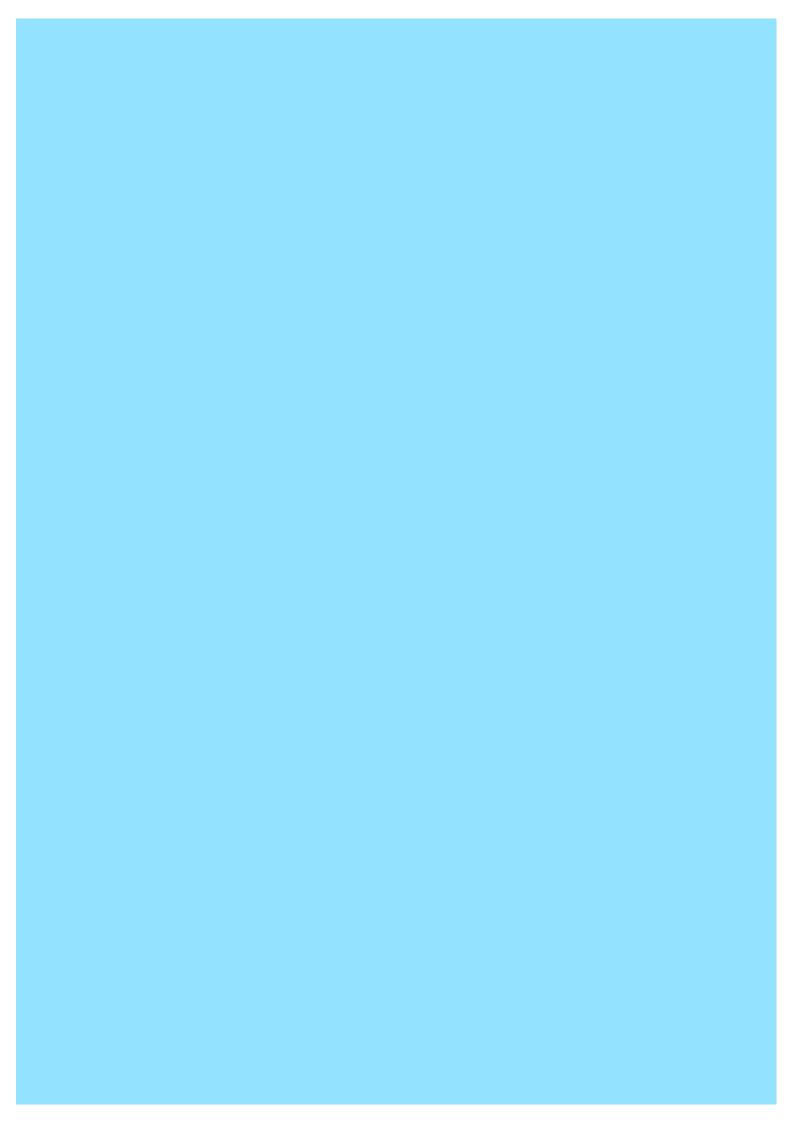
United Nations Office on Drugs and Crime (UNODC)

2024 Results Report



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UNODC is the UNAIDS convening agency for HIV among people who use drugs and people in prisons. It works to ensures that national and global HIV responses align with international standards and commitments set by the UN General Assembly, the UN Economic and Social Council (ECOSOC), the Commission on Narcotic Drugs, the Commission on Crime Prevention and Criminal Justice, and the UNAIDS Programme Coordinating Board. Leveraging its mandate and expertise, UNODC provides technical assistance, capacity-building and advocacy to ministries of health, justice, interior and law enforcement and to prison authorities, drug control agencies and civil society, including networks of people who use drugs and civil society organizations working in prison settings.

HIV in UNODC's mandate

UNODC focuses on high-priority countries, including those in humanitarian settings, by supporting governments in developing and implementing policies and legal frameworks that ensure access to essential HIV services for people who use drugs and people in prisons. UNODC works to eliminate stigma and discrimination and scale up evidence-based harm reduction interventions, including needle-syringe programmes, opioid agonist therapy and overdose prevention and management for people who use drugs and people in prisons. Recognizing the diverse needs of people who use drugs, including those who use stimulants, as well as women, UNODC promotes community-led service delivery models.

