



## APCOM Community Consultation

Good Morning and Afternoon to friends and Colleagues

My name is Francis Joseph and I am the voice of People Who Use Drugs in Asia and I would like to thank APCOM for giving me the opportunity to provide a brief perspective from my community of People Who Use Drugs.

1. First of all, I would like to say that – “we are not addicts, junkies, social evil, mentally ill person, criminal or patient” – WE ARE PEOPLE WHO USE DRUGS! We use drugs by our own choice and preferences. We decided to use for many reasons and hence the decision will be ours if we ever wanted to quit. It must happen organically and never by force. Pitying and humiliating us for our decision to use will never work. It will only delay our decision making process to either use responsibly or quit organically.
2. We need to educate and empower individuals to reduce drug use related harms and to make informed decisions and also respecting their human rights and dignity.
3. We are gravely concerned because of the unlawful war on drugs approach adopted by many governments that thousands of people Who Use Drugs in many Asian countries have been brutally murdered simply because they were suspected of using or selling drugs and additionally tens of thousands of people are being incarcerated without any fair trial. We are also concerned by the fact that our community members continue to be detained in the name the “Treatment” inside compulsory detention centres and private rehabilitation centres where there fundamental rights are violated on a daily basis. Every year, many people die due to torture and lack of timely access to health services in these private rehabilitation centres yet they go unreported.
4. These punitive approaches has left the community of people who use drugs far behind in the region. There are missing approaches to community based/community led service delivery and communities need to be meaningfully engaged in all countries to ensure peer-led HIV services if we intend to see a people centred Political Declaration.



5. There is a need to address Legal, social, structural barriers and human rights violations along with broadening space for communities.
6. There is an overlap between all KP groups (PLHIV, Transgender people, Gay and Bisexual MSM, SW, PWID and people in closed settings such as prisons) and therefore specific targets needs to be set and explicitly mentioned for each KP group. This will help in developing effective approaches on service delivery.
7. Emphasis should be laid upon the need for enabling legal environments including that of women and girls where they can consent to health care on their own behalf and have protections for their personal property.
8. Meaningful involvement of civil society in HIV and Health services related decision making processes. This also requires investments in emphasising on community led advocacy / community led responses / community led monitoring towards creation of an enabling environment for the community of people who use drugs.
9. Donors and government should invest more in legal and policy reform to end criminalisation of people who use drugs.
10. Harm Reduction tools such as NSP/OST need to be prioritized including HIV, TB, Hepatitis and Overdose interventions.
11. We call for dedicated additional investment in the stimulants response to support practice development, research, community mobilisation and capacity building through innovative approaches to address the needs of people who inject/use stimulant drugs.
12. We also call for a proper investment and research into treatments with (safer) agonist medications with people who use stimulant drugs associated with HIV transmission.
13. On the ending note I wouldn't want to miss COVID-19 related risk mitigation measures for programs to fight HIV, Tuberculosis, Hepatitis and Overdose to support for COVID-19 interventions needed towards safe implementation at the community and facility level and additional delivery and procurement costs to addressing disruptions caused due to COVID-19 pandemic.

Thanks for giving me the time to speak.

Francis Joseph, ANPUD