



Mapping harm reduction services for women who use drugs Latin America region. WHRIN survey results 2020.

Key findings

- In total, 9 responses were received from Brazil, Guatemala, Mexico, Nicaragua and Peru.
- One third of survey participants knew of harm reduction services designed for women who use drugs, these were based in Brazil and Mexico.
- All of the participants identified gender-based violence in the top three rated barriers to accessing harm reduction services for WUD.
- Survey participants commented that abstinence-based treatment services are prevalent across Latin America and that there is a lack of gender specific harm reduction services for women who cannot or do not wish to stop using drugs.

Background

In their [Global State of Harm Reduction: 2019 updates](#), HRI note that the spread of harm reduction services is still stalling globally in continuation of a trend observed since 2012. The 2018 [Global State of Harm Reduction 2018 briefing](#), highlights that although women are estimated to account for one third people who use drugs globally and are consistently reported to have less access to harm reduction services and to be at higher risk of HIV and hepatitis C infection, robust data on this subject is scarce, and research on drug use and related health issues rarely produces information about women.

While tools exist to enable harm reduction services to institute a gender lens and gender mainstreaming in their programming in order to improve relevance and reach to women who use drugs, services that have introduced such approaches are thin on the ground. Where they do exist, there is not necessarily scope to document and promote experience. In order to leverage greater accountability from governments that have endorsed UN guidelines and resolutions around provision of services for women who use drugs, it is important to document and promote such services where they do exist, so that models of replication can be resources and established at other harm reduction programmes, while pressure builds to reverse the stalling of actions that improve respectful access to health for women who use drugs. With this in mind, WHRIN undertook a survey, in order to attempt a 'mapping' of women friendly services around the world.

Method

Regional focal points identified among membership worked with WHRIN coordinator to create survey participant lists targeting two well networked women who use drugs and two additional key informants (KI) with a good understanding of harm reduction services in their country. Per country (or state/province in Canada, US and Australia). Separate short survey monkeys were created per region, applying the same 7 questions aimed to identify key barriers to service access and to 'map' harm reduction services designed for women who use drugs. Data was processed into short reports before finalisation and dissemination.



Region	Month 2020
Asia	April
W Europe	May
EECA	June
MENA	July
Oceania	Aug
N America/Canada	Sept
Africa (E,W,S)	Oct
Latin America	Nov

WHRIN acknowledge some limitations to the approach of relying primarily on participation from membership and other recommendation contacts where available. In some cases, a country or state respondent could not be identified, or there was not a full complement of 4 respondents for every state/country. The survey was short and simple and may not have delivered on required specificity in all cases. For these reasons, the survey reports cannot be said to be exhaustive, but they do serve a role in beginning to map and promote services for women who use drugs around the world.

Results

Participants

Out of the 9 respondents, 7 (78%) identified themselves as being a woman who uses drugs. Participants were from 5 countries; Brazil, Guatemala, Mexico, Nicaragua and Peru.

Harm reduction services for WUD

One third of participants knew of harm reduction services designed specifically for WUD. These services were based in Brazil and Mexico, and are listed as follows:

Brazil:

- Programa Atitude - Intensivo mulher <https://www.facebook.com/pg/Programa-Atitude-364536906988748/about/>. This programme includes gender specific harm reduction services to WUD and also provides support to their families.

Mexico:

- Community centre with a dedicated safe injection site specifically for women who use drugs <http://verter.org.mx/>. The mission and vision for this program refers to social, political and cultural empowerment for women in vulnerability.

Key barriers to access

All 9 participants identified gender-based violence in the top three rated barriers to accessing harm reduction services for WUD and the majority (78%) listed criminalization of drug use (100%) in the top three. A lack of childcare facilities also scored highly. Due to the small number of participants, it was not possible to ascertain whether ratings differed between participants who identified as WUD and other key informants.



Other issues

The following issues were also highlighted by participants as limiting harm reduction service access to WUD:

- Stigma and discrimination against WUD, particularly those who are mothers.
- A lack of harm reduction public policies aimed towards people who use drugs.
- No safe spaces amongst WUD that could enable communication and exchange of information and ideas.
- No education and information on safer drug consumption.
- A lack of knowledge about substitute prescribing available to WUD.
- Abstinence based treatment, often private therapeutic communities, that focus on rehabilitation using religious fundamentalism, torture, deprivation of liberty and violate fundamental human rights.

Key service gaps

Participants identified the following service gaps:

- Only abstinence-based options are available, which is inadequate for vulnerable women who cannot or do not want to stop using drugs.
- Guatemala's harm reduction services are non-existent, the state has public health services that do not reach the entire population and has no service focused on harm reduction due to its prohibitionist approach.
- Penalty, discrimination, gender inequality and lack of education.
- No autonomy for WUD.
- There is no public policy that is differentiated and intersectional.
- A lack of gender perspective on the issue of drug use and harm reduction.
- Criminalization of people using drugs and punitive populism pointing to the chain's most vulnerable links prevail.
- Machismo
- A lack of political will.

Conclusion

This survey highlights a lack of gender specific harm reduction services in Latin America. In the Americas WUD continue to be invisible to the rest of the society and are usually mentioned or portrayed in relation to their drug use and/or engaging in sobriety, violent or criminal activity. Stigma and lack of visibility is a factor that continues to affect seriously the human rights of WUD.

Gender based violence is another key barrier for women to access information and support. Moreover, the focus on abstinence-based treatment services is unhelpful for many vulnerable women who cannot or do not want to stop using drugs. The current lack of political will from leaders across the region is evident. Governments and policy makers must be held accountable and take firm action in addressing the issues highlighted in this report. High level leadership combined with grassroots civil society co-ordination is required in order to ensure the health and human rights of women who use drugs.