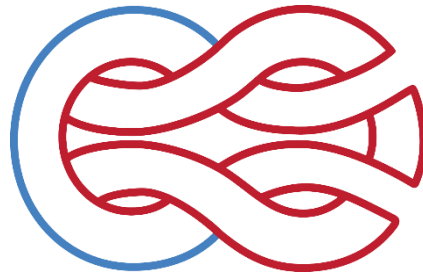
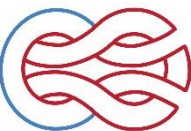


Drug Policy Network South East Europe



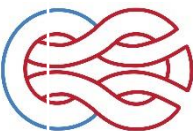
The Network

- **Formally created in October 2015 by 10 organisations**
- **Initiative of the civil society organisations from the countries of the region which cooperate for more than 10 years**
- **Mostly harm reduction service providers, but also preventive, therapeutic and programs of rehabilitation and re-socialisation**
- **Currently 27 member organisations from 11 countries**



Member organisations

- Aksion Plus, Tirana, Albania
- Aliat, Bucharest, Romania
- Alliance of NGOs for Drugs and Addictions, Slovenia
- ARAS, Bucharest, Romania
- Cazas, Podgorica, Montenegro
- Centre for Humane Policy, Sofia, Bulgaria
- Coalition 'Margini', Skopje, North Macedonia
- Centre for Life, Athens, Greece
- Diogenis, Athens, Greece
- Duga, Šabac, Serbia
- HOPS, Skopje, North Macedonia
- HELP, Split, Croatia
- Initiative for Health Foundation, Sofia, Bulgaria
- Juventas, Podgorica, Montenegro
- Labyrinth, Prishtina, Kosovo*
- Margina, Tuzla, Bosnia Herzegovina
- Čovekoljublje, Belgrade, Serbia
- Positive Voice, Athens, Greece
- Prevent, Novi Sad, Serbia
- Proi, Sarajevo, Bosnia Herzegovina
- Prometheus, Athens, Greece
- Re Generacija, Belgrade, Serbia
- RHRN, Bucharest, Romania
- SEEAN, Ljubljana, Slovenia
- Terra, Rijeka, Croatia
- Timočki omladinski centar, Zaječar, Serbia
- Viktorija, Banja Luka, Bosnia Herzegovina



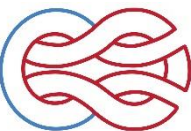
Epidemiology of HIV and viral hepatitis and harm reduction response in SEE

Country/ territory with reported injecting drug use	People who inject drugs	HIV prevalence among people who inject drugs (%)	Hepatitis C (anti- HCV) prevalence among people who inject drugs (%)	Hepatitis B (anti- HBsAg) prevalence among people who inject drugs (%)	Harm reduction response			
					Needle and syringe programme (NSP)	Opioid agonist therapy (OAT)**	Peer distribution of naloxone	Drug consumption rooms (DCRs)
Albania	5,132 - 6,182	0.5	28.8	11.5	✓ 2	✓ 6 (M, B)	✗	✗
Bosnia Herzegovina	12,500	0.0	30.8	0.2 - 3.1	✓ 5	✓ 12 (M,O)	✗	✗
Bulgaria	18,500	6	76.8	5.0	✗	✓ 30 (M,B,O)	✗	✗
Croatia	6,300	0.5	38.2	0.9	✓ 144	✓ (M,B,O)	✗	✗
Greece	3,339	4.1	60.5	2.2	✓ 12	✓ (B,M)	✗	✗
Kosovo*	5,819	0.0	23.8	4.1	✓	✓ 4 (M)	✗	✗
Montenegro	1,300	0.5	53.0	1.4	✓ 13	✓ 5	✗	✗
North Macedonia	6,756	0.0	72	5.6	✓ 16	✓ 16 (M,B)	✗	✗
Romania	81,500	15.9	83.8	5.2	✓ 63	✓ (M)	✗	✗
Serbia	20,500	0.0	25.9	3.6	✓ 2	✓ 23 (M,B)	✗	✗
Slovenia	4,900	0.0	42.6	4.6	✓ 12	✓ 10 (M,B,O)	✗	✗
Turkey	12,733	0.5	49.2	3.5	✗	✓ (B,M,O)	✗	✗

Data from the Global State of Harm Reduction 2020

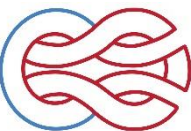
Outbreak of the corona virus

- **DPNSEE Board had on-line communications on 25 and 26 February**
- **Letter to member organisations on 26 February**
 - Calming the situation and avoiding panic
 - Inform people we are supporting about the protective measures
 - Activate full spectrum of protection measures for staff
 - Establish close cooperation with authorities, especially national and local public health
 - Offer services other than ordinary actions to support overall efforts of overcoming the critical situation
- **Public appeal to protect vulnerable groups from coronavirus on 2 March**



