United Nations Office on Drugs and Crime (UNODC)

Unified Budget Results and Accountability Framework (UBRAF) 2016-2021

Organizational report 2020-2021
Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Key strategies and approaches to integrate HIV into UNODC’s mandate</td>
<td>2</td>
</tr>
<tr>
<td>Contribution to progress towards the Sustainable Development Goals</td>
<td>3</td>
</tr>
<tr>
<td>HIV in the context of the COVID-19 response</td>
<td>5</td>
</tr>
</tbody>
</table>
Key strategies and approaches to integrate HIV into UNODC’s mandate

As the UNAIDS convening agency for HIV among people who use drugs and people in prison, UNODC implements its mandate in full compliance with the relevant declarations, resolutions and decisions supporting its mandate from the General Assembly, the Economic and Social Council, the Commission on Narcotic Drugs, the Commission on Crime Prevention and the Criminal Justice and the UNAIDS PCB.

UNODC focuses efforts and programme delivery in high-priority countries selected in consultation with national stakeholders, including civil society and community-based organizations. In 2021, UNODC continued to support countries and communities and to lead global policy and advocacy efforts to expand access to prevention and treatment services for people who use drugs in UNAIDS six regions.

UNODC strategic guidance and technical support is based on the WHO, UNODC and UNAIDS comprehensive package of HIV prevention, treatment and care services, and the United Nations Standards Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules). It is in line with the UNODC, ILO, UNDP, WHO, UNAIDS and UNFPA "Technical brief on HIV prevention, treatment and care in prisons and other closed settings: a comprehensive package of interventions", which was updated in 2020.

UNODC promotes human rights-based, evidence-informed and gender-responsive HIV prevention, treatment and care services for people who use drugs and people in prisons. It regularly brings together the research community and communities of people who use drugs to review and discuss challenges and best practices in HIV responses.

UNODC also promotes the removal of legal barriers, discriminatory laws, policies and practices that hinder access to HIV services for people who use drugs and people in prisons, strengthening partnerships between health, criminal justice, law enforcement, prison administration and civil society.

The UNODC Strategy 2021–2025, launched in February 2021, includes a specific outcome on HIV prevention, treatment and care among people who use drugs and people in prison. The Strategy stresses the need to bolster the quality and coverage of, and access to, treatment of drug use disorders, rehabilitation, recovery and social reintegration, as well as the prevention, treatment and care of HIV, viral hepatitis and other blood-borne viruses and diseases. It aims is to strengthen human rights and gender considerations, especially among people who use drugs, women and people in prisons and other vulnerable populations. UNODC will continue to work with its partners to implement, in synergy, the UNODC strategy and the Global AIDS Strategy 2021–2026 to magnify their impact and reach the global 2025 targets for ending the AIDS epidemic as a public health threat by 2030.

1 24 high-priority countries for drug use and HIV and 35 high-priority countries on prisons and HIV.

2 Following the change in government in Afghanistan in August 2021, UNODC staff remained in the country and continued to ensure the continuation of the harm reduction interventions, despite exceedingly challenging circumstances.
Top achievements on HIV in 2020-2021

- **Enhancing access to HIV, health and social services for people who use drugs.** UNODC developed a global training package on HIV prevention for people who use stimulant drugs. In eastern Europe and central Asia, it developed an innovative regional online outreach package that allows access to HIV and other health and social services for people who use new psychoactive substances and/or stimulants (a new successful outreach modality that UNODC will consider replicating in other regions).

- **Catalyzing expanded access to opioid agonist therapy.** Egypt and Pakistan approved opioid agonist therapy following years of continuous UNODC advocacy, which in 2021 led to a feasibility study and plans for pilot implementation in both countries.

- **Shifting to multidose dispensing to preserve access to opioid agonist therapy.** Belarus, Kenya, Nigeria and Viet Nam implemented multidose dispensing of opioid agonist therapy, enabling continued access to essential HIV services during COVID-19.

- **Ensuring access to justice during the COVID-19 pandemic.** "e-justice" rooms were established in four major detention centres in the Republic of Moldova to ensure the continuation of the justice process while minimizing the risk of COVID-19.

- **Stakeholder consultations to address the impact of COVID-19.** A "virtual" pre-Commission of Narcotic Drugs multistakeholder consultation was conducted in March 2021, bringing together academia and community, to focus on the impact of the COVID-19 pandemic on health services for people who use drugs and who are living with or at risk of HIV infection.

Contribution to progress towards the Sustainable Development Goals

UNODC’s mandate to support the provision of HIV prevention treatment and care for people who use drugs and people in prisons is aligned with multiple SDGs. In particular, UNODC worked with its partners to support countries to accelerate gains towards SDG 3 and particularly SDG 3.3, on ending the AIDS epidemic as a public health threat by 2030.

UNODC’s activities also allowed progress towards a number of other SDG areas, including: implementing HIV services which are gender-responsive (SDG 5); advocating for equal access to human rights- and public health-based HIV services for people who use drugs and people in prisons (SDG 10); promoting the elimination of all forms of discrimination against people who use drugs and people in prisons (SDG 16); and teaming up with governments and communities to achieve major reductions in new HIV infections and HIV-related deaths among the key populations (SDG 17).

UNODC data collection and analysis supports countries in monitoring and reporting on SDG3, including data on people who use drugs and people in prisons. As part of its established contribution to the synthesis, analysis and reporting of global epidemics of HIV and hepatitis C among people who inject drugs and on HIV in prisons, UNODC led the
compilation and joint review of estimates of the number of people who inject drugs, and of the prevalence of HIV and hepatitis C among people who inject drugs, in collaboration with WHO, UNAIDS and the World Bank: estimates were published in the 2021 World drug report.

