Evidence for Action

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Outline

- Historical perspective
- The evidence
- New developments



WHO and UN endorsement for harm reduction

- First mention of harm reduction in1974 at the WHO Expert Committee on Drug Dependence (20th Report)
- 1998: UNGASS on the World Drug Problem Declaration on the Guiding Principles of Drug Demand Reduction
- 2000: Preventing the Transmission of HIV among Drug Abusers: A Position Paper of the United Nations System
- 2001: UNGASS Declaration of Commitment on HIV/AIDS
- 2009: Political endorsement at ECOSOC (PCB and CND)



The UN Economic and Social Council, 2009

Recalling its resolution 2007/32 of 27 July 2007,



Building the evidence base

- WHO Drug Injecting Study, 1989-1992 (Phase 1)
- Co-convenor of Global Research Network on HIV and Injecting Drug Use
 - In collaboration with NIDA bringing together a broad network of researchers and other stakeholders
 - Annual meetings and reports (1998-2002) and Public Health Reports publication in 1998
- Led to initiative to review the evidence and the development guidance
 - WHO Evidence for Action Series, tools, guidelines and advocacy material
 - Other initiatives of NIH/IOM, Cochrane Review Group on Drugs and Alcohol, etc.
 - The UN Reference Group



The Evidence for Action series

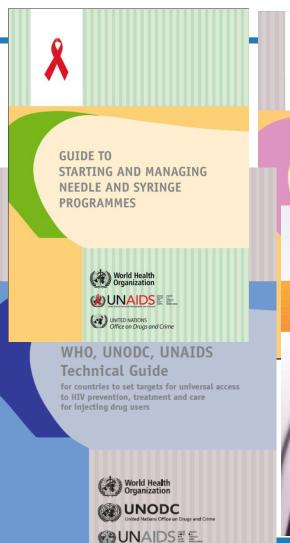
- Policy briefs and technical papers and guidance on
 - Outreach (2003)
 - Needle and syringe programmes (2004)
 - Opioid substitution therapy and other drug dependence treatment (2005)
 - HIV care and treatment (2006, 2009)
 - Interventions in prisons (2007)
 - TB, HIV and drug use (2008)
 - HIV counseling and testing (2009)

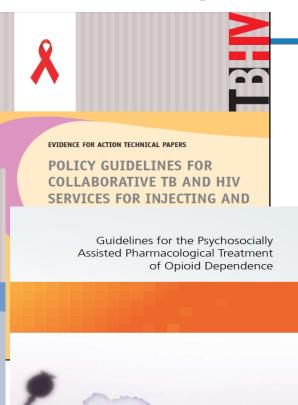
Guidance on a range of issues



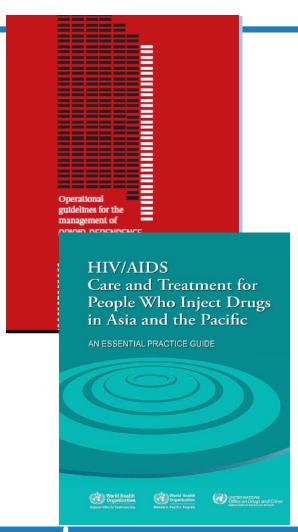
Organization

Guidelines and policy recommendations



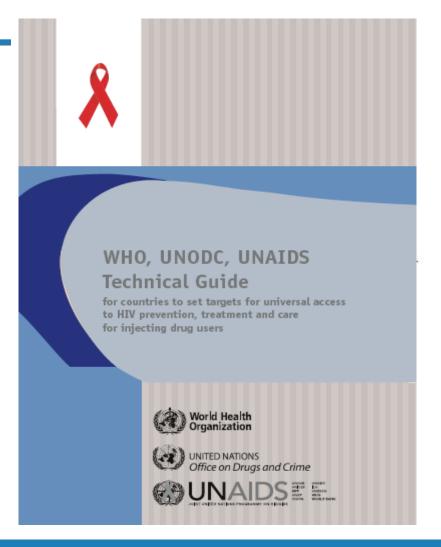








International consensus and monitoring progress



- Definition of harm reduction as a comprehensive package of nine interventions
- Guidance on monitoring progress
 - defining & estimating denominator populations
 - indicators to measure progress on availability, coverage, quality and impact
 - indicative targets against which to measure progress towards UA
- Has led to overall high level political endorsement



The Comprehensive harm reduction package

- Needle and syringe programmes (NSPs)
- Drug dependence treatment, in particular opioid substitution
- Targeted information, education and communication for IDUs
- Provider initiated and client initiated testing and counseling
- HIV treatment and care for those who are already infected with HIV
- Promoting and supporting condom use
- Diagnosis and management of sexually transmitted infections
- Prevention and treatment of viral hepatitis
- Tuberculosis prevention, diagnosis and treatment