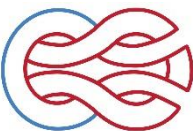
Informing key populations

- **Populations we serve are not fully informed and socialised**
 - People who use drugs, homeless, sex workers, LGBTI, young people in conflict with law, (former) prisoners, immigrants and refugees
- **Leaflets that may be of use when working with key populations and staff**
 - General protective measures
 - Protective measures for cannabis users
 - Instructions for people who take drugs snorting
 - Instructions for people who go clubbing
 - Instructions for sex workers
 - People living with HIV



Advocacy tools

- **Suggestions about treatment, care and rehabilitation of people with drug use disorder in the context of the COVID-19 pandemic**
- **The role of the communities**
- **Active tips to share with clients**
- **Patient rights in the time of corona**
- **Advice for service providers**
- **Crime in the Western Balkans during the coronavirus - early findings**



CONFERENCE ON PROTECTION OF VULNERABLE POPULATIONS IN SOUTH EAST EUROPE

COVID-19



DRUG POLICY
NETWORK SEE

online conference - 23 April 2020

dpnsee.org

**Social, mental and economic consequences
of the coronavirus pandemic
to the vulnerable populations in SEE:
Do we know them and how to recognise and respond to them?**

**online conference
16 July 2020
14:00 CET**



Donor conference For vulnerable populations In South East Europe

online conference
6 August 2020
13:00 CET

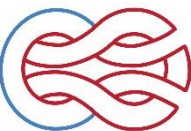


DRUG POLICY
NETWORK SEE

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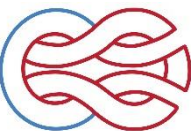
Adjusting regular services

- **Sharing larger quantities of equipment to the users and other key populations (needles, syringes, cookers, alcohol, tourniquets, distilled water, condoms and lubricants)**
- **Take-away therapy for longer periods (3 days to 3 weeks)**
- **Washing and drying clothes service**
- **Online consultations and consultations over the phone, with peer workers, social workers doctors and psychologists**
- **Continued HIV testing**
- **Fighting stigma and discrimination**



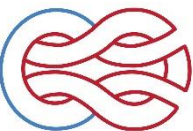
New emerging services

- **Sharing protective materials: masks, gloves, disinfectants**
- **Food and hygienic packages distribution** (lunch packages with essential groceries, weekly food packages, hot meals, water, personal hygiene items)
- **Shift to outreach, streetwork**
- **Outreach work to people in (self) isolation**
- **On-line support or by phone, including counselling, case management of users and social services handling**



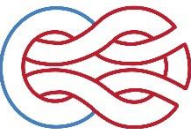
New emerging services

- **Shelter for vulnerable homeless people**
- **Work with and support to people returning from abroad**
- **Cases of foreign citizens blocked in the country**
- **Crowdfunding campaigns**
- **Coronavirus testing**



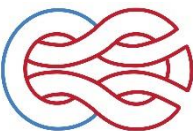
Organisation

- **Additonal training for staff**
- **Only necessary staff in the services; frequent disinfection of the premises; transport problems; pressure on managers**
- **Shorter working hours, distributing materials through windows or at the door, arranged meetings, waiting lists, desinfection on entrance and obligatory masks, limited number of persons inside the space,**
- **In some countries, seivices had to stop operating during the lockdown**
- **Serving new vulnerable groups**
- **Lact of protective equipment for the staff**
- **Work from home, no limit of working time, not enough privacy**