In prison settings, UNODC strengthens healthcare systems, promotes the integration of HIV, viral hepatitis and TB services in public health frameworks, and advocates for alternatives to incarceration for minor, non-violent drug-related offenses, particularly for women and juveniles. Through multisectoral partnerships, UNODC ensures continuity of care between prisons and the community and supports civil society engagement in shaping national HIV responses.

Key UNODC strategy for HIV

The <u>UNODC Strategy (2021–2025)</u> is aligned with the Global AIDS Strategy. UNODC support to countries is based on the comprehensive package of HIV prevention, treatment and care services (WHO, UNODC and the Secretariat), the UN Standards Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules) and the <u>Technical brief on HIV prevention, treatment and care in prisons and other closed settings</u>.

Top results in 2024

Opioid agonist therapy (OAT) policy frameworks strengthened to reach the HIV prevention targets through high-level advocacy and services scaled up. UNODC worked with national authorities to develop and strengthen regulatory and policy frameworks for OAT expansion. It supported the development of national OAT guidelines that are aligned with international standards in Algeria; supported Egypt in introducing a national monitoring and evaluation system to enhance data tracking and service oversight; assisted Viet Nam in revising its national guidelines on methadone maintenance therapy (and in ensuring nationwide access); leveraged advocacy to secure Government commitments to introduce or expand OAT services in Afghanistan and Malawi; and worked with partners to introduce and scale up OAT in prison settings in Kenya, Malawi and Zambia.

To increase access to HIV prevention among people who use drugs, UNODC provided technical assistance and capacity-building for the initiation of OAT in Algeria, Oman and Jordan and scale-up of OAT in Afghanistan, Bangladesh, Egypt, Malawi, South Africa and Viet Nam, reaching over 17 000 beneficiaries, including healthcare professionals, policymakers, and civil society representatives. In South Africa, support was provided for the integration of OAT in public health facilities, roll-out of community-based OAT pilot programmes, and improvement in service delivery through capacity-building of healthcare providers, enhancement of clinical practices, and expanded OAT access.

Access to HIV prevention, treatment and care for people who use stimulants increased. UNODC supported seven countries (Bangladesh, Belarus, Malaysia, Myanmar, Pakistan, Thailand and Viet Nam) in scaling up HIV services for people who use stimulant drugs and built the capacities of more than 8,000 professionals, including service providers, policymakers and community-based organizations, on HIV prevention, treatment and care for people who use stimulant drugs.

Prison healthcare services strengthened through capacity-building. UNODC trained more than 480 prison healthcare providers, staff and national stakeholders from 17 countries on evidence-based and human rights-centred HIV prevention, treatment and care, including vertical transmission, OAT and overdose prevention and management in closed settings. In Afghanistan, UNODC established two drop-in centres in Kabul and Herat female prisons to provide primary healthcare, STI treatment and SRH services to 1,300 women in prison and their children.

Prison health policies and service models improved. UNODC worked with national authorities to strengthen prison health systems through policy development; prison health system assessments (in Ethiopia, India and Togo); the introduction of an interactive prison toolkit in India to provide prison staff with resources on HIV prevention and substance use management; and innovative service delivery models (such as telehealth initiatives in prison settings in Viet Nam).

Targeted interventions addressing violence, stigma, and HIV among women strengthened. UNODC introduced new tools and approaches to improve HIV service availability and accessibility for women who use drugs and women in prisons, addressing intersecting challenges of violence, stigma, and health inequalities. Key achievements include: (a) development of a technical guide and comprehensive training package which reached over 300 healthcare professionals and civil society representatives with skills-building on integration of violence prevention and response in HIV services in Brazil and South Africa); (b) development of a technical brief on violence, health, and HIV in prisons and other closed settings, which presents consolidated evidence, country experiences and best practices.

UNODC led the development of a report on HIV in prisons for the UNAIDS Programme Coordinating Board meeting. The report provided an update on the epidemiological situation and service coverage since the previous report in 2021. It also reflected on the progress made towards achieving the 2025 targets related to people in prison.

Law enforcement engagement in the HIV response strengthened. UNODC trained over 570 law enforcement officials in Bangladesh, India, Kazakhstan, Pakistan, the Philippines, South Africa and Uzbekistan on public health-based policing strategies, reducing stigma, and supporting access to HIV services for key populations. To further institutionalize public health-based policing, UNODC initiated a revision of its global Training Manual for Law Enforcement Officials in order to expand guidance on evidence-based and rights-based approaches to policing and the HIV response.

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