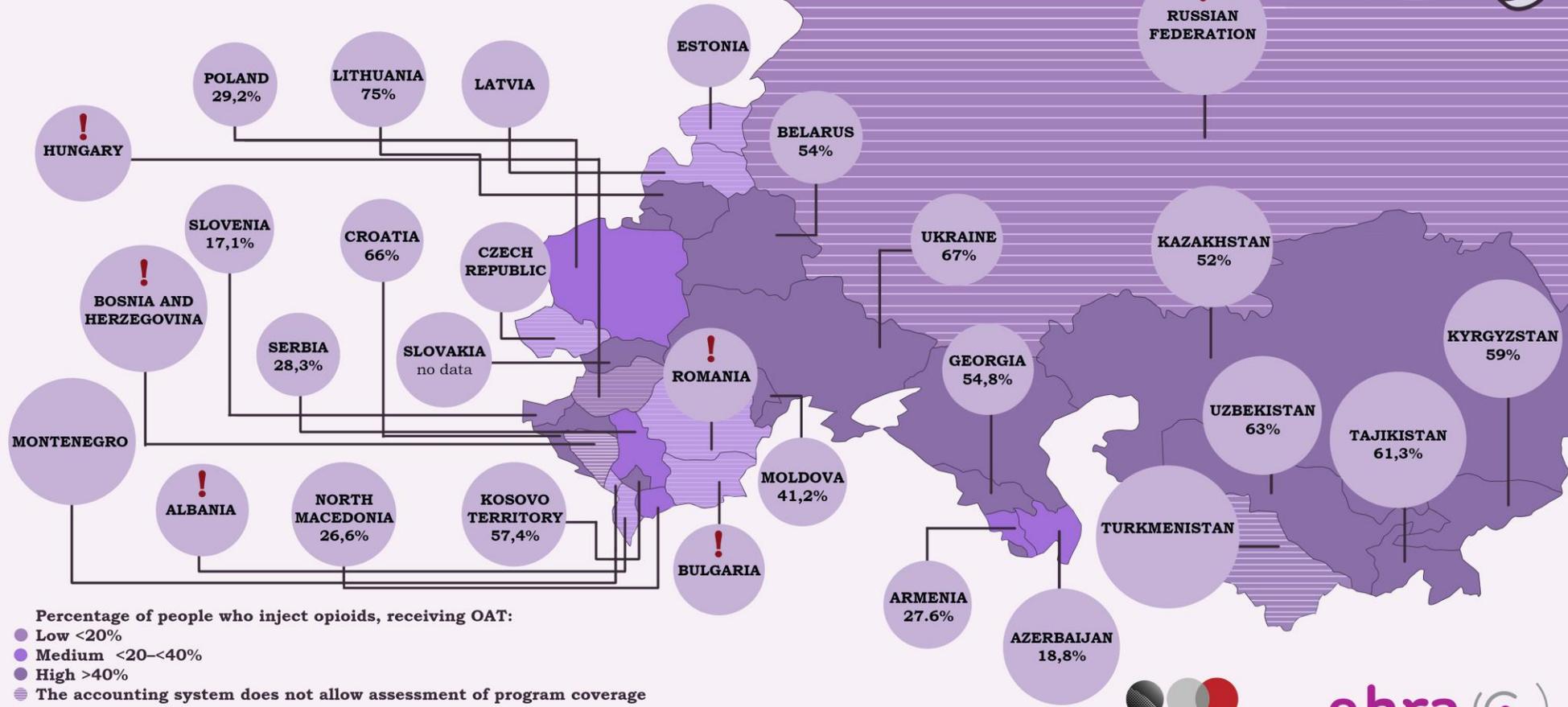
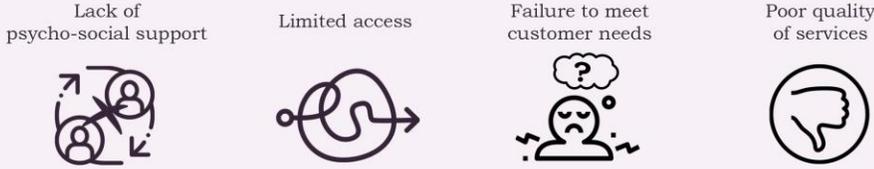


# Needle and syringe program

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

## Barriers to access services:



Percentage of people who inject opioids, receiving OAT:  
 ● Low <20%  
 ● Medium <20-40%  
 ● High >40%  
 ● The accounting system does not allow assessment of program coverage  
 ! Countries where programs have closed/ threatened to close

# 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.

**Attract and develop** resources, expertise, information and tools.

**Change public opinion** through communication and campaigns.

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

## STRATEGIC 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



**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



**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



**4. Ensure efficiency and sustainability of EHRA.**

- regional partnerships
- regional and global reputation
- capacity of EHRA members
- sustainability of EHRA and EHRA members

ehra   
eurasian harm reduction association

[harmreductioneurasia.org](https://harmreductioneurasia.org)

322 individual and organisational members from 29 countries of CEECA

<https://harmreductioneurasia.org/>