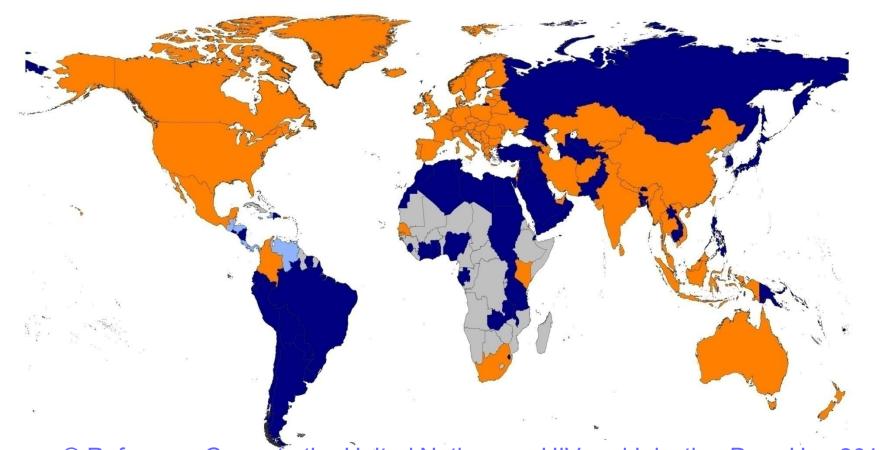
The Reference Group to the UN on HIV and Injecting Drug Use

- Steering committee with UNODC, UNAIDS and WHO
- Secretariat NDARC, University of New South Wales
- Full reference group with 47 representatives with regional and technical expertise

- Global estimates on population size, HIV prevalence and coverage of services
- Thematic papers



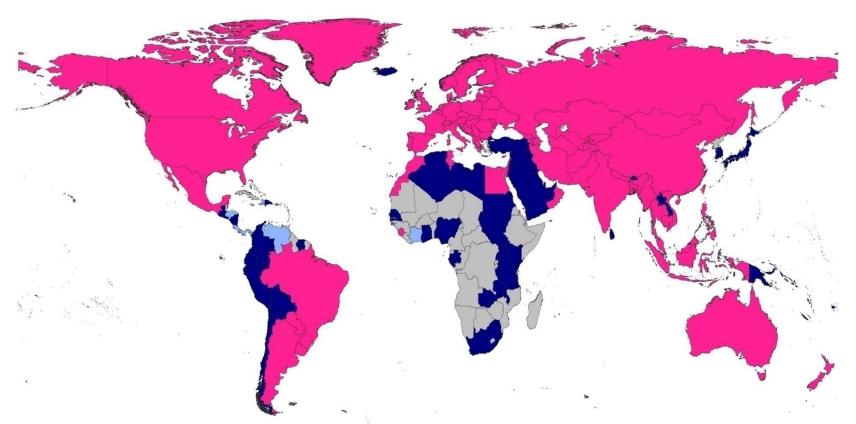
OST in 71 countries and absent in 80 countries with injecting



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NSP in 82 countries and absent in 69 countries with injecting



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Coverage is low in many countries and insufficient to control HIV

	NSP	OST	ART
Eastern Europe	LOW	LOW	LOW
- Russian Federation	LOW	NIL	LOW
East and South East Asia	LOW	LOW	LOW
- China	LOW	LOW	LOW
North America	LOW	MID	-
- United States	LOW	LOW	-
Central Asia	LOW	LOW	LOW
South Asia	LOW	LOW	LOW
Middle East & North Africa	LOW	LOW	-
Sub-Saharan Africa	LOW	LOW	LOW
Latin America & the Caribbean	LOW	-	LOW
Oceania	HIGH	MID	LOW
Western Europe	LOW	HIGH	HIGH



Implementation and scale-up

- Concerted efforts at international and national level to improve data collection, use and reporting
 - Universal Access progress reporting collects NSP and OST data annually
 - Trends will become available in two years (after 3 data points are collected)
- New Target Setting data collection tool in development to facilitate reporting
- New operational guidelines to improve human capacity for data collection and use will be piloted Summer '10



Defining evidence

- Based on systematic reviews of international peer reviewed literature
- WHO Guidelines Review Committee (established 2008)
 - Rigorous methodology designed for clinical interventions
 - Challenge for public health interventions (see Addiction March, 2010)
- Considered judgement
 - Applicability; generalisability / external validity; consistency; resource implications; clinical impact
- The evidence is sufficient to make policy recommendations
- No need for more of the same



Where to go from here?

- Need for new data
 - Support countries to monitor their response and scale-up
- Need for new approaches
 - Operational research on HOW to scale-up
 - Review the evidence of new developments
 - pre- and post exposure prophylaxis
 - ART for Prevention
 - male circumcision
 - PMTCT
 - Integration of services
 - Quality and sustainability of services
- Mainstreaming harm reduction



Thank you

All WHO material on harm reduction available at:

http://www.who.int/hiv/topics/idu/en/index.html