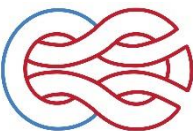
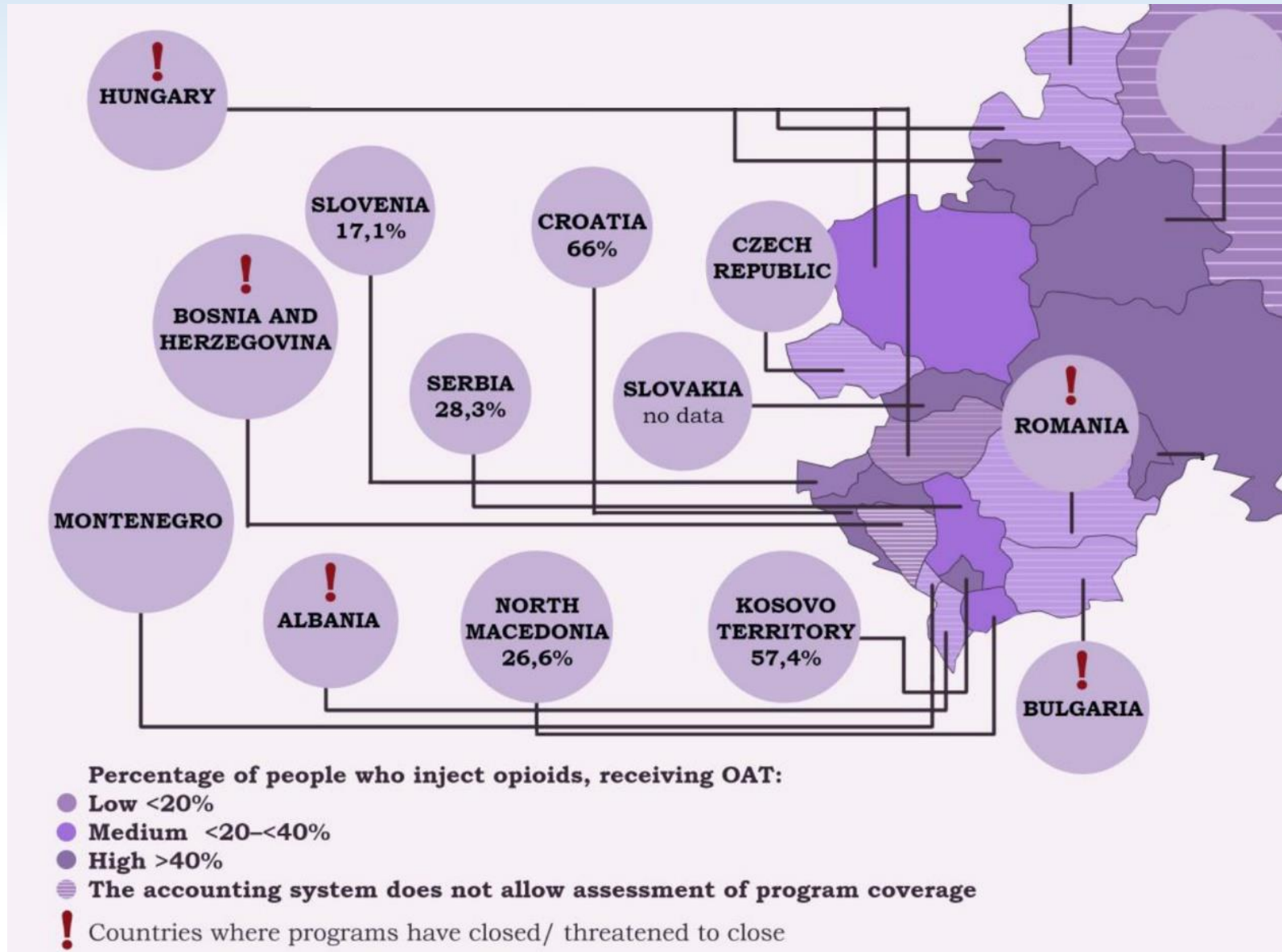


The influence of COVID-19 on harm reduction services

- Key populations are side-lined and not enough covered by health care
- Service interruption due to deficiencies in the supply chain
- Specific situation in „ghetos“ during lockdown
- Cut of project budgets for regular services
- Internal cuts and savings
- The situation varies from country to country
- It is very critical in Bosnia Herzegovina and Bulgaria and also in Albania and Romania

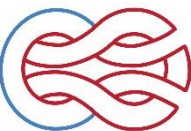


Needle and syringe programs



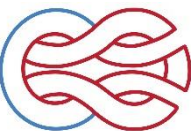
Consequences to the vulnerable populations in SEE

- **Loss of jobs, inability to maintain economic independence**
- **Increased risk of homelessness**
- **Endangered or worsening mental health due to social isolation and no contact with the loved ones**
- **Increased risk of contracting corona virus due to other infections and conditions such as HIV, hepatitis B and C**



Consequences to the vulnerable populations in SEE

- **Additional stigma and discrimination**
- **Violation of patients rights**
- **Increased risk of domestic violence incidence rise**
- **No major disturbance on the drug market**
- **Challenges in starting OST**



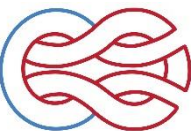
Consequences to the vulnerable populations in SEE

Mental consequences included:

- **Loneless**
- **Weak social networks**
- **Fear of the unknown**
- **Need for social contacts**

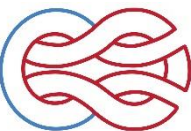
Potential for suiciding intentions and overdose

Use of alternative substances



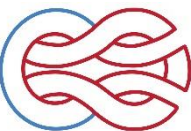
Some good things

- **Flexibility of services in response to changes in the drug scene**
- **Maintaining of take-home OST**
- **Expansion, „personalisation“ and improved quality of harm reduction services**
- **Users behaving well and respecting all advice, taking initiative and helped organising distribution**
- **Digitalisation of harm reduction**



Some good things

- **Proposals for regional purchase and storing harm reduction materials for emergency and solidarity purpose**
- **Partnership in organisation of services**
- **Recognition of civil society contribution**
- **Human rights protection mechanisms launched and operating**



Thank you!

- www.dpnsee.org
- **Facebook**
<https://www.facebook.com/drugpolicynetwork/>
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- **Instagram**
<https://www.instagram.com/dpnsee/>