In 2021, UNODC drafted an update report on HIV in prisons and other closed settings, which summarizes the latest epidemiological data regarding HIV and related health conditions, as well as data on relevant service coverage, in prison settings and was submitted to the UNAIDS PCB in December 2021.

UNODC provided technical support to a wide range of national partners in the development of national guidelines and operational plans on HIV interventions and health-care services for people who use drugs and people in prisons and supported their adaptation to the national context and translation (in Cambodia, Malaysia, Morocco and Viet Nam).

UNODC continued to address gender inequalities, discrimination, violence, and harmful practices that negatively impact women who inject drugs and women in prisons and increase their risk (and that of their babies) of contracting HIV, TB, viral hepatitis and STIs. UNODC — jointly with WHO, UNICEF, UNFPA, UN Women, the UNAIDS Secretariat, and the International Network of People who use Drugs — published in 2021 a technical guide, “HIV prevention of mother-to-child transmission of HIV, hepatitis B and C and syphilis among women who use drugs”. UNODC supported dissemination of the “Technical guide on prevention of mother-to-child transmission of HIV in prisons” jointly with WHO, UNFPA, UN Women, and the UNAIDS Secretariat, via six regional workshops with 32 countries.

UNODC developed and field-tested a tool for monitoring epidemiological trends in vertical transmission of HIV, hepatitis B and syphilis in prisons and the availability of services to prevent such transmission. UNODC also incorporated a component on women who use stimulant drugs in its capacity building package on HIV prevention, treatment, care and support for people who use stimulant drugs.

In six countries in eastern Europe and central Asia, UNODC conducted needs assessments regarding new psychoactive substances and stimulant drug use. It then developed a tailored, comprehensive HIV response for new psychoactive substance users and state-run/NGO service providers. The tool describes how to implement, online, each of the interventions in the comprehensive HIV package of services.

UNODC continued to assist countries in reviewing and adapting legislation to eliminate discriminatory laws, policies and practices in order to reduce barriers to evidence-based and gender-responsive HIV prevention, treatment and care for people who inject drugs and for people in prisons and other closed settings. Strengthening partnerships between law enforcement and other relevant sectors (including public health, civil society and community-based organizations) is essential for an effective response to HIV and an integral part of UNODC’s work. In 2021, UNODC conducted trainings in Belarus, Moldova, Myanmar, Tajikistan, Ukraine and Uzbekistan to sensitize law-makers and law enforcement officials about human rights-related barriers affecting access to HIV services and to advocate for greater access for people who use drug to HIV treatment services.
UNODC conducted a regional training covering 32 countries in eastern Europe and central Asia, the Gulf States, the Middle East and North Africa, sub-Saharan Africa, South-East Asia and South Asia to build the capacity of national policy-makers, prison authorities and staff, health-care providers and civil society organizations to ensure access to comprehensive HIV care for people in prison and implement the Nelson Mandela Rules and the Bangkok Rules to address stigma, discrimination and violence in prisons and other closed settings.

UNODC co-organized and co-sponsored several virtual side events during the High-Level Meeting on AIDS in New York in June 2021. These sessions disseminated information about the latest developments regarding the HIV response among people who use drugs and people in prisons. In addition, two regional side events were held for national partners in eastern Europe and central Asia. At the 5th European Harm Reduction Conference in November 2021 in Prague, UNODC facilitated a satellite session on HIV among people who use stimulant drugs and organized several events for law enforcement and civil society representatives from eastern Europe and central Asia.

UNODC built the capacity of community-based organizations, through grants (15 for 2020–2021 UBRAF cycle) and by working jointly with the UNODC civil society group on drug use and HIV and the first-ever informal global network of civil society organizations working on HIV in prisons.

**HIV in the context of the COVID-19 response**

People who use drugs and people in prison are at high risk during the COVID-19 pandemic due to social restrictions that have hindered the delivery and continuity of HIV services and due to prison environments that highly conducive to the transmission of infections such as COVID-19.

UNODC has supported countries to ensure the sustainability and continuity of essential HIV services, including harm reduction programmes. UNODC collected data from high priority countries to document successful COVID-19 adaptations in the delivery of harm reduction, such as the expansion of multidose dispensing of opioid agonist therapy in Belarus, Kenya, Nigeria, Ukraine and Viet Nam.

At the 64th session of the Commission on Narcotic Drugs and its intersessional meetings, UNODC supported Member States to address HIV in the context of COVID-19, with discussions focusing on the removal of legal and COVID-19-related barriers that hinder access to key HIV services—in particular, needle and syringe programmes, medication-assisted therapy and condom distribution programmes. A virtual multistakeholder consultation on the impact of the COVID-19 pandemic on health services for people who use drugs who are living with or are vulnerable to HIV, organized by UNODC, brought together the perspectives of science and of communities and resulted in a statement delivered at the plenary.
UNODC consistently promoted the inclusion in national preparedness and response plans for COVID-19 of people who use drugs and people in prisons. It also supported countries in ensuring that they have access to prevention and control measures, diagnostics and care for COVID-19, as well as uninterrupted access to services for the prevention, treatment and care of HIV, TB and viral hepatitis, in ways that respect medical ethics and human rights.

To mitigate the risk of COVID-19 transmission in prison settings, UNODC promoted the reduction of the number of people being held in prison. UNODC specifically promoted consideration by countries of alternatives to incarceration at all stages of the criminal justice process, especially for minor, nonviolent crimes and people with low-risk profiles and caring responsibilities (for example, in Brazil, Malawi, Myanmar, Moldova and Zambia), in line with national policies governing public health and safety.